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VICTORIAN ROYAL COMMISSION INTO FAMILY VIOLENCE

MELBOURNE

MONDAY, 3 AUGUST 2015

(11th day of hearing)

BEFORE:

THE HONOURABLE M. NEAVE AO - Commissioner

MS P. FAULKNER AO - Deputy Commissioner

MR T. NICHOLSON - Deputy Commissioner

1 COMMISSIONER NEAVE: Thanks, Mr Moshinsky.

2 MR MOSHINSKY: Commissioners, the topic which we will be  
3 addressing today is the initial police response to family  
4 violence. This is the first of a series of topics which  
5 we will be examining this week which concern criminal  
6 justice issues. Although the broad definition of "family  
7 violence" in the Act encompasses conduct which is not  
8 criminal, much of family violence does constitute criminal  
9 offences. This includes homicide, rape, assault and  
10 property damage.

11 It is thus important to examine the way in which  
12 the police and the legal system more generally respond to  
13 cases of family violence. Historically the criticism of  
14 police was that they treated family violence as a private  
15 matter which did not warrant their intervention. The  
16 expression that "it's just a domestic" was seen as being a  
17 common police response.

18 The Royal Commission has heard evidence  
19 demonstrating a significant change in the policies and  
20 direction of Victoria Police. In particular, on day one  
21 of the public hearings evidence was called from Dr Rhonda  
22 Cumberland and Assistant Commissioner Wendy Steendam who  
23 described the establishment of the Statewide Steering  
24 Committee on Family Violence in 2002 which was co-chaired  
25 by Victoria Police and the Office of Women's Policy.  
26 Assistant Commissioner Steendam also described the  
27 introduction of the Code of Practice for the investigation  
28 of family violence in 2004 which has since been the  
29 subject of two revisions.

30 While this evidence and the evidence of other  
31 witnesses suggests that Victoria Police has come a long

1 way in its handling of family violence cases, the question  
2 remains whether there is room for improvement. I would  
3 now like to outline the feedback the Royal Commission  
4 received in the course of the community consultations.

5 Police response was raised at all of the  
6 sessions. Overall, the Commission heard that police  
7 responsiveness has increased dramatically in the past five  
8 years since the establishment of the specialist family  
9 violence teams. However, there was a polarity of views on  
10 the role of police from those who have experienced family  
11 violence.

12 Some of those who attended the consultations  
13 spoke about police officers being supportive and helpful.  
14 Their feedback included specific examples of individual  
15 police officers increasing individual safety by escorting  
16 women back to the family home to collect their personal  
17 belongings, organising security experts to attend homes to  
18 advise on security measures and reassure children of their  
19 safety, issuing safety notices and applying for  
20 intervention orders to take the pressure off the  
21 individual and securing crisis accommodation for the  
22 night.

23 On the other hand, there were criticisms of  
24 police in general or of particular officers. Criticisms  
25 included the police response being too slow, no action  
26 being taken unless or until there were obvious signs of  
27 physical assault having occurred, police not taking  
28 statements from children who had witnessed violence, not  
29 following up or responding to breaches of intervention  
30 orders, difficulties in substantiating or proving  
31 psychological and emotional abuse, police officers not

1       wanting to deal with family violence issues and police  
2       being seen to collude with perpetrators, especially in  
3       country towns where most people are known to each other.

4               Some groups were especially critical of police.  
5       Men who sought police assistance after having experienced  
6       violence told the Commission they were treated with  
7       indifference or assumed to be the perpetrator and the  
8       abuse they experienced was minimised. Some women from  
9       culturally and linguistically diverse communities  
10      experienced police officers who were culturally  
11      insensitive.

12             There was strong support for the family violence  
13      teams of Victoria Police from those working in the family  
14      violence sector, but they also said that regular rotations  
15      and turnover of staff in the teams means that there is a  
16      constant loss of continuity and expertise and therefore a  
17      greater need for family violence training for all police  
18      officers. According to the consultation participants, the  
19      police family violence incident report process is too  
20      reliant on out-of-date technology (faxes), is  
21      administratively burdensome, takes too long to process and  
22      is not supported by database compatibility at either  
23      Victoria Police or the relevant referral agencies. The  
24      incident reports don't always get to where they need to go  
25      as quickly as they should to be effectively actioned.

26             The Commission also heard that limited police  
27      resources, particularly in rural and regional locations,  
28      directly impacts the response times and could jeopardise  
29      safety, with some people having to wait for up to three  
30      hours for police to attend a call-out. Limited police  
31      resources is also seen as a significant contributor to the

1 lack of enforcement of intervention orders and follow-up  
2 on breaches of intervention orders.

3 Commissioners, many people are following the work  
4 of the Commission closely. This week, as we consider law  
5 and justice responses, it is important to acknowledge  
6 again the devastating effect of family violence homicide  
7 on family members, many of whom then have their first  
8 encounter with the police in the aftermath of that  
9 terrible event.

10 I now turn to some of the themes that will be  
11 addressed in the evidence today. Some of the questions  
12 are as follows. What is the percentage and range of  
13 police resources allocated to family violence? What is  
14 the present structure and resourcing of the initial police  
15 response? What differing forms does that initial response  
16 take? How can the range of police responses be  
17 standardised to a minimum quality level? What tools are  
18 used by police for assessment? How could they be  
19 improved? What training and support is provided for  
20 police responding to family violence? Should the present  
21 code be amended to permit differing ranges of responses by  
22 police? What is the potential for multi-disciplinary  
23 responses, including police? How much can front-line  
24 police do and how much needs to be done by others,  
25 including by non-police?

26 I will now outline the witnesses who will give  
27 evidence today. First we will have a lay witness who we  
28 have given the pseudonym "Jessica Morris". Her evidence  
29 will be given subject to a Restricted Publication Order to  
30 protect confidentiality, and that evidence will not be  
31 streamed on the internet.

1                   Following her evidence we will then have a panel  
2                   comprising Fiona McCormack and Jacky Tucker. Their  
3                   evidence will include reflections on improvements to date  
4                   and comments on present difficulties in Victoria Police  
5                   responses, including the police incident reports and  
6                   general resourcing issues.

7                   We will then call Sergeant Mark Spriggs. He will  
8                   describe the structure and work of family violence teams  
9                   and family violence advisers, and how police on the ground  
10                  receive and respond to requests for assistance.

11                  We will then have evidence on a panel from  
12                  Dr Melisa Wood and Superintendent Stuart Bateson. They  
13                  will give evidence about a recent trial of co-located  
14                  forensic psychologists within a police station and the  
15                  implications of that trial for future tools and risk  
16                  assessments by police.

17                  We will then have a panel comprising Assistant  
18                  Commissioner Dean McWhirter, who is the head of Victoria  
19                  Police's Family Violence Command, and Assistant  
20                  Commissioner Luke Cornelius, who is in charge of the  
21                  southern metropolitan region. They will deal with the  
22                  present structure of family violence responses by Victoria  
23                  Police. They will also be asked to respond to some of the  
24                  feedback from the community consultation sessions. They  
25                  will also deal with training and resourcing issues, plans  
26                  for the future and the Victoria Police proposal that the  
27                  police be given the power to issue intervention orders in  
28                  the field.

29                  Time permitting, we will also briefly have  
30                  evidence from Inspector Peter Fergusson, who is the  
31                  officer in charge of police communications, D24, and will

1 deal with how calls to 000 are dealt with by the ESTA  
2 system.

3 Can I briefly mention some of the possible  
4 recommendations that might be considered in light of the  
5 evidence today. There are six potential recommendations  
6 that I will mention: first, to improve police training in  
7 family violence; second, to expand family violence teams  
8 and make liaison officer positions permanent, gazetted  
9 roles; third, to expand the multi-disciplinary response  
10 between police and support services with various models  
11 that could be considered; fourth, to improve referral  
12 pathways for police family violence incident reports;  
13 fifth, to give police greater powers to issue intervention  
14 orders, that is the Victoria Police proposal; sixth, to  
15 substantially increase police numbers, which is a proposal  
16 included in the Police Association submission.

17 Commissioners, that concludes my opening remarks  
18 for today. As the next witness will be a lay witness and  
19 the evidence is not streamed on the internet, we need to  
20 have a short break of a couple of minutes, please.

21 COMMISSIONER NEAVE: Thank you, Mr Moshinsky.

22 (Short adjournment.)

23 (CONFIDENTIAL SECTION FOLLOWS)

1 MS ELLYARD: Thank you, Commissioners. The next witnesses are  
2 Jacqueline Tucker and Fiona McCormack, and I ask that they  
3 be sworn in, please.

4 <JACQUELINE MERRIL TUCKER, affirmed and examined:

5 <FIONA MARGARET MCCORMACK, affirmed and examined:

6 MS ELLYARD: May I begin with you, Ms McCormack. Where do you  
7 work at present?

8 MS MCCORMACK: I work at Domestic Violence Victoria, which is  
9 the peak body for family violence services.

10 MS ELLYARD: What does Domestic Violence Victoria do?

11 MS MCCORMACK: We don't provide a direct response. We have a  
12 membership of about 77 family violence services. We  
13 consult with our membership about how the system is  
14 tracking, gaps, areas for improvement, et cetera. We  
15 develop policy positions based on consultation with  
16 members and also against current evidence and where  
17 possible from consultations with women, and we use those  
18 positions to advocate for systems improvement and we  
19 represent the sector on statewide advisory committees or  
20 ministerial advisory committees that might be occurring on  
21 different issues, and we work with different arms of  
22 government, so it's not just on family violence. We keep  
23 an eye on policy relating to, say, homelessness or  
24 children or anything that's related.

25 MS ELLYARD: You are the CEO of the organisation?

26 MS MCCORMACK: That's right.

27 MS ELLYARD: You have made a statement to the Commission which  
28 is dated 29 July 2015. Are the contents of that statement  
29 true and correct?

30 MS MCCORMACK: They are.

31 MS ELLYARD: You have attached to your statement a copy of four



1           separate submissions made to the Royal Commission by  
2           Domestic Violence Victoria.

3 MS McCORMACK: That's right.

4 MS ELLYARD: And also a further submission that's been made by  
5           your organisation in conjunction with some other peak  
6           bodies.

7 MS McCORMACK: That's right.

8 MS ELLYARD: Can I turn to you, please, Ms Tucker. Where do  
9           you work?

10 MS TUCKER: Women's Health West.

11 MS ELLYARD: What does Women's Health West do?

12 MS TUCKER: It's a women's health service which has two primary  
13           arms. One is health promotion and the other is family  
14           violence response services.

15 MS ELLYARD: And you work in the family violence response  
16           services?

17 MS TUCKER: That's right. I'm the manager of family violence  
18           services. We are the key service in the western region of  
19           Melbourne providing a suite of services from early  
20           intervention and response to L17s and police referrals,  
21           outreach services, refuge and counselling services for  
22           women and children.

23 MS ELLYARD: You have made a statement which is dated 27 July  
24           2015. Are the contents of that statement true and  
25           correct?

26 MS TUCKER: Yes.

27 MS ELLYARD: You have attached to your statement a copy of the  
28           submission made to the Royal Commission by Women's Health  
29           West?

30 MS TUCKER: Yes.

31 MS ELLYARD: Ms McCormack, can I go back to you. Were you

1 present in the Commission on the first day of the  
2 hearings?

3 MS McCORMACK: Yes.

4 MS ELLYARD: So you heard the evidence given by Dr Cumberland  
5 and Assistant Commissioner Steendam?

6 MS McCORMACK: Yes.

7 MS ELLYARD: Part of that evidence was tracking some of the  
8 history of the development of what we now have as a family  
9 violence system in Victoria. Can I ask you a very general  
10 question. In general terms, did you agree with the  
11 evidence that over the last 15 years there's been a very  
12 substantial change in the way in which family violence is  
13 understood and responded to in Victoria?

14 MS McCORMACK: Absolutely. I thought it was a really great  
15 representation.

16 MS ELLYARD: If we think from your perspective now in 2015, and  
17 you deal with this around paragraph 36 of your statement,  
18 what from your perspective were some of the key drivers  
19 for that change over the last 15 years?

20 MS McCORMACK: A range of different things. I think  
21 leadership. So, we had terrific leadership from different  
22 areas of government. We have had - I think probably the  
23 most consistent leadership on the issue of family violence  
24 has come from Police Commissioners, from Christine Nixon,  
25 obviously, Simon Overland and Ken Lay. I think governance  
26 arrangements. So, it used to be that if women's services  
27 wanted a better response from police, they would have to  
28 go and knock on the door of their local police station,  
29 try and develop a relationship with some of the sergeants  
30 there, try to get them to understand the issue of family  
31 violence, et cetera.

1                   The governance arrangements that happened during  
2                   the reform really supported a level of consistency, but  
3                   also transparency about what police responses should be  
4                   and also supported the development of relationships. So,  
5                   I think the governance was really important. The  
6                   introduction of standards and procedures like the Code of  
7                   Practice. They are some of the things.

8 MS ELLYARD: Ms Tucker, were you working on the ground, as it  
9                   were, over the last 15 years as these changes that we  
10                  heard about on the first day have taken place?

11 MS TUCKER: Yes, I absolutely concur with Fiona. I have been  
12                  working in the family violence sector for over 20 years  
13                  and the changes in the last 10 years I would describe as  
14                  dramatic.

15 MS ELLYARD: What, from your perspective as someone managing a  
16                  service that's delivering front-line response to women  
17                  experiencing family violence, what in particular has  
18                  changed about the way the police have responded over the  
19                  last 10 years?

20 MS TUCKER: I think the relationships between police and family  
21                  violence services, specifically women's services, is from  
22                  what used to be seen as a combative, nearly, relationship  
23                  to really viewing each other as partners in responding to  
24                  family violence. I think that's what's the most - you  
25                  know, it's just really a different mind set.

26 MS ELLYARD: The Commission has heard a little bit about, and  
27                  I think both of you have already mentioned this morning,  
28                  the formal referral procedures that now, since the  
29                  introduction of the Code of Practice, exist for Victoria  
30                  Police to make formal and informal referrals through to  
31                  agencies such as yours, Ms Tucker. Can I go to you first,

1 Ms McCormack, because you deal with this in a lot of  
2 detail in your submission. What is the history of the  
3 current referral system that we have and what does a  
4 referral involve?

5 MS McCORMACK: So, the Code of Practice for Victoria Police's  
6 standing orders requires police to undertake a risk  
7 assessment for the safety and wellbeing of the people who  
8 are in attendance there. They have a number of - they  
9 have an L17 form to complete once they have undertaken  
10 that risk assessment. I think that's actually known as  
11 the Family Violence Risk Assessment and Management Form,  
12 but it's usually referred to as the L17. That supports  
13 them to record the information that they have identified.

14 They have a range of different options available  
15 to them. All attendances are supposed to result in a  
16 referral, either formal or informal. So, an informal  
17 referral would mean that women, men and any children there  
18 are provided with information on local services that they  
19 can contact should they wish. A formal referral is made  
20 when officers might be pressing charges or likely to  
21 investigate, open an investigation or if they are going to  
22 apply for an application of warrant or application and  
23 summons, serve an intervention order or safety notice.

24 MS ELLYARD: So there is a discretion in attending police about  
25 whether the referral they make is formal or informal, but  
26 a referral of some kind needs to be made.

27 MS McCORMACK: Always. That's according to the code.

28 MS ELLYARD: When we think about the kind of referrals that  
29 find their way through to your organisation, Ms Tucker,  
30 are we talking there only about formal referrals?

31 MS TUCKER: I would say that, over the 10 years, that the

1 formal protocol and what actually happens on the ground is  
2 slightly skewed. I would say that most family violence  
3 incidents result in a formal referral rather than not.

4 COMMISSIONER NEAVE: I'm sorry, did you say a formal referral?

5 MS TUCKER: A formal referral.

6 MS ELLYARD: So in practical terms from your observation and  
7 based on the number of referrals that you receive, it is  
8 much more common than not for the victim to be formally  
9 referred to you rather than merely given information about  
10 you?

11 MS TUCKER: Yes. I can give you an example. In the first year  
12 of the forms in 2006, that we received 708 referrals in  
13 that one year. In this past year we have received 8,170  
14 referrals from police. So there is clearly - if you put  
15 that across all of Victoria, it nearly represents all the  
16 reported family violence incidents.

17 MS ELLYARD: From your perspective, Ms Tucker, what's the  
18 benefit of the formal referral? Why, from your  
19 perspective, thinking back to your involvement earlier on,  
20 was this something that was included as part of the  
21 system?

22 MS TUCKER: Yes, very much so. I think that from a family  
23 violence service that responds and speaks to women every  
24 day who have recently had police at their door because of  
25 a family violence incident, it's absolutely important for  
26 the right messages to be sent to women. They get phone  
27 calls from police around the criminal or around  
28 statements, and "Will you proceed with an assault" when  
29 the L17 is involving the assault. But when a family  
30 violence service is responding, the conversation is really  
31 about asking them, "What happened? What is your

1 relationship?" Undertaking that risk assessment. Not all  
2 what women say or disclose at an incident is actually  
3 brought out. It's really getting much more - a more fluid  
4 representation of what her experiences are. It's also  
5 talking about her options and where she is now. The way  
6 that we sort of interpret the L17s is even when a woman  
7 says, "No, thank you very much, I don't need your support  
8 today," we have sent the right messages to her that, one,  
9 violence is not acceptable in our community and, two, that  
10 services like Women's Health West are out there, that the  
11 violence is no longer invisible, that she can call us any  
12 time that she wishes herself to do, whether that's at  
13 2 o'clock in the morning or otherwise through Safe Steps.  
14 There's linkages.

15 One of the greatest things that perpetrators of  
16 violence use to undermine or use power in the relationship  
17 is isolation. We know that the more services and the  
18 services that are around women, that it reduces risk. So  
19 I just think the more that we tell, it has to reduce that  
20 risk.

21 MS ELLYARD: Can I ask you then to step the Commission through  
22 the process that's followed. If a formal referral is made  
23 to your organisation, what is it in fact that you receive  
24 physically and in terms of content?

25 MS TUCKER: We currently receive L17s through a fax. The team  
26 which we call the crisis response team is made up of a  
27 coordinator, three crisis response workers and one person  
28 who is assisting with the administration. In the morning  
29 the coordinator, she comes especially on Mondays, comes in  
30 at 8 o'clock in the morning, collects the referrals off  
31 the fax machine. She then starts to triage. So we triage

1 based on - in our first triage, we triage based on the  
2 police code. So we have a different response to 1 to 14  
3 compared to 15 to 20.

4 MS ELLYARD: Can I just stop you there. You are referring  
5 there to the fact that in the L17 documentation that the  
6 police fill out they are able to tick the kind of violence  
7 that called them to attend; is that correct?

8 MS TUCKER: That's right.

9 MS ELLYARD: Codes 1 to 14 represent conduct that would be  
10 capable of being criminal conduct as well as being family  
11 violence?

12 MS TUCKER: That's right.

13 MS ELLYARD: And 15 to 20 are non-criminal forms of family  
14 violence?

15 MS TUCKER: That's right. So the first triage is making  
16 decisions around that, breaking the triage down first.  
17 Now, automatically the 1 to 14s are handed out, allocated  
18 to the staff to ring, so that they are the first triage.  
19 The second triage is the coordinator then goes through all  
20 the 15s and 20s and reads the complete document and  
21 through her experience and expertise on managing or  
22 understanding risk and reading between lines and reading  
23 the narrative, then she makes a decision to either place  
24 it that that person will not get a service or place it  
25 that the person will get a service and be re-entered into  
26 the system and allocated to the workers.

27 MS ELLYARD: Can I ask you, if you know, what percentage of  
28 women in that 15 to 20 bracket end up not getting a call  
29 because they are assessed as lower risk?

30 MS TUCKER: In June this year we received 733 referrals. Just  
31 about 295 of those were coded 15 to 20. We did not call

1           90. So there was a large proportion of the 15s to 20s  
2           that we actually called with a reassessment.

3 MS ELLYARD: Was that because, on your reassessment, perhaps  
4           there had been from your perspective an incorrect coding  
5           by police or for some other reason?

6 MS TUCKER: No, the coding wasn't incorrect as what the  
7           police - what the incident was, so they are recording the  
8           incident. It's how they then described what was going on,  
9           whether there was other information about the number of  
10          attendances, whether on our system we had spoken to the  
11          woman or had provided any assistance with her previously,  
12          so our system would be checked also. So, if there had  
13          been a previous incident where we had responded, we would  
14          automatically put her in the reallocated file. We also  
15          absolutely, based on cultural background, will make  
16          decisions of putting people back into getting a response.  
17          We also have a look at whether child protection has been  
18          involved in the past, whether there is children present  
19          and then we put that back in the pile. So really the pile  
20          that ends up not getting a response, we are trying really  
21          hard to make sure that they would be assessed at low risk.

22               Previously we had had a response to those women  
23               about 12 months ago where we sent a letter to the family.  
24               But unfortunately we no longer have the - because we have  
25               increased again this year by 34 per cent, I think, that we  
26               are no longer able to do that. We are hoping to put an  
27               MSS system in so that we will be able to at least send a  
28               message to people if they have a mobile phone to contact  
29               us.

30 MS ELLYARD: Can I ask you a question about resourcing. You  
31               deal with this in your statement. You were involved at



1 the time the decisions were being made that this kind of  
2 referral pathway was set up. What formal funding is made  
3 available to organisations like yours to carry out this  
4 L17 response?

5 MS TUCKER: There has never been any formal funding. There was  
6 a recognition from the department, from government, that  
7 we had moved case management dollars to the front end to  
8 support the police response and they provided us with two  
9 extra EFT to replace those case management positions.

10 MS ELLYARD: From your perspective, what's been the match or  
11 mismatch between what 10 years ago we thought might be the  
12 increase in demand once the Code of Practice came in and  
13 what the Code of Practice has in fact brought about?

14 MS TUCKER: I actually think that we actually didn't know what  
15 a dramatic change in the culture of Victoria Police would  
16 result in in the community in lots of ways, because over  
17 the last 10 years I think there's been consistent messages  
18 from leaders in this state really clearly saying that  
19 family violence is unacceptable in our community. I think  
20 that there's more stories in the local newspapers .  
21 I think that police's response has improved in such ways,  
22 and their lead in this. Ken Lay, when he was Chief  
23 Commissioner, his statements were very public, very strong  
24 about what he felt that police should do. That all comes  
25 to the idea of the sense of trust in the community and  
26 women to make that phone call. I don't think we expected  
27 that. In 2004 when we were sort of having conversations  
28 and consulting and the police were consulting with family  
29 violence services and others in the broader service system  
30 about the new Code of Practice, I don't think we had an  
31 idea.

1 MS ELLYARD: I think you say in your statement that you thought  
2 perhaps the police might end up responding to as many as  
3 25,000 incidents a year, whereas in fact it is now pushing  
4 70,000?

5 MS TUCKER: Yes, that's right.

6 MS ELLYARD: Ms McCormack, what's your perspective on this  
7 issue?

8 MS McCORMACK: I think first of all it is really important to  
9 understand that there are no standards for responding to  
10 L17 in Victoria. So when the Code of Practice was  
11 introduced it was just pretty much left to outreach  
12 services who were receiving L17s to develop a response.  
13 So the response that Jacky has detailed is a response from  
14 Women's Health West, but it varies across the state. So,  
15 some outreach services endeavour to contact every woman,  
16 every referral, but obviously the demand varies from  
17 region to region and also the resources, the capacity to  
18 respond varies as well.

19 In Victoria we have outreach services, nominated  
20 outreach services, that provide a response. So outreach  
21 services in our system are supposed to provide support to  
22 women whether they want to remain in the relationship or  
23 leave or whether they want to leave their home or remain  
24 in it, provide a range of different supports that wrap  
25 around them. Half of those are situated within generalist  
26 services, so they have a range of other supports available  
27 to them like housing, mental health services, drug and  
28 alcohol, et cetera.

29 But the outreach services - my understanding of  
30 the funded targets for outreach in Victoria is 6,000. So  
31 when you compare that to the almost 70,000 police

1 referrals, and we understand the bulk of those get  
2 formally referred to family violence services, it  
3 obviously goes nowhere near, and it's important to also  
4 recognise that police referrals are not the only referrals  
5 that family violence services will receive. Women  
6 self-refer, they get referrals from a range of different  
7 areas.

8           There was some additional funding committed to  
9 L17s in 2013, and again this varies from region to region,  
10 so it's difficult to compare. But needless to say the  
11 funded targets have absolutely nothing to do with demand.  
12 So I'm thinking of one region where the target for L17s,  
13 the funded targets is 72 per annum, and that doesn't even  
14 counter the requirement for that service to respond to the  
15 L17 referrals that they will get in a fortnight.

16 MS ELLYARD: Can I ask then a bit more about the content,  
17 firstly to you, Ms Tucker, about what you get on the L17  
18 and the extent to which you don't get what it would be  
19 useful to get. You have already identified that the  
20 documentation you receive has a police code for the nature  
21 of the incident they attend and it also contains a  
22 narrative about the context in which they attended. Are  
23 there any other pieces of information that come through as  
24 part of that formal referral?

25 MS TUCKER: Yes. Whether child protection has been notified,  
26 whether the children were present at the incident. Also  
27 other important things, whether the woman is attending  
28 court or not, whether there's an application for an  
29 intervention order, whether there's charges pending.

30 MS ELLYARD: Do you get much information about the perpetrator  
31 of family violence?

1 MS TUCKER: We get no information about the perpetrator at all.  
2 MS ELLYARD: None at all?  
3 MS TUCKER: No, other than in the narrative.  
4 COMMISSIONER NEAVE: I just wanted to understand that because  
5 I have seen the L17 form, but it's the L17 form that the  
6 police complete. So does this mean that the information  
7 on the L17 form relating to the perpetrator doesn't come  
8 to you?  
9 MS TUCKER: No, it doesn't.  
10 COMMISSIONER NEAVE: So in fact the form the police complete is  
11 different from the form you get; is that right?  
12 MS TUCKER: Yes, that's right.  
13 MS ELLYARD: In some respects I think you get part of the form,  
14 and then another part of the form containing information  
15 about the perpetrator will go to the referring agency that  
16 receives the perpetrator referral; is that right?  
17 MS TUCKER: That's right.  
18 MS ELLYARD: One of the things you note in your statement,  
19 Ms Tucker, is that I think your service might also respond  
20 or receive referrals where it is the woman who has been  
21 identified as the perpetrator of family violence; is that  
22 the case?  
23 MS TUCKER: That's right.  
24 MS ELLYARD: Can you comment a bit on what further  
25 investigation sometimes reveals about whether the woman  
26 has been accurately characterised as the perpetrator?  
27 MS TUCKER: Yes. In June we received 57 referrals from police  
28 identifying the female as the respondent. Of those, after  
29 assessment and conversations with all the women, we  
30 identified six perpetrators of family violence out of the  
31 57.

1 MS ELLYARD: So the remaining 51, what was the situation there?

2 MS TUCKER: They were in an abusive relationship. We recognise

3 that on occasions that it may be difficult for police to

4 ascertain who is the primary aggressor when they attend.

5 But generally - I think there is some training that needs

6 to be provided to police to support them to accurately

7 identify the perpetrator. I must admit on a couple, a few

8 of the documents, the police had said, "For this incident

9 I chose to put the woman in as the respondent." So he is

10 sort of saying, "I don't know who it is, but for this

11 incident I'm going to say I'm putting her down."

12 MS ELLYARD: Just to tease out a little bit why it would be

13 that the police identified a woman as a perpetrator where

14 on your analysis she was better characterised as the

15 victim, does that mean that on that particular incident

16 she may have been violent, but it was violence in response

17 to prior conduct by her partner?

18 MS TUCKER: I think that there's probably a little bit of myth

19 around the presentation of women who are victims of family

20 violence, that somehow they are submissive in behaviour.

21 This is especially appropriate where there are women from

22 a cultural background other than Australian where the

23 expressions of terrible things can be quite perceived by

24 the Australian culture as dramatic, but it seems it's the

25 norm within that cultural setting. So, there are

26 assumptions about behaviour. Because a woman is angry,

27 there's some reason that anger is then transferred to

28 identifying her as the perpetrator, where in fact she is

29 not the perpetrator.

30 MS ELLYARD: You have identified the process by which you

31 triage and determine the order in which referrals will

1 receive a contact from your organisation. Can you then  
2 talk us through what happens? If you are making a call to  
3 someone who has been identified as in that 1 to 14 group,  
4 how does the conversation go?

5 MS TUCKER: The conversation will depend on a number of  
6 factors. An important factor is before we make a phone  
7 call we look up on our own system to identify whether we  
8 have spoken to the woman before, whether we had made  
9 contact. We use the homelessness database as a base for  
10 all the information for all the contacts, all support we  
11 make to all women in the west who come through Women's  
12 Health West, so that all the L17s are recorded, whether we  
13 have been able to successfully make contact with her, what  
14 conversation actually took place, what supports were  
15 offered, whether she had been through our intake service  
16 which takes 5,000 calls from others, including women  
17 themselves, whether we have provided her court support,  
18 whatever space that she's been involved with Women's  
19 Health West.

20 So of course if we have no record of her, we are  
21 going to assume that there's previously never been contact  
22 with her. So our conversation with her is quite different  
23 to the conversation that we would have with a woman who  
24 has been engaged with the system multiple times. In lots  
25 of ways we try to pick up that conversation that we have  
26 previously had with her so that we are saying, "We know  
27 this is what happened. How successful? You said this  
28 before. You were going to - how did that go?" So there's  
29 a sort of a relationship building and engagement with  
30 women so they are more likely to engage with the service  
31 system more broadly.

1 MS ELLYARD: Thinking about the kinds of services that would be  
2 offered to a woman for whom this was the first time you  
3 had occasion to make contact with her, how does the  
4 conversation go? In one sense you are cold calling  
5 someone who might have been involved in a very distressing  
6 incident the night before. How do you introduce yourself?  
7 How does the conversation unfold?

8 MS TUCKER: First we have to tell them we are calling because  
9 the police have provided us a referral. Then we very  
10 gently ask her to disclose what happened in the  
11 circumstances. It's really trying to have a conversation.  
12 You know, after training many people on telephone  
13 services, it's about having a conversation with a person  
14 where you are leading the conversation in a very subtle  
15 way to ascertain the risk, "Where is the perpetrator,  
16 what's happening in your life now, where is he, what is he  
17 doing," because we don't know anything, so we are getting  
18 a lot of information from her about the perpetrator, which  
19 is the cornerstone of all risk assessments, "Where is he  
20 now, did he come back last night," and all that sort of  
21 thing.

22 So we are gently doing that so we can sort of  
23 make an assessment is it safe to talk to her now, is there  
24 a way that she might want to - and then we are also making  
25 decisions around, "Do we need to escalate this? Yes, the  
26 L17 told us this about that, but do we need to escalate  
27 this?"

28 We don't necessarily have very many that end up  
29 being on our extreme risk - being escalated to quite  
30 extreme risk where there's a regional response, but on  
31 occasion that happens where what women are describing is

1 quite what we would describe as she's at imminent risk of  
2 further violence.

3 MS ELLYARD: So when we talk about escalating, do you mean  
4 offering her something such as, "I have somewhere else you  
5 and your children can stay tonight. I really urge you to  
6 take up that offer"?

7 MS TUCKER: Yes, that's right, and making quite quick recontact  
8 with police, putting measures in place. Not all women  
9 make the choice to leave the family home, so it's about  
10 talking to police where we generally organise things like  
11 drive-bys, "Can you go and knock on the door, make sure  
12 she is all right." There's all those sorts of things that  
13 we can put into place, making sure the safety notice or  
14 the interim intervention order is in place. The police  
15 are able then to follow up to the perpetrator. They  
16 generally in those circumstances will make it a priority  
17 to speak with him and to say that, "You're on our radar,  
18 we're concerned," and really make some pressure on him  
19 about, if there's charges, try to - sorry, I've lost the  
20 thought.

21 MS ELLYARD: What about women who perhaps give you the opposite  
22 perspective, which is, "I don't want to talk to you.  
23 Everything is fine. It was a one-off incident. Thanks  
24 for your call, but goodbye." Is that something that  
25 happens?

26 MS TUCKER: Yes, of course. We get a variety of people's  
27 reactions to things. But no call is wasted. There's no  
28 idea that that call - because that call in itself, it  
29 breaks down that deniability. "One more person is telling  
30 me. The police talked to me last night. I have the phone  
31 call again from a service speaking to me what happened



1 last night." It's increasing the deniability or even her  
2 ideas about what may have happened last night. You can't  
3 go backwards. You can't put the genie back in the box  
4 sort of thing. It's one more thing.

5 How we see it, especially those women that we  
6 might find that the police attend maybe the second or  
7 third time and we are still finding it a little bit  
8 difficult to engage with her, again we are saying we are  
9 unable to - it's that little bit, step by step trying to  
10 engage with women.

11 MS ELLYARD: Ms McCormack, Ms Tucker is obviously describing  
12 the process that's followed in her particular region. Can  
13 you comment on whether that general approach is more or  
14 less standard or, if it is not, how it is different in  
15 other parts of Victoria?

16 MS McCORMACK: No, that's my understanding of more or less  
17 standard, is that's what L17 services basically will do.  
18 It's about gathering more information about risk, trying  
19 to engage with her and offer her ongoing support and  
20 options.

21 MS ELLYARD: What if the support that she wants is support for  
22 her relationship; so, for example, "I want him to go to  
23 counselling. He says that he will"? Do women's outreach  
24 services facilitate that kind of thing?

25 MS TUCKER: We provide her information about the local men's  
26 behavioural groups. We also talk with her about what  
27 would be and how she would perceive how to approach her  
28 partner about putting the idea of him taking some  
29 responsibility about that. For some women they might feel  
30 quite comfortable - because we get a very broad range of  
31 the relationships and the risks in the relationships. So

1           some women will feel quite comfortable and feel quite safe  
2           about approaching him doing that. Other women we would be  
3           talking to them about how safe that is to do that, her to  
4           challenge her partner about his violence and whether  
5           that's safe to do it.

6 MS ELLYARD: So does that mean in practical terms there might  
7           be cases where a woman says, "I'm going to ask him to go  
8           to men's behaviour change", and the person speaking to the  
9           woman might say, "Based on what you have told me, can  
10          I give you some advice on how to have that conversation or  
11          indeed whether to have it"?

12 MS TUCKER: Basically that's right.

13 MS ELLYARD: The question that Ms Tucker raised earlier about  
14          the extent to which police can identify with accuracy who  
15          is the perpetrator and who is the victim raises the  
16          question of training for police. Ms McCormack, at  
17          paragraph 67 and following in your statement you comment  
18          on this issue. I wonder could you tell the Commission  
19          what you, through your work, have identified as some of  
20          the key training issues for Victoria Police and family  
21          violence?

22 MS McCORMACK: Yes, sure. During all the reforms when we have  
23          seen funding invested in the system I don't think there  
24          has ever been any funding invested in Victoria Police.  
25          Pretty much all the response that they have developed, my  
26          understanding, has been within their own resource base.  
27          So because taking police off-line for training,  
28          comprehensive training on family violence is difficult,  
29          this is something that's been raised at every kind of  
30          junction of the reforms, the need for training. I guess  
31          police, the way we have observed is that they have tried

1 to take opportunities where they can.

2 So there was training around the introduction of  
3 the Code of Practice; training at the introduction of the  
4 Family Violence Protection Act in 2008. There's been  
5 common risk assessment training through local regions.  
6 That's been multi-agency, and police have participated in  
7 those opportunities when they can. It hasn't had a focus  
8 on police responses and it hasn't been formal training  
9 that all police must attend.

10 My understanding is that since 2010 Victoria  
11 Police have introduced a component of family violence  
12 training for cadets in the Police Academy. Since it's  
13 only been introduced since 2010 my understanding is it  
14 only kind of translates to about 3 per cent of the current  
15 police force.

16 So what that means is that we have some police  
17 members with a much more sophisticated understanding of  
18 the dynamics, the causes, the impact and severity.  
19 Particularly those that are working really closely with  
20 family violence services have a better understanding. But  
21 it's not necessarily consistent across the board because  
22 not everybody has been exposed to the training. Also,  
23 it's a cultural shift, and Victoria Police is a very large  
24 organisation and cultural shift takes time.

25 MS ELLYARD: Ms Tucker, you identify in your statement the  
26 difference that a change of leadership at a station can  
27 make. I wonder would you comment on that issue.

28 MS TUCKER: Our experience is, especially those leadership  
29 positions in police stations like senior sergeants,  
30 station senior sergeants, let alone police advisers or  
31 family violence liaison officers, that they can make a

1 dramatic impact, positively and sometimes less positively.  
2 We have gone some way, as Fiona spoke before, about  
3 building systems that family violence services don't have  
4 to so depend on the relationships that they build in  
5 police stations, but there is still some way to go to  
6 embed that integration across at a local level so that all  
7 the knowledge about family violence and family violence  
8 responses don't sit with the family violence unit.

9 I am a real strong supporter of family violence  
10 unit, but as long as it's not at a cost to the general  
11 policing's understanding of family violence and responding  
12 to it. So it is about that. It's also that we also have  
13 to attract champions for family violence and responses at  
14 the middle management and command levels, and without that  
15 the system is weakened. I think the distance that we have  
16 come in Victoria is more than half the responsibility of  
17 how police have led this over the last 10 years.

18 MS ELLYARD: You mentioned family violence teams. Some of the  
19 evidence that's before the Commission today and that we  
20 will be hearing more about is that part of the reform that  
21 Victoria Police has instituted is the creation of family  
22 violence teams which operate across Victoria and which  
23 have certain responsibilities in relation to family  
24 violence cases. But you have identified that in addition  
25 to them there is still a role for family violence  
26 knowledge at front-line police level; is that right?

27 MS TUCKER: That's right.

28 MS ELLYARD: Can we tease out then, and perhaps I will invite  
29 you to comment first and then you, Ms McCormack, that  
30 given that we have family violence teams which are  
31 specialists, what is it that the front-line people need to

1 know and be able to do, in your opinion, when family  
2 violence is present?

3 MS TUCKER: The reality for police is that it's a large  
4 proportion of their work. It's unlikely that we will have  
5 family violence units at numbers that would cover every  
6 family violence incident in the state. So, we have to as  
7 a system put our trust in the training and the  
8 professionalism of those front-line officers, because  
9 that's a reality of that. The way that they approach the  
10 scene, the way they investigate the incident, the way that  
11 they engage with both the respondent and the woman or  
12 other family members involved in the incident.

13 So it is critical because it is the first  
14 experience that family will have or may have with police.  
15 I think one of the critical things we have to remember is  
16 that the reason that women do phone the police after a  
17 breach of an order is because they have actually had an  
18 experience before and they have trusted that. So it's  
19 about making sure that those officers continue to and we  
20 continue to put that trust in those officers, rather than  
21 moving it to a family violence unit or a specialist unit  
22 there. I think there's a role for them, absolutely, but  
23 it's probably not going to the front door.

24 MS ELLYARD: Ms McCormack, what is your perspective on this  
25 issue?

26 MS McCORMACK: I think we need them to do their job really  
27 well, and we also need them to be able to make a risk  
28 assessment because I don't think that's the case now. So  
29 we commonly have women named as the respondents, even when  
30 it's later determined that there's been a history of  
31 violence and where she might have previously been named as

1 the AFM. Sometimes if a man calls, police might  
2 automatically make the assumption that he's the AFM,  
3 et cetera. This is practice - I'm thinking of one  
4 outreach service that has a daily practice of providing  
5 feedback to officers that attended during that day. They  
6 will provide feedback on every L17 they received to the  
7 attending officer, but also to the family violence adviser  
8 on what happened with that L17, whether they were able to  
9 contact the woman, what they were able to identify,  
10 further risk assessment information, but also where police  
11 have failed to recognise that it's a family violence  
12 incident. Subsequently that has meant that police have  
13 then gone and taken out a safety notice, so we have seen  
14 better responses.

15 But even with that happening daily, they say it's  
16 still a daily occurrence that they will have an incorrect  
17 assessment of, first of all, who the AFM is and who the  
18 respondent is, and I think sometimes women just will go  
19 along with it because when they're in court they don't  
20 necessarily have to admit to any guilt and sometimes it  
21 can reduce the further risk that taking out an  
22 intervention order can have in terms of escalating the  
23 violence.

24 But what it then does is renders the family  
25 violence invisible at later points, particularly in the  
26 Family Court, so it's really critical that they are  
27 getting that assessment right.

28 MS ELLYARD: So, from your perspective then, it's not  
29 negotiable. The front-line attending police need to do  
30 that risk assessment?

31 MS McCORMACK: Absolutely.

1 MS ELLYARD: What's your view on when they do it? When is the  
2 point in time at which they ought to be doing that risk  
3 assessment? While they are there at the scene or, as  
4 I think commonly happens, when they are back at the  
5 station?

6 MS McCORMACK: I hear different reports on this from members.  
7 Some people say just so long as they are doing a risk  
8 assessment that then informs what their next actions are,  
9 that's most critical. But then L17 agencies will say, "We  
10 really need the information," and sometimes when they are  
11 filling it out back at the office we are then missing out  
12 on asking about Aboriginal and Torres Strait Islander  
13 background or whether they have actually informed the  
14 people in attendance that they are going to provide a  
15 referral, those sorts of things, that box hasn't been  
16 ticked or some critical information isn't provided.

17 So I think, yes, I hear 50/50 on that. I guess  
18 just basically so that they are actually undertaking a  
19 risk assessment rather than I think the L17 is commonly  
20 understood to be just a form that they are completing  
21 rather than being a risk assessment.

22 MS ELLYARD: Ms Tucker, one of the things you identify in your  
23 statement is I guess the need for police to remain focused  
24 on the core task of prosecuting crime. I wonder could you  
25 comment on how you see this balance being struck between  
26 the obligations of police to do risk assessments and focus  
27 on the victim on that side of things, but also their  
28 obligation to identify and prosecute breaches of the law?

29 MS TUCKER: I think that all incidents where somebody has been  
30 assaulted, they are assessing risk. I think police do  
31 that daily about the risk to themselves, the risk to the

1 public, the risk to everything. So in lots of ways the  
2 ideas of risk is engrained in the police officer, I think.

3 What's different is that some of this is  
4 intuitive or might even be they go to an incident, they  
5 are thinking about - they are measuring that risk and  
6 probably the difficulty is, "How do we move that idea of  
7 managing that scene," which they do, separating the  
8 respondents, having the conversation with one and the  
9 other, but also in that process identifying that this is  
10 an opportunity to collect evidence, that this is an  
11 opportunity to - you know, it rarely happens that any  
12 photographs are taken of any injuries to the woman at the  
13 time of the incident, whether there's damage to property,  
14 whether there's evidence of, you know, the scene of the  
15 property where there's furniture broken, there's holes in  
16 the wall, everything else is not there.

17 If that case does not proceed to assault, there  
18 is absolutely no evidence track about what had previously  
19 happened. I understand, and the police will correct me if  
20 I'm incorrect, that all evidence that is collected in  
21 sexual assault is retained, so there's a history, so  
22 that's what is sort of envisaging some sort of way that we  
23 could put that into the system.

24 The other important factor is that the police  
25 attend an incident. They say, "All right, there's going  
26 to be an intervention order." What happens is there's a  
27 huge transference of responsibility of collecting evidence  
28 of future incidents placed on the woman. Even Women's  
29 Health West and Victoria Police in 2007, I think, made a  
30 video "How to collect evidence". There's a recent app on  
31 the telephone supporting women to collect evidence. It's



1 sort of saying why is the system having this huge amount  
2 of responsibility placed on women about collecting  
3 evidence to prove a criminal act of breaching an  
4 intervention order?

5 So all that sort of thing is engrained or change  
6 a little bit of the culture to say, "Yes, it's part of  
7 your work that you treat people with respect and listen to  
8 people and have empathy, but it's also your remit to  
9 prepare the scene, to collect the evidence and to build a  
10 case for future prosecution, whether it's going ahead this  
11 time or next time."

12 COMMISSIONER NEAVE: I just wanted a follow-up question. You  
13 mentioned the sexual assault area where there is an  
14 investigator embedded with most of the SOCIT teams.

15 MS TUCKER: Yes.

16 COMMISSIONER NEAVE: I just wonder whether that's a model you  
17 have had any thoughts about, because that does seem to  
18 have resulted in more prosecutions in the context of  
19 particularly child sexual assault.

20 MS TUCKER: Yes, I think it would be an idea to explore. The  
21 Royal Commission will put out a lot of ideas through this  
22 process. I think the idea, and in the west we've got to a  
23 lot of people with ideas, but it's also about, "Is that a  
24 good idea, let's collect the evidence, let's go and  
25 research and unpack what's the reason why it's working  
26 really well in the sexual assault and is it transferable"  
27 and I really would think - - -

28 COMMISSIONER NEAVE: You are open-minded at the moment about  
29 whether that's the right response.

30 MS TUCKER: Absolutely.

31 MS ELLYARD: Ms Tucker, one of the things you say specifically

1 in your statement is that from your perspective it might  
2 well be that some of the time presently allocated through  
3 internal police resources to following up with a woman who  
4 has already been referred to your organisation might be  
5 better diverted towards following up the potential for  
6 charging and prosecuting the perpetrator. Is that your  
7 view?

8 MS TUCKER: That's right.

9 MS ELLYARD: Ms McCormack, can I ask you to comment on perhaps  
10 the view that might be taken that we are expecting an  
11 awful lot from front-line police members to do all of that  
12 evidence collection that Ms Tucker has mentioned, to do  
13 the full risk assessment that you've mentioned, in the  
14 context of resources and other demands on police time.  
15 How in your view is a balance to be struck between these  
16 competing priorities?

17 MS McCORMACK: Look, I think I'm limited in being able to talk  
18 about that, given that I don't work on the front-line.  
19 I'm not a police officer, et cetera. But I think we can  
20 do better in building in an additional tier of rapid risk  
21 screening. I think that if we had better - if we had a  
22 process whereby we had women's, men's, child protection  
23 looking at L17s and having access to police data, we could  
24 do a better job in relation to then determining where  
25 referrals are responded to. But from my limited  
26 understanding I would anticipate that once police actually  
27 understand it - and that's been our experience. You have  
28 police officers that, once they actually understand the  
29 issue, they undertake their job differently and we see  
30 much better justice outcomes, we see much better  
31 information being shared on to the referring agency,

1 et cetera.

2 MS ELLYARD: Do you mean it's not so much a question of it  
3 taking longer, but that once you know how to do it, you  
4 just operate in a different way?

5 MS McCORMACK: That's it.

6 MS ELLYARD: Ms Tucker, one of the projects that's been  
7 trialled in your region and that you refer to at the end  
8 of your statement is a project involving Forensicare which  
9 involved the co-location of a forensic psychologist with a  
10 family violence team for that region to provide advice to  
11 the team, and we will be hearing more about that later on,  
12 but perhaps I could indicate that you express some  
13 reservation about it in your statement and I wonder could  
14 you explain to the Commission why it is that you are not  
15 completely enthusiastic about that proposal?

16 MS TUCKER: It's about what we do and who does it, I suppose.  
17 It's about identifying - my understanding is that the  
18 project is about sort of doing a much more thorough  
19 investigation and my understanding is that the assessment  
20 is based on a Canadian assessment framework that's done  
21 within the justice system. So it's much more an idea  
22 around at a corrections level rather than at a policing  
23 level, so that has some worrying - you know, it's at this  
24 level.

25 The other important thing is, is that to what  
26 end? Is it to the end around escalating - is it  
27 identifying those at greatest risk or is it duplicating  
28 what is actually the structures of the current service  
29 system of the referral about identifying the levels of  
30 risk and then putting structures in place to respond to  
31 that? Unfortunately Women's Health West wasn't involved

1 in the conceptualisation of the project and was consulted  
2 after that had happened. So there's some not quite sure  
3 around the purpose of the forensic going in there and  
4 making assessments with a tool which is actually used in  
5 the justice system to assess what the justice system will  
6 do in light of, "Do we monitor this person or do we  
7 incarcerate this person." So it's sort of a weird place  
8 to put it at the police level.

9 MS ELLYARD: You mentioned duplication. Do you mean that to  
10 the extent that that trial is aimed at identifying really  
11 high risk cases, that's something that the existing  
12 service system through referrals to agencies like yours  
13 can already do reasonably well?

14 MS TUCKER: Since 2008 the western region has had in place an  
15 extreme risk strategy where police and family violence  
16 services, including men's services, can identify families  
17 at extreme, which basically means at immediate risk, to  
18 come together and put in place a plan to respond to that  
19 level of risk. In a year we generally are somewhere  
20 between eight and 12 cases, so by just the pure numbers we  
21 are describing those really right up at that top end.

22 Then with the planned introduction of the RAMPS,  
23 which I think is also sort of measuring or supporting that  
24 slightly lower level of high risk and about how the police  
25 and family violence services will work together hopefully  
26 with Corrections and Child Protection, I think there are  
27 some really good initiatives that are happening now about  
28 how we manage those people at the higher end of risk.

29 MS ELLYARD: If the focus of the Forensicare project were not  
30 on high risk cases, but rather on resourcing the family  
31 violence team and then through the team down through the

1 ranks with better understanding about risk issues to  
2 facilitate that front-line response, would you see value  
3 in that?

4 MS TUCKER: I would have to have probably a closer look at the  
5 outcomes of the pilot to be able to make comment on that.

6 MS ELLYARD: Ms McCormack, from your perspective?

7 MS McCORMACK: I don't know much about the model. I would  
8 assume it would depend upon the expertise of that expert.  
9 We have a project that's happening in one of the regions  
10 whereby a family violence worker is embedded in a family  
11 violence unit, the team that's focusing on recidivism, and  
12 that's not just co-location but actually having that  
13 worker as a member of the team whereby they look at the  
14 data beforehand, they make decisions about responses, they  
15 go and do attendances.

16 I really like that idea because of the expertise  
17 that the lens of the family violence worker brings,  
18 because often women are very poorly understood in these  
19 circumstances. They can be pathologised, they can  
20 be - the dynamics of family violence is often  
21 misunderstood. So that's why I refer to the expertise of  
22 the person within that team. So I really like the model -  
23 Project Alexis is what it's called - because of the  
24 expertise that that worker would bring.

25 MS ELLYARD: Do the Commissioners have any questions for these  
26 witnesses?

27 DEPUTY COMMISSIONER FAULKNER: Ms Tucker, I'm trying to  
28 understand a little better the timeframes in relation to  
29 the L17s. I'm interested in how quickly after an event  
30 an L17 is dispatched. I think your evidence suggested  
31 that perhaps if that happened on a Friday night you might

1 not get to triage it until Monday morning. I'm also  
2 interested in - you mentioned 733, which is an enormous  
3 number, in June. How many of them do you actually succeed  
4 in speaking to and then I think it might have been also  
5 that Fiona mentioned that then some organisations might  
6 give some feedback to police. So I'm just interested in  
7 just how that works. Do you get to 733 less the 90 you  
8 decided not to, or how many people end up sort of coming  
9 in and accepting some assistance and how do police find  
10 out about that, to avoid what I think you are suggesting  
11 might be a duplication of them doing welfare work rather  
12 than police work?

13 MS TUCKER: The answer for the weekend work is that we have a  
14 weekend response for L17s. They operate in partnership  
15 with the McAuley Community Services for women. That's for  
16 six hours on the Saturday and six hours on the Sunday. In  
17 that way that we are responding to Friday nights and  
18 Saturday nights and Mondays through to Sunday nights sort  
19 of thing.

20 We respond generally - we will make an attempt at  
21 a phone call, not necessarily a successful one, for all  
22 respondents within three days, and most of them are done  
23 within 24 hours. That's the first attempt at phone call.  
24 We generally are able to respond to - actually speak to  
25 somebody in 65 per cent of those within that timeframe.  
26 So there's some conversation with somebody, whether that  
27 is a lengthy conversation with allocation to case  
28 management or a very brief one where somebody has politely  
29 said, "I don't want to speak to you."

30 DEPUTY COMMISSIONER FAULKNER: So it is about 65 per cent that  
31 you get to speak to?

1 MS TUCKER: That's right.

2 DEPUTY COMMISSIONER FAULKNER: Then what sort of number might  
3 accept some sort of help?

4 MS TUCKER: Most women will actually engage. Most  
5 women - I don't have the data because one of the problems  
6 with data with L17s, everything that we collect is by  
7 hand, so literally to get the data I have been able to  
8 present to you today I had somebody who actually went  
9 through every L17 in June and got the data out by hand.  
10 So that really - it's very rich in data if we could  
11 collect it.

12 MS McCORMACK: Just to reiterate the issue about demand. The  
13 capacity for outreach services to actually engage with  
14 women or even contact women is really limited when you  
15 consider the 6,000 funded outreach targets across the  
16 state, with some L17, a little bit of L17 popped on the  
17 top, compared to the number of referrals. Member services  
18 are really, really concerned that rather than - and when  
19 you think about those outreach targets, it's not just  
20 intake, that's for case management as well. So, the  
21 sector is really concerned that we have had to push all  
22 the resources up just to manage intake and, even where we  
23 are managing intake, it just seems to be managing demand.  
24 We are only focusing on those and sometimes only  
25 responding to those at high risk, and all the rest is just  
26 unable to be responded to.

27 MS TUCKER: Responding to your question around follow-up, we  
28 provide the police member a response for all L17s, whether  
29 we have made contact or not made contact, including the  
30 90, where we inform them that we have not made contact  
31 because of demand on our service. Where it is identified

1           that there might be some issues with it, we will also CC  
2           in the police liaison officer and we will up it to the  
3           police adviser. Where we have identified there is a level  
4           of risk and we have not been able to contact the woman, we  
5           will inform police directly.

6 DEPUTY COMMISSIONER FAULKNER: Thank you very much.

7 MS ELLYARD: I will ask that the witnesses be excused. If now  
8           is a convenient moment, perhaps we could take 15 minutes  
9           now until 25 to 12.

10 COMMISSIONER NEAVE: Thank you, Ms Ellyard. Thank you very  
11           much.

12 <(THE WITNESSES WITHDREW)

13           (Short adjournment.)

14 MR MOSHINSKY: Commissioners, the next witness is Sergeant  
15           Spriggs. If he could please be sworn.

16 <MARK DAMIEN SPRIGGS, sworn and examined:

17 MR MOSHINSKY: Sergeant Spriggs, could you please state your  
18           current position with Victoria Police?

19 SERGEANT SPRIGGS: Family violence adviser at NorthWest Metro  
20           Division 5 covering Banyule, Darebin, Nillumbik and  
21           Whittlesea.

22 MR MOSHINSKY: Have you prepared a witness statement for the  
23           Royal Commission?

24 SERGEANT SPRIGGS: I have.

25 MR MOSHINSKY: Are the contents of your statement true and  
26           correct?

27 SERGEANT SPRIGGS: They are.

28 MR MOSHINSKY: Can I start by asking you some questions to  
29           explain the different roles that exist in Victoria Police  
30           relating to family violence. If I could take you to  
31           paragraph 12 of your statement, if you have it there, you



1           refer to in particular family violence teams, family  
2           violence advisers and family violence liaison officers?

3   SERGEANT SPRIGGS:   Yes.

4   MR MOSHINSKY:   Just with those first three, could you give the  
5           Commission a brief outline of what the differences are  
6           between the roles of those three different groups?

7   SERGEANT SPRIGGS:   Yes.   I will relate it to my area, is  
8           probably a good explanation.   So I have 680 police in my  
9           division, 11 police stations and three family violence  
10          teams and one family violence adviser.   The 11 family  
11          violence liaison officers is a portfolio at sergeant rank  
12          at each police station within the division.   The three  
13          family violence teams have a sergeant and a number of  
14          constables and senior constables.   They have a detective  
15          with a family violence portfolio who works with them.  
16          There's one family violence adviser, which is me, that  
17          does strategic advice to the superintendent, sets the  
18          tasking of the three family violence teams and acts as the  
19          conduit between Victoria Police and the family violence  
20          service sector.

21   MR MOSHINSKY:   Just in terms of the structure, for your  
22          division there's 11 police stations and three family  
23          violence teams.   Are each of the family violence teams  
24          related to a group of police stations?

25   SERGEANT SPRIGGS:   Yes, they are.

26   MR MOSHINSKY:   What sort of numbers are we talking about of  
27          personnel in each family violence team in your division?

28   SERGEANT SPRIGGS:   The number varies according to the demand  
29          and the family violence numbers in the particular area.  
30          So Whittlesea, for example, has the highest rate of family  
31          violence in the division.   They have a sergeant and 10

1 constables and senior constables and one detective with a  
2 family violence portfolio. Darebin would be the next team  
3 and Banyule is also the same. They have a sergeant, six  
4 constables and senior constables, and the same, a  
5 detective with a family violence portfolio.

6 MR MOSHINSKY: Then there's 11 family violence liaison  
7 officers. Is it correct to say there is one of those for  
8 each police station?

9 SERGEANT SPRIGGS: Correct.

10 MR MOSHINSKY: Is that a full-time position or do they have  
11 other duties as well?

12 SERGEANT SPRIGGS: It is a portfolio role, so they are expected  
13 to do normal sergeants' duties which will include patrol  
14 supervisor duties as well and just do their portfolio  
15 work. They will be assigned time to do that on their  
16 roster.

17 MR MOSHINSKY: Your role as family violence adviser, you  
18 indicated there is one family violence adviser for the  
19 whole of the division?

20 SERGEANT SPRIGGS: That's correct.

21 MR MOSHINSKY: I will come back in more detail later to how the  
22 family violence teams work in your area and how they work  
23 more generally. First of all, I would like to just go  
24 through some basic matters about a call-out in a family  
25 violence context and what are the steps that occur and  
26 what are the options that then exist. Perhaps can I ask  
27 you to comment on an example where let's imagine there's a  
28 call-out to 000. The initial call goes through to the  
29 Emergency Services Telecommunications Authority, the  
30 acronym for that is ESTA, and we have a statement later in  
31 the day from Inspector Fergusson about ESTA, so I don't

1 want you to go into too much detail about what happens at  
2 the 000 point. But assume it's been received and then put  
3 through to police. What happens next in terms of the  
4 police response?

5 SERGEANT SPRIGGS: So the police response, and it is guided by  
6 the Code of Practice, that it has the options model in  
7 there and it's part of one of the attachments of my  
8 statement. So I will talk you through what a police  
9 response would look like.

10 Regardless of where the call came from, it may  
11 have come from within the household, it may have come from  
12 a friend, a family member, somebody walking past, a  
13 neighbour. By whatever means, the call gets made to 000.  
14 The operator would despatch the call over the radio to a  
15 unit in the area to attend. So the police members in the  
16 unit would - initially what they would be doing is  
17 beginning a risk assessment at that time based on the  
18 information that was provided in the call. Sometimes that  
19 information can be lacking. There may be very little  
20 information. Some calls that come through to us don't  
21 have any conversation. It's just that the phone call has  
22 been made and no one has spoken.

23 COMMISSIONER NEAVE: Can I just clarify something that I didn't  
24 follow. So the unit isn't necessarily a family violence  
25 liaison unit, is it?

26 SERGEANT SPRIGGS: No, not necessarily.

27 COMMISSIONER NEAVE: It's just people who are out on - - -

28 SERGEANT SPRIGGS: General duties patrol, yes. So, they will  
29 begin a risk assessment when they first get that job.  
30 They will be informed by the information contained in the  
31 call. Sometimes we will get the address. Sometimes we

1 won't and we will have to establish that from the call  
2 through ESTA. Then sometimes we will get the address.  
3 Sometimes we will get names of people involved in the  
4 incident and sometimes we won't.

5 By whatever means, whether we have to do a  
6 location check to establish what names we have on our LEAP  
7 database associated with that address. We are looking for  
8 warning flags associated with those people at the house.  
9 We want to know whether they have got any current  
10 intervention orders in place and we want to further our  
11 risk assessment around those factors that we find out and  
12 come up with the beginning of a plan as to how we are  
13 going to attend and what level of resources we might need.  
14 It may be determined that we need more than one police  
15 unit to attend, so police will inform themselves by what  
16 they hear about that information.

17 That information, the warning flags, et cetera,  
18 may include use of weapons, assaulting police, mental  
19 health flags, those sorts of things. So whether it's one  
20 police unit or two police units, a patrol supervisor will  
21 be listening to all the radio jobs that are given out to  
22 the police units and they are given out via the computer  
23 aided dispatch system as well.

24 MR MOSHINSKY: If I could just interrupt you at that point.

25 You mention the patrol supervisor. So what's the role of  
26 the supervisor in this process?

27 SERGEANT SPRIGGS: For each police service area there will be a  
28 patrol supervisor, so that's sergeant rank, and he is  
29 responsible for police service provision within that  
30 police service area.

31 MR MOSHINSKY: So he or she monitors what's going on and would

1           be aware that the call's come in and a van perhaps is on  
2           its way to the home?

3   SERGEANT SPRIGGS:   That's correct.

4   MR MOSHINSKY:   In terms of what information is available to the  
5           police members who are in the van and may be on their way  
6           to the home, can I just ask you what level of rank are we  
7           talking about that the police members would be who are  
8           going out to the home typically?

9   SERGEANT SPRIGGS:   Generally they will be constables and senior  
10           constables and a combination thereof.   One of the other  
11           factors that may guide them in a risk assessment is the  
12           history of family violence, if there's sufficient time to  
13           be able to get some of that information.

14   MR MOSHINSKY:   So what type of information about history is  
15           available and through what mechanism?

16   SERGEANT SPRIGGS:   So we are relying - generally speaking they  
17           won't be in a position to be able to extract that out of  
18           the terminal in the car.   Usually they will be driving  
19           quickly to the job and they will be listening to the radio  
20           operator who will be providing the information.   So they  
21           will access the LEAP database and they will be looking  
22           into recent family violence involvements and what risk  
23           factors were present in those and what the members need to  
24           concern themselves about in their next attendance.

25   MR MOSHINSKY:   So the LEAP database, would that have on it, for  
26           example, past intervention orders or past breaches of  
27           intervention orders, that type of information?

28   SERGEANT SPRIGGS:   Yes.

29   MR MOSHINSKY:   And that should be made available to the police  
30           members who are on their way to a home?

31   SERGEANT SPRIGGS:   Depending on time, as to what level can be

1 provided.

2 DEPUTY COMMISSIONER FAULKNER: Mr Moshinsky, just one very

3 quick interruption. LEAP data about intervention orders

4 in what period of time? In a lifetime or the last

5 12 months?

6 SERGEANT SPRIGGS: I believe that they all remain on LEAP.

7 I heard the other day of intervention orders dating back

8 12 years ago. Beyond that, I don't know. But at least,

9 yes, it does go back, so current orders and expired orders

10 are on there as well.

11 COMMISSIONER NEAVE: Can I just follow up. So there is a LEAP

12 terminal in the car?

13 SERGEANT SPRIGGS: Yes.

14 COMMISSIONER NEAVE: And is there a delay? We all know about

15 slow computer systems, but is there a problem about sort

16 of getting that information technically?

17 SERGEANT SPRIGGS: No. So, the radio operator will be giving

18 the job out. He has to call the members and they have to

19 acknowledge that they are going to be receiving the job

20 and they will be attending. As soon as he starts saying,

21 "I'm going to be sending it through," it actually makes a

22 noise, you can hear it come up on the terminal and the job

23 has arrived. You can open it and read it as the operator

24 is conveying the information to you as well.

25 COMMISSIONER NEAVE: So that's the job. But what about the

26 information about prior orders which you get out of LEAP,

27 the history. That's on the job or you access it

28 separately? I'm just trying to imagine how you are

29 working.

30 SERGEANT SPRIGGS: That would be accessed separately and you

31 would rely on that being conveyed by the operator over the

1 radio.

2 COMMISSIONER NEAVE: I see. So it's sent by the operator

3 rather than the police person accessing the LEAP database

4 directly themselves in the car?

5 SERGEANT SPRIGGS: The member could do that in the car, but

6 obviously we are trying to respond to a family violence

7 incident quickly. Generally what they will rely on is the

8 operator to give them the history, the location checks and

9 the warning flags verbally over the radio.

10 COMMISSIONER NEAVE: Thank you.

11 MR MOSHINSKY: Sergeant Spriggs, can I ask you about

12 prioritisation. How does that work? Is there any

13 priority given to family violence incidents? How do the

14 police manage that issue?

15 SERGEANT SPRIGGS: Priority is given to safety. So, if any

16 incident is happening and it endangers the safety of any

17 person, then that job will be given priority over other

18 jobs which do not endanger safety. So whether it's a

19 traffic accident that is going to endanger more people or

20 whether it's a family violence incident, whichever is

21 going to impact the safety of the public, police will

22 respond to that first.

23 MR MOSHINSKY: Are you able to comment on response times?

24 Clearly it will vary quite a lot between one case and

25 another, but can you give some sort of indication of what

26 one might be looking at in different scenarios?

27 SERGEANT SPRIGGS: Yes. Police resources are a factor that

28 affect response time as well as family violence response

29 itself. At any one time in one of my police service

30 areas, say, for example on a day shift, I would have a

31 divisional van running out of each police station as a

1 minimum. If I have two of those vans tied up at accidents  
2 or a family violence incident, I may have to call a van  
3 from further away. The physical geographical location of  
4 where that divisional van might be at the time when the  
5 job arrives and where the job is, you might be talking  
6 about two minutes or you might be talking about 30 minutes  
7 if I have to call a van from further away that's the next  
8 available. So it can be quite broad, the range of times  
9 to get to a job.

10 Other jobs, that if you are talking about a  
11 family violence incident which is verbal, non-threatening,  
12 non-violent, and a job comes in where there's a higher  
13 threat level, we may have to prioritise that before the  
14 family violence job that's a verbal incident, in which  
15 case you may be talking even longer.

16 MR MOSHINSKY: What happens in a call-out situation where the  
17 police members attend a home? Can you please explain in  
18 broad terms the process and what the Code of Practice  
19 requires?

20 SERGEANT SPRIGGS: So, the members have informed themselves  
21 through the risk assessment and the job that has been  
22 relaid to them en route to the house. As they are  
23 approaching the house, it's a quite unique situation that  
24 they are about to go through the door and it may involve a  
25 threat to their personal safety, what they might find on  
26 the other side of that door. So they will be listening as  
27 they approach the door for sounds of violence, breaking  
28 glass, yelling, those sorts of things.

29 They will knock on the door. There may not  
30 always be an answer. They will enter the house or find a  
31 way into the house. Once they get inside, there's no real



1 knowing of what they are going to find once they go  
2 through that door. So they will go in with their eyes and  
3 their ears open. They will looking at what they see with  
4 regards to all of the people in the house. Obviously they  
5 are looking for aggression, to protect themselves against  
6 that. They will be looking for signs of violence, so  
7 damaged property, blood, signs of injury, those types of  
8 things. How many perpetrators are there. Access to  
9 weapons. Whether there's children in the house.

10 Basically they are informing themselves that they  
11 need to manage that incident. That may mean that, if  
12 there is an aggressive party in there, that person may  
13 have to be restrained in the first instance to allow them  
14 to gain control and then do further work in relation to  
15 what has occurred.

16 So, once they have gained control of the  
17 incident, they will endeavour to separate the parties.  
18 The reason that they separate the parties is so that  
19 control and coercion the perpetrators use against an  
20 affected family member can be minimised so that the  
21 affected family member is free to give their version of  
22 events and we can work towards not only extracting what  
23 has happened in that incident, but also a history of  
24 family violence and control and coercion so that we can  
25 gain a full picture and conduct a risk assessment about  
26 what's occurred and what's occurred in the past.

27 MR MOSHINSKY: If the information about past history hasn't  
28 come through by the time the police members get to the  
29 home, by the time they are questioning separately those in  
30 the home would they usually have access by this stage to  
31 the past history of intervention orders, breaches, for

1 example?

2 SERGEANT SPRIGGS: No, not at that point when they are inside  
3 the house. They would be relying on the victim to tell  
4 them what's gone on as far as history goes. That may not  
5 be something that the victim is willing to do or feels  
6 comfortable to do at that point. They would normally make  
7 those enquiries after they had control of the situation.  
8 If required, depending on how many police attend, one may  
9 step aside and make further enquiries via the radio to get  
10 that information to factor into their risk assessment.

11 MR MOSHINSKY: Then there's a questioning process and then  
12 there's a number of pathways. Is it convenient now to  
13 talk about the different options or are there other steps  
14 that should be discussed first?

15 SERGEANT SPRIGGS: No.

16 MR MOSHINSKY: Should we bring up the slide?

17 SERGEANT SPRIGGS: You can bring up the slide. Yes, we are  
18 sort of half the way through it already.

19 MR MOSHINSKY: Commissioners, can I just indicate that the  
20 document that's being brought up on the screen is perhaps  
21 more easily seen in the materials as exhibit MS-3 to  
22 Sergeant Spriggs' statement, and in particular - I'm not  
23 sure if the pages are numbered, but - - -

24 COMMISSIONER NEAVE: It is a Powerpoint presentation?

25 MR MOSHINSKY: Yes, about half a dozen pages in. It is WIT and  
26 it ends in 0101. It is a flowchart headed "Victoria  
27 Police options model". What is on the screen is a  
28 composite of that page and the next two pages. Sergeant  
29 Spriggs, could you talk us through what the option model  
30 requires, please?

31 SERGEANT SPRIGGS: The options model which is on the screen is

1 taken directly out of the Code of Practice. What you see  
2 in the attachment is the same information that I use in  
3 presentations, internally and externally. We have worked  
4 our way down there. We are in the large box on the first  
5 page that starts with "Assess the immediate threats and  
6 risks and manage the incident", which is taking control of  
7 what's occurring inside the house to make sure it's safe  
8 to continue to the next phase.

9 The next part is identifying the primary  
10 aggressor. Sometimes for police this can be extremely  
11 difficult, particularly where you've had parties involved  
12 in an incident where it has been drawn-out, you may have  
13 had property or objects thrown at each other for three  
14 hours prior to police attendance. By the time police  
15 attend it can be very difficult to work out who is the  
16 primary aggressor when they are both either acting as  
17 aggressors or defensively. Sometimes it can be very  
18 difficult to determine who is the primary aggressor.  
19 Similarly, if we go to a family violence incident and we  
20 are talking about a verbal incident that is  
21 non-threatening, non-violent, trying to determine an  
22 aggressor out of an incident that is verbal can be  
23 difficult as well.

24 MR MOSHINSKY: Does the Code of Practice require the police  
25 member nevertheless to identify a primary aggressor?

26 SERGEANT SPRIGGS: Yes, we do have to identify a primary  
27 aggressor. The Code of Practice has a fallback position  
28 in that, if you cannot identify a primary aggressor, then  
29 you factor in the party that's most in need of protection  
30 into your risk assessment. So, if we are talking about a  
31 man who is 6-foot-2 and a woman who is 5-foot-nothing,

1           then the police would be building their protective factors  
2           around the woman.

3 MR MOSHINSKY: Please continue in terms of talking through the  
4           steps.

5 SERGEANT SPRIGGS: Based on the account of the incident and the  
6           history that's been provided by the affected family  
7           member, we make an assessment. We are looking for  
8           criminal offences. We are looking for risk and  
9           vulnerability factors in the account that she's providing  
10          us, in line with the Common Risk Assessment Framework and  
11          what's required in the L17.

12                 We would record that risk assessment on the  
13          family violence risk assessment management form, the L17,  
14          as it's being relayed to us from the affected family  
15          member. At the same time as we are doing that, the other  
16          police member would also be having a conversation with the  
17          perpetrator to establish his version of events at the same  
18          time. Based on that risk assessment and the level of  
19          protection required and any criminal offences identified,  
20          police would follow - that would guide the police in  
21          following the three tiers of response which is divided up  
22          into criminal action, civil protection and referral  
23          pathways.

24 MR MOSHINSKY: Can I interrupt you at that point. I will come  
25          back to the risk assessment and management form with some  
26          more detailed questions shortly. I will put that to one  
27          side at the moment. But in terms of trying to identify if  
28          there's any criminal conduct, would that include breach of  
29          an intervention order?

30 SERGEANT SPRIGGS: Yes. So typically we would be looking for  
31          threats, damages, assaults, stalking and any breaching of

1 intervention orders.

2 MR MOSHINSKY: So it would seem to be critical to know whether

3 there is already an intervention order in place; is that

4 right?

5 SERGEANT SPRIGGS: Correct, yes.

6 MR MOSHINSKY: Would that information normally be available to

7 the constables who are in the van?

8 SERGEANT SPRIGGS: Yes, en route to a job you would be looking

9 to find out whether there is an existing intervention

10 order in place and whether it is active and served.

11 MR MOSHINSKY: In your experience, is that normally available?

12 If there is an intervention order, it is provided?

13 SERGEANT SPRIGGS: Yes.

14 MR MOSHINSKY: If we then go to the three pathways, could you

15 explain what each of those are?

16 SERGEANT SPRIGGS: So, the criminal element, if we have had an

17 injury/assault we would be looking to gather evidence

18 about that as well. So if we had marks on a victim or

19 injuries, if we are talking about criminal damage to

20 whatever object, we would be gathering evidence of that

21 criminal offending. That would be a statement from the

22 affected family member, photographs of the incident. They

23 may be taken either by the van crew who attend or we may

24 call in the crime desk to take photographs of the scene

25 for us.

26 MR MOSHINSKY: Just pause at that point. I think you have been

27 in the hearing room today?

28 SERGEANT SPRIGGS: Correct.

29 MR MOSHINSKY: You have heard the evidence from Ms Tucker

30 earlier today that in her observation police don't always

31 gather evidence at the scene such as taking photos.

1 Obviously I can't ask you to comment on any individual  
2 cases, but in terms of what is proper practice, is  
3 evidence gathering such as taking photos at the scene, if  
4 there is evidence such as broken properties, holes in  
5 walls, et cetera, is that supposed to be part of the  
6 process?

7 SERGEANT SPRIGGS: Yes. We will make every attempt to put all  
8 available information into a brief of evidence to put  
9 before the courts.

10 MR MOSHINSKY: And that's supposed to be gathered at the time  
11 of that initial call-out?

12 SERGEANT SPRIGGS: Yes, as much as is possible. For instance,  
13 we still have to process that scene and gather the  
14 evidence from that scene. We won't leave if there's a  
15 chance we are going to lose that evidence. We will gather  
16 that then and there. Some evidence gathering may wait  
17 until the next day, for example a statement off a  
18 neighbour or the original caller, whoever that was, and so  
19 as much as possible we will gather all available evidence  
20 at the time, as close as possible to.

21 DEPUTY COMMISSIONER NICHOLSON: Do attending officers as a  
22 matter of course carry a camera with them, do they?

23 SERGEANT SPRIGGS: Pretty much every member I know of has a  
24 smartphone with a camera on it. The police stations  
25 themselves do provide cameras. It is depending on the  
26 member's individual position on it whether they use the  
27 station camera, whether they use their own camera.  
28 Alternatively, as I said, you can call the crime desk if  
29 they are out working at that time and they will come in  
30 and photograph the whole crime scene for you.

31 MR MOSHINSKY: Sergeant Spriggs, can you explain what the three

1 different options are in the diagram?

2 SERGEANT SPRIGGS: Yes. Getting back to the criminal element,  
3 obviously we are gathering as much evidence as we can with  
4 a view to charging a perpetrator. At that time, if we are  
5 determining that we have a power to arrest the  
6 perpetrator, usually what will happen is that another  
7 divisional van will take that perpetrator back to the  
8 police station and begin the processing while we are  
9 gathering the rest of the evidence.

10 The options that we would look at would be charge  
11 and remand, charge and bail, charge and summons, and  
12 intent to summons, and following the submission of a full  
13 brief of evidence, a consideration of no further police  
14 action.

15 At the same time as we are doing that, we will  
16 also be guided by our risk assessment in determining what  
17 level of civil protection is required. If there's  
18 threats, damages, assaults, stalking, and we have  
19 immediate concerns, a sergeant or above can issue a family  
20 violence safety notice, which is an application for an  
21 intervention order . When served on both parties, that's  
22 immediately in effect and will last for five days and will  
23 allow the matter to be heard and determined at the court  
24 as far as civil protection goes.

25 MR MOSHINSKY: If I just interrupt you there. One option is  
26 issuing a safety notice. Another is making an application  
27 for an intervention order?

28 SERGEANT SPRIGGS: A safety notice is an application for an  
29 intervention order, the difference being if we have the  
30 perpetrator there and the affected family member there and  
31 we have the grounds for the issue, we can issue it. We

1 must be able to serve it on both parties for it to be in  
2 effect. If the perpetrator has left the address, then we  
3 don't know where he is, we may have to make application  
4 and warrant and go back, put the evidence before a bail  
5 justice or a magistrate to get the warrant to begin that  
6 application process.

7 MR MOSHINSKY: Is the difference between when you decide to  
8 issue a safety notice rather than making an application  
9 for an intervention order, does that depend on whether the  
10 perpetrator is available to be served or are there other  
11 considerations?

12 SERGEANT SPRIGGS: That is one of the factors, that we have to  
13 have him on hand or be able to reasonably know where he is  
14 and to effect service on him in a reasonable amount of  
15 time. If we don't have that knowledge, we don't know  
16 where he is, we don't know if we are going to be able to  
17 find him, then a family violence safety notice is not an  
18 option and we will proceed by application and warrant.

19 MR MOSHINSKY: The effect of a family violence safety notice,  
20 is that to exclude the perpetrator from the premises?  
21 Will that be one of the conditions in the safety notice?

22 SERGEANT SPRIGGS: There is a range of conditions listed on the  
23 family violence safety notice. Exclusion is one of those,  
24 a prohibition from committing family violence, damaging  
25 property, and there can be others, exclusion from the  
26 home, exclusion from place of work, exclusion from a zone  
27 around the affected family member or protected persons,  
28 being children usually, of a certain exclusion metreage so  
29 if they were to go to a shopping centre, et cetera, then  
30 the perpetrator can't approach within a certain distance  
31 of them there. We can also use it to enforce the



1 perpetrator to allow items to remain in the home, to allow  
2 the normal running of the home.

3 MR MOSHINSKY: So assuming that the family violence safety  
4 notice has an exclusion condition that the perpetrator  
5 isn't allowed within a certain number of metres of the  
6 home - - -

7 SERGEANT SPRIGGS: Typically 200 metres, yes.

8 MR MOSHINSKY: And assuming you can serve the perpetrator, it  
9 will have immediate effect and last for five days which  
10 gives time to go to court; is that right?

11 SERGEANT SPRIGGS: Yes.

12 MR MOSHINSKY: What are the sorts of circumstances - how  
13 serious does the conduct have to be where the police would  
14 issue a family violence safety notice?

15 SERGEANT SPRIGGS: It would be broken down. So we are looking  
16 for threats, damages, assaults, stalking, that type of  
17 behaviour, and have immediate concerns, that's when we  
18 would issue a safety notice.

19 MR MOSHINSKY: Another option in the civil stream is applying  
20 for an intervention order from the court but not  
21 immediately issuing a safety notice.

22 SERGEANT SPRIGGS: Yes.

23 MR MOSHINSKY: You mentioned one situation you might do that if  
24 the perpetrator has left and you don't know where they  
25 are. Are there other circumstances where that might be an  
26 appropriate course?

27 SERGEANT SPRIGGS: Applications and summons, where we don't  
28 have immediate concerns, we can apply to the court for a  
29 summons for an application for an intervention order, and  
30 we may choose that option, depending on the individual  
31 circumstances of the matter.

1 MR MOSHINSKY: Is that all that you would say about the civil  
2 option box or are there other comments you wish to make?

3 SERGEANT SPRIGGS: Obviously where there's an existing order in  
4 place - there can only ever be one order in place between  
5 the parties. If there is an intervention order in place,  
6 then a safety notice or a change to the safety notice  
7 cannot be changed. So if a victim has a limited order in  
8 place we can't add an exclusion condition immediately. A  
9 sergeant can't do that. We have to apply to the court for  
10 an interim order to make that variation.

11 MR MOSHINSKY: Then the referral pathway, could you just  
12 explain that?

13 SERGEANT SPRIGGS: When police attend the family violence  
14 incident, while also considering the criminal action and  
15 the civil protection pathways, we will also do a referral  
16 for all parties involved. So we will do a referral for  
17 the AFM, we will do a referral for the perpetrator and we  
18 will also do referrals for children who are either present  
19 or normally reside with either of the parties.

20 MR MOSHINSKY: Can you explain what the difference is between a  
21 formal and an informal referral?

22 SERGEANT SPRIGGS: A formal referral would result from the  
23 police L17 being generated. So the LEADR Mark II system  
24 would generate that referral when they complete the L17.  
25 An informal referral is providing the information by hand  
26 regarding family violence services available to the AFM  
27 and the perpetrator.

28 MR MOSHINSKY: So informal is not direct to the family violence  
29 service?

30 SERGEANT SPRIGGS: No.

31 MR MOSHINSKY: It's by giving the information to the AFM or to

1 the perpetrator?

2 SERGEANT SPRIGGS: Directly, yes.

3 MR MOSHINSKY: In most cases it is a formal referral rather  
4 than informal; is that right?

5 SERGEANT SPRIGGS: In most cases, yes, a formal referral. We  
6 would ask members, "If you have concerns, then you should  
7 be doing a formal referral. If you don't have concerns  
8 and a person objects, then you can do an informal  
9 referral." It usually takes the form of the pink and blue  
10 help cards.

11 MR MOSHINSKY: I see. Can we come back to the L17 form. In  
12 your exhibit MS-3 in the same document over the page, if  
13 you have that, there's several pages which are an extract  
14 from the L17 form, which is the family violence risk  
15 assessment and management report. Could you just explain  
16 the practical process by which this is completed? What is  
17 done at the scene, sort of at the house? What is done  
18 back at the police station afterwards?

19 SERGEANT SPRIGGS: So the L17 is completed on a police computer  
20 back at the police station. The system that they use is  
21 called LEADR Mark II. At the scene members will be using  
22 their initial action pads or notebooks to be taking notes  
23 about what they have seen, what they have heard, the  
24 victim's account of the incident and their initial  
25 investigation. Those factors, as far as risk and  
26 vulnerabilities that are identified to them, when they get  
27 back to the police station and complete their L17 on the  
28 computer they would be including the victim's account of  
29 the incident and the risk and vulnerability factors into  
30 the L17 back at the police station.

31 MR MOSHINSKY: So at the scene are the police members typically

1 writing by hand in a notebook?

2 SERGEANT SPRIGGS: Correct.

3 MR MOSHINSKY: There is a long checklist, for example, on the  
4 third page of this form there's the section "Perpetrator,  
5 respondent, other party" and then there's a whole list of  
6 things starting with "harmed/threatened to harm AFM." So  
7 do they have that form in front of them or do they just  
8 make notes and then go back and fill in the form later?

9 SERGEANT SPRIGGS: They don't have the form in front of them  
10 and, yes, they do make notes. Having said that, members  
11 get experience with the use of this document and those  
12 risk and vulnerability factors very quickly. Any risk  
13 assessment they would be doing they would be looking for  
14 those risk and vulnerability factors in any conversation  
15 or incident that they did.

16 MR MOSHINSKY: When they get back to the station I think you  
17 have indicated that the form is now filled out  
18 electronically on LEADR Mark II?

19 SERGEANT SPRIGGS: Correct.

20 MR MOSHINSKY: Is that across the board around Victoria?

21 SERGEANT SPRIGGS: Yes.

22 MR MOSHINSKY: Is that a recent change from moving from a paper  
23 form to electronic?

24 SERGEANT SPRIGGS: Yes, and don't ask me to quote the date.  
25 I think it's on the timeline. I think we have had it for  
26 about two years, I believe.

27 MR MOSHINSKY: Okay. Then the referral process, assuming there  
28 is to be a formal referral, is it the parts of this form  
29 then go to different places; is that how it works?

30 SERGEANT SPRIGGS: Yes, I will explain how the referral process  
31 works. When a member completes an L17 on LEADR Mark II,

1 as soon as the member finishes the reports the referrals  
2 go off electronically to the family violence services.  
3 That's before the sergeant is able to check the report and  
4 commit that to our LEAP database. What goes is divided up  
5 according to the affected family member or perpetrator,  
6 male or female, and the age of the person involved and  
7 their postcode.

8 MR MOSHINSKY: If we are dealing with a situation where there's  
9 a female AFM, parts of the form would go to the local  
10 family violence service?

11 SERGEANT SPRIGGS: Yes, the information particular to the woman  
12 would be provided to the women's service. It would  
13 exclude the perpetrator's information.

14 MR MOSHINSKY: Parts of the form that relate to the perpetrator  
15 may go to - where would they go?

16 SERGEANT SPRIGGS: They would go, for our area, the men's  
17 active referral service and it would exclude the woman's  
18 details.

19 MR MOSHINSKY: You said it goes electronically. We have heard  
20 evidence about faxes coming through. Is the current  
21 practice for these to be sent by fax?

22 SERGEANT SPRIGGS: It 's electronic from our end when we send  
23 it, but frequently it comes out in the form of a fax at  
24 the other end. I believe there is some provision for a  
25 PDF document to be sent to government agencies.

26 MR MOSHINSKY: Commissioners, we will take up this issue with  
27 why it is by fax with the witnesses later in the day.

28 COMMISSIONER NEAVE: I did have one other question. I'm just  
29 looking at the form again. On the third page I think it  
30 is of the form there's material relating to, for instance,  
31 the particular incident which is about the perpetrator

1           which talks about sexual assault, harmed or threatened  
2           harm. Does that go to the service provider for the woman?  
3           Does that page go?

4   SERGEANT SPRIGGS: Yes.

5   COMMISSIONER NEAVE: What about the material on criminal  
6           action, civil action, referral action, other action on the  
7           bottom of that - the next page? It doesn't easily tear  
8           apart this information about the perpetrator on this form.

9   SERGEANT SPRIGGS: I just want to highlight about this form.

10          This is not the format that the referral agencies would be  
11          receiving. This is the form as it existed on VP Forms  
12          before the existence of LEADR Mark II, and this is the  
13          form that police would use if LEADR Mark II were not to be  
14          working for whatever reason, then they would use this as a  
15          fall back position. This is the form that's been used for  
16          presentation purposes only.

17                 So the way that the information would come out at  
18          a family violence service provider for a women's service  
19          would include some detail about what police action had  
20          been taken in relation to it regarding safety notices and  
21          criminal action to factor into their safety planning  
22          around the woman and their discussions, and it would  
23          include the narrative as well. But it would not include  
24          any identifying details for the perpetrator.

25   COMMISSIONER NEAVE: I think it would be helpful for us to have  
26          a version of the form as it looks when it is received by  
27          the service provider.

28   SERGEANT SPRIGGS: Yes.

29   COMMISSIONER NEAVE: Both for the woman and the man because  
30          they are going to be different forms, and that puzzled me  
31          a little because I kept looking at this form and thinking

1           there's a whole load of information on here about the  
2           perpetrator and yet the service providers were saying, "We  
3           need more information about the perpetrator." I'm not  
4           sure, counsel, whether we have those two documents  
5           elsewhere in our materials, but it would be helpful,  
6           I think, to have that. That's so right across the state,  
7           isn't it?

8   SERGEANT SPRIGGS: That's correct.

9   COMMISSIONER NEAVE: In effect there is an L17 and then there  
10          are two, possibly three other forms because there will be  
11          the Child Protection one, there will be the one that  
12          goes - - -

13   SERGEANT SPRIGGS: The Child Protection information will  
14          typically be the whole L17, including the affected family  
15          member and the perpetrator's details included.

16   COMMISSIONER NEAVE: So the Child Protection get the whole lot.  
17          The men's services get one version and the affected family  
18          member services get another version which contains some  
19          but not all of this information; have I understood it  
20          correctly?

21   SERGEANT SPRIGGS: Yes, to that degree. There is another  
22          complicating factor that if the AFM or the perpetrator is  
23          a child and our system sends the referral that way that  
24          they may not get the other parties' details because of the  
25          way that it's separated and sent, and that's something  
26          that we are currently working on.

27   COMMISSIONER NEAVE: So it would be helpful I think if the  
28          Commission could be provided with all of those documents.  
29          I note what you say about the child's document, but if we  
30          could have the current one that would be helpful.

31   SERGEANT SPRIGGS: Yes.

1 COMMISSIONER NEAVE: Thank you.

2 MR MOSHINSKY: Commissioners, just to indicate, I will take up  
3 the policy issue of what information should be provided to  
4 who later in the day with the Assistant Commissioners.

5 Sergeant Spriggs, just to provide context for  
6 later evidence that you will give, the L17 form that we  
7 have in front of us doesn't involve a weighting or a  
8 scoring process; is that right?

9 SERGEANT SPRIGGS: That's correct.

10 MR MOSHINSKY: As a result of completing this form do the  
11 police members form some assessment of the risk as low,  
12 medium or high or is it dealt with in some other way?

13 SERGEANT SPRIGGS: It does have a tick box on it, I believe,  
14 for high risk. But ultimately they are guided in their  
15 action by the overall risk assessment and then divide  
16 their response up as the criminal, civil and referral  
17 responses.

18 MR MOSHINSKY: So the outcome is really to choose which of  
19 those pathways, and it may be more than one of those  
20 pathways?

21 SERGEANT SPRIGGS: Yes, it can be a combination. It can  
22 include all three. It can involve the use of holding  
23 powers. The Code of Practice is a pro arrest document.  
24 So where we have the power to arrest someone we will use  
25 it so that we are sending a strong and consistent message  
26 to the perpetrators that they will be held to account for  
27 their actions.

28 When the members choose based on their risk  
29 assessment what the criminal action is going to be, what  
30 the civil action will be and obviously referrals for all  
31 matters, a supervisor has the responsibility to make sure



1       that that is appropriate to the circumstances and the  
2       disposition of the offender is suitable in the  
3       circumstances.

4               Also the L17 itself is checked by a supervisor as  
5       well. There's always a supervisor present when an  
6       offender is being processed to guide them in the decisions  
7       about charging and disposition. In addition to what you  
8       see on here, depending on the areas and how they use their  
9       family violence teams, there may be an additional layer of  
10      checking as well that the family violence teams do.

11   MR MOSHINSKY: One of the comments that's been made by a number  
12      of witnesses and in submissions is that children who are  
13      present at an incident, that fact isn't always recorded on  
14      the L17 when it should be. What does the Code of Practice  
15      require in terms of whether children are present? Should  
16      that information be recorded?

17   SERGEANT SPRIGGS: Yes, the information should always be  
18      included on the L17 when children are present or normally  
19      reside. In reality, sometimes that can be quite difficult  
20      to determine. When you walk into a house, if it 's in,  
21      say, for example, 2 o'clock in the morning and you don't  
22      see any toys, you don't see any shoes, and you may ask  
23      about children or sometimes the members may not ask about  
24      children, but if there is no evidence of children then it  
25      may be difficult for the members to find out the presence  
26      of children. The other thing is that the children may not  
27      necessarily reside in that household but they are children  
28      of one of the parties and reside in another household.  
29      So, depending on the risk assessment, an individual risk  
30      assessment for those children may need to be conducted as  
31      to what risk they are at even in another household.

1 MR MOSHINSKY: Can I ask you about non-physical forms of family  
2 violence, emotional or psychological abuse or financial  
3 abuse. How should police deal with those situations,  
4 whether it's a call-out to a home or whether it's someone  
5 coming into a police station to report that type of abuse?

6 SERGEANT SPRIGGS: We and the Code of Practice says whenever  
7 you are having a discussion with a person about a family  
8 violence incident, whether it is some of those non-violent  
9 suggestions or complaints that we receive, you are doing a  
10 risk assessment as soon as you start that conversation.  
11 So the advice to members is, "If you are doing a risk  
12 assessment, record it on the form and be guided in your  
13 risk assessment and record what action you took as far as  
14 criminal, civil and referral options were taken."

15 It may be that that initial discussion may not  
16 involve any criminal offences such as assault or criminal  
17 damage. However, if it's on a family violence safety  
18 notice or an intervention order that's in place and in  
19 effect those things may constitute an offence and need to  
20 be actioned accordingly. But we say to all members, "Do a  
21 risk assessment. Record your risk assessment on the L17  
22 and take the action as appropriate."

23 MR MOSHINSKY: If a member of the public comes into a police  
24 station, for example, and they describe a situation where  
25 a family member is being psychologically or emotionally  
26 abusive, bullying, standover tactics, for example, would  
27 an L17 form be completed in that scenario?

28 SERGEANT SPRIGGS: Yes.

29 MR MOSHINSKY: It should be?

30 SERGEANT SPRIGGS: Yes.

31 MR MOSHINSKY: So when we look at the figures, say, the 65,000

1           number of incident reports that are prepared each year  
2           that will include situations such as that?

3   SERGEANT SPRIGGS:   Yes.

4   MR MOSHINSKY:   Would the police at the station in that scenario  
5           take action such as applying for an intervention order or  
6           would they recommend that the affected family member  
7           themselves take action?  Is there a protocol for dealing  
8           with that?

9   SERGEANT SPRIGGS:   Depending on the position of the victim at  
10           that stage and whether they are ready to have the police  
11           apply for an intervention order, some members of the  
12           public will come in and they just want advice, they don't  
13           want an intervention order or they don't want police  
14           action, and they will make that quite clear from the  
15           outset.  Some will want just information; they just want  
16           to talk to a policeman about what's going on in their  
17           house.  We will encourage members to capture that in the  
18           form of a risk assessment.  But at the end of the day if  
19           the victim chooses they do not want a police response and  
20           they don't want any civil protection then that may be what  
21           we have to remain respectful of.

22                   We may make application to the court for an  
23           application and summons on their behalf.  We may ring up  
24           and make a booking for them at the court for them to make  
25           an application to the court or they might say to us,  
26           "Leave it with me.  I will go and make my own application  
27           to the court," and some may say, "I don't really want to  
28           do anything about it at this point."

29   DEPUTY COMMISSIONER FAULKNER:  Can I just clarify.  I had one  
30           person tell me recently that they did go to the police  
31           station and they were dealt with by the person at the

1 front who suggested that because there was no physical  
2 imminent threat that they should go home and call 000 if  
3 it becomes a problem. She didn't notice anything being  
4 written or anything like that. Would she be not seeing  
5 something that happens after she leaves? Would that be  
6 recorded as someone who comes to ask for assistance and is  
7 turned away at the front desk to say, "If it gets worse,  
8 ring up 000"?

9 SERGEANT SPRIGGS: Certainly if there have been no names  
10 recorded then I would suggest that, no, they are not going  
11 to record it on an L17 and do a risk assessment. So that  
12 would be a poor response. That is not what we would  
13 expect of our members, and certainly we would be looking  
14 to address that shortcoming.

15 DEPUTY COMMISSIONER FAULKNER: Thank you.

16 MR MOSHINSKY: Could I just ask you briefly about the role of  
17 the victim, assuming there is a call-out to a home and the  
18 victim doesn't want the police to issue a safety notice or  
19 to apply for an intervention order. Will the police  
20 nevertheless do so in some circumstances? What role does  
21 the victim's view have in the decision the police make  
22 about their next steps?

23 SERGEANT SPRIGGS: The Code of Practice is quite prescriptive  
24 about what responsibilities members have placed on them in  
25 certain circumstances. So where we have the presence of  
26 threats, damages, assaults, stalking we will be putting  
27 some civil protection in place. Even if the victim says,  
28 "I don't want a safety notice," we will still issue one in  
29 the interim so the matter can be determined by the court  
30 as an application for an intervention order.

31 MR MOSHINSKY: You may have a situation where the victim

1 doesn't want the police to issue a safety notice and the  
2 police nevertheless issue one which excludes the  
3 perpetrator from the house?

4 SERGEANT SPRIGGS: That's correct.

5 MR MOSHINSKY: And you will do that if there is evidence which  
6 the police members believe is criminal conduct?

7 SERGEANT SPRIGGS: Yes, as long as we have immediate concerns  
8 about.

9 MR MOSHINSKY: If you have immediate concerns for safety?

10 SERGEANT SPRIGGS: Yes.

11 MR MOSHINSKY: In terms of referrals to services, if we perhaps  
12 focus on the AFM, is the AFM's consent sought before there  
13 is a formal referral to a family violence service?

14 SERGEANT SPRIGGS: For the most part we will inform the AFM and  
15 the perpetrator that their information will be provided to  
16 a family violence service provider and that they will be  
17 contacted.

18 MR MOSHINSKY: If they object to that course what happens?

19 SERGEANT SPRIGGS: If members have concerns they can still make  
20 the referral. But if they don't have concerns then we  
21 advise the members to do an informal referral and provide  
22 the information how to contact a family violence service .  
23 So usually the pink and blue help cards.

24 MR MOSHINSKY: By "concerns" what do you mean? You referred to  
25 concerns.

26 SERGEANT SPRIGGS: So concerns can be quite broad around the  
27 relationship: is there going to be continual issues within  
28 the relationship, family violence; do they need support;  
29 do the members believe that the affected family member may  
30 be minimising the risks to herself or the incident as we  
31 have had relayed to us; if we have concerned about the

1 children; generally just if we believe that that  
2 particular AFM is in need of a support service then we  
3 will make that referral.

4 MR MOSHINSKY: What about a circumstance where the perpetrator  
5 is excluded by a safety notice? What role, if any, do the  
6 police have in terms of accommodation or housing for the  
7 perpetrator? Do you make enquiries about that? Do you  
8 have any role in that regard?

9 SERGEANT SPRIGGS: Yes. Before a sergeant will issue a family  
10 violence safety notice we do take into consideration the  
11 accommodation needs of an excluded male. So we would  
12 explore what options he had available personally with  
13 family, friends et cetera. If it turned out that he did  
14 not have any other options then we would look at providing  
15 him with some temporary accommodation, usually through  
16 HomeGround Services.

17 MR MOSHINSKY: Would that similarly apply to an adult male, for  
18 example, who may be abusive to an older parent? Would the  
19 same sort of issues apply?

20 SERGEANT SPRIGGS: Yes.

21 MR MOSHINSKY: I understand that you have some statistics  
22 available about the different pathways based on your  
23 region.

24 SERGEANT SPRIGGS: Yes.

25 MR MOSHINSKY: Would you be able to indicate what that data is,  
26 about the different referral options and civil or criminal  
27 pathways?

28 SERGEANT SPRIGGS: So we had a look at the data over the last  
29 12 months and safety notices were issued in 16 per cent of  
30 our attendances or walk-ins at the police station in  
31 regards to family violence incidents. Charges were laid

1 in 37 per cent of family violence incidents that we  
2 responded to.

3 COMMISSIONER NEAVE: Did you say 16 or 60?

4 SERGEANT SPRIGGS: 16.

5 MR MOSHINSKY: So safety notices were in 16 per cent of - is  
6 that 16 per cent of L17s?

7 SERGEANT SPRIGGS: Yes.

8 MR MOSHINSKY: And criminal charges in 37 per cent?

9 SERGEANT SPRIGGS: Yes.

10 MR MOSHINSKY: And that includes both breaches of intervention  
11 orders and other criminal offences?

12 SERGEANT SPRIGGS: Correct.

13 MR MOSHINSKY: What about cases where there was a referral to a  
14 service? Do you have data on that?

15 SERGEANT SPRIGGS: Referrals I think at our area are running at  
16 about 95 per cent of all family violence incidents.

17 MR MOSHINSKY: Do you have a figure for cases where there was  
18 only a referral and no other steps taken?

19 SERGEANT SPRIGGS: So non-violent, non-threatening verbal  
20 incidents run at about half of all the incidents that we  
21 attend. So in those matters where there's no civil  
22 protection required, there are no criminal elements to be  
23 addressed then it would be referral only.

24 MR MOSHINSKY: In about 50 per cent of the L17s it was referral  
25 only and not the criminal or civil steps?

26 SERGEANT SPRIGGS: That's correct.

27 DEPUTY COMMISSIONER FAULKNER: 16 per cent safety notices.  
28 Isn't there another category where the police actually  
29 apply for an intervention order on behalf without issuing  
30 a safety notice?

31 SERGEANT SPRIGGS: Yes.

1 DEPUTY COMMISSIONER FAULKNER: What's the number there?

2 SERGEANT SPRIGGS: I don't know. More accurate numbers around

3 intervention orders and how they are obtained - because

4 people can walk into the Magistrates' Court and apply for

5 their own orders and we won't have a record of that until

6 it comes to us for service. But the Magistrates' Court's

7 annual report contains a break-up of the orders and how

8 they were initiated, whether they were police or

9 individual application, and it gives a bit more insight

10 into the full picture of intervention orders.

11 DEPUTY COMMISSIONER FAULKNER: Thank you.

12 MR MOSHINSKY: Sergeant Spriggs, do you have any data about the

13 approximate time taken by police attending incidents

14 perhaps at the home and the time they take back at the

15 station?

16 SERGEANT SPRIGGS: Obviously the time that members would spend

17 at an incident can vary dramatically depending on the

18 nature of the incident. If we are talking about a verbal

19 only incident it may be a 15-minute discussion at the

20 scene and it may turn into 20 minutes of filling out an

21 L17 back at the station, obviously travel time to the

22 incident, travel time to the station before they are

23 available again to attend to another incident, unless it

24 was given priority over the reports. That's at the lower

25 end of the scale.

26 At the upper end of the scale where we are

27 talking about criminal offending, if we have to gather

28 evidence, if we have to obtain statements at the scene, it

29 may go out to two hours or more. If we need to engage the

30 services of interpreters that will slow it down even

31 further. But we do have some incidents that will take a



1 van crew off the road for the entire eight-hour shift and  
2 even longer, taking into account the actual scene and the  
3 processing and then application for remand if that's  
4 applicable.

5 MR MOSHINSKY: Do you have data on analysing - - -

6 SERGEANT SPRIGGS: I did a time attribution study some time ago  
7 back when the L17 used to have on it an indication by the  
8 members how long they were tied up at the family violence  
9 incident, and that showed to be 2.2 hours per family  
10 violence incident on average; so taking into account the  
11 long ones and the short ones. I know Family Violence  
12 Command have been quoting the figure of 2.1 hours per  
13 family violence incident.

14 COMMISSIONER NEAVE: Is that at the scene or - - -

15 SERGEANT SPRIGGS: Yes. That is at the scene and processing,  
16 but will not include brief preparation or court time.

17 COMMISSIONER NEAVE: Thank you.

18 MR MOSHINSKY: But it includes, does it, going back to the  
19 station and completing paperwork immediately after the  
20 call-out?

21 SERGEANT SPRIGGS: Yes, but not brief preparation.

22 MR MOSHINSKY: Do you have any data on response times in terms  
23 of how long it takes to respond to a call-out?

24 SERGEANT SPRIGGS: I don't have data, but I can provide  
25 evidence in my experience of what it is like to try and  
26 provide a service to a family violence call-out as a  
27 supervisor. In any police service area there's obviously  
28 competing demands and rates of family violence as it comes  
29 in, and they fluctuate. You may have all of your units  
30 available and no jobs come in, in which case if a family  
31 violence call came at that time you would be able to

1       respond quite quickly, in a couple of minutes.

2               If we had many family violence incidents  
3       occurring and we had vans tied up I may have to reach out  
4       further outside of my own area or across into a  
5       neighbouring area to get a police response to be able to  
6       get to that house and provide an intervention. So you  
7       could be talking - if the police happen to be driving in  
8       that area you could be talking two minutes. But if the  
9       police in the area were all tied up, the number of  
10      different duties that police are expected to provide  
11      response for, if any of those things they are tied up at  
12      those then it may drag out the response time for an  
13      individual incident. But certainly if we are talking  
14      about an incident where there's a risk to safety and  
15      people are going to be injured, we will keep going further  
16      and further as far as necessary to get the first available  
17      police response to that incident.

18   DEPUTY COMMISSIONER FAULKNER: Is that data routinely collected  
19      then? Is there a data system that would say from time of  
20      call to time of turning up there's X number of minutes?

21   SERGEANT SPRIGGS: The members do record their arrival time on  
22      the computer aided despatch system. So we do record it,  
23      but I don't have access to that.

24   DEPUTY COMMISSIONER FAULKNER: Thank you.

25   MR MOSHINSKY: In the remaining time to 1 o'clock I want to now  
26      focus on some of the specific initiatives that you  
27      describe in your witness statement that have been taken up  
28      in the division. First of all, I would like to ask you  
29      about - and this is paragraph 69 and following of your  
30      statement - the way the family violence teams work in your  
31      division. Can you explain to the Commission what the

1 three family violence teams do in your division and  
2 perhaps how that's different to what family violence teams  
3 do elsewhere?

4 SERGEANT SPRIGGS: Yes. In my area, as we have discussed,

5 I have three family violence teams. Each one of those  
6 family violence teams will review every family violence  
7 incident that occurs within the division. So that will  
8 involve during the day shift the family violence team  
9 would come on and they would look at all of the incidents  
10 that have occurred overnight since they last did the  
11 triaging.

12 They would be looking for opportunities. So we  
13 do an activity which is called - it's targeted towards  
14 recidivist reduction called First 48, and that will  
15 endeavour to engage with the family within 48 hours of the  
16 incident and it's particularly designed to try and support  
17 victims, and we may have conversations with perpetrators,  
18 and keep the victim engaged with the civil action, the  
19 criminal action and try and keep them engaged with support  
20 services.

21 MR MOSHINSKY: Can I just interrupt you then. The First 48

22 tool, which I think appears in that same exhibit, MS-3  
23 after the L17 form, you describe that as an actuarial  
24 tool, I think; yes. Is that a scoring or weighting tool?

25 SERGEANT SPRIGGS: Yes.

26 MR MOSHINSKY: Does that lead to an output which is whether

27 there's a low or medium or high risk to the victim in that  
28 case?

29 SERGEANT SPRIGGS: Yes, or very high.

30 MR MOSHINSKY: And how did that tool come about?

31 SERGEANT SPRIGGS: So that was developed not in my area. It

1 was developed by Senior Sergeant Wayne Stokes in Southern  
2 Division. They were using it the same way we were using  
3 it to identify opportunities to reduce recidivism, have a  
4 greater impact after a first or second incident to avoid a  
5 family having a third incident. There are scores  
6 associated to each of the risk and vulnerability factors  
7 that are identified on the tool. It is a prioritisation  
8 tool and it does assist the teams as to how they are going  
9 to manage a particular incident.

10 MR MOSHINSKY: I interrupted you. So the family violence team  
11 daily will review all of the incidents that have occurred,  
12 it will apply the First 48 risk assessment process which  
13 is a form of triaging?

14 SERGEANT SPRIGGS: Yes.

15 MR MOSHINSKY: What are their next steps?

16 SERGEANT SPRIGGS: They are also looking for high-risk matters.  
17 So they are looking for incidents where they can provide  
18 assistance to general duty members regarding the  
19 investigation; so whether it's going to get photographs,  
20 whether it's picking up a victim and taking them to get a  
21 medical assessment done; whether it's getting them engaged  
22 with a family violence service provider. They may also  
23 choose to take over high-risk investigations. They are  
24 also looking for opportunities to feed incidents where  
25 serious and imminent risk exists into the Northern  
26 High-Risk Response Conference.

27 MR MOSHINSKY: I will come to the Northern High-Risk Response  
28 in a moment. How does that description differ from  
29 general practice, if you are able to say?

30 SERGEANT SPRIGGS: That's half the description. That's the  
31 first half. So that's day shift. On afternoon shift all

1 of our family violence teams do primary response to family  
2 violence incidents. So they will actually have a car out  
3 on the road waiting for a family violence incident to  
4 happen and then they will go and provide primary response  
5 to it. They can also back up a divisional van or a patrol  
6 unit if they are already in attendance and take over the  
7 job or provide assistance to them managing the incident.

8 MR MOSHINSKY: Does that include the evenings as well?

9 SERGEANT SPRIGGS: Yes.

10 MR MOSHINSKY: So the family violence team itself is the  
11 primary responder in that shift?

12 SERGEANT SPRIGGS: Yes.

13 MR MOSHINSKY: And can you comment at all about having a sort  
14 of specialised team doing it rather than the general  
15 police members?

16 SERGEANT SPRIGGS: There's a lot of pressure on general duties  
17 police as far as time constraints go because they are  
18 expected to respond to a variety of incidents, and those  
19 incidents don't just get put on hold whilst you are  
20 responding to a family violence incident. So there is  
21 additional pressure on the divisional vans and the general  
22 duties members to get back out on the road so that they  
23 are available to provide response to other matters.

24 One of the benefits of the family violence team  
25 is that we are able to provide them with additional time  
26 to complete their investigation at the time, to gather  
27 statements, to make sure that we are wrapping those  
28 support services around the victim as far as Safe Steps or  
29 Berry Street. So we do provide them with additional time  
30 to complete the investigation, the civil action and the  
31 brief of evidence even and the family violence brief for

1 an application for an intervention order closer to the  
2 time of the incident.

3 MR MOSHINSKY: Having this primary response role, is that  
4 something that is unique to your area or is it done  
5 generally?

6 SERGEANT SPRIGGS: There's a range of different operating  
7 models for family violence teams. Originally in my area  
8 we were just doing First 48 recidivist reduction, morning  
9 and afternoon shift. However, it became clear to me that  
10 there was a need to provide some relief to the general  
11 duties members in providing the response to family  
12 violence. So the decision was made between myself and the  
13 superintendent of the day to split the response 50/50 so  
14 that we had that response capability to provide relief to  
15 the vans when they most needed it, usually afternoon  
16 shift, as well as providing an address for recidivist  
17 reduction.

18 MR MOSHINSKY: Is it your understanding that that primary  
19 response role is not across the board around Victoria for  
20 family violence teams?

21 SERGEANT SPRIGGS: There are different operating models, as  
22 I said. Some are geared all towards high risk. Some are  
23 geared all towards recidivist reduction. Not too many are  
24 providing primary response. Mine probably is unique in  
25 that we have split it down the middle and we have response  
26 crews available on every afternoon shift from every family  
27 violence team.

28 COMMISSIONER NEAVE: Counsel, just before we go on, the family  
29 violence teams don't do any general duties?

30 SERGEANT SPRIGGS: We have put a limit on our patrol  
31 supervisors that they are not to use a family violence

1 team response crew for anything other than family violence  
2 unless they are the absolute last available unit.

3 COMMISSIONER NEAVE: Thank you.

4 MR MOSHINSKY: Just one more question on the family violence  
5 teams in your area. They include a detective. Can you  
6 comment on whether that's a general thing across the state  
7 or special to your area and also why have a detective  
8 there and what does that add?

9 SERGEANT SPRIGGS: Detectives are not typically part of a  
10 family violence team. We have embedded detectives in all  
11 three of our teams. We have changed that somewhat to a  
12 family violence portfolio that's assigned to one of the  
13 detectives from each of the teams. The benefits of adding  
14 a detective to the team is that some investigations  
15 require the investigation to be handed over to the  
16 Criminal investigation Unit. What we find when we put the  
17 detectives into the team is that the members who are  
18 within the team with the guidance of the detective are  
19 able to retain more complex investigations and build their  
20 skills and knowledge with regard to investigating matters  
21 of that level.

22 They also have superior skills in tracking and  
23 locating offenders via various tools that we use, and they  
24 can spread that knowledge through the members. We also  
25 use the family violence detectives in relation to our  
26 priority target management plans in relation to at risk  
27 juveniles.

28 MR MOSHINSKY: I might ask you now about the Northern High-Risk  
29 Response Conference. Could you please outline for the  
30 Commission briefly how that works and how it came about?

31 SERGEANT SPRIGGS: The three family violence teams in my area

1 triage all family violence incidents and they are looking  
2 for matters where serious and imminent risk to life,  
3 health, safety or welfare exists. Where they do that we  
4 nominate matters to be discussed at the fortnightly  
5 high-risk response conference.

6 As far as the establishment of the conference  
7 goes, we were not one of the locations that had a pilot  
8 site for the RAMP, but I still had all of the serious and  
9 imminent risk sitting with my family violence teams in  
10 these areas. So I approached all of these agencies and  
11 said, "I want to run my own conference. We will lead it.  
12 You just turn up." We came to an agreement about this  
13 multi-information sharing meeting with regard to serious  
14 and imminent risk.

15 So the three family violence teams will triage  
16 all the family violence incidents. They are looking for  
17 serious and imminent risk, as I suggested. The top 16 of  
18 those matters will come to the fortnightly meeting. We  
19 will send out a list of the matters that we wish to  
20 discuss. It will involve a discussion with other services  
21 so that we have a shared understanding of "serious and  
22 imminent" and make sure that we establish that exists  
23 before information is shared in the meeting. Then once we  
24 have established that the information holdings for each of  
25 the partners to the conference will put their information  
26 forward and we will come up with individual and  
27 collaborative actions to mitigate the risk and hold  
28 perpetrators to account.

29 MR MOSHINSKY: Are you able to comment from your observation,  
30 if not evaluation, how effective it's been?

31 SERGEANT SPRIGGS: It's been very good. Determining a level to



1 which risk has been mitigated is a very difficult thing.  
2 I might also add any of our partner agencies can refer  
3 into this process through the family violence team. So if  
4 they have concerns that serious and imminent risk exists  
5 they contact the family violence team, they have a  
6 discussion and investigate further into the matter and if  
7 they share that understanding then it can be nominated  
8 into the conference.

9 As far as measuring the outputs of it certainly  
10 it allows us to get an understanding, a full picture of  
11 what's going on within a family as far as other services  
12 are provided. It gives us the opportunity to engage in  
13 collaborative actions and understand particularly  
14 timelines about when certain things are going to happen.  
15 What is, for example, Victoria Police's plan in relation  
16 to arresting, interviewing, charging, application to  
17 remand in custody of a perpetrator? That may factor into,  
18 say, Corrections, who may be monitoring him under a  
19 community corrections order. Child Protection may have  
20 some questions about that. Child Protection may also be  
21 able to provide us information with regards to what we are  
22 going to do.

23 So collectively it strengthens our risk  
24 assessments, provides individual further risk assessment  
25 around the children and it also allows us to build our  
26 action plans as a team. It's been really good. There's  
27 been some really positive outcomes out of it. It's kind  
28 of hard to talk about some of the work we do without  
29 identifying individual cases. But certainly there's  
30 actions that have come out of there that could not have  
31 happened any other way.

1 MR MOSHINSKY: Is it very similar to RAMPS or different to  
2 RAMPS? By RAMPS I'm referring to the risk assessment and  
3 management panels that have been the subject of earlier  
4 evidence.

5 SERGEANT SPRIGGS: It is very similar in the way that it  
6 operates in regards to RAMPS. How the cases get to be  
7 discussed is different because RAMPS are led by the  
8 agency, whereas the high-risk response conference is led  
9 by Victoria Police. My personal belief is that that is a  
10 more appropriate way to nominate serious and imminent risk  
11 because usually police are the only ones that have been  
12 inside the door in that household and seen the AFM and the  
13 perpetrator firsthand. So, with that regard, I think the  
14 information used to drive the meeting is most accurately  
15 risk assessed by the family violence teams. Sorry, what  
16 was the rest of your question?

17 MR MOSHINSKY: No, I think you have answered that. Thank you.  
18 Lastly, I want to ask you about the Whittlesea Family  
19 Violence Outreach Partnership at paragraph 91 and  
20 following which involves embedding a social worker two  
21 afternoons a week. Can you just briefly explain how that  
22 works and your observations about whether that's been  
23 effective?

24 SERGEANT SPRIGGS: Yes, in a minute. I will go back to your  
25 last question. One of the benefits of this being a  
26 police-led model is that all of our partners have  
27 indicated that the police-led model has a stronger focus  
28 on holding the perpetrator to account whereas the RAMP  
29 process appears to put a lot of weight back onto the AFM  
30 with regard to the way that the response is built around  
31 them. The next question?

1 MR MOSHINSKY: Turning to the Whittlesea outreach program, can  
2 you briefly describe how that works.

3 SERGEANT SPRIGGS: So, Berry Street, which is our family  
4 violence service provider for women, we had a discussion  
5 about co-location and what that could and would look like  
6 in our area if it was offered. So what we have done is we  
7 have embedded a family violence worker with the Whittlesea  
8 family violence team on two afternoon shifts, being a  
9 Wednesday and a Sunday afternoon, between 2 and 10 pm.  
10 Some of the work that they do, they will organise outreach  
11 appointments at the police station. Some of those  
12 appointments may just involve the worker, some may involve  
13 the worker and a member of the family violence team. Some  
14 appointments may be arranged at the house. There are  
15 rules around that as far as safety and exclusion orders,  
16 but family violence team members and a family violence  
17 worker may attend at the house to have a discussion with  
18 an AFM and build up some of the support that they are  
19 going to do around an AFM.

20 MR MOSHINSKY: What are your observations about that program  
21 and whether that's - - -

22 SERGEANT SPRIGGS: Another bit of work that they do is they may  
23 also do tasking that comes directly out of the high risk  
24 response conference. So, knowing that we have an embedded  
25 family violence worker in a police station, we may  
26 determine in this conference that that is the best  
27 approach to support a victim, is a joint interview with  
28 the police and a family violence service provider. So  
29 that's one of the other tasks.

30 It's been really good, because aside from  
31 the learnings out of the high risk response conference

1 about other agencies and how they operate and  
2 understanding the challenges for them and understanding  
3 the challenges for Victoria Police, we get an  
4 understanding of each other's agencies and our  
5 limitations. It also allows us to get insight into the  
6 way we do work and benefit from that and strengthen our  
7 own responses around our partners and how they work.

8 So we have seen that the family violence teams  
9 themselves have got a greater understanding about the  
10 service providers and the way they talk, the things that  
11 they offer victims, and our family violence teams start to  
12 talk and have those same sort of discussions like a family  
13 violence worker would, and similarly a family violence  
14 worker has in the back of their mind the way police work  
15 and the guidelines and limitations on criminal charging  
16 and the court process and civil protection and things like  
17 that, so they are able to better convey to a victim some  
18 of those aspects that would normally be the way the police  
19 would talk about it.

20 MR MOSHINSKY: Thank you. I'm not sure if the Commissioners  
21 have any questions for Sergeant Spriggs.

22 DEPUTY COMMISSIONER FAULKNER: You have obviously been working  
23 in this space a long time and done a lot of innovation in  
24 this space. I'm interested if I gave you a magic wand,  
25 what the next thing you might try would be?

26 SERGEANT SPRIGGS: The next magic wand I would like is probably  
27 a change to the Privacy Act so that we could do proper  
28 co-location, and the same sort of work that we see out of  
29 the high risk response conference that is allowed by the  
30 presence of serious and imminent risk, if that type of  
31 work was extended across all family violence, but

1       protected and more importantly empowered by the Privacy  
2       Act to make sure that all of the goodwill that we have out  
3       there to respond to family violence and produce safer  
4       outcomes for women and children and all victims of family  
5       violence, that that was actually protected and controlled  
6       but it was no longer just limited to this level.

7   DEPUTY COMMISSIONER FAULKNER:   Thanks, Sergeant.

8   SERGEANT SPRIGGS:   Just one other thing.   I find that when we  
9       are talking to victims, and we could see it in the earlier  
10      witness who was relaying her account of a family violence  
11      incident, I found that the challenges that goes on within  
12      a victim's mind and the challenges for police to overcome  
13      those barriers to break the cycle of violence will  
14      continue to be challenges.   We do a lot of work around  
15      training our members how to overcome those.   The family  
16      violence team, with the embedded family violence worker,  
17      go a long way towards overcoming some of those barriers  
18      that prohibit victims from proceeding with criminal action  
19      and civil action.

20   COMMISSIONER NEAVE:   Commissioner Nicholson has a question.

21   DEPUTY COMMISSIONER NICHOLSON:   Two quick questions.

22       Throughout our consultations we have often heard  
23       complaints about the L17s not being completed fully, and  
24       there's a lot riding on the data gathered from the L17s.  
25       This morning you have explained the complexity and the  
26       pressures faced by officers when they are responding,  
27       going to a household.   Often, I think you said, they were  
28       constables or senior constables, so relatively young  
29       police officers, I assume.

30               I assume also that it could be several hours  
31       before they go back to the station to fill out an L17;

1 would that be the case?

2 SERGEANT SPRIGGS: Sometimes, yes.

3 DEPUTY COMMISSIONER NICHOLSON: It struck me that in all those  
4 circumstances it's difficult to expect them to completely  
5 gather all of the data that is expected of them. Would it  
6 be better if those officers had some form of handheld  
7 device when they are attending an incident that would  
8 provide them with prompts so that they could gather as  
9 much of the relevant data as possible?

10 SERGEANT SPRIGGS: I think that it would help. Certainly the  
11 members build experience and subsequently confidence in  
12 using the L17. So, when they are having a conversation,  
13 because they have filled out L17s before, they know the  
14 type of risk and vulnerability factors that they are  
15 looking for. Some of the missing information that we  
16 commonly get from family violence services is the absence  
17 of phone numbers, the addition of children that belong to  
18 that relationship that the police didn't put on the L17.  
19 That is a training issue for us. We constantly are trying  
20 to upskill our members saying, "Always, always, always.  
21 If you don't put phone numbers on there, family violence  
22 services can't contact them and your referral may turn  
23 into nothing. If you are putting a referral in, put a  
24 phone number in and make sure it's current." So we are  
25 always trying to maintain the level of consistency and  
26 quality within our members and working towards that.

27 All of the L17s are checked by sergeants. The  
28 family violence team check all of our L17s again when they  
29 are triaging so that we are lifting the standard across  
30 our division to the same standard that the family violence  
31 team would apply to their own reports right across the

1 division.

2 DEPUTY COMMISSIONER NICHOLSON: My second question was my  
3 understanding is that the family violence teams, your  
4 members in those teams, aren't in those positions on a  
5 permanent basis; is that correct?

6 SERGEANT SPRIGGS: That's correct. In my area the members are  
7 rotated through. So sergeants are typically for  
8 12 months. Constables and senior constables are normally  
9 for six months. We did have a lower level for  
10 probationary constables of three months because they tend  
11 to be turned over through the police station a little  
12 faster.

13 There's a reason why we try to keep them at those  
14 levels. One is we want to build the expertise within the  
15 team to that where they are providing a specialist  
16 response. If we churn the members through there too fast  
17 that expertise is difficult to maintain. Also the  
18 training requirements on the sergeants and the other  
19 members there, when you are constantly pushing new members  
20 through, tends to take more of a front seat than the  
21 actual work. So if we slow the churn rate through the  
22 family violence team down we get a lifting of the  
23 specialist skills and we also reduce the pressure on the  
24 sergeant to constantly be training.

25 But we give those members who are there for that  
26 six months, they have a good rounded knowledge of family  
27 violence response and they most importantly have  
28 confidence in what they are doing, and then they take that  
29 knowledge and confidence back out on to the van and spread  
30 that knowledge through the police stations.

31 DEPUTY COMMISSIONER NICHOLSON: A period of six months seemed

1 to me to be a relatively short period to try to build the  
2 expertise and professional confidence and competence of  
3 members. How does that impact on the effectiveness of  
4 your family violence teams, in your opinion?

5 SERGEANT SPRIGGS: We wouldn't have one of the junior members  
6 working on their own. They would be with a senior member.  
7 You learn very quickly with family violence. We have the  
8 Code of Practice, quite prescriptive, tells you in these  
9 circumstances you should be doing this. The L17, which  
10 guides them in risk assessment and their response under  
11 that, provides a really good guide for members to learn  
12 every time they are filling it out.

13 As supervisors we would say to anybody who has a  
14 question about family violence, "Have you picked up the  
15 Code of Practice and read the answer for yourself? The  
16 answers are all in there about the way you should be doing  
17 things. Go back and read it and then come back and tell  
18 me the answer so that I know you know it correctly."

19 Once you do this job and you do the risk  
20 assessments, do the L17, provide the criminal/civil  
21 responses and you have done it a number of times your  
22 skill level starts to rise quite quickly. Where skill  
23 levels may drop is where you are not doing it as often.  
24 So, given that you are in a family violence team, you are  
25 doing it all the time, your skill level does come up quite  
26 quickly.

27 COMMISSIONER NEAVE: We have no more question, counsel. Thank  
28 you very, very much, Sergeant Spriggs.

29 SERGEANT SPRIGGS: You are welcome.

30 MR MOSHINSKY: Can we now adjourn for lunch until 2 o'clock.

31 COMMISSIONER NEAVE: Yes.



1 <(THE WITNESS WITHDREW)

2 LUNCHEON ADJOURNMENT

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1 UPON RESUMING AT 2.00 PM:

2 MS ELLYARD: The next witnesses are Superintendent Stuart  
3 Bateson and Dr Melisa Wood. I ask that they be sworn in,  
4 please.

5 <STUART DAVID BATESON, sworn and examined:

6 <MELISA HELEN WOOD, affirmed and examined:

7 MS ELLYARD: May I start with you, Dr Wood. What's your  
8 profession?

9 DR WOOD: I'm a forensic and clinical psychologist working with  
10 Forensicare.

11 MS ELLYARD: What duties in particular have you been performing  
12 of relevance to this Commission in the last year or so as  
13 part of your work with Forensicare?

14 DR WOOD: I have worked with Forensicare for about four years  
15 this time around, and the majority of that time I have  
16 been working in the problem behaviour program as well as  
17 at the Thomas Embling Hospital, so dealing with a range of  
18 different types of offending behaviour which includes  
19 family violence. In the last six months I have been  
20 employed as a senior psychologist embedded with the family  
21 violence team at the Footscray Police Station and  
22 basically my role there has been to enhance the risk  
23 assessment process and help to determine management  
24 strategies around high risk cases.

25 MS ELLYARD: You have made a statement to the Royal Commission  
26 that is dated 24 July 2015. Are the contents of that  
27 statement true and correct?

28 DR WOOD: They are.

29 MS ELLYARD: There is one annexure which we note for the  
30 purposes of the records is marked "Confidential". Can  
31 I turn to you, Superintendent Bateson. Where you are

1           presently stationed?

2   SUPERINTENDENT BATESON: I am the superintendent who has  
3           responsibility over the local government areas of  
4           Maribyrnong, Hobsons Bay and Wyndham.

5   MS ELLYARD: Does that mean there are family violence teams  
6           operating within your area of responsibility?

7   SUPERINTENDENT BATESON: We have two in our division, one  
8           operating out of Footscray that covers both Maribyrnong  
9           and Hobsons Bay, and the other one in Werribee.

10   MS ELLYARD: You have made a statement to the Commission which  
11           is dated 27 July 2015. Are the contents of that statement  
12           true and correct?

13   SUPERINTENDENT BATESON: Yes, they are.

14   MS ELLYARD: You are both here today to speak in particular  
15           about a joint project that's been undertaken based at the  
16           Footscray Police Station. Can I ask you first,  
17           Superintendent: Prior to that project, in summary what  
18           was the method by which the two family violence teams  
19           within your division were allocating their resources and  
20           prioritising, I suppose, the cases they were going to look  
21           at?

22   SUPERINTENDENT BATESON: A very similar model to the witness  
23           before lunch. We would have our family violence team  
24           review each of the family incident reports that were  
25           submitted overnight or since they last worked. They would  
26           then use the prioritisation assessment sheet, which is the  
27           First 48H sheet that Mr Spriggs spoke about earlier. That  
28           model was designed, as I said, by one of the practitioners  
29           down in southern metro. So that just gave some indication  
30           of what actions they should take based on that assessment.

31   MS ELLYARD: So that's the priority assessment process that you

1           have referred to in your statement, Dr Wood, is that  
2           correct?

3   DR WOOD:   Yes.

4   MS ELLYARD:   So in fact what the previous witness described and  
5           what is in use in your area is the same initial triaging  
6           tool?

7   SUPERINTENDENT BATESON:   Yes.

8   MS ELLYARD:   But from your perspective, Dr Wood, there are some  
9           deficiencies with that tool in terms of how useful it is?

10   DR WOOD:   Yes.  I think the biggest, I guess, limitation of it  
11           is that it has a very low - it's an actuarial tool which  
12           means that the risk is calculated based on the number of  
13           factors that are present.  It can have a very high score  
14           up to about 60 or so, but the cut-off for determining a  
15           case of high risk is only 16, so I think it  
16           over-identifies risk.  It's not very good at  
17           discriminating between cases that might be moderate or  
18           high versus very high risk.

19   MS ELLYARD:   Superintendent, based on the assessment that's  
20           made by the team of whether a case is higher risk or lower  
21           risk, what is the difference in the kind of practical  
22           action that the team might take or not take if a case is  
23           high risk or not high risk?

24   SUPERINTENDENT BATESON:   It just depends on that  
25           identification, but of course there's limited resources in  
26           the team.  So, I think we had close to 4,500 family  
27           incident reports in our division last year, so they need  
28           to prioritise.  So, it's just about the amount of time  
29           they can put into each of those cases.  So the follow-up,  
30           making sure that they are still connected with the  
31           perpetrator and the victim, making sure that management

1 strategies are in place. We would love to do it in every  
2 case, but of course we can't, so we do need to prioritise.  
3 So we do that based on the risk.

4 MS ELLYARD: From your perspective, what was the benefit to  
5 your family violence teams from the project that Dr Wood  
6 has been working on in the last six months which involved  
7 the embedding of a forensic psychologist within a family  
8 violence team?

9 SUPERINTENDENT BATESON: For me and the genesis of this project  
10 really was helping the family violence unit staff assess  
11 risk. We put some expertise into our family violence  
12 units, but generally speaking they are ordinary police  
13 officers that have received the same amount of training as  
14 other practitioners. I saw when I first arrived in the  
15 division that these teams were carrying a lot of  
16 responsibility and a lot of weight, and most importantly  
17 one of the family violence sergeants said to me,  
18 "I sometimes go home just dreading what I'm going to read  
19 the next day," because of the things that they'd put in  
20 place, was it going to be enough, "Was I prioritising the  
21 right cases."

22 For me, talking to Dr Troy McEwan and having some  
23 knowledge of her work in problem behaviour therapy and  
24 identifying problem behaviour, I saw the expertise of  
25 Forensicare being embedded within our teams as a real  
26 enhancement to their ability to assess risk, but also to  
27 give them some confidence that what they were doing was  
28 right and best practice.

29 MS ELLYARD: So there's the dual focus; raise their skills but  
30 also give them greater confidence in the skills that they  
31 might already have?

1 SUPERINTENDENT BATESON: Yes, correct.

2 MS ELLYARD: Dr Wood, from your perspective why was it that  
3 Forensicare became involved and what has the particular  
4 focus of Forensicare been in the project you have been  
5 working on at Footscray?

6 DR WOOD: I think that there's a few benefits obviously to  
7 Forensicare's involvement in the project. Obviously  
8 further developing partnerships with Victoria Police is an  
9 important aspect, and so is I guess conducting research  
10 evaluation on the project and determining what is best  
11 practice in the Australian context in terms of how should  
12 we be assessing risk in family violence cases. So that  
13 was a really big opportunity for us to increase our  
14 involvement in that regard.

15 MS ELLYARD: As I understand it, and you set out in your  
16 statement, you have been making use of a specific tool  
17 that was developed overseas and part of the project from  
18 Forensicare's perspective is to see whether that tool  
19 could be validated for use in Victoria; is that correct?

20 DR WOOD: Yes. So that tool, it's referred to as the Be Safer,  
21 and it is a tool that was developed in Canada and Sweden  
22 by a sort of joint collaboration of researchers in both  
23 those countries, and it's widely used in Sweden and it's  
24 used in a few different provinces around Canada. So the  
25 question is really is it a useful tool in the Australian  
26 context. Certainly they have very similar policing  
27 responsibilities and practices in those two countries, so  
28 we thought that it would be a relevant tool.

29 MS ELLYARD: Who uses it in Sweden and Canada?

30 DR WOOD: The police.

31 MS ELLYARD: And what do they use it for?

1 DR WOOD: They use it to - I guess similarly they use it to  
2 prioritise their cases and to assess risk and to tie in  
3 the risk factors that are identified with a given  
4 perpetrator and actually tie in how they respond and what  
5 the management strategies need to be in relation to a  
6 given case based on the risk factors that are identified  
7 using that tool.

8 MS ELLYARD: So you have said that the priority assessment  
9 process is effectively an actuarial tool that produces a  
10 result based on the number of factors that are ticked.  
11 How would you describe the Be Safer tool? Is it an  
12 actuarial tool?

13 DR WOOD: No, Be Safer is a structured professional judgment  
14 tool which means it guides the assessor, I suppose,  
15 through a series of risk factors. There are 15 factors in  
16 total considering factors pertaining to the perpetrator,  
17 any psychosocial functioning, factors pertaining to the  
18 case and the behaviours, specific behaviours that are  
19 involved, and factors relating to the victim that might  
20 make that person more vulnerable to further harm, and so  
21 combining that to come up with an overall summary judgment  
22 of risk, whether that's low, moderate or high.

23 Another aspect of the Be Safer is that it also  
24 separates what do we mean by risk of what. So you could  
25 have a high risk case in terms of risk of any further  
26 violence in the sort of medium term, but it also teases  
27 out what do we think is the risk of escalation to really  
28 serious life-threatening harm and also what is the risk of  
29 imminent violence, the risk that something is going to  
30 happen now if we don't do something to intervene.

31 MS ELLYARD: The Commission has heard some evidence on a

1 previous day from one of your colleagues, Professor  
2 Ogloff, about CRAF, the Common Risk Assessment Framework,  
3 also being a form of structured professional judgment.  
4 Are you able to comment on the differences between CRAF  
5 and the Be Safer?

6 DR WOOD: There's quite a few differences. One of the things  
7 that the CRAF really focuses on is risk around the victim.  
8 It is designed for people in victim support services or  
9 DHHS, sort of organisations who come into contact with  
10 female victims who might actually be the first point of  
11 contact and to conduct an assessment to find out what's  
12 going on. It's not actually - it is a structured  
13 professional judgment tool in the sense that it guides the  
14 person through a series of relevant risk factors and then  
15 allows the professional to come up with a summary risk  
16 judgment at the end, but it doesn't provide a lot of  
17 guidance for these first front-line clinicians on how to  
18 do that. So it seems to assume a level of expertise that  
19 may not necessarily be there for the individual that was  
20 doing it. I know we have had some earlier testimony from  
21 others who have become concerned that people are starting  
22 to use the CRAF like a checklist rather than a structured  
23 professional judgment tool.

24 So that's one of the issues with the CRAF. The  
25 other major difference between the Be Safer and the CRAF  
26 is actually the Be Safer has been validated in some  
27 studies overseas. So we know that it actually does have  
28 moderate predictive validity in the sense that, if  
29 somebody comes up as high risk, they are more likely to go  
30 on to reoffend than somebody who comes up with perhaps  
31 moderate risk.



1 MS ELLYARD: Is another difference that the Be Safer is  
2 designed to involve a closer assessment of the perpetrator  
3 and factors associated with the perpetrator?

4 DR WOOD: Absolutely. As I said before, it ties in really the  
5 overall case. So, you are looking at psychosocial factors  
6 of the perpetrator that might be relevant to risk, things  
7 that have already occurred, so as I said before the types  
8 of behaviours that we are really looking at when we are  
9 talking about family violence in a given case, and then  
10 factors that the victim might be bringing to that  
11 relationship that either complicate the relationship or  
12 that might make it more difficult for her to seek help in  
13 particular situations, and those sort of things.

14 So it really does encompass an evaluation of the  
15 entire case, not just an evaluation of the victim and what  
16 she's going through or the perpetrator and what he's going  
17 through. It's really an evaluation of all of those  
18 things.

19 MS ELLYARD: Superintendent, you mentioned that the family  
20 violence teams are by and large made up of general duties  
21 police officers who might not have specialist expertise in  
22 family violence. There was some evidence from the  
23 previous witness about how frequently people rotate  
24 through family violence teams. Is that the same in your  
25 area?

26 SUPERINTENDENT BATESON: Yes, it is. I heard that evidence and  
27 it is very similar in our division, generally 12 months  
28 for sergeants and six months for senior constables and  
29 constables. But we are certainly looking to extend that  
30 in the next little bit as well. Part of the problem, of  
31 course, is people only like to do it for six months. They

1       like to get in, have that experience and then move out  
2       again, so that's a challenge for us as well, identifying,  
3       one, the people that want to be in there for longer and,  
4       two, the people that we want to be in there for longer  
5       too. So there's got to be that mix and sometimes that's  
6       difficult.

7   MS ELLYARD:   What was the reception, I suppose, amongst your  
8       team members to the idea that there was going to be a  
9       psychologist working with them?

10  SUPERINTENDENT BATESON:  Generally I think it was very well  
11       received.  Certainly there were some challenges around  
12       communication in the first couple of weeks, but once again  
13       I think we've got back to having that expertise being  
14       brought into the field, giving them some confidence,  
15       giving them some backup in their judgment that ultimately  
16       led to them saying, "Hey, this is a good idea.  This gives  
17       me some confidence that we're doing the right thing and  
18       we're doing all we can."

19  MS ELLYARD:   Dr Wood, you have set out in your statement that  
20       you were located with the family violence team, so that's  
21       a step removed from those people who would have been  
22       completing the front-line L17s?

23  DR WOOD:   Yes.

24  MS ELLYARD:   Can you summarise for the Commission, then, what  
25       it was that you did and how you interacted both with the  
26       members of the team and, if you interacted with them,  
27       directly with the front-line police officers?

28  DR WOOD:   I guess being embedded with the team, my interactions  
29       with the family violence team overall was on a very  
30       continuous day-to-day sort of basis.  My role was around  
31       doing a further assessment of the victim and the

1 perpetrator in order to complete the Be Safer, and then to  
2 communicate the results of that back to the team in terms  
3 of making recommendations. So, "These are the identified  
4 risk factors. What do we need to put in place to help  
5 mitigate that risk." Part of that was around helping them  
6 to conceptualise the risk in a given case, so not just  
7 what is the risk, but why is that the risk and what are  
8 the sort of triggers and what are the risk scenarios that  
9 we need to look out for here? If something is going to  
10 happen, what's it most likely to look like and when? When  
11 would we see an increase in that risk?

12 I guess framing risk in that sort of  
13 conceptualised way was really helpful for them to  
14 understand why something is a priority when it is a  
15 priority versus following a structured tool that says,  
16 "This is high risk so we have to prioritise this case."

17 MS ELLYARD: Given that you have said that the prioritisation  
18 tool that was previously being used really was making too  
19 many cases seem high risk, does that mean in practice what  
20 you were doing was helping the family violence team put to  
21 one side a category of cases that in fact on application  
22 of the Be Safer weren't in fact high risk?

23 DR WOOD: Yes is the short answer, but I think put to one side  
24 is probably the wrong way to phrase it, in the sense that  
25 no case was outright dismissed as irrelevant or anything  
26 like that. It was more that it was about identifying, of  
27 all these cases that we have just taken on as identifying  
28 as high risk, which are the ones where we really need to  
29 intensify our resources and which are the ones that might  
30 require just more a passive monitoring sort of a process  
31 where we want to identify if the risk is not imminent now,

1           what do we need to watch out for in order to identify when  
2           that risk might increase or even decrease? So what  
3           exactly are the things that we need to monitor and how do  
4           we need to sort of, I guess, engage the victim and the  
5           perpetrator in order to do that? So it's more a  
6           prioritisation of resources than it is a dismissal of  
7           cases that don't merit - - -

8 MS ELLYARD: As part of the process of applying the Be Safer  
9           tool, it is ideal, as I understand it, to actually meet  
10          both with the victim and the perpetrator; is that correct?

11 DR WOOD: Yes.

12 MS ELLYARD: In what percentage of cases were you able to have  
13          direct contact with both parties or at least with one  
14          party?

15 DR WOOD: I guess it depends on how you look at what the  
16          overall sample size is because it became very apparent  
17          very quickly that there were too many cases for me to do a  
18          Be Safer on, and that's obviously a resource issue. So in  
19          the end I had to do my own sort of triage process in terms  
20          of looking out for, based on the historical information  
21          that we had and the L17 narratives that we had, which are  
22          the cases that are more likely to be coming up as higher  
23          risk on the Be Safer and prioritising those ones, whilst  
24          still engaging in a level of case discussion around the  
25          others, but not needing to prioritise those assessment  
26          interviews with them.

27               Of the ones that I did the assessments on, the  
28          vast majority I was able to have contact with the victims.  
29          I think there was only a couple where the victim may have  
30          declined and a couple where I couldn't get hold of her.  
31          It's entirely voluntary and up to them whether or not they

1 choose to speak with me.

2 The hit rate, I suppose, for the perpetrator was  
3 much lower for a variety of reasons. Some of them were on  
4 remand and I wasn't able to gain access to them once they  
5 were in custody. Some of them outright refused. Some of  
6 them just weren't able to be contacted because in between  
7 the L17 narrative being prepared and I guess going through  
8 the process of the PAP and me needing to see them, they  
9 changed their phone numbers or had otherwise started to  
10 hide from police or something like that, so I wasn't  
11 actually able to get in touch with them at all.

12 MS ELLYARD: Superintendent, you have mentioned in your  
13 statement the benefit that flowed from having Dr Wood for  
14 police including the advice that she was able to give that  
15 had a direct bearing on successful prosecution. I wonder  
16 could you tell the Commission about that case, or another  
17 case if you prefer, where there was a direct benefit in  
18 terms of proceeding against a perpetrator because your  
19 staff had had access to Dr Wood?

20 SUPERINTENDENT BATESON: One of the challenges for our family  
21 violence staff is articulating the risk in any bail  
22 application or subsequent sentencing. So, I think one of  
23 the benefits of having Dr Wood in the team is she was able  
24 to provide some guidance on those bail applications and  
25 say, "These are the things we need to highlight and these  
26 are the reasons why." I think that was one of the great  
27 benefits that the team got out of the program. For me it  
28 was the confidence, it was a better product that we  
29 produced ultimately in the end, and it was a better  
30 understanding of the risk.

31 MS ELLYARD: And an ability to convey that risk?

1 SUPERINTENDENT BATESON: Convey that risk, yes.

2 MS ELLYARD: To the court.

3 SUPERINTENDENT BATESON: To the court, yes.

4 MS ELLYARD: Dr Wood, from your perspective did you have much  
5 direct contact with court cases or provide reports, for  
6 example, for use in court?

7 DR WOOD: No, and that wasn't the purpose of the assessment and  
8 of course there are issues around confidentiality and  
9 things like that when my reports become involved. But  
10 there were a couple of cases that were noted to be higher  
11 risk and of greater concern that things could escalate  
12 where I was able to at least have the family violence team  
13 members communicate via the police prosecutor to the court  
14 that actually a more thorough risk assessment is warranted  
15 in this case and those were particularly cases where  
16 ongoing stalking for a prolonged period of time was  
17 evident, based on the victim's self-report there was  
18 indications to me of a really concerning mental state like  
19 the possibility of homicidal ideation as an example, and  
20 so the possibility that if this person were to be  
21 released, (a) the stalking would most likely continue and  
22 (b) the possibility that things could escalate from there.

23 So those were the sort of cases where I think  
24 it's really important that a thorough stalking risk  
25 assessment be conducted, which is beyond what the Be Safer  
26 does, and also these were also cases where I wasn't able  
27 to assess the mental state of the offender directly myself  
28 because they had been incarcerated and so the solution  
29 therefore was to actually try and recommend to the court  
30 that they seek further referral for that assessment to  
31 occur in a much more comprehensive fashion via a

1 pre-sentence court report.

2 MS ELLYARD: You mentioned that as part of your project in the  
3 end you had to engage in your own triage because there  
4 were too many files for you to be able to administer the  
5 Be Safer to. Is the Be Safer in its use in Sweden and  
6 Canada used by front-line police officers?

7 DR WOOD: Yes, it is. So that's part of the difference between  
8 this pilot project and what I think we would envisage to  
9 see if it was something to be taken up by Victoria Police  
10 more broadly, is that the level of training and experience  
11 in using the tool and understanding case  
12 conceptualisation, as I mentioned before, at a policing  
13 level rather than at a forensic psychology level, is  
14 probably going to be a much more efficient way of running  
15 and using the tool on a much more wider basis, perhaps  
16 replacing the PAP and the L17 process or as a second tier  
17 to the PAP or L17 process so it can capture a much more  
18 wide variety of the offenders.

19 MS ELLYARD: So it's not a tool that requires specialist  
20 knowledge of the kind that you have?

21 DR WOOD: It's a tool that requires some specialist knowledge,  
22 but certainly it is designed for police to use, so  
23 certainly not to the level I have. I think that in a more  
24 statewide kind of takeup of the tool, if it were to go  
25 that way, would be that it would have some kind of  
26 clinical oversight and supervision component rather than  
27 having a clinical and forensic expert conducting all of  
28 the day-to-day assessments.

29 MS ELLYARD: One of the things you say in your statement is  
30 that from your observation there are often particular  
31 personality features that are overrepresented amongst

1 family violence respondents and of course identifying  
2 personality disorders is part of your expertise. Could  
3 you summarise for the Commission, please, the kinds of  
4 personality deficits or traits that from your observation  
5 kept recurring or keep recurring in the case of family  
6 violence offenders?

7 DR WOOD: Yes, that's an interesting question because I suppose  
8 overrepresented doesn't necessarily mean it's present in  
9 the majority of cases; it just means it is more prevalent  
10 than in the average community member. There is a link  
11 between the presence of those personality traits and the  
12 perpetration of violence and general offending in general.  
13 So one of those things I guess is someone who has a lot of  
14 difficulty controlling extreme emotions might react very  
15 volatile in an emotionally arising sort of situation. So  
16 they might be more quick to anger, they might be less able  
17 to control their anger once it has arisen and they might  
18 be more prone to choosing violence as a way of either  
19 releasing or expressing that anger than someone who has  
20 greater control over their emotions. So that's just one  
21 example of a characteristic of an offender that we learn  
22 to look for in assessing risk. There are many others.

23 MS ELLYARD: Does the Be Safer tool, for example, provide the  
24 user an opportunity, if that information is available, to  
25 make use of that information in assessing for risk?

26 DR WOOD: Yes, it does, but in a very generalised form. So  
27 there is one item out of the 15 on mental health of the  
28 perpetrator and that encompasses personality issues that  
29 might be apparent, as well as acute mental illness or  
30 other sort of mental disorder factors that might be  
31 apparent other than substance abuse, which has its own



1 item. So, basically because it's directed at people who  
2 don't have that level of clinical expertise, they are not  
3 expected to make a diagnosis on that basis, but just to  
4 learn what kind of things would we be looking out for to  
5 determine whether or not this factor is present.

6 MS ELLYARD: Superintendent Bateson, from your perspective what  
7 would be the potential for the use of a tool like Be Safer  
8 within policing?

9 SUPERINTENDENT BATESON: I think there's definitely the  
10 potential. I think we would require some training in the  
11 first instance and we are sort of looking at some  
12 opportunities to do that. But, as Dr Wood suggested, with  
13 the clinical oversight rather than the embedded model  
14 I think would be the way to go. So we focus our attention  
15 on educating our members to use the tool and use it  
16 properly, and provide more of a consultant role for the  
17 forensic psychologist rather than the embedded model which  
18 was quite resource intensive for Forensicare.

19 MS ELLYARD: At what level of policing would you see a tool of  
20 this kind having application? At the family violence team  
21 level?

22 SUPERINTENDENT BATESON: Yes, I think so. To give the level of  
23 expertise and training to all front-line members I think  
24 would be beyond the scope of the organisation. We would  
25 need to see some more empirical evidence that it works and  
26 works well. This trial is yet to be validated. The  
27 evaluation is currently ongoing. What I would like to see  
28 is a longer trial using the model where you have the  
29 front-line member or the family violence team members  
30 using the tool with the clinical oversight and then have  
31 that longer trial evaluated and then we can actually make

1           some decisions from an organisational point of view  
2           whether it's something that would be worthwhile.

3 MS ELLYARD: Were you present during the evidence of the  
4           witnesses this morning?

5 SUPERINTENDENT BATESON: Yes, I was in a room out the back, so  
6           I did hear it.

7 MS ELLYARD: One of the things that came up in the evidence of  
8           earlier witnesses was a concern about the need not to lose  
9           sight of the fact that front-line police officers aren't  
10          always going to have a high degree of involvement in  
11          family violence matters and there's going to be a need to  
12          resource those very front-line members with some kind of  
13          tool or expertise which they can draw on when making an  
14          assessment. Could I invite each of you to comment on this  
15          idea that the potential risk of resourcing family violence  
16          teams is that there might then be fewer resources  
17          available to resource those front-line members who are  
18          generating the raw data that family violence teams rely  
19          on?

20 SUPERINTENDENT BATESON: I think from an organisational point  
21          of view, and I'm sure you will hear from our Assistant  
22          Commissioners later, we would definitely like to see  
23          greater education of our members in family violence teams  
24          and a school of family violence, for want of a better  
25          word, would be a great step forward. Certainly looking at  
26          the review of the L17 and the ability for the members to  
27          use that and use that effectively is something that  
28          I think we constantly have to review. I think a tool like  
29          the Be Safer is something that you really do need some  
30          enhanced training and to be able to say that that is  
31          rolled out right across the organisation I think would be

1           unrealistic.

2   DR WOOD:   I think a model whereby there is some extra training  
3           for the front-line staff in terms of learning to know the  
4           types of information that they need to extract from the  
5           perpetrators and the AFMs in a given incident is really  
6           important. One of the things that the Be Safer does very  
7           well is allows for a conceptualisation of the entire case  
8           rather than just the specific incident that the front-line  
9           staff have walked into. I think that's something that the  
10          PAP does not do so well. The score changes very variably  
11          depending on what is the most recent incident, and the  
12          overall context of how many incidents there have been in  
13          the past and what was the nature of those incidents is not  
14          captured very well by those tools.

15                So, I think that training for those front-line  
16          members in terms of identifying the information, talking  
17          to the perpetrators and gleaning some of that information  
18          around the Be Safer risk factors is really important, that  
19          then perhaps there's oversight from that from the team  
20          because it is a more resource intensive tool. So I guess  
21          the purpose would be that the front-line members might be  
22          able to extract as much information as possible which can  
23          then meet the family violence team members' duty to  
24          conduct the overall risk assessment, a much simpler  
25          process, and perhaps when they are meeting with the AFMs  
26          and the perpetrators for the purpose of that it can be a  
27          briefer assessment process because they have already got a  
28          lot of the information they require.

29   MS ELLYARD: You mentioned the fact that on application of the  
30          PAP the risk profile can vary very rapidly depending on  
31          what the most recent incident is. Does that mean, for

1 example, if the most recent incident was confined to  
2 verbal abuse, that would result in a much lower score even  
3 though the three events prior to that all involved threats  
4 of violence and perhaps the use of a weapon?

5 DR WOOD: Absolutely. We had a case right at the start of the  
6 project where the initial PAP score was in the very high  
7 range because there had been a physical incident, some  
8 very serious threats and the use of a weapon, and then two  
9 days later there was another incident that was verbal only  
10 and the resulting PAP score from that second incident was  
11 in the - I can't remember - it was either the low or  
12 moderate range. But if you hadn't been able to look at  
13 the context and see that two days before there was a much  
14 more serious incident and you only looked at that one L17,  
15 it wouldn't have even resulted in any formal referrals,  
16 for example, because it wouldn't have warranted that extra  
17 care.

18 So it wasn't until somebody actually put the two  
19 side by side and said, "Hang on a second, this is the same  
20 case," that it became apparent. So I think part of the  
21 review of the L17 process might overlook some of those  
22 limitations. Sorry, might look to improve on some of  
23 those limitations.

24 MS ELLYARD: Did the Commissioners have any questions for these  
25 witnesses?

26 DEPUTY COMMISSIONER NICHOLSON: Superintendent, utilising Be  
27 Safer in the way you have talked about with your family  
28 violence teams, that would be dependent, would it not,  
29 upon having more permanent positions within your family  
30 violence team?

31 SUPERINTENDENT BATESON: Certainly I think the greater

1 expertise you have and the more knowledge, yes. I would  
2 like to see at least 12 months to two years for the  
3 members in the teams, but it's a difficult situation to  
4 achieve. We are certainly working towards that. I think  
5 the ideal model from my point of view would be to have two  
6 or three members stay there and then rotate some others  
7 through, because there is a benefit of rotating members  
8 through; they do build their expertise, they do build  
9 their knowledge and they take it back to the front-line.  
10 So striking a balance of building the expertise and  
11 spreading the knowledge is important too.

12 DEPUTY COMMISSIONER FAULKNER: Can I just check, and I think  
13 I know the answer, but the tool that you are talking about  
14 is strictly for intimate partner violence. It won't work  
15 with children or adult violence on parents, for example?

16 DR WOOD: Yes, sorry, that is a really good point. It is for  
17 intimate partner violence. There are no tools that look  
18 at other forms of family violence specifically. There's  
19 obviously tools that look at general violence, which is  
20 risk of further violence to anyone, but in terms of  
21 looking at targeted violence with a specific identified  
22 victim, in terms of structured professional judgment  
23 there's only the Be Safer and its predecessor which is  
24 more of a clinical tool, so for front-line policing  
25 there's only the Be Safer. There are stalking risk  
26 assessments particularly which also take into account the  
27 nature of the relationship with the victim, but again it  
28 sort of doesn't really accommodate for parent-to-child  
29 violence, for example. We actually don't have a lot of  
30 empirical knowledge on that phenomenon and I think we are  
31 in the process of internationally sort of trying to

1 identify what are the risk factors, how are they similar  
2 to other forms of violence, how are they different. But  
3 we are not at the stage yet where we are putting together  
4 tools that we know are effective in predicting risk in  
5 those sorts of cases.

6 COMMISSIONER NEAVE: Can I just ask your response to the whole  
7 array of risk assessment, most of which do apply to  
8 intimate partner violence only. So we have the L17, which  
9 contains at the bottom a whole series of risk factors and  
10 requires a risk assessment to be made. We have the CRAF  
11 in which, as I understand it, many people have now been  
12 trained, and we have the Be Safer model, which would  
13 require the training of a much larger number of people.

14 If we are talking about people who are either  
15 front-line or perhaps family violence teams but certainly  
16 not forensic psychologists, which is the simpler and how  
17 would you factor in the need to train, just in terms of  
18 resource allocation?

19 I'm sorry, it's rather an obscure question, but  
20 what I'm trying to get at is in thinking about how much  
21 money the police have to spend, what training they have to  
22 do, what skills are required for these risk assessments,  
23 do you still say that the Be Safer would be a better way  
24 to go?

25 DR WOOD: I think it would be because of its ability to  
26 consider issues around the perpetrator, which I think the  
27 L17 does do to an extent, but essentially it's turned into  
28 a bit of a tick box. With front-line members, I think  
29 sometimes when they are filling in the L17, because they  
30 fill it in afterwards, they don't fill it in at the scene,  
31 when they go back and say, "I didn't ask the guy about

1       that so I will just say it was absent," it doesn't  
2       necessarily mean it was absent, it just means they don't  
3       have the information. So, there are those sorts of  
4       limitations with the L17.

5               The L17 is based on the CRAF, so I view them as  
6       quite similar, but the focus is very much on we are  
7       assessing risk with the woman, with the female victim, and  
8       in that context we are asking her her opinion, which is  
9       incredibly important, but there's a lot of oversight over  
10      the perpetrator and I think the perpetrator's mental state  
11      and the factors that drive his violent behaviour and I say  
12      he is a heuristic, I suppose, because most commonly it is,  
13      but the factors that drive that behaviour and the reasons  
14      why he is engaging in violence at that particular moment  
15      at that particular time varies very much from case to case  
16      and we need to understand that in order to understand  
17      risk.

18             This is something the Be Safer takes into  
19      account. Yes, there is a level of training that is  
20      required, but it is not necessarily an overly intensive  
21      level of training. It's been done obviously in Canada and  
22      Sweden already and it's been implemented very successfully  
23      over there. The training I think is more of a - there's  
24      importance for an ongoing training component, I suppose,  
25      which is what we mean when we talk about case consultation  
26      and supervision. But in terms of the initial training, we  
27      are talking about a day, which is what it takes to train  
28      in the CRAF anyway.

29   COMMISSIONER NEAVE: But would you contemplate the Be Safer  
30      being an add-on to the L17, because the same difficulties  
31      that you have identified would apply if the Be Safer was

1 compiled - the front-line police go out, they come back,  
2 they complete the L17 now. Wouldn't you still have the  
3 same difficulties with the Be Safer in terms of the  
4 information about the perpetrator? Wouldn't it be  
5 limited?

6 DR WOOD: I think in an ideal world, in my view I would have  
7 the front-line members gathering the information with a  
8 structured interview sort of tool, a semi-structured  
9 I should say, so that they are guided in the right  
10 questions to ask. I think that that's something that came  
11 up earlier today as well, that that would be something  
12 that would be useful to the L17 process.

13 So I'm not talking about throwing out the L17  
14 process; I'm talking about perhaps reviewing it to make  
15 sure it's asking the right questions and then that  
16 information can later be transferred on to the people who  
17 maybe have that additional training in the Be Safer  
18 assessment process.

19 COMMISSIONER NEAVE: So you would have a two-step process. You  
20 would have a revised L17 collecting some of the  
21 information which is not currently collected and then it  
22 would go back to the team which would then conduct an  
23 assessment along the lines of the Be Safer. Have I got it  
24 right?

25 DR WOOD: Yes, I think that's probably - given the way things  
26 work now, seeing how the Be Safer would most appropriately  
27 fit in with the current model, one of the limitations  
28 I guess that we do get is that at the front-line they  
29 don't have access to all the historical information. They  
30 don't necessarily - if they have never met this person  
31 before, they haven't personally responded to an incident



1 at this particular address, so they may not know the  
2 history behind that relationship which we really need to  
3 be taking into account, not just what's happening in the  
4 moment, but what's happened before and what has been the  
5 process of risk over time, and so once they get back to  
6 the station they have that opportunity to look at that for  
7 the L17 process, and I think that's the reason why it's  
8 been taken away from being done on-site to being done once  
9 you get back, and then once it sort of goes through that  
10 process, they look at some of the previous things and then  
11 they go, "Okay, this case has happened before. The last  
12 time it was more serious than this time. What does that  
13 mean?"

14 People who are trained I suppose to actually look  
15 further into what does that mean and to ask the right  
16 questions might then be doing the follow-up. So that's  
17 when the specialist FVT members who have been trained in  
18 the Be Safer itself could come along and sort of take a  
19 look at that.

20 COMMISSIONER NEAVE: So it wouldn't really be a front-line  
21 tool. It would be for the family violence team.

22 DR WOOD: I think the front-line would be for gathering the  
23 information. The front-line people are always conducting  
24 a risk assessment no matter what. When you are talking  
25 about whether or not to try and have someone sectioned  
26 under 351, taking them to hospital, that kind of thing,  
27 they are conducting those sorts of imminent risk  
28 assessments all the time.

29 The Be Safer has the ability to consider risk and  
30 how it varies over time, so there are protocols in place  
31 for when you need to conduct a reassessment of risk in

1 terms of what has changed. If somebody is high risk,  
2 I think I said this before, but not necessarily imminent  
3 risk, what do we need to look out for for when that might  
4 become imminent risk and what are the sort of things we  
5 need to put in place to try to contain it. That's  
6 something that the Be Safer does very well, but the PAP  
7 doesn't and the L17 doesn't.

8 COMMISSIONER NEAVE: Thank you.

9 DEPUTY COMMISSIONER NICHOLSON: Could I just clarify, Dr Wood.

10 Was I right in hearing you say that at this stage there is  
11 no reliable tool for assessing risk in other than intimate  
12 partner relationships?

13 DR WOOD: Specific to family violence relationships, yes. So  
14 there's many, many tools that just assess an individual  
15 offender's risk of general violence in any scenario,  
16 whether that be towards a stranger, towards a family  
17 member, towards an acquaintance, and you do do case  
18 scenario planning in those sorts of tools in terms of  
19 establishing, well, if violence were to occur, who is  
20 going to be the most likely victim, definitely. But there  
21 is no other tool that assesses specifically the risk to  
22 other family members or intimate partners.

23 DEPUTY COMMISSIONER NICHOLSON: So what was the practice in the  
24 project at Footscray in cases other than intimate partner  
25 violence?

26 DR WOOD: The practice is very much to still rely on the PAP  
27 and then we would conduct a case discussion for high risk  
28 cases in that regard. So certainly that's I guess the  
29 area where case consultation with the forensic  
30 psychologist was quite useful to the team as well and some  
31 of the members found that quite useful, is that not only

1 do we talk about the intimate partner violence cases, but  
2 also just, without using a tool, what sort of risk factors  
3 do we need to consider and still very much using that case  
4 formulation approach to identifying when might the risk  
5 change and what management strategies do we need to put in  
6 place.

7 MS ELLYARD: I just have one more matter to raise with Dr Wood.

8 At paragraph 52 of your statement you comment on the issue  
9 of integration of services and you comment by reference to  
10 the SOCIT team which I think was located near where you  
11 were located at Footscray; is that correct?

12 DR WOOD: Yes.

13 MS ELLYARD: Can I invite you to comment from your observation  
14 about the value of integration and how that might look in  
15 the family violence context as compared to what you  
16 observed operating for the SOCIT team?

17 DR WOOD: My understanding of the way SOCIT operates - and this  
18 is sort of indirect observation, obviously, because  
19 I wasn't embedded within that team - but my understanding  
20 is that they do have very close collaborative partnerships  
21 with other relevant services. The FVT team have  
22 established those collaborative relationships, but they  
23 are not as strong or they don't appear to me to be as  
24 strong. I think part of that is around - I think there is  
25 definitely a value to co-location, but I think there are a  
26 lot of issues around information sharing and privacy  
27 issues and they are very, very tricky to get around.

28 So there are some agreements; for example, police  
29 members can speak to DHHS workers and can speak to Women's  
30 Health West workers about a case without necessarily  
31 having the perpetrator's consent, but I can't. So quite

1 often there would be an issue of communication where  
2 I think it would be important to communicate something or  
3 to convey something to the child protection worker, but  
4 I'd have to get the police member to do it because the  
5 information I have is actually owned by Victoria Police,  
6 that's how I obtained the information, and my  
7 recommendation is Child Protection need to know about  
8 this, but because of the restrictions around mental health  
9 and privacy, as a mental health worker I can't just pick  
10 up the phone and tell them unless it is imminent risk, and  
11 I don't think it is in a particular case, but the police  
12 members seem to be able to do that.

13 So that's something that we had very indirect  
14 kind of communications and I think there is definitely a  
15 role for greater information sharing. At the same time,  
16 these privacy laws exist for a reason and I think it's a  
17 very tricky avenue in terms of how you go about making  
18 changes if you were to make changes.

19 MS ELLYARD: Thank you, Doctor. Thank you, Superintendent.

20 Did you want to comment on that last point?

21 SUPERINTENDENT BATESON: I just want to say there are still  
22 some challenges culturally about working with some of the  
23 service providers. There is still a prevailing view that  
24 we should stick with arresting offenders and just worry  
25 about that and then the service providers can look after  
26 the safety of the victim, whereas I guess what we are  
27 saying here is a more integrated approach and breaking  
28 down those silos so we work much more collaboratively in  
29 my view would be a much better approach.

30 MS ELLYARD: Thank you, Superintendent.

31 DR WOOD: I agree with that.

1 MS ELLYARD: Thank you, Commissioners. I ask that the  
2 witnesses be excused.

3 COMMISSIONER NEAVE: Thank you very much indeed.

4 <(THE WITNESSES WITHDREW)

5 MR MOSHINSKY: Commissioners, the next two witnesses are  
6 Assistant Commissioner McWhirter and Assistant  
7 Commissioner Cornelius.

8 <DEAN ANTHONY McWHIRTER, sworn and examined:

9 <THOMAS DONALD LUKE CORNELIUS, sworn and examined:

10 MR MOSHINSKY: Assistant Commissioner McWhirter, can I start  
11 with you. Could you please state what your current  
12 position is and just give a very brief outline of your  
13 professional background?

14 ASSISTANT COMMISSIONER McWHIRTER: Certainly. I am currently,  
15 in March this year, I was appointed as the Assistant  
16 Commissioner for Family Violence Command. In 2014, prior  
17 to this role, I was appointed as the Superintendent  
18 Foundation Training at People Development Command  
19 responsible for recruit and protective service officer  
20 training. In 2010, prior to that, I was appointed as the  
21 Superintendent at Road Policing Command, responsible for  
22 the road safety camera program. Prior to that in 2007  
23 I was appointed as the Inspector at the Yarra Police  
24 Service Area which encompassed Richmond, Collingwood and  
25 Fitzroy police stations.

26 MR MOSHINSKY: Have you prepared a witness statement for the  
27 Royal Commission?

28 ASSISTANT COMMISSIONER McWHIRTER: I have.

29 MR MOSHINSKY: Are the contents of your statement true and  
30 correct?

31 ASSISTANT COMMISSIONER McWHIRTER: They are.

1 MR MOSHINSKY: Assistant Commissioner Cornelius, can you please  
2 outline what your current role is and give a brief outline  
3 of your previous roles?

4 ASSISTANT COMMISSIONER CORNELIUS: Thank you, Commissioners.

5 I am the regional Assistant Commissioner for Southern  
6 Metropolitan region which delivers 24/7 policing services  
7 to 1.4 million people within our state and I have just  
8 over 2,000 members to assist me in that task. I have been  
9 in that role for the past five years. Prior to that I was  
10 for four and a half years the Assistant Commissioner for  
11 the then Ethical Standards Department and prior to that  
12 for the previous two years was the Commander for Legal  
13 Services. I joined Victoria Police in 2003 and prior to  
14 that was for 14 years with the Australian Federal Police,  
15 finishing as their Director or Commander of People  
16 Strategies based in Canberra.

17 MR MOSHINSKY: Thank you. Assistant Commissioner Cornelius,  
18 I note that you will be called to give evidence on day 13  
19 of these public hearings and I won't take you to your  
20 witness statement now as your statement is relevant to the  
21 issues to be discussed on that day.

22 I want to start with you, Assistant Commissioner  
23 McWhirter. Could you please outline for the Royal  
24 Commission what the Family Violence Command is, why it was  
25 set up and how it fits within the organisational structure  
26 of Victoria Police?

27 ASSISTANT COMMISSIONER McWHIRTER: Certainly. I think the  
28 establishment of the Family Violence Command is just an  
29 extension of Victoria Police's commitment to family  
30 violence. It's an acknowledgment to the community and to  
31 government about how we see Family Violence Command as an

1 integral part of the work that we do. It was set up to  
2 demonstrate leadership to the organisation in terms of  
3 developing strategies and policy and practice in relation  
4 to family violence and certainly in terms of working with  
5 key partners and key stakeholders in the family violence  
6 environment, that Victoria Police is well and truly  
7 committed to maintaining a good practice in relation to  
8 our responsibilities around family violence.

9 MR MOSHINSKY: Just to understand the organisational structure,  
10 does the Family Violence Command have oversight and sort  
11 of line management of, for example, family violence teams?

12 ASSISTANT COMMISSIONER McWHIRTER: No. So Family Violence  
13 Command is set up as a central command to provide the  
14 organisation with policy guidance and direction in  
15 relation to family violence as such. All the  
16 responsibility for front-line service, family violence  
17 teams, all the actual positions that actually support  
18 family violence, sit within the four regional areas. My  
19 responsibility will be to actually identify good practice  
20 and then work with the Assistant Commissioners to actually  
21 delivering that good practice in the regions in terms of  
22 the response.

23 MR MOSHINSKY: Just to take a practical example, we have heard  
24 evidence today, and I understand that both of you have  
25 been present for much of the evidence today, from Sergeant  
26 Spriggs about the three family violence teams in the  
27 division that he deals with and that there's some  
28 innovations in practice in those family violence teams.  
29 Where does management decision making reside in terms of  
30 whether those family violence teams should operate in that  
31 way or perhaps in some other different way?

1 ASSISTANT COMMISSIONER McWHIRTER: Ultimately the family  
2 violence teams were set up as a divisional response  
3 through - essentially most of it was done through the  
4 enhanced family violence service delivery model which was  
5 developed in 2010/2011. However, one of my key  
6 responsibilities at Family Violence Command is ultimately  
7 to actually design and develop a baseline model for family  
8 violence teams in a principles based approach and then  
9 negotiate back with the regional Assistant Commissioners  
10 as to how that would be applied in practice in their  
11 divisional responses.

12 MR MOSHINSKY: In terms of current practice, is it the regional  
13 Assistant Commissioners such as Assistant Commissioner  
14 Cornelius who decide how the family violence teams will  
15 operate?

16 ASSISTANT COMMISSIONER McWHIRTER: Certainly in relation to  
17 volume and demand, in terms of the capacity for them to  
18 actually provide resources into those family violence  
19 teams rests with the Assistant Commissioners and their  
20 relevant Superintendents.

21 MR MOSHINSKY: I want to then deal with some of the facts and  
22 figures and trends in relation to family violence which  
23 you set out in your statement, Assistant Commissioner  
24 McWhirter. If I could take you to your statement at  
25 paragraph 10, you indicate that in terms of the years 2003  
26 to 2004, from then until the year 2013/2014, there's been  
27 a 136 per cent increase in family incidents recorded by  
28 police. So is that essentially the number of the L17  
29 forms that have been completed?

30 ASSISTANT COMMISSIONER McWHIRTER: Correct.

31 MR MOSHINSKY: And then the next paragraph indicates that



1       there's been a 551 per cent increase in intervention  
2       orders applied for by the police which includes the  
3       issuing of family violence safety notices. So that's  
4       quite a dramatic - it's a fivefold increase in that  
5       period.

6   ASSISTANT COMMISSIONER McWHIRTER: Correct.

7   MR MOSHINSKY: Can you just very briefly explain why that has  
8       occurred?

9   ASSISTANT COMMISSIONER McWHIRTER: I think it really goes to  
10       the heart of the issue about Victoria Police's leadership  
11       on this issue and working with a whole range of people  
12       across government and also within the sector to actually  
13       deliver an integrated family violence service. 2003/4 is  
14       pretty critical in terms of the timeline of our commitment  
15       right across government in relation to family violence.  
16       2004 was the start of the Code of Practice. 2004 we  
17       allocated the first family violence advisers into Victoria  
18       Police and also gave the responsibility into the police  
19       stations for our supervisors to take that responsibility  
20       as the family violence liaison officer roles.

21               Then we progressed through in terms of the change  
22       in terms of legislation, the Family Violence Protection  
23       Act, holding powers, and so it continues to build in terms  
24       of our commitment and engagement around family violence  
25       and we have been very much in terms of leadership of the  
26       previous Chief Commissioners, as I'm sure it will be into  
27       the future Chief Commissioners, in relation to our  
28       responsiveness to family violence.

29   MR MOSHINSKY: Was there and is there a conscious policy by the  
30       police to be the applicant in intervention orders in many  
31       cases?

1 ASSISTANT COMMISSIONER McWHIRTER: I think that's a legislative  
2 requirement. I don't know our previous engagement, making  
3 that as part of our platform in terms of the Code of  
4 Practice, but certainly the opportunity was for us to  
5 actually do that from a legislative perspective.

6 MR MOSHINSKY: In the figures that you deal with in the  
7 following paragraphs you indicate the total number of  
8 family violence incidents for 2013/2014 of 65,000  
9 approximately. Again that reflects, does it, the number  
10 of L17 forms?

11 ASSISTANT COMMISSIONER McWHIRTER: Correct.

12 MR MOSHINSKY: Then in paragraph 12 you set out the percentages  
13 that relate to current or former partners, children and  
14 parents and other family relationship types. Then in  
15 paragraph 13 you set out the breakdown of figures in  
16 relation to current and former partners between different  
17 groups. The figures are there and they will be available  
18 through your witness statement.

19 I want to ask you about the proportion of police  
20 time that is spent on family violence. I think you  
21 indicate in the following paragraphs that it's difficult  
22 to assess, but one guide is the number of offences against  
23 the person or justice procedures, and you set out in  
24 paragraph 17 a graph which is a slide that I think is  
25 available and we can bring up on the screen. That is a  
26 slide that shows the number of crimes against the person  
27 and whether they are arising from family incidents or  
28 otherwise. Could you just explain what that slide  
29 indicates, please?

30 ASSISTANT COMMISSIONER McWHIRTER: So, essentially that just  
31 shows a timeline of the actual offences in relation to

1 crimes against the person, which includes homicides, rape,  
2 assaults, also kidnaps and abductions. What it shows is  
3 that there is a fairly steady amount of crime against the  
4 person relating to non-family violence, that's in the  
5 blue, but what you see steadily increasing from 2004/5 is  
6 the increase in family violence related assaults. That's  
7 now 41 per cent of the total amount of crimes against a  
8 person that we actually record at Victoria Police or  
9 respond to.

10 MR MOSHINSKY: So about 41 per cent of the crimes against the  
11 person that Victoria Police respond to arise out of family  
12 incidents?

13 ASSISTANT COMMISSIONER McWHIRTER: That's correct.

14 COMMISSIONER NEAVE: Can I just clarify are those charges or  
15 convictions?

16 ASSISTANT COMMISSIONER McWHIRTER: They are actually incidents  
17 recorded.

18 COMMISSIONER NEAVE: I see. Thank you.

19 MR MOSHINSKY: So they may not relate to charges.

20 ASSISTANT COMMISSIONER McWHIRTER: They would be an offence of.  
21 Whether we have actually charged somebody ultimately would  
22 be dependent on the actual outcome, but they are offences  
23 of - - -

24 COMMISSIONER NEAVE: So either a charge or a conviction. It is  
25 how the police classified an incident.

26 ASSISTANT COMMISSIONER McWHIRTER: Yes.

27 MR MOSHINSKY: If we move from the 41 per cent of criminal  
28 charges being family related - sorry, criminal incidents  
29 being family related, how much of police time is spent  
30 dealing with family violence incidents? What analysis, if  
31 any, has there been conducted? Is it possible to conduct

1 any analysis?

2 ASSISTANT COMMISSIONER McWHIRTER: It's really difficult. We  
3 don't have a time attribution process within Victoria  
4 Police in terms of allocating time specifically to family  
5 violence or really to other forms of matters that we  
6 respond to. It is really difficult because, as we have  
7 heard this morning, of the complexities of family violence  
8 and the numbers of people who actually are involved in it  
9 from a policing perspective.

10 Quite clearly there's a whole range of people  
11 that get involved in family violence from police response,  
12 whether that's specialist police in terms of  
13 investigations because of the serious nature of the  
14 offending. It can be, as I said in my statement, last  
15 year we had 450 requests for service from the dog squad to  
16 respond to family violence incidents where there are  
17 weapons involved or there is a risk or a threat. Since  
18 2010, essentially one-third of all siege situations,  
19 that's over 400, relate to family violence incidents.

20 So therefore you have a whole range of specialist  
21 police services that have to respond to that, being  
22 critical incident response teams or specialist operation  
23 teams and they can last for many long hours. So it is  
24 really, really difficult because of the complexities and  
25 the vast number of matters that we actually respond to.

26 MR MOSHINSKY: Does the 41 per cent give one a rough guide of  
27 how much police time is being spent on family violence  
28 related matters?

29 ASSISTANT COMMISSIONER McWHIRTER: I think it gives an  
30 indication of the level of reporting and the level of  
31 response that we provide to family violence.

1 MR MOSHINSKY: In terms of the steps that are involved in  
2 dealing with a family violence incident and accepting that  
3 there will be a range of different types of scenarios, can  
4 I just read you a list of steps and then ask you to  
5 comment if these are all ones that may well arise in a  
6 particular case: Attending the incident, completing  
7 paperwork after the incident, serving notices, interaction  
8 with the community sector, checking compliance,  
9 prosecuting breaches, collecting evidence at the scene,  
10 criminal prosecutions, quality assurance, training, are  
11 they all steps that may well arise in a particular case?

12 ASSISTANT COMMISSIONER McWHIRTER: If not a particular case,  
13 certainly across the board in terms of scope of our  
14 response to family violence, yes.

15 MR MOSHINSKY: Is there any way of analysing how much time is  
16 spent on all of those steps; for example, by doing a  
17 sample study of some weeks over a number of police  
18 stations?

19 ASSISTANT COMMISSIONER McWHIRTER: The difficulty there is the  
20 allocation of surveys like that may not be representative  
21 over an extended period, so you might get a very small  
22 snapshot. It would depend on whether those stations are  
23 representative of the full picture of family violence. So  
24 if you used some particular areas, particularly in  
25 Southern Metro or maybe out NorthWest Metro, you could get  
26 a very high level of response to family violence in terms  
27 of the time. In other areas you may not get that  
28 response. So it would be very, very difficult to get a  
29 small snapshot in time and part of the problem might be  
30 getting our members to actually fill out the survey, and  
31 that might be problematic in terms of actually trying to

1 allocate all those hours to what we do on a day-to-day  
2 basis.

3 MR MOSHINSKY: Can I ask you, Assistant Commissioner Cornelius,  
4 in terms of data that is available, are you able to  
5 explain what the CAD data is perhaps by reference to a  
6 document that you provided, which I understand is  
7 confidential, but you may be able to describe the nature  
8 of the material in it.

9 ASSISTANT COMMISSIONER CORNELIUS: Commissioners, you have  
10 before you a document which is prepared every month on a  
11 rolling 12-month basis which shows the number of CAD  
12 events that were allocated by the call centre, ESTA, the  
13 000 number, if you like, where those events have been  
14 allocated to a police unit for a response. By and large  
15 that is a van based response through the divisional van.  
16 You will see that for the rolling 12 months to 30 June  
17 2015 statewide public initiated CAD events were 822,650  
18 events.

19 You will see, if I could draw your attention to  
20 the graph at the top of the paper, there's a dotted blue  
21 line which represents the number of units that were  
22 allocated. The black line is the number of CAD events  
23 that have come through the system and been allocated for  
24 response and that is for the previous 12 months. Then the  
25 grey line is the preceding 12 months. So, if you like,  
26 the black line is the demand curve and the blue line is  
27 our response to allocating resources against that curve.

28 Then if you move down to the table which is in  
29 the middle of the page, that sets out for you the events  
30 in terms of priority, priority 1, priority 2, priority 3.  
31 Every event is accorded a priority based on criteria that

1 we have negotiated with ESTA and you will see the  
2 disposition of those priorities.

3 Then in the table below that you will see event  
4 type. These event types are listed as crime, public  
5 order, family, drugs, traffic, other and non-police  
6 events. You will note that 32 per cent of events as they  
7 are allocated through ESTA relate to crime, 32 per cent to  
8 public order and then 12 per cent to family violence.  
9 Then you will see the event outcomes which are recorded  
10 beneath that.

11 I guess the key point to make about 12 per cent  
12 of all calls coming through 000 relating to family  
13 violence is that that might on its face indicate to you  
14 that, compared to all the other matters requiring a police  
15 attendance, 12 per cent might not appear to be a  
16 particularly large proportion. However, I should point  
17 out to you that generally responding to and attending to a  
18 family violence matter takes up a lot more time than many  
19 of the other events that are received through 000. So, if  
20 you are looking for a proxy measure in terms of the time  
21 police spend undertaking different activities, the  
22 12 per cent in and of itself is not a good proxy measure.  
23 What is a more effective proxy measure is to actually look  
24 at the proportion of family violence matters related, say,  
25 to crimes against the person and those broader offending  
26 categories.

27 So, my sense of it, based on various anecdotal  
28 exchanges with my members, is that 40 to 50, maybe as high  
29 as 60 per cent, is not a bad indication for the amount of  
30 time that members spend per shift dealing with family  
31 violence related matters and it's borne out by the crime

1 offence data. So when you consider that, for example in  
2 Casey, which has the highest incidence of family violence  
3 related assaults in the state, that ratio is in the order  
4 of about 46 per cent, but that relates only to offence  
5 related matters, that doesn't include all of the other  
6 non-assault related offences that of course occur in the  
7 family violence space.

8 For example, one of the largest and fastest  
9 growing crime categories in our crime data is the justice  
10 procedures related offending, which is to do with the  
11 enforcement of family violence related matters,  
12 intervention orders. Of course, the very significant  
13 activities behind serving those orders, chasing up  
14 individuals for breaches of those orders and driving home  
15 the accountabilities around compliance with those  
16 intervention orders, that too soaks up a very significant  
17 proportion of time for our people.

18 So, as I say, the test in the meal room with our  
19 members when we are asking, "What does your day look  
20 like," pretty much every member I speak to who is on the  
21 van will say, "Most of my shift is taken up by family  
22 violence matters," and if I push them to a percentage,  
23 depending on where they are it will vary between 40 to 60  
24 per cent of their time. Of course, if a van picks up a  
25 complex family violence matter at the start of their  
26 shift, the chances are we won't see that van crew for the  
27 rest of the shift.

28 MR MOSHINSKY: Can I ask a related question about funding and  
29 budgets. You have both given an indication of how much  
30 time is taken up dealing with family violence. Is there a  
31 part of the Victoria Police budget that is allocated for



1           dealing with family violence? How does that work?

2   ASSISTANT COMMISSIONER McWHIRTER: I think the only clear

3           indication you get would be the Family Violence Command in

4           terms of budget that I might get for next financial year.

5           Other than that, it is just a global budget that is

6           allocated for the resources that each region or division

7           has. There is no specific allocation for family violence

8           per se.

9   MR MOSHINSKY: So if there's a family violence team in a

10          particular area, the budget for that team, how is that

11          dealt with?

12   ASSISTANT COMMISSIONER McWHIRTER: That's a really interesting

13          question, one of those things - a challenge for me in the

14          next 12 months to 18 months to actually design a model,

15          because right at the moment in terms of how we are

16          structured there is no real budget allocation for any of

17          the family violence teams in terms of how they have been

18          put together, and that's one of those industrial relations

19          issues that I will have to try to work my way through in

20          terms of how those resources are allocated to a particular

21          work unit, how they are measured, what allocation of

22          funding will be used to support their needs.

23   DEPUTY COMMISSIONER FAULKNER: Is that true of any element of

24          policing? So is there an allocation made for traffic or

25          for crime or is it just the way the global budget works?

26   ASSISTANT COMMISSIONER CORNELIUS: As a rule of thumb,

27          depending on where you are in our organisation, in the

28          front-line operations space between 75 to 80 per cent of

29          our budget is salary related. So, if you are looking for

30          an indicative cost mapped back to an activity, looking at

31          your allocation of people against an activity is not a bad

1 proxy measure, bearing in mind the 75 to 80 per cent  
2 proportion of the budget that flows with people. But  
3 that's only part of the picture because if all you looked  
4 for was attributing budget to family violence units, you  
5 wouldn't be counting the very significant amount of  
6 activity undertaken by uniform members in front-line  
7 response.

8 So in my region, and this is the case for all of  
9 our regions, about 64 per cent of all of my police members  
10 operate in the van. They are rostered for duties on the  
11 van to provide front-line response. Bearing in mind my  
12 evidence already which has indicated to you that about,  
13 depending on where you are, between 40 to 60 per cent of  
14 that capacity is directed towards front-line family  
15 violence related response, you are starting to generate a  
16 picture of just how significant a challenge providing both  
17 a family violence response and also a more specialised  
18 intervention and prevention and pre-emption activity in  
19 the family violence space, just how much of a challenge  
20 that is against the global Victoria Police budget.

21 MR MOSHINSKY: Could I just ask you to explain. You referred  
22 to 64 per cent of police members are in vans doing  
23 front-line response. What are the rest doing?

24 ASSISTANT COMMISSIONER CORNELIUS: About 20 per cent on average  
25 is directed towards what we call investigations and  
26 response. So that's where our detectives are, that's  
27 where our proactive and preventative capacity is in  
28 front-line operations. Then the balance of that is  
29 overhead, for want of a better description.

30 MR MOSHINSKY: Commissioners, I was going to move on from  
31 the time spent and funding issues - - -

1 COMMISSIONER NEAVE: I did have one question I just wanted to  
2 clarify. First of all, what does CAD stand for?

3 ASSISTANT COMMISSIONER McWHIRTER: Computer aided despatch.

4 COMMISSIONER NEAVE: Thank you. There is reference to crime  
5 and there's reference to family. They are coded as  
6 mutually exclusive categories. Do we know that?

7 ASSISTANT COMMISSIONER CORNELIUS: Yes, so I think the code  
8 table - I may not have included the code table, but that  
9 could be provided to you. There are some very specific  
10 codes that feed into each one of these event types. So  
11 I don't want to mislead you by having a guess, but we can  
12 certainly make the code table available.

13 COMMISSIONER NEAVE: If the police are called out to an  
14 incident which results in charges for a crime, they are  
15 nevertheless coded as family or could they be coded as  
16 either?

17 ASSISTANT COMMISSIONER CORNELIUS: The key thing to remember  
18 here is that the event type table, which appears in the  
19 middle of this report, is the classification that ESTA  
20 gives it.

21 COMMISSIONER NEAVE: So they could code it - if somebody rang  
22 up and said, "I think there's a dreadful family violence  
23 incident going on next door, somebody is being killed" or  
24 something, it could be coded as either, couldn't it?

25 ASSISTANT COMMISSIONER CORNELIUS: It could be, and it also  
26 explains why there's such a significant disparity when you  
27 actually look at the numbers recorded against the family  
28 event type with, for example, how many L17s there are.

29 COMMISSIONER NEAVE: Yes. That was going to be my next  
30 question. Thank you.

31 ASSISTANT COMMISSIONER CORNELIUS: We don't actually know what

1 the event is until we get there.

2 COMMISSIONER NEAVE: No, of course. I understand. Counsel,  
3 are you going to ask about paragraph 28, while we are on  
4 the figures?

5 MR MOSHINSKY: Yes, I was actually going to come to that next.  
6 Before I do, are there other funding or time questions?

7 DEPUTY COMMISSIONER NICHOLSON: Just while we are on the  
8 overall numbers, I was wondering can you tell us what  
9 proportion of family violence incidents are able to be  
10 attributed to repeat offenders?

11 ASSISTANT COMMISSIONER McWHIRTER: I probably can. I just  
12 don't know whether I have them here with me. We know we  
13 can do a breakdown. We have done the CAD data breakdown  
14 in relation to repeat attendances for 2014. From memory,  
15 it relates to around about 30,000 out of 44,000 annually  
16 are single one-time response from Victoria Police. I just  
17 don't know I have the figures at hand with me, but I can  
18 get them to you. We have done the breakdown to do exactly  
19 that; how many times have Victoria Police gone back in  
20 terms of repeat victims. As I said, rough figure, it's  
21 around about 33 out of the 44,000, 30 to 33,000 where  
22 there's only one family violence incident recorded for  
23 that particular victim. The rest then multiply out to  
24 twice, three times or more.

25 COMMISSIONER NEAVE: That would be helpful if we could have  
26 that.

27 ASSISTANT COMMISSIONER McWHIRTER: I can get that data to you.

28 COMMISSIONER NEAVE: Thank you.

29 MR MOSHINSKY: Can I then turn to the data about where there is  
30 an L17, so there is a family violence incident report  
31 prepared, how that is dealt with statewide, the data in

1 terms of the various pathways that Sergeant Spriggs  
2 referred to this morning, one of which is safety notices,  
3 et cetera.

4 You deal with this, Assistant Commissioner  
5 McWhirter, in your statement. If I take you to paragraph  
6 28, you indicate there that in 26.1 per cent of cases  
7 there was either a safety notice issued or there was a  
8 separate application for an intervention order?

9 ASSISTANT COMMISSIONER McWHIRTER: Correct.

10 MR MOSHINSKY: I think that compares with, in Sergeant Spriggs'  
11 division, he referred to a figure of 16 per cent for  
12 safety notices.

13 ASSISTANT COMMISSIONER McWHIRTER: Yes.

14 MR MOSHINSKY: And I don't think he had available to him the  
15 figure combining safety notices and intervention orders  
16 applied for.

17 ASSISTANT COMMISSIONER McWHIRTER: Yes.

18 MR MOSHINSKY: I'm not sure if you have available - are you  
19 able to break down that figure of 26.1 per cent as between  
20 safety notices and intervention order applications?

21 ASSISTANT COMMISSIONER McWHIRTER: It is in paragraph 30, if  
22 I'm correct. In 2013/14 we had nearly 6,000 safety  
23 notices and then we also applied for 11,000 intervention  
24 orders.

25 MR MOSHINSKY: Thank you.

26 ASSISTANT COMMISSIONER McWHIRTER: It's around about 17,000.

27 MR MOSHINSKY: The other figure Sergeant Spriggs referred to  
28 was the number of incidents where charges were laid, and  
29 I think you deal with this in paragraph 32. I think you  
30 indicate there that in 2013/14 police responded to  
31 45 per cent of all family violence incidents by charging

1 the respondent with a criminal offence?

2 ASSISTANT COMMISSIONER McWHIRTER: Correct.

3 MR MOSHINSKY: I think that compares to the figure of

4 37 per cent that Sergeant Spriggs had for his division.

5 ASSISTANT COMMISSIONER McWHIRTER: Yes, that's correct.

6 MR MOSHINSKY: I'm not sure if you have available the

7 percentage of cases which were referral only, so no action

8 was taken other than referring to an agency.

9 ASSISTANT COMMISSIONER McWHIRTER: We have to run that data for

10 you. We can actually extract it out, but in most cases,

11 as was given evidence this morning, most will be formal

12 referrals.

13 MR MOSHINSKY: But in terms of not so much formal versus

14 informal, but where there is a referral but there's no

15 other step such as criminal or civil action.

16 ASSISTANT COMMISSIONER McWHIRTER: We can extract that data for

17 you if you need it.

18 MR MOSHINSKY: Thank you. In paragraph 49 of your statement

19 you refer to monitoring the response of regions - - -

20 COMMISSIONER NEAVE: Sorry, before you get to that, counsel,

21 I just had one further question. We know that about

22 25 per cent of family violence incidents resulted in

23 either a safety notice or an IVO application.

24 ASSISTANT COMMISSIONER McWHIRTER: Yes.

25 COMMISSIONER NEAVE: We know that 45 per cent of all incidents,

26 that is a higher proportion, resulted in a charge. Does

27 that reflect the fact that there are a lot of breaches in

28 that 45 per cent? I'm just sort of puzzled and maybe I'm

29 making the wrong comparison, but I'm puzzled by the fact

30 that you have 25 per cent of IVO applications by the

31 police, but a higher proportion of incidents resulted in a

1 charge. I think maybe that's because there's a lot of  
2 breaches.

3 ASSISTANT COMMISSIONER McWHIRTER: A lot of contraventions.

4 COMMISSIONER NEAVE: Is that the answer?

5 ASSISTANT COMMISSIONER McWHIRTER: Yes, a lot of contraventions  
6 in relation to that and breaches, yes.

7 COMMISSIONER NEAVE: So the criminal offences, quite a  
8 substantial proportion of those are presumably not the  
9 substantive offence from the first or from the incident  
10 when you attend - - -

11 ASSISTANT COMMISSIONER McWHIRTER: Not necessarily, no.

12 COMMISSIONER NEAVE: They are breaches.

13 ASSISTANT COMMISSIONER McWHIRTER: Yes.

14 COMMISSIONER NEAVE: Thank you.

15 MR MOSHINSKY: It may be helpful if it is possible to get a  
16 breakdown of the 45 per cent as between breaches and what  
17 other offences.

18 COMMISSIONER NEAVE: Yes, that would be very helpful, if we  
19 could tell which of them were breaches and which of them  
20 were substantive criminal offences arising out of  
21 attendance of the incident.

22 MR MOSHINSKY: Is that data something that would be available?

23 ASSISTANT COMMISSIONER McWHIRTER: We should be able to break  
24 that down, yes.

25 MR MOSHINSKY: Thank you. If you could turn to paragraph 49,  
26 Assistant Commissioner McWhirter, you refer there to  
27 monitoring the response of regions by monthly scorecards  
28 and you have provided me a document which I understand is  
29 at this stage confidential. I will provide it to the  
30 Commissioners and you. Is this document the scorecard  
31 that you are referring to?

1 ASSISTANT COMMISSIONER McWHIRTER: Yes.

2 MR MOSHINSKY: Could you just explain in general terms how this  
3 document works?

4 ASSISTANT COMMISSIONER McWHIRTER: In general terms the actual  
5 key indicators or key targets come out of the actual  
6 Living Free From Violence Strategy from Victoria Police,  
7 2009 to 2014. It just articulates what those are, and  
8 then across the state we actually measure across how we  
9 have met those targets or haven't met those targets. This  
10 is just indicating in terms of overall between July 2014  
11 and June 2015 how we have tracked against those targets.

12 MR MOSHINSKY: So the words going down the left column, they  
13 are publicly available targets?

14 ASSISTANT COMMISSIONER McWHIRTER: They would be. They are in  
15 the back of the actual Living Free From Violence Strategy,  
16 that's correct.

17 MR MOSHINSKY: So there is no problem with me referring to them  
18 out loud?

19 ASSISTANT COMMISSIONER McWHIRTER: No.

20 MR MOSHINSKY: For example, increased family incident reports  
21 by 10 per cent, that's one of those targets.

22 ASSISTANT COMMISSIONER McWHIRTER: Correct.

23 MR MOSHINSKY: Across the right-hand side of the page, just to  
24 understand what the document represents, there's a  
25 coloured bar. Does the figure on top of that bar indicate  
26 how the state has performed over that financial year?

27 ASSISTANT COMMISSIONER McWHIRTER: Correct, against the base  
28 line year of 2008/9.

29 MR MOSHINSKY: So this is the monitoring data that you were  
30 referring to?

31 ASSISTANT COMMISSIONER McWHIRTER: Correct.



1 ASSISTANT COMMISSIONER CORNELIUS: If I may, just to put that  
2 in context, every region conducts a monthly regional  
3 tasking and coordination meeting and we review, myself and  
4 my superintendents, as do my regional assistant  
5 colleagues, this is one of the datasets that we look at,  
6 the family violence scorecard, to challenge ourselves  
7 around making sure that we - you will see we are by and  
8 large exceeding the targets, but it really is around  
9 holding ourselves accountable against this scorecard.

10 MR MOSHINSKY: I want to turn now to how Victoria Police deal  
11 with call-outs and the focus of today is the initial  
12 police call-out. We have already had some evidence which  
13 you will have heard today from Sergeant Spriggs about the  
14 Code of Practice and the different pathways. What I would  
15 like to address now - and I might turn to you, Assistant  
16 Commissioner Cornelius - is from an operational  
17 perspective what comments you would make on some of the  
18 feedback that we received, both from a lay witness earlier  
19 in the public hearings and also from the community  
20 consultations.

21 On the first day of the public hearings, a lay  
22 witness who went by the pseudonym "Susan Jones" gave  
23 evidence and part of her evidence at confidential  
24 transcript pages 8 to 9 referred to what happened the  
25 first time the police were called out by her.  
26 I appreciate you don't have this in front of you, but  
27 I will just paraphrase it for you.

28 She described how her husband's behaviour was  
29 becoming erratic and she knew that there were signs that  
30 something bad was going to happen. He unpadlocked the  
31 cupboard in which he kept her phone because he had come

1 home for dinner and while she had the phone she called  
2 000. The police came to the door, she let them in. "He,"  
3 that's her husband, "looked at me like, 'I don't know  
4 what's her problem, everything's all good here.' They,  
5 the police, split us up, spoke to me at one end of the  
6 house, spoke to him at the other end of the house.  
7 I heard laughing coming from his side of the house, also  
8 being asked by the police what is the emergency and it's  
9 very difficult because it hasn't happened yet and I don't  
10 want it to happen and feeling silly for calling them.  
11 After they had left he's still kind of happy and laughing  
12 like he thought, 'That was going to stop me. All I have  
13 to do' - this is what he told me afterwards - 'All I have  
14 to do is tell them you understand women, they are  
15 irrational, they overexaggerate, they overreact  
16 sometimes,' and he made it to me feel like they had a  
17 laugh about me overreacting and exaggerating."

18 I know obviously you can't comment on a specific  
19 case, but in terms of the Code of Practice and operational  
20 procedure, what comments can you make about that way of  
21 handling a situation?

22 ASSISTANT COMMISSIONER CORNELIUS: I will comment on that  
23 evidence as you have relayed it to me, to this extent.  
24 What you have relayed to me highlights a terrible  
25 perception that is being created in the mind of a victim  
26 about whether or not the police are there to support her.  
27 That is absolutely not the perception that we would want  
28 to see victims feeling as a result of us responding to a  
29 call for help from them.

30 The Code of Practice makes it really clear to our  
31 members that we have an absolute expectation that our

1 members will conduct themselves professionally and that  
2 they will have an absolute focus on understanding the  
3 needs of and providing support to the victim. So, without  
4 going into the specifics of any individual case, I'm  
5 deeply concerned that any victim would hold that  
6 perception as you have relayed it to me. If such a  
7 circumstance was flagged with me, either by that victim or  
8 by a victim's advocate, I would absolutely be wanting to  
9 go back to the unit or the attending units that were  
10 responsible for that and have them clearly understand  
11 their obligations under the Code of Practice and hold them  
12 accountable through their supervisors for conducting  
13 themselves in a way where victims absolutely feel and  
14 understand that police are there to support them.

15 MR MOSHINSKY: Can I raise with you another theme that came  
16 through from a number of people who attended the community  
17 consultations that the Royal Commission held earlier this  
18 year. One of these - I will take you through several, but  
19 I will take them one by one. One was that the police  
20 response was too slow and no action was being taken until  
21 or unless there were obvious signs of physical assault  
22 having occurred. Can you comment from an operational  
23 perspective and the Code of Practice on whether that  
24 should be occurring?

25 ASSISTANT COMMISSIONER CORNELIUS: Look, the Code of Practice  
26 makes it very clear that there's no such thing as a  
27 technical or a minor breach. Every breach and every call  
28 for assistance or cry for help has to be taken seriously  
29 and ought be treated by the attending police with the  
30 seriousness that it warrants. That is reflected very  
31 clearly in the Code of Practice. I don't think we could

1 have made it any clearer in the Code of Practice just how  
2 seriously we want our members to take family violence  
3 related matters and the level of attention that they ought  
4 pay to them.

5 I have been following the evidence as well.  
6 I have also been made aware of some of the public  
7 commentary and some anecdotes that I'm aware of around,  
8 "Don't call us until you've got bruises" and that sort of  
9 commentary. I really want to take the opportunity here  
10 today to say to the community, but also more particularly  
11 to every serving police officer in Victoria Police, that  
12 is absolutely not in keeping with the expectations set out  
13 in the Code of Practice. Every breach of an intervention  
14 order, every act of family violence is required to be  
15 dealt with under the Code of Practice as a serious matter.

16 I think any experienced police officer would know  
17 and appreciate in their heart of hearts that oftentimes  
18 our most serious incidents and indeed the death of women  
19 in this space is presaged by a gradual buildup in many  
20 cases, breach upon breach, and for want of it either being  
21 reported to us or for want in a number of clear cases  
22 where police have not paid attention to those breaches,  
23 escalations occurred and it's had terrible consequences.

24 That's why the Code of Practice highlights the  
25 fact that there is no distinction between a so-called  
26 technical breach or a serious breach. A breach is a  
27 breach. If an intervention order has been breached, we  
28 are required under the Code of Practice to address it, and  
29 we are required under the Code of Practice to treat it as  
30 a breach. I don't think the Code of Practice could be any  
31 clearer about this.

1                   The key point for us, the key point for me as a  
2                   regional Assistant Commissioner, is what do we do to make  
3                   sure that the practice of our people, wherever they are in  
4                   the State of Victoria, accords with the expectations in  
5                   the Code of Practice. That comes down to a degree of  
6                   intrusiveness on our part in terms of holding our people  
7                   accountable where their service delivery had fallen short  
8                   or their practice has fallen short, but it is also  
9                   absolutely about highlighting with our front-line managers  
10                  the need for them to pay attention to this stuff and to  
11                  make sure that where people come to us seeking help,  
12                  whether it's by a walk up to the local police station or a  
13                  call through 000, that we absolutely respond attentively  
14                  and in accordance with what's set out in the Code of  
15                  Practice.

16   MR MOSHINSKY: Another part of that feedback was response times  
17                  being too slow. Are there measures to assess how quick  
18                  response times are and whether they're adequate and are  
19                  there sufficient resources to enable an adequate response  
20                  time?

21   ASSISTANT COMMISSIONER CORNELIUS: We don't have standard  
22                  response times set in the Code of Practice. The language  
23                  that is used in the Code of Practice is along the lines of  
24                  "as soon as practicable" or "in a timely way". The key  
25                  piece around determining a police response to a matter of  
26                  course is the assessment initially from ESTA and the CAD  
27                  operators in terms of allocation of event priority, and  
28                  then it comes down to our front-line supervisors making a  
29                  call about which calls get prioritised.

30                  That of course is going to be a moving feast,  
31                  depending on how many priority 1 calls might be on the

1 plate of our members at any given point in time. It's  
2 also very challenging, of course, for our front-line  
3 supervisors to make the call between imminent or actual  
4 threats that are being occasioned by a number of people  
5 who require our assistance at the same time. I think we  
6 heard some evidence earlier today where one of our  
7 colleagues made the comment that he used to go home at  
8 night concerned about the calls that he'd made in the  
9 course of his shift around risk assessment and the  
10 decisions that he'd made.

11 I have to say to you that, in a very pragmatic  
12 sense, is one of the challenges that every front-line  
13 supervisor faces on a day-to-day basis. Through our  
14 practice and the application of our professional judgment  
15 we seek to make the right call. Of course, there are  
16 occasions when we do have a number of critical incidents  
17 at a given point in time and it's going to be difficult  
18 for us to have the resources available to respond to every  
19 one of those incidents. Of course, if we are not able to  
20 deploy local resources to attend to those priority 1  
21 matters, we will look to draw on resources and response  
22 capacity from elsewhere across a local area command or  
23 elsewhere across a division or elsewhere across a region.

24 The key point for us is we seek to line up the  
25 available resource and get it there as quickly as we can,  
26 but there are a whole range of factors which impact on how  
27 long that might take.

28 MR MOSHINSKY: What is the definition of a priority 1 matter?

29 ASSISTANT COMMISSIONER CORNELIUS: The criteria are set with  
30 ESTA and there are a whole range of factors in there which  
31 I'm sure can be made available to you. But I have to say

1 the key thing about a priority 1 job is that there is an  
2 imminent or an actual threat of serious injury, threat to  
3 life or to property.

4 MR MOSHINSKY: Is there data available to say what the response  
5 time is sort of on average for a region?

6 ASSISTANT COMMISSIONER CORNELIUS: No, we don't track response  
7 times.

8 DEPUTY COMMISSIONER FAULKNER: Can I ask has it been put to you  
9 in the past that perhaps you should, because obviously  
10 other public services are required to state, such as  
11 hospital emergency departments that have equally difficult  
12 tasks in prioritising resources, ambulance we are publicly  
13 aware of the code 1s, code 2s and what the response time  
14 is, and it's sort of publicly reported so that we know,  
15 even though they are not meeting the targets, we know how  
16 things are going.

17 ASSISTANT COMMISSIONER CORNELIUS: By definition, I would put  
18 it that by definition every call for a response by an  
19 ambulance attendance would be in relation to a critical  
20 event, whereas in policing we receive a whole range of  
21 calls for assistance, a relatively smaller proportion for  
22 priority 1 matters, most of them sit at the priority 2  
23 level, and then there's the third priority. But they will  
24 range from everything from dealing with a noisy party  
25 through to dealing with the most serious family violence  
26 matters.

27 We will of course attribute a much greater degree  
28 of urgency attendance and response around those most  
29 serious matters and the noisy party might take some time  
30 to be dealt with, if at all. Depending on where you are  
31 in our organisation, there are some parts of the state

1 where the noisy parties just don't get a look-in because  
2 the priority 1 jobs and particularly the family violence  
3 matters are the ones that are attracting our attention.

4           Given that we take our business as we find it, we  
5 respond to the calls as they come in, we have no way of  
6 dialling in additional resources to deal with additional  
7 peaks in demand. Our resourcing level is fixed and we do  
8 what we can to maximise our resources against demand by  
9 appropriate rostering and by allocation of resources split  
10 between investigations, response and prevention. But all  
11 of these things are directed towards us making sure that  
12 we strike the right balance between responding to a crisis  
13 and having sufficient resources to work in the prevention  
14 and early intervention space to try and get ahead of that  
15 demand curve.

16           I am strongly of the view that the most effective  
17 way to measure our performance is to measure our  
18 performance in terms of outcomes rather than outputs. An  
19 output measure such as a response time will tie us to a  
20 focus on a particular means of service delivery that in  
21 actual fact won't allow us to attribute sufficient  
22 resources in the prevention, pre-emption and early  
23 intervention space. If Victoria Police was measured in  
24 terms of its response times, that would come at the cost  
25 of us being able to invest our existing assets base into  
26 the pre-emption and prevention space.

27 DEPUTY COMMISSIONER FAULKNER: Can I just respond by saying  
28 I absolutely appreciate how difficult what I was asking  
29 was. I suppose my question was has it been considered.  
30 You have given a good answer about why it might not be  
31 considered, because I can probably see exactly the same



1 spectrum of turn-ups at hospital emergency departments  
2 where some people come with a sprained ankle because they  
3 find that preferable to going to the local GP and some  
4 people come with a life-threatening condition. So  
5 I understand what you are saying about ambulances. I can  
6 still see a parallel with health, and I know health hate  
7 having to report response times, but my question was more  
8 has it been considered, not what the argument against it  
9 is.

10 ASSISTANT COMMISSIONER CORNELIUS: I guess you might deduce  
11 from the argument I've just put to you that the response  
12 time issue is something that we have been asked about  
13 previously and that we have considered. Our position  
14 remains that the most effective way to measure the  
15 effective delivery of policing services is by measuring  
16 our performance in terms of outcome.

17 I would go right back to the Peelian principles,  
18 the founding principles of contemporary policing, and note  
19 that Peel himself made the observation that the  
20 effectiveness of policing should be measured more in the  
21 absence of crime than in the enforcement of it.

22 DEPUTY COMMISSIONER FAULKNER: Thank you.

23 MR MOSHINSKY: Assistant Commissioner, one of the other themes  
24 that came through the community consultation was issues of  
25 collusion in small towns where the perpetrator may be  
26 known to attending police. I appreciate your region is in  
27 the Southern Metropolitan region. Are you in a position  
28 to comment on that issue?

29 ASSISTANT COMMISSIONER CORNELIUS: Look, it's not a piece that  
30 I have had to deal with directly within my command.

31 That's not to say, however, that the Mornington Peninsula

1 and some of the outer reaches of Cardinia which are within  
2 my region don't have those issues around the closeness of  
3 our police to the local community. That carries with it  
4 both significant benefits, but also some risks.

5 I have to say that my personal awareness of the  
6 work that my members do in my smaller stations in Southern  
7 Metro, that issue around how they balance their duty as a  
8 police officer with the personal interests that they might  
9 have running in their community, for them the focus on the  
10 public interest is what gets them through, because  
11 oftentimes when our members do find themselves being  
12 challenged by people who live in community with them, the  
13 thing that gets them through is to remind that individual  
14 who might be pulling them on that, "Look, I have a job to  
15 do and it is to serve the public interest, and it's to do  
16 my job and look out for the safety of this community.  
17 It's not to protect sectional interests of particular  
18 individuals within a community." Every one-station member  
19 that I have met in my 13-year journey in Victoria Police,  
20 I'm very confident that they get that.

21 If I reflect on the four and a half years that  
22 I spent as the head of Ethical Standards Department in  
23 Victoria Police, I can say to you that instances of  
24 individual members in small communities being caught up in  
25 allegations of misconduct and conflict of interest, while  
26 they were certainly there, they were absolutely in the  
27 minority of the matters that we had to contend with around  
28 unprofessional conduct.

29 MR MOSHINSKY: Another issue that emerged was how culturally  
30 and linguistically diverse communities are dealt with.  
31 What does the Code of Practice say about this and what

1 guidance is there for members about how to deal with those  
2 situations?

3 ASSISTANT COMMISSIONER McWHIRTER: Again, this is very clear in  
4 the Code of Practice in terms of our expectation about how  
5 we deal with diverse communities. It is laid out very,  
6 very clearly in terms of expectation, in terms of  
7 behaviour, in terms of engagement and certainly in terms  
8 of respect in terms of those communities we deal with.  
9 I think it's quite clear, as Assistant Commissioner  
10 Cornelius said, in terms of members' obligations, in terms  
11 of meeting the requirements of the Code of Practice, and  
12 we have high expectations that they will meet those at  
13 every occasion.

14 MR MOSHINSKY: Can I then raise really a broader issue that  
15 some of this feedback I think gives rise to, which is the  
16 variability in response. There was feedback of positive  
17 experiences in terms of police handling it and then there  
18 was the criticisms that I have referred to. This has also  
19 been reflected in some of the lay witnesses who have given  
20 evidence during the public hearings.

21 What systems or policies are there in place to  
22 monitor what's going on to try to ensure a more consistent  
23 response and to avoid this variability that seems to be  
24 reflected in that evidence?

25 ASSISTANT COMMISSIONER McWHIRTER: Extensive, really. The  
26 reality is we have a Code of Practice in terms of how we  
27 need to conduct ourselves in relation to response to  
28 family violence. On the ground, in terms of training, and  
29 I can talk you through the training a little bit later on,  
30 but the reality is there are whole layers of training that  
31 occurs at a divisional level and Sergeant Spriggs

1 mentioned what he does as a family violence adviser this  
2 morning.

3 We have a whole range of supervisory  
4 responsibilities around family violence in terms of from  
5 the initial commencement of the L17 into the leader system  
6 in terms of authorisation of that and reviewing that. The  
7 family violence liaison officers have to review the L17  
8 process in terms of the approach by the members. Any  
9 briefs of evidence that actually come from a family  
10 violence environment or situation all have to be checked  
11 in terms of the actual credibility of what's taken place  
12 by the members and validating what's taking place.

13 Family violence teams, as we have learnt this  
14 morning, clearly have a responsibility in terms of  
15 checking the work that's done on the front-line by the  
16 actual front-line service delivery by our members. So,  
17 there are a whole range of accountabilities in place to  
18 actually check to make sure that the members in the first  
19 response do the right thing. On top of that, there is  
20 always the public to make us accountable as well. There  
21 are certainly mechanisms that the community can actually  
22 make us accountable if they wish to complain or raise  
23 issues of inappropriate behaviour.

24 COMMISSIONER NEAVE: Could I just have a follow-up on that.

25 Would it be helpful to have some sort of standing body, if  
26 there isn't one, and I don't think there is one now,  
27 involving service providers, police, possibly courts,  
28 possibly a number of other organisations, in order to feed  
29 back at a systemic level concerns and complaints about  
30 police processes?

31 ASSISTANT COMMISSIONER McWHIRTER: A body just for complaints?

1 COMMISSIONER NEAVE: Some standing body that the police  
2 consulted with regularly. It could be co-chaired by the  
3 police and another body.

4 ASSISTANT COMMISSIONER McWHIRTER: Certainly from a Victoria  
5 Police perspective, in our submission we are very clear on  
6 having a strong governance framework in relation to family  
7 violence and one of those side issues in relation to what  
8 that governance framework would provide would be exactly  
9 that, some permanency in relation to engagement with the  
10 sector, right across government as well, in terms of  
11 listening to those sort of concerns, so Victoria Police as  
12 the first responders in most cases can actually respond to  
13 those criticisms if they are there.

14 COMMISSIONER NEAVE: Thank you.

15 ASSISTANT COMMISSIONER CORNELIUS: I think a key hallmark of  
16 the effectiveness of that governance arrangement would be  
17 that it would look at these issues from an end-to-end  
18 perspective.

19 COMMISSIONER NEAVE: Yes, a systemic perspective. I'm not  
20 talking about handling individual complaints, but issues  
21 that are identified on a systems basis that could be taken  
22 back. So the police would support something along those  
23 lines?

24 ASSISTANT COMMISSIONER McWHIRTER: Certainly.

25 COMMISSIONER NEAVE: Thank you.

26 MR MOSHINSKY: Can I turn now to the risk assessment process  
27 and L17 form which has been the subject of quite a bit of  
28 evidence today. There has been evidence about how it's  
29 filled in, where it's filled in, and there's been evidence  
30 about the content of the form and I think there's a review  
31 of the form under way. Could you please explain where is

1 that review up to and really what's the main object of the  
2 review, which direction is Victoria Police heading with  
3 the risk assessment process?

4 ASSISTANT COMMISSIONER McWHIRTER: Certainly. I think it's  
5 worth just sort of clarifying the L17. The L17 is just  
6 the number of the form. The actual document itself is  
7 reflective of the actual CRAF, the Common Risk Assessment  
8 Framework. It actually is part of Practice Guide 2. It's  
9 actually a demonstration of what we do, as a whole range  
10 of other providers have to do, in relation to an initial  
11 assessment. It is an initial assessment tool and that's  
12 what we have signed up to and there's been an awful lot of  
13 work, well documented prior to me, in terms of how the  
14 CRAF came about.

15 That document, the CRAF, is owned by DHHS. So in  
16 terms of changes to the L17, it's not an individual  
17 Victoria Police responsibility; it is actually really a  
18 situation where, if we are going to review the CRAF of  
19 which we use our L17 for, it has to be done at that level.  
20 So that's the first thing in terms of a broader systems  
21 perspective in terms of changing the L17 or the CRAF, if  
22 you like. That's a consideration and we heard Dr Wood  
23 before talking about risk assessment. So that's a broader  
24 piece of work.

25 In relation to Victoria Police's perspective on  
26 the L17, we acknowledge that there is a need to educate  
27 our members around the L17 and our response. That's one  
28 part of it. The other thing is that we also know that  
29 there is a need to identify the greatest risk and the  
30 greatest harm to victims or AFMs and so we have done some  
31 work, initial work, with people who have already given

1 evidence before this Commission, Professor Cathy Humphreys  
2 and Professor Jim Ogloff, and I'm not quite sure whether  
3 you are hearing from Dr Troy McEwan, but we have already  
4 engaged them earlier this year and we are continuing to do  
5 that work to essentially draw out the risk indicators, if  
6 you like, out of L17 to essentially in very basic terms to  
7 be a one-page initial risk assessment tool.

8 Why? To provide our members with a clear  
9 indication that when they attend a family violence  
10 incident they can do an enhanced risk assessment to  
11 identify whether there is risk here in terms of what they  
12 are faced with for a victim. We know in many instances,  
13 we have heard before about the informal and formal  
14 referral process, that there are some family violence  
15 incidents that are just disputes. What happens is our  
16 members who are probably erring on the side of caution,  
17 which is probably a really good thing in relation to  
18 formal referrals, but there is an opportunity for Victoria  
19 Police to really identify those at highest risk.

20 So essentially we are going to draw those  
21 questions out of the risk indicators in a question based  
22 sense to draw that information out from victims or AFMs.  
23 Essentially on that one page, if all those questions are  
24 "no", then that should give members some strength and  
25 knowledge that they don't have to then go and fill out a  
26 full family violence incident report or the full L17.  
27 Why? Because that will direct our resources to  
28 understanding that that particular family violence  
29 incident is not at the level where we need to invest our  
30 resources, that it is a recording of a family violence  
31 incident without the necessity to actually fully complete

1        what we currently have as a family violence incident  
2        report.

3                So it's about tiering your response, if you like,  
4        in very basic terms, understanding that there are  
5        differences of where we need to invest our resourcing.  
6        What that will mean is that it should actually give some  
7        clarity for members in terms of risk assessment. Clearly  
8        we need a whole lot of education around that if we go down  
9        that path and we would need to pilot, which is our  
10       intention, and it is part of my responsibility in terms of  
11       Family Violence Command. What it needs to do is to look  
12       at our approach to the L17.

13               We have an opportunity to do that and we will  
14       pursue that hopefully within the next 12 months and we  
15       will trial that. We want to pilot it because we need to  
16       test it to see whether it works. We will do that with  
17       academic research to ensure there is rigour in relation to  
18       that process, to make sure we do offer the best risk  
19       assessment process when we are dealing with family  
20       violence incidents.

21    MR MOSHINSKY: Just to try to encapsulate that, there is a  
22       review under way and you are looking at a model which  
23       might involve a much shorter form of one page as an  
24       initial risk assessment to be done at the scene?

25    ASSISTANT COMMISSIONER McWHIRTER: Yes.

26    MR MOSHINSKY: Which may then mean a decision is taken to take  
27       no further action or it may mean that a longer risk  
28       assessment form such as the current L17 is then completed.

29    ASSISTANT COMMISSIONER McWHIRTER: Yes. The response to those  
30       questions will dictate whether they then need to do a full  
31       family violence incident report.



1 MR MOSHINSKY: Just in terms of timing, when - - -

2 ASSISTANT COMMISSIONER McWHIRTER: We have an opportunity to  
3 potentially engage with our service providers who have put  
4 forward a proposal to us which we are considering. All of  
5 these things cost time and money. I have to look  
6 internally to see whether I can support that from a  
7 financial perspective and also whether we can get in  
8 principle agreement to engage with that service provider.

9 That would cover off on a whole range of things  
10 for us in terms of how we respond to family violence. It  
11 would encapsulate the concerns or approach to the L17 and  
12 a couple of other things that are actually being discussed  
13 here today. So, we are in the early stages of that  
14 negotiation. We will have to do it anyway. Victoria  
15 Police will have to do it anyway. There is an opportunity  
16 to do it soon. Again, this is about funding and time and  
17 resourcing, so I just have to get that in principle  
18 support internally before we progress.

19 MR MOSHINSKY: In terms of the work of the Commission, are  
20 there draft documents in existence, for example, of what a  
21 one-page risk assessment might look like that could be  
22 made available?

23 ASSISTANT COMMISSIONER McWHIRTER: Not complete, but certainly  
24 in a draft form we could probably provide those to you.  
25 But again these are very early discussions we have had  
26 with some academics in relation to what that might look  
27 like. I see no reason why I couldn't provide those to you  
28 as long as it was provided in confidence.

29 MR MOSHINSKY: One of the points that has come up is whether  
30 there should be some sort of weighting or scoring involved  
31 in different triage models. Is this part of this new

1 proposal?

2 ASSISTANT COMMISSIONER McWHIRTER: Not necessarily. The  
3 actuarial tools, as you have heard from Dr Wood earlier,  
4 where that sits in terms of rigour - and just as a side  
5 issue, the First 48 that we talk about and also there's  
6 another model which Victoria Police have applied which is  
7 three-by-three-by-three, which is essentially contacting a  
8 victim in the first three days, in the first three weeks  
9 and then the first three months, models that have just  
10 evolved through necessity in terms of police practice  
11 because when we developed these family violence teams they  
12 needed some, I suppose, standard approach to the work that  
13 they were doing.

14 To my knowledge, there's not a lot of academic  
15 rigour around those actuarial tools like the First 48.  
16 They were developed through necessity. Part of my role is  
17 getting those models evaluated to see what weight they  
18 have, to see how that will actually blend into my broader  
19 role around trying to identify, as I said earlier, a  
20 baseline model for family violence teams; what is our  
21 organisational methodology and approach to how we are  
22 going to actually manage family violence in the team  
23 sense, not necessarily the first response sense at this  
24 stage.

25 The L17 work is where we will be focusing on  
26 trying to improve our front-line response, so the team  
27 model is completely different.

28 MR MOSHINSKY: One of the issues that has been the subject of  
29 evidence earlier in the public hearings is the sending of  
30 L17s to Child Protection.

31 ASSISTANT COMMISSIONER McWHIRTER: Sure.

1 MR MOSHINSKY: There was different views expressed by Professor  
2 Cathy Humphreys and by Beth Allen from DHHS about what  
3 they would like to see happen. Is there a Victoria Police  
4 position on whether there needs to be a change or should  
5 be a change?

6 ASSISTANT COMMISSIONER McWHIRTER: Yes, most definitely. In  
7 terms of the referral protocol, Victoria Police have an  
8 obligation in relation to reporting serious harm for  
9 children in those family violence circumstances. That is  
10 a direct report to Child Protection. Also, in relation to  
11 where members have a concern about the serious wellbeing  
12 of a child, we have to then actually refer to Child FIRST.

13 Now, from our members' perspective we are only  
14 concerned to make sure that children are looked after. We  
15 are only there to make sure that they get a response and  
16 that they are protected. We don't have the skills to be  
17 Child Protection specialists. We have the capacity to do  
18 an initial response that identifies somebody is at risk,  
19 in this case children.

20 From a Victoria Police perspective, we are not  
21 trained experts. We are doing an initial assessment to  
22 actually direct somebody else who has those specialist  
23 skills to actually make that decisions about what service  
24 should be provided to that child in that family situation.

25 I think it's really timely, if you actually look  
26 at the evaluation of the RAMPS, when they did the  
27 evaluation of the RAMPS it talked specifically about the  
28 child response and it actually talked specifically around  
29 how important it is to have trained specialists in Child  
30 Protection and Child FIRST with skills and training to  
31 actually make those decisions around what support should

1 be given to children when they are reported as being at  
2 risk. Nowhere does it talk about Victoria Police in that  
3 context at all.

4 We can't be all things to all people. I think we  
5 clearly have the capacity to identify that a child is at  
6 risk. But in terms of the actual support that needs to be  
7 provided as a follow-up, that is not our role or our  
8 obligation and it is very, very difficult to ask Victoria  
9 Police members to then also be part of that discussion and  
10 very, very difficult to arrange in a practical sense as  
11 well.

12 So, from our perspective it should be a single  
13 referral to a location with specialists who understand  
14 about child protection, understand about the nuances and  
15 implications around risk for children and that they should  
16 be making those decisions about what services are  
17 provided, whether it's Child FIRST or whether it's Child  
18 Protection.

19 MR MOSHINSKY: Can I ask you both to comment on the Victoria  
20 Police proposal that police powers be expanded to issue  
21 intervention orders in the field. Why do you advocate  
22 that change? What are the arguments in favour of it?

23 ASSISTANT COMMISSIONER McWHIRTER: From my perspective as being  
24 in charge of Family Violence Command, this is about  
25 looking through the lens of the victim. If you think  
26 about the fact that we are called to their house,  
27 location, wherever they may be, if we think about the  
28 process that has to then follow for the victim, it's an  
29 extremely onerous, difficult path that they then have to  
30 go through. So, in terms of the practice, they still have  
31 to turn up to court, they still have to think about child

1 arrangements, they still have to think about work  
2 arrangements, then when they get to court they do not even  
3 know when they could be actually getting heard. They  
4 could be there all day.

5 So, anecdotally we know that some AFMs don't  
6 stay, they walk out. Therefore, from a victim's  
7 perspective, essentially what's in it for them if we are  
8 issuing family violence safety notices and interim  
9 intervention orders when the victims have to go through  
10 all that process? So, the intent around issuing  
11 intervention order immediately is about the immediacy of  
12 the response, the immediacy of the protection and the  
13 capacity for it to take that pressure off the victim,  
14 because it's all about them. It's not about Victoria  
15 Police and Victoria Police powers. It's not about the  
16 judicial process. It's about looking after the victim.

17 That doesn't mean there aren't difficulties in  
18 terms of how you apply that. There are certainly examples  
19 within Tasmania about how that works. There are certainly  
20 checking mechanisms and counterbalance mechanisms in  
21 relation to how that is applied. But in terms of looking  
22 after the interests of a victim, it seems to me that  
23 logically we want to protect them and take away all that  
24 pressure that they have to actually go through of being  
25 confronted by the perpetrator, being confronted by that  
26 respondent, and the pressure that that puts on them, not  
27 knowing about court dates and court times and court  
28 processes and all these questions they get asked.

29 Why do we need to do that? We already have the  
30 family violence safety notice process. It's been well  
31 entrenched for quite a period of time now. Essentially,

1 intervention orders in the field is an extension of that  
2 by default. It's not so much of a stretch, I don't think,  
3 in terms of practice. There would always be  
4 countermeasures to make sure that that practice is applied  
5 fairly and appropriately, with opportunities to actually  
6 make an application to court if either the AFM or the  
7 respondent disagreed with the intervention order.

8 But what we know anecdotally is that a lot of  
9 these matters are actually resolved by consent anyway.  
10 There is no challenge to what's put in place in terms of  
11 the actual safety notice or the application for the  
12 intervention order, but we also know a lot of respondents  
13 actually don't turn up. So, if you think about the victim  
14 in the application of this process, and that's what we are  
15 here to do, it is actually about looking after their  
16 interests. It's about making the system easier for them.  
17 That's why we see it as so important.

18 MR MOSHINSKY: As a result of legislative changes last year,  
19 safety notices can be issued at any time of day. It's not  
20 restricted to after hours.

21 ASSISTANT COMMISSIONER McWHIRTER: Correct.

22 MR MOSHINSKY: So at the moment police can now issue a safety  
23 notice at any time and that has effect for up to five  
24 days?

25 ASSISTANT COMMISSIONER McWHIRTER: Correct.

26 MR MOSHINSKY: And then one goes to court within that period.

27 ASSISTANT COMMISSIONER McWHIRTER: Correct.

28 MR MOSHINSKY: So is the Victoria Police proposal effectively  
29 extending the safety notice power so that it lasts, rather  
30 than five days, but for a much longer period of time?

31 ASSISTANT COMMISSIONER McWHIRTER: Essentially it would be an

1 intervention order, and in the Tasmanian model it is  
2 12 months. They have done an evaluation. It is clear in  
3 terms of their response in terms of Safe at Home that they  
4 see huge benefits and value in relation to that response.  
5 They do identify there are some issues with it, but in  
6 terms of those that responded to the actual evaluation,  
7 very, very positive in terms of how that actually works  
8 for the victim.

9 DEPUTY COMMISSIONER FAULKNER: Assistant Commissioner, is there  
10 any saving, too, in terms of police time so that that  
11 could be applied to other higher priority family violence  
12 issues?

13 ASSISTANT COMMISSIONER McWHIRTER: From a systems perspective,  
14 and that's why Victoria Police's submission is all about  
15 the system, for Victoria Police that would mean members  
16 wouldn't have to consider going to court, so therefore  
17 they are not taken away from first-line response. From a  
18 court's perspective, it would take a lot of pressure off  
19 the court system and those in the court system. We could  
20 then start to actually free up some time for our members  
21 to actually be focused on other things. There's no doubt  
22 about that. But it's not about Victoria Police. As I  
23 said, it's actually about the victim. That's where we  
24 have to be focused on. We have to look through their  
25 lens.

26 MR MOSHINSKY: Assistant Commissioner Cornelius, did you want  
27 to comment on that?

28 ASSISTANT COMMISSIONER CORNELIUS: Yes, if I might add to that.  
29 If there is a breach of an intervention order or indeed a  
30 breach of a safety notice, we can't take action on that or  
31 have it dealt with without taking both the perpetrator and

1 the victim back to court. We know that many perpetrators,  
2 for want of a better description, gain the system by  
3 avoiding apprehension, avoiding service and, even if we  
4 have effected service, they then don't turn up to court,  
5 knowing of course that there will be a further  
6 adjournment.

7 Yes, there might be a bench warrant issued, but  
8 again that opens up another whole process where we have to  
9 go and try to find that individual and serve yet another  
10 set of papers on them, only to have them gain the system  
11 again, and this piece around affording the victim  
12 immediate safety and immediate justice in terms of holding  
13 an offender accountable so that he doesn't have the  
14 opportunity to walk away before process is served on him,  
15 but also is put in a situation where he is clearly given  
16 to understand what his obligations are and then he knows  
17 that the police are going to hold him accountable to it,  
18 without an opportunity for him to drag the victim back  
19 before the court or indeed to get the court date and then  
20 not turn up.

21 So this piece, and this is one of the key  
22 benefits that came out of - that has the experience in  
23 Tasmania, that the level of support that the victim  
24 actually feels through that process and the effectiveness  
25 of the outcome is a very strong case for us moving in this  
26 direction.

27 COMMISSIONER NEAVE: I have a follow-up question in relation to  
28 that. You would still, would you not, have problems of  
29 service in relation to perpetrators who are not present at  
30 the time? So the sort of avoidance tactics that they use  
31 now they would presumably use to avoid service by the



1 police of the safety notice or intervention order that the  
2 police make and you would also have issues with breach  
3 because you would have to serve him - I will say him - to  
4 bring him back to court, so it wouldn't completely resolve  
5 those issues.

6 I wonder if you could comment on the possibility  
7 of improving court procedures to make them more responsive  
8 to the needs of victims, for example use of remote witness  
9 facilities, which is done routinely in sex cases.

10 ASSISTANT COMMISSIONER CORNELIUS: I don't think anything

11 I have said should be taken as criticism of us also  
12 seeking to have the opportunity for us supporting the  
13 courts in pursuing a therapeutic approach to justice in  
14 this space, and therapeutic particularly for the victim  
15 but also therapeutic for the perpetrator. So, conducting  
16 proceedings in a way which supports the victim and  
17 minimises the risk of further victimisation is key here.

18 For example, allowing for the introduction of  
19 hearsay evidence, allowing for evidence by videolink,  
20 providing appropriate facilities at court so that the risk  
21 of the perpetrator and the victim coming together can be  
22 absolutely excluded, and also making sure that proceedings  
23 are conducted in such a way so that the victim doesn't  
24 feel that it's her word against his and that in actual  
25 fact she has support through the system in terms of  
26 securing an outcome which is going to keep her and her  
27 kids safe. That's the key piece.

28 If I had a magic wand, the other thing I would  
29 change is this piece around substituted service. You will  
30 know from the very significant increase in justice  
31 procedures and harassment offences that one of the primary

1 tools used by perpetrators to breach intervention orders  
2 in relation to their contact with their victim is through  
3 social media. I would have thought that if we could serve  
4 the order by that very means, so if that individual is  
5 using Facebook or some other social media-based mechanism  
6 to harass the victim, there's absolutely no reason why we  
7 wouldn't be able, surely, to serve the intervention order  
8 using exactly that same tool, because we would have  
9 absolute confidence that he would be receiving it.

10 COMMISSIONER NEAVE: Thank you.

11 MR MOSHINSKY: Can I ask you both about the family violence  
12 teams and different models of what they might look like.  
13 We have heard the evidence this morning from Sergeant  
14 Spriggs about how they look in his division. There may be  
15 pros and cons of that approach. Is there an overall  
16 organisational position as to what direction family  
17 violence teams should be heading in and what are some of  
18 the pluses and minuses of the different approaches that  
19 may be taken?

20 ASSISTANT COMMISSIONER McWHIRTER: As I said earlier, that is  
21 my organisational responsibility to actually come back to  
22 the rest of the organisation, in particular the four  
23 regional Assistant Commissioners, and actually devise that  
24 baseline model for family violence teams. What that looks  
25 like at the moment, we have done a lot of the  
26 environmental scanning in terms of what's out there right  
27 across the state and I have been going out and speaking to  
28 a lot of family violence teams. I haven't covered them  
29 all as yet, but I will by the end of the year, to get a  
30 sense of how they are travelling and what are the  
31 different methodologies.

1                   There are quite a number of parts to it, but  
2                   essentially I know one of the issues you have highlighted  
3                   is about the length of time people stay within the family  
4                   violence teams. I think that is critical. However, there  
5                   is an issue for Victoria Police in terms of flexibility of  
6                   having the capacity to move people when we need to, and  
7                   I'm sure Assistant Commissioner Cornelius can actually  
8                   respond to that. But we also have models in our  
9                   organisation that clearly provides some permanency around  
10                  leadership in some areas, which then also allows the  
11                  flexibility in current models where you have defined  
12                  periods of time for people to be in those roles and then  
13                  move them through.

14                 As Sergeant Spriggs clearly said, there are huge  
15                 benefits to actually putting people in roles for a certain  
16                 period of time to get that experience, to increase their  
17                 level of understanding and knowledge and then going back  
18                 into the front-line and actually sharing that knowledge  
19                 and educating those. It's just another way to actually  
20                 educate our workforce.

21                 I don't want to be locked into organisational  
22                 policy on the run, but there is a clear opportunity for us  
23                 to identify a proper management structure for family  
24                 violence teams and then having structured approaches to  
25                 people moving through those positions for defined periods  
26                 of time. Whether six months is enough for constables and  
27                 senior constables is to be decided. It may be 12. But,  
28                 as Superintendent Bateson said, you have to find people  
29                 who actually want to stay in one location such as a  
30                 specialist team for 12 months as well.

31                 Some people won't be suited to it, either. So

1       those considerations need to be taken. If you want to  
2       deal with specialist environments, dealing with really  
3       critical issues of victims, you also have to have the  
4       right people doing those roles. So management need to  
5       have the flexibility, if they put somebody in those roles,  
6       to also move them out if they are not suitable.

7               So, permanency of roles is more about, from my  
8       perspective, permanency of positions under a proper  
9       management structure, not necessarily having permanent  
10      people in those positions for extended periods of time.

11   MR MOSHINSKY: Assistant Commissioner Cornelius, do you want to  
12      comment on the different models of family violence teams,  
13      what you see as the priorities?

14   ASSISTANT COMMISSIONER CORNELIUS: If I may, I would go back to  
15      my opening remarks about the nature of my role, and this  
16      is the case for each of the regional assistant  
17      commissioners. We are effectively between us accountable  
18      for delivering 24/7 policing services to everyone who  
19      lives in the State of Victoria. That covers the whole  
20      gamut of social harms and the drivers of harm which impact  
21      on the wellbeing and safety of Victorians.

22               So within that context our front-line response  
23      has to have the adaptive capacity and the agility to deal  
24      with whatever a van crew member finds on his plate when he  
25      starts a shift and heads off into a night full of  
26      surprises dealing with all of the demands that the  
27      community have on us. So wherever there is a proposal to  
28      increase or extend the specialisation of some of that  
29      adaptive capacity we of course going forward limit our  
30      flexibility as an organisation to move with the demands  
31      and the needs of the community.

1                   Absolutely at the moment family violence is our  
2 top priority. I would like to think that if we were  
3 effective in this place ultimately that would not be the  
4 case into the future. So, as an organisation, Victoria  
5 Police has to be managed and structured in a way that  
6 allows us to maximise the adaptive capacity of our  
7 front-line response and then allow our front-line  
8 responders to dial in the specialist capacity that might  
9 assist them in both dealing with the crisis of the moment  
10 but also allow us organisationally to get ahead of the  
11 demand curve and invest sufficiently in the pre-emption,  
12 early intervention and prevention activities that will  
13 allow our community as a whole working across service  
14 providers and our partner agencies to actually address the  
15 drivers of this social ill, this harm, this cancer in our  
16 community.

17                   So where do we land in terms of who we put in  
18 front-line response and who we put in specialist family  
19 violence units? That's the question. Some of us in terms  
20 of our practice have family violence units that operate as  
21 front-line responders. I have to say that in my  
22 experience of those units operating on a busy shift in  
23 Dandenong and Casey whenever we have dedicated specialist  
24 units to front-line response we have lost them within an  
25 hour of the commencement of the shift and then we are back  
26 to front-line response providing that response. So that  
27 specialist front-line response exists in name only, when  
28 you think about it.

29                   We get the greatest value out of those specialist  
30 units when they are called in to support and provide the  
31 engagement and the specialist skills and training to

1 address the underlying behaviours and the ongoing needs of  
2 victims and perpetrators. So, to my mind, getting the  
3 balance right is absolutely about understanding what does  
4 front-line response need to look like and how do we make  
5 sure that we can dial in appropriately skilled and  
6 resource specialist capacities to take the issue from the  
7 crisis to the solution.

8 MR MOSHINSKY: Can I ask you both about some of the  
9 multi-disciplinary models that exist both in family  
10 violence responses, such as the Forensicare model we heard  
11 about earlier this afternoon, but also in some of the  
12 sexual offences models. Is there a position of Victoria  
13 Police about whether more multi-disciplinary approaches  
14 should be looked at for family violence?

15 ASSISTANT COMMISSIONER McWHIRTER: It is worth noting that it  
16 is an absolute strength of our organisation that we have  
17 the capacity to actually engage with a whole range of  
18 other people to try and improve our service like you have  
19 heard with Forensicare and I think you will hear around  
20 what's going on in Moorabbin in terms of Taskforce Alexis,  
21 and there's other models as well. We know that we have  
22 different social workers from different organisations  
23 embedded at different times right across the state in  
24 terms of different responses within the family violence  
25 teams. I think that's a real strength of our  
26 organisation.

27 In terms of multi-discipline centre approach we  
28 have four multi-discipline centres established in response  
29 to sexual assault and child abuse, and we are currently  
30 undergoing an evaluation which we will make available to  
31 the Commission hopefully by December of those four. We

1 are actually going to open two new multi-discipline  
2 centres in September/October.

3 We see that there is a huge opportunity in  
4 relation to family violence response to apply that  
5 multi-discipline centre approach. So that would be  
6 expanding our current response to sexual assault and child  
7 abuse victims and our investigation and our relationship  
8 with those other departments that sit within those  
9 multi-discipline centres, and then place family violence  
10 teams and those services that support victims of family  
11 violence in that multi-discipline centre environment.

12 Why? Because it's about the victim. It's about  
13 providing the victim an immediacy of response that deals  
14 with their needs in crisis; so those high-risk victims.  
15 You wouldn't necessarily take all victims into a  
16 multi-discipline centre. But there are certainly those  
17 that are at risk that need immediacy of response and also  
18 immediacy of support.

19 So if you have those services in that  
20 multi-discipline centre and you have your family violence  
21 teams it's quite clear that you will get this wraparound  
22 service for a victim and looking after their interests.  
23 But we know that there is an immediate link in relation to  
24 sexual assault and child abuse within the family violence  
25 environment. So there are already the synergies there in  
26 terms of that type of work.

27 I think we would also have to agree that there is  
28 probably an underreporting of sexual assault in family  
29 violence incidents. From my perspective if we have the  
30 capacity to put high risk victims and provide them with  
31 that comforting environment of a multi-discipline centre

1 and they engage with those services face to face and  
2 immediate response.

3 I would be very surprised if at a point in time  
4 we don't see an increase in reporting of sexual assault in  
5 the family violence space. If we have these  
6 multi-discipline centres approach we already have that  
7 mechanism to support those victims. That might mean a  
8 change in current service delivery that exists now. So it  
9 doesn't mean that all services would have to sit in that  
10 multi-discipline environment. It may mean that a Berry  
11 Street or a Women's Health West might have the capacity to  
12 refer to other agencies, but they have sufficient  
13 knowledge and understanding of the referral process to  
14 make those links for that victim. So it might be a change  
15 in terms of the way they do their business. But you might  
16 not need five services. You might just need one that has  
17 the capacity to refer to and engage with that victim. So  
18 it covers off on a lot of opportunities.

19 We need to talk about the issue around child  
20 protection. In those multi-discipline centres you have  
21 child protection operating in that with our investigators  
22 of sexual assault and child abuse. So, if you think about  
23 the issues that DHHS raise about Victoria Police being  
24 involved in those discussions, if you actually are in a  
25 multi-discipline centre and you have those information  
26 sharing issues clear, you have the capacity then in a  
27 family violence space to engage with those child  
28 protection workers as well. So it's about thinking from a  
29 systems perspective - multi-discipline centres in a  
30 victim's perspective about how we wrap around those  
31 service, and that's the benefit of a multi-discipline



1 centre approach.

2 DEPUTY COMMISSIONER NICHOLSON: Can I ask about the  
3 multi-disciplinary centres. Do you see any risk that in  
4 fact you would be taking the level of expertise, people  
5 that have knowledge and skill, further away from your  
6 front-line staff? Like in other service systems the  
7 lesson that's been learnt is that instead you need to  
8 bring people with lots of expertise and knowledge much  
9 closer to your front-line staff to support them, not take  
10 them away.

11 ASSISTANT COMMISSIONER McWHIRTER: I suppose one of the issues  
12 that are around about the model, what you actually do with  
13 your family violence teams - depending on where they were  
14 geographically, you wouldn't put all your family violence  
15 teams in them because it just wouldn't be possible from a  
16 location perspective. But if you look at the model about  
17 how you set up a family violence team you actually would  
18 be drawing on those front-line resources and then  
19 providing them back to the front-line. So there would be  
20 continual rotation of that expertise and knowledge going  
21 back.

22 It is about workflow. It's about how you manage  
23 that. It could be a potential issue, but I think in  
24 fairness in terms of from a victim's perspective it would  
25 be a much more improved way to actually manage family  
26 violence from a victim's perspective and Victoria Police  
27 would have to adapt to that, as we do with these sort of  
28 circumstances, as we have done with our SOCIT  
29 investigators.

30 ASSISTANT COMMISSIONER CORNELIUS: If I might, perhaps one  
31 thing that we have already got operating certainly metro

1 wide and to be rolled out to key rural centres is the  
2 PACER model for mental health, and that's actually where  
3 we are bringing a clinician, an expert, in direct support  
4 of the front-line response. So front-line responders will  
5 identify an individual who clearly needs help and may be  
6 evidencing some mental health issues. So the PACER unit  
7 will attend with the clinician included. That brings the  
8 expert both out into the field where an effective  
9 diagnosis and assessment can be made of that individual  
10 and then that issue can then be taken back into the  
11 specialised space for further specialist resources and  
12 support to be provided.

13 If you think about how from a service delivery  
14 perspective family violence from an end to end sense might  
15 operate going forward, the simple maths and logistics of  
16 it is that we will always have 64 per cent of our people  
17 sitting in a front-line response space and they will need  
18 to be regularly calling on the assistance of qualified  
19 specialists to come and take a matter from front-line  
20 response back into that specialist support and wraparound  
21 service delivery context.

22 But that doesn't take the job away from the  
23 front-line responder because the front-line responders  
24 will continue to be engaged in terms of the ongoing  
25 contact with both the perpetrator and the victim. The  
26 lived experience of those front-line responders actually  
27 is going to be a key input into understanding the drivers  
28 of the behaviour and what's driving both the perpetrator  
29 to behave in a particular way and what sort of support and  
30 assistance need be provided to the victim.

31 ASSISTANT COMMISSIONER McWHIRTER: The multi-discipline centre

1 approach is just one aspect of how you respond. You can't  
2 have a multi-discipline centre in every geographical area.  
3 It's not possible for a whole range of reasons. That's  
4 where the flexibility of a model would then come in terms  
5 of a systems perspective. We were talking about and you  
6 will hear from different models of embedding specialists  
7 in family violence teams. That is that hub and spokes  
8 sort of model in terms of how you might approach that.

9 Again if you are in a multi-discipline centre you  
10 then have the capacity for those services, as Mr Cornelius  
11 has just referred to, to actually go out. It's not as if  
12 they are going to sit in one room and actually just sit  
13 there. They have the capacity to work with those agencies  
14 and go out and provide an increased level of support.  
15 That also exists. Some of those working arrangements  
16 already exist. This would be about co-location for an  
17 improved service delivery. But, again, you will have  
18 family violence teams that will not work in a  
19 multi-discipline centre because of distance. So then we  
20 will have to think of other systems to actually support  
21 them.

22 COMMISSIONER NEAVE: So you are really proposing an eclectic  
23 model which includes both MDCs and the embedding - - -

24 ASSISTANT COMMISSIONER McWHIRTER: Yes.

25 COMMISSIONER NEAVE: As an example, the Royal Women's Hospital  
26 has somebody from a community legal service in it, that is  
27 not a police embedding, but you might want to have a  
28 variety of models of those different kinds depending on  
29 the particular location; is that what you are putting  
30 forward?

31 ASSISTANT COMMISSIONER McWHIRTER: Certainly, because I think

1 if it is about a system's response you need to have people  
2 working together to provide that service to give a better  
3 response. I think there is great opportunity for the  
4 sector to work with us and us to work with them to have an  
5 improved response for victims.

6 COMMISSIONER NEAVE: Thank you.

7 MR MOSHINSKY: Commissioners, I'm conscious of the time. There  
8 is just one more question I need to ask Assistant  
9 Commissioner McWhirter. Assistant Commissioner, you deal  
10 in your witness statement with training at paragraph 113  
11 and following. I won't go through it in detail now. You  
12 have set it out there. But there was some evidence  
13 earlier today that only 3 per cent of police members have  
14 undergone family violence training. Are you able to  
15 comment on that?

16 ASSISTANT COMMISSIONER MCWHIRTER: I can. First of all may  
17 I clarify Victoria Police is a registered training  
18 organisation and we went through the reaccreditation  
19 process earlier this year. Also our training is in line  
20 with the ANZPAA guidelines for family and domestic  
21 violence, so the Australian and New Zealand Policing  
22 Advisory Agency. So that is about benchmarking your  
23 family violence training. That's currently being  
24 reviewed, actually. ANZPAA are going through that process  
25 now. So our training is aligned to that process.

26 I have detailed in my statement about the  
27 extensive nature of our training. In 2010/11 we changed  
28 our training program to a 33-week course. All new  
29 recruits into Victoria Police or new probationary  
30 constables actually have gone through the current  
31 training. Prior to that it was a 23-week course. In that

1 23-week course - which was in existence for an extended  
2 period of time; probably the best part of 10 years - there  
3 were 22 sessions of family violence training in that  
4 course for probably a decade before the changeover in  
5 2010/11.

6 So in terms of members being exposed to training  
7 across Victoria Police other than the key points of change  
8 of legislation since 2004, 2008, we have a long history of  
9 providing extensive training, family violence training, to  
10 our members. I have spoken to Fiona McCormack in relation  
11 to that 3 per cent and it was just a misunderstanding  
12 about an issue that was raised at a workshop that we held  
13 a couple of weeks ago.

14 MR MOSHINSKY: Thank you. Commissioners, those are my  
15 questions.

16 DEPUTY COMMISSIONER NICHOLSON: I had a question. In your  
17 statement you point to the difficulties faced by police in  
18 dealing with adolescent perpetrators.

19 ASSISTANT COMMISSIONER McWHIRTER: Yes.

20 DEPUTY COMMISSIONER NICHOLSON: But you really didn't point to  
21 any solution. We heard in earlier hearings Professor  
22 Patrick McGorry thought that there was room for some  
23 specialist response to adolescents. Do you have any ideas  
24 about that?

25 ASSISTANT COMMISSIONER McWHIRTER: I can tell you the picture.  
26 The picture is pretty bleak for us. It concerns me  
27 greatly when Victoria Police have to go to a family  
28 situation to protect a parent because they are crying out  
29 for help and all they want is the violence to stop, and we  
30 are not in a situation to help them. It's not the fact  
31 that they want their children charged with offences; they

1 just want the actual violence to stop.

2 We don't have any capacity to do anything with  
3 them. There's no service support, there's no programs  
4 support, and we are left trying to deal with a situation  
5 with children under 18, either moving them out of the  
6 house by consent - with their consent and their parent's  
7 consent, who is the victim - and trying to get them into  
8 some sort of accommodation that's going to be satisfactory  
9 in the short-term without any resolution to the actual  
10 issue.

11 It's a DHHS issue, I would think, in the first  
12 instance around having suitable crisis accommodation and  
13 support when an adolescent perpetrator needs some  
14 assistance, and this is about the continuum of family  
15 violence. If we don't do something at the front end for  
16 those young perpetrators their behaviour is just going to  
17 replicate through all relationships beyond. If they are  
18 doing it to their family members, it's a concern what they  
19 are going to do in their own relationships when they grow  
20 older.

21 Essentially, unless there are charges involved,  
22 we are helpless. We have no capacity to respond to that  
23 incident. So it's not about Victoria Police having more  
24 powers to do anything. It's about actually us being in a  
25 position to actually address the situation of the young  
26 perpetrator to try to protect the parent who is the  
27 victim. We just need some options.

28 Our members can be tied up for hours and hours  
29 and hours trying to deal with young perpetrators, trying  
30 to find some accommodation for them. This is just trying  
31 to actually just get them to a safe place to protect the

1 victim. We have no options. There needs to be a service  
2 support. It's one of the biggest risks for us as an  
3 organisation in terms of what we can do with powers, but  
4 as a community in terms of the longer term implications  
5 about not being able to address that behaviour.

6 DEPUTY COMMISSIONER NICHOLSON: So you would support some sort  
7 of more specialist approach that may have a more  
8 therapeutic flavour to it?

9 ASSISTANT COMMISSIONER McWHIRTER: Most definitely, but as long  
10 as Victoria Police have the capacity to actually fairly  
11 and responsibly move that child out of that premises to  
12 protect the victim in the short term so it's safe for  
13 everybody involved, and the members as well.

14 COMMISSIONER NEAVE: I have one last question. At paragraph 28  
15 in your statement, Assistant Commissioner McWhirter, you  
16 say that roughly 25 per cent of all family violence  
17 incidents attended are dealt with by a safety notice being  
18 issued or presumably a police application for an IVO.

19 ASSISTANT COMMISSIONER McWHIRTER: Yes.

20 COMMISSIONER NEAVE: Instinctively that figure seemed low to me  
21 and I just wondered whether you had any response to it.

22 ASSISTANT COMMISSIONER McWHIRTER: In terms of the safety  
23 notices?

24 COMMISSIONER NEAVE: It's a combination of the two, I think.

25 It's 26.1 were dealt with either by a safety notice or an  
26 IVO.

27 ASSISTANT COMMISSIONER McWHIRTER: So that's police making  
28 those applications, not necessarily them directing an AFM  
29 to actually make their own application or supporting them.  
30 I think I mention later on that 66 per cent of those  
31 intervention orders we make application, but then we might

1 not be the applicant for those other ones. It depends on  
2 the circumstances. The safety notices are not restrictive  
3 but there are parameters in terms of how you can apply  
4 them. As Sergeant Spriggs explained earlier, you need to  
5 be able to serve the documentation on the respondent.

6 COMMISSIONER NEAVE: I understand that. But it's a total,  
7 isn't it? 26.1 is both the safety notice or an IVO.

8 ASSISTANT COMMISSIONER McWHIRTER: That's right. It works out  
9 to be about 17,000.

10 COMMISSIONER NEAVE: I'm intrigued by this, sorry. 75 per cent  
11 of incidents - some of them the police will make a  
12 judgment that nothing should be done.

13 ASSISTANT COMMISSIONER McWHIRTER: Yes, might be referrals.

14 COMMISSIONER NEAVE: Might be referrals. Some will be cases  
15 where the affected family member is told, "If you want to  
16 get an intervention order you can see the registrar of the  
17 court." I just wondered whether you had any response.  
18 I noticed in the document, the confidential document, and  
19 it's an indicator which has been exceeded, increase  
20 intervention orders, it just instinctively sounded rather  
21 low to me but it may not be in terms of other police work.

22 ASSISTANT COMMISSIONER McWHIRTER: The safety notices - one of  
23 the restrictions around that initially was around the  
24 timing. It's only changed since 2014. So if you look at  
25 the statistics for the actual calendar year 2014, and  
26 these are legitimate figures from the Crimes Statistics  
27 Agency, we have actually gone from 5,000 in 2013 to over  
28 8,000 in 2014. So we are actually increasing our safety  
29 notices.

30 COMMISSIONER NEAVE: I understand that.

31 ASSISTANT COMMISSIONER McWHIRTER: This is about point in time



1 stuff.

2 COMMISSIONER NEAVE: I understand that, because you can now

3 apply for a safety notice at any time.

4 ASSISTANT COMMISSIONER McWHIRTER: Yes.

5 COMMISSIONER NEAVE: But this is 26.1 of both, isn't it?

6 Doesn't this figure mean that in the relevant period the

7 combination of intervention orders and safety notices - -

8 -

9 ASSISTANT COMMISSIONER McWHIRTER: Is 17,000.

10 COMMISSIONER NEAVE: Is 26.1 of all call-outs to family

11 violence incidents; is that right?

12 ASSISTANT COMMISSIONER McWHIRTER: Yes.

13 COMMISSIONER NEAVE: I really just wanted an instinctive

14 response to - - -

15 ASSISTANT COMMISSIONER McWHIRTER: So one of the things that we

16 need to actually break down which is probably not clear

17 here for you is that the question was asked earlier about

18 - family violence incident reports are the total. So

19 there will be those where we re-attended in terms of

20 breaches and what have you as well that should be put in.

21 So that will take up some of those family violence

22 incident reports. So re-attending. There might already

23 be an intervention order in place.

24 DEPUTY COMMISSIONER NICHOLSON: That doesn't include breaches.

25 ASSISTANT COMMISSIONER McWHIRTER: It doesn't include breaches.

26 Does that make sense? It is only the proportion that we

27 have actually acted on in relation to those specific

28 things. So we might put a family violence incident

29 report, as we heard earlier, in relation to a breach but

30 there are already intervention orders in place; there is

31 already a safety notice.

1 COMMISSIONER NEAVE: I see.

2 ASSISTANT COMMISSIONER McWHIRTER: So we are only just saying

3 what we have done - that's how many we have done of that

4 particular - - -

5 COMMISSIONER NEAVE: It is not a criticism. I was really

6 thinking it looks like a low proportion. It has been

7 sufficiently serious for the police to attend, and yet

8 there were only 26.1 per cent of safety notices and IVO

9 applications combined. That was my question.

10 ASSISTANT COMMISSIONER McWHIRTER: I take your point. I can

11 only present you with the figures that I am presented

12 with.

13 COMMISSIONER NEAVE: Of course you can, but your impression is

14 that doesn't show that there is something terribly wrong

15 with the system and that police aren't applying in

16 circumstances where they should be?

17 ASSISTANT COMMISSIONER McWHIRTER: No, in fact we are clearly

18 increasing in terms of each year in terms of our

19 responses.

20 COMMISSIONER NEAVE: Thank you.

21 MR MOSHINSKY: Commissioners, if there are no further

22 questions, I ask that Assistant Commissioner McWhirter be

23 excused and Assistant Commissioner Cornelius is coming

24 back on Wednesday.

25 COMMISSIONER NEAVE: Thank you very much, Assistant

26 Commissioners.

27 <(THE WITNESSES WITHDREW)

28 ADJOURNED UNTIL TUESDAY, 4 AUGUST 2015 AT 9.30 AM

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