Comprehensive Risk Assessment Tool – Victim-Survivor

This tool addresses all evidence-based risk factors, current and historical experiences of domestic and family violence, and other factors which may be relevant to an individual's risk, needs and barriers to support, healing and recovery.

Who can use this tool: Only Tier 3 organisations or practitioners can use this tool. For information on tiers and roles and responsibilities, please see the RAMF.

What is the purpose of this tool: This tool aims to guide practitioners through a detailed structured professional judgement practice approach to determine the level of risk, history and pattern of violence, and inform risk management and intervention.

When should this tool be used: When an experienced practitioner is seeking to record detailed risk information (including over-time where there is ongoing service engagement), to build a comprehensive picture of risk adapted to victim-survivor's personal context. If a Tier 3 organisation or practitioner is seeking to undertake a time-critical risk assessment, practitioners may instead use the Intermediate Risk Assessment Tool.

Part A: Personal information	This section includes demographic information to help identify cohort specific considerations that may impact the victim-survivors experience of domestic and family violence.
Part B: Comprehensive assessment of risk	This section guides you through assessing risk to the victim-survivor. • **Evidence-based risk factors:** These questions are used to determine which risk factors are present to help identify the risk of domestic and family violence occurring or escalating. • **Victim-survivor self-assessment:** This is a crucial part of risk assessment. Victim-survivors are often best placed to assess their own level of risk. • **Additional risk considerations:** Including for specific cohorts. These are prompts to support practitioners to consider intersecting needs, and impacts and tactics of violence experienced by the victim-survivor. • **Protective factors:** Protective factors are individual, relational and environmental characteristics that reduce the impact of DFV and promote safety, recovery and wellbeing.
Part C: Outcome	Practitioners determine the level or seriousness of risk using the information collected above in **Part B**, by applying their structured professional judgement.
Part D: Risk Assessment (Child)	If assessing risk to a child victim-survivor alongside an adult victim-survivor, this section guides you through adapted risk assessment questions.

Name of worker completing this tool:	
Date:	

Part A – Personal information

Victim-survivor

Full name:	
Date of Birth:	
Contact details:	
Gender identity:	☐ Woman/Girl ☐ Man/Boy ☐ Non-binary ☐ Preferred not to say ☐ Unknown ☐ Self-described, please specify:
Intersex status:	☐ Yes ☐ No ☐ Preferred not to say ☐ Unknown
Transgender history, experience or identity:	☐ Yes ☐ No ☐ Preferred not to say ☐ Unknown Pronouns:
Sexuality:	☐ Straight or heterosexual ☐ Gay, lesbian, or homosexual ☐ Bisexual or pansexual ☐ Asexual ☐ Preferred not to say ☐ Unknown ☐ Other, please specify:
Aboriginal and/or Torres Strait Islander origin:	☐ Aboriginal ☐ Torres Strait Islander ☐ Both Aboriginal and Torres Strait Islander ☐ Preferred not to say ☐ Neither ☐ Unknown
LGBTIQA+:	☐ Yes ☐ No ☐ Not known
People with disabilities:	☐ Yes ☐ No ☐ Not known Details:
Additional information and adjustments (if needed):	
CALD :	☐ Yes ☐ No ☐ Not known Details:
Identified cultural background or ethnicity:	
Country of birth:	
Year of arrival in Australia:	
Interpreter required:	☐ Yes ☐ No ☐ Not known
Language mainly spoken at home:	
Bridging or Temporary Visa?	☐ Yes ☐ No (If yes, what type):
Primary address:	
Current Location:	
Tenancy type:	☐ Mortgaged property ☐ Rental ☐ Social housing ☐ Own property, no mortgage ☐ Not known
Additional information (i.e., whose name is on the lease/mortgage):	
Emergency contact:	
Relationship to victim-survivor:	
Phone:	

Person using violence

Full name:	
Date of birth:	
Other names/alias:	
Gender identity:	☐ Woman/Girl ☐ Man/Boy ☐ Non-binary ☐ Preferred not to say ☐ Unknown ☐ Self-described, please specify:
Intersex status:	☐ Yes ☐ No ☐ Preferred not to say ☐ Unknown
Transgender history, experience or identity:	☐ Yes ☐ No ☐ Preferred not to say ☐ Unknown Pronouns:
Sexuality:	☐ Straight or heterosexual ☐ Gay, lesbian, or homosexual ☐ Bisexual or pansexual ☐ Asexual ☐ Preferred not to say ☐ Unknown ☐ Other, please specify:
Aboriginal and/or Torres Strait Islander origin:	☐ Aboriginal ☐ Torres Strait Islander ☐ Both Aboriginal and Torres Strait Islander ☐ Preferred not to say ☐ Neither ☐ Unknown
CALD:	☐ Yes ☐ No ☐ Not known Details:
LGBTIQA+:	☐ Yes ☐ No ☐ Not known
Person with disabilities:	☐ Yes ☐ No ☐ Not known Details:
Primary address:	
Current Location:	
Relationship to victim-survivor:	
Additional details:	

Details of children (if applicable)

If there are children involved in this risk assessment or impacted by the violence disclosed, please fill out their details and conduct separate risk assessments for them (where appropriate) in **Part D** of this tool.

Child	Parent – Victim-survivor	Parent – Person using violence
1.	☐ Yes ☐ No	☐ Yes ☐ No
2.	☐ Yes ☐ No	☐ Yes ☐ No
3.	☐ Yes ☐ No	☐ Yes ☐ No
4.	☐ Yes ☐ No	☐ Yes ☐ No

Part B – Risk assessment

Preliminary questions

Has the adult victim-survivor been asked screening questions?	☐ Yes ☐ No

***If yes**, please consider attaching the record of screening to this assessment, or referring back to it help inform your risk assessment.*

***If no**, please ask the following questions about the person using violence, in addition to the set of assessment questions below.*

Question	Response	Comments
Have they controlled your day-to-day activities (e.g., who you see, where you go) or put you down?*	☐ Yes ☐ No	
Have they physically hurt you in any way? (hit, slapped, kicked or otherwise physically hurt you)	☐ Yes ☐ No	

Section 1: Evidence-based risk factors

These questions are based on the evidence-based risk factors contained in the ACT RAMF. Practitioners should note that not all risk factors may be directly relevant to the victim-survivor, or the violence may be occurring in a different family or relationship structure outside of the intimate partner context. Practitioners should ensure they explore risk assessment in a way that is relevant and responsive to the victim-survivor and their experience of violence.

Questions	Response	Comments
Is more than one person making you feel afraid? (Are there multiple people using violence?)	☐ Yes ☐ No	
The following risk related questions refer to the person using violence:		
RECENCY		
Are they currently employed?*	☐ Yes ☐ No	
Have they recently…	☐ Yes ☐ No	
• shown signs of a mental health condition?	☐ Yes ☐ No	
• threatened or attempted suicide or self harm?*	☐ Yes ☐ No	
• misused alcohol, drugs or other substances?* (specify substance)	☐ Yes ☐ No	
• followed you, repeatedly harassed or messaged/emailed you?*	☐ Yes ☐ No	
• been obsessively jealous towards you?*	☐ Yes ☐ No	
• has any violence increased in severity or frequency?* (what and how)	☐ Yes ☐ No	
ACTIONS OF THE PERSON USING VIOLENCE		
Have they ever…	☐ Yes ☐ No	
• controlled your access to money, or had a negative impact on your financial situation?	☐ Yes ☐ No	
• seriously harmed you?* (identify type of harm)	☐ Yes ☐ No	
• assaulted you when you were pregnant?*	☐ Yes ☐ No	
• threatened to kill you?*	☐ Yes ☐ No	

Questions	Response	Comments
• threatened or used a weapon against you?*	☐ Yes ☐ No	
• tried to choke/strangle/suffocate you?* (this will include applying pressure to the neck)	☐ Yes ☐ No	
• pressured, coerced or forced you into any sexual activity that you did not want?*	☐ Yes ☐ No	
• been reported to police by you or anyone else for family violence?	☐ Yes ☐ No	
• breached or broken the conditions of a protection order, court order or police notice?	☐ Yes ☐ No	
• had a history of violent behaviour to previous partners, other family members or non-family members? (specify details)	☐ Yes ☐ No	
• harmed or threatened to harm a pet or animal?	☐ Yes ☐ No	
• been arrested for violent or other related behaviour?	☐ Yes ☐ No	
• been to court or been convicted of a violent crime or other related behaviour? (specify details)	☐ Yes ☐ No	
Do they have access to weapons?*	☐ Yes ☐ No	
IMMINENCE		
Have you recently separated from your partner?* (include relevant information about recent, ongoing or planned relationship separation)	☐ Yes ☐ No	
Do you have pending family court matters or other legal matters? (such as protection order proceeding, criminal matter(s) before the court)	☐ Yes ☐ No	
Are they about to be, or have they recently been, released from jail or another facility? (Specify when)	☐ Yes ☐ No	
Has a crime been committed? (**Not to be asked directly of victim-survivors**. Criminal offences include physical abuse, sexual assault, threats, pet abuse, property damage, stalking and breaching protection orders)	☐ Yes ☐ No	

* May indicate that the victim-survivor is at increased risk of serious harm or lethality.

RISK TO CHILDREN

Risk to children (if applicable)	☐ Yes ☐ No ☐ N/A

If children have been identified through this risk assessment process, you should ask the adult victim-survivor about risk to them specifically. When doing so, please be aware of possible statutory obligations to report child abuse. Practitioners should consider specifically assessing risk to children (see **Part D** for detailed risk assessment questions).

Question	Response	Comments (or not known)
Have they ever threatened to harm the child/children?* (identify which children)	☐ Yes ☐ No	
Have they ever harmed the child/children?*	☐ Yes ☐ No	
Have children ever been present during/exposed to family violence incidents?	☐ Yes ☐ No	

Question	Response	Comments (or not known)
Are there children in the family who are aged under 1 year?*	☐ Yes ☐ No	

* May indicate that the victim-survivor is at increased risk of being killed or almost killed.

Section 2: Victim-survivor's own assessment

The victim-survivor's assessment of risk is a highly relevant consideration in determining risk. This section seeks to understand their perception of risk and their experience of violence. Victim-survivors are often best placed to assess their own level of risk, and their concerns need to be treated seriously, especially if they say they are at risk of experiencing significant harms. Remember that minimisation of risk can also occur, even in situations where several evidence-based risk factors are present.

Question	Response	Comments (or not known)
Do you believe it is possible they could kill or seriously harm you?*	☐ Yes ☐ No	
Have you ever thought or believed it is possible they could kill or seriously harm you (or others)?*	☐ Yes ☐ No	
From 1 (not afraid) to 5 (extremely afraid) how afraid of them are you now? (enter number in space provided)	☐ Yes ☐ No	
Do you have any immediate concerns about the safety of your children or someone else in your family?	☐ Yes ☐ No	
Do you feel safe when you leave here today?	☐ Yes ☐ No	
Would you engage with police if you felt unsafe? (If no, discuss barriers to why not)	☐ Yes ☐ No	

* May indicate that the victim-survivor is at increased risk of being killed or almost killed

Section 3: Additional risk assessment considerations

Depending on the victim-survivor's personal circumstances, identity and sociocultural context, risk assessment should seek to understand how overlapping factors shape experiences of risk and the tactics used by people using violence. Understanding how these factors intersect can help a practitioner understand barriers to safety, and heightened impacts of coercive control and systems abuse.

ABORIGINAL AND TORRES STRAIT ISLANDER

Question	Response	Comments (or not known/applicable)
Are you able to get support from your family and community?	☐ Yes ☐ No	
Are you concerned that other people in the community or other family members will find out what is occurring?	☐ Yes ☐ No	
Are you concerned about further violence from other family members or the community?	☐ Yes ☐ No	
Have you ever been made to go or stay somewhere you didn't want to be?	☐ Yes ☐ No	
Have you been deprived access to your culture? (including language, community events, sorry business)	☐ Yes ☐ No	

LESBIAN, GAY, BISEXUAL, TRANSGENDER, INTERSEX, QUEER, ASEXUAL, AROMANTIC AND AGENDER PEOPLE (LGBTIQA+)

Question	Response	Comments (or not known)
Have they undermined or refused to accept your identity, including in public and with other family members? (sexuality and gender identity)	☐ Yes ☐ No	
Are you concerned that other people in the community or other family members will find out what is occurring?	☐ Yes ☐ No	
Have they outed you or threatened to do so?	☐ Yes ☐ No	
If affirming your gender, have they stopped you from taking steps to do so?	☐ Yes ☐ No	
Have they ever stopped you from accessing medication?	☐ Yes ☐ No	

OLDER PEOPLE

Question	Response	Comments (or not known)
Are you dependent on them to meet your daily needs?	☐ Yes ☐ No	
Are they dependent on you or are you dependent on them financially?	☐ Yes ☐ No	
Have they threatened to relocate you or make you stay somewhere you do not want to go? (e.g., forced into care, forced to downsize home)	☐ Yes ☐ No	
Do you feel isolated / lonely or not have the level of contact with other people that you would like?	☐ Yes ☐ No	
If on medication, do you manage your medication on your own?	☐ Yes ☐ No	

ACCESSIBILITY TO SERVICES

Question	Response	Comments (or not known)
Do you have mobile reception where you live?	☐ Yes ☐ No	
Do you have people close by to help you should you need practical assistance?	☐ Yes ☐ No	
Are you concerned that other people in the community or other family members will find out what is occurring?	☐ Yes ☐ No	
Is your closest police station located far from your property or is it open only limited hours?	☐ Yes ☐ No	
Do you have access to transport?	☐ Yes ☐ No	

CULTURALLY AND LINGUISTICALLY DIVERSE COMMUNITIES

Question	Response	Comments (or not known)
If you are not a citizen or permanent resident, have they threatened your immigration status or made threats to send you or your children overseas, or threatened to or taken away your passport?	☐ Yes ☐ No	
If you were thinking about separating from your partner would your family or friends be supportive? (Exploration of other risks in relation to this question, such as honour killings)	☐ Yes ☐ No	
Are you concerned that other people in the community or other family members will find out what is occurring?	☐ Yes ☐ No	
Are you dependent on them for financial needs? (consider ineligible for Centrelink or work rights in Australia, access to own bank account)	☐ Yes ☐ No	
Are you restricted from having contact with your family, friends and community in Australia or overseas? (including children)	☐ Yes ☐ No	
Did you have a choice about being married? (Only applicable if married)	☐ Yes ☐ No	
Are there any cultural or religious beliefs that would prevent you from leaving the relationship?	☐ Yes ☐ No	

PEOPLE WITH DISABILITIES

Question	Response	Comments (or not known)
Does anyone in your family use your disability against you? (consider whether they, or any other family member, withheld, misused or delayed needed supports, or stopped the victim-survivor from accessing therapy, aids, equipment, medication, or control disability support payment or NDIS funding (if relevant)?)	☐ Yes ☐ No	
Do you have access to support from services and/or your community?	☐ Yes ☐ No	
If supported by the person using violence, do you fear they will stop supporting you?	☐ Yes ☐ No	
Does anyone in your family control your daily activities, such as your engagement with family, friends, services or the community?	☐ Yes ☐ No	
To be safe, are there more support services that you need? (this question is relevant to considering what supports a person with disability might need when supports relating to their disability were being provided by a family member but are no longer being provided by them - or is there a new support they might need to be safe)	☐ Yes ☐ No	

FURTHER DETAILS

Notes to prompt professional judgement: presence of technology abuse and digital surveillance concerns, any ongoing legal matters and protection orders, health factors that may exacerbate risk and impacts of violence, known patterns of behaviour of the person using violence, most recent episode of violence.

Section 4: Protective Factors

Understanding a person's protective factors helps contextualise risk and take a strengths-based approach to understanding how the victim-survivor navigates the violence. It may also reveal unmet needs that, if they remain unaddressed, can impact their experience of violence. You should explore these questions with neutrality, accounting for the diversity of a victim-survivor's personal circumstances. This means asking questions in an open-ended way to invite a discussion that centres the victim-survivor's personal perspectives and experiences.

PROTECTIVE FACTORS

Notes to prompt professional judgement: relationship factors, informal and formal supports, employment, safety plan and strategies, protection or other orders.

Part C – Outcome

Overall risk level assessment and rationale

The section details your assessment of risk, needs and safety for the victim-survivor.

RISK SUMMARY

Risk level assessment	Rationale
☐ **Serious Risk** (☐ and **requires immediate protection**) ☐ **Elevated Risk** ☐ **At-risk**	

NEEDS AND SAFETY

Needs assessment	Safety plan has been completed? (see separate template)
Notes to prompt professional judgement: accommodation, health, legal, security, financial, referrals, hopes/intentions.	☐ Yes ☐ No ☐ Not known

Part D – Risk Assessment Tool (Child Victim-Survivor)

You may use a variety of sources to answer questions and inform this risk assessment. Possible sources include:

- Using information obtained from external sources (external agencies, police data, or other relevant sources),
- Using information the adult victim-survivor shares about the child(ren) during their own assessment by asking the adult victim-survivor appropriate questions about the child victim-survivor, or
- By asking the child victim-survivor questions directly, when appropriate.

Questions are divided into two sections:

- appropriate questions to **ask children**, and
- appropriate questions to **ask an adult** about the children.

The decision on what source of information informs this assessment is based on professional judgement.

Personal information

The children included in this assessment are:

Child:	Relationship to victim-survivor	Relationship to person using violence
1.		
2.		
3.		
4.		
Person answering on behalf of the child/ren:		

CHILD 1

Full name:	
Date of Birth:	
Primary location:	
Current location:	
School/day care:	
Contact details:	
Gender identity:	☐ Woman/Girl ☐ Man/Boy ☐ Non-binary ☐ Preferred not to say ☐ Unknown ☐ Self-described, please specify:
Intersex status:	☐ Yes ☐ No ☐ Preferred not to say ☐ Unknown
Transgender history, experience or identity:	☐ Yes ☐ No ☐ Preferred not to say ☐ Unknown Pronouns:
Sexuality:	☐ Straight or heterosexual ☐ Gay, lesbian, or homosexual ☐ Bisexual or pansexual ☐ Asexual ☐ Preferred not to say ☐ Unknown ☐ Other, please specify:
Aboriginal and/or Torres Strait Islander origin:	☐ Aboriginal ☐ Torres Strait Islander ☐ Both Aboriginal and Torres Strait Islander ☐ Preferred not to say ☐ Neither ☐ Unknown
CALD:	☐ Yes ☐ No ☐ Not known Details:
LGBTIQA+:	☐ Yes ☐ No ☐ Not known
Person with disabilities:	☐ Yes ☐ No ☐ Not known Details:
Additional information:	

CHILD 2

Full name:	
Date of Birth:	
Primary location:	
Current location:	
School/day care:	
Contact details:	
Gender identity:	☐ Woman/Girl ☐ Man/Boy ☐ Non-binary ☐ Preferred not to say ☐ Unknown ☐ Self-described, please specify:
Intersex status:	☐ Yes ☐ No ☐ Preferred not to say ☐ Unknown
Transgender history, experience or identity:	☐ Yes ☐ No ☐ Preferred not to say ☐ Unknown Pronouns:
Sexuality:	☐ Straight or heterosexual ☐ Gay, lesbian, or homosexual ☐ Bisexual or pansexual ☐ Asexual ☐ Preferred not to say ☐ Unknown ☐ Other, please specify:
Aboriginal and/or Torres Strait Islander origin:	☐ Aboriginal ☐ Torres Strait Islander ☐ Both Aboriginal and Torres Strait Islander ☐ Preferred not to say ☐ Neither ☐ Unknown
CALD:	☐ Yes ☐ No ☐ Not known Details:
LGBTIQA+:	☐ Yes ☐ No ☐ Not known
Person with disabilities:	☐ Yes ☐ No ☐ Not known Details:
Additional information:	

CHILD 3

Full name:	
Date of Birth:	
Primary location:	
Current location:	
School/day care:	
Contact details:	
Gender identity:	☐ Woman/Girl ☐ Man/Boy ☐ Non-binary ☐ Preferred not to say ☐ Unknown ☐ Self-described, please specify:
Intersex status:	☐ Yes ☐ No ☐ Preferred not to say ☐ Unknown
Transgender history, experience or identity:	☐ Yes ☐ No ☐ Preferred not to say ☐ Unknown Pronouns:
Sexuality:	☐ Straight or heterosexual ☐ Gay, lesbian, or homosexual ☐ Bisexual or pansexual ☐ Asexual ☐ Preferred not to say ☐ Unknown ☐ Other, please specify:
Aboriginal and/or Torres Strait Islander origin:	☐ Aboriginal ☐ Torres Strait Islander ☐ Both Aboriginal and Torres Strait Islander ☐ Preferred not to say ☐ Neither ☐ Unknown
CALD:	☐ Yes ☐ No ☐ Not known Details:
LGBTIQA+:	☐ Yes ☐ No ☐ Not known
Person with disabilities:	☐ Yes ☐ No ☐ Not known Details:
Additional information:	

CHILD 4

Full name:	
Date of Birth:	
Primary location:	
Current location:	
School/day care:	
Contact details:	
Gender identity:	☐ Woman/Girl ☐ Man/Boy ☐ Non-binary ☐ Preferred not to say ☐ Unknown ☐ Self-described, please specify:
Intersex status:	☐ Yes ☐ No ☐ Preferred not to say ☐ Unknown
Transgender history, experience or identity:	☐ Yes ☐ No ☐ Preferred not to say ☐ Unknown Pronouns:
Sexuality:	☐ Straight or heterosexual ☐ Gay, lesbian, or homosexual ☐ Bisexual or pansexual ☐ Asexual ☐ Preferred not to say ☐ Unknown ☐ Other, please specify:
Aboriginal and/or Torres Strait Islander origin:	☐ Aboriginal ☐ Torres Strait Islander ☐ Both Aboriginal and Torres Strait Islander ☐ Preferred not to say ☐ Neither ☐ Unknown
CALD:	☐ Yes ☐ No ☐ Not known Details:
LGBTIQA+:	☐ Yes ☐ No ☐ Not known
Person with disabilities:	☐ Yes ☐ No ☐ Not known Details:
Additional information:	

Preliminary questions

Was a parent/guardian/adult assessed using the adult victim-survivor form prior to this assessment?	☐ **Yes** ☐ **No**

If yes, please indicate which of the following risk factors were identified in the adult victim-survivor assessment:

Factors relevant to adult victim-survivor	☐ Physical assault while pregnant/following new birth* ☐ Isolation ☐ Self-assessed level of risk
Factors relevant to adult victim-survivor and the person using violence's relationship	☐ Planning to leave or recent separation* ☐ Escalation – increase in severity and/or frequency of violence* ☐ Financial difficulties ☐ Imminence
Factors relevant to the person using violence	☐ Use of weapon in most recent event* ☐ Access to weapons* ☐ Has ever harmed or threatened to harm victim or family members (including child/ren) ☐ Has ever tried to strangle or choke the victim* ☐ Has ever threatened to kill victim* ☐ Has ever harmed or threatened to harm or kill pets or other animals*
Factors relevant to the person using violence (continued)	☐ Has ever threatened or tried to self-harm or commit suicide* ☐ Stalking of victim* ☐ Sexual assault of victim* ☐ Previous or current breach of protection order ☐ Drug and/or alcohol misuse/abuse* ☐ Obsession/jealous behaviour toward victim* ☐ Controlling behaviours* ☐ Unemployed/disengaged from education* ☐ Depression/mental health issue ☐ History of violent behaviour (not family violence) ☐ Physical harm ☐ History of family violence ☐ Emotional abuse ☐ Property damage

*May indicate an increased risk of the victim being killed or almost killed (serious risk factors)

Child Risk Assessment

Please use your professional judgement to decide on how to frame the questions and whether they should be asked directly of the child victim-survivor, an adult, or answered through information received from external sources.

Consider your possible statutory obligations to report concerns for children's safety and/or wellbeing.

QUESTIONS ABOUT THE CHILD VICTIM-SURVIVOR

The following questions can be asked directly of a child victim-survivor where it is assessed as safe, appropriate and reasonable to do so considering: their age and capacity; their level of maturity; and their ability to understand the question.

Question	Child 1	Child 2	Child 3	Child 4	Comments
Has the child experienced violence in the home?	☐ Yes ☐ No ☐ Not disclosed	☐ Yes ☐ No ☐ Not disclosed	☐ Yes ☐ No ☐ Not disclosed	☐ Yes ☐ No ☐ Not disclosed	
Has the child telephoned for emergency assistance?	☐ Yes ☐ No ☐ Not disclosed	☐ Yes ☐ No ☐ Not disclosed	☐ Yes ☐ No ☐ Not disclosed	☐ Yes ☐ No ☐ Not disclosed	
Has the child ever been removed from parental care against their will?	☐ Yes ☐ No ☐ Not disclosed	☐ Yes ☐ No ☐ Not disclosed	☐ Yes ☐ No ☐ Not disclosed	☐ Yes ☐ No ☐ Not disclosed	
Has the child experienced either parent being arrested?	☐ Yes ☐ No ☐ Not disclosed	☐ Yes ☐ No ☐ Not disclosed	☐ Yes ☐ No ☐ Not disclosed	☐ Yes ☐ No ☐ Not disclosed	
Has the child been asked to monitor you by the other parent?	☐ Yes ☐ No ☐ Not disclosed	☐ Yes ☐ No ☐ Not disclosed	☐ Yes ☐ No ☐ Not disclosed	☐ Yes ☐ No ☐ Not disclosed	
Has the child intervened in any incidents of physical violence?	☐ Yes ☐ No ☐ Not disclosed	☐ Yes ☐ No ☐ Not disclosed	☐ Yes ☐ No ☐ Not disclosed	☐ Yes ☐ No ☐ Not disclosed	
Has the child had contact with the person using violence post-separation and is it supervised?	☐ Yes ☐ No ☐ Not disclosed	☐ Yes ☐ No ☐ Not disclosed	☐ Yes ☐ No ☐ Not disclosed	☐ Yes ☐ No ☐ Not disclosed	
Has Child Protection ever been involved with the family or other children in the home?	☐ Yes ☐ No ☐ Not disclosed	☐ Yes ☐ No ☐ Not disclosed	☐ Yes ☐ No ☐ Not disclosed	☐ Yes ☐ No ☐ Not disclosed	
Has the child ever accessed counselling or support services?	☐ Yes ☐ No ☐ Not disclosed	☐ Yes ☐ No ☐ Not disclosed	☐ Yes ☐ No ☐ Not disclosed	☐ Yes ☐ No ☐ Not disclosed	
Do you have possession of the family's passports?	☐ Yes ☐ No ☐ Not disclosed	☐ Yes ☐ No ☐ Not disclosed	☐ Yes ☐ No ☐ Not disclosed	☐ Yes ☐ No ☐ Not disclosed	
Has a crime been committed?* (Not to be asked of victim-survivor)	☐ Yes ☐ No ☐ Not disclosed	☐ Yes ☐ No ☐ Not disclosed	☐ Yes ☐ No ☐ Not disclosed	☐ Yes ☐ No ☐ Not disclosed	

* Criminal offenses include physical abuse, sexual violence, threats, pet abuse, property damage, stalking and breaching protection orders)

QUESTIONS FOR THE CHILD VICTIM-SURVIVOR

For younger children, it may be more developmentally appropriate to ask different and more open-ended questions about their safety in the home. The below questions offer practitioners guidance on questions that may be asked of younger children.

Question	Child 1	Child 2	Child 3	Child 4	Comments
Are you scared of either of your parents/caregivers or anyone else in the home? (From 1 (not afraid) to 5 (extremely afraid) how afraid of them are you now?) This scale is not used to assess level of risk. It is an indicator of fear and may indicate the impact on the child.	☐ Yes ☐ No ☐ Not disclosed Child 1 1 2 3 4 5 Child 2 1 2 3 4 5 Child 3 1 2 3 4 5 Child 4 1 2 3 4 5	☐ Yes ☐ No ☐ Not disclosed	☐ Yes ☐ No ☐ Not disclosed	☐ Yes ☐ No ☐ Not disclosed	
Have you ever been physically hurt by either of your parents/caregivers or anyone else in the home?	☐ Yes ☐ No ☐ Not disclosed	☐ Yes ☐ No ☐ Not disclosed	☐ Yes ☐ No ☐ Not disclosed	☐ Yes ☐ No ☐ Not disclosed	
Have you ever tried to stop your parents/caregivers from fighting?	☐ Yes ☐ No ☐ Not disclosed	☐ Yes ☐ No ☐ Not disclosed	☐ Yes ☐ No ☐ Not disclosed	☐ Yes ☐ No ☐ Not disclosed	
Has your parent/caregiver said bad things to you about your other parent/caregiver?	☐ Yes ☐ No ☐ Not disclosed	☐ Yes ☐ No ☐ Not disclosed	☐ Yes ☐ No ☐ Not disclosed	☐ Yes ☐ No ☐ Not disclosed	
Have you ever had to protect or be protected by a sibling or other child in the home?	☐ Yes ☐ No ☐ Not disclosed	☐ Yes ☐ No ☐ Not disclosed	☐ Yes ☐ No ☐ Not disclosed	☐ Yes ☐ No ☐ Not disclosed	

FURTHER DETAILS

Overall risk level assessment and rationale (Part D – Children)

The section details your assessment of risk, needs and safety for the child victim-survivor(s).

RISK SUMMARY

Risk level assessment	Rationale	Protective factors
☐ **Serious Risk** (☐ and **requires immediate protection**) ☐ **Elevated Risk** ☐ **At-risk**		*Notes to prompt professional judgement: relationship factors, informal and formal supports, education and care.*

NEEDS AND SAFETY

Needs assessment	Safety plan has been completed? (see separate template)
Notes to prompt professional judgement: housing, health and development, legal, security, education and care, referrals, hopes/intentions, protective experiences.	☐ Yes ☐ No ☐ Not known