Screening Tool – Adult Victim-Survivor

STOP: Before you begin screening, you must consider if it is safe to do so, and how you can respond to a possible disclosure of DFV. Please see the guidance on 'before you begin' on page 2.

This tool can also be used to screen for DFV in adults and can be used for young people (in the context of screening for risk in an intimate partner relationship).

- **Who can use this tool:** All organisations and workers (Tiers 1 to 3) can use this tool. For information on tiers and roles and responsibilities, please see the ACT RAMF.
- **What is the purpose of this tool:** This tool helps workers identify 'red flags' that may suggest a person is at-risk of – or experiencing – DFV. This is **not** an assessment of risk.
- **When to use this tool:** Use this tool as part of routine screening questions for all adults accessing your service for the first time OR if you suspect the person is experiencing domestic and family violence. You may use this tool for a young person in the context of intimate partner violence.

Step 1: Identify the signs	This tool provides a list of some common signs of someone experiencing domestic and family violence. This is not an exhaustive list and not all people experience domestic and family violence in the same way.
Step 2: Ask	If there is a sign DFV is present or you suspect it may be, and if it is safe to do so, this tool provides questions for you to identify whether DFV is occurring. Screening should be conversational. These questions are a guide, and you should ask them in a way that is appropriate for the person you are engaging with.
Step 3: Act	If screening identifies that domestic and family violence is occurring, this tool provides some actions for you to take to support appropriate referrals and immediate safety.

Name of worker completing this tool:	
Date:	

Before you begin

Screening for possible DFV is a sensitive process, and it is important you and the client have the time, space and privacy to have a safe and sensitive discussion where a disclosure can be both heard and talked about. See the ACT RAMF for further information on identification practices.

There are several key principles that should guide your decision about whether you undertake screening with a person, and how you should go about it. These are:

1. **Voluntariness:** Participation in screening is voluntary — clients must not be pressured or coerced into completing a DFV screen.

2. **Privacy and safety:** Screening must be conducted in a private, safe space. The client must never be screened in the presence of the person suspected of using violence, or anyone who may disclose what was shared to that person. If screening by phone, first confirm the client is alone and safe to speak.

3. **Confidentiality:** Assure clients of confidentiality where possible and explain its limitations. Be aware of mandatory reporting obligations, and the impact on Aboriginal and Torres Strait Islander families, noting the ongoing impact of the Stolen Generation and experiences of First Nation's communities and Child Protection.

4. **Time:** If DFV is disclosed, allow adequate time to respond appropriately.

5. **Children and dependents:** Where possible, ensure children or other dependents accompanying the client are cared for and not present during conversations that may cause distress. Wherever appropriate, treat accompanying children as victim-survivors in their own right — including assessing their own distinct risks and needs

Remember

If a client makes a direct disclosure of DFV, the screening tool does **not** need to be administered.

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
CALD:	☐ Yes ☐ No ☐ Not known Details:
LGBTIQA+:	☐ Yes ☐ No ☐ Not known
People with disabilities:	☐ Yes ☐ No ☐ Not known Details:
Additional information and adjustments (if needed):	

Person using violence

You should record details on the person using violence **if** the victim-survivor discloses this information to you. The victim-survivor may choose to not disclose their identity, and you should not push them to do so.

Full name:	
Date of birth:	
Relationship to victim-survivor:	
Additional information:	

Step 1: Identify the signs of DFV

Below is a list of some signs that may indicate DFV is occurring. It is essential to understand that many signs that someone is experiencing violence will not be physical. In isolation, some of these signs are not indicators of DFV. This is not an exhaustive list. If you have any concerns that DFV could be occurring, you should ask.

Potential signs that someone is experience DFV

Indicator	Examples of signs
Demeanour	• Appears anxious, scared or afraid in the presence of a family member or partner when they are mentioned • Is reluctant to follow advice without reason • Has varied or inconsistent explanations for injuries sustained
Physical signs	• Signs of physical injury such as bruising, fractures, fresh scars or minor cuts or signs of strangulation • The presence of chronic pain (i.e., neck, back) • The presence of complications during pregnancy (where relevant)
Relationship dynamic	• Characterises their partner/family member as controlling or prone to anger • Characterises the relationship as turbulent/of extreme highs and lows • Indicates that they are threatened/harassed by partner/family member • Partner/family member has financial control and other decision-making control • Dependent on partner/family member for basic needs • Partner/family member has denied access to family or social connection (including religious/cultural practices)
Other non-physical signs	• Experiencing isolation or does not have access to family or friends • Signs of mental health concerns, anxiety and depression, suicidality and self-harm • Recent homelessness or experiencing recent tenancy issues • Signs that other members of the household may be at risk, for example, children or elderly parents • School refusal/avoidance

Step 2: Ask

If there is a sign DFV is present or you suspect it may be, and if it is safe to do so, this tool provides questions for you to identify whether DFV is occurring. Screening should be conversational. These questions are a guide and you should ask them in a way that is appropriate for the person you are engaging with.



You should never begin screening for DFV if there is a possibility the person using violence is present.

This could escalate risk of harm to the victim-survivor.

Starting the conversation

Some people may find screening questions confronting or upsetting to answer. It is important to begin with broad prompting questions to begin a conversation and build rapport with the person, such as:

- I'm pleased to see you today – how are you?
- What has brought you here today?
- Tell me a bit about your family/home life/relationship with [X].

Introduction

Introduce the topic of asking about their safety and wellbeing by providing them with a brief overview of the purpose of screening.

- Services across the ACT have begun to ask people questions about their safety in their relationships.
- I am noticing some potential signs that you could be experiencing domestic/family violence. I know this could be about other things – but it's important for me in my role to think about your safety. Is it OK if I ask you some questions?
- Sometimes people can hurt other people, even when they say they love each other. Can I ask you some questions about this?

You may also start by telling a story about a fictional person's experiences of domestic and family violence and ask if anything in the story sounds like something they have ever experienced.

If the person tells you they do not want to be asked questions – it is important you respect their decision and remain supportive.

Screening questions

Question	Response
Presence of domestic and family violence	
1. Has anyone in your [family/home/previous relationship]:	
a. Ever touched you in a way that hurt, or made you feel bad or upset?	☐ Yes ☐ No ☐ Not disclosed Comments:
b. Ever threatened you?	☐ Yes ☐ No ☐ Not disclosed Comments:
c. Ever put you down, humiliated you, or tried to control what you can or cannot do?	☐ Yes ☐ No ☐ Not disclosed Comments:
2. Is there anyone else in the family who you think is experiencing or overhearing these things?	☐ Yes ☐ No ☐ Not disclosed Comments:
3. Do you ever feel afraid of somebody in your home or family?	☐ Yes ☐ No ☐ Not disclosed Comments:
4. Do you feel like you can say no in your relationship without consequences for you or someone else?	☐ Yes ☐ No ☐ Not disclosed Comments:
Immediate safety concerns (if DFV has been disclosed)	
Do you feel safe when you leave here today?	☐ Yes ☐ No ☐ Not disclosed Comments:
Support services currently in place (if DFV has been disclosed)	
Are you already connected to support services?	☐ Yes ☐ No ☐ Not disclosed Comments:
Further details:	

Step 3: Act on the information

If you are concerned the client or someone else is in danger (e.g. serious injury or illness, immediate threat of harm including self-harm), contact Triple Zero (000).

Screening outcome

If domestic or family violence is suspected or disclosed, it is important to first respond in a supportive way. For example:

- Thank you for telling me. I am sorry this has happened to you.
- You have the right to feel and be safe, and we will work with you to try help keep you safe.
- It is not your fault this is happening.

<table>
<tr><th>Outcome</th><th>Suggested actions</th></tr>
<tr><td>☐ DFV is disclosed</td><td>Offer to refer the person to a specialist DFV agency to undertake a risk assessment and receive further specific supports. It may also be that there are other immediate needs you can support them with through other referrals.
Consider the safety and wellbeing of any children and share relevant risk information if needed. You may have additional responsibilities under mandatory reporting legislation.
If they do not want immediate action or to seek DFV specific support, it is important to respect that. Be supportive and, if appropriate, provide information about support services should they need them in the future.
If there are urgent concerns (e.g., serious injury or illness, or immediate threat of harm) contact Triple Zero (000)).
<table>
<tr><th>Tier 1</th><th>Tier 2</th><th>Tier 3</th></tr>
<tr><td>Refer the client to a Tier 2 organisation that can undertake a risk assessment</td><td>Conduct an intermediate risk assessment</td><td>Conduct a comprehensive risk assessment (if appropriate)</td></tr>
</table>
</td></tr>
<tr><td>☐ Indications of DFV are present (no direct disclosure)</td><td>No action required at this time.
Even if no domestic or family violence is disclosed, but you suspect DFV may be occurring, you must respect the person’s decision to not disclose. Be supportive, and if appropriate, provide information about support services available should they need them in the future.
If you work with this person on an ongoing basis, you should consider revisiting a discussion about their safety at a later date.</td></tr>
<tr><td>☐ No DFV disclosed</td><td>No action required at this time.
Thank the person for answering your questions and continue to provide services to them in the scope of your professional role.</td></tr>
</table>

Any referrals should include the option to accompany the person or provide transport to get to the services safely if possible. Note that a victim-survivor may not want access to domestic and family violence services specifically but may need other coordinated supports to address their needs, including health or housing services.

Record of actions

You should record what actions, if any, you take arising from the outcome of screening. If DFV is disclosed or you suspect it is occurring and no actions are taken, you should detail the reasons why.

Were actions taken following screening?	☐ Yes ☐ No
If no, detail reasons why:	

If yes, document your actions below.

Actions taken	Response	Details
Referral Referrals to other services (e.g., specialist DFV service/practitioner, GP, other support services)	☐ Yes ☐ No ☐ N/A	
Information sharing Has the information in this tool been shared under the ACT Domestic and Family Violence Information Sharing Scheme? If information was shared, record if consent was given.	☐ Yes ☐ No ☐ Other	
Contact Police (if immediate emergency response is needed)	☐ Yes ☐ No ☐ N/A	
Contact Children, Youth and Families (if mandatory reporting obligations apply) **Note – if you make a mandatory report, carefully consider how you talk to the victim-survivor about this. Refer to the guidance on responding to child safety concerns in the Screening Tool – (Child Victim-Survivor).**	☐ Yes ☐ No ☐ N/A	
Other actions		

Note: If you are making a referral or plan to contact the victim-survivor, always ensure you have asked them about their preferred method of contact. This is critical to ensuring their safety. Ask about safety before giving them brochures or other written information to take away as it may not be safe for them.