

MARAM

Practice Guides

Responsibility 2:
Identification of
Family Violence
Risk

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In this document, 'Aboriginal' refers to both Aboriginal and Torres Strait Islander people.

The Victorian Government proudly acknowledges Victorian Aboriginal people as the first peoples and Traditional Owners and custodians of the land and water on which we rely. We acknowledge and respect that Aboriginal communities are steeped in traditions and customs built on an incredibly disciplined social and cultural order. The social and cultural order has sustained up to 50,000 years of existence. We acknowledge the ongoing leadership role of the Aboriginal community in addressing, and preventing family violence and join with our First Peoples to eliminate family violence from all communities.

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Note:

Guidance and learning objectives for working with perpetrators is in development and will be available late 2019/early 2020. Finalised guidance will emphasise that only key/selected professionals and services will be trained/required to provide a service response to perpetrators related to their use of violence.

The learning objective for this Responsibility 2 will include:

Ensure staff understand when it might be safe to ask questions of clients who may be a perpetrator, to assist with identification.

Responsibility 2: Identification of Family Violence Risk

2.1 Overview

This chapter should be used when family violence is suspected but not yet confirmed.

This guidance will enable you to identify if family violence is present and undertake screening for an adult, child or young person to assist you to decide if further action and/or assessment is required. Specific guidance on identifying violence and use of screening tools with children and young people is outlined in [Section 2.7](#) of this guide.

Only professionals who have received training to engage with perpetrators about their use of violence should do so. It can increase risk to a victim survivor to engage with a perpetrator when not done safely.

Key Capabilities

All professionals should have knowledge of **Responsibility 2**, which includes:

- Awareness of the evidence-based family violence risk factors and explanations, outlined in the *Foundation Knowledge Guide*
- Being familiar with the questions to identify family violence, observable signs and indicators, using the [Screening and Identification Tool](#) and how-to-ask identification questions
- Using information gathered through engagement with service users and other providers via information sharing to identify signs and indicators of family violence (for adults, children and young people) and potentially identifying victim survivors. Information sharing laws and practice is further described in **Responsibility 6**.

Remember

Guidance which refers to a perpetrator in this guide is relevant if an adolescent is using family violence **for the purposes of risk assessment with a victim survivor about their experience and the impact of violence**. Risk assessment and management for adolescents should always consider their age, developmental stage and individual circumstances, and include therapeutic responses, as required.

2.1.1 Who should use the Screening and Identification Tool?

Appendix 2 contains the [Screening and Identification Tool](#) within a table of practice guidance. The [Screening and Identification Tool](#) as a standalone template is in Appendix 3.

All professionals should use the [Screening and Identification Tool](#), either applied routinely when this is a part of your professional role or service, or only when indicators of family violence are identified.

Screening is not an activity that occurs only once by a single professional or within a service. In service settings where a person has multiple contacts, it is necessary to screen over time and at each contact to ensure any changes in the relationship or use of violence is identified.

Some organisations and workforces will undertake routine screening, asking every person accessing their service questions to screen for family violence (such as in perinatal settings or Youth Justice). Other workforces will only use the [Screening and Identification Tool](#) when they have identified indicators or signs of family violence risk through their regular service and are seeking to confirm the presence of family violence.

Identification (including through use of the [Screening and Identification Tool](#)) will support professionals to form their professional judgement about how to respond.

2.2 Structured Professional Judgement in Identification and Screening

Reflect on the model of Structured Professional Judgement outlined in **Section 9.1** of the *Foundation Knowledge Guide*.

Identification and screening is the first opportunity to ask a victim survivor about their self-assessment of their risk, fear and safety, as well as some initial questions about family violence risk factors. These can be further informed by risk assessment and information sharing, described in later responsibility guides.

Figure 1: Model of Structured Professional Judgement



Identification and screening is the first step in understanding if family violence risk factors are present, and is informed by a person's assessment of their own level of family violence risk (self-assessment). Observing signs and indicators of risk and asking screening questions about family violence support these two elements of Structured Professional Judgement.

2.3 Identification of and Screening for Family Violence

Identifying and screening for family violence means identifying that family violence risk factors are present. This can be done through observation of signs of trauma that may 'indicate' family violence is occurring, and/or confirming this by undertaking screening.

Screening involves asking questions defined in a 'tool' (provided in **Appendix 3**) to enable a person to disclose whether they are experiencing family violence. The questions are designed to identify information about evidence-based family violence risk factors. The [Screening and Identification Tool](#) includes some of the high-risk factors associated with an increased likelihood of a person being killed or almost killed. **All of the questions in the [Screening and Identification Tool](#) should be asked, when possible.**

Before beginning, you should discuss the purpose of the [Screening and Identification Tool](#) (or risk assessment) with the person. You should acknowledge that some of the questions may be confronting and difficult to answer but that they are important for assessing risk and identifying appropriate responses.

2.3.1 What are family violence risk factors?

The family violence risk factors are outlined with a short description in the *Foundation Knowledge Guide* at **Section 8**. Family violence risk factors are evidence-based factors that are used to:

- Identify if a person is experiencing family violence
- Identify the level of risk, and
- Identify the likelihood of violence re-occurring.

Responsibility 3 describes how to assess for risk factors, including determining the level or seriousness of risk.

2.3.2 Observable signs of trauma that may indicate that family violence is occurring



Family violence risk factors may be identified through observing signs or 'indicators' related to a person's physical or emotional presentation, behaviour or circumstances. These signs are presentations of possible trauma, which may indicate family violence is occurring and can be expressed differently across a person's lifespan, from infancy, childhood and adolescence¹, through to adulthood and old age.

Appendix 1, Tables 1–5, contain a non-exhaustive list of signs of trauma which may indicate that family violence is occurring for adults and children.

These signs of trauma do not by themselves determine that family violence is occurring, they are 'indicators' only at this stage. These signs may also indicate that another form of trauma has occurred. If you suspect someone is experiencing family violence, it is important to ask the person screening questions about family violence.

Adults and children experiencing family violence may also not exhibit any of these signs and indicators. If you don't observe any signs or indicators but think that something is 'not quite right', you should use prompting questions or the [Screening and Identification Tool](#) to explore whether family violence might be occurring.

2.3.2.1 Signs and indicators relating to age for children and young people²

Signs of trauma in a child or young person may indicate family violence or another form of trauma. Signs may be observed through the presentation, behaviour or circumstances of a child or young person. Some signs may relate to trauma from specific forms of family violence, including sexual abuse (indicated by) or emotional abuse (indicated by *).

Some signs may indicate a child's experience of trauma or other circumstances outside of the family or home environment. Consider the wellbeing and safety of a child within and outside of the family context when observing these indicators.

Children's behaviours may be driven by a range of underlying factors, including disability, developmental issues, and non-family violence related trauma and you will need to consider how these factors may be affecting or reinforcing each other. Significant changes in behaviour can indicate the presence of family violence and/or increased risk.

¹ For young people over the age of 18 signs and indicators for adults apply.

² For further information of indicators of family violence in children and young people, see the practice resource by the Department of Health and Human Services, [Assessing children and young people experiencing family violence: a practice guide for family violence practitioners](#).

Observable 'general' signs of trauma for a child or young person of any age are listed in **Appendix 1**, Table 2. Signs can also vary considerably according to the age and stage of a child or young person's development, and are listed in **Appendix 1**, Tables 3 and 4.

Sometimes the presence of family violence may be observed from a child's circumstances and may relate to neglect due to the experience of family violence. Some signs or indicators of neglect are listed in **Appendix 1**, Table 5.

Guidance on whether to assess children and young people directly, or through asking questions of a parent/carer who is not using violence, is outlined at [Section 2.7](#).

2.4 Using Prompting Questions with an Adult to Support Screening

You can use broad, prompting questions that lead into screening questions to begin the conversation. You can use your judgement on how to use these example questions or other prompting questions appropriate to the individual or their circumstances.

You can begin by asking open-ended, rapport-building questions about their wellbeing, for example:

- *"I'm pleased to see you today — how are things going?"* [if Aboriginal — *"Can I ask who are your mob?"*]
- *"What has brought you here today?"*
- *"Can you tell me what has been happening for you lately?"*
- *"Tell me a bit about your family / home life / relationship with X?"*

You can also frame prompting questions as part of routine or formal process used in your service to identify and screen for family violence risk. You can have a scripted question, such as:

- *"In our organisation it is common that we ask questions about family violence so we can connect people with appropriate support. Is it ok if I ask you a few questions about how things are going at home/in your relationship?"*
- *"When we are concerned about someone, we always ask a set of questions to find out if they are experiencing violence or being mistreated in any of their relationships"*
- *"You have just let me know X (i.e. that you have recently separated). When any of our clients tell us this we ask a question about your experience at home and safety"*
- *"Is there anyone else in the family who is experiencing, seeing, overhearing, or being exposed to or aware of these things?"*

You can also start by linking some of the observable indicators (**Appendix 1**) in to the conversation.

- *"I noticed that you appear to be experiencing X, is there something worrying you/you would like to talk about?"*

You could use simple statements such as:

- *"Many people experience problems in their relationships"*
- *"I have seen people with problems like yours who have been experiencing trouble at home."³*

³ Adapted from World Health Organization, 2014, *Health care for women subjected to intimate partner violence or sexual violence: A clinical handbook*, pp 10–11.

If an adult, child or young person responds to your prompting questions, you can ask the direct screening questions in the [Screening and Identification Tool](#). These are purposely direct, because research indicates that victim survivors are more likely to accurately answer direct questions.

2.5 When to Use the Screening and Identification Tool

The [Screening and Identification Tool](#) as a standalone template is at Appendix 3.

Guidance on each question in the tool is at Appendix 2.

It is important to note that the [Screening and Identification Tool](#) has been developed to be used with adult victim survivors to identify family violence for both adult and child victim survivors.

The purpose of the [Screening and Identification Tool](#) is to identify:

- If family violence is occurring
- The victim survivor's level of fear for themselves or another person
- The person using violence/perpetrator.

The outcome of the [Screening and Identification Tool](#) will guide you on what to do next, that is, whether immediate action, further assessment and/or risk management is required.

If someone isn't ready to respond to your questions about family violence, you need to respect this and let them know that if they are ready in future to talk about any experience, you are open to doing this.

The [Screening and Identification Tool](#) should be used:

- When you suspect that someone may be experiencing family violence and have observed signs/indicators of family violence
- To start the conversation if someone **discloses** they are experiencing family violence, or
- If your workplace requires you to **screen all** individuals you work with for family violence (that is, 'routine screening' such as in antenatal/maternal child health settings).

At times, a victim survivor may want to give detailed answers about their experiences. The priority in this identification and screening stage is to identify the presence of risk and any immediate risk. This may mean you need to refocus or guide them back to a question. You can say you want to give them space and time to share their experience. However, if risk is identified as present and it is the role of another professional within your service or another service to continue to undertake intermediate or comprehensive assessment, you can sensitively contain the conversation around screening to ensure they do not have to tell their story multiple times (which can increase trauma).

Screening and identification should not be undertaken if the person suspected of using violence is present.

Your objective is to encourage the person to tell their story in their own words. You could lead into the questions by describing how the questions are structured, with a statement such as:

- *"I would like to ask you a series of questions that have 'yes', 'no' or 'don't know' answers. They will help us work out what to do next together"*
- *"We will start with questions about the person making you feel unsafe or afraid and then ask some questions about your level of fear and questions about children (if relevant)."*

It is important to ask direct questions about family violence. Questions 1–4 support you to understand if family violence risk is occurring, the victim survivor’s level of fear for themselves or another person and the identity of the person using violence (the perpetrator).

Risk factors may change over time and some may increase in severity. A perpetrator may change their behaviours and their impact on the victim survivor may become more severe. **If a risk factor has increased in severity, recently or over time, this should be noted as indicating an escalation in violence and a serious risk.**

Frequency by itself is *not always* the indicator of the level of risk you should be asking further questions to understand if frequency has **changed or escalated**. This is particularly important for some high-risk factors and provides important information when considering if someone is at immediate risk.

Some key considerations when asking screening questions 1–4 is to look out for information about changes in frequency or severity which may indicate escalation and imminence of risk, particularly if change or escalation has occurred recently (further explored in questions 5–7).

How to move through the risk assessment questions:

- If the answer to a question indicates that family violence is not occurring no action is required relating to that risk factor/question. Advise the individual that if this occurs in future to seek assistance
- If the answer to a question indicates family violence is occurring, proceed to the next question(s) **as outlined below**.

Remember

Screening questions are designed to be asked to an adult victim survivor about their risk or risk to any children and/or young people. The risk for children and/or young people correlates to the level of risk for the adult.

Risk to children and young people should be identified independently and informed by risk identified as present for the adult victim survivor (for example, who may be a parent/carer).

2.6 Why Someone Might not Disclose Family Violence, Even if Asked

There are many reasons why people do not feel comfortable or ready to disclose family violence. For example, a person might:

- Not be ready
- Not identify their experience as family violence
- Have had negative experiences when disclosing it in the past
- Be scared that the perpetrator will find out that they have talked to you and the potential repercussions for their safety
- Be concerned about cultural profiling or not feeling culturally safe
- Be concerned about their visa or residency status
- Be worried that they don’t meet family or community expectations
- Be worried that their primary carer will be taken away
- Be worried that their children will be taken away
- Be worried about judgement if they are in a same-sex relationship
- Be worried about judgement if they are not ready to end their relationship

- Be worried about judgement for their life circumstances or lifestyle choices
- Be worried that a disclosure is interpreted as evidence of mental illness
- Be worried about the perpetrator harming themselves or their children if they report family violence and/or end the relationship
- Be concerned about the impact of disclosure on the family unit, a perpetrator or adolescent using family violence, such as on their development or involvement of justice responses
- Be worried that professionals won't believe them.

To address barriers to disclosure and provide a safe opportunity to disclose, you can take a partnership approach by explaining processes, active listening, normalising anxieties and fear of disclosure, and setting realistic expectations to strengthen your rapport and engagement.

Some issues identified above can be mitigated by reassuring the person (adult or child) how your service will not share their disclosure of family violence with the person who may be using violence. For example, if information is shared with other sources it can be conveyed as sensitive and should not be made known to the perpetrator.

If a perpetrator becomes aware information was shared, it should be presented as being based on other sources or reports rather than by the victim. For example, family violence safety notices or intervention orders which they would already be aware of.

2.7 Identification and Screening for Children and Young People



Children and young people can be affected by family violence even if they do not hear or see it. Whilst there can be many causes of trauma, signs of trauma can be an indicator that the cause of that trauma is from family violence. If you observe one or more of the signs of trauma listed in Tables 2–4, **Appendix 1**, this may indicate that a child is experiencing direct family violence or being exposed to family violence and its impacts. Consider any observable signs of trauma with other information about the child's circumstances.

If you see signs of trauma, this should prompt you to screen for family violence. For children and young people you can screening for family violence by asking:

- The child or young person prompting questions at [Section 2.7.3](#) to provide you with more information about what may be causing the signs of trauma
- A parent/carer who is not using violence questions in the [Adult Screening and Identification Tool \(Appendix 3\)](#) which includes questions about risk to children.

Making a decision on whether to screen directly with a child or young person, or through assessment with a parent/carer is outlined further in **Responsibility 3**, including considerations about whether it is **safe, appropriate and reasonable to do so**, with reflection of your professional role and experience or training in working directly with children or young people.

You should also consider assessing for wellbeing and general safety, guided by your organisation's policies and procedures and any existing child wellbeing frameworks that apply to your role.

2.7.1 Speaking with adults about violence their child might be experiencing

You should always ask the parent/carer about what their child/ren might be experiencing directly or exposed to from a person who may be using violence (even if the person does not

live with them). This includes if a child is being exposed to the aftermath of family violence (for example, broken furniture or an upset or injured victim survivor).

Explain to the parent/carer that they may be experiencing family violence and that it may be impacting their children. It is important for you to ask:

- “What are your worries for each of your children?”
- “What have you noticed about how this is affecting the children?”

Explain to the parent/carer:

- That you may speak to their child directly
- What kind of questions you will ask their child (even if they will be present)
- Why you need to ask the questions.

If the parent/carer is not present, ask the child or young person:

- To identify a parent/carer (who might also be a victim survivor) or safe person who is not using violence
- For their views about sharing information about what they have told you with that parent/carer.

Reassure both adult and/or child victim survivor(s) that they will not be identified as the source of any information to the perpetrator.

When asking these questions, you should be sensitive to the impacts of perpetration of family violence on women (and other caregivers, kin or guardians) as parents. Perpetrators often use various harmful tactics to deliberately undermine, manipulate and damage the mother-child relationship. This can cause women to lose confidence in their parenting and affect their ability to be as engaged with their children as they want to be. In this context, questions touching on parenting may be seen as intrusive and undermining.

You should be aware of these dynamics and tactics to avoid making judgments about women’s parenting when asking the questions above. See **Section 10.2** of the *Foundation Knowledge Guide* for detail about the impacts of perpetrator behaviours on parenting.

2.7.2 Deciding when to talk with a child or young person directly

If you or another professional has expertise and training in working with children, and it is safe, appropriate and reasonable in the circumstances, you can speak with the child or young person directly about the signs you have observed. Assess all children and young people in ways that are appropriate to their stage of development:

- When talking to younger children it is useful to physically get down to their level, consider your tone of voice, and speak gently and reassuringly. You might start your conversation by acknowledging that they may be nervous or confused about speaking to an adult they don’t know, or don’t know very well. Reassure them that they will not be in trouble and you won’t judge them, no matter what they tell you
- In addition to above information, primary school-aged children can be asked the simple direct prompting questions suggested below
- For young people, a mix of the questions for adults and children might be suitable. Young people, especially young women, might experience violence in the family home and/or from a partner outside the home so it is important to obtain the name of the suspected perpetrator or adolescent who may be using violence and their relationship to the victim survivor.

Further information on assessing risk for children and young people can be found in the [Assessing Children and Young People Experiencing Family Violence Practice Guide](#).

You can screen for family violence with children and young people by asking the prompting questions below.

2.7.3 Using prompting questions with children and young people

For children and young people, use prompting questions that may relate to observations you have made about their manner or situation. If you have identified signs or indicators of trauma, including those that may relate to neglect, you can start by asking questions based on things you have observed. For example:

- *“You appear to be really tired today. Is there a reason you’re maybe not getting enough sleep?”*

You can also ask general prompting questions about their home life or family relationships:

- *“Have things changed at home recently?”*
- *“Tell me about the good things at home”*
- *“Is there someone at home that makes you feel safe?”*
- *“Can you talk to them if you had a problem or were worried about something?”*
- *(If the answer to the above question is no) “Are their other adults who make you feel safe that you might be able to talk to?”*
- *“Are there things at home you wish you could change?”*
- *“What don’t you like about home?”*
- *“Does anyone living in your home do things that make you feel unsafe or scared?”*
- *“Tell me about the ways mum/dad/family member or carer look after you”*
- *“What happens in your house if people have a fight?”*
- *“Do you worry about your mum/dad/brothers/sisters for any reason?”*

When using these prompting questions, you should keep the following practice considerations in mind:

- Ask questions in an empathic, non-judgemental manner
- Remember to validate a child who provides you information or expresses their feelings about their family or circumstances
- Do not ask questions in a way that feels like a list
- Use language that is age and developmentally appropriate, as well as relevant to the culture and community that the child is part of. Some children and young people may not like the words ‘violence’ and ‘abuse’. Some cultures and communities have other words that they use with the same meaning
- It is important to use words that adults and children themselves use
- If a child is experiencing family violence their trust in adults may already be damaged.

2.8 Guidance on using the Screening and Identification Tool

Appendix 2 contains the [Screening and Identification Tool](#) questions, and relevant practice guidance information.

The [Screening and Identification Tool](#) as a standalone template is in **Appendix 3**.

It is important to note that the [Screening and Identification Tool](#) has been developed to be used with adult victim survivors to identify family violence for both adult and child victim survivors.

How to move through the risk assessment questions:

- If the answer to a question indicates that family violence is not occurring, no action is required relating to that risk factor/question. Advise the individual that if this occurs in future to seek assistance
- If the answer to a question indicates family violence is occurring, proceed to the next question(s), as outlined below.

2.9 If it Seems Family Violence is NOT Occurring

If responses to the screening questions indicate that no family violence is occurring, you must respect this. The person might not be ready or not feel comfortable to talk to you about the family violence they are experiencing. They may also not be experiencing family violence.

Thank the person for answering the questions and inform them about the help that is available and that they are able to contact your service in future should they ever experience family violence.

2.10 If Family Violence Is Occurring

If the person's responses indicate that they are experiencing family violence:

- Reassure the person that you believe them and state clearly that the violence is not their fault, and that all people have a right to be and feel safe
- Acknowledge any challenges and difficulties they have spoken of and validate their efforts to protect themselves and their family members
- Let them know that there are different services and options for people who experience family violence
- Ask whether they would like your help
- If **Responsibilities 3 or 7** are a part of your role:
 - Explain that you would like to ask them further questions to assess the level of risk and ask them if they are ok for you to proceed.
- If **Responsibilities 3 or 7** are not a part of your role:
 - Let the person know you would like to seek secondary consultation or refer them to a trusted professional who can undertake further assessment of the level or seriousness of risk (see **Responsibilities 5 and 6**). Let them know that this will enable you and the specialist professional to determine together what action may be required to support the person to be safe
 - You might need to contact several services or authorities in response to a disclosure of family violence for secondary consultation or to respond to immediate risk.
- **Appendix 4** outlines a flow diagram of response options and provides a basic safety plan
- If children are identified as experiencing family violence, let the person (adult) know that you may have responsibilities to assess or manage children's wellbeing or safety, or under legislation to report any abuse to the relevant authorities.

2.11 If Family Violence is Occurring and an Immediate Response is Required

If family violence is identified and an immediate risk management response is required (that is, the person has let you know they are experiencing an immediate threat to their life, health, safety or welfare, or you have determined this based on their answers to screening questions):

Contact the police or ambulance by calling 000, or

Contact other emergency or crisis services for assistance.

This may be indicated if the person does not feel safe to leave the service. For example, you could say *“I am very concerned about your safety and would like to help you get assistance today. How do you feel about us contacting specialist assistance?”*

You should ask the victim survivor about their views on calling the police or other emergency and crisis services. If there is an immediate threat, calling the police is an appropriate response, however, **if the person indicates that calling police may increase their risk:**

- Their experience and views should guide your approach as this can inform you about the level of immediate risk and management responses that may be needed
- You should talk to them about the support police and crisis services can provide, and how you can plan with them to keep them safe.

Victoria Police have a range of discretionary response options available to them when responding to reports of family violence. It is important that you are aware of the different types of action police can take when discussing options with a victim survivor. Responses can include, but are not limited to:

- Crisis responses and attending a family violence incident in response to a ‘triple 0’ (000) call
- Responding to reports of family violence or criminal offences in person or by contacting local police stations (that is, non-emergency reports)
- Laying charges
- Issuing a Family Violence Safety Notice
- Making an intervention order, which may include conditions such as exclusion of an individual from a property
- Removing an individual from a property or location
- Referring an individual to a specialist service that works with either victim survivors or perpetrators of family violence, Child Protection or child and family services
- Referring the incident to the Victoria Police Family Violence Unit for further action or investigation
- Providing individuals with information around next steps.

2.12 What’s Next?

See the flow chart diagram in **Appendix 4** for how to act based on the outcome of the screening questions.

If risk is present, the diagram will guide you on what to do if there is immediate or non-immediate risk.

Use the template at Appendix 4 to develop a basic safety plan.

Professionals with responsibility for family violence risk assessment should use the information outlined in **Responsibility 3**.

If this is not within your role, contact another professional within your service or another service to assist. Professionals who need to make referrals, seek secondary consultation or share information should refer to guidance on **Responsibilities 5 and 6** respectively.

Consider if any statutory responsibilities apply and if you may have to report to authorities in the situation.

2.12.1 Document in your organisation's record management system

It is important that you document the following information in your service or organisations record management system:

- If you had a conversation about consent and confidentiality, and its limitations (see **Responsibility 6**)
- Contact details for the victim survivor, including method of contact (such as text before call) and time it may be safe to make contact
- Children's details and if they were present
- Emergency contact details of a safe person if the victim survivor cannot be contacted
- What signs of trauma indicated to you that family violence may be occurring and led you to complete a screening tool
- If an interpreter was used in the conversation
- If you completed the [Identification and Screening Tool](#)
- If you spoke with a child or young person directly using prompting questions about their risk
- If family violence has been identified as present or not present
- The action required, that is, if you go on to undertake a safety plan, referral, secondary consultation or further risk assessment.