



Level 2

Domestic and family violence risk assessment tool

CONFIDENTIAL: Domestic and family violence information

This tool is designed to be used by professionals required to assess domestic and family violence (DFV) risk where some form of violence has already been identified (including through routine screening and the use of the Level 1 tool).

The tool enables professionals to assess and understand the risk posed to a victim-survivor of DFV. From this assessment, safety planning should be undertaken to manage the identified risk, including making appropriate referrals.

Once the Level 2 risk assessment has been undertaken, the Level 2 Safety Action Plan must be completed in partnership with the victim-survivor.

Depending on the outcome of the risk assessment, a case will either be referred to a multi-agency team (Level 3), such as a High-Risk Team, or there will be ongoing monitoring and regular check ins of the safety plan with the Level 2 professional.

The tool is split into three parts.

Part 1: Victim-survivor information	Part 1 considers information relating to the victim-survivor. This includes demographic information to determine whether there are any population-specific risk factors that may be at play and should be explored in the risk assessment.
Part 2: Assessment of risk	<p>Part 2 seeks to support you to assess the risk to the victim-survivor. There are four core components to this:</p> <ul style="list-style-type: none"> A. Victim-survivor’s assessment: The victim-survivor’s assessment of risk is a highly relevant consideration in determining risk. It is one of several considerations to accurately determine severity of violence, and overall risk. This section seeks to understand their perception of risk and their experience of violence. B. Context: Understanding the current context in which the violence is occurring. This includes the relationship between the victim-survivor and the person using violence (PuV), and any relevant PuV factors that may impact on the risk to the victim-survivor. C. General risk factors, including high risk factors: Evidence-based factors relating to the PuV’s past behaviours to assess and understand future risk to the victim-survivor. D. Population-specific risk factors (as relevant): Specific risk factors that can apply to certain population groups. These can be asked as deemed relevant based on the person’s demographic information in Part 1.
Part 3: Assessment outcome	Part 3 enables you to make an overall assessment of risk. In arriving at the assessment outcome, you should consider all aspects of Part 2 and your own professional judgment. There are three risk levels: imminent risk, high risk and at risk. A guide for each level is set out in Part 3. The outcome of this assessment informs both safety planning, and further referrals which may be required.



Part 1: Victim-survivor information

A. Victim-survivor contact details	
Name (including any aliases):	Phone:
Address: Does the victim-survivor live with the PuV? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Did not disclose	Email:
Preferred approach for contact (e.g., call, SMS, email):	Interpreter required: Yes <input type="checkbox"/> No <input type="checkbox"/> Language:
B. Demographic details: This section captures key demographic details about the victim-survivor. This is important to both accurately assess risk (Part 2) and to ensure supports are appropriate (Part 3).	
Date of birth: Country of birth:	Gender identity <input type="checkbox"/> Female <input type="checkbox"/> Male <input type="checkbox"/> Non-binary <input type="checkbox"/> Did not disclose <input type="checkbox"/> Prefers not to say <input type="checkbox"/> Prefers to self-describe: _____
Aboriginal, Torres Strait Islander or South Sea Islander status Does the victim-survivor identify as Aboriginal, Torres Strait Islander and/or Australian South Sea Islander? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Did not disclose If yes, note language and kinship group(s): <i>[Refer to the Fact sheets material when engaging with First Nations victim-survivors]</i>	Sexual orientation <input type="checkbox"/> Heterosexual/straight <input type="checkbox"/> Bisexual <input type="checkbox"/> Gay <input type="checkbox"/> Lesbian <input type="checkbox"/> Prefers not to say <input type="checkbox"/> Did not disclose <input type="checkbox"/> Prefers to self-describe: _____
Cultural and linguistically diverse background Does the victim-survivor come from a diverse cultural or religious background? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Did not disclose If yes, further details e.g. faith group, language spoken, visa status if relevant	Disability Does the victim-survivor have a disability? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Did not disclose If yes, further details e.g. diagnosis, NDIS participant, supports in place (face-to-face or other support), frequency of support Is the PuV the victim-survivor's carer? <input type="checkbox"/> Yes – formal carer <input type="checkbox"/> Yes – informal carer <input type="checkbox"/> No <input type="checkbox"/> Did not disclose
Mental health Does the victim-survivor have a mental health condition? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Did not disclose If yes, include further details e.g. diagnosis, whether receiving supports	Housing status <input type="checkbox"/> Private rental <input type="checkbox"/> Transient <input type="checkbox"/> Community or public housing <input type="checkbox"/> Other <input type="checkbox"/> Privately owned <input type="checkbox"/> Did not disclose <input type="checkbox"/> Homeless or at risk of homelessness Is the PuV also on the lease or mortgage? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unknown <input type="checkbox"/> N/A



Health:

Does the victim-survivor show signs of physical injuries or health conditions?

Yes No Did not disclose

If yes, include further details e.g. implications for safety planning and support needs

Regionality:

Does the victim-survivor live in a regional or remote community?

Yes No Did not disclose

If yes, include further details e.g. *name of community, implications for safety planning and access to supports*

Other factors:

Are there any other factors that may be impacting on the victim-survivor's ability to access supports? (e.g. religious, family or community factors, age, any other sources of trauma)

Children:

Does the victim-survivor have any children, including any children in care?

Yes No Did not disclose

If yes, further details (e.g. name, age/cognitive age, relationship to PuV, gender, school, disability or special care needs):

What is their relationship to the PuV?:

Who do the children live with?:

Is there a parenting plan, Family Law Court order, or any other care arrangement in place regarding the child? (including informal arrangements between the PuV and victim-survivor)

Yes No Did not disclose

Provide any further details (relating to living arrangements and orders):

The Queensland Child Protection Guide (CPG) tool should be completed for any children:
<https://secure.communities.qld.gov.au/cpguide/engine.aspx>



Part 2: Assessment of risk

A. Summary of victim-survivor’s assessment of risk: This section summarises key details of the victim-survivor’s self-assessment of their level of risk.

Victim-survivor’s account of the relationship(s) (*Dot point names of PuV(s), relationship to victim-survivor, behaviours, key events where relevant, and timeframes*)

As a prompt, ask the victim-survivor Why are they scared? What has made them feel unsafe? To help identify patterns of coercive behaviour, it may be helpful to ask the victim-survivor to describe what their life was like prior to meeting the PuV and compare that to what it is like now.

Where possible, the victim-survivor’s account should be used to inform your response to the risk factors below.

Victim-survivor’s perception of level of risk:

Do they believe it possible that the PuV could kill or seriously harm them (or their children or other family members)?

Yes No Did not disclose

If yes, further details:

Victim-survivor’s perception of escalation of risk:

Has the violence gotten worse, or is the victim-survivor more afraid of the PuV than before?

Yes No Did not disclose

If yes, further details:

Victim-survivor’s perception of immediacy of harm:

Has a triggering event occurred to indicate an escalation of risk? (e.g. parole end date, court date, birthday, substance use, relapse or increase, loss of housing, loss/change of employment, child safety intervention etc?)

Yes No Did not disclose

Details:

Will the victim-survivor feel safe when they leave here today?

Yes No Did not disclose

Details:

Do they have any immediate concerns about the safety of their children, someone else in their family or someone else?

Yes No Did not disclose

Details:

B. Context to the violence: This section captures key PuV details, as well as contextual details relating to the violence.

Multiple PuVs:

Is the victim-survivor currently experiencing violence perpetrated by more than one person?

Yes No Did not disclose

If yes, detail names and relationship to PuV:

[Where there are multiple PuVs, please indicate in Part C below which PuV each risk factor relates to].

PuV details (if known):

Name:

Date and country of birth:

Address (if different to victim-survivor):

Workplace:

Do any of the following demographic factors apply to the PuV?

Has a disability

LGBTIQ+

Culturally or linguistically diverse

Has a mental health condition

Identifies as Aboriginal, Torres Strait Islander and/or South Sea Islander

Other:

Details:



Other factors relating to the PuV:

Do any of the following factors apply to the PuV? (tick as relevant/if known and provide further details)

- History of mis-use of alcohol, drugs and other substances
- Financial strain (e.g. currently unemployed) Member of outlaw motorcycle gang
- Been reported to police for DFV On bail, parole or probation
- Childhood history of DFV Subject to court orders (including cross-orders)

If yes to any, further comments (including bail/parole conditions, upcoming court dates):

Relationship status:

Is the victim-survivor planning to separate, or have they tried to separate from the PuV?

- Yes No Did not disclose

Details:

Note: Planned, attempted or recent separation should be considered a high-risk factor in the assessment of risk.

If separated, has this put the victim-survivor in danger?

- Yes No Unknown

Details:

- » If separated, relationship end date (if known):
- » How many times has the victim-survivor separated from the PuV (if known)?

Pregnancy or young child:

Is the victim-survivor pregnant or do they have a child under the age of 1?

- Yes No Unknown

Details (e.g. pregnancy due date):

Note: If yes, this should be considered a high-risk factor in the assessment of risk.

C. General risk factors: This section looks at the PuV's past behaviours to understand the current risk posed. The questions are aimed at understanding the violence in the context of the relationship with the victim-survivor, however it should be noted if the victim-survivor discloses that the behaviours have occurred with a different victim-survivor/s. Comments should be used to capture any further relevant information, which may include escalation of frequency/ severity, recency, and details of any hospitalisation or prolonged injury.

High-risk factors

	Yes				No	Unknown or not relevant	Other details*
	All of the time	Often	Occasionally	Once			
<i>Has the PuV ever...</i>							
threatened to kill or seriously harm the victim-survivor? (can include threats to incinerate or commit arson)							
tried to choke or strangle the victim-survivor? (includes attempts to smother or drown) (If so, note whether consciousness was lost, difficulty in breathing, etc.)							

*Including date of most recent incident and name of PuV (if relevant)



	Yes				No	Unknown or not relevant	Other details*
	All of the time	Often	Occasionally	Once			
threatened to or used a weapon against the victim-survivor? (Describe weapon, noting a weapon could be anything used to harm)							
used violence against the victim-survivor during pregnancy?							
harmed or threatened to harm a pet or animal?							
forced the victim-survivor to participate in sexual acts when they did not consent? Note presence of intimidation, threats, force, being asleep and/or persistent and relentless demands for sex.							
<i>Where there are children, has the PuV ever...</i>							
tried or threatened to harm the children? (including physical, emotional and other harms)							
attempted to take the children when visiting under parenting arrangements?							
Coercive control							
<i>The victim-survivor may not always recognise coercive behaviour, and therefore it is important to support them with examples of what coercive behaviour looks like. Has the PuV ever</i>							
Used isolation or deprivation tactics against the victim survivor?							
Limited the victim-survivor's contact with friends or family? Both in-person and online.							
Limited the victim-survivor's access to money, or made them financially dependent on the PuV?							
Prevented them from attending work, appointments (e.g., doctor) or education?							
Limited access to basic necessities like sleep, hygiene, medication, and food?							
Limited access to their own property including houses and cars?							
Deprived the victim-survivor of bodily autonomy? (e.g., controlled personal appearance, refused to have safe sex)							

*Including date of most recent incident and name of PuV (if relevant)



Coercive control	Yes				No	Unknown or not relevant	Other details*
	All of the time	Often	Occasionally	Once			
Degraded, harassed, or threatened the victim-survivor?							
Put the victim-survivor down or made them feel bad about themselves, or that they were worthless?							
Repeatedly texted, called or otherwise tried to contact the victim-survivor when they did not want them to?							
Shared or threatened to share pictures or other content of the victim-survivor against their will (revenge porn)?							
Monitored or surveilled the victim-survivor?							
Monitored or controlled their use of their online accounts, including breaking into accounts or demanding passwords?							
Reading personal correspondence (e.g., texts, messages, and mail) without permission							
Repeatedly checked up on or stalked the victim-survivor by showing up to where the victim-survivor is, or online through social media.							
Installed cameras, spyware or tracking devices to surveil the victim-survivor							
Manipulated the victim-survivor?							
Showered the victim-survivor with love or affection after being violent or cruel?							
Threatened to hurt or kill themselves?							
Highly possessive of the victim-survivor, and jealous of others the victim-survivor interacts with (including children)?							
Made themselves seem like the “real” victim or portrayed the victim-survivor as the problem (including to police)?							
Made the victim-survivor feel that they’re crazy, lied to them or played mind games to exhaust them?							

*Including date of most recent incident and name of PuV (if relevant)



Coercive control	Yes				No	Unknown or not relevant	Other details*
	All of the time	Often	Occasionally	Once			
Where there are children, has the PuV ever...							
Undermined the victim-survivor's parenting skills?							
Reported or threatened to report children to Child Safety, or tried to use the police or other authorities against the victim-survivor?							
Otherwise manipulated the children or used them to manipulate the victim-survivor (e.g. asking the children about the victim-survivor to seek information about them)							
Other risk factors							
<i>Has the PuV ever...</i>							
Physically hurt the victim-survivor in any way? (hit, slapped, kicked or otherwise physically hurt them) If so, did the victim-survivor need to seek medical help?							
Tried or threatened to harm other people the victim-survivor knows?							
Breached or broken the conditions of an intervention order or a court order?							
Been violent to previous partners, other family members or non-family members? (Note any court proceedings and/or behaviours to previous partners)							
D: Population-specific risk factors: This section considers the PuV's past behaviours where the victim-survivor may face population-specific risk factors. These should be asked only where relevant.							
<i>Has the PuV ever...</i>							
For persons who identified as Aboriginal and Torres Strait Islander in Part 1							
Deprived the victim-survivor of access to their culture? (including language, community events, sorry business)							
Denigrated or insulted the victim-survivor for being Aboriginal or Torres Strait Islander or for their beliefs?							

*Including date of most recent incident and name of PuV (if relevant)



	Yes				No	Unknown or not relevant	Other details*
	All of the time	Often	Occasionally	Once			
For persons who identified as from a CALD background in Part 1							
Threatened the victim-survivor's immigration status, made threats to send them or their children overseas, or threatened to or taken away their passport?							
Refused to engage an interpreter for the victim-survivor and speaks for them?							
For persons who identified as LGBTIQ+ in Part 1							
Undermined or refused to accept their identity, including in public and with other family members? (sexual orientation and gender identity, including deliberate misgendering)							
Outed the victim-survivor or threatened to do so, against their will? (sexual orientation, gender identity, intersex status, to family members, friends, colleagues or publicly)							
For persons who identified as having a disability or mental health issue in Part 1							
Used the victim-survivor's disability/mental health status against them?							
Restricted or stopped the victim survivor from accessing appropriate care?							
For persons who identified as being elderly in Part 1							
threatened to relocate the victim-survivor or make them stay somewhere they do not want to go? (e.g. leave home to go into aged care?)							
Characterised the victim-survivor as cognitively impaired and limiting their ability to speak on their own behalf or manage their own affairs.							
Forced the victim-survivor to sign legal documents (e.g. power of attorney and wills)							



Part 3: Risk Assessment Summary

Overall risk level assessment and rationale: This section outlines the overall assessment of risk based on the practitioner’s professional judgment and the assessment they have undertaken. All aspects of Part 2 should be considered in determining the risk level. The below is a guide for interpreting the risk identified in Part 2.

Imminent risk	One or more high-risk factors are present, and these factors are deemed imminent or occurred recently (in the past 6 months) The victim-survivor believes they or another person are at imminent risk of serious harm
High risk	One or more high risk factors are present but not recent, nor escalating in severity or frequency A number of general risk factors are present and risk is escalating in severity or frequency The victim-survivor believes they or another person are at risk of serious harm but the risk is not imminent.
At risk	No high-risk factors are present and risk is not escalating in severity or frequency, but some risk factors are present and persistent.
Low risk/ no risk	No high-risk factors present. Risk factors are present, and not escalating in frequency or severity and managed to a very low level through protective factors. Risk unlikely.

Victim survivor’s assessment of risk

- Imminent Risk:** At imminent risk of lethality or serious harm
- High Risk:** At high risk of lethality or serious harm
- Risk:** At risk of harm
- No/Low Risk**
- Unknown**

Professional’s assessment of risk

- Imminent risk** of lethality or serious harm
- High risk** of lethality or serious harm
- Risk of harm**
- No/Low Risk**

Professional’s rationale for risk level

Considering recency of behaviour and any escalation in the frequency or severity of violence.

Do you have any other concerns that have not been noted which impact upon the victim-survivor’s risk?

Safety Planning Tool has been completed? (see Safety Planning Tool) Yes No

Child Protection Guide (CPG) Tool Completed? Yes No Not relevant

Outcome of CPG tool: Report to Child Safety Do not report to Child Safety

Details:

Child protection concerns: (please outline in detail)

Prior/current child safety interventions:

Name of specialist worker:

Name of agency:

Date of assessment:

Sources relied upon (including referrals/other agency discussions) to inform this risk assessment:



Level 2

Safety action plan tool and referral

CONFIDENTIAL: Domestic and family violence information

This tool is designed to be used by professionals working in Level 2 services where risk has been assessed through the Level 2 Risk Assessment Tool. Safety Planning is aimed at trying to bring back control to the victim-survivor in their day-to-day life, whilst recognising that they are responding to the actions and behaviours of the PuV.

The tool should be used to **support you to manage the risk** posed to a victim-survivor of domestic or family violence (DFV), and **to support the victim-survivor with information, tools, and practices to assist them in managing their own safety (and the safety of any children).**

Where the case has been referred to a multi-agency response, a safety plan will also be completed from a multi-agency perspective, which includes responses to reduce the threat posed by the PuV where possible.

If the victim-survivor identifies as belonging to a particular priority population group in the Level 2 Risk Assessment Tool, consideration should be given to particular barriers they may face in accessing supports and the need for tailored referrals.

Part 1: Key considerations for safety planning	Part 1 details key considerations for safety planning. This includes: <ul style="list-style-type: none">A. Identified risk from risk assessment: Summarises the risk level identified in the Level 2 Risk Assessment Tool.B. Victim-survivor's views of safety plan: Enables the victim-survivor to articulate what they need in order to feel safe, drawing on their protective efforts to date and experience of what has worked in the past.C. General considerations for safety planning: This supports you to consider a range of factors which may be relevant in developing an appropriate and effective safety plan. This includes the victim-survivor's desired level of contact with the PuV and support networks, as well as common barriers to executing safety action plans.
Part 2: Existing supports and information sharing	Part 2 prompts you to consider any existing supports in place and any concerns the victim-survivor may have in relation to information sharing, in order to inform future safety planning actions.
Part 3: Safety Action Plan	Part 3 supports you to detail the steps which will be taken to support the victim-survivor to increase their own safety. In creating the Safety Action Plan, you should consider all of the considerations from Part 1, as well as any existing supports in place and information sharing considerations. These steps may include referrals to and information sharing with other agencies, which can be recorded in the plan.



Part 1: Key considerations for safety planning

Victim-survivor name					
A. Identified risk from risk assessment: Risk level identified in the Level 2 Risk Assessment.					
<input type="checkbox"/> Imminent risk of lethality or serious harm		<input type="checkbox"/> High risk of lethality or serious harm		<input type="checkbox"/> Risk of harm	
<p>Note: If 'imminent risk' has been determined, a referral can be made to the High-Risk Team or another multi-agency response to undertake multi-agency safety planning using the Level 3 risk management tool. If the victim-survivor is in imminent risk, consider contacting 000 and other referrals to ensure immediate safety.</p>					
B. Victim-survivor's views of safety plan: This section enables the victim-survivor to articulate what they want and need in order to feel safe. It enables them to draw on their experience of what has worked in keeping them and their children safe and articulate any priorities that should be factored into the safety plan.					
				Response and implications for safety planning	
What do you need to make you feel safe?					
Are there any important priorities you are attempting to balance with safety? (e.g., work, social connections, education, caring responsibilities, religious values)?					
What have you tried in the past to keep yourself and your children safe? What has worked? What did not work?					
C. General considerations for safety planning: This section asks a broad range of questions to support the victim-survivor to consider how they can implement different strategies to keep themselves safe.					
	Yes	No	Unknown	N/A	Implications for safety planning
Contact with PuV					
Do you...					
Want to stay in the relationship or living with the PuV?					
Want to remain in contact with the PuV?					
Support networks					
Do you...					
Feel comfortable calling 000 if you feel at risk of harm?					<i>Prompt to understand how to address barriers to police contact, including identifying safe location to call, getting a friend or family member to call, or contacting another support service.</i>
Have family, friends, neighbours and other people who you can reach out to if feeling unsafe?					<i>Provide contact details and prompt to develop code words/similar if necessary</i>
Have a safe place to stay if you leave the home?					<i>Provide details around address, who lives there, whether the PuV knows of this safe place, etc.</i>



	Yes	No	Unknown	N/A	Implications for safety planning
Contact with PuV					
<i>[For Aboriginal and Torres Strait Islander and CALD victim-survivors]</i> Have connections to your community and culture?					Consider any additional supports to keep the victim-survivor and their children connected to their culture and community
Children					
Do you believe that school and/or childcare are a safe place for your child/ren?					Are they aware of the current situation? Is it safe to make them aware?
Are you worried that the PuV will use services against you or the children if referrals to support services are made?					
Is ongoing contact with the PuV specific to the children? (e.g. is the PuV allowed into the home to visit children?)					Consider whether this is a barrier to reporting, obtaining a DVO.
Where the victim-survivor has dependents (e.g., child or caring for person with a disability)					
Are they verbal? How clearly can they communicate?					Discuss implications for safety planning
Do they have mobility issues or require physical assistance to move around?					Describe assistance needed, whether they can move quickly and implications for an escape plan
Are there any specific triggers that affect their behaviour?					Discuss how stress/anxiety in the dependent can be managed during safety planning.
Do they require specific medication, treatment or medical equipment?					
The home environment					
Do you...					
feel safe in your home?					Discuss flagging their address with QPS, keeping their new address confidential
know if the PuV has access to your home? (e.g. keys, garage remote control...)					Consider safety/security upgrades, a friend staying with them
Health and wellbeing					
How has the violence impacted upon your health or wellbeing?					Provide education on risks associated with non-lethal strangulation, referral to GP or hospital where appropriate



	Yes	No	Unknown	N/A	Implications for safety planning
Contact with PuV					
Are you currently taking any prescription medication?					<i>Consider whether the PuV could be taking this medication without the victim-survivor's knowledge</i>
Transport					
Do you have...					
Access to transport to get to a safe place?					<i>Prompt to consider reverse parking car, fuel voucher, leaving it in the driveway, keeping keys on you. Consider whether this transport could have a tracking device</i>
The ability to leave home easily?					
Access to transport and related needs for dependents? (e.g. prams, disability supports)					
Financial access					
Do you have...					
Access to money if you need to leave?					
Secure access to finances (e.g. passwords that the PuV does not know)?					
Access to stable employment / source of income?					<i>Name and location of workplace</i>
Planning for pets					
Do you have...					
Pets that you need to care for?					
Technology and communication					
Do you ...					
Have access to a phone or internet connection?					<i>Consider implications for contacting victim-survivor</i>
Have secure passwords and online accounts? (e.g., Facebook, email, other social media)					<i>Include prompt to turn off location and Bluetooth settings, including on social media apps such as Snapchat. Consider need for new smart phone if necessary. Include prompts to activate security features on devices</i>
Know whether any of your devices could have been fitted with tracking devices?					<i>Include prompts to provide information on TFA and consider children's devices, iPads etc.</i>
Community and culture					
Do you have any cultural or community obligations where you may see the PuV or their family? (e.g. funerals, sorry business)					<i>Prompts on how the victim-survivor can safety plan for these events</i>



Part 2: Referrals and information sharing

A. Current supports in place from services: The following section seeks to understand if there are already any supports in place for the victim-survivor, PuV and any children.

Are there any services that are currently providing support to you [or your children]?	<input type="checkbox"/> Yes <input type="checkbox"/> No <i>If yes, detail agencies providing support, an agency contact if known, and the nature of the support being provided:</i>
Are you aware of any services that the PuV is accessing?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unsure <i>If yes, detail agencies providing support, an agency contact if known, and the nature of the support being provided:</i>
Are there any services to which you [or your children] have previously been referred, or the PuV has been referred?	<input type="checkbox"/> Yes <input type="checkbox"/> No <i>If yes, detail whether these have been effective/useful.</i> <i>Practitioner to note any historic disengagement with services:</i>

Note: Referrals to be made are recorded in the summary of the Safety Action Plan below.

B. Information sharing: Whenever safe, possible and practical, a victim-survivor's consent should be obtained before disclosing their personal information to another entity. Information about the victim-survivor can be shared without informed consent in certain circumstances. The sharing of information relating to the PuV does not require their consent, and in almost all cases, consent should not be sought from the PuV. You should consider your mandatory reporting obligations under relevant legislation when completing this section.

Are you comfortable with information being shared with other agencies to support in keeping you safe?	<input type="checkbox"/> Yes <input type="checkbox"/> No <i>If yes, agencies to be listed in Part 3C.</i> <i>If no, detail concerns:</i>
Is there any information that you would be concerned about sharing with specific organisations or professionals?	<input type="checkbox"/> Yes <input type="checkbox"/> No <i>If yes, detail information the victim-survivor does not want shared or the agency:</i>

Note: Information sharing to occur to be recorded in the summary of the Safety Action Plan below.



Part 3: Safety Action Plan

A. Safety plan: This section enables you to detail any additional key safety considerations, and the steps that will be undertaken to support safety. All implications for safety planning identified in Part 2 can be considered in coming up with the most appropriate safety plan, including any existing supports in place.

Any additional safety concerns not identified in Part 2:

Detail key steps to be taken (as agreed with the victim-survivor) to address identified issues:

B. Referrals to be made: This section notes any referrals that will be made, or contact with other services, to support safety. In detailing the action to be taken, detail who is accountable for undertaking the relevant action.

Referral	Action taken
Referral to High Risk Team or other multi-agency response	<input type="checkbox"/> Yes <input type="checkbox"/> No Further details (as required):
Referral to specialist domestic violence and/or sexual assault service for further action	<input type="checkbox"/> Yes <input type="checkbox"/> No Further details (as required): Note any case consultations with specialist services.
Referral to other support service (e.g. Centrelink, mental health, GP, healing programs)	<input type="checkbox"/> Yes <input type="checkbox"/> No Further details (as required):
Contact Police	<input type="checkbox"/> Yes <input type="checkbox"/> No Further details (as required):
Contact Child Safety [See Fact sheets for key considerations when contacting Child Safety.]	<input type="checkbox"/> Yes <input type="checkbox"/> No Further details (as required):
Other referrals or actions to be taken by professional or specialist team	Detail other referrals or follow-up actions to be undertaken by professional or specialist team:

C. Information sharing: This section notes any information sharing that will occur in order to support safety. Before sharing information about the victim-survivor with another entity, you should consider whether disclosing the information is likely to adversely affect the safety of the victim-survivor or another person.

Agency/ies to share information with: <i>Detail agencies and, if relevant, what information is to be shared.</i>	Consent provided? <input type="checkbox"/> Yes <input type="checkbox"/> No Further details (as required):
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Level 2

Referral form for victim-survivors at imminent risk

CONFIDENTIAL: Domestic and family violence information

To be used when referring to specialist services or high-risk team. Please attach all pages of the completed Level 2 domestic violence risk assessments for the adult victim-survivor and any children.

Referral to:	Date of referral:
Referral from: (Agency name, contact person, contact details)	
Victim-survivor name:	
Repeat referral <input type="checkbox"/> Yes <input type="checkbox"/> No Date of last referral if known:	Information shared with consent? <input type="checkbox"/> Yes <input type="checkbox"/> No
Level 2 risk assessment and safety plan forms attached? <input type="checkbox"/> Yes <input type="checkbox"/> No	Date of last victim-survivor contact:
Date of police contact, if relevant:	Where is the victim-survivor now?
Preferred approach for victim-survivor contact (e.g. contact type, certain times of day):	Where is the PuV now?
Are there any children? <input type="checkbox"/> Yes <input type="checkbox"/> No Details:	Do the children reside with the PuV? <input type="checkbox"/> Yes <input type="checkbox"/> No Care arrangements:
Other critical information	