

PRACTICE TOOL 7: NORTHERN TERRITORY DOMESTIC AND FAMILY VIOLENCE COMMON RISK ASSESSMENT TOOL (CRAT)

The CRAT is an evidence based tool which is used to assess and respond to DVF risk, particularly the risk factors which are predictive of harm or death for a DFV victim survivor.

For more information, see the RAMF Practice Guide 3: Managing DFV Risk.

Details of person completing this form			Date form completed
Worker name			
Organisation name			
Email		Phone	
Victim survivor details			
Name (and any other names victim survivor is known by)			
Gender	<input type="checkbox"/> Female	Date of birth	
	<input type="checkbox"/> Trans, gender diverse, non-binary	Language/s spoken	<input type="checkbox"/> Interpreter needed
	<input type="checkbox"/> Male		
Ethnicity		Visa status	
Aboriginal	<input type="checkbox"/> YES <input type="checkbox"/> NO	Home community	
Primary address		Contact number	
Other locations the victim survivor has connections to			
Relationship to the perpetrator			
Has victim survivor previously been on FSF in relation to same perpetrator?			<input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> UNKNOWN
Comments			

Children, young people accompanying victim survivors

	Child 1	Child 2	Child 3
Name			
Date of birth			
Gender			
Language/s spoken			
Ethnicity			
Aboriginal			
Home community			
Primary address			
Current location			
Primary carer			
Relationship to victim			
Relationship to perpetrator			

Perpetrator details

Name (and any other names perpetrator is known by)		Date of birth	
Gender	<input type="checkbox"/> Female <input type="checkbox"/> Trans, gender diverse, non-binary <input type="checkbox"/> Male	Language/s spoken	
Ethnicity		Visa status	
Aboriginal	<input type="checkbox"/> YES <input type="checkbox"/> NO	Home community	
Primary address		Contact number	
Other locations the perpetrator has connections to			
Relationship to the victim survivor			
Is currently incarcerated (including on remand)		<input type="checkbox"/> YES <input type="checkbox"/> NO Date of release (if known):	
Comments			

SECTION A – EVIDENCE-BASED RISK FACTORS

Instructions:

- For each factor that is relevant, write the score for that factor in the right hand column.
- If the factor is not relevant, leave it blank.
- Do not put a partial score in. For example if the risk score for a factor is 3, put 3 in the right hand column (not 2 or 1.5).

Perpetrator's high risk behaviours towards victim survivor

If this risk factor applies, write the total risk score in the risk score column

Risk score

Has physically harmed the victim survivor	3	
Has used a weapon(s) or object(s) in violence towards the victim survivor	3	
Is intoxicated while being violent towards the victim survivor	3	
Started using DFV early in the relationship	3	
Has a history of violence against the victim survivor	3	
DFV (including physical and sexual violence, and coercive control) is becoming worse and/or more frequent	3	
Has tried to kill the victim survivor	3	
Has sexually assaulted the victim survivor or coerced them into unwanted sexual practices	3	
Has choked, strangled or suffocated the victim survivor or attempted to do so	3	
Has assaulted the victim survivor in a public place or outside the home	3	
Has stalked or monitored the victim survivor	3	
Has used highly coercive and or controlling behaviours	3	
Has threatened or attempted suicide and/or self-harm	3	
Has harmed or threatened to harm pets	3	
Has threatened to physically or sexually harm, or to kill, the victim survivor	2	
Has a reported or unreported history of violence against a previous partner (or previous partner is a missing person)	2	
Has breached court orders such as a DVO, bail or parole	2	
Has a history of other violent behaviour	2	
Has attitudes and/or cultural beliefs which support violence towards women / children / elderly	2	
Comments		

Child victim(s) (accompanying adult victim survivor, and aged under 18)

If this risk factor applies, write the total risk score in the risk score column

Risk score

Perpetrator has threatened to harm or kill the child/ren	2	
Child/ren has been in the adult victim survivor's arms or physically in between the victim survivor and the perpetrator when the victim survivor was attacked	2	
Perpetrator has physically harmed the child/ren	2	
Perpetrator has sexually harmed the child/ren	2	
Child/ren has tried to stop the perpetrator from being violent towards victim survivor	2	
Perpetrator unreasonably controls the child and disrupts the non-offending parent's relationship with the child/ren	2	
Perpetrator has emotionally harmed the child/ren	2	
Child/ren from a previous relationship is in the victim survivor's care	1	
Child/ren expresses / indicates through action that they are afraid of the perpetrator including saying that they don't want to have contact with the perpetrator	1	
Child/ren named on victim survivor's DVO and or has own DVO	1	
Comments		

Situational risk factors

If this risk factor applies, write the total risk score in this column

Risk score

Victim survivor is isolated (including isolated from family, friends, culture, services or supports)	3	
Perpetrator is due to be released from prison and or is currently on bail, remand and or parole in relation to violent offences	3	
There has been a recent separation or a planned separation in the near future	3	
Perpetrator is aged under 25 years	3	
Perpetrator has access to firearm(s) or prohibited weapon(s)	3	
Perpetrator has recently been denied or restricted access to the children	3	
Perpetrator misuses alcohol and/or other drugs	2	
Victim survivor is pregnant or has a new baby (within the last 12 months)	2	
Victim survivor is reliant on the perpetrator for their immigration status	2	
Perpetrator is involved in pending child protection matters	2	
Perpetrator's family actively support the perpetrator's use of violence and/or blames the victim survivor for the violence	2	
Perpetrator and or victim survivor's / perpetrator's family puts pressure on the victim survivor	2	

Perpetrator and/or victim survivor has recently experienced extreme social, economic, and/or environmental disruptions	2	
Perpetrator is experiencing employment or financial difficulties (including gambling)	1	
There is an actual or perceived new partner in the victim survivor's life	1	
Comments		
		TOTAL
TOTAL SCORE (add up the numbers in the Risk Score column and use the Total to identify the risk level by ticking the corresponding box below): <input type="checkbox"/> AT RISK (0-14) <input type="checkbox"/> ELEVATED RISK (15-27) <input type="checkbox"/> SERIOUS RISK (28+)		

SECTION B: Victim survivor's assessment of risk for themselves and their child/ren
Instructions: Fill in the victim survivor's answers to these questions in their own words

How frightened is the victim survivor of what the perpetrator may do to them in the immediate future (eg, not at all scared, scared, terrified that I (and/or my children) will be seriously injured or killed)?	
Has the frequency and severity of the DFV violence (including physical, sexual and controlling violence) increased?	
Would the victim survivor ring police or someone they trust if they feel unsafe? And do they have the means to actually do this?	
Does the victim survivor think workers or the service is at risk from the perpetrator?	
What level of risk does the victim survivor believe they are at?	<input type="checkbox"/> AT RISK <input type="checkbox"/> ELEVATED RISK <input type="checkbox"/> SERIOUS RISK
Comments	

SECTION C: Worker's professional judgement and assessment of victim survivor's situation

Instructions: Tick and fill out the sections below if you are aware of any of these additional factors which make you believe there is an increased risk to the safety of the victim survivor, child/ren and/or others?

The victim survivor is 18 years of age or under. Comments:

You believe the victim survivor's injuries are not consistent with explanations they have given. Comments:

The victim survivor is homeless or in unsafe or insecure housing and or highly mobile. Comments:

The victim survivor has a disability and/or is dependent on the perpetrator for day to day care. Comments:

You believe children in the household are at risk of harm. Comments:

The victim survivor is legally compromised (they have a warrant/DVO/are named on the Banned Drinker Register (BDR) / they have been imprisoned for violence against the perpetrator). Comments:

The victim survivor is unlikely to disclose the violence to police or services due to their fear of increased risk, or of being blamed or losing children. Comments:

The victim survivor describes using violence as a form of protection or resistance against the perpetrator's violence, and their use of violence is becoming more serious and frequent. Comments:

The victim survivor misuses alcohol and/or other drugs. Comments:

The victim survivor has diagnosed mental health issues and/or expresses wanting to end their life. Comments:

The victim survivor is financially dependent on the perpetrator. Comments:

There are other critical or imminent safety concerns including cultural / religious practices and customs, conventions, beliefs that may increase the victim survivor's risk. Comments:

Indicate the level of risk the you believe the victim is at:
NOTE: If in doubt, you should revise the risk level up.

AT RISK ELEVATED RISK SERIOUS RISK

Comments

SECTION D: Overall risk assessment

Instructions: Record the level of risk from sections A, B and C and select an overall level of risk

AT RISK 0 - 14 | ELEVATED RISK 15 - 27 | SERIOUS RISK 28+

A	What was the risk level assessed in Section A: Evidence Based Risk Factors?	<input type="checkbox"/> AT RISK <input type="checkbox"/> ELEVATED RISK <input type="checkbox"/> SERIOUS RISK
B	What was the victim survivor's self-assessment of risk in Section B?	<input type="checkbox"/> AT RISK <input type="checkbox"/> ELEVATED RISK <input type="checkbox"/> SERIOUS RISK
C	What was your professional assessment of the victim survivor's level of risk in Section C?	<input type="checkbox"/> AT RISK <input type="checkbox"/> ELEVATED RISK <input type="checkbox"/> SERIOUS RISK
Based on this, tick the overall level of risk NOTE: If in doubt, you should revise the risk level up.		<input type="checkbox"/> AT RISK <input type="checkbox"/> ELEVATED RISK <input type="checkbox"/> SERIOUS RISK

Tick how imminent the risk is (imminent means that you believe that death or serious physical harm could occur within a short time)

NOT IMMIDENT IMMIDENT

SECTION E: Positive actions for workers to respond to the assessed level of risk

Instructions: Take positive action appropriate to the assessed level of risk. A referral to the FSF can be made if the risk is assessed as serious.

LEVEL OF RISK	POSITIVE ACTIONS FOR WORKERS TO TAKE	TOOLS
AT RISK	<ul style="list-style-type: none"> • Discuss and explain that client, child/ren or both are at risk of being harmed by the perpetrator • Make mandatory report if required (with the client if possible) • If client has experienced sexual assault (recent or historical) AND they consent to support contact specialist sexual assault service. • Address IMMEDIATE safety by calling police on 000 or 131 444 if there are immediate concerns for the safety of the client and or their child/ren • Address safety by developing a SAFETY PLAN • Consider referral to specialist DFV service • Consider referral to MACCST 	<ul style="list-style-type: none"> • Practice Guide 3: Managing DFV Risk • Practice Tool 8: Safety Plan
ELEVATED RISK	<ul style="list-style-type: none"> • Discuss and explain that client, child/ren or both are at elevated risk of being harmed by the perpetrator • Make mandatory report if required (with the client if possible) • If client has experienced sexual assault (recent or historical) AND they consent to support contact specialist sexual assault service. • Address IMMEDIATE safety by calling police on 000 or 131 444 if there are immediate concerns for the safety of the client and or their child/ren • Address safety by developing a SAFETY PLAN • Consider referral to specialist DFV service • Consider referral to MACCST 	<ul style="list-style-type: none"> • Practice Guide 3: Managing DFV Risk • Practice Tool 8: Safety Plan

SERIOUS RISK	<ul style="list-style-type: none"> • Discuss and explain that client, child/ren or both are at risk of being seriously harmed or killed by the perpetrator • Make mandatory report if required (with the client if possible) • Refer the client to the nearest Family Safety Framework if one operates in your region (Alice Springs, Darwin, Katherine, Nhulunbuy, Tennant Creek, Yuendumu) • If client has experienced sexual assault (recent or historical) AND they consent to support contact specialist sexual assault service. • Address IMMEDIATE safety by calling police on 000 or 131 444 if there are immediate concerns for the safety of the client and or their child/ren • Address safety by developing a SAFETY PLAN • Consider referral to specialist DFV service • Consider referral to MACCST 	<ul style="list-style-type: none"> • Practice Guide 3: Managing DFV Risk • Practice Tool 8: Safety Plan
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SECTION F: Reporting record

Mandatory report of child abuse and neglect

Time Sent	AM <input type="checkbox"/> PM <input type="checkbox"/>	Date:	
Reported by:			
Reported to:			
REF/PROMIS#:			
Comments			

Mandatory report of DFV

Time Sent:	AM <input type="checkbox"/> PM <input type="checkbox"/>	Date:	
Reported by:			
Reported to:			
Comments			
REF/PROMIS#:			

Referred to FSF

Time Sent:	AM <input type="checkbox"/> PM <input type="checkbox"/>	Date:	
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Referral by (Worker name, agency, contact details):

Referral to: <input type="checkbox"/> Alice Springs FSF (FSFAliceSprings@pfes.nt.gov.au) <input type="checkbox"/> Katherine FSF(FSFKatherine@pfes.nt.gov.au) <input type="checkbox"/> Tennant Creek FSF(FSFTennant@pfes.nt.gov.au)	<input type="checkbox"/> Darwin FSF (FSFDarwin@pfes.nt.gov.au) <input type="checkbox"/> Nhulunbuy FSF (FSFNhulunbuy@pfes.nt.gov.au) <input type="checkbox"/> Yuendumu FSF (FSFYendumu@pfes.nt.gov.au)
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Total Score: (Enter total CRAT score in this box)	Has the victim survivor given consent to the FSF referral? Yes <input type="checkbox"/> No <input type="checkbox"/> If no, why not? Please always consult your Team Leader/Manager or your FSF delegate in preparing a referral or notification.
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Please keep this form in your records.