The Family Safety Framework (FSF) aims to provide a timely, action-based, integrated service response to families experiencing family and domestic violence (F&DV) who are at high risk of injury or death.

The FSF operates in Alice Springs (regionally) as one component of the Alice Springs Integrated Response to Family and Domestic Violence (Alice Springs Integrated Response); and in South Australia (state wide) as an initiative of the State Government's A Right To Safety: the current phase of the Women's Safety Strategy 2011 - 2022. In this protocol these two areas are referred to as FSF regions.

#### Purpose

The purpose of the Family Safety Framework cross border referral and information sharing protocol (the FSF Cross Border Protocol) is to set out the parameters for referral of and information sharing about FSF cases between FSF regions to ensure a seamless safety response to families assessed as being at high risk of serious injury or death due to their experience of violence, and information about perpetrators of violence, where relevant parties are mobile between the FSF regions.

#### Rationale

The populations of South Australia and Central Australia are highly mobile across the entire geographic region. The FSF Cross Border Protocol is established to prevent or reduce serious and imminent threat to the life or health of victims of F&DV and their families and to protect their safety in cases where they transit between Alice Springs and South Australia. The protocol provides a mechanism where the FSF regions conduct referrals and exchange information that will support a more coordinated and timely response to high risk cases of F&DV.

#### Relevant parties

- Alice Springs Family Safety Framework is a component of the Alice Springs Integrated Response which
  is co-led by the Northern Territory Departments of Attorney-General and Justice (AGD) and Children
  and Families (DCF), the FSF is led by the Northern Territory Police.
  - o The Alice Springs family safety meetings (FSMs) are chaired by the Northern Territory Police Officer in Charge of the Alice Springs Domestic Violence Unit (DVU).
- In South Australia, the Family Safety Framework is co-ordinated by the Office for Women,
   Department for Communities and Social Inclusion and is an agreement between a number of state government departments and non-government agencies.
  - o The FSF operates across 19 regions in South Australia, with FSMs chaired by South Australia Police (SAPol). In metropolitan Adelaide, the FSMs are chaired by the Officer in Charge, Family Violence Investigation Sections (FVIS). In country regions, the responsibility rests with the Officer in Charge of the local Criminal Investigation Branch (CIB).

#### **Precedents**

Since the Alice Springs FSF commenced in July 2012 referrals between the Alice Springs FSF and two of the South Australian FSF areas have been made. These referrals and associated information sharing have been conducted informally and relied on the good will of the participating FSF regions to ensure the safety of the victims concerned.

In addition referrals between the various South Australian regions are regularly occurring. Cases are transferred from one region to another via the SAPol Chair. All relevant information is transferred with the case for consideration in the new region where the case will be the subject of a FSM, if still at imminent high risk.

#### **Enabling decisions**

#### Information sharing

The Commissioner of Police of the Northern Territory and the *A Right To Safety* Chief Executives Group in South Australia will approve the information sharing arrangements.

All information sharing must be in line with information privacy principles.

Information sharing will occur when it is in relation to a case of high risk that is being referred. The information shared will be that which is relevant to reducing or preventing the level of risk.

The FSF and associated FSMs do not provide a blanket approval for agencies to share information in every case. However, agencies are encouraged to develop and implement lawful and responsible information sharing arrangements to reduce or prevent the level of risk and harms to victims of F&DV.

The sharing of information in relation to the FSF and associated FSMs does not replace existing and or future information sharing arrangements between agencies to prevent or lessen a serious threat to the life or health of the victim and or their children.

#### Monitoring and quality improvement

<sup>&</sup>lt;sup>1</sup> Twelve months from date of the most recent signature on page 6.

#### Section 1: Introduction

- 1.1 This Protocol explains the procedure whereby FSF regions provide information to other FSF regions for the purpose of preventing or lessening a serious and imminent threat to the life or health of victims of F&DV and their families. It extends to the provision of information relating to women, children and young people who are at high risk of serious injury or death due to their experience of violence and those who perpetrate that violence.
- 1.2 The primary legislation is the Information Act (NT) which is applicable to Northern Territory Government agencies; the South Australian State Cabinet endorsed Information Privacy Principles and the Information Sharing Guidelines as applicable to South Australian Government agencies and nongovernment organisations; and the Privacy Act 1988 (Cth) which is applicable to Commonwealth Government agencies and non-government organisations. A body of existing law seeks to protect all persons who are vulnerable by reason of their age; mental or other physical disability; illness/frailty; inability to take care of themselves or protect themselves against serious harm or exploitation. This legislation and applicable common law is consistent with existing legal safeguards on personal information.
- 1.3 The manner in which information can be exchanged takes into account the following:

Northern Territory	South Australia	Commonwealth .
<ul> <li>Domestic and Family Violence Act (NT)</li> </ul>	<ul> <li>Information Privacy Principles (Cabinet Endorsed)</li> </ul>	Privacy Act 1988 (Cth)
<ul> <li>Care and Protection of Children Act (NT)</li> </ul>	<ul> <li>Information Sharing Guidelines (Cabinet Endorsed)</li> </ul>	<ul> <li>Australian Human Rights Commission Act (Cth)</li> </ul>
<ul><li>Information Act (NT)</li><li>Applicable common law</li></ul>	Applicable common law	Applicable common law

#### Section 2: Information

- Agencies providing services to women, men, children and young people will be concerned about the need to balance their duties to protect them from harm and their general duty of care towards other members of the household. Agencies may have a professional duty to support and strengthen families. Where there are concerns that a woman, child or young person may be at risk of significant harm, the safety of the woman, child or young person must come first. In all circumstances the overriding objective must be the safety of the woman, child or young person. i.e. "keeping the family together" should not be prioritised over the safety of the women, child or young person.
- There is a need for all agencies to hold personal and confidential information securely. The FSF region receiving any confidential information or personal data from any other FSF region must keep such information confidential and private, and take steps to prevent unauthorised access or disclosure of the same. In this regard each FSF region must ensure the security of such information it receives by ensuring that care is taken to avoid any breach (intentional or otherwise) or disclosure outside the bounds of this protocol. Appropriate technical and organisational measures shall be taken against unauthorised or unlawful processing of personal data and against accidental loss or destruction of or damage to personal data.

2.3 This protocol applies only to cases where a referral has already been either assessed by a FSF referring agency as being at high risk of imminent harm or death and or accepted at a FSM in one of the FSF regions.

NB: Participating agencies may share information only in accordance with 2.2 and 2.3.

#### Section 2a: Information - consent

It is good practice for the FSF region to inform the victim that their information will be shared with another FSF region and to obtain consent where possible. However, this may not always be possible or safe. It is also good practice for the FSF region to advise the victim of the outcomes of the referral to another region.

Whether or not the victim has given consent for her information to be shared at a FSM and she has indicated she will be relocating to another FSF region, where it is safe to do so she should be advised that information relevant to her safety will be shared with that FSF region.

Child protection concerns override any issues of consent. The wellbeing and best interests of the child are paramount and agencies must refer to mandatory notification procedures.

#### Section 3: Level of risk

- 3.1 The level of risk that qualifies assessment at high risk of imminent harm or death may vary between FSF regions. However, the level of risk that qualifies as high risk in the referring region will be deemed to be sufficient for the receiving region to accept the referral. A new risk assessment should be conducted by the relevant agency in the receiving FSF region once the victim is contacted, relocated and engaged.
- 3.2 No contact with the receiving FSF region by the victim should be assumed to mean that the violence may have escalated. The referring FSF region should be contacted and a follow-up conducted by relevant agencies.

#### **Section 4: Process**

- 4.1 This section provides guidance to FSF regions regarding the method and responsibility for sharing information.
- The purpose is for FSF regions to share information with a view to identifying people mobile or transitory between the FSF regions who are at a high level of risk, and to thereafter jointly construct an action plan to provide professional support to all those at risk across the two regions. The referring region will identify who is at risk and any relevant children or other family members.
- 4.3 Cross border referrals will be made by the FSF Chair in the referring region directly to the FSF Chair of the receiving region. The Officer in Charge of the Northern Territory Police, Alice Springs Domestic Violence Unit, will be responsible for referring a case into a South Australian region. The FSM chair of the relevant South Australian FSF will be responsible for referring a case into Alice Springs. A record of the referral will be held by both regions.

**NB:** A FSF referral agency in any region may assess and make a new case referral via their FSF Chair directly into a receiving FSF region. Ie: it is not necessary to wait until a case is assessed as high risk in the home region if the victim is known to be relocating sooner than the next FSM.

- 4.4 The region making the referral will provide the following supporting information:
  - a. Risk assessment form
  - b. Referral form
  - c. Relevant extract of the FSM minutes
  - d. Details about when the victim is planning to leave the area and details of where and when she is anticipating arriving in the new region
  - e. Copy of the most recent safety plan
  - f. Local referring agency contact details in the home region
  - g. Summary of risk, actions, agencies involved and other value add details.
- 4.5 The FSF region receiving the referral will provide to the referring region position title and contact details for relevant agency/ies in the receiving region to identify an appropriate referral pathway.
- 4.6 The referring region will generate an action from the FSM that the receiving region will be contacted and a referral made.
- 4.7 All cross border referrals should be copied with a notification alert to:

Criminal Intelligence Analyst, Cross Border Domestic Violence Intelligence Desk at: <a href="mailto:cbdvid@pfes.nt.gov.au">cbdvid@pfes.nt.gov.au</a>; phone 08 89858338; mobile 0428391636

- The outcome of a FSF region cross-border referral will be the development and management of a transition handover plan for each high risk case. Regions will agree on actions to improve safety following a joint assessment of the victim's situation. Regions will jointly monitor and review the victim's transition between regions to ensure a seamless handover to support in the receiving region. The case will remain open in both regions at least until the receiving region confirms local agency engagement with the victim. It may be agreed between the two relevant regions that it is appropriate in exceptional circumstances to keep a case open in both regions.
- 4.9 SA Office for Women (for SA FSF regional SAPOL Chairs) and the OIC Alice Springs DVU will exchange updated contact details for FSF Chairs on a six monthly basis.

#### Section 5: Information sharing about children and young people

FSF regions should be aware that there is a new Information Sharing Framework in relation to information sharing about child safety and well-being in the Northern Territory (Part 5.1A of the Care and Protection of Children Act (NT)).

- 5.2 The Framework entitles certain prescribed 'information sharing authorities' (including foster carers, police, teachers, principals, child care workers, health professionals, NGOs who provide services to children, public servants and lawyers) to share information with each other if they have a reasonable belief that the information would help:
  - make a decision, assessment or a plan;
  - initiate or conduct an investigation; or
  - provide a service to perform a function

that relates to the safety and well-being of a child.

5.3 In 2008 in SA, State Cabinet endorsed Information Sharing Guidelines for promoting the safety and wellbeing of children, young people and their families. These guidelines defined a process for information sharing that promoted earlier and more effective service coordination in response to risks to the safety and wellbeing of children and young people. In 2013 State Cabinet directed that the scope of the guidelines should be broadened to include information sharing for all vulnerable population groups, including all adults, irrespective of their status as parents or caregivers, where there are risks to safety and wellbeing.

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South Australia

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