



MAKING DISCIPLES  
THAT MULTIPLY

# Risk of Significant Harm Form

Please complete this form immediately following a disclosure or making the observation of serious imminent risk and give it only to the Praxeis Safety Officer.

Recently the Victoria Government introduced two new offenses relating to the protection of vulnerable people. Therefore, it is now mandatory that you take appropriate steps and report your concerns via the **Risk of Significant Harm Form**. Please complete this form if you hear a disclosure or wish to report a child or young person at risk of harm. The information will be used for reporting to the Government Child Protection Department.

**Praxeis Safety Officer: Ron Turner 0407 028 545 safety@praxeis.org**

## Details of Person Reporting Alleged Abuse/Risk of Harm

Name of reporter: .....

Relationship to alleged victim: .....

Nature of alleged abuse:  physical       emotional       sexual  
 neglect       witness domestic violence

Is this report due to a direct **disclosure** or **reasonable grounds**? (circle)

State immediate safety concerns: .....

.....  
.....

**If Disclosure:** Date: ..... Time: .....

**Describe** why you have 'reasonable grounds' for this report (add pages if needed). Include, when and how you became aware of the information, names of other witnesses, description of any injuries, description of the behaviour of the child, the carer's attitude regarding incident (if known). **Where disclosure has occurred provide a first person report in this space. Record the child's actual words (attach transcript).**

**Details of Alleged Abuse Victim**

Name: ..... Age: .....  Male  Female

Address: .....

Phone: ..... Parent/Guardian: .....

Names of siblings .....

.....

Names of known support people to the child and family .....

.....

Have the parents/guardians of the victim been notified?  Yes  No

If yes, person(s) spoken to: ..... Date: .....

What were they told? .....

.....

.....

**Details of Alleged Perpetrator of the Abuse (if known)**

Name: ..... Age: .....  Male  Female

Address:..... Phone: .....

Does the alleged perpetrator know about the report?  Yes  No

If yes, who spoke to him/her? ..... Date: .....

What was he/she told? .....

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**Praxeis' Response to Alleged Abuse/Risk of Harm**

Safety Officer notified?  Yes  No Date: .....

Reported by whom? .....

Name of Govt Service call centre worker:.....

Reference Number: .....

Have the police been notified?  Yes  No Date: .....

Name of officer and station: ..... Date: .....

Advice given by police officer: .....

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**Signed:** ..... **Date:** .....