

Interagency Case Assessment Team Best Practices:

Working Together to Reduce the
Risk of Intimate Partner Violence

Third Edition

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Acknowledgments

The Ending Violence Association of BC (EVA BC) is a member organization based in Vancouver, Canada, on the unceded, ancestral and traditional territories of the x^wməθk^wəyəm (Musqueam), Sk̓w̓x̓wú7mesh (Squamish) and səliwətał (Tsleil-Waututh) Nations. The work of EVA BC takes place on the unceded, ancestral and traditional territories of many Indigenous Peoples and First Nations across the province.

EVA BC supports, trains and advocates for anti-violence workers in nearly 300 anti-violence programs across the province.

The Interagency Case Assessment Team (ICAT) best practices contained in this manual were developed collaboratively, involving community-based anti-violence programs, criminal justice and child protection. The overall intent is to increase victim/survivor safety while mitigating risk in intimate partner violence cases.

Special thanks to the ICAT Best Practice Advisory Committee for their assistance in the development of the 3rd edition of the “Interagency Case Assessment Team Best Practices: Working Together to Reduce the Risk of Intimate Partner Violence.”

- ◆ Ending Violence Association of BC, Community Coordination for Survivor Safety
- ◆ Community Policing Services, RCMP E Division Headquarters
- ◆ Greater Victoria Regional Domestic Violence Unit
- ◆ Ministry of Public Safety and Solicitor General (community safety and victim services branch, corrections branch and policing and security programs branch)
- ◆ Ministry of Attorney General BC Prosecution Services
- ◆ Ministry of Children and Family Development
- ◆ Campbell River RCMP
- ◆ Campbell River Family Services Society
- ◆ BC Society of Transition Houses

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Thank you to the advisory committee for their dedication and commitment to ongoing discussions on responses to intimate partner violence in the province.

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A special thank you to the following review committee who provided critical feedback on the operational revision of this manual.

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CHAPTER 1:
Introduction

01



Purpose of the Protocol and Manual

A protocol is a series of steps or procedures that are recommended best practice. This protocol provides a framework for the ICAT and navigation of day-to-day operational procedures. This protocol also provides guidance around information-sharing that aligns with federal and provincial privacy laws. Based on risk identification, ICATs engage in a multidisciplinary approach to provide enhanced risk management and support to victims/survivors and proactive interventions for perpetrators.

This manual's purpose is to:

Guide and support the operation of ICATs in BC.

Enhance collaboration among members of existing ICATs.

Guide and support communities interested in developing an ICAT.

Encourage consistent ICAT practices across BC.

This manual supplements the support provided by EVA BC's Community Coordination for Survivor Safety (CCSS) program in collaboration with the RCMP E Division community policing services and is meant to be used in conjunction with EVA BC's ICAT training.

The development of this manual was through interagency dialogue focused on the task of collective understanding and distinguishing what constitutes safety and risk management in practice.

ICAT members come with a broad range of knowledge, experience, varying responsibilities, and mandates. Nonetheless, they come with the shared goals of developing a common understanding with a coordinated and collaborative approach to managing risk and safety. ICAT members share a desire to address gender-based violence and enhance community safety. Victim/survivor safety is increased with an effective coordinated response and the prevention of injury or death by intimate partner violence (IPV).

The report of the Truth and Reconciliation Commission and its findings represent a pivotal moment in the relationship between Indigenous and non-Indigenous Peoples in Canada. It represents an opportunity to acknowledge and begin to address the legacy and impact of colonialism and residential schools. The justice system, based primarily on the British model, has until recently, largely disregarded the presence of pre-existing Indigenous knowledge and cultural practices. Given this history, it is critical that when working with Indigenous communities, the process of risk identification and risk management is handled in a culturally sensitive manner. One of the many factors to be considered through this work is the final report from the National Inquiry into Missing and Murdered Indigenous Women and Girls and the need to eliminate violence against Indigenous women and girls.

ICAT work should be informed by recognition and regard for distinct cultures and an awareness of the critical role that cultural factors and intersectionality can play in risk management. ICAT case management can be complex, requiring a collaborative response from all members at the table.

This document is intended as a guide and is for general information only. It is not intended to be, and cannot be relied upon, as legal advice. Responsibility for compliance with the law remains with each organization.



What is an ICAT?

An ICAT is a collaborative partnership of local agencies, including community-based anti-violence agencies, police, child protection, health, corrections, and other agencies working in systems and communities. This group responds to referrals of suspected highest risk cases of IPV with the goal of decreasing risk and increasing safety. This goal is achieved by:

- ◆ Identifying risk using the BC Summary of Intimate Partner Violence Risk Factors (BC SIPVR) (**see Appendix 9**).
- ◆ Sharing risk-related information legally and ethically.
- ◆ Determining risk level.
- ◆ Developing a risk management plan.

ICATs follow a consistent process for each referred case. Once a referral is received by the police co-chair of the ICAT, they will notify ICAT members and arrange for a meeting to review the referral at the ICAT table. The referring agency or individual is invited to attend the ICAT meeting to address the referral. Details of the referral are shared with ICAT members in advance of the meeting for members to have time to bring relevant details of the case to the meeting for discussion and review. The referring agency/individual takes the lead to share their IPV concerns with the ICAT while providing case specifics and risk factors associated with the referral. A risk assessment is completed as a collective to determine risk and whether a designation of highest risk will be applied.

► While ICATs do review cases, they are not investigative bodies. An IPV case can be referred to the ICAT even if a police report has not been made.

Based on contributing risk factors, a risk management plan is created by the ICAT that outlines the team's commitment to increased engagement with victims/survivors and support for perpetrators through monitoring, case management and referrals for support services. The case is reviewed regularly to monitor factors and significant events.

Supplementary guidance, information and resources for ICATs are available at endingviolence.org/intimate-partner-violence/



Intimate Partner Violence Units

ICATs, Domestic Violence Units (DVUs) or Intimate Partner Violence Units (IPVUs) and local IPV coordination committees are all initiatives that help communities respond effectively to IPV. Each initiative is different in functionality yet complements one another and strengthens the local response to IPV.

A DVU or IPVU is an integrated unit within a police detachment/department consisting of police, Community-Based Victim Services and, in some cases, child protection social workers. One or more police officers within a police agency designated to work with IPV may also be referred to as a DVU or IPVU. Both types of units may contribute to an ICAT.

► **Unlike ICATs, DVUs or IPVUs are investigative bodies.**



ICATs and DVUs or IPVUs are operational initiatives that are responsive to the provincial Violence Against Women in Relationships (VAWIR) “Policy and Protocol for Highest Risk Cases” noted in the VAWIR policy. Police in all of these initiatives use the BC SIPVR to assist with assessing risk while conducting and documenting evidence-based, risk-focused IPV investigations.

1.1 ICATs and local coordination committees

Local IPV-related coordination committees include a broad range of service providers and responders. These committees identify and address service gaps and safety needs such as transportation and safe housing. Networking, training and information-sharing are part of a typical meeting agenda, but information about specific cases is not shared at a coordination committee meeting. There are often sub-committees, such as sexual violence coordination committees, that form as a result of the larger coordination committee.

An ICAT may also be a sub-committee of the local coordination committee. The coordination committee supports the work of the ICAT and can assist in resolving systemic issues that arise at the ICAT and, for example, may support applications for funding for joint initiatives such as public events or training. This assistance may come in the form of resources, problem-solving or ideas for funding or collaboration. The coordination committee may assist with or participate in the development and delivery of ICAT training to the community to promote an understanding of risk and explain how to make a referral to the ICAT.

The ICAT is co-chaired by:

-  One police officer
-  One representative from a Community-Based Victim Services (CBVS) or another community-based anti-violence program if a community-based victim services program is not available.

It is important to have representation from the community-based anti-violence program as co-chair to ensure there is a balance of information and power at the ICAT table. The co-chairs regularly update the coordination committee about the overall progress of the ICAT, including the number of ICAT referrals and meetings, trends, successes, and challenges. The ICAT does not disclose any identifying information about cases to the coordination committee.



Referrals to ICATs

ICAT referrals can be made to the police co-chair by ICAT members or agencies and individuals who provide services in the community. A referral can be made to the ICAT by anyone from the community. Anyone is encouraged to submit a referral where there is concern about highest risk IPV. If an agency is unsure about a case meeting the highest risk criteria, it is important to refer the case to the ICAT so that the ICAT can make a decision whether the case meets the highest risk criteria.

► **All referrals to the ICAT should be taken to the next ICAT meeting, or if a meeting is not upcoming and the matter is urgent, then an emergency meeting may be called. No referrals should be screened out prior to the ICAT reviewing the case.**

When seeking consent from the victim/survivor, using the template in **Appendix 5**, the ICAT member explains that they are seeking consent to share personal information with the ICAT. The ICAT member explains to the victim/survivor that they will initiate a review of the case and determine if it is the highest risk, in order to share the necessary information. Further detail is provided throughout the manual on victim/survivor consent and information-sharing.

✓ **Consent for victim/survivor**

✗ **Consent for perpetrator**

Seeking consent and cooperation of the victim/survivor is best practice, however, the legislation permits in certain situations the release of information *without consent* of the victim/survivor. Consent is not needed from the perpetrator on the ICAT file.



The Role of Victims, Perpetrators and Support Services

For the purpose of this manual, the term “perpetrator” is used to identify the person who caused harm. We recognize that this person may not have been accused or convicted of a crime at the time of the ICAT review. The term “victim/survivor” is used to describe the person or people for whom the risk management plan is creating safety, although that person may not identify as a victim or survivor. To maintain privacy and safety, and to be able to share relevant information within legal parameters, neither victims/survivors nor perpetrators are present at ICAT meetings.

The community-based anti-violence worker plays a critical role in ensuring that the needs of the victim/survivor, particularly related to safety, are paramount. The community-based anti-violence worker can provide insight regarding the dynamics of IPV from a victim/survivor’s perspective to the ICAT. In addition, the community-based anti-violence worker can ensure that the victim/survivor is respected as an expert about their experience and safety and is kept informed and central to the ICAT process. The community-based anti-violence worker also ensures the victim/survivor’s input is included in the risk management plan.

ICAT members from Community Corrections, police, forensic or health services, income assistance, and mental health and substance use bring



experience and information that can assist in creating effective monitoring, accountability and support for the perpetrator as well as provide critical support and services to both the victim/survivor as well as the family. Although Crown Counsel is not a standing ICAT member, Crown Counsel can assist with the terms of reporting and release conditions (for example, release to a substance use treatment program), or other means to increase victim/survivor safety.



Definition of Terms

1.2 Intimate partner violence

IPV involves the threat or infliction of harm or violence against a current or former spouse or dating partner. This form of violence can include physical or sexual assault, stalking, threats toward the victim/survivor, threats toward children or loved ones, threats toward pets, mischief, neglect, kidnapping, mental or emotional abuse, and property damage. IPV can happen to people of all genders and anyone can be a victim/survivor or a perpetrator.

The World Health Organization (WHO) recognizes that IPV affects many individuals and is associated with long-lasting health, social and economic consequences. WHO also acknowledges that IPV can impact all genders, ages, socio-economic, racial, educational, ethnic, religious, and cultural backgrounds. That said, women are statistically more often victims/survivors of IPV and the violence is more often perpetrated by men.

1.3 Highest risk

Consistent with the BC VAWIR 2010 policy, this manual uses the term “highest risk” to refer to IPV cases when there is a potential risk for serious bodily harm or death.

The designation of highest risk is based on a continuum of risk identification factors listed in the BC SIPVR (**see Appendix 9**).

► **It is the role of ICATs to determine the risk level for each file reviewed.**

The use of the term highest risk is not intended to deter service providers from referring cases which may not meet the criteria for the highest level of risk. Neither should the term be seen to minimize the seriousness of IPV that is not designated as highest risk.

1.4 Risk assessment

A risk assessment is conducted to assess the risk level associated with the perpetrator, their relationship with the victim/survivor, the perpetrator’s criminal history and contact with police, their mental health, and the challenges and system barriers that the victim/survivor faces. Most commonly, the BC SIPVR is used across the province to assess the level of risk associated with IPV.

Risk management is the process of managing the level of risk that is identified through the completion of a risk assessment. Risk management generally includes victim/survivor and perpetrator factors, as well as a number of other factors that may affect the safety of victims/survivors, their children, or others.

1.5 Victim safety planning

Victim/survivor safety planning (“safety plans”) should not be confused with the risk management developed from the ICAT process. A safety plan can empower the victim/survivor to take steps toward their safety, the safety of the children and others (**see Appendix 15**). Safety planning refers to the process of identifying the victim/survivor’s risk factors and putting together strategies, tools and resources to increase safety. The safety plan is not generated by ICAT and is developed with the victim/survivor and their community-based anti-violence worker. The safety plan may not always be shared with ICAT members but is kept by the victim/survivor and the community-based anti-violence worker.

CHAPTER 2: Consent, Privacy and Law

02



“Life Trumps Privacy”: Sharing Information at the ICAT Table

This section details the various legislation that governs ICAT agencies to disclose personal information, with or without the consent of the victim/survivor. In addition to being asked for consent to disclose personal information, the victim/survivor is also being asked to consent to the ICAT process of reviewing the case and determining if the case is highest risk. The consent form template can be found in [Appendix 5](#).

It is imperative to review “life trumps privacy” with victims/survivors and let them know what this means in relation to ICAT. Decreasing the ongoing risk associated with IPV is a priority for the ICAT.

2.1 Overview of privacy and information-sharing

Federal and provincial laws allow for the collection, use and disclosure of personal information by a variety of public entities and private organizations. The collection of personal information must be for a reasonable and authorized purpose and the personal information must be relevant to that purpose. Subject to certain limited exceptions, personal information regarding a victim/survivor, reported perpetrator or involved family members must not be used or disclosed for purposes other than those identified upon collection, unless the person consents to the new use or the disclosure is authorized by law. For instance, the federal *Privacy Act* and the provincial *Freedom of Information and Protection of Privacy Act* (FIPPA) permit disclosure of the information for a purpose consistent with the original purpose of collection.

For the purpose of this protocol, the collection, use and disclosure of personal information is considered necessary to protect individuals, their children and others who have been identified or assessed at highest risk by the ICAT. In some cases, the sharing of personal information at the ICAT meetings may be for a purpose other than the original purpose explained to the victim/survivor. For example, disclosing that the victim/survivor has applied for benefits through the Crime Victim Assistance Program to increase safety measures, such as home security, may be shared. If this is the case, federal and provincial legislation allows for this personal information to be disclosed to, collected, and used by the ICAT to reduce the risk of harm.

While privacy laws limit situations in which someone’s personal information can be disclosed, they also allow personal information to be disclosed, such as where the public interest in disclosure outweighs any invasion of privacy (Privacy Act), or where compelling circumstances exist that affect anyone’s health or safety (FIPPA & BC’s Personal Information Protection Act, or PIPA). FIPPA also specifically permits the release of personal information for the purpose of reducing the risk of domestic violence if domestic violence is

reasonably likely to occur. FIPPA also **requires** public disclosure of information about a risk of significant harm to the health or safety of the public or a group of people.

2.2 Privacy laws and ICATs

Each ICAT member or referring agency that holds the individual's personal information should determine if they are governed by federal or provincial privacy legislation. Once that is determined, the following provisions provide guidance. These provisions allow for information-sharing with and without consent. Each ICAT member is responsible for ensuring that information-sharing meets the requirements of the privacy laws governing their workplace and profession. For more information on applicable privacy laws for the community-based anti-violence sector, see EVA BC's "Records Management Guidelines: Protecting Privacy for Victims/Survivors of Violence" (2022).

endingviolence.org/resources/records-management-guidelines-march-2022/

Applicable laws include the following:

- ◆ BC's *Child, Family and Community Service Act* (CFCSA). This Act includes the legal requirement for anyone who has concerns about a child's safety and well-being to promptly report their concerns to a child protection worker (see section 9.9 for further information on the reporting requirement related to children). In addition, the CFCSA outlines privacy provisions under which the Ministry of Children and Family Development (MCFD) may share information with or without consent.
- ◆ BC's *Freedom of Information and Protection of Privacy Act* (FIPPA). FIPPA deals with access and privacy issues related to records under the custody or control of public bodies such as municipal police, Community Corrections, health authorities, provincial ministries, public education bodies, local governments, and contracted service providers performing services for a public body.
- ◆ BC's *Infants Act* (Part 2: minor's consent to health care).
- ◆ BC's *Personal Information Protection Act* (PIPA). PIPA provides privacy protections that apply to most businesses and non-profit organizations such as Community-Based Victim Services programs, Stopping the Violence counselling and outreach programs, transition houses, Prevention, Education, Advocacy, Counselling and Empowerment (PEACE) programs, unincorporated associations, trade unions, and charities.
- ◆ Canada's *Criminal Code* (sections 278.1–278.9 deal with the production of records in sexual offence proceedings).
- ◆ Canada's *Privacy Act* (contains privacy protections that apply to the RCMP and federally regulated businesses such as banks, railroads and telecommunication firms).
- ◆ Federal *Privacy Act* (for federal government entities such as RCMP and federal parole).

2.3 Consent requirements from victim/survivor and perpetrator

Under the existing privacy laws, if personal information is collected for an authorized purpose by the government, a public body or a private organization, and they want to use or disclose the collected information for another purpose, they would generally need to receive consent from the person who provided the information. If possible, and if it is safe to do so, every effort should be made to obtain written or verbal consent from the victim/survivor before disclosing personal information to the ICAT members and before engaging in the ICAT process of reviewing and managing risk with those subject to this protocol.

Although obtaining consent from the individual is best practice, it may not be possible in all cases to do so. Federal and provincial laws do allow for the disclosure of personal information without consent in certain circumstances, as articulated below. Most of these circumstances allow for information-sharing to reduce the risk of harm or lethality.

2.4 Information-sharing for ICAT members or referring agencies

(a) If you are part of a federal agency such as the RCMP or federal parole

If the ICAT requires personal information from a federal agency and the individual has provided **consent** to the ICAT member agency or the referring agency that holds that information, the federal Privacy Act authorizes disclosure to the ICAT.

If **no consent** is given, the Privacy Act still allows personal information to be disclosed without consent in certain situations including (but not limited to):

1. For the purpose for which the personal information was obtained or compiled or for a use consistent with that purpose. **Section 8(2)(a)**
2. Under an agreement or arrangement between the Government of Canada or an institution thereof, and the government of a province or any institution of such government, to administer or enforce any law or carry out a lawful investigation. Section 8(2)(f) works in conjunction with the 1983 Canada–British Columbia agreement on disclosure of personal information. **Section 8(2)(f)**
3. Where, in the opinion of the head of the institution, the public interest in disclosure outweighs any invasion of privacy that would result from disclosure, or disclosure would benefit the individual to whom the information relates. **Section 8(2)(m)(i) and (ii)**

(b) If you are part of a provincial public body such as municipal police, Community Corrections or mental health

If the ICAT requires personal information held by public bodies and the individual **has given consent, section 33 and 33.1 of FIPPA** authorizes disclosure inside or outside Canada.

If the ICAT requires personal information held by public bodies and the individual **has not given consent, FIPPA sections 33(1),(2) and (3)** authorize disclosure in a variety of circumstances, including:

1. If the head of the public body determines that compelling circumstances exist that affect anyone's health or safety and notice of disclosure is mailed to the last known address of the individual the information is about, unless the head of the public body considers that giving this notice could harm someone's health or safety. **Section 33(3)**. Compelling circumstances exist where there is a necessity to act to avert imminent danger to someone's health or safety or to protect someone's health or safety.
2. To reduce the risk that an individual will be a victim/survivor of domestic violence if IPV is reasonably likely to occur. **Section 33(3)(b)**
3. For the purpose for which the information was obtained or for a use consistent with that purpose. **Section 33(2)(d)**
4. To an officer or employee of a public body or to a minister if the information is necessary for the performance of their duties. **Section 33(2)(h)**
5. To an officer or employee of a public body or agency if the information is necessary for the delivery of a common integrated program or activity. **Section 33(2)(k)**
6. To a public body or a law enforcement agency in Canada to assist in an investigation with a view toward a law enforcement proceeding or from which a law enforcement proceeding is likely to result. **Section 33(3)(d)**

Provincial public bodies who are ICAT members should be aware that FIPPA also requires public disclosure of information about a risk of significant harm to the environment or to the health or safety of the public or a group of people, or where disclosure is clearly in the public interest. This provision applies whether consent to disclosure is given or not. **Section 25**

(c) If you are part of an organization

If the ICAT requires personal information held by organizations and the individual has given **consent** or implicit consent, sections 7 and 8 of PIPA authorize disclosure.

If the ICAT requires personal information held by these organizations and the individual has *not given consent*, PIPA authorizes disclosure in the following circumstances, among others:

1. The disclosure is in the interests of the individual and consent cannot be obtained in a timely way. **Section 18(1)(a)**
2. The disclosure with consent would compromise an investigation or proceeding and disclosure is reasonable. **Section 18(1)(c)**
3. The disclosure is to a public body or law enforcement agency in Canada to assist in an investigation or in the making of a decision to undertake an investigation. **Section 18(1)(j)**
4. There are reasonable grounds to believe that compelling circumstances exist that affect the health or safety of any individual and notice is sent to the last known address of the individual to whom the personal information relates. **Section 18(1)(k)**

PIPA allows an organization to disclose personal information to another organization **without consent** if the individual consented to the original collection of information and the information is disclosed to another organization solely to assist in carrying out work on behalf of the first organization. **Section 18(2)**

(d) If you are a child protection social worker

CFCSA , RSBC 1996, c46 is the legislation that applies to social workers associated with MCFD and Indigenous Child and Family Services Agencies, also known as Delegated Aboriginal Agencies, who provide child protection services.

Obtaining information without consent: under section 96 of CFCSA, the director has the right to any information held by a public body to ensure the safety and well-being of a child.

Disclosing information without consent: under section 79(a) and (a.1) of the Act, the director may, without consent, disclose any information if the disclosure is necessary to ensure the safety or well-being of a child or the safety of a person other than a child.

In addition to this, and specific to IPV situations that might reasonably occur, section 74 of the Act includes the right of the director to disclose information under the provision of section 33(3)(b) of FIPPA, “for the purpose of reducing risk that an individual will be a victim of domestic violence, if domestic violence is reasonably likely to occur.”

Pursuant to section 74(2)(e.1) of CFCSA, if disclosing personal information under section 33(3) of FIPPA, the director must not disclose information that could reasonably be expected to reveal that the child is in care or that an individual has made a report under section 14 of CFCSA.

Sections 74 and 79 of CFCSA apply despite FIPPA.

2.5 The scope of information-sharing with the ICAT

Information relevant to the health or safety concern in question may be shared. There are specific risk indicators for IPV, and information related to these indicators should be shared at the ICAT table.

As previously indicated, receiving consent from a victim/survivor is best practice yet not always possible. If a decision around disclosure of information without consent is considered, keep in mind the principle guiding this decision is that of “life trumps privacy.”

2.6 Additional procedural safeguards to help protect privacy and disclosure without consent

Where an ICAT member agency or referring agency decides to disclose personal information without consent, that decision should:

- ◆ Be assessed on a case-by-case basis.
- ◆ Be based on the necessity to disclose.
- ◆ Ensure that only proportionate and relevant information is disclosed in light of the level of risk of harm to a named individual or a known household in each case.
- ◆ Be properly documented at the time a disclosure is made, identifying why the disclosure is being made (i.e., what risk is believed to exist), what information and to whom it will be disclosed and what restrictions on the use of the disclosed information will be placed on its recipients.

Additional safeguards:

- ◆ Whenever possible and safe to do so, notify the victim/survivor if the information is about them.
- ◆ Consider whether, and to whom, notice of disclosure must be provided in addition to the victim/survivor.
- ◆ Consider the risks and benefits of sharing information without consent.

It is also important to determine who within the agency holding the personal information is authorized to decide on the release of information to the ICAT.

2.7 Sharing personal information without breaching ethical standards

► Most professional ethics codes provide that privilege or confidentiality does not extend to situations involving imminent danger.

2.8 ICAT's authority to collect personal information

Personal information shared between ICAT members during a case review is considered to be collected from a third party or indirect collection under the applicable privacy laws. Each ICAT member must determine that they have the authority to collect such information at the ICAT table during a case review, according to the privacy legislation that applies to their agency.

(a) If the ICAT member is collecting information under the federal *Privacy Act*

Where federal agency members of the ICAT are collecting personal information from another agency at the ICAT table **with consent**, the authority to collect this information indirectly is found where the individual the information is about authorizes this collection or where personal information may be disclosed under section 8(2). **Section 5(1)**

Where federal agency members of the ICAT are collecting personal information from another agency at the ICAT table without consent, the authority to collect this information indirectly is found as an exception to the collection of information directly from the individual to whom it relates, if doing so would result in the collection of inaccurate information or defeat the purpose or prejudices the use for which the information is collected. **Section 5(3)(b)**

(b) If the ICAT member is collecting information under FIPPA

Provincial public body members of the ICAT who are subject to FIPPA have the authority to collect personal information indirectly or without consent from another agency at the ICAT table under various circumstances, including:

1. If the information is collected for law enforcement. **Section 27(1)(c)(iv)**
2. If the information is collected to reduce the risk that an individual will be a victim of domestic violence if domestic violence is reasonably likely to occur. **Section 27(1)(c)(v)**
3. If the information may be disclosed to the public body under section 33. **Section 27(1)(b)**

(c) If the ICAT member is collecting information under PIPA

Under PIPA, an organization may collect personal information only for reasonable purposes and only collect information that fulfills the purposes disclosed and permitted by PIPA. Generally, organizations need consent to collect information. PIPA considers consent to be given when a person, knowing the purpose of the collection of the information, provides that information willingly. ICATs should, therefore, notify the individual of the purpose for collection, either verbally or in writing, explaining why the information is needed, how it will be used, and the limits to confidentiality. For instance, information may need to be shared with other staff or there may be a legal obligation in certain circumstances to release it without the individual's consent.

The following are examples of limited and specific circumstances for when organizations may collect personal information without consent or from a source other than the individual:

1. The collection is clearly in the interests of the individual and consent cannot be obtained in a timely manner. **Section 12 (1)(a)**
2. The collection with consent would compromise the availability or accuracy of information and the collection is reasonable for an investigation or proceeding. **Section 12 (1)(c)**
3. The information was disclosed to the organization under PIPA sections 18 through 22.

2.9 Managing personal information once it is provided to the ICAT

All information and documentation provided, collected, delivered, or compiled on behalf of the members of this protocol in the performance of their duties and responsibilities should be dealt with according to federal and provincial statutes. This includes verbal disclosures made at the ICAT table based on member agencies' records.

Subject to constitutional and legislative obligations to disclose where these obligations exist, information shared according to this protocol is kept confidential and used only to protect individuals, their children and others who have been identified as highest risk by the ICAT. Coordination and effective response to the justice system and child protection for the highest risk IPV cases will be provided by the appropriate ICAT members. Such information is not to be used by ICAT members for purposes unrelated to the protection of those at risk. This is sometimes referred to as a secondary purpose.



2.10 CFCSA reporting requirements and child protection

Under section 14 of CFCSA, anyone who has reason to believe that a child (any person under the age of 19), including an Indigenous child, needs protection under section 13 must promptly report the matter to a director or person designated by a director. However, a person who has reason to believe that an Indigenous child needs protection under section 13 and who reports the matter to an Indigenous authority is not required to report the matter to a director or a person designated by a director if the Indigenous authority confirms to the person that the Indigenous authority will assess the information in the report.

Section 14(1)(1.1)

Section 13 of CFCSA sets out the circumstances in which a report to MCFD or an Indigenous authority is required. For further details, refer to section 13 of the Act and the “BC Handbook for Action on Child Abuse and Neglect.”

www2.gov.bc.ca/assets/gov/public-safety-and-emergency-services/public-safety/protecting-children/childabusepreventionhandbook_serviceprovider.pdf

2.11 Where there are immediate safety risks

An ICAT does not respond to emergencies. When a referral is made and an emergency is present, police and child protection will respond and act according to their respective mandates.

2.12 If the case is assessed as “not highest risk”

If a case is assessed as not highest risk, information-sharing for the ICAT coordination and collaboration response ends. Information-sharing may continue between service providers with the consent of the victim/survivor and/or under applicable legislative authority, but unless there is an escalation in risk, there is no ongoing sharing of information with the ICAT. Although the case may not be designated as highest risk, a risk management plan, including a safety plan, is still created to manage risk among the service providers who will continue to support the victim/survivor. The referring party and other team members connected to the case will monitor the case for changes in risk factors that may result in ICAT reassessing the case.

2.13 Other laws that may apply

The main legislation governing information-sharing between parties of the ICAT protocol are discussed above, however, other specific laws may also be relevant: the *Criminal Code*, the *Gunshot and Stab Wound Disclosure Act*, the *Police Act*, the *Access to Information Act*, the *Correction Act*, the *Corrections and Conditional Release Act*, the *Victims of Crime Act*, the *Family Law Act*, the *Public Health Act*, the *Medical Research (BC Cancer Agency) and Health Status Registry Act*, the *Ministry of Health Act*, the *Hospital Insurance Act*, the *Coroners Act*, and regarding the disclosure of youth records, the *Youth Criminal Justice Act*.



Legal Requirements of ICAT Information Disclosure

If an ICAT member or ICAT participant receives a request under the *Access to Information Act*, the *Privacy Act*, FIPPA, or any other court order, summons, or subpoena for disclosure of records relating to the ICAT, that person should immediately notify the ICAT co-chairs. The ICAT co-chairs should then consult with the entire ICAT and seek legal advice if necessary. Any release of information must involve consideration of the potential increase in risk of future harm because of the release of information.

2.14 ICATs sharing personal information for court purposes

ICAT information will not be used for family court or other civil court processes or any other proceeding or hearing without a subpoena from the requesting party. This includes all proceedings related to *Family Law Act* protection orders, divorce, custody, and support.

As outlined above, “life trumps privacy” information-sharing provisions contained in federal and provincial laws allow personal information to be shared with the ICAT. However, the ICAT must exercise caution in releasing this shared information further, even for purposes related to legal proceedings. A formal subpoena for these records is the recommended process before any information is released.

2.15 Disclosure of ICAT records

The various records created by the ICAT or ICAT member, including the ICAT Risk Review Report, may be subject to Crown Counsel disclosure obligations and/or an application by the accused for disclosure during a criminal prosecution.

Crown Counsel has both a legal obligation and a professional responsibility to disclose to an accused person all information in the possession or control of Crown Counsel that is relevant to a police investigation and prosecution for a specific charge. Crown Counsel may exercise a residual discretion to refuse to disclose information that is privileged or irrelevant, or where disclosure is otherwise governed by law. In every case where Crown Counsel exercises discretion for disclosure, that exercise of discretion is subject to review by the court.

The police have an ongoing duty to provide Crown Counsel, without prompting, information relevant to their investigation of the perpetrator and other information that is relevant to the case. When the police come into possession of ICAT records, the police member is responsible for doing an

initial assessment to determine the records' relevance and for providing ICAT records to Crown Counsel as needed. ICAT records that the police have disclosed to Crown Counsel will be reviewed by Crown Counsel to determine the manner and degree of disclosure that is necessary and appropriate.

If disclosure is requested by the perpetrator for ICAT records that are in the hands of third parties, and the records may be relevant to an issue at trial, the third party in possession of the records may be responsible for making submissions at the disclosure application hearing. This may include responding to, or require retaining legal Counsel to respond to, the disclosure application. A third party would include all ICAT members.

Note that the deliberate destruction of records, which may be potentially relevant to a criminal investigation and prosecution, can have a significant adverse impact on a prosecution. See the Supreme Court of Canada decision of *R. v. Carosella* (1997) for reference on the outcome of a stay of proceedings involving a sexual assault crisis centre that destroyed records.



Seeking Consent and Managing the Referral

2.16 Seeking the victim/survivor's consent

The victim/survivor must be informed about the ICAT and be provided an opportunity to consent to have their personal information released to the ICAT. Consent from the victim/survivor before the ICAT members review the case and determine whether it is considered highest risk is essential to support victims/survivor safety and engagement throughout the process. When possible, victim/survivor consent should be obtained at the beginning stage of the process and included with the referral. However, consent is not required to make a referral and may not be possible prior to a referral. The ICAT process flowchart in **Appendix 6** can be used to provide the victim/survivor with an overview of what will happen. The consent form is found in **Appendix 5**.

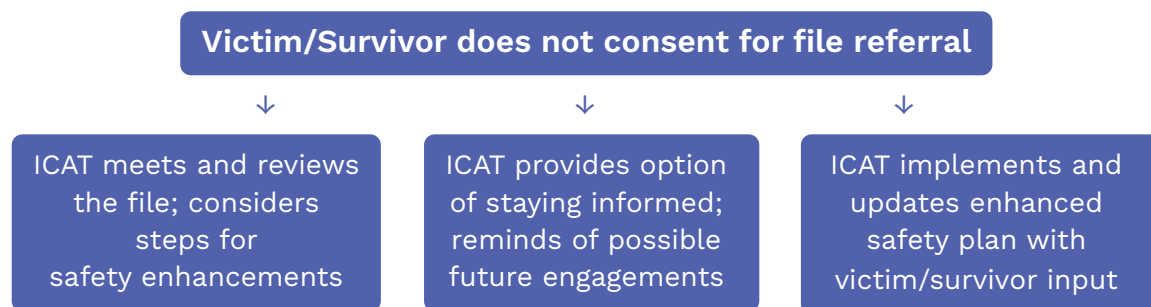
The ICAT member or person seeking consent from the victim/survivor should ensure that the victim/survivor has read or been read the consent document included in **Appendix 5**. The form articulates the ICAT process and explains the applicable privacy principles for the release of personal information. Information provided to the victim/survivor at this stage should include that they can revoke consent, but the victim/survivor should be informed the ICAT may need to proceed despite their desire to revoke consent due to compelling safety concerns. Every effort should be made to ensure that the victim/survivor has support from a community-based anti-violence worker and that they are informed of the steps taken to ensure their safety and of the ICAT's decisions and actions, including the point of file closure with ICAT.

The ICAT process, including the role of the agencies who sit at the table, must be thoroughly explained, along with the possible outcome of police and child protection exercising their mandate to investigate any concerns. An explanation should be given that information from the ICAT about the perpetrator or others will not be shared with the victim/survivor.

2.17 When a victim/survivor does not consent

If a victim/survivor does not provide consent for their file to be referred to the ICAT, it is important to be respectful of the fact that they are likely declining because they believe they can manage the risk, that consenting will cause them or their family greater risk, or other compelling factors causing the situation to further escalate. If the victim/survivor ultimately declines consent or participation with the ICAT, provide a clear explanation and reasoning of why the ICAT must proceed, particularly if the victim/survivor has children or if there are other community members who are, or could be, impacted by the risk. Address any immediate safety concerns the victim/survivor has, offer services and ensure they understand that no interventions, supports or services will be withdrawn based on them not consenting to participate with the ICAT.

If the victim/survivor chooses to not provide consent, the ICAT will still meet and review the file, considering steps that can be taken to enhance safety. Provide the option of keeping the victim/survivor informed and remind them of possible future engagement from partners at the ICAT table due to their organizational mandate to intervene, investigate and mitigate risk.



Regardless of whether the victim/survivor provides consent to engage with the ICAT, an enhanced safety plan should be implemented and frequently updated with the victim/survivor's input and referrals to appropriate support services.

2.18 Consent of perpetrator

► **Consent of the perpetrator is not required to pursue an ICAT consultation or referral (see Chapter 2, “life trumps privacy”).**

However, risk management should be discussed at the ICAT table as the perpetrator is likely aware of the ICAT process.

The perpetrator can be advised that ICAT is standard practice when there are significant concerns for the safety and well-being of all individuals and victim/survivor consent is not required for an ICAT process to be initiated.

ICATs are in many communities throughout BC and operate with consistent practices across the province.

2.19 The referring agency or individual

The ICAT receives referrals of cases believed to be highest risk from ICAT members, agencies and individuals providing services in the community.

► **Agencies that are not sure if a case fits the criteria for highest risk are encouraged to err on the side of caution by making a referral to ensure the safety of a victim/survivor, their family and the community.**

It is important to keep in mind that all ICAT referrals are made with the intent of mitigating or preventing ongoing IPV. All ICAT referrals should be taken to the ICAT and should not be screened out prior to a meeting of the ICAT.

If ICATs are receiving several referrals that do not meet the high or highest risk threshold, referring agencies and individuals can be directed to EVA BC for the ICAT orientation guide and for further insight into the process. If additional information or resources are required, please refer to EVA BC at ccss@endingviolence.org.

All referrals should be made using the ICAT case referral form (**see Appendix 7**) within 24 hours, or as soon as possible, of being identified as possible highest risk. An ICAT member may assist the referring party to complete the referral form. There may also be a 911 response if a victim/survivor is in imminent danger. The information submitted in a referral will include information on the victim/survivor(s) and reported perpetrator(s), relevant risk factors and other pertinent details necessary to assess and manage risk.

The ICAT Initial Referral Form is emailed as a password-protected document to the ICAT police member or designate. The person making the referral must call the police to ensure the referral has been received. If the ICAT police member is scheduled to be away or unavailable, another police officer should be designated as an alternate and named to provide ICAT coverage and support.

If policing resources are limited in your community and an alternate is not available, follow up with the police detachment through the non-emergency line to be connected with a police officer who is able to bridge supports in the interim.



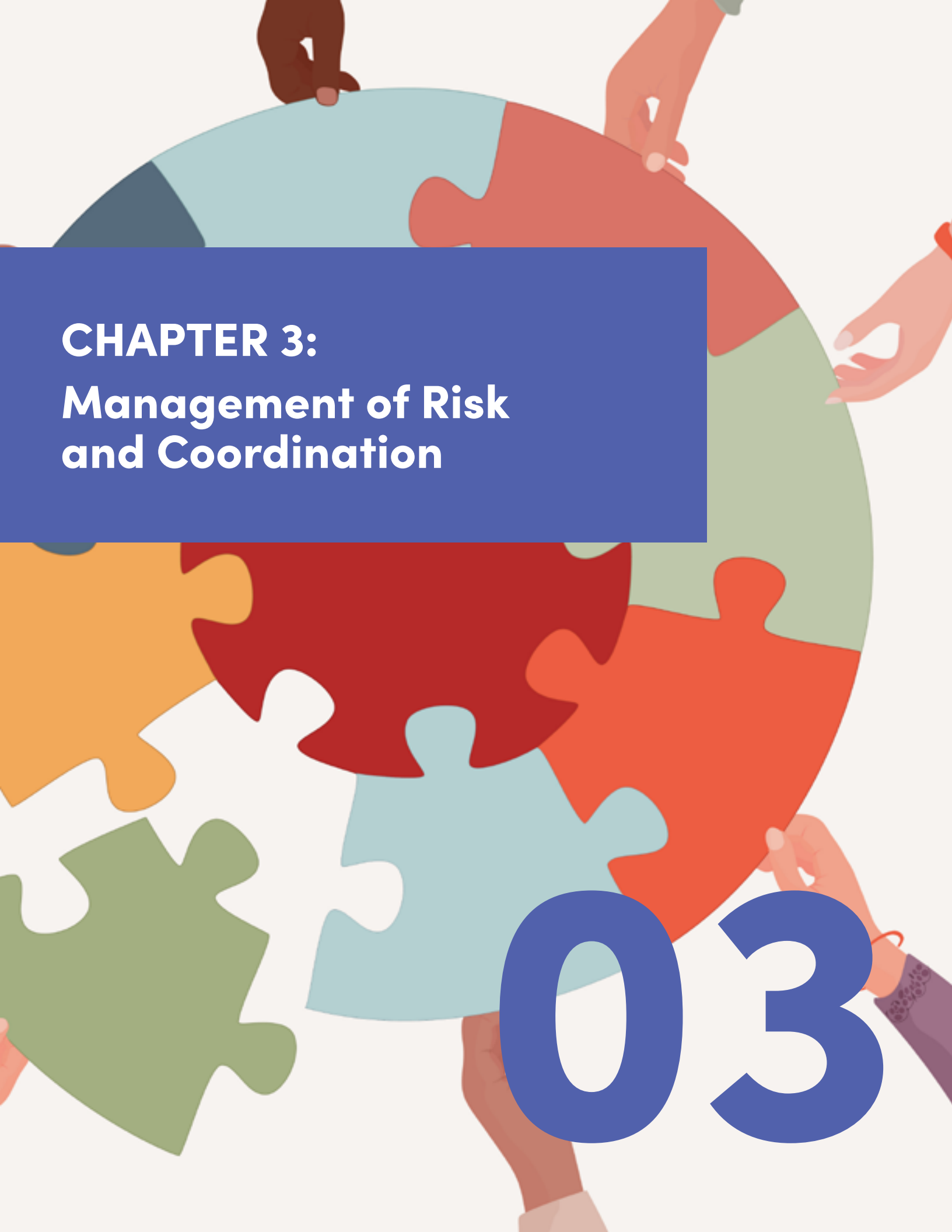
2.20 Police receipt of referral

Upon receipt of the ICAT referral, the ICAT police member completes a police history check of the perpetrator through the Canadian Police Information Centre (CPIC), Police Information Retrieval System (PIRS), and the Police Records Information Management Environment (PRIME). Please refer to **Appendix 17** for further information regarding databases used by police. The police agency informs the ICAT coordinator/co-chair by text, email or phone that there is an ICAT referral for the next meeting, or indicates that an emergency meeting is needed. If the victim/survivor did not complete a consent form at the time of the initial referral, consent will be sought at this point by the referring person or by a community-based anti-violence worker ICAT co-chair.

2.21 Coordinator or co-chair referral process

The ICAT coordinator or co-chair securely (password-protected, in attachment) distributes the names and birth dates of the victim/survivor, perpetrator, children, and any other person at risk. The secure email will suggest a date, time and place for the meeting. Anyone with a conflict of interest with the case is asked to abstain from further ICAT involvement in this case and to send their agency's alternate. For example, someone from the ICAT committee has a personal or family connection with the victim/survivor or perpetrator, or someone is in a dual position, such as police-based victim services and counselling.

A meeting of the ICAT should be scheduled as soon as possible in response to a referral. It can be held on an emergency basis or added to the agenda at the next regularly scheduled ICAT meeting. While the ICAT meeting is pending, ICAT members will follow their professional mandates regarding the case, such as a 911 or child protection response.

An illustration showing several hands of different skin tones holding a globe. The globe is composed of various colored puzzle pieces (teal, red, green, orange, dark red). A dark blue rectangular box is overlaid on the left side of the globe, containing white text. At the bottom right, the number '03' is written in a large, bold, blue font.

CHAPTER 3:

Management of Risk and Coordination

03



Determining and Recording Risk

3.1 Highest risk

If, after consideration of risk factors, victim/survivor vulnerability and perpetrator behaviour the case is designated as **highest risk**, relevant information about the victim/survivor, perpetrator and others at risk can be shared to develop a risk review report ([see Appendix 10](#)) and a risk management plan ([see Appendix 11](#)). Intervention and support are extended to the victim/survivor, perpetrator and others (for example, extended family or co-workers) to mitigate risk and vulnerabilities for everyone involved. ICAT should regularly review the case to monitor and track changes in safety and risk ([see Appendix 13](#)).

During the assessment, the ICAT coordinator, co-chair or designate completes the Risk Review Report, taking care to use objective, fact-based notes free of personal opinions and emotional or inflammatory language, stating the presence or absence of risk factors and victim/survivor vulnerabilities, and gives the report to the ICAT police member. If the report cannot be completed during the meeting, then following the ICAT meeting, and ideally the same day, the Risk Review Report is sent to the ICAT police member.

The Risk Review Report is sent to Crown Counsel by the ICAT police member if the police are going to be submitting a Report to Crown Counsel (RCC) or have already submitted an RCC regarding the ICAT case.

A commitment to consensus when making decisions about highest risk designation is important to the culture of the collaborative partnership of ICAT. A vote can be taken to arrive at consensus regarding risk designation.

► **If the ICAT cannot reach a consensus regarding risk level during a meeting, the final decision about risk level will be made by the ICAT police member and community-based co-chairs collectively.**

Again, all referrals received by the ICAT police member must be accepted and reviewed by the ICAT to determine the risk level and whether the file is to be designated as highest risk.

3.2 Not highest risk

If the case is determined to **not be highest risk**, information-sharing for ICAT members stops.

► **Those agencies who will continue to be involved will create a risk management plan, along with making referrals to appropriate support services.**

The ICAT coordinator or co-chair document agreed-upon information summarizing reasons supporting the not highest risk designation. The information is entered on the ICAT Master List as a closed case. ICAT team members working with the victim/survivor and perpetrator and the referring party will monitor the case for escalation or changes in circumstances. A risk management plan is still created and those involved such as the victim/survivor and supporting agency are supported by the ICAT to implement the safety plan. If the case is again referred to the ICAT for re-assessment, the closed case file should be re-opened.



Managing Risk in Highest Risk Cases

An initial ICAT risk management plan should be created by the ICAT at the end of the first ICAT meeting when the case is reviewed.

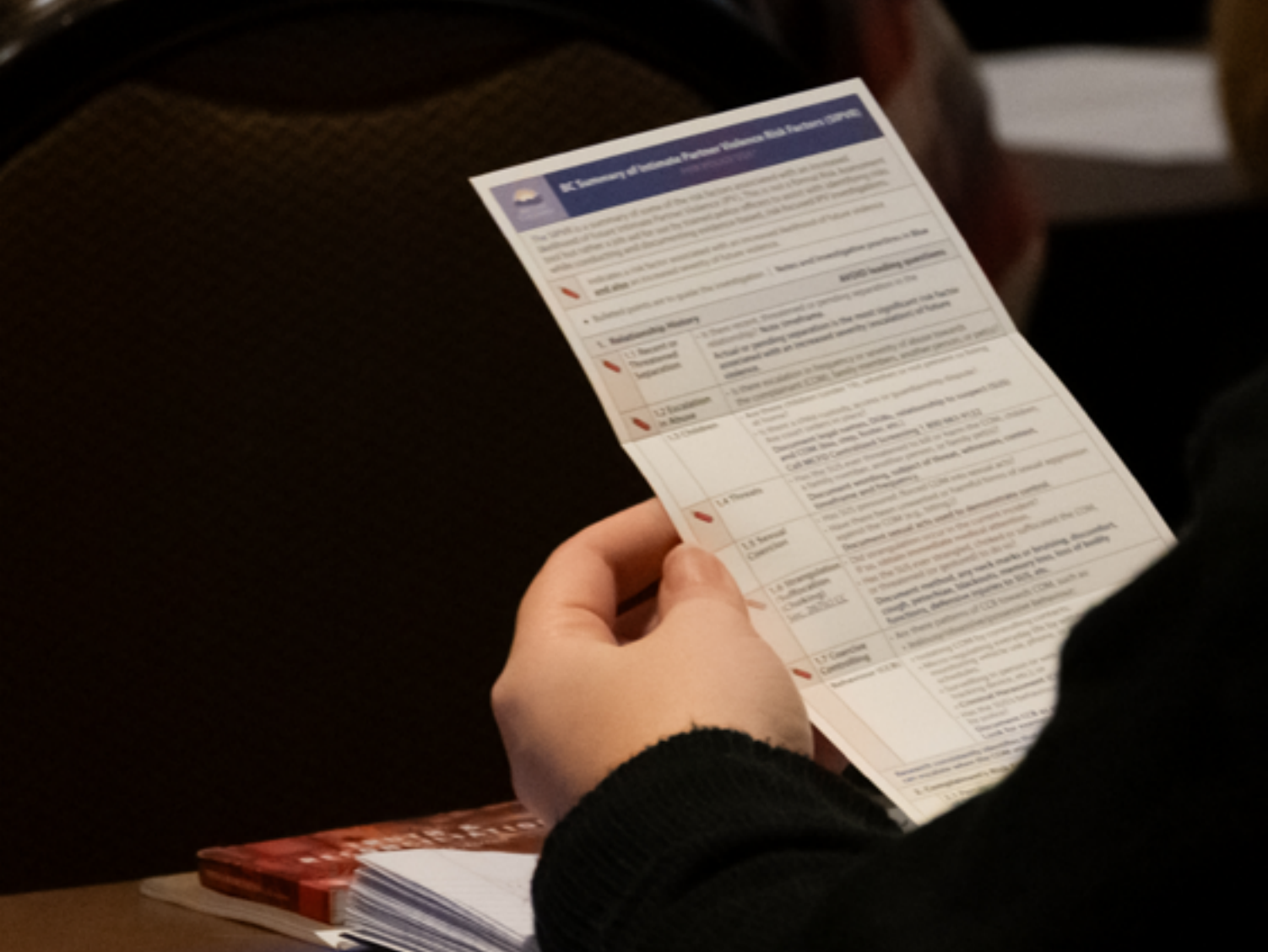
► **Liaison persons should appoint themselves to facilitate the exchange of information between the victim/survivor and the perpetrator at this time.**

The victim/survivor's liaison will typically be a community-based anti-violence worker and the perpetrator's liaison will typically be the police, probation, or a mental health worker. A victim/survivor can request any ICAT member to be their liaison worker.

Attention must be paid to other court processes, such as family court and child protection proceedings that may be occurring, and how those may affect risk.

ICAT risk review reports, initial risk management plans or ICAT case update notes should not be posted on PRIME. The ICAT police member, at their discretion, should add risk management information into PRIME that is pertinent to maintain safety in the case. The ICAT police member should also flag the matter in the Computer-aided Dispatch (CAD) and PRIME as a highest risk IPV case. The flag should include the ICAT police member's contact information so they can be reached by any responding officer. The ICAT police member should consider all the following hazard flags to ensure that the relevant information is available to other law enforcement officers:

- ◆ In CAD dispatch, enter a CAD hazard for the relevant addresses.
- ◆ In CAD, enter caution codes tied to relevant persons.
- ◆ In PRIME, flag the record as to relevant addresses, persons and vehicles.
- ◆ The ICAT police member will be assigned the task of monitoring the "hits" on PRIME that are generated by these flag records through PRIME's v-mail feature. The ICAT police member's v-mail should be monitored frequently, in some cases daily, to ensure recent information is shared promptly. These hits will provide current information to the ICAT police member regarding any contact the perpetrator and/or victim/survivor has with police. This information, if relevant, should then be shared with the other ICAT members.



If the ICAT initial risk management plans and ICAT case updates contain information that the ICAT police member determines may be relevant to the existing prosecution of an ICAT case, and that has not otherwise been disclosed, the ICAT police member should provide the relevant information contained in these risk management documents to Crown Counsel.

Safety plans (**see Appendix 15**) are not usually shared with ICAT members and will not generally contain information relevant to the prosecution of an ICAT case. In the rare occasion that the ICAT police member comes into possession of a safety plan, and it contains information that may be relevant to the existing prosecution of an ICAT case that has not already been disclosed, the ICAT police member should provide the relevant information to Crown Counsel. The ICAT police member should contact Crown Counsel to discuss any concerns that they have about the victim/survivor's safety potentially being jeopardized if this information is disclosed to the perpetrator.

Open ICAT cases will be reviewed for critical updates and situational changes for the victim/survivor and perpetrator at every regular ICAT meeting until risk is reduced and the case is closed.



ICAT's Relationship with Crown Counsel

Crown Counsel performs a unique and independent function within the justice system. The nature of Crown Counsel's relationship with the ICAT must respect the characteristics of prosecutorial independence, including the need to maintain objectivity in the exercise of discretion in Crown Counsel's core responsibilities as a prosecutor.

Crown Counsel's role with ICATs is governed by the criminal justice branch policy Committee Involvement: COM 2 (Ministry of Justice, 2018). Subject to this policy, Crown Counsel's role may include:

- ◆ Working with other agencies or community groups on the initial development of the ICAT and providing subject matter expertise.
- ◆ Acting as a training or educational resource to the ICAT on the justice system, criminal procedure and the roles and responsibilities of the branch and Crown Counsel.

Crown Counsel will not participate as a member of the ICAT.

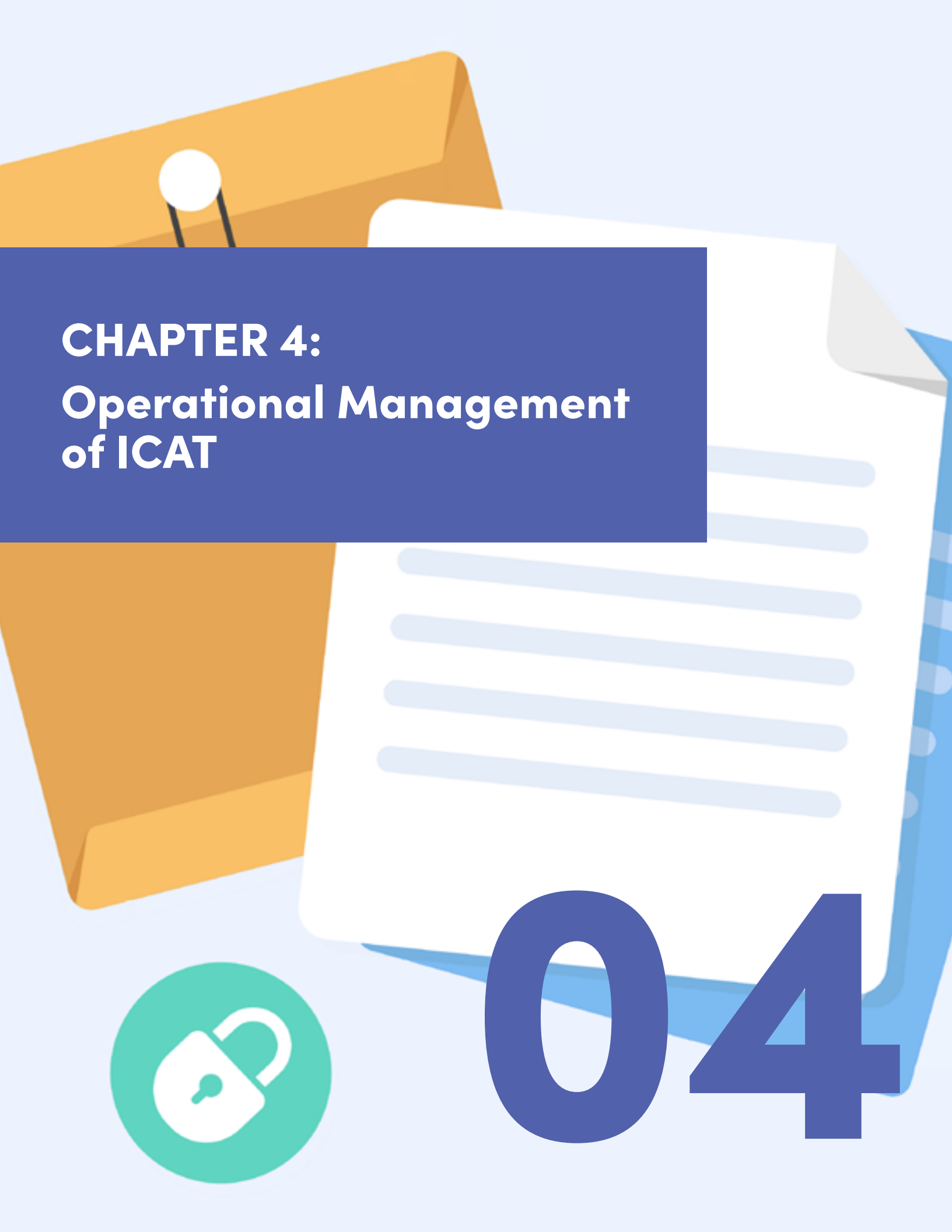
Crown Counsel will only accept disclosure of information relevant to a possible or active prosecution, including ICAT notifications and reports, directly from police or another investigating agency.



Handling Requests for Public Statements

If an ICAT member is contacted for a public statement relating to an ICAT case or any other work related specifically to the ICAT, the primary points of contact should be the ICAT co-chairs. The co-chairs should then consult with the ICAT regarding the request. The ICAT should consider the potential impact public statements may have on any pending or potential court proceedings and the victim/survivor, perpetrator and children, if any, and the safety of all those involved in the case.

Any public statements made on behalf of the ICAT will be made by the ICAT police member after the consultation described above.

The background features a stylized illustration of a yellow folder with a white paperclip on the left. To the right, there are several white documents with blue horizontal lines representing text. The documents are layered, with some overlapping others. The overall color palette is light blue, yellow, and white.

CHAPTER 4: Operational Management of ICAT



04



ICAT Meeting Process Overview

This section outlines detailed procedures for the ongoing operations of the ICAT ([see Appendix 6](#)).

4.1 Signing on, amending and terminating the protocol


The term of any local ICAT protocol commences when participants have agreed to the terms. Every effort should be made to have the protocol signed by all participants on an annual basis. It can be helpful to set an annual meeting at the beginning of the next year to ensure you have a current protocol signed.


The protocol and forms may be amended by written agreement of the ICAT members. Any of the ICAT members representing agencies, public bodies or organizations that are parties to this protocol may terminate participation in this protocol and inform other ICAT members of their agency's intention to terminate involvement by providing 30 days written notice.


4.2 ICAT members

Depending on the community, a **minimum core membership** of an ICAT should include:

 Police

 Probation (known in BC as Community Corrections)

 Community-Based Victim Services/community-based anti-violence worker

 MCFD and/or Indigenous Child and Family Services

Each core agency should have an alternate who can attend when the standing member is unavailable or unable to attend scheduled ICAT meetings. Those in co-chair roles should have an alternate as well who is familiar with their role and can step in to complete co-chair tasks with little-to-no disruption. It is each agency's responsibility to update the ICAT with personnel changes as they occur.

Ideally, ICAT meetings should take place in person. If core agencies do not reside in the same jurisdiction and are unable to meet in-person, participation via teleconference or online meeting options are acceptable.

The VAWIR “Policy and Protocol for Highest Risk Cases” is supportive of including other relevant service providers in ICATs.

The VAWIR policy notes the following:

Developing and maintaining positive working relationships among service providers in the justice, child welfare, health, housing and social service sectors is key to ensuring that victims of domestic violence are well supported. This may include partnering with local service providers on innovative approaches to coordination through developing projects or processes that are supported by protocols or memorandums of understanding. (p. 2)

In addition, the protocol for highest risk cases communicates “the importance of responders working collaboratively with allied service providers to ensure a comprehensive response” and suggests that “referrals to and collaboration with these services are key to ensuring that victims of domestic violence are effectively supported in a co-ordinated fashion.” (p. 59)

Where available, ICAT members may also include representatives from:

- ◆ Stopping the Violence (STV) Counselling Services
- ◆ Transition house programs (including safe homes and/or second stage housing)
- ◆ Mental health
- ◆ Substance use programs
- ◆ Income assistance (Ministry of Social Development and Poverty Reduction)
- ◆ Indigenous community and organization representatives
- ◆ Hospital, clinic or physician offices
- ◆ Health care
- ◆ Settlement programs
- ◆ Parole
- ◆ Family justice counsellors
- ◆ Family law advocates
- ◆ Prevention, Education, Advocacy, Counselling and Empowerment (PEACE) programs for youth and children experiencing violence
- ◆ BC Forensic Psychiatric Services
- ◆ Schools, including colleges and universities
- ◆ Employee and Family Assistance Services
- ◆ Local Department of National Defence base staff

There should be sufficient representation from the community to achieve a balance with system-based organizations and to accomplish the ICAT goals identified in the protocol. Consideration needs to be given to make sure at least one service provider can provide support and monitor the perpetrator.

If members of an ICAT have a personal relationship or multiple roles in the community, it may affect their decision-making at the ICAT table, so this should be considered. When members of ICAT have personal relationships or multiple roles in the community, they need to be mindful of how this could be a conflict of interest.

Once the core membership is established, other community representatives may be invited to attend the meeting related to the case they hold information on to share with the ICAT and must be excused before the discussion of another file.



Roles and Responsibilities of ICAT Participants

Those who attend ICAT are responsible for participating in the risk review process, sharing relevant information and risk management planning. Following through by recording and sharing risk-related information, according to the policy of the ICAT member's agency, is critical.

4.3 ICAT co-chairs

The ICAT designates two co-chairs from the membership. One co-chair must be a police officer and the other co-chair should be from a community-based anti-violence agency (e.g., CBVS). It is important to have representation from the anti-violence sector in a co-chair role. The balance of a police officer and an anti-violence agency in co-chair roles provides strong representation and support for both the victim/survivor and perpetrator. If a community-based victim services worker is unavailable as co-chair for the ICAT, an STV counselling service, transition house or community-based anti-violence worker can be appointed as the co-chair.

In order to have a strong and effective ICAT, a respectful working relationship must be in place between the designated co-chairs. A respectful relationship among co-chairs is critical for the success of an ICAT and to best support ICAT members along with victims/survivors.

The community-based anti-violence worker who serves as a co-chair may also be the ICAT coordinator. The co-chair duties include:

- ◆ Chairing ICAT meetings.
- ◆ Orienting new ICAT members.
- ◆ Addressing the removal or resignation of any ICAT member.
- ◆ Recruiting new ICAT members.
- ◆ Acting as the point of contact for referrals, public comments and requests for information.

4.4 ICAT coordinators

The following are **duties of the coordinator (or co-chair if no coordinator is involved)**, but may be assigned to other ICAT members where appropriate and agreed to:

Sending notices of ICAT meetings.

Maintaining ICAT membership lists.

Preparing minutes of ICAT meetings (**see Appendix 12**).

Circulating meeting minutes to the ICAT members.

Receiving and circulating case-relevant critical updates between ICAT meetings.

Forwarding notes and records to the ICAT police member for storage.

Preparing the Risk Review Report (**see Appendix 10**) and forwarding it to the ICAT police member to finalize and send to Crown Counsel if the police are going to submit an RCC, or have already submitted an RCC, in regard to the ICAT case.

Tracking cases and making team members aware of upcoming critical dates or events where risk may increase (i.e., court proceedings).

Scheduling an annual team meeting to discuss ICAT process, team training needs, areas for improvement and to summarize case reviews.



4.5 Members and alternate members

Members who do not perform either co-chair or coordinator roles have the following responsibilities:

- ◆ Bring relevant information pertaining to risk to the ICAT meeting.
- ◆ Document action items from the risk review and risk management plan for which they, or their agency, will be primarily responsible.
- ◆ Communicate pertinent information back to their agency according to the agency's operational policies.
- ◆ Complete action items and report back to the ICAT on the status of action and changes to risk, including upcoming critical dates.



Managing the Meeting Process

4.6 Arranging meetings

The meeting will usually take place in-person at the office of an ICAT member. If no member meeting rooms are available, the meeting may be held in a location that offers privacy, security and anonymity.

► **To avoid confusion, consistency of meeting locations is helpful.**

4.7 Before a meeting takes place

The ICAT police member should notify the Crown Counsel of the upcoming ICAT meeting if they intend to submit an RCC or have already submitted an RCC regarding an ICAT case.

After receiving the new ICAT referral information, all ICAT members review their agency files for records related to the victim/survivor, children, perpetrator, and other associated third parties and bring relevant information to the ICAT meeting.

If non-ICAT agencies or individuals are involved with the parties in the new referral, they should be invited to the ICAT meeting by a co-chair or delegate. Before the meeting, the guest attendee should review, sign and submit the ICAT Affirmation of Confidentiality (**see Appendix 4**) to a co-chair. At the beginning of the next meeting, an ICAT co-chair should review the ICAT process including expectations and limitations of participating in a meeting with the non-ICAT member.

4.8 Attendance at an ICAT meeting

To share expertise and knowledge of ICAT, risk identification and management, core ICAT members or their alternates should attend all case reviews, regardless of their involvement with the victim/survivor or perpetrator.

Other ICAT participants may only stay for the portion of the meeting in which the case they are involved with is being discussed. They will not be included in the risk level discussion or designation. Before the start of the meeting, all new participants must be advised that third party information cannot be shared with the victim/survivor.

Neither the victim/survivor nor the perpetrator should attend the ICAT case review. However, victims/survivors should be informed by victim services or another support person of the progress of the ICAT review and of risk management strategies that are undertaken on their behalf. The expert opinion of the victim/survivor increases the effectiveness of risk management, emphasizing close liaison to the success of the risk management plan. The victim/survivor must be notified when the case is closed.

4.9 Managing the meeting

The agenda of an ICAT meeting consists of:

- ◆ Reviewing and assessing risk of new referrals.
- ◆ Providing case updates on existing files.
- ◆ Other ICAT-related business.

When reviewing and assessing the risk of new referrals, the referring individual or agency should present the matter to ICAT. Using the BC SIPVR (**see Appendix 9**) as a guide, risk indicators and vulnerabilities are collectively reviewed. After the case and reason for concern have been presented, other agencies share structured, relevant information regarding the case and events. The BC SIPVR is an evidence-based risk identification tool that should not be used as a checklist, but rather as a framework for conversation and sharing information. Professional judgment and knowledge of IPV are required of the ICAT members to consider the 20 risk factors in the context of the victim/survivor vulnerabilities and perpetrator behaviour.

Although the ICAT coordinator or co-chair takes notes on behalf of the ICAT committee, each attending agency is responsible for taking their own notes with only follow-up action items for each individual case. Detailed notes of a file should be central with the ICAT committee and should not be taken by individual agencies.



Affirmations of Confidentiality (**see Appendix 4**) must be signed by all ICAT members, alternates and all individuals who participate or are present at an ICAT meeting. The form should be reviewed and signed on an annual basis by each member. A confidentiality form is still required, even if a member attends only once.

Information shared should be limited to what is relevant to the risks and vulnerabilities posed to victims/survivors, children (if any), the community, and the perpetrator. ICAT members must be conscious of the impact that unnecessary sharing of graphic or detailed information from crime scenes or statements has on their team and themselves.

Discussions regarding ICAT highest risk cases should occur only during ICAT meetings. Critical updates must be shared with the ICAT police member and the ICAT community-based anti-violence worker co-chairs outside of the meetings to ensure that appropriate and timely responses are made to any changes to risk level. This should also be explained to the victim/survivor when consent is sought for the ICAT process.

Information-sharing with individual organizations for the purpose of risk management that may impact the safety of the victim/survivor and other clients/staff at the organization may be necessary. An example of this would be if a victim/survivor of an ICAT-designated file is residing at a transition house and the perpetrator is breaching. This may result in the transition house taking extra safety measures to protect all residents and staff.

Case-related electronic communication must be password-protected and emails must not contain victim/survivor-identifying information. Case numbers should be used when referencing cases to better protect client and risk management plan information. The ICAT Master List (**see Appendix 8**) contains all ICAT cases by case number without the use of victim/survivor or perpetrator names.

Information learned at an ICAT meeting must not be used by ICAT members for a secondary purpose at their agency or workplace, with the exception of disclosure for agency risk management and the safety of other victims/survivors accessing agency services who may be exposed to violence or risk.

If a victim/survivor or perpetrator is unknown to an ICAT member's agency, no information can be shared except for relevant alerts (i.e., victim/survivor's first name to transition house to ensure they are prioritized for safe housing needs).

4.10 Evaluating ICAT membership

ICAT membership should be reviewed annually by the ICAT co-chairs to ensure that membership includes an appropriate cross-section of agencies. Removal of an ICAT member or alternate is the responsibility of the ICAT co-chairs in consultation with the entire ICAT. Grounds for removal would include, but are not limited to, an inability to support and facilitate a collaborative community response to highest risk cases, a breach of confidential information and/or a conflict of interest. If the issue is with an ICAT co-chair, strategize with the secondary co-chair on how best to navigate the situation. This may require involving senior management from the co-chair's organization to mitigate the concern.

When an ICAT member resigns, the ICAT co-chairs should conduct an exit interview with the member and ask the member to identify any recommendations or feedback for the ICAT to consider.



Dispute Resolution

4.11 Resolving ICAT operational issues and disputes

Where a dispute arises between ICAT members that is unrelated to risk review, the matter should be referred to the ICAT co-chairs to find a resolution. Issues may include conduct of team members, confidentiality, competency, or conflict of interests that interfere with ICAT operations.

4.12 Resolving disputes on the designation of highest risk cases

The ICAT is urged to strive for consensus regarding risk level designation of ICAT cases.

► If the risk level cannot be agreed upon, the police and community-based anti-violence co-chairs will decide collectively on whether the case is consistent with highest risk. The case should be re-assessed at the next ICAT meeting.



Managing ICAT Records

The ICAT police member takes the lead role in maintaining ICAT records and communicating ICAT decisions to Crown Counsel, probation and other criminal justice personnel, as necessary. This law enforcement role is consistent with information-sharing provisions in both provincial and federal legislation.

4.13 Record-keeping

Files should be referenced by year and case number, starting with the first new case of a calendar year. The files should contain both the police file number and ICAT file number.

The case review notes should include the file number and names of the victim(s)/survivor(s) and perpetrator. The notes for each case review should be recorded on a separate sheet and should be separated from any general business notes such as minutes that are taken **(see Appendices 10 and 11)**.

ICAT notes taken by the coordinator should be recorded and stored on separate sheets for each case reviewed or updated **(see Appendix 13)**. The only document that individual ICAT members retain should be the ICAT Master List and personal notes related to their agency's obligation to the risk management plans and next steps.

All files, documents and notes (originals and copies) related to each ICAT case review should be kept in a locked file cabinet in the ICAT police member's office. The ICAT files, including consent documents and risk management plans, are kept separately from the investigative file related to that case. ICAT records are separate and distinct from files owned and held by ICAT member agencies. If any documents related to the ICAT are shared with members, they must be stored and shared as password-protected documents. If ICAT files are stored as electronic files, each file and associated document must be password-protected, limiting unauthorized access to ICAT files.

4.14 Documentation

The ICAT note-taker, usually the co-chair or coordinator, records information relevant to risk. These notes are used to prepare the Risk Review Report that goes to Crown Counsel.

The note-taker records the risk management plan including which agency is responsible for follow-up and other action items. Bring-forward dates are noted and tracked by the co-chairs/coordinator.

Other members record, for their own agency, action items on the risk management plan that they will be primarily responsible for. Agencies should have a procedure for documenting ICAT information and following through on action items.

Note: Child protection workers must document risk and safety information in order to adhere to their responsibilities under CFCSA. MCFD has created guidelines for child protection workers attending ICAT to outline what should be documented at the meeting and on their internal database system.

If a file is not highest risk, the same documentation procedures apply and notes should include why the case was determined not highest risk.

When completing the Case Closure Form (**see Appendix 14**) or updating the ICAT Master List (**see Appendix 8**), a summary of reasons for closing a file should be documented. ICAT files should be maintained by the ICAT police member's agency.

4.15 File retention and storage

ICAT files should be retained on the police operation/investigation file as per the retention timelines in that police jurisdiction. Notes on other agencies' files should be kept as per that agency's own operational policies for records management.

To assist in ensuring that appropriate precautions are taken by police agencies before releasing information in closed ICAT files, these ICAT files should be sealed in an envelope labelled "Interagency Case Assessment Team (ICAT) file – not for disclosure" and placed on the operations/investigation file. Note the non-disclosable ICAT package exists on the police file as per the policies and protocols of that police jurisdiction.

When an ICAT file is requested, the police agency representative should consult with a supervisor and/or freedom of information expert before releasing any information from the file. All efforts should be made not to release risk management plans and/or victim safety plans. Should the ICAT file have to be released, the file should be vetted accordingly for victim risk management information.

→ See Chapter 2 for information regarding the disclosure of ICAT records in the course of a criminal prosecution.



Transfer of ICAT Files to Another Community

Continuity of service to continually assess risk is important for relevant risk management planning in ICAT cases. When a victim/survivor relocates to another community, their risk of harm and lethality may increase.

4.16 Transfer to a community with an operational ICAT or DVU/IPVU

If a victim/survivor and/or perpetrator relocates to another community in BC, the ICAT case will be transferred to the ICAT or DVU/IPVU operating in the new community. The ICAT police member, who shares relevant information with the new community's relevant police member, initiates the transfer process. The receiving unit reviews the case at their earliest opportunity or at their next ICAT meeting to assess the level of risk, determine next steps, including victim/survivor support, and follow the case until the risk is mitigated.

4.17 Transfer to a community without an operational ICAT or DVU/IPVU

If there is no operational ICAT or DVU/IPVU in the receiving community, then the ICAT police member in the originating community will communicate with the commander of the receiving police agency to determine an appropriate course of action.

Information for all File Transfers

- ◆ Efforts should be made by the transferring community to follow up and confirm the file has been received and reviewed due to the designation of highest risk.
- ◆ All agencies involved with the family should connect with their counterpart in the new community to transfer case files as necessary. If there are children, the ICAT child protection workers will be involved. Connecting the victim/survivor and relevant family members, including children, with support in the new community should be prioritized.
- ◆ The original ICAT case file should indicate that the file has been transferred: where, when and to whom.
- ◆ As a best practice, and where possible, re-confirm the victim/survivor's consent for disclosing their information. If a potential transfer of the case information was not covered when initial consent was received by the victim/survivor, another consent may be required to disclose information with the other community's ICAT or DVU/IPVU.



Procedure for File Closure

Decisions to close files are reached after discussion at the ICAT table. The decision to close a file usually occurs when there has been a significant change in the status of risk factors. For example, incarceration, relocation or another event that results in enhanced victim/survivor safety. Prolonged lack of risk activity, combined with positive safety reports from the victim/survivor, may also result in case closure. The ICAT coordinator or co-chair(s) should summarize the reason for case closure in the appropriate column on the ICAT Master List and the file should be placed in the police ICAT cabinet.

► If, at a later date, new information is referred to the ICAT indicating that the closed case has escalated or changed, the closed ICAT file should be brought forward and re-assessed to determine if the case now meets the highest risk criteria.

A row of colorful, stylized books on a shelf. The books are in various colors and patterns, including blue, green, brown, purple, orange, and yellow. A dark blue rectangular box is overlaid on the left side of the image, containing the chapter title.

CHAPTER 5: Resources

A row of colorful, stylized books on a shelf. The books are in various colors and patterns, including orange, purple, yellow, green, and red. The number '05' is prominently displayed in a large, blue, sans-serif font on the right side of the image.

05



Training and Self-Care

Each ICAT may consider implementing a training plan, along with a self-care plan, catered to the needs of each individual committee. Both plans should be reviewed and updated annually.

EVA BC has a number of resources available to support ICATs, such as:

- ◆ ICAT training (online and in person)
- ◆ ICAT orientation guide
- ◆ ICAT consultation
- ◆ ICAT day-to-day and ongoing support

Please reach out to ccss@endingviolence.org for further information.



For More Information

For more information regarding the contents of this manual, contact Community Coordination for Survivor Safety at EVA BC at ccss@endingviolence.org

The background features a stylized illustration of a document with various colored lines and shapes. A magnifying glass with a dark blue frame and a yellow handle is positioned over the document. To the left, a vertical orange ruler with black markings is visible. The overall background is a light blue gradient.

CHAPTER 6: Appendices

06



Appendices

The appendices provide the necessary ICAT forms required for functionality and file management. The appendices consist of the ICAT forms, the BC Summary of Intimate Partner Violence Risk Factors and acronyms that may be helpful to reference.

A QR code can be found throughout the appendices that will direct you to the EVA BC website to locate PDF and printable versions of all the forms.

The appendices can be accessed here: endingviolence.org/icat-appendices/

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Terms of Reference

Interagency Case Assessment Team

Purpose

Interagency Case Assessment Teams (ICAT) engage in a multidisciplinary approach to provide enhanced risk management and support to victims/survivors and proactive interventions for perpetrators. Members of the ICAT are expected to participate and navigate the day-to-day operational procedures of an ICAT.

Responsibilities

To follow policies, procedures, and protocols for a functional operation of the local ICAT process. Orientation will be provided to new agencies and individuals in order for them to participate in the intimate partner violence risk assessment and safety planning process.

It is key to promote awareness and acceptance of the concept of risk assessment and safety planning through:

- ◆ Research, models, and frameworks of assessing risk in IPV situations and a local model that works for the culture of the ICAT.
- ◆ Create a protocol agreement that enables agencies to share information appropriately and within boundaries of legislation.
- ◆ Identify IPV cases that would most benefit from the attention of the ICAT.

Role of ICAT Members

The role of the individual members of the ICAT are to encourage information sharing and maintain awareness of safety planning, risk assessment, its principles, and practices by:

- ◆ Acting as a liaison and raising awareness of the ICAT with their agency and community.
- ◆ Being committed to the philosophy that IPV is a crime and deserves a criminal response, and that intimate partner homicides are preventable.
- ◆ Identify trends, risk factors, and patterns from the cases reviewed to make effective recommendations for future intervention and prevention strategies.

Role of the Co-Chairs (Police and Community-Based Anti-Violence Worker)

The ICAT co-chair must be a police officer and the other co-chair should be from a community-based anti-violence agency (e.g., CBVS). The balance of a police officer and an anti-violence agency in co-chair roles provides strong representation and support for both the survivor and perpetrator. The role of the co-chairs is to:

- ◆ Chair and facilitate decision-making processes at regular ICAT meetings.
- ◆ Set time, date, and location of meetings.

- ◆ Prepare agenda for each ICAT meeting, regularly scheduled or emergency ICAT meetings.
- ◆ Delegate duties such as taking minutes of meetings, producing documents, and generating correspondence.

Decision Making

A commitment to consensus when making decisions is important to the culture of the partnership. However, should arriving at consensus be impossible after concerted effort, a vote will be taken.

If a vote cannot resolve the issue, the co-chairs of the ICAT will together determine the outcome.

Meetings

Meetings will be held once a month or as needed when a file review or assessment is required. The agenda will indicate the meeting time and location.

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Local Protocol for Reviewing Highest Risk Intimate Partner Violence Cases

Purpose of the Protocol

The purpose of this protocol is to provide a framework for a coordinated and collaborative approach to assess the risk of serious bodily harm or death to victims/survivors of intimate partner violence (IPV). The same collaborative approach will be used to provide an enhanced safety plan and support system for the victim/survivor and proactive interventions with the offender.

Definitions

Highest risk

The designation of highest risk will be assigned to an IPV case when there is concern for serious bodily harm or death to either partner or other parties. The designation of highest risk is based upon, but not limited to, factors which have been specified in The BC Summary of Intimate Partner Violence Risk Factors (BC SIPVR).

Determination of highest risk

For the purpose of referring cases to the ICAT, members of the ICAT will identify risk factors of situations they encounter, using the BC Summary of Intimate Partner Violence Risk Factors (BC SIPVR).

Interagency Case Assessment Team (ICAT)

The core members of the ICAT are Police, Community-Based Victim Services (CBVS)/community-based anti-violence worker, Community Corrections, and Ministry of Children and Family Development. The ICAT co-chair must be a police officer and a community-based anti-violence worker (e.g., CBVS).

The ICAT receives referrals from members at the table and members of the community via the ICAT's designated co-chairs. The co-chairs are tasked with leading and facilitating risk assessment, monitoring safety, and developing a risk management plan to support highest risk IPV cases.

Legislation Guiding this Protocol

The sharing of personal information may be necessary to protect individuals, their children and other family members who have been identified or assessed as highest risk.

If possible and if it is safe, every effort should be made to obtain written consent from the victim/survivor before disclosing personal information to other agencies subject to this protocol. It is important to note obtaining consent is not always possible dependent on the level of risk.

Generally, consent is required before personal information regarding a victim/survivor can be shared with other agencies. However, applicable privacy laws, such as the Freedom of Information, Protection of Privacy Act, and the Personal Information Protection Act allow personal information to be shared without consent in certain situations including:

- ◆ A case is referred to the ICAT co-chair via an ICAT member or community member within 24 hours, or as soon as possible, of being suspected highest risk. The information submitted will include victim/survivor(s) and perpetrator information, and children if any, relevant risk factors and other pertinent details necessary to manage risk.
- ◆ ICAT co-chair circulates case information to members of the ICAT and other service providers who have relevant information.
- ◆ An ICAT is scheduled as soon as possible. Prior to attending the meeting, relevant file information is reviewed, prepared, and summarized for the meeting by each member agency.
- ◆ A full review of risk indicators is completed using the BC SIPVR to identify the level of risk present. If the case is designated as highest risk, the process continues. If it is not designated highest risk, referrals to support services are made for safety planning purposes and the ICAT stops following the file collectively.
- ◆ If determined to be a highest risk IPV case by the ICAT, relevant agencies will be notified to ensure that enhanced response, safety plan and support systems are implemented, based on each agency’s highest risk intervention procedure.
- ◆ The ICAT will review the case on a regular basis to monitor and track changes in safety and risk status as determined by the ICAT.
- ◆ Systemic issues will also be noted and addressed or referred to VAWIR where possible and appropriate.

Agency name:	
Contact information:	
Date:	Signature:

Agency name:	
Contact information:	
Date:	Signature:

Agency name:	
Contact information:	
Date:	Signature:

Agency name:	
Contact information:	
Date:	Signature:

New ICAT Member Information and Guidelines

Interagency Case Assessment Team

Purpose of Interagency Case Assessment Team (ICAT)

The ICAT team meets to discuss highest risk intimate partner violence (IPV) cases. ICAT uses the BC SIPVR to recognize level of risk and serious bodily harm or death in IPV cases. Cases designated as highest risk of serious bodily harm or death are followed by the ICAT team until risk is reduced.

What to Expect at an ICAT Meeting

Signing the Affirmation of Confidentiality Form

This document maintains that all information gathered at an ICAT meeting is for assessment purposes only and is not to be shared with either the victim/survivor or offender. All participants are required to sign the form prior to attending an ICAT meeting.

Introductions

A roundtable of introductions of ICAT members and their organization will occur when a new party is attending a meeting.

Victim/Survivor Consent Document

If a consent form has been signed, or verbal consent has been provided by the victim/survivor, inform ICAT members at your next meeting for transparency. Consent is not required from the offender and the offender will not be aware that the victim/survivor is participating in ICAT.

Presentation of Referral

The referring agency will be asked to present the IPV case. When reviewing the referral, it is important to outline the working relationship the referring agency has with the victim/survivor or offender, the history of the IPV relationship, and the explanation of why the case may be a highest risk IPV case. Only share information relevant to assessing risk (i.e. past medical history would not be relevant unless it is directly related to the current violence in the relationship).

Any other ICAT members with information on the case will be asked to share information. Seeking specific information related to risk factors to assess the violence is the primary focus at this point. Follow-up questions may be asked by participants to get a full understanding of the case and to establish a risk assessment. Conflicting information may arise and will need to be assessed.

Risk Review

Through discussion, the team will come to an agreement on whether the file is consistent with meeting the highest risk threshold. If a case has been deemed highest risk, the ICAT team will follow and support the case. If a case has been deemed not highest risk, a risk management plan will be implemented with support services in place

from the individual agencies at the table and ICAT will not follow the case. If someone is not a core ICAT member, they will not be a part of the decision-making process.

Risk Management Plan

A risk management plan is formulated and support roles for participants are established. One liaison person is assigned to speak with the victim/survivor from a community-based agency and the offender by the police or corrections.

Follow-up

IPV cases deemed highest risk are re-assessed at regular meetings or whenever a significant change to risk occurs. If critical changes occur with any case, information should be shared with one of the co-chairs to re-assess risk factors. A follow-up meeting may be requested to gather further information.

Confidentiality and Information Sharing

- ◆ You may not share information learned at ICAT about the victim/survivor with the offender or vice versa.
- ◆ Offenders are not informed of the ICAT process.
- ◆ Only information relevant to the present risk may be shared at the ICAT table.

Contact Information

If you have any questions about ICAT or have follow-up information to share you can contact one of the co-chairs of the local ICAT.

Police Co-Chair
Phone number:
Email address:

CBVS/Community Co-Chair
Phone number:
Email address:

Ending Violence Association of British Columbia (EVA BC)

Community Coordination for Survivor Safety (CCSS)

Email address: ccss@endingviolence.org

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Affirmation of Confidentiality Template

Interagency Case Assessment Team Affirmation of Confidentiality

By signing this Affirmation of Confidentiality, I acknowledge that sensitive personal information may be disclosed during Interagency Case Assessment Team (ICAT) meetings, and I understand and affirm that all such information will be held in strict confidence.

I agree that any knowledge gained with regard to specific individuals as a result of my position on the team is, and will remain, confidential, subject to very limited exceptions and only for the use of the ICAT's purpose. I will exercise due care that any personal information I provide to team members is information I am permitted to disclose pursuant to the privacy legislation which applies to my agency. If any question arises as to whether such information can be disclosed, I will refrain from providing the information until clarification is obtained.

I further affirm that I will not discuss ICAT business, specifically naming victims/survivors or offenders, with any members of the media.

I understand that once signed, this affirmation is irrevocable and continues to apply to me even when I retire from the ICAT.

I have read the above Affirmation of Confidentiality and hereby affirm that I will abide by the terms herein.

Print name

Signature

Date

Witness

Consent Form Template

Interagency Case Assessment Team

Consent to the ICAT Process and to Release Personal Information to the ICAT

I, _____, hereby give permission to the staff of _____ (community or police agency/public body name) to refer my case to the Interagency Case Assessment Team (ICAT) and to have my case reviewed by the ICAT for the purposes of identifying and responding to the risk of intimate partner violence or stalking, and providing proactive interventions that result in enhanced safety and support. The ICAT process has been explained to me.

I, _____, hereby give permission to the staff of _____ (community or police agency/public body name) to disclose personal information to the ICAT for the purposes of identifying and responding to the risk of intimate partner violence or stalking.

The following specific information may be disclosed:

1. Information concerning the relationship and/or interactions between myself and/or my children and extended family members with _____ during the time period of _____, 20__ until such time as I revoke my consent.
2. Information relevant to the 20 risk factors listed in the BC Summary of Intimate Partner Violence Risk Factors (BC SIPVR).

The information provided to the above-mentioned team shall not be further disclosed without my consent subject to certain limited exceptions which have been explained to me and are set out in this consent and release form.

This release is consent pursuant to federal and provincial privacy laws. This includes: the federal *Privacy Act* and the provincial *Freedom of Information and Protection of Privacy Act* and the *Personal Information Protection Act*.

This release may only be revoked by notice in writing delivered to the ICAT police member. I am aware that revocation of my consent means that my participation in the ICAT process has completed but that the ICAT process, including the sharing of information, may continue due to compelling safety concerns.

COMPLAINANT

Signature

Phone number

WITNESS

Signature

Phone number

Protocol for confidentiality explained on: _____, 20__

Method for revoking consent explained on: _____, 20__

Privacy rights under federal and provincial laws explained on: _____, 20__

Signature

Witness signature

Consent to the ICAT Process and to Release Personal Information to the ICAT

FEDERAL AND PROVINCIAL PRIVACY LEGISLATION

Under the federal Privacy Act, the provincial Freedom of Information and Protection of Privacy Act (FIPPA) and Personal Information Protection Act (PIPA), consent is generally required before personal information about you can be shared with other agencies. While these privacy laws limit situations in which your personal information can be shared, they also allow such information to be disclosed in the public interest (Privacy Act) or where compelling circumstances exist that affect anyone's health or safety (FIPPA & PIPA). FIPPA also permits the release of personal information for the purpose of reducing the risk of domestic violence if domestic violence is reasonably likely to occur. FIPPA also requires public disclosure of information about a risk of significant harm to the health or safety of the public or a group of people.

CHILD WELFARE LEGISLATION

The Child, Family and Community Service Act requires anyone who has reason to believe a child (anyone under 19 years of age) is, or may be, at risk for physical, sexual and/or emotional abuse, or neglect where the parent is unwilling or unable to protect the child, to report their concern to the local child welfare worker at the Ministry of Children and Family Development.

Pursuant to this protocol, your personal information will be kept confidential unless the requirements of the exceptions are met.

REVOKING CONSENT

If you wish to revoke consent for the ICAT to use the information from your case, contact the ICAT police member in writing to state your wishes. Even though a written request may be submitted to the police member, the police member may not be able to grant wishes of revoking consent, dependent on the risk associated to the intimate partner violence case in discussion.

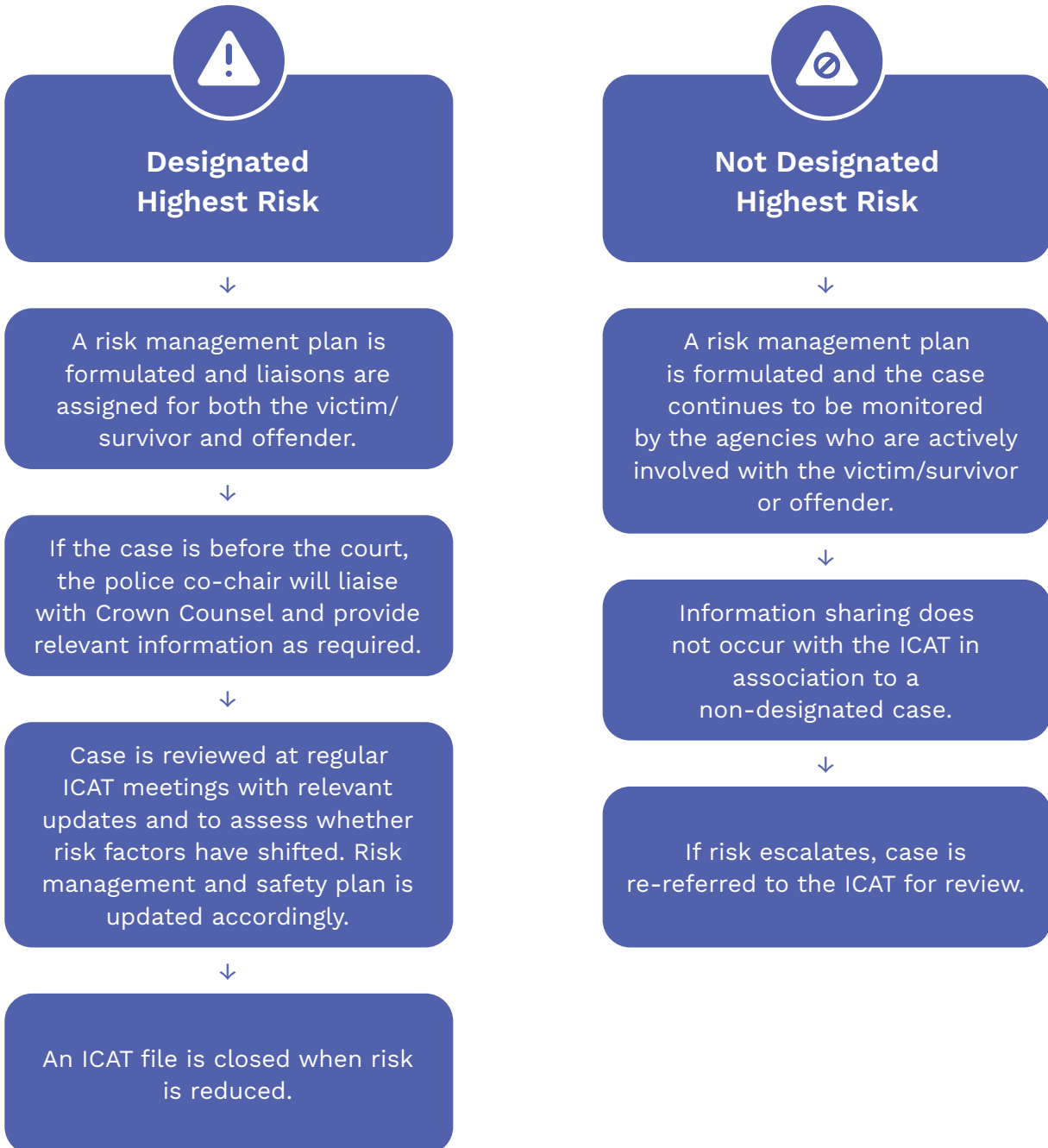
PROTOCOL FOR CONFIDENTIALITY

1. A referral will be made to the ICAT from an agency that knows your situation and to whom you have given consent.
2. This referral and consent will be forwarded to the ICAT police member, who will assign a number to your case. The police member will then assign your case a meeting date and notify the ICAT members involved with your case (such as RCMP/municipal police, transition house, victim services, etc.) of the meeting date and the case to be discussed.
 - ▶ **No one other than those involved with the ICAT will be made aware of your identity. Exceptions to this are highest risk cases where applicable privacy laws apply.**
3. Any referrals, consent forms, names of victims/survivors, and file numbers will be locked in the detachment of the ICAT police member.

ICAT Process Flow Chart



ICAT Process Flow Chart



Initial Referral Form

Interagency Case Assessment Team

ATTENTION: ICAT (Intimate Partner Violence) POLICE COORDINATOR

Fax: 250-555-5555 | Phone: 250-555-5555

This document is intended for the use of the addressee. Disclosure of document content may breach one or more laws. If you have received this communication in error, notify the sender immediately by telephone.

Referred by: _____ Agency name: _____

Contact telephone: _____ Date of referral: _____

Attempted death or grievous bodily harm	YES / NO
Explain:	
Weapons used:	
Threatened death or grievous bodily harm	YES / NO
Explain:	
Weapons used:	

Victim name: _____ **Date of birth:** _____

Victim vulnerability factors: _____

Offender name: _____ **Date of birth:** _____

Offender risk factors: _____

Children? YES NO (Please list children under 18 years of age)

Name	Date of Birth (MMDDYY)	Exposed to Violence (✓)

Relationship status:	✓	Living status:	✓	Orders:	Past/Present
Prior		Joint residence		Child custody	<input type="radio"/> PAST <input type="radio"/> PRESENT
Current		Independent residence		Civil restraining	<input type="radio"/> PAST <input type="radio"/> PRESENT
Married		Transition house		Peace bond	<input type="radio"/> PAST <input type="radio"/> PRESENT
Common law		Other:		Undertaking	<input type="radio"/> PAST <input type="radio"/> PRESENT
Dating				Other:	<input type="radio"/> PAST <input type="radio"/> PRESENT
Separated					
Legal separation					
Divorced					

Victim	✓	Offender	✓
Drug(s) abuse		Drug(s) abuse	
Alcohol abuse		Alcohol abuse	
Mental health concerns		Mental health concerns	

Comments: *(Please explain and elaborate on why this case should be considered highest risk. Include details on the offenders' attitudes/behaviours. Example: violence against others or domestic pets; stalking or controlling behaviours; criminal record; access to firearms or other weapons; violation of previous court orders).*

Other considerations: *(Please include any other factors that you feel may complicate or increase the risk to the victim/survivor or their children. Example: is the victim/survivor socially or physically isolated; unwilling to leave the home; facing cultural barriers; pregnant; is the victim/survivor or offender involved in organized crime, etc.?)*

Witnesses: _____

Other persons at risk: _____

Interagency Case Assessment Team Initial Case Referral Checklist

Date file received: _____ Received by: _____

	POS	NEG		POS	NEG
POR	<input type="checkbox"/>	<input type="checkbox"/>	CPIC	<input type="checkbox"/>	<input type="checkbox"/>
CFRO	<input type="checkbox"/>	<input type="checkbox"/>	PRIME	<input type="checkbox"/>	<input type="checkbox"/>
BCDL: _____			BCRO: _____		

Police file number: _____

ICAT meeting date: _____

AGENCIES INVOLVED (select and list all that apply) (✓)			
Police domestic violence unit		Transition house	
Police-based victim services		Community-based victim services	
Ministry for Children and Family Development		Income assistance	
Youth probation		Parole	
Adult probation		Offender support and counselling	
Aboriginal family support		Crown Counsel	
Private practitioner		Mental health and substance use services	
Immigrant services		Community-based anti-violence services	

Risk classification: **HIGHEST** **NOT HIGHEST**

File review dates: _____

Decision record completed: **YES** **NO**

Comments: _____

ICAT Master List Template

ICAT Master List Template							
Case #	Referred By	Offender	Victim	Date Opened	Date Closed	Reason for Closure	
2024 — 01 Police File #							
2024 — 02 Police File #							
2024 — 03 Police File #							
2024 — 04 Police File #							
2024 — 05 Police File #							
2024 — 06 Police File #							

BC Summary of Intimate Partner Violence Risk Factors (SIPVR)



The SIPVR is a summary of some of the risk factors associated with an increased likelihood of future intimate partner violence (IPV). This is not a formal risk assessment tool, but rather a job aid for use by trained police officers to assist with identifying risks while conducting and documenting evidence-based, risk-focused IPV investigations. In addition to identifying individual IPV risk factors, always document escalating, persistent or repeat behaviours and patterns of coercive control (section 1.7).



Date of ICAT meeting: _____ Police file number: _____



TEXT IN THE BOXES BELOW ARE TO DESCRIBE RISK AND IMPORTANT NOTES


 **RISK FACTOR**


Indicates a risk factor associated with an increased likelihood of future violence and an increased severity of future violence

Relationship History			Yes	No
1.1	Recent or Threatened Separation 	<p>Is there recent, threatened or pending separation in the relationship?</p> <p style="color: #4F81BD;">Document time frame paying particular attention to separation in the past 12 months.</p> <p style="color: #2E8B57;">Note: An actual or pending separation in the current relationship is the most significant risk factor associated with an increased severity (escalation) of future violence.</p> <p style="color: #4F81BD;">Consider in conjunction with section 1.7, Coercive and Controlling Behaviour.</p>		
1.2	Escalation in Abuse 	<p>Is there escalation in frequency or severity of abuse toward the complainant (COM), family members, another person, animals or family pet? Escalation may take a variety of forms including increased calls for service, escalation of verbal to physical abuse, escalation of verbal abuse to threats (see section 1.4, Threats), and increase in severity of physical abuse..</p>		

<p>1.2 cont.</p>	<p>Escalation in Abuse</p> 	<p>Note: Escalating violence could indicate an “imminent risk,” particularly when combined with recent/pending separation or other recent stressors.</p>		
<p>1.3</p>	<p>Children</p>	<p>Are there children (under 19 years of age), whether or not present or living at home?</p> <p>Document legal names, DOBs, and relationship to suspect (SUS) and COM (bio, step, foster, etc.).</p> <p>Is there a child custody, access or guardianship dispute?</p> <p>Are court orders in place?</p> <p>Obtain copies of court orders if available.</p> <p>Contact the Ministry of Children and Family Development (MCFD) Provincial Centralized Screening 1-800-663-9122. Document MCFD contact in your Report to Crown Counsel.</p>		
<p>1.4</p>	<p>Threats</p> 	<ol style="list-style-type: none"> Has the SUS ever threatened to kill or harm the COM? Has the SUS ever threatened to kill or harm children, a family member, another person or family pet? <p>Document the wording of the threat, the subject of the threat, who the threat was made to, and how the threat was made (e.g., was it an overt threat, a threat made during a strangulation incident, an implied threat, etc.).</p> <p>Document how often the threats have been made, with a focus on recent escalation.</p> <p>Refer to section 4.1, Firearms/ Weapons, if threat involved a weapon.</p>		
<p>1.5</p>	<p>Sexual Coercion</p>	<ol style="list-style-type: none"> Has SUS pressured or forced COM into sexual acts? Have there been unwanted and/or harmful forms of sexual aggression against the COM’s will (e.g., biting, etc.)? Is sex ever humiliating or degrading? <p>Note: Sexual assault, abuse or coercion is commonly experienced by IPV COMs. Sex may be used to demonstrate power and control over the COM.</p>		


<p>1.6</p>	<p>Strangulation/ Suffocation (Choking) s. 267(c) CC</p> 	<ol style="list-style-type: none"> 1. Did strangulation occur in the current incident? If so, obtain immediate medical attention. 2. Has the SUS ever strangled, choked or suffocated the COM? 3. Has the SUS ever threatened or gestured strangulation toward the COM? <p>Document any neck marks or bruising, discomfort, cough, petechia. Look for defensive injuries to SUS (e.g., scratch marks or bite marks on SUS’s hands, arms or face etc.).</p> <p>Document method of strangulation (i.e., with hands, arms, body, ligature).</p> <p>Note: While COM may not recall being strangled, if they lost control of bodily function, or can’t recall what happened during an assault, this may be an indication of a non-fatal strangulation incident where they lost consciousness.</p>		
<p>1.7</p>	<p>Coercive Controlling Behaviour</p> 	<p>Document coercive controlling behaviour (CCB) as part of an overall pattern of behaviour.</p> <p>Is there a pattern of CCB toward the COM, including but not limited to:</p> <ol style="list-style-type: none"> 1. Expressing jealousy, sexual jealousy, or signs of obsessive or possessive behaviour. 2. Isolating the COM by controlling/limiting activities or contact with others. 3. Withholding/restricting/monitoring use of vehicle, phone, clothing, finances, medication, or any other resources. 4. Micro-regulation of everyday life. 5. Surveilling COM in person or through technology (e.g., cameras, tracking apps, phone, or social media, etc.). 6. Setting rules, curfews, or schedules. 7. Threatening consequences for not complying (e.g., violence, self-harm, harm to other people, harm to pets, destruction of property, revenge porn, etc.). 8. Criminal Harassment (s. 264(1) CC): stalking, persistent following, watching, or engaging in persistent and unwanted communication with COM or a previous intimate partner. 		


<p>1.7 cont.</p>	<p>Coercive Controlling Behaviour</p> 	<p>Has the SUS behaviour persisted after being charged or warned by police?</p> <p>Is there a pattern of CCB in this or previous relationships? Is it escalating? Look for overlapping patterns in other risk factors (see sections 1.4 Threats, 1.5 Sexual Coercion, and 3.7 Suicidal Ideation, etc.).</p> <p>Note: Research consistently identifies that where there is CCB, the severity of the violence can escalate when the COM attempts to leave the relationship or regain control.</p> <p>Consider this factor in conjunction with section 1.1 Recent or Threatened Separation.</p>		
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Complainant's Risk Factors			Yes	No
<p>2.1</p>	<p>Perception of Personal Safety</p>	<ol style="list-style-type: none"> Does the COM believe that the SUS could harm or kill them or their children? Does the COM believe SUS will disobey release conditions, particularly a no contact order? <p>Document the basis of the COM's fear/belief and examples. Determine what access the SUS has to the COM. Always address this in the safety plan.</p> <p>Note: Trauma and culture can cause people to present their responses to fear and risk in different ways. While some people may show extreme fear, some may not demonstrate or articulate fear in an obvious way.</p>		
<p>2.2</p>	<p>Perception of Future Violence</p> 	<ol style="list-style-type: none"> Does the COM believe that the violence is escalating? Does the COM fear further violence if the SUS is released from custody? <p>Document COM's perceptions of future violence and reasons for belief. Include in the safety plan.</p> <p>Note: It is not uncommon for a COM to minimize risk to self and their children, but they may be able to assess whether there is an escalating level of risk. Trauma and culture can cause people to perceive their own risk in different ways.</p>		

2.3	Complainant's Vulnerabilities	<p>Are there factors present that increase COM's risks including:</p> <ol style="list-style-type: none"> 1. Isolation/marginalization (e.g., remote location, rural, on-nation/reserve, language barrier, literacy, cognitive or physical disability, age, pregnancy, engaged in sex work, etc.). 2. Compromised physical or mental health, or substance abuse issues? Note: COM's intoxication at the time of an intimate partner violence incident can increase the risk for lethal violence. 3. Inadequate community support or unsafe living conditions (e.g., poverty, financial dependence, homelessness, unsuitable housing, lack of transportation, etc.). 4. Is the woman Indigenous, an immigrant or refugee? 5. Are there potential cultural safety barriers (e.g., male privilege, fear of seeking help, shame, religious beliefs, distrust of police, threats from family or community, intergenerational trauma, gender inequality, social isolation, etc.)? <p>See also section 3.8, Suspect Supports or Condone Violence.</p>		
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Suspect History			Yes	No
3.1	Criminal Violence History (non-IPV)	<p>Does the SUS have a history of: making threats, intimidation, violence, strangulation, sex assaults, or criminal harassment toward any person?</p> <p>Note: Research suggests that persons who engage in general violence (non-IPV) as well as IPV tend to show a more overall antisocial pattern of behaviour. For this group, factors like substance abuse (section 3.4), unemployment (section 3.5), and mental health issues (section 3.6) are particularly relevant to consider.</p>		
3.2	IPV History	<p>Is there a history/pattern of CCB, criminal harassment, violence, threats or other abuse in the current or a previous intimate partner relationship? Document all IPV incidents in last 60 days (reported and non-reported).</p>		

3.2 cont.	IPV History	<p>Note: History of IPV is common in cases of lethal IPV; however, in many cases the IPV history was not known to police.</p>		
3.3	Court Orders/ Violations of Conditions	<ol style="list-style-type: none"> 1. Has the SUS ever violated a court order? 2. Is the SUS presently bound by any court orders including protection orders under the Family Law Act (FLA) or Child, Family and Community Service Act (CFCSA)? 3. Is the SUS in a reverse onus situation for bail? <p>Obtain copies of court orders whenever possible. CALL POR: 1-800-990-9888 (POLICE ONLY 24/7)</p>		
3.4	Alcohol/Drugs	<ol style="list-style-type: none"> 1. Was the SUS using or intoxicated at the time of the incident? 2. Is there a recent history of substance abuse? 3. What substances are used? How often? 4. Does the SUS become angry, jealous or violent when using a substance? 5. Are there other addictive behaviours stressing the relationship (e.g., gambling)? 		
3.5	Financial Instability	<ol style="list-style-type: none"> 1. Is the SUS experiencing financial problems? Is this a factor in the conflict? 2. Have there been recent changes in employment? Is this a factor in the conflict? <p>Document relevant employer information.</p>		
3.6	Mental Health Concerns 	<ol style="list-style-type: none"> 1. Is there information to suggest SUS is suffering from depression or any mental health issue? 2. Is there a formal diagnosis (e.g., depression, psychosis, etc.)? 3. If yes, is SUS currently complying with mental health care (taking meds/attending therapy, etc.)? 4. Have there been recent changes in any prescription(s)? <p>Obtain treating doctor/psychiatrist name(s) if applicable. Also document any serious medical issues.</p> <p>Note: Depression is consistently identified as a risk factor in lethal cases of IPV.</p>		

<p>3.7</p>	<p>Suicidal Ideation</p> 	<ol style="list-style-type: none"> 1. Has the SUS discussed, threatened or attempted suicide (self-harm)? 2. If YES, when and how? <p>Recall PIMAL: Plan, Intent, Means, Access, Lethality.</p> <p>Note: Superficial attempts or threats to commit suicide, particularly when they occur in conjunction with a victim intending to leave the relationship, may be part of a pattern of coercive and controlling behaviour.</p> <p>See sections 1.1 (separation) and 1.7 (CCB).</p>		
<p>3.8</p>	<p>Suspect Supports or Condone Violence</p>	<p>Does the SUS show attitudes or beliefs that support or condone violence, such as:</p> <ol style="list-style-type: none"> 1. Behaviours suggestive of patriarchal attitudes or attitudes supporting male dominance over females. 2. Extreme minimization or denial of the severity of the abuse. 3. Normalization of violence (possibly due to intergenerational trauma, PTSD, post-war survivor trauma, etc.). 4. Blaming the COM or condoning the use of violence to control COM. 5. Entitlement or privilege. <p>Provide behavioural examples where possible.</p> <p>Note: Hostile attitudes toward women and attitudes justifying, or favourable toward, the use of violence against women are factors that are consistently empirically related to the victimization of an intimate partner.</p>		

Access to Firearms/Weapons			Yes	No
4.1	Firearms/ Weapons Used or Threatened 	<p>Has SUS used or threatened to use a firearm or any weapon against the COM, children, family member, another person, self or family pet?</p> <p>Document the wording of the threat, the subject of the threat, who the threat was made to, and how the threat was made (e.g., was it an overt threat, a threat made during a strangulation incident, an implied threat, etc.). Document how often the threats have been made with a focus on recent escalation.</p> <p>Refer back to section 1.4 Threats, and also determine if threat is part of a pattern of coercive controlling behaviour (section 1.7).</p>		
4.2	Access to Firearms/ Weapons	<p>Does SUS have access to firearms/weapons?</p> <p>What types? Where and how are they stored? Are they readily accessible? Who has access?</p> <p>Are they legally possessed? Is the SUS prohibited from possessing firearms/weapons?</p> <p>Obtain copies of any orders.</p> <p>Is there evidence of extreme interest in, or a stockpiling of, firearms or weapons?</p> <p>Document efforts to determine if the SUS does or does not have access to firearms. This must include, but should not be limited to, checking the CFRO.</p>		



Sample Risk Review Report

Interagency Case Assessment Team Risk Review Report

February 2, 20** | Sample Case

Present: MCFD, Community Corrections, RCMP or police, outreach services, Women’s Transition House Society, Community-Based Victim Services, police-based victim services, parole

ICAT Case # 20** - xx
RCMP File # 20** - xxxx

Perpetrator: LAST, First (DOB: xxxx-xx-xx)
Complainant: LAST, First (DOB: xxxx-xx-xx)
Child(ren): LAST, First (DOB: xxxx-xx-xx)

Risk Level

The team reached consensus that the risk level is HIGHEST. This conclusion was reached by identifying the presence of evidence-based risk factors for grievous bodily harm or death in IPV files.

Consent: Complainant has consented to the ICAT process and to the release of personal information to the ICAT.

Summary of Risk Factors

1.1 Recent or threatened separation

Separated since the incident. The complainant and child have relocated to a safe location.

1.2 Escalation in abuse

Violence has escalated since they re-established their relationship and was present throughout the previous 2 years.

1.3 Children exposed

The complainant’s daughter has been exposed to perpetrator’s violence. The child is not the biologically child of the perpetrator.

1.4 Threats

The perpetrator has made threats in front of others, including the justice of the peace, to kill the complainant. He has threatened to kill male friends of complainant and also police officers.

1.5 Sexual coercion

The perpetrator regularly coerces the complainant to have sex.

1.6 Strangulation/suffocation (choking)

The perpetrator put his forearm across her neck to hold her down until she lost consciousness. Had the same effect as choking.

1.7 Coercive Controlling Behavior (CCB)

The perpetrator discovered the complainant's location in Vernon after she left him by hacking into her social media account. He called all 480 Facebook friends seeking information about her and to threaten male friends. After she left Vancouver Island he repeatedly contacted her parents, her workplace and daughter's daycare.

2.1 Perception of personal safety

Complainant minimizes her personal safety but recognizes the fact that her relationship puts her and her daughter at risk.

2.2 Perception of future violence

Same as above – recognizes the risk.

2.3 Complainant's vulnerabilities

Complainant is limited with support from family and friends as she has left town for safety.

3.1 Criminal violence history (non IPV)

Assault of a stranger outside of a bar in 2015.

3.2 IPV history

History of serious violence against partners in intimate relationships and during the two years of this relationship. Has done federal time for previous aggravated assault (K File).

3.3 Court orders/violations of conditions

There is a no contact order. The perpetrator is currently in custody and will be released on bail conditions to not contact the complainant.

3.4 Alcohol and drugs

Alcohol use is not known. The perpetrator misuses drugs and has had an 11-year involvement in grow ops on Vancouver Island and in the USA.

3.5 Financial instability

The perpetrator is employed as a welder – may have lost his job due to being incarcerated. Property is being foreclosed.

3.6 Mental health concerns

The perpetrator has a head injury from childhood (brain tumour). No known DSM IV diagnosis.

3.7 Suicidal ideation

The perpetrator threatened suicide if complainant reports abuse or leaves him.

3.8 Suspect supports or condones violence

The perpetrator supports and condones violence as reflected in their relationship.

4.1/4.2 Weapons/Firearms

The perpetrator has a machete and martial arts beating sticks. May have firearms.

Other information

1. Perpetrator will be released from custody on Feb 4, 20**.
2. Perpetrator’s parents will be taking him from Kamloops to Vernon to get some belongings and then to their home on the island. He will be monitored by P/O at that time.

Sample Risk Management Plan

Interagency Case Assessment Team

Initial Risk Management Plan

Not for disclosure

February 2, 20** | Sample Case

Present: MCFD, Community Corrections, RCMP, outreach services, Women's Transition House Society, Specialized Victim Assistance, police-based victim assistance, parole

ICAT Case # 20** - xx
RCMP File # 20** - xxxx

Perpetrator: LAST, First (DOB: xxxx-xx-xx)
Complainant: LAST, First (DOB: xxxx-xx-xx)
Child(ren): LAST, First (DOB: xxxx-xx-xx)

Updates

1. RCMP is arranging to have vehicle keys brought to Vernon from Kamloops via sheriff.
2. Perpetrator's parents will meet complainant at RCMP detachment on Saturday morning to give them keys to residence.
3. Perpetrator's parents will pick him up at KRCC on Monday and take him to complete paperwork at registry. Probation has asked KRCC to phone complainant at transition house to advise of his release.
4. RCMP has provided a history of case to Ladysmith RCMP and has relayed the importance of curfew checks and safety nets.
5. Probation phoned Kamloops probation and had them contact Duncan probation to tell them of the importance of curfew checks and safety nets.
6. Transition house worker will offer a referral to Support to Young Parents program.
7. Perpetrator will check in with Duncan bail supervisor by Tuesday or Wednesday. Probation will follow up to see that this is done.
8. Perpetrator's lawyer, a family friend, has apparently been contacting the complainant at the transition house. Transition house worker will confirm this and pass information to RCMP.

9. Parents can withdraw their sureties if they wish, and a warrant will be issued.
10. CBVS will support complainant at the trial.
11. Perpetrator's lawyer may be able to appear on his behalf at the plea hearing on February 25, 2010, so that he won't have to attend court in Vernon.
12. If there is a critical development in the case, for example, accused breaches bail conditions, an emergency meeting of team will be held.

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APPENDICES



Sample ICAT Meeting and Case Review Minutes

ICAT Meeting And Case Review Minutes

November 12, 20**, 1:30 p.m.

ICAT Members Attendance			
LM - RCMP	✓	LR - MSDSI	✓
BMc - VWTHS	✓	AE - RCMP VA	✓
LP - MCFD	✓	DK - IH	
CH - SVAP	✓	LL - parole	✓
SD - Community Corrections		MM - transition house	✓
WH - Women's Outreach	✓	SK - forensic psychiatry	✓
ICAT Alternates' Attendance			
CP - RCMP		NC - MCFD	
SD - MSDSI	✓	SB - RCMP VA	
DG - Community Corrections		DH - VWTHS	
EC - SVAP		AB - transition house	
Guests			

Regular Meeting

1. Introductions and signing of Affirmations of Confidentiality for any new participants
 - ◆ No new participants.
2. Roundtable and agency updates
 - ◆ MSDSI: Office will be closed on November 21 for computer conversion. Clients should expect some delays in processing as staff get used to new system.
 - ◆ VWTHS: BMc is away tomorrow and Friday.
 - ◆ No other agency updates.
3. Case reviews
 - ◆ No new referrals.
 - ◆ IH is monitoring a case; no referral at this time.

4. Case updates and file closures
 - ◆ 20**-03 – updated; see notes.
 - ◆ 20**-05 – updated; see notes.
5. Closed files – information to bring forward
 - ◆ 20**-05 – updated; see notes.
6. ICAT training/information to share
 - ◆ Request for ICAT brochures – B to bring to the next meeting.
7. Next meeting: Wednesday November 26, 20**, at Vernon parole office

Holiday get together will be at LMc's house at 1 p.m. on December 10.
Group to order lunch.

SCAN FOR
DIGITAL
APPENDICES



Sample ICAT Case Update

ICAT Case Update

May 21, 20** | Sample Case

Present: RCMP, MCFD, Transition House Society, Community-Based Victim Services, RCMP Victim's Assistance, and Community Corrections

ICAT Case # 20** - xx
RCMP File # 20** - xxxx

Accused: LAST, First (DOB: xxxx-xx-xx)
Complainant: LAST, First (DOB: xxxx-xx-xx)
Child(ren): LAST, First (DOB: xxxx-xx-xx)

Case update

Victim update

1. RCMP to add complainant's address to RCMP system.
2. RCMP-VS to offer Crime Prevention Through Environmental Design (CPTED).
3. MCFD has referred the complainant to seek advice from a family law lawyer regarding the ex parte order.
4. MCFD to refer the complainant to safe shelter and outreach services.

Perpetrator Update

1. Warrant to be issued.
2. MCFD to advise of supervised visits only.
3. MSDSI to expedite income assistance application.

Upcoming Dates

Criminal court: None set
Family court: None set

Next ICAT meeting: Wednesday May 28, 20**

Sample ICAT Case Closure Notes

ICAT File Closure

June 11, 20** | Sample Case

Present: RCMP, MCFD, Transition House Society, Community-Based Victim Services, RCMP Victim's Assistance, and Community Corrections

ICAT Case # 20** - xx
Vernon RCMP File # 20** - xxxx

Perpetrator: LAST, First (DOB: xxxx-xx-xx)
Complainant: LAST, First (DOB: xxxx-xx-xx)
Child(ren): LAST, First (DOB: xxxx-xx-xx)

Case update

Victim update

1. CPTED completed on complainant's home.
2. Complainant has sought legal advice for family court.
3. Complainant is working with CBVS and STV programs.

Perpetrator Update

1. Perpetrator has relocated and is abiding by conditions.
2. Duncan probation is continuing to monitor the perpetrator.

Upcoming Dates

Criminal court: None set

Family court: None set

ICAT FILE CLOSED. PERPETRATOR HAS RELOCATED AND IS ABIDING BY CONDITIONS. MONITORING IS IN PLACE. SUPPORTS ARE IN PLACE FOR THE VICTIM/SURVIVOR, RISK MANAGEMENT PLAN TO BE UPDATED BY CBVS WITH VICTIM/SURVIVOR AND ANY CRITICAL UPDATES ARE TO BE BROUGHT FORWARD TO ICAT AS THEY ARISE.

Victim/Survivor Personalized Safety Plan Template

Personalized Safety Plan

Date file received: _____ Received by: _____

Review dates: _____

It is very important that the person harming you not find out about your safety plan. Be sure to keep this document and your safety plan in a safe location unknown to the perpetrator.

The following steps represent my plan for increasing my safety and preparing in advance for the possibility for further violence. Although I do not have control over my partner's violence, I can plan and think about how to respond and how to best keep myself and my children, grandchildren, or other dependents (such as older persons or persons with disabilities who may be living with me) safe. I will ensure this safety plan is stored in a safe place.

Step 1: Safety during a violent incident

I cannot always avoid violent incidents. In order to increase my safety, I can use a variety of different strategies. I can use some or all of the following strategies:

1. If I decide to leave, I will _____.
(Practice how to get out safely. What doors, windows, elevators, stairwells, or fire escapes would you use? Consider your physical stamina and abilities as well as the health status of anyone who may need to leave with you.)
2. I can keep my bag and car keys ready and put them _____
(place) in order to leave quickly.
3. I can tell _____ and _____
about the violence and request that they call the police if they hear suspicious noises coming from my house.
4. I can teach my children how to use the telephone to contact the police in case of an emergency.
5. I will establish and use a code word with my children or my friends so they can call for help.
6. If I have to leave my home, I will go _____.
If I cannot go to the location above, then I can go to _____
or _____.

7. I can also teach some of these strategies to some/all of my children.
8. When I anticipate we are going to have an argument, I will try to move to a space that is lowest risk, such as _____. *(Try to avoid arguments in the bathroom, garage, kitchen, near weapons, or in rooms without access to an outside door.)*

Step 2: Online and technology safety

It is crucial to take into consideration safety around technology. A few things to keep in mind are:

1. Resetting the password to gain access to your cell phone.
2. Resetting your Apple ID to avoid having your text messages and calls monitored.
3. Resetting passwords to gain access to financial apps (banking, credit cards, Apple Pay or Google Wallet, etc.).
4. Checking your phone for tracking apps that may have been downloaded by your partner, the perpetrator.
5. Resetting passwords to social media accounts.
6. Scanning your vehicle for an AirTag or other tracking or listening devices.
7. Checking purses/bags for trackers.

Step 3: Safety when preparing to leave

Victims/survivors who have experienced intimate partner violence frequently leave the residence they share with their partner. The level of risk increases for the victim/survivor when the perpetrator believes that the relationship is ending. Leaving must be done with a careful plan in order to ensure safety.

I can use some or all of the following safety strategies:

1. I will leave money and an extra set of keys with _____ so I can leave quickly.
2. I will keep copies of important documents at _____.
3. I will open a savings account by _____ (date), to increase my independence.
4. If I require immediate financial assistance for basics like food, shelter or medical assistance I can contact the BC Employment and Assistance program at 1-866-866-0800 to see if I qualify for benefits.

5. The provincial domestic violence helpline number is 1-800-563-0808 (VictimLinkBC). VictimLinkBC is TTY accessible. Call 604-875-0885; to call collect, dial the Telus Relay Service at 711. I can seek shelter and counselling by calling this helpline as well as get immediate crisis support 24 hours a day, 7 days a week. I can also contact my local transition house directly at _____.
6. I can purchase a telephone calling card or get a cell phone. To keep my telephone communications confidential, I must not utilize a phone the perpetrator is aware of.
7. I will check with _____ and _____ to see who would be able to let me stay with them or lend me some money.
8. I can leave extra clothes with _____.
9. I will sit down and review my safety plan every _____ in order to plan the safest way to leave the residence. _____ (support worker or friend) has agreed to help me review this plan.
10. I will rehearse my escape plan and, as appropriate, practice it with my children.
11. If I have a disability, I may need to set up an emergency care plan if my partner is the perpetrator and also my caregiver. I can contact _____ to make a plan for an emergency care provider.

Step 4: Safety in my own residence after leaving my partner

There are many things that I can do to increase safety at home. It may be impossible to do everything at once, but safety measures can be added step by step. Safety measures I can consider include:

1. I can change the locks on my doors and windows as soon as possible.
2. I can replace wooden doors with steel/metal doors.
3. I can install security systems, including additional locks, window bars, poles to wedge against doors, an alarm system, etc.
4. I can purchase rope ladders to be used for escape from second-floor windows if I am physically able.
5. I can install smoke detectors and purchase fire extinguishers for each floor in my house/apartment.
6. I can install an outside lighting system that lights up when a person is coming close to my house.
7. I can contact _____ to help with purchasing these items and _____ to help with installing.

8. I will teach my children how to use the telephone to make a call to me and to _____ (friend/family member/other) in the event that my partner takes the children.
9. I will teach my children how to not disclose our address and phone number to the perpetrator and the perpetrator's family/friends including _____, _____, and others including _____, and _____.
10. I will tell those who take care of my children which people have permission to pick up my children and that my partner/ex-partner is not permitted to do so. The people I will inform about pick-up permission include:
 _____ (school),
 _____ (daycare),
 _____ (babysitter),
 _____ (teacher),
 and _____ (others).
11. If my child goes missing, I will call the police. I can also contact Child Find BC at 1-888-689-3463 and/or MissingKids.ca at 1-866-KID-TIPS (543-8477) to help me.
12. I can inform _____ (neighbours) and _____ (friends) that my partner no longer resides with me, and they should call the police if my partner is observed near my residence.
13. If I need to call the police, I will give them the following information about my partner, the perpetrator: his birth date _____; his physical description, including height _____, weight _____, hair colour _____, facial hair _____, tattoos and/or scars _____; the type of vehicle he drives _____; and his licence plate number _____.
14. I can take steps to assure the confidentiality of certain documents by using a PO box or alternate address, or by setting up a password with certain institutions to ensure only I can access my personal information. The documents I will change include: _____ bills, _____ utilities, _____ car registration, _____ taxes, and _____ bank accounts.

Step 5: Safety with a protection order

I recognize that I may need to ask the police and courts to enforce my protection order. The following are some steps that I can take to help the enforcement of my protection order:

1. If I have any questions about protection orders, or how I can get one, I will contact _____.

2. I will keep my protection order _____(location).
(Always keep it on or near your person. If you change your purse, your protection order is the first thing that should go in.)
3. British Columbia has a Protection Order Registry (POR) that all police departments can access to confirm a protection order within minutes. I can check to make sure that my order is in the registry by calling VictimLinkBC at 1-800-563-0808.
4. I will inform my employer, my closest friend, _____, and _____ that I have a protection order in effect.
5. If my partner destroys my protection order, I can get another copy from the courthouse located at _____.
6. If my partner violates the protection order, I can call the police and report a violation. I can also contact my lawyer and/or call my support worker.
7. I will inform and provide a copy of my protection order to people who have contact with my children. The people I will inform about my protection order include:

and _____ (others).
8. If my partner is involved in the criminal justice system, I can register with the provincial Victim Safety Unit (VSU) to get ongoing information about the status of my partner, including whether or not he is in provincial jail, what community he may be in, and what conditions he may have to follow. To register for the victim notification services I can contact the VSU at 1-877-315-8822.

Step 6: Safety at work and in public

Victims/survivors who have experienced intimate partner violence must decide if and when to tell others about the violence and that they may be at continued risk. Friends, family, and co-workers can help.

You should consider carefully which people are supportive and helpful.

I might do any or all of the following:

1. I can inform my boss, the security supervisor and _____ at work of my situation.
2. I can ask _____ to help screen my telephone calls at work.
3. When leaving work, I can _____
_____.

4. When driving home, if problems occur I can _____
_____.
5. If I use public transit, I can _____
_____.
6. I can use different grocery stores and shopping malls, and shop at hours that are different than those that I used when residing with my partner.
7. I can use a different bank and take care of my banking at hours different from those I used when residing with my partner.
8. I can also _____.

Step 7: Safety and drug or alcohol use

If drug or alcohol use has occurred in my relationship with the perpetrator, I can enhance my safety by doing some or all of the following:

1. If I am going to use, I can do so in a safe place and with people who understand the risk of violence and are supportive.
2. I can also _____.
3. If my partner is using, I can _____ and I might also _____.
4. To safeguard my children, I will _____ and _____.

Step 8: Safety and my emotional health

The experience of intimate partner violence is exhausting and emotionally draining. The process of moving forward takes much courage and energy. To conserve my emotional energy and resources, I can do some of the following:

1. If I feel down and want to return to a potentially unsafe situation, I can _____

_____.
2. When I have to communicate with my partner in person or by telephone, I can _____
_____.
3. I can tell myself “_____” whenever I feel others are trying to control or abuse me.
4. I can read _____ to help me feel stronger.
5. I can call _____ and _____ for support.

6. Other things I can do to help me feel stronger are _____, _____ and _____
7. I can attend workshops and support groups, or _____, _____, or _____ to gain support and strengthen my relationships with other people.

Step 9: Items to take when leaving

If you leave your partner, it is important to take certain items with you. You may also give extra copies of documents and an extra set of clothing to a friend just in case you have to leave quickly.

Items with an asterisk () on the following list are the most important to take. If there is time, the other items might be taken, or stored outside the home. These items might best be placed in one location so that if you have to leave in a hurry you can grab them quickly. Check off items on this list as you make your plans.*

When I leave, I should take the following items for myself and my children:

Items to take when leaving			
* Birth certificates		* Social Insurance Card (SIN Card)	
* Driver’s licence and registration		* School and vaccination records	
* CareCards (health cards)		* Passports	
* Money		* Cheque book and bank book	
* Debit and credit cards		* Transit pass	
* Keys (house/car/office)		* Medications and prescriptions	
* Court orders, protection orders and custody documentation		* Citizenship or immigration documents or Certificate of Indian Status	
* Work permits		Medical records	
Lease/rental agreement, house deed, mortgage papers		Assistive devices (i.e., glasses, dentures, walkers, canes, hearing aids)	
Insurance papers (car, home, health)		Address/telephone book	
Divorce papers, marriage certificate		Children’s favourite toys and/or blanket	
Pictures of partner and children/ grandchildren		Valuable or sentimental items such as jewellery	

Contact information I need to know:

In the event of an emergency I will immediately call 911 or the police.

If I need immediate crisis support or a referral to a program or service, I can contact VictimLinkBC at 1-800-563-0808 anytime of the day or night.

I can fill out the table below with service providers in my community that can help me.

Service provider	Contact person	Phone number and/or email address

This resource was adapted as part of the Domestic Violence Safety Planning Online Training course co-funded by BC Housing and the Ministry of Public Safety and Solicitor General, Government of British Columbia.

Adapted with permission from the US based National Network to End Domestic Violence, nnedv.org.

Glossary of Acronyms

Glossary of Acronyms	
BCSTH	BC Society of Transition Houses
BC SIPVR	BC Summary of Intimate Partner Violence Risk Factors
CBVS	Community-Based Victim Services
CCSS	Community Coordination for Survivor Safety
CFCSA	Child, Family and Community Services Act
DVU	Domestic Violence Unit
EVA BC	Ending Violence Association of BC
FLA	Family Law Act
FOIPPA	Freedom of Information and Protection of Privacy Act
FRA	Family Relations Act
ICAT	Interagency Case Assessment Team
IPVU	Intimate Partner Violence Unit
MCFD	Ministry of Children and Family Development
MSDPR	Ministry of Social Development and Poverty Reduction
PIPA	Personal Information Protection Act
RCMP	Royal Canadian Mounted Police
RTCC/RCC	Report to Crown Counsel
STV	Stopping the Violence Counselling Program
VAWIR	Violence Against Women in Relationships
VOCA	Victims of Crime Act
VSU	Victim Safety Unit

Glossary of Police Acronyms

Glossary of Police Acronyms	
CAD	Computer-aided Dispatch is used in BC by dispatchers, call-takers and 911 operators to provide effective dispatch response for first responders.
CAD Hazard	A flag is added to the victim/survivor's information indicating a priority response is required when the victim/survivor is the caller, or a call is made from the victim/survivor's residence, due to IPV.
CPIC	The Canadian Police Information Centre is used nationally and houses all information associated with crime.
PIRS	Police Information Retrieval System is an investigative information recording and retrieval system that contains detailed information on all events reported to the RCMP.
PRIME	Police Records Information Management Environment is a BC-wide computer system bridging information between the RCMP and municipal police forces.

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Manual Design by
Amy Wu Designs — amywu.ca

Third Edition | **October 2024**