

Complex Needs IDVA Referral Form

Please complete form and send to IDVA@smartcjs.org.uk.

You can also call the complex needs domestic abuse project on 07985188072.

Name of Victim	
Date Of Birth Of Victim	
Address of Victim	
Telephone for Victim	
Safe time and way to contact victim	
Name of Perpetrator	
Date of Birth Perpetrator	
Address of Perpetrator	
Name of children	
Referrer details: (name, date of referral, contact details)	
Are their Children Services working with the family Details of Case worker	
Why are you referring this person	
What makes this client complex	
Has a DASH/RIC been completed? If yes what is the score?	
Are there any Bail conditions/ DVPO in place?	
Has the client consented to this referral?	