

**FORM**  
**BLUE CARD – A<sup>1</sup>**

Annexes to the Ordinance of the Council of  
Ministers of 13 September 2011 (item 1245)

**Annex 1**

.....  
(stamp of the entity referred to  
Article. 9d paragraph. 2 of the Act of 29 July 2005  
on preventing domestic violence,  
filling out the 'Blue Card – A')

.....  
(place, date)

**I. DETAILS OF THE PERSON SUSPECTED TO BE AFFECTED BY DOMESTIC VIOLENCE**

1. First name and surname: .....
2. Parents' names: .....
3. Place of residence:  
postal code: ..... town: ..... voivodship: .....  
street: ..... house number: ..... apartment number: .....  
phone number: .....
4. Current residence address:  
Postal code: ..... town: ..... voivodship: .....  
street: ..... house number: ..... apartment number: .....  
phone number: .....

**II. REGISTRATION INFORMATION ON THE SUSPICION OF DOMESTIC VIOLENCE**

1. Person reporting:  
person suspected to be affected by domestic violence:  
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.....  
.....
2. Person reporting:  
another person (e.g. a parent, legal guardian, actual guardian, closest person, witness):  
.....  
.....  
.....
- 1) First name and surname: .....
- 2) Place of residence:  
Postal code: ..... town: ..... voivodship: .....  
street: ..... house number: ..... apartment number: .....  
phone number: .....

**III. DETAILS OF THE PERSON SUSPECTED TO USE DOMESTIC VIOLENCE**

1. First name and surname: .....
2. Place of residence:  
Postal code: ..... town: ..... voivodship: .....  
street: ..... house number: ..... apartment number: .....  
phone number: .....
3. Relation to the person suspected to be affected by domestic violence:  
.....

<sup>1</sup> Parts I–XV, XVII, and XIX–XXI should be filled with representatives of all entities mentioned in art. 9d paragraph 2 of the Act of 29 July 2005 on combating domestic violence. Additionally, part XVI should be filled by a representative of the Police. Part XVIII should be filled by a representative of the health care.

## IV. HAS THE PERSON SUSPECTED TO USE DOMESTIC VIOLENCE DONE ANY OF THE FOLLOWING:

Forms of domestic violence	Against adults			Against children		
Applied physical violence, including:	YES	NO	against whom*	YES	NO	against whom*
pushing						
hitting						
wringing of hands						
choking						
kicking						
slapping						
other (please specify)						
Personal injury, including:	YES	NO	against whom*	YES	NO	against whom*
bruising						
scratching						
bleeding						
burns						
other (please specify)						
Applied mental violence, including:	YES	NO	against whom*	YES	NO	against whom*
isolation						
insults						
ridicule						
threats						
controlling						
limiting contacts						
criticising						
humiliation						
demoralization						
continuous disturbance						
other (please specify)						
Applied sexual violence, including:	YES	NO	against whom*	YES	NO	against whom*
forcing sexual intercourse or other sexual activities						
Another type of behaviour, including:	YES	NO	against whom*	YES	NO	against whom*
destruction/damage to property						
annexation/embezzlement						
punishable threat/insult						
forcing alcohol consumption						
forcing the use of narcotic drugs or psychotropic substances and medical drugs not recommended by a physician						
other behaviours detrimental of the family (please specify)						

\* For example: wife, husband, partner, mother, father, daughter, son.

## V. FOR HOW LONG HAVE THESE BEHAVIOURS BEEN OCCURRING

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## VI. BEHAVIOUR

The behaviour of a person	Person suspected to be affected by domestic violence		Person suspected to use domestic violence	
	YES	NO	YES	NO
difficulty making contact				
calm				
tearful				
threatened				
avoids conversation				
aggressive				
Resists the police				

## VII. DESCRIPTION OF EVENT LOCATION

(e.g. breakages, damaged equipment, mess, broken glass, broken doors, dirt, blood stains, signs of alcohol consumption, perceivable odour of alcohol, other)

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## VIII. WITNESSES OF DOMESTIC VIOLENCE Witness I

1. First name and surname: .....

2. Place of residence:

Postal code: ..... town: ..... voivodship: .....

street: ..... house number: ..... apartment number: .....

phone number: .....

Witness II

1. First name and surname: .....

2. Place of residence:

Postal code: ..... town: ..... voivodship: .....

street: ..... house number: ..... apartment number: .....

phone number: .....

Witness III

1. First name and surname: .....

2. Place of residence:

Postal code: ..... town: ..... voivodship: .....

street: ..... house number: ..... apartment number: .....

phone number: .....

IX. HAS THE PERSON SUSPECTED OF USING DOMESTIC VIOLENCE EVER BEEN CONVICTED FOR A CRIME INCLUDING VIOLENCE OR A THREAT TO USE VIOLENCE:

YES ☐

NO ☐

NOT ESTABLISHED ☐

X HAS THE PERSON SUSPECTED TO USE DOMESTIC VIOLENCE BEEN SENTENCED FOR PROBATION:

YES ☐

NO ☐

NOT ESTABLISHED ☐

XI. DOES THE PERSON SUSPECTED TO USE DOMESTIC VIOLENCE ABUSE ALCOHOL:

YES ☐

NO ☐

NOT ESTABLISHED ☐

XII. DOES THE PERSON SUSPECTED TO USE DOMESTIC VIOLENCE ABUSE NARCOTICS, PSYCHOTROPIC SUBSTANCES OR MEDICINAL DRUGS:

YES ☐

NO ☐

NOT ESTABLISHED ☐

XIII. HAS THE PERSON SUSPECTED TO USE DOMESTIC VIOLENCE BEEN PSYCHIATRICALLY TREATED:

YES ☐

NO ☐

NOT ESTABLISHED ☐

XIV. DOES THE PERSON SUSPECTED TO USE DOMESTIC VIOLENCE OWN A GUN:

YES ☐

NO ☐

NOT ESTABLISHED ☐

XV. HAVE THE FOLLOWING ACTIONS BEEN TAKEN IN CONNECTION WITH USING VIOLENCE IN THE FAMILY:

- ☐ Police notification and intervention
- ☐ prosecution notification
- ☐ arrest
- ☐ Police custody
- ☐ a ban on contact with specific persons
- ☐ issuance of a restraining order relating to specific persons
- ☐ an order for an obligation to leave the apartment occupied jointly with the victim
- ☐ detention
- ☐ starting criminal prosecution or other legal proceedings (what? e.g. divorce or family proceeding) .....
- ☐ subjecting the exercise of parental power to permanent supervision by a probation officer
- ☐ taking away a child in the event of imminent danger to life or health due to domestic violence
- ☐ obligation to undergo addiction treatment (regarding whom?) .....
- ☐ other addiction therapy (what kind, regarding whom?) .....
- ☐ obligation to participate in the program of corrective and educational interaction (imposed by whom?) .....
- ☐ medical care was provided
- ☐ other actions (what?) .....

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## XVI. ACTION TAKEN BY THE POLICE

Action taken by the Police	Person suspected to be affected by domestic violence		Person suspected to use domestic violence	
	YES	NO	YES	NO
caution				
means of direct coercion (what?) .....				
testing for alcohol content in the body	..... (result)		..... (result)	
detoxification detention centre				
police facilities for detainees/for sobering				
police rooms for detainees				
emergency youth centre				

## XVII. DETAILS REGARDING FAMILY

Other persons living in the household of a person suspected of using domestic violence:

No.	First name and surname:	Relation	Age	Occupation*
1				
2				
3				
4				

\*Profession, place of work, in the case of children: school/class.

## XVIII. INFORMATION ABOUT THE HEALTH CONDITION OF THE PERSON SUSPECTED TO BE AFFECTED BY DOMESTIC VIOLENCE

## 1. Mental state:

- ☐ energised
 ☐ lethargic/apathetic
 ☐ tearful  
☐ aggressive ☐ fearful ☐ other (what?) .....

## 2. Communication:

- ☐ gladly makes contact
 ☐ struggles to make contact  
☐ taciturn
 ☐ stutters  
☐ shouts
 ☐ speaks illogically  
☐ refuses to answer questions asked  
☐ communicates non-verbally (e.g. sign language, gestures, pictograms, etc.)

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Reaction to the attendant (especially important in the case of children):

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## 3. Types of damage:

- |  |   |                                     |
|--|---|-------------------------------------|
| <input type="checkbox"/> cuts            | <input type="checkbox"/> puncture marks | <input type="checkbox"/> bite marks |
| <input type="checkbox"/> abrasion        | <input type="checkbox"/> bruises        | <input type="checkbox"/> bleeding   |
| <input type="checkbox"/> traces of burns | <input type="checkbox"/> dislocation    | <input type="checkbox"/> fractures  |

## 4. Hygiene:

- |        |  |   |
|--------|--|---|
| Skin:  | <input type="checkbox"/> clean             | <input type="checkbox"/> dirty                  |
|        | <input type="checkbox"/> dry               | <input type="checkbox"/> kibed                  |
|        | <input type="checkbox"/> scalded           | <input type="checkbox"/> bedsores               |
|        | <input type="checkbox"/> diaper dermatitis |   |
| Włosy: | <input type="checkbox"/> clean             | <input type="checkbox"/> dirty                  |
|        | <input type="checkbox"/> lice              | <input type="checkbox"/> baldness/uprooted hair |
|        | <input type="checkbox"/> cradle cap        |   |
|        |  |   |

## 5. Other symptoms suspected domestic violence/neglect:

- |   |  |
|---|--|
| <input type="checkbox"/> dress clothing/clothing inadequate to the season       | <input type="checkbox"/> weight/height inadequate for age  |
| <input type="checkbox"/> development not adequate for age                       | <input type="checkbox"/> cachexia                          |
| <input type="checkbox"/> dehydration  | <input type="checkbox"/> repeated calls to doctor's office |
| <input type="checkbox"/> not using doctor's help despite chronic disease        |  |
| <input type="checkbox"/> failure to comply with earlier medical recommendations |  |

## 6. Injuries and symptoms consistent with the versions of the person suspected to be affected by domestic violence:

YES ☐ NO ☐

## 7. In the case of a child, also injuries and symptoms consistent with the version presented by the parent or legal guardian, or actual guardian:

YES ☐ NO ☐

## 8. The need to consult a specialist:

YES ☐ NO ☐

## 9. Treatment applied:

- ☐ admitted to a hospital ward (which?) .....
- ☐ referred to a hospital (which?).....
- ☐ outpatient help provided ☐ sent home
- ☐ other (what?).....

## 10. Informed of the possibility of obtaining a medical certificate of the cause and type of injuries related to domestic violence on the basis of the Regulation of the Minister of Health of 22 October 2010 on the model medical certificate of the cause and type of injuries related to the use of domestic violence (Polish Journal of Laws No. 201, item 1334).

YES ☐ NO ☐

## 11. A medical certificate was issued:

YES ☐ NO ☐

## 12. A referral for medical examination was issued:

YES ☐ NO ☐

## 13. A sick leave from work was issued:

YES ☐ NO ☐

## XIX. INTERVENTIONS DONE

1. Efforts to ensure the safety of the person suspected to be affected by domestic violence:
  - ☐ alerting the Police ☐ social assistance
  - ☐ providing medical care  
(in the case of sexual violence, it is necessary to act according to the procedure of the Police and the medical centre)
  - ☐ other (what?) .....
2. Efforts to ensure the safety of the person suspected to be affected by domestic violence through providing a place in a residential care facility:
  - ☐ a specialist centre of support for victims of domestic violence
  - ☐ a support centre
  - ☐ a crisis intervention centre
  - ☐ a home for mothers with small children and for pregnant women
  - ☐ a hospital
  - ☐ other (what?) .....
3. Efforts to provide assistance to children  
.....  
.....  
.....
4. Providing information to the authorities competent to carrying out preparatory procedures  
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.....  
.....
5. Other (what?)  
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.....  
.....

## XX. CONCLUSIONS OF THE REPRESENTATIVE OF THE ENTITY FILLING OUT THE FORM

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## XXI. ADDITIONAL INFORMATION

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.....  
(signature of the representative of the entity filling out  
the 'Blue Card – A')

.....  
(date of receipt of 'Blue Card – A' to the chairman of the  
interdisciplinary team)

*FORM***BLUE CARD – B****CAUTION FOR PERSONS EFFECTED BY DOMESTIC VIOLENCE****What is domestic violence?**

Domestic violence is a single or repeated intentional action or omission violating the rights or the personal interests of family members and other persons jointly residing or maintaining a common household, in particular putting these persons at risk of loss of life or health, affecting their dignity, physical integrity, freedom (also sexual), causing damage to their physical and mental health, as well as causing suffering and moral harm in persons affected by violence.

**Who can be a victim of domestic violence?**

- spouses
- partners in informal relationships
- children
- elderly people
- people with disabilities

**The most common forms of domestic violence include:**

Physical abuse:

- hitting, pushing, kicking, strangling, hitting with objects, burning, slapping...

Emotional abuse:

- ridicule, mockery, insults, disrespect, constant criticism, controlling and limiting contact with loved ones...

Sexual abuse:

- forcing sex, forcing unaccepted sexual practices, forcing sex with other persons...

Another type of behaviour:

- forcing to give away funds generated, preventing work, not satisfying basic material needs...
- destructing personal belongings
- demolishing the house
- taking out household items and selling them
- leave unaccompanied a person who cannot satisfy their needs on their own due to illness, disability, or age
- forcing alcohol consumption
- forcing the use of narcotic drugs or psychotropic substances and medical drugs

**REMEMBER!**

**The law prohibits the use of violence and abuse of family. If you or someone in your family is a victim of violence from a member of family, do not be shy to ask for help. The law is on your side!**

**If you experience such behaviour, notify:**

- the Police by calling 997 or 112,
- the prosecutor's office.

**A policeman is obliged to:**

- **ensure safety** (Article 15a of the Act of 6 April 1990 on the Police – carrying out their duties, police officers have the right to stop the perpetrators of domestic violence posing a direct threat to human life or health);
- **provide information about the intervening police officers** (grade, name, and identification number of the police officers, name and address of the unit in which they serve);
- **provide, at the request of the court or prosecutor's office, police records** as evidence in the proceedings;
- **participate, at the request of the court, as witnesses** in a criminal case.



**In the course of an investigation, the prosecutor has the right to:**

- put the suspect under police supervision with ban on contacting the victim;
- put the suspect under police supervision rather than to continue detention, provided that the defendant leaves the premises occupied together with the victims within the time allowed and identifies their whereabouts;
- order the defendant to leave the apartment occupied together with the victim – if there is a reasonable fear that the defendant will commit a crime again using violence against that person, especially when they threaten to commit such an offence.

**Polish law prosecutes perpetrators of crimes against persons close to them for:**

- physical or mental abuse of a person close to the offender, of another person permanently or temporarily dependant on the offender, or of a minor or a person helpless due to their mental or physical condition – Article 207 of the Penal Code;
- hitting a person or infringing their bodily integrity in other ways – Article 217 of the Penal Code (prosecuted by private prosecution);
- depriving a person of freedom – Art. 189 of the Penal Code;
- threatening a person with committing an offence against that person or harming a loved one, if the threat causes the threatened person to believe it will be fulfilled – Article 190 of the Penal Code (prosecuted at the request of the victim);
- instilling a valid sense of danger in another person or violating their privacy through persistent harassment – Art. 190a § 1 of the Penal Code (prosecution at the request of the victim);
- using violence or threats to force another person to a particular act, omission or enduring certain state – Art. 191 of the Penal Code;
- recording the image of a naked person or persons in the course of sexual activity by using violence, unlawful threat or deception against them, or disseminating the image of a naked person or in the course of sexual activity without their consent – Art. 191a of the Penal Code (prosecution at the request of the victim);
- making another person have sexual intercourse by force, illegal threat or deceit (rape) and make, in the same way, another person submit to other sexual acts or performing such activities – Art. 197 of the Penal Code (prosecuted at the request of the victim);/NOTE! This offence is also committed by a spouse who commits rape of their spouse! /;
- causing severe bodily harm in the form of: deprivation of sight, hearing, speech, ability to procreate or other severe disability, serious incurable or long-term illness, life-threatening illness, permanent mental illness, complete or substantial permanent incapacity to work in learned profession or permanent, significant disfigurement or deformation of the body – Art. 156 of the Penal Code;
- causing impairment of the functioning of a body organ or disturbance of health to a person close to the offender – Art. 157 § 1 and 2 of the Penal Code (prosecuted at the request of the victim);
- persistently avoiding the performance of the statutory or ordered (by court) duty of care by failing to maintain a person close to the offender or another person, and thereby putting them at risk of inability to meet their basic needs (evasion of the obligation to maintain) – Art. 209 of the Penal Code (prosecuted at the request of the victim, the social services or other relevant authority);
- theft or burglary to the harm of a person close to the offender – Art. 278 of the Penal Code and Article 279 of the Penal Code (prosecuted at the request of the victim);
- destroying or damaging other people's things or making them unfit for use – Art. 288 of the Penal Code (prosecuted at the request of the victim);
- abandonment contrary to the obligation of taking care of a minor under the age of 15 or a person helpless due to their mental or physical condition – Art. 210 of the Penal Code;
- kidnapping or arresting a minor under the age of 15 or a person maladroït due to their mental or physical condition, against the will of a person assigned to care or supervision – Art. 211 of the Penal Code;
- having sexual intercourse with a minor under the age of 15 or engaging such person in another sexual act or making them submit to such activities or to perform them – Art. 200 of the Penal Code;
- familiarising a minor with alcohol by providing them with alcoholic beverages, facilitating consumption of alcohol, or encouraging them to drink – Art. 208 of the Penal Code.

**You also have the right to notice the Police or the prosecutor's office of an offence by a person who is hurting you and your family.**

**REMEMBER!**

**If they feel impunity, the perpetrator of violence against their family probably will not change, violence will continue regardless of the promises made, the next time could be much worse.**

If, however, you trust their declarations of changing the behaviour towards you/your family and you want to withdraw, remember that the testimony you have previously submitted can not be used by the legal institutions operating in order to help you. So before you make such a decision, think about it and consult it with a psychologist, therapist, or other person helping victims of domestic violence, for example in a specialised centre supporting victims of domestic violence or a crisis intervention centre.

**REMEMBER!**

**Stopping domestic violence is possible – you can fight it and get help for yourself and your loved ones.**

How is it possible?

**Take two steps:****1. Step one – note the course of the event (sometimes, memory is unreliable):**

Who hurt you? (Name and surname) .....

Who is the perpetrator of domestic violence to you? (State who – husband, wife, partner, father, mother, brother, sister, son, daughter, etc.) .....

When did it happen? date ..... time ..... place .....

What was the violence? (row, shouting, abuse, beating, kicking, throwing furniture, destroying furniture, beating children, threats of beatings, threats to kill, throwing out of the house, other – specify?) .....

Who saw or heard the course of events? .....

Who intervened? (Name of officer, his service number, unit) .....

Is this the first time the police intervenes in your home in such case?

**YES** ☐

**NO** ☐

How often does violence occur in your home? (Once a month, once a week, more often) .....

When did it happen last time? .....

Does domestic violence occur together with drinking alcohol?

**YES** ☐

**NO** ☐

Are you always hurt by the same perpetrator?

**YES** ☐

**NO** ☐

Has the offender already been convicted in court for a similar act?

**YES** ☐

**NO** ☐

Has the court ordered supervision of a probation officer over the perpetrator?

**YES** ☐

**NO** ☐

**2. Step two – who can you ask for help?**

Have you ever have received help from an institution or organisation obligated to provide assistance?

**YES** ☐

**NO** ☐

If "YES", which institution or organisation were they?

If "NO", below are names of institutions and organisations you can turn to and receive help from:

■ **Social welfare centres** – will help you on social, welfare and legal issues.

■ **County family assistance centres** – will help you in the legal, social, and therapeutic matters or provide information about local institutions working in this field in your town.

■ **Crisis intervention centres** – will provide shelter for you and your family when you are a victim of domestic violence and provide you with help and support to overcome the crisis, as well as develop a plan of help.

- **Support centres** – will provide shelter for you and your family when you are a victim of domestic violence and provide you with help and support to overcome the crisis, as well as develop a plan of help.
- **Specialist support centres for victims of domestic violence** – will provide free shelter for you and your family when you are a victim of domestic violence, and provide you with expert assistance, including psychological, legal, social, therapeutic, and medical help as well as support you in overcoming the crisis and develop a plan of help.
- **Prosecutor's office, the Police** – you can notify them of the offence of abuse committed against you or against your family and ask them to give basic legal information.
- **Family and guardianship court** – where you can file a lawsuit in family matters or filing a petition regarding care over your children.
- **Health care** – there you can get a medical certificate for sustained injuries, get medical help, and ask for addresses of specialised medical clinics.
- **Commissions for solving alcohol problems** – if violence in your home is accompanied by drinking, you can turn to them for an order for the perpetrator of violence to undergo rehabilitation treatment or for obtaining other assistance related to the alcohol abuse by that person.

**In your area. the following local facilities providing assistance to victims of domestic violence operate:**

No.	Name of institution/organisation	Address of institution/organisation	Telephone	E-mail

You can also call the following numbers:

- **The National emergency Service for Victims of Domestic Violence „Blue line” tel. 801 12 00 02** (payable for first impulse, line is open from Monday to Saturday 8<sup>00</sup>–22<sup>00</sup>, on Sundays and holidays 8<sup>00</sup>–16<sup>00</sup>), **tel. (22) 666 28 50 – legal duty** (payable line, open on Mondays and Tuesdays 17<sup>00</sup>–21<sup>00</sup>), **E-mail centre: [niebieskalinia@niebieskalinia.info](mailto:niebieskalinia@niebieskalinia.info).**
- **Police Helpline tel. 800 120 226** (free line for calls from landline, open daily from 9<sup>30</sup> to 15<sup>30</sup>, from 15<sup>30</sup> to 9<sup>30</sup> a machine is turned on).

### IMPORTANT

As a result of the initiation of the "Blue Card", information on your family situation will be transferred to the president of the interdisciplinary team who will take further action.

You can always call the police to intervene, inform the prosecution and seek help from entities/organizations carrying out activities to combat domestic violence.

You can also ask the district police officer to come to your home and give appropriate assistance and necessary information.

## Appendix no. 3

## FORM

## BLUE CARD – C

.....  
(place, date)

## I. UNCHANGED DATA

- 1) of the person suspected to be affected by domestic violence ☐
- 2) of the person suspected to use domestic violence ☐

## II. VERIFICATION OF THE DETAILS OF THE PERSON SUSPECTED TO BE AFFECTED BY DOMESTIC VIOLENCE

1. First name and surname: .....
2. Parents' names: .....
3. Place of residence:
- Postal code: .....town: .....voivodship: .....
- street: ..... house number: ..... apartment number: .....
- phone number: .....
4. Current residence address:
- Postal code: .....town: .....voivodship: .....
- street: ..... house number: ..... apartment number: .....
- phone number: .....

## III. VERIFICATION OF THE DETAILS OF THE PERSON SUSPECTED TO USE DOMESTIC VIOLENCE

1. First name and surname: .....
2. Place of residence:
- Postal code: .....town: .....voivodship: .....
- street: ..... house number: ..... apartment number: .....
- phone number: .....
3. Relationship to the person notifying: .....

## IV. DIAGNOSIS OF THE SITUATION OF THE PERSON SUSPECTED TO BE AFFECTED BY DOMESTIC VIOLENCE

1. Family situation:
- .....
- .....
- .....
- .....
- .....
- .....
- .....
2. Professional situation:
- .....
- .....
- .....
- .....
- .....
- .....
- .....

## 3. Economic situation:

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## 4. Housing situation:

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## 5. Health situation:

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## 6. The situation of children (family, education, health, etc.):

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## V. INDIVIDUAL SUPPORT PLAN FOR A PERSON SUSPECTED TO BE AFFECTED BY DOMESTIC VIOLENCE, IN CAPACITY OF THE REPRESENTATIVES:

## 1. Social assistance organisation unit

- ☐ social work, including regular home visits
- ☐ informing about the terms of use of cash benefits from social assistance
- ☐ indicating the possibility of using psychological, legal and counselling help - medical, professional and family
- ☐ directing the person suspected to be affected by domestic violence do a centre for families suffering domestic violence, particularly to a specialist support centre for victims of domestic violence
- ☐ referral of children to an educational daycare facility (e.g. community centre, club)
- ☐ Alert family and custody court of the children's situation
- ☐ other (what?) .....

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## 2. Municipal committee for solving alcohol problems:

- ☐ refers to support groups for co-addicted persons
- ☐ informs about the legal possibilities for commitment to submit a person suspected of using violence in the family, to undergo addiction treatment
- ☐ refers to participate in group therapy
- ☐ refers to self-help group
- ☐ other (what?) .....

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## 3. The Police:

- ☐ regular visits to check the state of security of the person suspected of being affected by domestic violence, held .....
- (Specify the frequency of visits as agreed by the interdisciplinary team or workgroup)
- ☐ informs the person suspected to be affected by domestic violence that physical and mental abuse is a crime, and present aspects of criminal responsibility
- ☐ informs about the possibility of a medical examination
- ☐ starting the preparatory proceeding
- ☐ request from the prosecutor that appropriate preventive measures be used
- ☐ other (what?) .....

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## 4. Education:

- ☐ providing psychological and pedagogical help for a child/children in kindergarten, school or other institution, in the following form, respectively:
  - ☐ therapeutic class
  - ☐ activities developing talents
  - ☐ compensatory educational activities
  - ☐ specialised courses: remedial, speech therapy, social therapy, and other therapeutic activities
  - ☐ activities related to the field of education and choice of profession as well as education planning and career – in the case of junior high and high school students
  - ☐ advice and consultation
- ☐ inclusion of parents/guardians in psycho-pedagogical help in the form of: advice, consulting, workshops, or training
- ☐ material aid and its type: summer holidays, feeding, school scholarship, school allowance
- ☐ consultation in a psychological and educational clinic, including specialised counselling, referral to counselling
- ☐ Alert family and custody court of the child's situation
- ☐ inform the parent/guardian about the possibility of obtaining assistance offered by the daycare support
- ☐ other (what?) .....

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## 5. Health care:

- ☐ directing the person suspected that it is affected by domestic violence, to a primary care physician with an indication as to further medical consultation
- ☐ referral of the person suspected to be affected by domestic violence to psychiatric consultation
- ☐ directing the person suspected to be affected by domestic violence to the doctor for a medical certificate to establish the cause and type of injuries related to the use of domestic violence
- ☐ other (what?) .....

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## 6. Other members of the interdisciplinary team or workgroup:

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## VI. OBLIGATIONS TAKEN BY THE PERSON SUSPECTED TO BE AFFECTED BY DOMESTIC VIOLENCE

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## VII. PERIODIC ASSESSMENT OF THE SITUATION OF THE FAMILY AND THE PERSON SUSPECTED TO BE AFFECTED BY DOMESTIC VIOLENCE

- ☐ weekly ☐ once a month ☐ once every three months
- ☐ at other times (what?).....

## VIII. VERIFICATION OF THE INDIVIDUAL SUPPORT PLAN FOR A PERSON SUSPECTED TO BE AFFECTED BY DOMESTIC VIOLENCE, IN CAPACITY OF THE REPRESENTATIVES:

## 1) social assistance organisation unit

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## 2) municipal committee for solving alcohol problems:

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3) the Police:

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4) education:

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5) health care:

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6) other members of the interdisciplinary team or workgroup:

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IX. HAVE RELEVANT INFORMATION BEEN GIVEN TO COMPETENT AUTHORITIES PERFORMING THE PREPARATORY PROCEDURE IN THE CASE OF SUSPECTED OFFENCE:

**YES** ☐

**NO** ☐

X. DESCRIPTION OF THE NEXT OCCURRENCE OF DOMESTIC VIOLENCE IN A FAMILY DURING THE PROCEDURE

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(signature of the leader of the  
interdisciplinary team)



## Appendix no. 4

## FORM

## BLUE CARD – D

.....  
(place, date)

## I. DETAILS OF THE PERSON SUSPECTED TO USE DOMESTIC VIOLENCE

1. First name and surname: .....
2. Date and place of birth: ..... , in .....
3. Marital status: .....
4. Place of residence:
 

Postal code: ..... town: ..... voivodship: .....

street: ..... house number: ..... apartment number: .....

phone number: .....
5. Current residence address:
 

Postal code: ..... town: ..... voivodship: .....

street: ..... house number: ..... apartment number: .....

phone number: .....
6. Place of work/source of income: .....

## II. DOES THE PERSON SUSPECTED TO USE DOMESTIC VIOLENCE EVER DO ANY OF THE FOLLOWING:

Forms of domestic violence	Against adults			Against children		
	YES	NO	against whom*	YES	NO	against whom*
<b>Applied physical violence, including:</b>						
pushing						
hitting						
wringing of hands						
choking						
kicking						
slapping						
other (please specify)						
<b>Personal injury, including:</b>	YES	NO	against whom*	YES	NO	against whom*
bruising						
scratching						
bleeding						
burns						
other (please specify)						
<b>Applied mental violence, including:</b>	YES	NO	against whom*	YES	NO	against whom*
isolation						
insults						
ridicule						
threats						
controlling						
limiting contacts						
criticising						

humiliation						
demoralization						
continuous disturbance						
other (please specify)						
<b>Applied sexual violence, including:</b>	<b>YES</b>	<b>NO</b>	<b>against whom*</b>	<b>YES</b>	<b>NO</b>	<b>against whom*</b>
forcing sexual intercourse or other sexual activities						
<b>Another type of behaviour, including:</b>	<b>YES</b>	<b>NO</b>	<b>against whom*</b>	<b>YES</b>	<b>NO</b>	<b>against whom*</b>
destruction/damage to property						
annexation/embezzlement						
punishable threat/insult						
forcing alcohol consumption						
forcing the use of narcotic drugs or psychotropic substances and medical drugs not recommended by a physician						
other behaviours detrimental of the family (please specify)						

\* For example: wife, husband, partner, mother, father, daughter, son.

### III. FOR HOW LONG HAVE THESE BEHAVIOURS BEEN OCCURRING

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### IV. ARE THERE ANY WITNESSES OF DOMESTIC VIOLENCE:

YES ☐ NO ☐ NOT ESTABLISHED ☐

### V. HAVE YOU EVER BEEN CONVICTED FOR AN OFFENCE INCLUDING THE USE OF VIOLENCE OR A THREAT TO USE VIOLENCE:

YES ☐ NO ☐ NOT ESTABLISHED ☐

### VI. HAS THE COURT ORDERED SUPERVISION OF A PROBATION OFFICER OVER THE OFFENDER:

YES ☐ NO ☐ NOT ESTABLISHED ☐

### VII. DO YOU ABUSE ALCOHOL:

YES ☐ NO ☐ NOT ESTABLISHED ☐

- for how long and how often?
- when was the last time?

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### VIII. DO YOU ABUSE NARCOTICS, PSYCHOTROPIC SUBSTANCES OR MEDICAL DRUGS:

YES ☐ NO ☐ NOT ESTABLISHED ☐

- for how long and how often?
- when was the last time?

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IX. HAVE YOU EVER UNDERGONE WITHDRAWAL TREATMENT? WHEN WAS THE LAST TREATMENT AND WHAT ADDICTION DID IT REGARD:

(alcohol, narcotics, psychotropic substances, or medical drugs)

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X. HAVE THE FOLLOWING OCCURRED IN CONNECTION WITH THESE BEHAVIOURS:

- ☐ Police notification and intervention
- ☐ prosecution notification
- ☐ starting criminal prosecution or other legal proceedings (what? e.g. divorce or family proceeding) .....
- ☐ subjecting the exercise of parental power to permanent supervision by a probation officer
- ☐ order to undergo withdrawal treatment
- ☐ obligation to participate in corrective and educational interaction
- ☐ intervention and help from another institution (what?) .....
- ☐ other (what?).....

XI. HAVE YOU EVER HAD OTHER PROBLEMS WITH ABUSING ALCOHOL, NARCOTICS, PSYCHOTROPIC SUBSTANCES OR MEDICAL DRUGS:

- ☐ conflict with the law
- ☐ trouble at work
- ☐ other (what?).....
- ☐ traffic offence
- ☐ stays at a detoxification detention centre

XII. HOW DO YOU ASSESS YOUR SITUATION? DO YOU NOTICE ANYTHING DISTURBING:

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XIII. ACTIONS REGARDING OF THE PERSON SUSPECTED TO USE DOMESTIC VIOLENCE

- ☐ participation in corrective and educational interactions for persons using domestic violence
- ☐ voluntary submission to the treatment of addiction treatment and developing a treatment plan
- ☐ submission of an application to the court to start the process of ordering a withdrawal treatment
- ☐ obligation to inform the members of the interdisciplinary team / workgroup of the efforts made to stop domestic violence:
  - ☐ weekly
  - ☐ once a month
  - ☐ once every three months
  - ☐ at other times (what?) .....
- ☐ submission of the appropriate application to court by a probation officer
- ☐ other actions (what?) .....

XIV. OBLIGATIONS TAKEN BY THE PERSON SUSPECTED TO use BY DOMESTIC VIOLENCE

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## XV. PERIODIC ASSESSMENT OF THE SITUATION OF THE PERSON SUSPECTED TO USE DOMESTIC VIOLENCE

- ☐ weekly ☐ once a month ☐ once every three months  
☐ at other times (what?).....

.....  
(signature of the leader of the  
interdisciplinary team)