Planning and Conducting a Best Practice Assessment of Community Response to Domestic Violence

Criminal Justice System Response:

Emergency Communications (911) & Police Patrol

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Another Praxis International Tool for Change-Oriented Advocacy
Supporting survivors' efforts to secure safety, recovery, rights, and autonomy while also working to reform the social institutions, public policy, and community norms that support battering and other forms of violence against women.

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Criminal Justice System Response: Emergency Communications (911) and Police Patrol

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Praxis International is a nonprofit research and training organization that works toward the elimination of violence from the lives of women and children. Praxis' methods of Institutional Analysis, Safety and Accountability Audits, and Domestic Violence Best Practice Assessment have been used by communities across the country to examine the responses to domestic violence and sexual assault in the criminal and civil legal systems, advocacy programs, supervised visitation, and child protection.

Find additional tools for assessing institutional practices in response to violence against women at: http://praxisinternational.org/institutional-analysiscommunity-assessment-2/

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Introduction

For the past thirty years, communities across the country have been defining and implementing reforms in the criminal justice system response to domestic violence. Initiated by the battered women's movement, attention to violence against intimate partners has become commonplace among police, prosecutors, courts and probation agencies, joined by community advocates, victim services organizations and batterer intervention programs. The landscape of community response looks very different in 2010 than it did in 1980. There is an expectation of coordination and collaboration. Working relationships between advocates and police are matter-of-fact in many communities. Key intervening agencies often have written policies and protocols in place. State legislatures have enacted laws that require certain actions and accountability by entities in the criminal legal system. Since 1995, the Violence Against Women Act has provided grants that support a wide range of activities that emphasize "a coordinated community response from advocacy organizations in partnership with the criminal justice system [as] critical to reducing violent crimes of violence against women and enhancing victim safety and offender accountability."[1]

Many communities can now look back on a coordinated community response that spans twenty years or more. Still others are relatively new to the linkages, communication, relationships, and policy and practice changes that characterize a "CCR." Regardless of where a community sits on this continuum, the ever-present question is: How are we doing? Are we making things better or worse? Are we centralizing and strengthening safety for victims? Do our efforts enhance or diminish offender accountability? What about the accountability of community agencies and systems for their response? What is the best approach to…?

This Best Practice assessment guide has been designed to assist emergency communications (911), police patrol services, and CCRs in answering such questions. A companion guide outlines a similar process for examining police follow-up investigations and prosecution charging decisions. This guide is not the only tool available, and may not be the best fit for your agency or community, as we will address shortly. It draws on the accumulated experience of many communities,

[1] Program Overview, Grants to Encourage Arrest Policies and Enforcement of Protection Orders Program, Office on Violence Against Women, http://www.ovw.usdoj.gov/arrest_grant_desc.htm.

particularly those that have completed a Safety and Accountability Audit (Safety Audit) of 911 and patrol responses over the last fifteen years.[2] It reflects an analysis of criminal justice system reforms related to domestic violence and the sometimes unintended negative consequences of those reforms. It distills that information into specific guidelines for practice in the crucial first steps in the criminal justice system's response to domestic violence–related crimes: 911 calls and the on-scene patrol response.

This assessment guide is built around best practices that reinforce the essential characteristics of intervention in domestic violence that maximizes safety for victims, holds offenders accountable while offering opportunities to change, and sets an expectation of agency and practitioner accountability to one another and to victims and offenders. These characteristic include:

1. Adhere to an interagency approach and collective intervention goals.
2. Build attention to the context and severity of abuse into each intervention.
3. Recognize that most domestic violence is a patterned crime requiring continuing engagement with victims and offenders.
4. Ensure sure and swift consequences for continued abuse.
5. Use the power of the criminal justice system to send messages of help and accountability.
6. Act in ways that reduce unintended consequences and the disparity of impact on victims and offenders.[3]

[2] Approximately fifty Safety Audits have been conducted since 1995, examining diverse aspects of institutional response to domestic violence, including the entire range of criminal justice system interventions in domestic, from 911 through conditions of sentencing; civil orders for protection; and supervised visitation and safe exchange.
[3] See Appendix 3, "Foundations of Effective Intervention."

Approaches to Evaluating Practice

A CCR or individual agency responding to domestic violence crimes can use various methods to evaluate and inform its intervention practices. The Best Practice assessment presented in this guide is an approach at one end of a continuum of complexity. While the three different forms of evaluating practice described in the following section have much in common, they vary significantly in the depth and breadth of their attention and inquiry. Each has different features and different limitations as a tool for evaluating a CCR.

The ***Best Practice Assessment*** presented here is a relatively quick review of the response to domestic violence–related cases, using checklists of core practices. These core practices have been identified after working closely with Office on Violence Against Women (OVW) grantees and other communities, particularly those that have established coordinated intervention practices and many that have completed Safety Audits. The assessment has been developed to assist communities where a Safety Audit is currently not viable because of inadequate resources, limited organizational capacity, or challenging local conditions, such as interagency tensions or lack of trust. The process involves a relatively narrow scope, small number of participants, limited data collection, and little direct consultation with victims of abuse. It relies heavily on a guided review of the official records, such as 911 calls and patrol officers' incident and arrest reports.

The ***Safety and Accountability Audit*** is an in-depth examination of how work routines and ways of doing business strengthen or impede safety for victims and accountability of offenders and intervening systems. A trained interagency team conducts interviews and observations with practitioners who are skilled and well-versed in their jobs. The team also analyzes case files, policies, and other documents. A Safety Audit is grounded in focus group discussions or other interviews with victims of battering. It seeks to uncover the gaps between what people need to craft safety and strengthen accountability, and what intervening systems provide in their responses. The Safety Audit also introduces and reinforces new ways for interveners to work together. A Safety Audit examines one or more points of intervention in depth and seeks to make visible any contradictions between the assumed response and the actual response. To be successful, this approach requires sound working relationships and a high level of trust between community partners. A Safety Audit is a tool for

exploring more complex questions that go beyond matters of routine practice, such as examining assumptions and theories about domestic violence or disparities in intervention based on social standing.

The ***Blueprint for Safety*** is an approach to evaluating and revamping an existing coordinated community response by examining and subsequently rewriting existing policies and protocols using the Blueprint standards. The Blueprint is essentially a set of plans, but plans drawn with meticulous attention to the details of interagency case processing in domestic violence–related cases. To become a "Blueprint Community," requires a large measure of political will among criminal justice system agencies and advocacy organizations. Agency leaders, practitioners, and victim advocates must be able to collaborate in assessing, revising, and writing each agency's policies and protocols. They must be positioned to evaluate and resolve differences according the Blueprint's foundational principles: (1) adhere to an interagency approach and collective intervention goals; (2) build attention to the context and severity of abuse into each intervention; (3) recognize that most domestic violence is a patterned crime requiring continuing engagement with victims and offenders; (4) ensure sure and swift consequences for continued abuse; (5) use the power of the criminal justice system to send messages of help and accountability; and (6) act in ways that reduce unintended consequences and the disparity of impact on victims and offenders.[4]

The following grid provides a snapshot of each approach and considerations in determining which might be the best choice for a particular community and its local conditions. In deciding which approach is the best fit for your community, first determine what level of coordination exists in the overall response to domestic violence. Use Introduction – Attachment 1, Three Levels of Interagency Response to Domestic Violence, to guide that review and conduct an appraisal of the capabilities in place, as well as likely challenges. The Best Practice Assessment can be useful to a community at any level of interagency response. For the Safety Audit or the Blueprint to be successful, however, the features of coordination described in levels two and three need to be largely in place.

[4] Information about the Safety and Accountability Audit and the Blueprint for Safety can be found at www.praxisinternational.org.

Which Approach is the Best Fit for Your Community?		
Method	**Features**	**Best Fit When…**
Best Practice Assessment	▪ Quick; completed over a series of 3 to 5 meetings ▪ Conducted by a small team ▪ Limited data collection: review of reports or case files against a checklist of recommended practices ▪ Focus on one or two agencies versus system ▪ Little direct consultation with victims of abuse ▪ May not need or result in a written product, such a report	• Limited time • Limited personnel available to participate • Challenging local conditions, e.g., mistrust, lack of solid partnerships and working relationships between key criminal justice system agencies • A single agency (e.g., 911 center or police department) wants to examine its own practices, regardless of the extent of existing coordination or the willingness or ability of other agencies to join in an assessment • Examining a narrow scope of intervention, e.g., only 911 calls or police patrol response • The skill, ability, or time is not available to conduct a group analysis of information or produce reports or other products of such an analysis • Agency or CCR seeks a “tune up” following a previous Safety Audit

Which Approach is the Best Fit for Your Community?		
Method	**Features**	**Best Fit When…**
Safety & Accountability Audit	▪ Conducted over a period of months; typically, 6 to 12 ▪ Trained interagency multidisciplinary team of practitioners ▪ Wide data collection, including focus groups, individual interviews, observations, and text/file analysis ▪ Guided by a coordinator ▪ Examines multiple points of intervention, agencies, and systems ▪ More complex level of analysis that examines how features of institutions shape practices ▪ Anchored in consultation with victims of abuse	• Sufficient time to plan and conduct the Safety Audit • An interagency multidisciplinary team can be readily assembled and trained • Trust, skills, and abilities exist within the team to critically analyze information, identify and articulate safety and accountability issues, and make recommendations to address those issues • Strong working relationships and trust between key players and between criminal justice system agencies and community advocates • Following an initial review of practices using the self-assessment • As a prelude to establishing a Blueprint Community • To explore more complex questions that go beyond routine practice

Which Approach is the Best Fit for Your Community?		
Method	**Features**	**Best Fit When…**
Blueprint for Safety	▪ Long-term commitment to evaluation & implementation ▪ Commitment from all key criminal justice system agencies ▪ Central role for community advocates in shaping criminal justice system policies and protocols ▪ Multi-agency process ▪ Agreed-upon agency and designate person organizes the work ▪ Rests on previous examination of the community response ▪ Data collection activities ▪ Focus on evaluation and revision of existing policies and protocols ▪ Meaningful consultation with community members who are most impacted by criminal justice system and public policies	• Prepared to review and write policy and procedure for each step of case processing • Way of implementing Safety Audit findings and recommendations • Key criminal justice system leaders are committed to a cohesive approach • Key leaders agree that the Blueprint Principles will guide intervention at each step • Agreed-upon central role for advocates to comment on and help shape criminal justice system policies and protocols • At least one agency and designated person will act as overall coordinator • Can establish a working committee with representation from each agency • Willing to make a long-term commitment to ongoing monitoring and evaluation • A designated entity has sufficient authority and resources to monitor and actively sustain the Blueprint

How to Use the Best Practice Assessment Guide

This guide has been prepared for those who are planning or coordinating an assessment of the 911 and/or police patrol response to domestic violence. With its companion guide, a CCR has available to it ways to examine best practices at four key points of criminal justice system intervention: (1) 911 call-receiving and dispatching, (2) patrol response, (3) police follow-up investigations, and (4) prosecution charging decisions. Your community or agency may be interested in only one of these areas or it may want to examine multiple points of intervention. Select tools and materials according to the parameters of your review.

Regardless of the focus of your assessment, it can be helpful to have some familiarity with the broader content of recommended practices for 911 through charging, which can be gained via reviewing both assessment guides and the materials specific to each point of intervention. The areas of practice included in the guides—911, patrol, investigation, and charging—are highly interconnected. Responding patrol officers count on accurate details and descriptions from dispatchers and call-takers. Investigators can expand on the information and evidence gathered at the scene, but often cannot recreate or retrieve what 911 and patrol might have missed in the initial response. Prosecutors rely on each practitioner who precedes them to ask the right questions and gather the right information in order to support charging decisions that best support victim safety and offender accountability.

The guide includes general tasks and tools related to the broad steps involved in conducting the assessment:

1. Organize and prepare.
2. Map and examine case processing.
3. Report findings and recommend changes.

It includes time estimates and agendas for a process that can be completed in three to six months, from initial planning to recommendations for change. It includes a specific checklist for each point of intervention addressed in the guide, plus templates for organizing and reporting the results of the assessment. Two workbooks, one for the 911 response and one for police patrol, include instructions and tools for analyzing case records, analyzing agency policies, and preparing findings and recommendations.

Introduction – Attachment 1: Three Levels of Interagency Response to Domestic Violence and Stalking Cases

[Adapted from a publication by Graham Barnes, Battered Women's Justice Project, November 2009; used with permission; www.bwjp.org.]

The purpose of interagency approaches is to improve safety and autonomy for victims and reduce offender's opportunity and inclination to harm victims. Many practitioners who work with domestic violence and stalking cases believe they have a "coordinated community response" (CCR) to domestic violence. Many communities will have elements of each level described here. This is not a prescription for CCR development, but rather an observation of how different communities have evolved. This is a discussion guide to encourage deeper interagency work between government and community agencies. Consider what elements your community has, and what helps and hinders further development.

[1] Almost all CCRs have *level one capabilities*; this can mean:

- ❒ Several of the key agencies (e.g. community based advocates, law enforcement, prosecution, criminal and civil court staff, judiciary, probation, batterer programs, sometimes child protective services, sexual assault programs) have shared policy and procedures, and attend regular interagency meetings.
- ❒ Most CCR work is done in interagency meetings, based on practitioner's ideas for solutions.
- ❒ There is informal support for the CCR from some agency heads.
- ❒ There may not be a paid CCR coordinator, but some practitioners informally take leadership, as well as their assigned work.
- ❒ Meetings are mostly cordial; practitioners are learning about each other's roles.
- ❒ Relationship-building across agencies supports problem solving with difficult or dangerous cases.
- ❒ Training raises awareness of the dynamics of domestic violence and stalking, and the value of working together.
- ❒ Representatives of marginalized communities may be invited to meetings.
- ❒ The CCR has a plan; produces some resources; and promotes community awareness of domestic violence and stalking.

However:

- ❒ Some key agencies may not be routinely participating, or are hostile.
- ❒ Practitioners do CCR work on top of their regular work.

- ❒ Advocacy programs believe there is inadequate commitment from other agencies, and they may be resented for criticizing other agency's work and forcing collaboration.
- ❒ When CCR partners critique each other's work, there may be ill feeling, and/or problem solving is blocked.
- ❒ The needs of culturally marginalized groups may not be identified or addressed. Domestic violence coordination may not account for related issues such as stalking; abuse in later life; sexual violence; child abuse.

[2] Some CCRs have most of the level one features, but may also have *level two capabilities*; this can mean:

- ❒ A paid coordinator follows up on tasks set by CCR meetings and coordinates small working groups to fix intervention "gaps."
- ❒ CCR members observe and learn the detail of other partners' work.
- ❒ Previous victims of abuse are invited to assess the CCR effectiveness.
- ❒ There is some effort to understand the specific problems experienced by marginalized communities, to improve services.
- ❒ An interagency tracking and monitoring mechanism enables CCR partners to accurately assess the effectiveness of the many parts of intervention.
- ❒ CCR partners can critique each other's role without it becoming personal or involving public humiliation.
- ❒ Interagency working groups develop agency policy and procedures informed by their own experiences and promising practices from other communities.
- ❒ Training is mostly discipline-specific and built around implementing new policies and procedures.
- ❒ Some agency heads directly support the CCR by: freeing staff to do CCR problem solving; seeking funding for CCR projects; encouraging problem solving that is informed by front line practitioners.

However:

- ❒ CCR coordinators may spend more time coordinating meetings and encouraging attendance than fixing gaps in the system.
- ❒ Marginalized communities have few opportunities to give feedback and shape changes.
- ❒ New "system gaps" may emerge as staff changes, problematic new practices, and inadequate monitoring reduce the CCR effectiveness.

[3] A few CCRs have most of the features in levels one and two, but may also have *level three* capabilities; this can mean:

- ❒ Diverse focus groups of persons the CCR intervenes with are routinely used to evaluate and inform changes in policy and practices.
- ❒ Marginalized community members have their specific needs addressed and built into the CCR process.
- ❒ Each intervention point has been examined to ensure that workers are coordinated by their agencies and inter-agency agreements to maximize victim safety and offender/system accountability.
- ❒ The CCR produces innovative policies, procedures, written resources, and training activities, and shares them with other communities.
- ❒ Agency representatives who have been involved in system change become co-presenters and trainers capable of helping other communities.
- ❒ The CCR has reinvented itself as previous system changes have become outdated or lost their effectiveness.
- ❒ Government agency practitioners are trusted by their CCR partners to initiate system changes that ensure victim's experiences guide new practice.
- ❒ The CCR is active in community organizing to raise awareness of domestic violence, stalking and related abuse issues - and partners with community agencies beyond the criminal justice system.

Step 1: Organize and Prepare

Task 1: Assign a coordinator

While the Best Practice Assessment anticipates less time and personnel than a Safety Audit, a coordinator will still be needed to oversee the organizational details and logistics. Coordination tasks include scheduling meetings, collecting policies and case material to review, and reporting out the results of the assessment. The coordinator is also a member and facilitator of the assessment team.

The coordinator's role will likely require about fifteen days of time over the three- to six-month duration of the assessment. This includes time spent as a team member, as well as overall coordination of the process. The tasks of coordination can be fulfilled by a temporary reassignment of one person or can be shared between two or more members of the team. The key requirement is that someone is responsible for organizing the process and preparing and communicating with the work group. The coordinator will likely come from the agency that is the focus of the assessment; this connection will help expedite gathering the agency's policies and files for review. Where a more established coordinated community response entity is using the self-assessment, the CCR coordinator might fill this role. If the assessment includes both 911 and patrol, or expands to include investigations and charging, the coordination will require additional time.

The coordinator will:

- ✓ Read the guide and become familiar with the tools and instructions.
- ✓ Collect pertinent laws and agency policies and protocols.
- ✓ Identify and gather agency "case files" (e.g., 911 calls or police incident and arrest reports) for the work group to read.
- ✓ Schedule and facilitate work group meetings.
- ✓ Provide the work group with necessary copies and materials.
- ✓ Keep a written record of the work group's discussions and findings.
- ✓ Prepare findings and recommendations to relay to the agency head(s) and the CCR, if applicable.

Task 2: Select the assessment team

The Best Practice Assessment assumes that a small group of practitioners will do the work. The process was designed to benefit from the dialogue, reflection, and discussion that is possible with a small set of experienced practitioners, rather than relying on the limited perspective of a single person.

The assessment team or work group consists of three to five members, or more, depending upon local needs. While the team could include only personnel from a single agency, we recommend that it include experienced, skilled practitioners and some level of interagency representation, plus at least one member who is a community-based advocate for victims of domestic violence (see Step 1–Attachment 1). This advocacy perspective is critical in a process that does not involve any direct consultation with victims of abuse, such as the focus groups that are characteristic of a Safety Audit or the Blueprint for Safety. Similarly, a degree of interagency involvement helps to examine the particular process under review in relation to how it impacts what happens before or after it. For example, an assessment focused on police patrol would try to include representation from 911 and prosecution.

The team will need to meet three to five times over the course of the assessment, for a total estimated time commitment of approximately five days, depending upon how the work is structured. If the assessment is applied to more than one point of intervention—examining 911 and patrol, for example—the size and configuration of the work group will need to reflect that scope (see Step 1–Attachment 1). A single interagency work group could be used, or several groups, each specific to one of the key points of intervention under review. The broader in scope, the more likely it is that the assessment will require more time.

Work group members will:

- ✓ Read policies, protocols, and case records, as provided by the coordinator.
- ✓ Attend all scheduled meetings, according to the option selected for completing mapping and case processing activities.
- ✓ Complete all assignments to review case files or other documents.
- ✓ Use the assessment worksheets to take notes on each assigned case.
- ✓ As a group, articulate findings and recommendations that will be relayed to the agency head(s) and the CCR, if applicable.

Task 3: Select a structure and timeline

Will the team complete all of its work together during a series of four or five day-long meetings? Will members complete assignments on their own and review what they have learned during a series of shorter meetings? Will the group meet one morning each week until the assessment has been completed? Selecting an approach early on will make it possible for work group members to set aside the necessary time and to lock in a schedule of activities. The specific structure is less important than the commitment to follow through and complete the assessment in a timely way. This guide recommends a process (see Step 2: Map and Examine Case Processing) built around four to five meetings, with specific tasks to accomplish in each meeting. The length and frequency of those meetings can be adjusted to best fit local needs. The assessment could be accomplished in about a month's time or be conducted over a span of six months.

Task 4: Develop and implement a confidentiality agreement

The assessment team will examine agency case files and will identify areas of practice that need to be revised or discontinued, some more urgently than others. Most likely the team will use 911 recordings and incident and arrest reports that are un-redacted, as noted above. The team is also likely to have some degree of interagency composition. Because it will have access to detailed information about specific cases, individuals, and practitioners, it is crucial that its members agree to a set of ground rules governing how information will be treated and when and to whom it will be released. Step 1–Attachment 2 is a template that can be used to develop a confidentiality agreement for the assessment. If the process is being conducted strictly in-house, within a single agency and without the involvement of other practitioners, such an agreement may not be necessary, although those planning the assessment may want to consider whether it would nevertheless be important to emphasize a certain level of confidentiality.

Task 5: Gather and organize policies and case files to review

This is one of the coordinator's primary assignments. The extent to which this material is compiled and well-organized has much to do with how readily the team can complete the assessment. Each team member should have a folder or binder that includes:

- **Policies and protocols governing the agency's response to domestic violence**

  Include screening forms, checklists, risk assessment tools, or similar items. For example, if the assessment concerns the emergency 911 response, team members should have a copy of the 911 center's policy and any guides or cards or checklists that call receivers and dispatchers use in their work. If the assessment is examining the police patrol response, the team should see any policies or orders, pocket cards, and report forms.

- **A sample of case records relevant to the scope of the assessment**

  For example, if the team is examining the 911 response, assemble several 911 recordings, plus recordings of the dispatch radio transmissions to officers, and possibly transcripts of the recordings, if available. If assessing the police patrol response, provide the team with incident and arrest reports.

- **A set of case analysis worksheets for the case records under review** *(one worksheet per record)*

  Appendices 1 and 2 include detailed Best Practice worksheets and instructions for each primary type of record that an assessment team might review: 911 calls and dispatch transmissions; and patrol incident and arrest reports. Team members use the worksheet as a guide to identify practices that are included or missing in the response. Each team member will have one worksheet per individual call or report under review.

In organizing the case record material for the team, the coordinator(s) will compile a set of records for each team member according to the following options for the case record analysis (see a full description of each option in Step 2: Map and Analyze Case Processing):

Option 1

Copy all of the calls or reports included in the review for each team member. Each member will complete an in-depth analysis of all case records.

Option 2

Copy all of the calls or reports included in the review for each team member. Each member will take a preliminary look at every case record, but pay detailed attention in each case only to specific sections of the worksheet, as assigned.

Option 3

Copy records for two cases for all team members; copy a different, distinct set of cases for each work group, according to how the team has been split up. For example, one work group of two team members gets one set of ten patrol reports; another work group gets a different set of ten reports; everyone sees reports from two of the same cases.

Assessment organizers will also need to decide in advance whether or not to redact the case material that is distributed to the team and if so, to what extent. "Redact" is a legal term meaning to make documents unidentifiable to a specific person or place. In any examination of policy and response to domestic violence cases, masking the identities of the people involved (victims, suspects, children, and practitioners) can help take the focus off of particular individuals or personalities and shift it to the practices involved. Redacting can be time-consuming and costly, however, particularly if it involves lengthy reports. It is also beyond the reach of almost any community to redact 911 recordings. Each assessment project will consider local needs and decide whether or not and to what extent to redact any case material. The Best Practice Assessment assumes that the case records the assessment team works with will not be redacted. The confidentiality template (see Step 1–Attachment 2) has been designed accordingly, with its emphasis on keeping case information confidential and secure and not identifying or discussing any person named in the case outside of the team's meetings. The exception to using un-redacted material is that anything used in a report or presentation or setting beyond the team's internal discussions must first be redacted.

Step 1–Attachment 3 is a guide to assembling the types of case records to include in the Best Practice Assessment, according to the point of intervention under review, along with recommendations for the sample size and any special considerations in using the material.

Step 1 – Attachment 1

Scope and Team Configurations of a Best Practice Assessment	
Scope	**Team Members**
Note: These are suggested configurations. A team's membership and size will reflect the scope of the assessment and local needs. One team member will be the designated assessment coordinator.	
911	One or more 911 call takers and dispatchers, patrol officer(s), and a community advocate Why this mix? 911 personnel will be most familiar with the expectations, policies, and protocols that apply at this point of intervention. In turn, the information that 911 gathers and relays has much to do with what responding officers know about the reported incident and elements of potential danger to themselves and those at the scene. One or more patrol officers will help provide insight into any communication and linkages that need to be improved between 911 and patrol. A community advocate can listen to calls and ask questions from a reference point of concerns that victims raise about their safety.
911 and police patrol	One or more patrol officers, a 911 call taker or dispatcher, a community advocate, and possibly a police investigator and a prosecutor Why this mix? This team looks very much like one that would examine 911 practices, but with an emphasis on patrol involvement. It might also include an investigator and/or prosecutor, as their work is impacted by the 911 and patrol response and they could ask questions from that perspective. The community advocate is included for the reasons cited previously.
911, patrol, investigation, and charging	One or more 911 call takers or dispatchers, patrol officers, investigators, prosecutors, victim-witness specialists, and community victim advocates. This is an ambitious scope for a Best Practice Assessment. It would most likely require organizing the team into smaller work groups, with each group focusing on that particular point of intervention and with the corresponding configuration described previously. *(See the companion guide and assessment tools for police follow-up investigations and prosecution charging.)*

Step 1 – Attachment 2

Best Practice Assessment: Sample Confidentiality Agreement

The Best Practice Assessment of the [agency name(s)] response to domestic violence will involve reviewing case records and other documents. To ensure the integrity of the process, respect the role of individual agency employees, and protect the privacy of community residents, assessment team members agree to the following:

1. The material collected and distributed to team members is intended only for use in conducting the Best Practice Assessment and to inform the team and policy makers on the need for changes in intervention practices.
2. Team members will keep any materials containing case information confidential, in a secure location, and will return materials to the assessment team coordinator as requested on designated dates.
3. Team members will not identify or discuss any person named in any case materials, except as necessary within assessment team meetings.
4. Team members will not remove any non-public forms, files, or other records containing personal identifying information.
5. Team members will adhere to agreed-upon procedures for releasing information about the assessment to agency administrators.
6. Team members are not authorized to release or discuss any details of the assessment to anyone outside of the [agency name(s) or CCR name].

Team Member Signature: _____

Print Name: _____ Date:_____

PLEASE RETURN THE SIGNED ORIGINAL TO *[designated agency contact]*

Step 1 – Attachment 3

Assembling Case Records to Analyze in a Best Practice Assessment: 911 and Patrol	
Scope	**Case Record Type and Suggested Quantity**
Note: Complete an analysis of the lower number of records listed first. If time permits, or if questions emerge that require examination of additional cases, add cases to the review in increments of five to ten.	
911 call receiving and dispatching	✓ 15 to 50 audio recordings of domestic violence–related calls to 911 (and, if possible, a printed transcript of the call) ✓ Recordings of the corresponding contact between dispatchers and patrol officers for each call (typically referred to as "CAD" or computer-aided dispatch), if available ✓ Printed copies of the CAD report for each call analyzed
Police patrol response	✓ 15 to 50 patrol incident or arrest reports for domestic violence–related cases ✓ Arrest and non-arrest cases (split the sample)

If the scope of the assessment includes more than one area of practice (e.g., 911 and patrol response or patrol response through charging), to the extent possible, utilize records for the same set of cases and follow them as they proceed from one point of intervention to another. For example, depending upon the scope of the assessment, analysis of a case that first appears as a 911 recording might also include the patrol reports, investigation reports, and prosecution file associated with that case.

(See the companion guide and assessment tools for police follow-up investigations and prosecution charging.)

Step 2: Map and Analyze Case Processing

Discovering how domestic violence cases are taken up at the point of intervention under review is at the heart of the Best Practice Assessment. Here the assessment team seeks to clearly understand how the response is organized and to what extent recommended practices are in place or missing from that response. Three primary tools are involved:

1. **Mapping** the steps involved in processing a domestic violence case

   Mapping involves a group discussion that utilizes the expertise of members of the team who are most familiar with the process under review. For example, if the assessment is looking at 911 practices, the call taker(s) and dispatcher(s) are the information sources. If the assessment concerns patrol response, the officer(s) will outline the process. Whatever the focus of the assessment, the role of the other team members is to ask questions that will help develop a thorough understanding of how domestic violence cases are taken up for official action at that point. Mapping is particularly useful in understanding the steps involved in the official response to the case, how practitioners are prepared and guided in their response, whether and how they are linked with other interveners, and how they pay attention to the context and severity of abuse.

2. **Case record analysis**

   Analysis of the official account or "case file"—the 911 call or patrol report—happens via reading a sample of case records against a checklist of recommended practices. The team examines a sample of calls or reports according to the parameters of the assessment, reading individually and then pooling the results to complete an analysis of gaps in practice. Case file analysis helps the team gauge the extent to which recommended practices are in place, understand how interveners are paying attention to the context and severity of abuse, and examine the extent to which domestic violence is understood as a patterned crime requiring continuing engagement with victims and offenders.

3. **Policy analysis**

   Policy analysis is the final tool to help the assessment team discover the extent to which current practices reflect best practices. Policy regulates what practitioners must do and the boundaries of their discretion and responsibility. The team will be looking at whether and how policy has been constructed to reflect principles, procedures, linkages, and monitoring that are consistent with best practices. By addressing policy analysis towards the conclusion of information-gathering activities, the team will get a more complete picture of what practitioners assume is happening in domestic violence cases (mapping), what is actually happening (case record analysis), and where and how policy needs to change to produce a response that reflects best practices as completely as possible.

This process of mapping and critical reading occurs over a series of meetings, with some variation in length and number according to how the team organizes the case file analysis. Two options for organizing this phase of the work are presented in the following grid. While the assessment has been designed to be completed within no more than five sessions of data collection and analysis, in planning and organizing your own project you are free to expand on that number according to local needs. An assessment that centers on a single point of intervention, such as the 911 response or the patrol response, will be the best fit for the suggested time frame. An assessment that reaches across multiple agencies will require additional time.

Organizing Mapping and Case Record and Policy Analysis

Option A

The assessment team meets initially to map case processing. Members complete the analysis of case records outside of the group and meet briefly several times to check in on their progress and address any questions that have come up. They meet a final time in a one-day meeting to sum up what they have discovered and make recommendations.

Schedule:

Meeting 1

- Time: half-day
- Tasks: Map case processing; identify follow-up questions and assign one more questions to each team member; distribute case materials and worksheets; orient the team to the case file analysis process.

[Assessment team members analyze case material on their own in between scheduled meetings.]

Meetings 2 through 4

- Time: 2 hours each
- Tasks: Check in on case record analysis; discuss cases completed since the last meeting; follow up to questions generated by the mapping; address any questions; complete the policy analysis.

Meeting 5

- Time: 1 day
- Tasks: Report out on results of case record analysis, identify gaps in recommended practices, and recommend changes.

Option B

All of the work is completed in a series of one-day meetings. Assessment team members map case processing, read and discuss case materials, analyze agency policies, and prepare findings and recommendations in these meetings.

Schedule:

Meeting 1

- Time: 1 day
- Tasks: Map case processing; distribute case materials and worksheets and orient the team to the case file analysis process; analyze case records together.

Meetings 2 through 4

- Time: 1 day per meeting
- Tasks: Analyze case records; read and discuss each case assigned for the meeting; report on follow up to questions generated by the mapping; complete the policy analysis.

Meeting 5

- Time: 1 day
- Tasks: Complete analysis of case records and sum up results, identify gaps in recommended practices, and recommend changes.

Note: Adjust the number of meetings up or down according to local needs and the scope of the assessment, complexity of the case records involved, and pace at which the team can complete the case file review.

Step by Step: Mapping Domestic Violence Case Processing

1. Select a format to record the mapping that can be brought to each subsequent team meeting for reference and revision as more information becomes available; for example: flip chart paper, a long wide sheet of paper taped to a wall, electronic copy board.

NOTE: Step 2 - Attachments 1 through 3 illustrate different case processing maps. Your map does not need to be printed, however, and most likely you will not have the time to take that extra step. The map will be just as useful to the team, and perhaps most useful, if it is a kind of poster that can be carried to and displayed at each meeting.

2. Read any applicable policies and protocols for the point of intervention that is being mapped.

3. Direct questions to the team members who are most involved as practitioners at the point of intervention under review. For example, if the assessment concerns 911, direct questions to the call receivers/dispatchers.

4. Start with this question: how does a domestic violence incident first come to your attention? Diagram the initial point of contact and first step in case processing.

5. Ask: then what happens; what's the next step? For each step, ask the following kinds of questions to develop specific details about case processing:
    a. What happens at this point?
    b. Who is involved and how?
    c. What kinds of policies or protocols govern this step?
    d. What kinds of forms or reports are involved?
    e. Where do those forms and reports go; who gets copies, and how?
    f. What kind of inquiry into the type and severity of violence occurs?
    g. What kind of messages regarding help for victims and offender accountability get relayed?

6. Encourage questions. Mapping benefits from the team members' participation, experiences, and perceptions.

7. Identify key themes and questions that need to be answered.
    a. Prioritize questions and identify who to contact for more information.
    b. Assign each team member one or more questions to address and report back on at the next team meeting.

8. Bring the map to each team meeting. Use it as a point of reference when discussing case files and make additions or changes as new information becomes available.

Step by Step: Analyzing Case Records

Prior to listening to the first 911 call or reading a police investigation or arrest report, each team member will have received a set of case files, work sheets, instructions, and any applicable policies and protocols related to the point of intervention being studied. As discussed previously in this guide *(Step 1: Organize and Prepare)*, assembling this material is one of the assessment coordinator's primary tasks.

Decide early on which of the following approaches to the case record analysis the assessment team will use, as each option impacts how the case records will be assembled:

Option 1

Each member of the team reviews all of the calls or reports and completes all sections of the worksheet for each case. The advantage of this approach is that all members of the team are seeing all cases and paying attention to the full range of recommended practices included on the worksheets. Everyone has a common base of information to bring to the discussions.

Option 2

Each member of the team completes a preliminary review of every case record, but completes only specific assigned sections of the worksheet in detail. Each member becomes a kind of expert in paying attention to those aspects of practice. During the group discussion of each case they pool their analyses to develop a complete assessment of the response. This approach can be particularly useful with case records that involve lengthy documents, such as multiple calls or arrest reports. Everyone has a basic overview of the case, but does not have to cover the same level of detail with all aspects of practice. Each team member can focus attention on the assigned areas, rather than all of the elements.

Option 3

All team members complete a full review of two case records and discuss them together in order to become familiar with the process and develop a common base for the analysis. Then the team splits up into two or three smaller work groups, with a different set of cases assigned to each group. This approach can be a way to include more cases in the review while still providing a level of common grounding for the process and ensuring that at least two members of the larger team are familiar with any one case. Because all members have not completed at least a preliminary review of all case records, however, and therefore do not have a rudimentary understanding of each case, discussions can be more cumbersome and incomplete.

1. Review the instructions and become familiar with the worksheet(s) that will be used to guide the analysis. Worksheets and instructions specific to the following areas of practice are included in the appendices:
    a. Appendix 1: Emergency Communications (911) Workbook
    b. Appendix 2: Police Patrol Workbook

2. Listen to the first call or read the first report, without stopping to take many notes on the worksheet or jumping into the analysis.
    a. Read as if you were reading a story of the events.
    b. Let the words do the talking.
    c. Highlight what catches your ear or eye in relation to the overall response and ways in which victim safety and offender accountability are enhanced or diminished.

3. Work through the case record a second time, now paying close attention to whether and how it reflects the practices listed on the worksheet (use one worksheet per case).
    a. If sections of the worksheet have been divided among the team (see Option 2 below), pay primary attention to the sections assigned.
    b. Check off all practices that are evident in the call, report, or file.
    c. Note what is missing.
    d. Use the notes column to record additional observations, questions, or examples related to the case and the practitioner's response.
    e. Complete the case review summary at the end of the worksheet.

4. Repeat steps 3 and 4 for each case record assigned.

5. Review and discuss each case with the full team.
    a. Use a copy of the worksheet to record the results of these discussions and summarize the case analysis findings.
    b. Have this summary available when the team meets to sum up and report findings and identify needed changes.

Step by Step: Analyzing Policies

The first question to ask is whether or not there is written policy governing the 911 or police patrol response. If the answer is no, then one of the assessment team's recommendations will be for the agency and/or coordinated community response to develop policies and related protocols based on Best Practice standards. If the answer is yes, the team will include an analysis of the policy or policies in the assessment.

1. Collect all relevant policies for the point(s) of intervention included in the assessment and provide a copy to each team member.

2. Utilize the policy analysis checklist included in the workbook (Appendices 1 and 2).

3. Divide the assessment team into three. Assign one of the following sections of the policy checklist to each member or small group:
    a. Principles
    b. Procedures
    c. Monitoring

4. Each member reads the policy and completes the assigned section of the checklist. If the team has been divided into work groups of two or more members, each small group reviews the assigned section together.

5. Convene as a full team to review all sections of the checklist and discuss the policy.

6. Compile a preliminary list of recommended policy changes. The team will revisit and revise this list in concluding the assessment (see Step 3: Report Findings and Recommend Changes).

If your Best Practice Assessment includes both points of intervention, e.g., 911 and patrol response, repeat the process outlined above with each applicable policy.

STEP 2 - Attachment 1 CASE PROCESSING MAP - 911 CALL RECEIVING AND DISPATCHING

Victim (or other) calls 911

Call taker enters caller number and determines injury and jurisdiction.

Transfer to other County if caller is Township B or C

Electronically relayed to dispatch* Name, Address, Type of call

If injury, "scene security" and risk assessment first. Then transfer to "Prospect" (fire/med) for response. Call taker stays on line.

Call taker continues receiving information from caller, which is continually relayed to dispatch. Call taker stays on line as long as needed.

Fire/med gets minimal information for in progress calls.

Goes to site, waits for patrol to arrive before responding.

Dispatch enters names of victim and suspect and dispatches officer. Looks for criminal history, warrants, if requested by officer. Will enter information for patrol if relevant.

Dispatch notifies patrol by radio transmittal if immediate response is needed.

Dispatch available to look up additional information if needed by patrol, if time available.

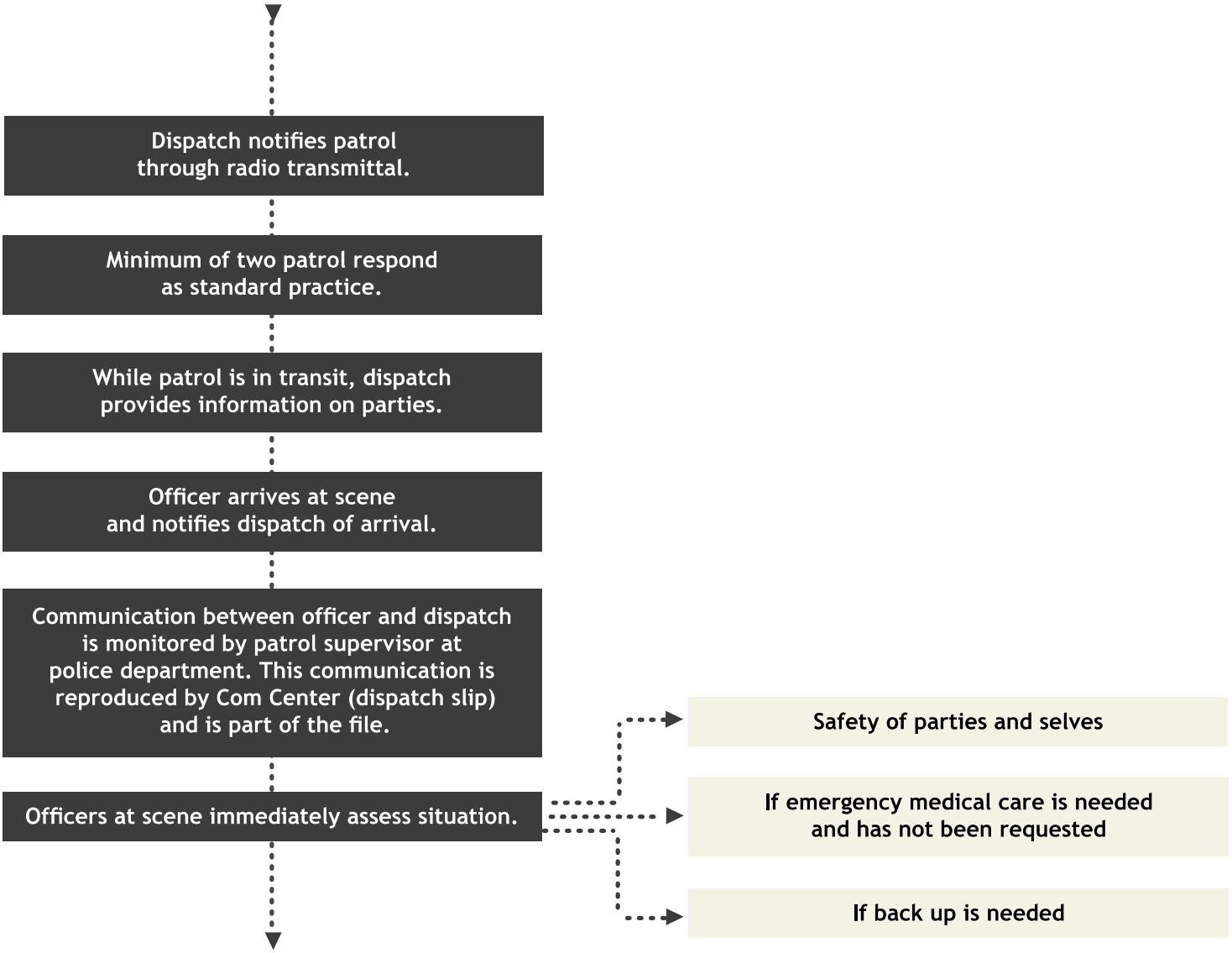
Dispatch notes communication with patrol. When patrol clears case, dispatch closes case.

A print out of communication with patrol is made and given to responding law enforcement agency. (Notes time, who made contact, and brief explanation.)

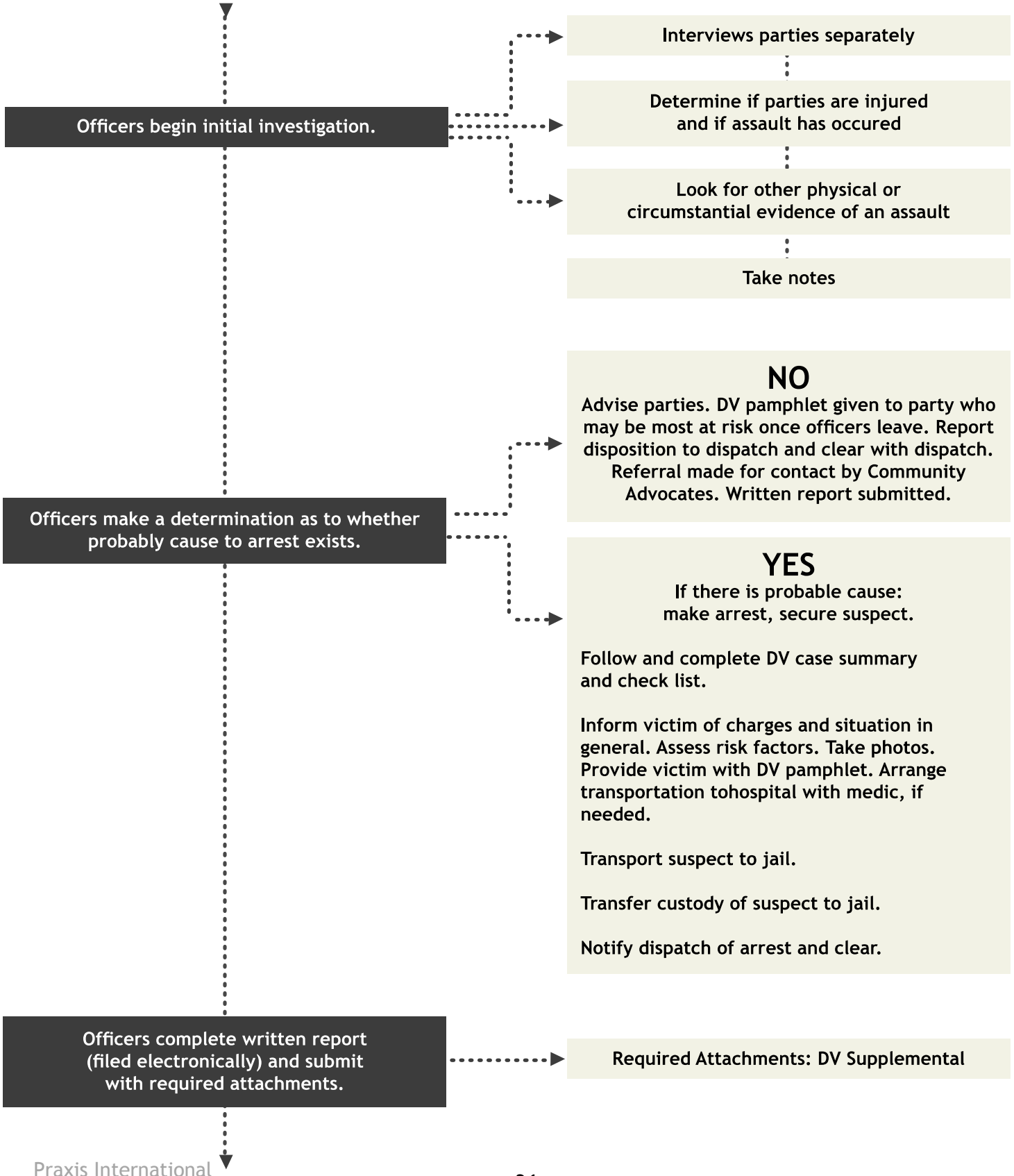
- Recordings are made of all calls to 911 and all patrol radio communications.
- Recordings are kept for 90 days.
- Com Center will reproduce (in MP3 format) 911 calls only for requesting agencies, such as prosecution.
- City Police Department has one dispatcher.
- County Sheriff, Town A Police, Town D Police, Tribal Police Agency 1, and Tribal Police Agency 2 each have one dispatcher.

STEP 2 - Attachment 2

CASE PROCESSING MAP - POLICE PATROL RESPONSE

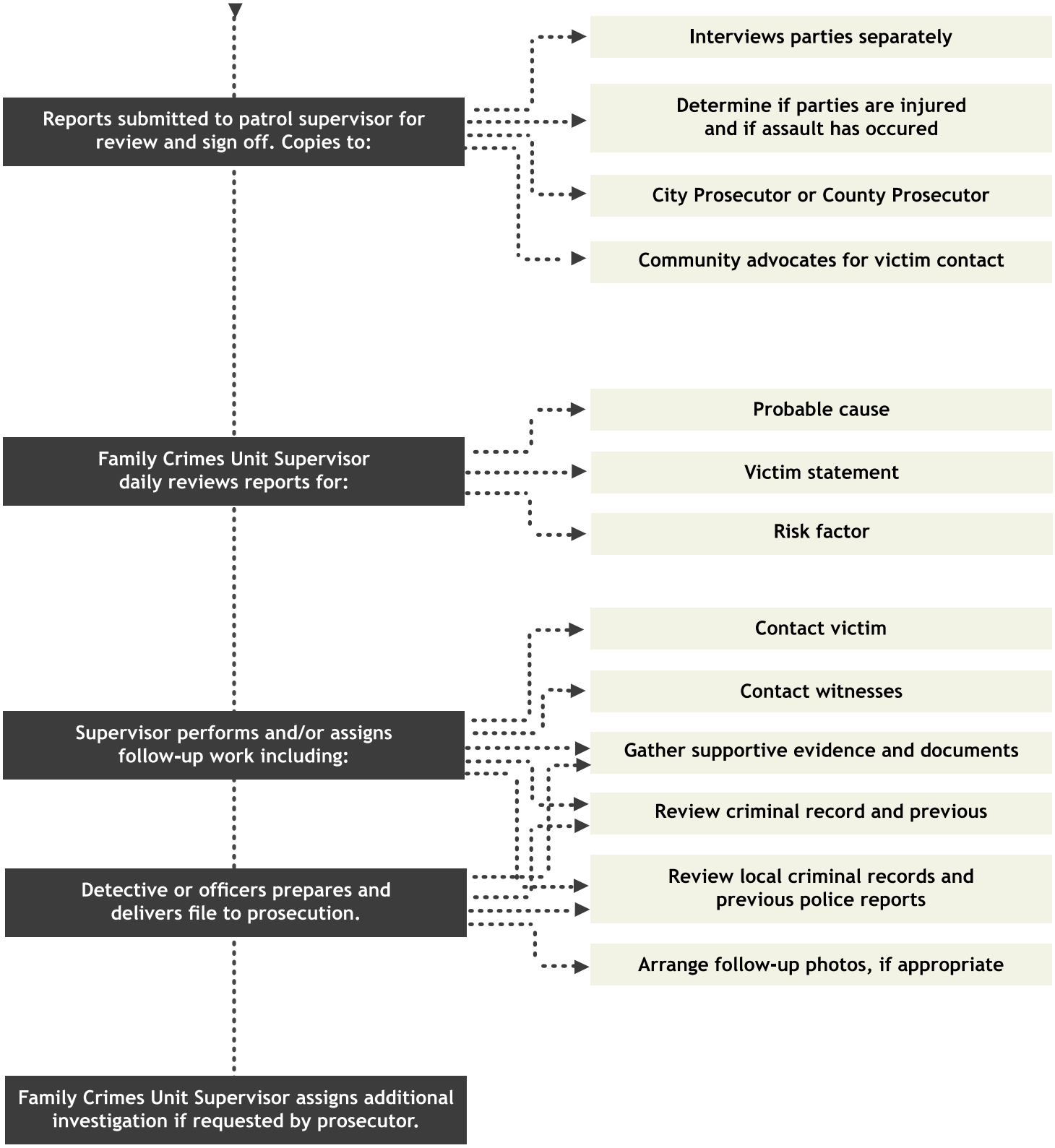


STEP 2 - Attachment 2 CASE PROCESSING MAP - 911 CALL RECEIVING AND DISPATCHING



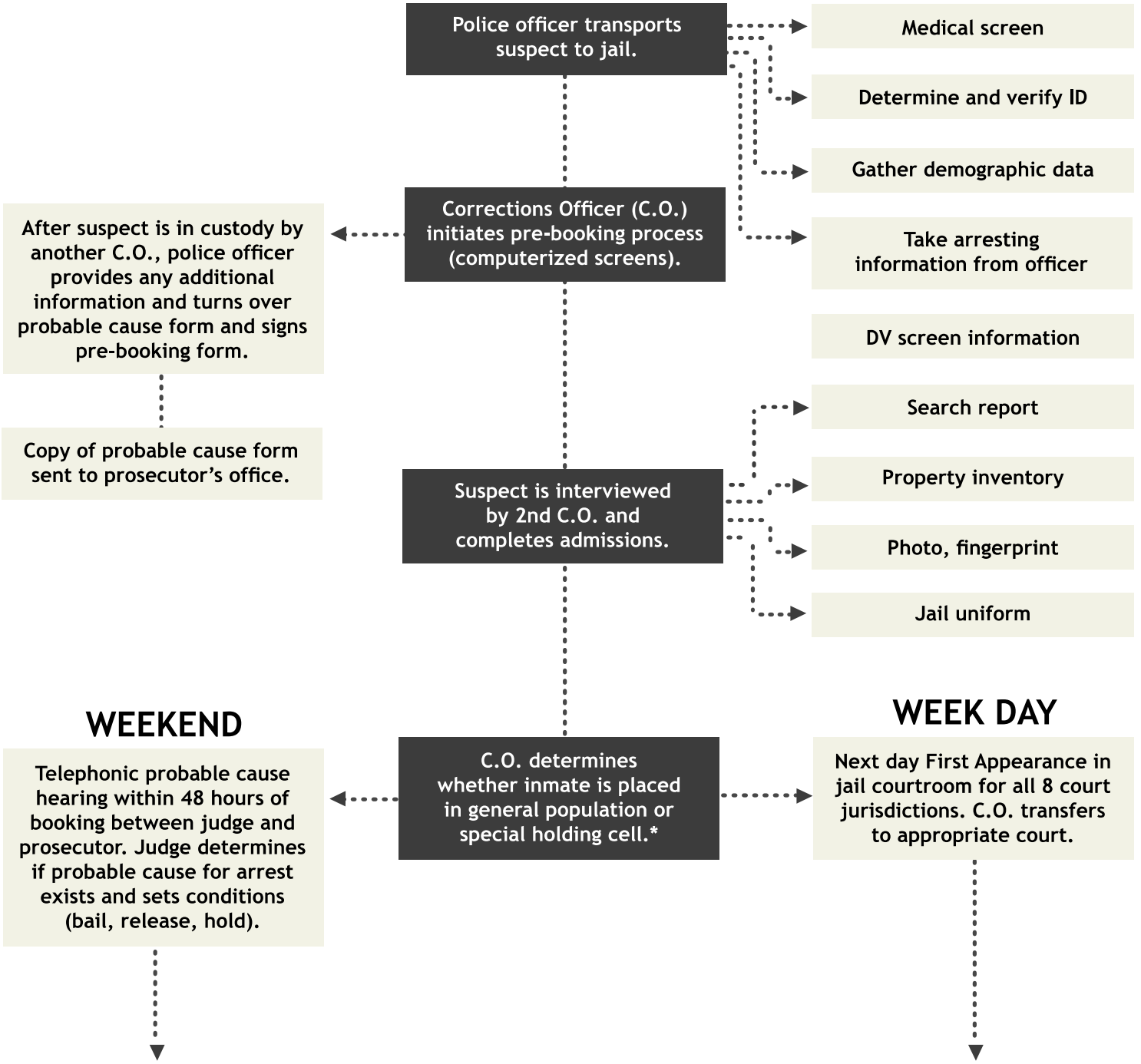
STEP 2 - Attachment 2

CASE PROCESSING MAP - POLICE PATROL RESPONSE



STEP 2 - Attachment 3

JAIL BOOKING POST-ARREST



STEP 2 - Attachment 3

JAIL BOOKING POST-ARREST

WEEKEND

Complete probable cause results form which is transferred to jail database.

If release, generally same procedure as right column. NCO may not be issued if there was determination of no probable cause.

WEEK DAY

Judicial officer determines:

Hold
Hold and bail
Release
No-contact usually issued

If hold, place back in jail

If released or bail posted, C.O. completes computerized release form, which includes prompt for victim contact. If no victim contact made must document attempts.

S.O.P for victim contract is to attempt 3 times and then release suspect.

Suspect signs Assault PR, or NCO, and it is read and explained to them. If judge has not issued a NCO, C.O. can have defendant sign form, which serves as temporary NCO.

Suspect released

*Jail can block phone so inmates cannot call certain numbers, if victims or prosecutor request in person.

Step 3: Report Findings and Recommend Changes

The assessment team draws on its map, case analysis worksheets, and policy checklist to prepare a summary and report of what it has learned and to make recommendations for change. This is not a formal or complicated report, but an account of key findings, using the corresponding template for the area of practice under review (see the workbooks in Appendices 1 and 2). The summary provides the reference point for identifying needed changes in practice, as well as highlighting where the existing response is consistent with Best Practice recommendations. At the conclusion of a Best Practice Assessment, agency administrators—those charged with making and implementing changes in an agency's work practices—have available in one place a concrete, documented account of what is in place and what needs to change.

1. Prior to the meeting, team members review all of their worksheets and notes. This includes a thorough review of the findings template and its instructions. Coming to the discussion well-prepared will help the process move as smoothly and quickly as possible. Team members should have available:

    a. Case processing map (posted in the meeting room)
    b. All case record analysis worksheets
    c. Policy analysis checklists
    d. Findings template

2. Divide the findings template into sections and the team into pairs or small groups.

    a. Assign several sections of the template to each group.
    b. Designate a note taker to record group discussions on the template.

3. Each group completes the list of findings for its assigned sections (Part1-Column A on the template).

4. Reconvene as the full assessment team and, review the findings, section by section.

    a. Each work group reports its conclusions for its assigned sections.

b. Other team members ask clarifying questions and suggest additions to the findings for that section.

c. Affirm that team members are in agreement on the conclusions in each section.

d. Identify any areas of practice where the team is not in agreement or where additional investigation is necessary in order to reach any conclusions.

e. **NOTE: Because a practice is not evident in the case record does not necessarily mean that it does not happen.** It may happen but not be documented. Refer to the case processing map and policy analysis to see whether there is an expectation or requirement for the practice. Team members may have additional information from their own experiences that address the practice in question. The team may want to recommend an expanded assessment that would include additional interviews and observations with practitioners.

It is the coordinator's responsibility at this stage to keep an account of the team's findings and recommendations for change that can be shared with agency administrators or others in the coordinated community response, as applicable. Use a blank findings template to chronicle the discussion for later distribution, according to whatever agreements govern the assessment.

5. Return to the pairs or work groups and complete any recommendations for change (Part1-Column B on the template).

6. Divide the team into three and assign one section of Part2-Policy Changes to each person or small group.

7. Reconvene as the full team and review the recommended policy changes.

8. If the assessment team is authorized to prioritize its recommendations and further develop a plan for change, complete Part 3 of the findings template.

9. Use the findings template to provide specific feedback to the appropriate agency on its response to domestic violence cases, including examples of best practices that are in place, as well as recommended changes.

10. Convene a meeting of the assessment planners, team, and agency administrators to report on and discuss the assessment's findings and recommendations.

Constructing a Plan for Change

The Best Practice Assessment has been developed to be particularly useful to communities that find it challenging to allocate the time and personnel required to conduct a more extensive examination of the emergency communications (911) and/or police patrol response to domestic violence. In that vein, the findings template has been designed to also serve as the plan, with the addition of a timeline and assignments to specific staff or work groups to take the next steps in implementing the recommended changes.

BEST PRACTICE ASSESSMENT APPENDICES

Emergency (911) and Police Patrol

APPENDIX 1: Emergency Communications (911) Workbook

APPENDIX 2: Police Patrol Workbook

APPENDIX 3: "Foundations of Effective Intervention"

Appendix 1 – Emergency Communications (911) Workbook



BEST PRACTICE ASSESSMENT – APPENDIX 1

Emergency Communications (911) Workbook

911 CALL RECEIVING AND DISPATCHING

Instructions for Completing the 911-Call Worksheet

NOTE: The worksheet includes two sections, one pertaining to 911 call receiving and one to dispatching, the two primary functions of a 911 center in relation to domestic violence calls. In larger emergency communications centers, they are typically distinct job functions assigned to different employees who may or may not move back and forth between the two positions. In smaller centers, call receiving and dispatching are often handled by the same individual, or by personnel who frequently switch back and forth between those roles.

1. Complete one worksheet per call. (Assessment team members should receive a blank copy for each call.)

2. Listen to the call first without stopping to take many notes on the worksheet or jumping into the analysis.
    a. Listen as if you were hearing a story of the events.
    b. Let the words and sounds do the talking.
    c. Highlight what catches your ear in relation to the overall response and ways in which victim safety and offender accountability are enhanced or diminished.

3. Listen to the call a second time and then turn to the worksheet
    a. If a transcript of the call is available, follow along as you listen to the call.
    b. If sections of the worksheet have been divided among the assessment team members, pay primary attention to the sections assigned.
    c. Check off all practices that are evident in the call and note specific examples.
    d. Note what is missing.
    e. Use the notes column to record additional observations, questions, or examples related to the call and the call taker or dispatcher's response.
    f. Complete the call review summary at the end of the worksheet.
    g. Listen to the call as many times as needed to thoroughly address the practices included on the worksheet.

4. Repeat all steps for each call assigned.

911 Call Review Worksheet

Call #/ID _____ Sources: (check all that apply) ☐ Recording ☐ Transcript	**Length of call (minutes)** _____

PART 1: RECEIVING CALLS

Best Practices in RECEIVING 911 Domestic Violence Calls	Notes NA = Not applicable in this call NP = Not possible in this call (explain)
Instructions: Check all practices evident in how the call is handled; note specific examples.	
1. Communicate effectively and respectfully with callers.	
❒ Respond to callers who are unable to communicate or to communicate clearly. ○ Slow down ○ Simplify language ○ Adjust response to caller's fear, injury, disability, intoxication ○ Language interpretation ○ TTY/TDD ○ Alert to impact of strangulation or other injuries ❒ Elicit information safely. ○ Verify that it is safe for caller to stay on the line ○ Verify that it is safe for caller to speak freely ❒ Use strategies that promote safety when it has not been confirmed that the caller can speak freely ○ Ask yes/no questions ○ Avoid open-ended narrative questions	

Best Practices in RECEIVING 911 Domestic Violence Calls	Notes NA = Not applicable in this call NP = Not possible in this call (explain)
Instructions: Check all practices evident in how the call is handled; note specific examples.	
❒ Respond to calls that are disconnected or otherwise uncompleted. ○ Be alert to suspect on the line ○ Be alert to background sounds ○ Check whether phone number or address is known location for prior domestic calls ○ Ask yes/no questions ○ Example: Caller says "everything's okay now." 911: Can you safely answer questions? Caller: "No." 911: "If you need police help now, press the # key on the phone." ❒ Reflect awareness of cultural and social factors in communication. ○ Language interpretation ○ Avoid jargon ○ Slow down ❒ Establish rapport and communicate core messages to callers. ○ Reinforce that 911 help is available, regardless of how many times they have called ○ Avoid blaming or criticizing ❒ Respond with courtesy, respect, and reassurance, even when caller is difficult to work with	
2. Determine the nature of the emergency and the response priority.	
❒ Establish the immediate threat of harm to persons at the scene, responding officers, and others.	

Best Practices in RECEIVING 911 Domestic Violence Calls	Notes NA = Not applicable in this call NP = Not possible in this call (explain)
Instructions: Check all practices evident in how the call is handled; note specific examples.	
❒ Determine the nature of any injuries and the need for immediate medical attention. ❒ Establish whether children are safe or unsafe, harmed or being harmed, abducted, or being drawn into the events in any way. ❒ Dispatch as a high priority call unless safety information warrants lower priority. ❒ Use accurate and appropriate type code that clearly identifies the call as domestic violence-related	
3. Direct responding officers to the location and parties at the scene	
❒ Establish the correct address and physical location. ❒ Establish who is involved and each party's location at the scene. ❒ Communicate the caller's location to officers.	
4. Establish the type and level of danger.	
❒ Elicit information from the caller about the immediate present danger and acts of aggression or harm that have occurred or are occurring. ❒ Elicit information about the suspect's history of aggression. ❒ Determine the risk to persons at the scene. ❒ Determine the risk to responding officers.	

Best Practices in RECEIVING 911 Domestic Violence Calls	Notes NA = Not applicable in this call NP = Not possible in this call (explain)
Instructions: Check all practices evident in how the call is handled; note specific examples.	
5. Advance safety for those at the scene while help is en route.	
❒ Communicate safely and effectively with the caller. ❒ Provide safety suggestions or instructions to the caller. ❒ Provide medical instructions to the caller. ❒ When possible, engage with suspect on the line to control escalation while officers are en route. ○ Remain calm and respectful. ○ Avoid arguing. ○ Do not share what the caller has said or why police were called.	
6. Communicate and document information related to the nature of the emergency; violence, threats, and injuries; and the safety of responding officers and those at the scene.	
❒ Relay information to dispatch and responding officers with accuracy and attention to the safety of officers and those at the scene. ❒ Access and relay records, including: ○ Orders for protection ○ Harassment orders ○ No-contact orders issued in conjunction with a domestic violence-related criminal case ○ Active probation or parole status ❒ Provide updated information to officers and respond to officers' requests. ❒ Document disposition of the call.	

Best Practices in RECEIVING 911 Domestic Violence Calls	Notes NA = Not applicable in this call NP = Not possible in this call (explain)
Instructions: Check all practices evident in how the call is handled; note specific examples.	
7. Establish a foundation for continuous engagement with members of the public seeking help in domestic abuse cases.	
❒ Avoid placing the victim in a position of confrontation with the offender. ❒ Protect the victim from retaliation when communicating with the offender. ❒ Treat each interaction with the victim as an opportunity to build a partnership over multiple contacts. ❒ Know the signs that violence may be resuming or escalating. ❒ Explain when caller is placed on hold.	
Receiving 911 calls – List gaps in best practices:	

PART 2: DISPATCHING CALLS: Review CAD print-out

Best Practices in RECEIVING 911 Domestic Violence Calls	Notes NA = Not applicable in this call NP = Not possible in this call (explain)
Instructions: Check all practices evident in how the call is handled; note specific examples.	
1. Relay the nature of the emergency and the response priority to responding officers.	
❒ Immediate threat of harm to responding officers, the victim, and others ❒ Nature of any injuries and the need for immediate medical attention ❒ Whether children are present and safe or unsafe, harmed or being harmed ❒ Priority dispatch unless safety information warrants lower priority. ❒ Use of accurate and appropriate type code that clearly identifies the call as domestic violence-related.	
2. Direct responding officers to the correct address, location, and appropriate people at the scene, including detailed information that will assist officers in locating a suspect who has left the scene.	
❒ Correct address and physical location ❒ Identities and descriptions of who is involved ❒ Suspect information in gone-on-arrival calls: ○ Physical description, including clothing ○ Means and direction of travel ○ Vehicle description ○ Locations suspect might frequent (e.g., particular bar, neighborhood, family member's home)	

Best Practices in RECEIVING 911 Domestic Violence Calls	Notes NA = Not applicable in this call NP = Not possible in this call (explain)
Instructions: Check all practices evident in how the call is handled; note specific examples.	
3. Relay to responding officers all available information about the type and level of danger involved, including violence, threats, and injuries.	
❒ Immediate present danger and acts of aggression or harm to those at the scene ❒ Suspect's history of aggression ❒ Threats and risk to persons at the scene ❒ Risk to responding officers	
4. Advance officer and public safety while help is en route and at the scene.	
❒ Check officer status and safety. ❒ Update changes on scene. ❒ Update suspect location. ❒ Update caller location. ❒ Check for past calls to location or calls concerning the parties involved.	
5. Communicate and document information related to the nature of the emergency and the safety of responding officers and those at the scene.	
❒ Details of violence and threats ❒ Records check ❒ Court orders ❒ Probation and parole status ❒ Accurate and complete CAD entries and radio transmissions	

Best Practices in RECEIVING 911 Domestic Violence Calls	Notes NA = Not applicable in this call NP = Not possible in this call (explain)
Instructions: Check all practices evident in how the call is handled; note specific examples.	
6. Promptly respond to requests for information from call takers, other dispatchers, patrol officers, pretrial release agencies, prosecutors, and probation officers related to 911 domestic violence-related calls	
❒ Utilize all available local, state, and national databases, documents, and other records. ❒ Promptly relay the search results.	
Dispatching 911 calls – List gaps in best practices:	

Instructions for Completing the 911 Policy Analysis Checklist

1. Read the policy and highlight all of the items related to the section of the checklist that has been assigned:
    a. Principles
    b. Procedures
    c. Linkages and monitoring

2. Check off all elements that are found in the existing policy and note how the policy ensures that response. Cite specific policy sections and language that support the response.

3. Use the checklist to identify policy gaps when preparing section two of the findings template

Emergency Communications (911) Policy Analysis Checklist

Policy title:

A. Principles	
Does the policy ensure a response that:	*How does this happen?*
❒ Adheres to an interagency approach and collective intervention goals?	
❒ Builds attention to the context and severity of abuse?	
❒ Recognizes that most domestic violence is a patterned crime requiring continuing engagement with victims and offenders?	
❒ Seeks sure and swift consequences for continued abuse?	
❒ Messages of help and accountability?	
❒ Reduces unintended consequences and the disparity of impact on victims and offenders?	

B. Procedures	
Does the policy ensure a response that:	How does this happen?
❒ References applicable laws, definitions, and authority?	
❒ Provides criteria and procedures for sorting cases into appropriate levels of response according to context and severity of abuse (i.e., different levels of response for different levels of dangerousness and risk)?	
❒ Guides practitioners in documenting actions and information about the case in ways that decrease reliance on memory and improve the thoroughness of case information?	
❒ Accounts for how victims use violence in response to battering by an abuser?	
❒ Recognizes and guards against increasing victim vulnerability to consequences and retaliation if they participate in confronting and holding offenders accountable?	
❒ Recognizes an offender's likelihood of battering in future relationships?	

B. Procedures	
Does the policy ensure a response that:	How does this happen?
❒ Provides mechanisms for documenting the pattern and history of abuse when and wherever possible?	
❒ Reinforces a swift, timely response focused on victim safety?	
❒ Recognizes the ways in which abusers used children to control adult victims of abuse?	
❒ Understands that protection of the adult victim parent is critical to the welfare of children?	
❒ Provides effective mechanisms to ensure victim notification, access to advocacy and victim services, and safety planning?	

C. Monitoring	
Does the policy ensure a response that:	How does this happen?
❒ Links practitioners to those who intervene at the next points of intervention?	
❒ Specifies how and within what time frame case information is shared, and with whom?	
❒ Includes mechanisms for tracking practitioner compliance with policy and for recording exceptions to the policy?	
❒ Includes steps to ensure compliance and address non-compliance?	
❒ Provides continuing education and training for practitioners on an on-going basis?	
❒ Establishes a process of record sharing and external monitoring?	

Instructions for Completing the Findings Template

1. Review all of case analysis worksheets and notes and the policy analysis checklist.

2. Split Part 1 of the findings template into sections and divide among the team.
    a. Assign several sections of Part 1 to each person or small group.
    b. Each person or group records their discussions on a copy of the template.

3. Each person or small group completes the list of findings for the assigned sections *(Part 1-Column A on the template)*.

4. Reconvene as the full team and, review the findings, section by section.
    a. Each person or group reports its conclusions for its assigned sections.
    b. Other team members ask clarifying questions and suggest additions to the findings for that section.
    c. Affirm team members are in agreement on the conclusions in each section.
    d. Identify any areas of practice where the team is not in agreement or where additional investigation is necessary in order to reach any conclusions.

NOTE: Because a practice is not evident in the case record does not mean that it does not happen. It may happen but not be documented. Refer to the case processing map and policy analysis to see whether there is an expectation or requirement for the practice. Team members may have information from their own experiences that address the practice in question. The team may want to recommend an expanded assessment that would include interviews and observations with practitioners.

5. Return to the pairs or work groups and complete any recommendations for change *(Part1-Column B on the template)*.

6. Divide the team into three and assign one section of Part 2-Policy Changes to each person or group.

7. Reconvene as the full team and review the recommended policy changes.

8. If the assessment team is authorized to prioritize its recommendations and further develop a plan for change, complete Part 3 of the findings template.

9. Convene a meeting of the assessment planners, team, and agency administrators to report on and discuss the assessment's findings and recommendations.

A Best Practice Assessment of the Emergency Communications (911) Response to Domestic Violence: Findings and Recommendations Template

Part 1: **Date assessment completed: _____**

Best Practice in the 911 Response to Domestic Violence	Findings:	Recommendations:
Call Receiving		
Communicate effectively and respectfully with callers. ❒ Respond to callers who are unable to communicate or to communicate clearly. ❒ Elicit information safely. ❒ Respond safely to calls that are disconnected or otherwise uncompleted. ❒ Reflect awareness of cultural and social factors in communication. ❒ Establish rapport and communicate core messages.		
Determine the nature of the emergency and the response priority. ❒ Establish the immediate threat of harm to persons at the scene, responding officers, and others. ❒ Determine the nature of any injuries and the need for immediate medical attention.		

Best Practice in the 911 Response to Domestic Violence	Findings:	Recommendations:
❒ Establish the presence and safety of children at the scene. ❒ Dispatch as high priority call unless safety information warrants lower priority. ❒ Use accurate and appropriate code that clearly identifies the call as domestic violence-related.		
Direct responding officers to the location and parties at the scene. ❒ Establish the correct address and physical location. ❒ Establish who is involved and each party's location. ❒ Communicate the caller's location to officers.		
Establish the type and level of danger. ❒ Elicit information about the immediate present danger and acts of aggression/harm that have occurred/are occurring. ❒ Elicit information about the suspect's history of aggression. ❒ Determine the risk to persons at the scene. ❒ Determine the risk to officers.		

Best Practice in the 911 Response to Domestic Violence	Findings:	Recommendations:
Advance safety for those at the scene while help is en route. ❒ Communicate safely and effectively with the caller. ❒ Provide safety suggestions or instructions. ❒ Provide medical instructions. ❒ When possible, engage with suspect on the line to control escalation while officers are en route.		
Communicate and document information related to the nature of the emergency; violence, threats, and injuries; and the safety of responding officers and those at the scene. ❒ Relay information to dispatch and responding officers with accuracy and attention to the safety of officers and those at the scene. ❒ Access and relay records, including orders for protection, no-contact orders, and probation and parole status. ❒ Provide updated information to officers and respond to officers' requests.		

Best Practice in the 911 Response to Domestic Violence	Findings:	Recommendations:
❒ Document disposition of the call. ❒ Relay information to dispatch and responding officers with accuracy and attention to the safety of officers and those at the scene.		
Establish a foundation for continuous engagement with members of the public seeking help in domestic abuse cases. ❒ Avoid placing the victim in a position of confrontation with the offender. ❒ Protect the victim from retaliation when communicating with the offender. ❒ Treat each interaction with the victim as an opportunity to build a partnership over multiple contacts. ❒ Know the signs that violence may be resuming or escalating. ❒ Explain when caller is placed on hold.		

Best Practice in the 911 Response to Domestic Violence	Findings:	Recommendations:
Call Dispatching		
Relay the nature of the emergency and the response priority to responding officers. ❒ Immediate threat of harm to responding officers, the victim, and others ❒ Nature of any injuries and the need for immediate medical attention ❒ Presence and safety of children ❒ High priority dispatch unless safety information warrants lower priority ❒ Accurate and appropriate type code that clearly identifies the call as domestic violence-related		
Direct responding officers to the correct address, location, and appropriate people at the scene, including detailed information that will assist officers in locating a suspect who has left the scene. ❒ Correct address and physical location ❒ Identities and descriptions of who is involved ❒ Detailed suspect information in gone-on-arrival calls		

Best Practice in the 911 Response to Domestic Violence	Findings:	Recommendations:
Relay to responding officers all available information about the type and level of danger involved, including violence, threats, and injuries. ❒ Immediate present danger and acts of aggression or harm to those at the scene ❒ Suspect's history of aggression ❒ Threats and risk to persons at the scene ❒ Risk to responding officers		
Advance officer and public safety while help is en route and at the scene. ❒ Check officer status and safety. ❒ Update changes on scene. ❒ Update suspect location. ❒ Update caller location. ❒ Check for past calls to location or calls concerning the parties involved.		

Best Practice in the 911 Response to Domestic Violence	Findings:	Recommendations:
Communicate and document information related to the nature of the emergency and the safety of responding officers and those at the scene. ❒ Details of violence and threats ❒ Records check ❒ Court orders ❒ Probation and parole status ❒ Accurate and complete CAD entries and radio transmissions		
Promptly respond to requests for information from call takers, other dispatchers, patrol officers, pretrial release agencies, prosecutors, and probation officers related to 911 domestic violence-related calls. ❒ Utilize all available local, state, and national databases, documents, and other records. ❒ Promptly relay the search results.		

Part 2: Summary of Recommended Emergency Communications (911) Policy Changes

Principles	Procedures	Linkages & Monitoring

Part 3: Next steps, assignments, and target dates

Priority:	Next steps in meeting the priority:	Assigned to:	Target date:
1.			
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Appendix 2



BEST PRACTICE ASSESSMENT WORKBOOK

POLICE PATROL RESPONSE

Instructions for Completing the Police Patrol Report Worksheet

1. Complete one worksheet per report. (Assessment team members should receive a blank copy for each report.)

2. Read the report first without stopping to take many notes on the worksheet or jumping into the analysis.

    c. Read as if you were reading a story of the events.
    d. Let the words in the report do the talking.
    e. Highlight what catches your eye in relation to the overall response and ways in which victim safety and offender accountability are enhanced or diminished.

3. Read the report a second time and then turn to the worksheet.

    a. If sections of the worksheet have been divided among the assessment team members, pay primary attention to the sections assigned.
    b. Check off all practices that are evident in the report and note specific examples.
    c. Note what is missing.
    d. Use the notes column to record additional observations, questions, or examples related to the report and the patrol response.
    e. Complete the summary at the end of the worksheet.
    f. Read the report as many times as needed to thoroughly address the practices included on the worksheet.

4. Repeat all steps for each report assigned.

Case Review Worksheet: Police Patrol Report Worksheet

Case #: _____

Best Practices in Police Patrol Response to Domestic Violence	Notes NA = Not applicable in this call NP = Not possible in this call (explain)
Instructions: Check all practices evident in how the call is handled; note specific examples.	
1. Background and account of the officer's actions	
❒ Time of officers' arrival and time of the incident ❒ Relevant 911 information, including specific details about any violence or threats communicated in the 911 call ❒ Immediate statements of either party and any witnesses at the scene ❒ A complete description of the scene ❒ Any existing orders for protection, harassment restraining orders, criminal case no-contact orders, probation holds, warrants, prior convictions ❒ Threats suspect has made to victim if victim sought or cooperated with the courts or police ❒ Attention to indicators of stalking ❒ Attending to indicators of strangulation ❒ Summary of actions taken by responding officers (e.g., arrest, non-arrest, attempts to locate, transport, referrals, victim notification, seizing firearms, rationale for self-defense or predominant aggressor determination)	
❒ Account of evidence collected (e.g., pictures, statements, weapons, other).	

Best Practices in Police Patrol Response to Domestic Violence	Notes NA = Not applicable in this call NP = Not possible in this call (explain)
Instructions: Check all practices evident in how the call is handled; note specific examples.	
❒ If both parties used/alleged to have used violence against the other: o Determine whether one party has acted in self-defense or defense of another o If self-defense or defense of another is ruled out, document predominant aggressor[5] determination: offensive and defensive injuries; seriousness of injuries; threats; parties' height and weight; which party has potential to seriously injure the other; prior history of domestic violence; witness statements. ❒ If an arrest was not made, the reason why	
2. Information specific to each witness and party involved	
❒ His/her account of events and responses to follow-up questions ❒ Officer observation related to the person's account of events ❒ Relationship to witnesses or other parties involved ❒ Identification, address, and means of locating the person for follow-up, including: o Home address and phone numbers o Cell phone number(s) o Place of employment, work address, and phone number	

[5] "Predominant aggressor" defined as the party who by his or her actions in the incident and through known history and actions has caused the most physical harm, fear, and intimidation against the other. "Predominant" does not mean the party who uses physical violence first or calls 911 first.

Best Practices in Police Patrol Response to Domestic Violence	Notes NA = Not applicable in this call NP = Not possible in this call (explain)
Instructions: Check all practices evident in how the call is handled; note specific examples.	
3. Information specific to each party involved	
❒ Injuries or impairment, (including pain, strangulation effects, breathing, mobility) ❒ Emotional state/demeanor ❒ Acts of intimidation or aggression ❒ Presence or use of weapons ❒ Alcohol or drug consumption and impairment	
4. Information from the victim, including history of violence & contact info:	
❒ Responses to the risk questions: 1. Do you think he/she will seriously injure or kill you or your children? What makes you think so? What makes you think not? 2. How frequently and seriously does he/she intimidate, threaten, or assault you? Is it changing? Getting worse? Getting better? 3. Describe the time you were the most frightened or injured by him/her. ❒ Threats to the victim for seeking help, particularly regarding help sought from the police or courts ❒ Name and phone numbers of someone who can always reach the victim ○ Record victim contact information in a confidential manner and location. ○ Inform the victim that every effort will be made to protect this information, but that it is possible that the suspect could gain access via court order.	

Best Practices in Police Patrol Response to Domestic Violence	Notes NA = Not applicable in this call NP = Not possible in this call (explain)
Instructions: Check all practices evident in how the call is handled; note specific examples.	
5. Additional information related to the suspect:	
❒ Gone-on-Arrival: details about where the suspect might have gone and where he/she lives or stays when not at the address of the incident ❒ Suspect's county and state of residence during the past ten years ❒ Whether Miranda is given and or a request for an attorney was made, and when this occurred ❒ Whether a custodial interview of the suspect was conducted ❒ Any spontaneous statements given by the suspect after the arrest	
6. Additional information related to the case:	
❒ Children at the scene: Details regarding their presence, involvement, and welfare ❒ Existence of language, communication or cognition barriers ❒ Description of medical help offered or used, the name of medical facility that was used and a medical release obtained ❒ Presence or involvement of elderly people ❒ Presence or involvement of people with disabilities	

Best Practices in Police Patrol Response to Domestic Violence	Notes NA = Not applicable in this call NP = Not possible in this call (explain)
Instructions: Check all practices evident in how the call is handled; note specific examples.	
Patrol Response – List gaps in best practices	

Instructions for Completing the Police Patrol Policy Analysis Checklist

1. Read the policy and highlight all of the items related to the section of the checklist that has been assigned:
    a. Principles
    b. Procedures
    c. Linkages and monitoring

2. Check off all elements that are found in the existing policy and note how the policy ensures that response. Cite specific policy sections and language that support the response.

3. Use the checklist to identify policy gaps when preparing section two of the findings template.

Police Patrol Response – Policy Analysis Checklist

Policy title:

A. Principles	
Does the policy ensure a response that:	How does this happen?
❒ Adheres to an interagency approach and collective intervention goals?	
❒ Builds attention to the context and severity of abuse?	
❒ Recognizes that most domestic violence is a patterned crime requiring continuing engagement with victims and offenders?	
❒ Seeks sure and swift consequences for continued abuse?	
❒ Messages of help and accountability?	
❒ Reduces unintended consequences and the disparity of impact on victims and offenders?	

B. Procedures	
Does the policy ensure a response that:	How does this happen?
❒ References applicable laws, definitions, and authority?	
❒ Provides criteria and procedures for sorting cases into appropriate levels of response according to context and severity of abuse (i.e., different levels of response for different levels of dangerousness and risk)?	
❒ Guides practitioners in documenting actions and information about the case in ways that decrease reliance on memory and improve the thoroughness of case information?	
❒ Accounts for how victims use violence in response to battering by an abuser?	
❒ Recognizes and guards against increasing victim vulnerability to consequences and retaliation if they participate in confronting and holding offenders accountable?	
❒ Recognizes an offender's likelihood of battering in future relationships?	
❒ Provides mechanisms for documenting the pattern and history of abuse when and wherever possible?	
❒ Reinforces a swift, timely response focused on victim safety?	

B. Procedures	
Does the policy ensure a response that:	How does this happen?
❒ Recognizes the ways in which abusers used children to control adult victims of abuse?	
❒ Understands that protection of the adult victim parent is critical to the welfare of children?	
❒ Provides effective mechanisms to ensure victim notification, access to advocacy and victim services, and safety planning?	

C. Monitoring	
Does the policy ensure a response that:	How does this happen?
❒ Links practitioners to those who intervene at the next points of intervention?	
❒ Specifies how and within what time frame case information is shared, and with whom?	
❒ Includes mechanisms for tracking practitioner compliance with policy and for recording exceptions to the policy?	
❒ Includes steps to ensure compliance and address non-compliance?	
❒ Provides continuing education and training for practitioners on an on-going basis?	
❒ Establishes a process of record sharing and external monitoring?	

Instructions for Completing the Findings Template

1. Review all of case analysis worksheets and notes and the policy analysis checklist.

2. Split Part 1 of the findings template into sections and divide among the team.
    a. Assign several sections of Part 1 to each person or small group.

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    a. Each person or group reports its conclusions for its assigned sections.
    b. Other team members ask clarifying questions and suggest additions to the findings for that section.
    c. Affirm team members are in agreement on the conclusions in each section.
    d. Identify any areas of practice where the team is not in agreement or where additional investigation is necessary in order to reach any conclusions.

NOTE: Because a practice is not evident in the case record does not necessarily mean that it does not happen. It may happen but not be documented. Refer to the case processing map and policy analysis to see whether there is an expectation or requirement for the practice. Team members may have additional information from their own experiences that address the practice in question. The team may want to recommend an expanded assessment that would include additional interviews and observations with practitioners.

5. Return to the pairs or work groups and complete any recommendations for change *(Part1-Column B on the template)*.

6. Divide the team into three and assign one section of Part 2-Policy Changes to each person or group.

7. Reconvene as the full team and review the recommended policy changes.

8. If the assessment team is authorized to prioritize its recommendations and further develop a plan for change, complete Part 3 of the findings template.

9. Convene a meeting of the assessment planners, team, and agency administrators to report on and discuss the assessment's findings and recommendations.

A Best Practice Assessment of the Police Patrol Response to Domestic Violence: Findings and Recommendations Template

Part 1: **Date assessment completed: _____**

Best Practice in the Police Patrol Response to Domestic Violence	Findings:	Recommendations:
Background and account of the officer's actions: ❒ Time of officers' arrival and time of the incident ❒ Relevant 911 information, including specific details about any violence or threats communicated in the 911 call ❒ Immediate statements of either party and any witnesses at the scene ❒ A complete description of the scene ❒ Any existing orders for protection, harassment restraining orders, criminal case no-contact orders, probation holds, warrants, prior convictions ❒ Threats suspect has made to victim if victim sought or cooperated with help from the courts or police ❒ Attention to indicators of stalking ❒ Attending to indicators of strangulation ❒ Summary of actions taken by responding officers ❒ Account of all evidence collected ❒ Documentation of self-defense/defense of others or predominant aggressor determination ❒ If an arrest was not made, the reason why		

Best Practice in the Police Patrol Response to Domestic Violence	Findings:	Recommendations:
Information specific to each witness and party involved: ❒ His/her account of events and responses to follow-up questions ❒ Officer observation related to the person's account of events ❒ Relationship to witnesses or other parties involved ❒ Identification, address, and means of locating the person for follow-up, including home and employment		
Information specific to each party involved: ❒ Injuries or impairment, (including pain, strangulation effects, breathing, mobility) ❒ Emotional state/demeanor ❒ Acts of intimidation or aggression ❒ Presence or use of weapons ❒ Alcohol or drug consumption and impairment		
Information from the victim, including history of violence and contact information: ❒ Responses to the three risk questions. ❒ Threats to the victim for seeking help, particularly regarding help sought from the police or courts ❒ Name and phone numbers of someone who can always reach the victim, recorded as confidential.		

Best Practice in the Police Patrol Response to Domestic Violence	Findings:	Recommendations:
❒ Notice to the victim of the limits of confidentiality and the suspect's possible access to contact information via court order		
Additional information related to the suspect: ❒ Detailed description and information on likely whereabouts when suspect is gone-on-arrival. ❒ Suspect's county and state of residence during the past ten years ❒ Whether Miranda is given and or a request for an attorney was made, and when this occurred ❒ Whether a custodial interview of the suspect was conducted ❒ Any spontaneous statements given by the suspect after the arrest		
Additional information related to the case: ❒ Children at the scene: Details regarding their presence, involvement, and welfare ❒ Existence of language, communication or cognition barriers ❒ Description of medical help offered or used, the name of medical facility that was used and a medical release obtained ❒ Presence or involvement of elderly people ❒ Presence or involvement of people with disabilities		

Part 2: Summary of Recommended Police Patrol Policy Changes

Principles	Procedures	Linkages & Monitoring

Part 3: Next steps, assignments, and target dates

Priority:	Next steps in meeting the priority:	Assigned to:	Target date:
1.			
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Appendix 3

FOUNDATIONS OF EFFECTIVE INTERVENTION

Excerpted from The Blueprint for Safety Chapter 1

the blueprint *for* safety

An Interagency Response to Domestic Violence Crimes

Archbishop Desmond Tutu tells us that justice demands three things: that the truth be told, that to whatever extent possible the harm be repaired, and that the conditions that gave rise to the injustice be forever altered.

The Blueprint is dedicated to all people whose bodies bear the marks of this injustice and to those who are committed to altering the conditions that give rise to this devastating form of violence.

Adapted from the Saint Paul Blueprint for Safety

Foundations of Effective Intervention

Minnesota has long been regarded as a leader in the national efforts to end intimate partner violence. In 1974, Women's Advocates was one of the first shelters to open in the country and became a model for the thousands of shelters to open in the next three decades. The Domestic Abuse Project in Minneapolis was among a handful of batterers' programs to open in the early 1980s and remains a leader in the field of abuser treatment. Duluth was the site of the first interagency intervention project and in 1982 was the first city to mandate its law enforcement officers to arrest in domestic abuse cases. It has won international acclaim for its pioneering work in interagency collaboration. Beginning in the 1970s, the Minnesota Legislature has consistently produced what is considered one of the country's most comprehensive bodies of domestic violence legislation. All eleven tribes and every region of the state have advocacy programs for victims of domestic violence. The Minnesota Coalition for Battered Women is a strong voice for victims in every major public policy making area affecting victims of battering. Programs in Olmsted County are collaborating with child protection agencies to find ways to help victims of battering and their children recover from the destructive impact of battering on the parent-child relationship. New initiatives are exploring how to work most effectively on behalf of children when domestic abuse leads to divorce.

It is therefore not surprising that the next generation of innovation comes from the collaborative work of community groups, advocates, leaders in the criminal justice system, and the state legislature. In 2007, the Minnesota Legislature awarded a grant to the City of Saint Paul to write a comprehensive plan integrating the knowledge gleaned from thirty years of research, demonstration projects, and practice into a "blueprint" for city and county agencies responding to misdemeanor and felony assaults. There are two versions of the Blueprint, one specifically for the City of Saint Paul and this one for any community to use as a template or guide to create their own customized version. Both documents are based on Minnesota law and legal terminology.

The Blueprint for Safety (Blueprint) is the result of conversations and consultation with community members, practitioners, advocates, victims, defense attorneys, researchers, agency leaders, and experts in confronting this crime both locally and nationally. In the end, the leadership of the core intervening agencies and the district court bench create a successful Blueprint Community. Such leadership is the basis for any community's effort to confront this devastating form of violence.

The Blueprint is anchored in six foundational principles we have identified as essential characteristics of intervention that maximize safety for victims of domestic violence and holds offenders accountable while offering them opportunities to change.

1. Adhere to an interagency approach and collective intervention goals
2. Build attention to the context and severity of abuse into each intervention
3. Recognize that most domestic violence is a patterned crime requiring continuing engagement with victims and offenders
4. Ensure sure and swift consequences for continued abuse
5. Use the power of the criminal justice system to send messages of help and accountability
6. Act in ways that reduce unintended consequences and the disparity of impact on victims and offenders

Endnotes highlighting research findings, academic literature, and intervention models supportive of these foundational elements can be found at the end of each chapter, with a complete bibliography found in chapter 9.

1. Interagency approach and collective goals

Processing a single domestic violence related case involves five levels of government and over a dozen intervening agencies. Hundreds of practitioners might touch these cases every day. An effective response, meaning one that leads to an end to the violence, requires solid coordination across and among the many practitioners involved, as well as a strong system of accountability. Practitioners are committed to the mission, function, and goals of their respective agencies, but in an interagency approach they are simultaneously accountable to the victim on whose behalf we intervene, to the offender with whom we intervene, and to others intervening in the case. This interagency approach requires a system of communication in which each practitioner receives and relays information in ways that make it possible for everyone to act with the best knowledge of the case. The legal system is structured to assign distinct roles with specific powers to create a system of checks and balances that prevents the misuse of State power. That system is the backbone of our justice system. That doesn't mean however, that practitioners in these various roles should not attempt to agree on some shared assumptions about risk management, deterrence and safety. In fact, the absence of a cohesive approach often thwarts the possibility of justice in these cases. Finally, an effective interagency response requires a

commitment to excellence by each intervening agency and practitioner, as well as a commitment to challenge one another and actively engage in resolving disagreements. When so many agencies are involved in case processing there will be differences, arguments, and unmet expectations; this is not the problem. The problem arises when there is no ongoing structured way to resolve those conflicts. Interagency approaches succeed when everyone focuses on a shared goal that is centered on the needs of the victims and families harmed by the violence and brutality.

The criminal court process demands a high level of coordination to carry out the dozens of case processing steps involved in the response. The criminal codes, rules of evidence and procedure, case law, administrative forms and processes, calendars and schedules, databases, and information sharing protocols dictate how interagency collaboration is organized. This Blueprint provides additional structure by introducing coordinating elements designed specifically to enhance approaches to domestic violence related cases:

- In a criminal domestic violence case that involves over one hundred institutional steps, the Blueprint creates written policies for each core processing point. Beginning with the 911 operator and ending with the probation officer who discharges a case months or even years later, each policy is written with every intervener's needs in mind. The Blueprint's interlocking policies serve two goals: to standardize research-based practices and processes so that the public as well as system practitioners can count on a consistent, effective, and fair response; and to bring agencies with distinctive missions and goals together under a common set of collective goals centralizing victim safety and offender accountability. By agreeing on some fundamental intervention principles, we offer both victims and offenders a system that is clear in its messages, expectations, and actions.

- Each policy is accompanied by administrative protocols or procedures that coordinate workers' actions while simultaneously avoiding turning each practitioner into a robot, devoid of professional skills and judgment. Every form, matrix, set of guidelines, report writing format, and assessment tool has been designed to address the unique characteristics of this crime and the interagency nature of case management.

- Via a system of documentation and information sharing, each intervention step is woven together with subsequent steps in case processing. The legal system is a text-based system. What a law enforcement officer is trained and required to record about an incident has an impact on charging, trial decisions, sentencing, probation conditions, and rehabilitation programming. Risk scales, charging

guidelines, and sentencing matrices are significant factors in how a complex institution processes thousands of cases. The Blueprint uses new and enhanced approaches to gathering, recording, and disseminating information on cases. This information sharing system is linked to agreed-upon intervention goals in domestic violence cases and to efforts to coordinate interventions across agencies.

- Each policy also sets a foundation from which agencies and practitioners can clearly delineate their respective roles and functions. A multiagency coordinated response requires connections between and across practitioners so that it is impossible to lose sight of the nature of the harm, the likely danger, and the opportunities for action and change in each case. The Blueprint calls on each practitioner in each intervening agency to be oriented toward collective goals, as well as toward those of their own agencies. Those collective goals are to (a) protect adult and child victims from ongoing abuse, (b) impose meaningful consequences for the harm, (c) help offenders who are willing to change, and (d) reduce the unintended negative consequences of state intervention for individuals and communities.

2. <u>Attention to context and severity</u>

Domestic violence is a broad category that has come to include many kinds of behaviors within relationships between family and other household members. It jumbles together vastly different actions: from throwing a shoe at a partner who gambled away $1000, to strangling a woman until she loses consciousness because she wants out of the relationship. It groups together slapping someone on the arm with head-butting. The term domestic violence focuses attention on specific acts of violence toward a family member and obscures the context of that violence, which often includes ongoing coercion, intimidation, and emotional harm.

What has been largely submerged under the category of domestic violence is battering: a term recognized, defined, and brought to public attention in the 1970s by advocates responding to the realities of sustained abuse in women's lives, primarily by their intimate partners. Battering came to describe an ongoing pattern of coercion, intimidation, and emotional abuse, reinforced by the use and threat of physical or sexual violence.[i] As laws were enacted to protect victims of battering and hold batterers accountable, the term "domestic violence" was adopted both to be inclusive of cases where a male is the victim and to emphasize the place where the abuse is occurring, the home. Every act of violence by one person against another that occurred in the setting of the home came to have the same meaning; that is, all

violence involving family members became acts of domestic violence. Laws passed with battering in mind were applied to teenagers hitting their parents, to one brother hitting another, to a husband strangling his wife, and to that wife scratching her husband in response. Slogans like "zero tolerance for violence in the home" hindered critical reflection about the differences between these acts of violence.

We have learned that applying a single treatment to such a broad range of human interactions and behaviors inhibits meaningful intervention for victims and perpetrators.[ii] For example, grouping all acts of violence together, regardless of intent and context, leads us to treat a battered woman or a teenage child who reacts to abuse with violence (albeit illegally) the same as the person who dominates his partner through a pattern of fear, coercion and violence. Placing all acts of relationship violence into a single category of "misdemeanor domestic violence" or "felony domestic violence" can distort our understanding of who is doing what to whom, and who needs what level of protection from whom. For victims of battering, such misunderstandings are not benign and they can have fatal effects, as analysis of intimate partner homicide confirms.[iii]

Our challenge is to make visible all that we can possibly know about the full scope of abuse occurring in a relationship.[iv] Interveners must be able to see the scope and severity of the offender's violence, how often and under what circumstances it is occurring, and the pattern of the abuse: is it escalating, deescalating, potentially lethal, or unpredictable? We were tempted to build the Blueprint around typologies of domestic violence offenders, but in the end decided that such an approach presented too many due process and safety traps. Instead, we have built differentiation into each step of the process, supported by intense attention to gathering, documenting, disseminating, and building on new information over a period of time and frequent, ongoing contact with offenders and victims. This differentiation will allow us to accomplish the Minnesota Legislature's charge to design a system that tailors interventions to the specifics of a case and accounts for the unique aspects and different levels of violence and abuse that offenders use and to which victims are subjected.

This process of differentiation is not new to the Blueprint. The Minnesota Legislature recognized the need for differentiation over a decade ago when it discouraged dual arrests even when evidence existed to arrest both parties in a domestic abuse-related case. Instead, the law encouraged officers to arrest the predominant aggressor. It also gave prosecutors the ability to respond to the ongoing nature of this crime by allowing but not requiring enhancements for repeat offenders. This powerful discretionary tool permits prosecutors to respond to the specifics of a case in new ways.

To respond to domestic violence without inadvertently causing further harm requires differentiating who is doing what to whom, and with what impact. The Blueprint directs practitioners to gather information that illuminates both the pattern of abuse and the specific acts being committed. Policies and protocols then propose different interventions based on the circumstances, frequency, and severity of abuse.

3. A patterned crime requiring continuing engagement

A domestic violence crime is rarely fully resolved with the first intervention.[v] For those offenders who have much to lose by criminal justice intervention, a single legal action may be enough to jolt them out of thinking that violence is an effective way of dealing with their relationship. For another group of offenders who batter, the violence will not stop or decrease significantly in severity until there are repeated interventions. There is a small but volatile group with long and violent criminal histories for whom sanctions have little or no impact. If the violence is caused by mental illness, brain trauma, or similar factors, multiple and very specific interventions may be necessary.

With the clear exception of stalking, most domestic violence– related criminal interventions focus on a single event of violence. But most practitioners charged with intervening in domestic violence cases understand that these single acts of violence are usually part of a patterned use of coercion, intimidation, and the use or threat of violence—namely, battering. As such, the relationship is characterized by a "continuing" set of violent actions committed over time and in countless situations. Interventions to process one assault look different than interventions intended to stop the continued use of abuse and violence.[vi] The Blueprint is designed to do both: to process the "event of a crime" in a manner that confronts and stops the pattern of abuse and violence.

This dual approach to intervention has important implications for an interagency approach. First, we must be prepared to link seemingly isolated incidents into a more coherent picture of behavior and complexity of risk and safety for any one victim. Second, we must all see our shared task and function as reaching beyond the processing of that single event to stopping future abuse. Without significant change on the part of the offender, the coercion and violence is likely to continue and may escalate in severity and frequency.

The patterned nature of battering means that our contact with a victim or offender will likely continue for an extended period of time. This extended contact provides the opportunity to build relationships that reinforce safety and accountability in more

lasting ways. If a victim is reluctant or refuses to participate in a prosecution and court intervention at a given point, how we treat her or him will shape the possibilities for a future partnership.[vii] As an investigator explained:

> *If I treat her with respect and let her know I'm concerned the first time I meet her, when it happens again she is more likely to take my call, or even call me. If I get frustrated and angry because I need her in order to get to him and I throw up my hands, saying 'fine, you want to live that way go ahead,' then I'm just one more person slapping her in the face.*

As two patrol officers noted:

> *What I do and say the first time we go out on a case sets the tone for what the next officer faces. If she's hostile and in my face and I treat her with respect and let her know we are here for her and her kids when they need us, the next officer (or maybe even the one after that) will be dealing with a different person...*

> *Let's just put it this way, I'm not the one getting bashed up and pushed around and treated like an animal, so I'm in a better position to extend that hand. It might take two or three of us and different calls, but eventually most women get to a point where the police aren't the enemy and then they want to work together...*

To produce a more meaningful and individualized response we must collaborate with victims in ways that acknowledge the nature of domestic violence as a patterned offense. This means:

- Wherever possible, minimize the victim's need to confront the offender.
- Protect the victim from retaliation when using information that she or he has provided.
- Treat each interaction with the victim as an opportunity to build collaboration over multiple interventions (even when a victim starts out hostile to those interventions).
- Stay mindful of the complex and often dangerous implications of a victim's collaboration with interveners.[viii]
- Be aware that the fundamental purpose of battering, which characterizes the majority of domestic violence criminal cases, is to control what the victim says, thinks, feels, and does.[ix]

- Engage in a dialogue with the victim rather than treating her or him as a data point.
- Avoid unintentionally reinforcing the abuser's actions: offer a clear alternative to messages that the victim is crazy, at fault, unbelievable, and unable to make decisions, and that the abuser is unstoppable.[x]

4. Sure and swift consequences

In the criminal justice field, it is widely believed that sure and swift punishment is more important than severe punishment. Research into domestic violence shows this to be particularly true in confronting this crime. Evidence suggests that building sure and swift consequences into the infrastructure of case processing can reduce recidivism in some cases and the severity of ongoing abuse in others.[xi]

The national data is encouraging, although day-to-day work in the criminal justice system can leave many practitioners frustrated and skeptical that the changes made over the past several decades have not reduced violence.

Batterers tend to push against any boundary set for them.[xii] The clearer we are about what behavior is and is not acceptable, the more likely the abuser is to live within those boundaries. Each policy and administrative protocol in the Blueprint, from the initial law enforcement contact through case closure, is designed with the goal of sure and swift consequences in mind, but also with the recognition that sometimes intervention goals can conflict. For example, if a probationer is arrested for assaulting his former partner, that new case may take months to resolve. The decision to pursue an immediate probation violation for committing a new offense is weighed against the possibility that the violation hearing might pose problems for the new case, which carries a more substantial and enhanced penalty. A prosecutor might prefer to wait for the new conviction to avoid such complications. However, waiting might result in the defendant having free license to harass the victim, particularly if the defendant is aware that all new cases will be rolled together and treated as one in the end. One course of action—pursuing the probation violation—reinforces swift consequences. The other course of action—pursuing an enhanced gross misdemeanor—may reinforce more substantial consequences. The Blueprint policies and protocols address these dilemmas, sometimes with a mandate requiring practitioners to take certain actions, sometimes with a set of guiding principles or procedures, and sometimes with a training memo suggesting how to weigh the different outcomes.

The Blueprint

> uses interagency policies, protocols, case processing procedures, and information sharing to (a) maximize the state's ability to gain a measure of control over a domestic violence offender; (b) use that control to intervene quickly when there are new acts of violence, intimidation or coercion; and (c) shift the burden of holding the offender accountable for violence or abuse from the victim to the system.

5. Messages of help and accountability

The single greatest obstacle to the criminal justice system's effective intervention in battering cases is the degree of psychological and physical control the abuser has over the victim.[xiii] Batterers rely on the power they have over the victim to shield them from legal interventions. Therefore, the ability to work with a victim of battering hinges on her/his belief that (a) our intervention will counteract that power, (b) we understand the reality of living with battering, (c) we have a collaborative approach to working with her or him, and (d) we are here to help, however long it takes.

The State, and by extension the practitioners who represent it, has a powerful influence over people. The messages given to victims, offenders, and children at each point of intervention can have a deterrent effect or, alternatively, can fail to deter and therefore act as an opening for more violence.[xiv]

Consider two linchpin characteristics of battering cases involving heterosexual men.[xv] First is the batterer's sense of entitlement to his actions. His partner is the target of his violence not so much because of what she did as who she is. Research has shown that a cognitive behavioral approach that challenges the abuser's belief systems about his rights and entitlements in intimate relationships is more effective than any other rehabilitation approach.[xvi] That approach can begin with the dispatcher and responding officer. If every intervening practitioner is coherently and consistently "on-message" the path to a rehabilitation program will be well-worn before a batterer enters his first group. This cannot happen when each practitioner offers his or her distinct and often competing message about what lies at the root of the problem and what will fix it.

Effective interventions with an offender who is a batterer are respectful, but also clear and consistent that there will be a consequence every time the offender violates a sanction or requirement. This consequence will be sure and swift and it will be linked to what the person chose to do. For a man who batters a female partner, a previously absent message will now suddenly be very clear: he will be held accountable for the harm he has caused. Offenders need to know that the system is coordinated, the players speak to each other, and they cannot successfully play one off against the other. Most importantly, batterers have to see that the violence, coercion, and intimidation are the focus of the state's intervention, and not the victim's behavior. In this specific respect, there is no neutrality available to law enforcement officers, prosecutors, or judges; every message either challenges an abuser's sense of entitlement or reinforces it.

The second linchpin characteristic of battering is the batterer's domination of the victim—not only physically, but often economically, socially, emotionally, psychologically, and legally.[xvii] The practitioner who talks to the victim in terms of, "Look what happened: he hit you once, he'll hit you again," misses the complex nature of batterers' domination of their victims and the far-reaching implications of that domination on the lives of women and their children. The abuser's messages to his partner are often linked to her cultural, economic, religious, or spiritual identity[xviii] "No one will believe you... no one will help you... they all know you're crazy... you're disgracing the clan (or family)... they'll take your kids... a good (Native, African American, Christian, Hmong, Jewish) woman doesn't shame her husband this way... what about the things you've done: your drinking, your visits to the shrink?... everyone knows you're bipolar... I'm a (cop, minister, lawyer, doctor, hero in this town, stable business- man), who would believe you over me?... think of the family... the children need a father, you're taking that away."

Our messages to a victim need to be cognizant of the relentlessly destructive messages she has been told and on some level has come to believe. As interveners, every action we take and every statement we make can and should be aimed at an efficient, consistent, coherent, clear message that strips the abuser of his most powerful weapon: his message that "they can't and won't help you."[xix]

Two caveats require attention here. First, not all cases of domestic violence involve heterosexual men battering women. Some involve gay men battering their partners. People with significant mental health problems may assault partners outside of the context of battering. Similarly, a small percentage of drug addicted domestic violence offenders do stop abusing their partners when they stop using drugs. Victims of battering who fight back illegally do not fit the profile we have described above. There are also women who batter their partners—primarily in lesbian relationships,

but sometimes, though rarely, in heterosexual relationships. While cases involving battering by men are the vast majority processed in the criminal justice system, when practitioners encounter cases that do not involve men battering women, they need to adjust their interventions accordingly.

The second caveat is a reminder that in the courtroom the offender is presumed innocent until proven guilty. Practitioners relay messages at every point of contact with the offender and victim. Most of those points of contact are pre-conviction. Practitioners must walk a fine line between presuming guilt and being helpful and clear with suspects and victims.

Practitioners have the opportunity to counteract the messages associated with a batterer's defense for the violence.[xx] A batterer (i.e., someone who engages in a continuous pattern of violence and abuse) has basically seven defenses, each with a supporting message. Those messages are: a) I didn't do it; someone else did, b) the victim is lying, c) it was an accident, d) it was self-defense, e) it can't be proved, f) yes, I did it, but you'd do it too in my situation; have you met her? Or g) I did it, but the officer messed up; they can't convict. Batterers do not even need to present these defenses when they can rely on their victims to be unavailable to counter or challenge the defenses. Most abusers discourage victims' participation and reinforce the message that interveners cannot or will not help. Sometimes they do this in blatantly illegal ways; other times they rely on their power over the victim. Our pressure on a victim to cooperate and the protection we can offer is matched and often overpowered by the pressures a batterer can apply and the consequences he or she can impose for that cooperation.

The Blueprint is embedded with a set of messages that, if coordinated across practitioners and intervening agencies, can contribute to lower recidivism, increased engagement with victims, and less resistance from abusers to the state's role in confronting the abuse. The Blueprint extends messages of help: to protect victims and to provide offenders with opportunities for change. It also extends messages of accountability: individual accountability for the harm caused by battering; interagency accountability in building and sustaining an effective response; and intervention's accountability to ensuring protection for victims and fair, respectful treatment of offenders.

6. Reducing unintended consequences of interventions and the disparity of impact

We do not all experience the world in the same way. People's social realities are constructed by differences in class, age, race and ethnicity, immigration status,

sexual orientation, history, privilege, and many other aspects of culture and identity. As a result, we do not all experience battering in the same way, or the actions of interveners, or the impact of policies.[xxi] An effective domestic violence intervention accounts for the realities of peoples' unique circumstances and social standing. For example, our intervention strategies must address the relationship between violence, poverty, homelessness, gender, and race. Our interagency approach must reduce rather than emphasize the disparity between groups of people with different social realities. Reducing disparity requires us to find ways to sustain compassion for the people we encounter. Working in and around the criminal legal system in general—and responding to domestic violence in particular— is stressful, demanding work. We are constantly dealing with aspects of peoples' lives that are harmful, chaotic, and cruel. It is far too easy for a corrosive cynicism to set in that dismisses those before us as unworthy of help and attention, and diminishes the kind of problem solving that fosters safety and accountability on both individual and systemic levels.

Almost every practitioner in the system can cite a case where everyone did his or her job and every policy was followed, but the outcome of the case was neither just nor protective of the victim. In these familiar cases, the poor outcome is as much due to failures in our intervention strategies as it is about specific abusers. Effective intervention cannot be a blanket, one-dimensional response. Truly implementing the concept of equal treatment under the law requires thoughtful legal interventions that produce just outcomes. Under what circumstances should we adjust for the impact of policy and practice on peoples' different social realities? Whenever possible, the Blueprint introduces ways in which practitioners can reduce the level of disparity produced by their interventions.

Conclusion

The Blueprint incorporated input from hundreds of experts, beginning with dozens of victims of abuse who attended focus groups and pinpointed specific ways that interventions could better promote their safety. These experts also included 911 call takers and dispatchers, Sheriff's Department warrant officers and jail staff, law enforcement officers, prosecutors, probation agents, and judges. Community-based advocates and advocates located in the County Attorney's office weighed in on the design. We consulted with a national team of researchers and deliberated nearly every line of the Blueprint with supervisors from each participating agency. The level of collaboration in the process demonstrates why Minnesota has long been considered a leader in the national movement to end the most common form of violence in our society.

The Minnesota Coalition for Battered Women began tracking domestic violence-related homicides in 1989. They report this grim tally: at least 454 women have been murdered by a suspected, alleged, or convicted perpetrator who was a current or former husband, boyfriend, intimate partner, or household or family member.[xxii] They have been shot, stabbed, strangled, and beaten to death, often with great brutality and often in the presence of or during an attack against their children as well. Unreported are the countless "near homicides"—non-fatal thanks to prompt medical attention—and the even greater number of people who endure ongoing and daily coercion, intimidation, and violence with devastating impact.

In the past thirty years, we have come a long way to building working relationships, alliances, and collaboration among advocates, law enforcement, prosecutors, probation agents, and other interveners, both with one another and with victims. These relationships have produced a far more intentional and effective approach to community intervention in what was once considered a private crime. This effort has significantly reduced intimate partner homicides overall and introduced options for victims of domestic violence that were unheard of in our parents' and grandparents' time. It has meant that women, who are most often the victims of domestic violence, live for far shorter periods of time in an abusive relationship, as do their children.

We have learned that each encounter between someone living with this violence and a practitioner in the "system" is an opportunity to interrupt the actions and patterns that sustain battering. The Blueprint organizes us to present a cohesive set of messages to victims and perpetrators. To adult victims: a) we're here to help when you're ready for that help; b) the violence is not your fault and you are not responsible for the perpetrator's actions; and c) I'm concerned for your safety—by working together we have the best chance of stopping the violence. To children: a) you haven't done anything wrong—it's not your fault; b) we want everyone to be safe and we're here to help you and your family; and c) we won't hurt your father or mother. To perpetrators: a) the violence must stop—there is help for you to do that and there will be consequences if you don't; b) this arrest (or prosecution or probation) is a result of your actions and not the actions of others; and c) this is an opportunity for you to change, to reject the violence and repair the harm you have caused, and we can help you do that. In its structure and content, the Blueprint prepares agencies and practitioners across the criminal legal system to carry these messages with one voice.

Underlying Assumptions in the Blueprint for Safety

In our grandparents' generation, women had few options for finding safety from battering. There were no organized shelters or religious or community support systems challenging the abuser (although informal confrontations occurred in many communities). Law enforcement was expected to calm the situation down and leave. All but the most serious assaults were screened out of the system and the few arrests that occurred were rarely prosecuted. That all changed with the opening of the first shelter for battered women in 1974 and the first interagency intervention project in 1980. The last thirty-five years have seen enormous changes in the state's response to intimate partner violence.

In any society, widespread use of violence, aggression, and coercion in families is a cultural phenomenon. Such violence is rooted in unjust social structures which the criminal justice system alone cannot unravel. The criminal justice system plays two important roles in reducing violence in families, however, by (1) enforcing laws which criminalize a once accepted cultural practice (similar to the legal system's impact on drinking and driving, child labor, sexual harassment in the workplace, and exposure to secondhand smoke); and by (2) stopping individual abusers from doing more harm. It is one of many institutions that convey social norms and reign in unacceptable behavior. It strives to accomplish this in domestic violence by responding with sure and swift consequences to those whose battering makes the home a place of fear rather than a place of refuge.

For almost three decades, advocates have raised the voice of concern that too little is being done to stop the violence. Researchers have sent mixed messages about what works and what does not work. Organized opposition to reform has grown. As one criminal court judge shared with a colleague:

> *I've always thought that in domestic violence cases I could be the only person in the courtroom—no defendant, no victim, no attorneys; not a clerk or deputy in sight, not a motion to rule on or decision to make—and still I'd be absolutely sure I was doing something wrong.*

The judge's frustrations are shared by many in the criminal justice system. Intimate partner violence is a complex type of crime. The offender's control over the victim can make effective intervention incredibly difficult and time-consuming in a resource-starved institution. The good news is that our overall strategy of using the legal system to stop the violence has made a difference, particularly in homicide rates. Spousal homicides overall dropped by 46% between 1976 and 2004. The number of black males killed by their partners dropped an astounding 82%, black females by 56%, and white males by 55%. Between 1976 and 1992, there was also a 48% drop in severe

violence.[xxiii] Battered women and their children face a very different reality today than did our grandmothers.

Yet few in the "system" are comforted by these statistics when law enforcement calls and courtroom calendars are still overflowing with domestic violence–related cases. The Blueprint proposes the next level of change. It rests on years of experience in interagency coordination; research on arrests, sentencing, and treatment of batterers; statistical trends; and a year-long process of interagency negotiation in Saint Paul. The policies and protocols are designed to guide every practitioner to do everything possible each time a person reaches out to this institution for help. Each assumption underlying the Blueprint is supported by research. The Blueprint is an attempt to integrate what we have come to understand as best practices in the criminal justice system response to domestic violence. Those assumptions include:

- When work is coordinated across agencies and within agencies, the overall capacity to protect is increased.
- The action of one practitioner is strengthened by the cumulative effect of coordinated actions across the criminal justice system.
- When the system is organized to treat a case as part of an ongoing pattern of criminal activity rather than a singular event, outcomes improve.
- Interagency coordination is strengthened when information is organized around common risk markers that are uniformly collected and shared.
- Not all domestic violence is the same; interventions are different for violent acts that lack a context of coercion, intimidation and control (e.g. cases of mental illness, isolated events, victims of abuse reacting).
- Sending clear and consistent messages of offender accountability and victim safety can reduce the violence.
- Whenever possible we must shift the burden of confrontation from the victim to the intervening practitioner.
- Danger and repeat violence from the perpetrator can be anticipated when certain actions and behaviors are visible.
- It is important for every act of aggression by the offender to be met with sure and swift consequences.
- Intervention policies and protocols should be adapted to diminish unintended consequences that adversely affect marginalized populations.

Archbishop Desmond Tutu tells us that justice demands three things: (1) that the truth be told, (2) that the harm be repaired to whatever extent humanly possible, and (3) that the conditions that gave rise to the injustice be changed. The Blueprint envisions and builds a path to all three for those subjected to violence, aggression, and coercion in their intimate relationships and families.

Practitioners' Guide to Risk and Danger

The following is an abbreviated list of factors related to risk and danger in domestic violence. Most of the research is based on violence toward women, which reflects the majority of cases coming into the criminal justice system. The presence of these indicators suggests that one of the following outcomes is likely without effective intervention: the violence will (1) continue, (2) escalate, and/or (3) become lethal.

This Guide can also be found as Appendix 1A: Practitioners' Guide to Risk and Danger in Domestic Violence Cases for downloading and printing as a separate document.

Practitioners should not assume that the Guide to Risk and Danger lists every possible risk marker for continued violence or lethality. Instead, the Guide uses key categories of risk to identify the indicators of severe violence or lethality. Every practitioner should be familiar with, look for, and document the key categories of risk and danger included in the guide. They can then weigh this information from the research with their own experience in domestic violence cases and the conditions highlighted in the guide as particularly associated with increased risk and lethality. When there is violence without these risk factors, practitioners should consider the probability that this is a case of either resistive violence or non-battering related domestic violence.

While a victim's perception of danger can be a very powerful predictor of re-assault, 47% of victims of femicide failed to recognize the potential for lethal violence or attempted murder. At a minimum, an intervening practitioner should always ask a victim:

- How recent was the last violence?
- Is the violence increasing in frequency?
- What types of violence and threats are you experiencing?
- Do you think [the offender] will seriously injure or kill you or your children?

Using this risk guide

- ❑ Each Blueprint protocol includes specific instructions for documenting and responding to risk. Practitioners should also read *Appendix 1B: Training Memo—Risk and Dangerousness*.
- ❑ Elicit and document the risk factors contained in this guide. Whenever possible, talk with the victim; engage in a discussion about danger rather than just asking if these things have happened. Victim perceptions and interpretations are important.
- ❑ Communicate risk factors to other intervening practitioners in a timely manner.
- ❑ Be attentive to the factors in a given case; use experience, common sense, and training to make judgments about the level of danger that both the offender and the set of circumstances pose.
- ❑ Adjust the response to each case based on the level of risk and dangerousness.
- ❑ Protect the victim from retaliation when soliciting or using safety and risk information.
- ❑ Link victims with risk factors to an advocate.
- ❑ Stay alert; the level and type of risk will likely change over time and as circumstances change. Determining and managing risk is an ongoing process.
- ❑ A victim's attempt to terminate the relationship is a major change that poses increased risk.
- ❑ Victims' perceptions of high danger are typically accurate; their perceptions of low danger are often not.

Acts or threats of violence associated risk & lethality

Factors listed in italics are particularly associated with lethal violence

- *Stalking*
- *Strangulation; attempts to "choke"*
- *Threats to kill the victim*
- *Threats to kill that the victim believes or fears*
- *Threats to kill that are conveyed to others*
- *Threats of suicide*
- *Forced sex or pressuring for sex even when separated*
- *Serious injury to the victim*
- *Carries, has access to, uses, or threatens with a weapon*
- *Violence outside of the home*
- Aggression toward interveners
- Threats to family, coworkers, victim's new partner
- Animal abuse or killing pets
- Damages victim's property
- Violent during pregnancy or shortly after birth
- Hostage-taking; restraint
- Acts exhibiting extreme hostility toward the victim

Coercion

Violence with a pattern of coercion is a serious marker of high risk violence. Coercion may be displayed as control of children, finances, or activities; sexual aggression; intimidation; hurting pets; or isolating the victim from support systems.

Risk is higher when the violence is accompanied by:

- *An increase in frequency, severity, or type of violence over recent months*
- *Almost daily impairment by alcohol or drugs*
- *The victim attempting a permanent break*
- *Estrangements, separations, and reunions*
- *Failure of prior interventions to affect the offender*
- *A victim who expresses fear of threats to kill*
- *A victim making no attempt to leave despite severe abuse*
- *Prior arrests, law enforcement calls, and/or protection order(s)*
- Isolation of victim (physical or social)
- A victim seeking outside help in the past year
- A victim has a child who is not the offender's
- An abuser leaves before law enforcement arrive; eludes warrants
- An abuser's:
  - Lack of remorse
  - Mental health issues
  - Financial difficulty; unstable housing
  - Generalized aggression or violent acts
  - Ongoing efforts to take children from their mother
  - History of violence in multiple relationships
  - First act of violence is life-threatening or brutal
  - Obsessive control of victim's daily activities
  - Obsessive jealously
  - Significant and harmful use of a child
  - Drawing others into the abuse (e.g., children, family, friends)
  - *Non-compliance with probation or pre-trial release conditions*

Homicide-Suicide (for male offenders) accounts for 27-32% of the lethal domestic violence incidents

Predominant risk markers include: *guns, patterns of estrangement and reunion and offender's poor mental health*. Additional risk markers are:

- Obsession or jealousy
- Alcohol impairment (23 to 38% of perpetrators)
- History of domestic violence
- Suicide attempts or threats
- Personality disorder
- Depression of offender (46%)

Women who kill male partners

Predominant risk markers include: *severe, increasingly frequent, and recent violence by male partner against the defendant; a defendant who is isolated and has few social resources*. Additional risk markers are:

- Access or prior use of weapons
- More than 10 violent incidents in the last year at the hands of the person killed
- Law enforcement intervention in one or more domestic violence calls in past year
- Prior strangulation by person killed
- Traditional relationship (married, children, lengthy relationship)
- Trapped and isolated in violent relationship
- Defendant sought help

(Note: The absence of any of these factors should not lead to a conclusion that there is no risk. These are not absolute correlations.)

J.C. Campbell, D. Webster, et al., "Assessing Risk Factors for Intimate Partner Homicide," NIJ Journal No. 250 (2003): 15-19. http://www.ncjrs.gov/pdffiles1/jr000250e.pdf

P.R. Kropp, Intimate Partner Violence Risk Assessment and Management, Violence and Victims 23(2), (2008): 202-220.

J. Roehl, C. O'Sullivan, et al., "Intimate Partner Violence Risk Assessment Validation Study, Final Report," (2005). NIJ at http://www.ncjrs.gov/pdffiles1/nij/grants/209731.pdf

N. Websdale, "Lethality Assessment Tools: A Critical Analysis," (2000). VAWnet at http://new.vawnet.org/category/Main_Doc.php?docid=387

Using the Blueprint and Supplemental Materials

The Blueprint envisions a system in which each practitioner is tuned in to what others can and will likely do when intervening in domestic violence cases. It encourages practitioners to act as a collection of agencies organized around common goals and philosophies. We therefore recommend one reading of the Blueprint from start to finish, rather than going only to the section that is specific to your agency or role.

The Blueprint is organized around a common framework, "Foundations of Effective Intervention," articulated earlier in this chapter and policies and protocols for each key point of intervention, from 911 to probation and the bench (Chapters 2 through 7 and guidelines for the bench in Chapter 8). Chapter endnotes referenced throughout the Blueprint expand upon and buttress the Blueprint as a whole. We know that if people are to use the Blueprint and adapt it to their own communities, they need to be well-versed in the findings of researchers and practitioners who have paid attention to domestic violence over the past several decades. We wanted readers to have a solid selection of research and commentary to work with as they made decisions about their policies and protocols. The material was challenging to compile because the research in this field is scattered, filled with contradictions, and often politically charged. Endnotes integrate data from empirical studies, academic research, domestic violence and criminal justice literature, and national resources developed by and for practitioners. Chapter 9 includes the bibliography for all references to research, academic literature, and intervention models cited throughout the Blueprint.

The chapters addressing the areas of criminal justice system intervention all have the same structure: a framework statement that provides an overview of key aspects of the specific agency and practitioner roles in responding to domestic violence cases, followed by one or more polices and related protocols. Readers will find some repetition in content as the protocols further articulate and define the broad policy language.

The appendices referenced throughout the Blueprint can be found in the Blueprint Supplement (www.praxisinternational.org). Communities may adapt the training memos found in the appendices for local use or write their own training memos on the same topics. If you wish to adapt our material, you must receive written permission from Praxis by contacting us at blueprint@praxisinternational.org and include the following citation in the footer: *This document was originally prepared by Praxis International as part of The Saint Paul Blueprint for Safety.*

The Saint Paul Domestic Abuse Intervention Project (SPIP) has produced a companion piece, *The Distinct and Vital Role of a Legal and System Advocate*, available on its website (www.stpaulblueprintspip.org) that we recommend reading in order to understand how to work with independent advocacy programs in an interagency approach to intervention.

When a batterer

> combines threats or force (coercion) with control, such as "micro-regulating" and "micro-surveillance," the result is entrapment.
>
> - *E. Stark (2007)*

Copying the Blueprint

Two questions commonly asked regarding the use of this document:

1. **Can the Blueprint be copied?**
2. **Can the Blueprint be altered?**

The answer to question (1) is yes, absolutely. The answer to (2), however, is both yes and no. Any jurisdiction wishing to implement these policies and protocols are encouraged to use and adapt any or all of the language in Chapters 2-8, which contain actual sample polices and protocols. However, some parts of the Blueprint are not intended to be altered. This includes the six principles articulated in the foundational narrative (Chapter One), since they are essential to the Blueprint's meaning, as well as a few of the training memos which need to be precise, and are clearly marked as such. Communities will have to make changes based on state law and terminology, such as, Order for Protection (OFP), which will need to be altered. When making the cover to your local Blueprint, it would be greatly appreciated if the phrase, "Adapted from the Saint Paul Blueprint for Safety" is included.

For questions regarding the use of these materials, feel free to contact the authors at: blueprint@praxisinternational.org

Blueprint for Safety Chapter 1 Endnotes

[i] While the law brackets physical violence as specific criminal acts, other professional fields use a definition of battering that includes a variety of physical, sexual, and emotional behaviors. For examples, see Asmus et al., 1991; Dutton and Goodman; Follingstad et al., 1990; Johnson and Ferraro; Ptacek, 1999; Russell, 1990; Sullivan, 2006; Stark, 2007; Shepard and Campbell, 1992; Stark and Flitcraft, 1996; Tjaden, 2005.

[ii] "A more discriminating understanding of the nature of specific IPV [intimate partner violence] crimes, including the element of coercion, would help secure more appropriate sentencing, as well as treatment for the perpetrators, and more effective safety planning for victims (Erskine, 1999)," (as cited in Dutton, et al., 2005, p. 2).

A major debate in the literature is the efficacy of mandated policies—for both practitioners and victims.

Victims face economic and extralegal household realities that may depend on an intact family unit (Hotaling and Buzawa, 2003, p. 33). For some victims, the ability to drop charges may give them the power they need to negotiate for change in the relationship (Ford, 1991). Other victims face retaliation and rage from offenders for the system's intervention and expectations of accountability (Ptacek, 1999).

Goodman and Epstein (2008, p. 93) note that, "survivors who are forced into ... inflexible models may well reject them altogether." In Indianapolis, Ford and Breall (2000, p.8) found that when victims were given a choice of whether or not to drop the charges against the offender, and they chose not to drop the charges, they were less likely to experience re-abuse over the next 6 months.

While some victims are more satisfied with an intervention if they have some control over the system's response to their case, O'Sullivan, et al. (2007) lay out the complex legal and ethical dilemmas for practitioners facing such requests for flexibility. Their work evaluates victim safety, empowerment, and recidivism for two prosecutorial approaches to filing domestic violence cases.

[iii] For example, see the following fatality reports:

- Minnesota Coalition for Battered Women (http://www.mcbw.org/files/u1/2008_Femicide_Report_ FINAL_0.pdf);
- Washington State Coalition Against Domestic Violence (http://www.wscadv.org/projects. cfm?aId=390C83A4-C298-58F6-00EC20DCACFA40D5)
- Wisconsin Coalition Against Domestic Violence (http://store.wcadv.org/merchant.mvc?Screen=CTGY&StoreCode=WCADV&Category_ Code=PUBL-COMP)
- Additional information and links to domestic violence homicide studies in other states are available from the National Domestic Violence Fatality Review Commission at www.ndvfri.org

[iv] Stark (2007) estimates that coercive control is involved in at least 60% of domestic violence cases and is probably higher in criminal justice system cases where women seek help.

Dutton, et al. (2005, p. 2) argue "that measurement of violent acts alone cannot adequately characterize violence in intimate partner relationships (DeKeseredy and Schwartz, 1998; Dutton, 1996; Edleson and Tolman, 1992; Smith, Smith, and Earp, 1999; Yoshihama, 2000). Rather it is necessary to understand the use of, and response to, IPV in the context of the relationship and the cultural, social, and institutional systems within which the perpetrator and victim live (Dutton, 1996; Edleson and Tolman, 1992)."

Johnson and Ferraro (2000) point out the importance of making distinctions in the motives of the batterer, types of violence that are used, and cultural or social positions of the victim and the perpetrator.

Belknap and Sullivan (2003) reported on non-physical behaviors perpetrated against women in the six months before their partner was arrested. Table 1.6 shows how victims ranked frequency of occurrence for such items as "Tried to control her activities," "Discouraged her contact with family/ friends," and "Forbid her from leaving her home."

Dutton, et al. (2005) reports on the development of a measurement of coercion, demands, and surveillance. Examples of items on their Demand Subscale include "Wearing certain clothes," "Using street drugs," "Bathing or using the bathroom."

Coercion Subscale items include threatening harm to partner, self, or others. Surveillance Subscale items include "Kept track of telephone/cell phone use," "Checked or opened your mail," or checked the odometer on the car.

[v] Websdale (1999) reminds us that homicides are often preceded by multiple criminal justice interventions.

In the Quincy study, Buzawa et al. (1998, p. 189) found about half of the offenders had prior arrests for violent offenses and within two years of the last criminal justice intervention, 44% of the offenders were rearrested for domestic violence.

Hart notes that between the arrest and prosecution, 30% of offenders may re-assault (Goldsmith, 1991, p. 7) and as many as half of domestic violence victims may be threatened with retaliation for cooperation with prosecutors (Davis, et al., 1990, p. 19).

Batterers can reoffend quickly. Goodman and Epstein (2008, p. 75) say that "20% to 30% of arrested offenders re-assault their partners before the court process has concluded or shortly afterward, often as retaliation for involving them in the court system (M.A. Finn, 2003; Ford & Regoli, 1992; Goodman, Bennett, & Dutton, 1999; Hart, 1996)."

According to Gondolf and White, 20% of offenders will re-assault regardless of the intervention (2001, p. 361).

In another study, 14% of the victims reported threats from the perpetrator since disposition of their case, 8% had property damaged, 9% experienced new violence, and 37% of perpetrators had been verbally abusive. (Smith, et al., 2001, p. 72)

Batterers can be very resistant to change despite arrest, intervention, or group treatment. (Goodkind, et al., 2004, p. 515)

Offenders with a 'stake in conformity' (employed, married, stable housing) are least likely to reoffend after interaction with the justice system. (Roehl, et al., 2005, p. 14)

However, the high-risk offender with a criminal history tends not to change their behavior with criminal justice intervention. "For high risk offenders, even a 'model' court has not broken their pattern of intimidation and control and the interventions they have used to date are insufficient. Stopping chronic and/or serial batterers is apt to be a long, difficult process, not easily impacted by any

one criminal justice intervention, especially one that is fundamentally compromised by long prosecutorial and judicial delays and restricted to misdemeanor type sentences." (Hotaling and Buzawa, 2003, p. 26)

From their study of batterers in four cities, Heckert and Gondolf concluded that "men in the repeat re-assault category were slightly more likely to use a chain of tactics, or multiple tactics, in their violent incidents. That is, their violence was more likely to be excessive and unrelenting." (2004, p. III-15-8)

Buzawa et al. (1998, pp. 205 and 198) found that courts are most likely to see entrenched batterers who have had prior involvement with the system) and less likely to see those batterers who use occasional violence and have no criminal record. They suggest that the level and conditions of an intervention could be linked to risk markers made visible for each offender.

[vi] Stark (2007, p. 94) points out that the harm in domestic violence is not only due to the number of violent events, but to an accumulation of multiple harms. It is the cumulative effect, rather than a set of isolated acts that impact the victim of battering.

Erskine (1999, pp. 1207-1232) discusses the importance of exploring ongoing patterns of intimidation and coercion to determine appropriate charges for a range of criminal or violent behaviors.

A critical part of accurate risk assessment is discussing with the victim her experiences over time and marking changes in frequency and severity. (Block, 2000, p. 290)

[vii] When victims are satisfied and work well with the prosecutor's office, prosecution rates increase, there are a greater number of guilty verdicts, and victims are more likely to report continued abuse. (Buzawa and Buzawa, 2003; Belknap and Graham, 2003; ; O'Sullivan et al., 2007)

However, when a prosecutor and victim want or need different outcomes from intervention, a victim's "nonparticipation may be chosen in response to the prosecutor's noncooperation with her plan for securing herself from continuing violence." (Ford and Breall, 2000, p. 7)

80% of the women who called police wanted protection (Ford and Breall, 2000). But "a battered woman who has made prior attempts to seek prosecution of civil protection orders, only to have the perpetrator escalate his violence, may be

unwilling to face the risk that prosecution will further endanger rather than protect her." (Roehl et al., 2005, p. 15).

Goodman and Epstein (2008, p. 92) explain that when a victim perceives that her needs do not fit what the system offers, "she is likely to feel disserved or even betrayed by the police. [Police] actions may expose her to a wide range of future harms, including retaliatory violence, poverty, homelessness, and loss of community. As a result, [she] may well decline to call the police if she ever again finds herself subjected to intimate partner violence. Her friends, hearing her story, may well do the same."

Goodman and Epstein (2008, p. 94) go on to explain that "one study ... found that participants who reported feeling in control of the process of working with service providers were far more likely to rate the services they received as helpful and to use them again (Zweig, Burt, & Van Ness, 2003). Similarly, a study within the criminal justice system found that victims who chose not to report recidivist abuse to officials were those who felt they had 'no voice' in a previous prosecution." Also see Belknap and Sullivan (2003, p. 6).

[viii] In Indianapolis, Ford and Breall (2008, p. 92) found that any action by the prosecutor lowered the risk of re-abuse by 50% for 6 months.

A victim's cooperation is affected by delayed hearings, threats, and violence that continue during the process, and perceived lack of attention or support from prosecutors. (Tolman and Weisz, 1995, p. 482)

Ultimately, a victim needs to determine whether the system can provide adequate protection against the offenders' violence.

Fleury-Steiner et al. (2006, pp. 339 and 338) interviewed 178 women whose partners had been through the court system. 19% of these women had been assaulted between the time of the arrest and the closure of the case. The re-abuse continued for 38% of these victims during the first six months after the case closed and 35% experienced continued abuse in the second six-month period. These researchers concluded that if the system is not able to protect the victim while a case is pending, batterer and victim both receive clear messages about the lack of offender accountability and victim safety.

In making decisions about collaborating in a criminal justice case against the perpetrator, victims face "practical and relational obstacles" such as exposure to

retaliation, escalating violence, forced separation, or the financial hardship of an arrest. (Goodman and Epstein, 2008, p. 97; Johnson, 2007, pp. 498-510; Dugan et al., 2003, pp. 20-25; Hart, 1996)

When the case proceeds, a victim may face an increase in controlling behaviors including stalking the loss of victim status, and fears of being arrested or losing custody of the children. (McFarlane, et al., 1999, p. 311; Belknap and Sullivan, 2003, p.10.)

[ix] See Johnson and Ferraro (2000, p. 949); Stark (2007).

[x] Worden suggests that "the efficacy of many innovations [in intervention] may be contingent on the consistency of the messages that are exchanged among the victims, offenders, and practitioners" (2003, p. 10).

Interactions with the police create an important baseline for the victim's level of trust in the rest of system. Belknap and Sullivan (2003) found that whether victims believed the state was a resource for their help seeking was based on positive interaction with an officer who listened without judgment and communicated empathy. Victims saw police as helpful when they provided legal information, advocacy support, attended to medical care, and paid attention to the needs of the children.

Goodman and Epstein (2008, p. 78) note, "Other research has shown that women who experience government officials as listening to their stories and responding to their individual needs are more likely to feel treated fairly and therefore to cooperate with the prosecutor's requests than are women who feel forced into a mandatory model dismissive of their input (Erez & Belknap, 1998; Ford & Regoli, 1993)."

A perpetrator may not stop battering the victim, but victims do not stop working toward non-violence. (Campbell et al., 1998, pp. 743-762).

Goodkind et al. (2004) studied the safety planning strategies victims with children used; in particular, see Table 1: Safety Planning Strategies Endorsed and Consequence of Using Strategy (p. 520).

Researchers at Texas Women's University (2003) designed a one-hour phone contact for use with the victim during the processing of a protection order. Their study demonstrated that "abused women offered a safety intervention at the time

of applying for a protection order quickly adopt safety behaviors and continued to practice those safety behaviors for eighteen months" (p.8).

Practitioners can support a victim's safety planning by providing tactical information about the legal process, legal options, appropriate referrals, and specific communication about the risk of severe violence and lethality. (Johnson, 2007; Kropp, 2008, p. 213)

[xi] Gondolf (2004) noted a reduction in no-shows and improved completion rates of batterer intervention programs when offenders moved through the system quickly. When intervention was swift and certain, the rate of offenders entering the groups increased from 70% to 95% and the completion rate rose to 70% (p. 619). Gondolf linked the effectiveness of batterer programs to a streamlined system where violations were treated with a 'swift and certain' response, offenders identified as high risk received increased sanctions, and risk markers were monitored throughout the intervention (see discussion on page 624).

Two additional studies by Gondolf (2000; 1999) verify the impact of swift and sure response for domestic violence offenders.

In domestic violence cases, the specific language of swift and sure is not commonly used, but several authors do recommend aggressive or prompt response to violations of court orders. (Buzawa et al., 2000; Hofford, 1991, pp. 12-17) One of the four lessons reported from the Judicial Oversight Demonstration project was the importance of "procedures to monitor or educate defendants and provide a quick court response to violations of no-contact orders and other bond conditions." (Visher et al., 2007, p. 9)

To review a theoretical frame for choice theory and negative sanctions see Pratt (2008) and Kurbrin, et al. (2009).

A research study conducted by Weisburd, et al. (2008) demonstrated the impact of swift and certain responses to probation violators.

[xii] In their seminal study of the criminal justice system in Quincy, MA, Buzawa et al. (2000, pp. 9, 10, 18, and 12) found that 84% of offenders had prior arrests, 54% had six or more prior charges, and 14% had at least 30 criminal charges. In the Quincy study, nearly three-quarters of the victims had made prior calls to the police about that perpetrator. "Less than half the victims were living with the offender at the time of incident, but three-fourths of victimizations occurred in

their homes." Even as a model proactive court, in Quincy "the system does not appear to prevent recidivism among 'hard-core' re-offenders." The population of batterers in that study recidivated within one month after arrest.

Bouffard and Muftie (2007, p. 364) reported that batterers who had been in the system with a prior domestic violence case were significantly more likely to be no-shows for batterer group intake than those without a domestic violence record.

[xiii] Dutton and Goodman (2005) describe a process of coercion and control created by both demands and threats: threats that the victim knows from past experience to be credible. In summary, a history of exposure to negative consequences from previous threats assures compliance with future demands. This dynamic of threats and consequences form a "cumulative pattern" of control that is not dependent on physical contact. To break that pattern, the victim assesses resources and options for safety that are as credible as the perpetrator's threats. For additional information about the process of coercion and control, see Dutton et al. (2005) and Stark (2007).

[xiv] In his observation of courtroom interactions in domestic violence cases, Ptacek (1999, pp. 172-178) studied how the interaction between judges, victims, and offenders can support or deter the battering dynamic. He points out that the behaviors demonstrated in the courtroom can (intentionally or not) become another resource the perpetrator can use for intimidation or coercion in the future. To that extent, a victim's experience of the criminal justice intervention can reaffirm the perpetrator's messages. Ptacek created a graphic titled "Judicial Responses that Reinforce Women's Entrapment" to describe some of the behaviors he observed. To demonstrate the potential parallels that victims may find in criminal justice interventions, he lays the judge's behaviors alongside behaviors used by perpetrators. Ptacek's graphic is available in a report by Levey, et al. (2000, p. Appendix I-2).

[xv] Descriptors of entitlement are found in the writings of practitioners with extensive experience facilitating batterer intervention programs. These practitioners are in agreement about entitlement as a foundational element of battering.

Bancroft (2002, p. 54) describes entitlement as a belief (and attitude) that the batterer alone has the right to privilege and status in this relationship.

F. Mederos (2004, p. 15) adds that entitlement is the expectation that a partner will fulfill a specific (gendered) role in the relationship and that the perpetrator

has the right to use violence, anger, or other forms of abuse for failure to meet those expectations.

Also see Pence and Paymar (1993).

[xvi] 49% of batterer groups use a cognitive-behavioral approach. (Saunders, 2008. p.157).

From a longitudinal study of batterer programs, Gondolf (2004, p. 623) concluded that cognitive- behavioral programs for batterers were the most commonly used, effective for most offenders, and less costly to administer. Also see Hamberger (1997); Pence and Paymar (1993); Sullivan (2006, p. 204); White and Gondolf (2000).

[xvii] "Violence is simply a tool ... that the perpetrator uses to gain greater power in the relationships to deter or trigger specific behaviors, win arguments, or demonstrate dominance." (Dutton, et al., 2005) In the development of a coercion scale, these same authors identified nine areas where offenders focused demands on victims: personal activities and appearance, support systems, household responsibilities, economic resources and work, health, physical intimacy, legal help seeking, immigration, and children or parenting (pp.1-3).

Stark (2007, pp. 228-278) argues that in large part the historic concept of domination has been replaced by coercive control: coercion as force or threats used to yield a desired response and control as both structural and tactical. Control could involve deprivation, manipulation, demanding compliance while controlling resources, behaviors, and support systems. Stark uses the terms microregulating and microsurveillance to emphasize the intrusion of coercive acts in the lives of victims. When combined, the product of coercion and control is entrapment.

[xviii] Dutton and Goodman (2005, p. 747) point out that a victim's cultural, religious, and economic realities give coercive tactics and threats their meaning.

For a listing of control tactics embedded in messages that are used by perpetrators before and after criminal justice intervention See Table 1.6 in Belknap and Sullivan. (2003, n.p.)

[xix] Fleury-Steiner et al. (2006, p. 329) found that a victim's decision to use the criminal justice system in the future was connected to their financial dependence

on the perpetrator, safety from abuse during prior interventions, and support from practitioners.

One of the conclusions from the Judicial Oversight Demonstration Initiative was that judges can make a difference in victim safety and offender accountability. (Visher et al., 2007, p. 2)

From observations of restraining order hearings in Dorchester and Quincy, MA, Ptacek (1999) identified five types of authority judges present to victims and offenders. The messages carried by the court's demeanor can be of believability, support, seriousness of the charge, or a dismissive 'wink and a nod.' The court's response to a victim can counteract messages of the batter, but are particularly important information for the victim's strategic planning.

Victims fear that criminal justice practitioners will believe the offender, not make an arrest, or take no action. (Russell and Light, 2006, p. 389)

Prosecutors send clear messages by communicating to the victim how the criminal justice system works and just what it can and cannot do. (Hotaling and Buzawa, 2003, p. 38)

Messages of support are also sent through the types of institutional resources that are offered: advocacy, culturally sensitive programs and referrals, translation and TDDY services, etc.

[xx] Colia Ceisel (Public Defender Ramsay County, Retired), Presentation at Saint Paul Police Department Training, June 28, 2009. For more discussion on batterers' defenses of violence, see Bancroft (2002, pp. 296-301); Buzawa and Buzawa (2003, pp. 147-148); and Loue (2001, p. 119).

[xxi] Colia Ceisel (Public Defender Ramsey County, Retired), Presentation at Saint Paul Police Department Training, June 28, 2009. For more on batterers' defenses of violence, see Bancroft (2002, pp. 296-301); Buzawa and Buzawa (2003, pp. 147-148); and Loue (2001, p. 119).

[xxii] Minnesota Coalition for Battered Women (2008).

[xxiii] For a summary of homicide trends in intimate relationships, visit the Bureau of Justice Statistics report at http://www.ojp.usdoj.gov/bjs/homicide/intimates.htm

For a discussion of national data sources and statistics, see Stark (2007 pp. 53-56).