



High Risk Victim Follow-Up Model Guidelines

Purpose

When the Maryland Network Against Domestic Violence (MNADV) developed the Lethality Assessment Program, following up with victims assessed as being in High-Danger was a consideration that was not pursued because such an approach was not the norm among domestic violence service providers. Safety to victims was a concern in conducting follow-up, or outreach, along with a perception that such an approach would be disempowering. During the intervening years, domestic violence advocates in Maryland began the practice of following up because of a belief that high risk victims required immediate attention. The Maryland experience has demonstrated that the issue of victim safety is not the concern that advocates had perceived and, rather than being disempowering, follow-up best practices have enabled advocates to provide information, support and encouragement to greater numbers of victims.

This document seeks to establish a common set of guidelines on how to respond to the unique circumstances that high risk situations present. The MNADV developed these guidelines, in collaboration with domestic violence advocates and other stakeholders across the state. They represent the best practices of advocates in Maryland; they establish a unified best practice for use by advocates and law enforcement officers in conducting follow-up services with high risk domestic violence victims after an incident has occurred, and specifically after a Lethality Screen has been administered.

Method of Follow-up

The first step is to determine the method of follow-up. Follow-up would usually include phone calls to the victim by an advocate and/or scheduled or unscheduled home visits by a team of an advocate and an officer. The method of follow-up as a standard operating procedure should be determined by the capability of the domestic violence program as to which level of outreach it is capable of conducting and, in the case of the potential law enforcement partner, by its capability and willingness to participate as a team with the domestic violence program in conducting home visits. In individual cases the method of follow-up should best be determined by examining the circumstances of the situation, especially the level of danger the victim is in, with specific consideration given to empowering and informing the victim of the danger (s)he is in and connecting her/him with services.

The domestic violence program will decide on the method it will use to conduct follow-up services. Programs should not view these methods in absolute terms: they can adopt follow-up by using the telephone for some cases and reserve home visits for situations that might call for an enhanced level of contact with a victim. Programs should be open to follow-up methods and constantly reassess them. A decision to use home visits as a follow-up method can only be made in conjunction with a program's partner law enforcement agency.

Conducting Phone Call Follow-Up

Goals

Advocates should conduct phone calls as a method of follow-up with the victim in order to check on the victim's well-being, to educate the victim, to conduct immediate safety planning and to encourage the victim to utilize services.

Conversation with the Victim

Advocates should incorporate the points of conversation from the LAP Hotline Conversation Guidelines into their discussion with the victim. They should:

- Explain the limits of their confidentiality;
- Make an effort to gain the victim's trust. Engage in a discussion instead of talking "at" the individual;
- Use the discussion to find out more information about the history of abuse or the current incident. Discuss the lethality assessment and the victim's risk/children's risk of being seriously hurt or killed. They should familiarize themselves with other questions from the Danger Assessment, and other methods of abuse to move the discussion;
- Find out whether or not the individual has ever reached out for help in the past and the outcome. Also, find out if the victim has ever been in for services to a domestic violence agency, a hospital, the courts, etc., and the outcomes of each interaction;
- Explain the services that the domestic violence program provides and provide education, as needed, to ensure that the victim understands that the abuse is not her/his fault. Offer information about the full range of programs the domestic violence program offers because some clients may be hesitant to shelter or counseling but more open to legal help;
- Actively encourage the victim to come into the office or make an appointment for further services with the domestic violence program.

Timeline

The domestic violence program should conduct phone call follow-up within 24 hours of receipt of a High-Danger screen, or as required by the urgency of a particular victim's situation. The phone number used to contact the victim should be that which the victim provided to the officer or advocate during the course of the lethality call. Advocates should make three attempts to follow-up with the victim by phone. If an advocate is unable to reach the victim after three attempts, the advocate should consider making a request to law enforcement to conduct a well-being check on the victim. If no contact is made, a subsequent attempt should be made after thirty days.

If an appointment has been scheduled immediately following the lethality call, the victim should be contacted by phone on the morning of the appointment as a reminder and to check on her/his well-being. Victims may be reluctant to keep the appointment and advocates should strongly encourage the victim to keep the appointment. If a particular circumstance, such as child care or transportation, is a problem for the victim, the advocate should seek to problem-solve to provide an opportunity for the victim to seek services. Such problem-solving may include providing child care at the program or contacting the participating law enforcement agency to try to arrange for transportation.

Conducting a Home Visit

Partnership

Conducting home visits, generally to victims who have not yet engaged the domestic violence program, is a partnership between the advocate and the officer. This type of partnership, however, brings together two disciplines that typically work toward the same goal—victim safety—utilizing different methods.

Goal

The key to the partnership is to understand what home visits to high risk victims, and often to highly dangerous abusers, are seeking to accomplish, and the goals of the home visit are the same as those of phone call follow-ups: to check on the victim's well-being, to educate the victim, to conduct immediate safety planning and to get the victim into domestic violence services which is protective of victims and thus a crime prevention tool.

Respect for One Another's Work

Working together as part of a follow-up team, as with any partnership, will take time, patience and a willingness to educate one another about the other's work. As this learning process evolves, it is important to maintain a mutual respect of the work of one another's partner.

Advocate-Officer Team

Home visits of high risk victims are the domain of advocate-officer teams of the jurisdiction(s) involved. Home visits enable the advocate and officer team to observe the victim first hand, to be in a better position to assess the victim's level of danger, and perhaps to motivate the victim to take action.

Announced and Unannounced Options for Home Visits

The team may consider scheduling home visits with victims beforehand. If it is not feasible to schedule visits, the team may conduct unannounced visits and may adopt this practice as a norm.

Visitation Policies

- Advocates should not conduct home visits by themselves. The team of the advocate and officer are better equipped and safer handling the variety of situations that can arise during a home visit.
- Law enforcement agencies should not have policies or procedures that require officers, without an accompanying advocate or coordinating with the partner domestic violence program, to make home visits for the purpose of safety planning or referral to a domestic violence program. In cases where the domestic violence program does not have the capability to participate in a home visit protocol, and the law enforcement agency wishes to conduct home visits for the purpose of providing safety information and referral, the agency and domestic violence program should coordinate such law enforcement home visits. The coordinating officer and advocate should consider sharing non-confidential information that might be conveyed to the victim in a manner that will insure that the victim understands that both are working together for the victim's benefit.

Timeline

The advocate-officer team should conduct home visits within 48 hours of receipt of a High Danger screen by the program, as required by the urgency of a particular victim's situation, or as agreed upon by the law enforcement agency and local program not to exceed the current work week. Home visits of screens received by the program on the weekend should be conducted within 48 hours of the first business day.

The team may discontinue the home visit efforts after three unsuccessful attempts to make contact with the victim, or fewer unsuccessful visits if the particular circumstance warrants discontinuation. By mutual agreement the team may decide whether to continue beyond three attempts if both the advocate and the officer consider contact with the victim acutely critical to the victim's and children's well-being. After thirty days, the domestic violence program will attempt to make telephone contact with the victim to renew efforts at follow-up by the team.

Resolving Team Concerns

Advocates and officers who have concerns about how the other carries out his/her role, or about the overall willingness to work as a team, should bring the matter to the attention of their own supervisor, if the matters are not able to be personally resolved, who in turn should discuss the matter with the other's supervisor to find resolution. Unresolved issues should move through each agency's/organization's hierarchy, as necessary, for decision-making.

Roles of Advocates and Officers during Home Visits

Advocates

The advocate's role is to provide the victim with safety planning, resources and encouragement to participate in domestic violence services. A victim's willingness or ability to participate in services may depend on the victim's circumstance and understanding of the dynamics that encompass the relationship. Services should be offered based on the victim's situation—depending on whether the victim has left the relationship, is planning to leave or remains in the relationship. The advocate's job is to honor the victim's choice and to work with the victim where(s)he is in terms of the victim's particular stage of change at the present moment.

Prior to conducting a home visit, the advocate will:

- Be at the designated meeting place to begin the home visits on time;
- Have adequate, pre-identified handout materials for victims concerning services;
- Review the hotline documentation of the lethality call and the Lethality Screen;
- Review police reports pertaining to the victim's situation;
- Share with her/his partner any background information on the victim and the abuser that the advocate is permitted to disclose. Of particular concern would be the potential danger the abuser might pose to law enforcement;
- Wear comfortable, professional attire.

Officers

The officer's role is to provide information that will enable the victim to understand that physical abuse is a crime and how the criminal justice system works; ensure the safety of all individuals on the scene; and enforce the law, as necessary.

Prior to conducting a home visit, the officer will:

- Be at the designated meeting place to begin the home visit on time;
- Review reports, including previous reports concerning the victim and abuser;
- Make records checks, including warrant, protective order, and firearms checks on the abuser;
- Have the police vehicle inspected and ready to go;
- Prepare law enforcement documents related to the parties involved in the visit;
- Ensure that the advocate understands the safety guidelines contained in these protocols for the home visit and knows how to carry them out.

During the visit, the officer will:

- If the abuser is not present, allow the advocate to guide the conversation and provide law enforcement related information as asked or needed;
- If the abuser is present, try to separate the parties in a comfortable, non-confrontational manner so that the officer remains with the abuser and the advocate with the victim;
- If the abuser is present but separating the parties does not appear to be feasible, share the conversation with the advocate so that both the officer and advocate are equally providing information pertinent to their functions.

Team

Both the advocate and officer as a team will:

- Review the information they have obtained with the other on each case and prepare a plan for each visit they are making.
- Discuss and agree upon the appropriate approach to the visit;
- Work out a route if there are multiple visits to be made;
- Discuss particular aspects of cases so both can contribute to the discussion of how certain matters should be approached, such as the potential presence of children and whether they were present during the incident which prompted the visit, and any dangers the abuser could pose.

Procedures for the Home Visit

Considerations when arriving at the home:

- Locate the address of the client.
- Park in a spot that is not in front of the address or in the driveway.
- Check for potential safety hazards before leaving the vehicle.
- Carry only those items necessary to conduct the home visit.
 - Secure personal belongings out-of-sight in the vehicle.
 - Keep keys accessible.
 - Keep doors locked until you are ready to exit the vehicle.

Considerations when approaching the home:

- Visually inspect the outside of the home and surrounding area.
- Do not stand directly in front of the door.
- Look and listen for noises from people inside and outside of the home (dogs, crying, fighting).

Considerations when entering the home:

- Visually inspect the inside of the home to note any hazards or identify the presence of children.

- Wait for the identified victim to come into view before entering the home (in case an unidentified person answers the door).
- Mentally note the victim's presentation.

Considerations while inside the home:

- Conduct the visit in rooms where you can easily leave quickly, if necessary.
- Never leave the visual presence of his/her partner.
- Stay aware of behaviors of the victim, of the abuser, and of the environment.
- If safety is at risk, the advocate should leave immediately, while the officer defuses or controls the situation.

Considerations while interviewing the victim:

- Present to the victim in a professional, but caring and respectful way (e.g., speak with the victim at eye level, open posture, etc).
- Be aware of the victim's demeanor and respond accordingly.
- Always refer to the abuser by name and be respectful when discussing the abuser.
- Assess for suicidal ideation and follow appropriate steps for getting the client help.

Considerations upon leaving the home:

- Be aware of people or activities taking place near the residence, the exit route and the vehicle. If there is danger, proceed with an alternate plan.
- Leave the scene right away. Do not make phone calls or write notes sitting in the car on the scene. This should be done in a safe place.

Conversation Points for Different Scenarios

Respect

When conducting a home visit, treat everyone present in the house with respect. Each victim may view their relationship differently; they may not call their partner an "abuser." Using such words may cause a victim to distance themselves from the home visit process. Follow the client's lead.

Scenarios

Every home visit will not be the same. Often the visit will be brief; however, there will be times when the needs of the situation demand that the team spend more time. Both team members should be of one accord at all times. The team should discuss how they will address the following scenarios:

- if the abuser is not home;
- if the abuser is home during the unannounced visit;
- if the abuser returns home while the team is still present.

If the abuser is not home at the time of the visit:

- Conduct the follow-up visit as originally outlined above;
- Ask the victim when (s)he expects the abuser to return (this can gauge the length of the home visit and may give light to any further information about how the abuser will react if (s)he returns and finds the team present).

If the abuser is home at the time of the visit:

- Interact with the victim (and possibly abuser) based upon the non-verbal or verbal cues given;

- Speak generally, if possible, about the nature of the visit and offer general resources to both parties;
- Maintain victim confidentiality;
- Separate the partners, if this can be done comfortably and without alarm to either party. Separating the victim from the abuser may enable the advocate to convey more information and enable the officer to communicate with the abuser about the criminal consequences of domestic violence.

If the abuser returns home during the home visit:

- Have the officer take the lead on how to handle the situation;
- As feasible, the team should engage in non-verbal cues;
- Use information regarding the abuser's previous interactions with police; also ask the client for input;
- Gauge verbal and non-verbal cues.

Conversation with the Victim

As with phone call follow-ups, advocates should incorporate the points of conversation from the LAP Hotline Conversation Guidelines into their discussion with the victim. They should:

- Explain the limits of their confidentiality;
- Make an effort to gain the victim's trust. Engage in a discussion instead of talking "at" the individual;
- Use the discussion to find out more information about the history of abuse or the current incident. Discuss the lethality assessment and the victim's risk/children's risk of being seriously hurt or killed. They should familiarize themselves with other questions from the Danger Assessment, and other methods of abuse to move the discussion;
- Find out whether or not the individual has ever reached out for help in the past and the outcome. Also, find out if the victim has ever been in for services to a domestic violence agency, a hospital, the courts, etc., and the outcomes of each interaction;
- Explain the services that the domestic violence program provides and provide education, as needed, to ensure that the victim understands that the abuse is not her/his fault. Offer information about the full range of programs the domestic violence program offers because some clients may be hesitant to shelter or counseling but more open to legal help;
- Actively encourage the victim to come into the office or make an appointment for further services with the domestic violence program.

If the client declines to speak with the advocate, the advocate should ask if (s)he can leave a business card or information in a safe place for the victim to review when (s)he is ready. If the victim is willing to offer a phone number, the advocate should take the number and follow up with the victim at a later time.

Working with Victims with Limited English Proficiency

When an advocate-officer team contacts a victim who does not speak English and the team is unable to communicate directly with the victim, the team should use the language line or should contact, if such contact will not cause an undue delay, an advocate or officer who speaks the language of the victim.

In preparing to go to a home where English is not spoken, the team should also try to be aware of certain cultural norms that may need to be observed and that may affect the visit, such as gender roles, who might answer the door, people coming to the house unannounced.

Debrief following the Home Visit

Once a home visit is completed, the team should discuss all aspects of the visit with a view toward improving the way that particular situations were handled. The team should review preparation, adequacy of materials that were provided, personal safety considerations, how they were able to manage the scene and various conversations that occurred, how they were each able to communicate with the various persons on the scene, how the victim responded to them, and how they interacted with one another.

Documentation following the Home Visit

Both the advocate and officer should each document the visitation in the manner their agency records contacts. However, the program should establish a general documentation sheet of high risk home visits as a basic record of the visit and to serve as the repository of the record.