



**Maryland Network**  
**Against Domestic Violence**  
**WORKING TOGETHER FOR A SAFER FUTURE**



# **Maryland Domestic Violence Fatality Review**

## **2016 STATEWIDE DOMESTIC VIOLENCE FATALITY REVIEW TEAM ANNUAL REPORT**

### ***OPPORTUNITIES FOR IMPACT***

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## Introduction

The Maryland Network Against Domestic Violence (MNADV) presents its **Statewide Domestic Violence Fatality Review Team (DVFRT) Report** entitled: *Opportunities for Impact*. This report identifies key findings, recommendations, trends impacting victims of domestic violence in Maryland and actions that have been taken, based on the 2016 reports from DVFRTs across the state. It illustrates the purpose and authorization of DVFRTs, identifies local teams, and describes the methodology utilized in reviewing cases and creating recommendations statewide. MNADV creates this report as a tool to improve systems, policies, and procedures to decrease domestic violence-related homicides. It can also be used to guide local and state agencies, funders, nonprofits, and policy makers with their strategic planning and legislative advocacy. As domestic violence is a community issue that spreads far beyond the parameters of shelters, police stations, law offices, and hospital emergency departments, this report can be a catalyst for discussion.

## Domestic Violence Fatality Review Teams (DVFRTs)

### The Purpose of DVFRTs

Domestic Violence Fatality Review Teams (DVFRTs) are teams of multi-disciplinary professionals and community members who come together to analyze cases of intimate partner homicides and near-homicides. Teams are comprised of domestic violence service providers, law enforcement agencies, the State's Attorney's office, the local health department, the local department of social services, the domestic violence coordinating council, abuser intervention services providers, the Division of Parole and Probation, hospitals, judges and clerks of the District and Circuit Courts, the Chief Medical Examiner's office, survivors of domestic violence, and any other person necessary to the work of the team, as recommended by the team. Teams examine the circumstances of the abusive incidents, the relationship history and the individual histories of the victim and the perpetrator. Teams honor the lives of victims by identifying gaps in services and providing recommendations for improving agency, systemic, and statewide responses to victims of domestic violence. Their professional expertise is critical to working toward preventing future deaths in Maryland. This review process looks for missed opportunities for intervention and areas for change that could have prevented the homicide or near-homicide.

The primary purposes of DVFRTs are to prevent domestic violence-related deaths by:

- **Promoting** a coordinated community response among agencies that provide services related to domestic violence;
- **Identifying** gaps in service and developing an understanding of the causes of deaths

- related to domestic violence;
- **Recommending** changes, plans, and actions to improve:
  - Coordination related to domestic violence among member agencies;
  - The response to domestic violence by individual member agencies; and
  - State and local laws, policies, and practices; and
- **Influencing** the adoption of the recommended changes, plans, and actions.

## The Law

House Bill 741 - *Local Domestic Violence Fatality Review Teams* was signed into law by Governor Robert Ehrlich on April 26, 2005. It became effective July 1, 2005. The legislation enabled counties to establish DVFRTs, making Maryland the twenty-first state that passed legislation regarding domestic violence fatality review. It allowed system partners to share records and examine the circumstances of a relationship from multiple perspectives without internal confidentiality limitations, risk of liability or concerns about assigning blame. The domestic violence fatality review legislation, based on the legislation establishing child fatality review teams, is codified under the Family Law Article, Title 4, Subtitles 701-707 and the Courts and Judicial Proceedings Article, Title 5, Subtitle 637.1.

FL§ 4-701: Defines domestic violence (DV) as being between “intimate partners.”

FL§ 4-702: Authorizes establishment of team and organizing agencies.

FL§ 4-703: Sets out membership.

FL§ 4-704: Establishes:

- Purpose—to prevent deaths,
- Method of operation—creation of protocol and review of DV fatalities and near fatalities,
- Scope of review—number and type of cases for review.

FL§ 4-705: Authorizes mandatory access to records.

FL§ 4-706: Authorizes closed meetings when discussing cases.

FL§ 4-707: Authorizes confidentiality and protection from civil and criminal proceedings.

CJ§ 5-637.1: Allows for protection from liability.

## **Domestic Violence Fatality Review Team Methodology**

### **Selection of Cases for Review**

The review process begins with the selection of cases. Some DVFRTs use a case screening committee to identify cases that are appropriate for review, such as homicides, suicides, and cases of serious physical injury. Some teams not using a case screening committee obtain eligible cases from their prosecutor and/or law enforcement representative and decide as a full team which cases they will next review. Other DVFRTs use a team consensus selection process guided generally by appointed team members. After the team or committee selects the case, the chairperson submits the victim and perpetrator's names and other basic identifying information to the team's members so that they may research their agency files to determine what, if any, records and/or other relevant information they may have.

### **Gathering Information**

By request of the DVFRT chair, the team legally is granted access to team members' critical information, reports, and records relevant to the victim and the perpetrator. Teams can also request records and information from agencies that are not participating team members. The release of medical records is covered by HIPAA, and local teams work with the health facilities in their counties on an individual basis to seek the release of records.

### **Interviews**

The team, the case screening committee, or the Chair determines, before or during the course of a review, whether any family members or other individuals have any information useful to the case review. If so, the team or committee appoints members to contact them and determine whether interviews are appropriate. The team or committee will often assign interviews to team members who are domestic violence counselors or advocates by profession. Interviews with family or friends are conducted with great sensitivity, compassion, awareness, and caution. The team or committee may choose not to interview certain family members, friends, or other individuals if they believe that such contact may be counterproductive or harmful in any way. Some interviewees may be asked or choose to address the DVFRT as a whole. In near-fatality cases, the surviving victim may be invited to address the DVFRT as part of the case review. The perpetrator may be interviewed as well.

### **Recommendations**

With each case that is reviewed, each member whose agency was involved in a finding and recommendation will take the proposition to the agency head with a request for consideration and action. At subsequent meetings, the member provides a report of what, if any, action was taken concerning the recommendation. If the recommendation applies to laws, community practices or entities other than those represented by the members, the team will create an action plan to effectuate the recommendations.

## Annual Report

Each team can prepare an annual report in order to provide information to the public, agencies and organizations. The report may not, by law, ascribe findings and recommendations to particular cases. If circumstances are described, they may not be attributed by name to the cases, identifiable by the circumstances, or described in a manner that would readily permit the identification of an individual.

The annual report is a public document that is used as a vehicle to promote social change. It can be distributed to a broad audience including:

- The Governor's Office of Crime Control and Prevention;
- The Governor's Family Violence Council;
- The State Board of Victim Services;
- The Maryland Health Care Coalition Against Domestic Violence; and
- The National Domestic Violence Fatality Review Initiative.
- Member agencies/organizations;
- County and municipal governments;
- County representatives;
- Legislators and other elected officials; and
- Media outlets.

The team may distribute its report to any agency, organization, or individual whom it believes can have a constructive effect on its recommendations. Additionally, families of victims whose cases were reviewed may also receive a copy.

## Statewide Coordination

Since Maryland does not have a single, statewide domestic violence fatality review entity, the MNADV fills this gap and serves all of Maryland's DVFRTs by providing statewide coordination, support and guidance.

## Statewide Recommendation

In 2016, three teams highlighted the need for education about the signs and dynamics of domestic violence for middle school, high schools, and college students. This commonality was discussed during the Maryland Domestic Violence Fatality Review Council (MDVFRC) meeting which included chairs, vice chairs and coordinators. Council members discussed the desire to pursue prevention and education as a statewide recommendation.

In response to this statewide recommendation, MNADV has pursued and will receive funds through the TJX Foundation to conduct primary prevention work. The MNADV has proposed a healthy relationships pilot project in schools in collaboration with the Governor's Family



Violence Council Healthy Teen Dating (HTD) Work Group. The ultimate goal of the work group is to devise a resource guide for school districts on the topic of HTD with the hope of adopting one or more curricula. Once the resource guide is created, the goal would be to create an advocacy campaign to promote HTD curricula in schools.

### **Statewide Training and Technical Assistance**

MNADV provides technical assistance by attending meetings to share the experiences of other teams and offer state and national resources. From January 1 – September 30, 2016, the MNADV has attended 16 meetings in 9 different jurisdictions. MNADV has assisted teams by providing feedback on recommendations, team membership, and ways to enhance case review. MNADV also educates DVFRs through statewide trainings, electronic resources, and offers opportunities for team collaboration for all local DVFRs.

Specifically, MNADV coordinated a statewide training on July 13, 2017 for all DVFR members. The training brought together prosecutors from three different counties to educate team members on the criminal justice process from the prosecution perspective. The intention behind this training was to provide team members with a stronger foundation for their case reviews, which are often initiated by law enforcement and prosecution.

### **Maryland Domestic Violence Fatality Review Council (MDVFR)**

The MDVFR meets annually to discuss issues of statewide applicability and to provide training and guidance on local team processes. This year, the Council met on August 30, 2017 and included a discussion of each DVFR's recommendations to the public.

### **Annual Memorial Service**

MNADV held its 29<sup>th</sup> Annual Memorial Service on February 13, 2017 to honor the memory of Marylanders who lost their lives due to domestic violence during the previous year. To view the 2016 Domestic Violence Memorial Service Fact Sheet visit: [http://mnadv.org/\\_mnadvWeb/wp-content/uploads/2011/07/2016-Memorial-Fact-Sheet-Letter.pdf](http://mnadv.org/_mnadvWeb/wp-content/uploads/2011/07/2016-Memorial-Fact-Sheet-Letter.pdf)

## Maryland DVFRTs

**Anne Arundel County, Est. 2003**  
**Baltimore City, Est. 2006**  
**Baltimore County, Est. 2006**  
**Calvert County, Est. 2004**  
**Carroll County, Est. 2008**  
**Cecil County, Est. 2007**  
**Charles County, Est. 2008**  
**Dorchester County, Est. 2008**  
**Garrett County, Est. 2007**

**Harford County, Est. 2007**  
**Howard County, Est. 2005**  
**Montgomery County, Est. 2005**  
**Prince George's County, Est. 2006**  
**St. Mary's County, Est. 2007**  
**Washington County, Est. 2006**  
**Wicomico County, Est. 2009**  
**Worcester County, Est. 2007**

### County-by-County DVFRT Recommendations - 2016

#### Anne Arundel County Recommendations:

The Anne Arundel County DVFRT made two recommendations:

1. To continue investigating resources regarding the clean-up of crime scenes; and
2. To reach out to military branches in Anne Arundel County regarding documentation of domestic violence history.

Anne Arundel County's DVFRT followed up on their 2015 recommendation regarding crime scene clean-up. In 2015, they made the key finding that when a homicide occurs on private property, survivors are burdened with the responsibility of cleaning up the crime scene. They receive a cold referral to resources from first responders at best. Those cleaning agencies have no standardization regarding costs, insurance coverage, quality of service and the care regarding the removal of hazardous materials. They recommended that research be done around the current protocols and best practices from other jurisdictions.

In 2016, the Anne Arundel DVFRT conducted the recommended research and learned:

- That there are no certifications and best practices for crime scene clean-up companies which can lead to improper biohazard disposal, price gouging and other scams;
- That there is no consistent list of reputable companies or referral practices for first responders;

- That insurance companies sometimes pay for clean-up, but often the claim is denied if the policy-holder caused the crime. Furthermore, even if clean-up services are covered, deductibles and premium increases still apply, which can provide financial hardship; and
- That there was no services or agencies for financial relief, other the Criminal Injuries Compensation Board, which limits its coverage.

The Anne Arundel DVFRT's action steps are to continue research and meetings to determine the feasibility of legislation.

The Anne Arundel County DVFRT also recommended contacting representatives from each branch of the armed forces to discuss consistent documentation of domestic violence incidents and a history of domestic violence.

### **Baltimore City Recommendations:**

The Baltimore City DVFRT made three recommendations:

1. To create a mechanism to notify victims of the outcome of an initial appearance hearing, specifically whether the defendant was held or released, and any special conditions of release that the Court issued;
2. To train police and staff in recognizing the indicators of traumatic brain injury and the unique challenges of serving intimate partner violence victims who have experienced traumatic brain injury; and
3. To create a specialized training for Baltimore Police Department and domestic violence service providers to address the unique challenges of working with victims of intimate partner violence who use substances.

### **Baltimore County Recommendations:**

The Baltimore County DVFRT made two recommendations:

1. To investigate and educate about the intersection of domestic violence and gambling; and
2. To offer resources, including trainings, in local obstetrics and gynecology (OB-GYN) clinics and offices.

The Baltimore County DVFRT explored the connection between gambling and domestic violence as a result of their findings in their case review. Team members researched existing academic information regarding the intersection of gambling and domestic violence, resources for individuals with gambling addiction, as well as any trends of problem gambling within Baltimore County. Action items also include creating and disseminating a fact sheet on the intersection of domestic violence and gambling, with accompanying resources.

The Baltimore County DVFRT recommended that resources, including trainings, be offered to local OB-GYN clinics and offices. Their recommendation was supported by the research of Dr. Diana Cheng<sup>1</sup>, who found that homicide is the leading cause of death of pregnant women in Maryland, and among the leading causes of death of pregnant women around the country. The majority of homicides of pregnant women are domestic violence-related. Team members investigated the existing materials for training OB-GYN offices and clinics and best practices for screening for domestic violence, as well as the possibility of looking into the statistics on abuses to pregnant women in Baltimore County, according to police reports. Action items also include developing a best practices and resources sheet, as well as conducting outreach to local obstetricians and gynecologists.

### **Carroll County Recommendations:**

The Carroll County DVFRT made two recommendations:

1. To develop an awareness and education campaign about domestic violence for employers; and
2. To develop an awareness program for middle school students.

The Carroll County DVFRT recommended that community partners develop an awareness campaign for workplaces to focus on recognizing intimate partner violence. The campaign would also educate employers about the resources available to assist and support survivors and their families. Action items included identifying and obtaining workplace-appropriate materials relating to intimate partner violence. Team members also reached out to Carroll County employers, businesses, service groups, health care providers and the Chamber of Commerce to request opportunities to address their membership on intimate partner violence, its impact on employees, and the impact on employers' business. Family and Children's Services, the local domestic violence service provider, also trained staff to make audience-appropriate presentations upon request.

The Carroll County DVFRT also recommended that the Carroll County Public Schools and local service providers collaborate in the development and implementation of intimate partner awareness programs for middle school audiences. Team members from the Carroll County Public Schools, in collaboration with Family and Children's Services, are working to develop appropriate curricula and train school guidance staff on these materials.

### **Cecil County Recommendations:**

The Cecil County DVFRT recommended that community education take place to teach children about domestic violence at a young age within the school system. The team suggested that education efforts be made for children in middle and high school.

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<sup>1</sup> Cheng, D., Horon, I.L. (2010). Intimate-partner homicide among pregnant and postpartum women. *Obstetrics & Gynecology*, 115(6), 1181-1186.

### **Charles County Recommendations:**

The Charles County DVFRT used their 2016 meetings to focus additional attention on their 2015 recommendations and to review their first near-fatality. As a result of their meetings, the Charles County DVFRT made three recommendations:

1. To create or improve the mechanism to monitor individuals that transfer between states;
2. To develop a national parole and probation data system; and
3. To include drug/alcohol screening on domestic calls for service.

The Charles County DVFRT created an 8-step development plan which included concrete action steps such as minimizing the administrative “red tape” when local parole and probation agents want to send violators to a different state, developing zero tolerance policies for domestic violence and theft, requiring urinalysis testing for parolees who are transferring between states and providing training to the parolee’s family about acceptable behaviors and needs prior to interstate transfer. The team determined that these recommendations would be appropriate for legislation.

The Charles County DVFRT also recommended that the Lethality Screen, an evidence-based assessment tool used by first responders, to include a question regarding drug and alcohol abuse. That recommendation will be forwarded to the Domestic Violence Fatality Review Council.<sup>2</sup>

### **Frederick County DVFRT Recommendations:**

The Frederick County DVFRT made a recommendation to look into funding opportunities to promote safety when a victim is attempting to leave an abusive relationship. The DVFRT identified the funding constraints of victims when seeking emergency safety or shelter and when participating in family law matters. Specifically, team members recognized the lack of resources to change locks, reinforce doors and windows, and take other protective measures. Team members also acknowledged the risk that victims face when attempting to serve their abusers with legal paperwork. If victims had funds for low-bono legal assistance or pro-bono opportunities, this risk would be mitigated. As a result of these obstacles, the DVFRT recommended research into alternative funding sources for security measures and outreach to local attorneys for legal resources.

The Frederick County DVFRT also followed up on their 2015 Recommendation to increase education, awareness and training regarding strangulation. During 2016, team members attended the Training Institute on Strangulation Prevention in San Diego, CA. Additionally, staff

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<sup>2</sup> MNADV received this recommendation. The Lethality Screen currently does not include a question regarding drug and alcohol abuse because the original committee that reviewed the research of Dr. Jacquelyn Campbell and created the tool did not include it. Although alcohol use is included in the Danger Assessment, it was not determined by the committee to be most predictive of intimate partner homicide.

at Frederick Memorial Hospital created a strangulation brochure and an evidence kit that focuses on strangulation. Training will be ongoing for law enforcement through 2017.

### **Howard County DVFRT Recommendations:**

The Howard County DVFRT made five recommendations:

1. To revise the Maryland Sentencing Guidelines to prioritize and identify domestic violence cases on sentencing guidelines worksheets;
2. To require additional judicial education on domestic violence-related issues;
3. To provide expanded enforcement of the no-contact order while a defendant is awaiting trial or serving a sentence;
4. To create a statewide Domestic Violence Fatality Review Team to facilitate discussion and exchange of ideas; and
5. To require continued education for attorneys admitted to the Maryland Bar on domestic violence issues.

The Howard County DVFRT has identified gaps in the system regarding criminal procedure, continuing education, and statewide collaboration. With respect to criminal procedure, the Howard County DVFRT suggested that domestic violence-related crimes prosecuted in the Circuit Court be labeled as “domestically related,” as has been done in district courts since 2014. This designation would require a modification to the Maryland Sentencing Guidelines Worksheet. The team also recommended that it be revised to include this designation and whether the crime happened in the presence of a child, which would allow for enhanced penalties.

Similarly, the Howard County DVFRT has encouraged the Howard County Detention Center to change its procedures and practices to expand enforcement of a no-contact order for incarcerated abusers. Currently, if an abuser is subject to a no-contact order as a bond or probation condition, the order does not apply until they are released, therefore giving them a window to contact their victim while in jail or prison without criminal repercussions. As a result of this loophole, the team suggested that the detention center and the Sheriff’s Department gain information regarding civil protection orders with no-contact provisions, and work to use those orders to hold the offender accountable criminally and civilly.

The Howard County DVFRT recommended that Maryland-licensed attorneys and members of the judiciary participate in continuing education regarding domestic violence. With regard to judicial training, team members would like to coordinate with the Judicial Education Commission to provide training to new judges, and collaborate with MNADV to conduct training on domestic violence issues with sitting judges. The team would also like Maryland-licensed attorneys to be required to receive continuing education credits in criminal and civil domestic violence issues. Both of these recommendations are in the planning processes.

Lastly, the Howard County DVFRT would encourage the creation of a statewide fatality review council to collaborate with other jurisdictions and determine whether other teams have already made recommendations. The team has brought this desire to MNADV, which brings together all DVFRT Chairs and Co-Chairs on an annual basis and provides statewide trainings for all DVFRT members annually.<sup>3</sup>

**Prince George’s County DVFRT Recommendations:**

The Prince George’s County DVFRT took a subset of the homicide cases in their jurisdiction to focus review team efforts. In a multi-year evaluation, the Prince George’s County DVFRT examined murder/suicide situations and made eleven findings and accompanying recommendations:

The Prince George’s County DVFRT made eleven recommendations:

1. To, as a community, make the time and financial commitment to learn more about a victim’s danger and lethality risks when separating from their abusers and apply that information to policies, practices and actions;
2. To, as a community, become educated about the predictors of domestic violence murder/suicides and provide that information to County 211, service provider websites, social networking sites, as well as posting the information in prominent places, such as courthouses, police stations, courthouses, community centers, etc.
3. For the County Executive to appoint and convene a Task Force to study the procedure and effectiveness of the emergency evaluation process for assessment of suicidality and domestic violence.
4. To educate judges, court commissioners, prosecutors and attorneys on the latest research pertaining to domestic violence dynamics and help-seeking behaviors as it relates to cultural context, with the goal of better evaluating the respective risks each victim and perpetrator present, and enhancing awareness of how bystanders can respond.
5. For the County Executive to coordinate the county-wide adoption of a protocol to provide immediate services to children who are present during a domestic violence-related homicide, including MOUs to delineate responsibilities for intervention and follow-up. The team already has effectuated this recommendation.
6. For legislators to strengthen firearm laws to prohibit the possession of firearms by any perpetrator convicted of a domestically-related crime and for judges to include a similar prohibition in probation terms.
7. To educate judges, police, court commissioners, lawyers and policy makers on the increased risks that women face of being killed by an intimate partner.

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<sup>3</sup> This request was also included in a recent training and technical assistance needs assessment to determine the desire of other team members. Statewide coordination efforts have been a goal of MNADV’s technical assistance efforts and were included in a recent grant application.

8. For agencies, social service and mental health providers, criminal justice organizations and community members to increase education around healthy relationships and the serious implications of jealousy.
9. To, as a community, become educated about the predictors of domestic violence and suicidality.
10. For domestic violence service agencies, social services agencies, mental health providers and criminal justice organizations to conduct outreach and provide services to communities in culturally appropriate and relevant ways, specifically to address domestic violence, violence predictors and suicide warning signs. Funding should also be secured for those efforts.
11. For arrest warrants to be issued and bail to be considered for all new crimes involving perpetrators of domestic violence to reflect the risks of danger to the victim and the public.

### **Wicomico County DVFRT Recommendations:**

The Wicomico County DVFRT recommended that high school and college students should be educated to recognize the signs of an unhealthy relationship.

Their recommendation included:

1. Ensuring counselors are trained to identify the signs of an unhealthy relationship and the resources available when they have questions;
2. Requiring middle and high school students to learn about the signs of an unhealthy relationship and encouraging them to say something if they see something; and
3. Educating students about suicide, mental health concerns and unhealthy relationships at university orientation and important high school events through flyers, presentations or brochures.

The team will effectuate this recommendation by reaching out to the Superintendent of Schools and providing their DVFRT report and local resources. The team will also reach out to Salisbury University regarding their implementation of the One Love Foundation program.

### **Conclusion**

MNADV is grateful for the commitment and participation of each county's DVFRT to improving the local and statewide response to intimate partner violence. Their thoughtful work and effort informs MNADV's legislative pursuits, technical assistance and programmatic plans. MNADV appreciates each team member's dedication to victims of intimate partner violence and hopes that this report will be a catalyst for opportunities for impact.



## Contact Information

### Maryland Network Against Domestic Violence

4601 Presidents Drive, Suite 370

Lanham, MD 20706

Tel: 301-429-3601

Fax: 301-429-3605

Email: [info@mnadv.org](mailto:info@mnadv.org)

Website: [www.mnadv.org](http://www.mnadv.org)