

**City of Lynchburg
Family Violence Fatality Review Team
Data Collection Form**

Case review #:

Case Type (Homicide, Suicide, Homicide-Suicide, Multiple Homicide)

VICTIM/DECEDENT INFORMATION:

Full Name

Data of Birth

Date of Death

Age (in years)

Gender

Marital Status

Other intimate partners at the time of the incident

Place of Residence: House/Apt., Shelter, Friend's Home, Family's Home, Other

Zip Code

Race/Ethnicity: African Am, Asian, Caucasian, Hispanic/Latino, Native Am, Other

Religion

Immigration Status

Education Level

Employed?

Employer

Income

Occupation

Occupational Category: Professional, Technician, Clerical, Skilled Worker, Laborer, Service Worker, Other

If unemployed, source of income

Military Experience (and Type of Discharge)

Address at Time of Death

Prior Addresses

Abuse of Alcohol

Abuse of Illegal Drugs

Use of Alcohol

Victim of child abuse/neglect - physical

Victim of child abuse - sexual

History of Mental Illness

Suicide Attempts

Medications

Criminal History (details)

On probation/parole

Children in common with defendant/perpetrator

Other Children

Children reside with...

Been married to someone other than the defendant

History of witnessing DV as a child

History fo Abuse by Others

DEFENDANT/PERPETRATOR INFORMATION:

Full Name

Data of Birth

Date of Death

Age (in years)

Gender

Marital Status

Other intimate partners at time of fatality

Place of Residence: House/Apt., Shelter, Friend's Home, Family's Home, Other

Zip Code

Race/Ethnicity: African Am, Asian, Caucasian, Hispanic/Latino, Native Am, Other

Religion

Immigration Status

Education Level

Employed?

Employer

Income

Occupation

Occupational Category: Professional, Technician, Clerical, Skilled Worker, Laborer, Service Worker, Other

If unemployed, source of income

Military Experience (and Type of Discharge)

Address at Time of Death

Prior Addresses

Abuse of Alcohol

Abuse of Illegal Drugs

Use of Alcohol

Victim of child abuse/neglect - physical

Victim of child abuse - sexual

History of Mental Illness

Suicide Attempts

Medications

Criminal History (details)

On probation/parole

Contacts with law enforcement that did not result in arrest (details)

Children (other than in common with victim)

Children reside with...

Been married to someone other than victim

Disabled (and Nature of Disability)

History of witnessing DV as a child

Current/former law enforcement

Concealed weapons permit

Possessed a firearm

Date of Purchase

History of DV with Other Partners

RELATIONSHIP HISTORY/NATURE OF RELATIONSHIP

Relationship at the time of homicide

If together, had either told the other of an intent to end the relationship

If together, had either told friends/family of an intent to end the relationship

Length of relationship

Legal status of relationship

Habitation status

If together, has she told/asked him to leave

If together, had she tried to leave

If together, Children in the home

If together, Others in the home

ESCALATING CIRCUMSTANCES

What types of abuse were present?

How long had the abuse been taking place?

Who knew of the violence/abuse?

Did the victim

Express fear of physical danger to herself or the children

Express fear of losing custody fo the children

Isolate herself from family and friends

Have evidence of physical injury

Show frequent signs of depression

Show frequent signs of anger

Show frequent signs of low self-esteem

Express fear of involvement in the criminal justice system/process

Show or express sleeping difficulties

Express guilty feelings about the failed relationship

Show or express a history of family abuse

Express fear of loneliness

Express fear of making a great life change

Express belief that partner would change his behavior

Did the perpetrator

Abuse the victim in public

Keep tabs on or stalk the victim

Put down the victim's friends and family

Make all decisions in the relationship, including finances

Blame the victim for the abuse

Use intimidation

Smash objects and destroy property

Have poor compliance with taking medications

Perceive betrayal or rejection by the victim

FATALITY EVENT

Date of Incident

Approximate Time of Incident

Day of the Week

Location of Incident

Place of Incident (residence, street, school, restaurant, etc.)

Reported By

Witnesses

Manner of Death (gunshot, stab wound, strangulation, blunt trauma, etc.)

Weapon Used

Children present

Others present

Sexual Assault

Pregnant

History of Other Illness

Autopsy Performed (and Findings)

Toxicology Investigation (and Findings)

Body Parts Affected

Strangulation

Other Injuries

Number of Wounds

Did perpetrator have other weapons with him/her besides the murder weapon?

Perpetrator under the influence of alcohol

Perpetrator under the influence of illegal drugs

During exchange of children or visitation

Custody of children following fatality

IF HOMICIDE-SUICIDE

Date of suicide

Approximate Time of Incident

Day of the Week

Location of Incident

Place of Incident (residence, street, school, restaurant, etc.)

Reported By

Witnesses

Manner of Death (gunshot, stab wound, strangulation, blunt trauma, etc.)

Weapon Used

Children present

Others present

History of Other Illness

Autopsy Performed (and Findings)

Toxicology Investigation (and Findings)

Body Parts Affected

Other Injuries

Prior suicide threats

Prior suicide attempts

PROTECTIVE ORDERS AGAINST DEFENDANT/PERPETRATOR

Emergency Protective Order Petitioned For
Emergency Protective Order Granted
Emergency Protective Order In Effect at Time of Fatality
Any special terms
Emergency Protective Order Expired or Dropped by Victim/Decedent
Preliminary Protective Order Petitioned For
Preliminary Protective Order Granted
Preliminary Protective Order In Effect at Time of Fatality
Any special terms
Preliminary Protective Order Expired or Dropped by Victim/Decedent
Permanent Protective Order Granted
Permanent Protective Order In Effect at Time of Fatality
Any special terms
Permanent Protective Order Expired or Dropped by Victim/Decedent
Any allegations of Protective Order being violated

PROTECTIVE ORDERS AGAINST VICTIM/DECEDENT

Emergency Protective Order Petitioned For
Emergency Protective Order Granted
Emergency Protective Order In Effect at Time of Fatality
Any special terms
Emergency Protective Order Expired or Dropped by Victim/Decedent
Preliminary Protective Order Petitioned For
Preliminary Protective Order Granted
Preliminary Protective Order In Effect at Time of Fatality
Any special terms
Preliminary Protective Order Expired or Dropped by Victim/Decedent
Permanent Protective Order Granted
Permanent Protective Order In Effect at Time of Fatality
Any special terms
Permanent Protective Order Expired or Dropped by Victim/Decedent
Any allegations of Protective Order being violated

CIVIL COURT MATTERS

Divorce Proceedings Filed
Status at the Time of the Fatality
Custody Proceedings Filed
Status at the Time of the Fatality
Visitation Proceedings Initiated
Visitation Arrangements in Place at the Time of the Fatality
Child Support Proceedings Initiated
Status at the Time of the Fatality
Other Civil Matters Filed

AGENCY/SYSTEM CONTACTS (victim/perpetrator/family, locality, dates, details)

911 Dispatch

Alcoholics/Narcotics Anonymous

Anger Management

Animal Control

Batterer's Intervention Program

Bondsman

Child Care

Community Corrections (Local/Misdemeanor Probation)

Court Services Unit/Juvenile Services

Domestic Violence Shelter

Emergency Medical Services

Felony Probation/Parole

Fire Department

Forensic Nurse Examiners

Homeless Shelter

Hospital/Primary Care

Magistrate

Mental Health/Psychiatric Care

Other Counseling

Other Emergency Medical Assistance

Other Victim Services

Private Attorney

Public Assistance

Religious Community

School System

Sexual Assault Response Program

Social Services

Substance Abuse Treatment

REFERRALS FOR SERVICES

Service referred to victim, by whom

Results of Referral

Court ordered

(Repeat as necessary)

Service referred to perpetrator, by whom

Results of Referral

Court ordered

(Repeat as necessary)

DANGER ASSESSMENT

1. Had the physical violence increased over the last year?
2. Did he own a gun?
3. Had she left him after having lived together in the last year?
- 3a. (Never lived together)
4. Is he unemployed?
5. Has he ever used a weapon against her or threatened her with a lethal weapon?
6. Did he threaten to kill her?
7. Did he avoid being arrested for domestic violence?
8. Did she have a child that was not his?
9. Did he ever force her to have sex when she did not want to?
10. Did he ever try to choke her?
11. Did he use illegal drugs?
12. Was he an alcoholic or problem drinker?
13. Did he control most or all of her daily activities?
14. Was he violently or constantly jealous of her?
15. Had she ever been beaten by him when she was pregnant?
16. Did he ever threaten or try to commit suicide?
17. Did he ever threaten to harm her children?
18. Did she believe he was capable of killing her?
19. Did he ever follow, spy, leave threatening notes/messages, destroy property or call when she didn't want him to?

Add total number of "Yes" responses, 1 through 19.

Add 4 points for a "Yes" to question 2

Add 3 points for a "Yes" to questions 3 and 4.

Add 2 points for a "Yes" to questions 5, 6 and 7.

Add 1 point for a "Yes" to questions 8 and 9.

Subtract 3 points if 3a is checked.

Total (0-8 = Variable Danger, 8-13 = Increased Danger, 14-17 = Severe Danger, 18+ = Extreme Danger)

TEAM MEMBERS PRESENT (by Agency)

CASE SYNOPSIS:

Agency Policies & Procedures

Which agency policies helped to make the victim safer?

Were any key policies/procedures NOT followed? Why?

Which agency policies were identified as weaknesses?

Has that policy/procedure been changed?

How could it be improved?

System Contacts/Interventions

Which system contacts/interventions benefited the victim?

Which system contacts/interventions could be improved, and how?

What interventions may have improved this situation that were NOT utilized/offered?

At what points could those services have been offered?

Education/Prevention

Was the victim aware of the danger of her situation?

Was the victim aware of domestic violence resources available in her community?

Were the people around the victim (family & friends) aware of the danger of her situation?

Were the people around the victim (family & friends) aware of any domestic violence resources in the community?