

Washington State Domestic Violence Fatality Review Project

This form to be filled out for each contact with the criminal justice system prior to the fatality.

Criminal Justice System Involvement prior to the fatality

This is _____ of _____ total Criminal Justice System contact forms

Is there any indication that the domestic violence perpetrator and the domestic violence victim may have had contact with multiple law enforcement agencies and multiple jurisdictions? (ie, did they move from another county/city?) yes no unknown

Was the panel able to obtain information from all agencies which were suspected or known to have contact with the domestic violence victim and domestic violence perpetrator? yes no unknown

Police

Date police contacted: _____ time of initial contact: _____

police contacted via 911 non emergency line other (specify) _____

Who contacted the police?

domestic violence victim domestic violence perpetrator child neighbor other

Were officers dispatched? yes no unknown

If not, why not?

If yes, to what sort of call were officers dispatched?

Domestic disturbance suspicious circumstances other

Who was present when police arrived? Check all that apply:

domestic violence victim domestic violence perpetrator children
 other family member(s) other acquaintance(s) neighbors

Did officers take a report? yes no unknown

If no, why not?

Did the suspect have a gun? yes no unknown

If yes, did the officers confiscate the weapon(s)? yes no unknown

Did officers arrest a suspect? yes no unknown

If no, why not? probable cause not established suspect not present other (specify) _____

Were both the domestic violence victim and the domestic violence perpetrator arrested? (mutual arrest)

yes no unknown

If the suspect was not present, did the officers make an effort to locate the suspect? yes no unknown

What injuries (if any) did the domestic violence victim report?

No injuries other (specify) _____

What injuries (if any) did the domestic violence perpetrator report?

No injuries other (specify) _____

Did any one require medical attention? (check all that apply)

medical attention: _____

	needed	offere d	refused	dispensed on site	transporte d to hospital
domestic violence victim					
domestic violence perpetrator					
child(ren)					
other family member(s)					
other acquaintance(s)					
other					

Did law enforcement give domestic violence victim information about resources?

pamphlet or other written material verbal information unknown

Was there any follow up investigation?

Did the department possess adequate equipment/resources to investigate the case?

Did law enforcement return to take pictures of bruises? Or other injuries?

Did law enforcement forward the case to the prosecutor? yes no unknown

If no, why not?

If yes, date case forwarded:

Arraignment

If the domestic violence perpetrator was taken into custody, how long were they held before released?

Were they released on bail? yes no unknown If yes, in what amount?

Were they released prior to arraignment? yes no unknown

Were any conditions attached to the domestic violence perpetrator's release?

Was a no contact order issued as a condition of release?

Was a no contact order issued at arraignment? yes no unknown

Was the no contact order dropped at some point?

Who initiated dropping this order? Prosecutor dv perpetrator dv victim

What factors influenced the decisions about bail amounts, release and conditions for release?

Prosecution:

Date prosecutor received case:

Did the prosecutor's office attempt to contact the domestic violence victim? yes no unknown

How? Letter phone call domestic violence victim initiated contact other:

Did the prosecutor's office succeed in contacting the victim

If yes, who did the victim talk to? advocate prosecutor

Did the prosecutor file charges? yes no unknown

If no, what factors influenced the decision not to file charges?

charges filed	defendant plead to
1.	1.
2.	2.
3.	3.

Did the prosecutor accept a plea bargain and / or dismiss some charges?

What factors influenced the decision to accept a plea / or dismiss charges?

If the case went to trial:

date of trial:

sentencing date:

Did any new assaults/violations of protection orders or calls to law enforcement for assistance occur between the initial contact on these charges and the trial date? yes no unknown

If so, please reference dates of these contacts and ensure separate contact with CJS sheets are filled out.

Outcome:

charges	disposition	Sentence/conditions (specify length)	
1.	<input type="checkbox"/> acquitted <input type="checkbox"/> dropped/dismissed <input type="checkbox"/> guilty <input type="checkbox"/> deferred sentence <input type="checkbox"/> stipulated order of continuance	<input type="checkbox"/> probation <input type="checkbox"/> jail time: <input type="checkbox"/> batterer's treatment <input type="checkbox"/> substance abuse treatment <input type="checkbox"/> other	<input type="checkbox"/> time served <input type="checkbox"/> prison time
2.	<input type="checkbox"/> acquitted <input type="checkbox"/> dropped/dismissed <input type="checkbox"/> guilty <input type="checkbox"/> deferred sentence <input type="checkbox"/> stipulated order of continuance	<input type="checkbox"/> probation <input type="checkbox"/> jail time: <input type="checkbox"/> batterer's treatment <input type="checkbox"/> substance abuse treatment <input type="checkbox"/> other	<input type="checkbox"/> time served <input type="checkbox"/> prison time
3.	<input type="checkbox"/> acquitted <input type="checkbox"/> dropped/dismissed <input type="checkbox"/> guilty <input type="checkbox"/> deferred sentence <input type="checkbox"/> stipulated order of continuance	<input type="checkbox"/> probation <input type="checkbox"/> jail time: <input type="checkbox"/> batterer's treatment <input type="checkbox"/> substance abuse treatment <input type="checkbox"/> other	<input type="checkbox"/> time served <input type="checkbox"/> prison time

The prosecutor asked for (check all that apply)	The court ordered (check all that apply)	Program successfully completed? (date of completion if yes)
batterer's treatment		

batterer's evaluation	
anger management	
substance abuse treatment	
restitution	
victim's education or counseling	
court costs	specify amount
other(specify)	

Was the victim asked to testify? yes no unknown

Did the victim not testify recant her original statements testify to the crime

Did the victim have contact with a court advocate? yes no unknown

Courts and monitoring of court orders:

Court orders were issued in district court municipal court superior court no court

What mechanisms exist for timely monitoring of treatment enrollment and completion in the jurisdictions in which it was ordered?

Did municipal court have a probation department? yes no unknown

If yes:

Did probation officers have specialized training in domestic violence? yes no unknown

Is it common practice for probation officers to contact victims? yes no unknown

Was the victim contacted in this case? yes no unknown

Did the district court have a probation department? If yes:

Did probation officers have specialized training in domestic violence? yes no unknown

Is it common practice for probation officers to contact victims? yes no unknown

Was the victim contacted in this case? yes no unknown

If conditions of court orders were violated, what consequences were imposed?

Date condition	condition ordered	date consequences imposed for failure to comply to condition	what were the consequences?