## THE STATE OF NEW HAMPSHIRE



# GOVERNOR'S COMMISSION ON DOMESTIC AND SEXUAL VIOLENCE

# **DOMESTIC VIOLENCE**FATALITY REVIEW COMMITTEE



SECOND ANNUAL REPORT May 2002

## TABLE OF CONTENTS

Dedic	edication	
Ackno	owledgment	ii
Missi	on Statement & Objectives	iii
Meml	bership List	iii-vii
I.	INTRODUCTION	1
II.	OVERVIEW OF A DOMESTIC VIOLENCE FATALITY REVIEW COMMITTEE	2
III.	HISTORICAL BACKGROUND	2
IV.	FATALITY REVIEW IN NEW HAMPSHIRE	3
	Mission Statement Objectives Executive Order Membership Confidentiality Agreement Structure Review Process	3 4 4 4 5 5 5
V.	STATE JUSTICE INSTITUTE GRANT	6
VI.	DATA	6
VII.	SUMMARY OF HOMICIDES WHICH OCCURRED IN 2001	8
	Age of Victim and Perpetrator Gender of Victim and Perpetrator County of Death Weapons Used Partner Homicides	8 8 8 9
VIII.	SUMMARY OF CASES REVIEWED FOR SECOND REPORT	10
	Age of Victim and Perpetrator	10
	Gender of Victim and Perpetrator Relationship Between Victim and Perpetrator	10 11

	County Location of Homicides/Suicides	11
	Cause or Manner of Death	11
Ι	X. RECOMMENDATIONS FROM 2001-2002	12
	System-Wide Recommendations	12
	Coalition Against Domestic and Sexual Violence	12
	Courts	13
	Crisis Centers	13
	Department of Education	14
	Department of Safety	15
	Elderly and Adult Services	15
	Employee Assistance Programs	15
	Governor's Commission on Domestic and Sexual Violence	16
	Law Enforcement	16
	Legislation	17
7	X. RESPONSES TO RECOMMENDATIONS DEVELOPED	
	BETWEEN 1999 AND 2001	18
	System-wide Recommendations	18
	Batterer Intervention Program Providers	21
	Courts	22
	Crisis Centers	28
	Defense Bar	29
	Department of Corrections	30
	Department of Education	31
	Department of Employment Security	32
	Department of Health and Human Services	33
	District Courts	33
	Division for Children, Youth and Families (DCYF)	40
	Employers/Employee Assistance Programs (EAP) 45	40
	Faith Community	49
	Governor's Commission of Domestic and Sexual Violence	50
	General Recommendations	50
	Recommendations on Immigrant Issues	52 55
	Recommendations on Elderly Issues Health Care Providers	58
	Home Care Association of New Hampshire	60
	Law Enforcement	60
	New Hampshire Bar Association	62
	Psychiatric/Mental Health Care Providers	62
	- 5, 5, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1,	02
XI.	CONCLUSION	65
		0.5

## APPENDICES:

Appendix A: E	Executive Order	66
Appendix B: C	Confidentiality Agreement	67
Appendix D: P	Protocol	68

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## **DEDICATION**

This second Annual Report is dedicated to Dr. Sheila Stanley, a member of this Committee who passed away on November 23, 2001. During her life and career, she contributed so greatly to educating New Hampshire citizens and professionals about domestic violence, and to counseling victims of abuse. Her impact was profound.

## **ACKNOWLEDGMENT**

The Committee wishes to extend its deepest appreciation to Lynda Gilman, Court Monitor of the Grafton County Family Division, for her extraordinary assistance throughout the year, and most especially for her patience and diligence in preparing the annual reports. Without her skill and dedication, this Report could not have been completed.

## NEW HAMPSHIRE GOVERNOR'S COMMISSION ON DOMESTIC AND SEXUAL VIOLENCE

## DOMESTIC VIOLENCE FATALITY REVIEW COMMITTEE

## **MISSION STATEMENT**

To reduce domestic violence-related fatalities through systemic multi-disciplinary review of domestic violence fatalities in New Hampshire; through inter-disciplinary training and community-based prevention education; and through data-driven recommendations for legislation and public policy.

#### **OBJECTIVES**

- 1. To describe trends and patterns of domestic violence-related fatalities in New Hampshire.
- 2. To identify high risk factors, current practices, gaps in systemic responses, and barriers to safety in domestic violence situations.
- 3. To educate the public, policy makers and funders about fatalities due to domestic violence and about strategies for intervention.
- 4. To recommend policies, practices and services that will encourage collaboration and reduce fatalities due to domestic violence.
- 5. To improve the sources of domestic violence data collection by developing systems to share information between agencies and offices that work with domestic violence victims.
- 6. To more effectively facilitate the prevention of domestic violence fatalities through multi-disciplinary collaboration.

## NEW HAMPSHIRE GOVERNOR'S COMMISSION ON DOMESTIC AND SEXUAL VIOLENCE

### DOMESTIC VIOLENCE FATALITY REVIEW COMMITTEE

## \*Honorable Susan B. Carbon, Chair

Supervisory Judge
GRAFTON COUNTY FAMILY DIVISION
26 Green Street
Plymouth, NH 03264
536-7609
536-3241 (fax)
scarbon@comcast.net

### \*Dr. Thomas A. Andrew

Chief Medical Examiner
OFFICE OF THE STATE
MEDICAL EXAMINER
246 Pleasant Street, Suite 218
Concord NH 03301
271-1235
271-6308 fax
tandrew@doj.state.nh.us

## \*Chief William D. Baker

LACONIA POLICE DEPARTMENT 51 Church Street Laconia NH 03246 524-5257 ext 333 527-1288 fax Lpds1@worldpath.net

## Mr. Bernie Bluhm

Program Specialist
DIVISION FOR CHILDREN, YOUTH
AND FAMILIES
129 Pleasant Street
Concord NH 03301
271-4440 1-800-852-3345 x 4440
271-4729 fax
bbluhm@dhhs.state.nh.us

### Ms. Paula Booth

Executive Director
EMPLOYEE ASSISTANCE PROGRAM
117 Pleasant Street
Concord NH 03301
271-4336
271-6635 fax
pbooth@dhhs.state.nh.us

## Attorney Alan J. Cronheim

TWOMEY & SISTI
78 Fleet Street
Portsmouth NH 03801
433-7117
427-2938 fax
tands@worldpath.net

## Dr. Jennie V. Duval

Deputy Chief Medical Examiner OFFICE OF THE STATE MEDICAL EXAMINER 246 Pleasant Street, Suite 218 Concord NH 03301 271-1235 271-6308 fax jduval@doj.state.nh.us iv

## \*Detective Sean Ford

CONCORD POLICE DEPARTMENT 35 Green Street Concord NH 03301 225-8600 228-2703 fax

## Ms. Joanne Fortier

Asst. Dir. Of Field Services
DEPARTMENT OF CORRECTION
105 Pleasant Street
Concord NH 03302
271-5652
271-0414 fax
jfortier@nhdoc.state.nh.us

## Ms. Ann Fowler (alt) Outreach Coordinator

NH CATHOLIC CHARITIES
23 Searles Road
Windham NH 03087
898-1971 ext. 14
898-8861 fax
afowler@catholiccharitiesnh.org

## Ms. Nancy Francoeur

Director
RAPE & DOMESTIC VIOLENCE
CRISIS CENTER
PO Box 1344
Concord NH 03302-1344
225-7376
225-2850 fax
rdvcc@totalnetnh.net

## Robert Gougelet, MD (alt)

DARTMOUTH HITCHCOCK MED. CTR. Dept. of Emergency Medicine
One Medical Center Drive
Lebanon NH 03756-0001
650-7254
643-3383 fax
rgougelet@dartmouth.edu

## \*Ms. Linda Griebsch

Public Policy Director
NH COALITION AGAINST
DOMESTIC & SEXUAL VIOLENCE
PO Box 353
Concord NH 03302
224-8893 ext 310
228-6096 fax
Linda@nhcadsv.mv.com

## Mr. William Halacy

5 Autumn Drive Concord NH 03301 227-9677 whalacy@mediaone.net

## \*Chief Nick Halias

UNIVERSITY POLICE DEPARTMENT One Rosemary Lane Durham NH 03824 862-1427 862-1966 fax/235-5496 cell nhalias@cisunix.unh.edu

## \*Dr. Scott Hampton

ENDING THE VIOLENCE 90 Washington Street, Suite 305 Dover NH 03820 742-2954/742-2959 fax endingviolence@aol.com

## **Attorney Christopher Keating**

PUBLIC DEFENDER'S OFFICE 117 North State Street Concord NH 03301 224-1236 ext 161 226-4299 fax Ckeating@nhpd.org

## Honorable Edwin W. Kelly

Administrative Judge NH DISTRICT COURT PO Box 389 Concord NH 03302-0389 271-6418 271-6406 fax ekelly@courts.state.nh.us

## **Honorable William Knowles**

12 Wellington Avenue Dover NH 03820-2002 742-5681 (fax also) Wyknowles2@aol.com

## Ms. B. Lynn Koontz

DEPT. OF HEALTH & HUMAN SERVICES (ELDERLY & ADULT) Office of Community Services 129 Pleasant Street Concord NH 03301 271-4409 271-4643 fax lkoontz@dhhs.state.nh.us

## **Dr. Katherine Little**

DARTMOUTH HITCHCOCK MED. CTR. EMERGENCY ROOM One Medical Center Drive Lebanon NH 03766 650-7254 650-4516 fax katherinelittle@hitchcock.org

## **Reverend Joyce Lovejoy**

Pastor, Deering Community Church 2 Bessie Leavitt Lane New Boston NH 03070 487-3532 (phone and fax) joycelovejoy@prodigy.net

## \*Ms. Sandra Matheson

Director, Office of Victim
Witness Assistance
OFFICE OF THE ATTORNEY GENERAL
33 Capitol Street
Concord NH 03301-6397
271-3671
271-2110 fax
smatheson@doj.state.nh.us

## Sgt. Kelly McClare

Assistant Unit Commander Major Crime Unit NH STATE POLICE 10 Hazen Drive Concord NH 03305-0002 271-2663 271-2520 fax kmcclare@safety.state.nh.us

## Attorney Mary J. McGuire

Staff Attorney
DIVISION OF BEHAVIORAL HEALTH
105 Pleasant Street
Concord NH 03301
271-6991
271-5058 fax
mmcguire@dhhs.state.nh.us

## Ms. Deborah J. Mozden (alt)

Executive Director
WOMEN'S SUPPORTIVE SERVICES
11 School Street
Claremont NH 03743
543-0155
542-2082 fax
Wss@sugar-river.net

## **Attorney Ellen Musinsky**

Professor FRANKLIN PIERCE LAW CENTER 2 White Street Concord NH 03301 225-3350 229-0423 fax emusinsky@fplc.edu

## Officer Kevin Nolan

School Resource Officer
SALEM POLICE DEPARTMENT
9 Veterans Memorial Parkway
Salem NH 03079
893-7069 ext 452
898-0208 fax
knolansro@aol.com

## **Attorney Elizabeth Paine**

Domestic Violence Specialist NH DISTRICT COURT RR 3 Box 18 Plymouth NH 03264 536-3326 536-3241 fax bpaine@coopresources.net

## **Dr. Christine Rath**

Superintendent of Schools CONCORD SCHOOL DISTRICT 16 Rumford Street Concord NH 03301 225-0811 226-2187 fax crath@csd.k12.nh.us

## **Attorney Ann Rice**

Senior Assistant Attorney General
OFFICE OF THE ATTORNEY GENERAL
33 Capitol Street
Concord NH 03301
271-3671
271-2110 fax
arice@doj.nh.state.us

## **Chief Timothy Russell**

HENNIKER POLICE DEPARTMENT 2 Depot Hill Road Henniker NH 03242 428-3213 428-7509 fax timrussell@conknet.com

## Ms. Rosemary Shannon

Administrator I
Office of Family Services
DIVISION OF BEHAVIORAL HEALTH
ABUSE SERVICES
105 Pleasant Street
Concord NH 03301
271-6108
271-6116 fax
rshannon@dhhs.state.nh

Pamela G. Kozlowski, Clerk

Administrative Assistant to the Committee CLAREMONT DISTRICT COURT District Court Building One Police Court PO Box 313 Claremont NH 03743-0313 542-6064 ext 24 543-0998 fax

\*Executive Committee

## I. <u>INTRODUCTION</u>

The Domestic Violence Fatality Review Committee was created by Executive Order of Governor Jeanne Shaheen in 1999. Last year at the Seventh Annual Conference on Domestic and Sexual Violence, the Committee released its Inaugural Report. Nearly 100 recommendations had been developed as a result of the Committee's review of cases over its first two years of operations.

The Committee's goal from the outset has been to generate annual reports as "revolving documents", intended to be examined and critiqued throughout the year. In other words, the Committee wanted to generate recommendations for the many different agencies and organizations that work with domestic violence victims and offenders in an effort to improve our collective response to this significant social and legal problem. In developing recommendations and then seeing to their implementation, new recommendations may be built upon New Hampshire's improved response to domestic violence.

Over the past year, the three branches of government and many individuals, organizations and agencies have worked to implement the Committee's recommendations. This report includes responses to all of the recommendations. The extent to which these bodies have worked together to provide a safer environment for all our citizens is truly remarkable.

This second report includes 23 new recommendations from the Committee's review of domestic homicides during its third year of operation (2001-2002). We are hopeful that these recommendations will also be considered and implemented over the next year.

# II. OVERVIEW OF A DOMESTIC VIOLENCE FATALITY REVIEW COMMITTEE

Domestic violence is one of the most prevalent legal and social problems in the United States. Every year between three and four million women throughout the United States are beaten by their partners (husbands or boyfriends) or ex-partners. When adult women are beaten, frequently children are as well. In approximately 75% of the cases where a couple has children and the female adult is abused, children witness the assaults and are themselves often physically abused.

Domestic violence in its worst, and ultimate, form is homicide. Every year nearly 2,000 people die from domestic violence homicides in the United States, most frequently men causing the death of their female partners. Children are also homicide victims. In over half of all murders of children under 12, parents were the perpetrators. Half of all female homicide victims were killed by their male partners.

Many programs have been developed by victim advocates, law enforcement, courts and other agencies to address this problem. One of the newest programs being developed around the United States, and in other countries including England, France and Australia, is called the "fatality review" process, or Fatality Review Committees.

A fatality review committee is a group of professionals from many different organizations, agencies and branches of government that convenes periodically to review domestic violence homicide (fatality) cases. The theory underlying the fatality review process is that if we are able to understand better why and how a homicide occurred, we can learn important lessons to help prevent future deaths. The core belief underlying the Committee's work is that every death is preventable, and we must work together to make this belief a reality.

## III. HISTORICAL BACKGROUND

On July 19, 1999, Governor Jeanne Shaheen created the New Hampshire Domestic Violence Fatality Review Committee. In issuing her Executive Order, she endorsed and encouraged a tradition begun in New Hampshire many years ago of multi-disciplinary collaboration. The Domestic Violence Fatality Review Committee was created as part of the Governor's Commission on Domestic and Sexual Violence to provide systemic review of domestic violence homicides in order to reduce the number of future fatalities.

Approximately two years earlier, a group of representatives from law enforcement, victim services, batterers intervention and the courts was concerned that

despite all the good work occurring in New Hampshire, domestic violence fatalities still represented a large portion of our total homicide count. Since 1990, while the total number of homicides has declined, domestic violence-related homicides comprise approximately 46% of all homicides. The Committee learned of a new program begun in a few jurisdictions around the country, called a Fatality Review Committee, or Death Review Team, which was being promoted as another tool to help prevent domestic violence homicides

This group approached the Governor's Commission on Domestic and Sexual Violence and sought its endorsement to create a Fatality Review Committee and, having obtained it wholeheartedly, this Committee began its work. Coincidentally, the State Justice Institute, together with the United States Department of Justice and the National Council of Juvenile and Family Court Judges, was planning a First National Conference on Fatality Review, and New Hampshire's group was invited to attend. Upon return, the Committee applied for, and soon thereafter received, a Technical Assistance Grant from the State Justice Institute to augment this work. The grant was awarded in June 1999, and continues in effect at this time. Altogether, the committee to create a Fatality Review Committee spent two years developing its structure, mission statement, objectives, protocol and selection of committee members.

All of this information was presented to Governor Jeanne Shaheen, including a proposed list of committee members. As noted above, the Governor formally established the committee in July 1999.

## IV. FATALITY REVIEW IN NEW HAMPSHIRE

## **Mission Statement**

The purpose of the Fatality Review Committee is set out in its Mission Statement which reads:

To reduce domestic violence-related fatalities through systemic multi-disciplinary review of domestic violence fatalities in New Hampshire; through inter-disciplinary training and community-based prevention education; and through data-driven recommendations for legislation and public policy.

## **Objectives**

The Committee has six goals and objectives, as follows:

- (1) To describe trends and patterns of domestic violence-related fatalities in New Hampshire.
- (2) To identify high risk factors, current practices, gaps in systemic responses, and barriers to safety in domestic violence situations.
- (3) To educate the public, policy makers and funders about fatalities due to domestic violence and about strategies for intervention.
- (4) To recommend policies, practices and services that will encourage collaboration and reduce fatalities due to domestic violence.
- (5) To improve the sources of domestic violence data collection by developing systems to share information between agencies and offices that work with domestic violence victims.
- (6) To more effectively facilitate the prevention of domestic violence fatalities through multi-disciplinary collaboration.

## **Executive Order**

Both the Mission Statement and Objectives have been incorporated into the Governor's Executive Order authorizing the work of this group. (See Appendix A.)

## Membership

The Committee has a very broad-based membership, reflective of the many organizations and agencies which work with domestic violence victims, offenders and children. A review of the membership list, included at the beginning of this report, reflects representation from the following: District and Family Courts, local and state law enforcement, victim services (through the Attorney General's Office and Coalition Against Domestic and Sexual Violence), education (state and local), health care (medical and mental health), batterers intervention, visitation network, Division for Children, Youth and Families (DCYF), clergy, Employee Assistance Program and others. Attorneys are also represented, including the New Hampshire Bar Association's Domestic Violence Emergency Project (DOVE) program, prosecutors and defense attorneys. New Hampshire is one of very few jurisdictions in the country that welcomes the defense bar to this discussion. It has been the Committee's belief and experience that domestic

violence issues need broad-based perspective, and the goal of homicide prevention is *everyone's* concern.

The Committee which proposed the Fatality Review Committee to Governor Shaheen was also careful to identify individuals within each profession listed above who were personally willing to serve, and who were committed to the goals of the Committee. The Committee wanted to ensure that individual members would make the time commitment required to provide consistency and continuity to the review process. Much of the first meeting was devoted to each member discussing why he or she had agreed to serve and what each thought he or she could contribute to the process, individually as well as institutionally.

## **Confidentiality Agreement**

Because certain information which is shared at committee meetings is confidential, all members have been asked to sign a Confidentiality Agreement. (See Appendix B.) This ensures that all information shared during the review process will remain confidential and will not be disseminated outside of the Committee. In addition to individual confidentiality agreements, an Inter-agency Agreement has been prepared and signed by the heads of the New Hampshire Department of Health and Human Services, and the New Hampshire Department of Safety. (See Appendix C.)

## **Structure**

The full Committee meets bi-monthly, on average, to review one or more homicides. In alternating months, the Executive Committee meets to select cases for review, refine recommendations developed by the full Committee, and attend to other administrative matters. The Executive Committee consists of representatives from the courts, law enforcement, victim services, batterer's intervention, the State's Chief Medical Examiner and an Administrative Assistant.

## **Review Process**

The Committee has determined that only closed cases, or murder/suicides, will be reviewed. This ensures that all appeals have expired and thus not affect the ongoing investigation of an active case.

Each case review begins with a report by the Chief Medical Examiner and the law enforcement agency which responded to the scene. These reports provide great detail about the homicide as well as the history of the victim and defendant. Information is also received from the prosecutor and victim advocate involved with the case. Committee members then report on information from their agencies or organizations. For example, court representatives would report on the existence of any civil protection orders, bail conditions, domestic violence convictions, and other civil and criminal case histories of the parties and

their children. The medical representatives would report on any known contact seeking health care for injuries sustained as a result of a domestic violence assault. Following the presentation by all Committee members, the group collectively formulates recommendations for preventing future homicides. Ideas may be related to the particular case, or may germinate from cross-disciplinary discussion and

give rise to ideas which will proactively help prevent domestic violence homicide and other assaults.

## V. <u>STATE JUSTICE INSTITUTE GRANT</u>

As noted above, New Hampshire was awarded a Technical Assistance Grant from the State Justice Institute in 1999. The grant has enabled the Committee to consult with and evaluate other teams around the country. The grant has also enabled the Committee to engage Attorney Barbara Hart, widely recognized as one of the nation's leading experts on domestic violence, to serve as a consultant to our Committee. A final report to the State Justice Institute will be completed at the conclusion of the grant and will be available for public distribution upon request.

## VI. DATA

From 1990 through 2001, a total of 247 homicides occurred in New Hampshire; 46% were domestic violence-related. In those 12 years, the number of homicides has ranged from a low of 14 (2000) to a high of 34 (1991). The percentage which are domestic violence-related has ranged from a low of 17% in 1997 to a high of 79% in 2000. The year 2001 saw a significant decrease in domestic violence-related homicides, dropping again to 35%. However, the number of total homicides increased in 2001 to 20, from 14 in 2000.

## THE STATE OF NEW HAMPSHIRE HOMICIDE STATISTICS 1990 - 12/31/2001

Year	Total # Homicide	Partners	Family Members	DV Related	Total DV	Total % DV
1990	16	5	3	0	8	50%
1991	34	9	5	2	16	47%
1992	20	7	1	3	11	55%
1993	24	7	1	0	8	33%
1994	18	4	2	2	8	44%
1995	19	5	4	1	10	53%
1996	23	6	5	1	12	52%
1997	24	4	0	0	4	17%
1998	15	6	0	1	7	47%
1999	20	6	5	1	12	60%
2000	14	4	7	0	11	79%
2001	20	3	4	0	7	35%
Totals	247	66	37	11	114	46%

**Partners** - Homicide where the perpetrator and victim ARE intimate partners (e.g., husband kills wife).

**Family Members** - Homicide where the perpetrator and victim ARE NOT intimate partners but ARE family members (e.g., parent kills child).

**Domestic Violence Related** - Homicide where the perpetrator and victim ARE NOT intimate partners and ARE NOT family members but it is related to domestic violence (e.g., estranged husband kills wife's current intimate partner, or neighbor dies trying to save child from parental abuse).

## VII. SUMMARY OF HOMICIDES WHICH OCCURRED IN 2001

Independent of the cases reviewed by the Committee for the second report, we felt it useful to include a summary of the domestic violence-related homicides which occurred in calendar year 2001.

As the chart depicts, there were seven domestic violence-related homicides in 2001, three of which were partner homicides and four of which were family members. The seven domestic violence-related homicides comprised 35% of the total of 20 homicides which occurred in 2001. As compared with the prior calendar year (2000), the total number of homicides increased by nearly 50%, from 14 to 20. However, the percentage of domestic violence-related homicides dropped from a whopping 79% to 35%.

## **Age of Victim and Perpetrator**

The youngest victim in 2001 was a two month old, murdered by his father who was in his 20s at the time. The eldest victim was a father in his 80s, killed by his son who was in his 40s. Of the partner homicides, the youngest victim was 19, and the eldest, 33 (the third was 32 years old).

Of the partner homicides again, the perpetrators ranged in age from 23 years, to 30 and 41. The eldest perpetrator of any domestic violence-related homicide was 41 years of age. The eldest perpetrator of other domestic violence-related homicides was 73, a father-in-law to his daughter's husband.

## **Gender of Victim and Perpetrator**

Five of the victims were female. All three of the partner-victims were female. All seven of the perpetrators were male. In two cases men killed men, one of which was a father-in-law to his son-in-law, and the other, a son killing his father.

## **County of Death**

Four counties had domestic violence homicides in 2001. Cheshire County had one, Grafton had one, Hillsborough had four, and Sullivan had one. The three partner homicides occurred in Cheshire and Hillsborough Counties.

## **Weapons Used**

Five of the homicides were committed by use of firearms. In one, a tire iron was used to beat the victim to death. The three partner homicides were committed by use of the tire iron in one case, and firearms in the two others. In one case, the perpetrator stabbed the victim repeatedly after he had already shot and killed her. The last homicide was committed by a father swinging his infant by the feet, bashing her head against a bed post.

## **Partner Homicides**

On the three partner homicides in 2001, all three victims were female, and all the perpetrators, male. In only one of the three had a protective order ever been requested. It was not in effect at the time of the homicide. Two of these cases were also murder/suicides. Of particular note is that all three involved victims who had recently separated or divorced from the perpetrators, demonstrating once again the potential volatility and increased risk occasioned by separation.

## VIII. <u>SUMMARY OF CASES REVIEWED FOR SECOND REPORT</u>

During its third year of operation, the New Hampshire Domestic Violence Fatality Review Committee completed in-depth, analytical studies of four homicides (the cases were reviewed at meetings which occurred between May 2001 and January 2002). Although only four cases were reviewed, they were involved and complex in scope. While the overall statistical data are in line with domestic violence homicide statistics in general, the facts in these cases were remarkable in comparison and required significant analysis. The benefit of working with these cases has allowed for the development of recommendations which are progressive and comprehensive. It is notable that the deaths in these cases occurred between May 1999 and October 2001.

Some of the issues discussed during these reviews involved domestic violence among the elderly and geographically isolated populations, violence perpetrated by law enforcement officers, ongoing threats of suicide as a primary source of abuse and harassment, and the escalation of violence which occurred in a relationship that began while teenagers in high school.

Some of the dynamics included the murder of a husband by his wife of more than 35 years. The facts of this case illustrated that the wife had been psychologically and emotionally abused regularly for the duration of the marriage. This case was also remarkable for the apparent sympathy that everyone in the family had for the defendant-wife in her having had to live with such abuse for so long. Another case was remarkable for the brutality of the murder and the fact that it was committed by a police officer who had problems with violence throughout the course of his police career. Perhaps one of the most troubling cases revealed how close a victim, who had a restraining order and a divorce pending against her husband/perpetrator, came to being murdered. This case also illuminated the fear of a victim who knew she was a target and how, in spite of all the verbal and written warnings she communicated, terrifyingly close she came to being murdered anyway.

## **Age of Victim and Perpetrator**

The age range of the victims whose cases we reviewed once again illustrates that domestic violence homicide is not limited to young generations. The youngest victim was 19 years old, followed by one who was 33, one age 44 and the eldest, 58 years old. The age of the defendants corresponded fairly closely, being 23, 40, 44 and 58 years.

## **Gender of Victim and Perpetrator**

Of the four cases reviewed, there were three female victims and one male. Conversely, there were three male perpetrators and one female. As with the cases reviewed in the first report, all victim/perpetrator relationships were heterosexual, meaning that there were no same sex homicides or murder/suicides.

## Relationship Between Victim and Perpetrator

Two of the four cases reviewed involved unmarried dating relationships where the victim had recently separated from the perpetrator (i.e., "estranged boyfriend"). The other two involved married couples. In one, despite a lengthy history of emotional abuse, protective orders were never sought nor were any "systems" accessed for assistance (such as the courts or shelters). In the other, the intended victim had just obtained a protective order and filed for divorce. Hearings on both matters were scheduled to occur within 48 hours of the intended homicide (and the defendant's suicide).

In every case, investigators learned that family and friends had been aware of the troubles in the relationships. In three of the four where the parties had recently separated, homicides or suicides (or both) occurred, pointing out once again that separation may be the most dangerous time and a risk factor for victims and systems to be conscious of when victims seek assistance

## **County Location of Homicides/Suicides**

Of the four cases reviewed, two occurred in Grafton County and two in Hillsborough County.

## **Cause or Manner of Death**

Unlike the cases reviewed for the first report, all four of the cases reviewed for this second report involved the use of a firearm for either the homicide, suicide or both. All firearms were handguns. The Committee found no evidence to suggest that the firearms were acquired other than by lawful means. Prior to committing suicide with a firearm in one case, the defendant assaulted (and ultimately killed) his victim by use of a knife. The victim's throat was slashed, and her face, neck and chest were stabbed multiple times. Further, there were at least a dozen wounds to other parts of her body. In another case, after shooting his victim and then himself, the car in which both were found crashed. It is unclear whether this was intentional, or incidental to the loss of control occasioned by the gunshot wounds.

## IX. RECOMMENDATIONS FROM 2001-2002

The following recommendations were developed as a result of the case reviews conducted during the 2001/2002 work-year of the Committee. We hope the relevant professions/agencies will give as careful and thoughtful consideration to these recommendations as they did with the recommendations developed during the Committee's first two years of work (See Section X ahead).

## **SYSTEM-WIDE RECOMMENDATIONS**

(1) Professionals, such as advocates and mental health counselors, who work with victims of domestic violence should become familiar with the use of compromising and/or pornographic material of the victim created by the perpetrator to exert control over the victim. In particular, crisis center advocates should discuss use of such material with victim.

## **Comment:**

The purpose of such counseling would be to make it clear that this type of controlling behavior in and of itself (with or without physical violence or aggression) is indicative of increased danger to the victim. Screening for such controlling behaviors helps in evaluating risk.

## COALITION AGAINST DOMESTIC AND SEXUAL VIOLENCE

(1) The Coalition should increase the distribution of its pamphlets and other literature. For example, the Coalition should send copies of each pamphlet to members of the Governor's Commission on Domestic and Sexual Violence and the Fatality Review Committee, together with order forms, to help increase the use of these brochures.

## Comment:

The Coalition has excellent resources and information already available, such as the "Is this Love?" pamphlet, which could be tapped by more agencies and service providers to "get the word out".

(2) The New Hampshire Coalition is encouraged, through their local crisis centers, to establish booths at state, county and local fairs (such as agricultural or craft fairs). The purpose would be to disseminate literature on domestic violence and information about available resources.

**Comment**: This is particularly important in rural parts of the State to reach citizens who

may otherwise not have access to this information.

**Comment**: Local crisis centers are encouraged to work with local police departments

and their domestic violence coordinating councils, and other local

organizations, in staffing such booths.

## **COURTS**

(1) The Child Impact Program (CIP) should include a component addressing the risks of separation when there has been violence in a relationship.

**Comment**: At a minimum, crisis center brochures should be available at all CIP

sessions.

## **CRISIS CENTERS**

(1) The Department of Safety and the New Hampshire Coalition Against Domestic and Sexual Violence should develop a system for assisting victims whose partners are law enforcement personnel.

**Comment:** 

The purpose of this recommendation is to ensure that victims whose partners are involved with law enforcement know that they have a neutral forum in which to seek help. Because of an abuser's relationship with law enforcement, a victim may not believe that contacting law enforcement could be of help. This service would work in conjunction with services already provided by local crisis centers.

(2) Professionals, such as advocates and mental health counselors, who work with victims of domestic violence should become familiar with the use of compromising and/or pornographic material of the victim created by the perpetrator to exert control over the victim. In particular, crisis center advocates should discuss use of such material with victim.

**Comment:** 

The purpose of such counseling would be to make it clear that this type of controlling behavior in and of itself (with or without physical violence or aggression) is indicative of increased danger to the victim. Screening for such controlling behaviors helps in evaluating risk.

## **DEPARTMENT OF EDUCATION**

(1) The Department of Education should require all school districts to incorporate instruction for middle and high school students about the dynamics of domestic violence, signs of abuse and resources available.

## **Comment**:

The Department of Education is encouraged to take a proactive approach to establishing a respectful atmosphere in schools and training teachers on classroom management as part of an effort to facilitate educating students about domestic violence and healthy relationships. The Safe Schools program may have funds available to assist in this process. Schools could incorporate instructional goals that address these areas into different curricula that already exist, such as health curriculum, conflict resolution curriculum, or social studies curriculum.

(2) The Department of Education should explore and make available the panoply of domestic violence resources and then require that each school district develop a plan or policy on how it will use the resources to address domestic violence.

## **Comment:**

The Department of Education is encouraged to work with the New Hampshire Coalition and the Public Education Committee of the Governor's Commission to identify resources, and encourage local school districts to work with their local crisis centers and police on implementing the selected programs.

(3) All victims of domestic violence in a school setting should be referred to the local crisis center. In addition to the mandatory reporting laws, schools should also make direct contact with the crisis centers. Crisis centers are encouraged to make immediate contact with the victim.

## **Comment:**

Any abuse of an individual under the age of 18 or of an incapacitated adult age 18 or over invokes New Hampshire's mandatory reporting laws. School safety should always be ensured.

(4) It is important that school guidance counselors receive training on domestic violence, since they are often the first point of contact for students involved in dating violence or family violence situations.

## **DEPARTMENT OF SAFETY**

(1) Consideration should be given to requiring all teens to complete a teen dating violence prevention program before being permitted to apply for a driver's license. The curriculum should be approved by the Governor's Commission on Domestic and Sexual Violence.

## **Comment**:

Such a program could be operated in much the same way as the Child Impact Program utilized in the Family Division and Superior Court for parties with children who are separating or divorcing. The State determines the curriculum, but the actual programs are run on a fee-for-service basis. The individuals who take the course are required to pay the fee.

## **ELDERLY AND ADULT SERVICES**

- (1) Elderly and Adult Services should develop a list of their affiliated service providers and task them to disseminate domestic violence informational material as part of an effort to reach out to the older population.
- (2) Elderly and Adult Services should work with the New Hampshire Coalition to identify existing domestic violence materials, programs and speakers to expand their outreach efforts.

**Comment**: Elderly and Adult Services is encouraged to explore whether the TRIAD Program could be brought to New Hampshire.

## **EMPLOYEE ASSISTANCE PROGRAMS**

(1) Employers should create a policy designed to assist employees who have concerns that a coworker has a problem or potential problem with addictions. Additionally, all employers should have policies in place for addressing employees with addiction problems that impact their work performance and may be a risk factor for domestic violence.

## **GOVERNOR'S COMMISSION ON DOMESTIC AND SEXUAL VIOLENCE**

- (1) The Public Education Committee of the Governor's Commission should develop public service announcements on domestic violence and include one which addresses emotional abuse as a significant part of domestic violence.
- (2) The Governor's Commission should work with the Department of Transportation to enable domestic violence informational brochures to be disseminated at the tourist information booths around the State, and specifically in the restrooms at those booths as well.
- (3) The Governor's Commission should work with the Liquor Commission to enable domestic violence informational brochures to be distributed at all of the State Liquor Stores.

**Comment**: A new campaign slogan could be the following: "Hitting the bottle does not mean you can hit your partner."

## LAW ENFORCEMENT

- (1) All candidates for law enforcement officer positions should participate in comprehensive background investigations. Police agencies should share such information with subsequent employers. Waivers for sharing this information should be executed at the time of employment.
- (2) Training for law enforcement personnel should include a regular component on stress management. Furthermore, continuing education programs and training on stress management should be made readily available and accessible to both officers and their families.
- (3) When available, law enforcement agencies should encourage access to, and use of, EAP programs.
- (4) All law enforcement agencies are encouraged to adopt the model policies promulgated by the New Hampshire Police Standards and Training Council for addressing officers who have civil protection orders issued against them and for handling complaints relative to domestic violence. Specific issues that should be addressed in each department's policies include assignment of duties and access to firearms.
- (5) The Department of Safety and the New Hampshire Coalition Against Domestic and Sexual Violence should develop a system for assisting victims whose partners are law enforcement personnel.

## **Comment**:

The purpose of this recommendation is to ensure that victims whose partners are involved with law enforcement know that they have a neutral forum in which to seek help. Because of an abuser's relationship with law enforcement, a victim may not believe that contacting law enforcement could be of help. This service would work in conjunction with services already provided by local crisis centers.

## **LEGISLATION**

(1) Concealed gun permit applications should be public documents and should be made available for statewide access.

<u>Comment</u>: A procedure could be developed by the New Hampshire Interoperability Project. The Project could also develop a procedure for sharing information

about concealed gun permits to other law enforcement agencies throughout the State.

# X. RESPONSES TO RECOMMENDATIONS DEVELOPED BETWEEN 1999 AND 2001 (RECOMMENDATIONS CONTAINED IN THE FIRST ANNUAL REPORT [THE INAUGURAL REPORT] DATED JUNE 2001)

As was indicated in the First Annual Report published in June 2001, nearly 100 recommendations were developed. The Committee charged the appropriate professions/agencies with following up on the recommendations and encouraging their adoption and implementation. This Spring, committee members worked with their respective organizations to learn how the recommendations had been addressed. What follows are the responses from the respective professions to the recommendations developed and published in the First Annual Report. The reader will note that the response has been extraordinary. Nearly every recommendation has been addressed in a positive and responsible fashion.

The recommendations from June 2001 are reprinted below, followed by the narrative response to each, typed in bold and italicized.

## **SYSTEM-WIDE RECOMMENDATIONS**

(1) Any time a victim makes a declaration of perceived safety in a forum where the abuser is also present, an effort to consult with the victim alone should be made in a manner that does not jeopardize the victim's safety.

RESPONSE: The Executive Committee of the Governor's Commission on Domestic and Sexual Violence agrees that all protocols created by the Governor's Commission should be reviewed and updated to reflect the importance of speaking with the victim alone, in a manner that does not jeopardize a victim's safety. Grace Mattern, as Co-Chair of the Protocol Committee, will take this recommendation to that Committee for follow-up. Additionally, this recommendation will be brought to the attention of the New Hampshire Health Initiative Team, since one of its principal objectives is to routinely and confidentially screen patients for domestic violence.

The New Hampshire Health Care Initiative is part of a national effort to establish standards for health care providers dealing with domestic violence. New Hampshire was one of ten sites nationally

## to receive a major grant from the Family Violence Prevention Fund to implement such standards.

(2) Domestic violence should be a topic included among continuing professional education requirements for all relevant disciplines, including, but not limited to, the following: All courts that handle domestic violence, the Department of Education, the Department of Employment Security, DCYF, Employee Assistance Programs, the faith community, law enforcement, all mental health care providers, and alcohol and substance abuse treatment providers. Special emphasis should be placed on providing training for community mental health centers and alcohol and substance abuse providers throughout the State.

RESPONSE: The Executive Committee of the Governor's Commission on Domestic and Sexual Violence has recommended sending a survey to all professional boards to determine what, if any, domestic violence training is currently required. The survey will also include a question concerning the types of help or technical assistance that would be required to add domestic violence issues to their training. The Executive Committee agreed that this recommendation shall be transmitted to the Survey Committee for follow-up. Finally, the Governor's Commission will be creating a new committee on behavioral health issues. Therefore, this recommendation will be submitted to that committee once it is formed.

- (3) <u>Community-wide Risk Assessment</u>: All professionals working on cases involving domestic violence should conduct an ongoing risk assessment. The results of that risk assessment will be shared with other providers to the extent allowable by their profession's ethical guidelines. A sample risk assessment checklist follows:
  - a. Escalation of physical violence
  - b. Escalation of other forms of abuse
  - c. Sexual abuse of the victim
  - d. Recent acquisition or change in use of weapons
  - e. Suicidal ideation, threats or attempts
  - f. Homicidal ideation, threats or attempts
  - g. Change in alcohol or other drug use/abuse
  - h. Stalking or other surveillance/monitoring behavior
  - i. Centrality of the victim to the perpetrator ("he/she's all I have")
  - j. Jealousy/obsessiveness about, or preoccupation with, the victim
  - k. Mental health concerns connected with violent behavior
  - 1. Other criminal behavior or injunctions (e.g., resisting arrest)
  - m. Increase in personal risk taking (e.g., violation of restraining orders)

- Interference with the victim's help-seeking attempts (e.g., pulling a n. phone jack out of the wall)
- Imprisonment of the victim in the home O.
- Symbolic violence including destruction of the victim's property or p. harming pets.
- The victim's attempt to flee the batterer or to terminate the q. relationship
- Batterer's access to the victim or the victim's family r.
- Pending separation, divorce or custody proceedings S.
- Recent termination from employment t.
- Other suspected risk factor(s) u.

## Note:

The absence of any history of domestic violence, and the absence of any physical violence towards victim, do not necessarily mean there is no risk of lethal attack.

## **Comment:**

One indicator that an individual is contemplating homicide and/or suicide may be the attempt to take care of "unfinished business", such as patching up family relationships, distributing property of personal significance and so forth. The individual may also demonstrate a sudden lifting of mood which may appear to others as recovery when, in fact, it may be an indication of increasing risk of harm to self or others. This individual may be coming to terms with his perceived need to end his partner's and/or his own life.

## **Comment:**

Although substance abuse and domestic violence have a high rate of co-incidence, substance abuse treatment is not a substitute for an offender's participation in a batterer's intervention program. substance abuse and domestic violence offender intervention programs should address the inter-relationship between substance abuse and battering. Neither is a cause for the other. Both issues must be addressed in appropriate programs.

RESPONSE: The Executive Committee of the Governor's Commission on Domestic and Sexual Violence agreed that this recommendation should be transmitted to the Protocol Committee and the Greenbook Executive Committee. The Greenbook project is a federal initiative involving the United States Department of Justice, United States Department of Health and Human Services and the domestic violence advocacy community to address the cooccurrence of domestic violence and child abuse. Grafton County, New Hampshire was one of the six demonstration sites selected nationally to implement the recommendations of the National Council of Juvenile and Family Court Judges entitled, Effective

Intervention In Domestic Violence & Child Maltreatment Cases: Guidelines for Policy and Practice. The Greenbook Committee will work on developing a community-wide risk assessment for victims of domestic violence.

## **BATTERER INTERVENTION PROGRAM PROVIDERS**

(1) Batterer Intervention Program providers should cooperate with investigators of domestic violence fatalities.

## **Comment:**

The Major Crime Unit of the Department of Safety (State Police) (and local police departments in a few of the larger cities) investigate all domestic violence homicides. Program providers should cooperate with investigators by making available their records to the maximum extent allowable by law and ethical guidelines.

Such cooperation will assist community and statewide efforts to understand better both abuser dynamics and the factors that increase or decrease risk of harm. Ultimately, this improved understanding may help to generate strategies for reducing or eliminating intimate partner violence.

<u>RESPONSE:</u> The New Hampshire's Batterers Intervention Standards includes in the section "Other Community Linkages" the following:

"FATALITY REVIEW: (34) Providers shall cooperate with investigators of domestic violence fatalities.

<u>Discussion:</u> The Major Crime Unit of the Department of Safety, Division of State Police (and local police departments in a few of the larger cities) investigate all domestic violence-related homicides. Providers shall cooperate with investigators by making available their records to the maximum extent allowable by law and ethical guidelines. Such cooperation will assist community and state-wide efforts to understand better both perpetrator dynamics and the factors that increase or decrease risk of harm. Ultimately, this improved understanding may help to generate strategies for reducing or eliminating partner violence."

(2) Batterer's intervention program providers should offer specialized batterer's intervention and domestic violence programs for juvenile offenders.

<u>Comment</u>: Services for juveniles should be segregated from the adult population.

RESPONSE: Two steps have been taken to address this recommendation. First, there has been discussion at the Batterers Intervention Network meeting requesting providers to identify programs that would like to pilot a program in their community. Second, a technical assistance request has been made through Barbara Hart for identification of models from other states on programs for juveniles currently in operation. The Batterers Intervention Subcommittee and Batterers Intervention Network will follow up on these two steps once information has been received.

## **COURTS**

(1) Victim advocates should be available in all courts to help victims in civil and criminal matters pertaining to domestic violence.

RESPONSE: The AmeriCorps Victim Assistance Program would be the most likely way to achieve this goal. They increased their numbers by a third last year and look forward to another increase this year. Currently there are 12 crisis center advocates doing court work and four prosecution victim witness advocates. Crisis centers try to back up the AmeriCorps volunteers with center staff or volunteers to give the maximum court coverage possible.

The Attorney General's office is soliciting grant requests from local law enforcement to increase the availability of victim/witness advocates to local prosecutors.

(2) Prior to the expiration of a final domestic violence protection order, a notice should be sent by the Court to both parties informing them of the pending expiration, and advising the Plaintiff of the renewal procedure and the Defendant of the provision for a hearing on a request for renewal.

<u>Comment</u>: If advocates were based in courts, they could assume these responsibilities.

<u>RESPONSE:</u> The District Court Protocol is being rewritten. This recommendation of notifying the parties prior to the expiration of the protective order will be included in the updated protocol (Chapter 9).

(3) Courts should make referrals to the local crisis centers whenever a petitioner presents herself to the court (whether or not a civil protection order is granted). Courts and crisis centers should develop a procedure to meet the needs of the petitioner, the crisis center and the court. Petitioners should be made aware of the services and resources available to them.

RESPONSE: There are two avenues currently in process to address this recommendation. The first is a pamphlet that is being developed by the Victim Services Committee of the Governor's Commission on Domestic and Sexual Violence. Pamphlets will be available in the courts and in the crisis centers and will include a comprehensive listing of useful resources.

Second, the District and Superior Court protocols on domestic violence both strongly recommend referral to crisis centers advocates and will be available to the courts soon. Generally courts without court-based advocates contact a local crisis center at the time a victim presents herself to the Court. However, there are varying philosophies and procedures around the State, given the different perspectives of various crisis centers. This recommendation will be included in the updated District Court Protocols (Protocol 5-6 and Protocol 7-5).

(4) Courts with jurisdiction over domestic violence and juvenile cases need to identify those juvenile cases which should remain in open status and encourage feedback and recommendations regarding those cases from specialized professionals. Courts should then assign judges to these cases who have been trained and are part of a specialized team of judges.

### **Comment:**

Typically a case involving child abuse or neglect will remain open for approximately one year until a hearing is conducted on the child's permanent placement, and then close soon thereafter. The intent of this recommendation is to deviate from this general procedure and intentionally keep the case open to ensure that a child receives on-going monitoring and assistance, since often the impact of a domestic violence-related fatality will continue for years.

<u>RESPONSE:</u> The Committee believes that the recommendation should be rewritten as follows, and has adopted the following language:

Where there has been a domestic violence fatality and child abuse or neglect within the same family, the Court should consider retaining jurisdiction of the juvenile proceeding until such time as the iuvenile turns 18 years of age, if needed, in order that services may be provided to assist the juvenile in dealing with the parent's death. Courts should then assign judges to these cases who have been trained and are part of a specialized team of judges.

Explanation: The Committee felt that the recommendation should be rewritten to reflect a clearer intent of the Committee, namely that we were looking at cases where there had been a domestic violence fatality and case of child abuse and neglect within the same family. The recommendation as previously drafted was unclear and hence overbroad.

RESPONSE: The Court Improvement Project Protocol should be amended to address these very few, unique cases. This recommendation will be transmitted to Attorney Kristin Lamont, the Permanency Planning Coordinator responsible for the CIP Protocols.

- (5) Courts need to develop a policy and procedure for contacting school districts in domestic violence cases, for two reasons:
  - (a) to let the school counselor know of the child's status relative to the domestic violence case: and
  - parental access to a child may be limited by a domestic violence (b) protective order, or possibly also conditions of bail.

## **Comment:**

It will be important that this information be restricted to selected individuals in a school, to prevent such information from becoming more widely known than necessary. The procedure will require careful consideration due to confidentiality concerns.

RESPONSE: Developing a policy and procedure between the courts and schools is a most important, yet delicate, issue. There has not been a sufficient opportunity to develop such an important policy. A small focus group/work group should be assembled to develop a model Work group members might include Dr. Rath, Linda Griebsch, Nancy Rollins, Kevin Eckerman, Betsy Paine, Bernard Bluhm and Judge Carbon.

(6) Courts routinely should advise petitioners of the high risk of violence when the defendant is served with the temporary restraining order and that the petitioners must act with an increased sense of awareness regarding their own safety. Furthermore, courts should advise and refer petitioners to local crisis centers (if an advocate is not already present) for safety planning.

<u>Comment</u>: Victims may assume that obtaining a restraining order will automatically provide greater safety, when, in reality, a victim may be faced with greater danger at the time of obtaining an order.

<u>RESPONSE:</u> This recommendation has been included as a comment to Protocol 6-1(g) in the updated District Court Protocol.

(7) The Judicial Branch needs to ensure that all court personnel (judges and court staff) treat petitioners and defendants with respect and dignity.

**Comment**: Some courts (judges and staff) are not consistent in their treatment of parties who come before the courts. Some do not provide a positive and supportive environment for individuals who are in crisis.

<u>RESPONSE:</u> This recommendation has been included in Chapter 1, part B of the updated Domestic Violence Protocol for the District Courts.

(8) All judicial branch protocols should address and emphasize the importance of the crisis center advocate.

**Comment**:

The current District Court protocol on domestic violence advocates is included in Appendix I, p. 61 of Suggested Procedures for Processing Domestic Violence Petitions in the District Court, May 12, 1994. Perhaps reminding district courts to review this section would be sufficient. The existing protocol is quite thorough.

Enhancing and adding appropriate language to it may be all that is required to implement this recommendation. Judges and staff should be encouraged to review their protocols annually, perhaps in collaboration with their local coordinating councils.

RESPONSE: This recommendation has been addressed throughout the updated District Court Domestic Violence Protocols. This recommendation will, in particular, be addressed during the various training sessions that occur relative to the new protocols.

(9)The Court protocols should be amended to include the clerks' new responsibilities for advising victims of relief they may request at the time of applying for a protective order (see RSA 173-B:11, II). To the extent it may not already, the protocol should clearly require clerks to routinely assist petitioners in completing petitions, providing them with information and making appropriate referrals.

**Comment:** 

The Court protocols should be updated to include the new responsibilities required under HB 722. For example, clerks should advise petitioners of their right to seek child support, use of a vehicle or other financial assistance, where appropriate.

Additionally, if victim advocates were present in court as recommended above, they could assist with these responsibilities, as well as safety planning.

### RESPONSE: This recommendation has been incorporated into Protocol 5-8 of the new District Court Protocols.

Judges should be aware of the numerous risk factors that may provide guidance in (10)determining whether to grant a protection order, if requested.

### **Comment:**

Homicides, obviously the most serious of all domestic violence behavior, are sometimes committed by persons who have no prior criminal or domestic violence history. When victims seek protection orders, judges should be aware that danger may exist even in the absence of any criminal history. Risk factors such as those identified in the System-Wide Recommendations, #3, should be taken into consideration if a victim requests an order of protection.

RESPONSE: The Committee believes that this recommendation should be rewritten as follows, and has adopted the following language:

> Judges should be aware of the numerous risk factors that may provide guidance in determining what relief to include if a protective order is granted.

Explanation: The Committee felt that risk factors should guide judges in determining what relief should be afforded if a protective order is warranted, rather than using risk factors to determine whether an order should be granted in the first instance. A court should make a determination of whether to grant a protective order based upon the facts of a case.

RESPONSE: It is the Committee's recommendation that such information be routinely reviewed at the annual domestic violence conferences and other professional trainings as may be available throughout the year. Such trainings could include threat assessment and other areas of forensic psychiatry. The current bail statute, RSA 597:2,III-a, is a useful tool for judges to review in order to determine the potential threat posed by defendants. These concerns are incorporated in the new District Court Protocols.

- (11) Courts should develop a protocol to handle a petitioner's request for withdrawal of a protective order. The protocol should include:
  - (a) an inquiry whether the petitioner is withdrawing the request freely and voluntarily, or whether anyone has coerced the petitioner to withdraw the request; and
  - (b) an inquiry whether a safety plan is in place and if not, include a referral to a local crisis center.

<u>RESPONSE:</u> This recommendation has been included in Protocols 8-6 and 8-7 of the updated District Court Domestic Violence Protocols.

- (12) An informational brochure should be developed to distribute to victims at the time they file requests to withdraw protective orders. This brochure would address various safety issues to consider before filing the request.
  - <u>RESPONSE:</u> The importance of an informational brochure cannot be overstated. There has simply not been enough time to prepare such a brochure, given the primary focus on completing the updated protocols.
- (13) In determining the rehabilitative component of sentencing, courts should order abusers to batterers intervention services (rather than anger management, psychotherapy or couples counseling).
  - Comment: Domestic violence is the purposeful use of physical or other forms of abuse to control an intimate partner. It is, therefore, not caused by mental health, anger management, substance abuse or relationship problems. Anger management programs, by misattributing the cause of violence to difficulties with emotional regulation, allow abusers to avoid taking full responsibility for their actions. Standards of practice for batterers intervention services will be published in 2001. Lists of approved providers will be distributed to the courts and other referral agents such as probation/parole, victim services, etc.

### **Comment:**

Standards of practice for batterer's intervention services will be published in 2001. Lists of approved providers will be distributed to the courts and other referral agents such as probation/parole, victim services, etc.

RESPONSE: This recommendation has been incorporated into Protocol 19-7 of the new District Court protocols. The protocols recommend a Batterers Intervention Program, but also acknowledge that the statute authorizes personal counseling. The recommendation is also addressed in the context of Protocol 19-8. Additionally, the Batterers Intervention Standards specifically preclude anger management, psychotherapy or couples counseling under the section, "Inappropriate Methods of Intervention".

### **CRISIS CENTERS**

(1) Advocates and petitioners should identify those courts that are not receptive to the established domestic violence protocols. Advocates and petitioners should be encouraged to bring concerns to the attention of the appropriate judicial branch administrator.

The protocols should be amended to reflect this procedure. **Comment:** 

RESPONSE: The crisis centers throughout the State have developed a form entitled "Court Incident Report Form" which can be used by advocates to record events that occur in court, including the experience of the plaintiff, in cases where the court has been particularly helpful or in cases where the advocate may have recommendations for improvement. The forms are collected by the State Coalition office and concerns (positive or negative) are reported to the Administrative Judges of the appropriate courts. The Administrative Judges do not respond to individual cases, nor do they indicate what action, if any, they may take in response to the reports or concerns. The report forms are intended to be of assistance to the courts.

> The crisis center advocates are encouraged to complete judicial evaluation questionnaires concerning the judges before whom they appear. This helps provide constructive input for the judges, and also serves to acknowledge, where applicable, the appropriate conduct of the judges in court so that members of the legislature and others will understand that judges are acting appropriately in these cases.

### **DEFENSE BAR**

**(1)** Attorneys who represent civil and/or criminal defendants in domestic violencerelated cases should consider developing a checklist to assist their clients in complying with all court orders.

### **Comment:**

Defense attorneys, while they may not have a legal duty to warn a victim of any conceivable threat, could provide a useful service to defendants and victims alike by helping their clients to understand what they must do to comply with all court orders. Such a checklist would enhance safety for victims and help defendants avoid prosecution for violations of court orders. Use of such a checklist may have a related benefit of helping defense attorneys achieve greater professional satisfaction which otherwise might not be gained when/if a client violates an order and causes significant harm to a victim.

RESPONSE: The Committee believes that the initial recommendation inappropriately limited its focus to the Defense Bar. Upon review of the recommendation, the Committee believes that it is appropriate to expand the scope of the recommendation to include all lawyers, not just the Defense Bar. Accordingly, a new recommendation will be inserted under the caption, New Hampshire Bar Association.

### **DEPARTMENT OF CORRECTIONS**

**(1)** A study should be conducted by the Department of Corrections, the courts, and other interested parties to identify the extent of the need for probation services and to develop a plan for addressing that need through legislative action.

RESPONSE: The New Hampshire Department of Corrections established a task force in July 2001 in implement the Fatality Review Committee's recommendations. The New Hampshire Department of Corrections is working with the New Hampshire Department of Safety to determine the number of domestic violence misdemeanor convictions in 2001. DOC will then determine the appropriate number of probation and parole officers (PPOs) needed. Commissioner of Corrections is committed to requesting additional PPOs through the budget process for fiscal year 2003/2004,

enabling the department to effectively supervise domestic violence cases.

(2) All inmates routinely should be screened for a history of violent behavior. Those determined to have a violent history should be offered (whenever feasible) educational services to teach nonviolence.

RESPONSE: All New Hampshire state prison inmates at every facility are screened for a history of violence as part of the classification and quay systems. All four state prison institutions offer "Alternatives to Violence" classes. Additionally, "Cognitive Problem Solving", "Domestic Violence", "Managing your Emotions", and "Anger Management" classes are offered at various institutions.

(3) In the area of rehabilitative services for violent offenders, the Department of Corrections should offer educational services (e.g., batterers intervention services) that recognize violence as a choice (rather than attribute violence to a problem with anger, substance abuse, mental illness or communication problems).

### **Comment:**

Domestic violence is the purposeful use of physical or other forms of abuse to control an intimate partner. It is, therefore, not caused by mental health, anger management, substance abuse or relationship problems. Anger management programs, by misattributing the cause of violence to difficulties with emotional regulation, allow abusers to avoid taking full responsibility for their actions.

RESPONSE: The New Hampshire state prisons will offer programming that stresses violence is a learned criminal behavior chosen by the perpetrator. This will be the basis for the Domestic Violence Educational Program. Where available, probationers and parolees attend "batterers" counseling. However, in some areas of the state, "Anger Management" or individual counseling is the only treatment available.

### **DEPARTMENT OF EDUCATION**

(1) The Department of Education should ensure that all school nurses, school psychologists and guidance counselors receive accurate and current information on domestic violence. The Department, at a minimum, should ensure that all school personnel are familiar with the Education Protocol of the Governor's Commission on Domestic and Sexual Violence.

(2) The Department of Education should facilitate the implementation of the Public Education Committee's Teen Dating Violence Program in as many schools as possible.

**Comment:** 

This is an effective and much needed vehicle for educating high school aged students about domestic violence and healthy relationships, and providing them with information about local resources.

RESPONSE: The Committee believes that this recommendation should be rewritten and adopts the following language.

> The Department of Education should endorse and support the educational efforts of the crisis centers state-wide.

Explanation: The Committee believes that the Department of Education should support efforts to channel greater resources into the current educational curricula. Although at one time there may have been difficulty securing support from schools to have teen dating violence education, schools are now very supportive, and the only impediments are the number of qualified trainers and resources for such training.

RESPONSE to both recommendations: The guidance consultant for the

State Department of Education advises that the school health consultant for DOE has traditionally taken the lead on domestic violence and teen dating violence education issues for the public schools. There has been a change in personnel at DOE, and once new staff is hired, the Commissioner of Education will determine whether the guidance consultant or school health consultant should continue this work. The Department of Education remains committed to public outreach and information in the school and will assist in trainings in any way they can around the State of New The Department will disseminate the Education Hampshire. Protocol of the Governor's Commission and participate in any trainings in which they are requested to help.

### **DEPARTMENT OF EMPLOYMENT SECURITY**

The Department of Employment Security should provide information for all (1) employees about domestic violence resources within local communities.

RESPONSE: Deputy Commissioner Darryl Gates has reviewed the Fatality Review Report and is supportive of this initiative. Patrick Manon, the Human Resource Administrator, was provided with the following items which were then distributed state-wide to 14 field offices of the Department of Employment Security: the "State of New Hampshire Domestic Violence in the Work Place" brochures; "WORK TO END DOMESTIC VIOLENCE TODAY"

posters; and the "New Hampshire Coalition Brochure Resource List".

(2) The Department of Employment Security should have informational brochures on domestic violence available at each of its offices.

<u>RESPONSE:</u> Informational brochures have been delivered to and made available in the lobby of all Department of Employment Security field offices.

### **DEPARTMENT OF HEALTH AND HUMAN SERVICES**

(1) The Department should provide specialized batterer's intervention and domestic violence programs for juvenile offenders so that they may receive appropriate services, whether detained in State facilities or on conditional release in the community.

<u>Comment</u>: Services for juveniles should be segregated from the adult population.

RESPONSE: During 2001, a group composed of individuals from DCYF, the Coalition Against Domestic & Sexual Violence, the Training & Development Unit, as well as Juvenile Probation and Parole Officers working in the field and the community, focused on the issue of domestic violence and its impact on youth involved with the Juvenile Probation and Parole Division. This group began a process of reviewing various protocols currently adopted for adult probation, child abuse/neglect and juvenile services. This process is close to completion. The resulting protocol will be recommended by the aforementioned work-group for consideration of the Director of the Division of Juvenile Justice Services. suggested that following review of the preliminary protocols by the director, the drafted protocol be submitted for review to the Governor's Commission on Domestic and Sexual Violence. Protocol Committee.

### **DISTRICT COURTS**

(1) <u>Bail Orders by Bail Commissioners</u>: All Bail Commissioners shall use the long form bail orders that include check-off boxes for each available order, including weapon relinquishment, no contact, etc., which became available in February 2000. Furthermore, Clerks of Court shall monitor the correct use of these forms by the Bail Commissioners and properly address any failure to use the forms properly.

**Comment**:

All District Court Judges, Clerks and Bail Commissioners have been reminded by way of memorandum from the District Court administrative office dated February 22, 2000 of the Preventive Detention and Weapon Relinquishment Provisions of RSA 173-B and RSA 597, as amended and made effective on January 1, 2000.

<u>RESPONSE:</u> All of the Bail Commissioners now use the updated Bail Commissioner forms. Training occurs annually on these forms.

(2) <u>Bail Commissioner Training</u>: A Bail Commissioner training manual addressing domestic violence issues should be developed by the District Court and provided to all courts for use in training Commissioners. Additionally, hereafter all annual trainings should be required to include a domestic violence component.

<u>RESPONSE:</u> A new protocol for Bail Commissioners has been included as Chapter 12 in the new District Court Domestic Violence Protocols.

(3) <u>Bail Orders at Arraignment</u>: Uniform bail forms should be developed and approved by the District Court for use by all courts and Bail Commissioners. The forms should contain pre-printed orders from which the Judge or Commissioner can make elections. Included among those orders should be weapons relinquishment and no contact orders. Judges should be advised that unless the Commissioner's order is adopted in full and is a part of the Court's file, a new order should be done at the time of arraignment. Care should be taken to name all victims and potential victims with whom the Court wishes to limit contact by the defendant.

RESPONSE: This recommendation has been accomplished. The uniform bail forms have been developed and are in use at all arraignments throughout the court system.

(4) Judges should require a presentation of the defendant's criminal record history at the time of arraignment. Bail Commissioners should also obtain this information before setting bail.

### **Comment:**

It is the practice of most judges to inquire into a defendant's criminal record history prior to setting bail. This inquiry is relevant, since RSA 597:2 requires a finding that the defendant poses a threat to the safety of any person or the community before being released. It is less common for judges to review outstanding and expired domestic violence protective orders at this time. The latter information is equally important, however, in assuring the protection of victims of domestic violence and the public.

### RESPONSE: This recommendation has been included in Protocol 12-9 of the updated District Court Protocols.

(5) The defendant's record of civil restraining orders should also be examined at the time of arraignment.

### **Comment:**

The defendant's record of civil restraining orders is more problematic. Certainly, each court can conduct a search of its own record, and courts have been instructed to do so in domestic violence-related and other appropriate cases. However, New Hampshire only has a central registry of outstanding restraining orders. If an order has expired, there is no record. The court system will work with the Department of Safety to fashion a resolution of this problem. For the time being, judges should review all available criminal and domestic violence records prior to setting bail. This will ensure synchronicity of orders, avoid those cases where weapons are ordered relinquished in one order but not the other, and provide the court with an individual's non-criminal domestic violence history.

RESPONSE: We are looking in to the possibility of accessing this information through the National Crime Information Center (NCIC). It will be addressed in further detail at the Northeast Regional Full Faith and Credit Conference scheduled for May 15-17, 2002, sponsored by the National Center for State Courts, the Conference of Chief Justices and the Conference of State Court Administrators. New Hampshire is sending a team of nearly a dozen professionals to this training.

(6) All bail orders should be transmitted to the alleged victim of a domestic violence incident. It is further recommended that victim witness advocates be funded for involvement in District Court cases. These persons would be responsible to notify victims of such orders. Until such time as this occurs, courts should discuss notification with the prosecuting department and, if necessary, mail a copy of the bail order to the person named as a victim in each criminal complaint alleging a domestic violence-related matter.

### <u>RESPONSE:</u> This recommendation has been included as Protocol 12-17 of the new Domestic Violence Protocols.

(7) In any case where there has been a Class A misdemeanor conviction followed by an appeal for de novo review, the issue of bail pending appeal should be specifically addressed. In the case of domestic violence matters, the provisions of RSA 597:2, III-a regarding preventive detention should also be addressed by the court.

### **Comment:**

By memo dated February 22, 2000, District Court judges were so reminded by the Administrative Judge of the District Court. When a defendant has been convicted of a Class A Misdemeanor in District Court, the defendant has the right to appeal that finding to the Superior Court for a de novo jury trial. RSA 597:1-a, IV makes it clear that once there has been a conviction, the issue of bail is, once again, ripe for consideration by the court.

### <u>RESPONSE:</u> This recommendation has been included as Protocol 12-16 of the new Domestic Violence Protocols.

(8) A procedure should be developed by the courts in conjunction with the U.S. Attorney's Office and the New Hampshire Attorney General's Office to enable District and Superior Court judges to make appropriate findings at the conclusion of qualifying misdemeanor and felony trials as to the applicability of the federal ban.

NOTE: Such a procedure is under development and testing in the District Court.

### **Comment:**

Pursuant to 18 U.S.C. 922(g)(9), a person is subject to a lifetime ban on weapons possession if they are convicted of a qualifying misdemeanor crime of domestic violence which is defined as an offense:

- A. which contains an element of physical force, attempted physical force, or threatened use of a deadly weapon;
- B. which is against an intimate partner; and
- C. for which they are entitled to counsel and jury trial.

<u>RESPONSE:</u> The District Courts have initiated conversations with the Assistant U.S. Attorney for the District of New Hampshire, and with the

VAWA Point of Contact as well. Such a procedure is under consideration at the present time. It is hoped that a procedure may be developed within the next several months. It is also hoped that a bail registry may be able to be developed, as well as a method of identifying those cases which are considered "qualifying misdemeanor crimes of domestic violence" under federal law, for which convictions subject persons to a lifetime ban against possession or ownership of firearms.

- (9) A mechanism for notification to a criminal record keeper (state and national) of the applicability of the ban to a particular individual needs to be developed by the Department of Safety in conjunction with federal authorities and state courts.
  - RESPONSE: This has been accomplished through the coordination between the Administrative Office of the Courts and the Department of Safety relative to entry into the NCIC protection order file for Brady qualifying orders and the New Hampshire Gunline for non-Brady qualifying orders.
- (10) A procedure to notify local law enforcement that a particular defendant is subject to the federal weapons ban must be developed.

**RESPONSE:** See response to District Courts Recommendation #8 above.

(11) The New Hampshire Attorney General's Office, the courts, the Statewide Coalition Against Domestic and Sexual Violence, and others need to continue their collaborative efforts to develop a plan for the funding of victim witness advocates for local prosecutors.

Comment: Victim Witness Advocates have become an integral part of the prosecution function at the Superior Court level. Trained, professional advocates have demonstrated their importance to the system time and again. Currently, the Attorney General's Office, New Hampshire State Police, and County Attorney Offices have such professional victim witness advocates available to them. There are, however, very few victim witness advocates available to local

prosecutors in the 39 District Courts of the State.

<u>RESPONSE</u>: The AmeriCorps Victim Assistance Program's Steering Committee, a partnership including representatives from the Attorney General's Office, the Coalition, the courts and law enforcement, is actively recruiting advocates for prosecutor's offices. They are

doing this by encouraging local prosecutors to apply and by encouraging volunteers to choose working with law enforcement. This is an on-going effort and commitment. The expectation is to add advocates each year.

(12) A study should be conducted by the Department of Corrections, the courts, and other interested parties to identify the extent of the need for probation services and to develop a plan for addressing that need through legislative action.

# RESPONSE: The New Hampshire Department of Corrections is working with the New Hampshire Department of Safety to determine the number of domestic violence misdemeanor convictions in 2001. The Department of Corrections will then determine the appropriate number of PPOs needed. The Commissioner of Corrections is committed to requesting additional PPOs through the budget process for fiscal year 2003/2004, enabling the department to effectively supervise domestic violence cases.

(13) The Legislature should be asked to consider the funding of additional resources in the Department of Corrections to offer probation supervision of appropriate defendants in the District Court.

### **Comment:**

In 1996, the Legislature removed the court's ability to place a defendant convicted of a Class B Misdemeanor or violation on probation. A Class B Misdemeanor carries with it a maximum penalty of a \$1,200 fine. Many law enforcement agencies in the State exercise their charging discretion by charging domestic violence-related assaults as Class B Misdemeanors. In those cases, the courts are without any power to do anything other than order a fine. There is no opportunity for supervision of a violent or potentially violent individual charged with a Class B Misdemeanor. In Class A Misdemeanor cases, on the other hand, although probation services are technically available under the statute, the District Court has been advised that limited resources prevent the Department of Corrections from being fully available at the local level. The resources of the department are focused primarily on the more serious crimes charged in the Superior Court.

### **RESPONSE:** See response to Recommendation 12 above.

(14) The Legislature should revisit this statute to clarify its intent. If it intended to remove all violent cases from the class of cases that can be charged, changed, or recorded as Class A Misdemeanors, it needs to state so clearly.

### **Comment:**

RSA 625:9, as amended by the Legislature in 1992, created two classes of Misdemeanors - A and B. Class A Misdemeanors subject a defendant to a maximum penalty of one year in the House of Corrections and a \$2,000 fine, along with the potential of two years' probation. Class B Misdemeanors, on the other hand, subject a defendant to a maximum penalty of a \$1,200 fine. The statute originally allowed that any offense that was charged as an A Misdemeanor could be changed to a B Misdemeanor by the State under certain circumstances.

In 1996, the Legislature amended the statute again to make clear that the State could not change from A to B an offense that had as an element an act of violence. However, the statute did not preclude the <u>bringing</u> of such an offense as a Class B Misdemeanor in the first instance, nor did it prohibit the reduction of such a charge to a <u>violation</u>-level offense.

Additionally, the statute now provides that where a person is charged with an A Misdemeanor but the court sentences the defendant to a sentence no higher than that available through a Class B (\$1,200 fine or less), the conviction will be recorded as a Class B Misdemeanor. It is common practice that domestic violence cases will either be charged as Class B Misdemeanors or, by plea agreement, end in sentences causing the offense to be recorded as a Class B Misdemeanor under this provision of the law.

The consequence of this gap in the legislation is that in many instances, defendants who would otherwise be eligible for the federal lifetime ban on weapons are not; and, in some cases, confusion exists as to which provision of the statute applies. For example, as indicated above, the most recent amendment makes clear that the State may not change a violent Class A Misdemeanor to Class B. However, it has been held by some courts that the same result can be accomplished by plea bargaining a guilty plea in exchange for a fine-only sentence.

Even more problematic is that when the prohibition against the State reducing violent Class A Misdemeanors to Class B Misdemeanors was enacted by the Legislature, no similar amendment was made to RSA 625:9, VI. Therefore, as mentioned earlier, the State still has the authority to reduce a violent offense to violation-level offense, i.e., an even lower level offense than a Class B Misdemeanor.

RESPONSE: RSA 173-B:9,III specifically addresses violations of protective orders and is clear about charging a Class A misdemeanor and not reducing it to a lesser charge. RSA 625:9 is referenced as not being applicable in these situations. Changing RSA 625:9 to remove all prosecutorial discretion may have undesired consequences, especially with a pro-arrest policy. This recommendation may need to be discussed again.

(15) The Legislature should consider full funding of Guardian ad Litem services in domestic violence cases to represent the interests of children.

### **Comment:**

RSA 173-B:6 allows that a Guardian ad Litem may be appointed to represent the interests of children in domestic violence cases. Funding for these services has, however, been extremely limited, and courts have been repeatedly advised to forego such appointments.

RESPONSE: Last year a statutorily appointed board was formed to review all matters pertaining to GALs. Specifically included are funding, caps and private fees for these services, in addition to the appropriate use and role of the Guardian ad Litem. The board has been instructed to consider the above recommendation as they formulate rules and guidelines and draft necessary legislation.

A member of the Fatality Review Committee (Linda Griebsch) serves on this board.

### **DIVISION FOR CHILDREN, YOUTH & FAMILIES (DCYF)**

(1) Any time children are present at or during any incident of violence, they should be screened for the need for counseling. DCYF should institute clear assessment procedures regarding both screening and response to domestic violence.

### **Comment:**

Many victims grow up in homes where abuse was perpetrated frequently. Therefore, they may assume that violence is a normal part of family life, never seeking assistance. Dr. Robert Kinscherff, pediatrician and professor at Massachusetts General Hospital, Law and Psychiatry Services, states that 40% of 5-13 year olds who witness family violence suffer post-traumatic stress disorder (PTSD), compared with 15-20% of men in active combat duty.

<u>RESPONSE FROM DCYF:</u> DCYF Child Protection Service Workers (CPSWs) are by policy required to meet with all family members, including children, in settings that promote safety for those family members.

During the Intake and Assessment process, CPSWs are trained to follow policy that involves screening for the existence of domestic violence in the family. CPSWs are expected to consult with Domestic Violence Program Specialists (DVPSs)--professional employees for local community crisis centers who are out-sourced offices--to **DCYF** field aid in interventions and recommendations of for treatment family members. Recommendations for counseling ought to suit the needs of individuals referred, e.g., counseling by a therapist qualified to address issues of trauma resulting from witnessing battering. The Director of DCYF and the Executive Director of the New Hampshire Coalition Against Domestic and Sexual Violence have signed a Memorandum of Understanding regarding the use of DVPSs.

DCYF has used administrative funding provided under the Family Violence Protection & Services Act (FVPSA) to fund training specific to safety aspects related to battering for all DCYF child protection staff in each district office. That training is scheduled to be conducted during 2002.

It is important to note that DCYF can only recommend remedial measures with family members, but has no authority to implement those measures without court oversight. Court involvement can only occur if there is sufficient evidence that can be made available to the court that children in the home are abused/neglected as per RSA 169-C.

### RESPONSE FROM THE MEDICAL COMMUNITY: When a child has been

identified as being from a family where there is domestic violence and is brought to a health care provider for a medical exam, a social history would include a medical assessment for the need for counseling. If the patient is actually the parent rather than the child, and domestic violence is identified in the family, health care providers are advised to ask about the presence of children in the home and their safety, not their need for counseling. Because of confidentiality rules, health care providers are advised to tell the parent first that they are mandatory reporters of child abuse, so if parents answer that their child has been abused in any way, they understand it will be reported.

(2) DCYF should identify and assign specially trained therapists to work with the surviving children.

RESPONSE: DCYF and the treatment community will work to expand available counseling resources so that for cases of child abuse/neglect in which battering also occurs, DCYF can better recommend therapists who are specially qualified and trained to address the conditions resulting from exposure to domestic violence.

(3) Careful consideration must be given to placement of children when one or both parents are killed during a domestic violence incident. There may be circumstances where it is inappropriate to place children with the parents of the perpetrator, to prevent children from identifying with, adopting and embracing the perceived propriety of the perpetrator's behavior.

RESPONSE: DCYF will make every effort to ensure the safety and well being of children when DCYF has legal custody and has judicially based oversight in custody decisions. In those cases in which children are placed into the custody of relatives prior to DCYF's involvement and DCYF does not have legal custody, DCYF can make recommendations regarding the placement and treatment of children, which the family may or may not choose to follow. DCYF can petition the court for custody or legal supervision if conditions substantiating the abuse/neglect of children and conditions requiring court oversight exist.

(4) In cases involving children who have had a parent die in a domestic violence-related fatality, DCYF case workers should prepare a family history covering a minimum of three generations (children, parents and grandparents).

**Comment**: A thorough family history will ensure a better result for the children when making treatment and placement recommendations.

RESPONSE: DCYF assessment policy currently directs that history collected must include "historical data about the parents' upbringing which describe events that impacted their beliefs about child rearing, parent-child relations, and appropriate behavior for children including parental history of child maltreatment." Current state and federal reviews are emphasizing the inclusion of underlying factors influencing care for children, including family history. DCYF collects at least three generations of family history in its assessments.

(5) DCYF should ensure that children have an opportunity to bond with the victim's family, especially where it appears the perpetrator prevented or limited the victim from having contact with her family.

RESPONSE: DCYF policy directs that "When children are placed in out-of-home care, one of the most important opportunities for them to maintain connection with their parents and other family members is through visitation." Plans for visitation and contact with parents must be made in consultation with GALs and other participants in the case plan.

(6) Any time child abuse or neglect is investigated, regardless of whether a petition ultimately is filed, screening for domestic violence should occur.

<u>Comment</u>: There is a very high correlation between child abuse or neglect and domestic violence of an adult partner. Intervention may provide greater safety for both the victim and children.

RESPONSE: Structured Decision-Making (SDM) procedures for screening the nature and extent of domestic were integrated into DCYF policy in December 2001. The SDM policies and procedures were developed in consultation with the New Hampshire Coalition Against Domestic and Sexual Violence.

(7) DCYF should establish, publish and distribute to allied organizations their policies on development and retention of family histories and case files.

RESPONSE: Policies regarding file retention can be included in the DCYF comprehensive child welfare plan report currently under development. A member of the Fatality Review Committee (Bernie Bluhm) is the author of this report. That plan will be designed for publication and public access. It is important to note that such report is subject to legislative constraints.

(8) The DCYF protocol should be amended to include specific provisions on intervention and assistance at the time of a homicide or other serious domestic violence case. The protocol should address the role of caseworkers, including a discussion of when they should be called, how they can be reached at any time, and whether a specially trained group of caseworkers should be made available for these cases. This protocol should be developed in collaboration between DCYF and the Attorney General's office.

<u>RESPONSE:</u> The New Hampshire Department of Health and Human Services, DCYF, has been reviewing the ability to offer after hours response

for special situations. It is important to note that the ability to provide CPSW staff and logistical resources is directly contingent on funding and resources approved by state government and made available to the agency. Nevertheless, DCYF is currently involved in a plan that includes an assessment of its ability to strengthen assessment and after-hours capability.

(9) Children of parents who are involved in domestic violence homicides or other serious incidents should have access to medical examinations to help ensure that there are no past or current physical injuries resulting from adult abuse.

RESPONSE FROM DCYF: DCYF can arrange for examinations and evaluations for children when DCYF is co-involved. These considerations will be followed in those cases when DCYF is co-involved. It is important to note that DCYF can only recommend remedial measures with family members, but has no authority to implement those measures without court oversight. Court involvement can only occur if there is sufficient evidence that can be made available to the court that children in the home are abused/neglected as per RSA 169-C.

# RESPONSE FROM THE MEDICAL COMMUNITY: Children do have access throughout the state to medical exams for both child abuse and child sexual abuse. (Please see the New Hampshire Child Abuse Protocol for referrals to CARE network providers. The Child Abuse Referral Evaluations Network is a statewide group of physicians and nurses who provide medical evaluations and treatment for children who may have been abused or neglected.) However, unless they are referred in as patients, children would not automatically have a medical exam.

(10) For calls to the child abuse hotline in which the reporter self-identifies, the intake worker for the Division for Children, Youth and Families should ask, when appropriate, the relationship between the caller and the alleged perpetrator. The caseworker investigating the report should take such a relationship into consideration as a factor when assessing the validity of the allegations.

# Comment: A batterer reporting his or her partner to the Division for Children, Youth and Families hotline may be another tool used by a domestic violence batterer to harass or control a victim, and attempt to engage the State as an unwitting participant.

RESPONSE: DCYF Intake policy includes questioning the reporter regarding the reporter's relationship to the subject of the report. Underlying family issues are noted in the Intake summary. It is important to note that while these underlying issues are taken into consideration in framing DCYF's response to the family, DCYF Intake evaluates our agency's response in the context of the information that directly concerns risk and safety factors for the child referred.

### EMPLOYERS/EMPLOYEE ASSISTANCE PROGRAMS (EAP)

(1) The Governor's Commission on Domestic and Sexual Violence will work with the Corporate Citizenship Initiative to ensure that both public and private businesses receive adequate training and assistance in developing appropriate employer responses to domestic violence.

### **RESPONSE:** The following progress has been made:

- a. A kickoff meeting of 100 business and community leaders occurred in July 2000 to introduce the concept of a Corporate Citizenship Initiative.
- b. A Domestic Violence in the Workplace Policy was developed for state government and established by Executive Order 2000-10.
- c. A brochure was developed in October 2001 and distributed to more than 13,000 state employees. The brochure includes safety and resource information.
- d. Domestic violence liaisons were appointed for each state agency. Liaisons attended trainings on the new state policy and appropriate workplace responses.
- e. A position was created at the New Hampshire Coalition Against Domestic and Sexual Violence to address training and technical assistance needs for public and private businesses.
- f. Approximately 900 state employees have attended policy and basic domestic violence training programs.

(2) All employers in the State should become familiar with the Employee Assistance Program (EAP) Protocol of the Governor's Commission, and should ensure that their EAP/Human Resource staff are trained adequately on domestic violence.

### **RESPONSE:** The following progress has been made:

- a. Gina Grappone from the New Hampshire Coalition and Paula Booth from the State of New Hampshire Employee Assistance Program met with human resource personnel in the Claremont area to discuss techniques to address domestic violence in the workplace and also to assist in the planning of workplace initiatives.
- b. Employee Assistance Program protocols have been made available to participants at state-sponsored training activities.
- c. A representative from the State Division of Personnel has assisted as a resource in the training of supervisors and human resource personnel in the state system on the appropriate organizational response to domestic violence in the workplace.
- d. Plans are underway to update the EAP protocol.
- (3) Employers should be educated about the dynamics of domestic violence, and about signs of possible abuse, so that they may provide assistance to their employees. Such assistance may include referral to an EAP, a local crisis center for advocacy, or a court for a protection order.

# <u>Comment</u>: Perpetrators of violence often use places of employment to access their victims, through use of telephones, fax machines and deliveries (such as flowers). Frequent contact may signal signs of control or possession and possibly danger, rather than friendship. Employers and co-workers should be sensitive to such events and have a forum

and procedure for raising such concerns and providing guidance and referrals to both victims and perpetrators.

<u>RESPONSE:</u> The Committee believes that law enforcement should be added to the list of possible referrals from employers regarding their employees. The Committee adopts such amendment.

<u>RESPONSE:</u> The following progress has been made:

- a. A meeting of 100 business and community leaders convened to introduce the concept of addressing domestic violence in the work place. The attendees were instructed on the signs of possible abuse and the beneficial impact the workplace had on assisting victims.
- b. Training initiatives directed towards state government, supported by the Attorney General's Office, State of New Hampshire Employee Assistance Programs and the Coalition Against Domestic and Sexual Violence provide a comprehensive program that includes information as it relates to batterers, victims, human resource functions, community resources and application of policy.
- (4) Employers who have EAPs and/or Human Resource Departments should encourage employees who are in crisis to access the program for appropriate referrals and possible financial resources.

### **RESPONSE:** The following progress has been made:

- a. The Administrator of the State of New Hampshire Employee Assistance Program (Paula Booth, who is also a member of the Fatality Review Committee) is an active participant at the Human Resources Administrators monthly meeting, which includes discussion of resources for employees in crisis.
- b. In October 2001, an overall statement on payroll checks received by more than 13,000 employees detailed the availability of referrals and resources through the State of New Hampshire Employee Assistance Program.
- (5) Employers should be sensitive to undue strain or emotional or mental stress upon employees indicating the need for referral to an EAP who may make other appropriate referrals.

# Comment: When an employee appears depressed, a referral to a mental health professional should be considered. Depression may signal potential danger to another person. The most expeditious and complete referral would be to an EAP representative who would be familiar with local resources and services.

### **RESPONSE:** The following progress has been made:

- a. Instruction on the appropriate method to refer employees to the EAP is provided via telephone consultations with supervisors employed with the State of New Hampshire.
- b. Supervisory training on "constructive confrontation" techniques for State of New Hampshire supervisors is provided on an as-needed basis.
- c. Each training on the issue of domestic violence has included a component that addresses the appropriate manner with which to address employee concerns and needs.
- d. The State of New Hampshire Certified Manager Program incorporates a program in its curriculum that assists supervisors to address employee concerns. Employees enrolled in this certificate program must attend sessions that specifically address employee concerns.
- (6) EAPs should be encouraged to establish working relationships with their local crisis centers, so that they will be better informed and able to assist their employees by making appropriate referrals.

RESPONSE: Through discussion at the New Hampshire Chapter of the Employee Assistance Professional Association, it is readily acknowledged the importance of a partnership with local community resources in the fight against domestic violence. Trainings have been provided to client companies with the support of local crisis center staff and the Coalition. Referrals to crisis centers are a routine response with the permission of a client. Additionally, through the Coalition, specifically Gina Grappone, all crisis centers have Family Violence Prevention Fund Workplace Curricula. EAPs are being provided resource materials, as Gina makes the connection with each EAP.

### **FAITH COMMUNITY**

(1) The faith community should become thoroughly familiar with the domestic violence protocol prepared by the Governor's Commission on Domestic and Sexual Violence.

<u>RESPONSE:</u> A group of clergy and parishioners have been meeting and have agreed to revise the protocol for the faith-based community response to domestic violence. This is in progress.

(2) The faith community should be provided with education about domestic violence so that they can better identify possible victims who could benefit from being referred to other organizations and agencies (victim service agencies and courts, as examples) for services.

RESPONSE: The New Hampshire Coalition Against Domestic and Sexual Violence has been engaged in a cross training collaboration with the New Hampshire Council of Churches for the past two years. They held a one-day, cross training program in November 2001, and a group of participants committed to work together to revise the Clergy Protocol that was created by the Commission several years ago. Because the turnout for the program in November was poor, they are seeking federal funding for an in-depth training program to be implemented on the local level. This program would fund crisis center advocates to train local faith-based communities. Whether or not the funding is received, the Coalition and Council of Churches are committed to work together to improve the clergy response to domestic violence.

(3) Regular training about domestic violence for members of the faith community should be encouraged. For example, concerted efforts should be made to invite clergy to the annual domestic violence conferences.

<u>RESPONSE:</u> The Reverends Mary Westfall and Jim Norman presented a workshop at the annual Domestic violence Conference last June.

More work is needed in this area.

(4) The faith community should promote the implementation of the Domestic Violence Protocols adopted by the Governor's Commission on Domestic and Sexual Violence, in particular as they relate to providing domestic violence information and education at the time of pre-marriage counseling.

RESPONSE: David Lamarre-Vincent, Executive Director of the New Hampshire Council of Churches, is planning to convene a meeting of interested persons in the early Fall of 2002 to strategize how to better meet the recommendations of the Fatality Review Committee, and how to better share domestic violence-related information to the solo and independent churches.

### GOVERNOR'S COMMISSION ON DOMESTIC AND SEXUAL VIOLENCE

### **General Recommendations:**

(1) <u>Distribution of Protocols</u>: The Governor's Commission on Domestic and Sexual Violence (Commission) will request organizational charts or other distribution lists from leaders of each profession covered by the protocols. Such lists will help ensure that relevant professionals are informed of expectations for their handling of cases involving domestic violence.

### **RESPONSE:** This recommendation has not yet been addressed.

(2) The Commission should invite the faith community to the annual domestic and sexual violence conferences. Additionally, the Commission should ensure that there is on-going information-sharing for clergy.

## <u>RESPONSE:</u> This recommendation has been accomplished. The Faith Community is invited to each annual conference.

(3) The Commission should work with the Corporate Citizenship Initiative to ensure that both public and private businesses receive adequate training and assistance in developing appropriate employer responses to domestic violence.

### <u>RESPONSE:</u> This recommendation has already been addressed. See the response to Employers/Employee Assistance programs.

(4) The Victim Services Committee of the Governor's Commission should prepare a comprehensive informational brochure for victims. The brochure should include information on court processes, safety considerations at the time of issuance of orders, the interplay between civil and criminal procedures, use of victim advocates, statutory rights (including child support), interstate enforcement of protective orders, and batterer's intervention programs. The brochure should also include information about counseling, and the availability of victim's compensation funds to assist victims.

# RESPONSE: The Victim Services Committee is working on a brochure to provide comprehensive information for all victims and survivors who interface with the various systems such as courts, law enforcement, crisis centers and so forth. This brochure will allow for an insert from the local crisis center. The brochure will be distributed to all professions and made available in all locations of public access.

(5) The Commission should establish a Mental Health Committee. One of the most urgent functions for this Committee is to establish criteria for competent counseling

related to domestic violence. Another important function of this Committee is to develop a resource list of mental health professionals for use by courts, victim advocates and others. The Committee also should examine the issue of funding for mental health services for victims of domestic violence.

- <u>RESPONSE:</u> The Executive Committee of the Governor's Commission on Domestic and Sexual Violence decided to form a Mental Health Committee. Linda Saunders of Health & Human Services has agreed to participate on and chair that Committee.
- (6) The Commission should develop an educational videotape on the process of obtaining a protective order. Information should be included on court procedures, safety measures, provisions of protective orders, interstate enforcement, penalties for violation of orders, and treatment programs for offenders, among many other topics.
  - RESPONSE: A videotape has been prepared and distributed to all District Courts and Family Division locations throughout the State. However, not all locations are showing the videotape routinely due to a lack of secure space within the courthouse. Protocol

    5-11 of the new District Court Protocols addresses the process for showing the videotape to plaintiffs and defendants.
- (7) The teen dating violence program recently instituted by the Governor's Commission on Domestic and Sexual Violence should be expanded statewide to all high schools throughout New Hampshire.
  - <u>Comment</u>: This is an effective and much needed vehicle for educating high school aged students about domestic violence and healthy relationships, and providing them with information about local resources.
  - <u>RESPONSE:</u> The Committee believes that this recommendation should be rewritten, and adopts the following language:

Crisis centers should continue to do outreach in receptive schools throughout the State, continuing the work they have been doing for many years.

- Explanation: The purpose for this change is that many of the local crisis centers have effective training programs. It has been logistically difficult to have one singular program utilized throughout the State. Therefore, the Committee has endorsed a revision to this recommendation.
- <u>RESPONSE:</u> The crisis centers have been educating students across the State for a number of years. Additional resources are needed to expand their services. Schools have been very receptive to inviting crisis

center advocates into the schools to educate students about dating violence.

### **Recommendations on Immigrant Issues:**

- (1) The Commission needs to oversee the development of outreach services for immigrant women.
  - RESPONSE: This work is being done, on an on-going basis, by individual crisis centers. WISE, a crisis center, developed a handbook on immigrant and domestic violence issues and this was distributed to the other crisis centers. The Coalition Board and membership adopted the policy on immigrant women, supported by the national organizations, and distributed this statement to all the crisis centers.
- (2) The Commission should contact national resources to gather information for immigrant women. These materials should be distributed to law enforcement, crisis centers, county attorney's offices, courts, health care facilities (such as emergency rooms, physicians' offices and dental offices), and to law firms and the DOVE program of the New Hampshire Bar Association.
  - RESPONSE: There is a new staff attorney position at the International Center in Manchester, funded by VAWA, to work on gathering information, being a resource and distributing information to the above people and agencies.
- (3) A list of translators for different languages should be developed and made available to all organizations and agencies dealing with victims and perpetrators of domestic violence, including courts, DCYF, the Attorney General's office, the Coalition, hospitals, and others. Information on how to contact a translator, especially during non-business (conventional) hours, and fees should be included.
  - RESPONSE: In discussing this recommendation, it was discovered that no entity was assigned to create and maintain such a list. The Commission has no staff or resources. A list is also constantly outdated. Distribution of information on the ATT language line seemed to be a more efficient way to approach this problem. UNH has a list of translators willing to help with court appearances. Granite State Independent Living Association can be used for disabled immigrant women.
- (4) Victim notification cards and other materials regularly distributed to victims should be made available in multiple languages. Multilingual materials should be

distributed in all locations where other victim-service materials are available (e.g., law enforcement, crisis centers, work places, faith community, etc.).

RESPONSE: TANF videos are translated into Spanish. Both the court video on protective orders and the Commission on the Status of Women's "Legal Handbook" are in the process of being translated into Spanish. National domestic violence groups have access to many different language translations of relevant information that is available to anyone who requests it. Many crisis centers have foreign language brochures from this source. Interested parties should call the Coalition office for contact information. A needs assessment should be conducted before materials that may not be needed in all locations are distributed (and possibly wasted).

- (5) Comprehensive training about immigration issues should be incorporated in all professional education programs dealing with domestic violence. This includes, at a minimum, New Hampshire Police Standards and Training Academy, Domestic Violence Emergency Project (DOVE) training, judicial education courses for judges and clerks, victim advocate trainings, and batterer intervention trainings.
  - RESPONSE: Because immigrant issues can be extremely complicated, trainings include referral to a crisis center of all cases involving immigrant victims. Crisis center advocates are trained in immigration and cultural diversity issues and also have information on needed resources.
- (6) Training should include the implications of National Crime Information Center registration relative to Immigration and Naturalization Service status, especially for unregistered immigrants and migrant workers, how persons called to testify in court are affected, and the impact on their family members.
  - RESPONSE: This recommendation, upon further discussion, seemed unnecessary (see response to #5). Each situation has individual circumstances. Crisis centers will be able to discreetly (covered under RSA 173-C) make inquiries relevant to each given instance, while working with the immigrant survivor on the many other issues of concern.
- (7) The Commission should make contact with the Governor's Office regarding refugee services and then disseminate this information with other organizations and agencies who come in contact with battered women.

<u>RESPONSE:</u> The Coalition office, through Gina Grappone, has access to this information. Agencies should contact the Coalition office.

(8) The Commission needs to invite all agencies that work with immigrant women to the annual domestic violence conferences, and to coordinate other training with them. The Commission should consider adding representatives from such organizations to its sub-committees to ensure that the needs of immigrant women are being considered and addressed systemically.

RESPONSE: The Attorney General's office has been contacted about the conference mailing list. There are workshops about immigrant victims of domestic violence and about cultural diversity. Subcommittees have invited participation from groups representing cultural diversity and immigrant populations, i.e., the Batterer Intervention Program Standards Committee had a representative from The International Center present to the group and then was asked for feedback and input on the Standards as they were developed.

### **Recommendations on Elderly Issues:**

(1) The Commission needs to educate the public about domestic violence perpetrated against elderly citizens.

<u>Comment</u>: One possible method to reach the general population would be through public service announcements.

RESPONSE: While radio and TV stations will air PSAs for free, the creation of a PSA is quite expensive. Also, airing of these kinds of announcements is often during times when few people will hear or see them. Methods currently available are presentations and public speaking opportunities. DHHS is conducting trainings at all the District Offices and through collaboration with the Coalition, DHHS trainers and the Division of Elderly and Adult Services. Elder abuse and domestic abuse of elders are being included in these trainings.

(2) The Commission needs to provide more outreach to elderly citizens about domestic violence. Many harbor the view that domestic violence is a private matter, and/or that if the system was not helpful 50 years ago, it will not be helpful today.

<u>Comment</u>: Possible ways to reach the elderly citizen audience include notices with Medicaid payments, notices at pharmacies and physicians'

offices, and an article in American Association of Retired Persons (AARP).

<u>RESPONSE:</u> The Coalition is working with DEAS on a brochure about elder abuse and will join together for the widest distribution possible.

- (3) A member of the Department of Elderly and Adult Services should be added to the Domestic Violence Fatality Review Committee.
  - <u>RESPONSE:</u> Done. A member of DEAS (Lynn Koontz) was added, and has been participating on the Committee for the last year.
- (4) A member of the Department of Elderly and Adult Services should be added to the Governor's Commission on Domestic and Sexual Violence.
  - <u>RESPONSE:</u> Done. A member of DEAS (Lynn Koontz) is now a member of the Commission.
- (5) The Commission should examine the possibility of establishing a separate committee to address domestic violence and the elderly.
  - RESPONSE: This matter was discussed and the decision made to ask the Victim Services Committee to address domestic violence and elder abuse, rather than have a separate committee, which would dilute our people resources and possibly isolate the issue instead of incorporating it. The DEAS representative who serves on the Commission (Lynn Koontz) is already a member of the Victim Services Committee, and will be able to represent the elder abuse issues.
- (6) Specific training on elder abuse and exploitation should be provided to all disciplines that come in contact with the elderly. Audiences include, at a minimum, all courts, housing agencies, medical and mental health professionals, the New Hampshire State Hospital, the clergy, the law enforcement community, victim advocates and batterer intervention providers. Furthermore, all trainings on domestic violence should include a segment on elderly abuse.
  - <u>Comment</u>: One case reviewed highlighted certain stereotypes that may persist, such as a perception that domestic violence occurs only with younger people, or that an elderly perpetrator is not a risk.
  - RESPONSE: DEAS is in complete agreement with this recommendation and has provided and will continue to provide on-going education and training on the Adult Protection Law, including elder abuse and exploitation. A case in point is a collaboration that has developed

between DEAS and the Probate Court system that has already resulted in a statewide meeting between DEAS district office supervisors and Probate Court judges. DEAS will work on the development of a structured training plan to include all the identified disciplines, as well as any that may have been overlooked. At this time, there is a strong motivation at DEAS to carry through. In addition, a segment on elder abuse has been included in the trainings on domestic violence that are provided by DHHS.

- (7) The Elder Abuse Protocol should be distributed to all disciplines that come in contact with the elderly.
  - RESPONSE: The Attorney General's Office passes on the protocols to DEAS for distribution. The protocols will be provided to all agencies that contract with DEAS, as well as disseminated to Senior Advocacy groups, and other organizations and coalitions whose major focus is elderly issues.
- (8) A brochure on domestic violence should be prepared for elderly citizens. This would be similar to the dating violence brochure for teenagers. It would identify common questions, perceptions and attitudes that would help a victim understand whether domestic violence is occurring. It would also educate the victim about available community resources.
  - RESPONSE: DEAS is working with the Coalition to identify existing materials and thereby highlight the informational needs. The creation of a new brochure directed towards an elderly audience is being investigated.
- (9) When individuals who have been involuntarily civilly committed (following a criminal charge) are released from hospitalization, a system should be in place to notify victims and the law enforcement community. The Commission should examine whether state and federal law would permit such notice, and whether legislation should be introduced to facilitate this process.
  - RESPONSE: Under present New Hampshire law, all information pertaining to the treatment and care of an individual admitted for involuntary treatment is confidential and cannot be released without the consent of the individual committed. The specific statutory provisions, which would preclude notification of victims and law enforcement, include:

RSA 151:21 X - Patients' Bill of Rights

RSA 330-A:32 - Communications between mental health practitioners and clients are privileged.

RSA 329:26 - Communications between physicians and patients are privileged.

RSA 328-F:28 - Communications between licensed health practitioners and patients are privileged.

There do exist a number of exceptions to the general rule prohibiting disclosure, including:

RSA 141-C:7, RSA 169-C:29 & RSA 161-F - Reporting of communicable disease, abuse/neglect of children & abuse/neglect of incapacitated adults.

RSA 330-A:35 & RSA 329:31 - Civil liability/duty to warn.

RSA 330-A:32 - Guardianship hearings.

RSA 328-F:28 & RSA 329:26 - Disciplinary action, guardianship or RSA 135-C hearings.

RSA 611-A:10 & RSA 622:47 - Forensic exam by medical examiner, transfers to secure psychiatric unit.

RSA 135-C:19-a - Information necessary for treatment.

However, where express exceptions are made, as above, the legal presumption is that the legislature did not intent to allow disclosure except in these narrowly defined circumstances. As none of these exceptions would authorize routine notification of an individual's discharge from the hospital to either law enforcement or a victim, legislation would be required to implement this recommendation of the Committee.

## <u>HEALTH CARE PROVIDERS</u> (includes ERs, Pediatricians, PCPs, PAs, HMOs, NH Medical Society, Schools and Well Child Check-Providers)

(1) All health care providers should be familiar with the Governor's Commission Medical Protocol and the New Hampshire Health Initiative on Domestic Violence

State Policy Action Plan, which recommend routine screening for domestic violence for all patients.

**RESPONSE:** The New Hampshire Health Care Initiative on Domestic Violence was started in 1997, when the Family Violence Prevention Fund chose New Hampshire as one of ten states to participate in its Health Care Initiative on Domestic Violence. The New Hampshire Leadership Team has since trained teams from 25 of the 26 acute care hospitals in New Hampshire, plus the VA in Manchester, the Bureau of Emergency Medical Services, many of the State's community health centers, and even Planned Parenthood about identification, treatment, and appropriate referral of battered patients. Copies of the Governor's Commission Medical Protocol were distributed at these trainings. Most hospitals are in the process of instituting routine domestic violence screening of women in their emergency departments and in-patient settings. The Health Care Initiative chose to focus its training on primary care providers and emergency departments initially, recognizing that such practices were more likely to adopt routine screening in the context of taking a social history, than the more directed histories taken by specialists. One problem that has been identified is the constant flux in terms of team members, so that repeated trainings are needed just to keep up with personnel turnover. After Governor Shaheen launched the Domestic Violence State Policy Action Plan at a press conference at the Statehouse in June 2001, it has been included in the packet of materials handed out at each training, along with copies of the Governor's Commission Medical Protocol.

(2) Health care providers should screen for and refer children who are in homes marked by violence to specialized therapists.

### **Comment:**

The goal is to identify as many potential providers and administrators of insurance programs as possible to educate about the need to refer children in these situations to competent counselors. The purpose of screening children is to provide needed services while not separating them from their families (parents or

siblings).

RESPONSE: Pediatricians' offices statewide do child abuse screening, and would refer to local counseling resources, should such a need become evident on medical assessment, as well as to the Child Abuse Referral Evaluations (CARE) Network, a statewide group of physicians and nurses who provide medical evaluations and treatment of children who may have been abused or neglected.

### **HOME CARE ASSOCIATION OF NEW HAMPSHIRE**

Local communities should ensure that home health care providers (home health care-nurses) are available to do home visits, especially during the first few months of post-birth time. Screening could be conducted for normal childhood development, as well as access for young mothers to community resources. Home health care nurses also could screen for domestic violence as a routine part of their in-home service.

**RESPONSE:** No information is available on this recommendation.

### LAW ENFORCEMENT

(1) When law enforcement officers are asked to provide assistance, whether responding for protective custody or for a domestic violence assault, they should inquire whether anyone has been victimized, and whether a protection order should be obtained.

RESPONSE: RSA 173-B requires written notice to be given to victims of domestic violence. Police departments across the State have adopted forms to be utilized (such as the State Police Domestic Violence Victim Rights form).

Police officers are trained to ask relevant questions when they respond to calls. RSA 173-B:10 requires that police officers take certain steps to ensure the protection of the victim and that the victim is given written notice of the avenues of protection and assistance available to him/her.

A member of this Committee (Chief Russell) is assisting in creating and implementing new domestic violence training for police recruits at the police academy. This new training will incorporate victim safety issues, victim rights and emphasize that police officers should consider that victims may not readily advise police that they are victims of domestic violence.

(2) The use of school resource officers should be expanded throughout the state.

<u>Comment</u>: A School Resource Officer (SRO) is a trained police officer. Combining that with his/her visibility within the school environment

acts as a mechanism which keeps the lines of communication open between students, law enforcement, school administration, and the community. School Resource Officers are law related counselors who learn to be "active listeners", creating a visible and approachable resource for students who may have domestic violence issues in their lives. The SRO is also a link between both the student body and the school staff, and is able to assist in the identification of students at risk. As a police officer first, he/she has a working knowledge of the juvenile justice system and is able to teach law related courses, counsel both students and parents, and explain the repercussions of actions.

which endanger either the student(s) or school staff. The SRO is also able to make law enforcement and social service agencies aware of potential problems before a tragedy occurs.

### RESPONSE: No information was available on this recommendation.

Law enforcement training should include a component on identifying the (3) predominant aggressor. Law enforcement should also receive training on identifying risks which each party presents to the other in order to ensure that victims are protected.

### **Comment:**

Training on predominant aggressor theory and risk assessments should be integrated together so that law enforcement will understand better the dynamics of domestic violence. A person who may appear to be a primary or predominant aggressor in a particular situation may, in fact, be at greater risk of harm than the person who appears at first glance to be the victim.

RESPONSE: Some factors to consider when determining primary physical aggressors are outlined in RSA 173-B:10, II. Currently there is a training segment for both primary physical aggressor and risk assessment included in the domestic violence curriculum taught to entry level police officers at the academy. The curriculum is going to be revamped in the coming months and it is recommended that more emphasis be placed on these areas. It remains clear that officers are still struggling to determine primary physical aggressor when responding to calls, resulting in the wrong person being arrested or dual arrests. A train-the-trainer program should be identified and representatives from New Hampshire should be selected to attend the program. Once the instructors have completed the class, they should provide in-service training classes consisting of at least four-hour training

blocks to law enforcement agencies throughout the State, preferably through Police Standards and Training.

### **NEW HAMPSHIRE BAR ASSOCIATION**

(1) The New Hampshire Bar Association should be encouraged to disseminate information to all attorneys regarding domestic violence resources and services available to clients whose lives may be impacted by domestic violence. This can be accomplished by use of the Bar Association web site, the New Hampshire Bar News and possibly through a mailing to lawyers outlining services available to clients throughout the State.

### **Comment:**

Lawyers may represent clients whose lives are impacted by domestic violence. It may be appropriate for lawyers to provide those clients with information about available community resources. It is recognized that many lawyers are not aware of services in their own communities. Therefore, the New Hampshire Bar Association should be encouraged to disseminate information to all attorneys regarding resources and services available to those involved with domestic violence. This can be accomplished by use of the Bar Association web site, the New Hampshire Bar News and possibly through a mailing to lawyers outlining services available to clients throughout the State.

<u>RESPONSE:</u> This is a new recommendation. A response will be sought from the New Hampshire Bar Association next Spring.

<u>PSYCHIATRIC/MENTAL HEALTH CARE PROVIDERS</u> (Community Mental Health Centers, Behavioral Health Network and other insurance companies, DHHS-Behavioral Health, NH Psychological Association, School Guidance Counselors, School Psychologists and private providers)

(1) Mental health care providers should screen for and refer victims, children and perpetrators who are in homes marked by violence to specialized therapists.

### **Comment:**

It is critical that mental health care providers be cognizant of their own abilities. If not sufficiently trained in working with victims and perpetrators of domestic violence and with children traumatized by violence, they should refer clients to specialized therapists who have adequate training.

(2) Mental health care providers should refer victims and children to crisis centers for appropriate assistance.

### **RESPONSE** to (1) and (2): The Division for Behavioral Health has

implemented rules which, in part, are for the purpose of developing and monitoring individual service plans. These plans, commonly known as ISPs, are the written document developed to specify the services and supports that an individual needs to attain his/her personal goals. These rules, He-M 401, currently require that every community mental health program (CMHP) complete a written individual service plan for each consumer. In developing a service plan the program must gather and review all information necessary, in conjunction with others when appropriate, including, for persons with a history of illegal or dangerous behavior, a review of risk factors. In addition, a service plan must include a determination of the need to make appropriate referrals for services identified as being needed by the consumer.

The Division has also implemented rules which define the criteria and procedures for approval and operation of community mental health programs. These rules, He-M 403, currently specify requirements for CMHP staff training and development. These requirements include training all staff to be familiar with social, medical and other services available in the local community.

(3) More specific training should be provided for the mental health community on domestic violence. Patients who are seen by mental health professionals should be screened routinely for domestic violence. All providers should ensure that they are familiar with the Mental Health Protocol of the Governor's Commission.

<u>RESPONSE:</u> The new Mental Health Committee is charged with addressing all recommendations specific to screening, referral, training, safety planning and risk assessment under this category.

(4) When any individual is released from mental health treatment, whether as an inpatient or out-patient, the discharge summary should include a history of whether the patient has been a victim or perpetrator of domestic violence.

The discharge summary also should include safety planning for a victim and risk assessment for an offender. The discharge summary should be reviewed with and

signed by the patient and treatment provider. The discharge summary then should be forwarded to the next treatment provider, if any.

RESPONSE: It is the policy of New Hampshire Hospital that patients with a history of sexual assault, stalking, or violence to self, others or property be referred to the Administrative Review Committee (ARC) within three days of admission to the hospital. The purpose of the ARC is to make recommendations regarding the safe management of patients during hospitalization and in any discharge planning. The ARC must be informed of any changes in the individual's clinical condition, treatment interventions and recommendations for use of privileges. The discharge of any patient referred to the ARC shall require the recommendation of the Committee and written authorization by the Superintendent of New Hampshire.

When an individual with identified risk factors has been recommended for discharge by his/her treatment team and discharge has been approved by the ARC and Superintendent, a discharge summary will be prepared to include: risk issues; interactions with community agencies to facilitate treatment/discharge, referrals and appointments; parties in agreement or opposition to discharge plan; others living in the home; family participation in treatment and discharge planning; all relevant family issues; family education and referrals provided; current legal issues; and pending court dates.

Discharge plans and instructions will be provided to the individual and each discharge summary will include the name, address and telephone number for individuals who are to receive a copy of the discharge.

### XI. <u>CONCLUSION</u>

The New Hampshire Domestic Violence Fatality Review Committee may not be the solution to preventing domestic violence but is one very important resource. The work of the Committee represents one more effort to bring multiple community organizations together to prevent unnecessary fatalities and to promote safety for all New Hampshire citizens. The Committee stands for the proposition that domestic violence is a community problem which requires multi-disciplinary community intervention.

The Committee is heartened by the reception to the recommendations contained in the first report. Many organizations and individuals have taken great strides to improve our collective, systemic response to domestic violence. The Committee hopes that the recommendations contained in this report will likewise have a positive impact on the safety and well-being of all our citizens.

# STATE OF NEW HAMPSHIRE CONCORD, NEW HAMPSHIRE 03301

### EXECUTIVE ORDER #99-

An order establishing a New Hampshire Domestic Violence Fatality Review Committee under the Governor's Commission on Domestic and Sexual Violence

WHEREAS, as Governor I have expressed special interest in improving services to victims of domestic violence; and

WHEREAS, the Commission on Domestic and Sexual Violence has recommended that efforts be made to address the issue of domestic violence-related fatalities; and

WHEREAS, the formation of a standing team composed of representatives of state agencies and relevant professional fields of practice will establish a useful repository of knowledge regarding domestic violence-related deaths; and

WHEREAS, in order to ensure that New Hampshire can provide a continuing response to domestic violence fatalities, the Fatality Review Committee must receive access to all existing records on each domestic violence-related fatality. The records may include social service reports, court documents, police records, medical examiner and autopsy reports, mental health records, domestic violence shelter and intervention resources, hospital and medical-related data, and any other information that may have a bearing on the victim, family and perpetrator; and

WHEREAS, the comprehensive review of such domestic violence-related fatalities by a New Hampshire Domestic Violence Fatality Review Committee will result in recommendations for intervention and prevention strategies with a goal of improving victim safety; and

WHEREAS, the New Hampshire Domestic Violence Fatality Review Committee represents an additional aspect of our effort to provide comprehensive services for victims of domestic violence throughout the State of New Hampshire;

NOW, THEREFORE, I, Jeanne Shaheen, Governor of the State of New Hampshire, do hereby establish a multi-disciplinary Domestic Violence Fatality Review Committee. The objectives of this committee shall be:

- 1. To describe trends and patterns of domestic violence-related fatalities in New Hampshire.
- 2. To identify high risk factors, current practices, gaps in systemic responses, and barriers to safety in domestic violence situations.
- 3. To educate the public, policy makers and funders about fatalities due to domestic violence and about strategies for intervention.
- 4. To recommend policies, practices and services that will encourage collaboration and reduce fatalities due to domestic violence.
- To improve the sources of domestic violence data collection by developing systems to share information between agencies and offices that work with domestic violence victims.
- 6. To more effectively facilitate the prevention of domestic violence fatalities through multi-disciplinary collaboration.

Given under my i	nand and seal at	the Executive Chambers
in Concord, this	day of	in the year of our
Lord, one thousan	d nine hundred	and ninety-nine.

Jeanne Shaheen Governor of New Hampshire

### **APPENDIX B**

# NEW HAMPSHIRE GOVERNOR'S COMMISSION ON DOMESTIC AND SEXUAL VIOLENCE

### DOMESTIC VIOLENCE FATALITY REVIEW COMMITTEE

## <u>CONFIDENTIALITY AGREEMENT FOR</u> THE NEW HAMPSHIRE DOMESTIC VIOLENCE FATALITY REVIEW COMMITTEE

The purpose of the New Hampshire Domestic Violence Fatality Review Committee is to conduct a full examination of domestic violence fatalities. To ensure a coordinated response that fully addresses all systemic concerns surrounding domestic violence fatalities, the New Hampshire Domestic Violence Fatality Review Committee must have access to all existing records on each case. This includes, but is not limited to, social service reports, court documents, police records, medical examiner and autopsy records, mental health records, domestic violence shelter and intervention resources, hospital and medical related data, and any other information that may have a bearing on the involved victim, family and perpetrator.

With this purpose in mind, I, the undersigned, as a representative of
agree that all information secured in this review will remain confidential and wi
not be used for reasons other than those which were intended by the creation of this Committee. N
naterial will be taken from the meeting with case identifying information.
Print Name
Anthoninal Cianatura
Authorized Signature
Witness
Date

# NEW HAMPSHIRE GOVERNOR'S COMMISSION ON DOMESTIC AND SEXUAL VIOLENCE

### DOMESTIC VIOLENCE FATALITY REVIEW COMMITTEE

### **PROTOCOL**

- 1. The Fatality Review Team will operate under the auspices of the Governor's Commission on Domestic and Sexual Violence.
- 2. The Committee will review all deaths of domestic violence victims in New Hampshire from 1990 forward.
- 3. Domestic violence victims will be identified as guided by the relationship criteria specified under New Hampshire RSA 173-B.
- 4. Comprehensive, multi-disciplinary review of any specific cases can be initiated by any member of the New Hampshire Fatality Review Team or any individual or agency request presented to a member of the team.
- 5. An executive committee of the Fatality Review Team shall screen cases to be submitted for full case review. This committee shall coordinate invitations to participate in the review, and shall request that all relevant case materials be accumulated by the committee or other designated members of the Fatality Review Team for distribution.
- 6. The Fatality Review Team will convene as needed, with the expectation that it shall meet bi-monthly.
- 7. Each team member shall serve a minimum two year term. The member shall select an alternate member from their discipline and will ensure that the member or the alternate will be present at every meeting of the Fatality Review Team.
- 8. All team members, including alternates, shall be required to sign a Confidentiality Agreement. Furthermore, Confidentiality Agreements will be required of any individual(s) participating in any domestic violence fatality review.
- 9. The team will provide periodic reports of its findings and recommendations to the Governor and other relevant agencies and individuals.

Domestic Violence Fatality Review Committee Protocol Page 2

10. The following agencies and offices shall be represented on the Fatality Review Team: corrections; law enforcement; judiciary; clergy; mental health (administration and practitioner); medical examiner; ER services; education; prosecution; victim services; drug/alcohol; EAP; DCYF; DOVE; and others as needed.