City of Lynchburg
Family Violence Fatality Review Team
Data Collection Form

Case review #:

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

VICTIM/DECEDEENT INFORMATION:
Full Name
Data of Birth
Date of Death
Age (in years)
Gender
Marital Status
Other intimate partners at the time of the incident
Place of Residence: House/Apt., Shelter, Friend's Home, Family's Home, Other
Zip Code
Race/Ethnicity: African Am, Asian, Caucasian, Hispanic/Latino, Native Am, Other
Religion
Immigration Status
Education Level
Employed?
Employer
Income
Occupation
Occupational Category: Professional, Technician, Clerical, Skilled Worker, Laborer, Service Worker, Other
If unemployed, source of income
Military Experience (and Type of Discharge)
Address at Time of Death
Prior Addresses
Abuse of Alcohol
Abuse of Illegal Drugs
Use of Alcohol
Victim of child abuse/neglect - physical
Victim of child abuse - sexual
History of Mental Illness
Suicide Attempts
Medications
Criminal History (details)
On probation/parole
Children in common with defendant/perpetrator
Other Children
Children reside with...
Been married to someone other than the defendant
History of witnessing DV as a child
History fo Abuse by Others
RELATIONSHIP HISTORY/NATURE OF RELATIONSHIP
Relationship at the time of homicide
If together, had either told the other of an intent to end the relationship
If together, had either told friends/family of an intent to end the relationship
Length of relationship
Legal status of relationship
Habitation status
If together, has she told/asked him to leave
If together, had she tried to leave
If together, Children in the home
If together, Others in the home

ESCALATING CIRCUMSTANCES
What types of abuse were present?
How long had the abuse been taking place?
Who knew of the violence/abuse?
Did the victim
Express fear of physical danger to herself or the children
Express fear of losing custody to the children
Isolate herself from family and friends
Have evidence of physical injury
Show frequent signs of depression
Show frequent signs of anger
Show frequent signs of low self-esteem
Express fear of involvement in the criminal justice system/process
Show or express sleeping difficulties
Express guilty feelings about the failed relationship
Show or express a history of family abuse
Express fear of loneliness
Express fear of making a great life change
Express belief that partner would change his behavior
Did the perpetrator
Abuse the victim in public
Keep tabs on or stalk the victim
Put down the victim's friends and family
Make all decisions in the relationship, including finances
Blame the victim for the abuse
Use intimidation
Smash objects and destroy property
Have poor compliance with taking medications
Perceive betrayal or rejection by the victim
FATALITY EVENT
Date of Incident
Approximate Time of Incident
Day of the Week
Location of Incident
Place of Incident (residence, street, school, restaurant, etc.)
Reported By
Witnesses
Manner of Death (gunshot, stab wound, strangulation, blunt trauma, etc.)
Weapon Used
Children present
Others present
Sexual Assault
Pregnant
History of Other Illness
Autopsy Performed (and Findings)
Toxicology Investigation (and Findings)
Body Parts Affected
Strangulation
Other Injuries
Number of Wounds
Did perpetrator have other weapons with him/her besides the murder weapon?
Perpetrator under the influence of alcohol
Perpetrator under the influence of illegal drugs
During exchange of children or visitation
Custody of children following fatality

IF HOMICIDE-SUICIDE
Date of suicide
Approximate Time of Incident
Day of the Week
Location of Incident
Place of Incident (residence, street, school, restaurant, etc.)
Reported By
Witnesses
Manner of Death (gunshot, stab wound, strangulation, blunt trauma, etc.)
Weapon Used
Children present
Others present
History of Other Illness
Autopsy Performed (and Findings)
Toxicology Investigation (and Findings)
Body Parts Affected
Other Injuries
Prior suicide threats
Prior suicide attempts
PROTECTIVE ORDERS AGAINST DEFENDANT/PERPETRATOR
Emergency Protective Order Petitioned For
Emergency Protective Order Granted
Emergency Protective Order In Effect at Time of Fatality
Any special terms
Emergency Protective Order Expired or Dropped by Victim/Decedent
Preliminary Protective Order Petitioned For
Preliminary Protective Order Granted
Preliminary Protective Order In Effect at Time of Fatality
Any special terms
Preliminary Protective Order Expired or Dropped by Victim/Decedent
Permanent Protective Order Granted
Permanent Protective Order In Effect at Time of Fatality
Any special terms
Permanent Protective Order Expired or Dropped by Victim/Decedent
Any allegations of Protective Order being violated

PROTECTIVE ORDERS AGAINST VICTIM/DECEDEENT
Emergency Protective Order Petitioned For
Emergency Protective Order Granted
Emergency Protective Order In Effect at Time of Fatality
Any special terms
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CIVIL COURT MATTERS
Divorce Proceedings Filed
Status at the Time of the Fatality
Custody Proceedings Filed
Status at the Time of the Fatality
Visitation Proceedings Initiated
Visitation Arrangements in Place at the Time of the Fatality
Child Support Proceedings Initiated
Status at the Time of the Fatality
Other Civil Matters Filed
AGENCY/SYSTEM CONTACTS (victim/perpetrator/family, locality, dates, details)
911 Dispatch
Alcoholics/Narcotics Anonymous
Anger Management
Animal Control
Batterer's Intervention Program
Bondsman
Child Care
Community Corrections (Local/Misdemeanor Probation)
Court Services Unit/Juvenile Services
Domestic Violence Shelter
Emergency Medical Services
Felony Probation/Parole
Fire Department
Forensic Nurse Examiners
Homeless Shelter
Hospital/Primary Care
Magistrate
Mental Health/Psychiatric Care
Other Counseling
Other Emergency Medical Assistance
Other Victim Services
Private Attorney
Public Assistance
Religious Community
School System
Sexual Assault Response Program
Social Services
Substance Abuse Treatment

REFERRALS FOR SERVICES
Service referred to victim, by whom
Results of Referral
Court ordered
(Repeat as necessary)
Service referred to perpetrator, by whom
Results of Referral
Court ordered
(Repeat as necessary)
DANGER ASSESSMENT

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

   Add total number of “Yes” responses, 1 through 19.
   Add 4 points for a “Yes” to question 2
   Add 3 points for a “Yes” to questions 3 and 4.
   Add 2 points for a “Yes” to questions 5, 6 and 7.
   Add 1 point for a “Yes” to questions 8 and 9.
   Subtract 3 points if 3a is checked.

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

TEAM MEMBERS PRESENT (by Agency)
CASE SYNOPSIS:

Agency Policies & Procedures
Which agency policies helped to make the victim safer?
Were any key policies/procedures NOT followed? Why?
Which agency policies were identified as weaknesses?
Has that policy/procedure been changed?
How could it be improved?

System Contacts/Interventions
Which system contacts/interventions benefited the victim?
Which system contacts/interventions could be improved, and how?
What interventions may have improved this situation that were NOT utilized/offered?
At what points could those services have been offered?

Education/Prevention
Was the victim aware of the danger of her situation?
Was the victim aware of domestic violence resources available in her community?
Were the people around the victim (family & friends) aware of the danger of her situation?
Were the people around the victim (family & friends) aware of any domestic violence resources in the community?