

National Family Justice Center Alliance

Domestic Violence Report and Referral Project Presented by Cherri Alison and Hillary Larkin

March 25, 2015 • 10:00am-11:30am

Course Description

Title: Domestic Violence Report and Referral Project

Speakers will present on the Domestic Violence Report and Referral (DVRR) Project which was designed to create a seamless bridge between emergency departments, law enforcement, and the Alameda County Family Justice Center (FJC) in Oakland California.

The DVRR is an electronic report interface that combines the DV mandatory report, Danger Assessment, and "warm hand off" to the FJC in one simple step. In the pilot DV education for hospital staff was provided along with a secure web based tool that can be accessed by computer or tablet to the county hospital emergency department /trauma center. In the first-year Alameda County has successfully doubled the number of reports submitted to law enforcement, and increased the number of Emergency Department Domestic Violence patients receiving services from at the Family Justice Center from 4% to 47%.

The DVRR tool was developed with a grant from the Blue Shield California Foundation with the goals of 1) Simplifying the mandatory reporting process for health care providers; 2) Standardizing the data collected in the reports and improving the forensic value of the report by including images; 3) Creating a direct referral to the FJC (with patient consent) by providing the navigators with safe contact information to call the patient directly.

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- The presentation will begin promptly at 10:00 a.m. Pacific Time
- If you are experiencing technical difficulties, email <u>natalia@nfjca.org</u>
- To LISTEN to the presentation on your phone, dial (213) 929-4212
 Access Code: 886-644-998 or listen on your computer speakers
- Attendees will be muted throughout the presentation
- To send questions to the presenter during presentation:
 - Click on "Questions" in the toolbar (top right corner)
 - Type your comments & send to presenter
- There will be a Q & A session at the end of the presentation.
- The presentation will be recorded & posted on <u>www.familyjusticecenter.com</u>
- Please complete the evaluation at the end of the presentation. We value your input.



Your host today:



Casey Gwinn, JD
President,
Family Justice Center Alliance



Family Justice Center Alliance



Casey Gwinn, JD



Gael Strack, JD



Natalia Aguirre



Chris Burlaka, CPA



Jennifer Anderson



Ruth Samson



Michael Burke



Thank You to Our Sponsor

Thank you to the Office on Violence Against Women and Blue Shield of California Foundation for making this training possible!

This project is supported all or in part by Grant No. 2012-TA-AX-K017 awarded by the Office on Violence Against Women, U.S. Department of Justice. The opinions, findings, conclusions, and recommendations expressed in this publication/program/exhibition are those of the author(s) and do not necessarily reflect the views of the Department of Justice, Office on Violence Against Women.



2015 International Family Justice Conference San Diego April 21-23, 2015





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Today's Presenters:



Hillary Larkin, BS, PA-C Midlevel Clinical Coordinator Alameda County Medical Center



Cherri Allison, JD

Executive Director

Alameda County Family Justice Center

Domestic Violence Report and Referral (DVRR)

A new way to report DV, assess future lethality, and facilitate follow-up services for victims in Alameda County



Domestic Violence Report and Referral

- Conceptualized in 2005 with the opening of ACFJC
- Supported by the District Attorney, the police chiefs, and the DV advocacy community
- Informed by data from the Alameda County DV Fatality Review Team (1996)
- Recognizing that the DV victims at highest risk of fatality were being seen in the ED's and there needed to be better communication between ED's, advocacy and law enforcement

Domestic Violence Fatality

1 in 5 women killed by their intimate partner received emergency department care in the year prior to their murder for injuries inflicted by the same partner

For every one femicide, there are approximately 9 attempted femicides

(Sharps, Koziol-Mclain, Campbell et al 2001)

Problems

- No standardized reporting form
- Reporting process to complicated
- No comprehensive training or protocol
- No current list of active DV advocacy resources
- No standardized response from LE

Opportunities

- Opening of the ACFJC
- The transitioning to the Electronic Medical Record
- The chance to improve quality, compliance and potentially capture VOC

COMPLIANCE:

Mandates for the Screening and Treatment of IPV Victims in clinical settings

Institute of Medicine
US Preventive Services Task Force
Affordable Care Act

Joint Commission on Accreditation of Healthcare Organizations (JCAHO) - performance criteria

- Education for providers
- Identify abuse victims
- Maintain community resource list
- Assist in referrals
- Comply with reporting requirements

Goals for Alameda County

- Simplify report- One step process
- Improve the quality of data contained in the report, build in danger assessment and images
- Provide warm handoff to advocacy with feedback to providers
- Mandated report sent with confirmation documentation of receipt
- Aggregated data collected in analyzable format
 - →PHASE I Proof of Concept
 - →PHASE II Complete Pilot for HGH ED
 - →PHASE III Include All ED's (8 ED's total)

Blue Shield California Foundation Grant to the ACFJC

- Develop DVRR Interface
- Develop multidisciplinary training modules (E-learning)
- Deploy training + DVRR
- Refine interface/validate the form
- Deploy in ED's across Alameda County (8)

IPV Intervention

Creating Sustainable System Level Program

- Identify the Champions (IPV experts on the clinical staff)
- Training -Staff Saturation (all levels of staff gets DV training)
- Policy supported by Leadership and Procedures/ Responses that include community based organizations
- Continuous Quality Improvement- chart review, feedback to providers and regular updates
- Primary prevention efforts- Posters/ signage, pamphlets and information

(Hemberger, Rhodes, Brown 2015)

Reporting vs Screening

"... Routine screening didn't necessarily help those women get the follow up and support that they needed...

The medical community should be focusing on providing known victims with proper support."

Dr Gene Feder BMJ May 14 ,2014

Doctors Debate Whether Screening For Domestic Abuse Helps Stop It

by MAANVI SINGH

May 14, 2014 9:54 AM ET



In the U.S., doctors increasingly ask about domestic violence as a routine part of checkups.

The History of DV Mandatory Reporting Laws

- Written into California law in 1994
- Added DV to the existing list of mandatory reports which included:
 - Assault (GSW/Stab wounds)
 - Physical and sexual abuse of children/sexual exploitation (HEAT)
 - Elder/dependent adult abuse
 - Adult sexual assault

Report Requirements (CA Penal Code 11160-11163.6)

- Who is included in the definition of DV?
 - Current or past intimate partners
 - Individuals with children in common
 - adult family members or individuals that share a home
- What information is included?
 - Name and whereabouts of the victim
 - Location and time of the assault
 - Nature of the injuries
 - Name of the suspected or reported perpetrator

Report Requirements (CA Penal Code 11160-11163.6)

CALL THE POLICE

Required to make contact with LE while the patient is in the hospital/clinic

AND

WRITTEN REPORT

Follow up within two days of report

DV In Alameda County (pre DVRR)

- DV rate 4 per population of 1000
- In 2013 we had 14 deaths
- In 2013 155 DV mandatory reports were completed in the AHS Highland ED
 - →34 (22%) were considered severe (attempted homicide)
 - Only 45 (29%) were submitted to police within 72hr
- Less than 4% of the patients referred (given phone number) from the ED presented to the FJC for services

2010 DV Calls to 911

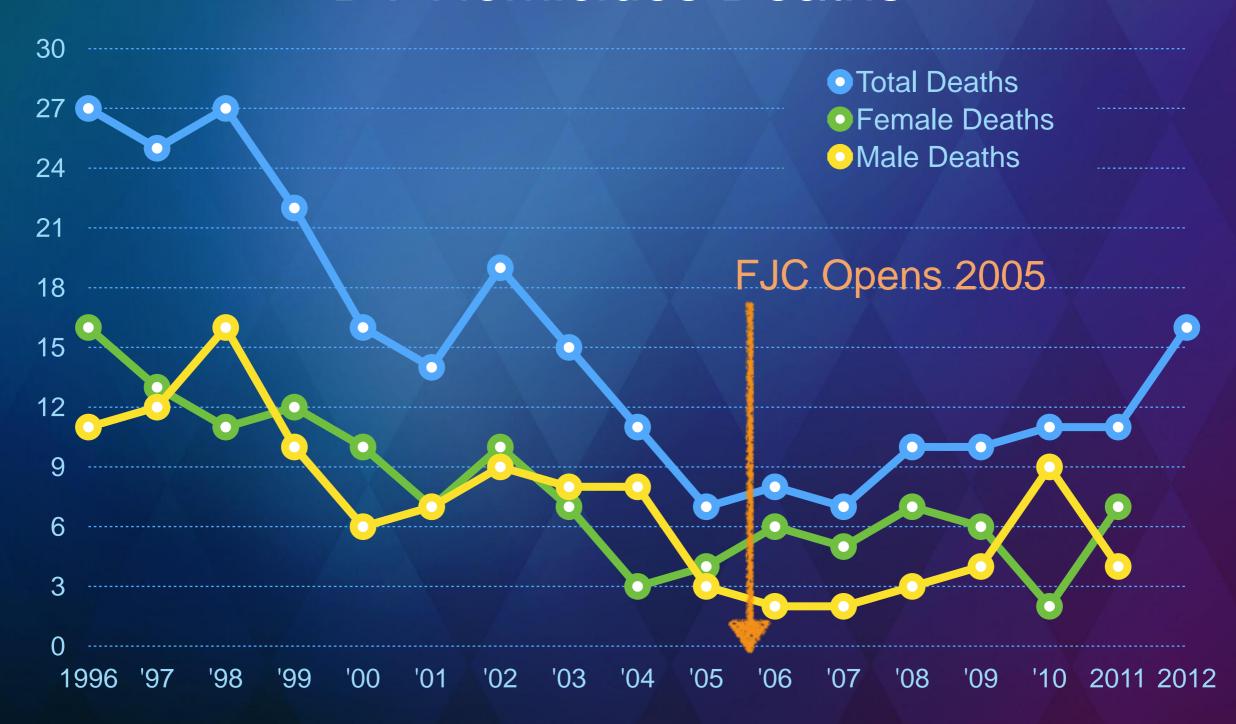
Jurisdiction	Total calls	No weapon involved	Weapon involved	Firearm
Sherriff	805	700	105	6
Alameda	138	112	26	1
Albany	27	26	1	0
Berkeley	100	80	20	0
Emeryville	58	7	51	1
Fremont	491	439	52	1
Hayward	424	84	340	0
Livermore	248	15	233	2
Newark	110	74	36	1
Oakland	3679	2873	806	14
Piedmont	14	14	0	0
Pleasanton	90	2	88	0
San Leandro	310	16	294	4
Union City	188	152	36	2
other	8	2	6	0
TOTAL	6730	4626	2104	32

31% Had Weapon

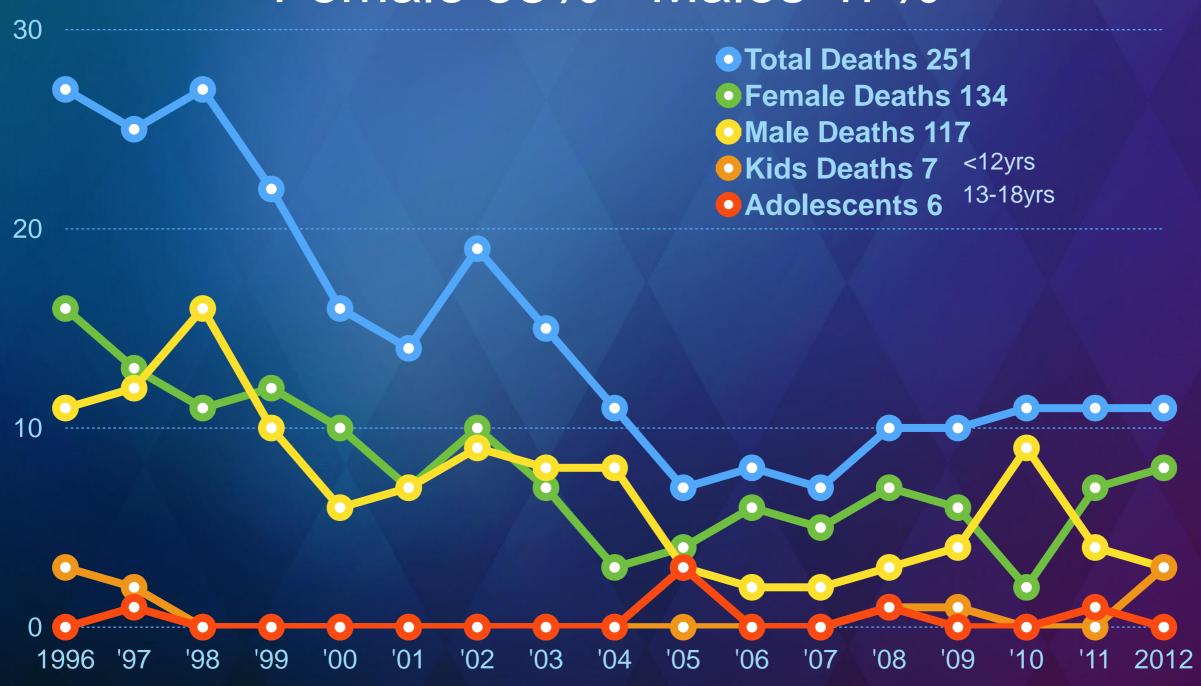
1.5% Reported Guns

(CA AG)

Alameda County DV Homicides Deaths



DVFRT Death by Gender Female 53% Males 47%



DV Fatality Review Method of Homicide



Other 4%

Blunt Trauma
10%
Asphyxiation
5%

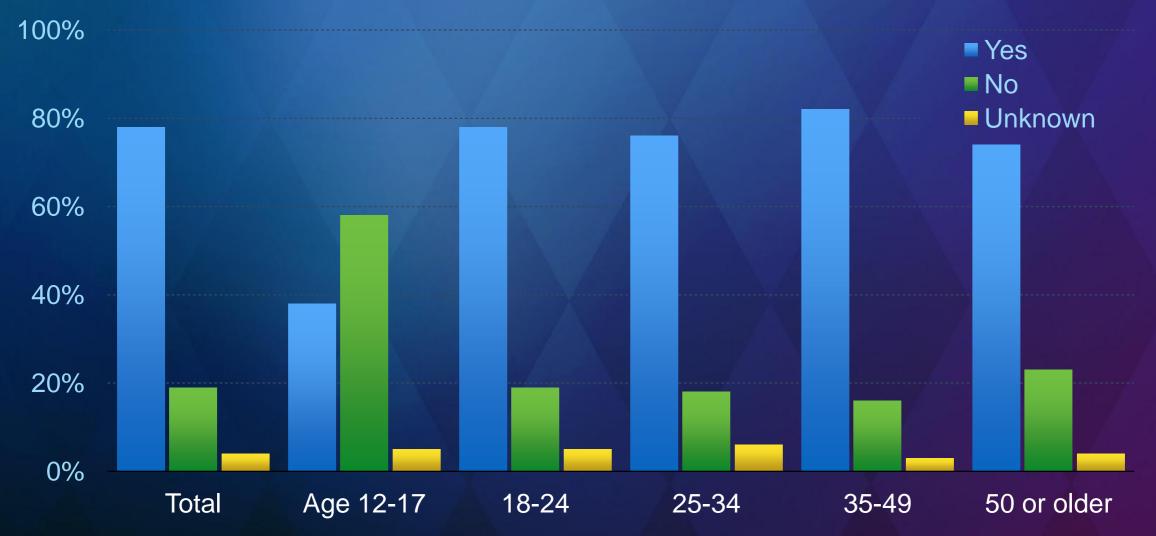
Gun Shot Wound 52%

- Stabbing 29%
- Gun Shot Wound 52%
- Asphyxiation 5%
- Blunt Trauma 10%
- Other 4%

Circle of Violence - Re-assault

65-80% of DV related homicide had previously reported injury by the same assailant

Intimate partner violence against females, by whether victim was previously victimized by the same offender, 2005-2010



Note: Estimates based on six-year averages. Includes rape or sexual assault, robbery, aggravated assault, and simple assault committed by current or former spouses, boyfriends or girlfriends. Includes single and multiple offenders.

Source: Bureau of Justice Statistics, National Crime Victimization Survey, 2005-2010

Danger Assessment Lethality Risk Factors

- → Used or threatened with a weapon (20.2x)
- Threatened to kill (14.9x)
- Prior attempts to strangle (9.9x)
- → Forced sex (7.6x)
- Weapon present in home (6.1x)
- Escalating severity of violence over time (5.2x)
- Partner controls daily activity (5.1x)

Domestic Violence Reporting and Referral





Law enforcement Receipt confirmed Special follow up instructions

District Attorney



Danger Assessment

DV mandated report Name and location of pt Nature of injuries Name of assailant and relationship





Yes







Secure Login

DVRR

Define Mandated report Answers to question Algorithm for reporting





Public Health Aggregate Data Identify areas of need Fatality review



Family Justice Center

Follow up instructions Needs assessment Lethality Scale Ongoing services and follow up



DV resource page Email FJC navigator referral

Printable Community resources available in multiple languages Organized by community and culture







HIPAA

Consent

No

DVRR Report - POST DVRR

DV ED Reports 2013 pre DVRR

2.9 Cases/week n=155 (52 weeks) DV ED Reports 2014 with DVRR

5.1 Cases/week n=280 (57 weeks)

Trauma	41/280	15%
SART	26/280	10%
Strangulation	47/280	17%
Arrived by Ambulance	160/280	57%
Consented to FJC Referral	235/280	84%

DV and Pregnancy

DV Patients 2014	n=280	fn=244
Kids in the home	97/280	35%
Pregnant	38/244	16%
Pregnant + Kids	20/38	53%
Pregnant + Trauma	4/38	10%
Pregnant + Strangulation	9/38	24%
Pregnant + Sexual Assault	4/38	11%

Reproductive Coercion

DVRR

Injury Scale: Understanding hospital resource utilization

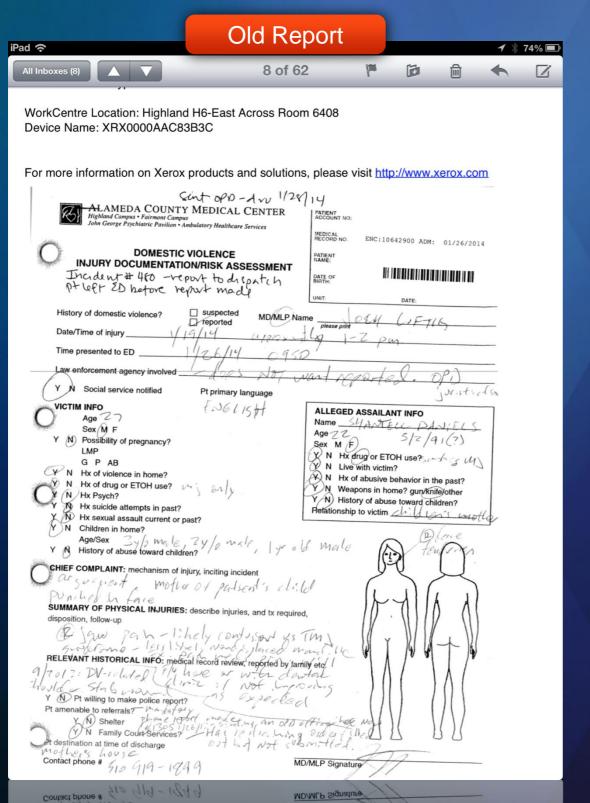
	Definition	2013 pre DVRR n=155	2014+ (57 weeks) n=289
1	No injury	6%	3%
2	Visible injury no tx required	29%	29%
3	Injury + treatment required Lab/xray/procedure	43%	38%
4	Injury extensive requiring extended eval/treatment/ observation/trauma eval + SA and/or strangulation	22%	30%

DVRR Danger Assessment

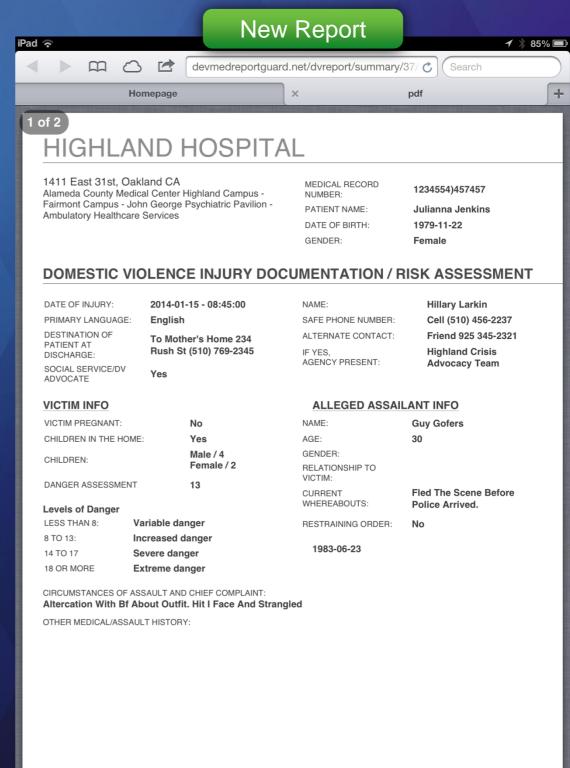
Score	Risk	Number	Percentage %	Ph/A
<8		53	28%	n=199
8-13	Increased	33	18%	
14-17	Severe	34	17%	
18+	Extreme	72	36%	
Not Answered Not Applicable		57 31	31%	n=88

DVRR

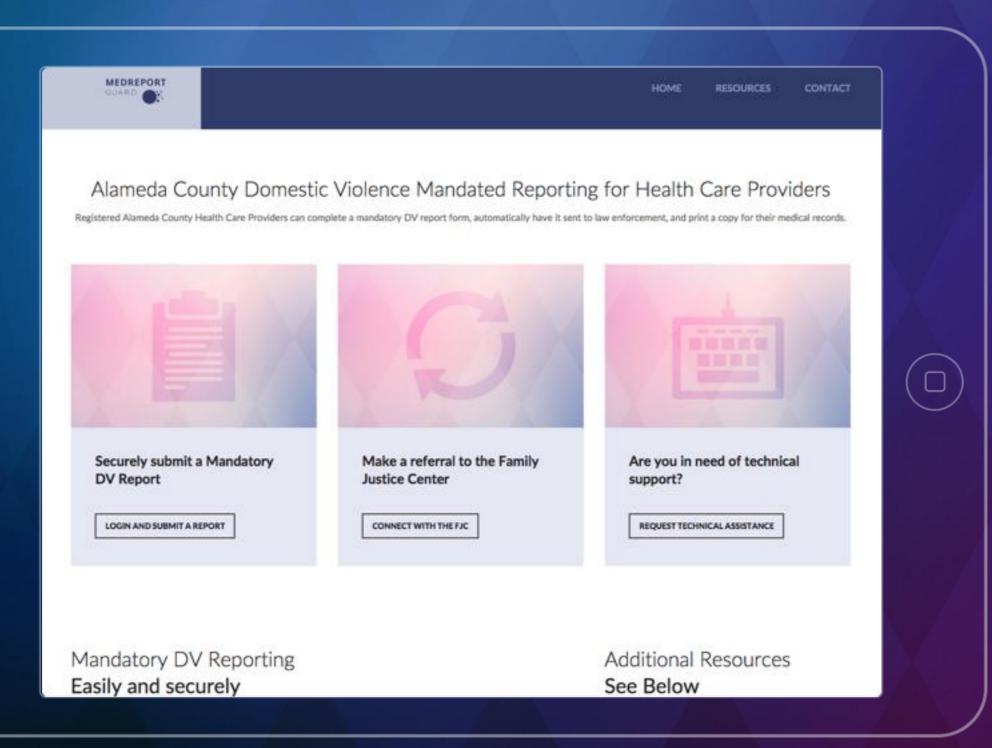
Improve the quality of the report



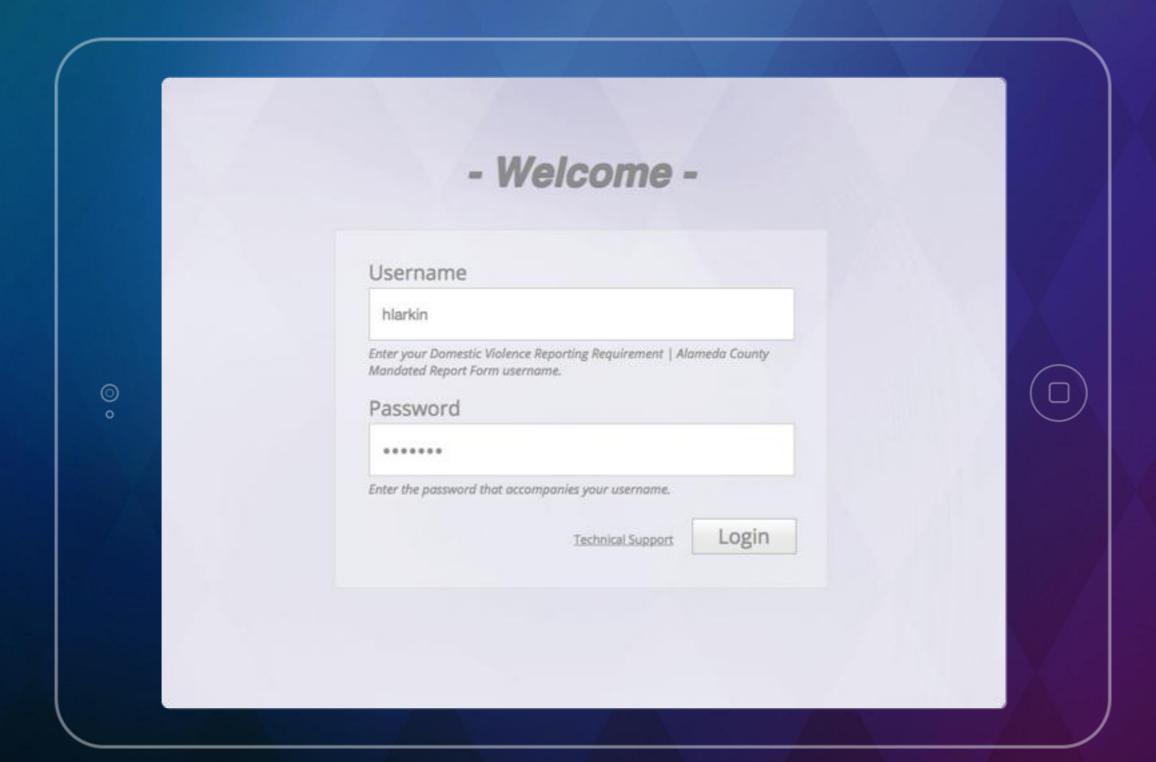
IN M FAMILY COURT Services? / THILL



DVRR Splash Page



DVRR Login

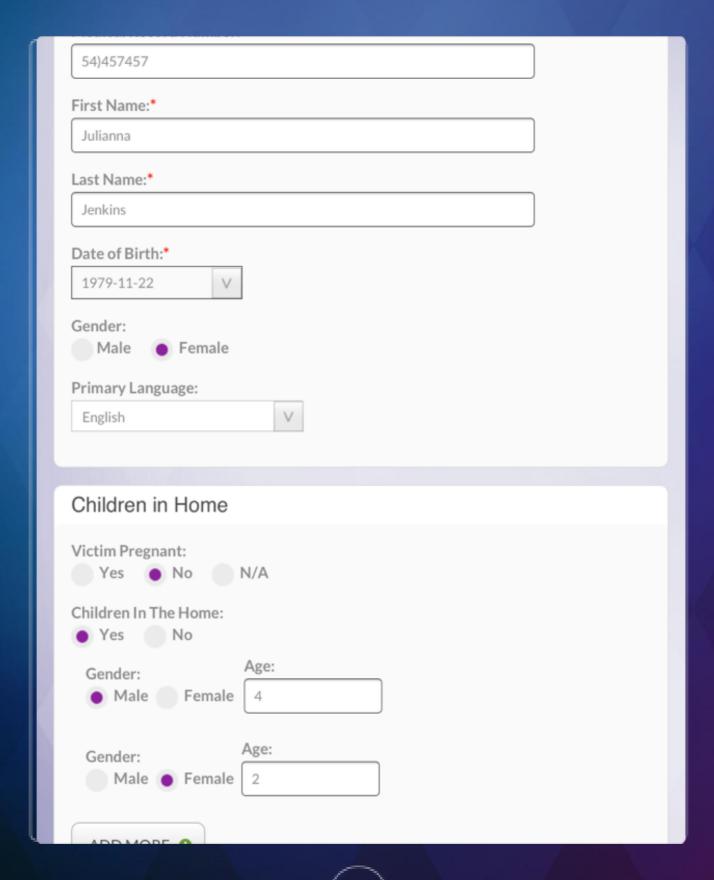


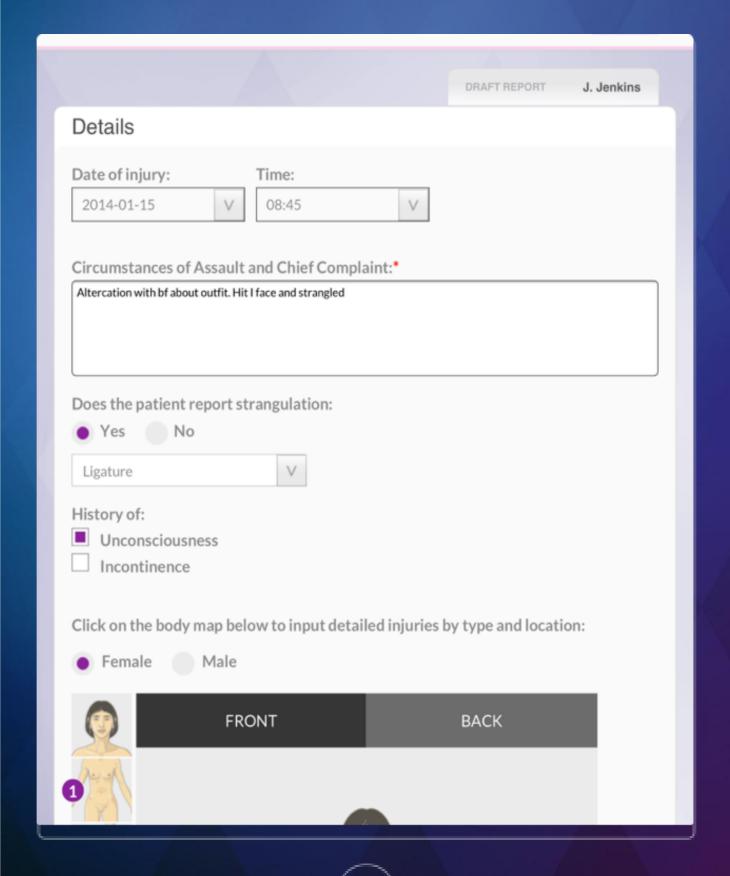


	Larkin			21:39:12	00:00:00
Edit	Hillary Larkin		22	2014-01-10 21:52:16	0000-00-00 00:00:00
View Pdf	Hillary Larkin	safari imac	23	2014-01-10 22:08:03	2014-01-10 22:17:52
Edit	Hillary Larkin	Dodgy Feds	28	2014-01-12 02:25:06	0000-00-00
Edit	Hillary Larkin	IE8 ED desktop	29	2014-01-12 17:41:47	0000-00-00 00:00:00
View Pdf	Hillary Larkin	chrome ED desktop	30	2014-01-12 17:49:27	2014-01-12 17:55:10
View	Hillary Larkin	Francis Foo foo	31	2014-01-13 04:40:27	2014-01-13 04:46:23
View	Hillary Larkin	chrome MacOS10.9	32	2014-01-13 05:25:33	2014-01-13 05:30:57
View	Hillary Larkin	samsung tab chrome	35	2014-01-15 01:43:05	2014-01-15 02:28:27
Edit	Hillary Larkin		36	2014-01-16 01:19:02	0000-00-00
View	Hillary Larkin	Julianna Jenkins	37	2014-01-16 01:21:35	2014-01-16 01:35:42

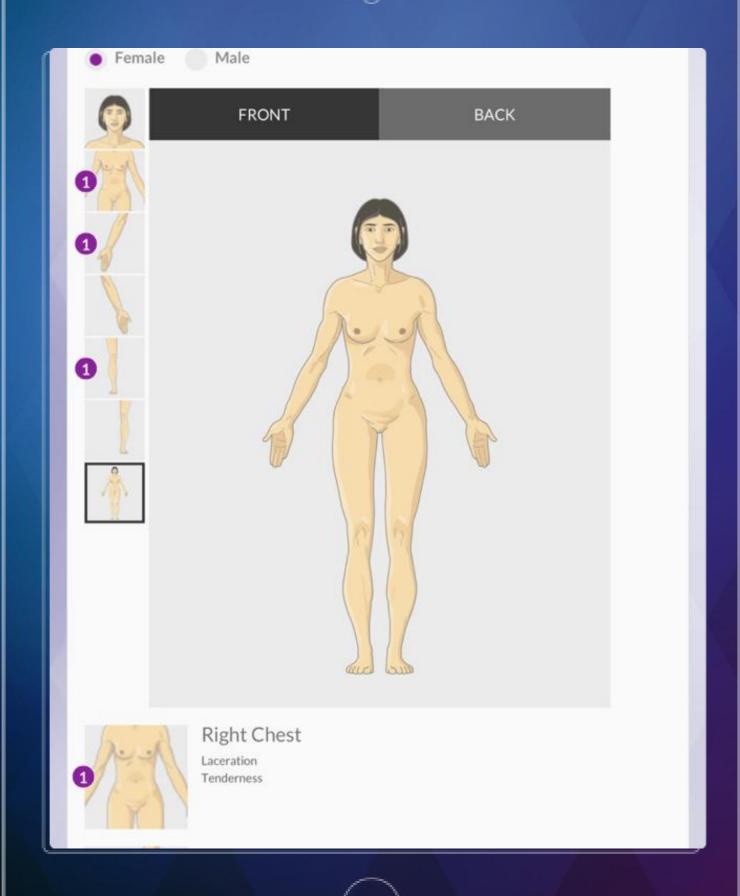
	NEW REPORT	
Hospital		
Submitting Clinic or Hospital: Highland Hospital Department: ER Other:		
Out to me 'the out		
Submitter		
Hillary Larkin dvrr_hosp_1@medreportguard.com License Number: 727276 Discipline: Physicians Assistant		
Provider		
Submitter and Provider Information is the same. If information submitted on behalf of HCP		
First Name: *		
Last Name:*		
Email:*		

	NEW REPORT
Location of Incident	
Location:* Choose V	
City:*	
County:*	
Alameda	
Jurisdiction:* Choose V	
Enforcement Information	
Agency Contacted:* Alameda County Sherriff	
Dispatch Number:*	
5106677721	
Officer Name:	
Case # (if available):	











Consent for Photos:

Forensic Photography

The undersigned hereby authorizes Highland Hospital and the treating health care provider to photograph or permit other persons in the employ of this facility to photograph Julianna Jenkins MR# 54)457457 while under the care of this facility, and Julianna Jenkins agrees that the images may be stored in their medical record, so that they may be used later of evidence. These images will be released only to police or to the prosecutor when the undersigned gives permission to release medical records or in case of court order. The undersigned does not authorize any other use of these photographs.

Photography for Treatment/ Study/ Education/ Research/ Observation

I hereby consent to be photographed while receiving treatment at Highland Hospital. The term "photograph" includes video or still photography, in digital or any other format, and any other means of recording or reproducing images.

I hereby authorize the use of the photograph(s) for the following purposes only: for medical study, education, research observation and other medical purposes.

Check One:

- Authorize Forensic Only
- Authorize Forensic and Other Purposes
- Authorize Other Purposes Only
- Do Not Authorize

Patient Signature, Date:

Type Name

My initials and/or typed name have the same full force and effect as a written signature.

Witness Signature, Date:

Type Name

My initials and/or typed name have the same full force and effect as a written signature.

ADD PHOTOS

photograph or permit other persons in the employ of this facility to photograph Julianna Jenkins MR# 54)457457 while under the care of this facility, and Julianna Jenkins agrees that the images may be stored in their medical record, so that they may be used later of evidence. These images will be released only to police or to the prosecutor when the undersigned gives permission to release medical records or in case of court order. The undersigned does not authorize any other use of these photographs.

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Check One:

Authorize Forensic Only

Authorize Forensic and Other Purposes

Authorize Other Purposes Only

Do Not Authorize

Patient Signature, Date:

Jenkins 2014-01-15

My initials and/or typed name have the same full force and effect as a written signature.

Witness Signature, Date:

Hlarkin 2014-01-15

My initials and/or typed name have the same full force and effect as a written signature,

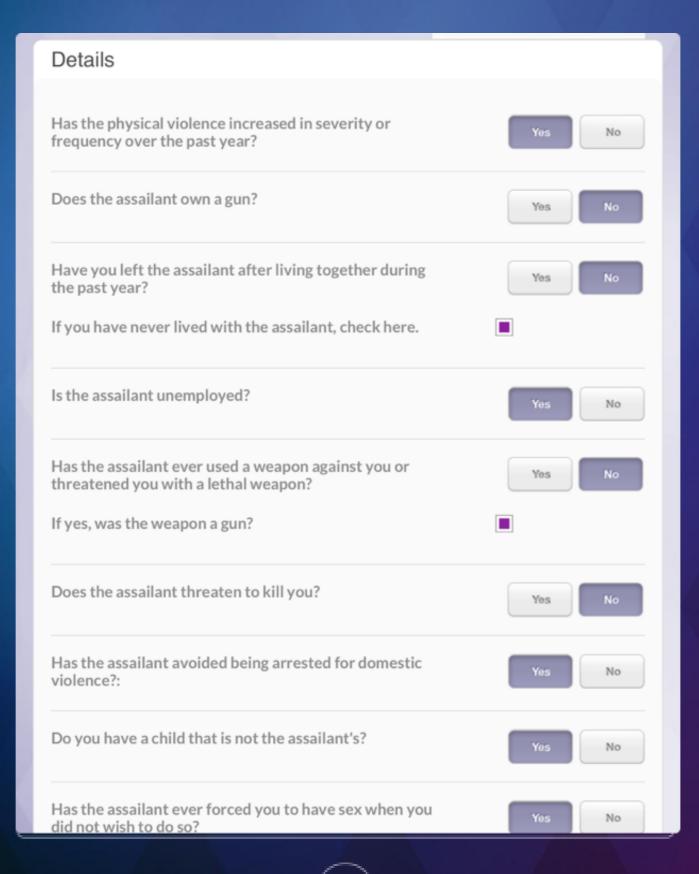
ADD PHOTOS

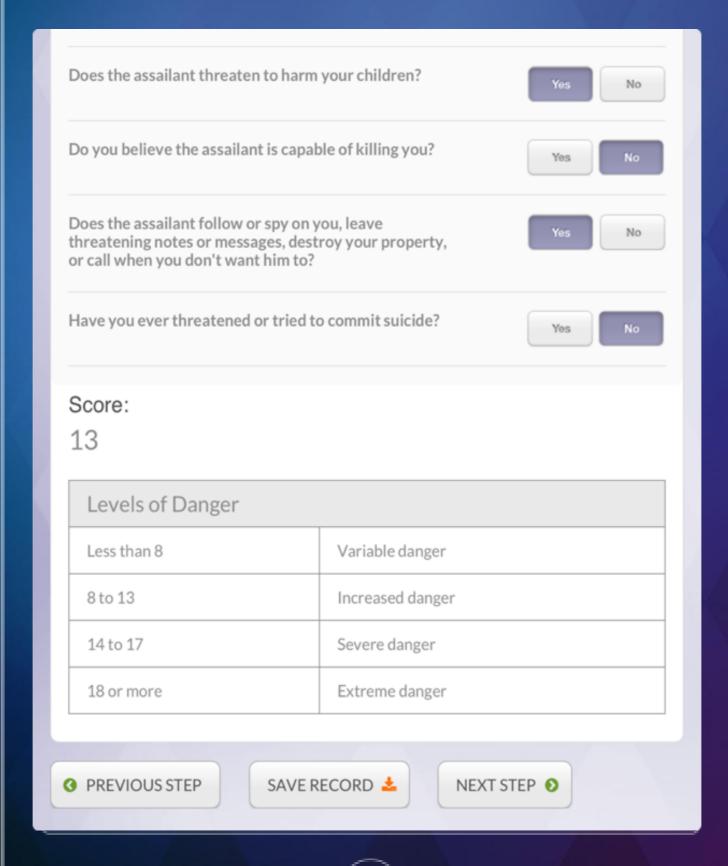




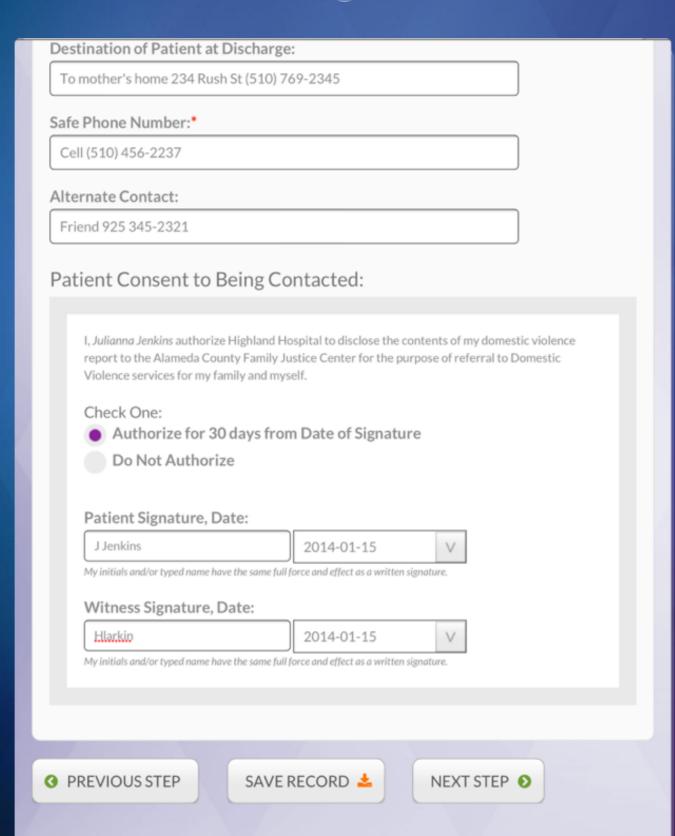


Assailant Information Not Available
First Name:
Guy
Last Name:
Gofers
Date of Birth: Age: 1983-06-23
Gender: Male Female
Relationship to Victim: Choose V
Current Whereabouts: Unknown
Fled the scene before police arrived.
● PREVIOUS STEP SAVE RECORD ♣ NEXT STEP ●





Details
Social Service or DV advocate present in the ED: • Yes No N/A
Agency:
Highland crisis advocacy team
Danger Assessment Score:
Current Restraining Order:
Yes No Unknown
Destination of Patient at Discharge:
To mother's home 234 Rush St (510) 769-2345
Safe Phone Number:*
Cell (510) 456-2237
Alternate Contact:
Friend 925 345-2321
Patient Consent to Being Contacted: I, Julianna Jenkins authorize Highland Hospital to disclose the contents of my domestic violence report to the Alameda County Family Justice Center for the purpose of referral to Domestic Violence services for my family and myself. Check One: Authorize for 30 days from Date of Signature
Do Not Authorize



~	Law Enforcement
~	Victim Information
~	Injury Assessment
~	Danger Assessment
~	Assailant Information
~	Discharge Safety Planning

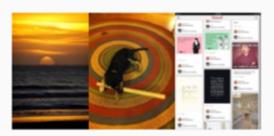
Photo Consent

Forensic and Other

FJC Consent

Yes

Photos:



Transmission Details:

Law Enforcement Agency: Oakland PD

District Attorney:

Alameda County

Final Report Format

HIGHLAND HOSPITAL

1411 East 31st, Oakland CA

Alameda County Medical Center Highland Campus -Fairmont Campus - John George Psychiatric Pavilion -Ambulatory Healthcare Services

MEDICAL RECORD NUMBER:

1234554)457457

PATIENT NAME:

Julianna Jenkins

DATE OF BIRTH:

1979-11-22

GENDER: **Female**

DOMESTIC VIOLENCE INJURY DOCUMENTATION / RISK ASSESSMENT

DATE OF INJURY:

2014-01-15 - 08:45:00

PRIMARY LANGUAGE:

English

Yes

DESTINATION OF PATIENT AT DISCHARGE:

To Mother's Home 234 Rush St (510) 769-2345

SOCIAL SERVICE/DV ADVOCATE

NAME:

SAFE PHONE NUMBER:

ALTERNATE CONTACT:

IF YES,

AGENCY PRESENT:

Hillary Larkin

Cell (510) 456-2237

Friend 925 345-2321 **Highland Crisis**

Advocacy Team

VICTIM INFO

VICTIM PREGNANT: No CHILDREN IN THE HOME: Male / 4 CHILDREN Female / 2

DANGER ASSESSMENT

Levels of Danger

LESS THAN 8: Variable danger 8 TO 13: Increased danger 14 TO 17 Severe danger

18 OR MORE Extreme danger

CIRCUMSTANCES OF ASSAULT AND CHIEF COMPLAINT: Altercation With Bf About Outfit. Hit I Face And Strangled

OTHER MEDICAL/ASSAULT HISTORY:

ALLEGED ASSAILANT INFO

NAME: **Guy Gofers** 30

AGE: GENDER:

RELATIONSHIP TO

VICTIM:

CURRENT WHEREABOUTS: Fled The Scene Before Police Arrived.

RESTRAINING ORDER:

1983-06-23



Follow up is everything for providers

Would it make it worth the extra 10 mins if you got this email telling you that your patient was receiving DV services?

FW: DVRR- June 24, 2014 at 12:54 PM Inbox – Yahoo!
From: Elias-Flores , Karla, FJC [mailto:Karla.Elias-Flores@acgov.org] Sent: Monday, June 23, 2014 5:02 PM To: Scott-Meyer, Patricia Cc: EM Forensics Subject: DVRR- Glenda Nunez
Good Afternoon Dr. Meyer,
Thank you for referring to the FJC on 6/23/2014. We wanted to let you know that we were able to reach her and she is receiving services.
Please let us know if you have any questions.
Thank you,
Karla Elias-Flores Sexual Assault Navigator Alameda County Family Justice Center Karla.Elias-Flores@acgov.org Office: 510-267-8865 Fax: 510-267-8809 QIC: 25001
NOTICE: If you are not the intended recipient of this e-mail, you are prohibited from sharing, copying, or other otherwise using or disclosing its contents. This e-mail and any attachments may contain information that is privileged, confidential or exempt from disclosure under applicable law and only for use by the intended recipient(s). If you received this transmission in

applicable law and only for use by the intended recipient(s). If you received this transmission in

Improve the content of the DV report

- Legible
- More complete and forensically relevant information
- ✓ Danger Assessment*
- Attached photo documentation of injury
- Consents for photo and referral signed/witnessed

DVRR Impact on the ACFJC

- 236 Patients consented to referral to ACFJC
 - → 107 pts contacted (45%)
 - → 75 receiving services
 - → 32 reached and declined services
- 126 Patients unable to contact
 - → 50 no answer/ no response to voice message
 - → 5 no voice mail set up/
 - → 15 wrong number
 - 7 disconnected number

Challenge

Partner with Verizon to provide phones

FJC Navigators perspective

- Impacts
 - → Greater client outreach by navigators
 - →Increase number of clients
 - New working relationships with hospitals
 - →Pt more likely come for services even if the decline on first contact
 - Using Danger Assessment for safety planning and getting a better picture of the overall situation.
- Potential for expanded roles
 - → Making direct contact with hospitalized patients

DVRR Impact for LE

- More timely reports
- Significant improvement in the quality of the information provided + pictures
- Better communication between providers & police
- 2014 Charged cases
 - Felony 363/ Misdemeanor 1,562

Stay tuned:

 Thank you to Blue Shield California Foundation for their continued support.

- Contact information
 - hlarkin@alamedahealthsystem.org
 - cherri.allison@acgov.org

QUESTIONS?





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2015 International Family Justice Conference

San Diego April 21-23, 2015



"Health Matters, Hope Heals: What Every Professional Needs to Know About Trauma"



Thank you for joining today's presentation!

Family Justice Center Alliance 707 Broadway, Suite 700 San Diego, CA 92101 888-511-3522 www.familyjusticecenter.com

*Reminder: This presentation will be available for download on the Online Resource Library within 24 hours



Cherri N. Allison, JD

Executive Director Alameda County Family Justice Center Phone: (510) 267-8801 Email: Cherri.Allison@acgov.org

Cherri N. Allison, Esq. is the Executive Director of the Alameda County Family Justice Center (ACFJC). Ms. Allison holds a law degree from the University of Santa Clara, School of Law and a

bachelor's degree from the University of California at Berkeley. Ms. Allison has more than 13 years of legal nonprofit management experience and 19 years of experience in the field of domestic violence prevention and family law. Prior to her tenure at ACFJC, Ms. Allison was the Executive Director of the Family Violence Law Center. In addition to Ms. Allison's expertise in nonprofit management, she has extensive experience in board and organizational development, program development, grant writing and investments. In 2007 and 2009 she co-authored Domestic Violence Remedies in California Law Cases, published by the Continuing Education of the Bar. In 2012 she authored a chapter entitled Traditional Response to Domestic Violence: Criminal and Civil Legal Systems in the United States, published in Violence and Abuse in Society: Understanding a Global Crisis: ABC-CLIO; 2012.

Ms. Allison currently serves on the boards of California Women Lawyers, ACLU of Northern California and is the ACLU-NC National Board representative. She is also a member of the Charles Houston Bar Association and the Alameda County Bar Association, and a member and past board president of the Women Lawyers of Alameda County. She currently serves as a member of the Domestic Violence Program Advisory Council, Office of Emergency Management and she a member of the American Bar Association Commission on Domestic and Sexual Violence as well as the Judicial Council of California Access and Fairness Advisory Committee. In 2011 she was selected to serve on the Judicial Council of California Access and Fairness Advisory Committee.

Throughout her career she has been a pioneer in the domestic violence field. For example, working with the Women's Policy Institute, she drafted legislation that would have prohibited the shackling of incarcerated expectant mothers. Though vetoed by the Governor, this legislation recognized the shackling as a form of violence against incarcerated women – a population with a high percentage of women who have experienced domestic violence. Because of her pioneering work, she was inducted in 2009 into the Alameda County Commission on the Status of Women's Hall of Fame in the Justice category, which honors women

who have reformed and expanded legal advocacy in our justice system and in 2010 she was honored by the Santa Clara Law School Center for Social Justice and Public Service.



Hillary Larkin, BS, PA-C

Midlevel Clinical Coordinator Alameda County Medical Center Phone: (510) 437-8396 h.larkin@sbcglobal.net

Hillary Larkin is a Physician Assistant that has worked in Emergency Medicine for the last 23 years. She trained at the University of Wisconsin, and did post graduate training in Emergency Medicine at Los Angeles County- USC. She began working at Highland Hospital an inner city Level II Trauma Center,

in the Oakland, California in 1989. Her career in Emergency Medicine quickly expanded to include forensic medicine and the treatment of victims of interpersonal violence. Ms Larkin has develop the Sexual Assault Response Team in Alameda County, which now does 250 exam annually with 13 specially trained midlevel practitioners, who are not only providing state of the art care for victims, but are actively involved in research. Ms. Larkin has developed protocols for medical response the DV in the emergency departments across Alameda County in conjunction with the Alameda county Family Justice Center.



National Family Justice Center Alliance Webinar Training

Domestic Violence Report and Referral Project

Cherri Allison, JD Hillary Larkin, BS, PA-C March 25, 2015

Certificate of Attendance

1.5 Hours

Harl Strack Gael Strack, JD

Co-Founder and CEO Family Justice Center Alliance

Natalia Aguirre

Director of Technical Assistance Family Justice Center Alliance

Date of Issue: March 30, 2015