

Domestic Violence Homicide Response Plan: A Toolkit for Domestic Violence Programs



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Table of Contents

Section	Page
A. Introduction	3
B. Creating Our Community Foundation	5
C. Building a Community Response Network	6
D. Needs within Your Program	8
E. Outreach & Support for Victims' Family and Friends	13
F. Legal Considerations	15
G. Working with and Responding to the Media	17
H. Support from Sister Organizations in Wisconsin	18

Introduction

There are many times in working with program directors and advocates that I have been so moved by their passion and commitment to their life's work of ending violence. Perhaps never is this more profoundly evident than when a life has been taken by violence. We know every day it could happen at any time, yet at the same time we know we must always be working diligently to help keep people safe and promote a peaceful life for all.

In the past 16 years, 770 lives have been lost as a result of domestic violence related homicides in Wisconsin. These incidents have taken the lives of women, children, men, family members, friends, co-workers, law enforcement and others in the communities in which they occurred.

Every survivor we work with is a potential domestic violence homicide victim. We know this as we work with them, advocating on their behalf and building relationships with them and often their families. Programs deal with the reality of knowing that a homicide could happen at any time, and yet not allowing this overpower their every move. So when this most tragic violation occurs, the trauma felt by everyone involved is profound. ***This is felt by everyone - no matter the nature of their relationship with the victim.*** The needs of those closest to the victim, the children, family and friends are of utmost importance. In addition, our programs and communities are deeply impacted. A domestic violence homicide can change our organizations and communities forever.

During this time of crisis domestic violence and dual (providing services for victims of domestic and sexual violence) programs are asked to fulfill a variety of roles, and at the same time are often dealing with their own sense of loss. A most important part of responding and coping with these events is to realize there is no single "right" answer in how to respond. Each of these tragedies is as unique as the human being whose life was taken. More often than not sexual violence has occurred and is another layer of tragedy that has led to the violent end. In many communities there are cultural, faith and other considerations that need to be acknowledged, respected and addressed.

END ABUSE's Homicide Response Workgroup was comprised of Executive Directors from domestic violence and dual programs who came together as a result of experiencing and responding to domestic violence homicides in their own communities. Our objective with this document is to ***provide a framework for programs and their communities to develop a plan*** that will provide guidance in responding to a domestic violence homicide, ***whether the victim had been a client or not.*** We hope to assist communities in responding in a supportive and collaborative manner that encourages the further growth of their commitment to working together to end violence.

We have attempted to include information that will assist programs in:

- proactively collaborating with partners to create a community wide response before it is needed
- addressing immediate concrete issues upon the occurrence of a domestic violence homicide
- responding to needs of those most directly affected
- providing supportive attention to all involved in the response
- developing ongoing follow-up support practices for all those in need

As a workgroup, our conversations were complicated, painful, and comforting all at the same time. We spoke of the trauma felt by so many in so many different ways. We recognize and honor the myriad of feelings experienced at the time of, and for months and years after the event, in the many lives that are touched by a domestic violence homicide.

Thank you to all those in our workgroup who came together and shared your experiences and so honestly shared your feelings. Your belief in and commitment to supporting others in this movement is so inspiring. We acknowledge each of you and your dedication to this work: Staff and Board of American Indians Against Abuse, Kelly Burger, Center Against Sexual and Domestic Abuse, Superior; May Tong Chang, Hmong American Women's Association, Milwaukee; Cherie Griffin, Women's Resource Center, Racine; Shellie Holmes, Tri County Council on Domestic and Sexual Abuse, Rhinelander; Jane Graham Jennings, The Women's Community, Wausau and Beth Schnorr, Harbor House, Appleton.

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A. Creating Our Community Foundation

Recognizing and accepting the reality that your community can experience a domestic violence homicide allows you to work with others to build a solid foundation for response. Working with others in your community provides opportunities to examine and thoughtfully process through the possibilities of what will work best for everyone. Building these relationships prior to a crisis is of utmost importance. All organizations working together from a victim centered perspective allows your community to establish the foundation and spirit with which your response will be handled.

If a Coordinated Community Response Team (CCRT) exists, the development of a plan, along with ongoing discussion around domestic violence homicide response needs to be built into the agenda on a regular basis. Outreach to invite those from all populations to join is the CCRT of utmost importance. If an active CCRT doesn't exist, this is an opportunity to reach out and bring a wide variety of organizations/departments together to work on this very important issue. If your community has not experienced a recent homicide, the END ABUSE Annual Domestic Violence Homicide Report provides a starting point for the discussion. In either instance, regular ongoing communication among all members on this issue is critical to maintaining a consistent community response.

Ideally, relationships between your CCR and the cultural leaders in your community have already been established. If this is not the case, the development of a response plan can provide an opportunity for these parties to begin building genuine and lasting relationships. Connections can be created that will enhance and broaden the scope of outreach for all in your community.

To understand homicide implications upon cultural groups, educate your program and your community partners on the cultural practices about death, funerals, "passing-on" ceremonies, etc. It is *critical* to understand and respect cultural traditions such as: the length of time within which a funeral must occur, rituals and ceremonies that are necessary parts of the mourning process, the importance of the family's role in how you proceed, etc.

Exploring and defining roles as a caring community prior to a homicide can solidify everyone's understanding of and commitment to a respectful response that honors the victim as a whole person.

Your goals in building a thoughtful, informed community response may include:

- Building new and solidifying existing relationships that will promote a respectful and appropriate response to a domestic violence homicide in your community
- Reaching out and building relationships with cultural community leaders
- Creating a plan for immediate response to the event, along with a more long term process of follow up and support
- Developing ongoing community education

B. Building a Community Response Network

1. Identify appropriate community leaders to come together and develop a response network. Start first with your Coordinated Community Response Team (CCRT). If there is a Sexual Assault Response Team (SART) in your community you may wish to invite its members. Many communities have widened the scope of their CCRT and SART's, and may already include some of the individuals listed below:

- School representatives
- Health care representatives
- Disability organizations
- Clergy
- Probation and Parole
- Law Enforcement
- Department of Social Services - County Department on Aging
- SANE Nurses

As previously noted, connecting with cultural community leaders is extremely important. These connections provide an invaluable link to populations who may not be accessing the traditional systems and institutions. Cultural community leaders may be found in:

- Organizations serving specific populations
- Community Centers
- Community advocates
- Church leaders
- Interpreters
- LGBTQ Groups
- Business leaders from underserved populations

2. Invite this larger group of individuals to meet. Whenever possible, identify an ally and engage them to work with you to organize the meeting.
3. At your first gathering, in addition to identifying goals for your group, clarifying and agreeing on values that will guide your work together is important. We have provided an exercise: Developing Operating Values for DV Homicide Response Plan. (**Appendix A**)
4. Identify needs and goals for your community homicide response plan. You may want to contact another director from a DV program in your area that has done this for ideas and information to share with the group. In situations involving specific cultural groups, advocates/individuals from this population can assist with information and guidance about proceeding in a culturally sensitive manner. Again, this is a time when you may want to contact a nearby program for assistance. Often when community members feel they are part of a statewide effort and others have worked on this also, it encourages them to participate

and move the project forward. You may want to use the goals identified earlier in this section to begin your discussion.

More concrete and practical goals of your response plan may include, but are not limited to:

- a. Who and how to contact each other when initial event occurs
- b. Identifying the roles of each partner
- c. Assigning specific tasks to each partner
- d. Developing specific ways to contact each other, come together when needed and proceed in a victim centered manner dependent on each unique situation
- e. Identifying ways as a group to publicly honor victim
- f. Present your condolences to the families involved
- g. Develop a plan to address and support needs of community group members after a homicide

We suggest participating together in the Exercise: Developing Community-Wide DV Homicide Response Plan. This will guide you all through the steps in developing a plan to guide everyone when a DV homicide has occurred. (**Appendix B**)

Whether this focused work together is done as part of your ongoing CCRT meetings or a new group is created, the plan for working together as a community to respectfully handle these incidents is of utmost importance. By developing this plan together each organization/department will have a well thought-out policy and procedure that defines their role, and will be knowledgeable of how that role impacts each of the other groups, and the importance of working together in a consistent and respectful manner.

If this is a part of your ongoing CCRT work, make sure that it is revisited on a regular basis, possibly twice a year. If not, it is very important to maintain regular communication within the whole group. Emails relevant to DV/DV homicides are one way to stay in touch, along with at least an annual gathering to keep communication open and introduce and incorporate all new members into the group. This meeting should be a part of welcoming and orienting each new member that joins the group.

C. Needs within Your Program

In addition to working with your community partners, proactive planning throughout your organization is critical. This planning process can solidify your response to these crises, in addition to strengthening relationships throughout the organization. Again, it is important to always remember that each situation is unique and there is not one “right” way to handle these tragedies. The communication and support that grows by developing an organization plan increases everyone’s sense of confidence in responding.

Recognize and acknowledge the traumatic impact of a domestic violence homicide on everyone involved. Together, work to provide opportunities for thoughtful conversations at staff meetings on an ongoing basis. Include this discussion in your volunteer training sessions. Solicit ideas from everyone on what they feel needs to be discussed and included in the planning.

Ideas for working within your organization to prepare a consistent, thoughtful and supportive response to a DV Homicide:

1. Identify a staff member (1 or 2) to partner with the Executive Director, forming an internal team to work together in response to a DV homicide.
2. Introduce the completed community response plan to the entire staff, as well as volunteers and the board. Thoroughly discuss and solicit questions and comments from all.
3. Involve staff in developing your organizational plan. Utilize the items on the following pages to create a plan that works for your program.
4. Provide opportunities for staff, volunteers and board members to learn about different cultural practices in relation to death.
5. Include discussion on your organizational and the community response plan in all staff and volunteer trainings.
6. Have ongoing conversations with all staff addressing not only the “to do” things, but also the realities of these situations and the effects on your activities and community. Again, seek input from staff and volunteers on a plan to support them when these incidents occur.
7. Seek input and ideas from your clients via support groups and/or your advisory committee on what they feel is important to address and consider.

8. Be clear in identifying each person's role, especially around responses and messages to the community and the media.
9. Develop a "Help Sheet" for responding to calls for information regarding a DV homicide:

Media:

- a. Identify who within the organization should be contacted to respond to the call and/or inquiry.
- b. Put together a "script" for staff or volunteers answering the phones. In addition to your agency "Cannot confirm or deny" statement, an example would be:

"All questions and concerns regarding this situation are being handled by our Executive Director. I can take a message and your phone number and they can get back to you."

- c. Have current contact information for staff who may need to be reached on the "Help Sheet".
- d. Refer to **Appendix C** for information and support in working with the media.

Internal Plan of Action:

A.) Immediate to do list:

1. Contact END ABUSE for support at any time.
2. As soon as possible, the Executive Director and identified staff person(s) meet.
3. Create a checklist of what to do and who is responsible.
4. What is the immediate "need to know" information?
5. Review the facts: what you know and what you don't know; what do you need to know that you don't? How can you get the information that you don't have?
6. Contact your community response team members and identify direction to move in.
7. Are there children we are familiar with and how can we support them? Other family members, friends, neighbors...anyone in the victim's support network?
8. Notify staff, board & volunteers: Discuss what information needs to be given to whom at this time and how that will be done.
9. Updates at regular scheduled time for all staff/volunteers.
(i.e., at one program, everyone working met in office at 1:00 pm each day)
10. Will a vigil or memorial be held, and if so who will arrange? Is the family comfortable with this and how do they want to be involved?

B.) Attend to the needs of existing clients:

1. What is on schedule for today/next few days?
2. Is staff able to carry through on their scheduled activities? Who can follow through on identifying others who can cover for those needing time, or involved with another activity?
3. Do we need to call in volunteers? Who will do that?
4. Are there individuals who you work/have worked with that may be especially impacted by the news? Identify someone that they are comfortable with to contact them.
5. Do we need to call in support from another DV program in the area? Who will do that?
6. Does anything need to be cancelled or rescheduled? Who can handle that?
7. Do we need to provide time for people to come together? In what way?
8. What have you learned from the clients as to their needs? How do you best keep in touch with them and who is responsible?
9. Will anyone be attending the funeral(s) and how can we support them?
10. What role would they like to play if a vigil or memorial is being held?

Supporting survivors you are working with or have worked with after a DV homicide is an ongoing process. Each person's needs will be unique to their life experience, and the level of trauma they are feeling. There are times when someone isn't able to call for months and when they do we need to be there to help them process through their feelings. As an organization, we must be there to support and assist each person, whenever it is needed.

Resources for supporting individuals experiencing trauma are attached. ([Appendix D](#))

C.) Attend to the needs of staff and volunteers:

How and when to offer support to those in your organizations can vary for each person and each incident. This is an important time to emphasize that there is a wide range of individual responses to trauma; there is no "right" way to react to a domestic violence homicide. It is important for those in your program as well as the members of the Community Network to process through the experience together at some time. Go back to the plan developed by your community group and the resources that exist for support locally.

Meet with staff and discuss their needs and wishes around what support they need. Have discussions together looking at how and when to meet for processing and support; do they want to bring in someone from outside? When talking as a staff, encourage everyone to be honest as to when they feel they may want to process together. Most programs find it beneficial to have time together soon after, allowing for each person to participate as they wish and feel able. They also recognize the need to gather at a later time. Discuss how we can monitor these needs on more long term basis.

Staff and volunteers often question themselves and their work – “What could they have done that may have prevented this homicide? How could this happen when we work so hard?” etc. Other times they are overcome by feelings of hopelessness, frustration, anger and sadness. Advocates may speak of feeling numb and only later are able to experience and express their feelings. For some, a homicide brings the realization that this is not the work for them and they chose to move on.

“It is a profoundly moving experience to sit with staff members as they express their feelings after the loss of a victim of domestic violence.”

It is important for the program to recognize and acknowledge the enormous impact this tragedy has on the entire organization and the reality for many that things are forever changed. All staff can provide a supportive environment by continuing to check in with each other, openly discussing and offering support to people, as appropriate to their need.

For directors experiencing a DV homicide, this is a time to reach out to other program directors for support and assistance. This is a time when a director can feel the overwhelming responsibility of taking care of everyone else.

“I didn’t realize how deeply it affected me personally as I was so busy worrying about everyone else. It was not until several months after the death that I was consumed by the hurt and frustration.”

Often, along with END ABUSE, other programs will contact you to offer assistance. Ask for what you need and when unsure, ask for help in processing through what is happening. It is very common at these times to not even know what you need, but Directors are always there to listen and help problem solve. Know that you can contact them and others as things arise. One program director, who heard of a homicide in a nearby county, immediately contacted that program and was able to send a staff person to cover their crisis/phone lines for the day. This was an enormous help and allowed them time to identify their needs and make arrangements for the next few days.

Initially, during the community preparation time, keep in touch with other directors for ideas of what they are doing to prepare in their county. We encourage discussions at regional director meetings on this topic.

END ABUSE can work with organizations on a number of levels, including:

- identifying what needs to be done immediately
- addressing legal issues that may be involved
- working with media
- providing resources for working with marginalized populations
- finding support in surrounding programs

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- meeting with staff and volunteers to process
- supporting you on an ongoing basis

Resources are also often available in your community, such as mental health therapists, an Employee Assistance Program, etc. Whether or not the program has access to such resources in their community, reaching out to END ABUSE and surrounding DV programs is an important step in healing.

Again, it is most important to have open, ongoing discussions together with staff and others involved around their needs and wishes for support, immediately following the incident and continuing as you all work together.

D. Outreach & Support for Victims' Family & Friends

When your community experiences a DV homicide, whether the victim is/was a client or not, it is important to thoughtfully define your role and level of involvement, especially with surviving family, friends, co-workers and anyone of significance in the victim's life. This is often most dependent on the feeling of the survivors and their openness to your support.

Outreach and Support Family/Friends and others:

1. Was the victim a current or past client?
2. Does the family acknowledge this as a DV homicide?
3. What about the family of the alleged perpetrator?
4. Are there community resources, or can our organization offer supportive counseling to family/friends of DV homicide victims?
5. How can we assist them in having their voices heard/telling the victim's story?

This is where your established community response plan can benefit all involved. If the victim was not a client or if they were but their family was not supportive/engaged with your program you may be able to let other organizations know of your willingness to offer support. Is it possible for that organization to let the family/friends know you want to offer your support and any assistance they may need? The type and degree of involvement during this time is dependent on family & friends' feelings about the incident, and the trauma that they are experiencing.

Immediately following a DV homicide you will want to explore areas in which you can provide support to the families and friends. As mentioned previously programs often hold vigils, organize memorials, attend funerals, etc. The degree of involvement of family and friends in these events can vary greatly, but if you are working with them, look to them at each step of your planning to ensure that the family/friends are comfortable with what is being planned, and determine the degree to which they want to be involved.

When and if a relationship is established with the family and/or friends, keep in touch with them. Send cards to them and if they are going to acknowledge the anniversary of the death, ask how you may be a part of the event. Allow staff to attend and participate as requested.

In many cultures, there are especially specific traditions that are observed, as well as additional circumstances to be considered for each family and their community. For example, if the victim is an immigrant, an issue may involve the family needing to send the body abroad. Does the embassy need to be contacted for assistance? What are the legal issues the family may need to address? Bilingual advocates in your program, or in nearby programs, as well as members of that cultural or immigrant community are excellent resources – ask, ask, ask.

If the victim belonged to a specific cultural community with which you are not familiar, do not hesitate to reach out to local culturally specific groups. Additionally there are statewide resources such as UNIDOS Against Domestic Violence, American Indians Against Abuse and the Refugee Family Strengthening Project that can provide support. END ABUSE is available to assist you in making connections. Reaching out to those in the victim's cultural community is essential at this time. The relationships you have built throughout your community can be a tremendous resource.

At a later time advocates have gone to court with the family during the trial, gone when the family couldn't and then met with them, they have advocated for them with the legal system and other systems involved, etc. Programs have also spent time with the victim's co-workers, individually and as a group. Your program may want to offer to meet with individuals or a number of family/friends as they process through what has happened.

E. Legal Considerations

At the time of the death of a client, legal issues arise that must be addressed. In the aftermath of the homicide, you must immediately focus on these legal issues to protect the privacy and the legacy of the deceased victim as well as your agency. Your involvement with and consideration of the legal system may vary greatly depending on the circumstances of the death. The death of a shelter resident adds a level of complexity to the agency's legal responsibilities. While the specifics of the situation will largely impact what legal ramifications an agency must consider, there are several general issues that may arise. Agencies need to create policies to address the legal issues associated with the death of a client, being mindful of any federal and state laws that govern such actions.

It is a good idea to review your intake and determine if there is some of this information that could be obtained through that process. Refer to END ABUSE's Sample Intake Form (**Appendix E**).

Law Enforcement Involvement

- If the client died while physically in the shelter, emergency responders will be called to remove the body. Inviting law enforcement onto the shelter premises raises several issues:
 - What areas will law enforcement want access to? How will you respond?
 - How much information can/will you give law enforcement about the deceased resident?
 - How can you restrict law enforcement's interaction with other shelter clients to uphold confidentiality and non-disclosure requirements?
 - Law enforcement may want to interview other residents that were in shelter at the time of the death
 - What will you do if law enforcement wants to search other residents' rooms?
- If the client was a shelter resident but did not die on the premises, law enforcement may still attempt to gather information from the premises, through an informal request or a search warrant. How will you respond to this request?
- Is there an existing release of information that pertains to law enforcement? If so, what information is covered by that release?

Client's Possessions

- Do you have a policy for disposal of a client's property in the event of death?
- How much information can you give the individual designated to collect a deceased client's belongings?
- Do you have a policy for responding to requests for collection of possessions as evidence in the course of a law enforcement investigation?
- Do you have a policy for responding to mail that you may receive for a deceased client?

Media Involvement

- What information can be given to the media?
- Sample script for working with the media is available from END ABUSE
- Is there any way to restrict information other residents may give to the media?

Confidentiality

- What does the “Exceptions to Confidentiality” form that the resident signed when they began working with your agency include?
 - Common exception includes death of client – if so, confidentiality has been waived upon the client’s death
 - Did the client sign a Release of Information? Does the form address what happens in the event that the client is deceased and a third party is requesting information?
 - Common provisions include:
 - Whether information may be released upon the client’s death
 - To whom information may be released upon death (such as to press, police detectives, family members, spouse’s family, etc.)
 - Whether the release is for any purpose or for limited purposes only (criminal investigation, etc.)

Advocate-client Privilege

- Advocate-client privilege survives death of client
- Using attorney-client privilege case law analysis as a guide, an advocate can assert advocate-client privilege after the death of a client. This would become relevant if the advocate were to be subpoenaed after the death of a client regarding the client’s work with an agency.
- See, *Swidler v. Berlin and James Hamilton v. United States*, 524 U.S. 399, 118 S. Ct. 2081(1998).

Non-Disclosure

- The provisions of non-disclosure will not be an issue regarding the deceased client themselves, but may be relevant for the deceased client’s children, family members and other shelter/program clients
- Wisconsin non-disclosure law (Wis. Stat. Sec. 995.67) prevents the disclosure of the location of past and present clients OR their minor children without the express written consent of the client.

F. Working with and Responding to the Media

This is a time when the media can be of great influence on the community, in either a positive or a negative way. While our interactions with them at this time are very important, we have to also be especially thoughtful around the media. Identify specifically who in your organization will be handling any media inquiries. Remember to relax, take a breath and talk with someone else before responding if you are feeling at all unsure or uncomfortable. This may be the time that you want to contact either another domestic violence/dual program director or someone from your Community DV Homicide Response Network. They could provide good support in talking through questions that are coming up along with responses. Take the time you need and call them back if necessary.

Media Considerations:

- What is your relationship with your local media, including any culturally specific media?
- Do you have contacts in your area that you can work with to ensure accuracy?
- Does your organization have a policy and procedure for handling media inquiries?
- Is there a clear message that those answering calls have at hand to use in responding to an inquiry?
- Depending on the situation, is this an appropriate time to reach to community via newspaper, radio or television?

If a DV homicide in another community is being covered in your media, this is an opportunity to discuss throughout your organization and with your Community DV Homicide Response Network. Encourage discussion at staff meetings, board meetings and with those on the Response Team.

For further information, please refer to Appendix C. This addresses working with the media, and includes information on:

- General Talking Points
- Basic Background
- DV Homicide
- Talking Points for Specific Scenarios
- Terminology

G. Support from Sister Organizations in Wisconsin

The culture of programs throughout Wisconsin is one of networking, supporting and reaching out to each other in times of need. When a DV homicide occurs in Wisconsin, everyone involved in this work thinks of the program in that county or tribal area and what they must be experiencing. While END ABUSE reaches out to each program as soon as we hear of a DV homicide it is equally important that programs in the same region are in contact.

The time to develop a community plan is *prior to the homicide*. It is better to have a plan for a crisis that never occurs than to try to develop it while you are in the midst of the crisis. During the process of building your plan within your community, be sure to keep in touch with other directors for ideas of what is happening in their area. We encourage discussions at regional director meetings on this topic, and will continue to work with programs to develop ways to best handle these very complex events.

Ways for WI Programs to reach out and support each other following a DV homicide:

1. Sending cards/emails expressing your concern and support
2. Share readings, poems, etc. expressing your caring and respect
3. Statewide display of lanterns, purple flags, or other symbolic gesture
4. Honor the victim at your support groups through moment of silence
5. Have discussion about it at your staff meetings
6. Acknowledge and inform your Board at the next meeting

Conclusion

In conclusion, our workgroup found that as we worked through the tragedy of a homicide, complicated layers of practical concerns as well as emotions needed to be shared. At times it seemed endless. As our workgroup discussed one concern, another would emerge, and we all felt this was reflective of the experience of programs at this time of crisis. Each is important and needs to be discussed openly during this extremely sensitive time.

We recognize that this document reflects ongoing work in our programs and our communities to build a solid foundation for response. We look forward to deepening our understanding of how to best support the survivors of these tragedies.

Appendix A

Exercise: Developing Values for Our DV Homicide Response Plan

Introduction - Facilitator: Begin by asking the group: What does the word “value” mean to you? What do think of when you hear that word?

- Allow a short time for discussion – recording their responses on a flip chart. This is important to establish a tone for your work together.

Facilitator: Values represent an individual/organization’s highest priorities and deeply held driving forces; they define how you do your work together.

- A. Facilitator asks participants to individually take a few minutes to write down the values that each feels are important in working together in response to a DV Homicide in your community.
 - Come up with 5 – 7 and take time to really think about these (give them 5 minutes or so)
- B. Have people get into small groups with 3-4 people (depending on the size of the group) and discuss their lists. Discuss what each of them wrote down; which ones are similar and which ones are different.
 - Ask each group, to come up with 3 values that they feel most strongly about and write them down on a ½ sheet of paper (one on each piece of paper). Ask them to write big and keep it short.
 - Collect ½ sheets of paper and have each small group read their values as the Facilitator puts them on the wall/sticky wall.
- C. Repeat process. Facilitator asks each small group to agree among themselves on the remaining ones that they want on the wall/sticky wall, that are different ideas than ones that are already on the wall. Facilitator collects them and puts on the wall/sticky wall.
- D. Ask: Are there any remaining ideas that you feel are important that didn’t get up on the wall? If so, add to the wall as the group requests.
- E. Ask: “Which ones belong together?”
 - Move ½ sheets around to form the groupings as directed by the large group.

Appendix A

Exercise: Developing Values for Our DV Homicide Response Plan

- F. Depending on the number of groups formed, divide the large group into the same number of small groups – 3-4 people in each.

Facilitator: Explains what value statements are. Value Statements define how people want to carry out their business and how they will work together. They are statements about how the group will value those they serve, those providing services and their community as a whole. Value statements describe actions that are the living enactment of the fundamental values that guide the groups work together.

- A. Facilitator gives each small group one of the headings and the list of values that are below it.
- B. Ask them to work together to develop a Value Statement that reflects the grouping.
- C. Small groups each write that statement on a half sheet of paper.
- D. Someone from each group will read their statement to the larger group as they put it on the wall.

Facilitator – (In Closing):

- How do people feel about these statements?
- Do you feel that they reflect the values of this group and will support our work together?
- How will we ensure that our values are upheld?

Appendix B

Exercise: Developing Community-Wide DV Homicide Response Plan

Introduction - Facilitator: As we work together to develop a homicide response plan, let's take a few minutes to think about and ask ourselves, "If a tragedy happened to me or my family, how would I want to be treated, what would be helpful to me, what would I want others to say or do?"

- A. Begin by reviewing agreed upon values to guide your community's plan.
- B. Break into small groups of 3 or 4 people. Each group is given a scenario and half sheets of paper to be used later to share their ideas.
- C. In each small group identify a recorder to take notes and a reporter to share your plan with the larger group.
- D. Read through your scenario individually, and then discuss with other members of your small group what you feel are important components of a community response to this situation.

Possible things to consider:

- What is in place now when a DV homicide occurs?
 - Who is notified? (both agencies/organizations, and specific people within those organizations)
 - Do we convey a unified and consistent message across the community about the nature of these homicides when approached by media?
 - Who takes the lead on communicating with surviving friends/family to coordinate a vigil?
 - How do we support ourselves, each other, staff within our organizations and our clients in the aftermath of a DV homicide?
 - What are some steps/actions that could be included/would assist/benefit in handling a DV homicide?
 - Who else in your organization needs to be involved and/or familiar with this plan when it is developed?
- E. In your small group, identify components of the plan that you each feel are important. Write these on half sheets of paper. Write large and be brief (there will be time for explanation if necessary).
 - F. Come back together as a large group. Reporters share what each group came up with in their discussion and place the ½ sheets on the wall/sticky wall so that all can see.

1 of 3

Appendix B

Exercise: Developing Community-Wide DV Homicide Response Plan

- G. The reporters from both groups work to place similar ideas together into groupings. It is important to involve the group in any clarifying of the ideas, and to keep the group involved in discussion of where things belong, often asking “Where do you see associations or similarities amongst these ideas?”
- H. When all ideas are on the wall, have group take time to silently look over. Ask – “Are there any that didn’t get up on the wall?” Add these in the appropriate grouping.
- I. The facilitator and/or identified member of the group takes notes throughout the exercise and compiles all of the ideas shared and overarching themes identified in one document and distributes to all for review prior to your next meeting.
- J. Members of the group should discuss the plan with key individuals in their organizations/departments, in preparation for your next meeting and final development of the plan.
- K. At the next meeting, discuss and agree upon a plan.

Remember:

- There will be many possible approaches identified – keep an open mind.
- Discuss any additional community partners that should be included that aren’t currently.
- It is important to have inclusive, critical thinking discussions with individuals representing a wide variety of perspectives.

Facilitator and/or designated member of the group should type up the plan and distribute it to all.

- L. Meet together with the final document and “walk through” the plan.
- M. Be sure all members of the group commit to taking the final plan to their organizations, incorporating it into their own homicide response policies.

Appendix B

Exercise: Developing Community-Wide DV Homicide Response Plan

Homicide Response Scenarios

Homicide Response Scenario #1

A 27 year old Hmong woman has been murdered. Her three children, ages nine, six and four, were present at the time of the murder. Her 35 year old husband has been arrested, and the children are now living with his family. Her husband's family claims that the victim had a boyfriend, and consequently, her own clan is refusing to hold a funeral and burial. In Hmong culture, rituals related to death are very important because without the necessary rituals, the soul of the deceased will roam for eternity.

The victim was a member of a support group at Haven House, the local domestic violence program. Several support group members and a few of the Haven House staff knew her well. In addition to their distress about her death, those who knew her are worried about her children and about the absence of a funeral.

Homicide Response Scenario #2

A 19 year old woman has been murdered, apparently by a 26 year old man who killed himself two days later. There has been a great deal of press coverage of the deaths and the manhunt that occurred in the two days between them. The local newspaper reports that the woman had been arrested previously for prostitution and possession of a controlled substance. Press coverage has not attributed the murder to domestic violence, and the police have stated that they cannot determine a motive for the murder.

A woman who attends support group at Haven House (the local domestic violence program) was friends with the victim. She reports that her friend and the dead man were a couple, and that he was the victim's pimp. The friend is very distressed. She has reached out to the victim's family, but they have not responded.

Appendix C

Media Response to Domestic Violence Homicide

This resource offers some essential talking points for local domestic violence programs that could be used when speaking to reporters in the wake of a domestic violence homicide. They are designed to facilitate a rapid response and to help shape better coverage.

General Talking Points

Some goals when using talking points:

1. Establish credibility/expertise
2. Define domestic violence
3. Provide context/scope of problem
4. Suggest positive community/individual action

Basic Background

- [Name of agency] serves [tens of thousands, if statewide; use other accurate, specific numbers for local] of victims every year through programs such as [name examples, such as shelter, helpline, etc.]. We have been serving victims here since [founding year].
- Domestic violence is a pattern of behavior in which an abuser does everything they can to maintain power and control over their victim. It can involve verbal abuse, physical and sexual assault, controlling access to financial resources, abuse of pets, and isolation from friends and family.
- Statewide, domestic violence continues to be an enormous social epidemic. In an average year over 40,000 men, women and children seek services from a local domestic violence program. Since the year 2000 when END ABUSE began tracking DV homicide statistics, Wisconsin has experienced a domestic violence-related homicide death at a rate slightly higher than 1 death every 8 days.
- Domestic violence continues to be an underreported problem. Most people first talk to those in their lives whom they trust. Because of this each of us needs to educate ourselves about domestic violence and know about the local services that are available to help [provide details about local helpline, shelter, etc.].

Appendix C

Media Response to Domestic Violence Homicide

Domestic Violence Homicide

- Domestic violence is not about stress, depression or alcohol causing an abuser to be violent. Nor is it about an abuser “losing control” or “going berserk.” It is a calculated act by the abuser to control and intimidate the victim. Homicide is the ultimate form of power and control.
- Domestic violence homicides often occur after or during the time that a victim attempts to leave the relationship. Abusers kill because it’s their final act of trying to control their victim. (*See END ABUSE Domestic Violence Homicide Reports for specific figures and analysis.*)
- Domestic violence homicide rarely occurs as an isolated incident. Often there is a history of abuse in the relationship, and we all need to get better at identifying the signs of abuse. However, there are times when we may never see the signs because the abuser deliberately isolates the victim from friends and family.
- We must take all forms of domestic abuse seriously to help prevent further abuse or death. Abusers are dangerous, and all of their abusive tactics must be treated seriously. What may have been yelling, throwing things, or shoving yesterday can turn deadly tomorrow.
- Too often with these tragedies, the focus is on the abuser. Let’s not forget about the life of [name of victim] and his or her family and friends. Think of your own family members or friends. Imagine what it would be like for this to happen to them. It should serve as a wakeup call for each of us to face the problem of domestic violence and how it affects our families and our community.
- An abuser can seem like a “nice, normal person” or even a respected member of the community but be abusive at home. Domestic abuse is often a carefully guarded secret in homes that may otherwise appear normal. It can be very difficult for victims to seek help when their batterers are respected community figures because the victims’ claims of abuse are likely to be met with skepticism.
- Anyone can be a batterer, regardless of socio-economic status, age, race, sexual orientation, or other demographic differences. Domestic violence homicides can happen anywhere, to anyone. We may not realize it, but we all know someone who has been affected by domestic violence.

2 of 7

Appendix C

Media Response to Domestic Violence Homicide

- It takes all of us working together to address this problem—health care institutions, schools, media, business leaders, faith communities, legislators, and law enforcement. We need to prioritize the effort to stop domestic violence every day and not wait to talk about it only when a high profile tragedy like this occurs.
- In the aftermath of a domestic violence homicide, the focus often turns to what the victim did or did not do “to cause” the abuser to do this. This is blaming the victim and suggests we should excuse this tragic killing. The focus should instead be on why the abuser thought he or she had the right to take their victim’s life. To prevent domestic violence, we as a community must send a consistent, strong message that all abuse is unacceptable.

Talking Points for Specific Scenarios

Murder-Suicide

- Homicide-suicides commonly occur in domestic violence cases. The perpetrator, statistically usually a man, kills one or more victims, usually a wife or intimate partner, and then commits suicide within minutes or hours. It is important to be aware of the correlation between abusers that are suicidal and the potential for homicide.
- Homicide in families is often a final statement of control by a perpetrator. When homicide/suicide occurs, communities are left struggling to find an answer or motive for why the murder occurred without the ability to hold a perpetrator accountable for their actions.
- Children and others can be killed during the course of domestic violence homicide-suicide but generally there is one primary intended victim, usually the spouse or partner. When children are killed instead of the intended victim, it may be that the perpetrator is attempting to further hurt the intended victim by taking away what she most values or loves.

Multiple Homicides

- While most abusers do not present a safety threat to anyone other than their intimate partners and in some cases their children, some abusers will take out anyone they perceive to be “in the way”, such as other family or household members, friends or bystanders.

Appendix C

Media Response to Domestic Violence Homicide

- Batterers seek to control all aspects of their victims' lives. Some batterers will threaten or harm members of the victim's extended family, her friends and associates, or those who try to help her. When this happens, these people are also victimized.

Domestic Violence Victim Uses Deadly Force

- We don't condone the taking of any life, but it's important to distinguish between murders committed in self-defense and those whose purpose is revenge or to punish the victim for his/her behavior. Its self-defense when the victim kills out of fear that he or she (or others in her household) will be harmed or killed. This fear is generated by a pattern of coercion, threats and/or assaults from the abuser. The threat of harm is real even if it's not immediate or readily apparent to others.
- Statistically, females are much more likely to be victims of domestic violence. Most women who kill do so in self-defense or an attempt to end the violence against them. (Based on analysis by the Wisconsin Coalition Against Domestic Violence of domestic violence-related homicides from 2000-2005.)
- Sorting out self-defense is complicated. The legal definition is strict and predicated upon "a man's reasonable use of force against another man." It's important to look closely into how weapons are used and what led to the homicide.
- Deadly force is rarely a first or one-time event. It's important to talk to family, friends, co-workers to try to understand the history between those involved. Some victims of domestic violence suffer years in silence. Prior abuse is often not reported to others out of fear. This fear and isolation can push victims to the edge.

Children are Killed

- 15.5 million U.S. children live in families in which partner violence occurred at least once in the past year, and seven million children live in families in which severe partner violence occurred¹.
- It's critical not to blame the mother for the death of the children when she is a victim herself. Many batterers use children as a tactic of coercion and control against their mother, including threats to abduct or kill the children, particularly when she tries to leave the relationship.

4 of 7

¹ McDonald, Renee, Ernest N. Jouriles, Suhasini Ramisetty-Mikler, et al. 2006. Estimating the Number of American Children Living in PartnerViolent Families. *Journal of Family Psychology* 20(1): 137-142.

Appendix C

Media Response to Domestic Violence Homicide

- Batterers often engage in legal fights over custody and physical placement as a way to have ongoing control over their ex-partners. One of the most common reasons given for returning to an abusive relationship is the fear that the abuser will act on the threats of taking the children from the victim. Studies show that batterers have been able to convince authorities that the victim is unfit or undeserving of sole custody in approximately 70% of challenged cases².
- Children and others can be killed during the course of domestic violence homicide/suicide but generally there is one primary intended victim, usually the spouse/partner. When children are killed instead of the intended victim, it may be that the perpetrator is attempting to further hurt the intended victim by taking away what they most value or love.

Alcohol & Drugs

- Alcohol and other drug use do not cause domestic violence in relationships that are not otherwise abusive. While many victims report that their partners may be more violent when using alcohol or drugs, alcohol or drug use only exacerbates an existing pattern of abusive behavior. We must recognize the root problem of domestic violence.
- Many victims of domestic violence commit crimes due to coercion or threats by their abusers. These women choose the risk of breaking the law because it is safer than the risk of challenging the demands of their partner.

Mental Illness

- Most mental illnesses do not cause abusive behavior, and most batterers are not mentally ill. In some instances, mental illness can exacerbate an existing pattern of abusive behavior or play a role in the escalation of violence. But mental illness remains only a contributing factor.
- The cause of most domestic violence is the abuser's value system and his belief that he is entitled to treat his partner as he sees fit, even if this involves the use of intimidation, cruelty or violence. Psychological tests do not evaluate a person's values and attitudes, and are not reliable predictors of who will engage in domestic violence.

² American Judges Association (aja.ncsc.dni.us)

Appendix C

Media Response to Domestic Violence Homicide

Law Enforcement

- When the perpetrator of a domestic violence homicide works in law enforcement or some other responsible position, citizens often wonder how such a person could gain employment in this field. Domestic abuse is often an invisible crime. Many batterers are never arrested, and there is often no public record of their violent behavior. Batterers are frequently successful in keeping the abuse a secret, making excuses, or blaming the victim. Friends and family may help hide or minimize domestic violence. For most of our history, public opinion has supported the notion that acts of domestic violence are private matters and don't rise to the level of real crimes.
- When an abuser is a law enforcement enforcer, it severely limits the ability of the victim to seek help.

Terminology

When a homicide occurs, it is a critical time to help a community understand domestic violence so that we can all work together to prevent abuse and homicides in the future. The media should play a role in helping the community understand what happened. Accurate, sensitive media coverage can promote understanding and prevent abuse. Inaccurate, sensationalized coverage can reinforce ignorance by wasting an opportunity for education.

All too often media coverage of domestic violence homicides uses terminology that is counterproductive and inaccurate. Here are some of the common terms or phrases and why they reinforce ignorance or misconceptions about the nature of domestic violence:

“Shooting rampage”

“Killing/shooting spree”

“Man goes berserk”

- These terms suggest that the perpetrator has “gone crazy” or otherwise lost control in some way that is beyond our understanding. In fact, most batterers are aware of their actions and very much in control of their behavior. And domestic violence is not beyond our understanding because it happens all around us every day. These murders may represent situations that did not turn out as the perpetrator planned, but the crime, while hard to comprehend, can be explained by understanding the dynamics of power and control in domestic violence. These phrases obscure that fact that these deaths are ultimately a result of domestic violence.

Appendix C

Media Response to Domestic Violence Homicide

“Lover’s triangle”

“Lover’s quarrel gone bad”

“Domestic dispute” or “domestic disturbance”

“Jealous boyfriend”

“Crime of passion”

“Custody dispute”

These terms downplay the seriousness and calculated nature of domestic abuse. They also demean the lives of victims by sensationalizing the story. For example, homicides do not occur because of “passion,” they occur because an abuser chooses to exert the ultimate form of control over their victim. Such terms can also reinforce the notion that some action on the part of the victim somehow caused the murder. Nothing justifies the taking of a life.

Appendix D

Resources

A Practical Guide for Creating Trauma-Informed Disability, Domestic Violence and Sexual Assault Organizations

Published by Disability Rights Wisconsin, this guidebook is designed to highlight and explore effective trauma-informed conditions or core values that victims, survivors and people with disabilities are finding essential for safety and healing.

<http://www.disabilityrightswi.org/wp-content/uploads/2012/05/Trauma-Informed-Guide.pdf>

Adverse Childhood Experiences (ACE) Study

Childhood experiences, both positive and negative, have a tremendous impact on future violence victimization and perpetration, and lifelong health and opportunity. As such, early experiences are an important public health issue. Much of the foundational research in this area has been referred to as Adverse Childhood Experiences (ACEs). Learn more on the CDC's website.

<https://www.cdc.gov/violenceprevention/acestudy/>

After the Injury – A Project of the Children's Hospital of Philadelphia

The information and guidance included in this website are based on a growing body of research about children and parents' reactions to pediatric injury and other medical events.

<http://www.aftertheinjury.org/>

Guidebook on Vicarious Trauma: Recommended Solutions for Anti-Violence Workers

This guidebook explains vicarious trauma, associated effects and consequences, and effective coping strategies. It is designed to assist anti-violence workers to recognize and address their own vicarious trauma experiences.

http://publications.gc.ca/collections/collection_2008/phac-aspc/H72-21-178-2000E.pdf

Headington Institute

The Headington Institute partners with humanitarian relief and development organizations and emergency responders, before, during, and after deployment in order to ensure the wellbeing of individuals. Our team of psychologists, many with over 30 years of clinical experience, bridge cutting edge academic research with practical application at the field level, in order to strengthen the impact of humanitarian response and promote the long-term wellbeing of humanitarian personnel.

<http://www.headington-institute.org/Default.aspx?tabid=2651>

National Center on Domestic Violence, Trauma and Mental Health

The National Center on Domestic Violence, Trauma and Mental Health seeks to build the capacity of systems and agencies to address the traumatic effects of abuse and to facilitate healing, recovery, justice, and safety.

<http://www.nationalcenterdvtraumamh.org/>

Appendix D

Resources

Parents of Murdered Children (POMC)

POMC provides support and assistance to all survivors of homicide victims while working to create a world free of murder.

<http://www.pomc.com/support.html>

<http://www.pomc.com/survivors.html>

Substance Abuse and Mental Health Services Administration

The Substance Abuse and Mental Health Services Administration (SAMHSA) is the agency within the U.S. Department of Health and Human Services that leads public health efforts to advance the behavioral health of the nation. SAMHSA's mission is to reduce the impact of substance abuse and mental illness on America's communities.

<https://www.samhsa.gov/>

The Trauma Stewardship Institute

The Trauma Stewardship Institute focuses on raising awareness of and responding to the cumulative toll on those who are exposed to the suffering, hardship, crisis, or trauma of humans, living beings, or the planet itself. The Institute was founded in 2011 by Laura van Dernoot Lipsky, author of *Trauma Stewardship: An Everyday Guide to Caring for Self While Caring for Others*.

<http://traumastewardship.com/>

Vicarious Trauma Institute

Through their publications, presentations, training services and methodologies, the Vicarious Trauma Institute seeks to inspire, motivate, and empower others to heal and enrich the human spirit.

<http://www.vicarioustrauma.com/whatis.html>

WI Department of Health Services

The Department of Health Services is committed to supporting the understanding and application of trauma-informed care in Wisconsin. Their website contains a list of helpful resources for consumers and service providers.

<https://www.dhs.wisconsin.gov/tic/resources.htm>

Appendix E

Sample Intake Form

This document is intended for use with adults entering a shelter-based Domestic Violence Program. This document is not intended as legal advice. This sample is intended to encourage a conversation with the client at intake about select issues. It is a template which can be edited/modified by a program.

Name of Client _____

When staying in shelter or working with advocates at [NAME OF PROGRAM], your location and personal information are, generally speaking, confidential. Because we believe that you are safer and stronger when you are in control of who has access to your personal information, we work hard to protect your privacy and confidentiality. You also have legal rights to have this agency keep your location and personal information confidential in most situations.³ There may be exceptions when you might want us to communicate information about you to others or we are required to do so. This form discusses these situations and allows you to express your general wishes regarding sharing your information with others.

Emergency Contact

Clients often want us to have emergency contact information for trusted family members or friends they would want us to contact in the event you experience an emergency. If you would like, please list emergency contact information below.

Emergency contact:

_____	_____
Name	Relationship
_____	_____
Address	Phone number(s)

³ For example, this agency may not disclose to any person the location of a service recipient, any minor child of a service recipient, any minor child in the care or custody of a service recipient, or any minor child who accompanies the service recipient when the service recipient receives domestic abuse services, under section 995.67. We may also be subject to other confidentiality requirements under other state and federal laws.

Appendix E

Sample Intake Form

Secondary emergency contact:

Name	Relationship
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Address	Phone number(s)
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Family member:

Name	Relationship
------	--------------

Address	Phone number(s)
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Children

If your children or other children are accompanying you, you may want to give us instructions about your wishes in the event we are unable to locate you or you become incapacitated. Depending on the circumstances and due to laws related to child protection, we may not be able to follow these instructions in every situation, but we will try to respect your wishes.

Instructions regarding children:

Personal Property

What would you like us to do with your personal property in the event we are unable to locate you, you leave shelter or you become incapacitated? Some clients say they want us to give the property to an emergency contact. Others designate another person. Some ask that we dispose of the property. Again, we will attempt to follow your wishes, but we may not be able to do so in all circumstances. We cannot keep your property in the event you do not return to shelter.

Domestic Violence Homicide Response Plan: A Toolkit for Domestic Violence Programs

End Domestic Abuse Wisconsin

www.endabusewi.org

Appendix E

Sample Intake Form

Instructions regarding property:

Other Limited Circumstances Involving Release of Information

There may be other limited circumstances in which we may need to take action and we wish to be informed of your wishes. We wish to honor those wishes to the extent we can do so.

- 1) Another set of circumstances that might require the sharing of information involves a situation where you express threats of harm to yourself or to others. We believe in protecting your confidentiality to the greatest extent possible, and we strongly value your right to make decisions about yourself. Therefore, we would like to ask you your wishes in this type of situation. Again, we cannot guarantee that we will be able to follow your wishes in all circumstances.

If you feel comfortable, please tell what you would like us to do if you have a plan to hurt yourself or others.

- 2) We also want to let you know that in rare cases, child abuse and neglect issues might require us to disclose information about you or your children. In certain situations, we may have a legal or ethical obligation to seek help when your children are at risk of being abused or neglected or have been abused or neglected. We will work with you to ensure that you are the person in charge of information whenever possible. For example, if a child abuse report must be made, we will first encourage you to make the report and we will assist you to make the report. We will communicate with you as soon as possible when any situation arises that might require us to take actions regarding child abuse and neglect.
- 3) We are required to respond in some manner if we receive a subpoena for your files and/or information about you. Because your privacy is very important to us, it is the policy of this organization to first attempt to discuss with you what your wishes are if we are subject to a

Domestic Violence Homicide Response Plan: A Toolkit for Domestic Violence Programs

End Domestic Abuse Wisconsin

www.endabusewi.org

Appendix E

Sample Intake Form

subpoena for your records or we are asked to testify. If you tell us you do not wish to release the information or if we cannot reach you to discuss your desires, it the policy of this agency to attempt to quash any subpoena for your personal information or to request that we testify. We may decide to release the information only if we are not able to successfully quash the subpoena and are subject to a court order to release the information.

- 4) In other rare circumstances, we might be required to release information because of other court orders, court proceedings, warrants, or an emergency situation which might include a natural disaster.

We have attempted to describe the situations that could possibly involve disclosures of your information. There may be other even more rare situations that we have not predicted or described which may require or necessitate that we release information about you or your records. Again, we strive to keep your privacy and confidential information secure and will continue to do so.

Updated Intake Form; Release of Information and Waiver of Nondisclosure

Because your wishes may change, whenever possible, we will attempt to speak with you again prior to releasing any information according to the instructions you have made in this document. We may ask you to sign a separate and/or updated intake form and/or release form to ensure we have understood and recorded your wishes.

In addition, anytime we release information about you, we will ask you to sign a Release of Information and Waiver of Nondisclosure to assure that you are in charge of what information is released. We will request this Release of Information and Waiver of Nondisclosure even in situations where you have given permission to another person/agency to receive information from us about you from your files.

Accommodations

Do you or your child(ren) require a special accommodation? If so, please indicate how we might assist you with a special accommodation.

Appendix E

Sample Intake Form

Signature and Date

I have read and I understand the contents of this form.

Client's signature Date

Client's name

Updated or Modified Intake Form and Signature and Date

I wish to make the following changes to this Intake Form as signed on the date above. These changes include:

Client's signature Date

Client's name