

STATE OF VERMONT

**DOMESTIC VIOLENCE
FATALITY REVIEW COMMISSION
REPORT**



2014

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DEDICATION

This year's Vermont Domestic Violence Fatality Review Commission is dedicated to Amy FitzGerald, Esq., an attorney who was with the Vermont Attorney General's Office for 16 years and who authored every report for the Vermont Domestic Violence Fatality Review Commission ("Commission") until this one. We want to thank her for her tireless dedication to the Commission and for her service to the many victims of domestic violence in Vermont whom she has helped to have a voice for change. Amy, we hope you will be proud that your work continues.

INTRODUCTION

On May 2, 2002, then-Governor Howard Dean signed into law H.728, which created Vermont's Domestic Violence Fatality Review Commission. (See Appendix A for a copy of the bill.) The purpose of the Commission is to collect data and conduct in-depth reviews of domestic violence-related fatalities in Vermont with the goal of making policy recommendations to prevent future tragedies. There are now over 40 states that have active multi-disciplinary domestic violence fatality review teams across the country. The theory behind these review groups is that by examining data and information we can better understand why and how the fatalities occurred and what can be done to prevent future deaths.

Pursuant to 15 V.S.A. § 1140, the Domestic Violence Fatality Review Commission operates under the auspices of the Office of Attorney General in consultation with the Vermont Council on Domestic Violence.

Under 15 V.S.A. § 1140, the purposes of the Commission are to:

- examine the trends and patterns of domestic violence related fatalities in Vermont;
- identify barriers to safety, the strengths and weaknesses in communities, and systemic responses to domestic violence;
- educate the public, service providers and policymakers about domestic violence fatalities and strategies for intervention and prevention; and
- recommend policies, practices and services that will encourage collaboration and reduce fatalities due to domestic violence.

This is the Twelfth Commission Report. This Report includes data regarding fatalities for 2013 and updates the Commission's statistical information that dates back to 1994. In 2013 the Commission completed two in-depth case reviews, and case recommendations from those reviews are discussed in this Report. Finally, the Report provides an update on the Commission's recommendations from 2012 and earlier where updates are relevant.

The Commission asks all Vermonters to review this report and provide us with comments and suggestions as we continue to study the trends and patterns of domestic violence and related fatalities.

EXECUTIVE SUMMARY OF COMMISSION DATA

The Commission data indicates:

- Between 1994 – 2013, 50% of all Vermont homicides were domestic violence related.
 - 56% of Vermont’s adult domestic violence related homicides were committed with firearms.
 - 79% of the suicides associated with the homicides (i.e. murder/suicides) were committed with firearms.
 - 84% of Vermont’s domestic violence related fatalities were committed by males.
 - 53% of domestic violence victims were female.
- Of the 13 homicides in Vermont in 2013, eight (62%) were deemed domestic violence-related. Please see the Commission’s definition of Domestic Violence Fatality which can be found in Appendix E.
 - Of the eight domestic violence-related homicides, four were committed with a firearm, two involved blunt trauma, one involved asphyxiation, and one involved neglect.
 - In three of the cases, the responsible party committed suicide immediately following the homicide. Two responsible parties attempted suicide following the homicide, but were unsuccessful (one at the scene and one while in a correctional facility). There was also at least one additional domestic violence-related suicide not connected with a homicide.
 - Of the eight domestic violence-related homicides, four were current or former intimate partners of the responsible party. Two involved family members -- one a child and the other an elderly parent. One was a domestic abuser killed by the intended victim’s current partner in defense of her. One was a current spouse of an intimate partner who was killed by the former spouse of that partner.
 - Of the eight domestic violence-related homicides, seven occurred in residences and one outside the residence.
- Beginning this year, the Commission has elected to include children killed in a domestic related-incident in our statistics. While we continue to refer these

cases to the Vermont Child Fatality Review, we also feel it is important to begin capturing these fatalities in our statistics to give Vermonters a more accurate picture of the impact of domestic violence in our state. According to past reports, there have been a total of 15 child homicides in Vermont between 1994-2012. It was not possible to go back and determine which of these homicides were domestic violence-related in time for the 2014 report, though we hope to tackle that project in the future, and for that reason the data in the homicide and fatality chart from 1994 to present contains only adult data. The domestic violence-related child homicide that is captured in our current year data is not reflected in that chart for the sake of consistency.

- We have also added a column to the homicide and fatality chart from 1994-present to reflect suicide/attempted suicide of an adult responsible party. This data was contained in the footnotes of previous reports. By doing so, we hope this important data is more readable.

SUMMARY OF COMMISSION'S ACTIVITIES IN 2013

In 2013 the Commission issued an abbreviated Annual Report. As required by 15 V.S.A. § 1140, the Commission distributed its report to the General Assembly, the Governor, the Chief Justice of the Vermont Supreme Court, and the Vermont Council on Domestic Violence.

In the previous year there have been several changes in the representatives to the Commission. Our new members from the Department of Public Safety, the Department of Mental Health, Department of Health and the Coalition of Batterer Intervention Services arrived ready to dive right in and we welcome the new perspectives each brings to the Commission. We would also like to gratefully acknowledge the hard work and dedication of our retiring members, Cpt. David Covell, Kristin Chandler, Kym Anderson, and Ilisa Stalberg. Appendix C lists the current members of the Commission.

During 2013 the Commission met bi-monthly and the Chair of the Commission and the Coordinator of the Vermont Council on Domestic Violence met monthly to work on recommendation implementation. A copy of the protocol that outlines these roles is attached as Appendix E.

In September 2013 the Governor's Task Force for the Prevention of Domestic and Sexual Violence released a series of recommendations to further prevention efforts statewide, in a coordinated and collaborative manner. The Commission was fortunate to have Bethany Pombar, Prevention Specialist from the Vermont Network Against Domestic and Sexual Violence, present their recommendations during one of our meetings. The Commission discussed the priorities identified in the full report of the Task Force and urge all Vermonters to review the report which can be found at <http://governor.vermont.gov/sites/governor/files/Gov%20Prevention%20of%20Domestic%20and%20Sexual%20Violence%20Taskforce%20Report.pdf>

Pursuant to 15 V.S.A. § 1140, the purpose of the Commission includes identifying strengths and weaknesses in systemic responses to domestic violence and making recommendations that will encourage collaboration, intervention and prevention. Below please find relevant data regarding the completed case reviews and the Commission's findings regarding strengths in the community and recommendations to improve the response to domestic violence.

SUMMARY OF 2013 CASE REVIEWS

While the Commission reviews and discusses all domestic violence-related homicides, each year we select one or two cases from previous years to review in depth. The case review process includes creating a timeline for the case, identifying any lethality factors, reviewing all available documents, inviting witnesses to testify, taking testimony from witnesses before the commission, and discussing at length what can be learned from that case. The proceedings and records of the Commission are confidential to protect the privacy of surviving family members.

CASE REVIEW INFORMATION

In 2013 the Commission selected two fatalities from previous years to review in detail. In the first case, the victim was a 39- year-old female and the responsible party was a 72-year-old, live-in boyfriend. The victim had recently left after a 10-month relationship with the responsible party, but returned to him after a short hospitalization for a mental illness. The victim was unemployed and the responsible party was employed. The responsible party had a very minor criminal record from long ago, but had recently been charged with domestic assault on the victim which was pending when the homicide occurred. The victim had several recent misdemeanor convictions and extensive police contact. There were no minor children and no relief from abuse orders. The responsible party had conditions of release in place designed to prevent contact with the victim and had been cited by the police for violating those conditions by having contact with her.

The following lethality risk factors were identified by the Commission in this case:

1. serious physical/sexual violence currently and in the past;
2. serious violent threats currently and in the past;
3. violations of current criminal court orders;
4. responsible party had access to weapons;
5. victim had financial problems that rendered her dependent on the responsible party for housing; and
6. victim had serious mental health and substance abuse issues.

In the second review case, the victim was a 50-year-old female and the responsible party was her 55-year-old husband. Neither had any known involvement with the criminal justice system. Despite an apparently long history of domestic violence, there had not been any contact with law enforcement. The victim had confided to a friend about the domestic abuse and had made very specific plans to leave the responsible party. They did have a grown child together and had grown children from prior relationships. There were no children living at home. There were no relief from abuse orders.

The following lethality risk factors were identified by the Commission in this case:

1. serious physical and sexual violence currently and in the past;
2. recent financial problems; and
3. recent attempt at separation initiated by victim.

STRENGTHS IN THE COMMUNITY

As noted above, part of the Commission's statutory role is to identify strengths in addition to barriers in responses to domestic violence cases. During the review, the Commission identified a number of strengths and we note the following positive practices:

1. One of the victims had friends who had offered to help her to escape from the abuse and had planned to meet her on the day she was killed. They had offered her housing and another friend had offered to accompany her when she was ready to move out.
2. Police in the county where one of the victims lived now have an embedded mental health crisis worker in their department. This has greatly assisted officers when confronted with a domestic violence victim who also has serious mental health issues, increasing the likelihood that victims will be able to access the support they need in a crisis.

I. PART ONE: CASE REVIEW FINDINGS AND RECOMMENDATIONS

The Commission makes the following findings and recommendations related to these cases. We identify relevant professions and agencies that may be able to incorporate our recommendations in their practices and protocols. We encourage these groups to give careful consideration to these recommendations and we welcome the opportunity to discuss our recommendations further.

In no way does the Commission intend to imply that any agency or policy is responsible directly or indirectly for any death. The goal of the Commission in making these recommendations is to increase the safety of all Vermonters. The findings and recommendations are not prioritized and are of equal importance.

A. Standby Procedures

In one review case, the victim told her friend that she had asked the local sheriff's department for assistance with getting her belongings out of her home safely, but could not afford the fee. (Note: The department in question had no record of her contacting them for assistance so we are unable to verify that this actually occurred.) She then asked a friend, but he was unable to assist her on the day she planned to leave. Commission members identified the lack of a safe and affordable way for her to leave her partner as a barrier to her safety.

When we looked further at this issue, we discovered that "standbys," as they are commonly called, are done by many different agencies in many different ways. Nearly all charge a fee to the party requesting a standby.. In our research, we learned that these fees can range anywhere from \$0 to \$150. For liability reasons, most require that the party have a court order, such as a temporary or final order for relief from abuse, before offering this service. A uniform statewide policy on these procedures did not seem workable or desirable given the variation in local law enforcement agencies' resources. We note that many communities already have established practices that work well at a local level.

The sheriff's department in Orleans has a brochure available called "A Guide For Civil Standby Service," which we reviewed. The Commission commends that agency for creating a brochure to bring greater public awareness of their policies.

The Commission noted that the cost for these services could be a barrier for many victims. Most domestic violence shelters are strapped with bare bones funding for existing programs and simply don't have the resources to create a dedicated fund for this purpose. The Commission does recognize that these services cost money and that in most cases law enforcement cannot simply absorb the full cost to provide such services. It is our hope we will one day have a statewide solution that creates a dedicated fund to cover these costs for those in need. In the meantime, we hope that by shining a light on this barrier, local communities will find their own solution through fundraising or other grassroots efforts to assist those in need with what are generally modest fees.

1. Law Enforcement Recommendation #1

The Commission recommends that:

- All law enforcement agencies and sheriff's departments adopt their own written policy about standby procedures that can be made available to the general public. It is strongly suggested that law enforcement agencies collaborate with their local domestic violence advocacy program and/or task force in the development of this policy. We encourage agencies to have a step-by-step written policy that can be disseminated online and in print (such as the brochure in Orleans) and ensure that the availability of this service is well-known in their local community.

2. Domestic Violence Task Force Recommendation

The Commission recommends that:

- Local domestic violence task forces engage local law enforcement in a discussion about their standby procedures and provide feedback as needed on how to identify and reduce any barriers to safety for victims. We especially encourage task forces to examine local fees and look for solutions to provide funding for those in need. We also encourage local task forces to examine ways to promote the availability of this service in their community.

B. Welfare Checks

One of the victims in a reviewed case was in the process of leaving her partner when she was killed. She had arranged to meet a friend once she had gathered her belongings. When she had not arrived several hours after they had arranged to meet, the friend contacted the police.

The police in this circumstance were not initially aware that there was a history of domestic violence. They were performing what is known as a routine welfare check. Police knocked at her door and drove by her residence several times. They could hear a TV on inside and saw nothing immediately suspicious. They attempted to contact family members to verify her well-being. Once the police learned of the history of domestic violence, they were fortunately able to obtain a search warrant and gain entry to the home. At that time they discovered that the victim had been killed and her partner had committed suicide.

In the course of our review, we learned that few police agencies have protocols for welfare checks and that this topic is not routinely covered at the police academy even though welfare checks are an extremely common function in police departments. While the officers in the reviewed case did establish a basis to obtain a search warrant, the Commission noted that in many cases it simply may not be legally possible for officers to obtain a search warrant in a welfare check because they must have probable cause to believe that a crime has occurred. In the reviewed case, circumstances were such that entry to the home at the time of the report would not have prevented the tragic outcome. In future instances, however, a welfare check could save a life. Officers need explicit training in these procedures in light of the very real possibility that what starts as a “routine” welfare check may well end up as a life-threatening situation.

1. Vermont Criminal Justice Training Council Recommendation

The Commission recommends that:

- Every new officer is trained in how to conduct a welfare check. Officers should be taught how to identify exigent circumstances (if they exist) and we urge that a domestic violence scenario be part of this training.
- All officers receive ongoing training that includes screening for domestic violence when conducting a welfare check and legal standards for identifying what exigent circumstances might look like in a domestic violence scenario. Training should

also cover how to determine if there is a sufficient basis to apply for a search warrant in those few cases where a welfare check may meet the necessary legal standards.

2. Law Enforcement Recommendation #2

The Commission recommends that:

- All police departments establish their own **written** protocol for conducting a welfare check. The protocol should include routine screening for domestic violence. Anyone who requests a welfare check of another should be asked whether there is any domestic violence history. Officers should review prior incident reports when conducting a welfare check to determine if domestic violence may be a factor.
- When and if the officer is able to make contact with the subject of a welfare check, the officer should ask whether he/she has any concerns about domestic violence. The officer should use this opportunity to provide information about local resources for domestic violence victims, including basic information about how to obtain an abuse prevention order.

C. Initial Court Appearances

One offender in a reviewed case was arrested for domestic violence against the victim in the months preceding her death. He was on conditions of release that prevented contact with her when he took the victim's life, but he had nevertheless been in regular contact with her. When he was initially charged, he was given a court date a week after the incident for his arraignment in court. In the course of our review, we learned that it is not uncommon in some jurisdictions for offenders to post bail immediately and be given a court date a week away. This can be a critical time period when the victim may be at great risk of further violence. This delay may impede the ability of courts and prosecutors to impose conditions immediately to help keep victims safe. The Commission recommends shortening the average length of time before an offender is brought before a judge when bail has been posted.

According to information provided to the Commission by the Court Administrator's Office, in calendar year 2013, out of 1,968 felony and misdemeanor domestic violence cases, the average length of time between arrest and the first court appearance was nine days. For 82% of the cases (1,620 offenses), a hearing was held within seven days. In the interim, offenders who post bail are released on conditions set by a court clerk under guidelines established by the judiciary.

It is not a regular practice, primarily due to funding, for clerks to receive domestic violence training. While the Commission recognizes that clerks must maintain a neutral role and may not engage in any conduct that could be perceived as advocacy, we believe that domestic violence training is important for all judiciary staff members in to do their job effectively. Officers need specific training in what information should be provided to the clerk when he or she sets bail so that appropriate bail amounts and conditions can be set. Officers also need to be trained in what the legal standards are

for requesting that an offender be held without bail when appropriate, and clerks need training to understand their obligation to refer such cases to a judge when a hold-without-bail request is made.

The Commission wishes to gratefully acknowledge the Court Administrator's Office, especially Laura Dolgin, for assistance in gathering data for the Commission. They went to a great deal of effort this year to provide the Commission with the information requested, including conducting the review of CY 2013 cases mentioned above solely for the purposes of this report.

1. Judiciary Recommendation

The Commission recommends that:

- Arraignments on all domestic violence charges, including those where the offender has "bailed-out," be set in the court's emergency hearing block. This should shorten the average length of time before a hearing is held in those jurisdictions where "bail-outs" are currently set for the next available, regular arraignment day.
- All clerks who set bail on cases receive specific and ongoing domestic violence training. Clerks should be familiar with lethality assessment tools that some law enforcement agencies are using. Training should include the importance of setting appropriate specific conditions when weapons are involved. They should also receive specific training about referring hold-without-bail requests to a judge.

2. Law Enforcement Recommendation #3

The Commission recommends that:

- All officers be trained in the standards applicable to holding an offender without bail, and how and when to make a request. In those cases where law enforcement elects to use a citation rather than an arrest (we note, however, that arrest is the preferred response in most cases), officers should ensure that a flash citation rather than a regular citation is used.
- Law enforcement should consult with their local prosecutor's office about the process for hold-without-bail requests. Prosecutors may wish to establish a protocol with their law enforcement agencies to ensure that they receive timely communication of such requests so they can determine by arraignment if they wish to file a request with the court to continue the hold-without-bail status. In some cases, the prosecutor's office may determine that hold-without-bail status is no longer legally warranted, but law enforcement should nevertheless have appropriate training to assess independently whether a request is warranted pre-arraignment.

3. Prosecutor Recommendation

The Commission recommends that:

- All prosecutors develop protocols with local law enforcement agencies outlining how a request to hold an offender without bail should be made to the court and what documentation they will need by arraignment day if they elect to go forward with a request to continue the hold-without-bail status after arraignment.

D. Mental Health Clinician Availability/Training

In one of the cases reviewed, the victim had a long history of involvement with the mental health and criminal justice systems. She had interacted with local law enforcement in the past. The Commission recognizes that these kinds of complex cases can be some of the most challenging for crisis workers, advocates, law enforcement, and court personnel. As one law enforcement witness told us, it is sometimes very difficult for officers to develop a coherent picture of what is happening in a volatile situation with a victim who may also be suffering a mental health crisis that interferes with his or her ability to distinguish delusional thought from true threat. Abusers may use this to their advantage and even manipulate responders in their efforts to evaluate danger to a victim.

An officer also spoke in glowing terms about how much it has helped his department to have a mental health clinician embedded in his department. Officers are able to get expert help evaluating safety concerns and avoid long waits for mental health screeners to meet with a victim. A mental health worker at the scene is also much more likely to be able to see and assess the victim while he or she is still presenting the behavior that prompted the officer's concern.

Vermont currently does have some training for first responders in a mental health crisis. The training, known as "Team Two" training, seeks both to educate the first responder and to build the relationships necessary for law enforcement and mental health clinicians to work together in crisis. The training includes an overview of relevant mental health statutes and information on mandatory law enforcement mental health training (ACT 80), and an opportunity for participants to "role play" real life scenarios. There is also a panel presentation that includes a person with mental illness, a family member, a crisis clinician and a law enforcement officer who all share personal stories and an opportunity to share resources available in the local community. The training does not have a domestic violence component at this time.

The Commission is glad to see that Vermont is making strides to better mental health treatment for offenders, such as the "team two" trainings and S. 295 which provides routine screening for offenders before a charging decision is made. We recommend that these training opportunities for mental health workers also include specific domestic violence training and that programs that provide embedded mental health workers for law enforcement expand to include such resources in every community.

1. Department Of Mental Health Recommendation

The Commission recommends that:

- The Department of Mental Health, through the structure of their Domestic Violence Advisory Group (“DVAG”), conduct a review of domestic violence protocols for mental health providers with the goal of identifying a model domestic violence protocol for community and state mental health providers in Vermont. Every department at the Agency of Human Services has an active DVAG group that meets regularly to discuss issues concerning the victims and perpetrators of domestic violence that their agency serves. The Commission recommends that the DVAG develop protocols to address domestic violence both for (1) providers responsible for overseeing emergency room responders, such as the Howard Center which provides response services for Fletcher Allen Emergency Department; (2) staff at in-patient facilities; (3) staff in community-based designated agencies with which the Department of Mental Health has an existing contract. Templates to address domestic violence issues should be available for patients at every level of treatment. These model protocols should include specific domestic violence training for staff, including the link between depression, suicide, and domestic violence and a review for domestic violence components in screening tools, intervention, victim notification, safety planning, and collaboration with other community responders to domestic violence.

2. Domestic Violence Task Force/First Responder Recommendation

The Commission recommends that:

- Community mental health “first responders” participate in local domestic violence coordinated community response teams and task forces. To support this recommendation, the Commission recommends that the Vermont Council on Domestic Violence work with local domestic and sexual violence task forces to facilitate roundtable discussions at local task force meetings. We encourage them to invite representatives from local mental health crisis teams to participate in mini-trainings with local law enforcement and other members of the coordinated community response.

3. Law Enforcement Recommendation #4

The Commission recommends that:

- All law enforcement agencies have an embedded mental health clinician who is trained in domestic violence.

4. “Team Two” Crisis Training Recommendation

The Commission recommends that:

- The “Team Two” mental health training that is currently underway in the state include a domestic violence component. Currently it does not. While we understand from the trainer that time constraints may prevent including a domestic violence component in the eight regional trainings already scheduled for this fall, we hope that these trainings will continue on a regular basis in 2015

and that a domestic violence component will be part of the core curriculum in the future.

II. PART TWO: COMMISSION STATISTICAL DATA

In 2013 there were thirteen homicides; one was a child homicide. Three of these homicides were murder/suicide cases and there were two attempted suicides following a domestic violence-related incident; one at the scene and one later at a correctional facility. There was also at least one additional domestic-violence-related suicide not connected with a homicide.

Vermont domestic homicide victims ranged from 14 years old to 72 years of age. By Commission protocol, all child deaths are referred to Vermont’s Child Fatality Review Team for analysis.

Seven of the domestic violence- related homicides and all 4 suicides occurred in residences. One homicide occurred immediately outside the residence. There was 1 homicide where a relief from abuse order was in effect.

There were 13 homicides in 2013, 8 of which were domestic violence related (62%). There were at least 4 domestic-violence-related suicides.

A. Data For 2013

- 13 total homicides
- Of the total homicides, 12 adult victims, 1 child victim
- Of the 13 homicides, 8 are domestic violence related

DATA REGARDING 2013 DOMESTIC VIOLENCE RELATED HOMICIDES

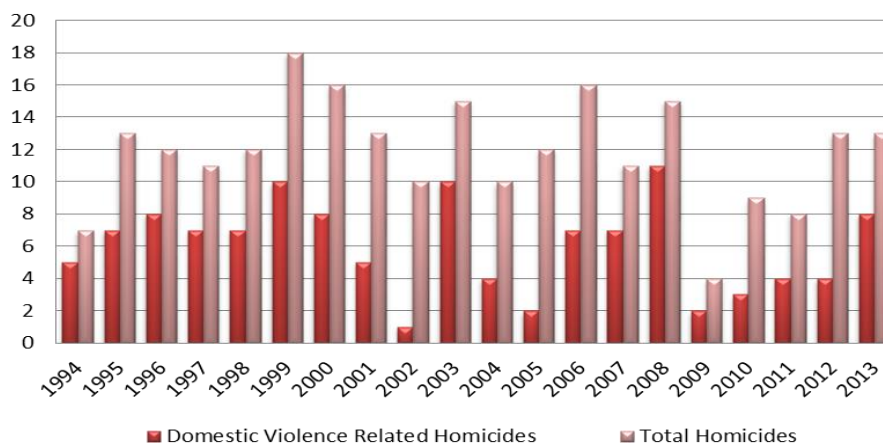
Gender			
Victims		Responsible Party	
Child victim	1		
Female adult victims	3	Male	7
Male adult victims	4	Female	1
Partner			
Partner	3	Household Member	0
Ex-Partner	1	Other Domestic Violence Related	2
Family Member	2		
County Distribution			
Addison	0	Lamoille	0
Bennington	0	Orange	1
Caledonia	1	Orleans	1
Chittenden	1	Rutland	2
Essex	0	Washington	0
Franklin	0	Windham	0
Grand Isle	1	Windsor	1
Crime			
Firearm	4	Stabbing	0

Fire	0	Blunt Trauma	2
Strangulation	0	Motor Vehicle	0
Drowning	0	Neglect	1
Asphyxiation	1		
Children Present			6
Locations of Homicides			
In Residence	7	Outside Residence in front yard	1
In Workplace	0	In Public Place	0
Total Domestic Violence Related Homicides for 2013			62%

B. Historical Data On Adult Domestic Violence Homicide 1994-2013

- As discussed previously, the historical data does not include domestic violence homicide of children. We hope to capture that data eventually. In order to be consistent with data from past reports, we have **not** included the 2013 child homicide in the historical charts. The suicide of the responsible party in that case is included in the historical charts suicide data.
- For 2013, there were a total of 12 **adult** homicides. Of those, seven are domestic violence related or 58%.
- Of the seven adult, domestic violence-related homicides, four were committed with a firearm, two were the result of blunt trauma, and one was the result of neglect. All four suicides were committed with firearms.
- In summary, according to Commission data covering 1994 – 2013, 50% of all Vermont adult homicides during the past sixteen years were domestic violence-related. 56% of Vermont’s domestic-violence-related adult homicides were committed with firearms and 79% of the adult suicides associated with domestic violence homicides (i.e. murder/suicides) were committed with firearms.

Homicides 1994 - 2013



HOMICIDE AND FATALITY CHART FROM 1994 - 2013									
Year	Total # Adult Homicides	Partner	Ex-Partner	Family Member-non partner	Household Member – non partner	Other DV Related	Total # DV	Total % DV	RP Suicide / Att Suicide
2013	12	3	1	1	0	2	7	58%	3 / 2
2012	13	0	1	3	0	0	4	31%	1 / 0
2011	8	3	1	0	0	0	4	50%	0 / 0
2010	9	0	0	2	0	1	3	33%	1 / 0
2009	4	0	1	0	0	1	2	50%	1 / 1
2008	15	5	0	3	0	3	11	73%	0 / 1

2007	11	1	2	2	2	0	7	64%	3 / 0
2006	16	2	1	2	1	1	7	44%	0 / 0
2005	12	0	0	0	0	2	2	17%	0 / 0
2004	10	3	1	0	0	0	4	40%	1 / 0
2003	15	1	2	4	1	2	10	66%	0 / 0
2002	10	1	0	0	0	0	1	10%	0 / 0
2001	13	0	0	3	1	1	5	38%	0 / 0
2000	16	3	1	2	0	2	8	50%	1 / 0
1999	18	2	1	3	2	2	10	56%	2 / 0
1998	12	3	2	1	0	1	7	58%	3 / 0
1997	11	2	1	2	0	2	7	64%	2 / 0
1996	12	1	2	2	1	2	8	67%	3 / 0
1995	13	6	0	0	0	1	7	54%	4 / 0
1994	7	1	1	1	0	2	5	71%	1 / 0
TOTAL	237	37	18	58	8	25	119	50 %	26 / 4

SUMMARY OF DATA FROM 1994 – 2013			
Homicides (Adult)	Total – 237		
Domestic Violence Homicides (Adult)	Total 119 or 50%		Responsible Party
	• Female victims	63	• Female 19
	• Male Victims	56	• Male 100
Relationship	Partner	37	Household Member 8
	Ex Partner	18	Other Domestic
	Family Member	31	Violence Related 25
County Distribution	Addison	9	Lamoille 3
	Bennington	8	Orange 6
	Caledonia	11	Orleans 7
	Chittenden	23	Rutland 22
	Essex	2	Washington 6
	Franklin	4	Windham 5
	Grand Isle	2	Windsor 11
Manner of Homicide	Firearm	67	Strangulation 5
	Stabbing	16	Motor Vehicle 1
	Fire	2	Blunt Trauma & Strangulation 1
	Blunt trauma	21	Other 6
Children Present	At crime scene	39	Aware of crime scene immediately before or after 6
Relief From Abuse Orders	18 (18 cases where order was in effect to protect victim vs. responsible party)		
Law Enforcement Related Cases	3 (3 cases where domestic violence suspects were killed by law enforcement)		
Suicides related to domestic violence	Total:	33	Female 3
			Male 27

	Firearm	26	Asphyxia by Fire	1
	Stabbing	1	Asphyxia by Carbon Monoxide	2
	Hanging	2	Jump/Fall	1

C. Definitions

Children Present – A child is at the crime scene or aware of the crime scene immediately before or after

DV – Domestic Violence

Partner – Homicide where the responsible party and victim are intimate or dating partners (e.g. spouse kills spouse, boyfriend kills girlfriend)

Ex-Partner – Homicide where the responsible party and victim were intimate partners formerly but are not currently (e.g., divorced spouse kills spouse, ex-girlfriend kills ex-boyfriend)

Family Member – Homicide where the responsible party and the victim were not intimate partners or dating partners but are family members

Household Member – Homicide where responsible party and victim currently or formerly lived in the same household but were not intimate or dating partners of family members (e.g., child living with non-related caregiver)

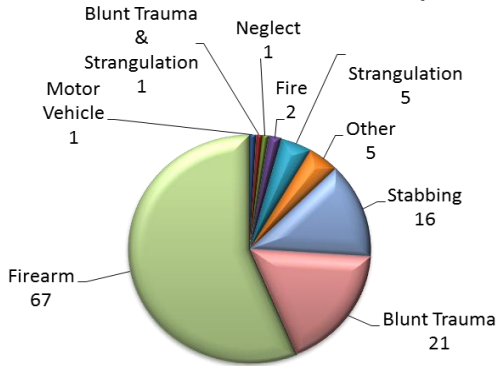
Other Domestic Violence (DV) Related – Homicide where the responsible party and the victim fit none of the above relationships but the fatality is related to domestic violence (e.g. estranged spouse kills ex-spouse’s current intimate partner, law enforcement officer kills person while responding to a domestic violence incident)

Responsible Party – The responsible party is the person to whom the fatality can be attributed. It is a broader term than defendant or perpetrator. For example, it may include a convicted defendant, a battered spouse who was not charged with the fatality due to self-defense, a person who perpetrated the murder who then commits suicide, or a police officer responding to a domestic violence incident that kills one of the parties in the course of his/her duty.

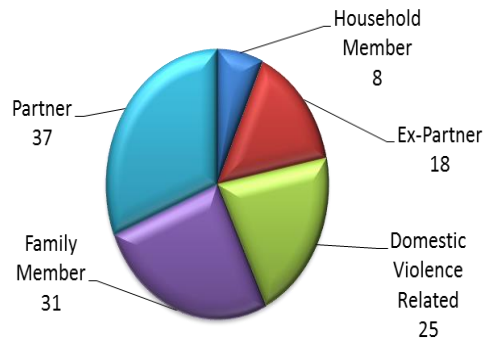
Suicides Related to Domestic Violence – This category includes suicides by a responsible party or victim where there is a documented history of domestic violence and an indication that the suicide was prompted by the effects of violence. Given that the reasons for a suicide are often unknown, this is a very conservative number. This category also includes murder-suicides, but does not include attempted suicides.

DOMESTIC VIOLENCE RELATED HOMICIDES 1994 – 2013

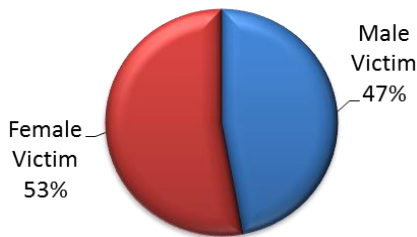
Domestic Violence Related Homicide by Method



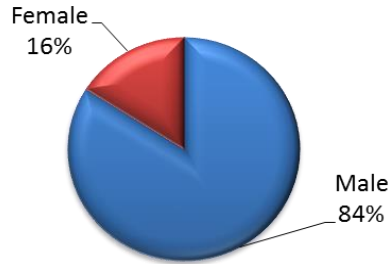
Relationship of Victim to Perpetrator



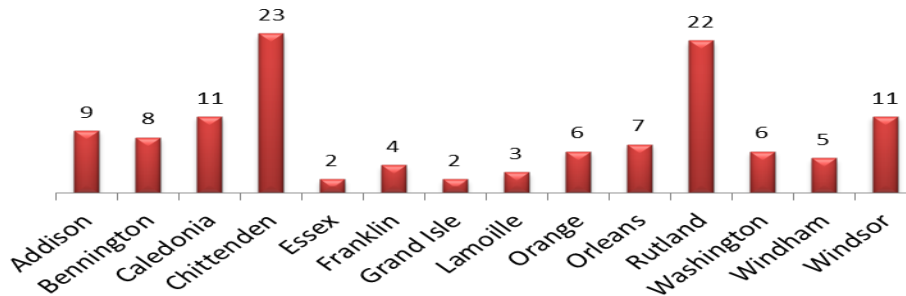
Gender of Victim



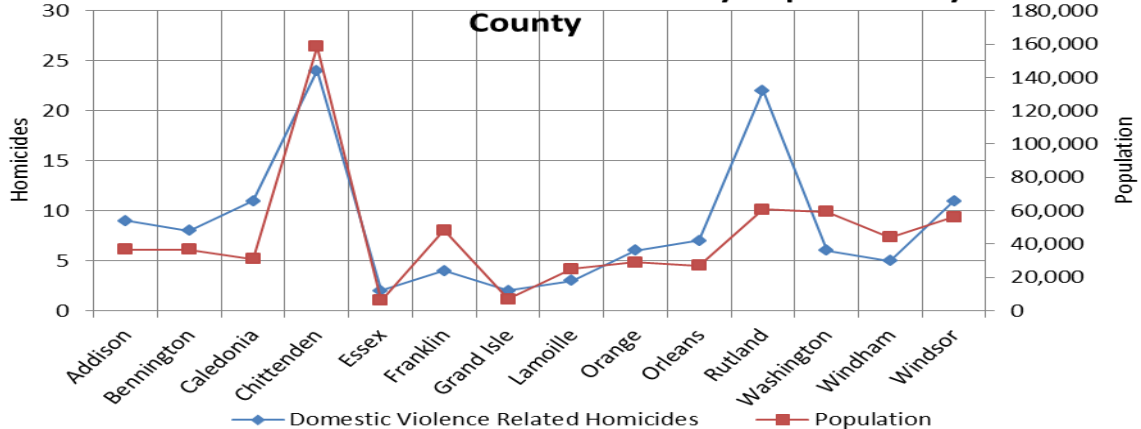
Gender of Responsible Party



Domestic Violence Related Homicides By County 1994 - 2013



Domestic Violence Related Homicides by Population by County



III. PART THREE: OTHER VERMONT DATA FOR 2012/2013

A. Vermont Crime Report

Though the Vermont Crime Report for 2012 is not available, all of the data used to compile that report is available at Vermont Crime On Line from the Department of Public Safety and has been used here. The data for 2013 should be available on Vermont Crime on Line around July 2014.

There were 3,708 instances of violent crime in 2012 and of those, 1,457 or 39% involved violence against intimate partners or family members. Of those 1,457 incidents, there were 1,618 total victims and 1,135 or 70 % were women. Child victims of an intimate partner are not included in definition of intimate partner, but the definition of family members does include stepchildren, which means the number of domestic violence victims may actually be higher. Women in the age group of 21-29 were more frequently the victim of domestic violence than any other age group (18%) followed by women 30-39 (12%), followed by women 40-49 (7%). Not surprisingly, incidents of domestic violence occurred most frequently in the home, 1,344 or 92%, followed by highways, roads and alleys, 83 or 5%.

It is interesting to note that the number of domestic violence related crimes as a percentage of all violent crime has remained around 40% every year since 2008.

For additional information please see the link to Vermont Crimes On Line at: www.vcic.vt.gov

B. Vermont Department Of Health

In 2013 the Vermont Department of Health's Youth Risk Behavior Survey, surveyed 21,746 students (grades 9 to 12) in 65 out of 67 public high schools in Vermont. Results show that 9% (nearly one out of ten) students in dating relationships were physically hurt by someone they were dating or going out with (such as being hit, slammed into something, or injured with an object or weapon). Females (10%) were more likely to report being physically hurt than males (8%). There were no differences by grade.

Of all students, 6% have ever been physically forced to have sexual intercourse when they did not want to. Females (9%) were significantly more likely than males (3%) to report being forced to have sex. Twelfth and 11th graders (7%) were much more likely to report being forced to have sex than 9th (4%) and 10th (6%) graders.

These questions were asked differently in 2013 than in prior years in order to obtain more accurate information. As a result, 2013 responses cannot be compared to prior years.

The Youth Risk Behavior Survey is conducted every two years in Vermont; the next survey will be conducted in 2015. More information about Vermont's Youth Risk Behavior Survey is found at: <http://healthvermont.gov/research/yrbs.aspx>.

There is no new data for adults from the Vermont Department of Health Behavior Risk Factor Surveillance System (BRFSS) to report at this time. Fortunately the Department of Health has included a domestic violence question on the 2014 BRFSS survey instrument and this new data will be available in 2015. The BRFSS is conducted annually in Vermont; for more information on BRFSS, please visit: <http://healthvermont.gov/research/brfss/brfss.aspx>

C. Vermont Department of Corrections

According to the Vermont Department of Corrections, 1,662 persons were in the custody or under the supervision of VT Corrections¹ as of December 31, 2013 for domestic violence related offenses². Of those offenders, 458 were incarcerated, 763 were on probation, 169 were on parole, 266 were on furlough status, and 6 could not be easily identified from the available data. These numbers represent an increase of 324 persons over our June 2011 numbers, an increase of 120 incarcerated and 204 persons under community supervision.

Of the overall population of 2080 offenders incarcerated on December 31, 2013, 458 or 22.02% were incarcerated for a domestic violence related offense (all violent offenders accounted for 1,216 or 58.46% of the incarcerated population).³

Of the overall population of 8606 offenders under community supervision on December 31, 2013, 1,204 or 13.99% were under supervision for a domestic violence related offense (all violent offenders accounted for 2841 or 33.01% of the community population).

Importantly, the domestic violence numbers above only reflect persons for whom the designated domestic violence offense is the most serious offense. The Department cautions that there are domestic violence offenders with other charges which are deemed more serious by Corrections for classification purposes (e.g. sexual assault, kidnapping, homicide). Thus, the domestic violence numbers given here are somewhat lower than the actual numbers.

D. Vermont Network Against Domestic and Sexual Violence

During 2013 the fourteen member programs of the Vermont Network Against Domestic and Sexual Violence (the Network) received and responded to 24,389 hotline and crisis calls; an increase of 138% in the last two years.

The Network's member programs statewide saw 29,946 person nights in shelters and safe homes for 2013. This number continues to climb as survivors and their children

¹ Under the supervision of the Department of Corrections includes: prison; reentry; pre-approved furlough; home detention; home confinement; supervised community sentence; parole; work crew; and probation.

² The offenses include misdemeanor domestic assault; misdemeanor and felony violations of abuse prevention orders; 1st and 2nd degree aggravated domestic assault; and misdemeanor and felony stalking.

³ The percentages given for incarcerated violent and DV offenders are somewhat low, because the total population count is a bit inflated in that it includes federal detainees and others not held in connection with Vermont Charges.

need to stay in shelter for longer periods of time due to a lack of safe, affordable housing options. In all, 827 survivors were housed in shelters and safe homes statewide. Even more troubling, more than 600 people were unable to be housed in shelters in 2013 because of lack of available space. These individuals received other services from programs, but many were forced to seek other places to stay including hotels, staying on couches with friends or family, sleeping in cars or campgrounds, or returning to an abusive partner.

Altogether, 8,492 victims of domestic violence and 827 victims of sexual violence reached out to the Member Programs of the Network over the course of the year.

Emergency financial assistance was provided to 717 victims. Some of this support came through an innovative collaboration between the Network and the state's Office of Economic Opportunity.

347 children were housed in Network shelters or safe homes in 2013. 1,085 children received services other than shelter, and Network Programs served 286 child victims of sexual violence.

239 Vermonters over the age of 60 received services from Network Programs. 1,711 Vermonters with disabilities received services from the Network Programs in 2013.

On a bright note, Network Member Programs' prevention and education work throughout the state reached 11,717 children and 5527 adults. These numbers continue to rise as Programs reach out to communities to raise awareness of domestic and sexual violence and prevent violence before it occurs.

E. Vermont Department for Children and Families

During 2013, the Vermont Department for Children and Families, Family Services Division received two thousand seven hundred and fifty-six (2,756) intake calls that identified co-occurring domestic violence and child maltreatment. Eight hundred and eighty-six (886) of these reports were accepted for a child safety intervention (investigation or assessment).

One hundred and fifty-seven (157) of these child safety interventions resulted in a substantiation of child maltreatment.

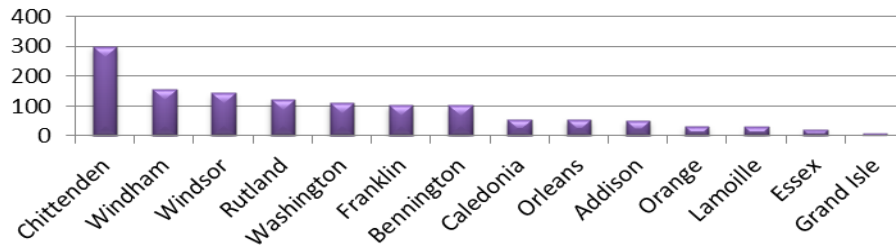
F. Vermont Center for Justice Research and Office of Court Administrator

According to the Office of Court Administrator, for FY 2013, there were 3,549 felony criminal cases filed in the District Court statewide and 461 or 13% were domestic violence charges. During the same time period, 14,208 non-felony cases were filed and 815 of those or 6% were misdemeanor domestic violence charges.

According to the Vermont Center for Justice Research, for FY 2013, 1,293 domestic assault charges were resolved by plea or trial. Of these, 359 were felonies and 934

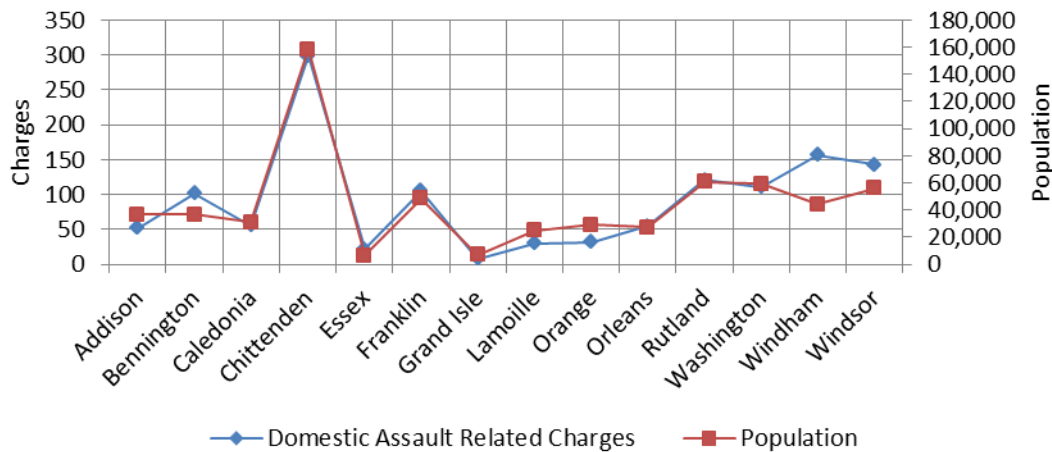
were misdemeanors. The vast majority of the cases were resolved by plea, with only 18 felonies (5%) and 17 misdemeanors (1%) going to trial.

Domestic Assault Charges by County



The counties with the highest numbers of domestic assault charges for FY 2013 were: Chittenden 299 charges or 23.1%; Windham 157 charges or 12.1%; Windsor 143 charges or 11.1%; Rutland 121 charges or 9.4%; Washington 111 charges or 8.6%; Franklin 105 charges or 8.1%; Bennington 102 charges or 7.9%. The remaining counties cases were in descending order: Caledonia 56 charges or 4.3%; Orleans 55 charges or 4.3%; Addison 52 charges or 4%; Orange 32 charges or 2.5% Lamoille 30 charges or 2.3%; Essex 22 charges or 1.7%; Grand Isle 8 charges or .6%.

Domestic Assault Related Charges by Population by County



The county domestic assault charge data when compared with 2010 Census County population data demonstrates some variations and some consistencies:

- Chittenden: 25% of VT population / 23.1% VT cases
- Windham: 7.1% VT population / 12.1% of VT cases
- Windsor: 9% of VT population / 11.1% of VT cases
- Rutland: 9.8% of VT population / 9.4% of VT cases
- Washington: 9.5% of VT population / 8.6% of VT cases
- Franklin: 8% of VT population / 8.1% of VT cases
- Bennington: 6% of VT population / 7.9% VT cases
- Caledonia: 4.9% of VT population / 4.3% of VT cases
- Orleans: 4.1% of VT population / 4.3% of VT cases
- Addison: 5.7% of VT population / 4% of VT cases
- Orange: 4.5% of VT population / 2.5% of VT cases
- Lamoille: 3.9% of VT population / 2.3% of VT cases
- Essex: 1% of VT population / 1.7% of VT cases

Grand Isle: 1.1% of VT population / .6% of VT cases.

Out of the 1,293 domestic cases filed in FY 2013, the conviction rate is 43.6% (564 cases). Slightly over half (51.6% or 667 cases) were nolle prosequi (dismissed by the prosecutor), but it is important to note that in some cases defendants may have pled to one charge and had one or more charges dismissed as part of a plea. Given the high number of cases resolved by plea, it would not be surprising if this accounts for a large percentage of the cases dismissed by the state. Unfortunately the way the statistics are currently kept would not allow us to break down this information in this way, and this is something we hope the court administrator's office will consider doing for future reports. A small number (4) or .3% of the cases were dismissed by the court. A handful of cases (6 or .5%) were transferred to juvenile court and 4 (.3%) cases were deemed "other" and it is unclear how they were resolved.

In terms of sentencing for FY 2013 for misdemeanor domestic assault charges, most defendants received probation (41.9%), 23.1% of the charges were resolved with deferred sentences, 21.7% received straight incarceration sentences and 11.7% received a split sentence with incarceration followed by probation and 1.4% resolved with a fine.

Regarding felony domestic assault convictions from FY 2013, 66.1% of the defendants received incarcerative sentences. 11.8% of the defendants received a split sentence of incarceration and probation and 14.2% received straight probation. Of the felonies, 7.9% resulted in a deferred sentence and no defendants received only a fine.

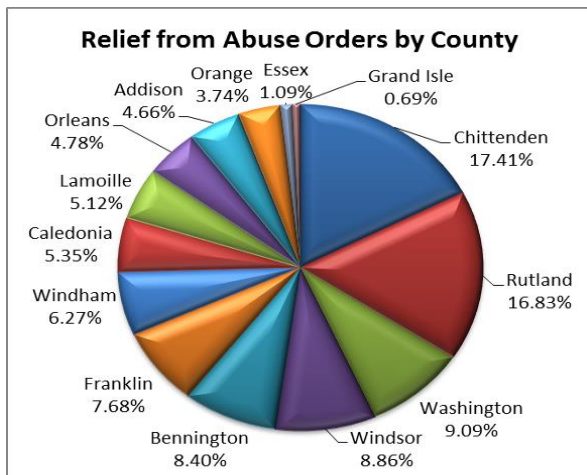
In FY 2013, 66.1% of the defendants convicted of felony domestic assault received prison sentences.

G. Relief from Abuse Orders

For FY 2013, according to the Office of Court Administrator, there were 3,475 petitions for relief from abuse orders filed. Of the 3,506 orders disposed in this time period, 2,726 or 78% temporary orders requested were granted and of those, 1,130, or 41% were granted final orders.

Of the 3,506 petitions for relief from abuse disposed in FY 2013, 41% resulted in a final order issued by Vermont Courts.

The counties with the highest percentages of relief from abuse order petitions filed were:



Chittenden 605 (17.41%); Rutland 585 (16.83%); Washington 316 (9.09%), Windsor 308 (8.86); Bennington 292 (8.40%); Franklin 267 (7.68%); Windham 218 (6.27%); Caledonia 186 (5.35%); Lamoille 178 (5.12%); Orleans 166 (4.78%); Addison 162 (4.66%); Orange 130 (3.74%); Essex 38 (1.09%); Grand Isle 24 (0.69%).

When comparing these percentages to Vermont’s population, it is noteworthy that Rutland County contains 10% of the State’s population but has nearly the same number of relief from abuse petitions filed as Chittenden County which represents 25% of the population.

H. Stalking and Sexual Assault Orders

Title 12 provides for protection orders for non-household and non-family members regarding stalking and sexual assault. For FY 2013, according to the Office of Court Administrator, in Superior Courts statewide, out of 676 orders requested, 462 **temporary** stalking orders were granted (68%) and 147 (33%) stalking **final** orders were granted and 305 (67%) were denied. In Superior Courts statewide, there were 19 sexual assault **final** orders and 34 **temporary** sexual assault orders issued.

For FY 2013, Vermont Superior Courts issued 19 final sexual assault orders and 147 final stalking orders.

Of the final stalking orders issued, the counties with the highest percentages were as follows:

- Rutland 24% of final stalking orders / 9.8% of VT population;
- Caledonia 14% of final stalking orders / 4.9% of VT population;
- Windsor 11% of final stalking orders / 9% of VT population; and
- Bennington 10% of final stalking orders / 6% of VT population.
- Chittenden 10% of final stalking orders/ 25% of VT population

It is interesting that Chittenden, with the state’s most populous county according to the 2010 census (156,545 or 25% of the population) had only 10% of the final stalking orders in the state, the same number as Bennington who has a population of 37,125, about 1/5 the population size.

In Superior Courts statewide for FY 2013, out of 44 sexual assault orders requested, there were 34 (77%) **temporary** orders issued. There were 19 (58%) sexual assault **final** orders granted and 14 (42%) denied. Chittenden had the most requests (14) followed by Orleans (9) and Windsor (8).

I. Batterer Intervention Programs

As part of the statewide standards and certification process adopted by Vermont's Domestic Violence Council, as of January 2013, every county has access to at least one certified batterer intervention program.⁴ Certified programs are reviewed every two years to maintain their certification and are required to be participants in their community domestic violence taskforces, in an effort to enhance the coordinated community response to victim safety and offender accountability.

The 2013 enrollment data for the Vermont Coalition of Batterer Intervention Services (VCBIS) indicates that there were over 250 new participants in 2013 and 120 who completed the batterer intervention programming. Unfortunately the annual \$50,000 state allocation to batterer intervention programs was not funded for FY 2013-2015, which will place a great strain on program delivery.

IV. PART FOUR: UPDATES ON 2012 RECOMMENDATIONS

In preparing this year's report, the Commission reached out to the applicable agencies to see what progress has been made. The following section contains the 2012 recommendations for which updates are available on past recommendations, followed by the agency's response.

A. Sex Offender Registry at the Department of Public Safety

In 2012 the Commission recommended that:

- More financial resources be allocated for the Sex Offender Registry Division to hire additional staff; continue updating their database; provide a cell phone to the single coordinator; explore initiatives to supervise offenders in the community; address homeless sex offenders; and to follow-up on non-compliance issues by sex offenders in the community.
- As part of the regular registry process, the registry staff be able to have local law enforcement determine the sex offender household status, particularly as it relates to the existence of children, vulnerable adults, weapons, and other potential risk factors. This information should be reported to the registry regularly.
- The registry keep track of offenders who violate the notification provisions, even if their criminal cases are dismissed. The number of sex offender registry violations and convictions should be maintained as a statistic and be made available on the website. This would enable the registry to identify repeat violators and identify them as needing additional supervision and spot checks by law enforcement officers.

⁴ Lamoille County does not have an operational batterer program within the county. Currently the Department of Corrections refers appropriate defendants to a certified batterer program in a neighboring county.

- A protocol be adopted between other states' sex offender registries when a sex offender moves to Vermont and fails to contact the sex offender authorities in Vermont.
- That the county based Special Investigative Units (SIUs) coordinate regular supervision of sex offenders in the community who are not being supervised by probation or parole. The supervision of sex offenders in the community should be made more uniform across the state through the SIUs. The sex offender registry could provide training to law enforcement to coordinate this supervision and to determine a statewide protocol for regular compliance checks.

UPDATE: Department of Safety Response

“After the 2012 Domestic Violence Fatality Review Commission Report was released a number of changes have taken place within the Vermont Sex Offender Registry (VTSOR). These changes relate primarily to increased staff resources and updated technology solutions made available to the VTSOR through internal allocation and federal grants.

Previously, as mentioned within the 2012 report, oversight for both the VTSOR and Marijuana Registry programs were provided by a single state employee. These functions have since been separated and one dedicated staff now serves as VTSOR Coordinator. From a technical perspective a new offender management system (Offender Watch) has been implemented and represents a significant upgrade from the previously utilized system. Highlights of this new system include statewide mapping capabilities, minimization of manual entry through internal calculations, and automatic completion of select fields to reduce the possibility of data-related errors. Additional features include the ability to send electronic address verifications and the ability for offenders to submit address and status updates online (subject to additional staff review).

Additionally the VTSOR works collaboratively with other states regarding the movement of registered offenders across jurisdictional borders. Every state follows unique statutory requirements concerning registration and it is common for the VTSOR to be notified directly by another state with regards to an offender moving to Vermont. Similarly, when an offender notifies the VTSOR that they are moving out-of-state, a message will be sent to the indicated agency utilizing the most efficient transmission method possible (varies by state). Similarly the VTSOR remains responsive to inquiries from prosecutors and law enforcement agencies throughout the state should they wish to consult with the registry prior to any action taken against a registered offender.”

B. Agency of Education (formerly the Department of Education)

In 2012, the Commission recommended that:

- The Department of Education develop domestic violence support systems for school employees including full, part-time, and temporary employees.

- The Department of Education develop domestic violence awareness workshops for all school employees (full, part-time, and temporary) in consultation with the local domestic and sexual violence programs and task forces.
- The Department of Education develop a protocol with the Employment Assistance Program (EAP) for schools that addresses: “When a school employee is the victim of a domestic violence related homicide.”

UPDATE: Response from Employment Assistance Program (“EAP”)

The Commission’s request for an update was forwarded to the Employment Assistance Program, with which the Agency of Education has a contract. The Commission received the following response:

“We are pleased to report that considerable support services and protocols are in place to not only address the aftermath of such a domestic violence tragedy but in fact to help prevent such tragedies in the first place. Invest EAP, the public EAP of the State of Vermont that provides these services to schools through the Vermont Education Health Initiative (VEHI), conducts extensive outreach each year to schools to apprise them of these protocols and services. Routine EAP outreach includes biannual staff orientations onsite for every school, biannual supervisory trainings onsite for every School District/Central Office, posts to the Agency of Education Field Memo outlining EAP benefits, mailings and participation in the year-round VEHI PATH wellness opportunities. Unfortunately, some schools do not choose to afford EAP the opportunity or time to orient their staff. Indeed, some school principals and superintendents, fortunately the exception rather than the rule, do not seem to fully understand or ascribe to the concept of prevention as offered by an EAP and express their desire to handle problems on their own.

These benefits apply to all schools that are members of the Vermont School Board Insurance Trust (VSBIT). School employees may use EAP services regardless of their personal insurance plan.

All schools, school administrators, superintendents, supervisory unions and districts, principals, teachers and support staff are eligible to receive confidential counseling, consultation, resources and referral information from the EAP. EAP staff is all Master’s level or above licensed mental health counselors, social workers, psychologists and marriage and family therapists. EAP staff is located within approximately 15 minutes of any location in Vermont. School employees are strongly encouraged to reach out and call EAP whenever they or anyone they know may be dealing with a domestic violence situation. EAP clinicians work with impacted staff to ensure that personal and workplace safety plans are developed and implemented. When indicated, individuals receive counseling to help them plan safe exits from unsafe relationships and appropriate agencies are contacted to build the individual’s safety net.

All school staff may access the EAP 24/7 at 1-800-287-2173. When counselors do not answer the phone directly, an option is always provided to the caller to speak with a

counselor immediately. Callers with any type of safety concern should follow that prompt and identify their calls as urgent.

All concerned managerial and supervisory staff should call 1-800-287-2173 and ask for a management consultation. The EAP can work proactively to assist everyone involved to implement appropriate safe action plans.

Recently Invest EAP has been in communication with the Vermont Emergency Management, Division of Emergency Management and Homeland Security: Vermont School Crisis Plan and Guide, to add verbiage in the procedures about contacting Invest EAP to provide support to staff following an incident.

When any traumatic incident occurs as a result of domestic violence, school administrators should call our Management Consultation line immediately at 1-888-392-0050. We can then develop a plan with those administrators to meet with and support impacted school personnel. EAP staff typically meets with impacted staff approximately 72 hours after such a traumatic event, as prescribed in the literature. EAP clinicians will arrive on site and provide a Critical Incident Stress Debriefing and Resiliency Training for impacted staff. One-to-one counseling services will also be offered.

Currently these services are available to every school in Vermont. However, it is important to note that due to changes mandated by the Affordable Care Act, schools that choose their health insurance through the Healthcare Exchange rather than through the Vermont School Board Insurance Trust will not have access to the comprehensive EAP without a private contract. This means that unless those schools choose to purchase EAP services on their own, or unless some other funding source can be found, these critical services will cease to exist for those schools.” The agency confirms that there are some school districts that will be exiting this program on June 30, 2014.

C. Domestic Violence Programs

In 2012 the Commission recommended that:

- There be more funding for safe shelter for domestic and sexual violence survivors in Vermont, especially for families with children. In Vermont there are 40 listed animal rescue shelters, while only 10 shelters serve victims of domestic and sexual violence.
- There be more funding for safe transitional housing for victims of domestic violence and their families.
- The community-based domestic violence programs in Vermont establish outreach campaigns regarding domestic violence and safety planning. Campaigns should provide information about lethality risk factors in safety planning and the resources available to victims, especially when they first begin to separate from abusers. Funding should be provided to the domestic violence programs to accomplish this outreach campaign.

Update: Response from the Vermont Network Against Domestic and Sexual Violence

Unfortunately, there has not been a significant increase in funding for emergency shelter, transitional housing, and outreach campaigns for domestic violence programs. In fact, over the past five years, between 2009 and 2013, the fourteen Member Programs of the Vermont Network have seen a dramatic increase in the need for the services they provide to victims and survivors of sexual and domestic violence:

- An increase of 128% in the number of hotline calls;
- An increase of 72% in the number of sexual violence survivors reaching out for help;
- An increase of 49% in the number of shelter-nights provided to survivors and their children;
- An increase of 29% in the number of domestic violence victims served; and
- An increase of 29% in the number of victims sheltered.¹

In 2013, Network Programs provided shelter to 827 individuals (up from 773 in 2010), and more than 600 more people were turned away from shelter due to lack of available beds. These individuals were provided other services, but were forced to go elsewhere in search of a safe place to sleep and regroup – or they may have had to return to an abuser. As of 2013, one-third of all homeless Vermonters in shelter were victims of domestic or sexual violence according to data from the federal Emergency Shelter Grant. Homelessness in Vermont continues to increase, with the largest growth in Vermont's homeless population being families with children.

At the same time that demand for services has steadily increased, programs have struggled with decreases in federal funding levels, the loss of critical statewide federal grants, and state funding that has remained flat for years. Collectively, Network Member Programs have been forced to eliminate the equivalent of 23 full-time positions across the state over the last five years.

The Network does wish to highlight some progress that has been made since the Commission issued its last report. The Vermont Network Against Domestic and Sexual Violence currently receives Emergency Shelter grant funding (via the Office of Economic Opportunity "OEO") solely for the purposes of assisting victims in stabilizing housing by providing emergency rental assistance, as well as help with security deposits, utility arrearages and moving costs. This fund is accessed by all domestic and sexual violence programs throughout the state. In 2013 the Vermont Network's Housing Assistance fund (funded by OEO) served 246 adults and children statewide. In addition, through Allstate Foundation funding, Network program advocates across the state are trained annually in providing financial literacy learning opportunities and asset building tools to the victims they serve. This foundation funding includes partnerships

with Vermont Works for Women and our only statewide community development credit union, Opportunities Credit Union. These efforts have helped decrease barriers to housing (by working to learn more about and improve credit reports and scores), assist victims in job readiness and employment skill-building, and increase sustainable and healthy financial habits.

As to funding for safe transitional housing, six of the local domestic violence programs across the state have received Office of Violence Against Women (OVW) Transitional Housing grants since 2010. These programs have focused on providing advocacy and support, rental assistance, and in some cases actual apartments to victims in need of temporary, long-term housing. Currently four Network programs receive these grants: Women Helping Battered Women in Chittenden County which houses victims in “Sophie’s Place” (a collaborative apartment building with Burlington Housing Authority which includes on site services and rental assistance); and three other scattered-site transitional housing programs in Franklin, Addison and Bennington counties. These four programs served 76 households in 2013, and report that demand far exceeds the housing opportunities currently available. In 2011, the Board of Vermont State Housing Authority eliminated their Section 8 Domestic Violence preference despite advocacy to the contrary. However, the Board did establish a transitional housing preference for those programs receiving these grants and this preference has assisted low-income victims who leave transitional housing with the vouchers necessary to find permanent long term housing.

For victims seeking housing, unemployment can be a huge barrier. The Vermont Network has worked closely with the Vermont Legislature and the Department of Labor to ensure the continued existence and maintenance of a Transitional Employment Program for victims and survivors of domestic violence, sexual violence, and stalking. This program provides temporary, partial wage-replacement to survivors of domestic violence, sexual assault and stalking who need to leave work because of violence and who are ineligible for traditional unemployment compensation benefits.

The Vermont Network continues to seek resources and assistance for victims throughout the state and advocates strongly for victims receiving public benefits. These efforts include legislation related to Reach Up, 3 Squares (food stamps), and General Assistance (emergency housing). In addition, the Vermont Network is an active member of the Vermont Affordable Housing Coalition and the Earned Sick and Safe Days coalition which seeks to pass legislation allowing for victims to take time off for court appointments, advocacy services and other dv related needs without fearing loss of employment.

In December of 2013, the Vermont Network’s Economic Justice Specialist was appointed to the first ever Governor’s Pathways from Poverty Council - a cross-discipline, statewide body of advocates, business owners, landlords, housing

developers, and low-income Vermonters working together to reimagine pathways toward the elimination of poverty in Vermont.

Update: Governor's Task Force on Prevention of Domestic and Sexual Violence

In September 2013, the Governor's Task Force for the Prevention of Domestic and Sexual Violence released a series of recommendations to further prevention efforts statewide, in a coordinated and collaborative manner. Bethany Pombar, Prevention Specialist from the Vermont Network Against Domestic and Sexual Violence, shared information with the Commission about the priorities identified in the full report of the Task Force, which can be found at:

<http://governor.vermont.gov/sites/governor/files/Gov%20Prevention%20of%20Domestic%20and%20Sexual%20Violence%20Taskforce%20Report.pdf>

The Governor's Prevention of Domestic and Sexual Violence Task Force was formed by Governor Peter Shumlin and convened from November 2011 to September 2013. The Task Force was charged with developing recommendations for the administration to enhance primary prevention efforts for domestic and sexual violence in Vermont. Task Force members hailed from a variety of state and private entities with a stake in violence prevention.

Over the lifespan of the Task Force, members formed a number of work groups to collect and analyze data about existing prevention resources, unmet needs, and priorities within the prevention community.

The Task Force drafted recommendations in seven priority action areas:

1. Support the creation and implementation of a comprehensive state plan to prevent domestic and sexual violence ("state plan").
2. Support and help develop a statewide, multi-pronged prevention campaign.
3. Build capacity for bystander engagement strategies for all ages.
4. Increase the engagement of men in domestic and sexual violence prevention.
5. Strengthen Vermont college campuses' response to prevention of domestic and sexual violence.
6. Enhance data collection and accessibility through the creation of a central data collection site.
7. Establish a Violence Prevention Program Coordinator at the state level.

The Commission is pleased to note that the Vermont Department of Health and the Vermont Network Against Domestic and Sexual Violence are jointly leading the effort to implement the number one recommendation of the task force: development of a new

state plan. With funding from the Governor's Office and the Centers for Disease Control, development of the state plan is now underway.

Upon its completion, the expectation is that the state plan will:

- Identify focus areas for researchers, practitioners, and funders;
- Articulate actionable and measurable outcomes;
- Create shared definitions and identify evaluation tools;
- Align with other public health prevention initiatives.

Stay tuned next year for more information on the progress of the state plan and other efforts to implement the task force's recommendations. The Commission wishes to thank and commend all members of the Governor's task force for their hard work in the area of prevention.

D. Children Exposed to Domestic Violence

In 2012 the Commission recommended that:

- More financial resources be provided to the community response to children exposed to domestic violence. This could include additional resources for the Domestic Violence Unit at the Department for Children and Families, Family Services Division, additional funding for Child/Youth Advocates at member programs of the VT Domestic and Sexual Violence Network, specialized children's mental health providers, and specialized parenting programs for fathers who batter their partners.
- The Department for Children and Families, Family Services Division, consider implementing batterer intervention strategies, including referrals and consultation with certified batterer's intervention programs as part of ongoing safety assessment and case planning with families.
- More financial resources be provided to batterer's intervention programs if these programs are expanded into Civil and Family Court proceedings.
- More financial resources be provided to the Vermont Criminal Justice Training Council to enable it to offer on-line training regarding domestic violence and child witnessing.

UPDATE: Response from Vermont Council on Domestic Violence

The Vermont Council on Domestic Violence applauds the efforts of several Vermont communities who are now offering effective programs related to fathering for men who have physically or emotionally abused their children's mothers.

Washington and Bennington counties have crafted coordinated community response initiatives in recognition of the need for men convicted of abuse toward their female partners to engage in an intervention program aimed at increasing men's awareness of, and responsibility for, abusive and neglectful fathering behaviors and their impact on children.

Washington County created the "Parenting with Respect" program, and Bennington County's collaboration has chosen to use the "Caring Dads" curriculum. Each program provides both accountability and appropriate parent education for men who have used violence against the mother and connects the impact of this abuse on the children.

UPDATE: Response from Department for Children and Families ("DCF")

- DCF has been moving to sustain the current DCF domestic violence unit beyond the federal grant funds supporting the positions.
- In May 2013, DCF Family Services Division brought David Mandel and Associates to VT for a two-day training on the Safe & Together Model. This model is a perpetrator-pattern-based, child-centered, survivor- strengths approach to domestic violence specially designed for a child welfare systems response. Every district office in the state sent representatives to at least one day of this training. In addition, the DCF Domestic Violence Unit in partnership with UVM Child Welfare Training Partnership have provided four district specific trainings on the implementation of this model to improve safety assessments of risks to children posed by battering parent. This work is continuing around the state.
- In addition, the DCF Domestic Violence Unit has met with Spectrum Youth and Families to discuss improved referrals by DCF offices to the Domestic Violence Solutions Program.
- DCF Family Services published a Position Paper specific to domestic violence to support best practice responses to domestic violence in the context of child protection, and youth justice.
- Implementation of online domestic violence training for all Agency of Human Services staff that includes sections on *Understanding Domestic Violence, the Impact on Children, and Through a Batterer's Eyes*, which can be found at <https://www.ahsnet.ahs.state.vt.us/DVTraining/index.html>.
- The Vermont Training Council has begun offering online training for police officers known as the "Kids and Cops" Training. This training provides officers with important knowledge about child development, the impact of battering on children and best practice protocol when police respond to children. Elements of the protocol include assessing whether there are children present and, if so, have they been harmed; empowering children; victim safety; officer safety; and making arrests when children are present and when to make a report to DVF. The training council reports that 1296

officers have completed the Kids and Cops training, nearly 2/3 of all active police officers.

V. PART FIVE: RESPONSES TO PAST RECOMMENDATIONS

The Commission has been conducting case reviews and making recommendations since 2003. These recommendations were published in the prior Commission Reports and presented to the respective agencies and organizations by Commission members. The following includes recommendations for which updates were available.

A. Law Enforcement Training 2011 Recommendation

The Commission recommended that:

- Law enforcement receive training on the issue of service of court paperwork as defined by Vermont statutes. The training should address:
 - Prompt service of protection order paperwork and prompt notice to plaintiff to ensure the plaintiff's safety especially in rural isolated areas.
 - When serving a protection order, that notice not be provided to the alleged defendant's family beforehand.
 - A recommendation that the plaintiff or the plaintiff's attorney be advised of the fact that the defendant is going to be cited for a criminal charge when the plaintiff is the victim in the criminal matter.

Action Taken:

According to the Vermont Criminal Justice Training Council, the prompt service recommendation is now covered in every officer's initial training. It was also covered in the 2010/2011 mandatory domestic violence training for all law enforcement. The statutory language is covered in initial training.

Regarding the other recommendations, they have been included in the initial training new officers receive beginning in 2012. It is also part of the 2014 mandatory domestic violence training so that all current officers are aware of these recommendations.

Initial training also includes the Commission's recommendation that agencies include a policy to notify family members of severe injuries in addition to death notification.

B. Courts

2010 Recommendation

The Commission notes that nationwide integrated domestic violence courts are being established to streamline the prosecution of civil and criminal domestic violence matters and to provide services to the litigants.

Action Taken

At the time of this recommendation, Bennington had undertaken an integrated domestic violence court. Though that court was discontinued, it showed great success from this model. According to research done by the Vermont Center for Justice Research, the Bennington IDV court showed lower rates of recidivism, reconviction, quicker case processing and better service referrals than similar cases statewide during the study period of January 1, 2007 to December 31, 2010. The Commission is extremely pleased that Vermont will once again have an IDV court beginning this fall in Windham County. The Windham IDV court is the result of a federal Violence Against Women Act grant. It will incorporate many of the best practices noted in the Commission's 2010 report, including consolidation of the parties' entire case history in front of one judge, hearing probation violations promptly, providing litigants with access to counsel at relief from abuse hearings, and integrated vertical prosecution of cases.

C. Firearms

2009 Recommendation

The Commission recommended that:

- The Vermont legislature consider adoption of a law that would govern the relinquishment, inventory, storage and return of guns for defendants subject to final relief from abuse orders.
- The Commission recommends that family members not be given the responsibility of storing defendant's weapons.

Action Taken:

The legislature responded to recommendations of the Fatality Review Commission by passing new legislation in 2014 that sets up a statutory process for storage of firearms ordered to be relinquished under protection orders. The new law authorizes storage by law enforcement agencies and Federally Licensed Firearms Dealers and allows them to collect a fee to cover their costs.

Under the new law, third parties may be used unless the court finds that this option will not adequately protect the victim's safety. Third parties who offer to store surrendered firearms must be approved by the court and must sign an affidavit stating that they acknowledge receipt of the weapons, assume responsibility for them and stating how they will keep them secure, swearing that they are not themselves prohibited from possessing firearms, and stating that

they understand their obligations and requirements under the court order. If a third party allows the defendant or any prohibited person to access the weapons, then they can be held in civil contempt of court (which can range from fines to imprisonment).

A person or entity storing firearms may only release them back to the defendant with a court order. If a defendant doesn't pay the associated fees the storage agency can sell the weapons after notifying the defendant; proceeds from the sale will cover costs of storage and any remaining proceeds go back to defendant.

While the Commission is pleased that the legislature has addressed the recommendation to facilitate secure storage of firearms, the Commission is concerned about the third party storage provision. Third party storage, especially with family members, is strongly discouraged by the Commission. In our recommendations in 2009, the Commission noted that this responsibility should not rest with family members, even if they are willing to assume this role. The Commission believes this will pose a real risk to a victim's safety based on our review of past cases where family members were involved in providing storage of firearms.

The Department of Public Safety will create guidelines to govern the storage process and the Supreme Court will draft court rules and forms. This new law will take effect on July 1, 2014.

This simple change promises to make a real difference in the safety of survivors of domestic violence working to free themselves from abusers. The Commission is gratified that the legislature and administration worked to achieve this important policy change.

D. Lethality Assessment and Law Enforcement 2009 Recommendation

The Commission recommends that law enforcement consider using risk or danger assessment tools when responding to intimate partner violence cases in order to assess the dangerousness of the defendant and the victim's need for services.

Action Taken

The Commission is pleased to report that Rutland County was selected as one of 12 jurisdictions nationwide to participate in the Domestic Violence Homicide Prevention Initiative, a national initiative of the Department of Justice. The Rutland County project is in a planning and assessment phase, and plans to apply for continued funding to implement a high risk offender monitoring program and a lethality risk assessment screening protocol. Rutland County has already piloted the lethality assessment screening (LAP) tool with all law enforcement agencies and reports that it is working well. Washington County law enforcement agencies are also using a LAP tool in partnership with Circle, their local domestic

violence advocacy program, and are seeing success through team building in their community. The Commission hopes that these successful pilot projects will lay the groundwork for the use of LAP tools statewide by law enforcement, health care providers and other agencies that encounter domestic violence victims in their day to day operations.

**E. Vermont Employers
2008 Recommendation:**

The Commission encourages all Vermont employers to review their existing workplace and domestic violence policies and to consider adopting policies if none exist and train all employees.

Action Taken:

In May of 2012, Governor Peter Shumlin announced the state of Vermont's adoption of a Domestic and Sexual Violence Workplace Policy for all state employees.

Attorney General William Sorrell and Governor Shumlin jointly pledged their support for the policy.

The State of Vermont's Domestic and Sexual Violence Workplace Policy provides employees subject to domestic and sexual violence with an opportunity to simultaneously address their personal needs and work obligations. The State's policy assures victim/survivors that they will not be subject to discipline or discriminated against because they are victims/survivors of domestic or sexual violence.

An introductory training developed in collaboration with the multi-disciplinary Domestic and Sexual Violence Workplace Committee was delivered to the State Department of Human Resources' Field Operations Staff in January of 2013, and the committee has made formal recommendations related to a Domestic and Sexual Violence Workplace training to be included in a comprehensive curriculum for supervisors and managers, as well as a training for all Vermont state employees.

CONCLUSION

Vermont's Domestic Violence Fatality Review Commission wants to thank all of our witnesses, family members, state agencies and community partners for their collaboration and conscientious efforts over the past years. We are inspired by the steps taken in response to our recommendations and hope to have more progress to report next year toward our goal of ending domestic violence in Vermont. We encourage community members to continue to provide us suggestions and to refer cases for the Commission to review. A case referral form is attached as Appendix D.

The Commission looks forward to continuing our work together to keep Vermonters safe.

APPENDIX A

NO. 88. AN ACT RELATING TO THE DOMESTIC VIOLENCE FATALITY REVIEW COMMISSION. (H.728)

It is hereby enacted by the General Assembly of the State of Vermont:

§ 1. 15 V.S.A. chapter 21, subchapter 2 is added to read:

Subchapter 2. Domestic Violence Fatality Reviews

§ 1140. DOMESTIC VIOLENCE FATALITY REVIEW COMMISSION

(a) The domestic violence fatality review commission is established within the office of the attorney general, in consultation with the council on domestic violence, for the following purposes:

(1) To examine the trends and patterns of domestic violence-related fatalities in Vermont.

(2) To identify barriers to safety, the strengths and weaknesses in communities and systemic responses to domestic violence.

(3) To educate the public, service providers and policymakers about domestic violence fatalities and strategies for intervention and prevention.

(4) To recommend policies, practices and services that will encourage collaboration and reduce fatalities due to domestic violence.

(b) The commission shall be comprised of 15 members, consisting of the following:

(1) the attorney general, or his or her designee;

(2) the commissioner of the department of health, or his or her designee;

(3) the commissioner of social and rehabilitation services, or his or her designee;

(4) the commissioner of the department of corrections, or his or her designee;

(5) the commissioner of the department of public safety, or his or her designee;

(6) the chief medical examiner, or his or her designee;

(7) a state's attorney with experience prosecuting domestic violence cases, appointed by the executive director of the Vermont state's attorneys' association;

(8) the defender general, or his or her designee;

(9) a member of the Vermont coalition of batterer intervention services;

(10) a member of the Vermont network against domestic violence and sexual assault;

(11) a representative of the Vermont council on domestic violence;

(12) a representative of local law enforcement, appointed by the governor;

(13) a victim or survivor of domestic violence, appointed by the Vermont network against domestic violence and sexual assault;

(14) a physician, appointed by the governor; and

(15) the executive director of the Vermont criminal justice training council, or his or her designee.

(16) the commissioner of the Department of Mental Health, or his or her designee;
and

(17) one judge, appointed by the Chief Justice of the Vermont Supreme Court.

(c) In any case subject to review by the commission, upon written request of the commission, a person who possesses information or records that are necessary and relevant to a domestic violence fatality review shall, as soon as practicable, provide the commission with the information and records. A person who provides information or records upon request of the commission is not criminally or civilly liable for providing information or records in compliance with this section. The commission shall review

fatalities which are not under investigation and fatalities in cases that are post adjudication which have received a final judgment.

(d) The proceedings and records of the commission are confidential and are not subject to subpoena, discovery or introduction into evidence in a civil or criminal action. The commission shall disclose conclusions and recommendations upon request, but may not disclose information, records or data that are otherwise confidential, such as autopsy records. The commission shall not use the information, records or data for purposes other than those designated by subsections (a) and (g) of this section.

(e) The commission is authorized to require any person appearing before it to sign a confidentiality agreement created by the commission in order to maintain the confidentiality of the proceedings. In addition, the commission may enter into agreements with nonprofit organizations and private agencies to obtain otherwise confidential information.

(f) Commission meetings are confidential, and shall be exempt from chapter 5, subchapter 2 of Title 1 (open meetings law). Commission records are confidential, and shall be exempt from chapter 5, subchapter 3 of Title 1 (public access to records).

(g) The commission shall report its findings and recommendations to the governor, the general assembly, the chief justice of the Vermont supreme court, and the Vermont council on domestic violence no later than the third Tuesday in January of the first year of the biennial session. The report shall be available to the public through the office of the attorney general. The commission may issue data or other information periodically, in addition to the biennial report.

§ 2. EFFECTIVE DATE

This act shall take effect upon passage, and shall terminate upon termination of grant funding, administered by the Vermont center for crime victim services, from the Violence Against Women office of the United States Department of Justice for an assistant attorney general assigned to the criminal division and designated as a domestic violence coordinator.

Approved: May 2, 2002

APPENDIX B - COMMISSION DEFINITION OF DOMESTIC VIOLENCE RELATED FATALITY

When determining whether a fatality is domestic violence related for data collection and/or full case review, the Executive Committee and the full Commission may consider the following criteria.

Whether:

- a. the responsible party was related to the victim as a "family member" according to the "plain and commonly accepted meaning" of the term. Donley v. Donley 165 Vt. 619 (1996);
- b. the responsible party and victim qualify as having a reciprocal beneficiaries relationship as defined at 15 V.S.A. § 1303¹ and as noted as "family" in the Abuse Prevention statute at 15 V.S.A. § 1101(6)²;
- c. the responsible party and victim were related as "household members" under the Abuse Prevention Act at 15 V.S.A. § 1101(2)³;
- d. the responsible party killed an estranged partner's current "household member"⁴;
- e. the responsible party killed a current partner's estranged "household member"⁵;
- f. the responsible party killed a family member's current or estranged "household member"⁶;
- g. the responsible party killed bystander(s) while attempting to harm family or "household members";
- h. the responsible party is a law enforcement officer forced to kill in the line of duty when responding to a domestic violence incident;
- i. a law enforcement officer is killed in the line of duty when responding to a domestic violence incident;
- j. the fatality is domestic violence related but is ruled a justifiable homicide;
- k. the fatality is a murder-suicide matter involving family or household members;
- l. the fatality is a suicide where there is documented history of domestic violence to include victim suicide; alleged perpetrator suicide (as violent act in front of family or household members); alleged perpetrator suicide by law enforcement and teen suicide;

¹ For a reciprocal beneficiaries relationship to be established in Vermont, it shall be necessary that the parties satisfy all of the following criteria: (1) be at least 18 years of age and competent to enter into a contract; (2) Not be a party to another reciprocal beneficiaries relationship, a civil union or marriage; (3) Be related by blood or by adoption and prohibited from establishing a civil union or marriage with the other party to the proposed reciprocal beneficiaries relationship; (4) Consent to the reciprocal beneficiaries relationship without force, fraud or duress. 15 V.S.A. § 1303

² "Family" shall include a reciprocal beneficiary. 15 V.S.A. § 1101 (6)

³ "Household members" means persons who, for any period of time, are living or have lived together, are sharing or have shared occupancy of a dwelling, are engaged in or have engaged in a sexual relationship, or minors or adults who are dating or who have dated. "Dating" means a social relationship of a romantic nature. Factors that the court may consider when determining whether a dating relationship exists or existed include: (a) the nature of the relationship; (b) the length of time the relationship existed; (c) the frequency of interaction between the parties; (d) the length of time since the relationship was terminated, if applicable. 15 V.S.A. § 1101 (2) **If the nature of the relationship is not immediately apparent, the Commission gives considerable weight to these same factors in deciding whether a homicide should qualify as a domestic.**

⁴ See Footnote 3 for definition of "household member"

⁵ See Footnote 3 for definition of "household member"

⁶ See Footnote 3 for definition of "household member"

m. the fatality is a substance abuse related death (chronic abuse, suicide, overdose) that is related to domestic violence.

APPENDIX C - DOMESTIC VIOLENCE FATALITY REVIEW COMMISSION MEMBERS

Pursuant to 15 VSA § 1140(b), the Commission is comprised of 17 members, consisting of the following:

- The Attorney General, or his or her designee;

Carolyn Hanson
Assistant Attorney General
Office of Attorney General
109 State Street
Montpelier, VT 05609
802-828-5512 phone
802-828-2154 fax
chanson@atg.state.vt.us

- The Commissioner of the Department of Health, or his or her designee;

Kimberly Swartz, MHSc
Director, Preventative Reproductive Health
Division of Maternal and Child Health
Vermont Department of Health
108 Cherry St., PO Box 70
Burlington, VT 05402
802-865-1338 phone
kimberly.swartz@state.vt.us

Alternate:
Sally Kerschner, RN, MSN

Vermont Department of Health
108 Cherry St., PO Box 70
Burlington, VT 05402
802-652-4179 phone
sally.kerschner@state.vt.us

- The Commissioner of Department for Children and Families, or his or her designee;

Ellie Breitmaier
Coordinator of the Domestic Violence Unit
Department For Children and Families
103 S. Main St.
Waterbury, VT 05671
802-769-6314 phone
ellie.breitmaier@state.vt.us

- The Commissioner of the Department of Corrections, or his or her designee;

Rick Bates
District Manager
VT Department of Corrections
Brattleboro, VT
rick.bates@state.vt.us

- The Commissioner of the Department of Public Safety, or his or her designee;

Lt J.P. Sinclair
Chief Criminal Investigator - BCI
Department of Public Safety
103 S. Main St.
Waterbury, VT 05671
802-241-5566 phone
Jean-Paul.Sinclair@state.vt.us

- The Chief Medical Examiner, or his or her designee;

Dr. Steve Shapiro
Office of Medical Examiner
Department of Health
111 Colchester Ave. Baird 1
Burlington, VT 05401
802-863-7320 phone
Steven.shapiro@state.vt.us

- A State's Attorney with experience prosecuting domestic violence cases, appointed by the Executive Director of the Vermont State's Attorneys' Association;

Megan Campbell
Washington County State's Attorney's Office
255 North Main Street
Barre, VT 05641
802-479-4220 phone
802-479-4408 fax
Megan.campbell@state.vt.us

- The Defender General, or his or her designee;

Matthew Valerio
Defender General's Office
6 Baldwin Street, 4th Floor
Montpelier, VT 05620-3301
802-828-3191 phone
802-786-3803 Alt. phone
matthew.valerio@state.vt.us

Alternate:
Robert Sheil
Defender General's Office
6 Baldwin Street, 4th Floor
Montpelier, VT 05620-3301
802-828-3168 phone
802-828-3163 fax
bob.sheil@state.vt.us

- A member of the Vermont Coalition of Batterer Intervention Services;

Cynthia Hakansson
Vermont Coalition of Batterer Intervention Services
Spectrum Youth & Family Services
31 Elmwood Avenue
Burlington, Vermont 05401
802-864-7423 ext. 217 phone
802-540-0116 fax
chakansson@spectrum.org

- A member of the Vermont Network Against Domestic and Sexual Violence;

Sarah Kenney
Public Policy Coordinator
The Vermont Network Against Domestic and Sexual Violence
PO Box 405
Montpelier, VT 05601
802-223-1302 phone
802-223-6943 fax
sarahk@vtnetwork.org

- A representative of the Vermont Council on Domestic Violence;

Heather Holter
Coordinator
Vermont Council on Domestic Violence
Montpelier, Vermont
heather_holter@tds.net

- A representative of local law enforcement, appointed by the Governor;

W. Samuel Hill, Sheriff
Washington County Sheriff's Department
10 Elm Street
Montpelier, VT 05602
802-223-3001 phone
samuel.hill@state.vt.us

- A victim or survivor of domestic violence, appointed by the Vermont Network Against Domestic and Sexual Violence;

Susan Hardin

- A physician, appointed by the Governor;


Dr. Gail Yanowitch
 Associates on Gynecology and Obstetrics
 Berlin, Vermont 05602
Yanowitchg@gmail.com
- The Executive Director of the Vermont Criminal Justice Training Council, or his or her designee;

TJ Anderson
 Training and Curriculum Coordinator
 Vermont Criminal Justice Training Council
 Vermont Police Academy
 317 Academy Road
 Pittsford, VT 05763-9712
 802-483-6228 ext 13 phone
 802-483-2343 fax
tj.anderson@state.vt.us
- The Commissioner of the Department of Mental Health, or his or her designee;

Susan Onderwyzer Ed.D LICSW LADC
 Director of Mental Health Services
 Vermont Department of Mental Health
 Agency of Human Services
 26 Terrace St.
 Montpelier, VT
 802-828-3856 phone
susan.onderwyzer@state.vt.us
- One Judge, appointed by the Chief Justice of the Vermont Supreme Court.

The Honorable Cortland Corsones
 Rutland Superior Court
 Family Division
 9 Merchants Row
 Rutland, VT 05701
cortland.corsones@state.vt.us

APPENDIX D: COMMISSION CASE REFERRAL FORM

	DOMESTIC VIOLENCE FATALITY REFERRAL FORM Domestic Violence Fatality Review Commission Office of the Attorney General - Criminal Division 109 State Street - Montpelier, VT 05609	OFFICIAL USE ONLY	
		Received	By

INSTRUCTIONS

Please answer the questions below as completely as possible to assist the Commission in determining whether we are able to review this death. Please note that you can refer this case to the Commission but, by statute, we cannot review a case until the court proceedings are over and the investigation is closed. In the meantime, we can include the case for statistical purposes. But depending upon the legal status of your referred case there may be a significant delay before the Commission could consider it for review.

Additionally, if you need assistance completing this form or would like to communicate the information in a different manner please call the Office of Attorney General, Criminal Division, at (802) 828-5512. This form is also available on the Office of Attorney General's web page at <http://www.atg.state.vt.us>.

PLEASE PRINT ALL INFORMATION

Name of Victim (including aliases)		Name of Parent/Guardian (if under 18)	
Date of Birth (or approximate age)		Date of Death	Town/City where death occurred
Address of Victim (if known)	Street	City	State
Describe how death occurred including any history of domestic violence or abuse (please note that the abuse does not have to be documented through official sources such as the police or courts):			
Person you believe is responsible for this death (including aliases)			
Date of Birth or approximate age of person you believe is responsible		Relationship of the victim to the person you believe is responsible	
Other people having information about this death: (use another sheet if necessary)			
Name	Address	Phone	
Name	Address	Phone	
Was this death investigated and if so by whom:			
A short explanation why you want the death reviewed (use additional pages if necessary.)			
The Commission welcomes any other information you may wish to provide which would help us understand the history and circumstances of the fatality. Anonymous referrals can be made as long as there is sufficient information to be able to identify the fatality; however, if possible, contact information for the person making the referral would be appreciated.			
SUBMITTED BY			
Name			
Address		Town/City	State
Contact Phone 1		Contact Phone 2	
Send completed forms to: Office of Attorney General, 109 State Street, Montpelier, VT 05609 ATT: Criminal Division/Domestic Violence Fatality Review Commission			



STATE OF VERMONT
OFFICE OF THE ATTORNEY GENERAL
DOMESTIC VIOLENCE FATALITY REVIEW COMMISSION

The Domestic Violence Fatality (Death) Review Commission is established in the Office of Attorney General in consultation with the Council on Domestic Violence under 15 V.S.A. § 1140.

The purposes of the Commission are (A) to examine the trends and patterns of domestic violence-related deaths in Vermont; (B) to identify barriers to safety, and strengths and weaknesses in communities and systemic responses to domestic violence; (C) to educate the public, service providers and policymakers about domestic violence deaths and strategies for intervention and prevention; and (D) to recommend policies, practices and services that will encourage collaboration and reduce fatalities due to domestic violence.

All proceedings and records of the Commission are confidential and are not subject to subpoena, discovery or introduction into evidence in a civil or criminal action. Records include oral and written communications.

The Commission shall report its findings and recommendations in a public report. The Report shall contain general statistical data regarding deaths as well as findings and recommendations related to case reviews but will not contain case specific information. The report shall examine general trends and patterns with the goal of reducing domestic violence related deaths.

Questions or comments concerning the Commission can be directed to:

Office of the Attorney General
Criminal Division
109 State Street
Montpelier, Vermont, 05609.
Telephone 802-828-5512

On the Web - <http://www.atg.state.vt.us/>

APPENDIX E

2011 PROTOCOL between VERMONT COUNCIL ON DOMESTIC VIOLENCE and VERMONT DOMESTIC VIOLENCE FATALITY REVIEW COMMISSION

Background

Pursuant to H.278, the Domestic Violence Fatality Review Commission was established in May of 2002 within the Office of the Attorney General, in consultation with the Council on Domestic Violence, now the Vermont Council of Domestic Violence, for the following purposes:

1. To examine the trends and patterns of domestic violence-related fatalities in Vermont.
2. To identify barriers to safety, the strengths and weaknesses in communities and systemic responses to domestic violence.
3. To educate the public, service providers and policymakers about domestic violence fatalities and strategies for intervention and prevention.
4. To recommend policies, practices and services that will encourage collaboration and reduce fatalities due to domestic violence.

See, Sec. 1. 15 V.S.A. chapter 21, subchapter 2.

The Statute as enacted does not define the term “in consultation with the Council on Domestic Violence”.

The Council had been created in 1993 by Executive Order and was codified in 2008 and re-named the Vermont Council on Domestic Violence at 15 V.S.A. §§ 1171 – 1173. The Vermont Council provides leadership for Vermont’s statewide effort to eradicate domestic violence. In the Vermont Council’s statute one of its responsibilities is to “collaborate with the Vermont Fatality Review Commission to develop strategies for implementing the Commission’s recommendations.” 15 V.S.A. § 1172(b).

Agreement

In an effort to promote statewide coordination of advocacy and public awareness, the Council and the Commission will work in consultation with each other. In addition, the Council and Commission will collaborate on developing strategies for the implementation of the Commission’s recommendations. To meet these ends, the Council and the Commission adopt the following agreement.

1. The Council Coordinator will serve as the Council Representative to the Commission (the Council Representative).
2. The Council Representative will serve with the Chair of the Commission as the Executive Committee of the Commission.
3. The Council Representative will be authorized by the Council to represent the Council's position on any aspect of the Commission's work.
4. The Council Representative will report to and obtain guidance from the Council related to the ongoing work of the Commission. This discussion may, but will not be required to, include providing drafts of Commission reports to the Council, information regarding the collection of statistical data and general information regarding the review of individual cases.
5. The Council Representative is subject to the signed Commission Member confidentiality agreement and cannot report confidential information to the Council.
6. The Council Representative will draw on the collective expertise of the Council to help the Commission draft its recommendations and conclusions.
7. Prior to endorsing a Commission recommendation that refers specifically to an individual member of the Council or an agency represented by a Council member, the Council Representative will review it with the relevant Council member(s). That review may include: the likely impact of the recommendation, the feasibility of its implementation and any potential consequences that may not have been foreseen by the Commission.
8. The Council will work with the Commission to develop strategies to implement Commission recommendations from the annual reports. The Council Representative will oversee relevant implementation plans and will report to the Commission on progress towards and/or barriers to implementing Commission recommendations.
9. The Council and the Commission agree to resolve any differences respectfully and promptly by way of the Council Consultation Committee and the Office of the Attorney General.