



POLICY

SUBJECT: Intimate Partner Violence - Lethality Assessment Program

NUMBER: OPS-902-14

APPLICABLE TO: Community Services and Residential Employees

APPROVED: _____ /s/ signature on original

Sam Abed, Secretary

DATE: _____ 5/27/14

I. POLICY

DJS shall routinely identify youth who are victims of intimate partner or teen dating violence. When DJS identifies any youth as a victim of intimate partner or teen dating violence, a DJS Case Management Specialist (CMS) shall implement the Lethality Assessment Protocol (LAP) to determine the risk of the youth being killed and to connect high-danger victims with the local domestic violence services provider.

II. AUTHORITY

A. Md. Code Ann., Human Services, §9-203 and §9-204.

III. DIRECTIVES/POLICIES RESCINDED

None

IV. FAILURE TO COMPLY

Failure to comply with the Department's Policy and Procedures shall be grounds for disciplinary action up to and including termination of employment.

V. STANDARD OPERATING PROCEDURES

Standard operating procedures have been developed.

VI. REVISION HISTORY

DESCRIPTION OF REVISION	DATE OF REVISION
New policy issued.	5/27/14
Revised procedures; <ul style="list-style-type: none">• Renamed Hotline Worker to Hotline Advocate• Removed “triggered” definition and procedures and replaced with “initiate a call to the domestic violence hotline”	12/5/17



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MARYLAND Department of Juvenile Services

PROCEDURES

SUBJECT: Intimate Partner Violence - Lethality Assessment Program

NUMBER: OPS-902-14

APPLICABLE TO: Community Services and Residential Employees

APPROVED: _____ /s/ signature on original

Linda McWilliams, Deputy Secretary

REVISION DATE: _____ 12/5/17

I. PURPOSE

The purpose of this policy is to promote the assessment for intimate partner and teen dating violence, victim safety, and offender accountability for DJS youth. The purpose of this policy also is to implement the *Lethality Assessment Program: Maryland Model* (LAP) as a standard of practice, to administer a Lethality Screen to victims age 16 and older, and to refer all victims to the local domestic violence service provider.

II. DEFINITIONS

- A. *Abuser*: A person who perpetrates a pattern of coercive behaviors which may include physical, psychological, sexual, economic, and emotional abuse against an intimate partner, with the goal of establishing and maintaining power and control over the victim.
- B. *Case Management Specialist (CMS)*: The DJS employee who provides case management services to youth under DJS supervision and custody.
- C. *Domestic Violence Service Provider (DVSP)*: The agency or a staff member of an agency that primarily or exclusively provides comprehensive services to victims of domestic violence that meets COMAR 01.04.01.05.
- D. *Domestic Violence (DV)*: A pattern of coercive behavior characterized by the domination and control of one person over another, usually an intimate partner, through physical, psychological, emotional, verbal, sexual, and/or economic abuse.
- E. *High Danger*: A term used for a victim who has been assessed through use of the Lethality Assessment Program as being at the greatest risk of being killed. The victim is said to be in High Danger.
- F. *Hotline Advocate*: The person from the domestic violence service provider who answers the hotline and who has been trained in responding to LAP High Danger victim calls.
- G. *Intimate Partners*: Intimate partners are persons who are, or have been involved, in an intimate relationship and:
 - 1) Are married, separated, or divorced;

- 2) Live or have lived together;
 - 3) Have children in common; or
 - 4) Date, or have dated, but do not live, or never have lived together.
- H. *Intimate Partner Violence (IPV)*: Domestic violence between intimate partners.
- I. *Intimate relationship*: An intimate relationship is one in which persons have, or have had, a sexual or emotionally intimate relationship.
- J. *Lethality Screen*: The evidence-based field instrument used by trained CMS to assess a person who is a victim of domestic violence for his/her risk of being killed by an intimate partner.
- K. *Screen*: The act of administering a Lethality Screen to a victim of IPV.
- L. *Screened in*: A term, meaning the same as High Danger, used for a victim who has been assessed at being at the greatest risk of being killed. The victim is said to have “screened in.”
- M. *Screeener*: The CMS who administers the Lethality Screen.
- N. *Teen Dating Violence*: The physical, sexual, or psychological/emotional abuse within a dating relationship, as well as stalking or harassment of any person ages 12-18. It can occur in person or electronically and may occur between a current or former dating partner.
- O. *Victim*: The person against whom an abuser directs coercive and violent acts.

III. **PROCEDURES**

A. **Referral, Report or Assessment Determination**

1. **Referral and Report** – When an employee determines or a youth discloses the presence of intimate partner violence (IPV) that involves a youth as an offender, the employee shall notify the youth’s Case Management Specialist (CMS) and the CMS shall:
 - a. if the youth’s intimate partner requests a Peace Order against the youth, give the intimate partner information about the local DVSP and follow the procedures for requesting a Peace Order in accordance with the *DJS Intake Policy*; or
 - b. if no charges related to teen dating violence or peace orders have been filed, report the violent offense information to the local law enforcement agency; or
 - c. if a law enforcement officer has charged a youth with an intimate partner or teen dating violence related offense, follow all procedures outlined in the *DJS Intake Policy* and request a copy of the Lethality Screen of the victim that was completed by the law enforcement officer. If the victim has not been assessed and is 16 years or older, the CMS will contact the investigating law enforcement officer to request that the Lethality Screen be administered to the victim and a copy of the completed screen be sent to the CMS. If a screen cannot be located or was not completed by a law enforcement officer, the CMS is not required to administer a Lethality Assessment to the victim unless the CMS believes that screening the victim would be appropriate at that time.

2. **Assessment** - When a CMS learns of any incident of IPV or teen dating violence in which a youth under DJS supervision is the victim, the CMS shall:
 - a. If the incident of IPV or teen dating violence is committed by a household member (*i.e.*, the victim is living in the home with the perpetrator), report the incident as child abuse to the local DSS according to the *DJS Investigation and Reporting Child Abuse and Neglect Policy*; or
 - b. If the incident of IPV or teen dating violence is not committed by a household member and
 - 1) the youth is age 16 or older, administer the Lethality Screen (see Lethality Assessment Protocol in Section B); or
 - 2) the youth is under 16 years old, strongly encourage the youth to contact the local DVSP; and
 - 3) Provide immediate steps to ensure the safety of the victim, which may include coordination of services or treatment with the local DVSP in the youth's home jurisdiction.

B. Lethality Assessment Protocol

1. **Criteria for initiating an assessment.** The CMS shall initiate a Lethality Screen when a youth discloses, or the CMS determines or is notified of the presence of domestic violence that involves an intimate partner relationship, and:
 - a. Has reason to believe that an assault or another act of violence has occurred;
 - b. Has a belief or sense that once the victim is no longer in his/her presence, the potential for assault or danger is high;
 - c. The victim has sought previous services or counseling concerning her/his situation with an intimate partner; or
 - d. The CMS believes, based on his/her experience and training, an assessment should be conducted.
2. **Conducting a Lethality Assessment Screen**
 - a. **Lethality Screen.** Once a youth discloses that s/he is a victim of intimate partner or teen dating violence, the CMS shall use the form entitled *Domestic Violence Lethality Screen for Field Practitioners (CMS) (Appendix 1)* to ask the victim the lethality assessment questions.
 - b. **Lethality Assessment Questions.** The lethality assessment questions are asked about the abuser whom the victim has identified.
 - c. **How to ask the questions.** The CMS advises the victim that s/he would like to ask the victim a short series of questions to help her/him get a better idea of her or his situation and risk of lethality. The assessment will be conducted in a private setting, in the office or home, and out of the presence of the abuser. The assessment questions are asked in the same wording and in the same order as

they are listed.

- d. **Ask all the questions.** The CMS asks all the questions, **even if the victim responds positively to Questions #1 through #3.** The more questions to which the victim responds positively, the clearer and more immediate is the danger to the victim.
- e. **Assessing the responses.**
 - 1) Once the questions on the Lethality Screen have been asked, the CMS shall handle the information as follows:
 - a) **Yes to Q. #1, #2, or # 3=Referral.** A “yes” or positive response by the victim to any of Questions #1, #2, or #3 reflects a high danger assessment and shall automatically initiate a call to the local domestic violence hotline.
 - b) **Yes to Four or more of Q. #4-#11=Referral.** If the victim gives negative responses to Questions #1-#3 but positive responses to at least four of Questions #4-#11, that reflects a high danger situation and shall automatically initiate a call to the local domestic violence hotline.
 - c) **Negative responses to all of the assessment** questions or positive responses to no more than three of Questions #4-#11 may still initiate a call to the local domestic violence hotline if the CMS believes it is appropriate. A CMS may refer a youth whenever she/he believes the victim is in a potentially lethal situation.
 - d) Upon completion of the questions, the CMS shall also ask the victim, “Is there anything else that worries you about your safety? If “yes”, ask, “What worries you?” The response to the question may help the CMS better determine whether a referral should be triggered.
- f. **A referral not initiated or victim does not complete the Lethality Screen.** If a referral is not initiated or the victim does not complete the Lethality Screen, the CMS shall:
 - 1) **Advise the victim that domestic violence is dangerous** and sometimes fatal;
 - 2) **Advise the victim to watch for the signs** listed in the Lethality Screen because they may indicate that s/he is at an increased level of danger; and
 - 3) **Strongly encourage the victim to contact the local DVSP** and provide contact information.
 - 4) **When victim declines to answer all of the questions,** check the box under the victim’s name to indicate, “Victim did not answer any of the questions.”

- g. **High Danger Assessment.** If a high danger assessment is made or the CMS believes it is appropriate, the CMS shall:
- 1) **Advise of assessment.** Advise the victim that s/he has assessed the victim's situation and the results have shown that the victim is at an increased level of danger and potential physical harm;
 - 2) **Call the hotline.** Advise the victim that s/he would like to call a domestic violence hotline advocate for help in planning for the victim's safety and ask the victim to consider speaking with the hotline advocate;
 - 3) **If the victim agrees to speak with the hotline advocate:**
 - a) Call the domestic violence hotline;
 - b) Advise the hotline advocate that s/he has made a high danger assessment or believes that the victim is in danger, and would like the hotline advocate to speak with the victim;
 - c) Convey to the hotline advocate the information in the *Lethality Assessment Program: CMS to Hotline Advocate Communication Guidelines (Appendix 2)*;
 - d) Put the victim on the phone; and
 - e) Give the victim enough privacy to talk to the hotline advocate that does not compromise safety and security, unless the victim requests the CMS stay in the room; and remain available for follow-up conversation with the hotline advocate.
 - 4) **If the victim initially declines to speak with the hotline advocate,** the CMS shall:
 - a) Tell the victim that s/he will still contact the domestic violence hotline to receive guidance on how to proceed with the situation, and that s/he would like the victim to reconsider speaking with the hotline advocate;
 - b) Call the hotline; and
 - c) After concluding the initial conversation with the hotline advocate, ask the victim if s/he has reconsidered and would now like to speak with the hotline advocate.
 - 5) **If the victim again declines to speak with the hotline advocate,** the CMS shall advise the hotline advocate of the victim's decision and obtain immediate safety planning information from the hotline advocate that s/he can convey to the victim. The CMS should attempt to obtain a safe phone number and the victim's consent to provide the hotline advocate with both the victim's name and safe phone number. As appropriate, and with permission from the victim, the CMS assists:

- a) The hotline advocate in developing the immediate safety plan, and
 - b) The victim in carrying out the immediate safety plan. This may involve providing referrals for transportation, child care for counseling and court appearances, financial assistance, etc., within the CMS's capability.
- 6) In addition, after the victim has declined to speak with the hotline advocate, and safety planning information from the hotline advocate has been given to the victim by the CMS, the CMS shall:
- a) **Repeat the Lethality Screen results.** Reiterate her/his assessment that the victim is in a dangerous, possibly lethal, situation;
 - b) **Advise the victim to watch for the signs** listed in the Lethality Screen because they may indicate an increased level of danger; and
 - c) **Provide contact information to** the victim for the domestic violence service provider and strongly encourage him or her to call the local DVSP for assistance and/or support.
- 7) If the victim has spoken with the hotline advocate, the CMS shall:
- a) Reiterate that the victim is in a dangerous, possibly lethal, situation;
 - b) Encourage the victim to follow the safety plan developed with the hotline advocate, and encourage the victim to go to the local DVSP for services and keep any scheduled appointments, because the program can help her/him; and
 - c) Provide the hotline number to the victim.

C. Administrative Procedures

1. The CMS shall:

- a. Consult with the Case Management Specialist Supervisor upon being notified of an incident of IPV involving a youth;
- b. Document, in the Contact Module, any implementation of the LAP, the results of the LAP, any safety plans, and whether the youth agreed or refused to be referred to a local DVSP;
- c. Enter an Alert in ASSIST when the youth is at high danger for IPV as identified by the lethality assessment;
- d. Provide a copy of any written safety plan to the youth and have the youth sign and date it to acknowledge receipt of the plan; place a copy of the signed plan in the youth's file;
- e. Notify parents of the disclosure of IPV, any safety plan given to the youth, and any domestic violence resources available in the

youth's home community; the CMS shall not be required to notify the parent if the CMS and CMSS feel that notifying the parent would result in the youth being at risk of additional violence in the home;

- f. Fax a copy of each high danger Lethality Screen to the local DVSP as soon as possible, but within 48 hours, and place the original of the Lethality Screen in the youth's file; and
- g. Send a copy of the Lethality Screen to the Regional LAP coordinator.

2. The Regional LAP Coordinator shall:

- a. Complete and send the *Lethality Assessment Program Reporting Form (Appendix 3)* to the DJS Central LAP Coordinator by the fifteenth business day of every month; and
- b. Serve as a liaison with the local domestic violence service provider and local law enforcement LAP contacts.

3. The Central LAP Coordinator shall:

- a. Send data reports semi-annually to Maryland Network Against Domestic Violence (MNADV). This data will be compiled from the Lethality Assessment Reporting form submitted by the Regional LAP Coordinator every month. The following information should be collected and reported:
 - 1) Number of High Danger screens;
 - 2) Number of Non-High Danger screens;
 - 3) Number of screens when the victim declines to answer all the questions;
 - 4) Total number of screens administered; and
 - 5) Number of High Danger victims who spoke on the phone with the hotline advocate.
- b. Serve as liaison for Regional LAP Coordinator and DJS administration.
- c. Serve as DJS liaison with MNADV.

IV. TRAINING

The LAP training shall be incorporated into the Entry Level Training Program in conjunction with the Domestic Violence Policy training. The LAP training will be offered as an in-service training course to DJS employees. Training coordinators, from the Professional Training and Education Unit will ensure continued and ongoing annual training.

V. DIRECTIVES/POLICIES REFERENCED

- A. Intake Policy
- B. Investigation and Reporting Child Abuse and Neglect Policy

VI. APPENDICES

All forms can be found on the intranet under Forms/Intimate Partner Violence.

1. Domestic Violence Lethality Screen for Field Practitioners (CMS)
2. Lethality Assessment Program: CMS to Hotline Advocate Communication Guidelines
3. Lethality Assessment Program Reporting Form

A list of contact numbers is also available on the intranet under Forms/Intimate Partner Violence, entitled “Domestic Violence Programs in MD”.



DJS POLICY AND STANDARD OPERATING PROCEDURES Statement of Receipt and Acknowledgment of Review

SUBJECT: Intimate Partner Violence - Lethality Assessment Program
NUMBER: OPS-902-14
APPLICABLE TO: Community Services and Residential Employees
REVISED: December 5, 2017

I have received and reviewed a copy (electronic or paper) of the above titled policy and procedures. I understand the contents of the policy and procedures.

I understand that failure to sign this acknowledgment form within five working days of receipt of the policy shall be grounds for disciplinary action up to and including termination of employment.

I understand that I will be held accountable for implementing this policy even if I fail to sign this acknowledgment form.

SIGNATURE

PRINT FULL NAME

DATE

WORK LOCATION

SEND THE ORIGINAL, SIGNED COPY TO VERNELL JAMES IN THE DJS OFFICE OF HUMAN RESOURCES FOR PLACMENT IN YOUR PERSONNEL FILE.