Intimate Partner Violence

What we have done to do better on IPV in our community and how Healthcare Providers can assist with these efforts

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FV vs. IPV

Family Violence

- BLOOD RELATIVE/ RELATED BY MARRIAGE- Parents, children, stepparents, stepchildren, grandparents, grandchildren, brothers and sisters, half-brothers and half-sisters regardless of whether they reside in the same home with the suspect.
 - Parents-in-law, children-in-law, brothers- and sisters-in-law regardless of whether they
 reside in the same home with the suspect.
- ROOMATES- Persons, whether or not related, who cohabit or who previously cohabited with the suspect, and any children of either who then resided in the same home as the suspect.

Intimate Partner Violence (aka DV)

- SPOUSE OR FORMER SPOUSE
- PERSONS WHO SHARE A CHILD IN COMMON
- PERSONS WHO ARE OR HAVE BEEN IN AN INTIMATE DATING RELATIONSHIP

IPV Definition

<u>Intimate Partner Violence</u> includes those persons listed previously and is defined as:

 As a pattern of abusive behavior in any relationship that is used by one partner to gain or maintain power and control over another intimate partner. IPV can be physical, sexual, emotional, economic, or psychological actions or threats of actions that influence another person. This includes any behaviors that intimidate, manipulate, humiliate, isolate, frighten, terrorize, coerce, threaten, blame, hurt, injure, or wound someone.

BPD Statistics

2012

DV repeat rate of 13.5% (all FV, not just IPV)

2013-2016

 Reduced the FV repeat rate to 5.2% (focused effort, after-the-fact intervention on victims only)

Late 2016

 BIU started responding to in-progress IPV calls to establish an immediate rapport with victims along with Crime Victims Coordinator

BPD Statistics Cont...

2017

- Reduced the DV repeat rate to 3.3%
 - Late 2017- Integrated our Victimization Follow-up to include <u>TCDA's IPV Offender Focused Program</u>

2018

 Reduced the IPV repeat rate to 1.5% at worst (most likely a bit lower, but we do not have the complete data to confirm that yet).

What happens during these cases; from start to finish

Domestic
Disturbance
call-for-service

Officers

 Investigate, obtain
 Probable Cause,
 effect an arrest,
 collect evidence, &
 generate an
 Offense Report

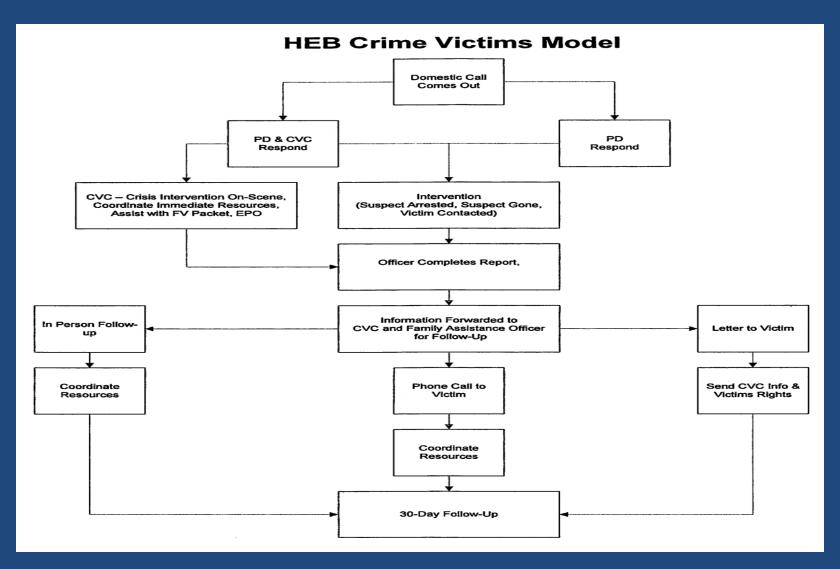
Criminal Investigations Division

- If suspect is not on-scene, obtain arrest warrant
- When suspect has been arrested, prepares and files case with District Attorney's Office

District Attorney's Office

- Prosecutes case on behalf of the State
- Uses Evidence
 Based Prosecution
 if Victim is
 uncooperative

BIU & CVC Model



Committed Time

During FY18- Our Behavioral Intervention Unit (BIU) completed what was equated to a total of 4 days, 6 hours, and 15 minutes of Victimization Follow-ups. A "Victimization Follow-up" call type is used for 3 things:

- Unannounced home safety check
- Delivering the "Offender Letter"
- Completing follow-ups with the victim
- The figure in time spent/ days is noted because of total time spent in other areas:
 - o Major accident = 2 days, 7 hours, 53 min
 - o Minor accident = 2 days, 19 hours, 44 min
 - o Motorist Assist = 3 days, 13 hours, 19 min

How to better address this problem

- All of our Front Line Supervisors have been certified to score the Lethality Assessment on the Tarrant Count Family Violence Packet on its weighted scale.
- All of Patrol and 80% of all Sworn have received Trauma Informed Interview training.
- Officers are required to document a Domestic Disturbance as an <u>Incident Report</u>, if there is a clear aggressor, even if no true Offense has been committed.
- *Our stats in FY18 show that Domestic Disturbances was #1 in where our Officers spent their time on Citizen Generated Calls with Reports.

Strangulation Training

- From 2017 to 2019, we have seen a **176**% increase in Strangulation Cases.
- We have given our Telecommunicators, Officers, EMS & local hospital additional education on strangulation cases.
- It is now <u>Mandatory</u> for EMS to respond to all reports of strangulation, with both Police and EMS <u>strongly recommending</u> the victims to seek medical treatment at a hospital.

Reasons why victims are uncooperative or later recant



Thought we were doing good...

• 409 IPV cases in 2017

- 341 IPV cases in 2018,
 - Stats showed we had a significant gap in our system of working these types of cases.

Gap (Not Good..)

2015

2016

2017

434 cases

- 61 unfounded
- 60 exceptional clearance
- 30 inactive
- 282 arrest
- 69 cases had at least 1 warrant issued

Average Days Until Inactive: 113

Felony Average Days Until Inactive: 302

Average Days Inactive to Arrest: 114

377 cases

- 60 unfounded
- 47 exceptional clearance
- 19 inactive
- 250 arrest
- 41 cases had at least 1 warrant issued

Average Days Until Inactive: 77

Felony Average Days Until Inactive: 45

Average Days Inactive to Arrest: 30

409 cases

- 53 unfounded
- 36 exceptional clearance
- 22 inactive
- 295 arrest
- 54 cases had at least 1 warrant issued

Average Days Until Inactive: 96

Felony Average Days Until Inactive: 140

Average Days Inactive to Arrest: 56

Combined Focused Effort

With the addition of an IPV Detective and BIU Division work together, we are working hand-in-hand with the Detective to both assist the victim and hold the offender accountable as soon as practical.

HIPAA-

- § 164.512 Uses and disclosures for which an authorization or opportunity to agree or object is <u>not required</u>.
- Under this section (paraphrased):
- (c) Standard: Disclosures about victims of domestic violence:
 - A covered entity may disclose protected health information about an individual whom the covered entity reasonably believes to be a victim of <u>domestic violence</u> to a government authority authorized by law to receive reports of domestic violence;
 - (A) The covered entity, in <u>the exercise of professional</u> <u>judgment</u>, believes the disclosure is necessary to <u>prevent</u> serious harm to the individual

Providing Medical Documentation to Law Enforcement for IPV Cases

- When contacting law enforcement to report domestic violence victims who consent or are in serious harm:
 - You may/ should also provide the relevant medical documentation to Law Enforcement
 - Domestic Violence Victims are 3 times more likely to be seen in the healthcare field for domestic violence related injuries as opposed to law enforcement officers, prior to be killed by their intimate partner
 - > Healthcare Providers 47% vs. Law Enforcement 14%

Percentages

- Among the victims who were murdered by their partners,
 44% were seen in the ER/ED less than two years prior to their deaths
- A victim of strangulation is 800% more likely to be killed by their partner
- So far in 2019 in Bedford, in nearly 20% of all IPV assault offenses, the victim has reported some type of strangulation/ suffocation

What can you do?

- Work with your entity to come up with <u>protocol(s)</u>
 where you know you will be supported by your entity
 if you have a situation where you have a patient who
 is in serious danger due to Domestic Violence, and
 needs law enforcement intervention after receiving
 necessary medical treatment.
 - Contact your Law Enforcement Agency if you have questions about what their process would be once they arrive.

Thank you!

- Alliance for Hope (Strangulation Institute on Strangulation Prevention)
- Tarrant County District Attorney Office
- Bedford PD Chief Jeff Gibson (for allowing me to speak today)
- Genesis Women's Shelter
- Texas Health Resource
- One Safe Place
- SafeHaven
- And a HUGE Thank You to you all for listening. I know this is a passionate subject all of us devoted to providing care for these victims can rally around and make a difference!