

# South Okanagan-Similkameen Violence in Relationships (VIR)

## Local High Risk Protocol

### 1. PURPOSE OF THE PROTOCOL

The purpose of this Protocol is to provide a framework for a coordinated and collaborative approach to assess the risk of grievous bodily harm or death to victims of domestic/intimate partner violence or stalking. As well, the same collaborative approach will be used to provide an enhanced safety and support system to the victim and proactive interventions to the alleged offender.

### 2. HISTORICAL CONTEXT OF THE PROTOCOL

Coordinating our efforts around high risk cases has been discussed at the Violence in Relationships Committee of the South Okanagan Similkameen since 2008. Coroner's Inquests over the years indicating lack of coordination among agencies involved with the families have fueled the priority of creating high risk teams in the Province of BC. In May 2010, the VIR Committee brought the Community Coordination for Women's Safety Program to Penticton to deliver a High Risk Domestic Violence Community Coordination training including a panel presentation from the Vernon Integrated Case Assessment Team. Using the ICAT model, a High Risk Subcommittee formed in June 2010 to develop a local framework for a coordinated response to high risk intimate relationship violence, which we now call the High Risk Team (HRT).

### 3. DEFINITIONS

#### a) Domestic/Intimate Relationship Violence

For the purpose of this Protocol, *domestic/intimate relationship violence* is defined as physical or sexual assault, or the threat of physical or sexual assault, toward a person with whom there is or has been an ongoing or intimate relationship. Other behaviour, such as stalking, intimidation, sexual abuse, neglect, deprivation, kidnapping, mental or emotional abuse or threats towards children, loved ones or property must be recognized as part of the continuum of domestic/intimate relationship violence.

The term "*domestic/intimate relationship violence*" was chosen for its gender neutrality, however, it must be acknowledged that the vast majority of victims of violence within relationships are women. The term is meant to include common law, dating, and same sex relationships; as well as cases where there is risk from an offender other than a spouse or partner, such as a parent or in-law.

#### b) High Risk

For the purpose of this Protocol, the designation of *high risk* will be assigned to a domestic/intimate partner violence case when there is concern for grievous bodily harm or death to either partner or other parties. The designation of *high risk* is based upon, but not limited to, factors which have been specified in the Summary of High Risk Indicators, compiled by HRT using leading risk assessment tools [insert footnote]. For the purpose of referring cases to the HRT, the referral source will identify what they have determined is high risk, either based on the HRT Risk Assessment or their own protocol.

**c) VIR High Risk Subcommittee**

A subcommittee of Violence in Relationships Committee of the South Okanagan-Similkameen charged with developing the framework for the High Risk Teams of the region.

**d) High Risk Team(s)**

The High Risk Team(s) receive referrals from members of the community via the RCMP, to assess risk, monitor safety, develop risk reduction, and support plans for high risk domestic violence/intimate partner cases from the South Okanagan-Similkameen. Standing members of the HRT will vary for each community, but generally include RCMP, Probation, Crown Counsel, Community Based Victim Services, Police-based Victim Services, and Transition House or Safe Homes. Other relevant agencies will be involved on a case by case basis.

**4. LEGISLATION GUIDING THIS PROTOCOL**

For the purpose of this protocol, the sharing of personal information may be necessary to protect individuals, their children and other family members who have been identified or assessed as high risk. If possible and if it is safe to do, every effort should be made to obtain written consent from the victim and alleged offender before disclosing personal information to other agencies subject to this protocol.

Generally, consent is required before personal information regarding a victim, alleged offender or involved family members can be shared with other agencies. However, applicable privacy laws [including the federal Privacy Act (for RCMP, Parole), Freedom of Information and Protection of Privacy Act (for public bodies) and the Personal Information Protection Act (for the private and non-profit sector)] allow personal information to be shared without consent in certain situations including the following:

**Federal Privacy Act:** where in the opinion of the head of the institution, the public interest in disclosure clearly outweighs any invasion of privacy that would result from disclosure or disclosure would clearly benefit the individual to whom the information relates.

**Freedom of Information and Protection of Privacy Act:** if the head of the public body determines that compelling circumstances exist that affect anyone's health or safety.

**Personal Information Protection Act:** if there are reasonable grounds to believe that compelling circumstances exist that affect the health or safety of any individual.

These are the main pieces of legislation governing information sharing between the parties of this protocol; however, there may be other, more specific laws that must also be considered.

Where a decision is made to share personal information without consent that decision must:

- Be reached on a case-by-case basis
- Be based on a necessity to disclose
- Ensure that only proportionate and relevant information is disclosed in light of the level of risk of harm to a named individual or a known household in each case; and
- Be properly documented at the time a disclosure decision is made identifying why the disclosures are being made (i.e. what risk is believed to exist), what information and to whom it will be disclosed and what restrictions on use of the disclosed information will be place on

its recipients.

- Give consideration to whether notice of disclosure must be provided

## **5. RISK ASSESSMENT PROCESS**

1. A case is referred (by fax and phone) to the designated RCMP member (HRT Coordinator) by a VIR member within 24 hours of being suspected high risk. The referral form will include victim(s) and alleged offender information, relevant risk factors and other pertinent details necessary to manage risk.
2. The RCMP HRT Coordinator or designate circulates case identity to members of the HRT and other service providers who have relevant information. Generally consent of the person about whom the information is being sought will be required prior to contacting the agencies involved, unless special circumstances exist which allow the disclosure without consent, pursuant to privacy laws,
3. A meeting of the HRT is scheduled as soon as practicable. Prior to attending, relevant file information is reviewed, prepared and summarized for the meeting by each member.
4. At the meeting, the Summary of High Risk Indicators is completed. If the case is rated as high risk, the process continues. If not, referrals to support services are made for safety planning purposes.
5. If determined to be high risk by the HRT, relevant agencies will be notified to ensure that enhanced response, safety and support systems are implemented, based on each agency's high risk intervention procedure.
6. The HRT will review the case on a regular basis to monitor and track changes in safety and risk status as determined by the HRT.

## **SIGNATURES OF HIGH RISKTEAM BELOW:**