



Domestic Violence High-Risk Team (DVHRT) Partner Agencies Overview

The DVHRT aims to provide effective interventions for high-risk domestic violence cases through a coordinated community response that centers on the survivor's needs, increases survivor safety, and holds offenders accountable. Every survivor has the right to feel safe and make informed choices within the DVHRT. For a DVHRT to be effective, it must collaborate with multiple community partners to create spaces that promote healing and safety for high-risk survivors. A DVHRT should use a survivor-centered approach where the survivor is involved with every step of the process, which is key to creating these spaces.

The DVHRT is a specialized coordinated community response team that identifies and monitors high-risk cases, identifies and closes systemic gaps in responses, and provides effective community-based service(s) to survivors. The DVHRT members help survivors create individualized intervention plans based on their unique needs and support survivors in meeting their safety needs.

The DVHRT is led or co-led by a non-governmental domestic violence agency with core membership from law enforcement agencies, prosecutors' offices, probation services, a pretrial assessment agency, parole, and corrections. The DVHRT should have a membership that is representative and inclusive of the community demographics and agencies. Battering Intervention and Prevention programs (BIPP), community health care providers, and/or emergency departments may also be member organizations of the DVHRT.

Most member organizations make team decisions regarding the acceptance or closing of cases. No single agency can accept or close a case on behalf of the team. The domestic violence advocates have extensive training and expertise on the dynamics of domestic violence, and as such, their voice and input should be emphasized on the team. When the domestic violence agency is the lead or co-lead of the team, the survivor's well-being is always at the center of the team's work.

TCFV began funding DVHRTs in 2018. There have been 19 DVHRT sites funded and trained by TCFV in Texas since 2018. Since its inception, each newly funded site has reviewed and implemented best practices. Below are recommendations for best practices for all partnering agencies to agree upon when forming a DVHRT.

All Partner Organizations individually agree to:

- » Prioritize a survivor's rights, needs, and wishes in all DVHRT processes and outcomes.
- » Designate consistent primary and alternate DVHRT liaisons and train them on DVHRT policies and procedures.
- » Use an evidence-informed risk assessment to determine which cases to refer to the DVHRT.
- » Share case status information, data, updates, and referrals for high-risk cases during DVHRT meetings. *Note: Family Violence Centers will do so under their privacy laws. For more information, please see the one-page role document 'Confidentiality and Privilege.'*
- » Provide timely updates on DVHRT cases at meetings and when necessary, as allowed by state law and agency policy.
- » Provide the DVHRT Coordinator with data that will enhance and allow for proper case follow-up.
- » Collaboratively engage in case coordination and cross-training with organizations.
- » Participate in training intended to enhance the operations of the DVHRT.
- » Sign an updated Memorandum of Understanding annually.
- » Regularly provide relevant data for case consultation and evaluation purposes to the DVHRT Coordinator as allowed by law.
- » Participate in other efforts as agreed to by DVHRT partner organizations.
- » Follow all applicable laws.
- » Honor that the survivor is the expert in their own safety.
- » Support survivor privacy where applicable.