

Wichita/Sedgwick County, Kansas
Domestic & Sexual Violence
Community Safety Assessment Report

Coordinated Community Response Team
2018

This report is dedicated to the citizens of Wichita/Sedgwick County, Kansas, who deserve a community free of domestic & sexual violence. Until the day that is achieved, they deserve no less than a comprehensive, collaborative and effective response from those individuals who have dedicated their professional lives to the service of this community.

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I. INTRODUCTION

In 2013, proactive community and criminal justice agencies in Wichita/Sedgwick County, Kansas, took the bold step of forming a multi-disciplinary team dedicated to domestic & sexual violence response and intervention. The Coordinated Community Response Team [CCR] was established as a formal, comprehensive, collaborative and survivor/victim-centered response team. Its founding members included the following law enforcement, advocacy, prosecution and forensic nursing agencies:

- Ascension Health, Via Christi Forensic Nursing [VC].
- Catholic Charities, Harbor House [HH].
- City of Wichita Law Department [City].
- Sedgwick County District Attorney's Office [DA].
- Sedgwick County Sheriff's Office [SO].
- StepStone [SS].
- Wesley Hospital, Forensic Nursing [WMC].
- Wichita Area Sexual Assault Center [WASAC].
- Wichita Family Crisis Center [WFCC].
- Wichita Police Department [WPD].

The CCR has monthly meetings wherein everyone graciously shares agency information/updates and collaborates to tackle areas of concern. As a result thereof, the CCR has achieved success in improving the coordination of community and criminal justice responses and resources for survivors and victims of domestic & sexual violence.

In response to the CCR's strong foundation, the Kansas Governor's Grants Office [KGGP] extended the unique opportunity for it to conduct the first "Safety and Accountability Audit" [Community Safety Assessment] of both domestic & sexual violence response in Kansas and in the nation.

In 2016, the CCR and KGGP completed a detailed Memorandum of Understanding to formalize its partnership. The details include funding from the federal grant, "Improving the Criminal Justice Response," through the Office of Violence Against Women, administered by the KGGP, to assess domestic & sexual violence in Wichita, Kansas.

At the outset, it is important to note the following facts about this Community Safety Assessment:

- The Assessment Team members *volunteered their time*.
- The Assessment *time frame* was limited to approximately one year.
- The Assessment *geography* was limited to Wichita, Kansas.
- The Assessment *scope* was limited to the following Assessment Question:

“How does the Wichita/Sedgwick County community and criminal justice system respond to risk and safety for victims of domestic violence and sexual violence within one week of disclosure in Wichita?”

The Community Safety Assessment is based on an institutional, ethnographic framework promulgated by Praxis International in St. Paul, Minnesota. It has not been previously employed in Kansas, or the nation, to explore domestic & sexual violence at the same time.

“Praxis International has developed and pioneered the use of the Safety Audit process as a problem-solving tool for communities that are interested in more effective intervention in violence against women.”¹

The logistics of the Community Safety Assessment were developed by Dr. Ellen Pence and proscribe a systematic, qualitative examination of complex institutional responses to domestic & sexual violence.

“The process involves examining whether institutional policies and practice enhance the safety of survivors.”²

The Community Safety Assessment is designed to recognize, categorize and analyze institutional responses to acts of domestic & sexual violence. It is not focused on specific individuals and/or professionals. It is designed to reveal how laws, policies, forms, standard operating procedures and other influences may create obstacles, or ‘gaps,’ in effectively responding to domestic & sexual violence.

In sum, the Assessment’s focus is solely on discovering and articulating problems.

In April 2017, the CCR agencies each volunteered a staff person to serve on the Assessment Team. The Kansas Coalition Against Sexual & Domestic Violence also provided a staff member to serve on the Team. Thereafter, an Assessment Coordinator was hired and four Team members attended a four-day training in Minnesota that was hosted by Praxis International. Soon after, the Sedgwick County Division of Emergency Communications provided a staff member to serve on the Team.

In May, the Assessment Team facilitated and attended a two-day training in Wichita provided by Praxis International (Denise Eng & Rhonda Martinson). After the training, the Assessment Team narrowed its focus by clearly defining “The Assessment Question.” It also formalized its mission in a Memorandum of Understanding and Confidentiality Agreement with the CCR.³

¹ <http://praxisinternational.org/institutional-analysiscommunity-assessment-2/what-is-a-safety-audit/>

² <http://praxisinternational.org/institutional-analysiscommunity-assessment-2/what-is-a-safety-audit/>

³ **Appendix A:** Wichita/Sedgwick County Safety and Accountability Audit Memorandum of Understanding

In July 2017, the Team began conducting the Community Safety Assessment. The order of events was as follows:

- (1) Interview survivors who have had contact with Wichita, Kansas, community and criminal justice institutions in response to domestic & sexual violence.
- (2) Interview survivors who have not had contact with Wichita, Kansas, community and criminal justice institutions in response to domestic & sexual violence.
- (3) Map the community and criminal justice institutional responses to the disclosure of domestic & sexual violence in Wichita, Kansas.
- (4) Identify relevant information to collect, texts to analyze, people/groups to interview and people/processes to observe in Wichita, Kansas.
- (5) Collect the identified information.
- (6) Review the collected information to identify and articulate the practices and processes that negatively impact domestic & sexual violence victim risk and safety.
- (7) Formulate suggestions to improve the practices and processes that negatively impact domestic & sexual victim risk and safety.

In sum, the Assessment Team mapped institutional responses and gathered information. Thereafter, it began the exacting work of identifying and articulating the obstacles, or 'gaps,' that negatively impact victim risk and safety. Notably, for several weeks the Assessment Team reviewed everything it had collected and engaged in challenging discussions about ways to overcome the obstacles it had identified. It also spent many hours producing a draft of this report.

For several weeks thereafter, the CCR and participating agencies reviewed the draft of this report. Everyone provided valuable insight.

This report was completed in July 2018 and released to the KGGP on July 31, 2018.

In sum, this report is the culmination of an enlightening and arduous process, which included many meetings of the CCR, the Assessment Team and numerous hours of interviews, observations and group discussions. It demonstrates the extraordinary mission of the CCR and its Assessment Team to improve the complex institutional responses to domestic & sexual violence in Wichita, Kansas.

II. ACKNOWLEDGEMENTS

A Memorandum of Understanding was signed by the executive staff, and Assessment Team members, from the following 12 agencies:

- Ascension Health, Via Christi Forensic Nursing
- Catholic Charities, Harbor House
- Kansas Coalition Against Sexual and Domestic Violence
- Sedgwick County District Attorney's Office
- Sedgwick County Division of Emergency Communications
- Sedgwick County Sheriff's Office
- StepStone
- Wichita Area Sexual Assault Center
- Wichita City Attorney's Office
- Wichita Family Crisis Center
- Wichita Police Department
- Wichita/Sedgwick County Coordinated Community Response Team

Each of the above agencies donated skilled and experienced staff to serve on the Assessment Team. The following are the 12 Assessment Team members:

- Ascension Health, Via Christi Forensic Nursing: Tina Peck, Program Coordinator, Forensic Nursing Services
- Catholic Charities: Keri McGregor, Director of Harbor House Shelter and Outreach Services
- City of Wichita City Attorney's Office: Jan Jarman, Assistant City Attorney⁴
- Kansas Coalition Against Sexual & Domestic Violence: Heather Blanton, Criminal Justice Project Coordinator
- Newman University: Kristi Barton Edwards, Assessment Coordinator
- Sedgwick County District Attorney's Office: Shannon Wilson, Senior Assistant District Attorney
- Sedgwick County Division of Emergency Communications: Kristin Gill, Support Services Major
- Sedgwick County Sheriff's Office: Lt. Keith Allen, Investigations Division.
- StepStone: Dung Kimble, Program Director
- Wichita Area Sexual Assault Center: Kathy Williams, Executive Director
- Wichita Family Crisis Center: Tracey Gay, Director of Client Services
- Wichita Police Department: Lt. Jason Stephens, Domestic Violence/Sex Crimes Unit

⁴ Aaron Zarchan, Assistant City Attorney, was a valuable, initial member of the Assessment Team and was replaced when he was appointed Judge for the City of Wichita.

III. OVERVIEW: WICHITA, KANSAS

According to the United States Census Bureau, there are an estimated 2.9 million people in Kansas.⁵ As of July 2016, nearly 400,000 Kansans were residing in Wichita, Kansas, making it the most populous city in Kansas.⁶

Wichita is home to Wichita State University [WSU], the third largest university in Kansas, and McConnell Air Force Base [MAFB], which hosts approximately 700 active duty military personnel (residing on base) and employs more than 16,000 people.⁷

WSU has a 330-acre main campus that features a recently developed Innovation Campus. The Innovation Campus includes several businesses and the Sedgwick County Law Enforcement Training Center. WSU also has three other locations: (1) A Downtown Center in Wichita; (2) WSU South in Derby, Kansas; and (3) WSU West in Maize, Kansas.

WSU does not have a Memorandum of Understanding with local law enforcement agencies/forensic nursing programs/advocacy agencies. However, in 2017, WSU executed a Memorandum of Understanding with the Wichita Area Sexual Assault Center. The agreement specifies that an advocate will be on the Main Campus for three hours, two days a week.

WSU's main campus has reported, in response to federal mandates, the following domestic & sexual violence information:⁸

Crime	2015	2016
Rape	0	2
Domestic Violence Offenses	13	9

McConnell Air Force Base is in the southeast part of Wichita. It has a dedicated Sexual Assault Prevention and Response Program [SAPR] that provides 24/7 response to sexual assaults, responds to survivors, provides prevention and outreach activities and recruits/trains personnel for the Volunteer Victim Advocate Program.

MAFB's SAPR has a Memorandum of Understanding with the Wichita Police Department, the Sedgwick County Sheriff's Office, Forensic Nursing at Via Christi and Wesley Medical Center, and local victim services programs. In addition, the

⁵ <https://www.census.gov/quickfacts/KS>

⁶ <https://www.census.gov/quickfacts/fact/table/wichitacitykansas/PST045216>

⁷ https://factfinder.census.gov/faces/nav/jsf/pages/community_facts.xhtml?src=bkml;http://www.mcconnell.af.mil/Portals/27/documents/AFD-110503-019.pdf?ver=2016-06-02-093949-263

⁸ http://webs.wichita.edu/depttools/depttoolsmemberfiles/police/ANNUAL_SECURITY_REPORT_2016_final.pdf

MAFB's Family Advocacy Program has a dedicated Domestic Abuse Victim Advocate who formally works with domestic violence victims/survivors.

MAFB cannot release information specific to activity on its base in Wichita. According to the Secretary of the Air Force Public Affairs, however, the Air Force received 1,312 reports of sexual assault in 2015 and 1,355 reports of sexual assault in 2016. The Secretary summarized the provided information as follows:

“Expressed as a percentage of the total Air Force population, including active duty, Air Force Reserve, Air National Guard, and appropriated fund civilian employees, 0.21% of Airmen reported a sexual assault in fiscal 2016 compared to 0.20% in fiscal 2015 and 0.21% in fiscal 2014, illustrating a flat trend for annual reports over the last three years.”⁹

In the process of collecting specific, relevant information for this report, the Team quickly discovered an obstacle: community and criminal justice agencies do not use the same categories, labels, characteristics or digital tracking systems, in their effort to organize/sort/manage domestic & sexual violence survivors/victims and/or cases.

In fact, every participating agency operates with a separate, and unique, data management system. Therefore, the compilation of information into a comprehensive and reliable overview is problematic.

To truly capture the ‘big picture’ in Wichita, Kansas, community and criminal justice agencies would need additional, trained staff to manually pull, sort and categorize a very large volume of information. Simply stated, there is not a straightforward way for the community and criminal justice agencies to collect and share domestic & sexual violence information.

Fortunately, as seen below, the participating agencies worked together to provide an overview of their organization and workload.

Please note: This is not a quantitative systems review. The following information only provides a ‘snapshot’ of relevant domestic & sexual violence information in Wichita, Kansas.

⁹ <http://www.af.mil/News/Article-Display/Article/1168729/air-force-releases-annual-sexual-assault-report/>

911 Overview

The **Sedgwick County Division of Emergency Communications** is a consolidated emergency services dispatching agency. It employs 82 full-time call takers and dispatchers who answer all 911 calls originating in Sedgwick County. It also dispatches emergency responses for more than 30 local fire, emergency medical service, and law enforcement agencies.

From 2015-2016, the Sedgwick County Division of Emergency Communications answered more than 1.3 million 911 calls.

As to the type of 911 calls it receives, the Sedgwick County Division of Emergency Communications has provided relevant information below. Specifically, these are 911 calls that were initially reported as a domestic violence or a sexual assault incident and only needed a law enforcement response (*no medical response necessary*).

It is important to note two factors that impact the information provided. First, if a caller is not sure of the relationship between two parties involved in a disturbance, the call is classified as a disturbance rather than a domestic violence incident. Second, “domestic violence” related calls include intimate partner violence situations and situations involving roommates, former roommates, and family disturbances. In addition, everyone involved in the call must be at least 18 years of age.

	Total number of law enforcement calls entered into the 911 system	Law enforcement calls initially identified as domestic violence related	Law enforcement calls initially identified as sexual assault situations
2015	653,266	20,327	631
2016	657,028	21,767	623

Law Enforcement Overview

The **Wichita Police Department [WPD]** is the largest law enforcement agency in Kansas. It has jurisdiction within all 159.3 square miles of Wichita, Kansas, and employs 650 commissioned officers and 196 civilian employees. At the time of this report, the 650 commissioned personnel included: 1 Chief, 3 Deputy Chiefs, 11 Captains, 31 Lieutenants, 63 Sergeants, 104 Detectives, and 437 Police Officers.

The Department is organized into three Divisions: Field Services, Investigations, and Support Services. The Field Services Division includes four Patrol Bureaus, each with their own patrol substation. The Investigation Division has three Bureaus: Crimes Against Persons, Property Crimes/Technical Services, and Special Investigations.

The Crimes Against Persons Bureau has a specific unit dedicated domestic & sexual violence cases. The Domestic Violence/Sex Crimes Unit consists of one Lieutenant and nine Detectives.

As to the relevant workload, the following information was provided by the WPD. Annually, the Department processes more than 100,000 case reports and approximately 10% of them are handled by the Domestic Violence/Sex Crimes Unit.¹⁰

Year	Total Number of Case Reports	Total Number of Case Reports Routed to the Domestic Violence/Sex Crimes Unit
2015	112,022	8,184
2016	122,361	10,090

¹⁰ A percentage of the total case reports generated are not criminal cases and, therefore, not assigned to Detectives. For example, in 2016 there were a total of 122,361 case reports and 29,365 of them were miscellaneous reports and non-injury accidents.

The **Sedgwick County Sheriff's Office [SO]** is comprised of 185 commissioned deputies, 302 non-commissioned detention deputies and 62 clerical employees. The Sheriff's Office is organized into three Bureaus: Detention, Law Enforcement and Administration.

The Detention Bureau maintains the Sedgwick County Adult Detention Facility, which averages a daily population of 1,448 inmates. The Law Enforcement Bureau is divided into the Patrol Division, Investigations Division and Judicial Division.

The Patrol Division has jurisdiction within all 1,008 square miles of Sedgwick County. It responds to calls for service originating within the unincorporated areas of Sedgwick County and assists other law enforcement agencies.

The Investigations Division investigates cases that have been reported to the Sheriff's Office. From 2015 to 2016, it processed approximately 5,272 criminal cases.

To provide an overview, the following information has been supplied by the Sheriff's Office.

Type of Crime	2015-2016 Total Number of Cases
Sex Offenses	67
Domestic Violence Offenses	368

The Judicial Division provides multiple services for the 18th Judicial District Court [Sedgwick County District Court], including court room security, District Court warrant service, and civil process service.

Four commissioned deputies are assigned the task of serving Protection from Abuse (PFA) and Protection from Stalking (PFS) orders. In addition, the Support Division of the Administration Bureau processes all PFA/PFS orders and ensures they are entered into the National Crime Information Center (NCIC) database. Notably, in 2015, the Judicial Division served 5,407 court orders (including evictions, probate and protective orders).

Advocacy Overview

There are four established, accredited advocacy agencies in Wichita, Kansas: Harbor House, Wichita Family Crisis Center, StepStone and Wichita Area Sexual Assault Center. Each agency is accredited by the Kansas Coalition Against Sexual and Domestic Violence. Each agency also provides services that are competent, safe and confidential, trauma informed and survivor centered, informed by survivors, culturally relevant, free and voluntary, universally accessible and available to all.

An overview of each agency is provided below. It is followed by a compilation of the relevant workload of the four agencies.

Harbor House

Catholic Charities **Harbor House [HH]** has maintained a 24/7 domestic violence (DV) emergency residential shelter at a confidential, safe location in Wichita since 1992. Along with operation of a 40-bed capacity facility, it also meets resident basic needs, with coordinated case management, counseling and advocacy.

Harbor House also provides specific outreach services for non-residential DV survivors, including court advocacy, community advocacy, and through its SAFE (Safety, Advocacy, Finances and Employment) Project with the Department for Children and Families. All services are free, confidential and voluntary. The services are survivor-centered and trauma informed.

Harbor House is made up of 40 staff dedicated specifically to meeting the needs of domestic violence survivors.

Wichita Family Crisis Center Overview

The **Wichita Family Crisis Center [WFCC]** opened the first emergency shelter for victims of domestic violence and their children in 1976. The shelter facility is staffed 24 hours a day and operates at a 22-bed capacity.

The Wichita Family Crisis Center is made up of 25 staff dedicated to meeting the needs of survivors in our community.

In addition to life-saving shelter and outreach services, WFCC provides domestic violence training to over 4,000 community members each year, including educating teens on dating violence. Services to survivors include: crisis intervention, safety planning, individual/medical/court and parent/child advocacy, supportive counseling, emergency shelter, educational classes and support groups. All services provided are tailored to meet the needs of survivors and are free and confidential. Services are designed to be trauma informed, survivor driven, empowerment focused, and evidence based.

StepStone

StepStone, Inc. [SS] was founded in 1995 by the Sisters of St. Joseph of Wichita and the Adorers of the Blood of Christ. These women started a transitional housing program providing an option to women and children leaving domestic violence shelters. StepStone also provides supportive services and transitional housing for up to two years.

StepStone has 9 staff who provide direct services to survivors.

StepStone can house up to 35 families at one time. Services offered include therapeutic counseling for adults and children, children's activities, support groups for the entire family, advocacy services such as safety planning, life skills training, community resources and referrals. StepStone also offers outreach and follow up services, protection order court advocacy services and community domestic violence education.

Wichita Area Sexual Assault Center

Wichita Area Sexual Assault Center [WASAC] has supported survivors of sexual violence and provided education on sexual violence since 1974. Services expanded to Sumner and Cowley Counties in 2017. Survivor-centered services include: 24/7 response to the hotline and to medical advocacy at local hospitals; court advocacy; assistance with protection orders; short-term adult and child therapy; support groups; workshops focusing on healing through art, writing, and yoga; and crisis intervention.

In addition to the 24-hour telephone response, WASAC's Wichita office is open 8:30 AM to 7:00 PM, Monday-Thursday and Friday 8:30 AM to 5:00 PM for walk-in assistance. Educational programs are available to anyone who wants more information about sexual violence, its impact, and the resources available to survivors. Programs are available to schools, church groups, community and civic groups, professionals, and others. All services are free, confidential, and voluntary.

For purposes of this report, the advocacy agencies combined their workload information.¹¹ The following charts show the number of individual survivors who received services at each of the agencies, and which type of services were provided.¹²

¹¹ Janet Miller, a volunteer at WASAC, worked tirelessly with the four agencies to aggregate their information and create a chart for this report. The Team is thankful for her expert assistance and brilliant input.

¹² Children (under the age of 18) receive a significant number of "bed nights," and the children's use of shelter in this community necessarily impacts the availability of shelter ("bed nights") for adult survivors.

2015

Type of Victimization	HH	SS	WASAC	WFCC	Total
Domestic Violence	665	85	415	1,052	2,217
Sexual Assault	0	0	1,081	13	1,094
Total Unduplicated Primary Victims 18+	665	85	1,496	1,065	3,311

Services Provided to Primary Victims Ages 18+	Medical	Court	Protection Order	Supportive Counseling	Support Group Attendance	Hotline Calls	Bed Nights	Other	Total Services to Primary Victims 18+
HH	104	169	0	1,380	1,290	1,540	5,495	3,410	13,388
SS	0	11	2	958	196	0	5,010	1,427	7,604
WASAC	240	76	616	670	826	1,174	6	965	4,573
WFCC	321	504	92	1,917	784	2,193	3,771	3,598	13,180
Total Services	665	760	710	4,925	3,096	4,907	14,282	9,400	38,745

2016

Type of Victimization	HH	SS	WASAC	WFCC	Total
Domestic Violence	776	75	268	1,052	2,171
Sexual Assault	0	0	909	13	922
Total Unduplicated Primary Victims 18+	776	75	1,177	1,065	3,093

Services Provided to Primary Victims Ages 18+	Medical	Court	Protection Order	Supportive Counseling	Support Group Attendance	Hotline Calls	Bed Nights	Other	Total Services to Primary Victims 18+
HH	5	193	0	1,342	1,302	1,514	5,940	6,512	16,808
SS	1	19	4	803	159	0	4,112	7,849	12,947
WASAC	252	110	607	215	587	1,134	15	696	3,616
WFCC	445	534	190	2,926	1,156	1,926	3,532	108	10,817
Total Services	703	856	801	5,286	3,204	4,574	13,599	15,165	44,188

Medical Overview

In Wichita, Kansas, two hospitals provide forensic nursing services: **Via Christi Health [VC]** and **Wesley Medical Center [WMC]**. Both provide immediate medical care, forensic examinations, advocacy, patient follow-up and assistance with criminal justice services.

Via Christi Health, a part of Ascension, has been serving Wichita for more than 100 years and is the largest provider of healthcare services in Kansas. Ascension is the largest non-profit health system in the U.S.

Via Christi Forensic Nursing Services is located at Via Christi Hospital St. Joseph. The Via Christi Forensic Nursing Services program was the first of its kind in Kansas, starting in 1994.

The forensic nurses at Via Christi provide care to approximately 450 patients per year. The program has a dedicated coordinator, 4 full time nurses, 1 part time nurse, and 8 PRN (as-needed) nurses.

Via Christi Forensic Nursing Services provided the following information.

Year	Sexual Assault Exams	Domestic Violence Exams
2016	281	37

Wesley Medical Center has also been serving Wichita for more than 100 years. Notably, Wesley provides the most extensive emergency network in Wichita with the Wesley ER, Wesley Derby ER, Wesley West ER, the Wesley Woodlawn ER and the region's only pediatric ER.

In 2013, Wesley Medical Center started a Sexual Assault Nurse Examiners Program (Forensic Nursing). With a dedicated coordinator, four full-time nurses and eight PRN nurses, the program provides 24-hour coverage and serves more than 300 patients a year.

Wesley Medical Center provided the following information.

Year	Sexual Assault Exams	Domestic Violence Exams
2016	187	18

Prosecution Overview

The **Sedgwick County District Attorney [DA]** has established a special unit of experienced attorneys trained in the handling of domestic & sexual violence cases.

Notably, the decision whether to prosecute a case rests solely within the discretion of the District Attorney. As a result, cases that are presented to the Office by law enforcement are reviewed by specially designated charging attorneys who have many years of experience. All of the charging decisions are made in a manner consistent with National Prosecution Standards.

The Office also has case coordinators who are assigned to individual cases to assist victims throughout the prosecution process. There is also an Investigative Unit available to assist on domestic & sexual violence cases.

The Office provided the following information. As to the charts below, it is important to note they provide only the number of cases with the crime indicated having been charged. Many cases include many charges; therefore, the case numbers may include duplicates. In addition, there are many other crimes (i.e. cases) not included below that qualified as sexually motivated [sexual violence] and/or includes a domestic violence 'tag.'¹³

Domestic Violence Crime	Rape	Domestic Battery	Aggravated Battery	Assault	Aggravated Assault	Criminal Damage to Property
2015	5	95	165	2	83	46
2016	5	88	192	0	108	49

Sexual Violence Crime	Rape	Sexual Battery	Aggravated Sexual Battery	Sodomy	Aggravated Criminal Sodomy
2015	43	6	5	4	21
2016	24	1	13	9	4

¹³ K.S.A. 2017 Supp. 22-4616 provides that if there is evidence that a defendant committed a domestic violence offense, then a domestic violence designation shall be placed on the criminal case.

The **City of Wichita Prosecutor's Office [City]** has a Criminal Division of seven prosecutors with one prosecutor dedicated solely to domestic violence cases. That prosecutor is responsible for preparing a daily trial docket and reviewing all domestic violence arrests from the prior day. S/he is also responsible for other court appearances, including probation violations and sentencings.

Domestic violence misdemeanors are charged by the police at the time of the incident. All charged cases are reviewed by the domestic violence prosecutor the next business day to determine if additional charges should be added, if follow-up investigation is necessary, or whether the case should be dismissed. The charging decisions are made in a manner consistent with National Prosecution Standards. The prosecutor may also review cases presented by a detective. These are cases that may have been denied felony prosecution or cases where charges were not filed at the time of the incident.

The domestic violence section also has a dedicated case coordinator who interviews victims the next business day after an incident to determine if referrals for service are necessary. The same coordinator calls witnesses to encourage them to attend court and answers any questions during the trial process.

The City provided the following information. Annually, it handles more than 1,000 domestic & sexual violence cases.¹⁴

Domestic Violence and/or Sexual Violence Crime	2015	2016
Domestic Battery	1,980	1,969
Assault	149	152
Criminal Damage to property	905	979
Disorderly Conduct	677	743
Sexual Battery	9	11

¹⁴ The City of Wichita has provided the number of cases with the crime indicated having been charged. Some duplicates may have occurred because the information provided is the number of crimes charged rather than the specific number of cases wherein the crime was charged.

Civil Abuse/Stalking Protection Orders Overview

Historically in Sedgwick County, Kansas, civil protection from abuse/stalking orders were the sole responsibility of the 18th Judicial District Court's Family Law Department.¹⁵ According to Sedgwick County Family Court Services, it received the following number of intakes for abuse/stalking petitions in 2015 & 2016:

Year	Civil Protection from Abuse Intakes Received	Civil Protection from Stalking Intakes Received
2015	3,839	1,172
2016	3,894	1,230

In early 2017, the 18th Judicial District formalized its commitment [MOU] with four established, accredited advocacy agencies to develop a new process for the intake, screening and assistance in filing civil protection from abuse/stalking cases.

Harbor House, StepStone, Wichita Area Sexual Assault Center and the Wichita Family Crisis Center now provide four full-time court advocates who handle intake, screening and provide filing assistance.

Currently, the 18th Judicial District Court employs Magistrates, on a rotating basis, to handle the protection order docket (appearances and hearings). In addition, security during the docket is the sole responsibility of the Sedgwick County Courthouse Police Department.

Civil abuse/stalking protection orders are served by the Sedgwick County Sheriff's Office Judicial Division.^{16 17} According to the Sheriff's Office, most of the orders that are filed are served.

¹⁵ <http://www.dc18.org/dept/familylaw.shtml>

¹⁶ <https://www.sedgwickcounty.org/sheriff/crime-prevention/protection-from-abuse-and-stalking/>

¹⁷ 18th Judicial District Court Rule 700.

Year	Civil Protection from Abuse Orders received	Civil Protection from Abuse Orders served
2015	3,088	2,366
2016	3,206	2,876

Year	Civil Protection from Stalking Orders received	Civil Protection from Stalking Orders served
2015	1,566	1,196
2016	1,626	1,264

In Wichita, most of the civil protection order violations are handled by the Wichita Police Department. According to the Wichita Police Department, it processes approximately one thousand violations of district court protection orders annually.¹⁸

In addition, protection order violations are prosecuted in different courts: protection from abuse order violations are prosecuted in the City and protection from stalking order violations are prosecuted in District Court.

¹⁸ According to WPD, there were 885 violation of district court order cases (protective/protection orders) in 2015 and 1,728 in 2016.

IV. OVERVIEW: THE ASSESSMENT

At the outset, the Assessment Team conducted four lengthy focus groups with 34 individuals to find areas for improvement, or practices that impacted their risk and safety. The focus groups were facilitated by the participating advocacy agencies, and included eight unique questions about the survivor's interactions with helping systems in Wichita, Kansas. The participants' input was consensual and remains confidential.¹⁹

It is important to note that WASAC specifically issued a public invitation to its focus group participants, through social media.

The focus groups included individuals who:

- Were currently receiving advocacy services.
- Had previously received advocacy services.
- Had not received any advocacy services.

The participants included adult males and females who ranged from 18-57 years of age. The majority reported experiencing multiple incidents of domestic & sexual violence in Wichita, Kansas.

It is striking, at the outset, to note the participants shared many positive experiences with community and criminal justice agencies in Wichita, Kansas:

- A participant described contact with local law enforcement as “quick, diligent, [and the officer] maintained separation [and] made sure to clarify.”
- A participant provided an example of a very positive experience with local law enforcement. In sum, the participant explained that a neighbor called the police after hearing the participant's door being broken down. On scene, the abuser told law enforcement there was “just a fight,” suggesting both parties were willing combatants. According to the participant, however, the WPD officers who arrived took time to speak directly with the participant and (correctly) determined that the participant was not engaged in “mutual combat.”
- As to advocacy staff, a participant applauded the advocates as “hav[ing] been very supportive, compassionate [and] professional.”
- Similarly, a participant described the prosecutor as “excellent about respecting wishes, asked [me] about abuse . . . let [me] have a voice.”

When asked how the participants had received help, or services, in Wichita, Kansas, the participants reported either contacting the criminal justice agencies or the advocacy agencies to initiate services.

¹⁹ Appendix B: Survivor Focus Group: Notes & Focus Group Consent Form

As to the criminal justice agencies, most of the participants reported initiating contact by calling 911. Several participants, however, explained that they did not call 911 when they experienced domestic & sexual violence.

When asked why they did not call 911, the participants provided the following explanations:

- “I was raised not to call 911.”
- It “adds gas to the fire.”
- It “is another reason to get beat up.”
- “He’ll be back tomorrow.”
- “They don’t take you seriously.”
- Officers “think you are crazy or telling lies.”
- “Would they believe me?”

Additionally, when asked about their experience *after* calling 911, the participants reported a wide range of experiences. The following critical observations were shared:

- “You have to act a ‘certain way’ or they don’t take you seriously or they pass you off.”
- You have to repeat the story.
- “Told by police if you don’t calm down, we’re going to have to take you to jail.”

When asked what happened after they contacted law enforcement, the participants discussed the court systems in Wichita, Kansas. Specifically, the participants shared their experiences with criminal prosecution and civil abuse/stalking protection orders.

As to criminal prosecution, a participant explained that he/she was told by the officer, “You will get a phone call . . . let you know if DA picks up case.” Another participant elaborated that he/she had “no contact about case/trial” and another participant summarized it as entirely lacking “follow through.”

As to the advocacy agencies, many of the participants reported initiating contact by calling the “hotline.” The participants were not asked if the hotline “worked,” or about the efficacy of the survivor resource. However, none of the participants shared concerns about the “hotline” not being a credible, reliable and comprehensive survivor resource.

The participants did, however, explain that they had difficulty “finding” the hotline. When asked how they found it, the following explanations were provided:

- Google
- Attorney (divorce lawyer) recommended
- Police recommended
- Judge recommended
- Survivor recommended

- Phone book
- Social media

When asked about their experience with local advocacy agencies, participants described a variety of encounters.

As to the shelter experience, participants provided the following observations:

- “Feel controlled. Supposed to save money but criticized for asking for help.”
- “They want you to slip up, that’s how I feel.”
- “Sometimes treated like beneath the staff.”
- “Walking on eggshells.”

Finally, when asked for ideas on how to improve responses and resources, participants offered ideas for the Assessment Team to consider. Briefly, a few of the insights are provided.

- More space, and longer stays in shelter
- Advocates should be “on scene to provide resources, information”
- More mental health services
- Different officers dispatched
- Increase awareness of resources
- Build rapport with officers = Tell officers about our experiences
- LGBTQ resources
- More training with police

The participants provided context to the Assessment Team’s ethnographic research roadmap. Specifically, and as set forth above, individuals in Wichita, Kansas, experience a wide-range of positive and negative encounters and emotions after they have reported domestic & sexual violence.

Following a synthesis of the participants’ input, the Assessment Team defined the Assessment’s scope. It was apparent to the Assessment Team that it should focus on the victim’s risk and safety immediately after disclosure of domestic & sexual violence (*i.e. contacting a criminal justice and/or community agency after domestic & sexual violence has occurred*).

The Assessment Team focused on figuring out what happens immediately after a victim of domestic & sexual violence discloses the violence. To this end, the Team mapped what happens after a disclosure/report is made to law enforcement, to a medical provider or to an advocacy agency. The Team then examined each map for ‘flashpoints,’ or junctures wherein victim risk and safety may be compromised.²⁰

It also became apparent to the Team that a report of domestic & sexual violence, or disclosure, can quickly become a “case.” Therefore, the Team also

²⁰ Section VIII: Maps & Gaps.

mapped the processing of a domestic & sexual violence case in the City of Wichita Municipal Court and Sedgwick County District Court.

After mapping was completed, the Assessment Team noted the incredible expanse of information that must be considered to fully analyze every intersection and event set forth in the Maps. Therefore, and with ample consideration given to the limited time frame, the Team further narrowed its focus to examining institutional responses to victim risk and safety within seven days of disclosing domestic & sexual violence.

The Team defined “risk” in terms of lethality assessment (*i.e. is there an immediate physical and/or mental danger for the victim?*) and “safety” in terms of proximate recidivism (*i.e. is there a risk of immediate reoccurrence by the offender?*).

The Team organized the Assessment into the following areas of concentration:

- 1. Disclosure to law enforcement.**
- 2. Disclosure to an advocate.**
- 3. Disclosure to a medical provider.**

As to disclosure to law enforcement, the Team spent more than 60 hours reviewing approximately 100 different WPD criminal cases [i.e. the incident and arrest reports]. The cases were selected from a ‘population’ that was defined by the Team. Specifically, the Team worked with WPD to identify a domestic violence and sexual violence case population in 2015 and 2016.²¹

The reports that were selected for review were distributed among domestic violence cases and sexual violence cases. The selection criteria excluded open investigations, temporarily closed investigations, cases involving juvenile offender/victim and deceased survivor/victim cases. The selection criteria also included cases in which the following subsequent event had occurred: (1) City charges were filed; (2) County charges were filed; and (3) No charges were filed based on a decision made by law enforcement or the city/county prosecutor.

In total, the Team identified the following populations from which it selected domestic & sexual violence cases to review:

Type of Cases	Total in 2015	Total in 2016
Domestic Violence	6,080	5,854
Sexual Violence	344	304

²¹ Specific crimes were used to identify the case population. For domestic violence cases, the crimes were Rape DV, Aggravated Assault DV, Aggravated Battery DV, Battery DV, Assault DV, Fighting DV. For sexual violence cases, the crimes were Forcible Rape, Sexual Battery, Aggravated Sexual Battery and Sodomy.

To facilitate this process, the Team created a form. The form included identifying whether weapons/medical providers/advocates were involved and a narrative review of any problematic language that may have been found in the reports.²² The Team specifically focused on finding out about the use of a weapon and referrals/references to medical providers and/or advocacy because of the connection these factors have to victim risk and safety.

As noted above, this is not a quantitative systems review. The following information, does not provide a statistically significant review of all the domestic & sexual violence cases in Wichita, Kansas.

A summary of the Team's findings is provided solely to show how the Team developed its ethnographic research roadmap.

From the 2015 case population, the team reviewed 25 domestic violence cases and 16 sexual violence cases. The following is a summary of the Team's findings.

- In 15/25 of the domestic violence cases, a weapon was involved.
- In 1/16 of the sexual violence cases, a weapon was involved.

- In 10/25 of the domestic violence cases, a referral was made to a medical provider (e.g. EMS, Emergency Department, Forensic Nursing).
- In 9/16 of the sexual violence cases, a referral was made to a medical provider (e.g. EMS, Emergency Department, Forensic Nursing).

- In 0/25 of the domestic violence cases, a protective/protection order was mentioned.
- In 1/16 of the sexual violence cases, a protective/protection order was mentioned.

- In 0/25 of the domestic violence cases, referral to an advocacy agency was mentioned.
- In 2/16 of the sexual violence cases, referral to an advocacy agency was mentioned.

During this process, the Team noted language in the reports that caused it concern in light of the need for a trauma informed approach to domestic & sexual violence investigations. In sum, the Team identified the following two areas of concern:

- The use of qualifying language such as “allegedly” and “supposedly” to describe the victim's account of the violence.
- Conclusory, instead of factual, observations about the victim's physical injuries.

²² Appendix C: Wichita/Sedgwick County Domestic and Sexual Violence Audit 2017 Case Report Form.

Similar findings were made with respect to the 2016 cases that were reviewed. Specifically, the Team reviewed 45 cases from the 2016 population, including 25 domestic violence cases and 20 sexual violence cases.

The Team coupled the process with a review of six of the corresponding 911 calls, including three domestic violence cases and three sexual violence cases.

The Team members who listened to the 911 calls reported that the call takers did an excellent job of remaining calm, patient, respectful and worked quickly to assess risk and safety to each victim with sometimes minimal information in a high stress situation. In fact, the Team members specifically noted that the staff worked quickly to dispatch the six calls in under two minutes, resulting in law enforcement officers arriving quickly to the scene.

The scope of the Assessment included reviewing the community and criminal justice system's response to adult male and female survivors/victims of domestic & sexual violence. Excluding child survivors/victims from this community safety assessment in no way indicates a lack of interest in those cases or a lack of care and concern for those survivors/victims.

Specifically, the Assessment was limited for the following reasons:

- A Community Safety Assessment that is too broad can risk taking on too much information to have meaningful findings.
- The funding source for this project, the Improving Criminal Justice Response grant (ICJR), was specifically limited as follows:
 - ICJR grant funding may not be used for:
 - i. “Family violence services. Grant funds may not be used to address child abuse, other family violence issues such as violence perpetrated by a child against a parent, or violence perpetrated by a sibling against another sibling.” *Therefore, all domestic violence cases, outside of intimate partner violence, were omitted from this community safety assessment.*
 - ii. “Services for children. Grant funds may not be used to provide direct services to children, including children who are witnesses or survivors/victims of violence, except where such services are an ancillary part of providing services to the child's parent who is a survivors/victim of sexual assault, domestic violence, dating violence, or stalking (such as providing child care services while the survivors/victim receives services). In addition, funds may not be used to investigate or prosecute child abuse or child sexual abuse cases.”

V. THE ASSESSMENT QUESTION

“How does the Wichita/Sedgwick County community and criminal justice system respond to risk and safety for victims of domestic violence and sexual violence within one week of disclosure in Wichita?”

VI. THE INFORMATION COLLECTED

The Assessment Team collected information from a variety of sources, created original forms and reviewed numerous types of text. It also engaged in field observations and conducted focus groups and work practice/ 'big picture' interviews. As to each activity, the Team collaborated to ensure timely completion and review of all the collected information.

Team members spent many hours completing the following, briefly summarized, assignments which provide the evidentiary basis of this report:

Field Observations

- 50 hours with Wichita Police Department Patrol Officers
- 8 hours at the City of Wichita Domestic Violence Docket
- 8 hours with Sedgwick County Deputies serving Protective Orders
- 8 hours at the Sedgwick County District Court Protective Order Docket
- 8 hours with Sedgwick County Division of Emergency Communications

Focus Groups

- Focus Group with Court Advocates (WFCC/WASAC/HH/SS)
- Focus Group with Forensic Nurses (VC/WMC)
- Focus Group with Hotline Advocates (WFCC/WASAC/HH/SS)
- Focus Group with Medical Advocates (WFCC/WASAC)
- Focus Group with WPD Detectives
- Focus Groups with Survivors (WFCC/WASAC/HH/SS)
- Focus Groups with WPD Patrol Officers (3x)

Interviews

- Catholic Charities, Harbor House and Outreach Services Director
- City of Wichita Domestic Violence Prosecutor
- Kansas Coalition Against Sexual and Domestic Violence Director of Advocacy, Education and Rural Projects
- Kansas Legal Services Staff Attorney
- Sedgwick County Courthouse Security Chief of Police
- Sedgwick County District Attorney's Office Case Coordinator
- Sedgwick County District Attorney's Office Chief Charging Attorney
- Sedgwick County District Court Chief Judge
- Sedgwick County District Court Services Officer I
- Sedgwick County Division of Emergency Communications
- Sedgwick County Intensive Supervision Officer II with Pre-Trial Services
- Sedgwick County Sheriff's Office Judicial Sergeant
- Sedgwick County Sheriff's Office Records Administrator
- Sexual Assault Response Coordinator for McConnell Air Force Base

- StepStone Program Director
- Via Christi Forensic Nursing Program Coordinator
- Wichita Area Sexual Assault Center Director
- Wesley Medical Center Forensic Nursing Director
- Wichita Family Crisis Center Director of Client Services
- Wichita Police Department Captain, Training Bureau Commander
- Wichita Police Department Advocate in the Victim Assistance Unit
- Wichita Police Department Lieutenant of Domestic & Sexual Violence crimes
- Wichita Police Department Support Services Central Records staff
- Wichita Police Department Support Services S.P.I.D.E.R. Unit (Special Police Information Data Entry Retrieval) staff
- Wichita State University Chief of Police
- Wichita State University Title IX Coordinator

Text Analysis

- **Advocacy Agencies [Harbor House, StepStone, Wichita Area Sexual Assault Center, Wichita Family Crisis Center]:** policies/forms involving medical advocates, court advocates, outreach advocates, crisis/hotline advocates, shelter placement and Memorandums of Understanding with criminal justice and community agencies
- **Kansas Coalition Against Sexual & Domestic Violence:** training programs/curriculum
- **Kansas Law Enforcement Training Center:** training programs/curriculum
- **McConnell Air Force Base:** victim services pamphlets and forms, and Memorandums of Understanding with criminal justice and community agencies
- **Sedgwick County Division of Emergency Communications:** policies and training programs/curriculum; *six 911 calls, including three sexual violence and three domestic violence 911 calls*
- **Sedgwick County Sheriff's Office:** policies, victim services pamphlets/forms, and training programs/curriculums
- **Via Christi Forensic Nursing:** policies, victim services pamphlets and forms, and Memorandums of Understanding with criminal justice and community agencies
- **Wesley Medical Center:** policies, victim services pamphlets and forms, and Memorandums of Understanding with criminal justice and community agencies
- **Wichita Police Department:** policies, victim services pamphlets and forms, and training programs/curriculums; 100 cases, including 50 sexual violence and 50 domestic violence cases (The review included all incident and arrest reports)
- **Wichita State University Police Department:** victim pamphlets and forms
- **Wichita State University Title IX Office:** victim pamphlets and forms

VII. ACCOMPLISHMENTS DURING THE ASSESSMENT

From the beginning, the Community Safety Assessment process yielded results. Assessment Team members immediately began collaborating to implement changes as soon as concerns were identified. Increased opportunities for communication, as well as the ongoing willingness to work together, provided special opportunities to effect immediate changes.

Examples of the Team's accomplishments are as follows:

- The Team worked with the CCR and revised/updated the survivor resource information (posters/handouts) that is available inside the four Wichita Police Department substations.
- The Team worked with the CCR to collaborate and coordinate its response to media inquiries regarding the SAKI grant project (untested rape kits).
- The Team worked with the CCR to initiate planning for incorporating academic institutions into the CCR.
- The Team members who work for advocacy agencies built and/or strengthened relationships with the assigned officers at the substation nearest to their agencies.
- The Team members who work for the District Attorney's Office and Sedgwick County Division of Emergency Communications collaborated to incorporate specific domestic & sexual violence awareness/training into 911 training.
- The Team members who work for advocacy agencies and Sedgwick County Division of Emergency Communications collaborated to incorporate specific domestic & sexual violence awareness/training into 911 training.
- The Team members who work for the District Attorney's Office and Forensic Nursing collaborated to incorporate domestic violence awareness/training into Forensic Nursing training.
- The Team members who work for advocacy agencies and Forensic Nursing are working together to formalize their commitment (MOU) to providing medical advocates at the hospital when sexual violence is disclosed.
- The Team began the process of revising the informational sheet (WPD form #321-128) provided to domestic violence victims on scene.
- The Team member who works for the Sedgwick County Sheriff's Office began a review of their Domestic Violence and Sexual Assault training and procedures and is researching the implementation of a Lethality Assessment Program.
- The Team worked with WPD to encourage, and celebrate in, the department-wide adoption of the Lethality Assessment Program.
- The Team initiated the process of having the Lethality Assessment Form disseminated to relevant parties at the intake of an arrestee (to ensure it is part of the probable cause arrest process).
- The Team began working with Sedgwick County to update and revise the information it provides about protections from abuse/stalking orders.

- The Team communicated the need to further evaluate how to better, and consistently, share criminal justice and community agencies' information about domestic & sexual violence.
- The Team worked together to expand the social media presence of advocacy resources on all community and criminal justice agency platforms.
- The Team identified the need to enhance the privacy settings on all social media inquiries for all criminal justice and community agencies.
- The Team member who works in Forensic Nursing provided strangulation training to Emergency Department personnel.
- The Team members who work for the advocacy agencies responded to the survivor focus group observations by initiating organizational changes.

VIII. MAPS AND GAPS

As illustrated above, the Assessment team collected and reviewed a considerable amount of information. Every team member provided expert analysis of the information and participated in formulating this report. As shown below, the Team put effort into focusing solely on discovering, and solving, the difficulties that negatively impact the risk and safety of victims and survivors of domestic & sexual violence (“Gaps”).

Preliminarily, it is important to applaud the dedication and professionalism of every individual the Team contacted during this process. It was apparent that many coordinated efforts and effective processes are ongoing in Wichita, Kansas. In fact, there are many best practices in place protecting the risk and safety of victims and survivors of domestic & sexual violence in Wichita, Kansas.

The following “Gaps” are organized according to the following subjects:

- 911 & Law Enforcement
- Advocacy
- Medical
- Prosecution & Courts.

Preceding the Gaps, the Team has included the demonstrative “map” that it created at the beginning of the Assessment process. Each map outlines the general institutional response to a victim and/or survivor disclosing domestic & sexual violence. Each map also includes a notation (i.e. star) wherein the Team determined there may be a negative impact on victim risk and safety.

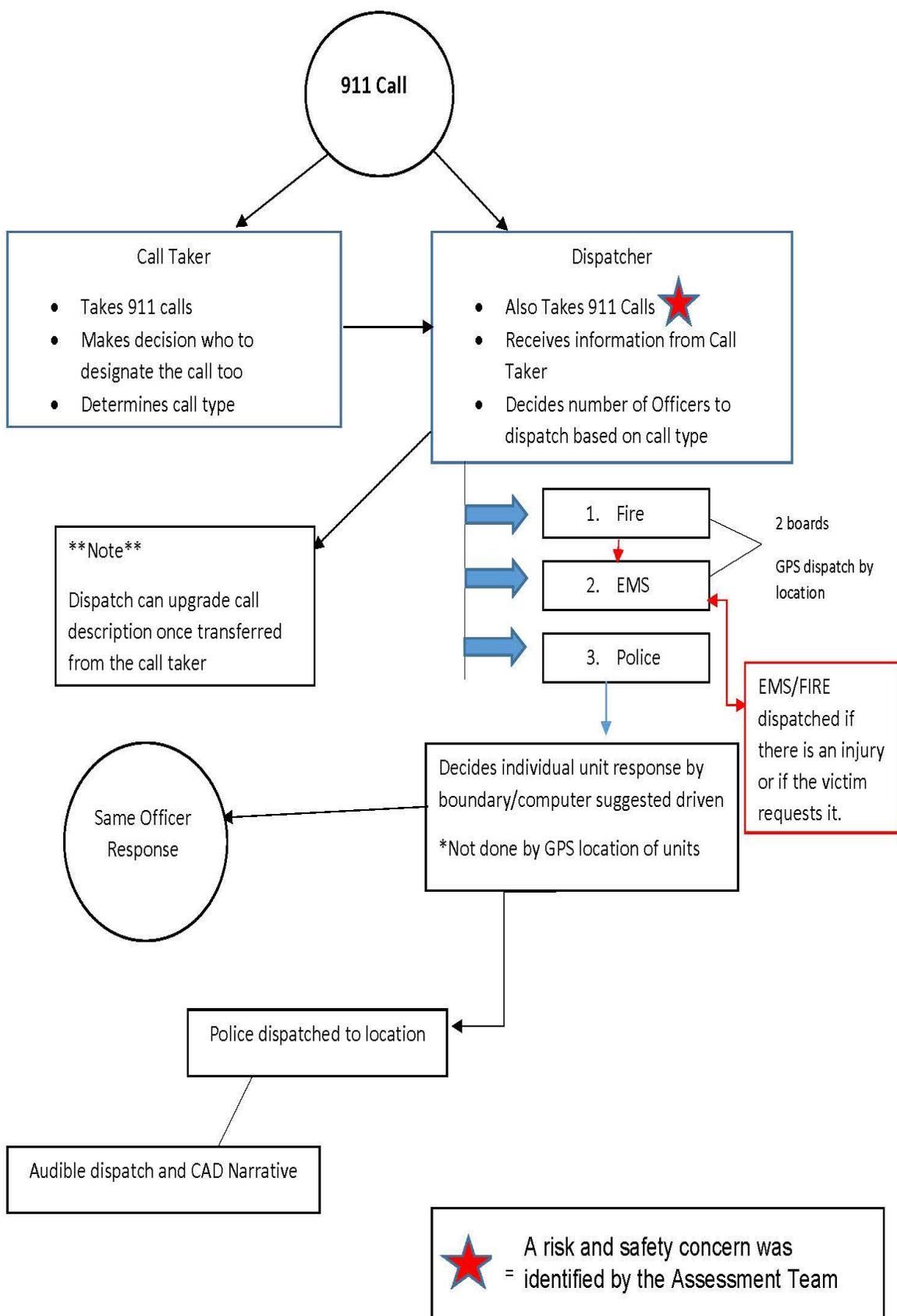
For each “Gap”, the Team has summarized its answers to the following three questions:

- (A) Why is this an obstacle for the risk and safety of victims of domestic & sexual violence within one week of disclosure in Wichita?
- (B) What contributes to this obstacle?
- (C) How can we overcome the obstacle?

Please note: The order, or sequence, of the Gaps is not based on the relative importance of the identified information.

- **Gap #1:** The Sedgwick County Division of Emergency Communications is understaffed for the workload of domestic & sexual violence response.
- **Gap #2:** The Wichita Police Department's Field Services Division is understaffed for the workload of domestic & sexual violence response.
- **Gap #3:** The Wichita Police Department's Investigations Division is understaffed for the workload of domestic & sexual violence response.
- **Gap #4:** Responding officers do not consistently have access to all criminal protective and civil protection order information.
- **Gap #5:** All law enforcement officers do not receive trauma informed domestic & sexual violence response training.
- **Gap #6:** Investigators do not consistently work to connect victims with community-based advocacy support during domestic & sexual violence investigations.
- **Gap #7:** The existing established, accredited shelter options for domestic & sexual violence survivors are limited in design, capacity and length of stay.
- **Gap #8:** There is a rapidly growing need for more established, accredited outreach resources for domestic & sexual violence survivors.
- **Gap #9:** There is a lack of education and training opportunities for medical providers to identify, and respond to, victims of domestic & sexual violence.
- **Gap #10:** There is a need for a specific domestic violence screening tool that can be used in all medical settings.
- **Gap #11:** There is a lack of consistent communication with victims of domestic & sexual violence who are involved in city and/or county criminal cases that are declined for prosecution.
- **Gap #12:** Victim risk and safety is compromised by the setting and conditions of the civil abuse/stalking protection order process in Sedgwick County District Court.
- **Gap #13:** Victim risk and safety is compromised by the setting and conditions of Domestic Violence Court in the City of Wichita Municipal Court.
- **Gap #14:** There is a lack of representation by probation and parole professionals, academic professionals and military professionals on the Wichita/Sedgwick County Coordinated Community Response Team.

Map # 1: Domestic & Sexual Violence 911 Call Response



Gap #1: The Sedgwick County Division of Emergency Communications is understaffed for the workload of domestic & sexual violence response.

A. Why is this an obstacle for the risk and safety of victims of domestic & sexual violence within one week of disclosure in Wichita?

When a victim of domestic & sexual violence calls 911, the victim's risk and safety is immediately impacted by how quickly the 911 call is answered, the nature/content of the questions asked and the type of services that are dispatched.

B. What contributes to this obstacle?

In Sedgwick County, 911 calls may be answered by a call taker and/or a dispatcher. The amount of work that must be done by the call taker and/or dispatcher is immense.

Specifically, the 911 call volume requires call takers to obtain answers to required questions in a minimum amount of time and then move on to the next call. Dispatchers must balance call taking and dispatching (fire, EMS and/or law enforcement) duties simultaneously.

On average, the Sedgwick County Division of Emergency Communications answers 650,000 calls to 911 for law enforcement response. In addition, it is responsible for coordinating more than 30 local fire, EMS and law enforcement agencies.

This incredible, annual workload is handled by an authorized limit of 66 dispatchers and 16 call takers.

Notably, it takes approximately a year to fully train and cross-train an employee. Specifically, it takes nine weeks to train a call taker, six additional weeks to cross-train the call taker to become a fire and medical dispatcher, and then an additional month to cross-train the fire and medical dispatcher to become a law enforcement dispatcher. Through this process of training, the individual must spend time on the floor in each position and need to be successful before moving on to the next step.

The turnover rate, or loss of trained call takers and/or dispatchers, is of great concern in Wichita, Kansas. Specifically, the turnover rate in the Sedgwick County Division of Emergency Communications is high and directly impacts the risk and safety of domestic & sexual violence victims because it results in the bulk of employee training being spent on just the "basics."

The high turnover rate of call takers and dispatchers leaves little time for them to receive in-depth training and experience in responding to domestic & sexual violence victims.

The high turnover rate appears to revolve around three factors:

1. Low pay.
2. Stress due to task oversaturation and inundation.
3. The requirement to be available for frequent overtime.

As to low pay, Sedgwick County Division of Emergency Communications' call takers and dispatchers are paid approximately the same as clerical staff in an office setting.²³ Considering the emergency service they provide to victims of domestic & sexual violence, the level of stress, vicarious trauma, and required multitasking, call takers and dispatcher are underpaid.

As to the stress caused by task oversaturation and inundation, the Team confirmed its existence when it observed the 911 command center. In fact, the Team observed a significant difference in rapport-building with callers and/or officers between the first and second shift staff.

Positives that were observed with first shift call takers and dispatchers included their ability to build rapport with a caller. Specifically, the call taker came across very genuine, empathetic, patient, professional, and understanding during 911 calls. The dispatcher on first shift also clearly had a great relationship with the officers in the assigned bureau.

During the second shift, the call takers and dispatchers were also professional. Yet, it was readily apparent to the Team that the second shift staff is handling a greater call volume with less experienced staff. The overall conclusion the Team reached is that second shift staff have less professional experience and less time to build rapport with callers/officers compared to first shift staff.

C. How can we overcome this obstacle?

The Team recommends the following two changes be made to overcome this obstacle:

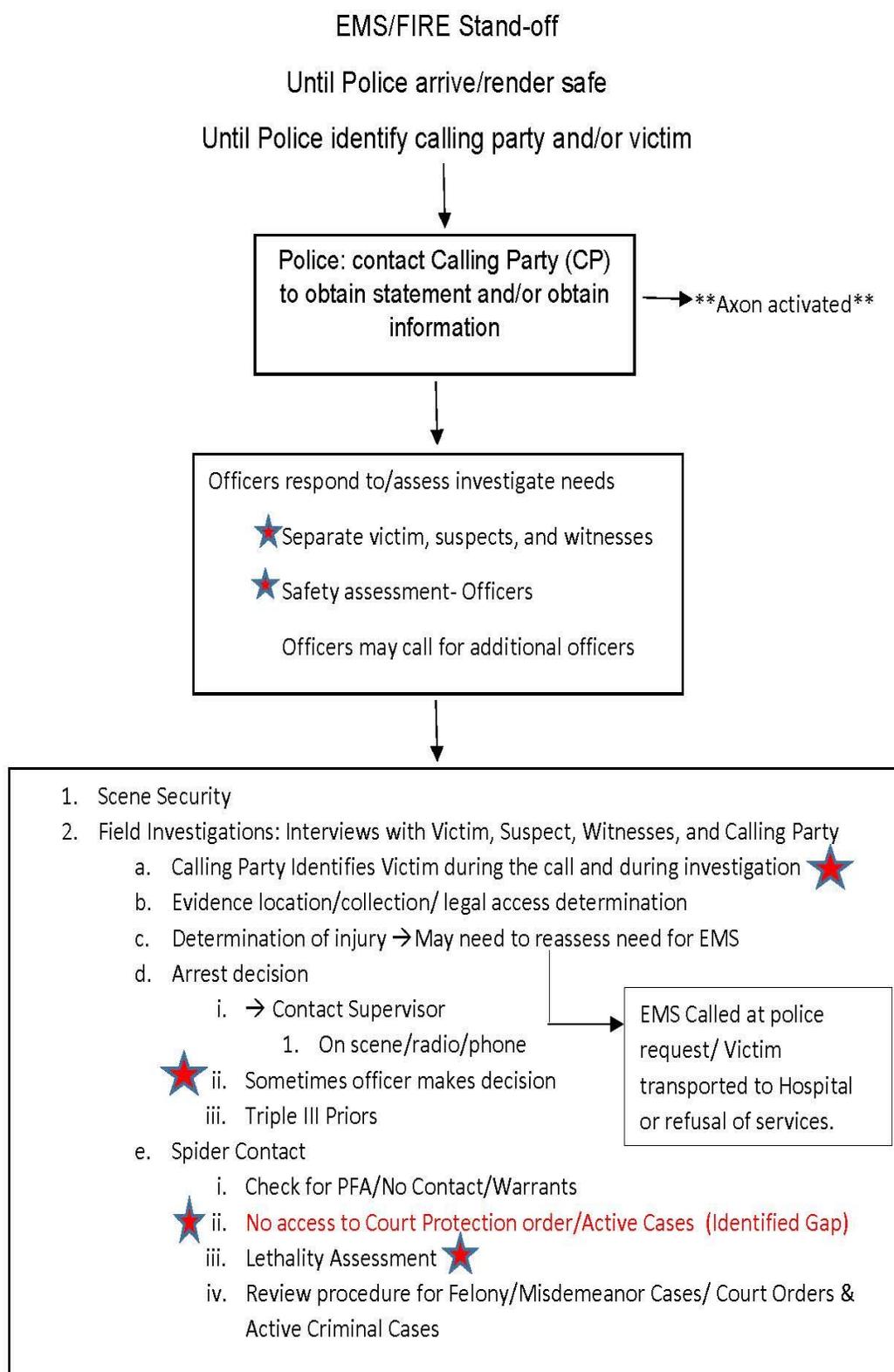
1. Increase the wage for all levels of the Sedgwick County Division of Emergency Communications staff.
2. Grant the Sedgwick County Division of Emergency Communications the ability to hire additional staff members to offset the task inundation and overtime.

Improved retention and staffing will benefit domestic & sexual violence victims in the following ways:

- When employees are retained, experience is retained. Experienced employees can balance the workload and have enhanced training.
- When there are more employees, there are more individuals to answer phone calls. An enlarged workforce will ensure 911 calls are answered more quickly and dispatchers will be better able to focus on the delivery of services.
- When there is retention of staff, there is an improvement in scheduling options and an elimination of required overtime. Less overtime equals less stressed and happier staff which equals even better retention.

²³ The 2017 Edition of the Kansas Wage Survey reported an entry-level salary of only \$26,620.00 for law enforcement emergency dispatchers in Wichita, Kansas. See <https://klic.dol.ks.gov/gsipub/index.asp?docid=600>

Map # 2: Law Enforcement On-Scene Response to 911 Call



= A risk and safety concern was identified by the Assessment Team

Gap #2: The Wichita Police Department Field Services Division is understaffed for the workload of domestic & sexual violence response.

A. Why is this an obstacle for the risk and safety of victims of domestic & sexual violence within one week of disclosure in Wichita?

The risk and safety of a victim of domestic & sexual violence is at stake as soon as the victim tells law enforcement about the violence. Particularly in the case of domestic violence, the offender is often someone who has been an intimate partner or a person who lives with or has lived with the victim. In the case of sexual violence, the offender often knows the victim and may have information about where the victim lives, works, etc. In both types of victimization, threats and intimidate about 'telling anyone' are often made to the victim.

Because of this element, the manner of the initial, on-scene contact between the victim and patrol officer/s is a major factor that affects victim risk and safety.

B. What contributes to this obstacle?

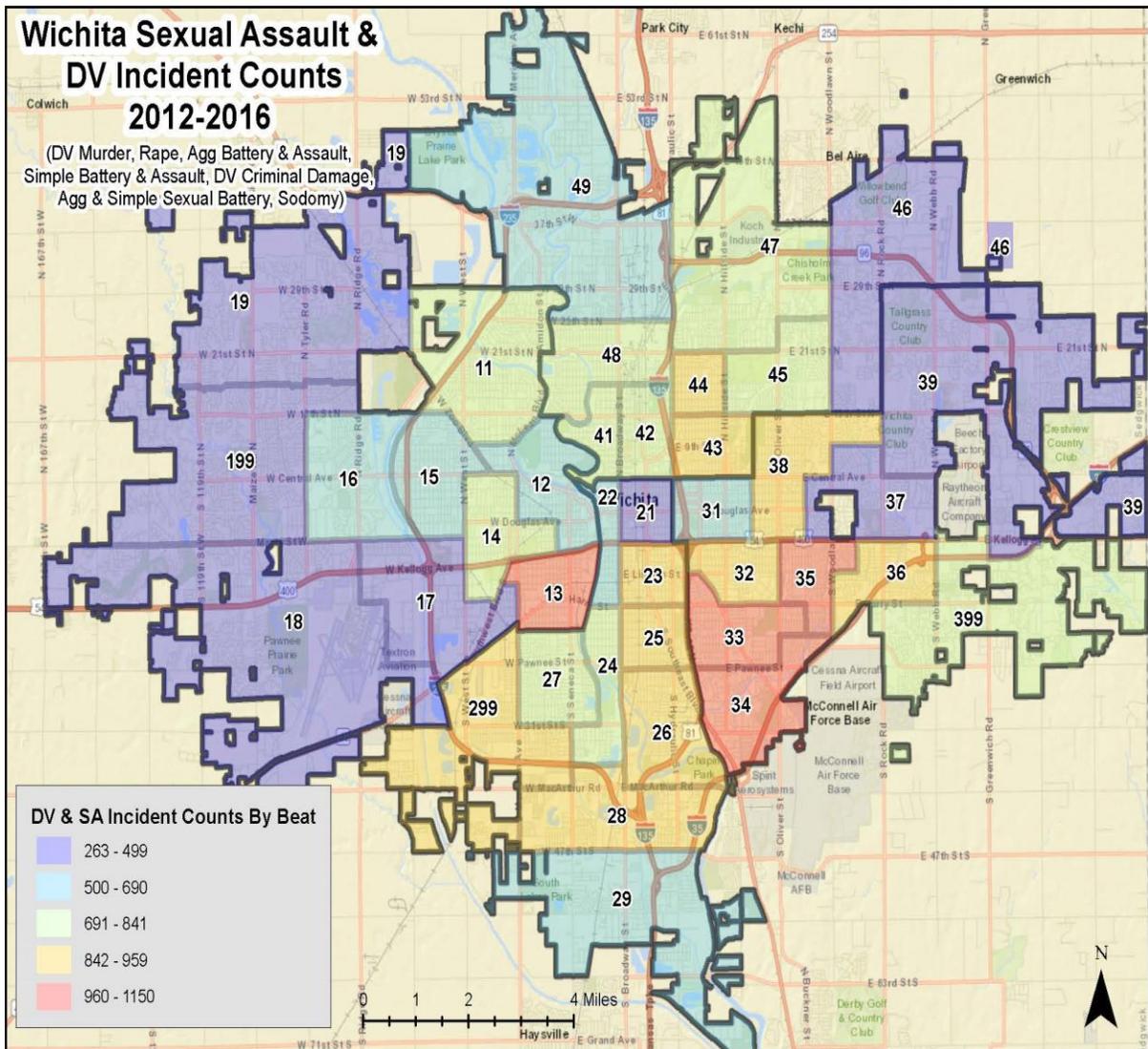
Domestic and sexual violence cases can take an inordinate amount of time for the responding law enforcement officer to process. In addition, because two thirds of domestic violence calls involve an intimate partner relationship, these types of law enforcement responses are extremely dangerous. It is dangerous because the responding officer must ascertain who the primary aggressor on scene, with limited resources and knowledge of what has happened.

Moreover, no one domestic or sexual violence call is the same. Thus, the responding officer must constantly be vigilant and aware of their surroundings while also safeguarding the victim on scene.

In Wichita, the WPD Field Services Division is responsible for the allocation of patrol officers. The patrol officers are dispatched by the Sedgwick County Division of Emergency Communications, in response to 911 calls for a law enforcement response.

To illustrate the approximate domestic and sexual violence workload handled by WPD patrol officers, the following map of Wichita was provided by a WPD crime analyst:²⁴

²⁴ The information and corresponding demonstrative map was provided to the Team by Geoffrey Vail, Crime Analyst, Wichita Police Department.



In 2017, the Matrix Consulting Group conducted a personnel staffing study of the Wichita Police Department. The findings stated that the Wichita Police Department was at staffing levels from “about 10 years ago.”²⁵ The recommendation was to add 49 officers to patrol and 4 detectives to the Domestic Violence/Sex Crimes Unit of the Investigations Division. At the time of this report, the goal of adding 49 officers to patrol has not been met.

During focus groups and the Team’s “ride-alongs,” patrol officers expressed frustration at the minimal staffing, especially on the overnight shifts. Patrol officers identified its negative impact on their ability to respond to the unique circumstances of a domestic & sexual violence victim.

Agencies that work with WPD’s patrol officers confirmed that the patrol staffing deficiency has an impact on the risk and safety of victims of domestic & sexual violence. In fact, 911 staff told the Team that they must have a certain number of officers available at any given time so many officers are not given a break or have time to take lunch throughout their shift due to the high volume of calls. The 911 call takers noted that there is a longer 911 response time due to limited number of officers available and the requirement for two officers on scene.

²⁵ Richard Brady, president of the Matrix Consulting Group, quoted at <http://www.kmuw.org/post/wichita-police-department-needs-add-more-70-new-staff-study-says>.

C. How can we overcome this obstacle?

The Team recommends that patrol staffing levels be consistent with the staffing study's recommendation.

To achieve this goal, the Team observes that increasing community awareness of the impact that patrol staffing has on protecting victims of domestic & sexual violence may be helpful. The Team also observes that a renewed emphasis on hiring female officers may be helpful.²⁶

²⁶ See <http://womenandpolicing.com/pdf/newadvantagesreport.pdf> (noting that more female officers will improve law enforcement's response to violence against women).

Gap #3: The Wichita Police Department Investigations Division is understaffed for the workload of domestic & sexual violence response.

A. Why is this an obstacle for the risk and safety of victims of domestic & sexual violence within one week of disclosure in Wichita?

Victims of domestic & sexual violence are uniquely vulnerable during a criminal investigation. In the case of domestic violence, the offender is often someone who has been an intimate partner or a person who lives with or has lived with the victim. In the case of sexual violence, the offender often knows the victim and may have information about where the victim is located.

Because of this situation, timeframe and length of investigation impacts victim risk and safety.

B. What contributes to this obstacle?

To understand why it is an obstacle for the risk and safety of victims of domestic and sexual violence within one week of disclosure in Wichita, it is important to have a general understanding about what tasks and resource allocation is necessary to investigate the case.

Detectives are assigned cases that exist in various stages of completion. For example, most domestic violence cases are assigned as either in-custody (suspect has been arrested), as a pick-up (a pick-up has been issued for the suspect to be arrested and questioned), or as a suspect status case (no arrest or pick-up has been issued). Sexual violence cases are similarly assigned, however there may also be cases where the suspect has not been identified, which involves even more in-depth follow-up by a detective. There are time limitations present for in-custody cases to be presented to a charging authority, which presents a need to prioritize cases.

A criminal investigation is comprised of many elements that consume time and resource allocation. A detective must review all reports and evidence in a case to develop a full understanding of what occurred. Victims, witnesses, and suspects must either be interviewed for the first time, or in some cases a second time for clarification on facts. Evidence (video surveillance, cell phones, physical evidence from crime scene, etc.) must be identified, evaluated and sent for forensic examination. Often this may result in the application of search warrants. Detectives review jail phone calls, recorded statements done by patrol officers, and AXON video in many cases.

After all these tasks are accomplished, the detective must complete supplemental reports to document investigative actions. Ultimately a charging affidavit is prepared, and the investigator must compile all the evidence and documents for discovery purposes. Even after charging, there are occasionally follow-up tasks that must be done on a case.

Currently, there are nine detectives assigned to the Wichita Police Department's Domestic Violence/Sex Crimes Unit.²⁷ One detective is tasked with reviewing most of the misdemeanor domestic violence cases that were initiated (i.e. charged) by the responding officer. This detective reviews those unique types of situations, to assess the need for further action by the Unit.

On average, each Domestic Violence/Sex Crimes Unit detective investigates approximately 247 felony cases annually.²⁸

During focus groups with the detectives, the Team learned that the detectives want to give 110% to *all* their cases but they are not able to do it. The detectives explained that they must prioritize their cases because they are constantly being assigned new cases. Many of the detectives reported that they come in early, stay late and work weekends to keep up with the workload.

The detectives also told the Team that there is high turnover in the Domestic Violence/Sex Crimes Unit (i.e. detectives seeking re-assignment to a different bureau/unit) because of the workload. In fact, one detective explained that turnover is high because: "If you can make it here, you can make it anywhere."

The consequences of having high turnover in the unit are measurable. The detectives explained to the Team that the average time a detective stays in the Domestic Violence/Sex Crimes Unit is well below the average time a detective will stay in other units of the Crimes Against Persons Bureau (i.e. Gangs, Property). "New" detectives shared with the Team that they learned to do things on their own because they did not want to bother the more seasoned, and very busy, detectives.

A detective summarized the workload of investigating domestic & sexual violence cases as follows:

"It's like turning on a firehose and drinking directly from it."

C. How can we overcome this obstacle?

The aforementioned 2017 professional staffing study recommended adding four more detectives to the Domestic Violence/Sex Crimes Unit.²⁹ The Team echoes the recommendation: 12 detectives should be assigned to the Domestic Violence/Sex Crimes Unit of the Wichita Police Department.

The Team also recommends that a Sergeant and dedicated clerical assistance be added to the Domestic Violence/Sex Crimes Unit. Considering the amount of administrative work that is involved and the need for additional supervision and training, a Sergeant and support staff could provide detectives with the tools they need to give 110% to their cases.

²⁷ <http://www.wichita.gov/WPD/Investigations/Pages/SexCrimes.aspx>

²⁸ In 2015, there were 1746 case assigned to the section. In 2016, there were 2058 case assigned to the section. The misdemeanor detective was assigned 110 cases. In 2017, there were 2004 cases assigned to the section. The detectives were assigned an average of 236 cases.

²⁹ See Gap #2.

Gap #4: Responding officers do not consistently have access to all criminal protective and civil protection order information.

A. Why is this an obstacle for the risk and safety of victims of domestic & sexual violence within one week of disclosure in Wichita?

Victims of domestic & sexual violence often have an existing criminal protective order and/or an existing civil protection order at the time of domestic & sexual violence. Because of this element, a responding officer's ability to arrest or issue a pick-up for the offender for violating the existing order necessarily impacts victim risk and safety.

B. What contributes to this obstacle?

While officers are consistently capable of accessing information about the existence of civil Protection from Abuse and Protection from Stalking orders, they do not have consistent access to other types of protective orders, like the protective orders that stem from post-release bond restrictions in city and/or county criminal cases or orders consolidated into divorce decrees.

Officers also do not have the ability to read the content of the civil protection orders. Specifically, officers on scene are unable to assess what contact or conduct are specifically restricted within the content of a civil Protection from Abuse or Protection from Stalking order.

It is noteworthy to mention that through S.P.I.D.E.R. (the Special Police Information Data Entry and Retrieval information unit of the WPD), only the existence of Civil Protection from Abuse, Civil Protection from Stalking and municipal no-contact orders are actively searched for unless specifically asked otherwise.³⁰

In addition, law enforcement agencies [WPD & SO], prosecuting agencies [City & DA] and courts [City of Wichita and Sedgwick County District Court] all operate with separate and unique data management systems. Specifically, civil abuse/stalking protection orders are maintained in the Sedgwick County District Court's data management system [Fullcourt] and entered into NCIC (the National Crime Information Center) by the Sedgwick County Sheriff's Office Records Division.

Considering the different data management systems and responsibilities, the Wichita Police Department staff relies solely upon the Sheriff's Office Records Division to learn about the content of a civil abuse/stalking protection order. In fact, all law enforcement agencies in Sedgwick County, Kansas, rely exclusively upon SO Records for specific information about the content of an existing civil abuse/stalking protective order.

During focus groups, Wichita Police Department officers and detectives explained the difficulties that they have in enforcing protective/protection orders.

³⁰ See WPD Policy 713.

Specifically, the officers and detectives confirmed that they do not have consistent and complete access to criminal protective orders and civil protection orders.

In fact, the officers reported incidents when they were unable to confirm a protection/protective order's validity and/or its specific content.

In addition, S.P.I.D.E.R. and Wichita Police Department Records confirmed that officers cannot access current information regarding the status of City of Wichita protective orders (criminal) and Sedgwick County district court orders (criminal) because SPIDER and Sheriff's Records do not have access to the sources.

Finally, during "ride-alongs", Team members observed that responding officers have limited access to protective/protection order information.

All of this can have immediate consequences for victim risk and safety on scene. Not being able to verify the existence of a protective/protection order immediately will often result in officers making a case and taking no immediate enforcement action.

In addition, it takes time to route a report to investigations where a detective must review the case, verify the language in the order, and prepare the case for prosecution. During that time, the victim is exposed to prolonged danger because the offender has time to avoid capture.

C. How can we overcome this obstacle?

The Team recommends that Sedgwick County law enforcement agencies unify, or combine, their records management systems. A unified system would allow officers from every agency to access important protective/protection order information.

The Team recognizes that efforts are currently underway to achieve the goal of data system unification in Sedgwick County, Kansas. Thus, in the meantime, the Team strongly encourages read-only access to pertinent databases such as I-Leeds, E-Justice, or Full Court be granted to S.P.I.D.E.R. and the Records Bureau of every Sedgwick County law enforcement agency.

In sum, if complete protective/protection order information was readily available to law enforcement officers now, then offender arrests could be made in situations that were not previously possible.

Gap #5: All law enforcement officers do not receive trauma informed domestic & sexual violence response training.

A. Why is this an obstacle for the risk and safety of victims of domestic & sexual violence within one week of disclosure in Wichita?

A victim's response to the criminal justice process and community-based services is directly impacted by the trauma of the domestic & sexual violence experience. Therefore, a law enforcement officer's ability to understand how trauma affects the victim impacts victim risk and safety.

B. What contributes to this obstacle?

Traditionally, trauma informed training includes learning about the neurobiology of trauma and recognizing that there are trauma-related behaviors.

In the context of law enforcement, it is apparent that trauma informed officers are better equipped to correctly recognize signs of victim trauma and to understand what effect that trauma has on victims. Those officers are more likely to ask appropriate questions of victims to obtain facts and information, and less likely to jeopardize an investigation by asking inappropriate questions or to incorporate victim-blaming language and subconscious bias into police investigations and reports.

Trauma informed officers are also more likely to recommend and utilize victim advocate resources at various stages of the investigation. Incorporating victim advocacy contact with victims at critical stages of the investigation and criminal justice experience increases the likelihood that victims will continue to stay engaged in the process, which remains a significant obstacle for law enforcement.

Ensuring that the victim stays engaged in the process provides safety planning through sustained advocacy. It will also help reduce any influence or intimidation by the offender towards the victim. Assisting the victim through the entire criminal justice process from incident to sentencing and beyond will effectively increase the chances that the offender will be held accountable.

Currently, Wichita Police Department officers receive minimal domestic & sexual violence training (general) and trauma informed training (specific).

Specifically, Wichita Police Department recruits (i.e. newly hired officers) receive general domestic & sexual violence training during the Academy. Recruits do not, however, receive any trauma informed domestic & sexual violence response training.

In addition, Wichita Police Department officers are not required to attend any additional domestic & sexual violence training (general) and/or a trauma informed domestic & sexual violence response training (specific). Notably, Wichita Police Department detectives who are assigned to the Domestic Violence/Sex Crimes Unit are not required to attend any domestic & sexual violence training and/or a trauma informed domestic & sexual violence response training.

During focus groups, Wichita Police Department officers told the Team that the majority of 911 calls to which they respond involve domestic & sexual violence. In response to the high volume of these calls, the officers expressed their desire for mandatory and enhanced training in responding to reports of domestic & sexual violence.

Specifically, the officers told the Team that, because of the lack of mandatory and enhanced training, field training officers (FTO) do not consistently have the training necessary to provide a complete (general) and trauma informed (specific) response to domestic & sexual violence. The officers noted that sergeants in the field often face the same challenge.

In sum, the officers voiced a desire for more opportunities for training on domestic & sexual violence generally and trauma informed training specifically.

C. How can we overcome this obstacle?

The Team recommends that the Wichita Police Department incorporate trauma informed training (specific) into its Academy and require all current officers to attend an enhanced domestic & sexual violence training and a trauma informed training.

Specifically, the Team suggests that the Wichita Police Department training bureau work with advocacy agencies and prosecutors to develop a 'best practices' training that expands upon the initial, general domestic & sexual violence training offered at the Academy. This training should include information about local advocacy resources and the trauma informed response.

At a minimum, all new field training officers and field sergeants should be required to attend domestic and/or sexual violence training before working with patrol officers.

In addition, the Team suggests the Wichita Police Department offer advanced training for officers who want additional skills in responding to domestic & sexual violence. Examples of advanced classes may include stalking, protection orders, strangulation, and primary aggressor.

As an added benefit, the Team encourages cross training officers with the advocacy agencies.

Gap #6: Detectives do not consistently work to connect victims with community-based advocacy support during domestic & sexual violence investigations.

A. Why is this an obstacle for the risk and safety of victims of domestic & sexual violence within one week of disclosure in Wichita?

Victims of domestic & sexual violence are uniquely vulnerable during a criminal investigation. As a result thereof, the victim's ability to connect with safety planning, victim compensation, shelter, and even long-term shelter, during the criminal investigation impacts the victim's risk and safety.

B. What contributes to this obstacle?

During focus groups, survivors expressed frustration with getting information about community-based advocacy resources. Specifically, several survivors told the Team that they had to "Google it" to find information about community-based resources in Wichita.

In addition, the workload of the Wichita Police Department Sex Crimes/Domestic Violence detectives does not leave time for the detectives to consistently connect a domestic & sexual violence victim with community-based advocacy support during an investigation.³¹

The Wichita Police Department does not have a formal system/program that incorporates community-based advocacy into the criminal investigation process.

C. How can we overcome this obstacle?

The Team recommends the Wichita Police Department implement a formalized program to incorporate community-based advocacy into the investigation of domestic & sexual violence.

Specifically, the Department should work to develop an officer's knowledge before the officer begins investigating domestic & sexual violence cases. This process must include trauma informed training (and the incorporation of advocacy support into the investigation).³²

In addition, the Department should consider having the sex crimes/domestic violence detectives operate as a conduit to community-based advocates. Making the connection between a victim and a community-based advocate will help the victim secure safety planning, compensation, shelter, and even long-term shelter during the investigation.

Investigators should also be encouraged to make a community-based advocate available to the victim at the time of the interview. The benefits of having an advocate available are numerous: advocates can help the victim prepare physically,

³¹ See **Gap #3**: The Wichita Police Department's Investigations Division is understaffed for the workload of domestic and sexual violence response.

³² See **Gap #5**: All law enforcement officers do not receive trauma informed domestic & sexual violence response training.

mentally and emotionally for the interview as well as recover physically, mentally and emotionally from the interview.

Finally, the Team recommends that community-based advocates from each of the established, accredited agencies learn more about the investigative process. In fact, community-based advocates should go on a ride along with patrol officers and spend time “shadowing” the sex crimes/domestic violence detectives.

Map # 3: Advocacy- Hotline

Hotline

Screening Process to determine needs:

1. Crisis call starts with assessing safety.
2. What happened to lead them to call?
3. Assessing current needs of victim and access to resources
4. Staff determine whether client appropriate for shelter services, outreach services, or other services not related to DV- based on crisis call.
5. Staff check space availability if appropriate and needing shelter services
6. Average of 110 people turned away a month- due to shelter being full
7. Hotel is an option for LAP calls and/or other severe imminent danger cases- Must be approved by a supervisor.
8. WFCC has extra rooms they can utilize in their facility

Admit

1. HH reads *portions* of our rights and responsibilities that surround *safety* for clients over the crisis call and client must agree to terms in order to admit (i.e. having a roommate, no violence, and no drugs on property confidentiality etc.)
2. WFCC- goes over all rights and responsibilities

Client enters shelter

Not Admit

1. Screened out for shelter services based on imminent danger or not DV
2. No later follow up completed with client after call is made- due to potential safety risk
3. Other resources are offered to meet their needs
4. Both shelters have outreach services that clients are provided on the hotline if not appropriate for shelter
 - a. HH has 1 outreach advocate with a 24 hour response time no more than 72 hours.
 - b. WFCC has 4 outreach advocates and a medical outreach advocate who goes to the hospital.

Harbor House

- Initial intake with admissions and intake specialist, tour provided, and client is signed up with advocate and counselors for initial appointments to be completed within the first 72 hours of entering the program. Assessments to be completed within the first 3 days of entering the program are as follows:
- Advocate assessment- Discuss needs, goals, and provide resources and referrals as needed.
 - House manager- review rights and responsibilities
 - Adult Counselor- Assess mental health needs of the individual, Resources put in place to meet those needs.
 - Child Counselor- Parenting assessment completed if children in shelter. Identify needs and barriers around parenting. In addition, meets with each child individually to assess needs. Resources put in place to meet those needs.
 - Individuals encouraged to meet with advocate weekly to complete goals and assess progress. Individuals meet with counselors as needed.
 - 6 week stay- extensions available based on safety and participation in program.
 - Groups offered daily related to life skills and support (i.e. Budgeting, nutrition, dv education, art therapy, employment education)

Wichita Family Crisis Center

- 6 week program- extensions available based on safety and progress in program
- Initial intake completed by advocate- review rights and responsibilities for program and address any immediate needs (safety, confidentiality)
- Provide a tour of the facility
- Meet with the assigned advocate within 24-48 hours; discuss needs, long and short term goals, education, employment etc.)
- Chores assigned to each client
- Support groups and educational classes offered weekly.
- At exit are referred to outreach services for continued follow up- no follow up from shelter at exit.

 = A risk and safety concern was identified by the Assessment Team

Gap #7: The existing established, accredited shelter options for domestic & sexual violence survivors are limited in design, capacity and length of stay.

A. Why is this an obstacle for the risk and safety of victims of domestic & sexual violence within one week of disclosure in Wichita?

A lack of existing established, accredited shelter options results in the survivor having to remain in an unsafe situation and/or limits their ability to stay in a safe and confidential location that is unknown to the abusive partner. This increases their risk and safety. Therefore, the nature, availability and condition of the existing, established and accredited shelter options impacts victim risk and safety.

B. What contributes to this obstacle?

In Wichita, emergency shelter housing (e.g. “bed space”) is provided by Catholic Charities Harbor House and the Wichita Family Crisis Center. StepStone and the Wichita Area Sexual Assault Center are not able to provide emergency shelter.

Despite the similar service they provide, however, the physical building dynamics, location and capacity of the shelters are vastly different.

In fact, the Harbor House shelter was designed and built specifically as a domestic violence shelter. The Wichita Family Crisis Center shelter is a repurposed building that was turned into a domestic violence shelter.

In addition to the physical difference between the shelters, Catholic Charities Harbor House and Wichita Family Crisis Center are limited in their capacity to provide shelter: on average, both crisis shelters are unable, due to capacity, to provide direct shelter for approximately 60 adults each month.

In situations where the shelters are at capacity, each agency insures safety planning has occurred and then utilizes other resources (internal and community) to help the survivor. Examples include connecting the survivor with agency outreach advocates, contacting surrounding domestic violence shelters for assistance with housing, contacting community shelters and, in some cases, relocating the survivor out of area/state.

There are no intermediate or secondary shelter options in Wichita, Kansas. Therefore, with no intermediate or secondary shelter options to assist survivors when they have become safe, stable and are waiting for housing, crisis beds stay filled longer – which, in turn, causes the agencies to turn-away even more survivors.

In sum, the shelter situation in Wichita, Kansas, increases survivor risk and safety due to crisis shelters operating almost always at capacity with no additional resources for survivors in the interim as they are transitioning from crisis services to long term stability.

C. How can we overcome this obstacle?

The Team offers the following three recommendations to overcome this obstacle:

- (1) Increase prevention education in Wichita, which will aid in lessening the need for enhanced shelter options;
- (2) Commission, or facilitate, a formal, professional study of the shelter situation in Wichita, which will provide the evidentiary basis to strategically respond to the current shelter situation; and
- (3) Work for legislative and local funding to execute the results of the professional study.

It is important to note that a formal, professional study of the shelter situation was conducted in Wichita by the United Way in the 1990s. The results of the study inspired the creation of StepStone, which started a transitional housing program, and Harbor House, which started an emergency shelter program. Ideally, a new professional study will again provide a comprehensive and strategic plan to improve the design, capacity and length of stay of shelter options in Wichita, Kansas.

Gap #8: There is a rapidly growing need for more established, accredited outreach resources for domestic & sexual violence survivors.

A. Why is this an obstacle for the risk and safety of victims of domestic & sexual violence within one week of disclosure in Wichita?

Survivors of domestic & sexual violence are uniquely vulnerable after they report the violence because they need access to trauma informed resources to increase safety and decrease vulnerabilities. Although some survivors need shelter after they report the violence, there are many survivors who need other services to enhance their healing from victimization. Because of this element, limited availability of outreach resources impacts victim risk and safety.

In addition, survivors cannot access what is unknown to them. Without information and knowledge regarding services specific to sexual & domestic violence survivors, a comprehensive outreach response is not possible. Safety of sexual and domestic violence survivors will be better addressed if relevant information is available to survivors as well as the community at large.

B. What contributes to this obstacle?

“The Lethality Assessment Program—Maryland Model (LAP), created by the Maryland Network Against Domestic Violence (MNADV) in 2005, is an innovative strategy to prevent domestic violence homicides and serious injuries. It provides an easy and effective method for law enforcement and other community professionals—such as health care providers, clergy members, case workers, court personnel, and even bystanders or family members—to identify victims of domestic violence who are at the highest risk of being seriously injured or killed by their intimate partners, and **immediately connect them to the local community-based domestic violence service program.** [Emphasis Added.]”³³

In March of 2016, the Wichita Police Department piloted a Lethality Assessment Program (LAP). The LAP required a responding officer to complete a Lethality Assessment Screen by asking the victim assessment questions and completing a form. If the victim scored high on the assessment questions, then the officer would call a specified hotline number that rings to both Harbor House and Wichita Family Crisis Center.

The LAP was shown to work, from the beginning, to connect survivors to resources in Wichita, Kansas. The following chart shows the number of calls Harbor House (HH) and Wichita Family Crisis Center (WFCC) received during the piloting of the program.

³³ <https://lethalityassessmentprogram.org/about-lap/how-lap-works/>

2016 (Pilot Program North Patrol)		
	HH	WFCC
March	13	6
April	17	8
May	12	16
June	5	11
July	0	17
August	3	16
September	5	10
October	3	4
November	0	6
December	2	7
Total	60	101

In January of 2018, the Wichita Police Department adopted the Lethality Assessment Program.³⁴ By the end of March, all patrol officers were trained to use the LAP. Accordingly, the number of Lethality Assessment hotline calls has greatly increased since March of 2018.

2018 (City Wide)		
	HH	WFCC
February	5	16
March	57	56
April	47	31
May	57	30
June	39	26
Total	205	159

As is evident above, the Lethality Assessment Program is increasing the demand for community-based advocacy resources in Wichita, Kansas.

Currently, there is no full-time Lethality Assessment Program Coordinator in Wichita, Kansas. Instead, the Wichita Police Department training bureau and the Harbor House and Wichita Family Crisis program directors are all keeping track of the number of times the assessment is being deployed in Wichita, Kansas.

C. How can we overcome this obstacle?

The Team officers the following three recommendation to overcome this obstacle:

- (1) Increase funding to expand, and enhance, information sharing about outreach programming in Wichita; and
- (2) Increase funding to expand the number of outreach advocates at the existing, accredited advocacy agencies in Wichita; and

³⁴ See WPD Policy #512.

(3) Increase funding to expand the existing established, accredited outreach programming options that are available in Wichita.

The Team also strongly encourages all of the agencies participating in this Assessment to explore the feasibility of having a full-time or part-time Lethality Assessment Program Coordinator in Wichita, Kansas.

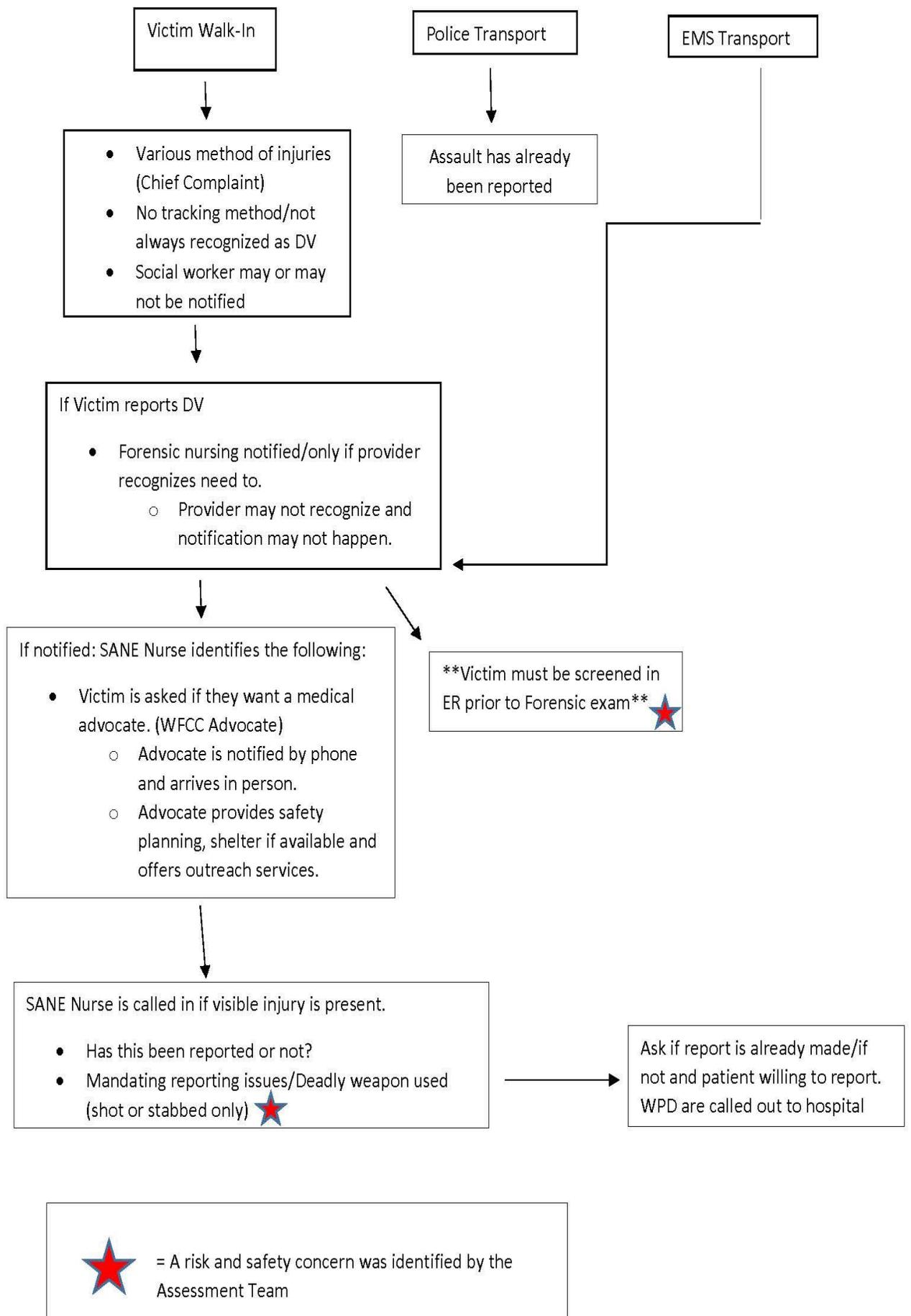
Currently, staff at the Wichita Police Department, Harbor House and Wichita Family Crisis Center are tracking the use of the Lethality Assessment Program (i.e. hotline calls). None of them, however, have staff that is dedicated exclusively to creating and coordinating the overall structure of the LAP-focused coordinated community response.

The benefits of a program coordinator are numerous:

- A. A coordinator could provide data and documentation of performance measures/outcomes.
- B. A coordinator could spearhead the expansion of the LAP throughout Sedgwick County and surrounding counties.
- C. A coordinator could ensure that mental health and child advocacy institutions are involved in the LAP.
- D. A coordinator could begin developing a Family Justice Center, wherein community and criminal justice partners are all working together to provide one-stop help to victims of domestic and sexual violence.

In sum, the Team observes that there may be a great benefit to all of the participating agencies to have a dedicated Lethality Assessment Program Coordinator in Wichita, Kansas: the coordinator could ensure training is consistent and frequent, compile information, and systematically review and evaluate the Program.

Map # 4: Domestic Violence Disclosure in Medical Setting



Services provided at Hospital

- Safety planning  Result is victim driven
- Danger assessment (Research based)
 - Assessment completed by nurse or advocate
 - Shelter placement if possible
 - Barriers: Patient has to qualify- risk factors: drug/alcohol; violent history; criminal behavior.
 - Shelter are often full
 - Out of County shelters require a "Referral" from local shelter.

- Evidence Collection
- Photo of injuries
 - History of events/documentation
 - Consent signed by victim
 - Release to LE to do photos
 - Head to toe photography
 - Extensive documentation
 - Body Mapping
 - If reported photos on disc/sex crimes detective is notified
 - Extensive strangulation tool kit



****Funding source lacking****

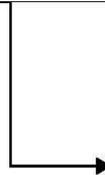
- Hospital DV Task Force**
- Internal
 - Via Christi only- Wesley not participating
 - Forensic Nurses
 - Director/Doctors
 - Internal advocates/Social Workers



Training needed for:

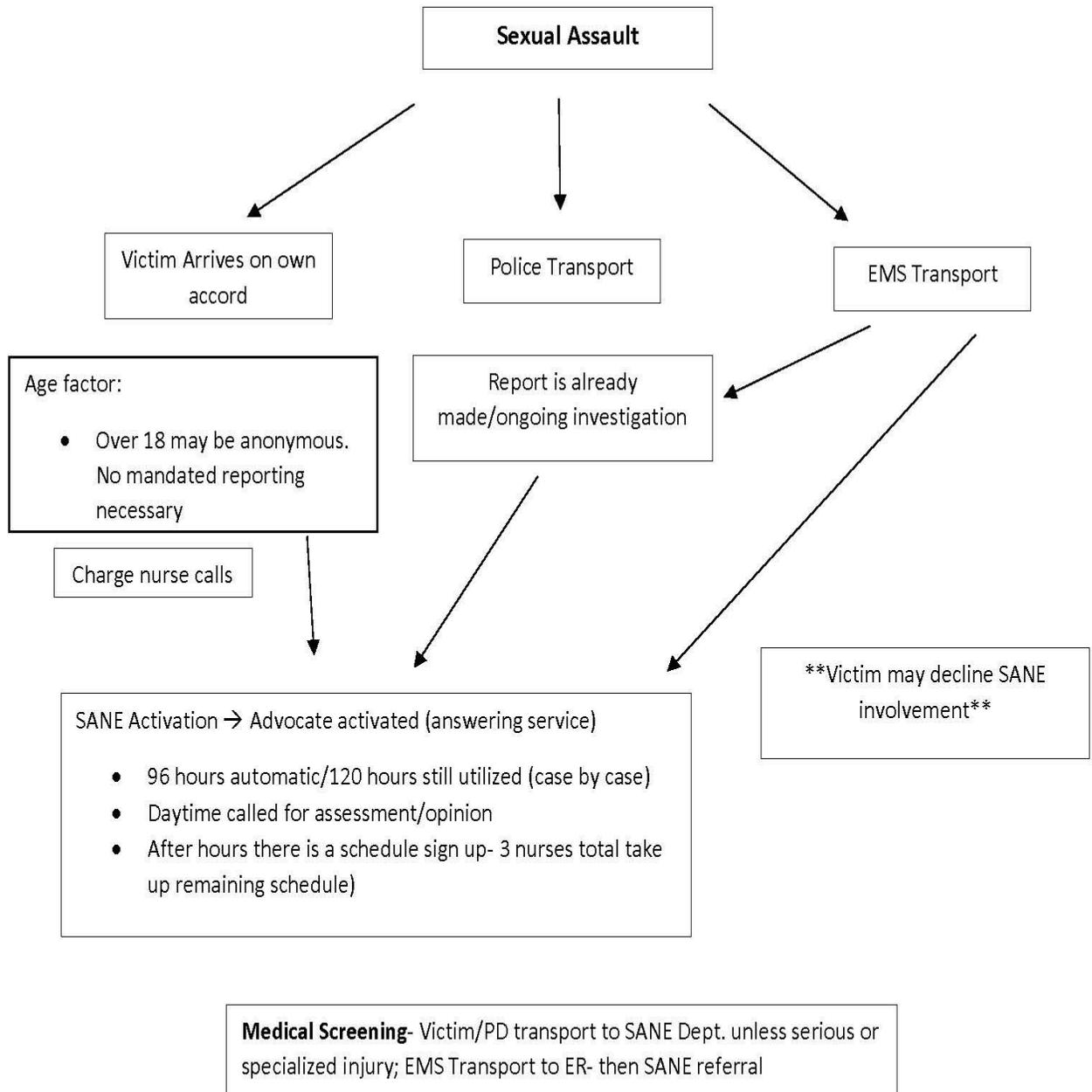
1. Doctors
 - a. Lethality Recognition (Evidence based)

- Dismissal
1. No follow-up
 2. No written materials provided
 3. ER discharge papers provided



Victim may come back on their own/urged by other party and they can be photographed without ER visit.

Map # 5: Sexual Assault Disclosure in Medical Setting



Consent Waiver

- Any age can consent to an exam → Made aware signing waiver/may refuse exam; told they can be anonymous; victim may decline certain exam variables; can consent ROI. **If anonymous not subject to crime victims compensation**

Medical Exam

- May decline any portion
- Head to toe assessment (physical exam)
- Injury photography (4 photos of each injury)
- Measurements
- Preferably done at St. Joe, but staff will travel.

Evidence Exam- Paid for by County (DA)

- May decline any portion
1. Drug facilitated evidence not collected if anonymous
 2. Victim may change mind during/after exam to switch from anonymous to reporting
 3. Assault history at onset of exam (what happened)
Dictates evidence collection goals/procedures
 4. Detail genital exam (swabs/DNA)

STI Prophylaxis offered (nurse)

Conversation about follow-up medical treatment (nurse)

Advocate reviews paperwork (Advocate)

If reported- conversation with police department about suspect relationship (nurse)

Safety planning conversation with victim (nurse)

Follow up call with victim 48 hours and 30 days (nurse)

Reported Kits

1. Dispatch notified
2. Name obtained from tracking
3. Dispatch contacts lab investigator by radio
4. Lab investigator pics it up at hospital/
Submits to P/E

Anonymous Kits

N/A

Dismissal

- Victim chooses who/how to leave with
- Are aware of what options are available if victim chooses not to utilize an advocate
- Medical discharge papers given to victim
- Telephone follow up 48 hours/30 days (nurse)

Gap #9: There is a lack of training opportunities for medical providers to identify, and respond to, victims of domestic & sexual violence.

A. Why is this an obstacle for the risk and safety of victims of domestic & sexual violence within one week of disclosure in Wichita?

Victims of domestic & sexual violence often seek medical attention before they disclose the violence to law enforcement and/or advocates. Because of this element, a medical provider failing to identify and respond to domestic & sexual violence impacts victim risk and safety.

B. What contributes to this obstacle?

The Centers for Disease Control and Prevention [CDC] defines intimate partner violence [domestic & sexual violence] as “a serious, preventable public health problem that affects millions of Americans.”³⁵ Victims experience physical, mental and behavioral health consequences that can persist long after the violence has stopped.

Victims of domestic & sexual violence, however, are difficult to identify in a medical setting because they present very differently than victims of other crimes.

In fact, during focus groups, forensic nurses told the Team that they see a wide variety of medical responses to domestic & sexual violence in the hospitals.

Hotline advocates from the advocacy agencies also shared that a wide variety of medical providers (e.g. general practitioners, medical office receptionists, and school nurses) call for information about domestic & sexual violence resources.

In sum, approaching domestic & sexual violence as a health problem, demands more education and training that will allow all medical providers to quickly identify the cause of a medical emergency/condition. “Victims of violence and abuse require care from a health professional who is trained to treat the trauma associated with the wrong that has been done to them—be it sexual assault, intimate partner violence, neglect, or other forms of intentional injury.”³⁶

Notably, there is not a curriculum through the Improving Criminal Justice Response program by the Office on Violence Against Women (U.S. Department of Justice) specific to medical providers.³⁷

C. How can we overcome this obstacle?

All medical providers must be trained on the seriousness of domestic & sexual violence and encouraged to approach it as a health problem. Therefore, the Team recommends that law enforcement, prosecutors, advocates and forensic nurses

³⁵ Intimate Partner Violence: Definitions, Centers for Disease Control and Prevention (2016), <http://www.cdc.gov/violenceprevention/intimatepartnerviolence/definitions.html>. See also Centers for Disease Control and Prevention, Intimate Partner Violence Surveillance Uniform Definitions and Recommended Data Elements (2015).

³⁶ <http://www.IAFN.org> (International Association of Forensic Nurses)

³⁷ <https://grants.ks.gov/programs/icjr>

immediately begin working together to create and promote trainings for all medical providers.

The trainings should include general insight into domestic & sexual violence, a screening tool, as discussed in the following Gap, and knowledge about local resources for patients. In fact, the training should include information about the importance of forensic examinations, the content of forensic examinations and the availability of forensic examinations. The Team specifically notes the national “Futures Without Violence” curriculum and that it may be easily modified to fulfill the need in Wichita, Kansas.³⁸

³⁸ <https://www.futureswithoutviolence.org/>

Gap #10: There is a need for a specific domestic violence screening tool that can be used in all medical settings.

A. Why is this an obstacle for the risk and safety of victims of domestic & sexual violence within one week of disclosure in Wichita?

Victims of domestic violence may only seek medical help after they experience physical violence. Because of this element, a medical provider failing to identify the real cause of the injuries/conditions negatively impacts victim risk and safety.

B. What contributes to this obstacle?

Not addressing the underlying cause of an injury is proven to result in lifelong consequences. Moreover, as stated above, medical providers often are the first person to learn about domestic violence. As a result, the medical provider may be the only person who can protect a victim's risk and safety.

This observation is supported by the forensic nurses and hotline advocates responding to inquiries about domestic violence. Specifically, during focus groups, hotline advocates noted that they receive inquiries from a wide variety of medical providers requesting information on domestic violence response/resources: general practitioners (doctors), clinic nurse, and even medical office receptionists.

During focus groups, forensic nurses observed that within the hospitals there are varying responses to victims of domestic violence.

C. How can we overcome this obstacle?

As described previously, the Lethality Assessment Program (LAP) is an innovative strategy to prevent domestic violence homicides and serious injuries. It provides an easy and effective method for health care providers to identify victims of domestic violence who are at the highest risk of being seriously injured or killed by their intimate partners, and immediately connects them to community-based domestic violence advocacy support.

The Team recommends that the Lethality Assessment Program be explored as a formalized option for medical providers to screen domestic violence patients.³⁹

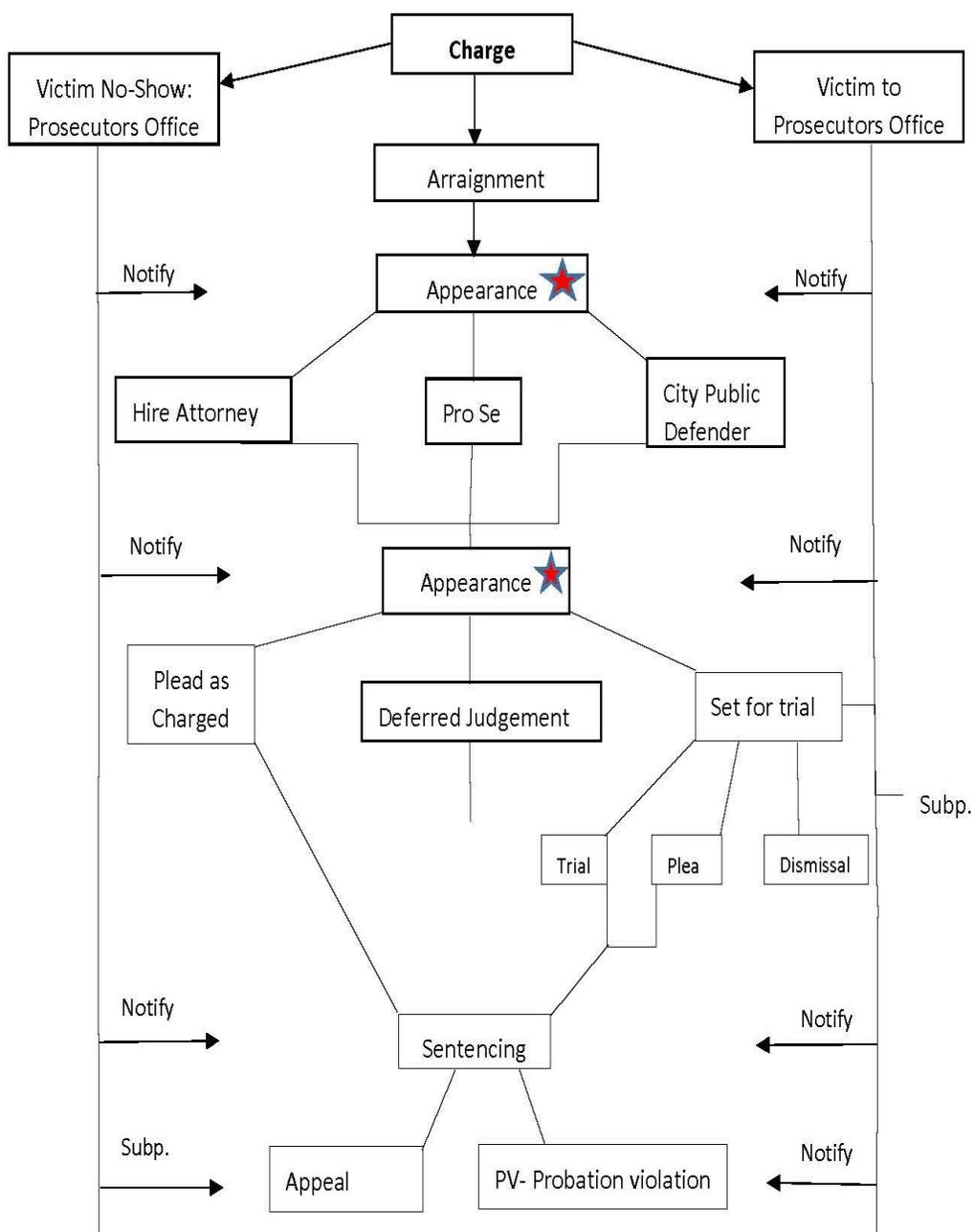
Specifically, the medical provider could administer a brief, formal risk assessment screening to the patient upon admission. This "Lethality Screen" could conclude with a phone call to the "24 Hour Hotline" that rings to both Harbor House and Wichita Family Crisis Center.⁴⁰

In addition, the Team strongly encourages the criminal justice and community agencies in Wichita, Kansas, to promote legislative and local funding for domestic violence forensic examinations.

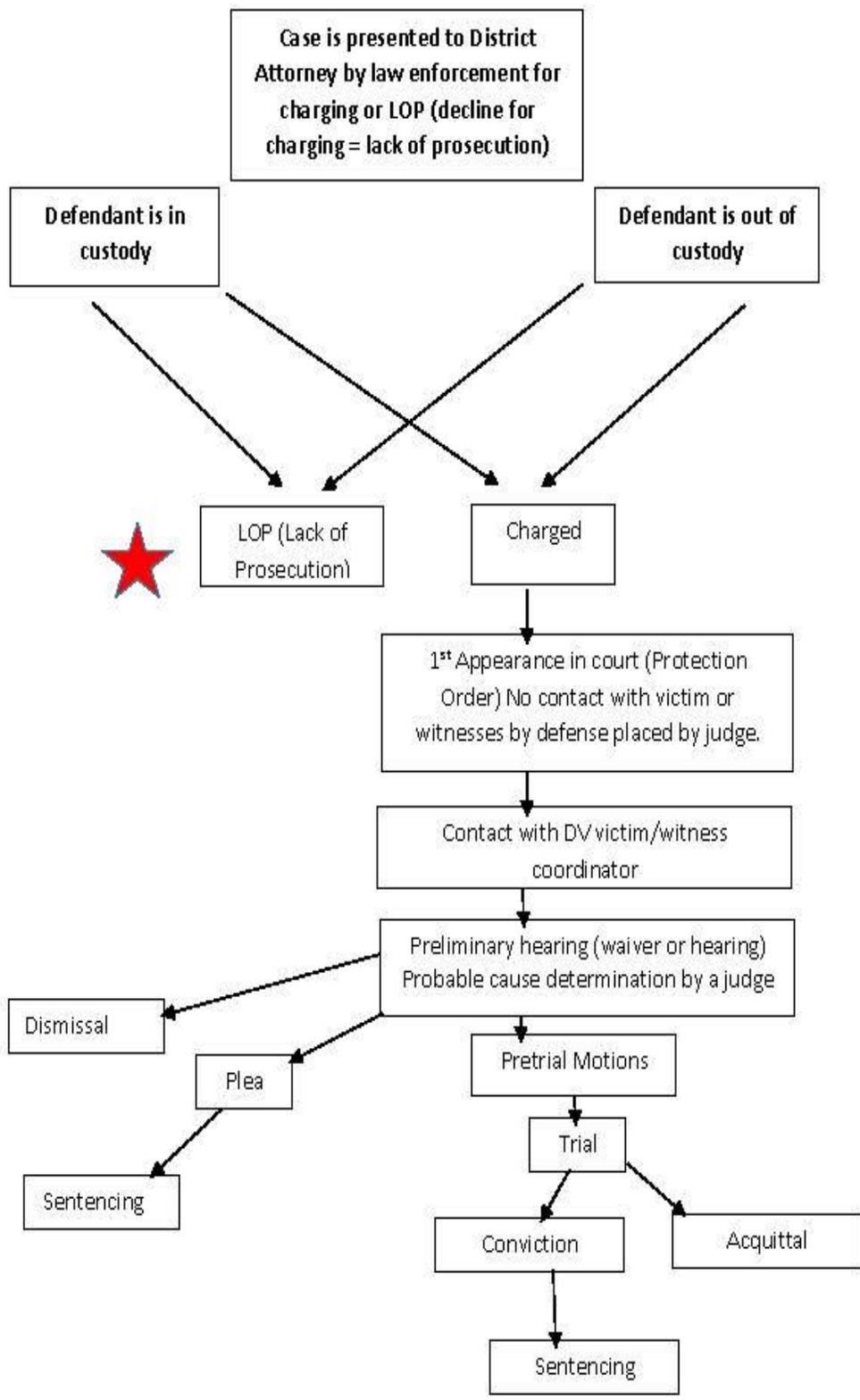
³⁹ <https://www.nij.gov/journals/275/Pages/closer-look-lap.aspx>

⁴⁰ **Gap #8:** There is a rapidly growing need for more established accredited outreach resources for domestic & sexual violence survivors.

Map # 6: City of Wichita Municipal Court System



Map # 7: Sedgwick County District Attorney Case Process



 = A risk and safety concern was identified by the Assessment Team

Gap #11: There is a lack of consistent communication with victims of domestic & sexual violence who are involved in city and/or county criminal cases that are declined for prosecution.

A. Why is this an obstacle for the risk and safety of victims of domestic & sexual violence within one week of disclosure in Wichita?

Victims of domestic & sexual violence may be reluctant to report subsequent incidents of victimization when their experience was that 'nothing happened' or 'nothing changed' after making a report the first time. Lack of communication from the criminal justice system can result in unintended consequences for victim risk and safety. At minimum, information on the status of a case can have implications on safety planning.

B. What contributes to this obstacle?

As of the date of this report, the City of Wichita Attorney's Office and the Sedgwick County District Attorney's Office do not have a specific, formal policy requiring their office to contact a victim in a domestic & sexual violence case that is declined for prosecution (not charged).

During focus groups, a domestic & sexual violence survivor told the Team that they had "no contact about [their] case/trial" and another survivor summarized the entire experience as lacking "follow through."

C. How can we overcome this obstacle?

The Team recommends that the prosecuting agencies work with advocacy agencies and the Wichita Police Department to develop a formal policy that ensures victims in sexual & domestic violence cases are told that a case is not going to be charged. This suggestion mirrors the following recommendation from the National District Attorneys Association:

"When a case is not charged, the victim should be notified and a record of the uncharged incident report should be kept for future prosecutions. In uncharged cases, the prosecutor should ensure that the victim receives information about social and medical resources."⁴¹

In addition, the Team recommends that prosecutors enhance their practices to include offering community-based advocacy support on cases that are not prosecuted. Specifically, each prosecuting agency should consider engaging in greater use of systems-based advocates (e.g. case coordinators) who can work with community-based advocates.

⁴¹ http://www.ncdsv.org/NDAA_National-DV-Prosecution-Best-Practices-Guide_3-16-2017.pdf. Citing *Nevada Domestic Violence Resource Manual*, *supra* note 1.

Gap #12: Victim risk and safety is compromised by the setting and conditions of the civil abuse/stalking protection order process in Sedgwick County District Court.

A. Why is this an obstacle for the risk and safety of victims of domestic & sexual violence within one week of disclosure in Wichita?

Victims of domestic & sexual violence may seek a civil protection order instead of disclosing the violence to law enforcement. In other instances, a victim may be told they should obtain a civil protection order immediately after they have disclosed the violence to law enforcement and/or an advocate.

In these situations, the act of filing for a civil protection order may escalate the violence. Therefore, a negative experience with the civil protection order process impacts victim risk and safety.

B. What contributes to this obstacle?

Victims are at risk when they file for civil protection orders and, therefore, it is important that the process of obtaining a civil abuse or stalking protection order offers the victim protection and safety.

As to the civil protection order process in Sedgwick County, the Team observed three areas of concern for victim risk and safety: (1) The nature of the protection order office; (2) The nature of the protection order “courtroom”; and (3) the administration of protection order appearances and hearings.

Team members interviewed employees who handle the intake, screening and aid in filing civil protection from abuse/stalking petitions. The employees voiced concerns over a lack of security in the protection order office. Specifically, the employees observed:

- (1) There is no emergency button or any immediate help if a violent act occurs within the office;
- (2) The office itself is a small, confined space;
- (3) The employees feel that they are in danger while they are inside the office; and
- (4) The victims feel that they are in danger while they are inside the office.

Similarly, the Team observed safety deficiencies in the “courtroom” where the civil protective orders are processed by the magistrates. In fact, the Team confirmed that the room is inadequate for its purpose.

Preliminarily, in Sedgwick County the protective order docket is held in the jury room, which is an informal, multi-purpose space. It has two direct access doors and randomly distributed seating.

During its observations, the Team noted the following concerns about the use of the jury room to conduct protective order dockets:

- (1) The design of the jury room makes it difficult to hear what is being said during hearings and to understand what is happening.
- (2) Despite signs hanging on the walls assigning one side of seats for plaintiffs and the other side for defendants, no one enforces the arrangement.
- (3) Both plaintiffs and respondents are told that anyone who accompanied them to court must leave the room, leaving the victim alone in the jury room during the protective order docket.
- (4) Finally, the security in the room is inadequate, with court service personnel merely “keeping an eye on things.” The courthouse security officers do not notice the eye contact, mouthing of words and other subtle forms of harassment that constitute a violation of the temporary protection order in the courtroom.

As to the administration of the protection order appearances and hearings (docket), the Team noted the incredible size of the docket and the inconsistent way the dockets are handled.

Specifically, the Team observed that a victim may sit in the room for hours only to be told there was not enough time to hear the case. There appears to be very little, if any, direct communication with the victim during the docket.

The Team also observed that when communication does occur (between a victim and clerical staff during the docket), it is often abrasive and dismissive. The Team attributed this to the lack of trauma informed training and subject-matter invested court personnel.

Finally, it appears that the use of rotating judges pro tem (i.e. an attorney who has been appointed to serve as a judge as a substitute for a regular judge) to administer the protection order docket creates problems for the administration of the protection order process. Specifically, the employees showed the Team how hearing outcomes are inconsistent (daily/weekly) and that the orders are often difficult to decipher.

C. How can we overcome this obstacle?

The Team strongly recommends the following changes to the protective order process:

- (1) Mandatory domestic & sexual violence training for all judicial, clerical and security staff who interact with the protective order process. Notably, KCSDV provides training for municipal and district court judges and clerks/administrators regarding domestic & sexual violence.
- (2) A panic button that alerts courthouse security of a threat must be installed in the protection order office.
- (3) The use of the jury room for the protection order docket must be replaced with a formal courtroom.
- (4) The use of rotating judges pro tem for the protection order docket must be replaced with an assigned district court judge or a permanently designated judge pro tem.

In sum, the Team notes that the sustained lack of a formal courtroom and permanently assigned judge to the civil protection order docket in the 18th Judicial District Court (Sedgwick County District Court) defies logic. The gravity of the subject matter demands immediate review of the protection order docket management system in order to make the necessary changes to protect a victim's risk and safety during the protective order process.

In the meantime, as the above recommendations are being explored, the following, immediate changes are recommended by the Team:

- (1) Requiring additional, active courthouse security when court is in session.
- (2) Creating a separate space (and enforcing the use thereof) for Plaintiffs and Respondents during the docket. This could easily be achieved by simply partitioning the room with temporary walls or screens. In addition, a sign could clearly designate each side of the room, and access to the victim/plaintiff enclosure should be controlled by security to prevent entry by defendants or their affiliates.
- (3) To address the issue of intimidation immediately following a hearing, there should be an opportunity for victims/plaintiffs to have an escort to their vehicle. This is contingent upon the understanding of course that they may be required to wait a reasonable amount of time based upon many factors.

In sum, the Team encourages the 18th Judicial District Court to thoroughly review the civil protection order process.

Gap #13: Victim risk and safety is compromised by the setting and conditions of Domestic Violence Court in the City of Wichita Municipal Court.

A. Why is this an obstacle for the risk and safety of victims of domestic & sexual violence within one week of disclosure in Wichita?

As early as the day after a reported incident of domestic violence, a victim in a City of Wichita misdemeanor case may appear in court. At this time, the victim is already traumatized because of the violence and the reaction of the defendant may be unknown. Because of this element, a negative experience in the courtroom impacts victim risk and safety.

B. What contributes to this obstacle?

In the City of Wichita, the Domestic Violence Court is held in one courtroom and there is an assigned Municipal Court Judge. Notably, when the City of Wichita began its domestic violence docket program, it held two dockets daily with two specially-designated prosecutors who handled both dockets.

As of the date of this report, however, the City of Wichita only has one docket each day and one prosecutor to handle all aspects of domestic violence cases. In fact, the domestic violence prosecutor is responsible for reviewing all the misdemeanor arrests and warrants from the day prior, preparing all cases for trial, and working the actual trial docket itself.

Team members observed the City of Wichita's Domestic Violence Court on several occasions. Based on the observations, team members identified several features of it that impact victim risk and safety.

The Team observed that, while all individuals entering the courthouse are screened at a metal detector on the first floor, individuals who are involved in domestic violence cases must proceed to the third floor and, on the third floor, there is one large hallway and five courtrooms.

As a result, before the domestic violence docket begins, the third-floor hallway is crowded with an assortment of unidentified people that are involved in domestic violence cases.

In addition, although the courtroom holds 61 people, it is arranged in five tight rows of connected chair-back seats. There is no division in the seats/areas for the victim/s and defendant/s.

In fact, the Team observed that, throughout the docket, the defendant and victim are normally in the courtroom at the same time and sitting relatively close (and unobstructed) to one another. Not only are the victim and defendant physically close in the courtroom, there also appears to be a lot of unrestrained communication between them (e.g. texting back and forth).

Notably, the Team saw that if the 'communication' becomes loud enough or obvious enough for a bailiff or court staff to notice, the victim was often removed from the courtroom.

Finally, the Team noted that when the municipal judge exits the courtroom to take a break, no orders are made for everyone to remain quiet or to refrain from contact with victims. As a result, the courtroom became loud and unruly during every break.

The City of Wichita Prosecutor's Office has taken steps to address these concerns by telling victims that they can wait in the Prosecutor's Office waiting room instead of in the hallway/courtroom. Unfortunately, their waiting room only holds 12 people and it may be congested with unrelated, civilian traffic.

C. How can we overcome this obstacle?

The Team recommends three changes to overcome this obstacle:

- (1) Assign a second prosecutor to the domestic violence cases;
- (2) Create separate and identifiable sections for the victim and defendant inside the courtroom; and
- (3) Create and enforce a check-in process at the courtroom door to help direct people to their appropriate section.

In addition, the Team suggests the formal incorporation of community-based advocates in the domestic violence municipal court experience. Specifically, because it is possible that the victim has not been connected to community-based advocacy services before the court date, a concurrent and formal referral to a community-based advocacy support must occur when the victim arrives for court.

Gap #14: There is a lack of representation by probation and parole professionals, academic professionals and military professionals on the Wichita/Sedgwick County Coordinated Community Response Team.

A. Why is this an obstacle for the risk and safety of victims of domestic & sexual violence within one week of disclosure in Wichita?

There are victims and survivors of domestic & sexual violence in Wichita, Kansas, who have contact with the following three types of institutions: (1) probation/parole; (2) academic; and (3) military. As a result, victim risk and safety may be compromised if representation from these groups is not included on the CCR.

B. What contributes to this obstacle?

The City of Wichita Probation, Sedgwick County Community Corrections and the Kansas Department of Corrections are not represented at the monthly Community Coordinated Response Team meetings.

Similarly, WSU and MAFB are not included.

During interviews with personnel from WSU and MAFB, the Team quickly learned that these agencies desire to be involved in the Assessment process. Each agency representative voiced desire, as well as availability, to join the existing CCR and/or the motivation to work together to create a new group.

Knowledge and input from these specific institutions could enhance the CCR's overview of victimization in our community and its ability to ensure the safety of victims and survivors. It is clear that offender accountability, specifically, can only be addressed by including institutions that engage in offender accountability in the CCR's membership.

C. How can we overcome the obstacle?

The Team recommends the CCR re-examine its purpose and mission. Emphasis should be placed on reviewing whether the purpose and mission of the CCR should accommodate the inclusion of probation and parole professionals, academic professionals and military professionals. If the CCR concludes a change in membership is not feasible, then the CCR should consider the creation of a different type of multidisciplinary group that includes these institutions.

IX. ADDITIONAL OBSERVATIONS

Throughout the Assessment process, the Team identified many important issues that were outside the scope of the Assessment. In fact, the information that was obtained during the Assessment revealed many issues that merit further review.

Briefly, the Team has highlighted just a few of the issues that it strongly recommends be given consideration immediately.

- **There is a need for a Family Justice Center in Sedgwick County, Kansas.**
 - Sedgwick County, Kansas, needs a strategic and coordinated collaboration of its criminal justice and community agencies. Adult victims of domestic and sexual violence need crisis support, legal assistance and counseling that is readily accessible, comprehensive and reliable. A Family Justice would greatly enhance all of the institutional responses the Team examined during the Assessment.
 - “All family justice center sites need strong, diverse community support. Strategic planning efforts that include developing and maintaining support from local government, state government, business, labor, diverse community-based social service organizations, and faith-based organizations increases the resources available to victims and their children at a family justice center and thereby increases safety and support.”⁴²

- **There is a need for a coordinated, systematic and quantitative “systems review” of the following areas in Wichita, Kansas: (1) The civil protection from abuse/stalking process; (2) The processing of misdemeanor/felony domestic violence law enforcement reports; and (3) The processing of misdemeanor/felony sexual violence law enforcement reports.**
 - As seen throughout this report, there is a significant need for additional attention to be given to the protection order process, the processing of misdemeanor and felony domestic violence cases and the processing of misdemeanor and felony sexual violence cases. The confines of this report merely “scratch the surface” of complicated issues.
 - Specifically, the Team was limited to observing the protection order process and reviewing a small fraction of domestic & sexual violence cases (provided by the WPD).
 - Yet, even with its limited research design and timeframe, the Team developed concerns about the protection order process and the

⁴² “The President’s Family Justice Center Initiative Best Practices.” February 2007. https://www.justice.gov/archive/ovw/docs/family_justice_center_overview_12_07.pdf

disparity between number of domestic & sexual violence reports received (WPD) and the number of domestic and sexual violence cases that are prosecuted (CITY/DA).

- The Team strongly recommends that the framework developed in the **“Ramsey County Sexual Assault Systems Review”** be replicated in Wichita.⁴³ The quantitative framework will easily lend itself to the protection order process and the domestic and sexual violence case processing analysis. A quantitative review will yield better results for future planning.
- **There is a need for further evaluation of the lack of a uniform and coordinated information sharing process for all criminal justice and community agencies in Wichita, Kansas.**
 - As noted above, there is deficiency in the collection and sharing of relevant sexual & domestic violence information in Wichita, Kansas. It inhibits the ability to obtain a large enough sample of relevant information to be instructive and undermines the coordination of response.
 - The Team recommends that the CCR spearhead the creation of a task force dedicated to further evaluation of the issues uncovered during this Assessment.
- **There is a need for attention to be given to “walk-in” disclosures at police substations.**
 - There are a sizeable number of walk-in reports at the four Wichita Police Substations. In fact, the Team observed several of them during its ride-alongs with the Wichita Police Department.
 - The walk-in reports appear to be routinely handled in the main lobby of the substation, and an obvious lack of privacy exists during these reports.
 - The lack of privacy, and concurrent delay in speaking with an officer, stymies disclosure of sexual and domestic violence to law enforcement.
 - The Team recommends that the CCR work with the WPD to explore options to improve the experience that a victim has when making a walk-in report at a substation.
- **There is a need for attention to be given to the “hotline” survivor resource provided by advocacy agencies in Wichita, Kansas.**
 - There are an incredible number of “hotline” calls made in Wichita, Kansas, and the calls are made by survivors, friends, family, employers,

⁴³ <http://www.evawintl.org/library/DocumentLibraryHandler.ashx?id=949>

educators and a wide variety of other individuals seeking information about survivor resources.

- Currently, there is not a process in place to evaluate the efficacy of the “hotline” and assess if there is a need for change.
- The Team recommends the advocacy agencies that are primarily responsible for the “hotline” work together to evaluate the current “hotline” processes and procedures.
- **There is a need for increased emphasis on early intervention programming in Wichita, Kansas.**
 - Currently, local advocacy agencies are unable to utilize their grant funding to provide domestic and sexual violence programming in Wichita, Kansas.
 - Clearly, there is a need to expand outreach advocacy and the expansion must include an emphasis on prevention and/or early intervention in domestic and sexual violence in Wichita, Kansas.
 - The Team recommends the CCR explore existing community funding to both create and dissemination programming that emphasizes prevention and/or early intervention. The Team also recommends the CCR explore creating a program unique to Wichita, Kansas, that includes participates from all of the agencies that participating in this Assessment.