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Violence Reduction Councils: A Community Approach to Saving Lives

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About This Toolkit

The Violence Reduction Council builds off a successful model developed in Milwaukee, Wisconsin, by Mallory O'Brien, associate scientist at the Center for Gun Violence Solutions at the Johns Hopkins Bloomberg School of Public Health, and lead for this project. The model facilitated collaborations between public health, public safety partners, and the community to review homicide-related deaths to better understand data patterns and trends and identify missed opportunities for intervention or provision of services. To effectively scale this strategy and implement it in new jurisdictions, O'Brien and the team developed a public health-oriented toolkit that emphasizes best practices, establishes high-quality data infrastructure, and provides technical and peer support.

About the Bloomberg American Health Initiative

The project was supported by the Bloomberg American Health Initiative based at the Bloomberg School. The Bloomberg American Health Initiative, supported by Bloomberg Philanthropies, addresses pressing health issues in five critical areas including addiction and overdose, adolescent health, the environment, food systems, and violence through education, research, and practice.

Johns Hopkins Center for Gun Violence Solutions

The Johns Hopkins Center for Gun Violence Solutions combines the expertise of respected gun violence researchers with the skills of experienced gun violence prevention advocates. It uses a public health approach to conduct rigorous scientific research to identify a range of innovative solutions to gun violence. Using the best available science, the Center works toward expanding evidence-based advocacy and policy-making efforts grounded in principles of equity. This combination of expertise creates a unique opportunity to turn public health research into action that reduces deaths and injuries from gun violence.

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Violence Reduction Council: Executive Summary

Violence Reduction Councils (VRC) are a public health-based model to prevent violence within cities. VRCs bring together criminal justice, public health, social service agencies, and community-based organizations (CBO) involved in violence prevention. Collectively, these groups review homicides and assault information at the aggregate and case level. Each VRC review team shares unique case information about the victim and suspect involved, neighborhood-level factors, and perspectives about broader trends of violence in the city. From these case discussions, members of the council identify gaps or weaknesses in policy and practice and systemic barriers to violence prevention. The VRC then proposes recommendations to address these barriers and enhance the city's violence prevention infrastructure. A smaller VRC working group refines these recommendations and works with city leadership to advance them to policy and programmatic changes.

The VRC has two review teams which meet routinely to review homicides and assaults.

1. Criminal Justice Review

The Criminal Justice Review Team is comprised of public safety stakeholders who have access to confidential information about the suspect and victim. This includes mid-tier representatives from law enforcement, the district attorney's office, corrections, and the medical examiner's office. The team reviews police reports, medical examiner records, and the criminal history of the suspect and victim. These reviews allow public safety stakeholders to jointly identify system weaknesses and develop prevention and intervention strategies rather than reacting or responding to violence.

2. Community Service Provider Review

The Community Service Provider Review Team includes representation from public health, public safety, social services, and housing. In addition, it comprises leaders and community organizers working to reduce violence in neighborhoods disproportionately impacted including representatives from community violence intervention organizations. The team reviews closed cases to understand the factors which contributed to the violent incident. They examine services the perpetrator and victim received and discuss missed opportunities for intervention. The recommendations which are developed in this review enhance collaboration and trust between service providers, community violence intervention programs, and city agencies.

3. Moving Recommendations Forward

Between the case reviews a smaller team of mid-tier agency representatives and community leaders refine the recommendations and outline the steps needed to implement them. They discuss the recommendation and findings from the case reviews with a VRC executive committee consisting of the mayor, police chief, health commissioner, district attorney, corrections chief, chief judge, and executive directors of community organizations back to the case review teams on the status of the recommendations.

4. Essential Components of a VRC

- Support from leadership including the mayor, police chief, health commissioner, district attorney.
- Staffing, including at minimum, a VRC director and staff time to engage relevant partners, run review meetings, and advance recommendations through subcommittees (can be existing staff).
- A neutral and trusted facilitator who can encourage productive discussions about policy and programmatic gaps and lead the VRC toward focused recommendations.

- A working group of mid-tiered agency representatives (supervisors, team leads, etc.) who are committed to systems-level change through the VRC.
- An executive committee receptive to the feedback from the VRC and committed to advancing the recommendations developed by the VRC.

5. What This Guide Provides

This guide is designed to assist communities in the development of a framework and structure to reduce homicides and nonfatal shootings. The guide outlines how to build a Violence Reduction Council (Module 2) including how to form strong partnerships (Module 3) and involve community violence intervention programs in communities disproportionately impacted by violence (Module 4). The guide then provides guidance on how to plan (Module 5), facilitate (Module 6), and collect data (Module 7) at the case review meetings. Finally, this guide describes how to develop actionable recommendations and move these recommendations forward (module 8). The guide provides multiple entry points for a wide audience from teams that will lead the implementation, to frontline participants to executive leadership.

Introduction

A Public Health Crisis of Violence

Violence—specifically homicides and assaults—is a public health crisis in cities across the United States. Homicides are the second leading cause of death for people under the age of 30, accounting for more deaths among this age group than cancers, heart disease, diabetes, and liver disease combined. In 2021, 26,031 people died by homicide in the United States, and the homicide rate reached highs not seen since the mid-1990s.¹

Violence is also a social justice issue that drives disparities in life expectancy and quality of life between Black and white Americans. The disparities are alarming: Black Americans are over 10 times more likely to die by homicide than white Americans. Forty-three percent of all the Black teens and young men ages 15 to 29 who died in 2021 were killed in a homicide.²

Core Tenet: Violence Is Preventable

The crisis of violence in the United States is preventable. Homicides and assaults can be prevented with sound policy, coordinated prevention strategies, and the timely implementation of evidence-based interventions. Community mobilization and coordination between public health and public safety stakeholders is vital to addressing violence. Cities can create comprehensive violence prevention infrastructure through interagency collaboration and community engagement. They can develop strategies which address both the upstream determinants—poverty, lack of opportunity, underfunded social services—which contribute to violence and the more immediate risk factors of violence, like easy access to guns by people prone to violence.

A Public Health Approach to Violence Prevention

A public health approach to violence brings together agencies and experts across disciplines in a common effort to: 1) define and monitor the problem, 2) identify risk and protective factors, 3) develop and test prevention strategies, and 4) ensure widespread adoption of effective strategies.³ By using a public health approach, we can prevent violent violence and strive toward health equity, where everyone can live free of violence.

Violence Reduction Council

The structure of a Violence Reduction Council (VRC) is centered around violence reviews which build off decades of public health and criminal justice research and practice. The aim of a VRC is to support cities in building a comprehensive framework to prevent violence rather than to respond to it. This framework provides structure, incorporating data and information, public and private agencies, executive and frontline personnel, and community, that builds trust and accountability while innovating strategies across sectors. A VRC takes a public health approach to violence prevention by convening a range of city/county agencies and community leaders to review data and information regarding homicides and assaults within the jurisdiction, identify common risk factors, and develop and implement innovative policy and programmatic solutions to address these risk factors.

In practice, VRCs involve routine reviews of aggregate data and homicides including nonfatal firearm incidents. These death and assault reviews (also referred to as a “case review”) examine the circumstances leading up to the violent incident, as well broader life events, putting into context population level and geographic information. The process is split into two separate review teams: a Criminal Justice Review Team and a Community Service

¹Analysis of CDC mortality data. Centers for Disease Control and Prevention, National Center for Health Statistics. National Vital Statistics System, Mortality on CDC WONDER Online Database.

²Analysis of CDC mortality data. Centers for Disease Control and Prevention, National Center for Health Statistics. National Vital Statistics System, Mortality on CDC WONDER Online Database.

³Centers for Disease Control and Prevention, National Center for Injury Prevention and Control, Division of Violence Prevention. Public Health Approach to Violence Prevention.

Review Team. The Criminal Justice Review Team consists of law enforcement (local, state, federal), prosecution (city attorney, district attorney, and federal) and community corrections who share specific, law-enforcement sensitive information about the victim, perpetrator, or the broader environment in which the violent act took place. The Community Service Provider Review Team consists of representatives from the public health department, various social service agencies, the school district, and from community-based organizations. This review examines major health events, social-emotional trauma (including adverse childhood experiences), and other factors, including the physical environment, to facilitate a deeper understanding of the missed opportunities for prevention and intervention that may have prevented the violent act.

By conducting a series of case reviews, jurisdictions begin to see patterns of need and opportunity, not only within specific agencies but across systems.

Blending input from public health, public safety, service providers, and the community, VRC review teams develop program and policy recommendations to improve service provision and violence prevention programming. These recommendations are presented to a governing committee that supports and provides resources for implementation and a framework for accountability for action.

Violence Reduction Councils: Building off Decades of Work to Prevent Violence

The frameworks proposed in this guide are not new; they build off decades of leadership by law enforcement officials, public health practitioners, and community leaders who have improved data collection and championed problem-solving strategies to prevent violence including:

Problem-Oriented Policing: Underlying police departments have adopted problem-oriented policing strategies using management tools like COMPSTAT and Incident Reviews to collect and analyze real-time crime and performance management data. Problem-oriented policing emphasizes why a problem exists and seeks to understand the complexity of the problem—how it is created and why it reoccurs. It also suggests that tailored solutions directed at the underlying conditions that create the problem are effective and that the solutions must be data driven.

Public Health Service: Public health stakeholders have improved the data collection on homicides and assaults working with medical examiners, hospital staff, and public safety officials to collect data about the circumstances surrounding the violent incident. Today, nearly all jurisdictions share information with the National Violent Death Reporting System, a national database managed by the Centers for Disease Control and Prevention that provides detailed information about the incident.

Ecological Systems Models: Ecological systems models are used in the social sciences; this model explores the relationship an individual has with their social environment. It puts emphasis on community-level factors that lead to violence and the protective factors that prevent violence or reduce its impact. It also assesses public policies that directly and indirectly affect crime and violence.

Life Course: Life course acknowledges that prevention, intervention, and suppression strategies must occur across the life span of an individual, neighborhood, or system. Prevention efforts stop the problem from ever occurring. Intervention efforts stop the problem from occurring again and minimize the negative impacts of the first incident. Suppression, used by law enforcement, subdues individuals or activities where previous methods have failed.

These practices have helped move the fields of public health and public safety closer together to identify and hone data-driven violence prevention strategies.

Fatality Reviews Tackle Public Health Problems

There has also been an increased use of fatality reviews to facilitate interagency collaboration and coordination in addressing leading public health problems in cities.

Today, hundreds of cities and nearly all states use fatality reviews to prevent public health issues. Many jurisdictions have domestic violence fatality reviews, and a growing number of jurisdictions are using overdose fatality reviews to address the ongoing opioid epidemic.

In short, the case review process AND structure outlined in this VRC model is evidence-based and used across public health topic areas. Many cities may already be familiar with the format of the case review and have infrastructure in place with city agencies that can be leveraged to build out a VRC. The VRC framework provides communities with the structure to collaborate and coordinate violent crime reduction through better understanding of the violence problem, increased capacity, and collective accountability.

Fatality Reviews Can Reduce Homicides and Violent Crime: A Case Study

In January 2005, the City of Milwaukee launched the first ever fatality review focused on homicides in a city, called the Milwaukee Homicide Review Commission (MHRC). An evaluation of the MHRC conducted by the Harvard School of Public Health, funded in 2005 by the National Institute of Justice, found that it increased the city's capacity to prevent violence through "improved communication, information sharing and cooperation." The evaluation found that the MHRC interventions were associated with a 52% decrease in the monthly count of homicides in the intervention police districts, whereas the control police districts experienced a 9.2% decrease in homicides.⁴ Based on this evidence, the National Institute of Justice Crime Solutions rates the MHRC as an "effective" strategy, the highest rating issued by the agency.⁵

The MHRC structure facilitated information sharing from multiple stakeholders that led to the development, implementation, and continuous evaluation of the recommendations to reduce violence in the community. Examples of successful recommendations:

1. Re-established a witness protection program and secured sustained funding for it to increase the safety of individuals willing to testify in criminal trials.
2. Built a comprehensive plan to research and support children who have witnessed domestic violence in Milwaukee.
3. Developed a campaign to reduce straw purchases and limit the flow of guns into the illegal market.

For full descriptions, see [Appendix](#).

The success of the MHRC led to the expansion of similar reviews in cities across the country. Homicide review trainings were held in dozens of cities, and many jurisdictions built out review processes based off the MHRC. Cities like Cleveland, Ohio, the District of Columbia, and Hampton, Virginia, currently conduct homicide and violent crime reviews based off the MHRC.

Many lessons have been learned since the launch of the MHRC in 2005 and the release of homicide review training materials. This VRC guide draws from lessons learned in other cities and the changing dynamics of violent crime and policing in the U.S. Additionally, in April 2023, a group of two dozen practitioners from eight cities trained in the homicide review framework and representatives from Cities United convened to provide their insights and experience implementing the homicide review framework. Currently, many of the cities are following components of the homicide review model but are eager to engage in this improved framework.

The VRC framework places a greater emphasis on centering public health stakeholders, involving community-based service providers, and governance structure. This is of vital importance as many cities are working to rebuild trust between law enforcement and communities impacted by violence. There is an increased understanding that law enforcement interventions alone are not enough to address violence, and that social services and community-based violence prevention and intervention organizations play an essential role in preventing violence. To this end, cities have created offices of violence prevention and have begun to invest in community violence intervention programs. They have been supported from both state and federal investments. For example, in 2022 the

⁴Azrael, D, Braga, AA, O'Brien, M. E. (2013). Developing the capacity to understand and prevent homicide: An evaluation of the Milwaukee Homicide Review Commission. Boston, MA: Harvard School of Public Health.

⁵National Institute of Justice, Crime Solutions. Program Profile: Milwaukee (Wis.) Homicide Review Commission (MHRC). (2014). <https://crimesolutions.ojp.gov/ratedprograms/354>

⁶U.S. Department of Justice, Office of Public Affairs. Press release. "Justice department awards \$100 million to reduce community violence." Sep. 2022.

Department of Justice has dedicated \$100 million in competitive grants to community violence intervention programs in cities across the country.⁶

While these investments are promising on their own, we believe that their potential is even greater when efforts are coordinated across the city and if agency representatives are routinely meeting, sharing data, and identifying and implementing recommendations with one another. The model outlined in this VRC guide is aimed to do just this—to create a cohesive and coordinated ecosystem of violence prevention programming that is informed by real-time data and insights.

Developments have also been made to improve the general structure and solidify the importance of governance in the case review process over the past few years as public health and public safety practitioners have launched overdose fatality reviews in jurisdictions across the country. These developments are directly transferrable to the structure of the VRC and have been incorporated into this guide. In fact, this toolkit draws from the work of the “Overdose Fatality Review: A Practitioner’s Guide to Implementation” adapting relevant modules directly from that guide. Using a similar guide for a VRC will make it easier for cities to build parallel reviews for overdose and violence prevention, both grounded in partnerships between public health, criminal justice, and community stakeholders. Interestingly, the guidance on VRC has come full circle; the OFR Practitioner’s Guide was based on the original “National Homicide Review Training and Technical Assistance Project.”

Overview of the Violence Reduction Council Guide

This guide outlines what a Violence Reduction Council (VRC) is:

- **Module 1:** Violence Reduction Council Structure
- **Module 2:** Building a Violence Reduction Council
- **Module 3:** Forming Partnerships Across Agencies and in the Community
- **Module 4:** Fostering Involvement From Communities Disproportionately Impacted by Violence
- **Module 5:** Plan Your VRC Meeting
- **Module 6:** Facilitate Your Review Meeting
- **Module 7:** Collecting VRC Data
- **Module 8:** Building a Recommendation Plan

Module 1

Violence Reduction Council Structure

Key Topics:

- Key components of a VRC
- Who should be involved
- Understanding expected outcomes

Module 1: Violence Reduction

Council Structure

Overview of the VRC

Violence Reduction Councils (VRCs) are a public health approach that provide a platform for communities to use data to problem solve and brainstorm solutions within and across sectors that include traditional and nontraditional partners. Rather than addressing homicides and violence from within silos of individual disciplines and offices, VRCs promote the open sharing of information and experiences across departments, agencies, and sectors in a non-blaming, trusted forum. One of the most important roles of the VRC is to convene homicide and nonfatal firearm incident reviews. The VRC is a critical forum for various stakeholders to work together to address violence in a way that balances short-term interventions with long-term solutions. Through case reviews, criminal justice professionals, public officials, community service providers, and residents meet regularly to exchange information about a recent homicide and to identify trends, gaps, and needs. The VRC is made up of members from criminal justice, social service, public health, and, importantly, community groups involved in violence prevention. The VRC is multidisciplinary and multilevel—line staff are involved alongside senior staff. The VRC model also secures buy-in from community leaders and community-based organizations involved in violence prevention within the city. These cross-cutting collaborations and partnerships are a critical component of the VRC.

Once the VRC review teams are formed, routine meetings are held where members discuss high-level data and detailed information from recent homicide and violent crime cases. During the review meetings the VRC members share information about the victim's and suspect's demographics and characteristics (e.g., age, housing status, substance use, relationship to other individuals involved, and criminal history), weapon used (e.g., whether or not the gun was purchased legally, used in another crime, or linked to another offender), and environment (e.g., in the street, near a bar, or in a house). From these case discussions, participants identify gaps or weaknesses in policy and practice and systemic barriers to violence prevention. The VRC then proposes recommendations to address these barriers and enhance the city's violence prevention infrastructure.

The VRC process creates the platform for city and county leaders to identify prevention and intervention strategies using aggregate and case-level information gained from multiple partners about the individuals, neighborhoods, social systems, and relevant social issues. The VRC members develop a shared understanding to improve policy, program, and resource allocation decisions based on a broader set of information and cross-agency discussions.

Guiding Principle: A Public Health Approach to Violence Prevention

The Violence Reduction Council takes a public health approach to violence prevention. It follows the Centers for Disease Control and Prevention's four steps approach for approaching violence through a public health framework:⁷

1. Define and monitor the problem
2. Understand the causes of the problem (or analyze the problem and its context; identify risk and protective factors)
3. Identify and test solutions or response (develop and test prevention strategies)
4. Ensure long-term or community-wide use of the solution (ensure widespread adoption of effective strategies)

Step 1: Define and monitor the problem

At first glance, defining and monitoring the problem of violence may seem like a step that cities have already taken. While law enforcement leaders may have a solid grasp of the homicides and nonfatal shootings within the city, other city agencies and community-based organizations may not have the same level of information; and none of the

⁷Centers for Disease Control and Prevention, National Center for Injury Prevention and Control, Division of Violence Prevention. Public Health Approach to Violence Prevention.

agencies have a cross-sector view of the problem. Likewise, many acts of violence are not reported to the police. Social services providers, community-based violence intervention organizations, and hospitals have rich data and insights which can help define and contextualize the problem. The VRC brings these stakeholders together to collectively define the problem of violence in the city.

Before diving into individual case reviews of homicides and violence, the VRC examines the trends of violence within this city, using data and insights from public health, public safety, community service providers, and hospitals. This information will help ensure that the discussions during case reviews are relevant to larger trends of violence within the city. The VRC should identify the "who," "what," "where," "when," and "how" of violence in the city. For example, the VRC should know the demographic breakdowns of victims and perpetrators/suspects. They should understand the different types of violence, the hours and days, and the city block in which violence most frequently occurs. The VRC should routinely monitor these trends; the analysts on the VRC team should provide brief updates of these trends during each meeting.

Step 2: Analyze the problem and its context to identify risk and protective factors

This step builds upon step one, exploring individual cases to gain a better understanding of the risk factors which contribute to violence and the protective factors that can be expanded upon to prevent it. Step two is the primary role of the VRC case reviews. Individual cases are selected representing the trends identified in step one. For example, perhaps while analyzing the trends in step one, the VRC team found that there were multiple group violence related shootings of young adults in a specific neighborhood over a brief period. A case (or series of cases) would be reviewed that represents elements of this trend.

Before the case review meetings (criminal justice and community service provider teams), VRC participating agencies collect and review in-depth information about the victim, suspect(s), location, and the context of the event. Information from criminal justice partners (police, prosecution, corrections, courts, etc.) like criminal history of both the suspect(s) and victim, pre-trial history, probation history, ballistic connections, etc. help create deeper understanding of the incidents. Information should also be shared among social service providers and community-based organizations who may have been providing services to the victim or suspect and/or in the neighborhood in which the incident occurred. Contextual information should also be collected—information about where the victim lived, went to school, or worked, information about the family, and the larger community where this event took place.

During the case review, the VRC facilitator (often the VRC director or an academic partner) guides a discussion through a presentation of what is known about the incident, supplemented with information shared by participants during the review process, to identify risk and protective factors specific to the case, and system-level gaps and strengths.

Step 3: Identify and test solutions (develop and test prevention strategies)

Based on the case reviews, the VRC should examine system gaps. The VRC should identify policies, practices, and programs that can be improved to address the risk factors for violence and to expand upon protective factors. The case review teams should identify and explore recommendations ranging from small department-level adaptations in strategy to city-level policy changes or strategies. Ad hoc recommendation subcommittees should be created to narrow these recommendations, develop an action plan for advancing each recommendation, and track their status. The VRC executive leadership committee should discuss potential recommendations and work closely with the subcommittee to ensure there is buy-in from city leadership to advance each recommendation.

Step 4: Ensure long-term or community-wide use of the solutions (ensure widespread adoption)

Over the long term, the VRC should track the status of their recommendations. Once the recommendations have been formally implemented, the VRC should investigate whether they were rolled out appropriately. This should be a regular component of case reviews.

It is also vitally important to communicate the work of the VRC to the wider community, especially communities impacted by violence. The VRC should regularly present their overall findings and the status of their recommendations at community meetings, and they should seek community insights into whether community members impacted by violence feel the recommendations are being implemented and have had an impact.

Scanning, Analysis, Response, and Assessment

The **Scanning, Analysis, Response, and Assessment** framework (SARA Model) used in the field of criminal justice is the same approach as the public health approach with slightly different terminology. The SARA model includes essentially the same steps as the public health approach.

Scanning – Identifying and prioritizing problems: Each case review seeks to identify and understand the complexities of the problem as it relates to the victim, offender, or incident location. Reviews then examine the data in the aggregate to identify emerging problems. Beginning with this scanning step can lead to important discoveries. For example, through scanning, one VRC discovered that 12% of all homicides in the city occurred outside of bars. The VRC convened a license premise subcommittee to propose an increased police patrol outside of bars and establish an ordinance that states that bars with three or more calls for service in 30 days must install video cameras on the interior and exterior of the building and the owner of the bar (who may or may not be the property owner) would be billed for future calls for service to the property.⁸

Analysis – Researching what is known about the problem: The VRC data is the most comprehensive dataset on homicides and nonfatal shootings in the jurisdiction. The data captured is highly relevant to partner agencies and used to identify prevention opportunities in real time. This is particularly true for its nonfatal shooting data, where few data are publicly available despite the similarity of these events to most fatal shootings. An effective VRC should regularly provide data back to the community partners and agencies to assist with the development of programs and tactical planning. For example, a VRC identified the most frequent time frames domestic violence (DV) homicides occurred to help a DV nonprofit provider select the best time to run public service announcements about DV services in the area. VRC incident-level information should be updated as new information becomes available (e.g., if a new suspect is identified three years after the incident). As a result, the VRC data should be the most accurate of its kind and of high quality.

Response – Developing solutions to bring about lasting reductions in the number and extent of problems: VRC focuses on systemic change, including place-based and target-based strategies, and behavior change of individuals. VRC does this by increasing information sharing, leveraging partnerships, and focusing limited resources to identify the highest risk victims, offenders, and locations while lifting protective factors.

Assessment – Evaluating the success of the response: Since VRC efforts are data-driven, a comparison of baseline and post-initiative data can easily be used to measure success and refine plans. The VRC should follow up on each recommendation to ensure that it worked as planned and has led to the intended results. If a recommendation was not effective, the VRC will bring partners together to assess why the recommendation failed and how the original problem can be addressed using other strategies.

Successful VRCs, like the MHRC, incorporate both the public health approach as well as the SARA model to reduce violence.

⁸Azrael, D, Braga, A A, O'Brien, M. E. (2013). Developing the capacity to understand and prevent homicide: An evaluation of the Milwaukee Homicide Review Commission. Boston, MA: Harvard School of Public Health.

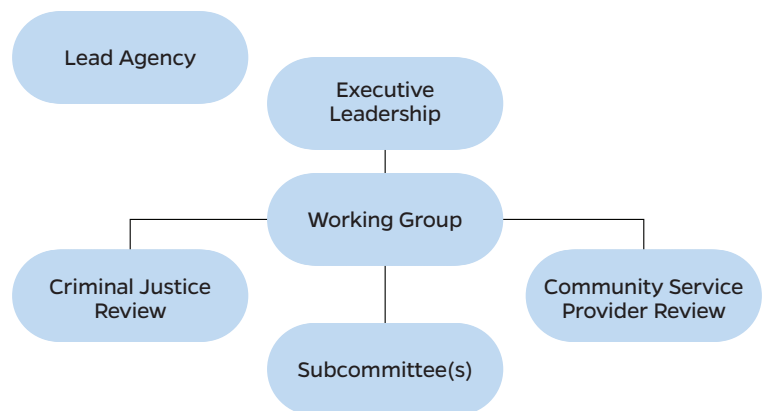
Problem Solving

The VRC process involves systematic review of nearly every homicide in the city and selected nonfatal assaults and shootings. Cities have adapted the approach to focus on a different subset of crime. In its early adaptation of the homicide review approach, Chicago, Illinois, elected to engage in place-based problem solving, initially developing its review process around youth-involved shootings in particular high crime areas.

Each case should be reviewed in the same way to determine how similar homicides can be prevented in the future using innovative and proactive strategies. The precipitating events leading up to the homicide or nonfatal shooting are discussed and considerable effort is made to understand the underlying conditions that contributed to the event (an effort that sometimes requires going back 10–20 years in an individual’s life history!). The situational context of the crime, including knowledge about the gang and/or drug market activity near the homicide, is also assessed. This information is used to develop criminal justice and community-based strategies to reduce lethal and nonlethal violence, many of which affect organizational policies and practices. Based on this comprehensive approach, VRC leverages community-based solutions such as the referral and provision of social services for high-risk populations.

VRC Team Structure

The VRC should be housed and supported by a neutral agency. The structure of the VRC consists of a governance (executive leadership), two review teams (criminal justice and community service provider), a working group (mid-level personnel), and coordinating team.



Governance Structure

A governance structure is essential to the success and sustainability of a VRC. The operation and control of any VRC will depend on local administrative and political environments. The governing body, the

Executive Committee, is composed of up to 15–20 senior-level representatives of city, county, and state agencies, and community partner organizations. Initially, the **Executive Committee** may have fewer representatives (7–10) and expand over time. Core partner agencies would typically include:

- Mayor’s office
- County executive’s office
- Police department
- District attorney’s office
- Sheriff’s office
- Public health
- Office of Violence Prevention
- Community Corrections adult and juvenile
- U.S. attorney’s office
- Federal law enforcement agencies
- Community based organizations. Service providers (domestic violence, community violence, after school programming, etc.)
- School system
- Judiciary

The Executive Committee is responsible for finalizing recommendations, approving and executing the action plan for implementation, and providing resources to implement the recommendations. Table 1 lists possible governing committee members for a local VRC team. Executive Committee meetings typically occur less frequently than the case reviews and community reviews. They cover high-level findings from aggregate and case-level data and focus on discussing how to advance the recommendations developed by the VRC. Ultimately, city leadership must understand and be brought into the VRC process to ensure that the VRC recommendations are carried out and sustained. Agency leadership is encouraged to attend Executive Committee meetings regularly and occasionally

observe a review for process awareness and context but should not regularly attend review meetings as their presence can stifle honest conversations between meeting members about the gaps they see within city departments.

Table 1. Example of Executive Committee Members

- | | | |
|--|--|---|
| <ul style="list-style-type: none"> • Mayor • Chief of police • Commissioner of health • Director of the Office of Violence Prevention • Executive directors of local nonprofits | <ul style="list-style-type: none"> • Director of community corrections (adult and juvenile) • County sheriff • Researchers at a local university • District attorney • Chief judge • Behavioral health administrator | <ul style="list-style-type: none"> • School superintendent • Medical examiner/coroner • U.S. attorney • Special agent in charge ATF • Special agent in charge FBI • City attorney |
|--|--|---|

The **Working Group** is the second tier of the governing structure and meets each month as well as participating in the case review meetings. The Working Group consists of 10–15 mid-level representatives from many of the same organizations as the Executive Committee and ensures the preliminary groundwork is completed for individual case reviews. As mid-level staff, the Working Group is well situated to understand the policy and practice of their agencies and the best course for recommendation action plan. They also serve as the primary conduit for most recommendations that require executive-level approval and support.

Criminal Justice Review Team (CJRT)

A VRC Criminal Justice Review Team functions best when the team includes a diverse set of knowledgeable stakeholders that represent the criminal justice system. These individuals should be in frontline and mid-tier positions within their agency or department. They should have access to case-level information and understand violent crime trends, internal city policies, on-the-ground service provision, but should also be able to speak about their agencies’ protocols, policies, and strategies. They should contribute to the discussion about larger trends in the data and recommendations that will prevent future violence. The VRC CJRT meets monthly. A list of participating agencies can be found in Module 3.

Community Service Provider Review Team

Community participation in the VRC process is essential. The community service provider reviews occur monthly or bimonthly with members of community-based organizations, social service agencies, city neighborhood services, school district, housing authority, and community organizers that work on crime and violence prevention (e.g., block watch captains, violence interrupters). This group only reviews closed cases (cases where an individual has been arrested or an arrest warrant has been issued for the suspect). Only information available through an open records request is shared in these reviews. Criminal justice system representatives should also participate in the Community Service Provider Review.

Table 2. Example of Working Group

- Mayor/Health Dept./OVP representative
- Captain of police
- Team lead Community Corrections
- Team lead/deputy district attorney
- Assistant U.S. attorney
- Team lead city attorney
- Supervisors of representative nonprofits

Community Service Provider Reviews are listed out in Module 3.

Module 2

Building a Violence Reduction Council

Key Topics:

- Staffing for a VRC
- Roles of the VRC staff
- Recruiting and maintaining members of the VRC

Module 2: Building a Violence Reduction Council

Getting off the Ground

VRCs require buy-in and ongoing support from executive leadership within the city including the health commissioner, mayor, the police chief, and the district attorney. All these stakeholders are needed to effectively analyze cases, develop, and implement recommendations. VRC planning should start with engaging and educating these stakeholders about the importance of VRCs in building comprehensive violence prevention infrastructure within the city. A champion within leadership and community can assist with executive leadership support of the VRC process.

Critical to developing a VRC is finding the champion(s) to help move the effort forward, starting with one champion and having that snowball into additional champions. The champion may be the director of the VRC, a credible executive director from a nonprofit, an elected official (mayor or district attorney), or an appointed individual

(office of violence prevention director, health commissioner, police chief).

Once this buy-in is secured, understanding the landscape of violence prevention efforts in the city will be important. The VRC should conduct a quick assessment of all the violence prevention initiatives each city agency and community service provider is engaged in and learn to what extent these different initiatives interact with one another. This will help leadership identify where gaps are in violence prevention programming and coordination. It will also help city leadership identify the lead agency or department best equipped to take on the VRC and facilitate interagency coordination.

Many cities have created offices of violence prevention (sometimes also called offices of neighborhood safety) that develop and enhance public health strategies to reduce violence. These offices supplement the work of law enforcement and other traditional public safety entities. Much like VRCs, offices of violence prevention work across city departments to coordinate violence prevention services and build a comprehensive violence prevention strategy for the city.

Cities with an office of violence prevention should consider building the VRC within this office. The director of the Office of Violence Prevention, or their designee, should act as the VRC director. Cities without an office of violence prevention should create a new position or task an existing high-level person to lead the VRC and help the city develop a comprehensive, interagency violence prevention infrastructure. Ideally, an expert in violence prevention fills this position. This position should be a leadership role and report directly to, or have access to, the mayor, city administrator, and health commissioner.

Funding Your Violence Reduction Council

Take guidance from other cities that have established violent crime or homicide reviews to determine what infrastructure and funding mechanisms are best equipped to meet their needs. Consider these following tips:

- Partner agencies can designate a staff person for the project. This means you can start your project without securing a grant or hiring new staff.
- Partner agencies can reallocate computers, workstations, and meeting spaces for the benefit of the VRC.
- Partner agencies can designate a staff person to assist with data collection, entry, and analyses. Many police departments have crime analysts, district attorney offices have analysts, and health departments have epidemiologists.
- Using or adapting already existing forms and template databases can save time, costs, and other resources. Consider looking at homicide and violent crime reviews in other cities and use the resources provided from the [Appendix](#) of this guide to get started.
- Consider avenues to securing sustained funding and commitment from city agencies. Some fatality reviews have legislation which specifically establishes the review and outlines its roles and duties. This legislative approach to securing funding and solidifying the review requirements may be worth considering.
- Consider leveraging federal funds to sustain the VRC. The VRC could be funded through a wide range of USDOJ funds including Project Safe Neighborhoods, the Community Oriented Policing Service (COPS) office, and the Community Based Violence Intervention and Prevention Initiative. Consider also leveraging state allocations of federal public safety funds. The city of Hampton, Virginia, for example, secured state Byrne JAG funds to build a Violent Crime Review.
- Utilize a mix of philanthropic and governmental funds. In the first decade of the Milwaukee Homicide Review Commission, funding came from a variety of governmental and charitable sources dedicated to criminal justice, public health, education, and human services. This ensures that your VRC would be sustained even if one funding source ends.

VRC Leadership Roles and Structure

The VRC has a lead agency that oversees the VRC and provides administrative support. A VRC lead agency can be the office of violence prevention, local health department, human services department, district attorney's office or police department. The lead administrative agency should have an institutional commitment to reducing violence and providing resources and staff to support the VRC. The agency should be seen by the partners and community as a trustworthy and collaborative agency.

The VRC lead agency oversees the VRC staff by providing administrative support to fulfill key leadership roles including:

- Director
- Facilitator
- Coordinator
- Data manager
- Community outreach manager
- Research partner

The VRC staff leadership structure and roles depend on the jurisdiction, but one person may take on multiple roles. For example, the VRC director often also serves as the facilitator. Likewise, the coordinator could serve as a community outreach manager and the data manager. Jurisdictions with significant financial and political support and/or a significant volume of cases, may have up to five funded staff positions. In other jurisdictions, one person completes multiple roles. Initially, and depending on the size of the community, ongoing, these roles may be fulfilled by existing staff and not require hiring additional staff. (Sample job descriptions can be found in the [Appendix](#).)

VRC Team Facilitation Role

An individual within that lead agency should be charged with establishing the VRC as the director. The VRC director should have a deep knowledge of the subject area and ideally have relationships across city agencies. To begin, they should strengthen relationships with other agency stakeholders involved in violence prevention and build new relationships with agency stakeholders. They can do this through setting up one-on-one meetings where they can build rapport and explain the benefits of creating a VRC. If funding is available, the director should hire and oversee the VRC coordinator and the data manager. Most frequently the director acts as the facilitator of the VRC meetings, but they can also designate someone with facilitation skills to facilitate the reviews.

Once the director has built out the VRC, they will be responsible for the following ongoing activities:

- Facilitating VRC meetings (or designating someone to act as the facilitator)
- Recruiting VRC team members
- Building and maintaining relationships with VRC team members
- Orienting new VRC team members
- Updating the governing committee

Selecting a Team Coordinator

The VRC director should select a representative from the lead agency to serve the coordination role. The VRC team coordinator is responsible for activities such as:

- Obtaining and sharing case information with team members
- Receiving data and reports from team members
- Researching information about cases that may not be provided by VRC members, such as reviewing social media, obituaries, media coverage, etc.
- Drafting VRC meeting agendas, in partnership with the VRC director
- Managing meeting logistics (such as date and time, location, and technology support)
- Taking minutes during each meeting
- Documenting activities since the last VRC meeting
- Supporting and communicating with subcommittees
- May serve as the facilitator and/or assist with the facilitation of VRC meetings

Some of these activities may be shared with an administrative assistant. More information about the VRC team coordination role is available in Module 5: Plan Your VRC Meeting.

Selecting a Data Manager

The VRC director should select a representative from the lead agency to serve in the data manager role. The VRC data manager is responsible for entering case information and recommendations into the VRC database, analyzing aggregate data from other data sources, and synthesizing data for the governing committee and annual reports.

Likewise, the data manager should coordinate across city departments with public health epidemiologists and crime analysts and, if possible, academic researchers to carry out their work. The data manager may be co-located in a law enforcement agency to facilitate real-time data sharing and partnerships between agencies.

More information about the VRC data manager role is available in Module 7: Collect Your VRC Data and Module 8: Build a Recommendation Plan.

Selecting a Community Outreach Manager

The VRC community outreach manager is responsible for ensuring that community-based organizations and community leaders involved in violence prevention are aware of and engaged in the VRC. They should ensure the community partners are involved in the review process and that recommendations and findings are shared with the communities impacted by violence.

This role can be filled by an already existing community outreach position in an agency participating in the VRC. For example, a community outreach manager within the city's Office of Violence Prevention or health department could fill this role.

Selecting a Research Partner

Research partners from local universities can play an important role in helping to analyze aggregate data and evaluate the efforts of the VRC. The VRC director should reach out to local universities to see if they can forge a partnership with a researcher involved in action research within the fields of public health, criminology, or public policy.

Recruiting VRC Community Service Provider Review Members

Each partner agency should identify staff members (frontline staff, mid-level supervisors, or executives) who have the most appropriate roles within the agency to be core VRC Community Service Provider Review Team members and who regularly attend and contribute to the reviews. All staffing levels are important and needed on a review team to ensure the most complete understanding of how agencies and systems work together, including what gaps exist and what steps may be needed to implement identified prevention recommendations. This level of engagement ensures that at least one person from each agency can be present at each meeting and helps build internal agency relationships and champions for change. Effective VRC Community Service Provider Review Teams have 30–35 members. A list of typical VRC Community Service Provider team members is available in Table 3.

For some cases, VRC Community Service Provider Review Team members may have had previous contact with a victim or the victim's family or social network. They may also represent an agency that provided services to the victim or suspect or provide services to the area in which the violent act occurred. The VRC Community Service Provider team members provide essential information about the conditions or environments in which the decedent was born, lived, worked, and aged and what may have contributed to the act of violence.

In addition to possibly providing services to the community and to the victim, an effective VRC Community Service Provider Review Team member will also have:

- An understanding of the impact of violence in his or her community.
- The ability to assess problems at the macro or system level and assess organizational practices or community-wide initiatives.
- Authority to make decisions for the agency or organization he or she represents, or direct access to decision makers.
- The ability to critique work of other agencies and organizations and raise questions without passing judgment.

Table 3. Desirable Attributes of VRC partners

Agency	Staff Person Attending the Review
<ul style="list-style-type: none"> • Known for providing quality services • Known for developing successful partnerships • Specializes in a related issue area or with a specific population, or provides a specific service or strategy important to homicide prevention • Engages in public policy and other advocacy 	<ul style="list-style-type: none"> • Is well regarded and knowledgeable in a particular system, policy, issue area, or target population • Has time to attend meetings and participate in follow-up activities • Has the experience or ability to assess problems at the macro level, such as organizational practices or citywide initiatives • Has decision-making authority for the agency or has direct access to decision makers • Can critique the work of other partners and raise questions without passing judgment

Preparing Members for VRC Meetings

VRC review teams benefit from ongoing recruitment of new members to address staff turnover, address gaps in their membership, or identify new trends. Members may need to be recruited and engaged before being requested to provide data, participate in a review, or assist with developing or implementing a recommendation. Their perspectives and input will be valuable even if their organizations did not have direct contact with the victim, suspect, or service area related to the case. For example, a community violence intervention worker has valuable perspectives on the dynamics of retaliatory gun violence within a given network of individuals even if they did not provide services to the specific individual being reviewed.

Effective recruitment is all in the details. Ideally, the VRC director will meet one-on-one with new recruits to prepare members for what to expect when participating on a review team by:

- Explaining the VRC goals and reviewing overall structure.
- Sharing stated and unstated group rules/norms.
- Emphasizing that the purpose of the meeting is not to point fingers at other participants.
- Addressing any data-sharing or confidentiality concerns and having them sign a confidentiality agreement. A sample confidentiality agreement is included in [Appendix](#).
- Summarizing past and current recommendations relevant to their organization or area of work.
- Suggesting immediate ways they can participate in developing and implementing a recommendation.

Drafting a VRC recruitment email with the above information, a meeting schedule, and a clear list of partner expectations will help communicate and recruit new active members. A sample VRC recruitment letter is included in [Appendix](#).

Building and Maintaining Relationships

Building and maintaining relationships can be achieved in several ways. For example, the VRC team can use meeting breaks as an opportunity to incorporate team building. This may involve as little as pulling aside a couple of participants and introducing them to each other and bringing up a shared interest or connection they may not be aware of. Encouraging members to stay after the meeting to network is another effective way to build trust and relationships.

A more formal way to help build team cohesion is to provide general agency or member updates at the beginning or end of the meeting that may result in partnerships during and outside of the case review experience. For example, VRC members should be encouraged to share information about upcoming violence prevention events their agency is hosting within the community. Keep in mind that if the relationship with the agency is new, attending agency events and asking to observe the program may help you to get a sense for what the agency does and will build rapport.

Orienting New VRC Team Members

Every team member will come to the table with different experiences, knowledge, prejudices, and ideas about violence and its impact on his or her work and the community. It will be the facilitator's responsibility to lead meetings in a way that elevates all voices, addresses stigma, bias or misinformation, and neutralizes tensions. To prepare for this task, the team facilitator may expect each member to obtain certain knowledge or training ahead of participating in a VRC team meeting.

VRC Subcommittees

Much of the work of a VRC occurs between meetings. Subcommittees may be permanent or ad hoc and may be as small as three people. Oftentimes a small group will come together to determine case selection for each review while a larger group may come together to develop an action plan for how a recommendation may achieve a policy change. For example, if a VRC review identified improving reentry service provision and supervision, the subcommittee may include representatives from the Department of Corrections, the police department, community-based reentry service providers, and the public defender's office to discuss gaps in coordination; identify additional community partners; and develop recommendations, an implementation plan, and a timeline for completion.

Subcommittee membership may include members of the executive committee or working group, one of the VRC review teams, and outside experts.

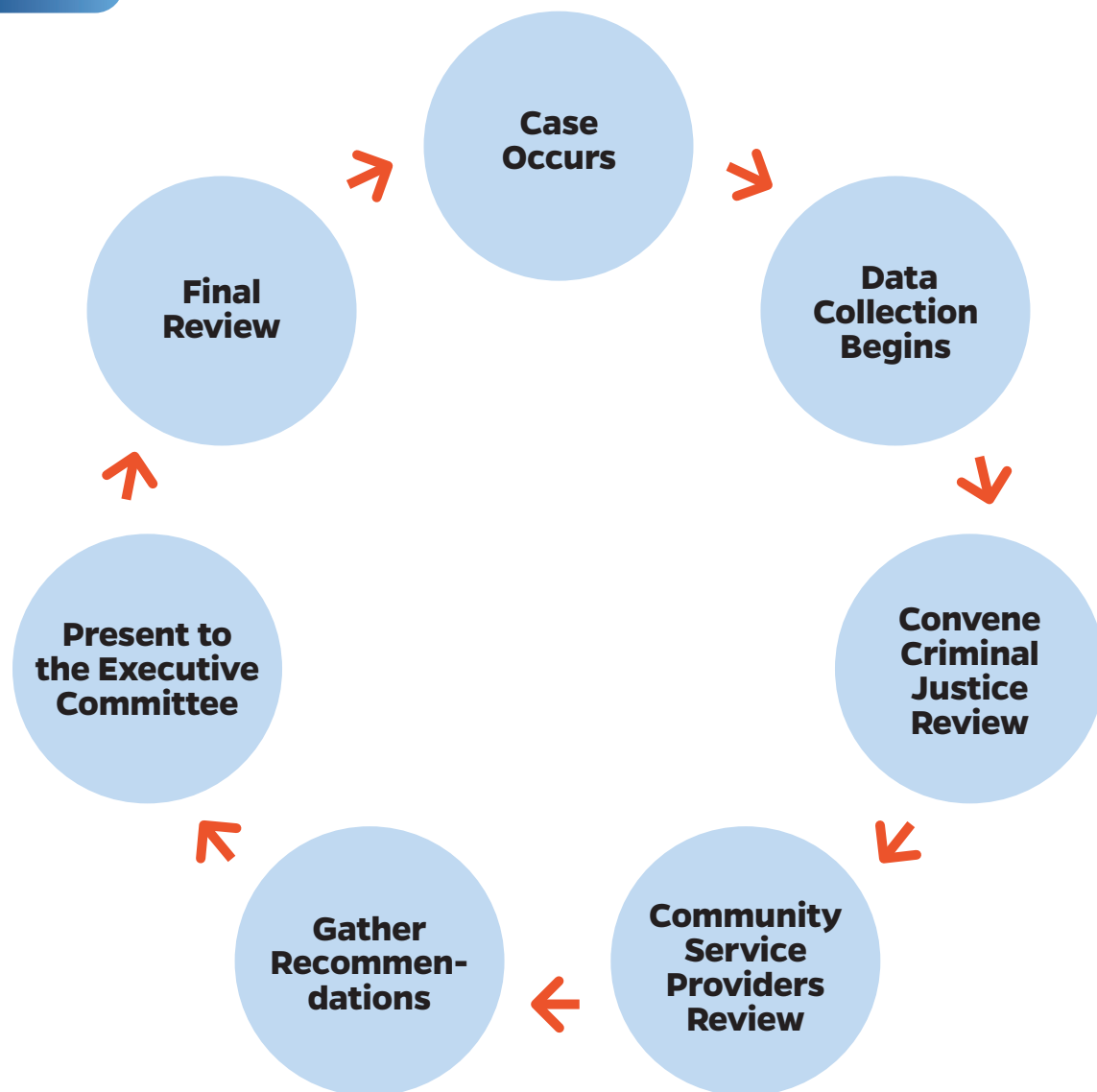
Subcommittees meet separately from the VRC review teams and report to other members at case review meetings on their aims and progress. Subcommittees are formed and disbanded as needed, so they may serve an ongoing or a temporary purpose. To learn more about forming a subcommittee to develop a recommendation, review Module 8. Form a Subcommittee to Further Develop Recommendations.

Key Considerations for Getting Off the Ground

- Start small and scale up. Be realistic and match resources to your initial focus. Start-up staffing and decisions about the scope of effort should be based on the time and efforts key partners can afford to devote. Expansion will garner more favorable views after you establish a process and a successful track record.
- If reviewing every homicide is too burdensome, consider reviewing homicides that occur in a particular geographic area (e.g., north side cases, police district five's cases), or reviewing homicides among select populations or problem areas (e.g., gang-related homicides, youth homicides, domestic violence-related homicides, drug-related homicides, or homicides occurring in designated hot spots).
- Adjust to standard investigation processes and cycles. Allow 2–3 weeks for the police to investigate a violent act prior to calling the case up for review. This will ensure sufficient time for facts to come in and for investigators to collect and organize relevant information.
- Actively involve community organizations and leaders in the review process. Given the sensitivity of information shared, review only cleared or solved cases. Involve community organizations in subcommittees assisting in the development of recommendations.
- Set a meeting cadence that maximizes outputs, outcomes, and resources. For example, set a working group meeting the first week of the month, and executive committee meeting the second week allowing for work to happen between the working group and executive committee meetings. Set the criminal justice review the third week and community service provider review the fourth week allowing for recommendations to begin to percolate in ad hoc subcommittees before the working group and executive committee meetings. Subcommittee meetings could occur before or after a review or virtually.

Data-Sharing Agreements

The designated VRC director may need to consider working with the city/county to develop data-sharing agreements that allow VRC members to share confidential information about the cases across agencies and amongst one another. Sharing data while maintaining confidentiality is essential for a VRC to run smoothly, and working to establish these processes at the onset, through memorandums of understanding between agencies, is vital. Data collection and sharing will be discussed in depth in Module 7.



Step 1. Case Occurs: Homicide or nonfatal shooting incident occurs in community.

Step 2. Data Collection Begins: VRC staff member enters initial information on the case, updates information throughout the review process. This is the backbone of data infrastructure and needs to occur as in real-time as possible.

Step 3. Convene Criminal Justice Review: Criminal Justice Review Team reviews select cases, engages in problem analysis to develop recommendations; recommendations move to the working group and subcommittee.

Step 4. Community Service Providers Review: The Community Service Provider Team reviews the same case once it's cleared/closed to expand

understanding of prevention opportunities, identify recommendations.

Step 5. Gather Recommendations: Recommendations from both review teams are compiled, reviewed, and further developed, including an action plan for implementation.

Step 6. Present to the Executive Committee: Aggregate data, trends, case review findings, and recommendations (including action plan) are shared with the executive committee for implementation.

Step 7. Final Review: Review data to examine success utilizing the VRC data system; analyze status of implementation of recommendations and case data to assess effectiveness of recommendations; identify themes for case review.

Module 3

Forming Partnerships Across Agencies and in the Community

Key Topics:

- Community partners involved in the VRC
- Importance of their involvement
- How to engage community service providers in VRC process

Module 3: Forming Partnerships Across Agencies and in the Community

Since homicides and violent crime affect a variety of populations, neighborhoods, and communities, the types of partners that participate in homicide reviews should be diverse. They should include large and small agencies, some that explicitly focus on violence or crime prevention and some that don't: grassroots organizations, multi-service and multi-issue organizations, older and newer nonprofit organizations, and groups that are themselves coalitions or collaboratives.

Community-based organizations from within neighborhoods disproportionality impacted by violence are essential to the VRC. Likewise, since Black and Hispanic/Latino people are disproportionately impacted by violence, Black- and Hispanic/Latino-led community-based organizations must be key partners within the VRC.

Participating Local Agencies

Successful agency partnerships are the backbone of the VRC process; developing and maintaining these relationships is critical. The agencies participating in the criminal justice reviews provide case-specific information that, when combined, completes a detailed picture not only of the event itself, but of many factors leading up to the event, including the points at which intervention might have been successful.

As you begin to design your VRC review process, it is extremely important for six primary partners to be involved in the process from the very beginning: **public health, police, prosecutors, corrections officials, community services providers, and the mayor's office**. Depending on local circumstances, **additional** partners may include representatives from any of the following:

Criminal Justice Review Team

- Medical examiner's office
- Sheriff's department
- U.S. Bureau of Alcohol, Tobacco, Firearms and Explosives
- U.S. Federal Bureau of Investigation
- Public school public safety
- City attorney's office - nuisance/problem property/misdemeanor
- Housing authority public safety
- State criminal justice investigations
- U.S. attorney's office

Community Service Provider Review Team

- Community-based organizations in impacted communities
- Neighborhood organizations
- Community violence intervention organizations
- Public schools
- City attorney's office
- Housing authority public safety
- Department of Neighborhood Services
- Victims of Crime Act (VOCA) state administering agency
- Department of Social Services
- Community development block grant-funded organizations
- Community service providers

Criminal Justice Agency Stakeholders

Participants from the criminal justice community may come from local, state, and federal agencies and may include police officers and executives, probation and parole agents (juvenile and adult), and attorneys and lead prosecutors. Police, prosecution, and community supervision are key stakeholders to include.

Police Department

A successful review process is not possible without strong leadership and active support by the local police department. The police department must be fully involved from the outset in the development and execution of the review process in any jurisdiction. The review process relies heavily on the police department providing data about

violence within the city and providing detailed case information about the victims and suspects. Access to specific information about violent incidents is vital to developing the data systems the review uses to identify problems. Law enforcement has access to the bulk of the information relevant to case reviews, as well as the most critical resources for addressing homicides and conditions that give rise to them.

For a VRC to function, police personnel should be engaged at every point in the review process. They should participate in all reviews, the community review, the governing committee, and on subcommittees. Line officers participating in the VRC will often be a source of many suggested recommendations, and many of the recommendations that come out of the VRC will be changes to policy and programs within the police department.

District Attorney

As with the police department, strong leadership and active support from the district attorney's office (DA) is also critical to a successful review process. Prosecutors provide valuable information on prosecution cases prior to incident. Prosecutors work closely with police investigators and offices and are frequently involved in investigations with their own in-house investigators. DA offices are increasingly committed to working toward prevention, intervention, and suppression strategies. Including prosecutors as a partner in the VRC can help them understand how they can be problem solvers working as part of the city's violence prevention infrastructure, rather than acting solely as reactive agents that charge suspects.

Corrections

Corrections is another key partner whose leadership and support can help ensure a successful review process. Many of the individuals involved in violent crimes have had prior or current contact with the correctional system, including supervision under probation or parole. Understanding the nature of these contacts and convening key stakeholders from local correctional agencies can aid in recidivism reduction strategies. Knowing which probationers and parolees have histories of violent crime will lead to insights into cases, particularly those involving retaliatory or gang-related violence.

Medical Examiner's Office

The medical examiner's office/local coroner can be a strong VRC partner depending on their roles within the county/city. In Washington, DC, for example, the medical examiner's office is the lead agency for their Violence Fatality Review Committee. Many medical examiner's offices/coroners may already be leading overdose fatality reviews or domestic violence reviews and have the infrastructure and knowledge to launch a VRC. At the very least, medical examiner's offices/coroners should provide detailed information about victims to the VRC team.

Important Partners to Involve in the VRC Process

It is extremely important to involve the following partners in your VRC process from the beginning:

- **Substance use and narcotics trafficking specialists.** These groups are important to involve since many homicide victims and suspects are either people who use drugs or sell drugs.
- **Mental health providers.** These are essential since many victims or suspects of violent crime experienced childhood and adult trauma, and many have clinical mental health diagnoses or have received treatment for acute symptoms.
- **Criminal justice specialists, such as halfway houses and case managers for individuals on supervision.** This is especially important, since most homicide suspects and many victims have a criminal history that includes incarceration and convictions for many types of crimes.
- **Youth workers and community organizers.** Groups that work with youth, such as block watch clubs, neighborhood associations, and faith groups, are critical, since the age range for the highest risk of being an offender or a victim spans the teens and early twenties. Youth workers and community organizers also have a finger on the pulse of local neighborhoods and are aware of changes in the attitudes, dynamics, and behaviors of their residents.

These providers may be involved regularly in a criminal justice or community service provider review and/or may participate in a subcommittee in the development of recommendations.

Public Health and Community Service Agencies

Community service provider agencies provide services that help prevent homicide, violent crimes, and violence from occurring in the first place. Such agencies provide services designed to increase individual and family functioning and facilitate community building, such as clinical treatment, housing and employment support, and other social services. These services have the potential to reduce the number of individuals and populations at risk for becoming a homicide victim or suspect; they have the potential to transform individuals, communities, and neighborhoods, making them healthier and safer.

Community service agencies typically collect a wealth of non-criminal justice information about the individual, family, neighborhood, or community involved in a homicide that can be used to inform problem-solving discussions and formulate prevention strategies. Additionally, community service providers have access to information about crimes, disorder, and community discord that police may lack. Some of this information is shared through the intake process for social services, or during individual or group counseling sessions, which can shed light on the problem and the cycle of violence in families and communities. Care is taken to maintain the confidentiality and privacy of the clients or residents working with the community service providers. For example, if community organizers learn from residents of a drug house that is pertinent to a case being reviewed, they can share the address and occupant descriptions that law enforcement needs while protecting the anonymity of the resident neighbors who may fear retaliation. Working through the frontline workers of the service providers protects the residents while giving them an opportunity to make change in their neighborhood.

City/County Public Health Department

Public health departments should be a key agency within the VRC because they can provide a wealth of data and expertise on violence prevention. They can provide insights into the aggregate data of violent deaths and injury by working with hospitals to provide up-to-date information on non-fatal violent injury, in addition to fatal injury. They have teams of epidemiologists and data scientists to help analyze this data.

Health departments will also bring an expertise of the upstream factors that contribute to violence since they have extensive data on the social determinants of health, and on health disparities by census tract. This can help contextualize the case information and allow the VRC to think through recommendations that address the root causes of violence.

In addition to providing aggregate data and contextual factors, many public health departments run violence prevention and community engagement programming which can include domestic violence prevention, youth violence prevention, and, increasingly, community violence prevention initiatives. Some public health departments even have offices of violence prevention housed within them that work to comprehensively address violence within a city/county.

A public health department can serve as a strong lead agency for the VRC if they have institutional capacity and have determined violence prevention to be an agency priority.

Human/Social Service Agencies

Human/social service agencies should be involved in the VRC to provide information about the touchpoints the victim or perpetrator had with the agency and the potential services they received. Information about child and family services, from child welfare or after-school providers, provided to the victim or suspect is especially helpful for gaining an understanding of the risk and protective factors within their lives and the missed opportunities to intervene. Human/social service agencies can provide useful contextual information as well as specific information of the individual cases being investigated.

School District

The school district can also play an important role in the VRC, especially in reviewing cases of young people. Gaining an understanding of a victim's and suspect's involvement in school can help the VRC understand system gaps within the educational system. For example, the victim may have been a chronically absent high school student, or they may have been expelled from their school. Likewise, interpersonal conflicts within or between schools may have precipitated the violent act. Understanding these dynamics can help the VRC develop upstream interventions to keep teens safe and more engaged in school.

Community Partners

Community partners should include community-based organizations that work directly with individuals and communities impacted by violence. Nonprofits and community groups providing community violence intervention, mental health, or recovery services to individuals who have been victimized or are vulnerable to violence should be invited to participate in the VRC. Other community organizations in affected areas, such as religious groups, tenant committees, and employment readiness nonprofits, should also be engaged.

In addition to including community partners directly in the VRC process, the VRC should maintain working relationships with dozens of community service providers within the community such as social welfare organizations, community-based organizations, community violence intervention organizations, universities, faith-based groups, and other grassroots organizations. Relationships within the community should be formed while developing a VRC and maintained. Community partnerships will be discussed in depth in the next module.

In addition to the above areas, community partners may represent the following areas of expertise:

- Youth development and programming
- Health relationships
- Reproductive health
- Men's health
- Women's health, pregnancy
- Faith-based services and healing
- Homeless youth, families, and residents
- Education, GED preparation
- Counseling, group therapy
- Employment training, jobs
- Lesbian, gay, bisexual, and transgender issues
- Mental health treatment
- Multicultural and culture-specific programming
- Domestic violence shelters
- Neighborhood development
- Aging, Social Security benefits
- Economic development
- Prostitution
- Fatherhood, parenting, and family development
- Sexual assault, rape, and child sexual abuse
- Crisis management
- Conflict resolution, mediation

The types of community service provider professional staff participating in a VRC varies and can include social workers, violence interrupters, street outreach specialists, nurses, project managers or directors, group facilitators, counselors, and community organizers. Given the nature of the cases reviewed, community service providers may be invited to participate in the incident review or may be engaged at the subcommittee level to assist with recommendation development.

Recruitment and Engagement of Community Service Partners

One challenge is finding the community service providers that have directly or indirectly served the victim or suspect or their neighborhoods. In each community there is only a single networked criminal justice sector; one police department, one department of corrections, and one court system. In the community service sector, there may be dozens of agencies providing substance abuse treatment, dozens of shelters, and dozens of youth service organizations. Finding the one(s) that served the persons (or families) involved in the homicide or violent crime is not easy, and sometimes the VRC team will not be successful. In addition to the challenges of identifying the right service provider, providers might face additional challenges in determining whether they have served any of the individuals involved. For example:

- Most nonprofits do not use the same unique identifiers as the police department providing the data, nor do they usually have electronic and searchable files using the person's name, birth date, and residence.
- Paper files often are used instead of electronic files, making the search impractical.
- Client files sometimes are organized by program rather than client, making the search for a client difficult (the agency would have to eliminate duplicate names and search for the person program by program).
- Files older than five or 10 years may be routinely destroyed, stored offsite, and otherwise unavailable.

Maintaining Relationships With Community Service Partners

Designated VRC staff should be made responsible for maintaining ongoing partnerships with community service partners, including attending partner organization events. At their first meeting with the partner, they provide a meeting schedule and a short flyer describing the program that includes the purpose of the meeting and meeting format, and activities are reviewed with key stakeholders from the agency or organization.

Once stakeholders begin to participate in your VRC, it is the VRC staff's responsibility to keep information flowing to and from that agency and to other agency partners.

Things to consider as you develop your VRC and engage community service providers:

- 1. Develop partnerships with agencies—not just with individual staff members.** As the partnership grows, it is important to learn about the entire organization. As staff are promoted within the organization—or leave it—and are no longer able to participate in the reviews, having working relationships with other staff ensures a smooth transition. That is, you do not have to start the relationship again with a new person, and other participating agencies at the VRC do not have to become acquainted with an entirely new partner.
- 2. Not every partner will participate in every review,** but all should be expected to help with recommendations under appropriate and relevant circumstances. For example, advocacy groups for the homeless may not have a stake in most VRC reviews but should be involved in cases involving homeless victims or offenders.
- 3. Community-based providers and government partners should know their organization'** or program's theory of change and share their own theories of change. Each organization or program has an operating framework (plus terminology) that guides their work. Understanding an organization's framework will help identify opportunities to connect their work to the work of other partners and to specific strategies.
- 4. VRC staff are encouraged attend partner events** and participate in partner initiatives if you expect them to participate in the VRC. It is important to reciprocate and support partner-led efforts.
- 5. Engage agencies and community partners** before you need them to participate in a review or assist with a recommendation so they can learn about the process before they are asked to dive in and support the group's effort.
- 6. Many of the partners you will want to engage must adhere to strict confidentiality policies.** These policies (e.g., HIPAA, FERPA, and other confidentiality laws or practices) should not impede the review process.
- 7. Law enforcement agencies should use community liaison officers (CLOs),** community police officers, or similar staff to identify ways that law enforcement agencies can bridge the culture gap between sectors. CLOs and community prosecution units work to build bridges in neighborhoods to address nuisance properties, such as drug houses or after-set party houses. Officers from these units often have working relationships with the service providers. During the reviews, the two sectors have an opportunity to discuss ways to support each other's work by sharing information and best practices.

Module 4

Fostering Involvement From Communities Disproportionately Impacted by Violence

Key Topics:

- VRC and systemic inequities
- Role of community violence intervention programs
- Opportunities to leverage offices of violence prevention

Module 4: Fostering Involvement From Communities Disproportionately Impacted by Violence

The goal of the VRC is to create a cohesive violence prevention infrastructure across the city that identifies the drivers of violence and crafts solutions. This aim of the VRC is only attainable if individuals within communities impacted by violence are equal partners in the VRC process. Far too often city-level initiatives to address violence are run exclusively through public safety agencies; community engagement is auxiliary, and often the communities engaged in the process aren't representative of the communities most impacted by violence. VRCs can help cities develop more comprehensive violence prevention efforts grounded in community education and engagement. VRCs can amplify the work of community-based violence intervention (CVI) programs that interrupt violence within the neighborhoods disproportionately impacted; and they can enhance relationships between CVI programs and city agencies.

Acknowledging Racial Disparities and the Root Causes of Violence

Violence in cities disproportionately impacts under-resourced Black communities. It is highly concentrated in the same areas that are impacted by social and economic inequities that can be traced to racism, segregation, and discriminatory policies like redlining, exclusionary zoning, and mass incarceration.

The VRC must acknowledge that these systemic inequities drive most city violence; and it should be part of the mission of the VRC to dismantle these inequities through the policy and programmatic recommendations made in the reviews. The VRC can accomplish this through the following ways:

- Educate all VRC members about the root causes of violence and how this contributes to racial disparities. During the VRC launch the director should develop a presentation about racial disparities and the root causes of violence. They should facilitate a discussion about why understanding the root causes of violence is an important part of building a VRC.
- Set norms around creating an open space for honest dialogue without making broad or judgmental statements about groups or classes of people. The VRC should always be respectful in discussing the victims, even if the victim may have been involved in criminal activity. The aim is not to critique any individual's character, but to identify system-level gaps that facilitated the act of violence.
- Center the perspectives of VRC partners that are from within the communities disproportionately impacted by violence and the social inequities that drive it. During VRC meetings, the director should ensure that they are asking for the views of the community partners and service providers. The community review committee is vital to ensuring that community perspectives influence policy and programmatic recommendations.
- Discuss specific system-level inequities that may have contributed to violence during case reviews. The VRC director should develop questions for the team about the community- and society-level factors that contributed to violence. They can use the social-ecological model to frame how they approach this. For more information on the social-ecological model see [here](#).
- Address the root causes of violence while staying focused on the mission of the VRC. The VRC team should acknowledge that they do not have the capacity to address all the social and economic issues that contribute to violence. Addressing rates of poverty and inequality in a city, for example, may not be feasible through the VRC. Therefore, VRC team members should focus on more nuanced policy and programmatic solutions that may address some of the upstream factors of violence but can be realistically attained by through the VRC.

Community Violence Intervention Programs

The VRC staff and VRC members should have a strong understanding of community violence intervention programs (CVI). This section describes what CVI programs are, outlines some of the more popular program models, and describes how CVI can fit into VRC.

Community-based violence intervention programs (CVI) bring together community members, social service providers, and, in some cases, law enforcement to identify and provide support for individuals at highest risk for

gun violence. CVI also help individuals cope with the trauma that is associated with living in neighborhoods where exposure to gun violence is routine. Successful violence intervention programs generally:

- Deter individuals at high risk for violence from engaging in firearm violence.
- Help individuals at high risk for violence to resolve disputes before they can escalate to serious violence.
- Connect those at high risk for violence to education, employment, and housing services.
- Provide peer mentoring, trauma-informed services, and culturally responsive mental health supports to individuals impacted by daily gun violence.
- Engage with community members to build trust and collaboration between stakeholders.

CVI programs are designed to meet specific community needs, and there are many different models being used successfully in cities across the United States. The following examples highlight some of the CVI program models commonly used and the promising evidence of these model's impact:

Cure Violence/Violence Interruption

In the Cure Violence model, outreach workers are trained to identify conflicts within their community and help resolve disputes before they spiral into violence. These outreach workers are credible members of the community and well respected by individuals at a high risk of violence. Outreach workers use their credibility to interrupt cycles of retaliatory violence, help connect individuals at high risk for violence to social services, and change norms around using guns to solve conflicts. Cure Violence models have been used successfully in multiple cities, including Baltimore, Chicago, Philadelphia, and New York. An evaluation of Baltimore's Cure Violence program found that it was associated with a 22% reduction in homicides and 23% reduction in nonfatal shootings from 2007 to 2021.⁹

Group Violence Intervention/Focused Deterrence

In the Group Violence Intervention/Focused Deterrence model, prosecutors and police work with community leaders to identify a small group of individuals who are chronic violent offenders and are at high risk for future violence. Individuals involved in violence are called into a meeting and are told that if violence continues, every legal tool available will be used to ensure they face swift and certain consequences. These individuals are simultaneously connected to social services and community support to assist them in changing their behavior. An analysis of 24 focused deterrence programs found that these strategies led to an overall statistically significant reduction in firearm violence. The most successful of these programs have reduced violent crime in cities by an average of 30% and improved relations between law enforcement officers and the neighborhoods they serve.¹⁰

Hospital-Based Violence Intervention Programs

Hospital-based violence intervention programs provide victims of violence admitted into hospitals with wraparound services such as educational support, job training, and mental health services to interrupt retaliatory cycles of violence and reduce the potential for reinjury. While there is limited evidence that hospital-based violence intervention programs reduce violence on their own, a growing number of hospital-based programs are embedded into the city's violence prevention infrastructure. These programs can ensure that individuals at risk for reinjury receive the long-term care, from both city agencies and community-based organizations, they need to recover and refrain from retaliation.¹¹

Community Violence Intervention Programs' Role Within the VRC

Before launching a VRC, the lead agency should conduct thorough outreach and engagement with all CVI programs within the city, paying special attention to the programs that receive city, state, or federal grant funding. The involvement of the CVI program in the VRC process will vary based on the type of CVI program model, and

⁹Webster, DW, Tilchin, CG, Doucette, M. L. (2023). Estimating the Effects of Safe Streets Baltimore on Gun Violence 2007-2022. Johns Hopkins University.

¹⁰Braga AA, Weisburd D, Turchan B. (2018). Focused deterrence strategies and crime control: An updated systematic review and meta-analysis of the empirical evidence. *Criminology & Public Policy*.

¹¹Webster, DW, Richardson jr, J, Meyerson, N, Vil, C, Topazian, R. (2022). Research on the Effects of Hospital-Based Violence Intervention Programs: Observations and Recommendations. *The ANNALS of the American Academy of Political and Social Science*, 704(1), 137-157.

their relationships with city agencies, particularly law enforcement and criminal justice stakeholders. While these dynamics are unique to each jurisdiction, there are some considerations to be aware of based on the broad models outlined above.

The Violence Interruption/Cure Violence model may be the most challenging CVI model to involve in the VRC. This is because violence interruption relies heavily on credible messengers, and maintaining credibility is essential to building trusting relationships with those at highest risk for perpetrating violence. As a result, violence interrupters may be hesitant to participate in meetings that include law enforcement and other criminal justice stakeholders, especially if it involves them sharing information about the individuals they work with.

To address this, VRC staff should discuss with violence interruption program staff ways in which they can participate in VRC without compromising the credibility of their outreach workers. This may mean that violence interruption organizations do not share information about individual cases; however, their work can add valuable insights to the VRC when discussing broader trends and in developing recommendations. Likewise, they can gain valuable information from what is shared by law enforcement to improve their interruption programming.

Group Violence Intervention, on the other hand, is a CVI strategy that naturally fits within the VRC structure because it heavily involves data sharing and problem analysis between law enforcement, prosecutors, and service providers. In fact, the partnerships forged through the group violence intervention model can act as the foundation for the VRC. The stakeholders involved in group violence intervention will have already worked through data-sharing agreements, and they may already be conducting problem analyses to understand the scope of violence in the city. Cities should expand upon group violence intervention programs by bringing in a broader range of stakeholders to identify not just the groups of individuals at highest risk for violence, but also the policy and programmatic areas to support these individuals. VRCs can focus their cases on the individuals identified by the group violence intervention program.

Hospital-based violence intervention programs are also well suited to work with the VRC. Most of the violence which occurs in a city is not reported to law enforcement officers. Hospital-based violence intervention programs collect valuable data about patients who have received care for a violent injury that law enforcement may not know occurred. They have information about the patient, their family, and the types of services they receive. Many victims of violence have previously been injured in a violent act. Participation of the hospital-based violence intervention team can help the VRC team identify if there were missed opportunities for intervention the first time they were injured in violence. Many hospital-based violence intervention programs include violence interrupters who are credible messengers. The VRC team should work with the HVIP management to ensure that these credible messengers can share information with the team while maintaining their credibility among the individuals involved in violence.

Leveraging Offices of Violence Prevention to Foster Community Involvement

A growing number of cities have created offices of violence prevention or neighborhood safety to engage communities impacted by violence and fund violence intervention and prevention programming. These offices are uniquely situated to ensure that community-based violence prevention efforts and community voices are embedded within the VRC. Offices of violence prevention often contract with or disburse grants to CVI and other community-led violence prevention organizations within the city. They can leverage these relationships to encourage participation in the VRC. In fact, in some of their contracts they can include a requirement that grant recipients participate in the VRC. Leadership from the office of violence prevention program should be involved in all levels of the VRC, and the city should consider housing the VRC within the office of violence prevention, if there is staffing and capacity.

Acknowledging Differing Perspectives and Building Trust

The perspectives of community-based organizations and community members participating in the VRC and the recommendations they develop will not always align with the perspectives of public safety officials involved in the criminal justice reviews. The VRC director should anticipate these conflicting views and work to find areas where all parties involved in the VRC can agree. In some cases, they will be unable to reconcile disagreements, and recommendations that are decided upon from the criminal justice review will not necessarily align with the views within the community service provider review. Likewise, public safety stakeholders may not agree with the

recommendations that come out of the community service provider review. These disagreements should not prevent the recommendations from moving forward. It is important to communicate this with all VRC participants at the onset and to be transparent with all members about the recommendations made and agreed upon by the executive leadership committee. Members should have an opportunity to voice disagreement. To mitigate conflicts, the VRC director should clearly outline expectations for the VRC and the process for voicing disagreement among VRC members. Community outreach and information sharing must be consistent, authentic, and transparent.

Module 5

Plan Your VRC Meeting

Key Topics:

- Preparing for the VRC meeting
- Role of VRC staff in meetings
- Role of VRC teams in meetings

Module 5: Plan Your VRC Meeting

Overview

Holding a successful violence review meeting is the foundation for any productive violence reduction council. The violence review meeting is made up of many interdependent functional components and each must be carried out successfully. These components include identifying and engaging the right criminal justice and community partners; gathering sufficient data to discuss the case to facilitate a problem-solving-oriented discussion; and managing the implementation of prevention recommendations. While structure and consistency are vital, the process should not be mechanical or formulaic. The VRC staff must use common sense, understand political undercurrents, and develop a trusted and collaborative process throughout the violence review process and meetings.

This section covers the overall structure and characteristics of the actual violence review meeting. We focus on the pre-meeting preparation and post-meeting activities, and advise on how to ensure your violence review meetings are well planned and executed. This module will assist VRC coordinators in planning meetings and preparing partners to actively and thoughtfully participate in meetings. It will also provide information to VRC members on what they need to prepare for a VRC meeting.

Preparing for Your VRC Meetings

Meeting schedule

The meetings are held when and where most members can attend. The schedules and locations of the entire year's meetings should be developed at the beginning of the year so that VRC team members can plan accordingly.

A typical meeting will be no more than two hours in length and each case will take about 20 minutes to an hour, depending on the complexity of the case and the review team's experience.

Meeting room layout

The meeting room layout is important for group dynamics and inclusion. Hosting the VRC team meeting in a circle or a hollow rectangle layout gives everyone an equal position at the table and allows for face-to-face interactions by all participants. In addition to having adequate space for desired layout, it is ideal to have a whiteboard in the meeting room for taking notes and displaying the created timeline of significant life events leading up to the homicide or nonfatal shooting.

Closed-meeting format

Given the sensitive nature of the information shared and the need to build trusted relationships, the VRC meetings are closed and not open to the public.

Sometimes, invited guests will participate or observe to learn more about the VRC. Most often, the invited professionals and community leaders have information specific to the case and are called guest members.

Virtual meeting format

As virtual meetings have increased in frequency, VRC meetings can be conducted in a virtual environment, using Zoom or Teams. Consider using the chat function to have individuals sign the confidentiality forms. As mentioned above, given the sensitive nature of the information shared and the need to build trusted relationships, use virtual meetings to convene around recommendation development and occasional case reviews.

Meeting Preparation: Coordinator's Activities

Successful VRC case reviews depend on thoughtful preparation by the VRC coordinator, beginning a month or two before a case review meeting. A list of coordinator activities and a timeline is provided below and in the Coordinator's Meeting Preparation Checklist provided in [Appendix](#).

1. Select cases

Beginning two months before the meeting, the cases to be reviewed at the upcoming meeting need to be selected.

Having timely data is critical for a successful VRC initiative. The police department can be an excellent source for identifying timely cases and initial case information. If possible, have someone with access to law enforcement violent crime data on the case selection subcommittee. Ideally, this person will gather information about homicides and nonfatal shootings as they occur.

2. Case selection criteria

Unless you are in a small city with low rates of violence, it will not be feasible for the VRC to review every nonfatal shooting, or even every homicide. In this situation, the coordinator may task a subcommittee with developing case selection criteria and/or selecting cases.

To help select cases, the following may need to be decided:

- Jurisdiction inclusion—residents from the jurisdiction or deaths within the jurisdiction.
- Type of violence—all homicide deaths or only deaths from a specific type of violence, for example, group/gang-related violence.
- Cases under investigation—cases for the Criminal Justice Review Team may be open cases but only cleared or closed cases are reviewed by the Community Service Provider Review.
- Once the core case criteria are determined, further case selection criteria may be needed to narrow the selection of cases to a feasible number. Criteria may include the following:
 - » Geographical neighborhoods with high rates of violence
 - » Populations with recent increases in deaths (e.g., young adults, women)
 - » Populations with known system interactions that may benefit from review (e.g., violent deaths after recent release from incarceration or supervision)

• Recruit guest VRC members

Beginning six weeks before the meeting, the coordinator should identify guest members, in addition to VRC team members, that he or she needs to recruit.

Agencies that are not already VRC members and that may have provided services to the decedent (such as a behavioral health provider) or that serve the community in which the decedent lived, such as social services or housing and employment supports, may be recruited to participate in a specific case review. The agencies to participate may be identified from the police report, the medical examiner's/coroner's report, or from news coverage about the death.

An email and follow-up phone call to discuss the VRC process and purpose can be an effective method for getting participation. It is important to share and review interagency and confidentiality agreements. Have the agreements signed before discussing details of the case or requesting case information. Sample recruitment letter and agreements are included in the [Appendix](#).

4. Request case information

Once interagency agreements are in place and around a month before the meeting, case-specific information should be requested of all team members. The information should be protected in accordance with confidentiality standards. If possible, use an encrypted email to request information about the case.

The email requesting case information should include the decedent's information listed below and guidance on what information is requested from members, including what specific data members should report out. A sample VRC case email, a member's guide to collecting case information, and a list of agency-specific data elements is included in [Appendix](#).

Decedent information:

- Name, aliases
- Date of birth, date of death
- Demographics (age, race, sex)
- Address of residence
- Incident location, date, and time

5. Send meeting reminder email

Two weeks prior to the review, an email including the following should be sent to VRC members:

- Brief summaries of cases
- List of meeting participants
- Meeting agenda
- Meeting date, time, and location

A sample two-week reminder email is included in [Appendix](#) summarize case(s).

6. Summarize case(s)

Prior to the meeting, the coordinator will want to summarize in a PowerPoint presentation what is known about the case. This may include publicly available information from an obituary, news coverage, or social media posts. For a template for creating and presenting a case summary, please email ViolenceRC@jhu.edu.

7. Document activities since last meeting

Two weeks prior to the meeting, reach out and follow up with partner agencies that were responsible for previous action items or recommendations to get a status update to share during the VRC meeting.

VRC teams should consider having a standing agenda item to provide updates on actions or tasks completed since the last meeting. Documenting and sharing this information helps build accountability of all members and subcommittees.

8. Print agendas and meeting materials

The coordinator is responsible for developing the meeting agenda with input from the VRC director, if this is a different person. More information on developing a VRC meeting agenda and a sample agenda are located in [Appendix](#).

The coordinator will print and bring agendas, handouts, confidentiality agreements, and any other materials needed for the VRC meeting.

Meeting Preparation: Members' Activities

VRC members include VRC core team members and invited guests. Members may begin preparing a month prior to the review meeting. The more prepared the members are, the more engaged they will be, resulting in a more comprehensive understanding of the incident and what could have been done to prevent it.

Receive and review the case information

Members will receive an email one month prior to the meeting containing the basic decedent information listed below. Most VRC meetings will typically cover two-seven cases. The Criminal Justice Reviews Teams cover up to seven cases while the Community Service Provider Review Teams cover two-three cases.

Decedent information:

- Name, aliases
- Date of birth, date of death
- Demographics (age, race, sex)
- Neighborhood, address of residence
- Incident location, date, and time

More limited decedent information may be shared with members of the Community Service Provider Review Teams.

Identify agency's contact

Members will need to determine whether their organizations or agencies had contact with the decedents, decedents' families, or social networks, or whether they provided services to the neighborhoods where the decedents lived or where the incidents occurred.

Follow up with the VRC coordinator if more information is needed to determine whether your organization or agency had contact with or provided services to the decedent(s).

Prepare a summary

If a member's organization or agency had contact with someone involved in the case or the incident area, he or she should prepare a summary to verbally share during the VRC discussion.

There are no hard-and-fast rules about what information will be useful in identifying a problem and possible solutions to prevent similar violent deaths or injuries from a systems perspective. However, preparing for the review by answering the questions provided by the coordinator, along with reading the basic decedent case information, is a good starting point.

Members will want to think about each case and any implications it might have for their organizations or agencies and for public policies affecting specific target populations, neighborhoods or communities, and/or topic areas (such as proximity to a 24-hour convenience store or after-school programs).

Module 6

Facilitate Your Review Meeting

Key Topics:

- Meeting agenda
- Confidentiality considerations for the meeting
- Meeting facilitation that elicits information and problem solving

Module 6: Facilitate Your Review Meeting

This module will assist VRC facilitators (often the VRC director or an academic partner) in effectively facilitating review meetings to build trust and identify recommendations to prevent future acts of violence.

Facilitator's Role

An effective facilitator is a neutral convener who is a good listener, develops trust with partners, encourages group participation and engagement, leads but does not direct discussion, and guides the group toward collective problem solving to craft recommendations.

Guiding Principles

The facilitator is responsible for ensuring that members agree with the following guiding principles:

- Shared goal of reducing violent deaths and injury
- Violence is preventable using the public health approach to violence prevention
- Upstream social and economic factors contribute to violence and to racial disparities in violence
- Refrain from blaming the victim
- Use of multisector data to inform response strategies
- Continually improve the process and prevention activities

Meeting Agenda

A successful meeting will cover the following nine steps. A sample agenda can be found in [Appendix](#).

1. Opening remarks and introduction

This step should include member introductions, updates from previous meetings, upcoming events, data presentation, review case selection criteria, and other announcements.

- Member introductions: Attendees share their names, titles, and their agencies' names and roles in preventing overdose fatalities.
- Updates from previous meetings: Members share status updates on any delegated action items or recommendations from previous meetings.
- Data presentation: At the beginning of the year, present an overview of the prior year's fatal and nonfatal violent injuries. At each subsequent meeting, present the year-to-date number of violent fatalities and injuries and any noticeable trends (e.g., changes by overall numbers, demographics, or type of violence).

Review case selection criteria: If not all violence deaths and injuries within a jurisdiction are being reviewed, remind the review committee about which criteria were used to select the case.

2. Goals and ground rules

The facilitator reads aloud the meeting goal(s), guiding principles, and ground rules included on the agenda handout. Ask participants whether they want to add any new ground rules.

- A sample list of ground rules is included in [Appendix](#).
- Guiding principles listed above in this module can help guide this discussion.

3. Confidentiality

The facilitator or coordinator collects members' reviewed and signed confidentiality forms and answers any related questions. Confidentiality is discussed in more detail in [Module 7](#).

- Confidentiality agreement: This essential form needs to be signed at the beginning of each review by the members present. A sample confidentiality agreement is included in [Appendix](#).
- If more than one case is reviewed at a meeting and some members arrive mid-meeting, the facilitator needs to make sure that they sign and submit the confidentiality agreement when they arrive.
- Interagency agreement: This agreement needs to be signed by senior leadership of each participating agency (including any ad hoc agencies) before they participate in any reviews. The agreement states the role of the

agency in the reviews. A sample interagency data-sharing agreement is included in [Appendix](#).

- The facilitator is responsible for reminding team members that the meeting is closed and that information shared in the meeting shall not be discussed outside the meeting, as outlined in the agreements they have signed.

4. Case review

The facilitator begins this portion of the case review and begins by reviewing aggregate data. The data may be presented by the epidemiologist or a crime analyst. Aggregate data should include year-to-date homicide and nonfatal shooting data (counts, maps, etc.) and may include EMS, hospital data, other violent crime data, etc. A police department representative presents the basic case information, usually a captain or lieutenant.

5. Member report-outs

The facilitator calls on each member to share what he or she knows about the victim(s), suspect(s), locations of the incident and activities leading up to the incident. The information shared helps members understand more about where the victim and suspect lived, socialized, worked, and played to help identify risk factors and missed opportunities for prevention and intervention that may have contributed to the death or injury.

The facilitator calls on members to share their summary reports, as discussed in [Meeting Preparation: Members' Activities](#) and included in [Appendix](#), starting with the law enforcement and first-responder agencies, to report out in reverse chronological order, for assistance with developing an incident timeline. The facilitator will then determine the best approach to receive report-outs from the remaining members, based on the specific case.

6. Group discussion

The facilitator actively guides the group discussion by encouraging members to ask questions. The group discussion will clarify the timeline of significant life events and identify missed opportunities for prevention and intervention. The facilitator may want to use the strategies outlined in Additional Facilitation Guidance, below.

7. Case and timeline summarized

The facilitator summarizes significant case information and draws a timeline of key activities, ideally on a whiteboard.

8. Formulate recommendations

The facilitator leads a problem-solving discussion to identify recommendations or changes in practices or policies that may have prevented this homicide or shooting and may prevent those in the future.

9. Summarize and adjourn

The facilitator reviews and clarifies actionable recommendations, assigns individuals responsible for any action items, reflects on the meeting's process and findings, and collects any participants' handouts containing case information.

- The facilitator recaps how the meeting went and relates today's review to other cases or to a larger context.
- The team determines whether the case review is complete or whether more information is needed.
- The facilitator reminds members of confidentiality and collects any papers with confidential information.
- The facilitator reminds members of the time and location of the next meeting.

Additional Facilitation Guidance

The meeting should be structured as a combination of an informational meeting, a brainstorming and problem-solving meeting, and a planning/decision-making meeting. A neutral facilitator (VRC director or coordinator) actively participates in the discussion, moving it from information sharing to problem-solving by doing the following:

- Politely redirect participants that make comments such as "this homicide could never be prevented" so that the group continues to think of homicide as a preventable act. For some agencies, thinking about homicides as something that can be prevented is part of a larger cultural shift toward primary prevention rather than enforcement and intervention-centered approaches.

- Acknowledge all potential solutions and give equal consideration to each solution. A neutral facilitator looks for ways to show that seemingly unrelated or opposing solutions are part of a continuum of response. They thank participants for their input and suggestions and encourage participation by all who have relevant information.
- Summarize participant comments so that the main points are reiterated. Summaries should be stated in a way that makes the connection between the participant’s point and potential implications for changing a system stronger and clearer.
- Ask open-ended questions that push participants to examine the underlying issue (or “the bigger picture”) and develop solutions on their own using the information shared at the meeting. While asking these questions, the facilitator should have a sense of which agency/participant to call on first so that information is shared in a coherent and organized manner. This ensures participants understand—and not be confused by or dismissive of—the circumstances leading up to or contributing to the homicide.
- Ask clarification questions and ask participants to explain agency-specific or sector-specific acronyms or labels so that other participants understand the material being presented and so that participants become familiar with the internal processes of different organizations.
- Call on participants that are less engaged or do not readily speak up during the meeting. This might include young or junior-level staff and staff new to their positions.
- Incorporate team building opportunities during the break (e.g., introduce participants to other participants).
- Balance the discussion between criminal justice and non-criminal justice strategies and primary and secondary prevention strategies. Homicide prevention strategies are wide ranging and affect every sector and multiple communities. Homicide prevention strategies should be thought of as existing on a continuum from prevention to suppression.
- Ensure the conversation moves forward and is not repetitive or irrelevant.
- Ask basic questions such as: “Do we have all the information we need to identify the problem or solution?”

Additional Considerations

- The meeting format can change and should be reflective of the stages of group development. In the beginning of holding violence reviews, formally mention the goals of the group and the violence review meeting process. After the group has met for six to 12 months, expectations will become clear and institutionalized. However, the facilitator should continue to remind the group of the program’s goals and process at least twice per year or as needed.
- Prepare new members of the group before the meeting by contacting them individually and then check in with them during the break to get their perspectives on the meeting and to see if they need anything different from the facilitator.
- Incorporate new participants into the discussion by providing them with opportunities to successfully participate in the meeting.
- Continue to have participants introduce themselves if new members are attending the group and if group members do not yet know each other.
- Assist members with developing a shared analysis of the problem of violence in the jurisdiction by reminding them of past observations, trends, and insight developed by the group in previous meetings. Note: A shared analysis occurs when members go through a collaborative process to identify a problem and its origins and to understand its nuances and implications for possible solutions. A shared analysis or having the same level of analysis is useful to get participants on the “same page” when discussing a problem.

Managing Disagreements, Arguments, or Other Conflicts

Disagreements, arguments, or other conflicts should be anticipated and resolved prior to the violence review meeting or curtailed during the meeting so that the discussion is fruitful for everyone. The facilitator should:

- Do their homework and anticipate tension between partners as a result of the homicide case or factor(s) unrelated and external to the violence review process (e.g., the partners were competing for a grant). The

facilitator should be aware of partner perspectives, biases, past work histories with other participating agencies (including conflicts), the participating agency's typical response to conflict, and whether any formal statements have been made about the case to media by the partner agency, etc.

- Keep a “pulse on” individual participant triggers, a keen ability to read group dynamics, and sense of when to take a meeting break, change the subject 180 degrees, or ask questions to diffuse a tense conflict between participants.
- Remain neutral and objective, offering solutions and continuing to ask tough questions, which acknowledge the conflict but transform the issue of contention back into a problem-solving discussion.

It's all in the details:

Preparing members for the meeting includes explaining the meeting's goals and overall structure, sharing stated and unstated group rules/norms (particularly the guideline that the meeting isn't to point fingers or blame participants), sharing information about past and current recommendations relevant to their organization or area of work, and suggesting immediate ways that they can participate in a recommendation (if applicable). If the relationship with the agency is new, attend their events and ask to observe their program to get a sense of what they do.

Module 7

Collecting VRC Data

Key Topics:

- Data collection process
- VRC data system
- Considerations for data sharing

Module 7: Collecting VRC Data

Confidentiality

Confidentiality is essential for successful VRC reviews. It maintains the trust of participating members and of the community in the review process. The lead agency should check state law and consult its legal authority before starting a VRC process. All team members (including guest members and observers) must sign a confidentiality agreement to attend.

Relevant Federal Laws that Affect Data Protections

VRC teams must understand and adhere to the Health Insurance Portability and Accountability Act (HIPAA) and the Family Educational Rights and Privacy Act (FERPA; and 42 CFR) in addition to the confidentiality policies of other government-private institutions that serve children and other vulnerable populations to protect decedent information. Refer to the agency's record retention policy—what types of documents need to be retained and for what length of time.

Confidentiality Agreement

A confidentiality agreement needs to be signed by members at the beginning of each review. This agreement is at the person/participant level and includes the objectives of the VRC. It prohibits dissemination of information beyond the purpose of the review. A sample confidentiality agreement is included in [Appendix](#).

In addition to understanding federal and state laws around fatality reviews and signing data-sharing and confidentiality agreements, there are other steps needed to maintain confidentiality. It is recommended that you create a data-sharing protocol for the distribution of case information and record-keeping expectations. When sharing any sensitive case-specific information outside of meetings with any members, encrypt the emails or protect them with passwords. Hand delivery also maintains confidentiality.

Data Collection Process

Before the Meeting

The data collection process begins before the VRC meeting and is a key responsibility of the VRC coordinator. In addition to the eight steps outlined in the Meeting Preparation: Coordinator's Activities of Module 5, the coordinator will want to be familiar with the type of information captured in the VRC database.

As documents and information are received, organize and save all files on a secure computer with restricted access. Examples of these data files may include the medical examiner's/coroner's report, the decedent's criminal history, signed confidentiality forms (collected from participants at the meeting), and all data collected prior to or at the review meeting.

Members sharing information will need to prepare a summary to verbally share during the VRC discussion. A member's guide to collecting case information and agency-specific data element recommendations are available in [Appendix](#).

During the Meeting

The data collection process during the VRC meeting happens as the members report out and ask questions. The facilitator and the designated note taker (often the coordinator) will want to be familiar with the VRC database to make sure to capture pertinent information discussed in the meeting.

The facilitator summarizes in chronological order any significant case details shared in the meeting and elicits a discussion to focus participants on identifying missed opportunities for prevention and intervention. Module 5 provides details on the types of information shared and discussed in the VRC meeting.

After the Meeting

The VRC team data manager is responsible for managing the collection and entry of the data on reviewed cases and developed recommendations. Depending on the size of the jurisdiction and the resources available, the VRC facilitator or coordinator may be responsible for this task. The individual responsible for entering data needs to ensure that the data is entered consistently and accurately.

After the meeting, all the data from the meeting needs to be entered into the VRC database. The facilitator or data manager may need to follow up with members to get missing data or information that needs more research outside of the review meeting. Any additional information provided will need to be entered into the VRC database.

Using a VRC Database

The VRC database collects information about the cases reviewed and the recommendations developed. The VRC database needs to be secure and stored at a neutral agency. For consistency across cases and teams, VRC teams are encouraged to use the database developed by the Center for Gun Violence Solutions at the Johns Hopkins Bloomberg School of Public Health. The VRC database is a REDCap database available and free to all VRC teams and contains four main sections:

1. VRC team meeting details
2. Decedent case information
 - Demographics
 - Cause of death
 - Violent crime and death-scene investigation
 - Interventions following the homicide or shooting
 - History of life circumstances and immediate stressors before the homicide or shooting (captures information from all partners)
3. Community context
4. Recommendations

The VRC Data System is available upon request.

Module 8

Building a Recommendation Plan

Key Topics:

- Moving a recommendation from a VRC review to implementation
- Role of a subcommittee
- Documenting, monitoring, and assessing recommendations

Module 8: Building a Recommendation Plan

This section summarizes the types of recommendations that may be developed through the VRC review process; provides an overview of the recommendation process, from developing to sustaining recommendations; and offers a method to track, monitor, and assess the implementation of recommendations.

Identifying Recommendations During the VRC Review

VRC process is driven by an action-oriented partnership. Data comes from members representing multiple agencies. Each member gathers and provides potentially sensitive information to the team that informs the understanding of the problem of violence and potential solutions.

Successful VRCs rely on active engagement by members beyond the detailed case discussions, including formation, implementation, assessment, and continuation of prevention strategies. It is important that the VRC director reinforce that recommendations can be identified and implemented through the VRC’s collaborative, data-driven, problem-solving process.

Problem solving occurs during a collaborative process that fosters accountability and transparency. Identified solutions usually involve a cross-agency response that reduces duplication and information silos. The process is best served if it prioritizes addressing system issues and making recommendations for improvement.

Types of Recommendations

VRCs will generate a variety of recommendation types across the continuum from case review improvement to system-level change.

	Target Audience	Definition	Example
Systemic	Professionals, agencies, and organizations	Addresses a gap, weakness, or problem within a system or across systems	Improve the identification of and referral protocol for individuals at risk of becoming a homicide victim through the development of a lethality assessment protocol for shooting victims.
Agency-Specific	Only one sector or partner agency	Addresses a service gap or failure	Ensure victim/witness services are provided to all victims and their families.
Research	Academic organizations and agencies that research violent deaths or evaluate programs or policies	Recommendation to research a topic or issue area	Determine the number of homicide victims that were involved in prior nonfatal shootings. Establish a process for case review outcomes to inform research priorities.
VRC Quality Assurance	VRC team	Strengthen or improve the VRC process	Increase the length of meetings to allow for more time to develop recommendations.
Population-Specific	Individuals and groups at increased risk	Evidence-based intervention that will reduce a specific risk factor for homicide	Increase the use of extreme risk protection orders.

The types of recommendations that come out of the VRC reviews are varied. It should be noted that not all recommendations come from the review. Some are identified outside of the review process during follow-up meetings and informal partner discussions. Recommendations are most likely to fall into the following categories:

- **Systemic:** The recommendation addresses a gap, weakness, or problem within a particular system or across systems (e.g., lack of witness protection program, lack of information sharing around juvenile charges).
- **Primary prevention:** The recommendation will prevent the overarching circumstances that led up to the homicide.
- **Secondary prevention:** The recommendation addresses the immediate circumstances leading up to the homicide or targets real or potential repeat offenders and violence caused by retaliation. (All recommendations that are intervention- or suppression-related are secondary prevention recommendations.)
- **Population-specific:** The recommendation affects or targets a specific population, specifically those at higher risk for becoming a victim or suspect of homicide or related violent crime.
- **Agency-specific:** The recommendation affects only one sector or one partner agency.
- **Capacity-building or research-related:** The recommendation is for the provision of technical assistance to a partner agency or a recommendation to research a topic or issue area.
- **Case-specific:** The recommendation addresses a particular case and will not likely lead to the reduction of other violent acts. Usually, these recommendations are related to an ongoing criminal investigation or court case and involve a referral or provision of social services to an affected individual, family, or neighborhood.
- **Quality assurance-related:** The recommendation is related to strengthening or improving the VRC review process.

Documenting Recommendations

The VRC initial recommendations are captured in the meeting minutes and in the recommendations section of the VRC database. More detailed recommendation-related information captured in the VRC database includes:

- A public summary of the recommendation
- A working summary of the recommendation
- Date recommendation identified
- Cases related to the recommendation
- Data sources shared at the review meeting
- VRC members present at the review meeting
- Type of recommendation (e.g., agency-specific or research-related)
- Level of prevention
- Population or issue of focus
- Jurisdiction level responsible for implementing the recommendation
- Agency responsible for implementing the recommendation and contact information
- Status of the recommendation
- Recommendation strategies (short-, medium-, and long-term)
- Recommendation implementation accomplishments
- Notes regarding any media coverage

VRC Coordinator and Facilitator Roles and Responsibilities

The process for developing and implementing recommendations is collaborative and fluid. Success is possible only with open communication, timely information sharing, and trust building. Trust must be established in both the process and the other agencies involved.

The VRC director must be able to manage competing agendas, interagency conflicts, and unpopular or criticized recommendations and ensure partners that the process is fair, data-driven, and likely to produce results.

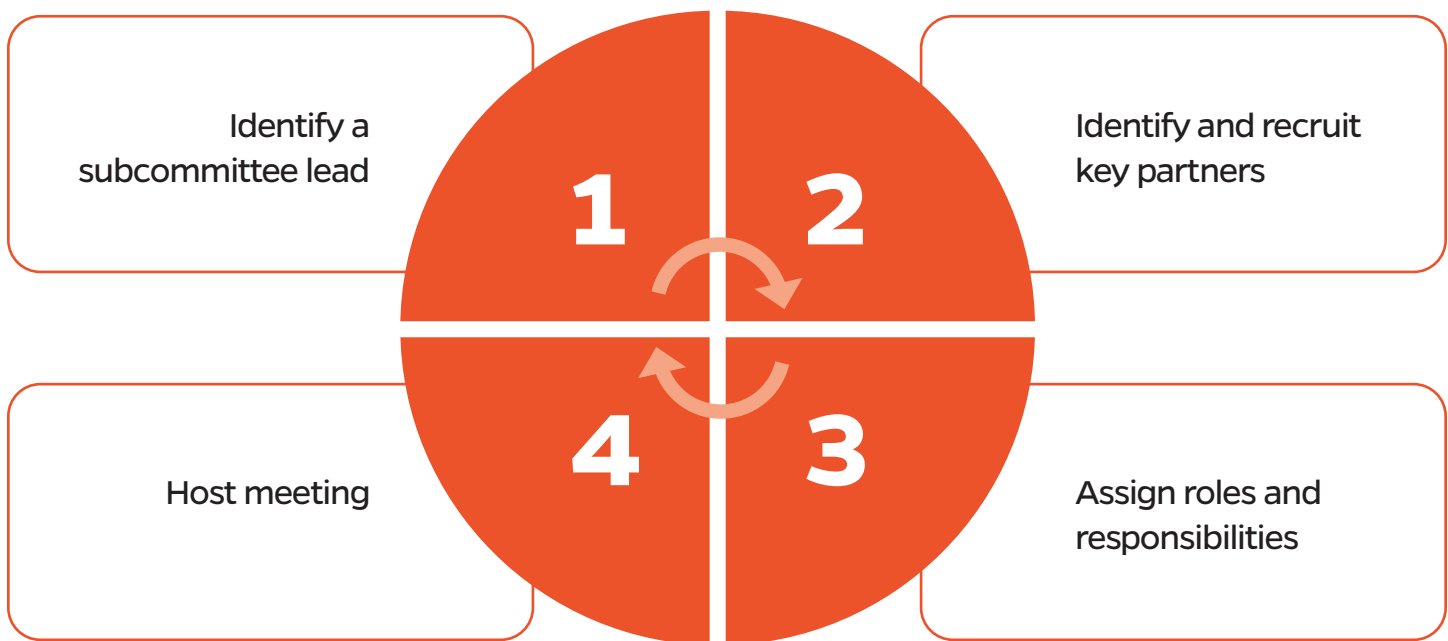
The VRC director is responsible for designating the subcommittee lead, recruiting participants, supporting the subcommittee as needed, and checking regularly with the subcommittee on the status of the development and implementation of recommendations.

The VRC facilitator is responsible for developing trust and collaboration through the entire VRC process; both are crucial to successfully implementing recommendations.

Forming Subcommittees to Further Develop Recommendations Identified in the Reviews

Recommendations can be diverse, and some are easier to implement than others. Planning and implementing recommendations is a rewarding process that can have immediate and tangible results. Some recommendations maintain momentum, and others may slowly lose support. The process can be challenging when factors outside of the VRC's control impact progress. Creating subcommittees to focus and implement specific recommendations can maintain momentum by building sustained internal and external support for the strategy. The subcommittees can be developed organically and can be ad hoc and time limited.

Subcommittees assigned to lead the development and implementation of a recommendation will want to follow these steps:



Subcommittee Roles and Responsibilities

It takes multiple stakeholders to effectively develop, implement, and monitor recommendations. This section reviews the VRC coordinator', director', and subcommittee members' roles and responsibilities regarding recommendations. The subcommittee members generally participate in the case reviews; however, an expert from an agency may be included to assist with a recommendation or set of recommendations.

- **Lead**—The VRC director or coordinator assigns the subcommittee lead. The lead is responsible for setting the agenda, facilitating subcommittee meetings, taking notes, sending reminders, monitoring activities, and reporting to the VRC facilitator and others as identified (such as the governing committee or the VRC team).
- **Researcher**—The VRC staff designates a team member to present data trends such as violent deaths, types of deaths, hot spots, and related prevention and risk factors, as well as policy, practices, or procedures for a system or agency. This information helps inform decisions and guide the implementation of recommendations.
- **Supporter**—The VRC staff designates a supporter to provide minimal informal support as requested from the subcommittee. Examples of support may be connecting the subcommittee with an individual or an agency, finding meeting space, or reviewing draft materials.
- **Monitor**—The VRC staff works with the subcommittee lead to systematically monitor the implementation of a recommendation, ensure that it is addressing the problem it was intended to resolve, suggest refinements, ensure the status of the recommendation is tracked in the VRC database, and periodically report results to the VRC team and/or the governing committee.

- **Champion**—Any member who provides motivation, political will, and energy around the focused problem or solution is a champion.

Implementing Recommendations

Once the subcommittee has developed a recommendation, it needs to be implemented. It is important to do so strategically. The subcommittee lead may consider sharing recommendation materials with people not on the subcommittee for their review and feedback.

The subcommittee must develop a work plan for implementing the recommendation.

Developing a Work Plan

The subcommittee is responsible for developing a work plan that identifies key action steps needed to implement and monitor the recommendation:

- Assigns responsibility to members and partners.
- Determines intermediate measures of success.
- Establishes a realistic timeline for completion.

A sample recommendation work plan is included in [Appendix](#).

Assessing and Monitoring Recommendations

Plans for assessing and monitoring recommendations must be developed at the start of the initiative. Steps for regularly updating and tracking the status of recommendations include the following:

1. Giving status updates

The subcommittee lead will check regularly with subcommittee members on the status of assigned tasks and implementation.

2. Reporting to the VRC staff

Prior to each review and scheduled governing committee meetings, the subcommittee lead will give the VRC coordinator status updates on the implementation and ongoing plans to monitor and support recommendations. The subcommittee lead will likely provide a verbal progress report during VRC case review meetings.

3. Tracking the status of a recommendation

Documenting the implementation status of a recommendation is encouraged. The VRC coordinator, in partnership with the subcommittee monitor is responsible for systematically monitoring the status of recommendations. If the VRC staff are not involved throughout the recommendation implementation process, they will need to follow up with partners (for example, the subcommittee lead or monitor) to learn the recommendation's status. The VRC coordinator will work with the VRC data manager to ensure the status of the recommendation is tracked in the VRC database. Recommendation data elements are included in the VRC database discussed in Module 7.

Crafting Recommendations: Final Tips

Because the VRC process generates a large volume of recommendations, it is very challenging to track, monitor, and evaluate them all. Here are some suggestions to help put things into perspective when evaluating your VRC for the first time:

- Reinforce the idea that any recommendations, large or small, can be achieved through the VRC review process.
- Begin tracking recommendations immediately, using the VRC database provided. Ensure that recommendations are formally memorialized and not accidentally omitted, forgotten, or transformed. At the end of the day, the quality of recommendations and the progress made on them is the best assessment of your VRC program.
- Do not attempt to track every aspect of a recommendation. Only document the information needed to monitor progress and completion and objectively assess the recommendation.
- Store meeting agendas and minutes, handouts or presentations, data reports and other materials, and technical assistance activities related to the recommendation by uploading them onto the database or by storing this information in an electronic file system.
- Some recommendations will never be realized, especially if there is little to no community support. The VRC staff's job is to create a forum to discuss possible recommendations and to push recommendations that are likely to work and to have far-reaching effects. Remember that trying alternative solutions and identifying which ones work best is part of the public health approach to gun violence prevention outlined in Module 1. Being a champion for viable and promising recommendations is key.
- Aim to update the status and records of each recommendation after each working group meeting.
- Be sure to document the role of your VRC team. Documentation helps you demonstrate the value and benefits of your review initiative to outside stakeholders, including funders and new partners. This will also make it easier to disseminate your work to the community and other practitioners.

Measuring Success

The importance of evaluation cannot be overstated. VRCs are built on information sharing, strategy implementation, system-level change, and engaged stakeholders to reduce violence. Measuring the success of a VRC is key to continued engagement of partners, improving the outputs and outcomes, and ensuring fidelity to the model. A sample logic model can be found in [Appendix](#) as guidance on measuring the intended impact and goals of the VRC.

Appendix

Examples of Recommendations:

Maurice Pulley Jr. Witness Protection Program

In 2007, the Milwaukee Homicide Review Commission (MHRC) recommended Milwaukee revive its witness protection program, a program that had been cut from the Milwaukee County budget several years before. This recommendation was one of the first made by the MHRC and continued to surface as an issue for the next two years. In 2007, Maurice Pulley Jr. was murdered because he witnessed a homicide and agreed to testify against the suspect. After his tragic death, and further discussions with the MHRC Executive Committee, the attorney general and the Wisconsin Office of Justice Assistance provided support to re-establish a witness protection program and address victim and witness intimidation. The County fully funded the program in January of 2009 after a pilot program was implemented in May of 2008. In 2009, the program funded five full-time staff. Between 2008 and 2009, the Milwaukee County district attorney's office investigated approximately 2,400 cases of witness/victim intimidation. In 2008, there were 134 cases of active protection by the District Attorney and between January and October of 2009 there were 125 cases of active protection. Milwaukee's revived witness protection program has increased the safety of individuals willing to testify in criminal trials.

Child Exposure to Violence

One of the trends identified during the review process was the frequent presence of child witnesses at homicide scenes and the lack of services available to these children. MHRC and partners from the criminal justice, community service provider and domestic violence reviews decided early on that this was a significant concern, given the relevant literature surrounding children's exposure to violence and subsequent participation (either as a victim or a suspect) in violent crime. The resulting project, called Children Witnessing Domestic Violence: Examining Strengths, Needs, and Gaps in Services in Milwaukee, combines a literature review, analysis of local data, and key informant interviews with a scan of the services currently offered to children who witness violence in Milwaukee. The project adopted the perspective that children's experiences with violence are not confined to the home, and that the witnessing of and involvement in violence in other settings has a critical impact on children.

Reduce and Prevent Straw Purchases

The Milwaukee Homicide Review Commission, working closely with the Milwaukee police department, collected and analyzed firearm information. One component of the analyses focused on straw purchasers, individuals who purchase a firearm for someone prohibited from purchase. Based on the data, the MHRC worked with the City of Milwaukee's Office of Violence Prevention and entered a partnership with Safe & Sound to develop a campaign to reduce and prevent straw purchases. The campaign included two community events aimed at youth and adults to raise awareness of how guns are trafficked into the city and to highlight the number of young gun possessors and female straw purchasers. MHRC's analysis of gun trace data showed a need to educate would-be straw purchasers. Safe & Sound also used MHRC data to develop neighborhood-level anti-crime prevention programs.

Appendix

Sample Job Descriptions

Violence Reduction Council, Data Manager

Description:

The data manager will work within the Violence Reduction Council that strives to reduce violence through innovative interagency collaboration and case reviews. This position will provide data management and analyses to be used in program evaluation and violence prevention research, both internally with the VRC and externally with community and academic partners.

The data manager will coordinate across city departments with public health epidemiologists, crime analysts, and academic researchers to carry out their work. They will approach violence from both criminal justice and public health perspectives focusing on prevention and improving the health and safety of the population.

Key Responsibilities:

50% Oversee analyses of multi-agency administrative data:

- Oversee data collection and management
- Coordinate data sharing between agencies
- Oversee and assist research staff conducting data analysis
- Develop program planning and processes to improve data set transfer and analysis

30% Prepare policy and research reports in violence and violence prevention:

- Review existing research and relevant policy in the areas of criminal justice, violence, and violence prevention
- Using data gathered through the reviews and using multi-agency administrative data, complete policy and research reports

10% Support the coordination of case review meetings of city, county, and community participants:

- Summarize and develop presentations of data for meeting
- Coordinate and oversee communication between agencies
- Provide meeting summaries and written recommendations coming out of reviews

10% Grant writing and grants management:

- Prepare grant applications to support the review process and related research
- Support all scientific, managerial, and fiscal aspects of the review process
- Serve as the primary lead with grant reporting

Qualifications:

Advanced degree (Master's preferred) in epidemiology, criminal justice, psychology, social work, public health, or other relevant social science field required; a minimum of five years related experience and/or training that demonstrates the skills, knowledge, and abilities needed to perform the above tasks, including data analysis and project management required.

Additional desired experiences and skills:

1. Knowledge of and positive relationships with high-level stakeholders in agencies, nonprofits, and philanthropies pertinent to public safety and criminal justice.
2. Experience in fundraising, grant management, and communications regarding sensitive policy issues.
3. Experience using law enforcement record management systems.
4. Experience conducting and disseminating policy research and analysis.
5. Experience in successfully working with elected officials, law enforcement, community service providers, neighborhood organizations, and community stakeholders.
6. Ability to learn software and procedures quickly and thoroughly.
7. Knowledge of the substantive area of public safety, policing strategies, and violence prevention is essential.
8. Ability to translate and convey complex concepts and findings in oral and written communications required.
9. Ability to manage multiple, concurrent tasks required; ability to work independently with a high degree of initiative required.
10. Demonstrated judgment and discretion in the handling of sensitive information required.
11. The successful candidate should demonstrate a strong interest and talent for engaging effectively with a diverse group of high-level community and foundation stakeholders in achieving desired outcomes.
12. Flexibility, creativity, and the ability to contribute at both strategic and tactical levels are required. Additionally, the individual must have a collaborative, team-oriented approach in working.

Appendix

Sample Job Descriptions

Violence Reduction Council Coordinator

Description: As the coordinator for the Violence Reduction Council, you will support our mission to prevent violence through interagency collaboration and case reviews. This position will facilitate communication and collaboration among diverse stakeholders across city agencies and community-based organizations. Operating within the dynamic intersection of criminal justice and public health, you will contribute to the prevention of violence through innovative initiatives and comprehensive case reviews.

Key Responsibilities:

1. Stakeholder Engagement:

- Establish and maintain strong relationships with stakeholders across various city agencies, community organizations, and key partners.
- Coordinate and schedule monthly Violence Reduction Council (VRC) meetings, ensuring representation from relevant departments and agencies.
- Act as a liaison between stakeholders, disseminating important information and updates.

2. Meeting Facilitation and Documentation:

- Plan, organize, and help facilitate monthly VRC meetings, ensuring that discussions are productive and objectives are met.
- Draft meeting agendas in partnership with the VRC director.
- Manage meeting logistics, including date and time, location, and technology support.
- Take minutes during each meeting and create comprehensive summaries of discussions and action items.
- Document activities since the last VRC meeting and share relevant information with team members.

3. Data Management and Analysis:

- Obtain and share case information with team members.
- Receive data and reports from team members and analyze information for trends and insights.
- Coordinate data sharing between agencies.
- Research information about cases through various channels, including social media, obituaries, media coverage, etc.

4. Subcommittee Support:

- Support and communicate with subcommittees to ensure alignment with overall project goals.
- Report subcommittee updates with the full VRC and track progress within subcommittee.

5. Presentations and Reporting:

- Create PowerPoint presentations for monthly VRC reviews.
- Interface with employees of other agencies in the criminal justice and public health and community service providers committees.
- Make formal and informal presentations, including training and community group presentations.

Qualifications:

- Bachelor's degree in public health, public administration, or a related field.
- Proven experience in project coordination, stakeholder engagement, and meeting facilitation.
- Knowledge of violence prevention strategies and community-based approaches.
- Demonstrated computer skills (Microsoft Word, Access, Excel, PowerPoint).
- Ability to make formal and informal presentations and effectively articulate circumstances of homicides or nonfatal shootings in a sensitive manner.
- Ability to work collaboratively within a team and across city agencies.

Appendix

Sample Recruitment Letter

Sample: VRC Recruiting Letter

[Insert agency letterhead] [Date]

[Name]

[Address]

[City, State, Zip]

Dear Colleague/Partner:

You are invited to participate in Violence Reduction Council (VRC) case review, an innovative data-sharing process to address drug-related overdoses in our community.

The VRC framework involves a case review process that generates information about victims and suspects and their interactions with our services and systems. This information will be used to craft recommendations to prevent future similar deaths and injuries. This process has been effective for reviewing homicides, overdose fatalities, and maternal deaths and is now a nationally recognized model.

The VRC team will meet [monthly, quarterly] at the [location] from [time]. Members must commit to regular attendance, providing data about the victims, suspects, and neighborhoods, and contributing to the discussion.

Confidentiality is crucial for case reviews. You will be asked to sign a confidentiality agreement prior to your participation on the VRC team.

Thank you for your consideration. Please direct any questions about the program to me. I look forward to working with you.

Sincerely,

[your name here]

Appendix

Coordinators Meeting Preparation Checklist

- Guest members recruited
- Case information requested
- Meeting reminder email sent to members
- Case information summarized
- Activities since last meeting documented for sharing at meeting
- Agendas and other meeting materials printed

Appendix

Sample VRC Case Email

[Insert agency letterhead]

[date]

Dear Colleague/Partner,

You are invited to participate in the next VRC meeting on [date and time] at the [location].

The authority to conduct case review through data sharing is detailed [information here] in [statute, MOU, regulations]. Attached are the interagency agreement your agency has signed and a copy of the confidentiality agreement that must be signed and collected at the beginning of the meeting. Copies will be made available for your signature at the meeting.

We will be reviewing the following case(s) at the review. Keep this and all information you prepare about the case confidential.

Case 1.

- Name, aliases*
- Date of birth, date of death
- Demographics (age, race, sex)
- Address of residence
- Incident location, date, and time

Information provided on victims and suspects

Case 2.

- Name, aliases
- Date of birth, date of death
- Demographics (age, race, sex)
- Address of residence
- Incident location, date, and time

Please be prepared to share any information you have about the individual, the community, and your services as it relates to the overdose death. See the attached guide to collecting case information and agency-specific data elements to summarize the information.

If you need additional information about the decedent for identification in your records, feel free to contact me at [phone number].

Sincerely,

[your name here]

Appendix

Sample Case Review Agenda

Date, Time,

Location

1. Opening Remarks and Introduction

- a. Members' introductions
- b. Updates from previous meeting
- c. Upcoming events
- d. Data presentation
- e. Review case selection criteria
- f. Other announcements

2. Goals and Ground Rules

- a. Read goals and ground rules
- b. Ask for any additional ground rules

3. Confidentiality

- a. Read confidentiality statement

4. Case Presentation

5. Member Report-Outs (reverse chronological)

6. Group Discussion

7. Case and Timeline Summarized

8. Formulate Recommendations

9. Summarize and Adjourn

- a. Members reflect on how the meeting went
- b. Collect any paperwork with confidential information
- c. Remind members of confidentiality
- d. Encourage members to take time for self-care

Next meeting: date, time, and location

Appendix

Sample Ground Rules

- Be on time—at the beginning of the meeting and coming back from breaks.
- Raise your hand if you have something to say. Only one person speaks at a time.
- Listen actively to what other people are saying.
- Be respectful—no mocking or attacking other people’s ideas.
- See all members as equal. Avoid favoring members with leadership titles.
- Maintain and protect confidentiality.
- Use appropriate and sensitive language when discussing the case.
- Use person-first language, such as “a person addicted to drugs” versus “a drug addict.”
- Avoid judging the individuals involved in the case. Try to understand the individual's experiences through his or her eyes.
- Consider all factors that contributed to the homicide/shooting.

Appendix

Sample Member's Guide to Collecting Case Information

Guiding questions for collecting information about the case:

- What was the nature and timing of your agency's contact with the decedent and suspect(s) in the incident?
- What interactions did your organization or agency have with the decedent and suspect(s), and when?
- What services, if any, was the decedent and/or suspects accessing around the time of his or her death?
- What services, if any, were provided to the decedent's and suspect's family members? What can we learn about the decedent's and suspect's lives through the agency's interaction with the family?
- Did the decedent and suspect(s) transition between service providers? Did any gaps in service occur, or were any service needs unmet? What were the reasons for those gaps? Were referrals made? What communication occurred among providers?
- What were some missed opportunities in intervening or providing services?
- What were the anticipated benefits of those services?
- How did the decedent/suspect/family/neighborhood respond to services?
- Was an intervention completed or in progress at the time of the death?
- What were the outcomes of the interaction(s)?
- What were the strengths or protective factors of the decedent and suspect(s), the decedent's family/social network, or environmental context at the time of your agency's interaction?
- Identify the following key details: Neighborhood, support system, social network, family, peer support, access to services, employment history, housing history, health insurance, environmental safety, education
- What were the risk factors of the decedent and suspect(s), the decedent's family/social network, or environmental context at the time of your agency's interaction?
- Identify the following key details: Neighborhood, environment, exposure to violence, trauma or abuse, discrimination, injustice, criminal activity, loss of employment, abandonment, acute or chronic illness, injury, disability, transience
- What services or programs were being offered in the area during the incident? Were they available to the decedent or suspect(s)?
- What public policies (such as criminal justice, health, economic, and social welfare) were most likely impacting the individuals and neighborhoods involved in the homicide or shooting at the time of the incident?

Variables in VRC data system are available upon request.

Appendix

Recommendations Work Plan

Recommendation	Activity/Action Steps	Lead Agency	Supporting Agency(s)	Timeline

Appendix

Logic Model: Violence Reduction Council

Inputs	<p>Laws, Policies, and Attitudes</p> <ul style="list-style-type: none">• Laws and policies authorizing and establishing VRCs• Clear policies and procedures for VRC members and agencies, including data collection protocols and confidentiality agreements• Supportive attitudes among VRC members that overdoses are preventable <p>Partnerships</p> <ul style="list-style-type: none">• Partnerships with agencies that represent multiple sectors in the community• Buy-in and support for the VRC from agency’s leadership• Trusting relationships with community violence intervention stakeholders <p>Resources</p> <ul style="list-style-type: none">• Funding to support VRC work, including leveraging resources from multiple agencies and sectors to increase system-level response• Understanding the nature of gun violence and local resources available to plan response (e.g., political landscape, resource availability)• Access to REDCap (data capture tool)• VRC training curriculum for VRC members• Data management plan
Activities	<p>Convening a VRC Committee</p> <ul style="list-style-type: none">• Establish a VRC structure, governing committee, VRC staff, strong working relationships with police chief and health commissioner, and data use agreements• Determine VRC team members• Train VRC team members on VRC process and procedures <p>Planning/Holding a VRC Meeting</p> <ul style="list-style-type: none">• Establish meeting schedule and location (in-person or virtual)• Select VRC cases to be reviewed, including any additional relevant information and participants. VRC participants may often include community partners with in-depth knowledge of the shooting• Prepare for VRC meeting: set agenda, review cases, collect case data, complete relevant agency forms, invite guests, and take notes• Facilitate VRC meeting: move members from information sharing to problem solving• Outline post-meeting tasks and recommendations <p>Systematizing Data Collection</p> <ul style="list-style-type: none">• Follow data collection steps before, during, and after a VRC is conducted• Maintain a secure and accurate data collection system, including agency-specific data <p>Building a Recommendation Plan</p> <ul style="list-style-type: none">• Identify recommendations from VRC• Form subcommittee(s) to finalize recommendation and implementation timeline and plan• Present recommendation work plan to governing committee to implement in their organization• Assess and monitor recommendations

Appendix

Logic Model: Violence Reduction Council

Outputs	<p>Convening a VRC Committee</p> <ul style="list-style-type: none">• VRC structure established and governing committee and staff identified• VRC team members selected and trained <p>Planning/Holding a VRC Meeting</p> <ul style="list-style-type: none">• Meetings scheduled and location established• VRC cases selected, and additional information and participants gathered• VRC agenda set, cases reviewed by team members, notes taken, and any additional case data collected• Case information presented, problems identified, and recommendations explored• Post-meeting tasks outlined <p>Systematizing Data Collection</p> <ul style="list-style-type: none">• Data are input into collection system and protocols are adhered to throughout VRC process• Case data is accurate and secured <p>Building a Recommendation Plan</p> <ul style="list-style-type: none">• Recommendations identified and implementation work plan developed• Recommendations presented for implementation in agency• Recommendations assessed and monitored
Short-Term Outcomes	<p>VRC Members</p> <ul style="list-style-type: none">• Increased self-efficacy to participate in a VRC• Increased understanding and awareness of agency’s role in prevention of gun violence and support for individuals at risk for gun violence victimization or perpetration• Increased self-efficacy to develop, implement, and monitor recommendations• Increased ability among VRC members to identify risk and protective factors for gun violence and missed opportunities for prevention and intervention• Increased knowledge of the structural factors which contribute to violence and the nature of gun violence in their jurisdiction• Standardized data collection <p>Community and System</p> <ul style="list-style-type: none">• Increased understanding of area agencies’ roles and services, community assets and needs, gun violence trends, current prevention activities, and system gaps• Increased collaboration, communication, trust, and buy-in across service agencies• Increased communication, trust, and buy-in from community-based violence prevention organizations

Appendix

Logic Model: Violence Reduction Council

Intermediate-Term Outcomes	Community and System <ul style="list-style-type: none">• Increased identification of service and systems needs of populations at risk for gun violence• Improved coordination and collaboration between agencies and community conditions to prevent future gun violence, as well as leveraging existing resources• Implemented policies and programs that further improve community responses• Increased organizational capacity and increase funding for VRCs• Improved outreach and service delivery to at-risk populations• Enhanced understanding of how structural and racial inequities contribute to gun violence among all agencies and community members involved with the VRC process• Increased shared accountability to monitor local gun trafficking and gun violence data, implement recommendations, and assess and monitor implemented activities• Improved data related to missed opportunities for prevention and intervention at the community level• Improved investigation of gun violence fatalities (law enforcement, coroner/medical examiner)
Long-Term Outcomes	Morbidity <ul style="list-style-type: none">• Decreased rates of violent crime, gun crime, and nonfatal shootings• Decreased gun homicide rates

* This logic model was adapted from the Overdose Fatality Reviews (OFRs) logic model as outlined in: Evaluation Profile for Overdose Fatality Reviews. *National Center for Injury Prevention and Control. Centers for Disease Control and Prevention.*

Appendix

Facilitator Attributes

The facilitator for each review team (criminal justice and community service provider; this may be the same person) holds a special position. Preferred qualities that contribute to effective management of a review team include the following:

- Good, active listener
- Communicates clearly
- Encourages open conversation
- Connects with the group and is trusted by partners
- Reads group's body language and dynamics
- Creates an inclusive environment: brings partners together, encourages sharing of information and views, and creates a safe place to share
- Sees all members as providing equal value
- Balances conversation to encourage less vocal members to participate
- Navigates difficult conversations
- Professional
- Summarizes, pauses, and checks with the group before making decisions

Sample Checklist: VRC Launch

- Identify the governance committee and the administrative lead agency
- Identify who will be responsible for the director, coordinator, facilitator, and data manager roles
- Establish interagency data-sharing and confidentiality agreements, if required
- Recruit criminal justice and community service providers for respective review team members
- Set VRC ground rules and expectations
- Review data and determine case selection criteria
- Develop protocols for secure data access
- Provide team member training
- Set the meeting schedule

Appendix

Need, Nice, Bonus for Successful VRC

Attribute	Need to Have	Nice to Have	Bonus Points
Champion(s) local government and community	x		
Governance Structure (Accountability Structure)	x		
Governance – Executive Committee	x		
Governance – Working Group	x		
Prevention-Focused	x		
Neutral Agency – Lead Agency	x		
Sufficient management and staff to provide oversight, facilitation, coordination, data entry, data analysis (may be several staff from various partner organizations)	x		
Regular data analyses/reports	x		
Aggregate data analyses (multiple data sources, counts, maps)	x		
Case-level analyses	x		
Problem Analysis-focused	x		
Action Research, engagement with research partner	x		
Evaluation plan (measuring outcomes)	x		
Information sharing	x		
Epidemiologist		x	
Crime analyst		x	
Strong Facilitator (engaging, respected, trusted)	x		
External Funding		x	
Regularly scheduled reviews	x		
Regularly scheduled Executive Committee meetings	x		
Regularly scheduled Working Group meetings	x		
Supported by government leaders			
Mayor	x		
Health Commissioner	x		
Police Chief	x		
Office of Violence Prevention		x	

Appendix

Need, Nice, Bonus for Successful VRC

Attribute	Need to Have	Nice to Have	Bonus Points
District Attorney	x		
Chief Public Defender		x	
Chief of Corrections		x	
Sheriff		x	
County Executive		x	
Superintendent of Schools		x	
City Attorney		x	
U.S. Attorney		x	
SAC FBI		x	
SAC ATF		x	
Superintendent of Schools		x	
HIDTA Director		x	
Chief Judge		x	
Supported by Community-Based Organizations			
ED Violence Prevention Organization(s)	x		
ED Community Violence Intervention Organization(s)	x		
ED Domestic Violence Prevention Organization(s)	x		
Faith-Based community		x	
ED Neighborhood Organization(s)		x	
ED Youth Services Organization(s)		x	
Legislation		x	
Data Dashboard			x
Annual Report	x		
Food			x

Appendix

Violence Reduction Council Confidentiality Agreement

Violence Reduction Council - [Date]

Community Service Provider Review Confidentiality Agreement

The purpose of a community service provider review is to conduct a thorough examination of homicide and nonfatal shooting incidents in INSERT CITY by the Community Service Provider Review Team. In order to assure a coordinated response that fully addresses all systemic concerns surrounding homicides and nonfatal shootings, all relevant data, including historical information concerning the deceased victim and suspect and his or her family, must be shared at team reviews. Much of this information is protected from disclosure by law, especially medical and child abuse/neglect information. Therefore, team reviews are closed to the public, and confidential information cannot be lawfully discussed unless the public is excluded. In no case should any team member or designee disclose any information regarding team decisions outside the team, other than pursuant to team confidentiality guidelines. Failure to observe this procedure may violate various confidentiality statutes that contain penalties. Any agency team member may make a public statement about the general purpose or nature of the review process, as long as it is not identified to a specific case. The undersigned agree to abide by the terms of this confidentiality agreement.

Name	Agency	Print Email Address

Appendix

Sample Community Service Provider Review Event Flyer

Join Us: Community Service Provider Homicide Reviews

Every other month community service providers from all fields come together to discuss homicide prevention and intervention strategies. Using what we know from recent homicides in YOUR CITY, we develop recommendations to improve the systems and programs that were designed to respond to and prevent violence—and then we work together to implement those recommendations. Each year we grow more strategic in our approach, digging deeper to address the root causes of violence, increasing interagency coordination and communication, and creating spaces to celebrate what’s working well. These meetings help us all stay accountable to the safety and well-being of our CITY’s residents.

Who should attend:

Community providers, supervisors, frontline staff, executive directors or deputy/program directors of nonprofit organizations that are addressing safety and violence

What a meeting looks like:

A typical meeting has three parts: an examination of solved homicides that took place in the past month, a discussion of possible prevention strategies and action steps, and a short update on our action steps

For more information contact:

[INSERT CONTACT INFORMATION]