

Intimate Partner Violence Screening & Referrals Overview for MIECHV EHS/HFA/NFP Programs

September 2020



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Objectives



Short-term

Increase understanding of **when** and **how** to complete and document screening and referrals for Intimate Partner Violence



Medium-term

Demonstrate through data the incredible work home visitors engage in to provide Intimate Partner Violence screening and referrals to clients they serve



Long-term

Continue to maintain or increase MIECHV funding for home visiting services in Oregon

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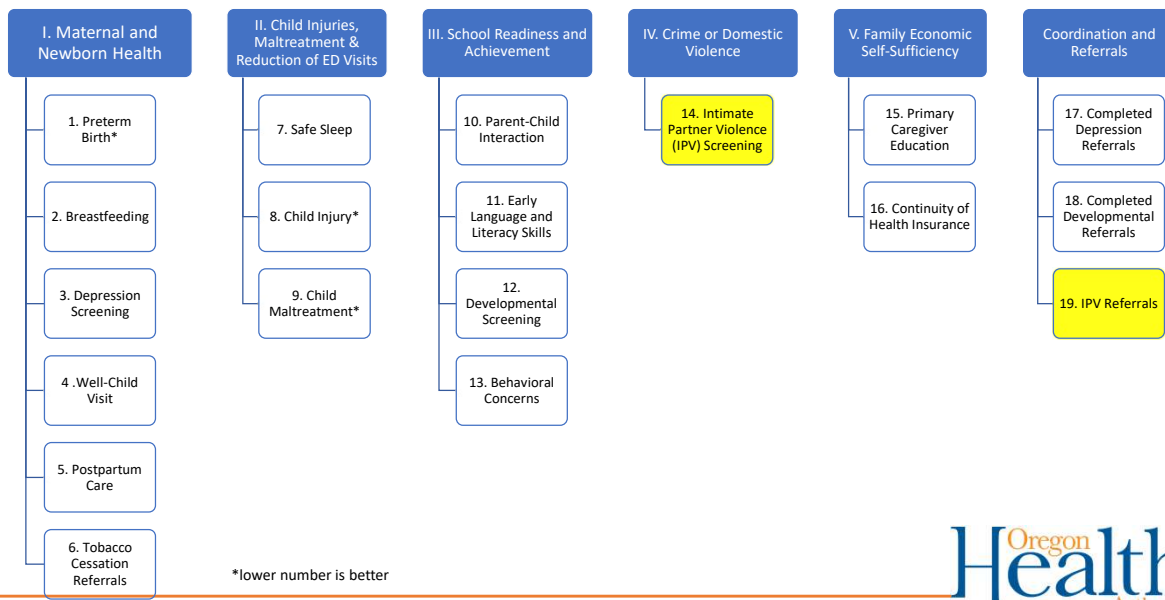
MIECHV data collection

- Required for all MIECHV grantees
- Demonstrates the work of MIECHV at a national level
- Supports quality improvement efforts
- Demonstrate measurable improvement over time



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19 Performance Measures across 6 Benchmarks



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<p>Performance Measure #14: Intimate Partner Violence Screening</p>	<table> <tr> <th>Measure Definition</th><th>FY 2019</th></tr> <tr> <td>Percent of primary caregivers who are screened for intimate partner violence (IPV) within six months of enrollment.</td><td>67% (284/424)</td></tr> </table>	Measure Definition	FY 2019	Percent of primary caregivers who are screened for intimate partner violence (IPV) within six months of enrollment.	67% (284/424)
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MIECHV Definition of IPV

- IPV refers to physical violence, sexual violence, stalking, and psychological aggression (including coercive acts) by a **current or former intimate partner**.
- An intimate partner is a person with whom one has a close personal relationship that can be characterized by the following: emotional connectedness, regular contact, ongoing physical contact and sexual behavior, identity as a couple, and familiarity and knowledge about each other's lives.

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Who should be screened for IPV?

- **All** primary caregivers should be screened for IPV regardless of relationship status, gender or previous IPV disclosure or positive screen

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When must IPV screenings occur for MIECHV?

- An IPV screen has to be offered and completed during the first 6 months of enrollment
 - Best practice: consider waiting to screen until 3-4 months post-enrollment once relationship is established
- Caution: Currently no research indicates virtual IPV screenings are safe. We encourage you to use your best practice judgement when determining whether it is appropriate or safe to screen.
 - See [IPV CoIIN memo](#) from April 15, 2020



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IPV Screening and Referrals Data Collection form and THEO entry for EHS/HFA programs: M3

Part A: IPV Screening

IPV refers to physical violence, sexual violence, stalking, and psychological aggression (including coercive acts) by a current or former intimate partner.

To meet the measure, all clients must be screened for IPV within 6 months of enrollment, regardless of relationship status or if IPV has been previously identified.

1. Relationship Assessment Tool completed?

☐ Yes, completed → Date tool completed: / / 20 → Go to Question 1a.

1a. If Yes, result of Relationship Assessment Tool:

☐ Score of 20 or higher → Go to Part B: IPV Referral.

☐ Score of 19 or lower

☐ No, not completed → Complete IPV Screening at future visit before the client reaches 6-months post-enrollment, then complete another M3 form and update in THEO.

Part B: IPV Referral

To meet the measure, IPV Referral information must be given if the client scores 20 or higher on the Relationship Assessment Tool during a MIECHV screening.

2. If a Score of 20 or higher, did you give referral information? *See examples below

☐ Yes

☐ No → Clients who screen positive should be provided information on available referral services. The focus is on provision of information, not whether the client received IPV referral services, as a client may not be ready or able to safely access a referral service. Provide Referral information at future visit and update M3 form in THEO: Q2. Change Selection to "Yes".

*Referral information can include:

- Domestic violence advocacy program, shelter or hotlines
- "Healthy Moms, Happy Babies" cards
- Housing options or emergency shelter services
- Legal advocacy and assistance
- Crisis assistance
- Support groups
- Counseling services to address related needs such as depression or substance use

MIECHV Enrollment Tool - Index Parent Page 1 of 1 rev. 10/01/2020

CLIENT SURVEY CLIENT SELECT SURVEY CLIENT SURVEY INFORMATION

TEST SURVEYS, EHS mom

M3 - MIECHV ENROLLMENT TOOL - Index Parent_20201001

Page 1

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☐ Yes, completed

☐ No, not completed

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2. If a Score of 20 or higher, did you give referral information?

☐ Yes

☐ No

Save & Continue Cancel

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IPV Data Collection forms for MIECHV NFP Programs: N1 and N4



N1 Addendum to Clinical IPV Assessment Form

5th – 7th VISIT

To be completed within 6 months of parent's enrollment



N4 Addendum to Clinical IPV Assessment Form

12 WEEKS

To be completed within 6 months of parent's enrollment




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IPV Screening and Referrals Data Collection forms for NFP Programs: N1 and N4

N1 Addendum to Clinical IPV As: 5 th – 7 th VISIT To be completed within 6 months of enrollment	N4 Addendum to Clinical IPV Assessment Form 12 WEEKS To be completed within 6 months of parent's enrollment
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Ensure screening occurs within first 6-months of enrollment: will not count if conducted prior to enrollment in MIECHV




Consider developing a policy for when to conduct this screening, such as at the 5th visit.

Tips for completing IPV screening


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**Performance Measure #19:
Intimate Partner Violence Referrals**

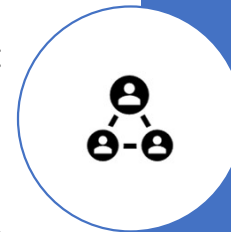
Measure Definition	FY 2019
Percent of primary caregivers with positive screens for IPV who receive referral information to IPV resources.	21.5% (14/65)



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When does IPV referral information need to be given?

- If the score from a MIECHV IPV screening indicates at risk for IPV
- For any client who screened at risk for IPV in a prior reporting period but did not receive information
 - If the client receives referral information at a later time than the positive screening:
 - Update the N1/N4 form and resubmit to OHA



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Considerations for meeting the IPV measure



Caregivers who screen positive for IPV will remain in the measure denominator until they receive IPV information.



The focus is **on provision of information**, not whether the client received IPV referral services. This is because of the recognition that a client may not be ready or able to safely access a referral service.



There is no timeframe for when the client must receive referral information; provide referral information to any caregiver who screened positive for IPV even if it was at a previous visit.

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What Counts as IPV information?

Referral
information
can include:



Domestic violence advocacy program, shelter or hotlines



"Healthy Moms, Happy Babies" cards



Housing options or emergency shelter services



Legal advocacy and assistance



Crisis assistance



Support groups



Counseling services to address related needs such as depression or substance use

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The focus is **on provision of information**, not whether the client received IPV referral services.



"Healthy Moms, Happy Babies" cards are an easy and great way to provide referral information: give the client 2; 1 for them and 1 for a friend

Tips for completing IPV referrals

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IPV Screening and Referral Resources

IPV Screening training and resources:

Futures Without Violence:

<https://www.futureswithoutviolence.org/home-visitation/>

Remote IPV screening guidance and resources:

IPV CoIIN memo: [Coronavirus/COVID-19 and Implications for Maternal Depression and Intimate Partner Violence Screening and Referral](#)

Future Without Violence webinar and resources for Supporting clients experiencing Intimate Partner Violence in the Time of COVID-19

<https://www.futureswithoutviolence.org/Home-visitation-remote-support-during-covid-19>



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Thank You!

For more information about Oregon MIECHV Program's data collection, please contact:

Tina Kent, MIECHV Data Manager: TINA.M.KENT@dhsosha.state.or.us

Drewallyn Riley, CQI Coordinator: Drewallyn.b.riley@dhsosha.state.or.us

For THEO Application Support: theo.support@state.or.us

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