F I S C A L   I M P A C T   R E P O R T

SPONSOR	Garcia, M.J.	**ORIGINAL DATE** 01/25/10 **LAST UPDATED**	**HB**
SHORT TITLE	Domestic Abuse Uniform Police Reports		**SB** 27
		ANALYST	Weber

ESTIMATED ADDITIONAL OPERATING BUDGET IMPACT (dollars in thousands)

	FY10	**FY11**	**FY12**	**3 Year Total Cost**	**Recurring or Non-Rec**	**Fund Affected**
Total	NFI	NFI	NFI			

(Parenthesis ( ) Indicate Expenditure Decreases)

SOURCES OF INFORMATION
LFC Files

Responses Received From
Administrative Office of the Courts (AOC)
Administrative Office of the District Attorney (AODA)
Health Policy Commission (HPC)
Children Youth and Families Department (CYFD)
Department of Public Safety (DPS)

SUMMARY

Synopsis of Bill

Senate Bill 27 requires the (DPS) to develop a standard domestic abuse report form to be used by law enforcement officers when investigating or making an arrest for a violation of the Crimes Against Household Members Act, the Harassment and Stalking Act or a similar municipal or county ordinance.

The bill also requires DPS to consult with law enforcement agencies statewide to periodically review and update the standard domestic abuse report form.

The bill further requires that all law enforcement officers use the standard domestic abuse report form when investigating or making an arrest for violations of the above-mentioned laws.

FISCAL IMPLICATIONS

There are no fiscal implications other than the minimal cost associated with printing and distributing the uniform form and this should be distributed among all law enforcement agencies.

SIGNIFICANT ISSUES

Making it a statutory requirement to use a uniform report minimizes the possibility that individual law enforcement agencies will slowly alter the form and unintentionally reduce its value.

The AOC notes the following on the value of uniform reports.

Uniform report forms assist law enforcement from different jurisdictions recognize a perpetrator more easily and to take the appropriate actions safely and without delay. Accessing a standard report means the officer can quickly review the information on the form to determine prior arrests and weapon involvement. Uniform report forms are used in traffic citations and other types of cases, so that when officers outside the issuing jurisdiction make a stop, such reports are available to police or sheriff's officers in a familiar format, thus accelerating the administration of justice.

Using standard report forms helps clerks more readily enter reported data into the National Crime Information Center (NCIC) or other automated systems for outside jurisdictions to use in enforcing the law. They are also easier for the courts and others in the criminal justice system to review when processing these cases, because the same type of information is placed in the same location on each case. Not having to search through unfamiliar reports to locate needed details saves time for judges and court staff to handle other cases.

CYFD adds information that points out the potential for increased victim safety.

Research has shown that obtaining an adequate victim statement that includes specific information on the perpetrator's threats to kill or harm is the single most significant law enforcement response to domestic violence.

The proposed domestic abuse report format was developed using research from Dr. Jacquelyn Campbell's validated danger assessment tool whose intent is to effectively identify victims who appear to be at greatest risk of eventually being murdered or driven to suicide by their partners. Implementation of a lethality driven report form will improve law enforcement investigations, reduce dual arrests, decrease domestic violence homicides and increase victim safety.

OTHER SUBSTANTIVE ISSUES

HPC offers the following information.

Incidents of domestic violence go unreported to law enforcement due to refusal of family, friends, or neighbors to report. In addition, patients that are seen in the healthcare/ emergency room setting with a domestic violence- and stalking-related injury are typically not reported to law enforcement and represent an additional area of underreporting.

In 2007, New Mexico identified:
- 22,286 domestic violence incidents;
- 78 homicides statewide, 18% (32) were domestic violence related;
- 53% (4,436) of the adult victims who sought services from domestic violence service providers claimed they did not report their incident to law enforcement; and

- On average one in every seven incidents of domestic violence reported involved a child witness and an average of two children were present at each.

(Source: 2010 Quick Facts. http://www.hpc.state.nm.us/)

Attached is the proposed uniform domestic violence report.

MW/svb

STATE OF NEW MEXICO
UNIFORM DOMESTIC ABUSE REPORT

OCCURRENCE DATE(S)			DATE REPORTED				ORI NO.	CASE NUMBER		PRIMARY	PAGE	OF
ON	OR	BETWEEN										
MM/DD/YY	MM/DD/YY		MM/DD/YY	AGENCY / COUNTY			GEOGR. CODE	CAD NUMBER		OPTIONAL NUMBER		

TIME	DAY OF WEEK	TIME	DAY OF WEEK	ADDRESS / LOCATION OF INCIDENT	CITY	CTY.	ZIP	DOMESTIC ABUSE INCIDENT

OFFENSE

ADDL ON SUP	OFFENSE / INCIDENT	STATUTE OR ORDINANCE	FEL. MISD.	ATTEM-PTED	COMP-LETED	UCR OFFENSE CODE	NO. CHILD PRES	SPEC AGENCY CODE	NO. OF COUNTS	LOCAT CODE	WEAPON CODE UP TO 3 PER OFFENSE
1. ☐	ASSAULT AGAINST A HOUSEHOLD MEMBER	30 - 3 - 12	M	☐	☐	571					
2. ☐	AGGRAVATED ASSAULT AGAINST A HOUSEHOLD MEMBER	30 - 3 - 13	F	☐	☐	570					
3. ☐	ASSAULT AGAINST A HOUSEHOLD MEMBER / INTENT TO COMMIT A VIOLENT FELONY	30 - 3 - 14	F	☐	☐	570					
4. ☐	BATTERY AGAINST A HOUSEHOLD MEMBER	30 - 3 - 15	M	☐	☐	572					
5. ☐	AGGRAVATED BATTERY AGAINST A HOUSEHOLD MEMBER	30 - 3 - 16	F/M	☐	☐	570					
6. ☐	CRIM DAM TO PROP / DEPRIVATION AGAINST A HOUSEHOLD MEMBER	30 - 15 - 18	F/M	☐	☐	290					
7. ☐	INTERFERENCE WITH COMMUNICATIONS	30 - 12 - 1	M	☐	☐	90Z					
8. ☐	FALSE IMPRISONMENT	30 - 4 - 3	F	☐	☐	102					
9. ☐	KIDNAPPING	30 - 4 - 1	F	☐	☐	100					
10. ☐	VIOLATION OF ORDER OF PROTECTION	40 - 13 - 6	M	☐	☐	570					
11. ☐				☐	☐						

CODES

PERSON CODES — V-VICTIM, G-PARENT/GUARDIAN, C-CITED, R-REPORTING PERSON, S-SUSPECT, I-INTERVIEWED, A-ARRESTED, W-WITNESS, D-DECEASED, M-MISSING PERSON/RUNAWAY, O-OTHER

TYPE CODES — I-INDIVIDUAL, B-BUSINESS, F-FINANCIAL INST., P-POLICE, G-GOVERNMENT, R-RELIGIOUS, S-SOCIETY/PUB, O-OTHER, U-UNKNOWN

INJURY CODES — B-APPARENT BROKEN BONE, I-POSSIBLE INTERNAL INJURY, L-SEVERE LACERATION, M-APPARENT MINOR INJURY, O-OTHER MAJOR INJURY, T-LOSS OF TEETH, U-UNCONSCIOUSNESS, N-NONE

WEAPON CODES — 15A-AUTOMATIC FIREARM, 11A-AUTOMATIC FIREARM, 12A-AUTOMATIC HANDGUN, 13A-AUTOMATIC RIFLE, 14A-AUTOMATIC SHOTGUN, 30-BLUNT OBJECT, 70-DRUGS/NARCOTICS, 60-EXPLOSIVES, 65-FIRE/INCINDIARY DEVICE, 11-FIREARM (TYPE NOT STATED), 12-HANDGUN, 20-KNIFE / CUTTING INSTRUMENT, 35-MOTOR VEHICLE, 99-NONE, 90-OTHER, 15-OTHER FIREARM, 40-PERSONAL WEAPONS, 50-POISON (INCLUDES GAS), 13-RIFLE, 14-SHOTGUN, 01-UNARMED, 95-UNKNOWN

ETHNIC CODES — B-BLACK, A-ASIAN, H-HISP/MEX, C-CHINESE, U-UNKNOWN, I-AMER IND, J-JAPANESE, W-WHITE, O-OTHER

SUSPECT

ADDL ON SUPP.	PERSON CODE	TYPE CODE	INJURY CODE	1-NAME (LAST, FIRST, MIDDLE)	SOCIAL SECURITY NO.	DOB	AGE (RANGE)	SEX	RACE: WHT BLACK HISP ASIA IND UNK.

STREET ADDRESS	APT. NO.	RES. PHONE	HEIGHT	WEIGHT	HAIR	EYES	ETHNIC	SUSPECT UNDER INFLUENCE OF: ALCOH. DRUG COMBO

CITY	CTY.	STATE	ZIP	BUS. PHONE	HAS SUSPECT PREVIOUSLY BEEN ARRESTED FOR DOMESTIC VIOLENCE? YES ☐ NO ☐ DATE	SUSPECT FLED SCENE ☐ ON SCENE ☐

OCCUPATION	EMPLOYER / SCHOOL	EMPLOYER / SCHOOL ADDRESS	GANG AFFILIATION

ALIAS / NICKNAME	MARKS, SCARS, TATTOOS AND/OR CLOTHING DES.	ARMED WITH (SEE CODES)	TYPE OF ARREST: ARRESTED WARRANT SUMMONS

DRIVER'S LICENSE NO.	D.L. STATE	ARREST / CITATION NO.	F.B.I. NO.	S.I.D. NO.	N.I.C. NO.	RES. STATUS: RES. NON

VICTIM

ADDL ON SUPP.	PERSON CODE	TYPE CODE	INJURY CODE	2-NAME (LAST, FIRST, MIDDLE)	SOCIAL SECURITY NO.	DOB	AGE (RANGE)	SEX	RACE: WHT BLACK HISP ASIA IND UNK.

STREET ADDRESS	APT. NO.	RES. PHONE	HEIGHT	WEIGHT	HAIR	EYES	ETHNIC	VICTIM UNDER INFLUENCE OF: ALCOH. DRUG COMBO

COMPLETE MAILING ADDRESS (IF DIFFERENT)	ALTERNATE PHONE

CITY	CNTY.	STATE	ZIP	BUS. PHONE	VICTIM OF OFFENSE NO.	VICTIM OF SUSP. NO.	REL.	VICTIM OF SUSP. NO.	REL.	VICTIM OF SUSP. NO.	REL.

OCCUPATION	EMPLOYER / SCHOOL	EMPLOYER / SCHOOL ADDRESS

ALIAS / NICKNAME	MARKS, SCARS, TATTOOS AND/OR CLOTHING DES.	ARMED WITH (SEE CODES)

DRIVER'S LICENSE NO.	D.L. STATE	VICTIM SERVICES	PROTECTION ORDER IN EFFECT?	EMOTIONAL STATE	ALTERNATIVE CONTACT INFORMATION FORWARDED?	RES. STATUS

VICTIM SERVICES: ☐ DV PACKET ☐ EXPLAIN CRIMINAL PROCESS ☐ EXPLAIN ORDERS OF PROTECTION ☐ ADVOCATE NOTIFIED

PROTECTION ORDER IN EFFECT? YES ☐ NO ☐ ISSUED BY: ___ DATE ISSUED: ___ ORDER NO.: ___

EMOTIONAL STATE: ☐ ANGRY ☐ APOLOGETIC ☐ CALM ☐ CRYING ☐ FEARFUL ☐ HYSTERICAL ☐ OTHER ___

ALTERNATIVE CONTACT INFORMATION FORWARDED? ☐ YES ☐ NO

RES. STATUS: RES ☐ NON ☐

N.I.C. NO. ___

INTERVIEWED / WITNESS

ADDL ON SUPP.	PERSON CODE	TYPE CODE	INJURY CODE	3-NAME (LAST, FIRST, MIDDLE)	SOCIAL SECURITY NO.	DOB	AGE (RANGE)	SEX	RACE: WHT BLACK HISP ASIA IND UNK

STREET ADDRESS	APT. NO.	RES. PHONE	HEIGHT	WEIGHT	HAIR	EYES	ETHNIC

CITY	CTY.	STATE	ZIP	BUS. PHONE	CALLER INFORMATION: ☐ 911 CALLER ☐ NEIGHBOR ☐ RELATIVE ☐ FRIEND ☐ CHILD

OCCUPATION	EMPLOYER / SCHOOL	EMPLOYER / SCHOOL ADDRESS	GANG AFFILIATION

ALIAS / NICKNAME	MARKS, SCARS, TATTOOS AND/OR CLOTHING DES.	ARMED WITH (SEE CODES)	RES. STATUS: RES. NON

***** Answers to Lethality Questions are provided by (Name): _____ Person Code: _____ Identified HHM Code: _____

#	Question				
1.	Has the Household Member (or whoever the aggressor is) ever used a weapon against you or threatened you with a weapon?	☐ Y	☐ N	☐ NOT RECALL	☐ DON'T KNOW
2.	Does the Household Member have a history of mental illness?	☐ Y	☐ N	☐ NOT RECALL	☐ DON'T KNOW
3.	Do you think the Household Member will kill you?	☐ Y	☐ N	☐ NOT RECALL	☐ DON'T KNOW
4.	Does the Household Member have a gun or can they get one easily?	☐ Y	☐ N	☐ NOT RECALL	☐ DON'T KNOW
5.	Has the Household Member ever tried to choke / strangle you?	☐ Y	☐ N	☐ NOT RECALL	☐ DON'T KNOW
6.	Is the Household Member violently or constantly jealous or does the Household Member control most of your daily activities?	☐ Y	☐ N	☐ NOT RECALL	☐ DON'T KNOW
7.	Have you left the Household Member or separated within the last year?	☐ Y	☐ N	☐ NOT RECALL	☐ DON'T KNOW
8.	Are you currently involved in another relationship?	☐ Y	☐ N	☐ NOT RECALL	☐ DON'T KNOW
9.	Do you have children with another partner?	☐ Y	☐ N	☐ NOT RECALL	☐ DON'T KNOW
10.	Is the Household Member unemployed? ☐ Recent Unemployment	☐ Y	☐ N	☐ NOT RECALL	☐ DON'T KNOW
11.	Has the Household Member destroyed cherished personal items?	☐ Y	☐ N	☐ NOT RECALL	☐ DON'T KNOW
12.	Has the Household Member ever threatened Homicide or Suicide?	☐ SELF	☐ VICTIM	☐ CHILDREN	
13.	Does the Household Member follow, stalk or spy on you or leave threatening messages?	☐ Y	☐ N	☐ NOT RECALL	☐ DON'T KNOW
14.	Previous history of Household Member violating court orders exits?	☐ COURT ORDER	☐ PROTECTIVE ORDER	☐ OTHER	
15.	Has the Household Member stated "If I can't have you, no one will" or similar statement?	☐ Y	☐ N	☐ NOT RECALL	☐ DON'T KNOW
16.	Does the Household Member have a violent history outside of the relationship?	☐ Y	☐ N	☐ NOT RECALL	☐ DON'T KNOW
17.	Is the Household Member violent toward children?	☐ Y	☐ N	☐ NOT RECALL	☐ DON'T KNOW
18.	Are you currently pregnant?	☐ Y	☐ N	☐ NOT RECALL	☐ DON'T KNOW
19.	Is the Household Member violent toward any animals?	☐ Y	☐ N	☐ NOT RECALL	☐ DON'T KNOW
20.	Does the Household Member regularly abuse alcohol or drugs? ☐ Alcohol ☐ Drugs	☐ Y	☐ N	☐ NOT RECALL	☐ DON'T KNOW
21.	Is there anything else that worries you about your safety? If yes, what is it?				

MEDICAL TREATMENT: ☐ EMS ☐ FIRE TRANSPORTED TO: _____ ☐ REFUSED

EVIDENCE

☐ PHOTOS ☐ AUDIO ☐ VIDEO ☐ 911 TAPE   **EVIDENCE TAG / I.D. NO.** _____

OTHER PHYSICAL EVIDENCE COLLECTED: _____

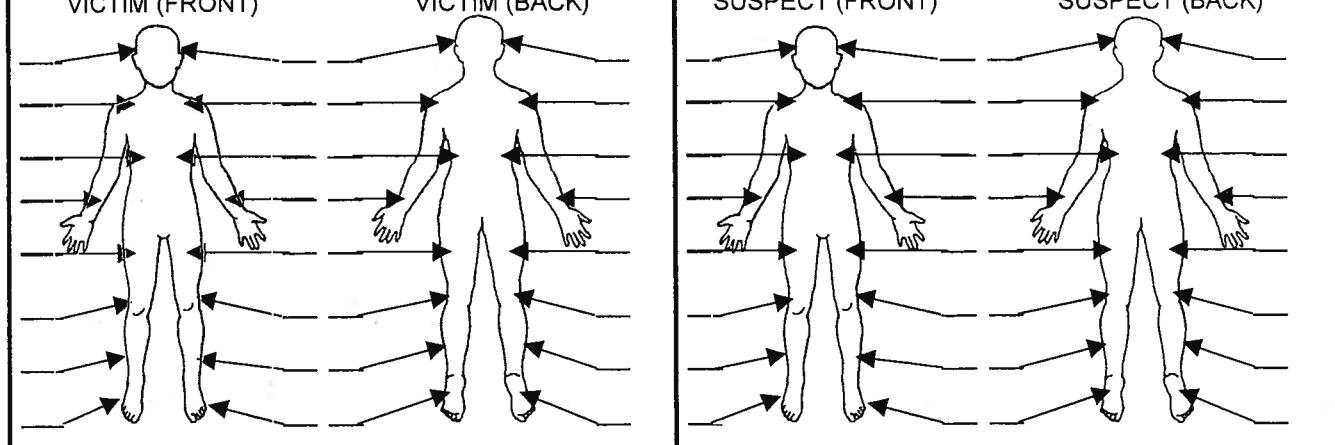EVIDENCE TYPE CODES 08-CLOTHES/FURS 13-FIREARMS 25-PURSES / HANDBAGS / WALLETS 35-TOOLS 77-OTHER   EVIDENCE TYPE = _____

CONDITION OF PREMISES
☐ DISARRAY   ☐ ITEMS BROKEN   ☐ OTHER: _____

OFFICER OBSERVED INJURIES

PHYSICAL CONDITION CODES 1-ABRASIONS 2-STRANGULATION MARKS 3-MINOR CUTS 4-BITE MARKS 5-SWELLING 6-BRUISING 7-REDNESS 8-SOILED CLOTHING 9-TORN CLOTHING 10-UNCONCIOUS 11-COMPLAINT 12-NO APPARENT INJURY 13-OTHER

USING THE APPROPRIATE PHYSICAL CONDITION CODES, LABEL THE AREA MOST AFFECTED BY INJURY. IF NO INJURY, LEAVE BLANK

VICTIM (FRONT)   VICTIM (BACK)   SUSPECT (FRONT)   SUSPECT (BACK)

☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5 ☐ 6 ☐ 7 ☐ 8 ☐ 9 ☐ 10
(Mild) How does the victim rate the current level of pain? (Severe) ➡

CERT. / SATUS

REPORTING OFFICER (PRINT)	RANK	I.D. NO.	DATE	DETECTIVE / FOLLOW-UP OFFICER / REFERRED TO	I.D. NO.	DATE
ASSISTING OFFICER (PRINT)	RANK	I.D. NO.	DATE	PROCESSED BY	DATE	DATA ENTRY PERSON	DATE
APPROVING OFFICER (PRINT)	RANK	I.D. NO.	DATE				

INCIDENT STATUS: ACTIVE | INACT. | CLOSED | U.F. | CL.A. | CL.E.   EXCEPT CODE   A-DEATH OF OFFENDER B-PROSECUTION DECLINED C-EXTRADITION DEN   DATE

☐ "THIS ARREST IS IN WHOLE, OR IN PART PREMISED UPON PROBABLE CAUSE TO BELIEVE THAT THE SUSPECT COMMITTED DOMESTIC ABUSE AGAINST THE VICTIM."

CASES CLEARED BY THIS ARREST   CASE NO.   CASE NO.
CASE NO.

STATE OF NEW MEXICO UNIFORM DOMESTIC ABUSE SUPPLEMENTAL REPORT	ORIGINAL OFFENSE DATE	SUPPLEMENTAL DATE	CASE NO.	CAD NO.	PAGE	OF

ORIGINAL VICTIM'S NAME (LAST, FIRST, MIDDLE)	DATE OF BIRTH	ORIGINAL SUSPECT'S NAME (LAST, FIRST, MIDDLE)	DATE OF BIRTH	OPTIONAL

LOCATION OF INCIDENT

ADDL INTERVIEWED / WITNESS

PERSON CODE	TYPE CODE	INJURY CODE	3-NAME (LAST, FIRST, MIDDLE)	SOCIAL SECURITY NO.	DOB	AGE (RANGE)	SEX	RACE: WHT BLACK HISP ASIA IND UNK

STREET ADDRESS	APT. NO.	RES. PHONE	HEIGHT	WEIGHT	HAIR	EYES	ETHNIC	OPTIONAL

CITY	CTY.	STATE	ZIP	BUS. PHONE	CALLER INFORMATION: □ 911 CALLER □ NEIGHBOR □ RELATIVE □ FRIEND □ CHILD

OCCUPATION	EMPLOYER / SCHOOL	EMPLOYER / SCHOOL ADDRESS	GANG AFFILIATION

ALIAS / NICKNAME	MARKS, SCARS, TATTOOS AND/OR CLOTHING DES.	ARMED WITH (SEE CODES)	RES. STATUS: RES □ NON □

ADDL INTERVIEWED / WITNESS

PERSON CODE	TYPE CODE	INJURY CODE	3-NAME (LAST, FIRST, MIDDLE)	SOCIAL SECURITY NO.	DOB	AGE (RANGE)	SEX	RACE: WHT BLACK HISP ASIA IND UNK

STREET ADDRESS	APT. NO.	RES. PHONE	HEIGHT	WEIGHT	HAIR	EYES	ETHNIC	OPTIONAL

CITY	CTY.	STATE	ZIP	BUS. PHONE	CALLER INFORMATION: □ 911 CALLER □ NEIGHBOR □ RELATIVE □ FRIEND □ CHILD

OCCUPATION	EMPLOYER / SCHOOL	EMPLOYER / SCHOOL ADDRESS	GANG AFFILIATION

ALIAS / NICKNAME	MARKS, SCARS, TATTOOS AND/OR CLOTHING DES.	ARMED WITH (SEE CODES)	RES. STATUS: RES □ NON □

LETHALITY ASSESSMENT

***** Answers to Lethality Questions are provided by (Name): _____ Person Code: _____ Identified HHM Code: _____

1. Has the Household Member (or whoever the aggressor is) ever used a weapon against you or threatened you with a weapon? □ Y □ N □ NOT RECALL □ DON'T KNOW
2. Does the Household Member have a history of mental illness? □ Y □ N □ NOT RECALL □ DON'T KNOW
3. Do you think the Household Member will kill you? □ Y □ N □ NOT RECALL □ DON'T KNOW
4. Does the Household Member have a gun or can they get one easily? □ Y □ N □ NOT RECALL □ DON'T KNOW
5. Has the Household Member ever tried to choke / strangle you? □ Y □ N □ NOT RECALL □ DON'T KNOW
6. Is the Household Member violently or constantly jealous or does the offender control most of your daily activities? □ Y □ N □ NOT RECALL □ DON'T KNOW
7. Have you left the Household Member or separated within the last year? □ Y □ N □ NOT RECALL □ DON'T KNOW
8. Are you currently involved in another relationship? □ Y □ N □ NOT RECALL □ DON'T KNOW
9. Do you have children with another partner? □ Y □ N □ NOT RECALL □ DON'T KNOW
10. Is the Household Member unemployed? □ Recent Unemployment □ Y □ N □ NOT RECALL □ DON'T KNOW
11. Has the Household Member destroyed cherished personal items? □ Y □ N □ NOT RECALL □ DON'T KNOW
12. Has the Household Member ever threatened Homicide or Suicide? □ SELF □ VICTIM □ CHILDREN
13. Does the Household Member follow, stalk or spy on you or leave threatening messages? □ Y □ N □ NOT RECALL □ DON'T KNOW
14. Previous history of violation of court ordered protection orders exists? □ COURT ORDER □ PROTECTIVE ORDER □ OTHER
15. Has the Household Member stated "If I can't have you, no one will" or similar statement? □ Y □ N □ NOT RECALL □ DON'T KNOW
16. Does the Household Member have a violent history outside of the relationship? □ Y □ N □ NOT RECALL □ DON'T KNOW
17. Is the Household Member violent toward children? □ Y □ N □ NOT RECALL □ DON'T KNOW
18. Are you currently pregnant? □ Y □ N □ NOT RECALL □ DON'T KNOW
19. Is the Household Member violent toward any animals? □ Y □ N □ NOT RECALL □ DON'T KNOW
20. Does the Household Member regularly abuse alcohol or drugs? □ Alcohol □ Drugs □ Y □ N □ NOT RECALL □ DON'T KNOW
21. Is there anything else that worries you about your safety? If yes, what is it?

CERT. / STATUS

REPORTING OFFICER (PRINT)	RANK	I.D. NO.	DATE	DETECTIVE / FOLLOW-UP OFFICER / REFERRED TO	I.D. NO.	DATE
ASSISTING OFFICER (PRINT)	RANK	I.D. NO.	DATE	PROCESSED BY	DATE	DATA ENTRY PERSON	DATE
APPROVING OFFICER (PRINT)	RANK	I.D. NO.	DATE				

INCIDENT STATUS: ACTIVE □ INACT. □ CLOSED □ U.F. □ CLA. □ CLE. □   EXCEPT CODE: ____ A-DEATH OF OFFENDER B-PROSECUTION DECLINED C-EXTRADITION DEN DATE ____

□ "THIS ARREST IS IN WHOLE, OR IN PART PREMISED UPON PROBABLE CAUSE TO BELIEVE THAT THE SUSPECT COMMITTED DOMESTIC ABUSE AGAINST THE VICTIM."

CASES CLEARED BY THIS ARREST CASE NO. ____ CASE NO. ____ CASE NO. ____