

C. ANTHONY MUSE  
Legislative District 26  
Prince George's County

Judicial Proceedings Committee

Senate Chair  
Joint Committee on Fair Practices  
and State Personnel Oversight



*The Senate of Maryland*  
ANNAPOLIS, MARYLAND 21401

Annapolis Office  
Miller Senate Office Building  
11 Bladen Street, Suite 420  
Annapolis, Maryland 21401  
410-841-3092 • 301-858-3092  
800-492-7122 Ext. 3092  
Fax 410-841-3410 • 301-858-3410  
Anthony.Muse@senate.state.md.us

District Office  
10905 Fort Washington Road, Suite 202  
Fort Washington, Maryland 20744  
301-292-2388

**NESHANTE AND CHLOE DAVIS DOMESTIC VIOLENCE PREVENTION TASK FORCE**

November 27, 2017

The Honorable Larry Hogan- Governor  
State of Maryland Executive Department  
100 State Circle  
Annapolis, MD 21401

Dear Governor Hogan:

On behalf of the NeShante and Chloe Davis Domestic Violence Prevention Task Force, we are pleased to submit the enclosed findings and recommendations of the aforementioned Task Force.

If you require additional information, please have your staff contact Tristan Fernandez, Office of Government Affairs, Department of Human Services, at 410-767-8966.

Thank you for your concern and commitment to providing and improving the intervention strategies needed to protect the lives of vulnerable Marylanders.

Sincerely,

  
Senator C. Anthony Muse  
Task Force Chair

  
Delegate Vanessa Atterbeary  
Task Force Vice-Chair

**Report of the NeShante and Chloe Davis  
Domestic Violence Prevention Task Force  
MSAR 10948  
*November 2017***

For more information concerning this document, please contact:

Maryland Department of Human Services  
311 West Saratoga Street  
Baltimore, Maryland 21201  
410-767-8966

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Requests should be submitted in writing to:

Director of Communications  
Maryland Department of Human Services  
311 West Saratoga Street  
Baltimore, Maryland 21202  
1-800-332-6347  
1-800-735-2258 TTY  
<http://www.dhs.maryland.gov>

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## BACKGROUND

Domestic violence is a pattern of coercive behavior characterized by the domination and control of one person over another, usually an intimate partner, through physical, psychological, emotional, verbal, sexual, and/or economic abuse. Victims of domestic violence can be adult men and women, teens that experience dating violence, children, individuals with disabilities, and seniors. Statistics show that 85% of all domestic violence victims are women who are abused by their husbands or boyfriends.

In FY 2016, a total of 55 men, women and children lost their lives due to domestic violence in the State of Maryland to include 42 victims and 13 abusers<sup>1</sup>. The jurisdiction with the highest number of deaths Statewide in FY 2016 was Prince George's County, with a total of 18 deaths. The second-highest number of deaths were in Anne Arundel and Baltimore Counties with 9 each. The rest of the State combined totaled 19 domestic violence fatalities.

During the 2016 legislative session, the legislature passed Senate Bill 1143 (Chapter 606, Acts of 2016) and established the NeShante and Chloe Davis Domestic Violence Prevention Task Force (Task Force). State Senator C. Anthony Muse (Prince George's County) sponsored the legislation in response to a Prince George's County incidence of domestic violence: mother and elementary school teacher NeShante Davis and her 2-year old daughter, Chloe Davis, lost their lives as a result of domestic violence.

Under the provisions of Chapter 606, the Task Force was charged with:

1. Studying the effectiveness of current intervention strategies and exploring new interventions that might strengthen efforts to prevent domestic violence;
2. Studying existing legal, behavioral health, and family support policies, procedures, and practices to ascertain existing issues and identify resources needed to improve the delivery and effectiveness of domestic violence prevention and family support services;
3. Studying ways to further engage and educate community stakeholders to be better informed and more engaged in identifying and preventing domestic violence in the community;
4. Studying the ways individuals, families, and the community at large can better identify, report, and defend against domestic violence; and
5. Developing policy recommendations to improve the ability of State and local government, community stakeholders, families, and individuals to identify and prevent domestic violence in Maryland.

The Task Force held eight (8) public meetings, commencing on December 15, 2016 and concluding on May 23, 2017, including a site visit to the Prince George's County Family Justice Center.

### ***Public meetings were held:***

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<sup>1</sup> Maryland Network Against Domestic Violence, DV Homicide Statistics July 2015- June 2016, [http://mnadv.org/\\_mnavWeb/wp-content/uploads/2011/07/4-Page-Fatalities.pdf](http://mnadv.org/_mnavWeb/wp-content/uploads/2011/07/4-Page-Fatalities.pdf).

- Thursday December 15, 2016
- Monday January 23, 2017
- Monday February 6, 2017
- Monday February 20, 2017
- Monday March 6, 2017
- Monday April 24, 2017
- Monday May 8, 2017
- Tuesday May 23, 2017

The report that follows is the result of the Task Force's work and assesses the availability of services to Marylanders who face intimate partner and family violence. This report also includes suggested next steps concerning the implementation of the Task Force's recommendations.

## **CURRENT INTERVENTION STRATEGIES**

### ***Governor's Family Violence Council***

Created in 1995, the Governor's Family Violence Council's mission is to provide the Governor with timely and accurate information on family violence with recommendations to reduce and eliminate abusive behaviors. The Council and its workgroups represent all areas of the criminal justice system, as well as elected officials, advocates, scholars, State agency leadership and private citizens. The Council's Executive Order Goals are to:

1. Advise the Governor through the Executive Director of the Governor's Office of Crime Control & Prevention on matters related to family violence.
2. Identify and analyze State policies and programs relating to family violence, including but not limited to:
  - a. Collecting data from State agencies relating to the prevention and reduction of domestic violence and related family violence;
  - b. Identifying resources available to reduce and prevent family violence through a statewide coordinated effort; and
  - c. Identifying opportunities for collaboration between governmental units.
3. Examine, or cause to be examined, the relationship between family violence and other societal problems, including but not limited to juvenile delinquency, alcohol and substance use, truancy and future criminal activity.
4. Identify best practices, research and information pertaining to abuser intervention and related programs.
5. Propose to the Governor, through the Executive Director of the Governor's Office of Crime Control & Prevention, legislative, regulatory, and policy changes to reduce and prevent the incidence of domestic violence and related family violence, to protect victims and to punish perpetrators.
6. Perform such other duties and functions as may be appropriate and necessary for the Council to address and implement the provisions of this Executive Order.

Each year the Council focuses on two or three key areas of family violence policy, which are selected by a majority vote and championed by one member and a working committee of members for one year. The Council's focus areas for FY 2017 were the Healthy Teen Dating Workgroup and the Strategic Planning Workgroup. These workgroups were extended for FY 2018 to continue the efforts of the workgroups.

The Healthy Teen Dating Workgroup has researched best practices, including programs and curriculums, in developing statewide awareness and education on healthy teen dating throughout the State of Maryland and in partnership with local private and public school systems.

The Strategic Planning Workgroup focuses on creating an outcome based strategic plan for family violence victims in Maryland. The Strategic Planning Workgroup identified three specific Goals to be achieved for victims: victims are safe, victims are self-sufficient, and victims and the community are aware.

As discussed under Findings and Recommendations, the Task Force supports the ongoing engagement of community-based organizations and recommends that a representative from a community-based organization with an affiliation to domestic violence services become appointed as an additional or permanent member of the Council.

### ***Maryland Network Against Domestic Violence***

The Maryland Network Against Domestic Violence (MNADV) is the State's domestic violence coalition and responsible for bringing together victim service providers, allied professionals, and concerned individuals for the common purpose of reducing intimate partner and family violence and its harmful effects on Maryland citizens.

In terms of awareness and education, MNADV provides a statewide Helpline (1-800-MD-HELPS) for survivors, offering domestic violence programs access to a language interpretation service for survivors who speak languages other than English, maintaining an informational website, disseminating e-newsletters, participating on social media platforms, disseminating brochures for the public, tracking the loss of life caused by domestic violence through a statewide fatality database, conducting national, statewide and local domestic violence training, and holding an Annual Memorial Service and Annual Meeting and Awards event. As a result:

- Over 700 people received information about domestic violence and referrals to local service providers in FY 2016 by calling the MNADV's toll-free statewide Helpline;
- Over 3,100 calls from domestic violence programs were received by MNADV's language interpretation service so that survivors who have Limited English Proficiency (LEP) could access their services;
- Over 6,000 professionals received MNADV's e-newsletters;
- Over 63,000 were reached through social media outlets; and
- 26,000 educational brochures were made available to survivors and to the public by providing them to organizations and service providers.

Furthermore, in FY 2016, MNADV conducted 182 trainings for professionals and community leaders on best practice issues, current topics, and the Lethality Assessment Program—Maryland Model (LAP). A total of 4,300 people were trained at these sessions.

### ***Federal Victims of Crime Act (VOCA) Assistance Funding***

In 2015, Maryland's allotment under the federal Victims of Crime Act (VOCA) Assistance Funding increased from approximately \$8 million to the current \$33 million, after receiving \$40 million last year. The VOCA grants, funded through the U.S. Department of Justice and administered by the Governor's Office of Crime Control & Prevention, are used to support services such as crisis intervention, counseling, emergency transportation to court, temporary housing, criminal justice support, and advocacy. VOCA Victim Assistance grants are awarded to organizations that provide direct services to a wide array of crime victims. These agencies include sexual assault and rape crisis centers, domestic violence programs and shelters, child abuse programs, mental health services, and programs for underserved victims.

Due to this increase, Maryland's support of domestic violence programs across the State has increased from approximately \$6.4 million in Fiscal Year 2016 to an average of \$18.4 million per year for Fiscal Years 2017 and 2018.

## **FINDINGS AND RECOMMENDATIONS**

To create its recommendations the Task Force identified five areas of study shown below. The Task Force convened five work groups based upon these areas of study that met and created specific recommendations based on their findings.

- Study the effectiveness of current intervention strategies and explore new interventions.
- Study existing legal, behavioral health, and family support policies and needed resources.
- Study ways to engage and educate community stakeholders in identification and prevention.
- Study ways individuals families and community members can better identify and report.
- Study ways state and local government can better identify and report.

Each workgroup presented their findings to the full Task Force; those recommendations were discussed and ultimately voted on for inclusion in the final report to the legislature.

Recommendations approved by the Task Force were presented at the time of voting by recommendation type, legislative, budgetary and policy. Each recommendation is shown below under their respective recommendation type. The Task Force recommends that the budgetary support of these new proposals should not impact existing funding for core services. For that reason, the Task Force recommends that an additional \$2 million in State funds be provided to the Governor's Office of Crime Control & Prevention (GOCCP) to support the Task Force's recommendations.

Moreover, the Governor's Family Violence Council, established by Executive Order 01.01.2008.16 and staffed by GOCCP, should be expanded to include membership of at least one

additional Council member who is a relative of a victim of domestic violence or a community-based organization focused on engaging the general public in new and innovative ways to eliminate domestic and family violence.

***Legislative Recommendations:***

1. Further study and investigate why the Circuit Court is three times more likely than the District Court to deny a protective order.
2. Training to ensure trauma-informed, victim-centered, and culturally relevant services to a broad array of victims/survivors is provided, including cultural/ethnic/racial/religious groups, immigrants, individuals with limited English proficiency (LEP), trafficking victims, older adults, people with disabilities, male and LGBTQ victims, teens and children.
3. Addressing the under-utilization of the courts' supervised visitation.
4. Changes in the law should be made so that participants in the Safe-at-Home program may not be compelled to disclose addresses or other personally identifiable information in open court and may be required to release such information only to the judge.
5. Changes should be made that would allow, in *any* proceeding where child abuse or neglect is at issue, the hearsay statements of young children who make an out-of-court statement about abuse to an adult other than the offender.  
Current law permits introduction of these out-of-court statements when the statement is made close in time to the event (under the excited utterance rule) or – in criminal and Child In Need of Assistance hearings – when it is made to certain professionals (under the Tender Years statute).
6. Consider additional methods of collection of firearms from domestic violence perpetrators, such as a search of residence and vehicles.
7. Education of judges dispelling the notion that domestic violence allegations are attempting to gain an advantage in custody disputes.
8. Expanding universal screening to clinics and other healthcare areas.
9. Mental-health providers (who are mandatory reporters under Md.Code Ann., Fam.Law § 5-704) who report suspected abuse of a child should automatically be allowed to testify in any proceeding in which the matter of that child's abuse is at issue.  
Currently, in custody and child-access cases a Nagle v. Hooks Attorney is appointed to decide whether to assert or waive the child's privilege of confidentiality with a psychiatrist, psychologist and/or social worker. If the child's privilege is waived, the health care provider may be allowed to testify and release confidential treatment records. If not, then crucial evidence of abuse is withheld from the judge.

There is no such provision for a Nagle v. Hooks attorney when the mental-health provider subsequently testifies in a criminal trial, an abuse proceeding, or a Child in Need of Assistance hearing. It is only in a custody proceeding where this critical evidence may be withheld from the judge, even though any privilege has been effectively waived by virtue of the mental-health provider having reported it to the authorities.

Therefore, Md.Code Ann., Fam.Law § 5-704 should be modified so that a mental-health provider who reports suspected abuse under that statute will be subsequently allowed to testify in any subsequent proceeding where the matter of that child's abuse is at issue, including custody/ child-access cases and protective order hearings.

10. Enhance IT infrastructure to collect metadata on lethality assessments. Information on domestic violence court case filings and outcomes is essential for local and state policymakers and service providers. The Administrative Office of the Courts should provide detailed information annually by county on a range of issues including: the number and content of District and Circuit Court protective orders filed and specific outcomes, including such details as whether abuser counseling, emergency family maintenance payments, and visitation arrangements are included in final protective orders which are granted and what percentage of parties have legal counsel. Detailed information on criminal convictions in domestic violence cases is also critical. The lack of currently available information hampers effective decision-making on domestic violence policy issues critical to the safety of survivors and their children in Maryland.
11. The Maryland State Department of Education should encourage, if not require, county school systems to provide staff representation on local Domestic Violence Fatality Review Teams (DVRFTs) and local Domestic Violence Coordinating Councils (DVCC).
12. Encourage workplaces to train their employees to identify and respond to domestic violence, including warning signs, local domestic violence resources, and protection for co-workers.
13. The Maryland Administrative Office of the Courts, through the Judicial Institute of Maryland, should require judges to receive training on the dynamics of domestic violence, trauma, and domestic violence risk factors.
14. A requirement that schools provide domestic violence curriculum. This should be more substantive than simply a component of a "health class" (Concern was raised that while each community is different and that a "standard" curriculum may not be appropriate the feeling is that the schools are only doing domestic violence education "on paper").
15. Develop an exception to the privacy laws so that mental health multi-disciplinary teams are permitted to exchange information.
16. Enact legislation to amend the first degree assault statute to include strangulation or create a felony statute prohibiting acts of strangulation.

17. Ensure that all applications for interim protective orders that are denied by a court commissioner are reviewed promptly by supervisory staff and a member of the judiciary to determine if the proper legal standard has been applied.
18. Require health care providers to screen for domestic violence by making intimate partner violence questions required fields in electronic charts and requiring that the electronic record automatically re-populate positive intimate partner violence screens on subsequent visits. This recommendation continues to be discussed by the Maryland Health Care Coalition Against Domestic Violence.
19. The Maryland Annotated Code, which prohibits a child from having access to firearms, should be amended to include a potential period of incarceration for an adult who allows a child access. The current penalty carries a potential \$1,000 fine.

***Budgetary Recommendations:***

1. A fund of \$24,000 (\$1,000 for each county task force) to launch local domestic violence prevention initiatives.
2. Financial supports for the "isolated" domestic violence victim. (It was discussed that many domestic violence victims are trapped because they have no money or place to go or anything of that nature because they have been controlled by their abuser).
3. Increase and improve access to resources and services for people with limited English proficiency and disabilities.
4. Public service campaign utilizing social media (focus on emotional, and not just physical, abuse).
5. Addressing the lack of supervised visitation centers.
6. Multi-language, low literacy materials with emergency numbers should be placed in every female bathroom in all three County courts. Bathrooms are sometimes the only place a victim is allowed to be out of her abuser's presence. The Circuit Court website's information on domestic violence should also be available in Spanish and Korean.
7. Conduct a Statewide and Community-based Awareness and Education Campaign, highlighting information, resources, and services available to victims and their families.
8. The State should develop a 1-2 minute video that shows and explains the signs of healthy relationships that can be shown and used by students, staff, hospitals, employers, etc.
9. Offer a 24-7 Statewide number on a shared platform where someone can seek assistance related to domestic violence, child abuse, public assistance, etc.

10. State or county courts might consider creating a video – in Spanish as well as English – which could be played at the start of each day’s protective order docket, providing a succinct overview of the process and participants’ legal options.
11. A website for programs to sign-up to establish their own domestic violence work group.
12. Develop a video, in English and Spanish, about the process of obtaining an interim protective order as well as available resources and options for victims and show the video in court commissioners’ offices.
13. Establish a funding resource to assist victims fleeing from their homes due to imminent danger. This fund could be modeled after a program in the State’s Attorney’s offices that provides emergency assistance to victims of crime.
14. Provide more counseling services for children living in abusive homes.
15. Increase the number of domestic violence shelter beds available to victims in Maryland. As outreach efforts to domestic violence victims increases and the ability of first responders to identify high risk victims improves, the need for additional domestic violence safe housing and services will be paramount.

***Policy Recommendations:***

1. Add service providers, advocates, law enforcement officers, prosecutors, court personnel, substance use personnel, health care providers, child welfare workers, faith leaders, and other allied professionals and service providers to your list of those trained by the MNADV.
2. Continuation of the Task Force as a larger more inclusive body in a non statutory role continuing the conversation and work.
3. Encourage pediatric providers to routinely screen their patients and patients’ caregivers for firearm ownership.
4. The Governor’s Office of Crime Control & Prevention (GOCCP) should prioritize funds for training on topics such as the dynamics of domestic violence, trauma, and lethality risk factors for allied professionals, including social workers, mental health professionals, faith leaders, and culturally specific service providers.
5. Bailiffs should always be present in waiting areas, both before the start of court sessions and while victims are waiting for their orders in the clerk’s office after hearings.

6. In all hearings in which final protective orders are granted, judges should inform respondents that they must turn in any firearms they own or possess, and that it is a crime not to do so.
7. Judges should always use the “staggered exit/victims first” strategy during protective order dockets. By delaying the respondent's exit by just 15 minutes, the court ensures that the petitioner can get out of the courthouse and to his or her transportation safely.
8. Judges should more actively engage petitioners who ask to dismiss their orders. Judges should ask each victim if they have been coerced and if they feel safe. Judges should make clear to petitioners that they can return to court and file again anytime they feel they are in danger. In particularly serious cases, judges should refer victims to an advocate before their final decision to drop their petition or before they leave the courthouse.
9. Judges should strengthen the deterrent power of protective orders by always informing respondents that violating their order is a crime that may result in imprisonment. Judges should encourage victims to report all violations.
10. Judges should take a moment when a final protective is granted to clearly describe the provisions of the order and to ask both parties if they understand what the order requires and what it prohibits. They should also tell the petitioner how to report any violations.
11. Maryland court administrators should reevaluate court design and procedure to assess whether there are ways to provide separate entrances for all victims that come to court.
12. No victim should ever leave a courthouse without being made aware of on-site services, the county's Family Justice Center (where applicable), and hotline phone numbers.
13. Respondents should be made aware of their right to choose between consenting to an order or having a hearing in a neutral manner. Respondents should be given an opportunity to ask questions to clarify their options.
14. Strengthen follow up with the respondent to ensure the court's expectations to attend an abuser intervention program have been met and report progress back to the court. Inform appropriate agencies that a referral has been made to them by the court. Clarify the wording on the protective order or provide a reference in the Judges' bench book that differentiates “anger management” from “abuser intervention” so the appropriate program referral is provided.
15. The firearm restriction should be described to the petitioner when the respondent is absent, so that he or she understands how the law works and may be able to facilitate turning in a gun. Judges should consider asking either party if there are firearms in the home and should relay all information about gun possession to the Sheriff's Office.

16. Consider proposing programs that provide specialized counseling services and support groups to newly separated service veterans.
17. Providing specialized support to teachers about domestic violence.
18. Recommendation of more publication and explanation of the hardship waivers for child support. (Discussed how frequently the trigger for violence is the child support obligation).
19. Create a training module/curriculum/program to provide guidance and support for young men after a break up, with a special focus on men who have previously perpetrated acts of violence against their partners and to teach new coping strategies.
20. Donations of nights of stay from hotels, sororities, etc. for those needing to leave their abuser without a place to stay.
21. Enhance the public's awareness and knowledge of ways bystanders can assist victims of domestic violence. Recommendations include targeted community outreach and public awareness campaigns.
22. Targeted outreach and education about domestic violence should be made to seniors.
23. The Maryland Department of Education should provide training to employees, such as school nurses, counselors, teachers, and support staff, on identifying victims of domestic violence and sexual assault (both direct victims and secondary victims such as child witnesses). Training curricula should also include information on connecting those victims to community-based domestic violence service providers.
24. The Maryland Department of Public Safety and Correctional Services and the Maryland Police Correctional and Training Commissions should include education on strangulation in the core academy curriculum for Maryland law enforcement officers.
25. The Maryland Department of Public Safety and Correctional Services and the Maryland Police Correctional and Training Commissions should include working with trauma victims, especially victims of domestic violence and sexual assault, in the core academy curriculum for Maryland law enforcement officers. Training on vicarious trauma management and burnout prevention for officers should also be included in the curriculum.
26. Establish workplace violence committees in hospitals to proactively assess staff for domestic violence and provide assistance as needed in all hospital units.
27. Flag medical charts to alert healthcare providers of patients who have been identified as victims of domestic violence so they may receive more intensive screening, appropriate

intervention, confidential treatment, documentation and links to hospital and community services.

28. Increase domestic violence services available in healthcare settings. Domestic violence victims, especially victims from minority communities, use healthcare services at far greater rates than traditional domestic violence programs. Identifying and providing services to victims in healthcare settings should be a priority in Maryland.
29. Increase screening and intervention for domestic violence before, during, and after pregnancy. Homicide is the leading cause of pregnancy-associated death; the majority of these deaths are perpetrated by a current or former intimate partner. In 2015, the Maryland Maternal Mortality Review Committee issued recommendations to obstetricians and gynecologists to screen and treat or refer appropriately for intimate partner violence, substance use, and depression.

APPENDIX A: Chapter 606, Acts of 2016

LAWRENCE J. HOGAN, JR., Governor

Ch. 606

Chapter 606

(Senate Bill 1143)

AN ACT concerning

~~Prince George's County~~ Neshante and Chloe Davis Domestic Violence  
Prevention Task Force

FOR the purpose of establishing the Neshante and Chloe Davis Domestic Violence Prevention Task Force; providing for the composition, chair, and staffing of the Task Force; prohibiting a member of the Task Force from receiving certain compensation, but authorizing reimbursement of certain expenses; requiring the Task Force to study and make recommendations regarding certain matters; requiring the Task Force to report its preliminary findings to the Governor and the General Assembly on or before a certain date; ~~requiring the Task Force to meet with the Prince George's County Delegation to the General Assembly to discuss its preliminary findings within a certain number of days after reporting to the Governor and the General Assembly;~~ requiring the Task Force to report its final findings and recommendations to the Governor and the General Assembly on or before a certain date; providing for the termination of this Act; and generally relating to the Neshante and Chloe Davis Domestic Violence Prevention Task Force.

SECTION 1. BE IT ENACTED BY THE GENERAL ASSEMBLY OF MARYLAND,  
That:

(a) There is a Neshante and Chloe Davis Domestic Violence Prevention Task Force ~~in Prince George's County.~~

(b) The Task Force consists of the following members:

(1) a member of the Senate of Maryland ~~representing Prince George's County,~~ appointed by the President of the Senate;

(2) a member of the House of Delegates ~~representing Prince George's County,~~ appointed by the Speaker of the House;

(3) ~~the State's Attorney for Prince George's County~~ a State's Attorney, or the State's Attorney's designee; and

(4) the following members, appointed by the Governor:

(i) a representative of ~~the Prince George's County Department of Health~~ a county department of health;

(ii) a representative of ~~the Prince George's County Department of Social Services~~ a county department of social services;

- 1 -

(2) study existing legal, behavioral health, and family support policies, procedures, and practices to ascertain existing issues and identify resources needed to improve the delivery and effectiveness of domestic violence prevention and family support services;

(3) study ways to further engage and educate community stakeholders to be better informed and more engaged in identifying and preventing domestic violence in the community;

(4) study the ways individuals, families, and the community at large can better identify, report, and defend against domestic violence; and

(5) develop policy recommendations to improve the ability of State and local government, community stakeholders, families, and individuals to identify and prevent domestic violence in ~~Prince George's County~~ Maryland.

(h) (1) ~~(i)~~ On or before September 1, 2016, the Task Force shall report its preliminary findings to the Governor and, in accordance with § 2-1246 of the State Government Article, the General Assembly.

~~(ii) Within 60 days of reporting its preliminary findings under subparagraph (i) of this paragraph, the Task Force shall meet with the Prince George's County Delegation to the General Assembly to discuss the report.~~

(2) On or before December 1, 2016, the Task Force shall report its findings and recommendations to the Governor and, in accordance with § 2-1246 of the State Government Article, the General Assembly.

SECTION 2. AND BE IT FURTHER ENACTED, That this Act shall take effect June 1, 2016. It shall remain effective for a period of 1 year and, at the end of May 31, 2017, with no further action required by the General Assembly, this Act shall be abrogated and of no further force and effect.

**Approved by the Governor, May 19, 2016.**

(iii) a representative of ~~the Prince George's County Department of Family Services~~ a county department of family services;

(iv) a member of ~~the Prince George's County Domestic Violence Coordinating Council~~ Leaving Abuse, Supporting Everyone, Restoring Survivors, Inc. (LASERS);

(v) a ~~judge or magistrate with the Family Division of the Prince George's County Circuit Court~~ representative of the Domestic Violence and Sexual Assault Center at Dimensions Healthcare System;

(vi) two private behavioral and mental health services providers;

(vii) two representatives of the faith community;

(viii) two representatives of men's organizations;

(ix) two family members of victims of domestic violence;

(x) four members of the domestic violence prevention and victim's advocacy community; and

(xi) a representative of the Prince George's County Family Crisis Center.

(c) The Governor shall designate the chair of the Task Force.

(d) The chair may appoint a vice chair, an executive committee, and subgroups or subcommittees from among the members of the Task Force.

(e) ~~The Prince George's County Department of Family Services, the Prince George's County Health Department, and the Prince George's County Department of Social Services~~ Department of Human Resources shall provide staff for the Task Force.

(f) A member of the Task Force:

(1) may not receive compensation as a member of the Task Force; but

(2) is entitled to reimbursement for expenses under the Standard State Travel Regulations, as provided in the State budget.

(g) The Task Force shall:

(1) study the effectiveness of current intervention strategies and explore new interventions that might strengthen efforts to prevent domestic violence;



Faith Community	Rev. Anne Weatherholt
Men's Organization	Joseph Jones Jr.
Men's Organization	Ronald Nix
Family Member of Domestic Violence Victim	Neshanna Turner
Family Member of Domestic Violence Victim	Georgia Frazier
Domestic Violence Prevention and Victim's Advocacy Community	Asha Reynolds
Domestic Violence Prevention and Victim's Advocacy Community	Michael Cohen
Domestic Violence Prevention and Victim's Advocacy Community	Lisa Nitsch
Domestic Violence Prevention and Victim's Advocacy Community	Paul Griffin
Prince George's Co. Family Crisis Center	Jacqueline Rhone
Chair	Senator C. Anthony Muse
House of Delegates	Delegate Vanessa Atterbeary