

Medical Forensic Response for Nurses in a Educational Setting

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Assault and Abuse

Considerations Before You Have to Act

- Develop relationships
 - LE
 - Local DV and SA service providers
- Know the Mandatory reporting law
 - Nurses may not abdicate obligation
- Know your district or house policy
 - Policy regarding first response?
 - Who, what, when, where
 - Who gets called first CPS? LE?
 - When are the parents notified?
 - Is there someone designated to do this?
- Be proactive on policy and curriculum development

What is the Role of the School Nurse?

- Objective?
- Employee?
- Student advocate?
- Investigator?
- Child interview specialist?
- Referent?
- Referee?

Common Presentations

- Odd/concerning behaviors
- Blatant sexualized behaviors
 - Pre pubescent
 - Post pubescent
- Obvious injuries
 - Facial, soft tissue, patterns
- Medical concerns
- Neglect concerns
- Suspicious staff behaviors

Disclosures

- Disclosure is a process not an event
- Lack of (adult) knowledge leads to lack of believability
- Core of truth often surrounded by fantasy or lies (listen to the story not the delivery)
- Child accommodation syndrome

Response to Disclosure

- OMG!!!!
- Keep calm
- Avoid dragging the student to talk to every person in the office
 - Taint hearings
- Age dependent but....
 - Don't introduce any information not provided by student
 - Don't grill them
 - "Then what happened, really, is there anything else you can think of I should know about?"
- Note not only what the student said but what you said...write it down ASAP

Purpose of Medical Forensic Assessment

- Documentation
- Opportunity to disclose
- Reassurance
- Injury Assessment
- Health Assessment
- Safety Risk Assessment
- Health Risk Assessment
- Forensic Identification
- Education
- Referrals

Does Every Victim Need a Medical Assessment?

- They need to be triaged and assessed by a SA trained provider
 - 9 year old boy believed he was pregnant
 - 13 year old initial disclosure was touching with hands
 - 15 year old CSA as 5 year old remembered pain and bleeding
 - 2 year old with bumps around his anus
 - Medical exception to hearsay

When Should it be Done

- Ideally within 3 days following last contact for case building
 - Anytime for medical, emotional, clarification, documentation
- If possible it should be done after forensic interview
- However any medical concerns need to be addressed ASAP
- Often safety concerns result in a medical assessment

Where?

- Under 7 days post contact the child should go to a local Emergency Department
- Most family and pediatric providers will not do a medical assessment for abuse
- After 7-30 days an appointment is made at the Intervention Center

Who Performs the Assessment?

- Forensic Nurse Specialists/Nurse Practitioners
 - Sexual Assault Nurse Examiners
 - Death Investigations
 - Domestic Violence
 - Crime Scene Investigations
 - Correctional Facilities
 - Offender DNA collection
 - Child Abuse
 - Child Methamphetamine exposure

Sexual Assault Nurse Examiners

- Specially trained registered nurses/nurse practitioners
- Advanced training in forensic identification, collection, preservation, and packaging
- Advanced training in physical assessment and interviewing
- Can sit the national certification examination

Assessment

- History
- Physical
 - Age specific
- Forensic Assessment
- Safety and Health Risk Assessment
- Advocacy Support
- Case specific treatment
 - Antibiotics, ECP, HBV

Forensic Considerations

- Even if the victim has showered and changed clothes there remains a good chance of DNA collection
- Consider soiled clothes, blankets, hay bales, car seats, diapers, wipes, sanitary pads, tampons, condoms, and diaphragms
- Discourage eating, drinking, defecating, douching, prior to exam
- Save any toilet tissue paper if first void

Forensics *continued*

- Secure any items, biological specimens, environmental debris, clothing, etc in paper containers if possible
- Plastic bags increase the production of bacteria which love to eat the DNA proteins
- If necessary place into paper then place into plastic

Chain of Custody

- Any history taken or disruption of the scene of the crime necessitates chain of custody documentation with possible subpoena

Who Arranges the Assessment?

- Anyone can send and accompany a victim to the ED
 - Exam paid for by CVC
- Scheduled Appointments
 - Usually referred by law enforcement, CPS, medical providers, mental health counselors, school personnel, clergy
 - Teens and adults can self refer

Medical Consent

- Reproductive Health – any age
 - ECP
 - Birth control
 - Abortion
- STD assessment and treatment - >14

- Mental Health- >13

Title IX

- May need to have a Title IX conference with school officials and parents to formulate a plan
 - Designate a point person for the student to go to emergently
 - What if alleged offender and patient goes to same school
 - Addressing sexualized behavior
 - Addressing hallway gossip

School Sexualized Behaviors

- On site sexual activity
 - Social impact of oral sex/hand jobs
- Not quite crossing the line behavior and clothing
- Verbalizations (harassment)
- Electronic porn infractions
 - Cell phones/cameras/email
 - Myspace/ facebook/ telephone chats
- Off site sexual activity
 - School activities or groups

Prevention

- Set School Policy
- Legislative activism
- Parent education (variety of methods)
 - Behavior expectations
 - Offender education
- Student education
 - Know developmental curricula
- Partnerships


