

Specialized Training: PREA Medical and Mental Care Standards Notification of Curriculum Utilization December 2013

The enclosed *Specialized Training: PREA Medical and Mental Care Standards* curriculum was developed by the National Commission on Correctional Health Care (NCCHC) as part of contract deliverables for the National PREA Resource Center (PRC), a cooperative agreement between the National Council on Crime and Delinquency (NCCD) and the Bureau of Justice Assistance (BJA). The PREA standards served as the basis for the curriculum's content and development with the goal of the *Specialized Training: PREA Medical and Mental Care Standards* curriculum to satisfy specific PREA standard requirements.

It is recommended that the *Specialized Training: PREA Medical and Mental Care Standards* curriculum be reviewed in its entirety before choosing which modules to use. Any alterations to the original materials must be acknowledged during their presentation or requires removal of the PRC and NCCHC logos.

BJA is currently undergoing a comprehensive review of the enclosed curriculum for official approval at which point the BJA logo may be added.

Note: Utilization of the enclosed curriculum, either in part or whole, does not guarantee that an auditor will find a facility "meets standard". Rather, an auditor will take into consideration the curriculum used as part of their overall determination of compliance.









Module 4:

The Medical Forensic Examination and Forensic Evidence Preservation

Notice of Federal Funding and Federal Disclaimer—This project was supported by Grant No. 2010-RP-BX-K001 awarded by the Bureau of Justice Assistance. The Bureau of Justice Assistance is a component of the Office of Justice Programs, which also includes the Bureau of Justice Statistics, the National Institute of Justice, the Office of Juvenile Justice and Delinquency Prevention, the Office for Victims of Crime, and the Office of Sex Offender Sentencing, Monitoring, Apprehending, Registering, and Tracking. Points of view or opinions in this document are those of the author and do not necessarily represent the official position or policies of the U.S. Department of Justice nor those of the National Council on Crime and Delinquency (NCCD), which administers the National PREA Resource Center through a cooperative agreement with the Bureau of Justice Assistance.

Module Objectives

At the end of the module, trainees will be able to:

- 1. Conceptualize ways to assure that the PREA standard for access to the medical forensic exam is met
- 2. Give examples of ways to meet the PREA standard for access to trained victim advocates
- 3. Verbalize some ways to meet the PREA standard for assuring that physical evidence is not destroyed
- 4. Recognize standard health care follow-up for the inmate who has experienced sexual abuse





Protocol §115.21

(a) To the extent the agency is responsible for investigating allegations of sexual abuse, the agency shall follow a uniform evidence protocol that maximizes the potential for obtaining usable physical evidence for administrative proceedings and criminal prosecutions





Protocol §115.21

(b) The protocol shall be developmentally appropriate for youth where applicable, and, as appropriate, shall be adapted from or otherwise based on the most recent edition of the U.S. Department of Justice's Office on Violence Against Women publication, "A National Protocol for Sexual Assault Medical Forensic Examinations, Adults/Adolescents," or similarly comprehensive and authoritative protocols developed after 2011





Exam Access §115.21

(c) The agency shall offer all victims of sexual abuse access to forensic medical examinations, whether on-site or at an outside facility, without financial cost, where evidentiary or medically appropriate. Such examinations shall be performed by Sexual Assault Forensic Examiners (SAFEs) or Sexual Assault Nurse Examiners (SANEs) where possible. If SAFEs or SANEs cannot be made available, the examination can be performed by other qualified medical practitioners. The agency shall document its efforts to provide SAFEs or SANEs



Who does the exam?

- SANE
- SAFE
- SAE
- Emergency Room Staff





The Medical Forensic Exam

Primary purpose:

- 1. Health care
- 2. Treatment of patient
- 3. Collection of evidence





Common Misperceptions About the Exam

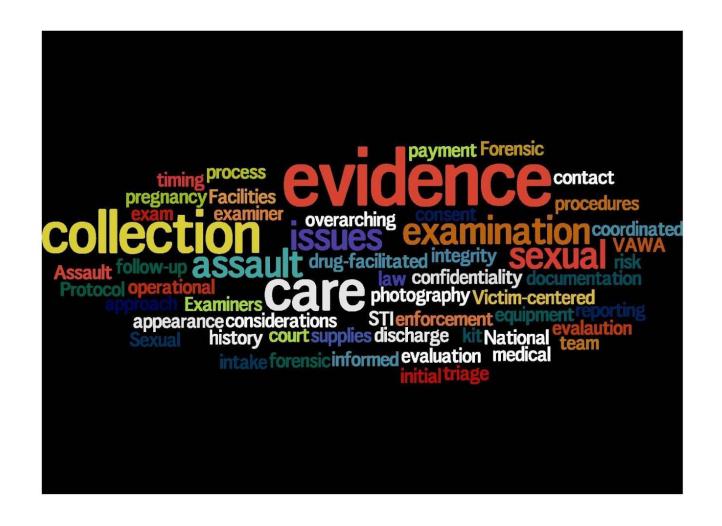
What do you think?

- How does an exam work?
- What happens during an exam?
- What can we learn?





The Medical Forensic Examination





Preparing the victim

Psychological

- Advocacy
- Options
- Exam prep

Physical

- Minimize evidence loss
- Notification of custodial staff
- Notification of exam site





Examination Options

Exam Site- In facility

Examiners who are on site, or trained SANE/SAFE respond to facility for exam

OR, if the patient elects to NOT be transferred for exam, medical concerns, and treatment should be offered at facility



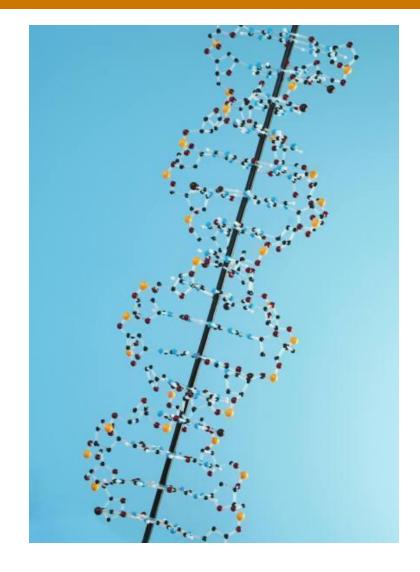


Forensic Evidence

Principles

Identification

Preservation

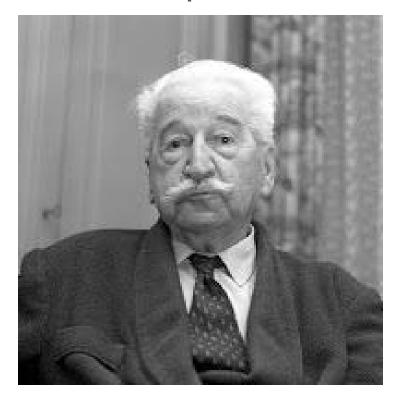






Locard's Principle

When a person or object comes into contact with another person or object, there exists a possibility that an exchange of material will take place







Evidence Types

Physical

- Any object that can connect an offender to a crime scene
- Unique types- products of conception, tampons, condoms

Biological

Evidence which contains DNA, is a type of physical evidence:

- Trace
- Hair
- Semen
- Saliva
- Serological





Chain of Custody

Chain of Custody Form						
Patient Name: Patient ID#:						
	Evidence Includes: Sexual Assault Evidence Kit					
	☐ Clothing (Number of Bags)					
		OES Report				
		Forensic Records (pages)				
		☐ Photographic Evidence ☐ Digital Photos (Num	ber	of Photos) #of discs	3	
		Other:				
Date	Time	From (Print name & sign)	2	To (Print name & sign)	Date	Time
Sign:				Sign:		
Date	Time	From (Print name & sign)		To (Print name & sign)	Date	Time
Sign:				Sign:	<u> </u>	

Minimizing Evidence Loss §115.64

- (3) If the abuse occurred within a time period that still allows for the collection of physical evidence, request that the alleged victim not take any actions that could destroy physical evidence, include as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking or eating and
- (4) If the abuse occurred within a time period that still allows for the collection of physical evidence, ensure that the alleged abuser does not take any actions that could destroy physical evidence, include as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking or eating





§115.64- Minimizing Evidence Loss

Victim

Request they refrain from:

- Washing
- Shower
- Changing
- Urine
- Defecating
- Drinking/Eating/Smoking

Perpetrator

Ensure that the alleged abuser refrains from:

- Washing
- Shower
- Changing
- Urine
- Defecating
- Drinking/Eating/Smoking
- Injuries may contain potential evidence- so may need to be collected at an exam site

CENTER



Minimizing Evidence Loss

Clothing

If needs to be cut away do not cut through any wound areas

DNA may be present on clothing for long periods of time, therefore original clothing worn at the time of the abuse may be helpful

Specimens should be placed in paper bags (not plastic) and sealed

Other Materials

Urine or feces may be collected by the patient and transported with them to the facility

Tampons, pads, condoms can be placed in sterile container and transported with corrections staff



Minimizing Evidence Loss

How would you respond...

- Inmate is required to change before transfer
- Perpetrator has injuries
- Inmate comes to clinic nude after the abuse
- Inmate has extensive physical trauma





Time Frames for Evidence Collection





What to Include in a Discharge Summary

- Any testing that was done
- Any medications given usually for GC/Chlamydia and Trichomoniasis
- Any treatment rendered for injuries
- Medical or mental health follow-up
- Treating practitioner
- Advocacy contact information
- Follow-up care timing/tests



Follow-up Steps and Available Resources

PREA Standard §115.83

Mental health should offer on-going services and monitor patient's adjustment

Follow-up should include more than just medical care including additional shots/medications as well as counseling



For More Information

For more information about PREA, contact the *National PREA Resource Center*, <u>www.prearesourcecenter.org</u> or 1-800-306-6223

For more information about the medical forensic exam, contact the *International Association of Forensic Nurses*, Sexual Assault Forensic Examiner Technical Assistance (SAFEta), www.safeta.org or 1-877-819-SART (7278).

For questions about advocacy, developing trauma-informed response protocols, and common reactions of survivors contact *Just Detention International*, www.justdetention.org, 213-384-1400.





