Forensic Compliance Update
Where do we stand in 2022?

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Acknowledgement of OVW Support

This webinar is presented as a collaborative presentation of the IAFN and EVAWI. The IAFN's SAFEta Project is a cooperative agreement between the U.S. Department of Justice, Office on Violence Against Women and the International Association of Forensic Nurses (#2011–TA–AX–K021). EVAWI’s Forensic Compliance Project is also a cooperative agreement between the OVW and EVAWI (#2009–TA–AX–K003).

The opinions, findings and information presented in the webinar represent the views of the author(s), not of the Department of Justice or the Office on Violence Against Women.

Presenters

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Background

Forensic Compliance: 2 Prongs

› Access to medical forensic exams for victims of sexual assault (SA)
  • Payment
  • Participation

Payment

› SA victims must have access to exam without paying (free) – or with full reimbursement (if they do pay out-of-pocket costs)
  • VAWA 2005 does not specify, however, what agency or entity will cover these costs
  • State must certify that these costs are covered
Participation

- SA victims must have access to exam without being required to "participate in the criminal justice system or cooperate with law enforcement"
  - OW has decreed that medical mandated reporting requirements do not violate this provision – because victims do not have to talk with police
  - No other guidance for what constitutes "participation" in the criminal justice system

VAWA 2005: Specific Language

"Nothing in this section shall be construed to permit a State, Indian tribal government, or territorial government to require a victim of sexual assault to participate in the criminal justice system or cooperate with law enforcement in order to be provided with a forensic medical exam reimbursement for charges incurred on account of such an exam, or both."
42 USC § 3796gg-4 (b)(3)(d)(1)

Why?

- Increase Justice: To increase reporting and victim access to the criminal justice system – and to improve case outcomes in CJS
- Improve Healthcare: To improve victim access to health professionals – and to improve physical and psychological outcomes
- Exam is critical access point for many victims

State Requirements

- States must be able to certify, in good faith, that they are in (ongoing) compliance with the statutory eligibility requirements within VAWA
- Deadline for compliance was January 5, 2009
- If state could not certify – or if there is a breakdown in the system (e.g., victims denied exams) – they could lose VAWA STOP funds

First Step for Communities

- Community self-assessment tool
  - Available at TA section of EVAWI website
  - Series of questions to identify many of the challenges and decisions that need to be made
- Not models of compliance – Decision points
**Decision Points**

- **Payment mechanisms:**
  - Who will pay for exams? What is the process?
  - What components are covered? Does it vary?
  - Does payment require identifying info for victim?
  - Will there be special requirements or criteria?
  - What happens if the number of exams increases?
  - Will jurisdictions “send victims” to other program?

- **Evidence issues:**
  - Who provides the kits for the exam facility?
  - What evidence is collected? Same in reported cases?
  - How long will evidence be stored? How secured?
  - How will chain of custody be documented?
  - How will evidence be tracked and linked with cases if a victim does later decide to report to LE?
  - When will kits be destroyed? Will victims be notified?

- **Information for victims:**
  - Who will explain reporting options to victims?
  - What specific information will be provided?
  - Will it depend on access point (e.g. hotline, hospital)?
  - Will victims be informed of option upfront? Or only if they are not able or unwilling to talk to police?
  - Can written materials be developed to send home?
  - Does someone follow-up with victims to see if they are able to convert to standard report later?

- **And the million dollar question is...**

  *Is there any realistic possibility that cases will be successfully investigated and prosecuted? What can we do to make this option a reality?*
Research on SAFE Payment Mechanisms

Available soon: Statutory research on SAFE payment mechanisms and related issues
- Initiated by Dr. Lisa Newmark and students at George Mason University
- Completed by Jessica Katz, Esq. with Charlene Whitman, Attorney Advisor at AEquitas: The Prosecutors’ Resource on Violence Against Women
- Contributions from EVAWI, with OVW grant support

Research currently being conducted to document implementation of SAFE payment
- By Dr. Janine Zweig of the Urban Institute – Dr. Lisa Newmark at George Mason University – and Sally Laskey at Pennsylvania Coalition Against Rape
- Preliminary findings presented at American Society of Criminology, November 2011

Most commonly reported funding sources
- Victim compensation funds (32)
- Victim’s insurance (12)
- Public benefits (12)
- Other state funds (which may include STOP funds) (10)
- Other local funds (10)

Source: Sexual Assault Forensic Exam Payment Study. Presentation given at the American Society of Criminology, November 2011. By Lisa Newmark, Megan Denver, Darakshan Raja, and Janine Zweig.

In some states, the method of payment is different based on whether the victim participates in the criminal justice system
- In Texas, for example, exams are typically paid for by the law enforcement agency with jurisdiction
- If the victim is unsure about participating in the CJS, exam is paid by Texas Department of Public Safety

Survey conducted with 496 webinar registrants
- Did not ask disciplines of survey respondents
- But likely similar to webinar registrants generally

1st Question: “Where do you work?”
## Survey Participants by State / Territory

<table>
<thead>
<tr>
<th>State</th>
<th>Participants</th>
</tr>
</thead>
<tbody>
<tr>
<td>Alaska</td>
<td>6</td>
</tr>
<tr>
<td>Alabama</td>
<td>5</td>
</tr>
<tr>
<td>Arkansas</td>
<td>3</td>
</tr>
<tr>
<td>Arizona</td>
<td>12</td>
</tr>
<tr>
<td>California</td>
<td>34</td>
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<td>Colorado</td>
<td>25</td>
</tr>
<tr>
<td>Connecticut</td>
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</tr>
<tr>
<td>District of Columbia</td>
<td>5</td>
</tr>
<tr>
<td>Delaware</td>
<td>2</td>
</tr>
<tr>
<td>Florida</td>
<td>17</td>
</tr>
<tr>
<td>Georgia</td>
<td>8</td>
</tr>
<tr>
<td>Hawaii</td>
<td>3</td>
</tr>
<tr>
<td>Iowa</td>
<td>6</td>
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<tr>
<td>Idaho</td>
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</tr>
<tr>
<td>Illinois</td>
<td>19</td>
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<td>Indiana</td>
<td>10</td>
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<tr>
<td>Kansas</td>
<td>6</td>
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<tr>
<td>Kentucky</td>
<td>4</td>
</tr>
<tr>
<td>Louisiana</td>
<td>2</td>
</tr>
<tr>
<td>Massachusetts</td>
<td>1</td>
</tr>
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<td>Maryland</td>
<td>12</td>
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<tr>
<td>Maine</td>
<td>1</td>
</tr>
<tr>
<td>Michigan</td>
<td>17</td>
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<td>Minnesota</td>
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<td>Missouri</td>
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<td>Mississippi</td>
<td>17</td>
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<tr>
<td>Montana</td>
<td>2</td>
</tr>
<tr>
<td>North Carolina</td>
<td>18</td>
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<tr>
<td>North Dakota</td>
<td>3</td>
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<td>Nebraska</td>
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<td>New Hampshire</td>
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<td>New Jersey</td>
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<tr>
<td>New Mexico</td>
<td>7</td>
</tr>
<tr>
<td>Nevada</td>
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<tr>
<td>New York</td>
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<tr>
<td>Ohio</td>
<td>20</td>
</tr>
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<td>Oklahoma</td>
<td>9</td>
</tr>
<tr>
<td>Oregon</td>
<td>11</td>
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<tr>
<td>Pennsylvania</td>
<td>47</td>
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<td>Rhode Island</td>
<td>1</td>
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<td>South Carolina</td>
<td>9</td>
</tr>
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<td>South Dakota</td>
<td>3</td>
</tr>
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<td>Tennessee</td>
<td>12</td>
</tr>
<tr>
<td>Texas</td>
<td>38</td>
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<td>Utah</td>
<td>1</td>
</tr>
<tr>
<td>Virginia</td>
<td>12</td>
</tr>
<tr>
<td>Vermont</td>
<td>1</td>
</tr>
<tr>
<td>Washington</td>
<td>11</td>
</tr>
<tr>
<td>Wisconsin</td>
<td>9</td>
</tr>
<tr>
<td>West Virginia</td>
<td>8</td>
</tr>
<tr>
<td>Wyoming</td>
<td>6</td>
</tr>
</tbody>
</table>

## Survey: Payment Mechanisms

- **Standard Payment Mechanism**
  - When victim is participating in the CJS

- **Alternate Payment Mechanism**
  - When victim is not (yet) participating
  - Most respondents said they did not have a different payment process for this situation
  - Therefore most people did not respond to questions about an alternate payment process

## Is victim’s insurance billed for costs?

### Standard Payment Mechanism vs. Victim Not (Yet) Participating

<table>
<thead>
<tr>
<th>Yes, automatically</th>
<th>62</th>
</tr>
</thead>
<tbody>
<tr>
<td>No</td>
<td>265</td>
</tr>
<tr>
<td>Yes, if victim consents</td>
<td>57</td>
</tr>
<tr>
<td>I don't know</td>
<td>87</td>
</tr>
<tr>
<td>No responses</td>
<td>25</td>
</tr>
</tbody>
</table>

## Are all costs billed to insurance?

- **All costs billed**
  - 29
- **Only medical costs billed**
  - 32
- **Outside scope of exam**
  - 6
- **Only some costs billed**
  - 12
- **I don't know**
  - 12
- **Other**
  - 13
- **No responses**
  - 381

- **No responses**
  - 466
**Standard Payment Mechanism**

Frequently Asked Questions Regarding STOP Formula Grant Program Forensic Exam Payment Requirement.

- **Does victim pay any costs upfront?**
  - Standard Payment Mechanism: Victim Not (Yet) Participating
    - No: 391
    - Victim pays some costs: 20
    - Victim pays all costs: 2
    - I don’t know: 8
    - No responses: 16

- **Best Practice**
  - Do Not Bill Victims or Insurance
    - OVW has determined that billing insurance may be a compliant practice, IF:
      - Victims are fully reimbursed for all out-of-pocket costs (co-pays, deductibles, etc.), regardless of the victim’s decision about participating in CJS.
      - The state/territory is not using STOP Grant funds to pay for exams if they choose to bill the victim’s insurance (must use another funding source).
    - Technically may be compliant, but not necessarily a victim-centered practice.

- **Best Practice**
  - Safeguards for Billing Insurance
    - If costs are billed to insurance, best to limit medical costs beyond scope of the exam:
      - Safeguards needed for victim privacy and safety.
      - Procedure to prevent co-pay or deductible.
      - Assistance with paperwork and process.

- **Best Practice**
  - If insurance does not pay all costs, who covers them?
    - First standard payment mechanism.
    - Then when victim not (yet) participating.

“*The Office on Violence Against Women strongly encourages States to not require victims to file a claim with their insurers.*”


“There is no other crime where the victim is asked to pay any of the costs for evidence collection.”

Best Practice
Standardized Payment Mechanisms

- Standardized payment encouraged (through the state, territory, or tribe – as opposed to payment through a city or county)
- Careful attention to disqualifying conditions
  - Crime Victim Compensation (e.g., victim “engaged in criminal activity,” or not participating in CJS)

Data Collection
**How many victims convert?**

Estimate based on past 2 years

- 0 - 9
- 10 - 29
- 30 - 49
- 50 - 69
- 70 - 89
- 90 - 109
- 110 - 129
- 130 - 149
- 150 - 169
- 170 - 189
- 190 - 200

**Is data tracked on the following?**

When victim is not (yet) participating (mark all that apply)

- None
- # Exams
- # Converted
- # Prosecuted
- I don’t know
- Other

**Best Practice**

Track Data on Exams / Conversions

- Establish system for tracking data
- Review in ongoing way for possible reforms

**Resources**

- Example of Florida data collection tools
  - Data collected by county, by state SA coalition
  - Reveals vast disparities in number of exams and number that convert to standard report
  - Suggests differences in real practices of counties
  - Available at TA section of EVAWI website
  - Texas Department of Public Safety is also collecting data, but not yet available

**Where are exams performed?**

When victim is not (yet) participating (mark all that apply)

- Hospital (ED)
- Hospital (designated area not ED)
- Health clinic
- Freestanding SAFE facility
- Community-based nonprofit
- I don’t know
- Other
Is the exam modified in any way?
When victim is not (yet) participating (mark all that apply)

- No modification: 319
- Exam is modified: 63
- Different facility: 2
- I don't know: 71

Best Practice
Conduct Full Exam In Same Facility

- Some communities conduct abbreviated exam if victim has not yet decided to participate in CJS (e.g., California)
  - Understandable if cost prohibitive, but not ideal
  - Victims should not be transferred to another facility
  - Not victim-centered, can incur transportation cost
  - First hospital will incur costs for initial exam /triage

Where is the evidence stored?
When victim is not (yet) participating (mark all that apply)

“Evidence is more than bags, boxes and body fluids... It may be someone's only opportunity to seek justice.”


Best Practice
Law Enforcement Stores Evidence

- Ideal is law enforcement storage of evidence
  - LE has facilities, structure for evidence storage
  - SAFE stores evidence in many communities, which requires careful security and safeguards
  - Collaboration with police, prosecutors, crime lab personnel to develop policies
  - Evidence must be admissible in court!
What types of evidence are stored?

When victim is not (yet) participating (mark all that apply)

<table>
<thead>
<tr>
<th>Evidence Type</th>
<th>Count</th>
</tr>
</thead>
<tbody>
<tr>
<td>Evidentiary kit</td>
<td>333</td>
</tr>
<tr>
<td>Form documenting exam findings</td>
<td>290</td>
</tr>
<tr>
<td>Photographs</td>
<td>156</td>
</tr>
<tr>
<td>Liquid blood sample(s)</td>
<td>158</td>
</tr>
<tr>
<td>Liquid urine sample(s)</td>
<td>249</td>
</tr>
<tr>
<td>Clothing, bedding, etc.</td>
<td>79</td>
</tr>
<tr>
<td>I don't know</td>
<td>15</td>
</tr>
<tr>
<td>Other</td>
<td></td>
</tr>
</tbody>
</table>

Best Practice

All Evidence Stored from Exams

- Ideal to store all evidence like standard exam
- Some communities limit evidence in these exams

How long is evidence stored?

When victim is not (yet) participating (mark all that apply)

<table>
<thead>
<tr>
<th>Duration</th>
<th>Count</th>
</tr>
</thead>
<tbody>
<tr>
<td>30 days or less</td>
<td>333</td>
</tr>
<tr>
<td>31 - 60 days</td>
<td>290</td>
</tr>
<tr>
<td>61 - 90 days</td>
<td>156</td>
</tr>
<tr>
<td>91 - 120 days</td>
<td>158</td>
</tr>
<tr>
<td>121 - 180 days</td>
<td>249</td>
</tr>
<tr>
<td>181 - 365 days</td>
<td>79</td>
</tr>
<tr>
<td>More than 365 days</td>
<td>15</td>
</tr>
<tr>
<td>More than 2 years, up to 5 years</td>
<td>12</td>
</tr>
<tr>
<td>More than 5 years, up to 10 years</td>
<td>7</td>
</tr>
<tr>
<td>More than 10 years</td>
<td>6</td>
</tr>
<tr>
<td>Indefinitely</td>
<td>11</td>
</tr>
<tr>
<td>End of criminal proceeding</td>
<td>15</td>
</tr>
<tr>
<td>End of defendant's supervision</td>
<td>11</td>
</tr>
<tr>
<td>Duration of unsolved crime</td>
<td>10</td>
</tr>
<tr>
<td>Earlier of two events (describe)</td>
<td>6</td>
</tr>
<tr>
<td>Other: No consistent practice</td>
<td>1</td>
</tr>
<tr>
<td>I don't know</td>
<td>15</td>
</tr>
<tr>
<td>No responses</td>
<td>15</td>
</tr>
</tbody>
</table>

Best Practice

Store Evidence as Long as Possible

- Up to statute of limitations or indefinitely
- Allows time for victims to decide to participate
- Case may be linked with another one
- Can issue “John Doe” warrants based on DNA
- Texas even entering DNA into databank from cases beyond the statute of limitations
- Practical challenges, but this is the goal

Victim Notification
When are victims notified of timeline for evidence storage/destruction?

- Upfront (at time of exam): 204
- Later (as deadline approaches): 52
- I don’t know: 181
- Other: 27

Who provides this notification?

- Forensic examiner: 182
- Community-based advocate: 105
- System-based advocate: 31
- Law enforcement: 69
- I don’t know: 158
- Other: 24

How are victims notified?

- In-person: 169
- In writing (personally given): 89
- On the phone: 56
- By mail: 28
- Email: 3
- I don’t know: 201
- Other: 19

Best Practice

Victims are Well Informed

- Victims should receive information upfront
  - No single right answer for who or how
  - Provided by various people, in different formats
- Difficult policy decision to notify victim as deadline for evidence destruction approaches
  - Could be years later, unwanted by victim, triggering
  - Victim-centered policy and practice
  - Multidisciplinary collaboration to develop materials

Who provides information about options (exam, reporting, follow-up)?

- Forensic examiner: 312
- Community-based advocate: 248
- System-based advocate: 52
- Law enforcement: 101
- I don’t know: 56
- Other: 11

Victim Information and Options
Best Practice
Develop Informational Materials

- Develop informational materials for victims, to explain exams, reporting, follow-up, etc.
  - Multidisciplinary collaboration
  - Available in victim’s native language
  - Other accessibility considerations

Resources

- Sample informational material for victims and form to document victim options

- Information on options for: medical testing and treatment, forensic evidence collection, reporting to law enforcement, and follow-up contact
- Form to document victim preferences, designed to correspond to informational document
- Documents medical record/patient #, contact information, and law enforcement record #
- Available at TA section of EVAWI website

Who provides follow-up after exam?
When victim is not (yet) participating (mark all that apply)

<table>
<thead>
<tr>
<th>Option</th>
<th>Frequency</th>
</tr>
</thead>
<tbody>
<tr>
<td>None</td>
<td>50</td>
</tr>
<tr>
<td>Forensic examiner</td>
<td>76</td>
</tr>
<tr>
<td>Community-based advocate</td>
<td>244</td>
</tr>
<tr>
<td>System-based advocate</td>
<td>40</td>
</tr>
<tr>
<td>Law enforcement</td>
<td>32</td>
</tr>
<tr>
<td>I don’t know</td>
<td>63</td>
</tr>
<tr>
<td>Other</td>
<td>36</td>
</tr>
</tbody>
</table>

When do victims receive follow-up?
When victim is not (yet) participating (mark all that apply)

<table>
<thead>
<tr>
<th>Time Period</th>
<th>Frequency</th>
</tr>
</thead>
<tbody>
<tr>
<td>Never</td>
<td>39</td>
</tr>
<tr>
<td>Within days of the exam</td>
<td>227</td>
</tr>
<tr>
<td>Weeks after the exam</td>
<td>81</td>
</tr>
<tr>
<td>Months after the exam</td>
<td>21</td>
</tr>
<tr>
<td>Years after the exam</td>
<td>110</td>
</tr>
<tr>
<td>I don’t know</td>
<td>7</td>
</tr>
</tbody>
</table>

Best Practice
Victims Receive Follow-Up Contact

- Victims unlikely to decide to participate in CJS without support and follow-up contact
  - No single right answer for who or how
  - Provided by various people, in different formats
**Best Practice**  
Victims Have Medical Follow-Up

- Best practice for forensic examiner to follow-up, for medical purposes and photographs
- Are costs covered as part of medical forensic exam?

**Documentation and Case Tracking**

**If evidence kit is provided to law enforcement, is it anonymous?**

When victim is not (yet) participating (mark all that apply)

<table>
<thead>
<tr>
<th>Option</th>
<th>0</th>
<th>20</th>
<th>40</th>
<th>60</th>
<th>80</th>
<th>100</th>
<th>120</th>
</tr>
</thead>
<tbody>
<tr>
<td>Not given to law enforcement</td>
<td></td>
<td>25</td>
<td>54</td>
<td></td>
<td></td>
<td></td>
<td>75</td>
</tr>
<tr>
<td>Yes (no identifying info)</td>
<td></td>
<td></td>
<td></td>
<td>58</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Identifying info sealed inside kit</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>70</td>
<td>103</td>
<td></td>
</tr>
<tr>
<td>Identifying info visible on outside</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>83</td>
</tr>
<tr>
<td>I don't know</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>113</td>
</tr>
<tr>
<td>Other</td>
<td></td>
<td></td>
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<td></td>
<td></td>
</tr>
<tr>
<td>No responses</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>13</td>
</tr>
</tbody>
</table>

**Best Practice**  
Protections for Victim Privacy

- Law enforcement provided evidence, but it either remains anonymous, or the identifying information is sealed inside
  - If the victim’s name is included, should include a good faith agreement to not pursue investigation and/or prosecution against the victim’s wishes
- Victims must be provided realistic information about procedures and protections / limits

**Law enforcement documentation?**

When victim is not (yet) participating (mark all that apply)

<table>
<thead>
<tr>
<th>Option</th>
<th>0</th>
<th>50</th>
<th>100</th>
<th>150</th>
<th>200</th>
</tr>
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<tbody>
<tr>
<td>No written report</td>
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<td>25</td>
<td>75</td>
<td>148</td>
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<tr>
<td>Crime report</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Informational report</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Third party report</td>
<td></td>
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<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>I don't know</td>
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<td></td>
<td></td>
</tr>
<tr>
<td>Other</td>
<td></td>
<td>18</td>
<td>176</td>
<td></td>
<td></td>
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</table>

**Best Practice**  
Documentation Stored and Tracked

- No single right answer for LE documentation
  - May be recorded in informational report, BUT
  - Must be stored (at least) as long as evidence
  - Must be able to find report, and link with evidence
  - Requires tracking system, best if anonymous (bar code, anonymous tracking number, pseudonym)
  - Link with other reports naming same suspect?
Prosecution

**Best Practice**
**Produce Converted Cases**
- Spirit of VAWA 2005 only met if converted cases have realistic chance of prosecution
- Develop strategies to overcome defense challenges

**Best Practice**
**Address Evidence-Based Prosecution**
- Multidisciplinary collaboration to address question of evidence-based prosecution
  - Will cases be prosecuted against victim’s wishes?
  - Which ones most likely (intimate partner violence, severe injuries, serial stranger rape, high profile)?
  - Create culture of victim-centered philosophy
  - Provide victims realistic information

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**Major Study Forthcoming**
- Research currently being conducted to document implementation of SAFE payment
  - By Janine Zweig of the Urban Institute – Lisa Newmark at George Mason University – and Sally Laskey at Pennsylvania Coalition Against Rape
  - Funded by National Institute of Justice (NIJ)
- Will provide critically important information to the field on policies, procedures, practices

**Any converted cases prosecuted?**

<table>
<thead>
<tr>
<th>Option</th>
<th>Count</th>
</tr>
</thead>
<tbody>
<tr>
<td>N/A (none converted)</td>
<td>96</td>
</tr>
<tr>
<td>No (none prosecuted)</td>
<td>34</td>
</tr>
<tr>
<td>Yes (at least one)</td>
<td>33</td>
</tr>
<tr>
<td>I don’t know</td>
<td>85</td>
</tr>
<tr>
<td>No responses</td>
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</tbody>
</table>
**Resources**

**EVAW International website**

- **Article from Police Chief magazine**
  - Forensic compliance issues, police procedures
  - Addressed toward audience of police executives

- **Article from Journal of Forensic Nursing**
  - Forensic compliance issues, exams and evidence
  - Addressed toward audience of forensic nurses

**EVAW International is the national Technical Assistance (TA) provider for forensic compliance**

Dedicated section of website for background information and resources:

www.evawintl.org/ForensicCompliance.aspx

**EVAW International website**

- **Community self-assessment tool**
  - Series of questions to identify many of the challenges and decisions that need to be made

- **Article summarizing VAWA 2005 provisions**
  - Forensic exam access, payment, mandated reporting

- **Template materials for anonymous reporting**
  - Information for victims, form to document options
  - Materials for multidisciplinary community protocol

**Resources**

**International Association of Forensic Nurses**

- Website at: www.iafn.org

- Sexual Assault Forensic Examiner Technical Assistance (SAFE TA) Project: at: www.safeta.org

- National Protocol for Sexual Assault Medical Forensic Examinations

**Resources**

**National Sexual Violence Resource Center**

- Website at: www.nsvrc.org

- *Ensuring Sexual Assault Medical Forensic Examinations for All Sexual Assault Victims: A Toolkit for States and Territories* (posted on our website)
Resources
International Association of Chiefs of Police
  • Website at: www.theiACP.org
  • Model Policy and Concepts and Issue Paper on Investigating Sexual Assault
  • Supplemental SA Report Form and Guidelines

Questions?
EVAW International website: www.evawintl.org
SAFEta website: www.safeta.org
Contact information also available at website
  Joanne@evawintl.org
  Kim@evawintl.org
  kimday@iafn.org

Also contact your State Sexual Assault Coalition and STOP Grant Administrator