MINUTES OF THE HOUSE COMMITTEE ON HEALTH AND HUMAN SERVICES.

The meeting was called to order by Chairperson Garry Boston at 1:30 p.m. on February 12, 2002 in Room 210 Memorial Hall

All members were present except:

Representative Patricia Lightner, Excused Representative Gwen Welshimer, Excused

Committee staff present:

Dr. Bill Wolff, Kansas Legislative Research Department

Norman Furse, Revisor of Statute's Office Renea Jefferies, Revisor of Statute's Office

June Evans, Secretary

Conferees appearing before the committee:

Representative Rocky Nichols

Sandy Barnett, Kansas Coalition Against Sexual

and Domestic Violence

Diana Schunn, BSN, R.N., Kansas Sexual

Assault Network

Juliene Maska, Statewide Victims' Rights

Coordinator

Doug Smith, Executive Director, Kansas

Academy of Physician Assistants

Others attending: See Attached Sheet

The Chairman opened the hearing on <u>HB 2744 - Allowing registered professional nurses to</u> conduct sexual assault examinations.

Representative Rocky Nichols stated this was a crime victims bill and he supported the bill. (No testimony)

Sandy Barnett, Kansas Coalition Against Sexual and Domestic Violence, testified as a proponent to <u>HB 2744</u>. Community-based, grass roots programs in Kansas are serving victims of domestic violence and sexual assault. Potentially 453,446 women and 189,725 men in Kansas have been victims of sexual violence. Yet, 70% to 84% of all rapes go unreported. Lack of reporting is attributed to the shame of victimization, fear of retribution, and a belief that nothing can be done: even if the perpetrator is caught, prosecution will fail. These are realistic fears. Perpetrators know their victims in more than 60% of all sexual assaults; the fear of retaliation is real.

KCSDV strongly supports <u>HB 2744</u> that amends the current restriction of physicians only collecting forensic evidence to allow trained nurses to perform these examinations, it simply reconciles Kansas law with current best practices (<u>Attachments 1 & 2.</u>)

Diana Schunn, BSN, R.N., Kansas Sexual Assault Network, stated HB 2744 proposes to recognize R.N.'s as a health profession authorized to examine persons who may be victims of sexual offenses and collect evidence. Specialized training is provided to R.N.'s to further develop the skills needed to provide the most comprehensive and legally sound care to sexual assault patients. The emotional as well as physical and legal needs this patient population presents with, presents the R.N. with the need for advanced information on evidence identification, collection, chain of custody and resource referrals to adequately meet the patients needs. Care of the critically ill or traumatized victim is a responsibility that can not be compromised. Registered Nurses can best serve the needs of society when they can simultaneously recognize and preserve evidence while delivering care to the patient (Attachment 3).

Juliene Maska, Statewide Victims' Rights Coordinator, Office of the Attorney General, stated this bill allows nurses who are specially trained in performing sexual assault evidence collection

CONTINUATION SHEET

MINUTES OF THE HOUSE COMMITTEE ON HEALTH AND HUMAN SERVICES, Room 210, Memorial Hall at 1:30 p.m. on February 12, 2002.

to be able to perform the examination and collection of sexual assault evidence and to be paid by the county to perform such exams.

The crime of sexual assault and rape is devastating for the victim and extremely difficult to the victim to wait several hours for a physician to collect the evidence. If the physician assistants choose to be trained in the examination and collection of the sexual assault evidence we are in agreement to their being included (Attachment 4).

Douglas E. Smith, Executive Director, Kansas Academy of Physician Assistants, asked for an amendment to <u>HB 2744</u> to include physician assistants. Physician assistants provide emergency medical care services and are qualified to perform urgent lifesaving procedures in addition to physical examination, diagnose and treat illnesses, order and interpret laboratory tests and offer patient education and counseling. It is believed that if specific knowledge is required for the collection of evidence the Physician Assistants Association can facilitate education methods to see that members receive the most current training (<u>Attachment 5</u>).

The Chairman closed the hearing on HB 2744.

The Chairman stated the Sub-Committee on Credentialing had completed their report on <u>HB</u> <u>2315 - Licensure of Occupational Therapists</u> and asked what the committee's wishes were.

Representative Morrison moved and Representative Long seconded to accept the sub-committee's report and move out **HB 2715** as amended. The motion carried.

The Chairman asked what the committee's wishes were on <u>HB 2718 - Certified Copies of Abstracts or Vital Records.</u>

Representative Morrison moved and Representative Patterson seconded to move **HB 2718** out favorably. The motion carried.

The Chairman asked what the committee's wishes were on <u>HB 2733 - Presumptive death law - catastrophic events or disasters.</u>

Representative Storm moved and Representative Palmer seconded to amend on page 3, lines 29 and 31 changing "wife" to "spouse". The motion carried.

Representative Showalter moved and Representative Long seconded to amend on page 2, line 17 and change "catastrophe" to "catastrophic event". The motion carried.

Representative Long moved and Representative Storm seconded to move **HB 2733** out as amended. The motion carried.

The meeting adjourned at 2:10 p.m. The next meeting will be February 14.

HEALTH AND HUMAN SERVICES

Date: Jehruary 12, 2002

May Blubay	KSBN
Barnett Barnett	KCSOV
Tiffany Muller	KCSDV
Donna Doolin	SRS/SAPTR
Wendy Hildenbrand	KOTA
Doug Smith	Ks Academy of Physician Assistants
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Procer Werholtz	KDOC
Sky Westerland	KNASW
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KANSAS COALITION AGAINST SEXUAL AND DOMESTIC VIOLENCE

220 SW 33rd Street, Suite 100 Topeka, Kansas 66611 785-232-9784 • FAX 785-266-1874 • coalition@kcsdv.org

House Health and Human Services Committee, February 12, 2002

Re:

HB 2744

Contact:

Sandy Barnett

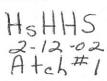
Dear Chairman Boston and Members of the Committee:

The Kansas Coalition Against Sexual and Domestic Violence represents the 28 community-based, grass roots programs in Kansas serving victims of domestic violence and sexual assault. These programs respond annually to more than 3,800 crisis calls and provide counseling and advocacy services to over 1,600 survivors of sexual assault and rape.

The work of serving victims and survivors of these heinous crimes has been ongoing in Kansas for the past 25 years. But, even twenty-five years later, rape is the most underreported crime in America. Recent studies have shown that one out of every six women has been the victim of an attempted or completed rape at some point in her lifetime. When accounting for all forms of sexual violence that number doubles for women and includes one in seven men. Potentially 453,446 women and 189,725 men in Kansas have been the victims of sexual violence. Yet, 70% to 84% of all rapes go unreported. Lack of reporting is attributed to the shame of victimization, fear of retribution, and a belief that nothing can be done: even if the perpetrator is caught, prosecution will fail. Are these fears realistic? Yes, only a small percentage of rapists are successfully prosecuted. Perpetrators know their victims in more than 60% of all sexual assaults; the fear of retaliation is real.

Collaborative relationships between law enforcement, medical personnel, prosecutors, and advocates increases the success of prosecution by enhancing the quality of evidence collected and helping to link victims to supportive services and safety. The best practice model for this kind of collaborative relationship is the Sexual Assault Nurse Examiner and Sexual Assault Response Team approach currently practiced in several communities across Kansas. The success of this approach relies on the pivotal role of the nurse examiner. That role is compromised in Kansas because our current law requires physicians to perform the sexual assault forensic evidence collection. Nurses who have received training to perform forensic evidence collection have increased successful prosecution rates, enhanced victim services, and provided necessary credible expert testimony in court.

KCSDV strongly supports HB 2744 that amends the current restriction of physicians only collecting forensic evidence to allow trained nurses to perform these examinations. HB 2744 simply reconciles Kansas law with current best practices.





BOARD OF DIRECTORS

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Executive Director

Kathy Williams

February 11, 2002

House Health and Human Services Committee Representative Gary Boston, Chair

RE: HB2744

Dear Committee Members:

am writing to ask for your support in changing the existing statute that currently requires a physician to perform a sexual assault forensic examination. Please support changing this bill to include specially trained nurses to perform the forensic examinations.

Sincerely,

Kathy Williams

Executive Director

Terri Johnson, M.S. President ..N.P.

/ 785.233.8638 * Fax 785.233.5222 www.nursingworld.org/snas/ks

the Voice of Nursing in Kansas

Terri Roberts, J.D., R.N. Executive Director

For More Information Contact Terri Roberts J.D., R.N. troberts@sound.net February 12, 2002

H.B. 2744 Adding Registered Nurses for the Examination of Victims of Sexual Assault

Chairperson Boston and members of the House Health and Human Services, my name is Diana Schunn BSN, R.N. and I and the SANE/SART Manager for Via Christi Regional Medical Center in Wichita. This is a position that I have held for 8 years. In that role I am responsible for statewide education, training and implementation of the SANE/SART training for professional registered nurses. I am here on behalf of the Kansas State Nurses Association to ask for your support of this bill.

This bill proposes to recognize RN's as a health profession authorized to examine persons who may be victims of sexual offenses and collect evidence. The changes also add a criteria by which the Board of Nursing may consider disciplinary action against a qualified RN who refuses to perform the requested examination and collection of evidence. This is done by amending KSA 65-448.

The SANE/SART programs were initially recognized as early as 1976, with a more formalized 40 hour course curriculum developed through the INTERNATIONAL ASSOCIATION OF FORENSIC NURSES in 1997. In Kansas courses have been offered since 1993, and approximately 17 communities have received SANE/SART development and are in various stages of implementation of RN's performing the medical/legal evaluation on sexual assault patients. Since January of 1999 in Kansas, 111 RN's have been trained statewide, and appropriately 210 RN's have been trained since the inception of training.

This specialized training is provided to RN's to further develop the skills needed to provide the most comprehensive and legally sound care to sexual assault patients. The emotional as well as physical and legal needs this patient population presents with, presents the RN with the need for advanced information on evidence identification, collection, chain of custody and resource referrals to adequately meet the patients needs. Care of the critically ill or traumatized victim is a responsibility that can not be compromised. Registered Nurses can best serve the needs of society when they can simultaneously recognize and preserve evidence while delivering care to the patient.

Thank you for this opportunity to present to you today.

Kansas Sexual Assault Network

Kansas SANE/SART Program Guide January 1999 – December 2001

Established SANE/SART Programs:

1. Wichita

- Established program in January 1994
- SANE/SART Manager = Diana Schunn (316) 689-5252
- Currently program has 15 trained SANE's
- Program has a colposcope with camera and video attachments
- Program is part of the Kansas Sexual Assault Network (KSAN) and the statewide SANE/SART program development efforts.
- Members from the Wichita SANE/SART steering committee assist with KSAN training efforts.
- The 40-hour SANE/SART course was provided by KSAN in Wichita in January 1999.
- Nurses continue to be trained through the SANE/SART courses offered by KSAN across the state.
- Started education locally September 1993 through 1999 when KSAN was implemented.

2. Topeka

- Established program April 1998
- SANE/SART Supervisor = Joy Thomas (785) 354-6000
- Currently program has 5 trained SANE's
- Program has a colposcope with camera attachment
- Nurses continue to be trained through the SANE/SART courses offered by KSAN across the state.

3. Hutchinson

- Established program in January 1995
- SANE/SART Coordinators = Lori Pauls and Nancy Corwin (316) 665-2000
- Currently program has 5 trained SANE's
- Program has a colposcope with camera and video attachments
- Nurses continue to be trained through the SANE/SART courses offered by KSAN across the state.
- For advanced education and review, the SANE/SART Coordinator participated in 16 hours of the 40-hour SANE/SART course offered in Hays (May 2000).

4. Emporia

Established program in fall of 1997

- SANE/SART Coordinator = Pamela Kyas (316) 343-6800
- Currently program has 4 trained SANE's
- Program has a colposcope with camera and video attachment
- Nurses will continue to be trained through the SANE/SART courses offered by KSAN across the state.
- For continued education and review, 3 SANE's participated in 11 hours of the 40-hour SANE/SART course offered in Salina (November 2000).
- Received 16 hours of education on Long-Term Pediatric Examinations in January 2002.

5. Coffeyville

- Established program in April 1997
- SANE/SART Coordinator = Susan McDaniel (316) 252-1615
- Currently program has 3 trained SANE's
- Program has a colposcope with camera and video attachments
- Nurses continue to be trained through the SANE/SART courses offered by KSAN across the state.

6. Pittsburg

- Established program in fall of 1998
- SANE/SART Coordinator = Joyce Holland (316) 232-0112
- Currently program has 3 trained SANE's
- Program has a colposcope with camera attachment
- Nurses continue to be trained through the SANE/SART courses offered by KSAN across the state.

Received SANE/SART training - SANE/SART Program being established:

- Kansas City (Shawnee Mission)
 - KSAN provided the 40-hour SANE/SART course in Kansas City in August/September 1999. Six nurses from Shawnee Mission Medical Center attended the course.
 - SANE/SART Coordinator = Joan Horton (913) 676-2000
 - Currently the program has 5 trained SANE's
 - Since the course was provided, a SART team was developed and they are continuing to establish set policies and procedures for the program. They are currently working to relocate the SANE/SART program to another department within the hospital, developing protocol for law enforcement in order for all victims to have the option of being transported to Shawnee Mission Medical Center to be seen by this program, and locating funding for a colposcope.
 - Nurses will continue to be trained through the SANE/SART courses offered by KSAN across the state.

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2. Lawrence

- Lawrence currently has a SART team that meets every 6-8 weeks.
- SANE/SART Coordinator at Lawrence Memorial Hospital = Lori Tilson (785) 749-6145
- SANE/SART Coordinator at Watkins Student Health Center on the University campus = Jody Woods (785) 864-9501
- Currently the program at Lawrence Memorial Hospital (LMH) has 6 trained SANE's, however the emergency room doctors complete the portion of the examination and evidence collection.
- Currently the program at Watkins Student Health Center has 4 trained SANE's.
- The team is currently working on the following issues: Policy/procedure development; location of the SANE/SART program; funding sources for a colposcope for LMH and a camera attachment for the colposcope at Watkins.
- The 40-hour SANE/SART course was provided by KSAN in Lawrence in July 2001 and nurses will continue to be trained through other courses offered across the state.

Salina

- Salina developed a SART team in 2000 and received the 40-hour SANE/SART Course in November 2000. Of the 43 attendees, 8 nurses attended from the Salina area. The SART team continues to meet on a monthly basis to discuss policy/procedure development and they are researching funding options to purchase a colposcope. The hospital has agreed to support the program and the nurses are completing the preceptorship requirements.
- Nurses will continue to be trained through the SANE/SART courses provided by KSAN across the state.

4. Garden City

- Garden City developed a SART team in the fall of 2000 and received the 40-hour SANE/SART course in February 2001. Of the 50 attendees, 6 nurses attended from the Garden City area. The SART team continues to meet on a monthly basis to discuss policy/procedure development and they have received grant funding for equipment and program costs. The hospital continues to support the program and the nurses are completing the preceptorship requirements.
- Nurses will continue to be trained through the SANE/SART courses provided by KSAN across the state.
- Received 16 hours of education on Long-Term Pediatric Examinations in November 2001.

McPherson

- McPherson received the 40-hour SANE/SART course in September 2001. There were 29 attendees present.
- McPherson continues to develop their program and meet as a team on a regular basis.

Received SANE/SART training - no program established:

1. Hays

- Key players met as a team in winter of 1999; team agreed that a program was needed.
- SANE/SART course was offered in May 2000. The hospital pulled out at the last minute and has not shown an interest in establishing a SANE/SART program. Several team members continue to discuss development options. KSAN continues to offer services and keeps the hospital staff and team members apprised of upcoming SANE/SART courses across the state.

2. Manhattan

- Key players met as a team several times throughout fall and spring of 1999/2000.
- Manhattan received the 40-hour SANE/SART course in July 2000.
- The hospital has not shown a strong commitment to house the program, but team members continue to look at options.

6. El Dorado

- El Dorado received the 40-hour SANE/SART course in October 1999.
- Key players from El Dorado and surrounding communities continue to utilize the services of the Wichita SANE/SART program and have expressed that they do not wish to have victims seek services from the hospital in El Dorado. Victims are transported to Wichita and seen at Via Christi Regional Medical Center-St. Joseph. The Wichita Area Sexual Assault Center provides these victims with hospital advocacy and support. Advocate services in El Dorado have chosen to offer follow-up services.

7. Dodge City

- Established program in July 1997
- Program has a colposcope with camera attachment
- The 40-hour SANE/SART course was provided by KSAN in Dodge City in June 1999.
- Nurses will continue to be trained through the SANE/SART courses offered by KSAN across the state.
- No active program at this time.

Total Nurses trained from January 1999-February 2002: 145

40-hour SANE/SART Schedule for 2002: Leavenworth, KS Liberal, KS

Liberal, KS July 22-26, 2002 Great Bend, KS September 16-20, 2002

March 11-15, 2002

Possible sites for 2003: Colby, Iola, Kansas City

2-3



State of Kansas Office of the Attorney General

120 S.W. 10th Avenue, 2nd Floor, Topeka, Kansas 66612-1597

CARLA J. STOVALL
ATTORNEY GENERAL

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Testimony of
Juliene Maska, Statewide Victims' Rights Coordinator
Office of Attorney General Carla J. Stovall
Before the House Health & Human Services Committee
House Bill 2744
February 12, 2002

Chairperson Boston and Members of the Committee:

Thank you for the opportunity to appear before you today on behalf of Attorney General Carla J. Stovall in support of House Bill 2744. This bill amends the law to allow nurses, who are specially trained in performing sexual assault evidence collection, to be able to perform the examination and collection of sexual assault evidence and to be paid by the county to perform such exams.

The crime of sexual assault and rape is devastating for the victim. It is extremely difficult for the victim to tell anyone. In1999 the Attorney General provided grant funds to the Wichita Area Sexual Assault Center to contract with Via Christi Hospital to develop training for nurses in performing the examination of victims and collecting evidence for the sexual assault evidence collection kit. The training not only provides the perfunctory duties in collecting the evidence, but it trains the nurse to be sensitive to the needs of sexual assault and rape victims. This training is provided free of charge for those attending. For some communities in our state, it is the nurse which can provide the time needed to perform the exam and to be sensitive to the needs of the victim. Since this program has been providing training throughout the state, 17 communities have developed some form of Sexual Assault Nurse Examiner/Sexual Assault Response Team (SANE/SART) program.

We have been contacted by the Kansas Academy of Physician Assistant to allow for a friendly amendment to include them in collecting this evidence. We certainly believe if they choose to be trained in the examination and collection of the sexual assault evidence that we would support their inclusion.

The Kansas Bureau of Investigation (KBI) reports that in 1999, law enforcement agencies reported 1,122 rapes. Attached is a 10 year trend of the number of rapes reported to law enforcement agencies in Kansas. The KBI provides the sexual assault evidence kits for the entire state. In 2001, 1,092 kits were distributed. During 2001, 530 kits were submitted to the KBI laboratories for examination of the evidence. It should be noted that some of the larger communities have their own laboratories, such as Sedgwick County Forensic Science Center, Johnson County Crime Laboratory,



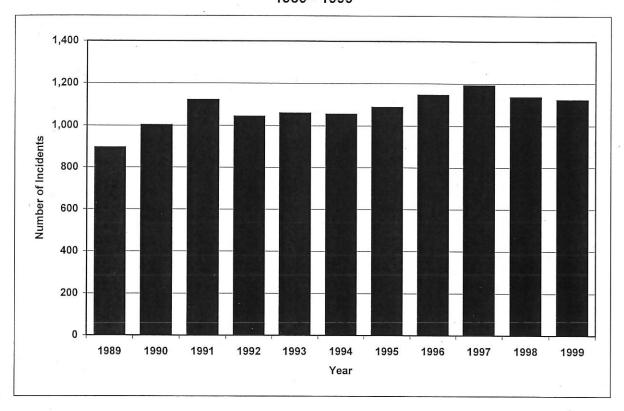
Page 2

Kansas City Regional Police Department Crime Laboratory, etc., which receive these kits to be reviewed and examine the results.

Sexual assault programs provided services to 4,436 child and adult victims of sexual assault and rape in fiscal year 2001. Advocates for victims of rape and sexual assault believe this bill is another step in supporting those victimized by these heinous crimes.

I appreciate your consideration in support of House Bill 2744.

RAPE TEN YEAR TREND 1989 - 1999*



YEARNU	JMBER**	PERCENT OF CHANGE***	RATE PER / 1,000 POPULATION
1989	895	+17.5	0.36
1990	1,002	+12.0	0.40
1991	1,121	+11.8	0.45
1992	1,043	-7.0	0.44
1993	1,059	+1.5	0.42
1994	1,055	- 0.4	0.41
1995	1,088	+3.1	0.42
1996	1,146	+5.3	0.45
1997	1,192	+4.0	0.46
1998	1,136	-4.7	0.43
1999	1,122	-1.2	0.40

- * Statistics compiled from the Kansas Incident Based Reporting System.
- ** Information was not received from the Kansas City Police Department in 1997 and 1998.

^{***} All percentages rounded to the nearest percent.

Post Office Box 597

Topeka, Kansas 66601-0597

Telephone Number: 785-235-5065 Facsimile Number: 785-235-8676

February 12, 2002

House Public Health and Welfare Committee

Amendment to House Bill No. 2744

Chairman Boston and Members of the House Public Health and Welfare Committee:

The Kansas Academy of Physician Assistants appears today to request consideration of the attached amendments to *House Bill No. 2744*.

In Kansas, there are more than 430 Physician Assistants (PA) licensed by the Board of Healing Arts. A Physician Assistant serves an integral part in the practice of medicine by providing needed health care services across this state. Without the use of Physician Assistant, the accessibility to medical care is can be limited, particularly in rural areas.

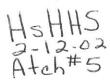
In many of our communities, Physician Assistants are the staffing facilities that provide emergency medical care services and are qualified to perform urgent lifesaving procedures in addition to physical examinations, diagnose and treat illnesses, order and interpret laboratory tests and offer patient education and counseling.

We believe that if specific knowledge is required for the collection of evidence our Association can facilitate education methods to see that our members receive the most current training.

We ask for your favorable action on this request as you consider this legislation.

Thank you for your time today.

Douglas E. Smith Executive Director Kansas Academy of Physician Assistants



Session of 2002

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HOUSE BILL No. 2744

By Representatives Lloyd and Nichols

1-29

AN ACT concerning the examination of victims of sexual assault; amending K.S.A. 2001 Supp. 65-448 and repealing the existing section.

Be it enacted by the Legislature of the State of Kansas:

Section 1. K.S.A. 2001 Supp. 65-448 is hereby amended to read as follows: 65-448. (a) Upon the request of any law enforcement officer and with the written consent of the reported victim, any physician or a registered professional nurse, who has been specially trained in performing sexual assault evidence collection, on call or on duty at a medical care facility of this state, as defined by subsection (h) of K.S.A. 65-425, and amendments thereto, shall examine persons who may be victims of sexual offenses cognizable as violations of K.S.A. 21-3502, 21-3503, 21-3504, 21-3505, 21-3506, 21-3602 or 21-3603, and amendments thereto, using Kansas bureau of investigation sexual assault evidence collection kits or similar kits approved by the Kansas bureau of investigation, for the purposes of gathering evidence of any such crime. If the physician or registered professional nurse refuses to perform such physical examination the prosecuting attorney is hereby empowered to seek a mandatory injunction against such physician or registered professional nurse to enforce the provisions of this act. Any refusal by a physician or registered professional nurse to perform an examination which has been requested pursuant to this section shall be reported by the county or district attorney to the state board of healing arts or the board of nursing, whichever is applicable, for appropriate disciplinary action. The department of health and environment, in cooperation with the Kansas bureau of investigation, shall establish procedures for gathering evidence pursuant to this section. A minor may consent to examination under this section. Such consent is not subject to disaffirmance because of minority, and consent of parent or guardian of the minor is not required for such examination. The hospital or medical facility shall give written notice to the parent or guardian of a minor that such an examination has taken place.

(b) Costs of conducting an examination of a victim as herein provided including the costs of the sexual assault evidence collection kits shall be charged to and paid by the county where the alleged offense was committed. Such county may charge the defendant for the costs paid herein

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