

Connecticut Chapter, International Association of Forensic Nursing
PO Box 185303
Hamden, CT 06518

Connecticut Chapter
International Association
of Forensic Nurses



March 3, 2008

Testimony Requesting Amendment to Raised Bill 243, AA Requiring Acute Care Hospitals to Make Forensic Nursing Services Available to Patients

Committee on Public Health
Senator Handley and Representative Sayers, Co-Chairs
Members of the Public Health Committee

Honorable Chairs and Members of the Committee:

Thank you for the opportunity to present testimony on Raised Bill 243, AA Requiring Acute Care Hospitals to Make Forensic Nursing Services Available to Patients. My name is Lynn Price. I am the immediate Past President of the Connecticut Chapter of the International Association of Forensic Nursing (CTIAFN), which represents forensic nurses across Connecticut.

CTIAFN is part of a coalition which has been meeting since the end of the last legislative session. In addition to forensic nursing, this coalition includes the Connecticut Hospital Association, emergency department managers, emergency department physicians, and a variety of victim advocates. The coalition's sole purpose has been to come up with a design and implementation plan for a rapid response approach for victims of sexual assault. As many of you know, special skills are required to fully process an alleged sexual assault patient in order to best serve the emotional and legal needs of the victim. Persons with these skills are known as Sexual Assault Nurse Examiners (SANES) or Sexual Assault Forensic Examiners (SAFES).

Many of you also understand that dealing with sexual assault cases often requires upwards of four or more hours – time which takes the nurse or other examiner “offline” from other patients and responsibilities during the shift. This places a tremendous burden on everyone trying to keep the emergency department responsive and timely for other presenting patients. The coalition, from its first meeting, realized a different approach was needed. The members are in total consensus that a state-funded rapid response SANE/SAFE program is the answer, as it will improve care for both victims and other patients, and emergency department staffing and patient flow. In addition, a state-funded rapid response SANE/SAFE approach will enhance prosecutorial efforts, by improving evidence collection and making available expert SANE/SAFE testimony during perpetrator prosecution. We also believe the program is best implemented through placement into an existing state entity, such as the Office of Victim Services.

CTIAFN is grateful for the current language of Raised Bill 243. However, we believe working in an incremental approach will be more acceptable to our partners in hospital management. The implementation of a rapid response SANE/SAFE program in our state would be an incredible and vital step toward strengthening forensic nursing services available to patients. We therefore respectfully request that the language of this bill be more reflective of a state-funded, state-housed rapid response SANE/SAFE program.

Thank you for your efforts to improve the immediate and long-term interests of sexual assault victims and their communities. We appreciate your consideration of our concerns.

Lynn Price, JD, MSN, MPH
Past President, CTIAFN
203-887-3340
lynn.price@snet.net