

2SSB 5183 - H COMM AMD

By Committee on Public Safety

ADOPTED 04/06/2021

1 Strike everything after the enacting clause and insert the
2 following:

3 "NEW SECTION. **Sec. 1.** The legislature finds that nonfatal
4 strangulation is among the most dangerous acts of domestic violence
5 and sexual assault. Strangulation involves external compression of
6 the victim's airway and blood vessels, causing reduced air and blood
7 flow to the brain. Victims may show no or minimal external signs of
8 injury despite having life-threatening internal injuries including
9 traumatic brain injury. Injuries may present after the assault or
10 much later and may persist for months and even years postassault.
11 Victims who are strangled multiple times face a greater risk of
12 traumatic brain injury. Traumatic brain injury symptoms are often not
13 recognized as assault-related and may include cognitive difficulties
14 such as decreased ability to concentrate, make decisions, and solve
15 problems. Traumatic brain injury symptoms may also include behavior
16 and personality changes such as irritability, impulsivity, and mood
17 swings.

18 Domestic violence victims who have been nonfatally strangled are
19 eight times more likely to become a subsequent victim of homicide at
20 the hands of the same abusive partner. Research shows that previous
21 acts of strangulation are a unique and substantial predictor of
22 attempted and completed homicide against an intimate partner.

23 For years, forensic nurses in Washington have provided high-level
24 care to sexual assault victims. Forensic nurses are also trained in
25 medical evaluation of nonfatal strangulation, but only provide this
26 evaluation in cases of sexual assault involving strangulation, as
27 crime victims' compensation will not reimburse in nonsexual assault
28 cases. Strangulation affects victims physically and psychologically.
29 These victims deserve a higher standard of response and medical care.
30 Allowing crime victims' compensation to reimburse for forensic nurse
31 examinations for victims of domestic violence strangulation will

1 provide a better, more victim-centered response in the most dangerous
2 of domestic violence felony cases.

3 NEW SECTION. **Sec. 2.** A new section is added to chapter 43.280
4 RCW to read as follows:

5 (1) The office of crime victims advocacy shall develop best
6 practices that local communities may use on a voluntary basis to
7 create more access to forensic nurse examiners in cases of nonfatal
8 strangulation assault including, but not limited to, partnerships to
9 serve multiple facilities, mobile nurse examiner teams, and
10 multidisciplinary teams to serve victims in local communities.

11 (a) When developing the best practices, the office of crime
12 victims advocacy shall consult with:

- 13 (i) The Washington association of sheriffs and police chiefs;
- 14 (ii) The Washington association of prosecuting attorneys;
- 15 (iii) The Washington state coalition against domestic violence;
- 16 (iv) The Harborview abuse and trauma center;
- 17 (v) The Washington state hospital association;
- 18 (vi) The Washington state association of counties;
- 19 (vii) The association of Washington cities;
- 20 (viii) The Washington coalition of sexual assault programs;
- 21 (ix) The schools of nursing at Washington State University and
22 the University of Washington;
- 23 (x) Collective bargaining representatives of frontline nurse
24 examiners; and
- 25 (xi) Other organizations deemed appropriate by the office of
26 crime victims advocacy.

27 (b) The office of crime victims advocacy shall complete the best
28 practices no later than January 1, 2022, and publish them on its
29 website.

30 (2) The office of crime victims advocacy shall develop strategies
31 to make forensic nurse examiner training available to nurses in all
32 regions of the state without requiring the nurses to travel
33 unreasonable distances and without requiring medical facilities or
34 the nurses to incur unreasonable expenses. Among other important
35 factors deemed relevant and appropriate by the office of crime
36 victims advocacy, the strategies should take into account the unique
37 challenges faced by medical facilities and nurses operating in rural
38 areas.

1 (a) When developing the strategies, the office of crime victims
2 advocacy shall consult with:

3 (i) The Harborview abuse and trauma center;

4 (ii) The department of health;

5 (iii) The nursing care quality assurance commission;

6 (iv) The Washington state nurses association;

7 (v) The Washington state hospital association;

8 (vi) The schools of nursing at Washington State University and
9 the University of Washington;

10 (vii) Forensic nurse practitioners; and

11 (viii) Other organizations deemed appropriate by the office of
12 crime victims advocacy.

13 (b) The office of crime victims advocacy shall report the
14 strategies to the governor and the appropriate committees of the
15 legislature no later than October 1, 2022.

16 (3) This section expires June 30, 2023.

17 NEW SECTION. **Sec. 3.** A new section is added to chapter 7.68 RCW
18 to read as follows:

19 (1) No costs incurred by a hospital or other emergency medical
20 facility for the examination of the victim of domestic violence
21 assault involving nonfatal strangulation, when such examination is
22 performed for the purposes of gathering evidence for possible
23 prosecution, shall be billed or charged directly or indirectly to the
24 victim of such assault. Such costs shall be paid by the state
25 pursuant to this chapter.

26 (2) The department must notify the office of financial management
27 and the fiscal committees of the legislature if it projects that the
28 cost of services provided under this section exceeds the amount of
29 funding provided by the legislature solely for the purposes of this
30 section.

31 (3) No later than October 1, 2022, the department shall report to
32 the legislature the following information for fiscal year 2022:

33 (a) The number, type, and amount of claims received by victims of
34 suspected nonfatal strangulation, with a subtotal of claims that also
35 involved sexual assault;

36 (b) The number, type, and amount of claims paid for victims of
37 suspected nonfatal strangulation, with a subtotal of claims that also
38 involved sexual assault; and

1 (c) The number of police reports filed by victims of suspected
2 nonfatal strangulation who received services under this section.

3 (4) This section expires June 30, 2023."

4 Correct the title.

EFFECT: (1) Removes the provision that allows the Department of Labor and Industries (Department) to return to paying for nonfatal strangulation forensic exams after insurance in certain circumstances.

(2) Specifies that the strategies developed by the Office of Crime Victims Advocacy (OCVA) to make forensic nurse examiner training available in all regions of the state may not require medical facilities to incur unreasonable expenses. Further provides that the strategies should take into account factors deemed appropriate and relevant by the OCVA as well as the unique challenges faced by medical facilities and nurses operating in rural areas.

(3) Requires the OCVA to consult with the schools of nursing at Washington State University and the University of Washington when developing the strategies.

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