



7th ANNUAL
**FORENSIC
INVESTIGATIONS**

*Sexual Assault, Domestic Violence, and Child and Elder Abuse:
From Scene to Courtroom*



saintlukeshealthsystem.org/forensic
forensic@saint-lukes.org

May 14-16, 2014
Kansas City Convention Center
301 West 13th Street, Suite 2100
Kansas City, MO 64105

Pre-Conference Offerings May 12 and 13, 2014
Post-Conference Offering May 17, 2014

Advanced Sexual Assault Medical Forensic Course for Physicians

William Green, M.D., FACEP

Mary E. Moffatt, M.D.

Michael Weaver, M.D., FACEP

This pre-conference course is among the first of its kind specifically targeted to meet physicians' educational needs in caring for the adult sexual assault patient. The course was previously offered in an eight-hour format but has been expanded to 12 hours, as requested by past participants.

Participants will gain expertise in conducting a medical forensic exam as well as knowledge about expert witness and courtroom testimony, cultural and legal considerations and controversies in care, and the science behind DNA/STRs as they relate to sexual assault patients. This course will provide state-of-the-art, practical information for emergency physicians practicing in academic, community, or rural settings with or without the support of specially trained sexual assault nurse examiners (SANEs). A specific evening program will cover "Forensic Evaluation of the Child."

This course has been divided into two components to optimize physician education and time.

Part One, an excellent, highly suggested prerequisite, is a self-paced, at-home review of *Sexual Assault: Forensic and Clinical Management, Virtual Practicum*. This 12-hour interactive DVD was created by Dartmouth School of Medicine and reviewed by ACEP's education committee, which said, "it is very well done and would provide relevant CME to ACEP members." The DVD can be purchased through the ACEP bookstore for \$50 for nonmembers (discounted rate for members), or directly from Dartmouth for \$50 by sending a request to Joshua.nelson@world2systems.com.

After reviewing this DVD, participants may purchase optional CME directly from Dartmouth for an additional \$65. Further information about the DVD can be obtained at the ACEP bookstore website or <https://ccehs.dartmouth-hitchcock.org/Activity/1922767/Detail.aspx>

Part Two is our onsite, 12.5-hour CME course on Monday afternoon, May 12, and Tuesday, May 13. Upon successful completion, The University of Missouri-Kansas City School of Medicine will issue a 12.5-hour CME certificate stating that you have participated in the live activity.

DAY 1: Monday, May 12, 2014**Registration: 11 a.m. – Noon****Welcome and Introductions: Noon****Module I: Noon – 1:30 p.m.****Sexual Assault Care: Past, Present, and Future**

Michael Weaver, M.D., FACEP

The care of sexually assaulted patients has changed in many ways, including how they present, where they present, and how we approach their evaluation and management. The evolution to a multidisciplinary team approach has proven to lead to more successful outcomes for patient care and in the criminal justice system.

Objectives: At the conclusion of this educational offering, attendees will be able to:

- Explain the development of sexual assault programs and the SANE model.
- Discuss persistent myths and major shifts in patient presentation.
- Verbalize the evolution from SART to SARRTS.

Module II: 1:30 – 2:30 p.m.**The Forensic Exam and Evidence Collection**

William Green, M.D., FACEP

Overview of the Sexual Assault Forensic Exam Process

- History
- Physical Exam
- Forensic Evidence

Forensic Evidence and Findings

- Anticipation and Identification
 - Guided by the history
 - Enhancements (ALS, TB, magnification)

Overview of DNA evidence**Avoiding evidence problems**

- Contamination and degradation
- Chain of custody
- Inadmissibility

Objectives: At the conclusion of this educational offering, attendees will be able to:

- Verbalize the basic forensic exam process, including history, physical exam, evidence collection, and management.
- Describe the procedures and techniques for forensic evidence collection, handling, labeling, and packaging.
- Summarize the significance and use of DNA evidence in the context of sexual assault examination and investigation.
- List and describe the potential problems with sexual assault evidence and the strategies for prevention of these problems.

2:30 – 2:45 p.m. Break**Module III: 2:45 – 5 p.m.****Drug and Alcohol Facilitated Sexual Assault**

Michael Weaver, M.D., FACEP

This module will review the components of Drug and Alcohol Facilitated Sexual Assault (DFSA) and will discuss the clinical presentations, treatment, and medical legal aspects of forensic evidence collection in these cases.

Objectives: At the conclusion of this educational offering, attendees will be able to:

- Discuss the initial assessment of a patient who is a victim of DFSA.
- Discuss the common drugs used in DFSA.
- Discuss the forensic testing and procedures in DFSA.

Module IV: 5 – 7 p.m.**Dinner Evening Program: The Forensic Evaluation of the Child—What Do I Need to Evaluate Children in My Hospital?**

Mary E. Moffatt, M.D.

As forensic providers, we provide evaluations of possible victims of child sexual abuse, physical abuse, and all types of neglect. This presentation will discuss appropriate care and resources for caring for these patients.

Objectives: At the conclusion of this educational offering, attendees will be able to:

- Verbalize the necessity of collaboration among medical disciplines in the evaluation of the alleged child abuse case.
- Identify medical conditions and accidental injuries commonly mistaken for child physical abuse.

Adjourn

Day 2: Tuesday May 13, 2014

Module V: 8 – 9:30 a.m.
Forensic Aspects of Injury Identification and Interpretation of Findings

William Green, M.D., FACEP

Documentation of findings

- Three types
- Overview of Forensic Photography

Injuries

- Definitions
- Pattern injuries
- Non-specific injuries
- Body injuries (examples and significance)
- Ano-genital injuries (examples and significance)

Realistic Assessment and Conclusions

- Consistency versus diagnostic certainty
- Can the examiner determine consent?

Objectives: At the conclusion of this educational offering, attendees will be able to:

- Describe the principles of forensic documentation.
- Summarize the basic forensic photographic procedures and techniques.
- List and describe the common types of injuries encountered in sexual assault and discuss their forensic significance.
- Summarize the basic components of the assessment and conclusions that can be fairly drawn after completing the sexual assault forensic exam.

Module VI: 9:30 – 10:15 a.m.
Post-Exposure Prophylaxis in Sexual Assault

Michael Weaver, M.D., FACEP

This module will review the current Emergency Contraceptives (EC) as well as the alternatives in STI, HIV, and hepatitis in sexual assault patients.

Objectives: At the conclusion of this educational offering, attendees will be able to:

- Discuss the appropriate care for sexual assault STI and HIV prophylaxis.
- Verbalize the indications for the most recently available EC products.

10:15 – 10:30 a.m. Break

Module VII: 10:30 a.m. – Noon
Cultural and Linguistical Competence in SAFE Care: Are You Prepared?

Michael Weaver, M.D., FACEP

As our population is increasingly diverse, this module will discuss the culturally appropriate care for the sexual assault patient.

Objectives: At the conclusion of this educational offering, attendees will be able to:

- Discuss different approaches to patients from different races/ethnicities, religions, gender, and sexual orientation.
- Discuss cultural issues when caring for the elderly and domestic violence victims.

Noon – 1:30 p.m. Lunch on Your Own

Module VIII: 1:30 – 2:45 p.m.
Judicial Process and Expert Witness Forensic Testimony

William Green, M.D., FACEP

Overview of the criminal justice process

- Forensic process and goals
- Law enforcement investigation
- Prosecution

Prosecution and defense strategies

Case preparation and the pretrial conference

Testimony basics

Difficult testimony issues

Objectives: At the conclusion of this educational offering, attendees will be able to:

- Explain the basic forensic process and goals.
- Summarize the investigative and prosecutorial processes in sexual assault.
- List and discuss the essential elements of the pretrial conference.
- Summarize the elements of effective testimony.
- Discuss common problematic areas in sexual assault expert testimony.

2:45 – 3 p.m. Break

Day 2: Tuesday May 13, 2014 *continued*

Module IX: 3 – 4:45 p.m.

**Medical Directorship of SAFE Programs/
SAFE Case Review**

William Green, M.D., FACEP
Michael Weaver, M.D., FACEP

This presentation will review the core elements of providing medical oversight of sexual assault care for established SANE programs or for physicians in institutions with only policies for emergency department nurses.

Objectives: At the conclusion of this educational offering, attendees will be able to:

- Discuss how to identify and support medical directors.
- Discuss staff training, protocols, quality assurance, community alliances, follow up, and funding issues related to running a successful program.
- Discuss interesting cases submitted by attendees.

Adjournment/Evaluations: 5 p.m.

Faculty Bios

William Green, M.D., FACEP, was founding co-chair of the American College of Emergency Physicians, Forensic Section, in 2007, and was asked to serve as an adviser to the Department of Justice in their development of the National Protocol for Sexual Assault Medical Forensic Examinations and to the first White House Roundtable on Sexual Violence in 2011.

Mary E. Moffat, M.D., is an emergency physician and a pediatric forensic examiner for Children's Mercy Hospital SCAN Clinic in Kansas City. She has lectured extensively on the subject of pediatric abuse and represents Children's Mercy Hospital as a member of the Kansas City Response to Sexual Assault Task Force.

Michael L. Weaver, M.D., FACEP, was founding co-chair of the American College of Emergency Physicians, Forensic Section, in 2007, and was asked to serve as an adviser to the Department of Justice in their development of the National Protocol for Sexual Assault Medical Forensic Examinations and to the first White House Roundtable on Sexual Violence in 2011. Saint Luke's Hospital was the first private sexual assault center in the U.S. Dr. Weaver has been the medical director since 1980 through the establishment of Saint Luke's SANE program to the evolved Forensic Care Program for sexual assault, domestic violence, and elderly and child abuse.

SANE-A PREP COURSE

This program seeks to prepare the attendee for the IAFN SANE-A certification exam.

6:30 – 7:30 a.m. Registration Opens

Kansas City Convention Center, Room 2100

8 a.m. – Noon SANE-A Prep Course

Carolyn Cordle, R.N., B.S.N., SANE-A

Kathleen Hitchcock-Brackney, R.N., SANE-A

Jennifer Green, R.N., B.S.N., SANE-A

Jackie Witt, R.N., M.S.N.

Noon – 1:30 p.m. Lunch on your own

1:30 – 4 p.m. SANE-A Prep Course

Objectives: At the conclusion of this educational offering, attendees will be able to:

- Discuss methods recommended to prepare for the SANE-A exam.
- Identify key information to be documented during the medical/forensic examination.
- List steps in preparing to present testimony in court.
- Describe clinical management of the sexually assaulted patient.
- Discuss current CDC guidelines for STD prevention in the sexual assault patient.
- Recall the roles and responsibilities of the multidisciplines involved in sexual assault response.
- Review case studies of sexual assault patients.
- Participate in question and answer session.

Tuesday, May 13, 2014
11 a.m. – 5 p.m.

➤ Register
saintlukeshalthsystem.org/forensic

The Kansas City Clinical CSI Challenge: Get Your CSI On!



Put your clinical investigative skills to the test! As a member of a clinical forensic investigative team, you will immerse yourself in this crime scene experience. This pre-conference offering begins with a case briefing. Then you will rotate through the hands-on stations. By investigating this case through the processes of the clinical forensic exam, medical treatment, crisis advocacy, the criminal justice investigation, and crime lab analysis, you will find the assailant.

Do you have what it takes? Don't miss this unique opportunity. All winning team members will receive a prize. A member of the winning team will receive the iPad Mini.

Registration is limited to 50 attendees.

Part I: The Event

A presentation of a case will begin with a full pre-exercise briefing to include the limited information available in the early stages of an event.

Setting the Stage: The Crime Scene – A presentation of the crime scene will be made. What evidence does the crime scene yield?

Part II: The Stations: Hands-on/Live Demos

Station 1: The SANE Exam

Station 2: Medical Care/Longer-Term Evaluation

Station 3: Advocacy

Station 4: The Investigative Work

Station 5: Forensic Evidence from the Crime Lab Perspective

Part III – Suspect Pool and the Wrap-up

Here's how it happened. Who in the class got it right? We give away an iPad Mini.

Post-Conference Offering
Saturday, May 17, 2014
8 a.m. – 5 p.m.
UMKC School Nursing
2464 Charlotte, Kansas City, MO 64108

> Register
saintlukeshalthsystem.org/forensic

SANE-A-PALOOZA

A proctored clinical experience focused on preparing sexual assault forensic examiners for clinical examinations. This offering will prepare the forensic examiner to complete the pelvic portion of the sexual assault medical forensic exam. Attendees will complete hands-on, proctored examinations with multiple diverse gynecological teaching associates.

Goal for the skills lab training:

This learning activity is designed to help participants demonstrate confidence, comfort, and competence in the performance of a comprehensive pelvic examination, including photography.

Objectives: After completing this training, participants should be able to:

- Demonstrate knowledge and clinical competence in performing an external genital and vaginal speculum examination of an adult female patient.
- Demonstrate the ability to incorporate key points from the didactic portion of the Sexual Assault Nurse Examiner training into the pelvic examination, including digital photography.

Prerequisites:

All attendees must have attended an accredited SANE-Adult and Adolescent Course.

Transportation:

Transportation to the school of nursing will be available for out-of-town attendees. You will receive an email with all arrangements.

Registration:

To obtain the required clinical outcomes for our attendees, **registration is limited to 35 participants**. No exceptions. Acceptance into this course will be at the conference coordinator's discretion. Enroll early as this will be sold out.

7th ANNUAL

FORENSIC INVESTIGATIONS

*Sexual Assault, Domestic Violence, and Child and Elder Abuse:
From Scene to Courtroom*

May 14-16, 2014

Join fellow law enforcement personnel, physicians, prosecutors, nurses, victim advocates, crisis workers, criminalists, crime scene investigators, forensic examiners, EMS personnel, and judges for this cutting-edge clinical forensic conference. We will focus on a broad array of emerging forensic issues, including sexual assault, interpersonal violence, ballistics, strangulation, and child and elder abuse in both urban and rural environments.

This year's conference is designed to provide an interactive joint educational opportunity and promising practices when working with victims of violence. Topics will include working with multidisciplinary teams and learning to consider all of the forensic implications on the street, in health care settings, and in the courtroom. Violence is a health care crisis, so we will focus on approaching clinical forensic issues in a collaborative, coordinated, compassionate, competent, caring, victim-centered process.

This conference will be held at the Kansas City Convention Center in the 2100 Rooms, which is directly adjacent to the Downtown Marriott. A parking map link is at the end of this brochure.

7th ANNUAL FORENSIC INVESTIGATIONS

*Sexual Assault, Domestic Violence, and Child and Elder Abuse:
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Conference Agenda

Wednesday, May 14, 2014

7 – 10:30 a.m. Registration Opens
Kansas City Convention Center, Room 2100

11 – 11:15 a.m.
**Welcome and Announcements,
Room 2103 A and B**

Recognition Awards

Opening Address: Leonardo J. Lozada, M.D.,
Chief Physician Executive, Saint Luke's Health System

11:15 a.m. – 12:45 p.m.

Achieving Culture Change to Eliminate Sexual Assault

Russell W. Strand, Chief, Behavioral Sciences, Education
and Training Division, U.S. Army Military Police School

Sex offenders thrive in a rape-prone, rape myth-accepting culture. This presentation will explore many societal myths and bias that enable the sex offender to operate successfully among us without suspicion and detection. We will discuss how they deceive, why they do what they do, and how we can peer through the fog and identify them and their horrific acts. Participants will be presented with up-to-date research, case studies, and strategies on understanding sex offenders from a criminal justice viewpoint.

This session will take what we've been taught about typical offender typologies and compare what we think we know with empirical research and current state of knowledge. We will also compare how offenders not only groom and manipulate victims, but coworkers, fiends, relatives, neighbors, and professionals as well. We will build on education, theories, promising best practices, and research to actively and intentionally change our culture to reduce—with a vision, to eliminate—sexual assault in our society.

Objectives: At the conclusion of this educational offering, attendees will be able to:

- Identify rape myths that enable sex offenders to thrive in our society.
- Define culture change and implement actions to create positive change.

12:45 – 1:05 p.m. Break
Vendor Exhibits, Room 2103 C

Wednesday, May 14, 2014 *continued*

1:05 – 2:50 p.m.

Cultural and Linguistic Competence in SAFE Care: Are You Prepared?

Michael Weaver, M.D., FACEP

Increasingly we are providing care and support to a diverse population of gender-based violence. Their probability to disclose, seek treatment, participate in the criminal justice system, and follow through with the long-term healing/support available is directly related to the respect and cultural competency of the various providers with which they interface. This presentation will be interactive and we will explore the definition of cultural competence as it applies to various federal laws, Joint Commission standards, and regulations.

Objectives: At the conclusion of this educational offering, attendees will be able to:

- Define cultural and linguistic competence in health care.
- Identify specific cultural and linguistic considerations in sexual assault care.

2:50 – 3:20 p.m. Break

Vendor Exhibits, Room 2103 C

3:20 – 5:20 p.m.

He Choked Me, but He Left No Marks— Changing the World for Victims of Non-Fatal Strangulation

Casey Gwinn, Esq., National Family Justice Center Alliance, San Diego, Calif.

Michael Weaver, M.D., FACEP, Medical Director, Clinical Forensic Care Program

While strangulation is a frequent and fatal type of abuse, there is still a general lack of awareness or understanding of the crime and mechanism of injury. We will discuss the pathophysiology of strangulation and why it should be considered a felony. Over 50 percent of strangulation assault victims do not present with visible external injuries, which represents a considerable challenge for prosecution and health care. This session will discuss evolving standards for advocacy, clinical examiners, law enforcement, and criminal justice providers.

Objectives: At the conclusion of this educational offering, attendees will be able to:

- List the psychological/social/medical dynamics around non-fatal strangulation assaults.
- List best practices for the investigation, clinical assessment, documentation, and advocacy in strangulation cases.

5:20 – 5:40 p.m. Break

Vendor Exhibits, Room 2103 C

5:40 – 6:40 p.m.

The Impact of Physical and Sexual Violence— a Personal Journey Revealed

Olga Trujillo, J.D.

Olga Trujillo watched as her father abused her mother for years. As she was drawn into his abuse of her mother, she was also sexually abused by her father and brothers. Now an attorney, advocate, and author, Trujillo underwent a journey to understand the impact of the violence she witnessed and endured from the abuse and rapes she suffered as an adolescent and young adult. In this presentation, she reveals what she has learned so far. Although tragic, her story of survival is inspiring and hopeful. She shows how each person can and does make a difference in the lives of others.

Objectives: At the conclusion of this educational offering, attendees will be able to:

- Assess your present response to victims of abuse and trauma.
- Develop tools to improve your response to victims of abuse and trauma.

6:40 p.m. Adjourn

Thursday, May 15, 2014

7 – 8 a.m. Registration Opens

Kansas City Convention Center, Room 2100

8 – 9:30 a.m.

Breakout Sessions

BREAKOUT 1:

Will Your SANE Program Be Here in 2015? Long-Range Thinking for Sexual Assault Nurse Examiner Program Managers—Sustainability

Jenifer Markowitz, N.D., R.N., WHNP-BC, SANE-A

One of the biggest challenges SANE programs face today is sustainability and healthy growth. In the current economic and political environment, it is a struggle to move programs forward rather than simply get by. This interactive session will look at some of the key tenets for program stability and long-term sustainability, including funding, staff retention and recruitment, and collaboration.

Objectives: At the conclusion of this educational offering, participants will be able to:

- Describe strategies for sustainability.
- Identify specific sustainability challenges in their own program

BREAKOUT 2:

Representing Survivors Who Have Experienced Trauma—Challenges With the Legal System

Olga Trujillo, J.D.

In recent years, those who work with survivors of violence have become increasingly aware of the connection between trauma and violence. However, survivors who turn to the legal system for protection from their abuser, child custody, and assistance with other civil legal needs encounter significant barriers to achieving their objectives. This is in large part because the processes can trigger the effects of trauma, making it difficult for a survivor to fully participate. In addition, the opposing party often uses the survivor's mental health to damage credibility and/or raise doubts about parenting abilities.

Objectives: At the conclusion of this educational offering, participants will be able to:

- Examine how advocates and lawyers can better understand the complex needs of survivors who have experienced trauma and/or have mental health concerns.
- Identify the signs of trauma, what they mean, and how the legal process can revictimize survivors.

BREAKOUT 3:

Cause and Manner: Components of the Death Scene Investigation and the Forensic Autopsy

Mary Dudley, M.D., M.S.N., Chief Medical Examiner, Jackson County Medical Examiner's Office, Kansas City, Mo.

Tom Hensley, F-ABMDI, Deputy Chief Investigator, Jackson County Medical Examiner's Office, Kansas City, Mo.

This interactive session will outline the importance of the forensic team to determine the cause and manner of death. Emphasis will be placed on the roles of the medicolegal death investigator (MLI) and the forensic pathologist. Attendees will have the opportunity to discuss the cause and manner of death from scenarios given and selected case study presentations.

Objectives: At the end of this educational offering, attendees will be able to:

- Describe the components of the scene investigation and the forensic autopsy including the external examination, internal examination, toxicology, histology, and radiology.
- Compare and contrast the forensic autopsy with the hospital autopsy.
- Discuss the role of the MLI and the forensic pathologist in determining the cause and manner of death in medical-legal cases.

BREAKOUT 4:

Victims and Perpetrators: Revealing the Good, the Bad, and the Ugly about Elder Abuse

Lillian Jeter

This presentation will peel back the mystery and confusion associated with those criminal behaviors we call elder abuse and how they are perpetrated on dependent, vulnerable victims on a daily basis.

- What is elder abuse and how is it identified within the community setting/residential care setting?
- What are the types of abuse and what types of behaviors constitute them?
- Why are some older persons victimized and others not?
- What legal measures are in place to combat the various offenses of elder abuse?
- Why is it underreported or not reported at all, even by mandated reporters?
- How are elder abuse cases dealt with in criminal court versus civil court?

Thursday, May 15, 2014 *continued*

Breakout 4 continued

These questions and many more will be discussed in this presentation along with real case studies to help the audience understand what constitutes elder abuse and how to handle these types of situations. Cases will be scrutinized from a multidisciplinary point of view as well as focusing on victimization and the role of the perpetrators.

Objectives: At the conclusion of this educational offering, participants will be able to:

- Verbalize which older persons in the community and/or residents in nursing homes are most likely to be victimized.
- List the duties and responsibilities of the frontline responders: registered nurses and aides, administrators, law enforcement, forensics, counselors, advocates, and other medical personnel.

**BREAKOUT 5:
Understanding Sibling Abuse and Sexual Behavior Problems in Children**

Rene McCreary, LPC, Director of Counseling Services, Metropolitan Organization to Counter Sexual Assault

Sexual abuse between siblings remains one of the last taboos to be addressed by society, care providers, and the criminal justice system. It is rarely discussed in the media or even among survivors themselves. It comes as a shock to many people that children can present a risk to other children, but it is becoming increasingly apparent that children—even children within families—can pose a very real risk. This presentation will open this topic.

Objectives: At the conclusion of this educational offering, participants will be able to:

- Identify factors present in family systems when sexual behavior problems in children occur.
- Develop strategies and approaches to making appropriate referrals for families dealing with sexual behavior problems in children.

**BREAKOUT 6:
When a Child Discloses Sexual Abuse to You**

Teresa Hensley, J.D., Cass County Prosecutor
Monica Penrose, J.D., Cass County Assistant Prosecutor

Conversations with a child regarding sexual abuse are different than conversations with an adult. As an exception to the hearsay rule, adults may be allowed to testify in court as to what the child told them happened about the abuse. Your response and the specific words the child uses are as important as the information provided by the child.

Objectives: At the conclusion of this educational offering, participants will be able to:

- Discuss the dynamics of disclosures of child sexual abuse.
- Discuss the role of the forensic investigators in child sex cases.

9:30-10:00 a.m. Break
Vendor Exhibits, Room 2103 C

**10 – 11:30 a.m.
Breakout Sessions**

**BREAKOUT 1:
Health Care after Violence: Taking Care to Take Care**
Olga Trujillo, J.D.

Taking care of your health can be a challenge for any woman. Going to the doctor, dentist, staying on top of all the recommended screenings, making birth control and reproductive health decisions—all of these can be overwhelming. A woman who has experienced violence may find caring for her health even more complicated. Many survivors of violence find it almost impossible to go to the doctor, dentist, or other specialists. They may experience difficulties with the power imbalance, being physically vulnerable, the clinical setting, or the acts of treatment themselves. In this presentation, Trujillo will illustrate through her own experience of violence and coping how she discovered the importance of becoming proactive in her health care. She will detail the steps that she took with the health care professionals in her life to have them partner with her in caring for her health.

Objectives: At the conclusion of this educational offering, participants will be able to:

- Recognize how advocates and other professionals who work with survivors of violence can assist survivors with this challenge.
- Recognize how our coping mechanisms make it harder to actively care for our health.

Thursday, May 15, 2014 *continued*

BREAKOUT 2:

The Pain Behind the Mask-ularity: It's Not a Gender Issue

Russell W. Strand, Chief, Behavioral Sciences, Education and Training Division, U.S. Army Military Police School

Contrary to popular belief, sexual assaults committed against males are not an uncommon occurrence. Statistics demonstrate that one in six males will be victims of sexual assault in their lifetime, yet there is little in the scientific medical literature regarding care of male victims. Lack of an evidence base, education, and experience in caring for male sexual assault victims has led to the perpetuation of several myths by the general public and health care providers.

Male victimization can and does have a profound effect not only on the male victim and their male counterparts, but also the females in their live—for better or worse. Cutting-edge research and contrasts and comparisons between female and male victimization will also be presented. Examination of male sexual assault victims is unique both in examination techniques and physiologic responses to examinations. This presentation will be extremely beneficial to all professionals responding to male victims.

Objectives: At the conclusion of this education offering, participants will be able to:

- List several myths regarding males who report sexual assault.
- Describe the various barriers and psychological impact that prevent males from seeking health care following a sexual assault.

BREAKOUT 3:

Cybercrimes: Sexting, Sextortion, and Online Enticement

Detective Kimberly Shirley-Williams, Kansas City Missouri Police Department, FBI-Squad 5

This session will discuss methods in which online predators seek out and take advantage of adults and children using the cyber world. Real life examples and case studies will be discussed.

Objectives: At the conclusion of this educational offering, participants will be able to:

- Define sexting, sextortion, and online enticement.
- Identify the means in which predators target victims online.

BREAKOUT 4:

Is it Insane to Have Only a SANE Nurse? Clinical Forensic Care of the Trauma Patient

Connie Brogan, R.N., CEN, SANE-A

Emergency departments see inflicted violence patients every day. Are they receiving the clinical medical forensic standard of care as well as trauma care? This presentation will assist the emergency health care provider in completing a clinical medical forensic exam on a domestic violence, elder abuse, or nonsexual child abuse patient. This session will be an interactive review of cases, photography, and documentation.

Objectives: At the conclusion of this educational offering, participants will be able to:

- Verbalize when you need a SANE nurse versus a nurse trained in forensic documentation.
- Verbalize the steps in becoming competent to complete clinical forensic documentation of a domestic violence and child abuse patient.

BREAKOUT 5:

Working Together to Change the World for Victims of Violence and Their Children

Casey Gwinn, Esq., National Family Justice Center Alliance, San Diego, Calif.

Utilization of coordinated community response programs work to create a support network for victims and their families that is both available and accessible. As providers, we need the full extent of the community's legal system to protect victims, hold perpetrators accountable, and reinforce the community's intolerance of violence. This presentation will assist the learners in developing this victim-centered response model.

Objectives: At the conclusion of this educational offering, participants will be able to:

- Develop effective models of collaboration, multi-agency high performing teams, and multi-agency services in working with victims of trauma and abuse.
- Identify strategic steps to enhance their individual, agency, and community efforts toward effective, coordinated community response to domestic violence and sexual assault crimes.

Thursday, May 15, 2014 *continued*

BREAKOUT 6:

**You Are a Witness Whether You Like it or Not—
Testifying in a Child Sex Case**

Teresa Hensley, J.D., Cass County Prosecutor
Monica Penrose, J.D., Cass County Assistant Prosecutor

From the moment you have a conversation with that child, you are preparing to be a witness in one year, maybe two or three years later at trial. Document specifically what both you and the child said, word for word. Also include where you were and who was present so that during a 491 hearing you can describe the environment and circumstances surrounding the conversation.

Objectives: At the conclusion of this educational offering, participants will be able to:

- Discuss the importance of documenting the child’s disclosure.
- Prepare for trial testimony the moment disclosure occurs.

11:30 a.m. – Noon

Lunch Provided, Room 2103 A and B

12:30 p.m. – 2 p.m.

Breakout Sessions

BREAKOUT 1:

Medical-Legal Documentation: Accuracy and Objectivity!

Jenifer Markowitz, N.D., R.N., WHNP-BC

Documentation is a foundational element of forensic clinical practice. It is also, in cases that go forward in the criminal justice system, some of the most impactful medical evidence available. Consistency and thoroughness are critical—the absence of information in the medical record can be as important as what is there. This interactive session will discuss some of the best practices related to medical-forensic documentation, both narrative and photographic, and identify pitfalls that can leave clinicians vulnerable during testimony.

Objectives: At the conclusion of this educational offering, participants will be able to:

- Describe best practices for written documentation in the living forensic patients.
- Complete documentation with the expectation of presenting it in the criminal justice system.

BREAKOUT 2:

**Uncovering the Hidden Crimes of Sexual Assault
and Molestation Within Long-Term Care Facilities**

Lilian Jeter

During my ongoing 28 years of handling cases of elder abuse in community and residential care settings—whether from the direct investigative role as law enforcement to this present day as an advocate operating autonomous from any organization, government, or care entity—the greatest and most frustrating challenge has been in the handling of sexual abuse and molestation cases. This presenter wants the audience to take away at the end of the session a greater understanding of why these crimes occur, why the incidents are not always made public or even reported, why the victimization continues, and, when reported, the monumental obstacles facing all responders from the onset of the case through prosecution.

Not only are incidents of sexual assault and molestation of older, vulnerable victims in nursing homes and long-term care settings hard to recognize and subsequently identify, but what exactly are the procedures, policies, ethical dilemmas, and reporting mandates that frontline responders from multidisciplinary fields face in taking the first steps through the finalization of the investigation?

This presentation will expose the horrific victimizations of society’s most vulnerable: victims who suffer from dementia, who are bedridden, who are unable to cry out in pain, who are not believed, who are isolated from view behind closed doors.

Objectives: At the conclusion of this educational offering, participants will be able to:

- Communicate on this taboo subject of older vulnerable victims of sexual assault and molestation.
- Discuss the role of law enforcement in working the case with nonresponsive and impaired victims, breaking down the barriers set up by facility administrators, protection of evidence, and interviewing witnesses to build a successful prosecution in court.

Thursday, May 15, 2014 *continued*

BREAKOUT 3:

Advanced Course for Clinical Nurse Directors of Forensic Programs

Connie Brogan, R.N., CEN, SANE-A

Are you considering becoming the clinical nurse director of a SANE and/or forensic care program? Are you the director and feel overwhelmed? Do you wonder if you are doing this right? This course will help the nurse leader in developing, implementing, and sustaining a clinical medical forensic program in the rural or urban setting.

Objectives: At the conclusion of this education offering, participants will be able to:

- Develop a forensic program leadership plan.
- Develop program specific goals, documents, and reports.

BREAKOUT 4:

Law Enforcement and Victim Advocates: Why Can't We Be Friends?

Jessie Funk, M.P.A., Coordinator of Advocacy Services, Metropolitan Organization to Counter Sexual Assault (MOCSA)
Sgt. Lionel Colon, Kansas City Police Department, Special Victims Unit
Sgt. Michael Seward, Kansas City Police Department, Special Victims Unit

Law enforcement and victim advocates may have different roles, but building a strong collaboration is essential to improving our response to sexual assault. In this session, MOCSA Coordinator of Advocacy Services Jessie Funk and Sgts. Lionel Colon and Michael Seward of KCPD SVU will discuss how advocates and law enforcement can work together effectively. The presenters will share real life scenarios exemplifying the benefits of a positive relationship between law enforcement and advocates.

Objectives: At the conclusion of this educational offering, participants will be able to:

- Discuss the differences and similarities between the role of law enforcement and victim advocates.
- Develop strategies to improve collaboration between victim advocates and law enforcement.
- Utilize real world examples to explain the benefits of effective collaboration.

BREAKOUT 5:

Drug-Facilitated Sexual Assault 2014: When to Clinically and Legally Collect Evidence, and What You Need to Know

Michael Weaver, M.D., FACEP

Drug-facilitated sexual assault presents a unique set of challenges for forensic examiners. This module will address the various types of drugs used to facilitate sexual assault, medical treatment, evaluation, and forensic implications. Participants may include law enforcement officers, advocates, prosecutors, and medical professionals. This presentation is appropriate for rural, suburban, and urban areas.

Objectives: At the conclusion of this educational offering, participants should be able to:

- Identify common drugs and recognize symptoms used to facilitate sexual assault.
- Identify the critical clinical issues in the management of these patients while preserving the chain of evidence from the prehospital setting to the handoff to law enforcement.
- Identify the unique medical and legal considerations involving the consent for treatment and collecting forensic evidence.

BREAKOUT 6:

Eliminating Witness Intimidation

Catherine Vannier, J.D., Missouri Office of Prosecution Services

Vannier will lead discussion on examples and experiences of witness intimidation, define the legal doctrine of Forfeiture By Wrongdoing, and offer strategies in preventing and responding to witness intimidation when it occurs.

Objectives: At the conclusion of this educational offering, participants will be able to:

- Define witness intimidation.
- List tactics in expanded safety planning.

2 – 2:30 p.m. Break
Vendor Exhibits, Room 2103 C

Thursday, May 15, 2014 *continued*

2:30 – 4 p.m.

Breakout Sessions

BREAKOUT 1:

**Research Development and Implementation—
Disseminating the Results of Your Good Work**

Jenifer Markowitz, N.D., R.N., WHNP-BC

In the course of working with patients, many clinical programs accumulate data that at the very least sheds light on some of the descriptive characteristics of violence, including who is impacted, what types of violence is perpetrated, and how often is injury identified, to name a few. Clinicians are also putting new techniques into practice (or, in some cases, refining old techniques), and encountering unusual clinical scenarios that provide a new perspective on patient care. All of this information has the potential to inform the field, but first we need to hear about it. This interactive workshop will discuss ways to disseminate the information we encounter, from peer-reviewed journal articles to book chapters to case studies, and provide participants with concrete tools for beginning their path towards publication.

Objectives: At the conclusion of this educational offering, participants will be able to:

- Identify vehicles for disseminating clinical information.
- Describe the types of information suitable for different kinds of publications.

BREAKOUT 2:

Behind Closed Doors—Marital Sexual Assault

Russell W. Strand, Chief, Behavioral Sciences, Education and Training Division, U.S. Army Military Police School

The majority of sexual assault victims know their assailants. Despite this fact, the public still expects rapists to be weapon-wielding strangers who attack their victims in dark alleys. This expectation, grounded in cultural bias, victim blaming, rape-myth acceptance, and faulty expectations about victim behavior, creates unique challenges to the successful prosecution of nonstranger sexual assault. A current or former relationship between the victim and the defendant can lead to additional complexities that often make the arrest, prosecution, and conviction of an intimate-partner rapist even more difficult. Historically, additional barriers to prosecution were created by many jurisdictions' criminal laws that sanctioned intimate-partner rape by exempting spouses from the rape statutes. Although the marital exemption is no longer codified, some allied criminal justice professionals have continued to ignore, dismiss, or blame victims of intimate-partner sexual assault. A growing number of allied criminal justice professionals recognize the validity of intimate-partner sexual violence and conduct aggressive investigations and prosecutions of these rapists.

Objectives: At the conclusion of this educational offering, participants will be able to:

- Define marital sexual assault, including co-occurrence of physical violence and sexual violence.
- Identify the environment.
- Apply strategies for disclosure and response to marital sexual assault.

Thursday, May 15, 2014 *continued*

BREAKOUT 3:

CSI Photography: Don't Just Take Pictures, Take the Pictures You Want To Take!

Ryan Rezzelle, M.F.S., CSCSA, Johnson County Sheriff's Department Crime Lab

This is a general didactic session with an overview of photographic techniques for the documentation of trauma. It is open to all.

Objectives: At the conclusion of this educational offering, participants should be able to:

- Utilize digital cameras for documentation of injuries for patients or subjects of interest in police investigations.
- Verbalize the difference between a scale photograph and a photograph that contains a scale, and how to problem-solve focus issues, depth of field, and use of flash and lighting.

BREAKOUT 4:

The Traumatic Outcomes of Caring—Healing Vicarious Trauma in the Profession of Caring

Jennifer Green, R.N., B.S.N., B.A., SANE-A

With an individualized approach, participants will reflect on how exposure to trauma has shaped their professional practice, personal and professional relationships, and spiritual growth. We will explore how vicarious trauma impacts current relationships through a self assessment. With a deeper awareness of vicarious trauma, we will explore interventions to reduce compassion fatigue.

Objectives: At the conclusion of this educational offering, participants should be able to:

- Identify how exposure to trauma has shaped professional practice, personal and professional relationships, and spiritual growth.
- Recognize how vicarious trauma impacts current relationships through a self assessment.

BREAKOUT 5:

The Voice of the Patient: Informing Practice, Policy, and Research for Victims of Sexual and Intimate-Partner Violence

Annie Lewis-O'Connor, Ph.D., NP-BC, MPH

The acute and lifetime health consequences associated with intimate-partner and sexual violence have an enormous burden on the health care system. There is much opportunity for improvement. The Institute of Medicine along with the United States Preventive Health Task Force and the Department of Health and Human Services in 2012 stated that all women should be assessed and briefly counseled for interpersonal violence. The costs of health consequences associated with IPV and SV are in the billions. Women who are abused utilize the health care system at least threefold more than nonabused women. There is extensive literature that links the health consequences of violence and abuse to poor health:

- Women who are abused have the highest rates of poor physical and mental health and high risk of revictimization. Identification and engagement of women suffering from IPV/SV has the potential to help patients improve their own safety and health.
- Women who have been choked or strangled are six times more likely than other abused women to be murdered.
- Women who present to the health care system following an acute episode of violence are in a traumatized state, and their engagement with a complex health care system poses significant burden to them. Patients report that they are overloaded with an abundance of information, are approached by many service providers, and find the health care system overwhelming and difficult to navigate. As a result, many disengage and then find themselves later bearing the burden and health consequences.

Objectives: At the conclusion of this educational offering, participants will be able to:

- Describe how Patient Centered Outcomes Research (PCORI) using Comparative Effectiveness Research may impact services provided to victims of IPV/SA.
- Describe evolving best practices and discuss future research needed to improve the medical and social model of care for victims of domestic and sexual violence.

Thursday, May 15, 2014 *continued*

BREAKOUT 6:

Signs and Symptoms of Coercive Control—Linking Child Abuse, Domestic Violence, and Animal Abuse

Catherine Vannier, J.D., Missouri Office of Prosecution Services

Vannier will lead discussion on overlapping occurrences of coercive control in all types of family violence cases and identify common factors and strategies in responding to the co-occurrence of these different types of violence.

Objectives: At the conclusion of this educational offering, participants will be able to:

- Define coercive control and identify associated power and control tactics.
- List best practices in cases involving the co-occurrence of domestic violence and child abuse.

4 – 4:30 p.m. Break

Vendor Exhibits, Room 2103 C

4:30 – 6 p.m.

Breakout Sessions

BREAKOUT 1:

The Legal Nurse Expert Witness Puzzle: How to Make the Pieces Fit While Remaining Objective. But First, Where do I Start?

Jennifer L. Johnson, M.S.N, WHNP-BC, APRN, SANE-A, SANE-P

There has been a great deal of information involving legal nurse consulting and becoming an expert witness. This session will discuss the differences and similarities of the two. How can you build and market a nurse consulting business while remaining objective, despite which side is requesting your assistance?

Objectives: At the conclusion of this educational offering, participants will be able to:

- Discuss the differences and similarities of a LNC and an expert witness.
- Discuss why only working for the prosecution or plaintiff could make you be viewed as biased.
- Discuss steps to building a consulting practice.

BREAKOUT 2:

Problem Solving and Trouble-Shooting Forensic Photography, Hands-On Part I

Ryan Rezzelle, M.F.S., CSCSA, Johnson County Crime Lab

This session will assist the forensic provider in utilizing their digital camera to the utmost potential. Crime scene photographers will teach you how to utilize your camera to take expert abuse photographs. If you enroll in the course, you must bring a digital camera.

- **Limited to 35 attendees**
- **Pre-registration is required. The \$50 lab fee includes dinner.**
- **You must bring a digital camera.**

Objectives: At the end of this educational offering, participants will be able to:

- Utilize digital cameras for full body documentation of patients or subjects of interest in police investigations.
- Distinguish the difference between a scale photograph and a photograph that contains a scale.
- Verbalize how to problem solve:
 - Focus issues
 - Depth of field
 - Use of flash and lighting

BREAKOUT 3:

Accessibility and Responsiveness to Persons with Disabilities—Is Your Forensic Program Ready?

Angie Blumel, MOCSA

Lisa Fleming, Rose Brooks Center

MOCSA, Rose Brooks Center, and UMKC’s Institute for Human Development have a collaborative grant project through the Department of Justice Office on Violence Against Women With Disabilities Grant Program. Called Safety First, the project is designed to increase the accessibility and responsiveness in our community to sexual and domestic violence victims with disabilities.

As a part of this project, the Safety First team developed an accessibility and responsiveness review tool designed to help organizations, forensic programs, and so on conduct a self-assessment across five domains:

- inclusive practices
- inclusive communication
- building capacity
- inclusive environment
- inclusive policies

Each participant will be provided an OVW-approved Accessibility and Responsiveness for Survivors with Disabilities Review Tool and Scoring Instrument to conduct a self-audit upon returning to her/his community.

Thursday, May 15, 2014 *continued*

BREAKOUT 4:

Trauma and Post-Traumatic Stress Disorder in Children

Kristen Mills-Trowbridge, LPC, RPT, Therapist, Metropolitan Organization to Counter Sexual Assault

All children and adolescents experience stressful events which can affect them both emotionally and physically. Their reactions to stress are usually brief, and they recover without further problems. A child or adolescent who experiences a catastrophic event may develop ongoing difficulties known as post-traumatic stress disorder (PTSD). The stressful or traumatic event involves a situation where someone's life has been threatened or severe injury has occurred (for example, they may be the victim or a witness of physical abuse, sexual abuse, or violence in the home or community).

Objectives: At the conclusion of this educational offering, participants will be able to:

- Identify symptoms of trauma and PTSD in children.
- Develop strategies and approaches to making appropriate referrals for children experiencing symptoms of PTSD.

BREAKOUT 5:

LGBTQ Sexual Assault Survivors—What You Need to Know

Jessica Farmer, Youth Outreach Coordinator, Kansas City Anti-Violence Project

Sexual violence occurs within and against the lesbian, gay, bisexual, transgender, and queer (LGBTQ) community at similar or higher rates than in the heterosexual community, yet remains a taboo subject. This workshop will explore strategies for creating dialogue when working with LGBTQ survivors, as well as review myths and stigmas that plague the LGBTQ community.

Objectives: At the conclusion of this educational offering, participants will be able to:

- Identify appropriate terminology and avoid language that may be hurtful and triggering.
- Identify the unique experiences and barriers that an LGBTQ survivor of sexual assault may experience.

BREAKOUT 6:

The Story of Joseph—An Inside Look at the Horrific Crimes of Elder Abuse

Lillian Jeter

At this moment, 95 percent of our nation's elderly population is still living behind the closed doors of homes in the community setting. While the vast majority of this population is active, involved, and living a quality lifestyle, another segment is physically abused, neglected, psychologically abused, financially exploited, and/or, to a lesser extent, sexually assaulted on a routine, oftentimes daily basis.

This presentation will utilize a case study involving home health care professionals, state officials, law enforcement, prosecutors, court personnel, and advocates to reveal the realities of horrific victimization at the hands of "loved ones."

The Story of Joseph is also a depiction about the love of family members, a church congregation, and a neighborhood that fought against the abuse and united as a community to create change.

Objectives: At the conclusion of this educational offering, participants will be able to:

- Develop more open lines of communication between health care professionals, law enforcement, and other first responders.
- Identify gaps in the recognition of signs of elder abuse and formulate a better multidisciplinary approach to prevent further victimization.

Friday, May 16, 2014

7:30 – 8 a.m. Registration

Continental Breakfast, Room 2103C

8 – 9:30 a.m.

Investigating and Prosecuting Sexual Assault by Constructive Force

Russell W. Strand, Chief, Behavioral Sciences, Education and Training Division, U.S. Army Military Police School

Cases where the perpetrator employs constructive force present unique challenges, especially when the sexual assault involves minimal to no force or when there are multiple sexual assaults. Examples of such cases include but are not limited to sexual assault by police officers, teachers, religious professionals, and military members on subordinates.

Constructive force cases present additional challenges to those normally encountered in nonstranger sexual assault cases. To overcome these challenges, investigators and prosecutors must conduct offender-focused investigations and prosecutions while simultaneously supporting victims and connecting them with the support and care they need to heal. In addition, the investigation must put the sexual assault into context by examining the power differential and history of the relationship between the victim and perpetrator to determine whether the perpetrator employed any grooming techniques or attempts to mask the crime. It must also examine the environment in which the sexual assault occurred. Finally, the consent defense can be particularly persuasive in constructive force cases if jurors do not understand the nature of constructive force, which requires the prosecutor to use trial strategies that explain the overwhelming nature of the constructive force employed. This workshop offers multidisciplinary strategies for handling “power rape” cases and investigating and proving constructive force.

Objectives: At the conclusion of this educational offering, attendees will be able to:

- Differentiate the dynamics and legal issues involved when constructive force is used to perpetrate a sexual assault.
- Identify tools for overcoming the consent defense in constructive force sexual assault cases.

9:30 – 10 a.m. Break

Vendor Exhibits, Room 2103 C

10 – 11:30 a.m.

Obstruction of Justice by Health Care Professionals—Errors in the Forensic Evaluation of Gunshot Wounds

Bill Smock, M.D., FACEP, FSSEM, Louisville Metro Police

In many circumstances, justice requires a multidisciplinary approach between law enforcement and clinical forensic medicine. Both need to eliminate myths and understand that the determination of an entrance versus exit wound and range of fire are critical components in these cases. An exit wound is not always larger than an entrance wound. Failure by health care professionals to correctly evaluate and interpret gunshot wounds can have implications on legal proceedings, including the obstruction of justice. This presentation will review the science of ballistics and apply it to victims of gun violence.

Objectives: At the conclusion of this educational offering, attendees will be able to:

- Describe the importance of the forensic evaluation of gunshot wounds.
- Describe the physical evidence associated with range-of-fire determination.
- Describe the characteristics associated with gunshot wounds of entrance and exit.

11:30 a.m. – Noon Break

Noon – 1 p.m.

Clinical Forensic Aspects of the Boston Marathon Bombing

Leon D. Sanchez, M.D., M.P.H., Associate Professor of Medicine, Harvard Medical School

During the Boston Marathon on April 15, 2013, two pressure cooker bombs exploded at 2:45 p.m., killing three people and injuring hundreds more. The Boston-area EMS, law enforcement, criminal justice, and hospital personnel sprang into action, immediately triaging and caring for scores of victims. This presentation will provide a firsthand account of the response from both a prehospital, hospital, and forensic perspective.

Objectives: At the conclusion of this educational offering, attendees will be able to:

- Discuss injuries of forensic significance in a disaster setting.
- Discuss the challenges of collecting and documenting forensic evidence during a disaster.

1 p.m. Evaluations/Adjourn

Guest Faculty

Dee Ballard, R.N., B.S.B.M., CEN, SANE-A, SANE-P

Lake Regional Medical Center
Lake Ozarks, Mo.

William Green, M.D., FACEP

Medical Director
California Clinical Forensic Medical Training Center

Casey Gwinn, Esq.

President, National Family Justice Center Alliance
San Diego, Calif.

Lillian Jeter, M.Ed.

Co-Founder, Elder Abuse Prevention Association
Southport, N.C.

Annie Lewis-O'Connor, Ph.D., NP-BC, MPH

Nursing Scientist
Director, Women's CARE Clinic
Brigham and Women's Hospital
Chair, National Health Collaborative on Violence and Abuse
Boston, Mass.

Jenifer Markowitz, N.D., R.N., WHNP-BC

Forensic Consultant
Past President, International Association of Forensic Nurses

Leon D. Sanchez, M.D., MPH

Associate Professor of Medicine, Harvard Medical School
Vice Chair for Operations, Department of Emergency Medicine
Beth Israel Deaconess Medical Center

William Smock M.D., M.S., FACEP, FAAEM

Police Surgeon, Louisville Metro Police

Russell W. Strand

Chief, Behavioral Sciences
Education and Training Division
U.S. Army Military Police School
Fort Leonard Wood, Mo.

Olga Trujillo, J.D.

Former Director of the Special Projects Division
U.S. Department of Justice

Catherine Vannier, J.D.

Missouri Office of Prosecutor Services
Jefferson City, Mo.

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Jessica Farmer

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Cass County Prosecutor
Cass County, Mo.

Tom Hensley, F-ABMDI

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Kathleen Hitchcock-Brackney,

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Kansas City, Mo.

Jennifer Johnson, R.N., M.S.N., APRN,

SANE-A, SANE-P
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Sgt. Michael Seward

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Dean Shepard

Corporate Photographer
Saint Luke's Health System
Kansas City, Mo.

Linda Tessar

Executive Director, Hope Haven
Cass County, Mo.

Michael Weaver, M.D., FACEP

Forensic Care Program Medical Director
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Detective Kimberly Shirley-Williams

Kansas City Missouri Police Department
FBI-Squad 5

Jackie Witt, R.N., M.S.N.

University of Missouri Kansas City
School of Nursing

Planning Committee

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Johnson County, Kan.

Michael Weaver, M.D., FACEP

Conference Medical Director
Forensic Care Program Medical Director
Saint Luke's Health System
Kansas City, Mo.

Jackie Witt, R.N., M.S.N.

University of Missouri School of Nursing

Conference Location



Kansas City Convention Center, 2100 Rooms

Located in downtown Kansas City, Mo., just 20 minutes from the Kansas City International Airport, the Kansas City Convention Center dominates the city skyline with its brilliant art deco pylons. Attendees are right in the heart of the city and just steps away from hotels, the Sprint Center, and the Power & Light District.

Kansas City has everything you would expect to find in a major metropolitan city: dynamic convention facilities, world-class hotels, professional sports, full-gaming casinos, top-notch museums, live theater, and interesting places to relax and have fun. Located in the heart of America, Kansas City is easily accessible by interstates and highways. Its central location makes it a quick flight from just about anywhere across the nation.

Downtown Kansas City offers a number of parking options near the Convention Center facilities. **This conference will not supply parking passes.** For a map of parking lots and garages in downtown KC: http://www.downtownkc.org/wp-content/uploads/2010/07/KauffmanParkingMap-Web_Feb2012.pdf.

Transportation

Area airport:

Kansas City International Airport (MCI)

Transportation:

- Super Shuttle: 800-243-6383 or 816-243-5000
- Budget Rent-a-Car, 1-816-471-3953
- Hertz, 1-816-474-4970

Driving directions from Kansas City International Airport:

Take I-29 South to Broadway/Highway 169 Exit. Take Broadway to 12th Street. Turn left on 12th Street, go one block east to hotels and convention center.

Additional Hotels

Use our new BookDirect™ online hotel booking engine, offered to you by the Official Travel Source for Kansas City, and find the lowest rates on KC Hotels at <http://www.visitkc.com/places-to-stay/index.aspx>.



The Aladdin Hotel

1215 Wyandotte Street, Kansas City, Mo.

The Hotel confirms the following guest room rates:

\$104.00 Single or Double Occupancy Rate

\$114 Triple Rate

\$124 Quad Rate

These rates reflect the government discount.

These rooms will go fast!

The Aladdin Hotel is directly adjacent and easily accessible to the Convention Center. Check-in is 4 p.m. and check-out is 11 a.m. The Hotel cannot guarantee early check-ins or late check-outs.

Guest parking is available in a covered, underground parking garage

- \$16 a day for valet with unlimited departure and return.
- \$12 for self-park with charges for each departure and return in a 24-hour period.

CUT-OFF DATE: April 22, 2014

For the purpose of this agreement, "cut-off date" is defined as the last day on which reservations will be accepted as a part of this room block and at the agreed-upon rate. Reservation requests received after 1 p.m. Central time on the cut-off date will be accepted based on availability and at the hotel's prevailing rate.

Reservations:

Call-In: Individuals can call the hotel toll free at 877-224-2870 for reservations. In order to get the group rate they must reference **Forensic Investigation Conference**. You will need to provide a credit card number to confirm the reservations for the date(s) indicated. No-show guests on the first day of the reservation will receive a charge equal to one night's room and tax. Reservations can be canceled without penalty up to 6 p.m. the day of arrival.

E-Booking Tool: You can also register online via our e-Booking link: [new link TK](#)

Accommodations:

Each room is equipped with:

- Free high-speed wireless and wired Internet
- Flat screen TVs with 70 channel cable
- DVD players with free DVD library at the front desk
- Dual shower heads
- Spa robes
- Wolfgang Puck coffee
- Complimentary 24-hour business and fitness centers

The Aladdin Hotel is located just two and a half blocks from the Kansas City Power & Light entertainment and dining district, with more than 50 restaurants, nightclubs, movie and live performance venues, and retail.



Kansas City Marriott–Downtown

200 W. 12th Street, Kansas City, Mo.

Located adjacent to the Kansas City Convention Center and in the heart of the city's business, government, and theater districts, the Marriott provides a delightful stay for business and leisure travel. The two-tower complex combines newly restored historic elegance with modern luxury. All rooms offer spacious design and wireless Internet access. Plan to enjoy the hotel's restaurants, lounge and health club and fitness facilities.

Parking at the hotel will be \$15 for overnight guests.

The Downtown Marriott is a totally smoke-free hotel.

A few short blocks away is the Kansas City Power & Light District, offering restaurants, cafes, bistros, bars, and nightlife, as well as an AMC Mainstreet Theater and Lucky Strike Lanes. A short cab ride away, you can be at The Westin Crown Center Complex, where you have easy access to 85 acres of shops, restaurants, theaters, Science City at Union Station, and Liberty Memorial—the only World War I memorial in the country.

Room Rates:

Run of House \$119

Government Rate \$99

Booking Website:

Make, modify, and cancel your hotel reservations as well as take advantage of any room upgrades, amenities or other services offered by the hotel by visiting

https://resweb.passkey.com/Resweb.do?mode=welcome_ei_new&eventID=10757744



Crowne Plaza Kansas City Downtown

1301 Wyandotte St., Kansas City, Mo.

Welcome to the newly renovated Crowne Plaza Kansas City Downtown, conveniently situated in the heart of downtown Kansas City. Adjacent to the Kansas City Convention Center and the Power & Light District, this luxurious Crowne Plaza hotel offers stunning views of historic downtown Kansas City and features a Starbucks Coffeehouse in the lobby.

The Crowne Plaza Kansas City Downtown is located within walking distance to the Power & Light District, H&R Block World Headquarters, Kauffman Center for the Performing Arts, Midland Theater, and the Sprint Center Arena. Take a dip in our seasonal heated outdoor pool, work out in the fitness center, and grab a bite to eat in the City Grille or enjoy a drink in our City Bar.

Rooms come fully equipped with complimentary high-speed Internet access, a work desk, and Crowne Plaza sleep amenities. Your comfort is our top priority. Whether for business or leisure, or simply getting away for an evening, Crowne Plaza Kansas City Downtown is your home away from home! Within minutes of Kemper Arena, American Royal, River Market, Crown Center, and the Country Club Plaza, the Crowne Plaza Kansas City Downtown hotel is centrally located to all retail and entertainment venues that Kansas City has to offer.

Room Rates:

Single or Double Occupancy \$143

Triple \$163

Quad \$183

Reservations can be made at this web address or by calling **888-233-9527**.

Booking Website:

A dedicated website is now available for your attendees to book their hotel rooms online.

https://resweb.passkey.com/resweb.do?mode=welcome_ei_new&EventID=10752034

Past Conference Attendees Comments

“Made some great contacts.”

“This rivals any national conference.”

“Thank you so much for this conference. What a wonderful experience.”

“Loved the multidisciplinary approach”

“This is by far the best conference I’ve been to in six years!”

“I learned more than I thought possible.”

“Took good care of us”

“Great training! Thank you.”

“Very affordable. Many RNs do not get reimbursed for attending conferences, making expanding our knowledge a financial challenge.”

“Dynamic, knowledgeable, and enthusiastic speakers.”

“The speakers were all great.”

“Great conference. It is getting better every year. Hope you continue it.”

“FANTASTIC CONFERENCE. GREAT VENUE!”

Things That Are Unique in Kansas City

Jazz, fountains, barbeque, and unique attractions. These beloved traditions come to mind when most people think of Kansas City, and for good reason: They are still near and dear to the city's heart and culture.

Arabia Steamboat Museum

The Arabia Steamboat Museum is home to a true time capsule of frontier life in the 1800s. The Arabia was headed up the Missouri River in the fall of 1856 when she struck a tree snag and sank just north of Kansas City. Her cargo hold was full of 200 tons of supplies bound for general stores and pioneer settlements. As the years passed, the river changed course and left the Arabia buried beneath a Kansas cornfield. Finally, in 1988 a group of modern-day adventurers uncovered the lost Arabia and her magnificent cargo. They were amazed to find fine dishware, clothing, and even bottled food all preserved in remarkable condition. Their find has been called the King Tut's Tomb of the Missouri River. So, if you're looking for an adventure your whole family will enjoy, discover the treasures of the steamboat Arabia.

Gangster Tour

Kansas City was a favorite spot of the "old timers." The Gangster Tour puts you hot on the trail of this city's most notorious Goodfellas. You'll be immersed in a melodramatic look at mob homes and hangouts, turf wars, and infamous crimes like the Union Station massacre.

Fountains

From large and majestic to small and whimsical, each KC fountain has a character all its own. So it's no surprise why this Midwestern metropolis has earned its bubbly nickname, the City of Fountains. Kansas City has more fountains than any other city in the world, except maybe Rome. The exact number of fountains is not known as new public and private fountains are added regularly. But the City of Fountains Foundation, which keeps the only known database of Kansas City fountains at kcfountains.com, currently lists more than 200 fountains that flow in Kansas City.

Jazz

First, let's talk about KC's signature sound. Your visit would not be complete until you take in some of Kansas City's famous jazz. During the roaring '20s through the early '40s, jazz reigned in Kansas City. Head to the 18th & Vine Historic Jazz District to learn more about the genre's rich KC roots. The American Jazz Museum chronicles the city's jazz legacy and showcases legends like Ella Fitzgerald and Duke Ellington, and the Mutual Musicians Foundation hosts fierce, late-night jam sessions.

Kansas City Royals

Come see the KC Royals play the Colorado Rockies (May 13 and 14) and the Baltimore Orioles (May 15-17). Opened as Royals Stadium on April 10, 1973, Kauffman Stadium is recognized throughout baseball as one of the game's most beautiful ballparks. Since then, many exciting games have been contested, including the 1973 and 2012 All-Star Games, three no-hitters, playoff games in 1976, '77, '78, '80, '81, '84, and '85, and a World series title in 1985. The facility was officially renamed in honor of Ewing M. Kauffman in a ceremony at the stadium on July 2, 1993. kansascity.royals.mlb.com.

Negro Leagues Baseball Museum

Part of the Museums on 18th & Vine complex, the Negro Leagues Baseball Museum recreates the look, sounds, and feel of the game's storied past. Video presentations and memorabilia in the 10,000 square-foot multimedia exhibit chronicle the history and heroes of the leagues from their origin after the Civil War to their demise in the 1960s. The federal government recently designated the museum America's National Negro Leagues Baseball Museum.

The Nelson-Atkins Museum of Art

The Nelson-Atkins Museum of Art is internationally recognized for its outstanding collection of more than 33,500 objects. From ancient times to modern day, this encyclopedic museum is one of the best in the country, offering visitors the opportunity to explore civilization through the eyes of painters, sculptors, craftsmen, and many other artists. Free to all visitors. nelson-atkins.org.

The National World War I Museum

The National World War I Museum at Liberty Memorial shares deeply personal stories of courage, honor, patriotism, and sacrifice. Through thousands of historical objects, photographs, and eyewitness accounts, you will experience this monumental event from the individual's perspective. This state-of-the-art museum takes you on an epic journey through a transformative time in our world's history. theworldwar.org.

Accreditation

PRE-CONFERENCE

Advanced Sexual Assault Medical Forensic Course for Physicians

This activity has been planned and implemented in accordance with the Essential Areas and policies of the Accreditation Council for Continuing Medical Education through the joint sponsorship of the University of Missouri-Kansas City School of Medicine and Saint Luke's Hospital of Kansas City. The University of Missouri-Kansas City School of Medicine is accredited by the ACCME to provide continuing medical education for physicians.

The University of Missouri-Kansas City School of Medicine designates this live activity for a maximum of 12.50 *AMA PRA Category 1 Credits*[™]. Physicians should claim only the credit commensurate with the extent of their participation in the activity.

SANE-A Prep Course

Nursing: 6.5 contact hours

The Kansas City Clinical CSI Challenge: Get YOUR CSI ON

Nursing, POST, and Criminal Justice hours will be awarded. Hours are posted on saintlukeshealthsystem.org/forensic.

Note: These CME hours are included in the overall conference hours.

CONFERENCE

Legal Hours

16 hours of continuing education for criminal justice will be awarded per the continuing educational guidelines for Missouri, Iowa, Nebraska, and Kansas.

Law Enforcement

Missouri, Iowa, Nebraska, and Kansas Law Enforcement POST Hours will be awarded per individual state guidelines. If your state is not mentioned, please contact cbrogan@saint-lukes.org.

Physicians

This activity has been planned and implemented in accordance with the Essential Areas and policies of the Accreditation Council for Continuing Medical Education through the joint sponsorship of the University of Missouri-Kansas City School of Medicine and Saint Luke's Hospital of Kansas City. The University of Missouri-Kansas City School of Medicine is accredited by the ACCME to provide continuing medical education for physicians.

The University of Missouri-Kansas City School of Medicine designates this live activity for a maximum of 23.75 *AMA PRA Category 1 Credits*[™]. Physicians should claim only the credit commensurate with the extent of their participation in the activity.

Social Services/Advocacy

Victim Services providers will receive 15.75 contact hours

Nursing

Nursing hours will be awarded. Hours are posted on saintlukeshealthsystem.org/forensic

POST-CONFERENCE

SANEAPOLOOZA

Nursing: 7.5 contact hours

Trauma Hours

Saint Luke's Hospital's Trauma Program has approved this conference for 8 trauma continuing education hours.

All participants are required to sign attendance rosters at the beginning of each day of the conference. A \$25 fee will be assessed to replace certificates.

Faculty presenters of continuing education programs sponsored by Saint Luke's Health System are expected to disclose any real or perceived conflict of interest related to the content of their presentations. Copies of faculty disclosures are included in the participant program materials and/or given prior to their lecture.

FORENSIC INVESTIGATIONS CONFERENCE Registration Form



GENERAL INFORMATION

NAME/CREDENTIALS _____

DATE OF BIRTH _____

EMAIL _____

MAILING ADDRESS _____

CITY/STATE/ZIP _____

DAY PHONE _____

FAX _____

DISCOUNTS

Register three members from your organization and receive a fourth registration for free. Physicians will receive a discount for attending pre-conference and conference. To register for discount rates, call the Saint Luke's Concierge at 816-932-5100.

Pre-conference Events *Pre-registration required for the following:*

- \$325 Physician's Sexual Assault Forensic Examination Course (*Adult and Adolescence*)
- \$50 The Kansas City Clinical CSI Challenge: Get YOUR CSI ON
- \$150 SANE-A Review Course

General Conference Registration:

- \$325 If received before February 1, 2014
- \$350 If received between February 2, 2014 – April 14, 2014
- \$400 If received after April 14, 2014
- \$200 Students
- \$50 Problem Solving and Trouble Shooting Forensic Photography, Hands-On Part I (*includes dinner*) *Must be registered for general conference.

Post-conference Events *Pre-registration required for the following:*

- \$350 SANEAPOLOOZA
Limited to 35 registrants, PRE-REGISTRATION IS REQUIRED!

Physician Registration Options:

- \$325 Advanced Sexual Assault Medical Forensic Course for Physicians Only, *May 12-13, 2014*
- \$375 Conference Registration Only, *May 14-16, 2014*
- \$600 **Combined Discounted Fee:**
Advanced Sexual Assault Medical Forensic Course for Physicians the Conference, *May 12-16, 2014*

DEMOGRAPHICS

- EMS
- Advocacy
- Nursing
- Medicine
- CSI
- Student *TYPE* _____
- Law Enforcement
- Attorney

FOR QUESTIONS OR TO REGISTER

saintlukeshealthsystem.org/forensic
 Saint Luke's Concierge 816-932-5100
saintlukesconciierge@saint-lukes.org

Fee includes an electronic flash drive with syllabus and lectures, refreshment breaks, and lunch. Vegetarian, vegan, and gluten-free dietary options will be available.

Registration fee must accompany registration form to receive confirmation. If paying by check, mail check with completed registration form to:

Forensic Conference
Saint Luke's Concierge
 4401 Wornall
 Kansas City, Mo. 64111

Registration confirmation letters and receipt will be emailed.

CANCELLATION

A full refund of the registration fee minus a \$75 administration fee will be granted if the cancellation is made in writing and postmarked **on or before May 1, 2014**. Refunds will not be issued for cancellation postmarked or received after that date.



saintlukeshealthsystem.org/forensic
forensic@saint-lukes.org