

OPH Southeast Region 9 2025 REGIONAL SEXUAL ASSAULT RESPONSE PLAN

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Report Coordinated and Compiled By:

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OVERVIEW

During the 2015 Regular Legislative Session, the Louisiana Legislature passed ACT No. 229, which addresses the treatment and billing of survivors of a sexually-oriented criminal offense. The legislation, which is now R.S. 40:1216.1, was enacted to ensure survivors have access to a forensic medical examination in every parish and to ensure no hospital or healthcare provider bill a survivor for any healthcare services rendered in conducting a forensic medical examination.

R.S. 40:1216.1 mandates the Louisiana Department of Health (LDH) to coordinate an annual sexual assault response plan for each of its nine regional health service districts. Each plan shall incorporate a sexual assault response team protocol. In OPH Region 9, the <u>Jefferson Parish Coroner's Office</u> Sexual Assault Nurse Examiner (JPCO SANE) Program officially serves as the OPH Southeast Region 9's regional sexual assault response team (since May 20, 2024) and will perform the forensic medical exams (FMEs) at the designated facilities in St. Tammany, St. Helena, Tangipahoa, Livingston, and Washington Parishes. SEE <u>APPENDIX A</u> for the JPCO SANE PROGRAM ALGORITHMS. Also, the JPCO SANE Program Team will continue to collect regional FME data from the designated facilities in Region 9 for policy development, process improvement, training, etc. SEE <u>APPENDIX B</u> for the Region IX Statistics Form. The coroners in Region 9 have agreements in place with the JPCO SANE Program to perform the FMEs in the Region 9 designated facilities/ERs. However, the emergency room physicians/designated providers will continue to perform the adult FMEs in all designated facilities when the JPCO SANE Program Team is unavailable.

Input was solicited from the OPH Region IX coroners and other regional SAR partners in the January 27, 2025 meeting regarding any updates and/or changes needed for the 2025 SAR Plan. SEE APPENDIX E for a copy of notices sent to stakeholders about the SAR planning meeting, a list of the individuals and organizations that were provided notice, and the method and timing of the notice provided. SEE <u>APPENDIX</u> F for a list of the individuals and organizations in attendance at the meeting.

The following 2025 OPH Southeast Region 9 Sexual Assault Response Plan includes the consensus-recommended updates/changes (SEE <u>APPENDIX H)</u> and will be submitted to the LDH Secretary for approval. The plan also meets the statutory mandates of Louisiana

R.S. 40:1216.1 and of ACT No. 669 of the 2024, as outlined below, and includes the procedures, which shall constitute minimum standards for the operation and maintenance of hospitals:

- a) Provide an inventory of all available resources and existing infrastructure in the region and clearly outline how the resources and infrastructure will be incorporated in the most effective manner. (Pages 4-6)
- b) Clearly outline the entity responsible for the purchase of sexual assault collection kits and the standards and procedures for the storage of the kits prior to use in a forensic medical examination. (Page 7)
- c) Clearly outline the standards and procedures for a survivor to receive a forensic medical examination, as defined in R.S. 15:622, to ensure access to such an examination in every parish. The plan shall designate a hospital or healthcare provider to be the lead entity for sexual assault examinations for adult survivors and a hospital or healthcare provider to be the lead entity for sexual assault examinations for pediatric survivors. The plan shall also include specific details directing first responders in the transport of survivors of a sexually oriented crime, the appropriate party to perform the forensic medical examination, and any required training for a person performing a forensic medical examination. (Pages 8-17 and 21-22)
- d) Clearly outline the standards and procedures for the handling and payment of medical bills related to the forensic medical examination to clarify and ensure that those standards and procedures are in compliance with this Section and any other applicable section of law. (Page 20)
- e) Clearly outline the standards and procedures for the transfer of sexual assault collection kits pursuant to ACT No. 669 of the Louisiana 2024 Regular Session and any other applicable sections of law. ACT No. 669 E.(2)e (Pages 18-19)

OPH Region 9 Sexual Assault Response Plan

The 2025 OPH Southeast Region 9 Sexual Assault Response Plan outlines the coordinated, multidisciplinary response of medical professionals, law enforcement agencies, criminal justice personnel, survivor advocacy agencies, crime laboratory personnel, and support agencies to sexual assaults in St. Tammany, St. Helena, Tangipahoa, Livingston, and Washington Parishes. This consensus-recommended regional response plan ensures that survivors of sexual assaults have immediate access to coordinated care that is survivor-centered, respectful, and both culturally and age-appropriate. It also ensures that survivors are provided with complete information about choices and have the autonomy to make informed decisions about the care they want to receive. OPH Region 9 will continue to update the regional sexual assault response plan every year in an effort to improve medical treatment and evidence collection outcomes and to maximize continuity of care for survivors of a sexually oriented criminal offense.

SEXUAL ASSAULT RESPONSE RESOURCES AND INFRASTRUCTURE

The OPH Region 9 Sexual Assault Response Team consists of key responders who will ensure that survivors have access to medical, law enforcement, advocacy, and prosecutorial services.

• Five (5) Coroners

Name	Jurisdiction
Honorable Dr. Ronald Coe	Livingston Parish
Honorable Dr. Jimmie Varnado	St. Helena Parish
Honorable Dr. Christopher Tape	St. Tammany Parish
Honorable Dr. Rick Foster	Tangipahoa Parish
Honorable Dr. Roger Casama	Washington Parish

• Two (2) District Attorneys

Name	District	Parishes
Honorable Scott M. Perrilloux	21st J.D.	Livingston, St. Helena, Tangipahoa
Honorable J. Collin Sims	22 nd J.D.	St. Tammany, Washington

• Emergency Medical Services

Organizations	Parishes
Acadian Ambulance Service	Livingston, St. Helena, Tangipahoa, St. Tammany
Northshore EMS	Washington
St. Tammany Fire District 1	St. Tammany (Slidell) – ambulance unit responds to medical emergencies but doesn't transport patients. Acadian
	Ambulance transports patients for St. Tammany FD 1.
St. Tammany Fire District 3	St. Tammany (Lacombe)
St. Tammany Fire District 4	St. Tammany (Mandeville)
St. Tammany Fire District 11	St. Tammany (Pearl River)

• Hospital Emergency Room (ER) Services

Designated Region 9 Hospitals/ERs	Location	Parish
Slidell Memorial Hospital - East (formerly Ochsner Hospital - Northshore)	Slidell	St. Tammany
Lakeview Hospital (formerly Lakeview Regional Medical Center)	Covington	St. Tammany
St. Tammany Parish Hospital	Covington	St. Tammany
Covington Trace Hospital and ER	Covington	St. Tammany
Slidell Memorial Hospital	Slidell	St. Tammany
Hood Memorial Hospital	Amite	Tangipahoa
Lallie Kemp Medical Center	Independence	Tangipahoa
North Oaks Medical Center	Hammond	Tangipahoa
Riverside Medical Center	Franklinton	Washington
Our Lady of the Angels (OLOA)	Bogalusa	Washington
St. Helena Parish Hospital	Greensburg	St. Helena
**Our Lady of the Lake (OLOL)'s "stand-alone" ER	Walker	Livingston
**St. Tammany Parish Hospital's "stand-alone" ER	Mandeville	St. Tammany

• Sexual Assault/Rape Crisis and Advocacy Centers/Programs (See p. 17 also)

- o 3- Accredited Sexual Assault Centers (SACs)
- o 2- Child Advocacy Centers (CACs)
- o 1- Statewide Coalition Agency (LaFASA)

Name	Region 9 Location	Service Area
Washington Parish Rape Crisis Center/ADAPT, Inc. (LAFASA accredited <u>SAC</u> in Region 9)	Bogalusa Hammond	Washington, St. Helena and Tangipahoa Parishes
Sexual Trauma Awareness and Response (STAR) (LAFASA accredited SAC in Region 2)	No physical location in Region 9, but provides hospital advocates and virtual services in the region	Livingston Parish (East Baton Rouge, West Baton Rouge, Ascension, East Feliciana, West Feliciana, Iberville, Pointe Coupee)
Metro Centers for Community Advocacy (LAFASA accredited SAC in Region 1)	Mandeville (satellite office)	St. Tammany Parish (Jefferson, St. Bernard, Plaquemines, St. Charles, St. John the Baptist, and St. James)
Child Advocacy Services (CAC in Region 9)	Hammond (administrative office) Amite (services) Denham Springs (service)	Tangipahoa, St. Helena, and Livingston Parishes (Ascension, St. Charles, St. James, West Feliciana, Assumption, and St. John the Baptist Parishes)
Hope House Children's Advocacy Center (CAC in Region 9)	Covington (headquarters) Bogalusa (satellite office)	St. Tammany and Washington Parishes
Louisiana Foundation Against Sexual Assault (LaFASA)	No physical location in Region 9	Statewide (office is in Baton Rouge)

• Crime and DNA Labs

- St. Tammany Parish Coroner's Office DNA Lab cases from all parishes
- St. Tammany Parish Sheriff Office Crime Lab St. Tammany cases only
- Louisiana State Police Crime Lab cases from all parishes

• Law Enforcement

o **Southeastern Louisiana University Police Department** – Interim Chief Carmen Bray

o Five Parish Sheriffs

Name	District	Parishes Covered
Sheriff Jason G. Ard	21 st J.D.	Livingston Parish
Sheriff "Clay" Chutz	21 st J.D.	St. Helena Parish
Sheriff Randy Smith	22 nd J.D.	St. Tammany Parish
Sheriff Gerald D. Sticker	21 st J.D.	Tangipahoa Parish
Sheriff Jason Smith	22 nd J.D.	Washington Parish

o 27 Local Police Chiefs

Parish	Name	Jurisdiction
	Chief Randy Fandal	Slidell Police Department
	Chief Todd Schliem	Mandeville Police Department
	Chief Michael Ferrell	Covington Police Department
ST. TAMMANY	Town Marshal Barney Tyrney	Madisonville Police Department
	Chief Shilo Bruhl	Folsom Police Department
	Chief Jack Sessions	Pearl River Police Department
	Chief Anthony J. Moreci	Sun Marshal's Office
	Chief James Smith	Bogalusa City Police Department
WASHINGTON	Chief Justin Brown	Franklinton Police Department
WASHINGTON	Chief Gilbert Hartzog, Jr.	Angie Police Department
	Chief Louis Adams	Varnado Police Department
	Chief Edwin Bergeron, Jr.	Hammond Police Department
	Chief Frank Edwards, III	Independence Police Department
	Chief Lendrick François	Amite City Police Department
TANGIPAHOA	Chief Frank Dibenedetto	Tickfaw Police Department
	Chief Andrew Henderson	Roseland Police Department
	Chief Michael Kazerooni	Kentwood Police Department
	Chief Bry Layrisson	Ponchatoula Police Department
	Chief Jimmy Jones	Springfield Police Department
	Chief David Addison	Walker Police Department
	Chief Randy Dufrene	Livingston Police Department
LIVINGSTON	Chief Boyd Wilde	Albany Police Department
	Chief Cary Mosby	French Settlement Police Department
	Chief Rodney Walker	Denham Springs Police Department
	Chief Steven Fontenot	Killian Police Department
	Chief Bobby Hopson	Port Vincent Police Department
ST. HELENA	Chief Cedric Burise	Greensburg Police Department
SI. HELENA	Chief Cedric Burise	Montpelier Police Department

SEXUAL ASSAULT COLLECTION KITS

1. Contents of the Sexual Assault (SA) Collection Kits

In OPH Region 9, all sexual assault collection kits used in a forensic medical examination shall continue to meet the standards and requirements developed by the Louisiana Department of Health (LDH) and the Department of Public Safety and Corrections (DPSC).

2. Purchase and Storage of the SA Collection Kits

In OPH Region 9, all emergency rooms (ERs) in the 11 designated (Tier I) full-service hospitals and the two (2) stand-alone ERs (See chart below.) will be responsible for the purchase** of the SA collection kits and the storage of the kits prior to use. Vendor selection, SA collection kit selection/ordering, and inventory management of the unused kits are the responsibility of each designated hospital and the stand-alone ERs.

**NOTE: Must purchase SA collection kits from a state recommended/approved vendor.

Designated Region 9 Hospitals/ERs	Location	Parish
Slidell Memorial Hospital - East (formerly Ochsner Hospital - Northshore)	Slidell	St. Tammany
Lakeview Hospital (formerly Lakeview Regional Medical Center)	Covington	St. Tammany
St. Tammany Parish Hospital	Covington	St. Tammany
Covington Trace Hospital and ER	Covington	St. Tammany
Slidell Memorial Hospital	Slidell	St. Tammany
Hood Memorial Hospital	Amite	Tangipahoa
Lallie Kemp Medical Center	Independence	Tangipahoa
North Oaks Medical Center	Hammond	Tangipahoa
Riverside Medical Center	Franklinton	Washington
Our Lady of the Angels (OLOA)	Bogalusa	Washington
St. Helena Parish Hospital	Greensburg	St. Helena
**Our Lady of the Lake (OLOL)'s "stand-alone" ER	Walker	Livingston
**St. Tammany Parish Hospital's "stand-alone" ER	Mandeville	St. Tammany

FME STANDARDS AND PROCEDURES

This section clearly outlines the standards and procedures for a survivor to receive a forensic medical examination, as defined in Louisiana R.S. 15:622, to ensure access to such an examination in every parish in OPH Region 9.

1. <u>DESIGNATED LEAD MEDICAL ENTITIES/FACILITIES AND PROVIDERS</u>

In OPH Region 9, the following hospitals and healthcare providers have been designated by the coroners (and approved by stakeholders) to serve as <u>lead</u> entities to perform the medical screenings <u>and</u> forensic medical exams.

FOR ADULTS (aged 18 years and older)

• OPH Region 9 <u>Designated Lead Medical Facilities for Medical Screenings and FMEs:</u>

➤ <u>All emergency rooms (ERs)</u> in the 11 full-service hospitals and the two stand-alone ERs in Region 9 are designated lead medical facilities. (See chart below.)

Designated Region 9 Hospitals/ERs	Location	Parish
Slidell Memorial Hospital - East (formerly Ochsner Hospital -	Slidell	St. Tammany
Northshore)		
Lakeview Hospital (formerly Lakeview Regional Medical Center)	Covington	St. Tammany
St. Tammany Parish Hospital	Covington	St. Tammany
Covington Trace Hospital and ER	Covington	St. Tammany
Slidell Memorial Hospital	Slidell	St. Tammany
Hood Memorial Hospital	Amite	Tangipahoa
Lallie Kemp Medical Center	Independence	Tangipahoa
North Oaks Medical Center	Hammond	Tangipahoa
Riverside Medical Center	Franklinton	Washington
Our Lady of the Angels (OLOA)	Bogalusa	Washington
St. Helena Parish Hospital	Greensburg	St. Helena
**Our Lady of the Lake (OLOL)'s "stand-alone" ER	Walker	Livingston
**St. Tammany Parish Hospital's "stand-alone" ER	Mandeville	St. Tammany

• OPH Region 9 Designated Lead Healthcare Provider(s) for Medical Screenings:

All ER physicians and healthcare provider(s)authorized to perform medical screenings who work in the Region 9 designated facilities and are on duty when a sexual assault survivor presents to the ER, will perform the medical screening.

• OPH Region 9 Designated Lead Healthcare Provider(s) for FMEs:

- The Jefferson Parish Coroner's Office (JPCO) SANE Program Team, as designated by the coroners and SAR stakeholders in St. Tammany, St. Helena, Washington, Tangipahoa, and Livingston Parishes, may perform FMEs in all designated Region 9 ERs, upon consultation by the ER physicians and after the patient is medically cleared for the exam. SEE APPENDIX A for JPCO SANE Algorithms for adults.
- ➤ HOWEVER, if the JPCO SANE team is unavailable to perform an FME, then the ER physician who is on duty in the designated medical facility when a sexual assault survivor presents to the ER, will perform the FMEs (with the aid of an ER nurse).

FOR CHILDREN (under age 18 years):

If a pediatric sexual assault (SA) survivor presents to one of the hospital ERs in OPH Region 9, including the stand-alone ER, then the ER M.D. must perform the medical screenings/exams of the child to address any emergent/immediate medical needs and clear them (if possible, at that time) for the forensic medical exam to be performed at the designated facility/entity for pediatric FMEs. NOTE: A pediatric SA survivor's advocate should be present for all FMEs.

• OPH Region 9 Designated Lead Medical Facilities for Pediatric Medical Screenings:

➤ <u>All emergency rooms (ERs)</u> in the 11 full service hospitals and the two stand-alone ERs in Region 9 are designated facilities for medical screenings. (See chart below.)

Designated Region 9 Hospitals/ERs	Location	Parish
Slidell Memorial Hospital - East (formerly Ochsner Hospital - Northshore)	Slidell	St. Tammany
Lakeview Hospital (formerly Lakeview Regional Medical Center)	Covington	St. Tammany
St. Tammany Parish Hospital	Covington	St. Tammany
Covington Trace Hospital and ER	Covington	St. Tammany
Slidell Memorial Hospital	Slidell	St. Tammany
Hood Memorial Hospital	Amite	Tangipahoa
Lallie Kemp Medical Center	Independence	Tangipahoa
North Oaks Medical Center	Hammond	Tangipahoa
Riverside Medical Center	Franklinton	Washington
Our Lady of the Angels (OLOA)	Bogalusa	Washington
St. Helena Parish Hospital	Greensburg	St. Helena
**Our Lady of the Lake (OLOL)'s "stand-alone" ER	Walker	Livingston
**St. Tammany Parish Hospital's "stand-alone" ER	Mandeville	St. Tammany

• OPH Region 9 Designated Lead Medical Facility for <u>ACUTE</u> Pediatric FMEs:

Parish	Designated Lead Medical Facility for ACUTE Pediatric FMEs	
Livingston Parish***	OLOL Pediatric ER in Baton Rouge	***JPCO SANE will perform acute pediatric FMEs on
St. Helena Parish	Children's Hospital New Orleans ER	children ≥ 13 yrs. of age in the OLOL "stand-alone" ER
St. Tammany Parish***	Children's Hospital New Orleans ER	in Walker, La. and for any child <18 yrs. at all
Tangipahoa Parish	Children's Hospital New Orleans ER	designated ERs in St. Tammany Parish (per facility request). SEE APPENDIX A for the JPCO SANE
Washington Parish	Children's Hospital New Orleans ER	PEDIATRIC ALGORITHMS

NOTE 1: "ACUTE" = Case \leq 72 HOURS from time of assault

NOTE 2: We may honor a parent/caregiver's choice to send a child to Children's Hospital instead of OLOL, and vice versa, if the child is medically stable and if it is the best interest of the child at the time of the request.

NOTE 3: See Louisiana Children's Code, Chapter 8, Art. 322-329 for videotaping forensic interviews of child survivors of SA.

• OPH Region 9 Designated Medical Facility for SUB-/NON-ACUTE Pediatric FMEs (>72 hrs.)

Parish	Designated Lead Medical Facility for Sub-/Non Acute FMEs only	Notes for Sub-/Non-Acute FMEs only
Livingston Parish	Audrey Hepburn CARE Center in Baton Rouge	*Audrey Hepburn CARE Center located at Children's
St. Helena Parish	*Children's Hospital in New Orleans	Hospital in N.O or atthe satellite office located in BR
St. Tammany Parish	*Children's Hospital in New Orleans	Child Advocacy Services or Hope House Children's
Tangipahoa Parish	*Children's Hospital in New Orleans	Advocacy Center should be notified for all pediatric
Washington Parish	*Children's Hospital in New Orleans	cases in their respective service areas. NOTE: referrals are phoned in or faxed

2. TRANSPORTATION OF SEXUAL ASSAULT SURVIVORS

An emergency medical unit and/or law enforcement unit will be dispatched per 911 dispatch protocols for adult and pediatric sexual assault/injuries.

• EMS First Responders (acute cases only):

- For Adults/Older Adolescents: **In OPH Region 9**, sexual assault survivors should be transported *to the nearest lead medical facility* in the region where medical screening and forensic sexual assault evidence exams are performed, unless injury severity dictates otherwise or the survivor chooses a different facility in the region. A primary caregiver, family member, or friend, who is not the suspected perpetrator, should be allowed to accompany the SA (sexual assault) survivor in the emergency medical unit.
- For Children: In OPH Region 9, all pediatric survivors of sexual assault should be transported by EMS to the nearest lead medical facility in the region for a medical screening, unless injury severity dictates otherwise or the survivor's parent/caregiver chooses a different facility. Once cleared by the ER physician, pediatric survivors are to be transported by EMS to a lead medical facility designated for ACUTE pediatric FMEs. SEE p. 10 for the designated pediatric medical facilities. EMS transportation arrangements are the responsibility of the transferring ER. A parent or primary caregiver, who is not the suspected perpetrator, should be allowed to accompany the child in the emergency medical unit.

NOTE: EMS transports acute SA survivors <u>to</u> designated medical facilities. Also, if the patient needs to be transported to a different lead facility, then the **hospital must call and relay to EMS that the person to be transported is a sexual assault survivor**.

• Law Enforcement (acute and non-acute cases): In OPH Region 9, if law enforcement must provide transportation of a medically stable SA survivor to or from a lead medical facility, then an unmarked vehicle should be used, if available, especially when transporting a child. A parent or primary caregiver, who is not the suspected perpetrator, should be allowed to accompany the child SA survivor in the vehicle, and a family member or friend should be allowed to accompany an adult SA survivor.

NOTE: For SA patients <u>discharged</u> from the hospital (ER), transportation may be provided by a family member, friend, SA advocate who was called to the hospital for support, and, in some cases, by the local police/sheriff's department.

3. THE FORENSIC MEDICAL EXAM AND EVIDENCE COLLECTION

(per R.S 40:1216.1 and ACT No. 669)

A. For the purposes of this section, the following <u>definitions</u> apply:

- "Sexually oriented criminal offense" has the same meaning as defined in R.S. 15:622.
- "Emergency contraception" means only drugs approved by the United States Food and Drug Administration with mechanisms of action that likely include the prevention of ovulation, sperm capacitation, or fertilization after sexual intercourse and do not meet the definition of a legend drug as defined in R.S. 40:1060.11. (from ACT No. 669)
- "Forensic medical examination (FME)" has the same meaning as defined in R.S. 15:622, which is an examination provided to the survivor of a sexually-oriented criminal offense by a healthcare provider for the purpose of gathering and preserving evidence of a sexual assault for use in a court of law.
- "Healthcare provider" means either of the following:
 - (a) A physician, sexual assault nurse examiner, or other healthcare practitioner licensed, certified, registered, or otherwise authorized and trained to perform a forensic medical examination. SEE <u>APPENDIX C</u> for training guidance.
 - (b) A facility or institution providing healthcare services, including, but not limited to, a hospital or other licensed inpatient center; ambulatory surgical or treatment center; skilled nursing facility; inpatient hospice facility; residential treatment center; diagnostic, laboratory, or imaging center or rehabilitation or other therapeutic health setting.
- "<u>Healthcare services</u>" means services, items, supplies, or drugs for the diagnosis, prevention, treatment, cure, or relief of a health condition, illness, injury, or disease ancillary to a sexually-oriented criminal offense.
- "Sexual assault collection kit" includes all evidence collected during a forensic medical examination.
- "Unreported sexual assault collection kit" means a sexual assault collection kit where a law
 enforcement agency has not received a related report or complaint alleging that a sexual
 assault has occurred.

B. <u>Healthcare Services for Survivors of Sexually Oriented Criminal Offenses</u>

In OPH Region 9, all licensed hospitals and healthcare providers shall adhere to the following procedures if a person presents for treatment as a sexual assault survivor:

- 1. Sexual assault patients should be *viewed as "priority emergency cases"* in Region 9. All sexual assault survivors shall be examined and treated, <u>without undue delay</u>, in a <u>private space</u> required to ensure the health, safety, and welfare of the survivor by a qualified healthcare provider. In Region 9, the survivor should not be left alone, if at all possible.
- 2. Examination and treatment, including the forensic medical examination, shall be adapted as necessary to address the unique needs and circumstances of each survivor.
- 3. A sign language or foreign language interpreter must be made available to be present during medical and advocacy services in the ER. A language line, though not ideal, is an acceptable alternative to a language interpreter being present in the ER.
- 4. A SA/Rape Crisis Advocate All survivors shall be afforded an advocate whose communications are privileged, in accordance with the provisions of R.S. 46:2187, if one is available. With the consent of the survivor, an advocate shall remain in the examination room during the forensic medical examination. In Region 9, all sexual assault advocates should be trained and should pass a background check through their respective agencies. SEE <u>APPENDIX C</u> for training guidance.
- 5. With the consent of the survivor, the examination and treatment of all sexual assault survivors shall, at a minimum, include all of the following:
 - (a) Examination of physical trauma.
 - (b) Patient interview, including medical history, triage, and consultation.
 - (c) Collection and evaluation of evidence, including, but not limited to, the following:
 - (i) Photographic documentation.
 - (ii) Preservation and maintenance of chain of custody.
 - (iii) Medical specimen collection.
 - (iv) When determined necessary by the healthcare provider, an alcohol- and drugfacilitated sexual assault assessment and toxicology screening.

- (d) Any testing related to the sexual assault or recommended by the healthcare provider.
- (e) Any medication provided during the forensic medical examination, which may include emergency contraception and HIV or STI prophylaxis.
- 6. *Reporting:* A survivor shall decide whether or not the incident will be reported to law enforcement officials. No hospital or healthcare provider shall require the survivor to report the incident to receive medical attention or collect evidence.

EXCEPTIONS TO REPORTING:

- If a person <u>under the age of 18</u> years presents for treatment as a sexual assault survivor, the hospital or healthcare provider shall **immediately notify** the appropriate law enforcement agency or any other official necessary to fulfill any mandatory reporting obligation required by law. (§14:403 Criminal; Art. 610, 609 and 603 Louisiana Children's Code)
- If a survivor is <u>physically or mentally incapable of making the decision to report</u>, the hospital or healthcare provider shall **immediately notify** the appropriate law enforcement officials.

7. Notification of Law Enforcement:

o If the survivor <u>wishes</u> to report the incident to law enforcement, the hospital or healthcare provider shall contact the appropriate law enforcement agency. Although ACT No. 669 states to contact the law enforcement agency having jurisdiction over the location where the crime occurred, in **OPH Region 9**, the hospital or healthcare provider shall <u>immediately notify</u> the <u>local law enforcement</u> agency <u>having</u> jurisdiction in the parish of the hospital where the healthcare provider performed the <u>FME</u> and shall coordinate the transfer of the evidence with the law enforcement agency in a manner designed to protect its evidentiary integrity. Also, per ACT No. 669, if the location where the crime occurred cannot be determined, the hospital or healthcare provider shall contact the law enforcement agency having jurisdiction over the location where the forensic medical examination is performed to determine the appropriate investigating agency. (See p.18 - Evidence Chain of Custody and law enforcement jurisdictions.)

- o If the survivor <u>does not</u> wish to report the incident to law enforcement, the hospital or healthcare provider shall, upon completion of the FME, contact the law enforcement agency having jurisdiction over the location where the FME was performed to transfer possession of the unreported sexual assault collection kit for storage. (See p.18-Evidence Chain of Custody and law enforcement jurisdictions)
- The hospital or healthcare provider staff member who notifies the appropriate law enforcement official shall document the date, time, and method of notification, as well as the name of the official who received the notification.
- O Any member of the hospital staff or a healthcare provider who in good faith notifies the appropriate law enforcement official pursuant to ACT No. 669 (A)(1) shall have immunity from any civil liability that otherwise might be incurred or imposed because of the notification. Immunity shall extend to participation in any judicial proceeding resulting from the report.
- On or before January 1 of each year, each law enforcement agency shall provide each
 hospital located in its respective jurisdiction with the name of the responsible contact
 person along with the responsible person's contact information.

8. Forensic Medical Examinations

Hospitals and healthcare providers shall follow the procedures outlined in R.S. 40:1216.1 and ACT No. 669 for performing an FME for a survivor who *does not* wish to report the incident to law enforcement officials; for a survivor who *does* wish to report the incident to law enforcement; for a child survivor under age 18 years; and for a survivor who is physically or mentally incapable of making the decision to report.

- No hospital or healthcare provider shall refuse to examine and assist a survivor on the grounds the alleged offense occurred outside of, or the survivor is not a resident of, the jurisdiction.
- O Upon completion of the FME, if the *survivor wishes to report* the incident to law enforcement, then the sexual assault collection kit shall be turned over to the investigating law enforcement agency. The healthcare provider shall enter all required information into the statewide sexual assault collection kit tracking system operated by the Office of State Police, pursuant to R.S. 15:624.1. See Chain of Custody of Evidence on p. 18.

- O Upon completion of the FME, if the *survivor does not wish to report* the incident to law enforcement, then the hospital or healthcare provider shall contact the law enforcement agency having jurisdiction over the location where the FME was performed to transfer possession of the unreported sexual assault collection kit for storage. See Chain of Custody of Evidence on p. 18.
 - The unreported sexual assault collection kit shall not be identified or labeled with the survivor's identifying information.
 - The hospital or healthcare provider shall maintain a record of the sexual assault collection kit number in the survivor's record that shall be used for identification, should the survivor later choose to report the incident.
 - The healthcare provider shall provide all required information by the statewide sexual assault collection kit tracking system operated by the Office of State Police, pursuant to R.S. 15:624.1.

NOTE: The statewide sexual assault collection kit tracking system shall:

- Track the location status of the kits throughout the criminal justice process, including the initial collection performed at medical facilities, receipt and storage at law enforcement agencies, receipt and analysis at forensic laboratories, and storage or destruction after completion of analysis.
- 2. Designate sexual assault collection kits as unreported or reported.
- 3. Indicate whether a sexual assault collection kit contains biological materials collected for the purpose of forensic toxicological analysis.
- 4. Allow medical facilities performing sexual assault forensic examinations, law enforcement agencies, prosecutors, the Louisiana State Police, Crime Laboratory, all other forensic crime laboratories in the state, and other entities having custody of sexual assault collection kits to update and track the status and location of sexual assault collection kits.
- 5. Allow survivors of sexual assault to anonymously track or receive updates regarding the status of their sexual assault collection kits.
- 6. Use electronic technology allowing continuous access.

- The collected FME/sexual assault collection kits should be stored in a secure location in the hospital or medical facility that ensures proper chain of custody until the evidence is transferred to the law enforcement agency.
 - No sexual assault collection kit shall remain at a hospital or medical facility if the hospital or medical facility is unable to store the sexual assault kit in a secure location that ensures proper chain of custody. See Chain of Custody of Evidence on p. 18.
- A healthcare provider working for a coroner's office may store the sexual assault collection kit in a secure location maintained by the coroner.

9. Post-Examination, Emergency Contraception, and Follow-up Care

- Forensic medical examiners are responsible for documenting the details of the medical forensic exam and treatment provided in the medical record, as well as documenting required data for the SA collection kit. All forms should be checked for completeness of information and signatures.
- The survivor shall be provided with information about <u>emergency contraception</u>, and the treating healthcare provider shall inform the survivor of the option to be provided emergency contraception at the hospital or healthcare facility, and, upon the completion of a pregnancy test yielding a negative result, shall provide emergency contraception upon the request of the survivor.
 - The information about emergency contraception shall be developed and made available electronically to all licensed hospitals in this state through the Louisiana Department of Health's website and by paper form upon request to the department.
- The survivor shall be provided with information about medical billing. (See p. 20.)
- Assist the patient with coordination of aftercare, including follow-up medical appointments, counseling/mental health appointments, and transportation home or to a safe location.
- Sexual Assault/Rape Crisis and Child Advocacy Centers should be notified because they can provide advocacy, intervention, and support services to patients, families, hospitals/healthcare providers, and law enforcement. OPH Region 9 has three

accredited Sexual Assault/Rape Crisis Centers and two Child Advocacy Centers. (See p. 5 for list and chart below for services offered.)

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CHAIN OF CUSTODY OF EVIDENCE

- ➤ Submission of Sexual Assault Collection Kits to Law Enforcement In OPH Region 9:

 Hospitals and healthcare providers will coordinate the transfer of the evidence with the law enforcement agency in a manner designed to protect its evidentiary integrity.
 - In OPH Region 9, the law enforcement agency shall <u>retrieve</u> from the hospital or healthcare provider the evidence <u>immediately</u>, <u>but no later than one (1) hour</u>, after receiving notification from the hospital or healthcare provider that evidence collection is complete and information is entered into the statewide SA collection kit tracking system. (NOTE: Although ACT No. 669 states that the investigating law enforcement agency shall take possession of the SA collection kit within 72 hours upon notification of completion of the SA collection kit, in Region 9, there isn't a regional designated secure location to store the SA collection kits that ensures proper chain of custody, especially for that length of time. Therefore, the evidence retrieval time in Region 9 is within 1 hour.)
 - If law enforcement is unable to pick up the evidence within the stated 1-hour timeframe, then:
 - The healthcare provider who performed the FME must place the evidence in a locked storage area in the ER, preferably accessible to only the key holder. When law enforcement arrives, the healthcare provider with the key to the locked storage area should sign for and retrieve the evidence and personally hands it to law enforcement (ideally).
 - o A healthcare provider working for a coroner's office may store the sexual assault collection kit in a secure location maintained by the coroner, per ACT No. 669.
 - The healthcare provider who performed the FME must complete and sign the forensic chain of custody form. The form must include the signatures of everyone who has had possession of the evidence, and both signatures (one from the person releasing the evidence and the second from the person receiving it) are required for any transfer. The completed kits and completed collection forms should be handed over to law enforcement when they arrive.
 - Upon arrival of law enforcement to the ER, custody of the evidence shall be transferred from the healthcare provider to local law enforcement agency <u>having jurisdiction in the parish in which the hospital or healthcare provider is located</u> (who will then be responsible for maintaining/transferring the evidence to the local law enforcement agency having jurisdiction in the parish in which the crime occurred).

NOTE: City police respond within city limits and sheriffs respond in unincorporated areas.

DESIGNATED HOSPITALS/ERS	LAW ENFORCEMENT AGENCY JURISDICTION				
Slidell Memorial Hospital-East (formerly Ochsner Medical Center – Northshore)	Slidell Police Department: 985-643-3131				
Lakeview Hospital (formerly Lakeview Regional Medical Center)	St. Tammany Parish Sheriff's Office: 985-898-2338				
St. Tammany Parish Hospital	Covington Police Department: 985-892-8500				
Covington Trace Hospital and ER	Covington Police Department: 985-892-8500				
Slidell Memorial Hospital	Slidell Police Department: 985-643-3131				
Hood Memorial Hospital	Amite Police Department: 985-748-6169				
Lallie Kemp Regional Medical Center	Tangipahoa Parish Sheriff's Office: 985-747-9696				
North Oaks Medical Center	Hammond Police Department: 985-277-5700				
Riverside Medical Center	Franklinton Police Department: 985-839-2977** (or 4474 or 4475)				
Our Lady of the Angels	Bogalusa Police Department: 985-732-3611				
St. Helena Parish Hospital	St. Helena Parish Sheriff's Office: 225-222-4413				
Our Lady of the Lake "stand-alone" ER	Livingston Parish Sheriff's Office: 225-686-2241				
St. Tammany Parish Hospital "stand-alone" ER	Mandeville Police Department: 985-626-9711				

➤ Maintenance of Retrieved Sexual Assault Collection Kits (per ACT No. 669)

- The law enforcement agency shall not destroy or dispose of an unreported sexual assault collection kit for a period of at least twenty (20) years after the FME was performed.
- O If a healthcare provider working for a coroner's office chooses to store an unreported sexual assault collection kit at a coroner's office, the healthcare provider shall not destroy or dispose of an unreported sexual assault collection kit for a period of at least twenty (20) years after the FME was performed.

> Submission of Sexual Assault Collection Kits to a Forensic Laboratory (per ACT No. 193)

 Within thirty (30) days of receiving a sexual assault collection kit for a reported case, the criminal justice agency shall submit the sexual assault collection kit to a forensic laboratory for testing.

MEDICAL BILLING & PAYMENT STANDARDS AND PROCEDURES

- 1. No hospital or healthcare provider shall directly bill a survivor of a sexually oriented criminal offense for any healthcare services rendered in conducting a forensic medical examination, including the healthcare services rendered in accordance with ACT No. 669, Paragraph 2 of Subsection A (also listed on p. 12 of this plan) and the following:
 - Forensic examiner and hospital or healthcare facility services directly related to the exam, including integral forensic supplies.
 - Scope procedures directly related to the forensic exam, including, but not limited to, anoscopy and colposcopy.
- 2. The healthcare provider who performed the forensic medical exam and the hospital or healthcare facility shall submit a claim for payment for conducting a forensic medical exam directly to the Crime Survivor Reparations Board to be paid in strict accordance with the provisions of R.S. 46:1822. A survivor of a sexually oriented criminal offense shall not be billed directly or indirectly for the performance of any forensic medical exam. The provisions of this paragraph shall not be interpreted or construed to apply to either of the following:
 - A healthcare provider billing for any medical services that are not specifically set forth in this Section or provided for diagnosis or treatment of the survivor for injuries related to the sexual assault.
 - A survivor of a sexually oriented criminal offense seeking reparations in accordance with the Crime Victims Reparations Act, R.S. 46:1801 et seq. for the costs for any medical services that are not specifically set forth in this section or provided for the diagnosis or treatment of the survivor for injuries related to the sexual assault.
- **3.** LDH shall make available to every hospital and healthcare provider licensed under the laws of this state a pamphlet containing an explanation of the billing process for services rendered.
 - Every hospital and healthcare provider shall provide a copy of the pamphlet (SEE <u>APPENDIX D</u>) to any person presented for treatment as a survivor of a sexually oriented criminal offense.

SURVIVORS' ACCESS TO FME DOCUMENTATION

- 1. Upon request of a competent adult <u>survivor</u> of a sexually oriented criminal offense, the healthcare provider who performed the forensic medical exam shall provide a reproduction of any written documentation, which is in the possession of the healthcare provider resulting from the forensic medical exam of the <u>survivor</u>. The documentation shall be provided to the survivor no later than fourteen (14) days after the healthcare provider receives the request or the healthcare provider completes the documentation, whichever is later.
- 2. The reproduction of written documentation shall be made available at no cost to the survivor and may only be released at the direction of the survivor who is a competent adult. This release does not invalidate the survivor's reasonable expectation of privacy nor does the record become a public record after the release to the survivor.

SEXUAL ASSAULT SURVIVORS' BILL OF RIGHTS

A sexual assault survivor shall have the following rights:

- 1. The right not to be prevented from, or charged for, receiving a forensic medical exam as provided in R.S. 40:1216.1.
- 2. The right to have an unreported sexual assault collection kit preserved, without charge, for at least twenty (20) years.
- 3. The right to be informed of any results, updates, status, location, and tracking as provided in R.S. 15:624.1.
- 4. The right to be informed in writing of policies governing the collection and preservation of a sexual assault collection kit.
- 5. The right to be informed in writing from the appropriate official not later than sixty (60) days before the date of the intended destruction or disposal of a sexual assault collection kit, and upon written request, the ability to be granted further preservation of the kit or its probative contents.

- 6. The right to be notified of the ability to request the presence of a sexual assault advocate before the administration of a forensic medical examination or a scheduled interview by a law enforcement official if a sexual assault advocate is reasonably available.
- 7. The right to have access to and obtain a copy of their forensic medical examination report at no cost to them pursuant to R.S. 40:1216.1(G).
- 8. The right not to be requested or required to submit to a polygraph examination as a condition of an investigation or prosecution as provided in R.S. 15:241.
- 9. The right to receive, at no cost, a copy of any records or investigative reports from law enforcement when those records are provided to the defendant through discovery or a year after the offense was reported, whichever is sooner.
- 10. The right to have privileged communications with a representative or employee of a sexual assault center as provided in R.S. 46:2187.
- 11. The right not to have the survivor's DNA obtained from a sexual assault collection kit compared with other DNA records to investigate the survivor as provided in R.S. 15:622.1.
- 12. The right to retain any other rights that a survivor may have under any other law of this state.

Any complaint about a violation of this Section may be submitted directly to the Senate Sel	lect
Committee on Women and Children for legislative oversight.	

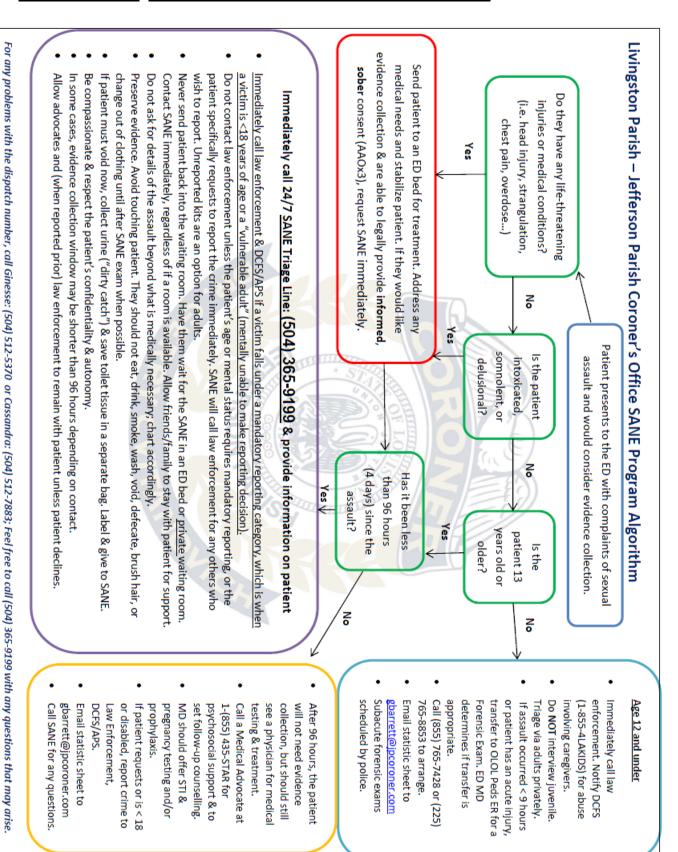
Per ACT No. 669 (2024 Regular Session):

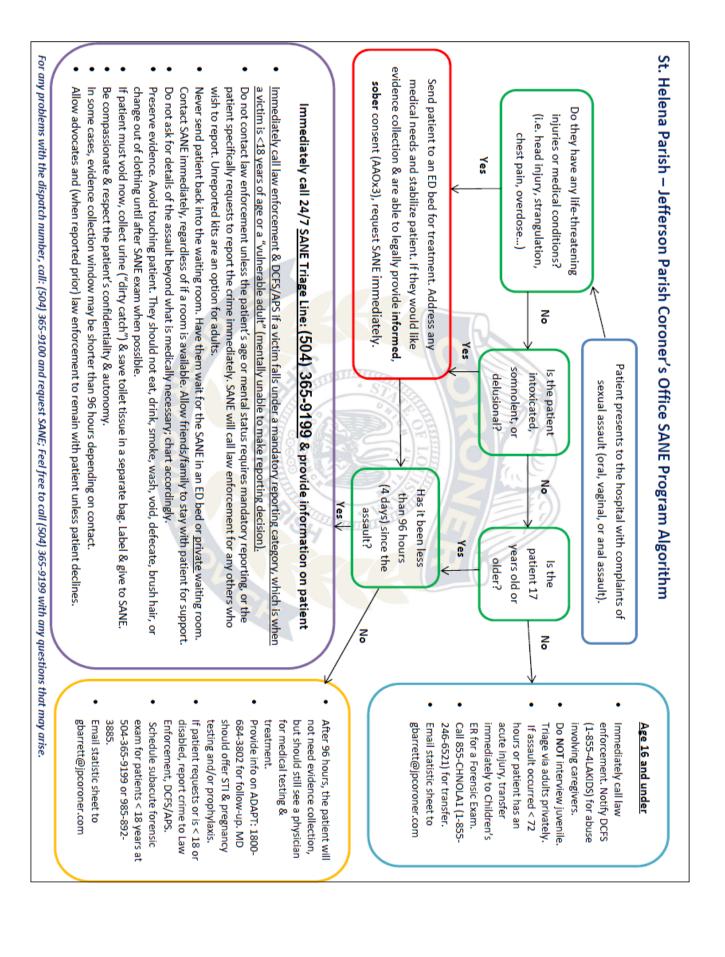
- For hospitals, failure to comply with the standards in R.S. 40:1216.1 shall constitute grounds for denial, suspension, or revocation of license.
- Also, failure to comply may constitute grounds for denial, suspension, or revocation of the healthcare provider's license by the appropriate licensing board or commission.

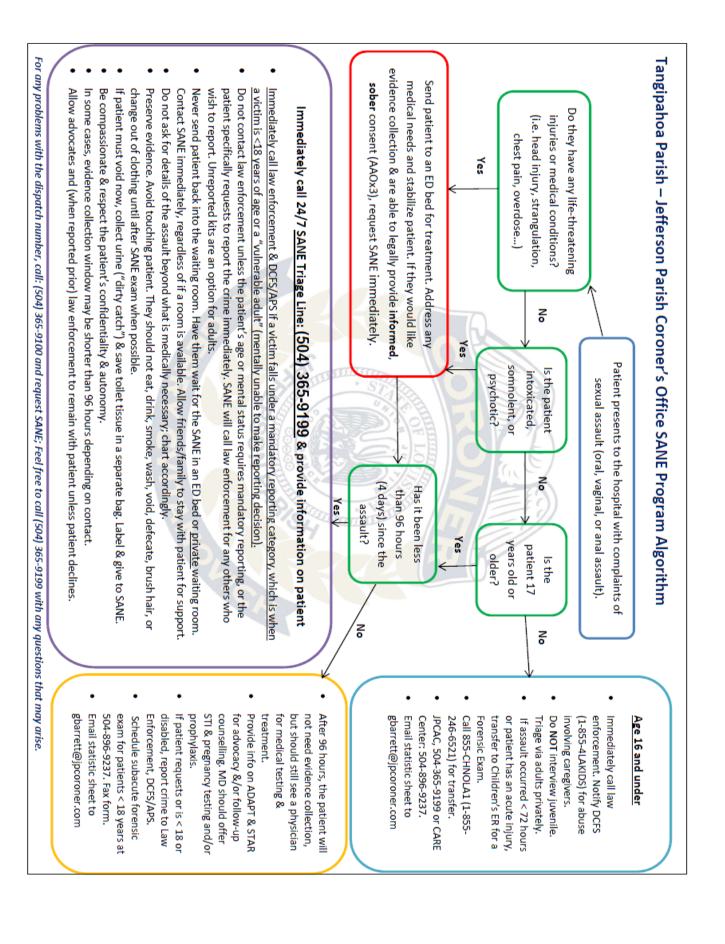
Per ACT No. 354 (2024 Regular Session):

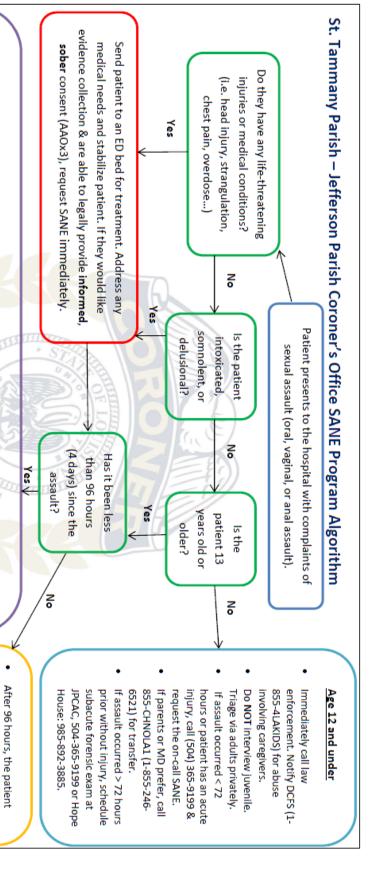
• The coroner shall implement, fulfill, and comply with all obligations, duties, and requirements imposed upon him by R.S. 40:1216.1 and by the regional sexual assault response plan approved for the coroner's health service district pursuant thereto, which the coroner shall annually sign to indicate his approval pursuant to R.S.40:1216.1(E)(4) SEE APPENDIX G for coroners' signatures.

APPENDIX A: JPCO SANE PROGRAM ALGORITHMS









- Immediately call 24/7 SANE Triage Line: (504) 365-9199 & provide information on patient
- Immediately call law enforcement if a victim falls under a mandatory reporting category, which is when a victim is <18 years of age or a "vulnerable adult" (mentally unable to make reporting decision).
- wish to report. Unreported kits are an option for adults. patient specifically requests to report the crime immediately. SANE will call law enforcement for any others who Do not contact law enforcement unless the patient's age or mental status requires mandatory reporting, or the
- Contact SANE immediately, regardless of room availability. Allow friends/family to stay with patient for support. Never send patient back into the waiting room. Have them wait for the SANE in an ED bed or private waiting room.
- Do not ask for details of the assault beyond what is medically necessary; chart accordingly.
- change out of clothing until after SANE exam when possible. Preserve evidence. Avoid touching patient. They should not eat, drink, smoke, wash, void, defecate, brush hair, or
- If patient must void now, collect urine ("dirty catch") & save toilet tissue in a separate bag. Label & give to SANE
- Be compassionate & respect the patient's confidentiality & autonomy.
- In some cases, evidence collection window may be shorter than 96 hours depending on contact.
- Allow advocates and (when reported prior) law enforcement to remain with patient unless patient declines

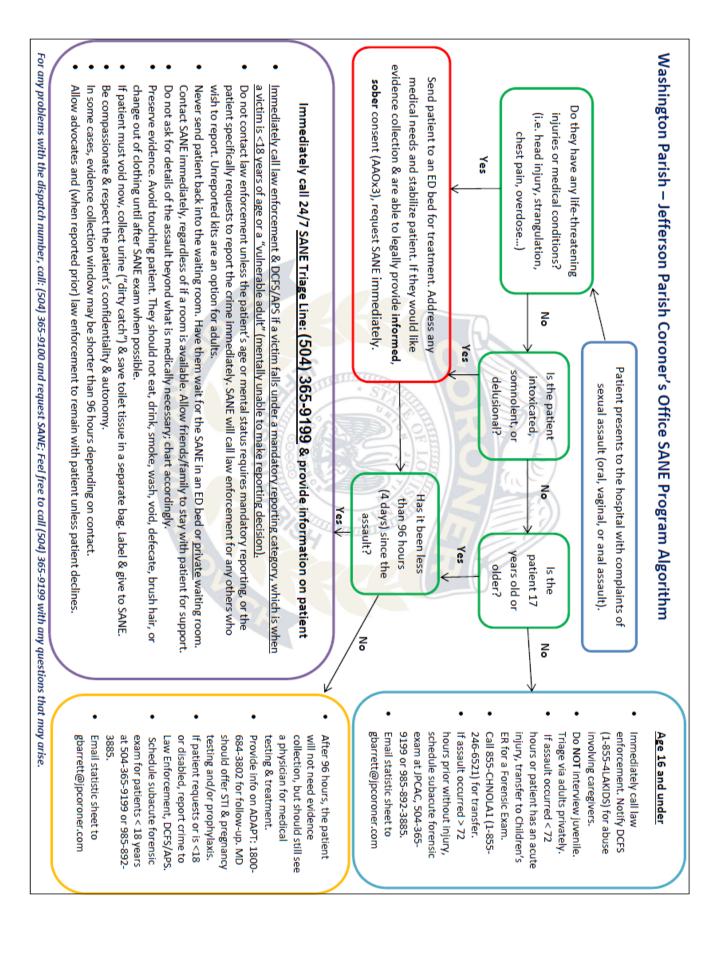
- will not need evidence physician for medical testing collection, but may still see a
- If patient requests or is < 18 testing and/or prophylaxis. should offer STI & pregnancy 435-STAR) for follow-up. MD Provide info on STAR (888-
- Schedule subacute forensic Law Enforcement, DCFS/APS. exam for patients < 18 years

or vulnerable, report crime to

Email/fax statistic sheet to gbarrett@jpcoroner.com

at 504-365-9199 or 985-892-

For any problems with the dispatch number, call: (504) 365-9100 and request SANE; Feel free to call (504) 365-9199 with any questions that may arise.



APPENDIX B: REGION IX STATISTICS FORM

		Sexual	Assault Statis	tic Form			
Patient La		Hospital: MD/SANE: LA PERK/kit #:					
No label? Age: Date	_	Email to gbarrett@jpcoroner.com Call (504) 512-5370 with Questions or for mailing address					
Reported Law enforcem	ent Item #:		A	gency:			
Location of Crime/Juris	diction (if k	nown):			etective:		
Unreported Agency who to				De	tective/Officer:		
Location of Crime/Juris	diction (if k	nown):					
ace/Ethnicity (self-reported): American Indian/Alaska Hispanic/Latino Multiple Races	please cin 3 Native	Asia Nati	n ive Hawaiian/Pac Reported	fic Islander	Black/Africa White, Non- Other:	Latino/Caucasian	
Gender Identity (self-reported):	please cit	rcle one					
Male	Female		Not Reporte	d	Other:		
Deaf/Hard of Hearing LGBTQ Limited English Proficiency			neless eran bled: Cognitive/F	hysical/Mental	People Who Other:		
erpetrator Information (if kno				Age	Gender		
•		ALL that apply	Da	D. C.	/Cidfriand	Causia	
	Aunt Ex-Spou	50	Boss Foster Parer		//Girlfriend end	Cousin Grandparent	
°Multiple Assailants			Parent		ent's Partner	Roommate	
Sibling	Social N	ledia Contact	Step-Parent	Spo	ouse	Stranger	
Uncle Unknown		m	Date	Oti	ner:		
olf Multiple, How Many?	Add	itional Details:					
ypes of Victimization(s): ple Adult Physical Assault	ase circle ALL	that apply Adult Sexual	Assault	History of p	revious Sexual As	sault	
Bullying (Verbal, Cyber, Physical)		Burglary			Child Physical Abuse or Neglect		
Child Pornography		Child Sexual Abuse/Assault			Domestic &/or Family Violence		
DUI/DWI Incident		Elder Abuse or Neglect			Hate Crime (Racial, Religious, Gender, Sexual Orientation		
Human Trafficking: Labor		Human Trafficking: Sex		-	Identity Theft/Fraud/Financial Crime		
Kidnapping (Non-Custodial) Other Vehicular Victimization (e.g.,		Kidnapping (Custodial)			Mass Violence (Domestic/International) Robbery		
Stalking/Harassment		Survivors of Homicide Victims			Teen Dating Victimization		
Terrorism (Domestic/International)		Weapon Involved?		_	Other:		
atient Outcome: Exam c		Transferre				ment only 🔲 Other:	

APPENDIX C: FME TRAINING GUIDANCE FOR DESIGNATED HEALTHCARE PROVIDERS

Trainings should include, but is not limited to, all sections of the annual OPH Region 9 SAR Plan (SA response resources and infrastructure; SA collection kits; FME standards and procedures; chain of custody of evidence; medical billing & payment standards and procedures; survivors' access to FME documentation; sexual assault survivor's bill of rights). Training requirements apply to staff in designated medical facilities who are newly hired, contracted, full-time and part-time and should take place upon hiring and then at least annually.

- **Designated medical facilities** should also ensure staff trainings on their respective current policies and procedures for the provision of timely, private, comprehensive, coordinated, survivor-centered medical services, referrals, and follow-up care to adult, adolescent, and child survivors of sexual assault and for the appropriate billing of applicable medical services/FMEs so that SA survivors are never billed
- **Designated healthcare providers** from any discipline providing sexual assault FMEs should also be trained on conducting a SA interview/history and FME, and on the collection, documentation, preservation, and chain of custody of physical evidence. Training should also include use of all equipment and supplies required during the exam, including the SA collection kit contents, medical lab diagnostics and drug testing, medication prophylaxis treatment.
 - ➤ <u>Sexual Assault Nurse Examiners (SANE)</u>: Registered nurses who have completed specialized education and hands on clinical preparation in the medical forensic care of the patient who has experienced sexual assault or abuse. SANEs provide patient-centered, comprehensive forensic medical exams, which may include forensic evidence collection and documentation; perform referrals for appropriate medical and psychosocial follow-up; and are also prepared to testify in a criminal or civil trial as a fact or expert witness.
 - To become a SANE, one must practice clinically as a Registered Nurse (RN) for no less than two years, complete a didactic SANE course, and complete clinical education and preceptorship as outlined in the most current edition of the International Association of Forensic Nurses (IAFN) Education Guidelines. Also,

- at least 12 contact hours of relevant continuing education must be obtained annually.
- To become certified as a SANE-A® (SANE Adult/Adolescent) &/or SANE-P® (SANE Pediatric), a SANE must meet the eligibility requirements and must also pass the certification written exam developed by the IAFN Forensic Nursing Certification Board and the Center for Nursing Education and Testing. Also, at least 12 contact hours of relevant continuing education must be obtained annually.
- Sexual Assault Forensic Examiners (SAFEs) are physicians and licensed registered nurses, advanced practice nurse practitioners, and physicians' assistants who have completed specialized education and hands on clinical preparation in the medical forensic care of the patient who has experienced sexual assault or abuse.
- assault advocacy training provided by LAFASA, along with any designated parish approved course(s). National certification for sexual assault advocates is available through the National Advocate Credentialing Program. The NACP pre-approved training list can be found at https://www.thenacp.org. In addition, advocate training should also include human trafficking (i.e. The NHTTAC or National Human Trafficking Training and Technical Assistance Center's free training at https://www.acf.hhs.gov/otip/training/soar-health-and-wellness-training/soar-online). Advocates should be trained to provide survivors with confidential, non-judgmental, calm emotional support; to provide crisis intervention when survivors arrive for treatment; to assist survivors in understanding the medical and evidence collection procedures, as well as medical and legal options; to provide support to family members and friends; to provide accompaniment through the legal system; and to provide relevant information and community resources. Also, they should be trained in the policies and procedures of the local hospitals to which they respond.

<u>APPENDIX D: LDH PAMPHLET/ "SURVIVOR'S GUIDE"</u>

https://ldh.la.gov/assets/medicaid/hss/docs/HSS Hospital/Survivors Guide.pdf

SURVIVOR'S GUIDE:



What to know after rape or sexual assault

You are not alone!

Emergency room health professionals and counselors from the Rape Crisis Center (Sexual Assault Response Team) are here to help you 24 hours a day, 7 days a week. These services are **free** and **private**.

You do not have to go through this alone. Ask the nurse or doctor at this healthcare facility to contact a rape counselor (sexual assault advocate). This counselor will talk to you about all of your options. They can explain what choices you have and help you make decisions that you are comfortable with.

The health care providers and rape counselors will care for you with dignity and compassion.

These are some important things you should know:

- You do not have to report your assault to the police to get a forensic medical exam.
- Health care providers will explain any examinations, procedures or treatments before being done. You have the right to not do anything you are uncomfortable doing.
- If you want to report the sexual assault to the police, you may have someone with you while making the report.
- Personally-identifiable information will be kept private.

The law does not allow a hospital or health care provider to bill you for a forensic medical exam or related services.

Forensic medical exams and related services are free. They include:

- Lab tests and screenings related to the exam,
- Medicine provided during the exam, and
- Services related to the exam.

If you receive a bill, you may file a complaint with the Louisiana Department of Health by emailing HSSComplaints@la.gov or calling 866-280-7737.

If you have insurance, with your consent, the provider may bill your health insurance company.

- Louisiana law states that you do not have to pay anything.
- Your insurance company will only send an explanation of what services you were billed for to an address you choose. You may decide you do not want this.
- The provider may also bill Medicaid, Medicare or Tricare if you are enrolled in one
 of these.

If you get a bill for any non-covered medical services other than the forensic medical exam, you may be able to get these bills paid by the Crime Victims Reparations Board (not to exceed \$1,000). For information about what costs are covered or how to apply for help, visit their website at www.lcle.state.la.us/programs/cvr.asp or call (888) 6-VICTIM (888-684-2846).

Emergency Contraception (EC) is a safe way to reduce the chance of getting pregnant after rape or sexual assault.

EC works by delaying the release of an egg (ovulation). There are two ways to obtain EC: 1) over the counter, and 2) provider prescription.

- During your visit with the healthcare provider, the option of taking EC will be discussed. It is your decision if you would like to take EC to delay the release of an egg (ovulation).
- Emergency contraception will not work if you are already pregnant. If your
 pregnancy test is negative, the healthcare provider will discuss and offer EC. If you
 take EC and you are early in your pregnancy, EC will not harm or end a pregnancy.
- If you have any concerns about EC, feel free to discuss them with your provider.

This information is provided for informational purposes only and does not constitute providing medical advice or professional services. Please consult with a medical professional to determine what is right for you.

Important numbers:

National Sexual Assault Hotline: (800) 656-4673 Crime Victims Reparations Board: (888) 684-2846



This publication was produced in compliance with Act 513 of the 2022 Regular Session of the Louisiana Legislature. This Act amends the provisions of La. R.S. 40:1216.1.

April 2023

APPENDIX E: PLANNING MEETING NOTICES & LIST OF INVITEES

Coroners' Email Planning Meeting Notice and Invitees

From: Gina Lagarde

ronaldcoemd@gmail.com; rfoster9988@gmail.com; jwvarnado@yahoo.com; jwvarnado.jv@gmail.com; To:

christophertape@gmail.com; Casama777@gmail.com; ctape@stpcoroner.org; drcasama365@

Cc: Gerry Cvitanovich

Subject: RE: Annual Region 9 SAR Planning Meeting--January 27th

Thursday, January 16, 2025 8:30:00 AM Date:

Attachments: Approved OPH Region 9--2024 SAR Plan --posted.pdf

ACT 669 of 2024 Rea Session.pdf ACT No. 354 2024 Reg Session.pdf

Importance: High

Good Morning Drs. Coe, Varnado, Tape, Foster, and Casama,

The 2025 OPH Region 9 Annual Sexual Assault Response (SAR) Planning Meeting will be held on Monday, January 27, 2025 at 10:00 a.m. via ZOOM. During the meeting, we will review the current 2024 regional SAR Plan; discuss any operational issues related to the plan; and discuss updates/edits needed to the plan. The ZOOM meeting details are as follows:

Topic: OPH Region 9 Sexual Assault Response Planning Meeting

Time: Jan 27, 2025 @ 10:00 AM Central Time (US and Canada)

Join Zoom Meeting

https://ldhophbrcoregion9regofcleadership.zoom.us/j/91865591797

Meeting ID: 918 6559 1797

Your participation in the ZOOM planning meeting on January 27th is critical to ensuring that quality, timely, survivor-centered care is provided to all survivors of sexual assault on the Northshore. If you are unable to participate in the meeting, then please have a designee to participate who has the authority to make recommendations and/or decisions on your behalf.

I have attached a copy of our current OPH Region 9 2024 SAR Plan (same plan as emailed to you on Tues, but named differently to attach to the partners' meeting invites) for your review prior to the meeting. Please email to me your comments, concerns, and/or recommended edits/updates to the attached plan by COB Wednesday, January 22nd, if possible. Also, in advance of the meeting, I will update the 2024 plan to ensure compliance with the attached legislation from the 2024 regular legislative session, and I will share with you all prior to the meeting. The final plan will need to have your signature of approval from each of you prior to submission to LDH, per ACT 354.

I look forward to seeing you in our meeting. Feel Free to call me for any questions, concerns, recommendations, etc.

Sincerely, Dr. Gina Lagarde

Other SAR Partners - Email Planning Meeting Notice Template and Invitees

As valued Sexual Assault Response (SAR) partners, we would like to invite you to participate in the 2025 OPH Region 9 Annual Sexual Assault Response (SAR) Planning Meeting, which will be held on Monday, January 27, 2025 at 10:00 a.m. via ZOOM. During the meeting, we will review the current 2024 regional SAR Plan; discuss any operational issues related to the plan; and discuss updates/edits needed to the plan. The ZOOM meeting details are as follows:

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Meeting ID: 918 6559 1797

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I have attached a copy of our current OPH Region 9 2024 SAR Plan for your review prior to the meeting. Please email to me your comments, concerns, and/or recommended edits/updates to the attached plan by COB Wednesday, January 22nd, if possible. Also, feel free to call me with your concerns/recommendations. I look forward to seeing you in our meeting.

Sincerely. Dr. Gina Lagarde

Sheriffs

From: Gina Lagarde

iard@lpso.org; Clay.chutz@sthso.org; Randysmith@stpso.com; stickerg@tpso.org; ismith@wpso.la.gov To:

Invitation to the OPH Region 9 Sexual Assault Response Planning Meeting Subject:

Date: Wednesday, January 15, 2025 5:56:00 PM Attachments: Approved OPH Region 9--2024 SAR Plan --posted.pdf

Importance:

Good Evening Sheriffs Ard, Smith, Chutz, Sticker, and Smith,

From:

bbourgeois@lpso.cor; laurie.sibley@sthso.org; georgecox@stpso.com Subject: Invitation to the LDH Region 9 Sexual Assault Response Planning Meeting

Date: Wednesday, January 15, 2025 6:02:00 PM

Attachments: Approved OPH Region 9--2024 SAR Plan --posted.pdf

Importance: Hiah

Good Evening To All,

From: Gina Lagarde "bbourgeois@lpso.org" To:

Subject: Invitation to the LDH Region 9 Sexual Assault Response Planning Meeting

Date: Wednesday, January 15, 2025 6:17:00 PM

Attachments: Approved OPH Region 9--2024 SAR Plan --posted.pdf

Importance: Hiah

Good Evening Major Bourgeois,

Chiefs of Police

From: Gina Lagarde

To: rfandal@slidellpd.com; dseuzeneau@slidellpd.com; tschliem@cityofmandeville.com; mferrell@covla.com;

btyrney@townofmadisonville.org; sbruhl@folsompd.org; jsessions@pearlriverpolice.com; james.smith@bogalusa.org; jbrown@tofpd.com; angiecityhall@bellsouth.net; ladams@itsfast.net;

bergeron_ej@hammond.org; edwardsf@independencepd.org; lfrancois@amitepd.com; tickfawpd@bellsouth.net;

staff@roselandpolice.com; michael.kazerooni@kentwoodla.org; chief@ponchatoulapolice.com; jjones@townofspringfield.org; daddison@walkerpd.org; rdufrene@townoflivingston.com;

boyd.wild@albanyla.gov; chief@fspd-la.gov; rwalker@dspd.net; killiantownhall@eatel.net; chief@portvincent-

la.gov: ced.burise@greensburgpolice.org Invitation to the LDH Region 9 Sexual Assault Response Planning Meeting

Date: Thursday, January 16, 2025 2:48:00 PM

Attachments: Approved OPH Region 9--2024 SAR Plan --posted.pdf

Importance: High

Good Afternoon Police Chiefs,

• Hospitals

Subject:

From: Gina Lagarde

To:

 $\frac{dflynn@covingtonhospital.com;}{beniamin.richaud@lcmchealth.org;} \frac{lbeniamin.richaud@lcmchealth.org;}{lbeniamin.richaud@lcmchealth.org;} \frac{lbruhl@lsuhsc.edu;}{lbeniamin.richaud@lcmchealth.org;} \frac{lbruhl@lsuhsc.edu;}{lbeniamin.richaud.gc.edu;} \frac{lbruhl@lsuhsc.edu;}{lbeniamin.richaud.gc.edu$

Darrelllavender@rmchospital.com; Sandy.Badinger@ochsner.org; nawan@shhosp.org; JCoffman@stph.org; suttonm@northoaks.org

Subject: Invitation to the LDH Region 9 Sexual Assault Response Planning Meeting

Date: Thursday, January 16, 2025 6:06:00 PM

Attachments: Approved OPH Region 9--2024 SAR Plan --posted.pdf

Importance:

Good Evening To All,

From: Gina Lagarde

mbernard@covingtonhospital.com; Brian.Galofaro@fmolhs.org; mrehma@lsuhsc.edu; PeltierR@northoaks.org; To:

charlane.liles@ochsner.org; robinsabre@rmchospital.com; mark.kellar@oloah.org; todda@hoodmemorial.com; jennifer.schmidt@hcahealthcare.com; jennifer.schmidt@hcahealthcare.com; vhirsc@lsuhsc.edu;

ThompsonD@northoaks.org; whittingtonm@northoaks.org

Subject: Invitation to the LDH Region 9 Sexual Assault Response Planning Meeting

Thursday, January 16, 2025 6:34:00 PM Date:

Attachments: Approved OPH Region 9--2024 SAR Plan --posted.pdf

Importance: Hiah

Good Evening To All,

From:

 $\underline{let@northoaks.org}; \underline{neale@northoaks.org}; \underline{imartin@ololsh.com}; \underline{ssherman@shhosp.org}; \underline{ihowell@shhosp.org};$ To:

smeade@lsuhsc.edu; cingram@stph.org; kmilton@stph.org; mcollette@stph.org; dtoups@stph.org; jstphilip@stph.org; brogers@stph.org; mcollett@stph.org; abouton@stph.org; jill.breazeale@fmolhs.org; Sybil.cotten@fmolhs.org; mark.kellar@fmolhs.org; janice.augustine@fmolhs.org; kelo.landry@lcmchealth.org; hamiliton.dolese@lcmchealth.org; Jacques.Guillot@lcmchealth.org; ginnamurphy@southeastmc.com;

bbalado@hoodmemorial.com; rartiques@hoodmemorial.com; csanmarco@hoodmemorial.com;

ybertaut@ochsner.org; joholmes@ochsner.org; Michael.quillot@ochsner.org; joholmes@ochsner.org; Jason.wilson@ochsner.org; benton@ochsner.org; William.freeman@pepaem.com; peggy.shirley@pemmanagement.com; michelle.aucoin@pemmanagement.com; ross.daray@pemmanagement.com

Subject: Invitation to the LDH Region 9 Sexual Assault Response Planning Meeting

Date: Friday, January 17, 2025 4:58:00 PM

Attachments: Approved OPH Region 9--2024 SAR Plan --posted.pdf

Importance:

Good Evening To All,

EMS/First Responders

From: Gina Lagarde

dmeche@acadian.com; tjacobsen@acadian.com; Williams9613@bellsouth.net; To:

FD4EMSDivision@Mandevillefire.com; CKaufmann@Slidellfire.org; MParish@Pearlriverfire.org; Mqeissler@stfd3.com

Invitation to the LDH Region 9 Sexual Assault Response Planning Meeting Subject:

Wednesday, January 15, 2025 9:11:00 PM

Attachments: Approved OPH Region 9--2024 SAR Plan --posted.pdf

Importance: High

Good Evening EMS Partners,

Gina Lagarde

lwilliams@nsems.net; Williams9613@bellsouth.net

FW: Invitation to the LDH Region 9 Sexual Assault Response Planning Meeting Subject:

Date: Friday, January 17, 2025 4:30:00 PM

Attachments: Approved OPH Region 9--2024 SAR Plan --posted.pdf

Importance: High

Good Afternoon Ms. Williams,

Please see the email below that was sent to Williams9613@bellsouth.net. Just making sure that you received the invitation for the meeting

From: Gina Lagarde

vtrabona@mandevillefire.com

Subject: FW: Invitation to the LDH Region 9 Sexual Assault Response Planning Meeting

Friday, January 17, 2025 3:34:00 PM Date:

Attachments: Approved OPH Region 9--2024 SAR Plan --posted.pdf

Importance:

Good Afternoon,

Please see the email below. I just want to make sure that you did get the zoom invite that was sent to FD4EMSDIVISION@mandevillefire.com

Higher Education

From: Gina Lagarde

To: $\underline{william.wainwright@southeastern.edu;}\ \underline{iimcarlson@northshorecollege.edu;}\ \underline{frankfudesco@northshorecollege.edu;}$

 $\underline{carmen.bray@southeastern.edu;} \underline{Michael.beckner@southeastern.edu;} \underline{andrea.anderson@southeastern.edu;} \underline{yazmyn.smith@southeastern.edu;} \underline{slucc@southeastern.edu}$

Subject: Invitation to the LDH Region 9 Sexual Assault Response Planning Meeting

Date: Thursday, January 16, 2025 7:41:00 AM

Attachments: Approved OPH Region 9--2024 SAR Plan --posted.pdf

Importance: Hiah

Good Morning Higher Education Partners,

As valued Sexual Assault Response (SAR) partners, we would like to invite you to participate in the

From: Gina Lagarde

police@southeastern.edu; Michael.beckner@southeastern.edu To:

FW: Invitation to the LDH Region 9 Sexual Assault Response Planning Meeting Subject:

Friday, January 17, 2025 3:38:00 PM Date:

Attachments: Approved OPH Region 9--2024 SAR Plan --posted.pdf

Importance:

Good Afternoon Mr. Beckner,

Just making sure that you received the zoom invite below. I just realized that I had the police@ southeastern.edu email address. Just covering all bases.

• School Boards

From: Gina Lagarde

To: stephen.link@lpsb.org; jody.purvis@lpsb.org; lchaney@sthpk-12.net; Kioseph@sthpk-12.net;

Matthew.Greene@stpsb.org; Frank.Jabbia@stpsb.org; tom.tolar@tandischools.org; melissa.stilley@tangischools.org; lesley.mckinley@wpsb.info; Jennifer.thomas@wpsb.info;

Pkates@bogschools.org; Bhurst@bogschools.org

Subject: Invitation to the LDH Region 9 Sexual Assault Response Planning Meeting

Date: Wednesday, January 15, 2025 9:45:00 PM
Attachments: Approved OPH Region 9--2024 SAR Plan --posted.pdf

Importance: High

Good Evening School Board Presidents and Superintendents of Schools,

As valued Sexual Assault Response (SAR) partners, we would like to invite you to participate in the

From: Gina Lagarde

To: kmcgehee@bogschools.org; tricia.smith@wpsb.info; Jennifer.Wilkinson@lpsb.org;

verna.thompson@tanqischools.org; Neely.Estrade@stpsb.org

Subject: Invitation to the LDH Region 9 Sexual Assault Response Planning Meeting

Date: Wednesday, January 15, 2025 9:57:00 PM

Attachments: Approved OPH Region 9--2024 SAR Plan --posted.pdf

Importance: High

Good Evening School Nurse Partners,

As valued Sexual Assault Response (SAR) partners, we would like to invite you to participate in the

• Sexual Assault Advocacy Organizations and Children's Advocacy Centers

From: Gina Lagarde

To: Rrainey@mccaqno.org; Rfornea@adaptwp.org; Morgan.lamandre@star.ngo; Rcarlisle@childadv.net;

ihenderson@childadv.net; Thomas@cachopehouse.org; Rafael@lafasa.org

Subject: Invitation to the LDH Region 9 Sexual Assault Response Planning Meeting

Date: Thursday, January 16, 2025 7:53:00 AM

Attachments: Approved OPH Region 9--2024 SAR Plan --posted.pdf

Importance: High

Good Morning Advocacy Partners,

As valued Sexual Assault Response (SAR) partners, we would like to invite you to participate in the

District Attorneys

From: Gina Lagarde

To: sperrilloux@21jdda.org; amonistere@21jdda.org

Subject: Invitation to the LDH Region 9 Sexual Assault Response Planning Meeting

Date: Wednesday, January 15, 2025 6:31:00 PM
Attachments: Approved OPH Region 9--2024 SAR Plan --posted.pdf

Importance: High

Good Evening District Attorney Perriloux and Assistant District Attorney Monistere,

As valued Sexual Assault Response (SAR) partners, we would like to invite you to participate in the

From: Gina Lagarde

mbreaux@22da.com; kearias@22da.com

Subject: Invitation to the LDH Region 9 Sexual Assault Response Planning Meeting

Date: Wednesday, January 15, 2025 6:35:00 PM Attachments: Approved OPH Region 9--2024 SAR Plan --posted.pdf

Importance: High

Good Evening District Attorney Sims,

As a valued Sexual Assault Response (SAR) partner, we would like to invite you to participate in the

Crime Lab

From:

AlisonChampagne@stpso.com; Bridget Depew (DPS); Carie Whittington To: Subject: Invitation to the LDH Region 9 Sexual Assault Response Planning Meeting

Date: Friday, January 24, 2025 4:13:00 PM

Attachments: Share Draft -- 2025 Regional SARP-OPH Region 9.pdf

OPH Region 9--2024 SAR Plan to Post.pdf ACT 669 of 2024 Reg Session.pdf

Importance: High

Good Afternoon To All,

As valued Sexual Assault Response (SAR) partners, we would like to invite you to participate in the

Jefferson Parish Coroner's Office- SANE Program Coordinator

From: Gina Lagarde Ginesse Barrett To:

Subject: Invitation to the OPH Region 9 Sexual Assault Response Planning Meeting

Wednesday, January 15, 2025 4:34:00 PM Date:

Attachments: Approved OPH Region 9--2024 SAR Plan --posted.pdf

High Importance:

Good Afternoon Ginesse,

Additional SAR Partners

From: Gina Lagarde

To:

Jennifer O"Ouinn; Tammy Leonard; richard.kramer@fphsa.org; Schoener Laprairie; paulthibodeaux.WPCO.LA@amail.com; dwilson@acadian.com; Jeffery.elder@lcmchealth.org; Elizabeth.garbo@fmolhs.org; mekab@safelouisiana.org; kristig@safelouisiana.org; atetreau@nsems.net

Subject: Invitation to the LDH Region 9 Sexual Assault Response Planning Meeting

Date: Friday, January 17, 2025 4:33:00 PM

Attachments: Approved OPH Region 9--2024 SAR Plan --posted.pdf

Importance:

Good Afternoon To All,

As valued Sexual Assault Response (SAR) partners, we would like to invite you to participate in the

From: Gina Lagarde

To: Yvette Legendre

Subject: Invitation to the LDH Region 9 Sexual Assault Response Planning Meeting

Date: Thursday, January 16, 2025 8:39:00 AM

Attachments: Approved OPH Region 9--2024 SAR Plan --posted.pdf

Importance: High

Good Morning Yvette,

As a valued Sexual Assault Response (SAR) partner, we would like to invite you to participate in the

From: Gina Lagarde

To: Heather Gagliano; Latonyette Thompson; Diane Lewis; Julia Haverkamp; Shakeisha McKay; Martha Hennegan

(Martha.Hennegan@LA.GOV); Keith Peek; Martha Hennegan

Cc: Sheila Bordes

Subject: Invitation to the LDH Region 9 Sexual Assault Response Planning Meeting

Date: Friday, January 17, 2025 1:23:00 PM

Attachments: Approved OPH Region 9--2024 SAR Plan --posted.pdf

Importance: High

Good Afternoon To All,

As valued Sexual Assault Response (SAR) partners, we would like to invite you to participate in the

NOTE:

The following email reminder was sent to all of the invitees listed in this appendix either on January 24th, 25th, or 26th, along with the following partners: Mark Watson

(mwatson@hoodmemorial.com); Dana Washington (Dana.Washington@la.gov);

As valued Sexual Assault Response (SAR) partners, I would like to remind you to participate in the 2025 OPH Region 9 Annual Sexual Assault Response (SAR) Planning Meeting, which will be held on Monday, January 27, 2025 at 10:00 a.m. *via ZOOM*. During the meeting, we will review the current 2024 regional SAR Plan and the draft copy of the 2025 SAR Plan; discuss any operational issues related to the plan; and discuss additional updates/edits needed to the plan.

I have attached a copy of our current OPH Region 9 2024 SAR Plan and ACT No. 669 (for easy reference) and a draft copy of the 2025 SAR Plan for your review prior to the meeting.

The ZOOM meeting details are as follows:

Topic: OPH Region 9 Sexual Assault Response Planning Meeting

Time: Jan 27, 2025 10:00 AM Central Time (US and Canada)

Join Zoom Meeting

https://ldhophbrcoregion9regofcleadership.zoom.us/j/91865591797

Meeting ID: 918 6559 1797

Your participation in the ZOOM planning meeting on January 27th is critical to ensuring that quality, timely, survivor-centered care is provided to all survivors of sexual assault on the Northshore. If you are unable to participate in the meeting, then please have a designee to participate who has the authority to make recommendations and/or decisions on your behalf.

I look forward to seeing you in our Zoom meeting, and feel free to call me with your concerns, questions, and/or recommendations.

Sincerely.

Dr. Gina Lagarde

APPENDIX F: PLANNING MEETING PARTICIPANTS/ATTENDEES

Name Organization

1. Adam Driskell	St. Tammany Parish Sheriff's Office
------------------	-------------------------------------

2. Adrian Brouillette Acadian EMS

3. Amy Bouton St. Tammany Health System

4. Andrea Anderson Southeastern Louisiana University

5. Andrew Tetreau Northshore EMS6. Ashley Mendelson LCMC Health

7. Ashley Seaverson STAR

8. Beth Mizell State Senator, District 12

9. Bradley Leonhard St. Tammany Health System

10. Brian Galofaro Our Lady of Angels

11. Bridget Balado Hood Memorial Hospital12. Bridget Depew LSP Crime Lab

13. Calvin Bowden Livingston Parish Sheriff's Office

14. Carie Whittington LSP Crime Lab

15. Carmen Bray Southeastern Louisiana University

16. Dr. Charles Muntan Lakeview Hospital

17. Dr. Christopher Tape St. Tammany Parish Coroner

18. Cindy Ingram
 19. Corbet Hunt
 St. Tammany Health System
 Washington Parish Sheriff's Office

20. Corinne Ringo St. Tammany Parish Sheriff's Office

21. Courtney Williams
 22. Dan Flynn
 Southeastern Louisiana University
 Covington Trace ER & Hospital

23. Daniel Buckner St. Tammany Parish Sheriff's Office

24. Darnell McAlister Livingston Parish Sheriff's Office

25. Diane Lewis OPH Region 9 Regional Nurse Manager

26. Doug Mincin
 27. Doyle Fillastre
 28. City of Walker Police Department
 29. St. Tammany Parish Coroner's Office

28. Dr. Jimmie Varnado St. Helena Parish Coroner

29. Dwain Meche Acadian EMS

30. Frank Fudesco Northshore Technical College

31. Dr. Gina Lagarde OPH Region 9 Regional Medical Director

32. Ginesse Barrett JPCO SANE Program Coordinator

33. Heather Furnas LSP Crime Lab

34. Heather Gagliano OPH Region 9 Regional Asst. Administrator

35. J. Germann --36. James Carlson Northshore Technical College

37. Janice Augustine Our Lady of Angels

38. Jared Lunsfard St. Tammany Parish Sheriff's Office

39. Jennifer Karasoulis

Northshore Technical College

40. Jennifer O'Quinn

Nurse Family Partnership

41. Jessica Wilkes, LCSW

42. Jessie Nieblas

43. Joan Coffman

44. Joe St. Phillip

45. Joel Smith

46. Joelle Henderson

47. Julia Haverkamp

48. Kal Roshto

49. Karen Arias

50. Katasha August-Robinson

51. Katie Foulon

52. Katie Heenan

53. Keith Peek

54. Kelo Landry

55. Kevin Triche

56. Larry Hudson

57. Laura White

58. Lisa Bruhl

59. Mark Watson

60. Martha Hennegan

61. Mary Ann Dankert

62. Mecole Thompson

63. Melissa Stilley

64. Michael Cousin

65. Michele Sutton

66. Morgan Lamandre

67. Nada Burge

68. Nicole Jones

69. Peggy Shirley

70. Rachel Artigues

71. Randy Lee

72. Rebecca Rainey

73. Richard Kramer

74. Richelle Smart

75. Riney, Kirsten

76. Robin Chastant, RN

77. Dr. Ronald Coe

78. Rusty Fornea

79. Shad Jenkins

80. Shana Turnage

81. Sheila Bordes

82. Shelly Correjolles

83. Suzanne Fraiche

84. Sybil Cotton

85. Tammy Leonard

LaFASA

St. Tammany Health System

St. Tammany Health System

St. Tammany Parish Sheriff's Office

Child Advocacy Services

OPH Region 9 Hospital Nurse Coordinator

Washington Parish School System

Victim Assistance 22JDC

Bogalusa High School

Our Lady of Angels

St. Tammany Parish Sheriff's Office

Region 9 Hospital DRC

Lakeview Hospital

Our Lady of the Lake-Livingston

St. Tammany Parish Sheriff's Office

St. Tammany Parish Coroner's Office

Lallie Kemp Medical Center

Hood Memorial Hospital

OPH Region 9 MCH Coordinator

Jefferson Parish Coroner's Office

OPH Region 9 Regional Social Worker

Tangipahoa Parish School Board

Lakeview Hospital

North Oaks Health System

STAR

Slidell Memorial Hospital

Slidell Memorial Hospital

Physician Emergency Medical Management

Hood Memorial Hospital

St. Tammany Parish Sheriff's Office

Metro Centers

Florida Parishes Human Services Authority

North Oaks Health System

North Oaks Health System

Bogalusa City Schools

Livingston Parish Coroner

ADAPT, Inc

Our Lady of Angels

Washington Parish School Board

OPH Region 9 Regional Administrator

Lallie Kemp Medical Center

St. Tammany Health System

Our Lady of the Lake-Livingston

OPH Region 9 Immunization Coordinator

86. Taylor Jacabson

87. Terry Le

88. Thomas Mitchell

89. Tiffany Smith

90. Todd Acosta

91. Tom Tolar

92. Tren Garbo

93. Tricia Smith

94. Verna Thompson

95. Vicki Hirsch

96. Vincent Trabona

97. Will Freeman

98. Yancy Guerin

99. Yazmyn Smith

100. Ysonde Boland

101. Yvette Bertaut

102. Yvette Legendre

103. ---

104. Cedric's iPhone (Cedric Burise)

105. w0168975

106. GDS iPhone

107. ---

Acadian EMS

North Oaks Health System

Hope House

Hood Memorial Hospital

Tangipahoa Parish School System

Our Lady of Angels

Washington Parish School Board Tangipahoa Parish School Board Lallie Kemp Medical Center

Mandeville Fire/EMS

Hood Memorial Hospital

St. Tammany Parish Coroner's Office Southeastern Louisiana University

Asst. District Attorney 22JDC

Ochsner Health

LERN

Louisiana Chapter IAFN Greensburg Police Dept.

22nd DA Office

Per ACT No. 354 (2024 Regular Session):

<u>Livingston Parish Coroner</u>		
Print Name	Signature	Date
St. Helena Parish Coroner		
Print Name	Signature	Date
St. Tammany Parish Coroner		
Print Name	Signature	Date
Tangipahoa Parish Coroner		
Print Name	Signature	Date
Washington Parish Coroner		
Print Name	Signature	Date

Per ACT No. 354 (2024 Regular Session):

Livingston Parish Coroner	1	
PONALD Coe		2.3.200
Print Name	Signature	Date
St. Helena Parish Coroner		
Print Name	Signature	Date
St. Tammany Parish Coroner		
Print Name	Signature	Date
Tangipahoa Parish Coroner		
Print Name	Signature	Date
Washington Parish Coroner		
Print Name	Signature	Date

Per ACT No. 354 (2024 Regular Session):

Livingston Parish Coroner		
Print Name	Signature	Date
St. Helena Parish Coroner Timmie Williams Print Name	Signature W Marned 1	np. 2/6/2025 Date
St. Tammany Parish Coroner		
Print Name	Signature	Date
Tangipahoa Parish Coroner		
Print Name	Signature	Date
Washington Parish Coroner		
Print Name	Signature	Date

Per ACT No. 354 (2024 Regular Session):

<u>Livingston Parish Coroner</u>		
Print Name	Signature	Date
St. Helena Parish Coroner		
Print Name	Signature	Date
St. Tammany Parish Coroner Christophen Tapl Print Name	Signature	<u> </u>
Tangipahoa Parish Coroner		
Print Name	Signature	Date
Washington Parish Coroner		
Print Name	Signature	Date

Per ACT No. 354 (2024 Regular Session):

Livingston Parish Coroner		
Print Name	Signature	Date
St. Helena Parish Coroner		
Print Name	Signature	Date
St. Tammany Parish Coroner		
Print Name	Signature	Date
Tangipahoa Parish Coroner Rick Foster TP & Print Name	Signature	214/25 Date
Washington Parish Coroner		
Print Name	Signature	——————————————————————————————————————

Per ACT No. 354 (2024 Regular Session):

Livingston Parish Coroner		
Print Name	Signature	Date
St. Helena Parish Coroner		
Print Name	Signature	Date
St. Tammany Parish Coroner		
Print Name	Signature	Date
Tangipahoa Parish Coroner		
Print Name	Signature	Date
Washington Parish Coroner MELIO A CASAMA MAR	selv A. Crance Signature	92/6/25
Print Name	Signature	Date

APPENDIX H: UPDATES MADE TO THE 2024 REGION 9 SAR PLAN

The 2025 Region 9 Regional SAR Plan includes specific updates/changes made to sections of the 2024 Region 9 SAR Plan, which are outlined in the chart below.

- Throughout entire plan, "victim" was changed to "survivor" and ACT No. 229 was changed to R.S. 40:1216.1 or deleted, depending on the applicable sections.
- Updates in column 2 below corresponds to the page numbers in the <u>2024</u> SAR plan.

Statutory Mandates	Updates to 2024 SAR Plan
a) Provide an inventory of all available resources and existing infrastructure in the region and clearly outline how the resources and infrastructure will be incorporated in the most effective manner. (Pages 5-7 of 2024 SAR plan)	 Changed the following on pg. 5: 2024 changed to 2025 and "victim" changed to "survivor" Deleted Lacombe from parishes served by St. Tammany Fire District 1 and added "ambulance unit responds to medical emergencies but doesn't transport patients. Acadian Ambulance transports patients for St. Tammany FD 1" Added St. Tammany Fire District 3 to the EMS services chart and added St. Tammany (Lacombe) to the Parishes column
	 Changed the following on pg. 6: Deleted "West" from Slidell Memorial Hospital in the Hospital ER Services chart. The page number for additional information about Sexual Assault/Rape Crisis and Advocacy Centers/Programs was changed from pg. 18 to pg. 17 Sexual Assault/Rape Crisis and Advocacy Centers/Programs chart: Added "LAFASA accredited" and their respective home regions to each SAC Deleted NOTE in chart which referenced SAFE Deleted Franklinton, LA. and added Hammond, LA. to the Region 9 locations column for Washington Parish Rape Crisis Center/ADAPT, Inc.

Deleted "other satellite offices in Gonzales, St. Francisville, Laplace, Luling additional information and edited information to "Sexual Trauma Awareness and Response Agency/STAR, and ADAPT, Inc. in the chart.

Changed the following on pg. 7:

- Deleted "St. Tammany cases only" and added "cases from all parishes" for St. Tammany Parish Coroner's Office DNA Lab
- Deleted the listing of the 5 Northshore parishes for Louisiana State police Crime Lab and added "cases from all parishes".
- Deleted Chief Michael Beckner as Southeastern Louisiana University Police Department and added Interim Chief Carmen Bray
- Updated names for local Police Chiefs (Covington, Sun, Bogalusa, Roseland, Kentwood, Springfield, Killian, Port Vincent, Greensburg and Montpelier).
- b) Clearly outline the entity responsible for the purchase of sexual assault collection kits and the standards and procedures for the storage of the kits prior to use in a forensic medical examination. (Page 8 of 2024 SAR plan)

Changed the following on pg. 8:

- In #1, "Contents of the Sexual Assault (SA) Collection Kits":
 - Used the language in R.S. 40:1216.1 for and deleted the language that was from ACT No. 229 (2015 Regular Session)
 - Deleted "APPENDIX A" reference
- o In #2, "Purchase and Storage of the SA Collection Kits":
 - Deleted "(PERKS)" and the inactive website address
 - Deleted "West" from Slidell Memorial Hospital in the Hospital ER Services chart.

c) Clearly outline the standards and procedures for a survivor to receive a forensic medical examination, as defined in R.S. 15:622, to ensure access to such an examination in every parish. The plan shall designate a hospital or healthcare provider to be the lead entity for sexual assault examinations for adult survivors and a hospital or healthcare provider to be the lead entity for sexual assault examinations for pediatric survivors. The plan shall also include specific details directing first responders in the transport of survivors of a sexually-oriented crime, the appropriate party to perform the forensic medical examination, and any required training for a person performing a forensic medical examination.

(Pages 9-19 of 2024 SAR plan)

Changed the following under 1. "DESIGNATED LEAD MEDICAL ENTITIES/FACILITIES AND PROVIDERS" on pgs. 9 and 10:

- o On pg. 9
 - Changed the introductory sentence to read "In OPH Region 9, the following hospitals and healthcare provided have been designated by the coroners (and approved by stakeholders) to serve as lead entities to perform the medical screenings and forensic medical exams."
 - "For Adults (aged 18 years and older)":
 - ❖ Deleted "Entity" and pluralized "Facilities" in first bullet:
 - ❖ Deleted "OLOL (in Walker) and St. Tammany Parish Hospital (in Mandeville)" from first arrowed bullet and added "in Region 9"; inserted "lead medical" to "designated facilities"
 - ❖ Deleted "West" for Slidell Memorial Hospital
 - ❖ Under "Designated Lead and Healthcare Provider(s) for FMEs", moved the JPCO SANE Program Team information from the second arrowed bullet to the first and added "and SAR stakeholders" after "the coroners". Also, shortened the language of the other arrowed bullet referencing ER physician to perform the FME if the JPCO SANE team is unavailable.
- o On pg. 10
 - "For Children (under age 18 years)":
 - Deleted "medical screenings" from the NOTE only, in the gray box to now read "NOTE: A pediatric SA survivor's advocate should be present for all FMEs."
 - ❖ Deleted "Entity" and pluralized "Facilities" in first bullet
 - ❖ Deleted "OLOL (in Walker) and St. Tammany Parish Hospital (in Mandeville)" from first arrowed bullet and added "in Region 9"
 - ❖ Deleted "West" for Slidell Memorial Hospital
 - ❖ For Acute and Sub-/Non Acute Pediatric FME charts, deleted "entity" from the charts
 - ❖ For ACUTE Pediatric FMEs, changed APPENDIX from "B" to "A"; deleted "See pg. 14 for videotaping..." and added the Louisiana Children's Code reference foe videotaping forensic interviews of child survivors of SA.

❖ For "SUB-/NON-ACUTE Pediatric FMEs, added (>72 hrs.); deleted OLOL Pediatric ER and added Audrey Hepburn CARE Center in Baton Rouge. In the Notes of the chart, added Audrey Hepburn Care Center satellite office located in BR (Baton Rouge); changed "peds" to "pediatrics

Changed the following under 3. "THE FORENSIC MEDICAL EXAM AND EVIDENCE COLLECTION" on pgs. 12 – 19, per ACT No. 669:

- o For "A" (definitions) − *pg.* 12
 - Added (per R.S. 40:1216.1 & ACT No. 669)
 - Changed the definition for "Sexually oriented criminal offense" to "has the same meaning as defined in R.S. 15:622 per ACT No. 669
 - Added "Emergency contraception" definition
 - Updated the FME definition with that from ACT No. 669 and moved the components of the FME to "Healthcare Services for Survivors of Sexually Oriented Criminal Offenses section"
 - Updated "Healthcare provider"
 - To include (a) and (b)
 - ❖ To include "sexual assault nurse examiner" in (a)
 - ❖ Added the words "and trained" in (a)
 - ❖ Referenced APPENDIX C for training guidance in (a).
 - Moved "Healthcare facility" definition to (b) as now part of "Healthcare provider" and deleted ACT No.193
 - Deleted the NOTE bullet
- o Per ACT No. 669, for "B" (definitions), this section was deleted and
 - "Sexual assault collection kit" and were moved under "A"
 - "Unreported sexual assault collection kit" was deleted
 - Deleted "a sexual assault medical forensic examination" in the definition of "Sexual assault collection kit" and added "during a forensic medical exam"
- o *On pg. 13*. "C" (Healthcare Services) was changed to section "B" and
 - Bullets were changed to numbers
 - A "#2" was added with language from ACT No. 669 regarding addressing the unique needs and circumstances of each survivor.

- A #5 was added which included the components of an FME from pg. 12 AND included 2 additional requirements from ACT No. 669
- For the "sign language or foreign language interpreter" bullet, "upon request" was deleted
- Language from ACT No. 669 was added to the following bullets:
 - "...priority emergency cases..." Also, "if at all possible" was added to "In Region 9, the survivor should not be left alone".
 - SA/Rape Crisis Advocate and a reference to APPENDIX C was added
- For the "Reporting" bullet (pg. 14):
 - ❖ Language changed to match that of ACT No. 669
 - Exceptions to Reporting box was enlarged
 - ❖ Sub-bullets were moved under the "Notification of Law Enforcement"
- For the "Forensic Medical Examinations" bullet on pg. 14.
 - It was converted to #8
 - ❖ Deleted the box regarding videotaping the forensic interview of children and referenced the videotaping as Note 3 under "OPH Region 9 Designated Lead Medical Facility for Acute Pediatric FMEs" per the Louisiana Children's Code ...
 - ❖ Added sub-bullets with language from ACT No. 669 which included the statewide sexual assault collection kit tracking system.
 - ❖ Added bullet "A healthcare provider working for a coroner's office may store the sexual assault collection kit in a secure location maintained by the coroner.", per ACT No. 669
- Deleted the Collection and Packaging Evidence bullet (pg. 14) and the Assignment of a Code Number bullet (pg. 15-16)
- For the "Notification of Law Enforcement" bullet (pg. 17):
 - ❖ The section was moved to follow after Reporting as #7
 - Sub-bullets from pg. 17 and pg. 14 (Reporting sub-bullets) were redundant and therefore combined to

form #7. Language from ACT No. 669 was added to sub-bullet for the survivor who wishes to report. ❖ The "In Region 9" sub-bullet was moved to the "survivor wishes to report" sub-bullet and included language from ACT No. 669. ❖ For the sub-bullet which references "if the survivor wishes to report", deleted "before the survivor is examined and treated" ❖ Changed See Chain of Custody of Evidence pg. to • For the "Post-Examination, Emergency contraception, Medical Discharge, and Follow-up Care of the Patient: bullet (pg. 17): ❖ Deleted "Medical Discharge" and "of the Patient" from the bullet heading ❖ Deleted (PERK) and "Per ACT No. 193" ❖ Added the bullet "The survivor shall be provided with information about medical billing" • On pg. 18, updated services information in the "Sexual Assault/Rape Crisis and Child Advocacy Centers" chart for children hospital accompaniment/hospital advocates for STAR and Hope House ■ Pg. 19 moved to APPENDIX C **d)** Clearly outline the standards o Deleted "Medical Billing" heading and the language and procedures for the that follows ("All designated hospitals...and will handling and payment of include the following") medical bills related to the o First bubble bullet under the arrowed bullet forensic medical examination "Regarding Medical Billing" was labeled #1 in this to clarify and ensure that those section. standards and procedures are 3rd and 4th sub-bullets deleted which reference in compliance with this laboratory testing and medication, respectively. Section and any other Deleted the words "Regarding Medical Billing" applicable section of law. (Pages 21-23 of 2024 SAR o Second and third bubble bullets under the arrowed plan) bullet "Regarding Medical Billing" were merged and labeled #2 in this section "hospital or" was added to the first sentence

(before healthcare facility shall...)

- Added language from ACT No. 669 regarding a survivor seeking reparation in accordance with Crime Victims Reparations Act
- First bubble bullet under the arrowed bullet "Regarding Explanation of Billing Process" was labeled #3 in this section
 - The second bubble bullet was made a sub-bullet of #3
 - Deleted the words "regarding Explanation of Billing Process"
- o On pg. 22, deleted #2 "Crime Victims Reparations Board" information
- o Deleted the arrowed bullets and its information
- e) Clearly outline the standards and procedures for the transfer of sexual assault collection kits [for both reported and unreported crimes to an appropriate criminal justice agency or the local law enforcement agency having jurisdiction in the parish in which the crime was committed, if known, or if unknown, to an appropriate criminal justice agency or the local law enforcement agency having jurisdiction in the parish in which the hospital or healthcare provider is located. The plan shall include a maximum time period for the transfer to occur not to exceed seven days after the criminal justice agency or local law enforcement agency receives a request for the transfer from the hospital or healthcare provider.]

(Pages 20-21 of 2024 SAR

plan)

- o Deleted the language in e) of this statutory mandate that is in bold italic
- o Under the first arrowed bullet,
 - all of the information after the first sentence was moved to its own sub-bullet which follows "The law enforcement agency shall retrieve..." sub-bullet
 - The order of the sub-bullets were changed for better flow of information
 - Regarding "The law enforcement agency shall retrieve..." sub-bullet, a NOTE was added which referenced ACT No. 669 as it relates to the 72 hours timeframe law enforcement has to take possession of the SA collection kit and why the 1- hour timeframe chosen for Region 9.
- o The second arrowed bullet was added as a sub-bullet under the first arrowed bullet.
- Added another arrowed bullet "Maintenance of Retrieved Sexual Assault Collection Kits" with language from ACT No. 669.

OTHER UPDATES TO THE 2024 PLAN:

- Page 1: Changed date of the Regional SAR Plan from 2024 to 2025; changed month of updates to plan from June 2024 to January 2025
- Page 2: "Preface" changed to "Overview" and removed most of the historical information and kept the information applicable to the 2025 plan.
 - ❖ Deleted information in paragraph 1 after " …in conduction a forensic medical examination"
 - ❖ Deleted paragraphs 2 and 3 in 2024 SAR plan
- Page 3: Changed ACT No. 229 to R.S. 40.1216.1; deleted "Addendum"; added APPENDIX A -JPCO SANE PROGRAM ALGORITHMS to paragraph 2; changed Region IX Statistics Form from APPENDIX C to APPENDIX B in paragraph 2; updated language in paragraphs 1 and 2 of the 2024 SAR plan. References to APPENDICES E (copy of stakeholders' invitation to the SAR planning meeting and list of invitees) and F (meeting participant list of individuals and organizations) were added to information on pg. 3; edits/updates made to the 2024 plan is now Appendix H.
- Page 4: The paragraph was updated with current legislation; pages in the text box have been updated to match the pages in the 2025 OPH Region 9 Regional SAR Plan; the statutory mandate outlined in (e) was shortened with language in ACT NO. 669 (Information after the first line was deleted); and the following page numbers for the statutory mandates in the 2024 plan were changed to correspond to the new page numbers of the 2025 plan:
 - Pages 5-7 changed to Pages 4-6 of the 2025 SAR Plan
 - Page 7 changed to Pages 8 of the 2025 SAR Plan
 - Pages 9-19 changed to Pages 8-17 and 21-22 of the 2025 SAR Plan
 - Pages 21-23 changed to Page 20 of the 2025 SAR Plan
 - Pages 20-21 changed to Pages 18-19 of the 2025 SAR Plan

- Page 23: "Survivors' Access To FME Documentation"
 - Deleted "La. R.S. 1216.1 (G) (1)-(2) stated that"
 - Information moved into a #1 and #2
 - #1 includes the information in the paragraph, starting with "Upon request..." merged with information from the first bullet
 - ♣ #2 includes the information from the second and third bullets. "The reproduction of written documentation..." and "This release..."
- Pages 24-26: "Moving Forward" section deleted from plan since it is a summary of information discussed in the planning meeting. Will be covered in the minutes, where applicable.
- The "Sexual Assault Survivors' Bill of Rights" section was added to the plan directly following the "Survivors' Access to FME Documentation" section.
- The following statements from ACT No. 669 were added to the end of the SAR plan:

Per ACT No. 669 (2024 Regular Session):

- For hospitals, failure to comply with the standards in R.S. 40:1216.1 shall constitute grounds for denial, suspension, or revocation of license.
- Also, failure to comply may constitute grounds for denial, suspension, or revocation of the healthcare provider's license by the appropriate licensing board or commission.

Per ACT No. 354 (2024 Regular Session):

- The coroner shall implement, fulfill, and comply with all obligations, duties, and requirements imposed upon him by R.S. 40:1216.1 and by the regional sexual assault response plan approved for the coroner's health service district pursuant thereto, which the coroner shall annually sign to indicate his approval pursuant to R.S.40:1216.1(E)(4) SEE APPENDIX G for coroners' signatures
- **APPENDIX A:** Contents of the sexual assault collection kit for adults and pediatrics were deleted and the updated JPCO SANE algorithms were added
- APPENDIX B: JPCO SANE Program Algorithms deleted and added the Region IX Statistics Form

- **APPENDIX C:** Consists of the information from pg. 19 of the 2024 plan "Required FME Training For Designated Healthcare Providers".
 - Paragraph's language was updated and "Required FME Training" changed to "FME Training Guidance"
 - Sexual Assault (Survivors') Advocates bullet updated with corrected training information.
- **APPENDIX D:** No change
- **APPENDIX E:** Now includes the PLANNING MEETING NOTICES & LIST OF INVITEES, per ACT No. 669. "Updates Made To The Region 9 SAR Plan" moved to the newly created Appendix H.
- **APPENDIX F:** New and includes the PLANNING MEETING PARTICPANTS /ATTENDEES, per ACT No. 669
- **APPENDIX G** has been added which includes the signatures of the OPH Region 9 Coroners to approve the 2025 OPH Region 9 SAR Plan
- **APPENDIX H:** New and included "Updates Made To The 2024 Region 9 SAR Plan