

Region 2

2026 Regional Sexual Assault Response Plan

Updated - September 2026

Report Coordinated and Compiled By:

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OVERVIEW

In the 2015 Louisiana Regular Legislative Session, the Legislature passed ACT No: 229, which addresses the treatment and billing of survivors of a sexually oriented criminal offense. This 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 bills a survivor for any healthcare services rendered in conducting a forensic medical examination.

Louisiana R.S. 40:1216.1 mandates the Louisiana Department of Health, to coordinate an annual sexual assault response plan (SARP) for each of its nine regional health service districts. Each plan shall incorporate a sexual assault response team protocol. Under Louisiana Revised Statute 13:5713(F), coroners have jurisdiction over all victims of sexually oriented criminal offenses (SOCO) who present for examination within their parish. The statute mandates that "The coroner or his designee shall examine all alleged victims of a sexually oriented criminal offense." In accordance with R.S. 40:1300.41, coroners may designate a hospital or healthcare provider as the lead entity for conducting forensic medical examinations (FMEs).

Given its central location within OPH Region 2 and its concentration of five major hospitals, East Baton Rouge Parish (EBRP) is uniquely positioned to serve as the regional hub for a coordinated sexual assault response program. Accordingly, the East Baton Rouge Parish Coroner's Office (EBRPCO) has been designated as the lead entity for performing all acute forensic medical examinations (FMEs) in Region 2.

To support this designation, Woman's Hospital and Baton Rouge General Bluebonnet have been identified as the primary facilities for adult medical examinations and emergency care, while Our Lady of the Lake Children's Hospital serves as the designated provider for pediatric cases.

In September 2025, input was solicited from the OPH Region 2 coroners and from other regional SARP partners via e-mails as well as during the September 30, 2025 meeting, regarding any updates and/or changes needed for the 2026 SARP. SEE APPENDIX D for a copy of notices sent to stakeholders about the SARP planning meeting, a list of the individuals and organizations that were provided notice, and the method and timing of the notice provided. See APPENDIX E for a list of the individuals and organizations in attendance at the meeting.

The following 2026 OPH Southeast Region 2 Sexual Assault Response Plan includes the consensus recommended updates/changes (SEE APPENDIX H) 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 [which is proper as this is nonrestrictive clause] shall constitute minimum standards for the operation and survivor agency. 2

- 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.
- b) Clearly outline, the EBRPCO is responsible for storage of the kits prior to use in a forensic medical examination and maintenance of all unused and unreported Sexual Assault Evidence Collection Kits (SAKs), and for providing the appropriate kit during each examination.
- 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 for every parish with Region 2. The plan shall designate EBRPCO to be the lead entity for sexual assault examinations for adult and 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.
- 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.
- 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

The Region 2 SARP will also, as directed by legislation

1. Ensure that when the uniform protocol for human trafficking, established by the Human Trafficking in Emergency Departments Task Force, is available, it will be incorporated in the protocols in Region 2. (Act 276 2025)
2. Cooperate with the State Attorney General in efforts towards statewide coordination of sexual assault examiners, with a specific focus on ensuring access to services provided by sexual assault nurse examiners in rural areas. (Act 289 2025)

The **2026 OPH Southeast Region 2 Sexual Assault Response Plan** outlines the coordinated, multi-disciplinary response of medical professionals, law enforcement agencies, criminal justice personnel, survivor advocacy agencies, crime laboratory personnel, and support agencies to sexual assaults in Ascension, East Baton Rouge, East Feliciana, Iberville, Pointe Coupee, West Baton Rouge and West Feliciana Parishes. This consensus regional response plan ensures that survivors of sexual assaults have immediate access to coordinated care that is trauma-informed survivor-centered, respectful, 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 2 will continue to update the regional sexual assault response plan annually 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 2 *Sexual Assault Response Team* consists of key responders who will ensure that survivors have access to medical, law enforcement, advocacy, and prosecutorial services.

- **7 Coroners**

Name	Jurisdiction	Contact
Honorable Dr. Christopher T. Trevino	Ascension Parish	225-644-4743
Honorable Dr. William “Beau” Clark	East Baton Rouge Parish	225-389-3047
Honorable Dr. E. Gene Thompson	East Feliciana Parish	225-719-9125
Honorable Dr. James Grace	Iberville Parish	225-687-8555
Honorable Dr. Donald Doucet	Pointe Coupee Parish	225-638-5736
Honorable Dr. Phillip Padgett	West Baton Rouge	225-336-2429
Honorable Dr. Chaillie P. Daniel	West Feliciana Parish	225-635-5848

- **4 District Attorneys**

Name	District	Parishes
Honorable Hillar Moore	19 th J.D.	East Baton Rouge
Honorable Tony Clayton	18 th J.D.	Pointe Coupee, West Baton Rouge, Iberville
Honorable Samuel C. D’Aquila	20 th J.D.	East Feliciana and West Feliciana
Honorable Ricky Babin	23 rd J.D.	Ascension

- **Emergency Medical Services**

Organizations	Parishes
East Baton Rouge EMS	East Baton Rouge
Acadian Ambulance Service	Ascension, East Baton Rouge, East Feliciana, Iberville, Pointe Coupee, West Baton Rouge, West Feliciana
West Feliciana Parish EMS	West Feliciana
Gonzales Fire Department	Ascension
West Baton Rouge EMS	West Baton Rouge

- **Hospital Emergency Room (ER) Services**

Region 2 Hospitals/ERs	Location	Parish
Baton Rouge General Ascension	Prairieville, LA	Ascension
Our Lady of the Lake St. Elizabeth	Gonzales, LA	Ascension
Prevost Memorial Hospital	Donaldsonville, LA	Ascension
RISE Community Hospital	Prairieville, LA	Ascension
Baton Rouge General Bluebonnet	Baton Rouge, LA	East Baton Rouge
Baton Rouge General Mid City	Baton Rouge, LA	East Baton Rouge
Lane Regional Medical Center	Zachary, LA	East Baton Rouge
Ochsner Medical Center Baton Rouge	Baton Rouge, LA	East Baton Rouge
Our Lady of the Lake Children’s Hospital	Baton Rouge, LA	East Baton Rouge
Our Lady of the Lake North Emergency Department	Baton Rouge, LA	East Baton Rouge
Our Lady of the Lake Regional Medical Center Main Campus	Baton Rouge, LA	East Baton Rouge
Woman’s Hospital	Baton Rouge, LA	East Baton Rouge
Ochsner Medical Complex	Plaquemine, LA	Iberville
Pointe Coupee General Hospital	New Roads, LA	Pointe Coupee
West Feliciana Parish Hospital	St. Francisville, LA	West Feliciana

- **Sexual Assault/Rape Crisis and Advocacy Centers/Programs**

Name	Region 2 Location	Service Area
Sexual Trauma Awareness & Response (STAR)	Baton Rouge, LA	<i>Central and Southeast Louisiana</i>
Baton Rouge Children’s Advocacy Center	Baton Rouge, LA	<i>East Baton Rouge, West Baton Rouge, Pointe Coupee, Iberville</i>
Child Advocacy Services	Gonzales, Denham Springs, St. Francisville, LA	<i>Ascension, East Feliciana, West Feliciana</i>

Louisiana Foundation Against Sexual Assault (LaFASA)	No physical location in Region 2	<i>Statewide</i>
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- **Crime & DNA Labs**

Louisiana State Police Crime Lab	Baton Rouge, LA
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- **Law Enforcement**

- **7 Parish Sheriffs**

Name	District	Parishes Covered
Sheriff Bobby Webre	23 rd J.D.	Ascension Parish
Sheriff Sid Gautreaux	19 th J.D.	East Baton Rouge Parish
Sheriff Jeff Travis	20 th J.D.	East Feliciana
Sheriff Brett M. Stassi	18 th J.D.	Iberville Parish
Sheriff René Thibodeaux	18 th J.D.	Point Coupee Parish
Sheriff Brian Spillman	20 th J.D.	West Feliciana Parish
Sheriff Jeff Bergeron	18 th J.D.	West Baton Rouge Parish

○ **Local Police Chiefs**

Parish	Municipality	Police Chief
Ascension	Donaldsonville	Tony Bacala
	Gonzales	Sherman Jackson
East Baton Rouge	Baker	Carl Dunn
	Baton Rouge	Thomas "T.J." Morse
	BRCC	Genoria Tilley
	Central	Roger Corcoran
	DOTD (LSP/DPS)	Jeffery Melchior
	LSU	Marshall Walters
	St. George	Todd Morris
East Feliciana	Southern U.	Joycelyn Johnson
	Zachary	Darryl Lawrence Sr.
	Clinton	Ned Davis Jr.
	Jackson	Mitchell Harrell
Iberville	Slaughter	Howard Henderson
	Gross Tete	James Lewis
	Maringouin	Hosea Anderson
	Plaquemine	Stephen Engolio
	Rosedale	Mike Sparks
	St. Gabriel	Kevin Ambeau Sr
	White Castle	Harold Brooks Jr
Pointe Coupee	Fordoche	Pat Bizette
	Livonia	Landon Landry
	New Roads	Chief Louis Hamilton III
West Baton Rouge	Addis	Jason Langlois,
	Brusly	Jonathan Lefeaux
	Port Allen	Donovan Mitchell
West Feliciana	St. Francisville	Chief Randal Metz

Higher Education

Name	Location	Parish
LSU	Baton Rouge, LA	Orleans
Southern U.	Baton Rouge, LA	Orleans
Baton Rouge Community College	Baton Rouge, LA	Orleans

River Parish Community College	Baton Rouge, LA	Orleans
FMOL	Baton Rouge, LA	Orleans
Southeastern Nursing School	Baton Rouge, LA	Orleans
Louisiana State University (LSU) Health Sciences SANE Grant Program	Baton Rouge, LA	Orleans

• **Local School Boards**

Name	Location
Ascension Parish School Board	1100 Webster St, Donaldsonville, LA 70346
East Baton Rouge Parish School System	1050 S. Foster Dr, Baton Rouge, LA 70806
East Feliciana Parish School Board	12732 Audubon Ln, Clinton, LA 70722
Iberville Parish School Board	58060 Plaquemine St, Plaquemine, LA 70764
Pointe Coupee Parish School Board	8777 LA-1, Morganza, LA 70759
West Baton Rouge Parish School Board	3761 Rosedale Rd, Port Allen, LA 70767
West Feliciana Parish School Board	4727 Fidelity St, St. Francisville, LA 70775

FME STANDARDS AND PROCEDURES

This section clearly outlines the standards and procedures for a survivor to receive a forensic medical examination (FME), as defined in Louisiana R.S. 15:622, to ensure access to such an examination in every parish in OPH Region 2.

1. **DESIGNATED LEAD MEDICAL ENTITIES/FACILITIES AND PROVIDERS**

In **OPH Region 2**, the East Baton Rouge Parish Coroner's Office (EBRPCO) serves as the designated entity to perform all acute forensic medical examinations (FMEs)

FOR ADULTS (aged 18 years and older)

• **OPH Region 2 Designated Lead Healthcare Provider(s) for FMEs:**

- ▶ The EBRPCO serves as the designated entity to perform all acute FMEs for Ascension, East Baton Rouge, East Feliciana, Iberville, Pointe Coupee, West Baton Rouge and West Feliciana Parishes; the respective parish coroners designated EBRPCO as the lead. Upon notification of a potential SOCO case, the EBRPCO Mobile SANE Team will respond to any hospital where the patient presents and conducts the forensic medical examination on-site. A few of the preferred hospitals are listed below :

Designated Preferred Hospitals for FMEs and Medical Screenings	Address	Contact	Preferred Facility Type
Woman's Hospital	100 Woman's Way Baton Rouge, 70817	225-927-1300	Adult and adolescent females
Baton Rouge General Hospital	8585 Picardy Ave. Baton Rouge, 70809	225-763-4000	Adult males
Our Lady of the Lake Regional Medical Center	5000 Hennessy Blvd. Baton Rouge, 70808	225-765-6565	Adult survivors

- **OPH Region 2 Medical Facilities for Medical Screenings:**

- ▶ *All hospital emergency rooms (ERs) services in Region 2 are entities for medical screenings. (see chart below)*

Region 2 Hospitals/ERs	Location	Parish
Baton Rouge General Ascension	Prairieville, LA	Ascension
Our Lady of the Lake St. Elizabeth	Gonzales, LA	Ascension
Prevost Memorial Hospital	Donaldsonville, LA	Ascension
RISE Community Hospital	Prairieville, LA	Ascension
Baton Rouge General Bluebonnet	Baton Rouge, LA	East Baton Rouge
Baton Rouge General Mid City	Baton Rouge, LA	East Baton Rouge
Lane Regional Medical Center	Zachary, LA	East Baton Rouge
Ochsner Medical Center Baton Rouge	Baton Rouge, LA	East Baton Rouge
Our Lady of the Lake Children's Hospital	Baton Rouge, LA	East Baton Rouge
Our Lady of the Lake North Emergency Department	Baton Rouge, LA	East Baton Rouge
Our Lady of the Lake Regional Medical Center Main Campus	Baton Rouge, LA	East Baton Rouge
Woman's Hospital	Baton Rouge, LA	East Baton Rouge
Ochsner Medical Complex	Plaquemine, LA	Iberville
Pointe Coupee General Hospital	New Roads, LA	Pointe Coupee
West Feliciana Parish Hospital	St. Francisville, LA	West Feliciana

NOTE: Each parish within Region 2 is located within approximately -one hour drive time to a hospital located within East Baton Rouge Parish.

- **OPH Region 2 Healthcare Provider(s) for Medical Screenings:**

- ▶ Hospitals and health care providers assess patients for acute medical needs and provide stabilization, treatment, and/or consultation. They offer information, treatment, and referrals for sexually transmitted infections (STIs) and other non-acute medical concerns, assess pregnancy risk, and discuss treatment options with the patient, including reproductive health services in collaboration with the SANE. They will also provide medical follow-up with the victim. When a victim presents to a healthcare facility and a forensic medical examination is indicated, the EBRPCO office will be contacted. An EBRP Coroner's Sexual Assault Nurse Examiner (SANE) will respond and provide a forensic medical examination for the victim. A victim of a SOCO has the right to an FME and medical treatment regardless of whether the victim chooses to report the assault to a law enforcement agency. For victims who are under the age of 18 years or who are physically or mentally incapable of making the decision to report, a report to law enforcement will be made by designated mandatory reporters.

FOR CHILDREN (under age 18 years):

If a pediatric sexual assault (SA) survivor presents to one of the hospital ERs in OPH Region 2, including the stand-alone ER, then the ER physician and advanced practice healthcare provider(s) 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 by the EBRPCO. NOTE: A pediatric SA survivor's advocate should be present for all medical screenings and FMEs.

- **OPH Region 2 Designated Medical Facility for ACUTE Pediatric FMEs:**

Designated Preferred Hospitals for FMEs and Medical Screenings	Address	Contact	Preferred Facility Type
Our Lady of the Lake Children's Hospital	8300 Constantine Blvd. Baton Rouge, LA 70809	225-765-6565	Pediatrics

NOTE: A forensic medical examination may be performed up to 120 hours post SOCO in respect to DNA collection. An FME can be an exam only, where a kit may not be utilized, which may exceed the 120 hours. Best practice is to contact the EBRPCO SANE for consultation to determine if an FME is indicated.

Step-by-Step Response Flow

The following procedures outline the coordinated response to all alleged victims of sexually oriented criminal offenses (SOCO) within **Region 2**, ensuring a consistent, victim-centered, and trauma-informed process.

1. Initial Contact and Notification

When a victim of SOCO presents to any hospital in East Baton Rouge Parish or a hospital in another Region 2 parish, the hospital triage or emergency department staff shall:

- Ensure immediate safety and privacy of the victim.
- Provide emergency medical care to address acute or life-threatening injuries.
- Notify law enforcement if not already involved (per victim consent or mandatory reporting requirements).
- Contact the East Baton Rouge Parish Coroner's Office (EBRPCO) immediately to request a forensic medical examination.
- Notify a sexual assault advocate to respond if the patient consents.
- For victims in parishes outside East Baton Rouge Parish, local law enforcement or EMS shall:
- Arrange transport of the victim to a preferred hospital in EBR Parish for examination.

2. EBRPCO Mobile SANE Team Response

Upon notification, the EBRPCO Mobile SANE Team will:

- Respond to the hospital where the patient has presented in EBR Parish.
- Bring all necessary forensic medical supplies, including a Sexual Assault Evidence Collection Kit (SAK).
- Coordinate with hospital staff to identify an appropriate, private location within the facility to conduct the exam.
- Collaborate with hospital staff to offer information, treatment, and referrals for sexually transmitted infections (STIs) and other non-acute medical concerns, assess pregnancy risk, and discuss treatment options with the patient, including reproductive health services.
- Collaborate with law enforcement and advocacy personnel as appropriate to ensure victim comfort and procedural accuracy.

3. Victim Consent and Examination

Prior to any examination, the SANE nurse will:

- Explain the purpose and process of the forensic exam, including options for evidence collection, photography, and medical treatment.
- Obtain informed consent from the victim for each component of the exam.
- Provide the victim with information about available advocacy, legal, and medical resources.
- Ensure the victim understands their right to decline any portion of the exam without affecting access to medical care or evidence collection.

- The SANE nurse will then:
 - Conduct the forensic medical examination using the approved Louisiana Sexual Assault Evidence Collection Kit.
 - Document findings in accordance with EBRPCO and state guidelines.
 - Collect, seal, and label all evidence, maintaining strict chain of custody.

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 2**, sexual assault survivors should be transported to the nearest designated preferred 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 < 12: **In OPH Region 2**, all pediatric survivors of sexual assault should be transported by EMS to the nearest designated preferred 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 the preferred medical facility designated for ACUTE pediatric FMEs. EMS transportation arrangements are the responsibility of 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 to designated medical facilities. Also, if the patient needs to be transported to a different medical 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 2**, if law enforcement must provide transportation of a medically stable SA survivor *to or from a 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 discharged from the hospital (ER), transportation may be provided by a family member, friend, SA advocate who was called to the hospital, and, in some cases, by the local police/sheriff's department.

2. THE FORENSIC MEDICAL EXAM AND EVIDENCE COLLECTION

(Per R.S 40:1216.1 & ACT No. 669)

A. For the purposes of this section, the following definitions 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. 22 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 health care 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 APPENDIX B 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.

- "Healthcare services" 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. Healthcare Services for Survivors of Sexually Oriented Criminal Offenses

In OPH Region 2, 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 2. All sexual assault survivors shall be examined and treated, without undue delay, in a private space required to ensure the health, safety, and welfare of the survivor by a qualified healthcare provider. In Region 2, the survivor should not be left alone.
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, upon request, 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 from an accredited sexual assault center 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 2, all sexual assault advocates should be trained and should pass a background check through their respective agencies.

SEE APPENDIX B 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 the chain of custody.
 - (iii) Medical specimen collection.
 - (iv) When determined necessary by the healthcare provider, an alcohol or drug- facilitated 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.
 - i) Recommend following LDH protocols for PEP/DoxyPEP
 - ii) If the survivor is concerned about the cost of a prescription not filled at the facility, they should be directed to community-based organization working in the arena of HIV prophylaxis and treatment and/or sexually transmitted infections (STIs) prevention and treatment, and/or discount prescription programs.
 - iii) LDH Emergency Contraception Pamphlet
<https://ldh.la.gov/assets/docs/OPH/Emergency-Contraception-Information-6.9.25.pdf>

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 under the age of 18 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 & 603 Louisiana Children’s Code)*
- *If a survivor is physically or mentally incapable of making the decision to report, the hospital or healthcare provider shall **immediately notify** the appropriate law enforcement officials.*

7. **Notification of Law Enforcement:**

- If the survivor **wishes to report** the incident to law enforcement, the hospital or healthcare provider shall contact the appropriate law enforcement agency having jurisdiction over the location where the crime occurred. 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. In OPH Region 2, the EBRPCO maintains custody of all unreported cases. The hospital or healthcare provider shall contact the appropriate law enforcement agency and shall coordinate the transfer of evidence with the law enforcement agency in a manner designed to protect its evidentiary integrity. (See pg.19-Evidence Chain of Custody and law enforcement jurisdictions)
- If the survivor **does not 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 pg.19-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 and the name of the official who received the notification.

- 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 first 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 in 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.
- 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 pg. 19
- 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. In OPH Region 2, the EBRPCO maintains custody of all unreported cases. See Chain of Custody of Evidence on pg. 19
 - 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.

Post-Exam Process

Before submitting the sexual assault collection kit to law enforcement, kit information must be entered into the statewide sexual assault kit tracking system. This ensures accurate documentation and enables real-time tracking throughout the criminal justice process.

Storage of Sexual Assault Collection Kits

Sexual assault collection kits should be stored in a secure location within at the EBRPCO to maintain proper chain of custody. Kits can be obtained by contacting the Louisiana State Police Crime Lab SAK Tracking Program at saktracking@la.gov or 225-925-7855.

Submission of Sexual Assault Kits to a Forensic Laboratory

NOTE: The statewide sexual assault collection kit tracking system shall

1. 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 within at the EBRPCO to maintain 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 pg. 19

- 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 complete information and signatures.

- The survivor shall be provided with information about ***emergency contraception***, 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 pg. 21)

- 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. (See chart below for services offered)

Name	Region 2 Service Area(s)	Services
<p>STAR (Sexual Trauma Awareness and Response)</p> <p>24/7 Crisis Hotline: 1-855-435-STAR (7827) Phone: (504) 407-0711</p>	<p><i>Southeast and Central Louisiana</i></p>	<ul style="list-style-type: none"> • Case management services • Criminal justice accompaniment • Individual and group counseling • Legal representation
<p>Baton Rouge Children’s Advocacy Center</p> <p>(225) 343-1984</p>	<p><i>East Baton Rouge, West Baton Rouge, Pointe Coupee, Iberville</i></p>	<ul style="list-style-type: none"> • Counseling Services • Referral temporary emergency sheltering • Human Trafficking and Stalking Advocacy
<p>Child Advocacy Services</p> <p>(800)798-1575</p>	<p><i>Ascension, East Feliciana, West Feliciana</i></p>	<ul style="list-style-type: none"> • Forensic Interviews and Medical Evaluations • Mental Health Services and Victim Advocacy
<p>LaFASA (Louisiana Foundation Against Sexual Assaults)</p> <p>24/7 Crisis Hotline (English and Spanish): (888) 995-7273</p> <p>To text an advocate: (225) 351-SAFE (7233) Mon-Thurs 12n-8pm & Fri-Sun 4pm-12am, with exception of holidays</p> <p>To chat online with an advocate: https://lafasa.org//7main/home Mon-Thurs 12n-8pm & Fri-Sun 4pm-12am, with exception of holidays</p>	<p><i>Statewide</i></p>	<ul style="list-style-type: none"> • Chat and text helplines to converse with a trained crisis support specialist • Survivor Advocacy Support • University/Campus Advocacy Support-assistance navigating university sexual violence response systems • Digital Survivor Resource Center, including written materials (call 225-372-8995 for more information) • Accreditation of Local Sexual Assault Centers • Civil legal services <p><i>All assistance is strictly confidential, anonymous, and free.</i></p>

SEXUAL ASSAULT COLLECTION KITS

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

Sexual assault collection kits includes all evidence collected during a forensic medical examination. ***In OPH Region 2***, 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 2, the EBRPCO and all designated preferred medical facilities for FMEs will be responsible for acquisition of the SA collection kits and the storage of the kits prior to use. Kits are purchased by LA State Police from TriTech Forensics. In OPH Region 2, the EBRPCO orders kits (free of charge) from the State Police. Hospitals do not order and store unused kits. (Vendor selection, SA collection kit selection/ordering, and inventory management of the unused kits are the responsibility of each designated hospital.)

- ****NOTE:** Must procure SA collection kits from a state recommended/approved vendor AND Must use kit tracking numbers from the Louisiana State Police

CHAIN OF CUSTODY OF EVIDENCE

► Submission of Sexual Assault Collection Kits to Law Enforcement In OPH Region 2:

Hospitals and healthcare providers will coordinate the transfer of evidence with the law enforcement agency in a manner designed to protect its evidentiary integrity.

- In OPH Region 2, kits are retrieved by LE from the EBRPCO. Hospitals should never have chain of custody of collected kits. Information is entered into the statewide SA collection kit tracking system. (NOTE: ACT 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, if the hospital or medical facility has a secure location to store the SA collection kit that ensures proper chain of custody.)

- The healthcare provider who performed the FME must place the evidence in a secure location with limited access that ensures proper chain of custody. When law enforcement arrives, the healthcare provider should sign for and retrieve the evidence and provide to law enforcement.
- No SA collection kit shall remain at a hospital or medical facility if the hospital or medical facility is unable to store the kit in a secure location that ensures proper chain of custody, per Act No. 669.
- 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 the law enforcement agency having jurisdiction in the location where the crime occurred. If the location where the crime occurred is unable to be determined, custody of the evidence shall be transferred to the law enforcement agency having jurisdiction over the location where the FME is performed.

► **Maintenance of Retrieved Sexual Assault Collection Kits**

- 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.

- 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 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 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 Victim 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 Victim 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. The Department (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 APPENDIX C) 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 survivor of a sexually oriented criminal offense, the healthcare provider that 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 survivor. 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. Caregivers of child survivors must request records from the Our Lady of the Lake Children's Hospital or from the East Baton Rouge Parish Coroner's Office depending on where the FME was completed.
3. 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 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 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 Select Committee on Women and Children for legislative oversight.

Per ACT No. 669 (2024 Regular Session):

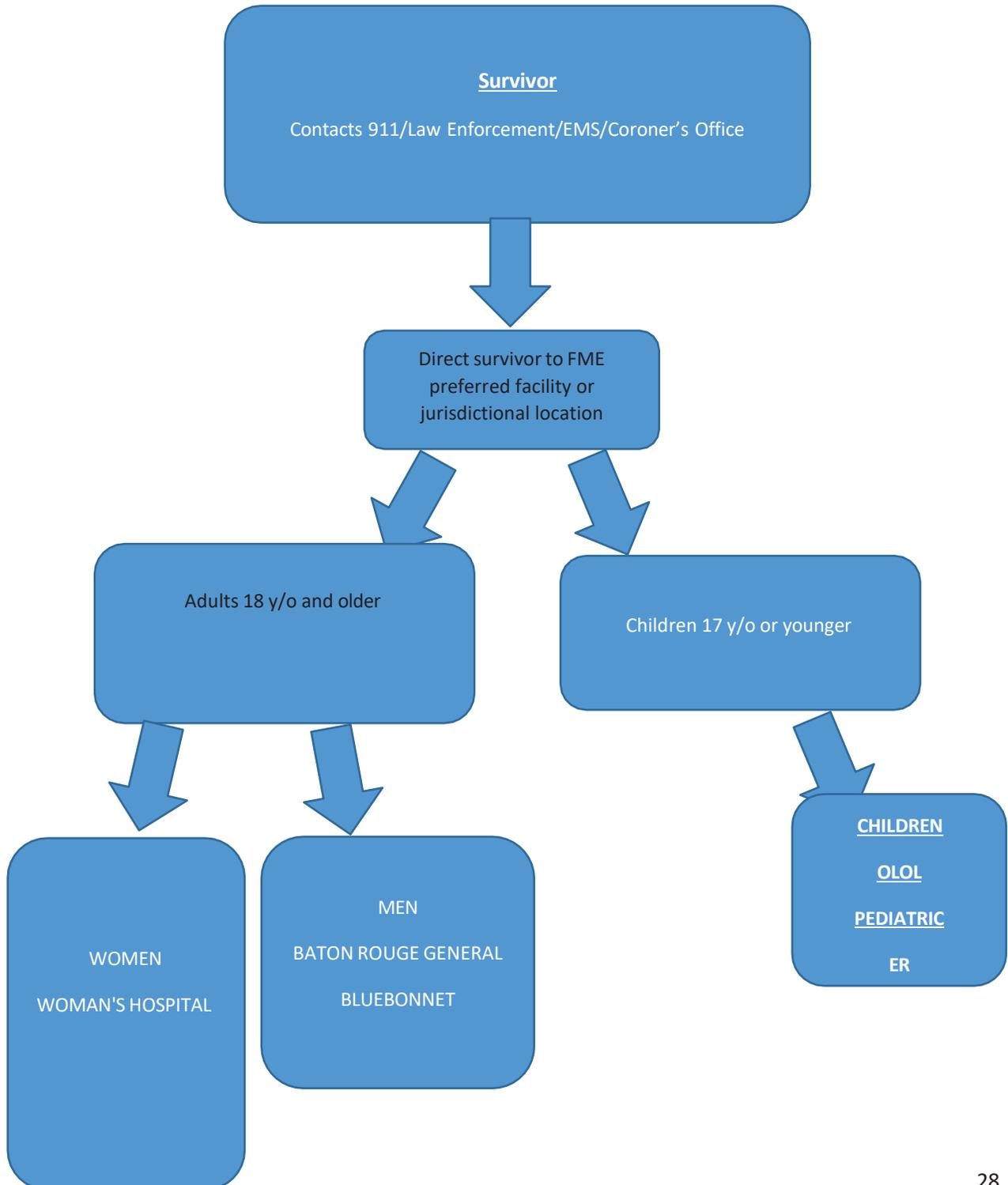
- For hospitals, failure to comply with the standards in R.S. 40:1216.1 shall constitute grounds for denial, suspension, or revocation of license.
- Also, failure to comply may constitute grounds for denial, suspension, or revocation of the healthcare provider's license by the appropriate licensing board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

Per ACT No. 354 (2024 Regular Session):

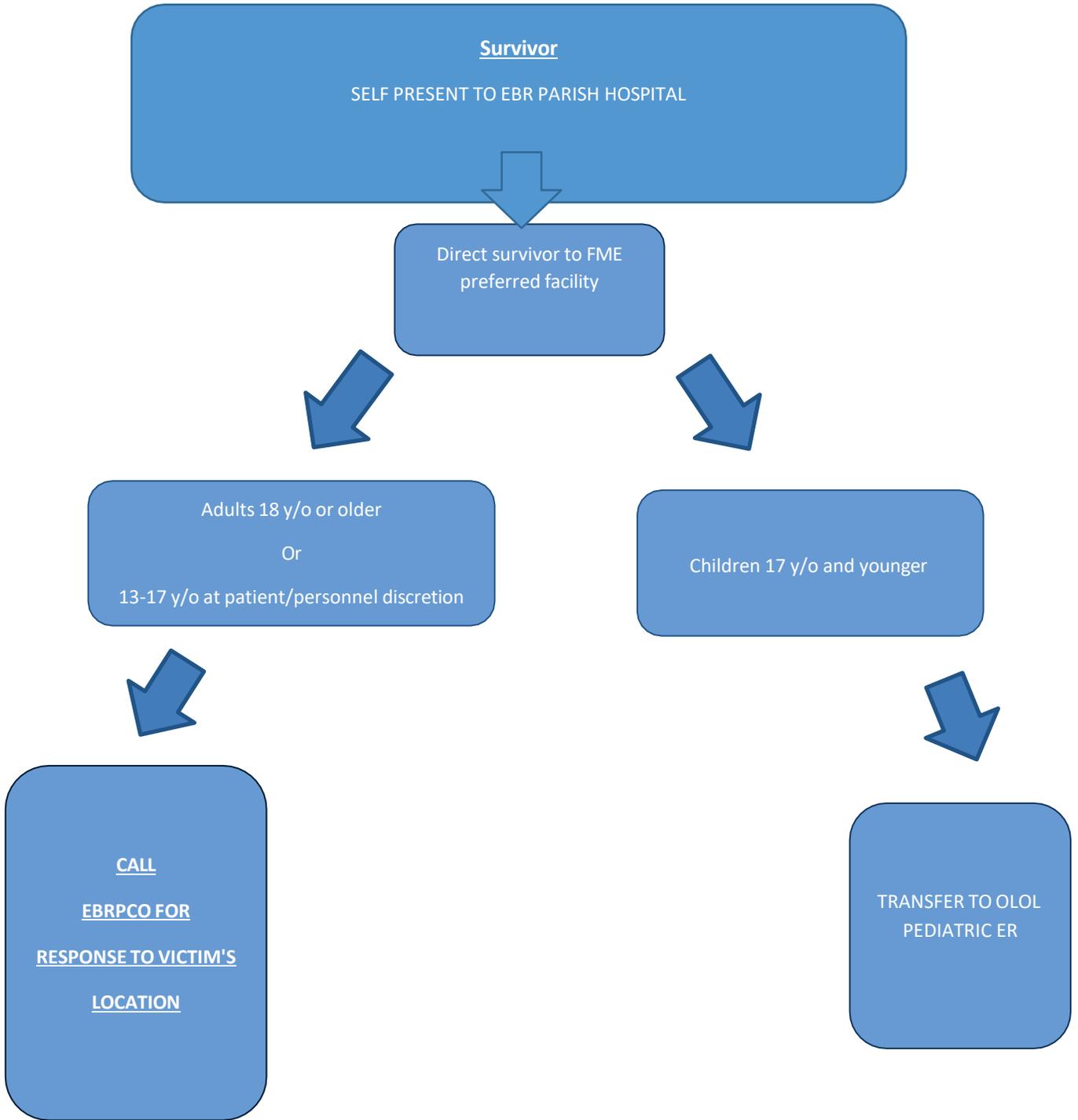
- The coroner shall implement, fulfill, and comply with all obligations, duties, and requirements imposed upon him by R.S. 40:1216.1 and by the regional sexual assault response

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

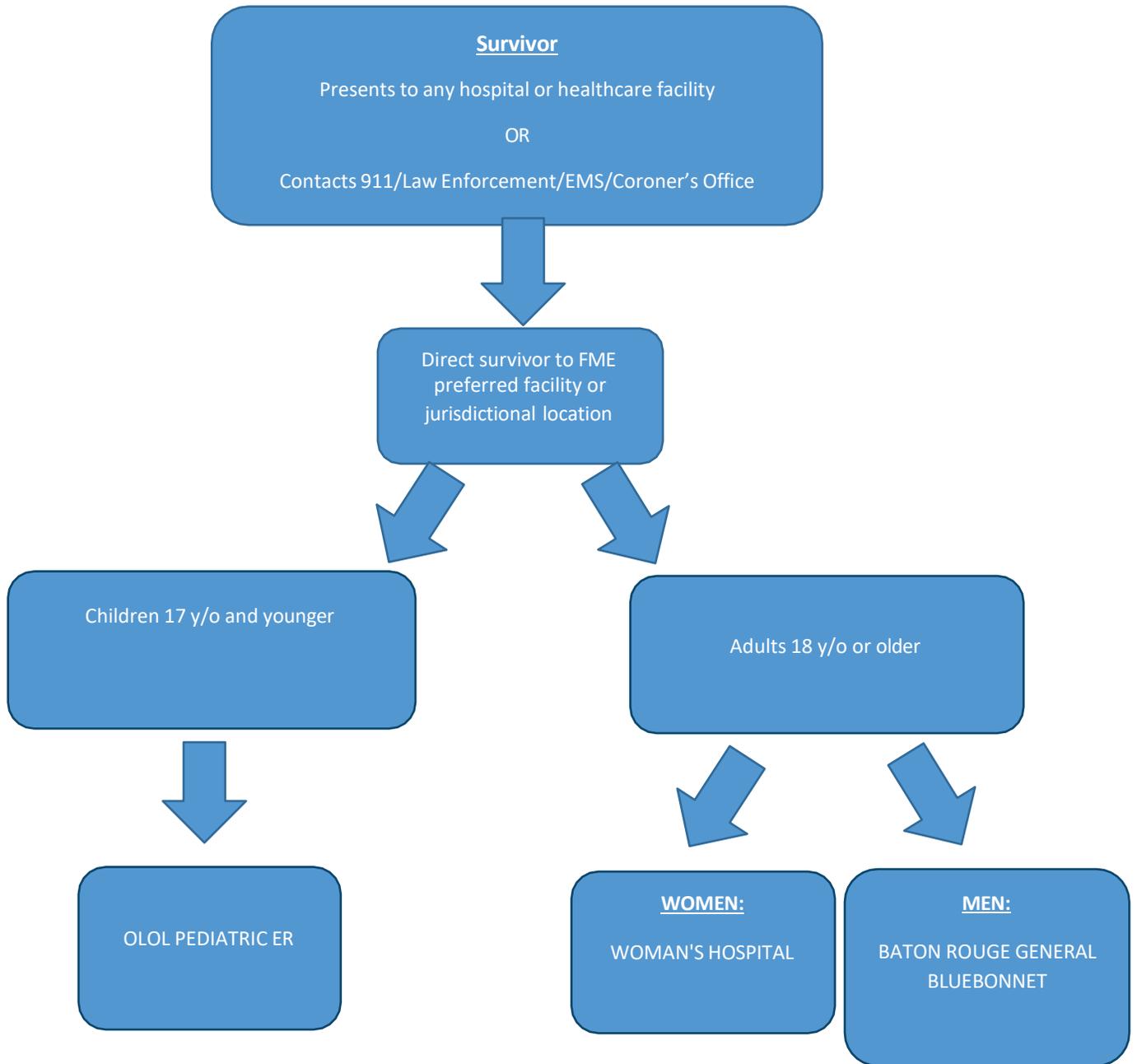
APPENDIX A: REGION 1 SEXUAL ASSAULT RESPONSE PROTOCOL
REGION 2 (DISPATCH/LAW ENFORCEMENT)



REGION 2 (PRESENT TO EBR HOSPITAL)



REGION 2 (OUTSIDE EBR RESPONDING AGENCY)



APPENDIX B: FME TRAINING GUIDANCE FOR DESIGNATED HEALTH PROVIDERS

Trainings should include, but is not limited to, sections of the annual OPH Region 2 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 all staff 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.
 - ▶ **Sexual Assault Nurse Examiners (SANE)**: 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. 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.

- ▶ **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.

- **Sexual Assault (Survivors') Advocates** should receive a minimum of 40 hours of sexual assault advocacy training provided by an accredited sexual assault or accredited rape-crisis center. 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.
 - "Sexual assault center" means a program established and accredited in accordance with the standards set by the Louisiana Foundation Against Sexual Assault.

APPENDIX C: LDH PAMPHLET/ “SURVIVOR’S Bill of Rights”

[https://ldh.la.gov/assets/Medicaid/hss/docs/HSS_Hospital/Sexual Assault Survivors Bill of Rights FINAL 04 16 25.pdf](https://ldh.la.gov/assets/Medicaid/hss/docs/HSS_Hospital/Sexual_Assault_Survivors_Bill_of_Rights_FINAL_04_16_25.pdf)



The State of Louisiana's Responsibility to All Survivors:

- Support survivors in their decision to report or not report the incident to law enforcement.
- Not require survivors to report the incident to receive medical attention or collect evidence.
- Notify law enforcement if the survivor is under 18 or is physically or mentally incapable of making the decision to report.
- Ensure survivors are examined and treated without undue delay.
- Provide a private space to ensure the health, safety, and welfare of survivors.
- Adapt the Forensic Medical Examination (FME) to meet the unique needs and circumstances of each patient.
- Provide survivors an advocate.
 - Advocate's communications are privileged.
 - The advocate shall remain in the room during the FME with consent from the patient.

What is Included in a Forensic Medical Examination (FME)?

With the consent of the survivor:

- An examination of physical trauma.
- A patient interview, including medical history, triage, and consultation.
- Collection and evaluation of evidence, including but not limited to:
 - Photographic documentation.
 - Preservation and maintenance of chain of custody.
 - Medical specimen collection.
- If necessary, an alcohol or drug-facilitated sexual assault assessment and toxicology screening, as determined by the healthcare provider (HCP).
- Any testing related to the sexual assault or recommended by the HCP.
- Any medication provided during the FME, which may include emergency contraception (EC), HIV, or STI prophylaxis.

What Happens to my FME Kit Afterwards?

If you choose to report:

- When the FME is complete, the hospital or healthcare provider (HCP) will contact the appropriate law enforcement agency (LAE) with jurisdiction over the crime location.
- If the location cannot be determined, the hospital or HCP will contact the LAE where the FME is performed.
- Law enforcement has 72 hours to take possession of the sexual assault kit upon completion notification. Until pickup, it will be stored in a secure location.
- *No sexual assault kit will remain at a hospital or medical facility if it cannot be stored securely to ensure proper chain of custody.*

SEXUAL ASSAULT SURVIVORS' BILL OF RIGHTS

What Happens to my FME Kit Afterwards (Cont.)?

If you do not choose to report:

- The hospital or HCP will contact the LAE with jurisdiction over the FME location to transfer possession of the unreported sexual assault kit for storage.
- The kit will not be labeled with a survivor's identifying information. The hospital or HCP will maintain a record of the kit number for future identification, should the survivor later choose to report.
- The HCP will provide all necessary information to the statewide tracking system operated by the Louisiana State Police.
- *The LAE or Coroner's office shall not destroy or dispose of an unreported sexual assault kit for at least twenty years after the FME.*

You Will NOT be Billed for FME-Related Services.

- No hospital or HCP can bill a survivor of a sexually oriented criminal offense for any healthcare services rendered in conducting an FME.
- Crime Victim Reparations Board (CVRB):
 - If you receive a bill for non-covered medical services other than the forensic medical exam, you may be able to have the bills paid by the Crime Victims Reparations Board. For more information about covered costs or how to apply, visit www.lcle.state.la.us/programs/cvr.asp or call (888) 6-VICTIM (888-684-2846).
- Every hospital and HCP in Louisiana will have access to a pamphlet explaining the billing process for services rendered.
 - A copy of this pamphlet will be provided to any person presented for treatment of a sexually oriented criminal offense.

Emergency Contraception (EC)

- Survivors will be provided with information about emergency contraception through the Louisiana Department of Health's website or by paper form upon request.
- The treating HCP will inform survivors of the option to receive emergency contraception at the hospital or healthcare facility (HCF) and, upon a negative pregnancy test result, will provide emergency contraception if requested.
 - Note: Emergency contraception refers only to drugs approved by the United States Food and Drug Administration (FDA).

Scan to Access your Region's Plan:



APPENDIX D: 2026 PLANNING MEETING NOTICES & LIST OF INVITEES

Meeting Notice

Regan Hinchcliff

From: Regan Hinchcliff
Sent: Monday, September 15, 2025 11:55 AM
To: Amanda Spencer ; Amy Morganti; Andrew Bolton; B. Joffrion ; Billy Conerly ; Bridget Depew (DPS); Brittany Casey ; Carie Whittington; Chaz Cooper; Chief Carl Dunn ; Chris Landry; D. Snell; Daniel G. Ervin ; Darryl Lawrence ; Don Dartez ; eocmedical@brla.gov; Erica Sparacino; Jazzika Matthews ; John Laws III ; Joshua Weaver ; Julie Root ; Keith Kibby ; Kimberly Butler; Kristie Cowart ; Krystal Kaufman; Lena Hooper ; Leslie Bradford ; Lt. Garig ; Mary Beth Magee ; Morgan Lamandre ; Ornisha Brown ; Patti Bordelon; Regan Hinchcliff; Roger Corcoran ; Shantel Hebert-Magee; Sonya Cardia-Porter ; Sonya Willis ; Stevie Hess ; Susan Green ; Tammy Baldwin; Tanya Haase ; Terra Eubanks; Traci Achord; Tracy Rankin (Director of ED Svc); Vence Beches; Victor Carney (LDH); Will Smith; William "Beau" Clark, MD
Subject: Sexual Assault Response Plan Review
Attachments: Region 2 2025 SARP_ Final.pdf

Dear Region 2 SARP Stakeholder,

In accordance with Louisiana state legislation requiring annual review and updates to each region's Sexual Assault Response Plan (SARP), we invite you to participate in the LDH Region 2 Annual SARP Planning Meeting on **Tuesday, September 30, 2025**, from **9:00 AM to 12:00 PM** at the EBR EOC in Baton Rouge.

This meeting is a critical opportunity for our multidisciplinary partners to:

- Review current SARP protocols and identify areas for improvement
- Collaborate across agencies to ensure a coordinated, survivor-centered response
- Update the regional plan to reflect legislative requirements and best practices
- Strengthen partnerships that support survivors and improve system accountability

Your expertise and engagement are essential to ensuring our regional response remains effective, trauma-informed, and compliant with state mandates. Attached you will find a copy of the 2025 Sexual Assault Response Plan for your review prior to the meeting.

Meeting Details: ♦ *Location:* EBR EOC Office – 3773 Harding Blvd., Baton Rouge, LA 70807

O Time:

9:00 AM – 12:00 PM *Light refreshments will be provided*

Please RSVP by **Friday, September 20, 2025** to Ms. Regan Hinchcliff.

If you have any questions or feel there are additional individuals we may have inadvertently left off, please don't hesitate to reach out. We look forward to your valuable input and continued collaboration in this vital work.

Respectfully,

Shantel Hébert-Magee, MD, MPH

Region II Medical Director, OPH

Email: Shantel.Hebert-Magee@la.gov

Office: 6'28 N. 4th Street Baton Rouge, LA 7080'2

Regan Hinchcliff BSN, RN

Public Health Emergency Response Coordinator

Region 2

Mobile: 225-397-0141

Email: regan.hinchcliff@la.gov

353 N.12th Street Baton Rouge, LA 70802

List of Invitees

Full Name	To
Amy Morganti	amy.morganti@fmlhs.org
Andrew Bolton	and137@brgeneral.org
B. Joffrion	bjoffrion@pcpso.org
Billy Conerly	Bconerly@lanermc.org
Bridget Depew	Bridget.Depew@la.gov
Brittany Casey	Bcasey@lanermc.org
Carie Whittington	Carie.Whittington@la.gov
Chaz Cooper	cha343@brgeneral.org
Chief Carl Dunn	chiefcarldunn@bakerpd.org
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D. Snell	dsnell@acadian.com
Daniel G. Ervin	dgervin@brla.gov

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Tanya Haase	tanya@batonrougecac.org
Terra Eubanks	ter664@brgeneral.org
Traci Achord	tachord@pcgh.org
Tracy Rankin (Director of ED Svc)	tra377@brgeneral.org
Vence Beches	Vence.Beches@la.gov
Victor Carney (LDH)	Victor.Carney@la.gov
Will Smith	wsmith@risech.com
William "Beau" Clark, MD	Wclarkmd@ebrcoroner.com
Honorable Dr. Christopher T. Trevino	225-644-4743
Honorable Dr. E. Gene Thompson	225-719-9125
Honorable Dr. James Grace	225-687-8555
Honorable Dr. Donald Doucette	225-638-5736

Honorable Dr. Phillip Padgett	225-336-2429
Honorable Dr. Chaillie P. Daniel	225-635-5848

APPENDIX E: 2026 PLANNING MEETING LIST OF ATTENDEES

Region 2 2025 SARP Meeting Attendee List		
Meeting Date: 9/16/2025 Meeting Location: Virtual: Microsoft Teams		
Attendee Name	Organization	Contact Information
Shantel Hebert-Magee	LA Office of Public Health Region 2	Shantel.Hebert-Magee@la.gov
Krystal Kaufman	LA Office of Public Health Region 2	Krystal.Kaufman3@la.gov
Regan Hinchcliff	LA Office of Public Health Region 2	Regan.hinchcliff@la.gov
Victor Carney	LA Office of Public Health Region 2	Victor.carney@la.gov
Tanya Haase	BRCAC	Tanya@batonrougecac.org
Maria Elena Allgood	BRCAC	mariaelena@batonrougecac.org
Kaliko Harris	BRCAC	Kaliko@batonrougecac.org
Don Dartez	East Baton Rouge Sherriff’s Office	ddartez@ebrso.org
Kimberly Butler	LA Office of Public Health Region 2	Kimberly.Butler@la.gov
Morgan Lamandre	Sexual Trauma Awareness & Response (STAR)	morgan.lamandre@star.ngo
Traci Achord	Pointe Coupee General Hospital	tachord@pcgh.org
Alyson Hughes	ESF-8	eocmedical@brla.gov
Darryl Lawrence	Zachary Police Department	dlawrence@zacharypd.org
Amanda Spencer	Woman’s Hospital	Amanda.spencer@womans.org
Mary Beth Magee	Woman’s Hospital	Mary.magee@womans.org
Carie Whittington	LSP Crime Lab	carie.whittington@la.gov
Heather Furnas	LSP Crime Lab	Heather.furnas@la.gov
Bridget Depew	LSP Crime Lab	Bridget.depew@la.gov
Erica Sparacino	LSP Crime Lab	Erica.sparacino@la.gov
Steve Seabolt	Our Lady of the Lake Regional Medical Center	Sseabolt@gmail.com
Chris Landry	EMS	cmlandry@brla.gov
Leslie Bradford	Iberville Parish Sheriff’s Office	ibradford@ipso.la.gov

Sonya Cardia-Porter	EBRDA	sonya.cardiaporter@ebrda.org
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APPENDIX F: REGION 2 CORONERS' SIGNATURES OF APPROVAL of 2026 SAR PLAN

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)

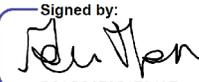
East Baton Rouge Parish Coroner

William "Beau" Clark, MD		10/29/2025
_____	1612812DD66E42A...	_____
Print Name	Signature	Date

Ascension Parish Coroner

Chris Trevino- Ascension EM Director		10/31/2025
_____	3CR87F6R22F7436	_____
Print Name	Signature	Date

East Feliciana Parish Coroner

Dr. Ernest Gene Thompson (EF)		11/1/2025
_____	D3A5C67954F943E...	_____
Print Name	Signature	Date

Iberville Parish Coroner

James E. Grace, M.D.		11/5/2025
_____	0FE79D355BBB431...	_____
Print Name	Signature	Date

Point Coupee Parish Coroner

Print Name

Signature

Date

West Baton Rouge Parish Coroner

WBRCoroner -Ph: Lr. b PnA .dtJ M P

Print Name

.1

3

Signature

 *ft* 

Date

West Feliciana Parish Coroner

Chaillie Daniel

Print Name


91E1338110"4e46L
Signature

11/5/2025

Date

APPENDIX G: UPDATES TO REGION 2 2026 SAR PLAN

The 2026 Region 2 Regional SARP includes specific updates/changes made to sections of the 2025 Region 2 SARP, and they are outlined in the chart and list below.

Statutory Mandates	Updates
<p>Act 276 made a change under E.(2)</p> <p><i>Added the following:</i> Section E.(2) now reads (2) When developing the annual response plan, each district shall incorporate a sexual assault response team protocol <u>and the uniform protocol for human trafficking established by the Human Trafficking in Emergency Departments Task Force.</u></p>	<p><i>Added the following as</i> letter f) on page 3</p> <p>f) Ensure that when the uniform protocol for human trafficking, established by the Human Trafficking in Emergency Departments Task Force, is available, that it will be incorporated in the protocols in Region 2. (Act 276)</p>
<p>Act 289 added to R.S. 36:702(9)</p> <p><u>9. Provide for the statewide coordination of sexual assault examiners, with a specific focus on ensuring access to services provided by sexual assault nurse examiners in rural areas. The statewide coordination provided for in this Paragraph may be funded through grants or appropriations by the legislature.</u></p>	<p><i>Added the following as</i> letter g) on page 3</p> <p>g) Cooperate with the State Attorney General in efforts towards statewide coordination of sexual assault examiners, with a specific focus on ensuring access to services provided by sexual assault nurse examiners in rural areas. (Act 289)</p>