The Implementation of a Forensic Program in Southern West Virginia

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PURPOSE

This scholarly project aims to implement a Forensic Nurse Hospitalist (FNH) program in southern West Virginia (WV), a rural and underserved area in the United States. Forensic program development in rural areas promotes communication and cooperation among community partners, thus reducing care gaps and improving post-assault outcomes (Treat et al., 2022).

Participant: Patients in southern WV in need a forensic medical exam.
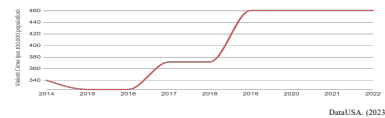**Intervention:** Implementing an FNH program in southern WV.
Comparison: Urban areas with active forensic programs
Outcome: Retention of trained forensic nurses and increased forensic exams in rural areas.

BACKGROUND

Many rural areas must transport forensic patients to hospitals with a trained forensic nurse. Often, these facilities are many hours away. The transferring of patients exacerbates patient discomfort and undermines a community-based response (Mitchell et al., 2022).

The number of trained nurses needed for forensic patients is frequently insufficient (Bouchard et al., 2021). Poor forensic nurse retention is attributed to extensive training, scheduling difficulties, random presentation of forensic cases, and moral distress (Green et al., 2021).

DataUSA. (2023)

Southern WV was chosen as the proposed project site, notably below the federal poverty line with increasing violent crime rates.

METHODS

Setting: Community-based emergency department (ED) in southern WV.
Purpose: Implement an FNH program and decrease nurse attrition.
Population: Patients in need of a medical forensic exam.
Solution: Implementation of an FNH program to address medical and forensic needs of this population.
Inclusion Criteria: IPV patients, sexual assault patients, elder abuse patients, and human trafficking patients.
Exclusion Criteria: Non-IPV patients, non-sexual assault patients, non-elder abuse patients, and non-human trafficking patients.
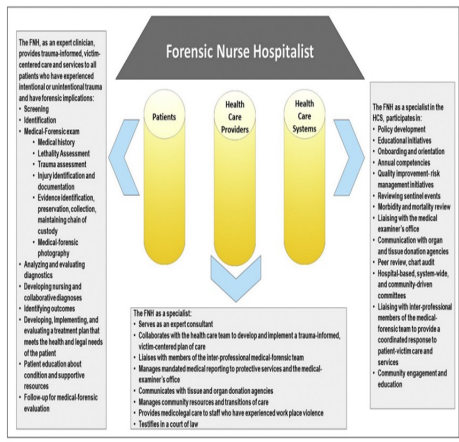
No IRB approval is needed, and no research subjects will be utilized for the proposed project.

THEORETICAL FRAMEWORK

Edmundson, E. (2011)

The Quality Caring Model (QCM) Model
by Joanne Duffy

CONCEPTUAL MODEL

Berishaj, K., Boyland, C., Reinink, K., & Lynch, V. (2020).

The FNH is the proposed model for implementing forensic services. This hospital-based program provides coverage 24 hours a day with an on-site forensic nurse.

DESIRED OUTCOMES

The desired outcomes for the implementation of this project include:

- Retention of trained forensic nurses within the program
- Increased reporting
- Health benefits
- Higher prosecution rates
- Tracking mechanism to assess program and participant outcomes

Dill, K. (2023).

CONCLUSIONS

Providing focused training and support groups has decreased burnout, improved team cohesiveness, and promoted healthy work-life balance, thus decreasing turnover rates for forensic nurses (Morris et al., 2022).

Collaboration between forensic nurses, the district attorney's office, law enforcement, advocacy, and the crime lab has been shown to increase reporting rates, arrests, charges, and more patients seeking mental health care post-forensic exams (Henniger et al., 2019). Building strong community bonds is crucial in rural areas confronting poverty, isolation, and lack of assistance (Treat et al., 2022).

Pyle, K. (2022).

RELEVANCE TO NURSING

Patients who receive medical forensic exams in an emergency setting are less likely to be diagnosed with sexually transmitted infections (STIs) or pregnancy in the subsequent weeks due to timely medical care (Green et al., 2021). Patients also report a decrease in adverse health outcomes after the assault with the connection to advocacy and a victim-centered approach to their treatment (Green et al., 2021).

Focusing on ways to mitigate nursing burnout and compassion fatigue may be generalizable to other nursing settings with high turnover, such as high acuity units or new graduate programs.

Gaines, K. (2023)

References

Berishaj, K., Boyland, C., Reinink, K., & Lynch, V. (2020). *The forensic nurse conceptual model* [Photograph]. Journal of Emergency Nursing. https://www.jenonline.org/article/S0099-1767(20)30083-0/fulltext

Bouchard, L., Williams, D., Kiser, L., Freese, E., & Taren, D. (2021). Promoting professional quality of life and resiliency in sexual assault nurse examiners. *Journal of Forensic Nursing*, *18*(1), 13– 20. https://doi.org/10.1097/jfn.0000000000000350

DataUSA. (2023). *Violent crime rates* [Photograph]. Deloitte-Datawheel. https://datausa.io/profile/geo/mercer-county-wv

Dill, K. (2023). *Forensic Science Standards* [Photograph]. National Institute of Standards and Technology. https://www.nist.gov/image/osacillustrationsacwiconsedited

Edmundson, E. (2011). *Joann Duffy: The quality care map* [Photograph]. Journal of Pediatric of Nursing. https://www.pediatricnursing.org/article/S0882-5963%2811%2900596-3/pdf

Gaines, K. (2023). *Forensic nurse bridging the gap* [Photograph]. Nurse INC. https://nurse.org/resources/forensic-nurse/

References

Green, J. S., Brummer, A., Mogg, D., & Purcell, J. (2021). Sexual assault nurse examiner/forensic nurse hospital-based staffing solution: A business plan development and evaluation. *Journal of Emergency Nursing*, *47*(4), 643–653.e2. https://doi.org/10.1016/j.jen.2021.03.011

Henninger, A. L., Iwasaki, M., Carlucci, M. E., & Lating, J. M. (2019). Reporting sexual assault: Survivors' satisfaction with sexual assault response personnel. *Violence Against Women*, *26*(11), 1362–1382. https://doi.org/10.1177/1077801219857831

Lynch, V. A. (2011). Concepts and theory of forensic nursing science. In V. A. Lynch & J. B. Duval (Eds.), *Forensic nursing science* (2nd ed., pp. 10–20). Mosby.

Mitchell, S. A., Charles, L.A., & Downing, N. (2021). Increasing access to forensic nursing services in rural and underserved areas of Texas. *Journal of Forensic Nursing, 18*(1), 21-29. https://doi.org/10.1097/jfn.0000000000000351

Pyle, K. (2022). *Hospital and police collaboration* [Photograph]. Stronger Together. https://strongertogethersspringfield.weebly.com

Robinson, J. C. (2021). *IAFN sexual assault nurse examiner certification: A review for the SANE-A and SANE-P exams* (1st ed.). Springer Publishing Company.

Treat, S., Vanhook, P., Hendrix, L., Wallace, K., & McCook, J. G. (2022). Responding to the challenges and barriers unique to rural Appalachian sexual assault nurse examiner programs. *Journal of Forensic Nursing*, *18*(3), 139–145. https://doi.org/10.1097/jfn.0000000000000388