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## SUBSTITUTE SENATE BILL 6162

State of Washington 66th Legislature 2020 Regular Session

By Senate Law & Justice (originally sponsored by Senators Dhingra, Wilson, C., Kuderer, Hasegawa, McCoy, and Das)

READ FIRST TIME 01/24/20.

- 1 AN ACT Relating to victims of nonfatal strangulation; amending
- 2 RCW 7.68.170; and creating new sections.
- 3 BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF WASHINGTON:

The legislature finds that nonfatal 4 NEW SECTION. Sec. 1. 5 strangulation is among the most dangerous acts of domestic violence 6 and sexual assault. Strangulation involves external compression of 7 the victim's airway and blood vessels, causing reduced air and blood flow to the brain. Victims may show no or minimal external signs of 8 injury despite having life-threatening internal injuries including 9 10 traumatic brain injury. Injuries may present after the assault or much later and may persist for months and even years postassault. 11 12 Victims who are strangled multiple times face a greater risk of 13 traumatic brain injury. Traumatic brain injury symptoms are often not 14 recognized as assault-related and may include cognitive difficulties 15 such as decreased ability to concentrate, make decisions, and solve 16 problems. Traumatic brain injury symptoms may also include behavior 17 and personality changes such as irritability, impulsivity, and mood 18 swings.

Domestic violence victims who have been nonfatally strangled are eight times more likely to become a subsequent victim of homicide at the hands of the same abusive partner. Research shows that previous

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acts of strangulation are a unique and substantial predictor of attempted and completed homicide against an intimate partner.

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For years, forensic nurses in Washington have provided high-level care to sexual assault victims. Forensic nurses are also trained in medical evaluation of nonfatal strangulation, but only provide this evaluation in cases of sexual assault involving strangulation, as crime victims' compensation will not reimburse in nonsexual assault cases. Strangulation affects victims physically and psychologically. These victims deserve a higher standard of response and medical care. Allowing crime victims' compensation to reimburse for forensic nurse examinations for victims of domestic violence strangulation will provide a better, more victim-centered response in the most dangerous of domestic violence felony cases.

- NEW SECTION. Sec. 2. (1) The office of crime victims advocacy shall develop best practices that local communities may use on a voluntary basis to create more access to forensic nurse examiners in cases of nonfatal strangulation assault including, but not limited to, partnerships to serve multiple facilities, mobile nurse examiner teams, and multidisciplinary teams to serve victims in local communities.
- 21 (a) When developing the best practices, the office of crime 22 victims advocacy shall consult with:
  - (i) The Washington association of sheriffs and police chiefs;
  - (ii) The Washington association of prosecuting attorneys;
  - (iii) The Washington state coalition against domestic violence;
- 26 (iv) The Harborview center for sexual assault and traumatic 27 stress;
  - (v) The Washington state hospital association;
  - (vi) The Washington state association of counties;
  - (vii) The association of Washington cities;
    - (viii) The Washington coalition of sexual assault programs; and
- 32 (ix) Other organizations deemed appropriate by the office of 33 crime victims advocacy.
- 34 (b) The office of crime victims advocacy shall complete the best 35 practices no later than January 1, 2021, and publish them on its web 36 site.
- 37 (2) The office of crime victims advocacy shall develop strategies 38 to make forensic nurse examiner training available to nurses in all

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1 regions of the state without requiring the nurses to travel 2 unreasonable distances or incur unreasonable expenses.

- 3 (a) When developing the strategies, the office of crime victims 4 advocacy shall consult with:
- 5 (i) The Harborview center for sexual assault and traumatic 6 stress;
  - (ii) The department of health;

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- 8 (iii) The nursing care quality assurance commission;
- 9 (iv) The Washington state nurses association;
- 10 (v) The Washington state hospital association;
- 11 (vi) Forensic nurse practitioners; and
- 12 (vii) Other organizations deemed appropriate by the office of 13 crime victims advocacy.
- 14 (b) The office of crime victims advocacy shall report the 15 strategies to the governor and the appropriate committees of the 16 legislature no later than January 1, 2021.
- 17 **Sec. 3.** RCW 7.68.170 and 1979 ex.s. c 219 s 11 are each amended 18 to read as follows:

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

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