



D14 Do Forensic Nurses Have a Role in Child Maltreatment Investigations?

Melodie Brooks, MSN*, 3091 Widdock Street, Erie, MI 48133

The goal of this presentation is to identify the role of the forensic nurse within the multidisciplinary team (MDT) as well as describe the solutions to MDT challenges in rural communities regarding the medical component.

This presentation will impact the forensic science community by case study exploration leading the attendee to realize the significant and unique role the forensic nurse assumes within the multidisciplinary team (MDT) during a child maltreatment investigation.

Child maltreatment investigations traditionally have excluded medical professionals who are specialized and trained in this emerging field, which is contradictory to experts' recommendations.¹ Moreover, a lack of qualified medical experts has compounded this problem, leaving investigators no alternative but exclusion of the medical component during their investigations. On the other hand, many MDT's are utilizing the expertise of a forensic nurse examiner, propelling this nurse specialty into the forefront of the interdisciplinary team based on the responsibility of linking the legal arena with healthcare, and placing the nurse within the coordinator of care role.² According to the American Association of Colleges of Nursing (AACN), one of the essential roles of a registered nurse is to be a coordinator of care, specifically engaged with an inter-professional team.³ Further exploration within this role can reveal a unique set of skills, which is invaluable during child maltreatment investigations. These activities include medical records review, interpretation of chronic/acute physical findings, and education to the investigative team regarding medical issues and sexual development.² Consequently, forensic nurses who work within child maltreatment teams serve a very diversified but significant purpose.

As logical and practical as the forensic nurse role may appear, conflicts and growing pains still persist in some organizations attempting to bridge the gaps that may exist in the MDT regarding medical exams. With the current economic crisis looming in the United States and abroad, communities are faced with limited resources and personnel; however, these entities are held to the same standards and judicial outcomes by the public and the legal system's burden of proof.⁴ Moreover, many juries have an expectation of physical evidentiary findings during trials, thus leaving the investigators and prosecutors disadvantaged if the child's testimony is the sole piece of evidence. Budgetary reductions within law enforcement and prosecutor departments have compounded the problem and many communities are forced to reexamine services to victims. With challenging economic times and limited resources, new innovative ideas must emerge to meet these deficits.⁴ Through education, determination, and evidenced based practice principles, MDT's have the ability to flourish and provide quality outcomes for children and their families through inclusion of forensic nurses on the MDT.¹ As the coordinator of care, nurses provide education to patients and families; however, forensic nurses have an added educational responsibility of instructing juries on medical findings with patients entrusted to their care.^{5,6}

This presentation will describe through case studies the challenges and solutions faced by a rural community MDT providing investigative and support services to children experiencing child maltreatment. The participant will view the significant role the forensic nurse examiner assumes within the MDT and the importance of the coordinator of care role. Evidenced based practice principles will be emphasized and the participants will leave with ideas for MDT development in rural community settings when attempting to fulfill the medical role.

References:

1. Walsh, W. A., Cross, T. P., Jones, L. M., Simone, M., & Kolko, D. J. (2007). Which sexual abuse victims receive a forensic medical examination? The impact of Children's Advocacy Centers. *Child Abuse & Neglect*, 31, 1053-1068. doi:10.1016/j.chiabu.2007.04.006
2. American Association of Colleges of Nursing (2008, October 20). The essentials of baccalaureate education for professional nursing practice. Retrieved August 30, 2009 from, American Association of Colleges of Nursing Web site: <http://www.aacn.nche.edu/Education/pdf/BaccEssentials08.pdf>
3. Lynch, V., & Duvall, J. B. (2010). *Forensic nursing science* (2nd ed.). St Louis: Elsevier Saunders.



General Section - 2012

4. Giles, R. H. (2009). Difficult economic times prove value of multidisciplinary approach to resolve child abuse. Update, 22(1), Retrieved from http://www.ndaa.org/pdf/update_vol_22_no_1.pdf
5. American Nurses Association (2004). Nursing: Scope and standards of practice. Silver Spring, MD: American Nurses Association.
6. American Nurses Association (2009). Forensic nursing: Scopes and standards of practice. Silver Spring, MD: American Nurses Association.

Forensic, Nursing, Maltreatment