

# **JUSTICE FOR SURVIVORS ACT**

**STATEWIDE TELEHEALTH NETWORK FOR  
FORENSIC EXAMINATIONS OF VICTIMS OF  
SEXUAL OFFENSES PROGRAM**

**ANNUAL REPORT - PUBLISHED 2025**



MISSOURI DEPARTMENT OF  
**HEALTH &  
SENIOR SERVICES**

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**SAFEvT Network**

## **DEDICATION**

This report is dedicated to the survivors of sexual assault whose courage and resilience inspire our ongoing commitment to prevention, support and justice. We also recognize the tireless efforts of advocates, health care professionals, law enforcement and community partners who work every day to create a safer Missouri.

## **BACKGROUND**

The network was inspired by the real stories of Missourians seeking care after experiencing a sexual assault. When they shared their stories, Missouri lawmakers decided that this care should be offered statewide. During the 2020 legislative session, the Missouri General Assembly tasked the Missouri Department of Health and Senior Services (DHSS) with creating the Justice for Survivors Act Statewide Telehealth Network for Forensic Examinations of Victims of Sexual Offenses Program ([SB 569](#) and [Section 192.2520 RSMo](#)).

In Missouri, on average, five patients a day present to a hospital asking for a sexual assault exam. Until 2023, less than half of Missouri hospitals provided the specialty care those patients need. Starting in January 2026, all hospitals, not designated as specialty hospitals, will be required to offer forensic exams, either in person or with telehealth.



**“I am grateful to not have to wait hours for a nurse to arrive.”**

**-Missouri Survivor after receiving an exam with the SAFevT Network**



## **TERMINOLOGY**

The terminology used in this report to describe key aspects of the program and the persons it is designed to serve is identified and defined below.

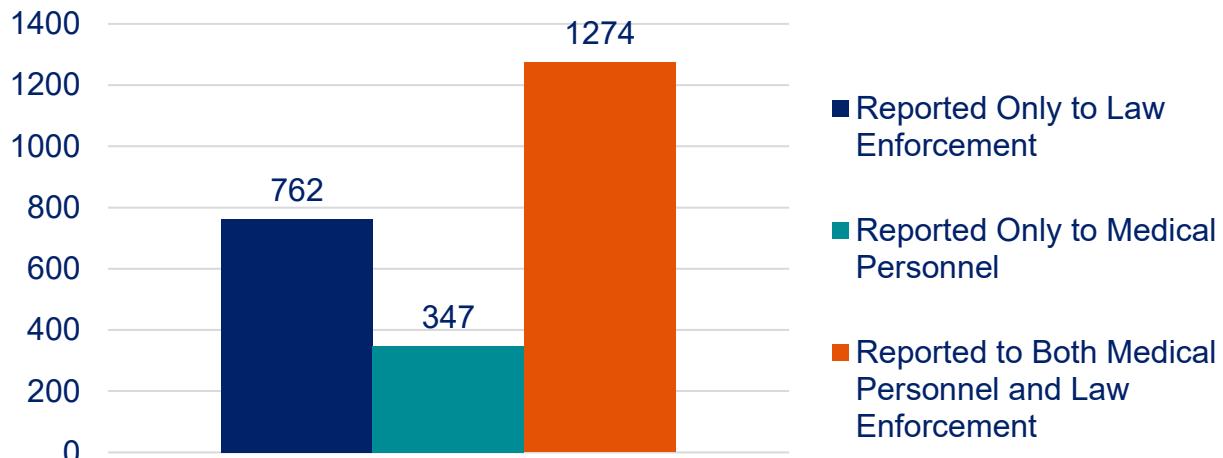
- **Acute sexual assault** is any assault that occurred in the prior 120 hours (International Association of Forensic Nurses [IAFN], 2022).
- **Forensic evidence collection** is the collection of hairs, fibers or specimens of body fluids from a victim’s body or garments that may aid in the identification of the perpetrator (CDC, 2021).

- **Hub site** is the facility where TeleSANE is employed and practices. This site is responsible for overseeing the SAFEvTs for their designated originating sites.
- **Perpetrator** is a person who inflicts sexual assault (CDC, 2021). Individuals who commit sexual violence against another person are often also referred to as “assailants.”
- **SAFETrack** is the state of Missouri’s statewide sexual assault evidence kit tracking system. The Attorney General’s Office oversees SAFETrack in accordance with Missouri statute (Section 595.220 RSMo).
- **Satellite sites** are those emergency departments where ASAS present seeking care following their assault. The satellite site is responsible for coordinating the SAFEvT.
- **Sexual assault** is “sexual activity that occurs when consent is not obtained or freely given” (CDC, 2021). This definition includes sexual coercion.
- **Sexual assault nurse examiner (SANE)** is a nurse who has received specialized training (both didactic and practical) in the examination of ASAS and the collection of forensic evidence (IAFN, 2022). SANEs are trained to provide trauma-informed, evidence-based care to this unique and vulnerable population. The IAFN may certify SANEs for the pediatric or adolescent/adult age groups or both. Any person trained in the care of an ASSA who is not a registered nurse is referred to as a sexual assault forensic examiner.
- **Sexual assault forensic exam (SAFE)** is an exam performed by a trained medical professional following a sexual assault for collecting forensic evidence (IAFN, 2022). The acronym SAFE can be used to describe a sexual assault forensic examiner; however, for clarity purposes in this report, it will exclusively be utilized in reference to the examination.
- **Sexual assault forensic exam via telehealth (SAFEvT)** refers to a SAFE performed under the guidance of a SANE (or sexual assault forensic examiner) utilizing telemedicine technology. *This acronym has changed in accordance with copywrite laws.*
- **Survivor:** Throughout this report, we use several words to describe individuals who experience sexual violence. Individuals who have been assaulted are sometimes referred to as “victims,” a term generally used in judicial and law enforcement systems. Advocacy service providers often use the word “survivor,” health care professionals are encouraged to refer to these individuals as “patients.” Some individuals do not identify with any of these terms and do not feel that these labels adequately convey their personal experiences of sexual violence. Whenever possible, allow individuals to select the most comfortable terminology.
- **TeleSANE or cSANE** is utilized to represent the SANE nurse or provider who is acting as the consulting expert during the SAFEvT.

## MISSOURI SEXUAL ASSAULT DATA

Sexual assault data exists under three categories: reported to law enforcement, reported to medical professionals or reported to both medical professionals and law enforcement. Data for prior years were not available.

### Number of Sexual Assaults by Place Reported, 2025



Data sources: [SAFETrack](#) and [Missouri State Highway Patrol](#)

## EXAM AVAILABILITY

In 2024, 45 percent of Missouri hospitals surveyed had limited or no SAFE care available. Since then, 14 Missouri hospitals added contracts to provide in-person SAFE care, and an additional nine hospitals committed to providing in-person care utilizing their own nurses. At the time of this publication, only 26 percent of hospitals have limited or no SAFE care available.



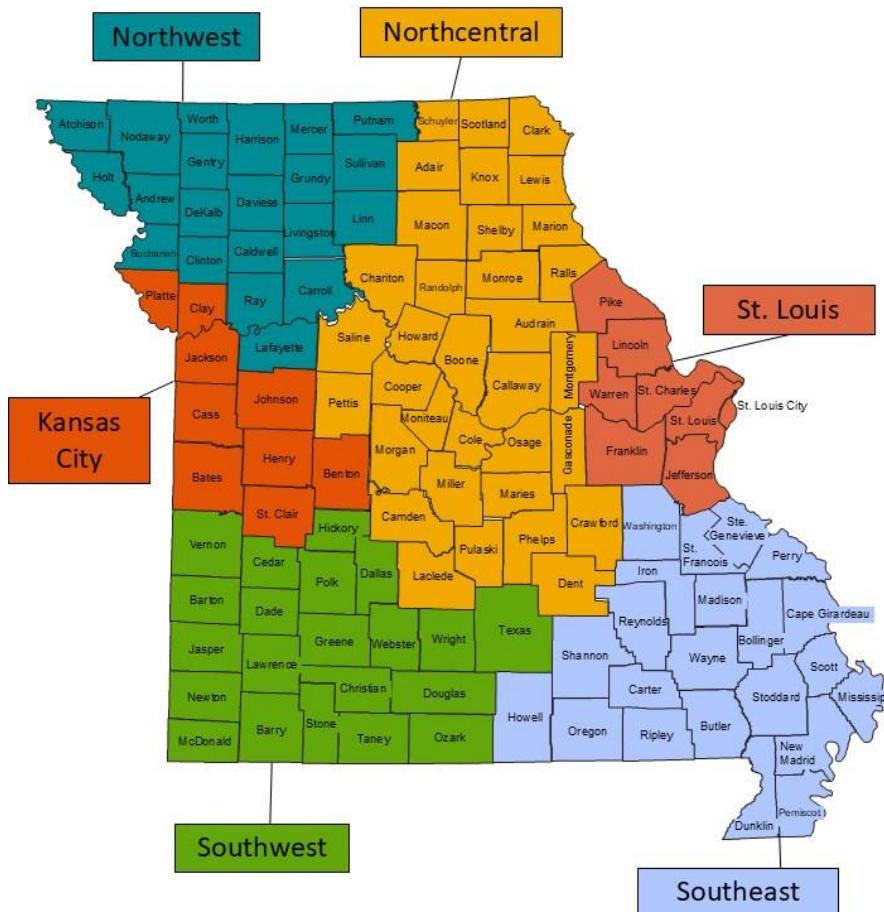
**23 new hospitals began providing in-person exams since 2024.**



## SAFEvT DATA

DHSS piloted the Justice for Survivors TeleSANE Program, referred to as SAFEvT, in 2024. By July of 2025, DHSS contracted providers had the SAFEvT Network available statewide. Since July 2025, the consulting SANEs (cSANEs) have been requested to assist with exams in six separate regions.

## SAFEvT Network Regions



cSANEs had more than 100 consultations with Missouri hospitals about SANE care. Eighty percent of these consults were for hospitals providing in-person services that had questions about how to manage care. The SAFEvT program was able to help coordinate services between EMS, rural hospitals, advocacy centers and level I trauma centers to provide necessary care.

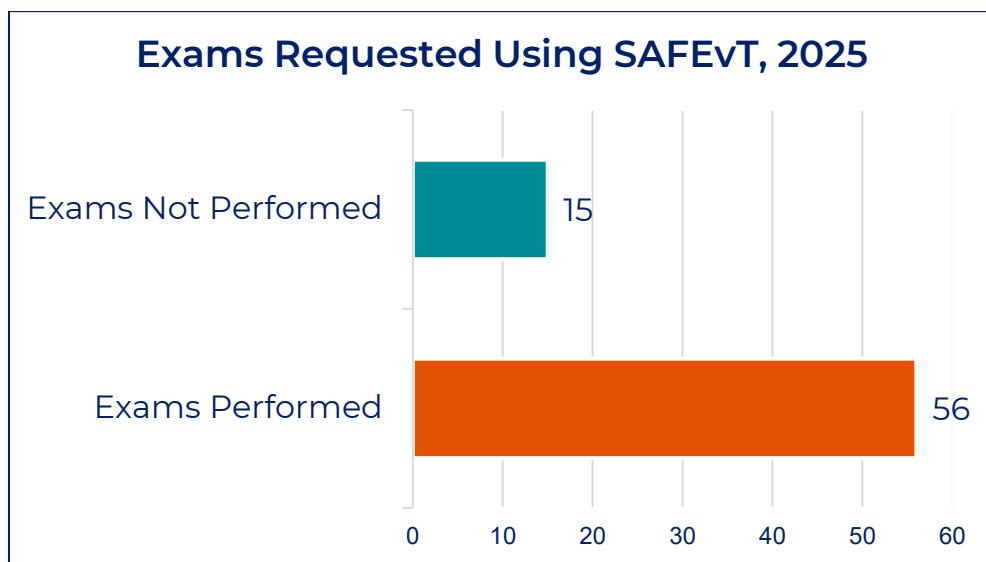
Bedside nurses and providers, with the assistance of a cSANE, supported 71 survivors in 2025. The success of the network is encouraging. By collecting evidence, local law enforcement partners can hold sexual offenders

accountable for their crimes. The Office on Women's Health is working with contracted providers, local law enforcement, and prosecuting attorneys to prepare for the trials resulting from arrests made because of evidence collected with the assistance of the SAFEvT.



**“We cannot afford to travel for the exam; we need to work tomorrow and have other children to care for. We will only agree to the exam if it can be done here by telehealth.”**

**-Parents of an adolescent victim**



Number of Exams not Completed with SAFEvT, by Reason	
8	Under the age limit for a teleSANE exam (<14).
1	Exams requested by a third party, but the survivor did not consent to an exam themselves.
5	Exams started, but did not allow evidence collection
0	Technological issues
5	More than 120 hours passed since the sexual assault took place

## EDUCATION AND SUPPORT FOR MISSOURI HEALTH CARE PROVIDERS

- Free online SANE education was launched as a part of the Sexual Assault Nurse Examiner Education and Retention Program (ANE-SANE). 46 learners have been enrolled to date.
- Fifteen SANEs completed in-person skills trainings.
- Two in-person SANE courses were offered, training over 30 attendees.
- 265 medical providers participated in the online provider training for the SAFEvT program.
- 238 nurses took the Satellite Nurse training in addition to in-person education from their hub sites.
- Monthly education and collaboration meetings called ECHOs provide ongoing support for medical personnel, law enforcement, advocates, criminologists and prosecutors in Missouri.



**DHSS has provided over 5,800 hours of health care provider education.**



## ADVOCACY

Missouri law states that sexual assault survivors in Missouri have the right to consult with an employee or volunteer of a rape crisis center, commonly referred to as advocacy services. To ensure this right for survivors, the SAFEvT program instituted a procedure to ensure survivors had timely access to these services. Hospitals are now working with those advocacy services to ensure advocates are available in the hospital at the same time as the SANE. By contacting advocacy centers earlier and ensuring both the bedside staff and the cSANE know of the rights of survivors, the SAFEvT Network is preventing further delay in care for survivors.

The Missouri Coalition Against Domestic and Sexual Violence tracks hospital responses to requests for advocacy by looking at “point-in-time numbers.” This year, there were 83 hospital responses to requests for the point-in-time data, compared to last year’s 25 responses, which is a 332 percent increase.

## CONCLUSION

Sexual assault survivors in Missouri now have more access to trauma-informed, patient-centered care at hospitals closer to where they live.

Missourians who may not have received services otherwise were able to receive care. The SAFFeVt program has increased the SANE network, allowing for collaboration and information sharing across regions, disciplines and agencies. The statewide impact of the SAFFeVt network has improved the quality and availability of services for all survivors.

If you or someone you love needs support, help is available.

- Learn more about the [SAFFeVt Network](#).
- [Find a local program](#) that can help support you in your healing.

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