Competency and Certification

It is important for examiners to understand the difference between *competent* and *certified*. Though you may be competent to conduct a forensic exam, <u>certification is a credential that is only obtained</u> by successfully passing and maintaining requirements put forth by the International Association of Forensic Nurses (IAFN) and the Commission for Forensic Nursing Certification (CFNC). A <u>certified</u> sexual assault nurse examiner for adults and adolescents may use the designation of SANE-A. Those who have not achieved certification may not.

What does competent mean?

Florida does not have specific requirements for who may conduct a forensic exam. Section 395.1021, Florida Statutes states:

Any licensed facility which provides emergency room services shall arrange for the rendering of appropriate medical attention and treatment of victims of sexual assault through:

- (1) Such gynecological, psychological, and medical services as are needed by the victim
- (2) The administration of medical examinations, tests, and analysis required by law enforcement personnel in the gathering of evidence required for investigation and prosecution
- (3) The training of medical support personnel competent to provide the medical services and treatment as described in subsections (1) and (2).

IAFN outlines <u>competency objectives</u> in their *Sexual Assault Nurse Examiner (SANE) Education Guidelines,* 2018 (Appendix I). This resource, as well as other valuable information, may be found at www.iafn.org

Who determines competency?

Upon completion of the 40 Hour Adult / Adolescent SANE Training the SANE trained nurse will identify a preceptor, the ideal preceptor is an RN who has been a SANE for more than a year, conducted numerous medical forensic exams and has gone on to become certified in adult / adolescent sexual assault medical forensic exams (SANE-A). This is the ideal preceptor because he/she is able to work with the new SANE to become competent in the total care (understanding the neurobiology of trauma, working with law enforcement and advocates, head to toe assessment, speculum exam, forensic evidence collection, etc.) of a sexual assault victim. The SANE-A preceptor is also able to attest to the competence of the new SANE by completing an attestation letter of competency.

How do I become a certified SANE (SANE-A)?

Excerpt from the IAFN 2020 Certification Exam Handbook:

SANE-A: ELIGIBILITY REQUIREMENTS

To be eligible to sit for the SANE-A certification examination, you must:

Hold an active, unrestricted license as a registered nurse (RN) in the United States or a US territory
 OR hold an active, unrestricted license as a first-level general nurse (or the equivalent) in the country of licensure/jurisdiction of practice;²

AND

2. Have practiced nursing for a minimum of two (2) years as an RN **OR** Have practiced nursing for a minimum of two (2) years as first-level general nurse (or the equivalent) in the country of licensure/jurisdiction of licensure;

AND

3. Have successfully completed an adult/adolescent sexual assault nurse examiner education program that grants a minimum of 40 hours of continuing nursing education contact hours from an accredited provider; **OR**

Have successfully completed an adult/adolescent sexual assault nurse examiner education program that comprises a minimum of 40 hours of academic coursework or the national equivalent from an accredited educational institution; **OR**

Have successfully completed a combined adult/adolescent/pediatric sexual assault nurse examiner education program that grants a minimum of 64 hours of continuing nursing education contact hours from an accredited provider; **OR**

Have successfully completed a combined adult/adolescent/pediatric sexual assault nurse examiner education program that grants a minimum of 64 hours of academic coursework or the national equivalent from an accredited educational institution.

NOTE: All education programs must be from a single educational offering and follow the content outline contained in the most current edition of the IAFN Sexual Assault Nurse Examiner education Guidelines;

AND

4. Have successfully completed a sexual assault nurse examiner clinical preceptorship as outlined in the most current edition of the IAFN Sexual Assault Nurse Examiner education Guidelines;

AND

5. Have *practiced*³ as a sexual assault nurse examiner for a minimum of 300 hours within the past 3 years. At least 200 of those 300 hours must comprise SANE-related practice that is focused on the adult patient population.

NOTE: IF THE APPLICATION IS SELECTED FOR AUDIT, THE APPLICANT WILL BE ASKED TO SUBMIT DOCUMENTATION OF COMPLETION OF THEIR SANE TRAINING PROGRAM AND SANE-RELATED PRACTICE HOURS.

²Applicants who do not have a US RN license must have completed a post-secondary nursing education program that includes classroom instruction and clinical practice in medical, surgical, obstetric, pediatric, and psychiatric nursing. To confirm eligibility, these applicants may be asked to provide a transcript from their nursing education program.

³Practice includes any combination of the following activities:

- Providing direct patient care as a SANE
- Taking on-call shifts to respond to patients as a SANE (even if not seeing a patient)
- Teaching/precepting SANEs
- Providing consultation on SANE issues/cases
- Participating in peer review of SANE cases.

APPENDIX1:ADULT/ADOLESCENTSEXUALASSAULTNURSE EXAMINER INITIAL COMPETENCY VALIDATION FORM

Directly from the 2018 International Association of Forensic Nurses: SEXUAL ASSAULT NURSE EXAMINER (SANE) EDUCATION GUIDELINES

Learning Outcome for Clinical Education: Upon completing the clinical learning experience, participants will possess the foundational knowledge and skill required to perform as a sexual assault nurse examiner for adult / adolescent populations within their community.

Competence	Satisfactory Performance (initial/date)	Unsatisfactory Performance (initial/date)	Notes
Presents examination options and developmentally appropriate patient-nurse dialogue necessary to obtaining informed consent from adult and adolescent patient populations			
2. Evaluates the effectiveness of the established plan of care regarding consent and modifying or adapting based on assessment of the patient's capacity and developmental level from data collected throughout the nursing process			
Explains procedures associated with confidentiality to adult and adolescent patient populations			
4. Describes circumstances where mandatory reporting is necessary and explains the procedures associated with mandatory reporting to adult and adolescent patient populations Output Describes circumstances where mandatory reporting is necessary and explains the procedure associated with mandatory reporting to adult and adolescent patient populations			

Competence	Satisfactory Performance (initial/date)	Unsatisfactory Performance (initial/date)	Notes
5. Evaluates the effectiveness of	,	,	
the established plan of care			
regarding confidentiality and			
modifying or adapting based			
on the patient's developmental			
or level of capacity in data			
collected throughout the			
nursing process			
6. Explains medical screening			
procedures and options to			
adult and adolescent patient			
populations			
7. Evaluates the effectiveness of			
the established plan of care			
regarding medical			
evaluation/nursing			
assessment/treatment and			
modifying or adapting to meet			
, , ,			
the patient's needs based on			
changes in data collected			
throughout the nursing			
process			
8. Evaluates the effectiveness of			
the established plan of care			
regarding mandatory reporting			
requirements and modifying or			
adapting based on changes in			
data collected throughout the			
nursing process			
9. Identifies critical elements in			
the medical forensic history and			
review of systems and			
demonstrating effective			
history-taking, skills			
10. Demonstrates a complete			
head-to-toe assessment			
11. Prepares the adolescent			
and adult for the anogenital			
examination			
12. Differentiates a normal			
anogenital anatomy from			
normal variants and abnormal			
findings			
13. Demonstrates anogenital			
visualization techniques			

Competence	Satisfactory Performance (initial/date)	Unsatisfactory Performance (initial/date)	Notes
a. Labial separation			
b. Labial traction			
c. Hymenal assessment (Foley catheter, swab, or other technique)			
d. Speculum assessment of the vagina and cervix			
14. Collects specimens for testing for sexually transmitted disease			
15. Explains rationales for specific STI tests and collection techniques			
16. Collects and preserves specimens as evidence (dependent on local practice and indications by history), including:			
a. Buccal swabs			
b. Oral swabs			
c. Bite mark swabbing			
d. Other body surface swabbing			
e. Fingernail clippings/swabbings			
f. Anal swabs			
g. Rectal swabs			
h. Vaginal swabs			
i. Cervical swabs			

Competence	Satisfactory Performance (initial/date)	Unsatisfactory Performance (initial/date)	Notes
j. Head hair combing/collection			
k. Pubic hair combing/collection			
I. Clothing			
m. Toxicology			
17. Explains rationales behind the specific type and manner of evidentiary specimen collection			
18. Packages evidentiary materials			
19. Seals evidentiary materials			
20. Explains rationales for the packaging and sealing of evidentiary material			
21. Explains how to maintain chain of custody for evidentiary materials			
22. Explains rationale for maintaining proper chain of custody			
23. Demonstrates how to modify evidence collection techniques based on the patient's age, developmental/cognitive level, and tolerance			
24. Takes appropriate actions related to consent, storage, confidentiality, and the appropriate release and use of photographs taken during the medical-forensic examination			
25. Obtains overall, orientation, close-up and close-up with scale for medical-forensic photodocumentation to provide a true and accurate reflection of the subject matter			

Competence	Satisfactory Performance	Unsatisfactory Performance	Notes
	(initial/date)	(initial/date)	
26. Evaluates the effectiveness of the established plan of care and modifying or adapting care based on changes in data collected throughout the nursing process			
27. Demonstrates effective patient- nurse dialogue establishing follow-up care and discharge instructions associated with emergency contraception and/or pregnancy termination options			
28. Demonstrates effective patient- nurse dialogue establishing follow-up care and discharge instructions associated with select sexually transmitted disease(s)			
29. Plans for discharge and follow- up concerns related to age, developmental level, cultural diversity and geographic differences			
30. Evaluates the effectiveness of established discharge and follow-up plans of care, and revises the established plan of care while adhering to current evidence-based practice guidelines			
31. Prioritizes the need for and implementation of crisis intervention strategies in adult and adolescent patients following sexual violence based on assessment findings			
32. Incorporates nursing process as a foundation of the nurses' decision-making, including: a. Assessment-collecting data pertinent to the patient's health and situation;			

Competence	Satisfactor Performanc (initial/date	e Performance	Notes
b. Diagnosis-analyzing the data to determine diagnosis or issues;			
c. Outcome Identification- identifies individualized patient outcomes based on patient need;			
d. Planning-develops a plan that prescribes strategies to attain the expected outcomes;			
e. Implementation- implements the plan, including any coordination of care, patient teaching, consultation, prescriptive authority and treatment; and			
f. Evaluation-evaluates progress towardoutcome attainment. (ANA, 2010)			
Name of SANE (Print)	Name of Preceptor #1 & Credentials (Print/Initials)		1 & Credentials
Name of Preceptor #2 & Credentials (Print/Initials)	Name of Preceptor #3 & Credentials (Print/Initials)		3 & Credentials

Name of Preceptor #4 & Credentials (Print/Initials)

Name of Preceptor #5 & Credentials (Print/Initials)

RESOURCES

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