

# **Sexual Assault Nurse Examiner (SANE)**

# Adult / Adolescent

# **Program Guidance Document**

# SANE EDUCATION, COMPETENCY AND CERTIFICATION

November 30, 2018

Sexual Violence shatters lives, wounds communities, and perpetuates injustice. The Florida Council Against Sexual Violence leads, informs, and inspires the people of Florida to create safe and just communities.

Florida's sexual violence survivors have a right to quality medical forensic exams by providers using nationally recognized and evidence-based models of training and education. Florida Council Against Sexual Violence (FCASV) supports the delivery of medical forensic exams (MFE) by practitioners qualified per the educational standards set forth by the Florida Board of Nursing and the International Association of Forensic Nurses (IAFN). Although a certified rape crisis center (RCC) may employ a sexual assault nurse examiner (SANE) meeting the minimal educational and clinical standards, FCASV's position is that all RCC's should encourage and support SANEs to achieve certification as a SANE-A (certified in adult / adolescent medical forensic exams) and/or SANE-P (certified in pediatric medical forensic exams).

### A. EDUCATION and TRAINING

In order to become a SANE who may take care of adults and adolescents, one must be a registered nurse (RN) or advanced practice registered nurse (APRN) who has successfully completed:

- A minimum of 40 hours of didactic coursework that yields a minimum of 40 continuing nursing education contact hours from an accredited provider of nursing education, or academic credit, or the national equivalent from an accredited educational institution; and
- Clinical components, including simulated clinical experiences that are completed in addition to the coursework and are not calculated as a part of the 40-hour didactic course.

OR

- A minimum of 64 hours of didactic coursework that yields a minimum of 64 continuing nursing education contact hours from an accredited provider of nursing education, or academic credit, or the national equivalent from an accredited educational institution; and
- Clinical components, including simulated clinical experiences, that are completed in addition to the coursework and are not calculated as a part of the 64-hour didactic course.

Sexual Assault Nurse Examiner (SANE) Education Guidelines, 2018

#### **SCOPE OF PRACTICE**

The State of Florida Board of Nursing was petitioned (*In Re: Petition for Declaratory Statement, Katherine Scholl, RN*) in December of 2003, and asked (in part), whether it is within the scope of practice for a registered nurse in the state of Florida trained as a SANE to perform sexual battery examinations, including speculum exams, for

evidence/specimen collection in emergency rooms and in community based settings. The state of Florida issued a final order (*Final Order No. DOH-04-0039-DS-MOA,*) to this petition in January 2004, which reads, in part, *"It is within the scope of practice for a registered nurse ......to perform sexual battery examinations......." and "the use of any training model for SANE training of registered nurses...so long as the training model is accepted by the U.S. Department of Justice"* (emphasis added). The U.S. Department of Justice supports the training model developed by the IAFN, which requires potential trainees to be licensed registered nurses.

http://www.floridahealth.gov/licensing-andregulation/declaratory/ documents/nursing/fo-doh-04-0039.pdf

### **QUESTIONS MOST COMMONLY ASKED:**

1. After completing the 40 Hour Adult/Adolescent SANE Training is the nurse considered certified?

No, certification is obtained only by meeting the eligibility requirements set forth by the IAFN and successfully passing the certification examination. For the eligibility requirements and additional information about the certification exam, please go to: <a href="https://www.forensicnurses.org/page/ExamDetails">https://www.forensicnurses.org/page/ExamDetails</a>

# 2. After the 40 Hour Adult/Adolescent SANE training, can a nurse use SANE as a credential after his/her name?

"Credentials include and signify academic degrees, legislated professional licensure/registration, professional certification, and certain awards and honors. Credentials are typically listed in order of their permanence (or lack of ability to be revoked)."

"Completion of a course (e.g., sexual assault nurse examiner training) or program where a certificate of completion is provided does not mean that the nurse is certified." These courses / trainings are considered continuing education and it is not appropriate to list a title/acronym following your name. However, a nurse may list these trainings in a resume or CV.

If a nurse is currently practicing as a Sexual Assault Nurse Examiner--but is not yet certified—he/she may designate the job title by spelling out "Sexual Assault Nurse Examiner" below his/her name. For example:

Robin Z. Doe, RN

Sexual Assault Nurse Examiner

https://www.forensicnurses.org/page/Credentials?&hhsearchterms=%22credential%22

#### 3. If a nurse has never done speculum exams, how is experience obtained?

Once the 40 Hour Adult/Adolescent SANE Training is completed, the new SANE will need to identify a medical professional (physician, nurse practitioner, physician's assistant or a RN who has done many speculum exams) who is willing to assist the SANE with obtaining experience in performing speculum exams on non-sexual assault patients. The medical professional may be located in a private medical office, a county health department, a family planning or sexually transmitted infection clinic, or an emergency room.

#### 4. How does a nurse obtain experience doing medical forensic exams?

A nurse finds an employment setting where conducting medical forensic exams is part of the job responsibilities, i.e. a certified rape crisis center or a hospital.

#### B. <u>COMPETENCY</u>

Achieving competency is critical for a nurse to conduct medical forensic exams autonomously. The amount of time and practice it takes to acquire competency varies from person to person.

# 1. After completing the 40 Hour Adult/Adolescent SANE training, will the RN or APRN be deemed competent to conduct sexual assault forensic exams and begin to work autonomously as a SANE?

No, the nurse will not be deemed competent to autonomously perform medical forensic exams.

#### 2. How does the new SANE achieve competency?

Competency is achieved over time by observing medical forensic exams, and being observed performing medical forensic exams by an experienced practicing SANE/preceptor. The amount of time and practice it takes to acquire competency varies from person to person. Therefore, the number of observed and performed medical forensic exams will vary from nurse to nurse.

#### 3. Who can be a preceptor?

The <u>ideal</u> preceptor is a nurse who has been a SANE for more than a year, has 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 preceptor will attest to the competence of the new SANE. The preceptor must be familiar with the nurse's clinical practice through direct observation, supervision, and/or peer review. There are a number of requirements that must be met and evaluated positively before the SANE will be deemed competent to work autonomously. Appendix I is an example of an initial competency validation form that may be used.

**It is important to note** that the preceptorship should be completed within six months of completion of the didactic training. This time frame maximizes the retention of knowledge after taking the Adult/Adolescent SANE training.

- 4. What if there is not a SANE-A available to precept the new SANE? There are SANEs who have not sought out certification (SANE-A) and are very competent to precept a new SANE acquiring experience conducting medical forensic exams.
- 5. When can a new SANE conduct a medical forensic exam autonomously? Once the preceptor(s) determine competency in all areas of the medical forensic exam, the SANE may work autonomously. If there is more than one preceptor, communication between preceptors must occur to determine competency or lack thereof.

### C. CERTIFICATION

FCASV encourages all SANEs to achieve certification as a SANE-A (certified in adult / adolescent medical forensic exams) and/or SANE-P (certified in pediatric medical forensic exams). The SANE-A designation and credential demonstrates the nurse has the knowledge and expertise required to conduct medical forensic exams. Additionally, it further exhibits a nurse's professional commitment to providing quality patient care. In order to become certified, IAFN offers the certification examination, two times per year, for those who have met the eligibility requirements (https://www.forensicnurses.org/page/CertExam).

#### Does a SANE have to be certified to practice as a SANE?

SANE certification is not required to conduct adult / adolescent medical forensic exams. However, FCASV encourages all RCC's to actively support SANE-trained nurses in achieving certification as a SANE-A (certified in adult / adolescent medical forensic exams).

### D. CONTINUING EDUCATION

Sexual assault forensic nursing is a relatively new field in the profession of nursing. As with any profession, especially an evolving field of study such as forensic nursing, the

SANE should be held accountable for staying up to date with new research developments and evidence-based practices.

FCASV's recommends that any SANE employed by or under contract with a certified rape crisis center acquire a minimum of two hours of sexual assault / forensic nursing continuing education per year. For those SANEs who do fewer than 20 medical forensic exams per year, attending basic medical forensic clinical skills development training every two years OR demonstrating their skills to an experienced SANE who does more than 36 exams per year, should also be required. The basic medical forensic clinical skills development training would be in addition to the two hours of sexual assault / forensic nursing continuing education per year. There are several resources (Appendix II) for nurses wanting to receive continuing education.

The SANE-A should also be held to the above requirements. However, it must be noted certified SANEs intending to renew their certification (renewal is every three years) are held to higher level of required documented continuing education (45 hours). https://www.forensicnurses.org/page/CertRenewal

# **APPENDIX I**

# ADULT / ADOLESCENT SEXUAL ASSAULT NURSE EXAMINER INITIAL COMPETENCY VALIDATION FORM

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
<ol> <li>Presents examination options and developmentally appropriate patient-nurse dialogue necessary to obtaining informed consent from adult and adolescent patient populations</li> </ol>			
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			
<ol> <li>Explains procedures associated with confidentiality to adult and adolescent patient populations</li> </ol>			
<ol> <li>Describes circumstances where mandatory reporting is necessary and explains the procedures associated with mandatory reporting to adult and adolescent patient</li> </ol>			
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			

<ol> <li>Explains medical screening procedures and options to adult and adolescent patient populations</li> </ol>		
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		
<ol> <li>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</li> </ol>		
<ol> <li>Identifies critical elements in the medical forensic history and review of systems and demonstrating effective history-taking, skills</li> </ol>		
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:		
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		
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		
photo-documentation to		
provide a true and accurate		
reflection of the subject matter		
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,		
developmentallevel, 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;	
b. Diagnosis-analyzing the	
data to determine diagnosis	
or issues; c. Outcome Identification-	
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 toward outcome	
attainment. (ANA, 2010	

Name of SANE (Print)	DATE
Name of Preceptor #1 & Credentials	Name of Preceptor #2 & Credentials
(Print/Initials)	(Print/Initials)
Name of Preceptor #3 & Credentials	Name of Preceptor #4& Credentials
(Print/Initials)	(Print/Initials)

 $^{\odot}$  2018 International Association of Forensic Nurses SEXUAL ASSAULT NURSE EXAMINER (SANE) EDUCATION GUIDELINES, pages 81 - 93

## **APPENDIX II**

# CONTINUING EDUCATION RESOURCE LIST

- 1. Florida Council Against Sexual Violence; <u>www.fcasv.org</u>
- 2. International Association of Forensic Nurses (IAFN); <u>www.forensicnurses.org</u>
- 3. Sexual Assault Forensic Examiner Technical Assistance (SAFETA); https://www.safeta.org

## REFERENCES

- International Association of Forensic Nurses, Commission for Forensic Nursing Certification, Sexual Assault Nurse Examiner – Adult/Adolescent (SANE-A) and Pediatric (SANE-P) Certification Renewal Handbook, 2018
- 2. International Association of Forensic Nurses, *Sexual Assault Nurse Examiner (SANE)* Education Guidelines, 2018
- 3. National Institute of Justice, National Best Practices for Sexual Assault Kits: A Multidisciplinary Approach, August of 2017
- U.S. Department of Justice Office on Violence Against Women, A National Protocol for Sexual Assault Medical Forensic Examinations Adults/Adolescents, Second Edition; April 2013
- 5. U.S. Department of Justice Office on Violence Against Women Second Edition, *National Training Standards for Sexual Assault Medical Forensic Examiners*, August 2018

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