Community Based and Hospital Based SANEs

SART Listserv
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Issue: The number of SAFE/SAE/SANE examiners employed by hospitals versus community-based programs.

Background: A county recently established a county-wide SART. The program wants a national perspective of where forensic examiners are based to help them through the next stages of implementation.

National Perspective:

According to information presented by Linda Ledray in April, 2006, SANE program location looks like this:

- Hospital Based 80%
  - Sustainable/funding issue
  - Crawford v. Washington
- Community based 20%
  - Police department
  - Medical Clinic
  - Trailer
  - YWCA
  - RCC
  - Prosecutor’s office

Alaska (Fairbanks)
- One full time coordinator and 5 on-call SANEs.

Michigan (Howell)
- A total of 8 nurses and one nurse coordinator to take calls at our community-based SANE Program.

New Jersey
- County-wide programs statewide.
- The programs have between 4 and 25 nurses depending on the county. Four is obviously too few, but recruitment and retention is always an issue.
- Most counties have 8 to 10 nurses, with 3 or 4 who take a great number of calls.
The majority of the programs are affiliated with more than one hospital. A few counties operate out of 5 hospitals (NJ is densely populated).

Most counties have 2 or 3 hospitals/sites.

We have 3 non-hospital sites in the state. Specific protocols are in place in those counties.

Victims are pre-screened by the SANE on-call to see if they should go to an ED site or a non-hospital based site.

Pre-screening includes issues such as pain, known pregnancy, injury to the head, history of mental illness, and suspected drug-facilitated sexual assault.

New York (Suffolk County)

- 10 SANE nurses cover three hospitals in the county.
- The coordinator’s part-time position is only 30 hours a week to manage SANE and the Community Education Department.
- Recently hired 15-hour a week assistant. It is still not enough.
- Currently in the process of training an additional 10 nurses and opening up a fourth center.
- The biggest challenge is funding for new equipment and money to pay for a second on-call schedule.
- Nurses are paid on-call pay.
- The Rape Crisis Center coordinates the program and pays for exams if there is no police involvement. The police pay for exams if the assault is reported.