

## **SANE Training**

### **SART Listerv**

**August 2007**

*States are listed as a reference; not as a statewide perspective*

**Background:** A series of questions about SANE training:

1. How are SANE trainings being delivered throughout various states
2. What if any are the various regulatory authorities of oversight re: SANE nurses and SANE services?
3. Are there (state level) regulatory authorities that govern training curricula; certifications of training completion; practices and competency? And if so who are those authorities?
4. Who determines (or how is it determined) who is qualified to do SANE clinical "instruction" (training) for basic and advanced (pediatric) training?
5. Due to the very expensive cost of SANE trainers, are there states where communities simply create and provide their own local SANE training programs?
6. What are list serv members (states; cities) experiencing in the way of SANE burn-out; turnover; and supply of SANE's to meet demand?

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### **Colorado**

- We have had different educators from across the country come to our state and participate in provision of SANE/SART education.
- The State Board of Nursing is our regulatory agency.
- We are obliged to go by the standards set forth for SANES and do so by following established guidelines such as the International Forensic Nurses Association.

### **Kansas**

- In Kansas, we have one primary trainer that provides all of the SANE courses (40-hour basic SANE/SART, Long-Term Pediatric Exams, and Advanced SANE classes). In January 1999, we received grant money through the Victims of Crime Act and the Violence Against Women Act (administered by the Kansas Governor's office) to provide 3-4 SANE trainings across the state each year and additional trainings/in-services where and when needed. We choose each training location based on community interest and commitment to starting a program, as well as team development process. We also consider communities with already established programs for the education if they were experiencing turnover/burnout, etc. Because it is grant money, from 1999-2005 we were able to provide the trainings to the targeted community and participants in the course for no cost. Our grant covered all of our expenses to do the classes except food for the class, which each community then donated. From 2006 to present we still do not charge a community to come in and do the classes, but there is a \$50.00

- registration fee for attendees for the 40-hour SANE/SART class, \$40.00 for the 3-day Long-Term Pediatric class, and \$15.00 for Advanced SANE classes.
- In Kansas, we do not have any regulatory authorities or state certification. Our Statewide Trainer (also the Director of the Wichita SANE Program) is a long-time member of IAFN. She utilizes IAFN guidelines and members for practice issues. She is available to all of the SANE Programs in Kansas for program development issues, technical assistance and follow-up.
  - No state regulatory system is in place at this time. The curricula for our classes follow the IAFN education guidelines and each nurse that completes the course(s) is also given instruction on preceptorship guidelines and is highly encouraged to become a member of IAFN. They receive a certificate of completion/attendance at the end of the course(s) and are given information on the national SANE-A/P certification and requirements.
  - Anyone could technically become an instructor, but since we have Diana Schunn as our Statewide Trainer most programs reach to her for education and guidance. We currently do not teach or provide guidelines to other SANE's on being a qualified instructor. If they wish to become a trainer, class time, preceptorship, clinical hours and competency, memberships, and continuing education would all need to be considered.
  - We also offer scholarships through our grant to be able to waive the \$50.00 registration fee.
  - It is a constant struggle to try and help programs remain functional and to assist with turnover. A lot of it really depends on community knowledge and support of the program. We have some communities where the hospital is on their own for funding and in others where the County Attorney will do all they can to help keep the program up and running (i.e. fund raising efforts, re-allocating drug money, etc.). It helps when there is total community and professional buy-in and support of the program.

## **Pennsylvania**

- In Pennsylvania, I am aware of hospital or university based training. Those that I am aware are a 40 hour, didactic course. Duquesne University offers an online course.
- When offering courses that CEU's are provided, the organization providing the credits goes by those regulations. For example, the course that I coordinate offers PNA (Pennsylvania Nurses Association) CEU's, so we go by their guidelines.
- We follow the National Training Standards for Sexual Assault Medical Examiners, June 2006. they can be found at the following site <http://www.ncjrs.gov/pdffiles1/ovw/213827.pdf>
- In our community, some of the hospital cost for training has been offset with STOP Grant funds. The money was allocated from the prosecutors' portion of the funds.
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## **New Jersey**

- In NJ, three Universities provide traditional SANE training as part of their continuing education offerings for nurses. Additionally, nurses have participated in two on-line SANE training programs offered by Universities in NJ and PA.
- The NJ Board of Nursing certifies SANEs. Educational minimum requirements are outlined in the regulations. Additionally, County Coordinators provide further clinical training in the field.
- Since CEUs are offered for all training sessions, instructors must have an MSN and experience as a SANE.
- Our county SANE programs have grant funds with which they reimburse nurses for the registration costs after six months of active service.
- With the nursing shortage and burnout, turnover of newer nurses is high. Our programs constantly recruit to maintain a full staff of SANEs. It seems that the core of the nurses have been with their programs since they started.

## **New York**

- In New York State, several programs have applied for and received certification to provide forensic examiner training through the NYS Department of Health (DOH). I am most familiar with the training offered by the NYC Alliance Against Sexual Assault. They have an awesome curriculum. It is a hybrid course, part classroom and part online. All of the trainings certified by the DOH are excellent. The training standards are based on the IAFN standards; the NYS Protocol for the Acute Care of the Adult and Adolescent Patient; and the National Protocol.
- The NYS DOH has also developed statewide certification for forensic examiners. Hospitals that have examiner programs can also apply for Center of Excellence Designation. For more information, please go to the web site: <http://www.health.state.ny.us/nysdoh/safe/index.htm>
- In order to qualify for NYS DOH certification as a SAFE, you must have attended a NYSDOH certified training course.
- The NYS Health and Hospitals Corporation have developed its own training course with Rutgers University. It is NYS DOH approved. It is offered free of charge to all NYS HHC employees.
- I think the NYS issues are similar to issues around the country. Funding, not enough examiners to provide continuous 24 hour, 7-day-a-week coverage, not enough funds to pay on call, not enough funds to pay for full time coordinator position, loss of previously designated exam room space in hospitals, and getting new programs up and running.

## **Utah**

- When Salt Lake Sexual Assault Nurse Examiners began (2001), we brought in several national experts for our first two trainers. We are lucky enough to have Susan Chasson as a Utah resident, and she quickly mentored me so we could

provide future trainings. Salt Lake Sexual Assault Nurse Examiners now provide the state wide trainings for adolescent and adult examiners. We receive VAWA funding that covers half the cost of training. This allows us to keep the registration fee low.

- Pediatric trainings are not offered in our state
- We offer adult/adolescent training twice a year and usually have 16+ attendees. We alternate between Salt Lake City and Provo, which is about an hour south. The rest of our state is rural, so training would not draw enough attendees to justify the expense of a course.
- Our state has no regulatory authority beyond the Nurse Practice Act, which defines what an RN can do related to forensic examinations. All services provided with forensic examinations fall within the scope of Advanced Practice Nurses in our state.
- There is not state regulation of the SANE trainings. We feel very strongly that we must provide trainings that fully meet the minimum recommendations of IAFN. In that respect, we self-regulate. I expect the VAWA funders would be very reluctant to support trainers if they did not have evidence of expertise.
- I think we began as a community that simply developed and provided its own training, and we quickly realized the importance of encouraging our rural communities to participate by sending nurses to the training.
- It is common to have nurses last about 18 months; I am working hard to extend that to two years. We have a core that has been with us since the beginning, but there is constant turnover.
- We are constantly recruiting through presentations at the hospitals, nursing schools and any community event that is appropriate.

## **Wisconsin**

- In Wisconsin we have a faculty of five SANE-A's who operate through the coalition as consultants and offer two adult and two pediatric classes per year. The coalition receives monies through our state Office of Justice Assistance.
- In Wisconsin, we do not have any regulatory or authority oversight. We work with our chapter of IAFN for practice issues.
- We encourage nurses to become SANE-A/P through IAFN. The faculty of SANE-A work closely with all Nurses that are trained. The SANE coordinator provides technical assistance to all SANE and programs.
- We keep costs down by working with our coalition.
- Wisconsin is a very large state. We have 72 Counties and approximately 32 SANE Programs. We have trained a number of SANEs and have lost a number of SANEs.