

Sexual Assault Forensic Excellence (SAFE) Program Designation

Any hospital/facility interested in designation as a Sexual Assault Forensics Excellence (SAFE) must complete the following application. For regional models, one application may be submitted if forensic services provided at each facility are the same. Designation will be reassessed two years after date of initial award. Please submit completed application to Amanda Brown at <u>amandabrown@scvan.org</u>.

Facility Information				
Facility Name:				
			Phone Number:	
Program Contac	t Name:		Title:	
	Email:		Phone Number:	
	Cert	ification of Informati	ion	
I,				
·		rint CEO's Name and Title		
do hereby attes	t that the information included in ar	nd attached to this appli	cation is true and accurate.	
		·····		
	CEO Sigr	nature	Date	
	Applicati	on Submission Info	rmation	
Please select	which level designation for w	/hich the hospital/fa	cility would like to apply:	
Level 1 coordin		verage for adult/adoleso	cent & pediatric patients with a progra	ım
	:: Continuous (24/7) SANE/FNE con andum of Understanding with a hig		s with a program coordinator and a iatric patients.	
	: Intermittent or no SANE/FNE cov SANE is not available.	erage and Memorandur	m of Understanding with a higher-leve	el facility
Section I: Ser	vice Data (Level 1, 2 & 3)			
Please complete	e the following section using the 20	22 calendar year data a	available.	
Estimated numb	per of sexual assault patients seen	in the hospital:		
Of those	e patients, how many reported ano	nymously?		
Number of sexu	al assault nurse examiners/forensi	c nurse examiners:		
Section II: Or	ganization and Staffing (Leve	l 1)		
1. Adminis	strative oversight of the SAFE Prog	ram:		

- - Percent of time the Program Coordinator will be dedicated to the program
 - Attach a copy of SANE-P certificate for at least one examiner in the program.

- Attach a copy of an organization chart and a description of reporting relationships for the SAFE Program.
- Describe the Program Coordinator's role in administering the program, including the percent of time the coordinator will provide direct care (if any)
- 2. Clinical oversight for the SAFE Program:
 - Describe how clinical oversight for the program will be provided; if there is no medical director for the program, describe how day-to-day clinical oversight will be ensured. This description should include ordering of any necessary lab tests and prescriptions.
 - Who is the South Carolina Child Advocacy Medical Response System (SCCAMRS) qualified provider responsible for chart review and clinical preceptorships for all examiners providing care to pediatric patients? Describe the process for chart reviews by this provider and referral to a children's advocacy center.
 - What is the policy/procedure for photography? Does this policy include photographing all pediatric examinations?
- 3. Describe how the hospital's emergency department will coordinate with and support the activities of the SAFE Program and sexual assault forensic examiners.
- 4. Describe how the hospital will ensure initial and ongoing competency and credentialing of SAFE staff, including pediatric specific training for any examiner providing care to pediatric patients.

Section II: Organization and Staffing (Level 2)

- 1. Administrative oversight of the SAFE Program:
 - Name and title of Program Coordinator ______
 - Percent of time the Program Coordinator will be dedicated to the program ____
 - Attach a copy of an organization chart and a description of reporting relationships for the SAFE Program.
 - Describe the Program Coordinator's role in administering the program, including the percent of time the coordinator will provide direct care (if any)
- 2. Clinical oversight for the SAFE Program:
 - Describe how clinical oversight for the program will be provided; if there is no medical director for the program, describe how day-to-day clinical oversight will be ensured. This description should include ordering of any necessary lab tests and prescriptions.
- 3. Describe how the hospital's emergency department will coordinate with and support the activities of the SAFE Program and sexual assault forensic examiners.
- 4. Describe how the hospital will ensure initial and ongoing competency and credentialing of SAFE staff.

Section III: SAFE-Designated Service Model (Level 1, 2 & 3)

- 1. Is the proposed SAFE Program to be (check one only):
 - □ Self-Contained
 - □ Regional Network Model
 - □ Community Based
 - Other (specify): ______
- 2. SAFE services are proposed to be provided:
 - □ In the hospital emergency department
 - □ In the hospital in a location near the emergency department
 - □ Clinic/community-based center
 - Other (specify): _____

- 3. Attach a description of the model and how it will operate in a narrative not to exceed 3-5 pages. For regional network models, the narrative should describe the hospitals participating in the network, the agency providing sexual assault forensic examiner services, the organization and coordination of services within the network.
- 4. Please indicate the services offered or proposed under the SAFE model:
 - □ Appropriate administrative and clinical oversight for program.
 - □ The SAFE program is affiliated with and integrated into the policies and procedures of the hospital.
 - □ If employing an outside agency to provide services, a signed Memorandum of Understanding is to be maintained throughout duration of program.
 - □ Established process for competency, initial education, and continuing education of SAFE staff. Documentation of competency to be done annually, in addition to 15 hours of forensic specific continuing education hours.
 - □ Facility billing department has policies/procedures for appropriate coding of sexual assault charts to ensure patients do not receive a bill for sexual assault examinations.
 - Human trafficking awareness flyers/posters must be visible in high traffic clinical areas. These flyers are distributed at no cost by the South Carolina Attorney General's Office and can be obtained through SCVAN.
 - □ Facility maintains a well-functioning system to provide triage and assessment.
 - □ A triage flowsheet posted with information regarding what to do when sexual assault patient presents, timeline, and appropriate care of the patient until a SANE arrives.
 - A well-functioning on-call and back-up call schedule so that the patient is met by an examiner within 60 minutes. If geographically necessary, the wait should not exceed 90 minutes of the patient's disclosure of sexual assault.
 - □ The local rape crisis center is contacted immediately to ensure an advocate is available to offer services to the patient.
 - □ An appropriately equipped, private room that can accommodate disabled patients is available, when needed, for sexual assault exams.
 - Medical treatment and forensic examination is provided in compliance with all relevant South Carolina laws and national treatment guidelines.
 - □ Prophylaxis and education for sexually transmitted infections (STIs), and emergency contraception is provided on site.
 - □ Replacement clothing is available for the patient prior to discharge.
 - □ Prior to discharge, patient safety is addressed, as well as appropriate referral and follow-up regarding medical treatment, mental health services, and community resources.
 - □ Medical and SAFE services are appropriately documented.
 - □ Confidentiality of patient information collected related to sexual assault, including photographs, is ensured.
 - □ Access to computer with the most recent SLED sexual assault protocol, Department of Crime Victim Compensation forms, and SAFE program policies.
 - □ If an outside SAFE program provides services for a hospital, the Emergency Room physicians providing medical care to sexual assault patients must remain available for the SANE/FNE performing the forensic exam, if needed.
 - Medical staff is obligated to provide medical screening exam for sexual assault patients, as well as any emergency treatment, or arranging transfer per the US Emergency Medical Treatment and Labor Act (EMTALA) 42 U.S. Code § 1395dd.

Section IV: Interdisciplinary Task Force/Sexual Assault Response Team (SART) (Level 1, 2 & 3)

- Level 1 and 2 hospital/SAFE Program will provide representation for local SART meetings, at 75% of annual meetings or more.
- Participation in local SART meetings is strongly encouraged for Level 3 facilities that have intermittent SANE coverage.

Section V: Facilities/Equipment (Level 1, 2 & 3)

Please indicate the equipment and supplies that will be available to the SAFE program by checking the items below:

- □ Universally accessible exam table
- □ Designated camera with magnification or colposcope
- □ Ultraviolet light source
- □ Swab dryer
- □ Specula in different sizes, preferably with light illumination
- □ Provisions for patient comfort (gown, blankets)
- □ SLED Sexual Assault Evidence Collection Kits
- □ Locked storage, if needed
- □ Supply cart or storage for all necessary supplies (gloves, sharps disposal, phlebotomy equipment, gauze, lubricating jelly, etc.)
- □ Access to other necessary forensic supplies, including brown paper bags, evidence tape, and tape measure
- □ Replacement clothing for patients prior to discharge
- □ Additional supplies as indicated by SAFE Designated program

Section VI: Training Requirement

- 1. Hospitals/facilities applying for Level 3 designation must ensure that 75% of licensed Emergency Room staff will complete a 2-hour training on sexual assault patient care provided free of charge by SCVAN.
- 2. Facilities will have one calendar year after signing the application to register nursers for Adult/Adolescent Sexual Assault Nurse Examiner (SANE) training. This will allow the hospital/facility to achieve a higher-level designation. The training is a 40-hour didactic course. The hospital/facility will then be responsible for providing clinical training to include pelvic exams and supervised sexual assault examinations. More detailed information regarding clinical requirements will be provided by SCVAN upon request.