The Development of a Simulated Clinical Validation Course for Sexual Assault Nurse Examiners

These materials were developed by FCASV staff for the purpose of providing advanced technical assistance to certified rape crisis centers in Florida.

Florida Council Against Sexual Violence
1820 E. Park Ave., Suite 100
Tallahassee, FL 32301
www.fcasv.org
850.297.2000 (tel)
850.297.2001 (fax)
The Development of a Simulated Clinical Validation Course for Sexual Assault Nurse Examiners

Presented by

Micheala C. Denny, M.S.
Director, Program Development
Florida Council Against Sexual Violence

&

Terri Augspurger, RN, MSN, CFN, CPEN, SANE-A/P, AFN-B/C
(In Absentia)
Stranger in a SANE Land

- History of the project
- Inspiration and guidance
- Fortunate partnerships
Florida Council Against Sexual Violence
Because Sexual Violence Shatters Lives, Wounds Communities and Perpetuates Injustice

Competency v. Certification in Florida
FCASV fully supports and emphasizes best practices as described in these documents published by the U.S. Department of Justice, Office on Violence Against Women:

• National Protocol for Sexual Assault Medical Forensic Examinations Adults/Adolescents 2nd Edition
• National Training Standards for Sexual Assault Medical Forensic Examiners

Additionally, FCASV consistently seeks technical assistance and guidance from the International Association of Forensic Nurses SAFETa Project.
Clinical Validation/Clinical Skills Practice Summary

SANE-A proctors will work with students to guide and observe them through each skill station. By the end of the training, the students will be able to:

• Explain the speculum exam, including speaking and listening skills, focusing on speculum insertion/removal and visualization techniques including swabbing and Toluidine Blue Dye use.
• Identify normal anatomy and variants in the anatomy of the genitalia.
• Use multiple visualization techniques including swabbing and traction.
• Use a digital camera to take photos of genital areas.
• Gain confidence in the process of the forensic exam.
• Be assessed by proctors, and if determined to be competent, receive a document certifying competency.
Building Your Course: Part 1

• Budgeting
• Faculty
• Training Space
• Volunteer Patient Models
• CEUs
• Participant Application
A Word About the Money

When costs are broken down to a per person fixed cost, this training can be quite expensive. When calculating your budget consider:

- Trainer fees
- Facility fees
- Model fees
- Supplies
- Travel
- Shipping
- Misc.
Course Faculty

- Must be SANE-A certified
- Must have prior teaching experience
- Should be well organized with good communication skills
- Should have the ability to adapt quickly to changes and roadblocks
Training Space

- Secure a medical facility by establishing a contract/MOU and budget agreement
- Must have private examination rooms equipped with necessary equipment for examinations
- Must have meeting area with adequate seating and tables
Volunteer Patient Model Recruitment

- Best sources are victim advocates and university students
- Send volunteer complete disclosure of what the process entails
- Send them detailed information on payment
- Prepare a waiver form
- Secure liability insurance
CEUs and Participant Application

• Select a CEU provider and fill out application well in advance

• Prepare participant application.
Building Your Course: Part 2

- Content
- Advanced study materials and orientation
- Detailed agenda and timing
- Scenario rehearsal
- Packing list
Content, Agenda and Orientation

• Every person involved should be well prepared before the training begins. This includes:
  – Coordinator – Prepared all forms, budgets, agendas, contracts, confirmed spaces, attendance, evaluations, grant deliverables, sent out orientation packets, and rehearsed patient scenarios, arranged for travel and sent directions to all parties
  – Trainer – Prepared all course content, evaluation rubric, supply lists, agenda rotation, CEU application, educational materials, handouts, course expectations, etc.
  – Participants – Studied course packet and expectations, prepared personal documents, asked clarifying questions, have a plan for travel, etc.
  – Models – Studied orientation packet, asked clarifying questions, have a plan for travel, etc.
Rehearsal and Pre-Training Prep

• In our model, the coordinator also serves as the model for the victim scenario. We choose a given scenario and ask participants to interview us as if we had just walked into the facility because we were raped and are asking for a forensic exam.

• The patient model serves as the physical representation of what the victim model has told them. The victim interview guides the forensic exam. Thus, the patient model is not responsible for doing a role play with the participant.

• As this is the case, rehearsal between the coordinator and the trainer is critical. It gives the trainer the chance to hear what the participants will be hearing and it gives the coordinator a chance to learn about what the trainer is looking for in terms of evaluation of interview skills. The coordinator’s thoughts about the strengths and weaknesses of the interview will be incorporated into the final evaluation.
The BIG Day: Implementing the Course

- Arrange to arrive at the facility early. If possible, preview the space the day before the training.

- Set up training areas including exam rooms and group training table with individual bags of equipment and files with blank evaluation forms, blank diagram forms and other relevant information. Assign each participant a bag as they enter the room.

- Begin training on time.
Following the Agenda

• Depending on the number of trainers you have and the set-up of the facility, it is very likely participants will have to do their training in rounds.

• Coordinator must ensure that each participant is following the agenda and that patient models are oriented, have their documents signed and escorted to exam rooms.
During the training, each participant will:

• Conduct a forensic interview with a scenario role-played by the coordinator
• Conduct a physical exam including a pelvic exam on a live patient model based on the scenario they were given
• Take photos of simulated injuries (typically make up put on coordinator to correspond with the scenario)
• Completely fill out forensic exam paperwork including injury documentation (we provide photos of injuries for them to describe and document)
• Completely package all evidence and sign a mock chain of custody form
• Fill out a female and male genital diagram from memory for evaluation.
Training Conclusion and Follow-up

- A typical training of 8 participants takes up to 8 hours
- When participants have finished their work they are free to go
- Patient models are typically asked to commit to a 2 hour timeslot
- Organization at the conclusion of the course is key
The Evaluation Process

• Coordinators write feedback on interview process immediately following the scenario role-play
• After all course materials have been completed and final chain of custody form has been completed, each participant’s evidence bag is collected by the trainer.
• Evaluation takes up to two weeks. When complete, trainer sends original copies of paperwork, diagrams, photos/photo log with evaluative notes to coordinator. Coordinator makes copies of these documents and sends mails originals on to participants. This includes information on validation decisions.
Course Wrap-Up

• Coordinator and trainer both keep records of the training results
• Evaluations are completed for CEU process
• Coordinator and trainer field questions from participants
• All invoices are paid, tax forms collected and an overall training report is filed.
Final Tips

• Plan ahead – give yourself at least 6 months to plan your first course
• Think of potential roadblocks and create alternative strategies
• Be selective. Work only with the people who are most organized and admit participants who are cooperative and timely. This will make all the difference in your course
• It takes a team! Don’t try to go it alone. Reach out to colleagues and resources for input and backup.
Questions?

Micheala Denny, M.S.
Director, Program Development
Florida Council Against Sexual Violence
850-297-2000
mdenny@fcasv.org