

Workforce and Education Committee Task Force on Services for Survivors of Sexual Assault

Agenda

November 12, 2021 – 11:00 a.m. VIA WEBEX

The public may sign up to virtually attend through

https://covaconf.webex.com/covaconf/j.php?RGID=rf03a49c9e9a90b3efe7ba8e4b94d87f2

NOTE: Task Force Members should join the meeting using the WebEx link they received by email.

- **1. Call to Order and Introductions** Alexandra Jansson, Senior Policy Analyst, Governmental and Regulatory Affairs, Virginia Department of Health
- 2. Review of Agenda Ms. Jansson
- 3. Public Comment
- 4. Presentations and Discussion
 - **4.1. Continued Discussion on Scripting for Transfer Hospital Staff** *Task Force Members, Ms. Jansson, and Ms. Allen*
 - **4.2.** Forensic Medical Photography and Other Training Needs for Treatment Hospital Emergency Department Staff Task Force Members, Ms. Jansson, and Ms. Allen
- **5.** Next Steps Ms. Jansson and Ms. Allen
- **6.** Other Business Ms. Jansson and Ms. Allen
- 7. Meeting Adjournment

Workforce and Education Committee (Task Force on Services for Survivors of Sexual Assault)

November 12, 2021 at 11:00 AM
Virtual Meeting
WebEx



CALL TO ORDER AND INTRODUCTIONS



Named Members in the Code of Virginia		
Name	Constituency	
Maria Altonen	Violence Prevention Coordinator, Virginia Department of Health (M. Norman Oliver, State Health Commissioner)	
Jennifer Boysko	Senate	
Kelly Convirs-Fowler	House of Delegates	
Karrie Delaney	House of Delegates	
Mark Herring	Attorney General	
Caren Sterling	Deputy Director, Bureau of Criminal Investigation, Department of State Police (designee of Gary Settle, Director of Department of State Police)	
Gena Boyle Berger	Chief Deputy Commissioner, Department of Social Services (designee of Duke Storen, Commissioner)	

Introductions

Appointed by Governor		
Name	Constituency	
Robin Foster	Representative of a licensed hospital	
Lindsey Caley	Licensed pediatrician who is a practitioner of emergency medicine	
Patricia Hall	Member of sexual assault survivor advocacy organization	
Melissa Harper	Licensed nurse who is a sexual assault nurse examiner	
Sara Jennings	Licensed nurse who is a sexual assault nurse examiner	
Jeanne Parrish	Member of children's advocacy organization	
Bonnie Price	Licensed nurse who is a sexual assault nurse examiner	
Dawn Scaff	Representative of a licensed hospital	
Scott Sparks	Licensed physician who is a practitioner of emergency medicine	
Brooke Thomas	Licensed physician who is a practitioner of emergency medicine	
Chatonia Zollicoffer	Member of sexual assault survivor advocacy organization	

DEPARTMENT OF HEALTH protect the health and promote the ell-being of all people in Virginia.

Agenda

Item	Speaker
Introductions and Roll Call	Alexandra Jansson, MPP Senior Policy Analyst Governmental and Regulatory Affairs
Review of Agenda	Ms. Jansson
Public Comment	
Continued Discussion on Scripting for Transfer Hospital Staff	Task Force Members, Ms. Jansson, and Ms. Allen
Forensic Medical Photography and Other Training Needs for Treatment Hospital ED Staff	Task Force Members, Ms. Jansson, and Ms. Allen
Next Steps	Ms. Jansson and Ms. Allen
Other Business	Ms. Jansson and Ms. Allen
Meeting Adjournment	



5

PUBLIC COMMENT



Public Comment Period

There is a two minute time limit for each person to speak.

We will be calling from the list generated through attendee registration.

After the 2 minute public comment limit is reached, we will let you complete the sentence. We will then mute you and move on to the next attendee.

We will call the name of the person on list and also the name of the person is next on the list.



CONTINUED DISCUSSION ON SCRIPTING FOR TRANSFER HOSPITAL STAFF



Key Concepts

Pediatric - any patient age 12 or younger

Adult - any patient age 13 or older

Pediatric health care facility - a hospital, clinic, or physician's office that provides health care services to pediatric patients

Transfer hospital - a hospital with a sexual assault survivor transfer plan approved by VDH

Treatment hospital - a hospital with a sexual assault survivor treatment plan approved by VDH to provide sexual assault survivor treatment services to all survivors of sexual assault:

- who present with a complaint of sexual assault within the previous 7 days; or
- who have disclosed past sexual assault by a specific individual and were in the care of that individual within the previous 7 days

9

Key Concepts (cont.)

Sexual assault survivor transfer services - an appropriate medical examination and such stabilizing treatment as may be necessary prior to the transfer of a sexual assault survivor from a transfer hospital

Sexual assault survivor treatment services - a forensic medical examination and other health care services provided to a sexual assault survivor by a treatment hospital or pediatric health care facility

Sexual assault forensic examiner (SAFE) - a sexual assault nurse examiner (SANE), physician, physician assistant, nurse practitioner, or registered nurse who has completed training that meets or is substantially similar to the Sexual Assault Nurse Examiner Education Guidelines established by the International Association of Forensic Nurses (IAFN)

Forensic medical examination - health care services provided to a survivor that include medical history, physical examination, laboratory testing, assessment for drugfacilitated or alcohol-facilitated sexual assault, collection of physical evidence recovery kit, and discharge and follow-up health care planning necessary to ensure the health, safety, and welfare of the survivor and the collection and preservation of evidence that may be used in a criminal proceeding



Request from Model Documents Committee

Developing transfer hospital scripts for information to be given to patient when:

- Patient calls prior to arrival at transfer hospital
- Patient declines to be transferred to treatment hospital
- What can/cannot be asked when gathering medical history, to avoid crossing over into "investigative" interview
- Getting patient authorization to release protected health information



11

Excerpts from Draft Model Adult Transfer Plan

When a patient calls before arrival for a forensic medical examination, discuss with the patient what to expect and that a forensic medical examination cannot be performed at your hospital so the patient will either have to be transferred to a treatment hospital or travel directly to the treatment hospital if they wish to receive a forensic medical examination, including a physical evidence recovery kit.

Advise the patient:

- · Do not bathe before examination
- Bring in clothes worn at the time of the assault if possible, and bring in a change of clothing
- · About the forensic medical examination and the wait time
- · Bring a support person (family, friend, etc.) if possible

* * *

The transfer hospital shall not directly interview the adult survivor...



Excerpts from Draft Model Adult Transfer Plan (cont.)

Information obtained by medical personnel cannot be shared with anyone, including law enforcement, without authorization from the patient or legally authorized decision maker. Children and vulnerable adults are exceptions.

This authorization may be by:

- The patient
- · Legally authorized surrogate decision maker
- · Court order or warrant

Even if the survivor is brought in by law enforcement, consent from the survivor or legally authorized surrogate decision maker must be obtained before releasing information to law enforcement.



13

Draft Script

(exit presentation and screenshare)



FORENSIC MEDICAL PHOTOGRAPHY AND OTHER TRAINING NEEDS FOR TREATMENT HOSPITAL ED STAFF

VDH VIRGINIA DEPARTMENT OF HEALTH
To protect the health and promote the well-being of all people in Virginia.

15

Discussion from Best Practices and Processes Committee

- Observations were shared of inconsistent forensic medical photography skillsets and lack of training
- Va. Code § 32.1-162.15:4(F) requires treatment hospital ED health care providers to annually complete training on:
 - Topic of sexual assault
 - · Detection of sexual assault
 - Provision of services for survivors of sexual assault,
 - Collection of evidence
- Training shall be consistent with best practices outlined by the International Association of Forensic Nurses

VIDE OF HEALTH
To protect the health and promote the well-being of all people in Virginia.

IAFN Photography Training: Key Concepts

All populations:

- Informed consent and assent for photographs
- Who should take photographs
- Equipment/resources
- Special techniques/skills
- Follow-up photographs
- Quality assurance for photos
- · Abuse involving images
- Integrity of images
- Maintenance and release of photographs
- · Legal issues in photography

Pediatric:

 Photography or video as a standard of care with prepubescent child sexual abuse

National Training Standards for Sexual Assault Medical Forensic Examiners. U.S. Department of Justice Office on Violence Against Women, Aug. 2018, https://cdn.ymaws.com/www.safeta.org/resource/resmgr/docs/training_sexual



17

IAFN Photography Training: Protocol Content

All populations:

- Procedure
- Confidentiality issues
- Storage and release

Adolescent/adult:

- Informed consent
- Confidentiality
- Photography

Pediatric:

- Consent and assent
- Photodocumentation
- Confidentiality and release of information

National Training Standards for Sexual Assault Medical Forensic Examiners. U.S. Department of Justice Office on Violence Against Women, Aug. 2018, https://cdn.ymaws.com/www.safeta.org/resource/resmgr/docs/training_sexualassaultforens.pdf.



IAFN Photography Training: Outcomes

All populations:

- Demonstrate an understanding of consent, storage, confidentiality and the appropriate release and use of photographs taken during the medical forensic examination
- Recognize the need for consistent peer review of photographs to ensure quality and accurate interpretation of photographic findings
- Demonstrate an understanding of the impact of abuse involving photography/images on a patient's experience with photodocumentation
- Understand potential legal issues related to photography (e.g., use of filters, alterations to images, use of unauthorized camera equipment such as personal cell phones or law enforcement's camera)

National Training Standards for Sexual Assault Medical Forensic Examiners. U.S. Department of Justice Office on Violence Against Women, Aug. 2018, https://cdn.ymaws.com/www.safeta.org/resource/resmgr/docs/training_sexual

19

IAFN Photography Training: Cultural and Accessibility Considerations

All populations:

- Explanation of photography in a culturally and developmentally appropriate manner
- Ways in which culture may influence patients' decisions regarding photography
- Impact of use of photos in abuse/assault history (current or past) and its impact on patient's willingness to participate in photodocumentation
- Informed consent and assent for photographs using culturally and developmentally appropriate processes
- Use of communication aids or language assistance during photography to ensure informed consent is obtained prior to photographs

National Training Standards for Sexual Assault Medical Forensic Examiners. U.S. Department of Justice Office on Violence Against Women, Aug. 2018, https://cdn.ymaws.com/www.safeta.org/resource/resmgr/docs/training_sexualassaultforens.pdf.



