

I. Introduction

The SANE Board is established to regulate sexual assault nurse examiners (SANEs) in Vermont, and oversee the Vermont SANE Program. The SANE Board shall set standards for and provide Vermont certification of SANEs and Pediatric SANEs, and may investigate complaints and revoke such certification. The Board shall be composed of the members set forth in 33 V.S.A. § 322 (b).

The purpose of the Vermont SANE Program is to ensure that adult, adolescent and child victims of sexual assault have access to quality sexual assault examinations provided by certified SANEs and Pediatric SANEs by: promoting recruitment and retention of SANEs and Pediatric SANEs; administering the Vermont certification and re-certification process; coordinating initial training and continuing education to ensure currency of practice; providing consultation to SANEs, Pediatric SANEs and hospitals; developing standardized sexual assault protocols and evidence collection kits; monitoring compliance with standards of practice; developing a process for referral of complaints for investigation; and promoting a multidisciplinary team approach to services for victims of sexual assault.

Staffing for the Vermont SANE Program shall be funded through a grant from the Vermont Center for Crime Victim Services to the Vermont Network Against Domestic and Sexual Violence, subject to available funding. Funding from other sources also may be used to support additional staff and activities of the Vermont SANE Program.

II. Definitions

- A. Board. SANE Board established to regulate SANEs and Pediatric SANEs and to oversee the Vermont SANE Program.
- B. Certification. Specialized requirements for SANEs and Pediatric SANEs practicing in Vermont.
- C. Contact Hour. Sixty (60) minutes of education for purposes of Vermont certification and re-certification.
- D. IAFN. International Association of Forensic Nurses.
- E. Pediatric. Females who are pre-menarcheal or males who are pre-stage three (3) on the Tanner Classification of sexual maturity.
- F. Pediatric SANE. SANE, with additional specialized training, who has Vermont certification to serve as the principal sexual assault examiner for pediatric patients. Certification in Vermont as a Pediatric SANE is not equivalent to IAFN certification as a SANE-P.

- G. SANE. Sexual Assault Nurse Examiner with Vermont certification to serve as the principal sexual assault examiner for adults and adolescents. Certification in Vermont as a SANE is not equivalent to IAFN certification as a SANE-A.
- H. Quorum. At least fifty (50) percent of the members of the Board or a Standing Committee.

III. Staff of Vermont SANE Program

- A. Staff. The Vermont Network Against Domestic and Sexual Violence shall contract with one or more individuals to carry out the responsibilities of the Clinical Coordinator and the administration of the Vermont SANE Program. These positions shall be funded under a grant from the Vermont Center for Crime Victim Services, subject to available funding. Funding from other sources also may be used to support staff of the Vermont SANE Program.
- B. Responsibilities. In consultation with the Board, staff shall be responsible for:
 - 1. Recruitment and retention of SANEs and Pediatric SANEs;
 - 2. Administration and coordination of statewide training, including education for certification of SANEs and Pediatric SANEs, and ongoing training to ensure currency of practice and advanced training;
 - 3. Administration of procedures for Vermont certification and re-certification of SANEs and Pediatric SANEs;
 - 4. Development of forms for implementation of the Vermont SANE Program;
 - 5. Modification of sexual assault examination protocols and the sexual assault evidence collection kit;
 - 6. Consultation to SANEs, Pediatric SANEs and hospitals;
 - 7. Training and outreach to criminal justice and other community-based organizations;
 - 8. Monitoring and quality assurance; and
 - 9. Staffing the Board, standing and ad hoc committees.

IV. SANE Board

- A. Officers. The Board shall select two (2) co-chairs from among its members. The co-chairs shall serve for a term of two (2) years and may serve more than one (1) term.
- B. Standing Committees. The Board shall establish the following standing committees from among its members, and may establish additional standing committees as needed to carry out its responsibilities.
1. The Education Committee shall be responsible for:
 - a. Providing guidance, support and oversight to the Clinical Coordinator for initial and continuing SANE and Pediatric SANE training; and
 - b. Making recommendations to the Board for updates to educational requirements for certification and re-certification of SANEs and Pediatric SANEs;
 2. The Certification Committee shall be responsible for:
 - a. Reviewing applications for certification and re-certification of SANEs and Pediatric SANEs:
 - b. Making recommendations to the Board regarding:
 - i. Applications for certification and re-certification of SANEs and Pediatric SANEs;
 - ii. Certification and re-certification requirements, other than training; and
 - iii. Procedures relating to certification and re-certification, and revocation of such certification.
- C. Ad Hoc Committees. The Board may also establish ad hoc committees to assist it in carrying out its responsibilities. Ad hoc committees may include both members of the Board and others with relevant expertise.

V. Vermont Certification of SANEs and Pediatric SANEs

- A. General Requirements. Applicants for certification as a SANE or Pediatric SANE shall submit the following documentation with their applications:

1. An active Vermont license to practice as a registered nurse;
 2. Practice as a registered nurse or an advanced practice nurse for a minimum of eighteen (18) months;
 3. Successful completion of the educational requirements in Section V.B. or V.B. and C.; and
 4. A positive recommendation from an immediate supervisor at the facility where the applicant has practiced or will practice.
- B. Educational Requirements for SANE. Applicants for SANE certification must successfully complete the following didactic component and clinical preceptorship.
1. Didactic Component
 - a. The didactic component shall consist of forty (40) contact hours of education that covers the target topics for adult/adolescent didactic content of the Sexual Assault Nurse Examiner Adult/Adolescent Education Guidelines of the IAFN, as revised from time to time.
 - b. Training for the didactic component shall be coordinated and sponsored by the Vermont SANE Program. Training that is not sponsored by the Vermont SANE Program or the IAFN must be approved by the Clinical Coordinator to count toward the forty (40) contact hours of education.
 - c. Successful completion of the didactic component shall be documented by a certificate from the training entity for each class.
 - d. Trainers for the didactic component coordinated and sponsored by the Vermont SANE Program shall include:
 - i. SANEs who have successfully completed the didactic and clinical requirements of the Vermont SANE Program or the IAFN, obtained continuing education to remain current in the practice of adult/adolescent SANE, and demonstrated expertise in the practice of adult/adolescent SANE, or have been approved by the Clinical Coordinator as possessing comparable qualifications; and
 - ii. Multi-disciplinary representatives such as advocates, attorneys, law enforcement, prosecutors, Department for

Children and Families staff, Adult Protective Services staff, Child Advocacy Center staff, forensic scientists and specialized health care professionals.

2. Clinical Preceptorship

- a. The clinical preceptorship shall be completed after successful completion of the didactic component.
- b. The clinical preceptorship shall include the following, all of which shall be mastered to competency as determined and documented by the preceptor:
 - i. Pelvic examinations;
 - ii. Forensic medical examinations, using simulation, if necessary; and
 - iii. Evidence collection using the standardized sexual assault protocol and standardized sexual assault evidence collection kit.
- c. Preceptorships shall be completed under the supervision of a physician, a physician's assistant, an advanced practice nurse or a SANE with experience in the procedure to be mastered.

C. Educational Requirements for Pediatric SANE. Applicants for certification as a Pediatric SANE must successfully complete the following didactic component and clinical preceptorship, which shall be in addition to the educational requirements in Sections V.B.1 and 2.

1. Pediatric Didactic Component

- a. The pediatric didactic component shall be completed after successful completion of the adult/adolescent SANE didactic component. The pediatric didactic component shall consist of twenty-four (24) contact hours of education that cover the target topics for didactic content of the Sexual Assault Nurse Examiner Pediatric Education Guidelines of the IAFN, as revised from time to time.
- b. Training for the pediatric didactic component shall be coordinated and sponsored by the Vermont SANE Program. Training that is not sponsored by the Vermont SANE Program or the IAFN must be

approved by the Clinical Coordinator to count toward the twenty-four (24) contact hours of education.

- c. Successful completion of the pediatric didactic component shall be documented by a certificate from the training entity for each class.
- d. Trainers for the pediatric didactic component shall include:
 - i. SANEs and Pediatric SANEs who have successfully completed the adult/adolescent and pediatric didactic and clinical requirements of the Vermont SANE Program or IAFN, obtained continuing education to remain current in the practice of adult/adolescent SANE and pediatric SANE, and demonstrated expertise in the practice of adult/adolescent and pediatric SANE, or have been approved by the Clinical Coordinator as possessing comparable qualifications; and
 - ii. Multi-disciplinary representatives such as advocates, attorneys, law enforcement, prosecutors, Department for Children and Families staff, Adult Protective Services staff, Child Advocacy Center staff, forensic scientists and specialized health care professionals.

2. Pediatric Clinical Preceptorship

- a. The pediatric clinical preceptorship shall be completed after successful completion of the pediatric didactic component and the adult/adolescent SANE preceptorship.
- b. The pediatric clinical preceptorship shall include the following, all of which shall be mastered to competency as determined and documented by the preceptor:
 - i. Pediatric patient assessment from all pediatric age categories, covering growth and development, normal anatomy and physiology, head-to-toe examination, detailed genital inspection; and
 - ii. Comprehensive care of pediatric sexual assault/abuse patients, including completion of sexual assault/abuse medical forensic examinations and sexual assault examination kits, and psychosocial assessment.

- c. Preceptorships shall be completed under the supervision of a physician, a physician's assistant, an advanced practice nurse or a SANE with experience in the procedure to be mastered.

VI. Certification of SANE or Pediatric SANE Practicing in Vermont as of Effective Date of the Rule

- A. Certification. A person who practiced as a SANE or Pediatric SANE in Vermont as of the effective date of the rules shall be granted certification as of the effective date of the rules, if she/he meets:
 1. The general requirements in Sections V.A.1., 2. and 4.; and
 2. Didactic and clinical educational requirements comparable to those in Section V. B. for a SANE or Sections V. B. and C. for a Pediatric SANE, as evaluated by the Clinical Coordinator.
- B. Re-Certification. A SANE or Pediatric SANE certified under this Section shall be subject to the re-certification requirements of Section VIII.

VII. Certification of SANE or Pediatric SANE Practicing in Other States

- A. Certification. A person who has practiced in another state as a SANE or a Pediatric SANE or in a program with comparable qualifications and functions shall be granted SANE or Pediatric SANE certification if she/he:
 1. Meets the general requirements in Sections V.A.1., 2. and 4;
 2. Meets didactic and clinical educational requirements comparable to those in Section V. B. for a SANE or Sections V. B and C. for a Pediatric SANE, as evaluated by the Clinical Coordinator;
 3. Is certified in good standing as a SANE or Pediatric SANE or under a program with comparable qualifications and functions in the state where she/he practiced, if certification is available in that state;
 4. Documents SANE or Pediatric SANE or comparable continuing education completed in the past two years; and
 5. Agrees to obtain a minimum of four (4) contact hours of education on Vermont's sexual assault laws within one year of Vermont certification.
- B. Re-Certification. A SANE or Pediatric SANE certified under this Section shall be subject to the re-certification requirements of Section VIII.

VIII. Re-Certification of SANEs and Pediatric SANEs

- A. Application for Re-Certification. A certified SANE or Pediatric SANE shall apply for re-certification every two (2) years from the year of initial certification under Section V., VI. or VII.
1. The re-certification date for all SANEs and Pediatric SANEs shall be September 1.
 2. Documentation that a SANE or Pediatric SANE has fulfilled the re-certification requirements of Section VIII. B. shall be submitted with the application for re-certification.
- B. Re-Certification Requirements. To be re-certified, the SANE or Pediatric SANE shall:
1. Perform at least one (1) sexual assault examination per year and a total of four (4) sexual assault examinations over a period of two (2) years. For a Pediatric SANE, at least one (1) of the four (4) examinations shall be a pediatric sexual assault examination. If the SANE or Pediatric SANE does not have the opportunity to perform at least one (1) sexual assault examination per year or four (4) sexual assault examinations over a period of two (2) years, simulated sexual assault examinations may be substituted to meet this requirement;
 2. Maintain a log of the sexual assault examinations performed over the two (2) year re-certification period;
 3. Maintain an active Vermont license to practice as a registered nurse;
 4. Participate in peer review of sexual assault cases at least once per year. For a Pediatric SANE, the peer review shall be of pediatric sexual assault cases.
 5. Submit a positive recommendation from an immediate supervisor at the facility where the SANE or Pediatric SANE practices; and
 6. Complete a minimum of twelve (12) contact hours of continuing education, at least six (6) of which shall be at in-person events. Continuing education shall include:
 - a. Eight (8) contact hours on the needs of adult/adolescent or pediatric sexual assault patients, as applicable, and the role of the

SANE or Pediatric SANE. At least four (4) of these contact hours shall relate directly to sexual assault and nursing practice; and

- b. Four (4) contact hours on Vermont's sexual assault laws and/or criminal justice system.
- C. Sources of Continuing Education. Sources of continuing education may include conferences, courses and trainings, peer reviews, and regional meetings sponsored by state, national, regional and local organizations whose mission is related to sexual assault prevention, response, care or advocacy. These may include presentations by video, podcast, and other telephonic and electronic formats.
- D. Continuing Education Hours for Presenters. A SANE or Pediatric SANE who serves as a presenter at a conference, course or training sponsored by a state, national, regional or local organization whose mission is related to sexual assault prevention, response, care or advocacy may count each hour of presentation toward fulfillment of the continuing education requirement in Section VIII.B.6.

IX. Lapse in Certification

- A. Lapse of Two (2) Years or Less. A SANE or Pediatric SANE with a lapse in re-certification for a period of two (2) years or less from the date of required re-certification under Section VIII A. may apply for re-certification. Documentation that a SANE or Pediatric SANE has fulfilled the following requirements shall be submitted with the application for re-certification:
 1. Perform at least one (1) sexual assault examination per year and a total of four (4) sexual assault examinations over the period of two (2) years prior to the date of application for re-certification under Section IX. A. For a Pediatric SANE, at least one (1) of the four (4) examinations shall be a pediatric sexual assault examination. If the SANE or Pediatric SANE does not have the opportunity to perform at least one (1) sexual assault examination per year or four (4) sexual assault examinations over the period of two (2) years, simulated sexual assault examinations may be substituted to meet this requirement;
 2. Maintain a log of the sexual assault examinations performed over the period of two (2) years prior to the date of application for re-certification under Section IX. A.;
 3. Maintain an active Vermont license to practice as a registered nurse;

4. Participate in at least two (2) peer reviews of sexual assault cases over the period of two (2) years prior to the date of application for re-certification under Section IX. A. For a Pediatric SANE, the peer reviews shall be of pediatric sexual assault cases;
 5. Submit a positive recommendation from an immediate supervisor at the facility where the SANE or Pediatric SANE practiced or intends to practice; and
 6. Complete a minimum of twelve (12) contact hours of continuing education over the period of two (2) years prior to the date of application for re-certification under Section IX. A., at least six (6) of which shall be at in-person events. Continuing education shall include:
 - a. Eight (8) contact hours on the needs of adult/adolescent or pediatric sexual assault patients, as applicable, and the role of the SANE or Pediatric SANE. At least four (4) of these contact hours shall relate directly to sexual assault and nursing practice; and
 - b. Four (4) contact hours on Vermont's sexual assault laws.
- B. Lapse of More Than Two (2) Years. A SANE or Pediatric SANE with a lapse in re-certification for a period of more than two (2) years from the date of required re-certification under Section VIII. A. may apply for Vermont certification under Section V.

X. Denial of Application for Certification or Re-Certification

- A. Written Notice. When the Certification Committee recommends that an application for certification or re-certification be denied, the SANE Program shall send written notice of the recommendation to the applicant. The notice shall include a statement of the specific reasons for the recommendation, and the location, date and time of the SANE Board meeting at which a decision on the recommendation will be made. The applicant shall be afforded the opportunity to attend the Board meeting and be heard.
- B. Decision of SANE Board. A decision to deny certification or re-certification only shall be made if there is a quorum of the Board present, and at least sixty-six (66) percent of those present vote for denial of Vermont certification or re-certification. The decision shall state the specific reasons for the denial of certification or re-certification and the Board's conclusion.

- C. Notice of Decision. The SANE Board shall provide the SANE or Pediatric SANE with written notice of the decision including the specific reasons for denial of certification or re-certification, and notice of her/his appeal rights under Section XV.
- D. Finality of Decision. The decision of the SANE Board shall be final unless appealed under Section XV.

XI. Standardized Sexual Assault Protocol and Evidence Collection Kit

- A. Standardized Sexual Assault Protocol. The Vermont SANE Program shall use the National Protocol for Sexual Assault Medical Forensic Examinations of the U.S. Department of Justice, Office of Violence Against Women, as amended from time to time. SANEs and Pediatric SANEs shall use and be trained in the standardized sexual assault protocol.
- B. Standardized Sexual Assault Evidence Collection Kit. The Vermont SANE Program shall use the STATE OF VERMONT Sexual Assault Evidence Collection Kit, VT200, manufactured by Sirchie Fingerprint Laboratories, Inc. Youngsville, NC, as modified from time to time. SANEs and Pediatric SANEs shall use and be trained in the standardized sexual assault evidence collection kit.

XII. Monitoring and Quality Assurance

- A. Currency of Practice. The Vermont SANE Program shall compile and disseminate information on Vermont and national training events to ensure currency of practice and to provide opportunities for continuing education and advanced training.
- B. Regional Meetings. The Clinical Coordinator shall hold periodic regional SANE meetings to:
 - 1. Provide a forum for SANE and Pediatric SANE peer support;
 - 2. Update SANEs and Pediatric SANEs on best practices and changes to the standardized sexual assault protocol and sexual assault evidence collection kit;
 - 3. Address systemic issues and problems that arise from monitoring of sexual assault evidence collection kits and other quality assurance activities;
 - 4. Strengthen regional multidisciplinary teams;
 - 5. Address other issues relevant to SANE and Pediatric SANE practice, and

6. Gather input from the SANEs and Pediatric SANEs to inform the Board and its committees regarding the effective functioning of the SANE Program.
- C. Feedback on Sexual Assault Evidence Collection Kits. Using feedback from the Vermont Forensic Laboratory on completed sexual assault evidence collection kits, the Clinical Coordinator shall:
1. Provide feedback to SANEs and Pediatric SANEs on systemic problems identified by the Laboratory; and
 2. Work individually with SANEs and Pediatric SANEs for whom there are ongoing issues identified by the Laboratory.
- D. Consultation to SANEs, Pediatric SANEs and Hospitals.
1. The Clinical Coordinator shall provide consultation to a SANE, Pediatric SANE or hospital as problems are identified. The Clinical Coordinator may visit the hospital at the request of the SANE or Pediatric SANE, the immediate supervisor, or to address problems that come to the Clinical Coordinator's attention.
 2. The Clinical Coordinator shall identify steps to remediate areas requiring improvement, with input from the SANE, Pediatric SANE and the immediate supervisor.
- E. Concerns of Multidisciplinary Team Members. Multidisciplinary team members may convey concerns about a SANE, Pediatric SANE or hospital to the Clinical Coordinator. The Clinical Coordinator may take steps to follow-up on concerns from multidisciplinary team members, including but not limited to following the procedures in Sections XII. D.
- F. Complaints Arising from Monitoring and Quality Assurance. The Clinical Coordinator shall file a complaint with the Vermont Board of Nursing pursuant to Section XIII. A. when:
1. A SANE or Pediatric SANE fails to remedy ongoing issues identified by the Vermont Forensic Laboratory with completion of the standardized sexual assault evidence collection kit; or
 2. A SANE or Pediatric SANE fails to take steps to remediate areas requiring improvement as identified under Section XII.D.2.

XIII. Complaints**A. Filing Complaints**

1. All complaints regarding a SANE or Pediatric SANE shall be made to the Vermont Board of Nursing for investigation of unprofessional conduct pursuant to 3 V.S.A. §129a and 26 V.S.A. § 1582 and Vermont Board of Nursing Administrative Rules, Chapter 4, Subchapter 4. If a complaint is received by the Vermont SANE Program regarding a SANE or Pediatric SANE, the SANE Program shall forward the complaint to the Vermont Board of Nursing, and provide written notice of this action to the SANE or Pediatric SANE and the complainant.
2. Complaints may be made on forms provided by the Vermont Office of Professional Regulation, Vermont SANE Program or hospital, or in writing, in person, by telephone or email.

B. Experts. The Clinical Coordinator shall maintain a roster of SANEs and Pediatric SANEs available to serve as experts in Vermont Board of Nursing investigations of complaints regarding a SANE or Pediatric SANE.

C. Obligation of SANE or Pediatric SANE to Inform SANE Board

1. A SANE or Pediatric SANE shall inform the SANE Program immediately when a complaint has been filed against her/him with the Vermont Board of Nursing.
2. A SANE or Pediatric SANE shall inform the SANE Program immediately when a complaint to the Vermont Board of Nursing results in disciplinary action against her/him, including but not limited to a warning or reprimand, or conditioning, suspension or revocation of her/his nursing license.

XIV. Disciplinary Action by Vermont Board of Nursing: Effect on Certification

- A. Revocation of Certification. The certification of a SANE or Pediatric SANE shall be summarily revoked by the SANE Board when her/his nursing license has been revoked, suspended or summarily suspended by the Vermont Board of Nursing.
- B. Notice. The SANE Board shall provide the SANE or Pediatric SANE with written notice of the summary revocation, including the specific reasons for summary revocation and notice of her/his appeal rights under Section XV.

- C. Finality of Decision. A summary revocation shall constitute a final decision of the SANE Board unless appealed under Section XV.
- D. Application for Re-Certification. The SANE or Pediatric SANE may apply for re-certification at such time as her/his nursing license has been reinstated by the Vermont Board of Nursing.

XV. Appeals

A final decision of the SANE Board regarding denial of certification or re-certification, or revocation of certification may be appealed to the Vermont Supreme Court under 3.V.S.A § 815.