

STATEWIDE SANE/FN DATABASES

A Statewide Sexual Assault Nurse Examiners (SANE)/Forensic Nurses (FN) Database is a central location for the storage of specific information related to SANEs/FNs conducting medical forensic examinations in a particular state. These databases may look very different from state to state due to varying objectives in collecting and evaluating this information. Defining the purpose and need for a database will inform the types of information housed in the database. The benefits of tracking this specific information in a central location include identifying the location of SANEs/FNs providing medical forensic examinations within the state, tracking educational data of nurses, addressing quality improvement, ensuring easy access to data for reporting or legislative needs, and many others. Additionally, tracking information about SANEs/FNs is beneficial to improve patient care through evaluating and improving SANE/FN education, locations, numbers, etc. When we support SANEs/FNs, we improve medical forensic care being provided and create healthier states.

There are many considerations and decisions to be made when determining the need for and development of a Statewide SANE/FN Database. This resource is intended to assist in that process. Some states have already established their own databases, with most containing demographic information of SANEs/FNs, state level education and training information, and administrative information. This resource will assist in determining the information a state may want to include in their database.

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This document was supported by Grant No. 15JOVW-23-GK-05172-MUMU awarded by the Office on Violence Against Women, U.S. Department of Justice. The opinions, findings, conclusions, and recommendations expressed in this presentation are those of the author(s) and do not necessarily reflect the views of the U.S. Department of Justice.



QUESTIONS TO CONSIDER BEFORE CREATING A STATEWIDE DATABASE

- What are the objectives in the creation and maintenance of a database?
- Will the database track nurses that are currently practicing or all nurses that have been trained as SANEs/FNs?
- What key information will be tracked within the database?
 - Nurses' info
 - o Contact/demographic
 - o Licensure
 - Certifications/state specific credentialing
 - o Background check
 - o Liability insurance
 - Immunizations
 - Program info

- Education (tracking/requirements)
 - o Tracking completed education
 - State required
- Research
- How nurses are getting training
 - State level
 - On their own
 - Within their program
- 4 Are there any state laws or regulations that could impact the database?
 - State legislation on sexual assault, medical forensic exams, SANEs/FNs
 - Evidence kit tracking legislation impacting which/when/how evidence kits are tracked
 - HIPAA
 - Employee rights
 - Confidentiality
 - o If data is used for research, there must be confidentiality of demographic identifiers. If there are a small number of SANEs/FNs in a region, the data may need to be summarized or otherwise deidentified.
 - Relationship with State Board of Nursing
 - Requirements if professional misconduct of a nurse is reported

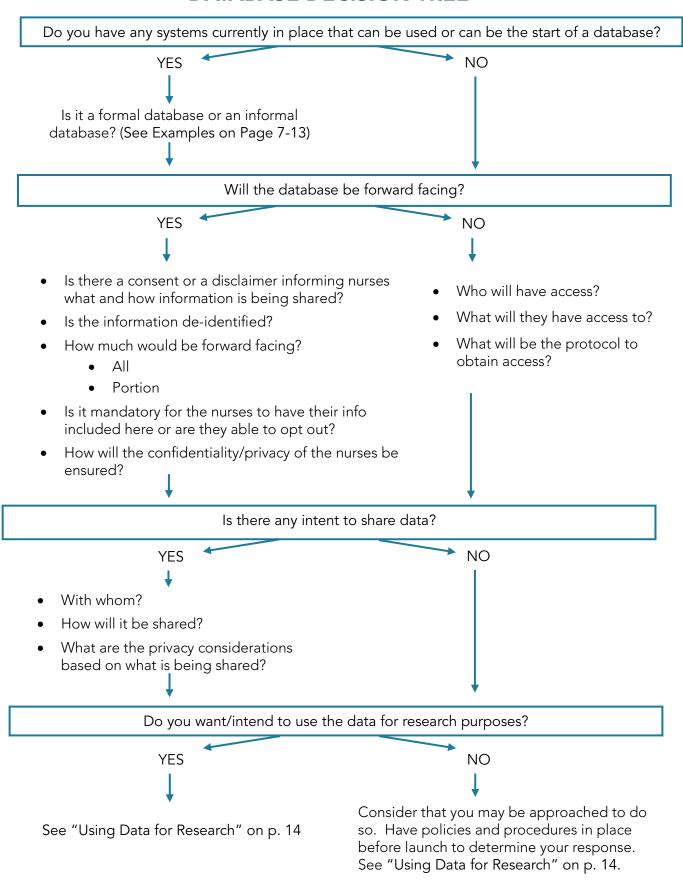


5 How will the database be funded?

- Is this a continuous stream of funding?
- Is there a possibility that the dedicated funding amount may fluctuate annually?
- Is your source of funding reliable?
- Do you have a budget for the database?
- Is your current budget only to fund the initial buildout or will it also support maintenance of the database? (See section on associated costs for maintenance below)
- 6 Who is responsible for making decisions around the database?
- 7 Who will be involved with the buildout?
- 8 Who will maintain the database?
 - What are the associated costs of maintenance?
 - o Training, support, and implementation
 - o Additional staff
 - Maintenance fees
 - If using data for research, is this the same individual who will be responsible for confirming data validity and reliability?
- 9 How often will the database be updated?
- How will the database be sustained and who (person, organization, agency) is responsible for sustaining?



DATABASE DECISION TREE





ADVANTAGES AND CHALLENGES OF DATABASE TYPES

FORMAL DATABASES			
	ADVANTAGES	CHALLENGES	
Statewide Electronic Medical Records	 Allows for data abstraction Simple information tracking Allows for quality improvement through peer review Can provide useful information about patient populations and resource use Allows for long-term storage of records beyond the legal 7-year requirement for medical records. 	 Might be hard to obtain buy-in from non-clinician users Expensive: requires both software and manpower support Need for cyber liability insurance Cost of insurance Cost of storage Not appropriate for tracking nursing education 	
Evidence Kit Tracking	 All clinicians must use system Removal of inactive users is simple Simple information tracking Allows for data abstraction If there is state legislation, it meets the requirement for the use of an evidence kit tracking system 	 More time intensive for administrative users Expensive 	
Data Management System (Web Application Based)	 All clinicians must use system Access is limited to administrative personnel. Customizable to meet the needs of the state Simple information tracking - many fields but easy to pull report Allows for Data Abstraction- Data can be pulled spreadsheets or other files Automated Reminders- quick search can show how many expired credentials and ability to change/update the time frame within the system 	 Time intensive to maintain More time intensive for administrative users May be limited to the number of users able to access the system Difficult to add additional data fields and may require an additional cost to add after the initial buildout. 	



INFORMAL DATABASES			
	ADVANTAGES	CHALLENGES	
Spreadsheets	 Low-cost and easy to implement Customizable to fit specific data needs Can support basic reporting and analysis Familiar interface for many users Simple information tracking Data stored can be easily filtered, sorted, and analyzed to identify trends, generate reports, or support quality improvement initiatives Inexpensive Data collected can be exported to more advanced database platforms when time and funding allow for such transition 	 Time intensive to maintain Not ideal for large-scale or real-time data collection Prone to data entry errors without strong validation Requires manual updates and oversight Limited automation and integration options 	
Project Management System (Web Based)	 All clinicians must use system Simple information tracking Allows for Data Abstraction Automated Reminders Can be shared Files can be uploaded Streamlines tracking and coordination. Can automate reminders for credentialing, training, and compliance needs. Supports secure file storage and access. Provides customization options to fit state-specific needs. 	 Time intensive to maintain Expensive Privacy concerns if made forward facing 	



FORMAL DATABASE EXAMPLES

Statewide Electronic Medical Record (EMR)

The use of a Statewide Forensic Electronic Medical Record, or other electronic health record, provides secure access to medical forensic records and information about care provided during medical forensic exams. If all programs and facilities in a state are required to house a state-administered EMR, patient numbers and types of care utilization across the state can be tracked. While the electronic medical record may not have the capability to record nurse education, it can allow tracking of how many nurses are practicing in the state through system registration.

Considerations for the buildout:

- o Need to have single documentation forms for the state
- Need to have buy-in from hospitals with existing electronic medical records
- HIPAA compliance
- Cyber liability insurance
- o Option to create own system or purchase the system from a vendor

Considerations for maintaining the statewide EMR:

- Must have a plan for updating records as needed
- o Collaboration with stakeholders such as the crime lab and law enforcement

Type of Info that can be collected and stored:

- System users
- Secure photograph storage
- Healthcare utilization

• Funding considerations:

- o Ongoing stable funding
- o Annual cyber liability insurance

• Data sharing capabilities:

o Secure transfer of information to crime lab and law enforcement

Regulatory considerations:

HIPAA compliance (EMR is a medical record)



Evidence Kit Tracking System

The evidence kit tracking system can be configured to allow secure tracking of evidence collection kits as they move through the criminal justice system and for the tracking of clinicians that enter kits into the system. The use of this type of system as a database allows for simple data abstraction regarding the number of clinicians using the system. While not solely intended for utilization as a SANE/FN database, the data housed within the Evidence Kit Tracking System can be used for this purpose.

Considerations for the buildout:

- o Requires state level user management
- Several technology and security related decisions with workflow and financial impacts to resolve
- Option to create your own system or purchase one from a vendor, although modifications may need to be made to meet the needs of the state if purchasing a preconfigured system from a vendor

• Considerations for maintenance:

o Additional FTEs may need to be hired to complete ongoing maintenance

Type of Info that can be collected: (depending on set-up)

- Number nurses practicing as SANEs/FNs
- o Programs/sites that provide medical forensic exams

Funding considerations:

Requires ongoing stable funding

Data sharing capabilities:

o Reports can be exported and easily shared

Legislation considerations

- Legislative requirement for use of the system
- o Law enforcement, employment, or healthcare privacy laws that impact data collection
 - Any requirements for liability insurance in case of a breach



Data Management System (Web Application-Based)

A web application-based data management system can be utilized as a centrally operated repository for information and data collection. Depending on the type of application utilized, the application can be built to fit user specifications and needs for information storage, data collection, and report building. A web application-based database may contain information about credentialling, training, demographics, and other data that may be relevant to track.

Considerations for the buildout

- o Need for legal approval prior to implementation
- o System used in other areas of the department
- o Ensure that all areas of data have been identified prior to build out
- o Work directly with a developer for the buildout

Considerations for maintenance

- o Platform is maintained and monitored by operations staff.
- o Reports can be pulled at scheduled intervals.
- o System is an application and is not web-based. Considerations for updates.

Type of Info that can be collected:

- o Nurses' contact/demographic Information
- Training Information
- Credentialling Information

Data sharing capabilities

o Reports can be generated easily and shared.



INFORMAL DATABASE EXAMPLES

Spreadsheets

A program that generates spreadsheets to house information collected from SANEs/FNs is a costeffective and readily accessible way to maintain a statewide database. These tools are widely available, easy to use, and can serve as a practical starting point for data collection efforts, especially when resources for more advanced systems are limited. Spreadsheets and databases can be tailored to collect a wide range of information.

These platforms allow for customizable fields, dropdown menus, and data validation to improve accuracy and consistency. These tools can serve as a foundation for building a more formal or large-scale database system in the future.

• Considerations for the buildout:

- Determine key data elements to collect
- o Standardize field names and formats for consistency
- Use data validation and dropdown menus to reduce entry errors
- o Storage/back up storage

Considerations for maintenance:

- Assign responsibility for regular data entry and updates
- o Perform routine data cleaning and error checking
- Back up files regularly to prevent data loss
- Document procedures for data handling and updates

• Type of Info that can be collected:

- o Training records
- o Clinician contact/demographics
- Clinician credentialing
- o Employment information
- o Designated mentor

Funding considerations:

- Low-cost options
- Minimal hardware needs (basic computers)
- Limited need for IT support if templates are user-friendly
- Cost of staff time required for system management, data entry, and regularly maintaining the database

Data sharing capabilities:

- o Files can be shared via secure email, cloud storage, or external drives
- Access can be restricted with password protection and permissions



- o Compatible with many formats for easy export/import to other systems
- o Sharing can be controlled to monitor how much or how little information is provided

• Regulatory consideration:

- o Must comply with HIPAA if identifiable health information is stored
- o Ensure secure access protocols
- o May require encryption or secure platforms for file sharing
- o Understand data retention and confidentiality laws related to sexual assault cases

• Legislation considerations:

- o Be aware of any state-level data reporting mandates
- o Align data elements with legislative or grant reporting requirements



Project Management System (Web Based)

A web-based project management system can function as an information and/or formal database for tracking and organizing information related to SANEs/FNs. This type of platform allows for centralized data storage and accessibility while offering various workflow and automation tools that support data management and coordination.

Considerations for the buildout

- o Requires initial setup, including defining data fields, user roles, and permissions.
- o May offer integrations with other platforms for expanded functionality.
- o Ability to customize structure based on program needs.

Considerations for maintenance

- o Ongoing management is required to ensure data accuracy and functionality.
- o User access must be regularly reviewed and updated.
- o Periodic adjustments may be necessary as program needs evolve.

• Type of Info that can be collected:

- o Clinician demographic and credentialing data.
- Training and continuing education records.
- o Program participation and activity tracking.
- o Administrative records related to forensic nursing practice.

Funding considerations

- Costs vary depending on the platform and the level of customization needed.
- o Subscription-based pricing may require ongoing budget allocation.
- o Some platforms offer tiered pricing with different feature sets.
- o Some platforms may offer non-profit discounts for qualifying organizations/bodies.

Data sharing capabilities

- Can allow for collaboration across agencies, depending on user permissions and technologies utilized.
- Supports secure file sharing and documentation uploads.
- May offer export options for reporting and analysis.

Regulatory considerations:

- HIPAA Compliance- If storing personally identifiable information or protected health information, the platform must meet security and privacy standards.
- Data Security & Access Control- Role-based access must be established to ensure only authorized personnel can view or edit sensitive data.
- o Confidentiality Protections- If forward-facing, policies must be in place to protect clinician privacy and limit data exposure.



• Legislation considerations:

- State Legislation specific to SANEs/FNs- Some states may have laws governing the credentialing, oversight, or tracking of SANEs/FNs, which could impact database structure and requirements.
- o Kit Tracking Laws- If integrated with evidence collection kit tracking, compliance with existing state forensic evidence laws may be necessary.
- o Mandated Reporting Requirements- If the system is used to track clinical or case data, it must align with any applicable state or federal reporting mandates.



USING DATA FOR RESEARCH

Using data for research is only an option if the data is valid and reliable. Additional questions to consider when creating a statewide database include:

- Who is responsible confirming data validity and ensuring that it is reliable data?
- Have you defined who will input the data into the database?
- Have you defined which nurses will be included in the database? (Tracking of nurses actively practicing as SANEs/FNs is most useful for research.)
- If comparing data state to state, the data may not be comparable based on the program and configuration of the states' databases.
- Will there be comparison of state policies and legislation that define and address sexual assault, medical forensic exams, and funding mechanisms?
- Will there be reflection on the number of SANEs/FNs within the state?
- Will there be reflection on the varying methods and sources of education of the SANEs/FNs and how that impacts the number of practicing SANEs/FNs?
- Will there be comparison of the findings of the state database to the data in the most current National GAO report?
- Is state or national level funding being received?



- Will there be comparison of trends and growths of programs/ SANEs/FNs across the state?
- Will there be comparison of trends and growths of programs across the state that have expanded services?
- Will there be comparison of the number of SANEs/FNs/FN Programs and the sexual assault case prosecution outcomes through toolkits such as the <u>National Institute of Justice SANE Practitioner</u> <u>Evaluation Toolkit?</u>



Will there be comparison of the data for trends in the growth or decrease of SANEs/FNs across the state?