





Hospitals and Clinics Administration

ENTERPRISE # 6750-024

COUNTY PACKAGE PROPOSAL February 21, 2024

DATE: XXX, 2023						
TO:	Enterprise Workforce	☐ Contrac	etors Only			
☐ Site S	Specific Workforce	☐ Medica	l Staff Only			
⊠ Depa	ertment Specific	□ Volunte	eers Only			
FROM: Paul E. Lorenz, Chief Executive Officer, Enterprise						
SUBJECT: SCVH Adult/Adolescent Sexual Assault Forensic Exam (SAFE) Program Scheduling Practices						
SCOPE: Scheduling practices apply to SAFE examiners who are active on the SCVH Adult/Adolescent SAFE program						
Location (includes hospital and all inpatient and outpatient locations and subacute facilities of the hospital, unless otherwise indicated) ⊠ Enterprise Wide						
☐ O'Connor Hospital	☐ Santa Clara Valley	-	Louise Regional Hospital			
☐ Ambulatory	☐ Subacute					
Department: SCVH Adult/Adolescent SAFE Program Who May Perform This Procedure						
□ Everyone						
⊠ RN	□ LVN	□ HSA	\square MA			
☐ Physicians/Residents	\boxtimes APPs	□ RT	☐ Pharmacist			
□ MUC	□ HSR	☐ Techs	□ Lab			

^{* &}quot;The term "Enterprise" refers to the Hospitals and Clinics of Santa Clara Valley Medical Center (SCVMC), O'Connor Hospital ("OCH"), and St. Louise Regional Hospital (SLRH) collectively, and includes all inpatient and outpatient locations and services, and subacute facilities of SCVMC, OCH, and SLRH."

☐ Radiology	☐ Other (specify)
□ Kaulology	□ Onici (Specify)

PURPOSE: To define scheduling practices for SAFE examiners, coded and per diem, who respond to provide medical evidentiary exams for the SCVH Adult/Adolescent Sexual Assault Forensic Examiner (SAFE) Program.

POLICY: This policy includes the guidelines for qualified healthcare professionals, who hold the training, expertise, and experience required under federal, state, and local guidelines, to respond and provide medical evidentiary exams as an active member of the Adult/Adolescent SAFE Program.

- SAFE Examiners are county employees, who are trained by and respond as part of the SCVH Adult/Adolescent SAFE Program, under the Adult/Adolescent SAFE Medical Director. SAFE Examiners are scheduled to respond to patients who disclose sexual assault, domestic/intimate partner violence, human trafficking, non-fatal strangulation, elder abuse, and gender-based violence, or to requests for suspect and postmortem exams.
- 2 California Penal Code §13823.9(b) requires that each county with a population of more than 100,000 shall have professional personnel trained in the examination of victims of sexual assault present or on call in the county hospital which provides emergency medical services. Additionally, those professional personnel shall comply with:
 - a. the elements specified in PC §13823.11, which outlines the minimum standards of the medical evidentiary examination and treatment of survivors of interpersonal violence, and
 - b. the protocol and guidelines adopted pursuant to PC §13823.5, which defines the qualifications and training of SAFE examiners to perform medical evidentiary examinations
- 3. In Santa Clara County, Santa Cruz, and San Benito Counties, the SCVH Adult/Adolescent Sexual Assault Forensic Exam (SAFE) Program has been designated to perform medical evidentiary exams for patients 12 years and older, following the protocol established by the California Office of Emergency Services (PC §13823.9) and the curriculum of the California Clinical Forensic Medical Training Center (CCFMTC).
- 4. The training and requirements for Adult/Adolescent medical evidentiary exams is the same for both per diem and coded SAFE staff. All trained SAFE examiners are scheduled into applicable shifts to maintain the minimum competency required for medication evidentiary exams, evidence management, and eligibility to testify when subpoenaed for cases that go to trial.
- 5. Schedule planning will follow AD-14 where applicable; however, responsibilities assigned to the Nursing Supervisor or through the Nursing Office will be managed by the SAFE Nurse Manager. Additionally, SAFE scheduling is posted outside of ANSOS/OneStaff using a program that can be made accessible to all SAFE examiners to utilize.

DEFINITIONS:

- <u>Sexual Assault Forensic Examiner (SAFE)</u>: a qualified healthcare professional who has been trained on the standardized sexual assault forensic curriculum, specified in PC sections 13823.6-13823.11, inclusive.

- <u>Medical Evidentiary Exam</u>: the examination completed by a SAFE Examiner that includes evaluation, collection, preservation, and documentation of evidence and exam results, and interpretation of findings, as described in Penal Code sections 13823.5 to 13823.11, inclusive.
- Qualified Health Care Professional: Currently licensed physician or surgeon, registered nurse, nurse practitioner, or physician assistant, defined in PC section 13823.5.
- <u>Adult/Adolescent Exam</u>: term used to define the acute medical evidentiary exam for persons 12 years and older, who can consent or decline to medical and forensic care after sexual assault (Family Code 6927-6928) and intimate partner violence (Family Code 6930).
- <u>Core Shift:</u> refers to the shift covered by (1) SAFE examiner, who is on site at the SCVMC SAFE office to provide initial response for SAFE exams, answer the SAFE phone line, and complete core shift responsibilities
- Coded Staff: refers to those staff who are hired into SAFE core shift positions
- <u>Per Diem Staff:</u> refers to those staff who are hired to provide on-call coverage for SAFE non-core shifts and be scheduled into open SAFE core shifts when coded staff are not available
- <u>Substitute term:</u> Within this document, any reference to a Medical Evidentiary Exam may also be referred to as a Medical Forensic Exam, Forensic Medical Exam, Domestic Violence Exam, Sexual Assault/Abuse Medical Evaluation, Sexual Assault/Abuse Medical Exam, or Sexual Assault Forensic Exam (SAFE).
- Abbreviations Used:
 - RN: Registered Nurse
 - APP: Advanced Practice Provider
 - SAFE: Sexual Assault Forensic Exam or Examiner
 - MSE: Medical Screening Exam
 - IPV: Intimate Partner Violence
 - DV: Domestic Violence
 - GBV: Gender-Based Violence

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<u>County of Santa Clara Health System</u> (CSCHS or CSC) – refers to all departments within the County of Santa Clara Health System, including all facilities within the Enterprise, as well as the Behavioral Health Services Department, Custody Health Services, Public Health Department, and Emergency Medical Services Agency.

<u>Outpatient Locations and Services</u> – refers to outpatient locations and services within the hospital setting and all ambulatory care settings, including primary care and specialty care.

<u>Santa Clara Valley Health and Hospital System</u> (SCVHHS or HHS) – former name of County of Santa Clara Health System.

A. PROTOCOL

- 1.SAFE Shifts
- A. The Adult/Adolescent SAFE Program schedule divides each day into three (3) eight-hour shifts to provide twenty-four (24) hour response coverage for survivors presenting for care after acute assault:

a. Core shifts

DAY SHIFT	0800 to 1630
EVENING (PM) SHIFT	1600 to 0030
NIGHT (NOC) SHIFT	0000 to 0830

b. On-call shifts

DAY SHIFT	0800 to 1600
EVENING (PM) SHIFT	1600 to 2400
NIGHT (NOC) SHIFT	0000 to 0800

- B. In Santa Clara County, 24-hour coverage is comprised of both core shifts and on-call shifts to allow sufficient number of SAFE examiners to be on the schedule during each SAFE shift as determined by the Appointing Authority. This provides the depth of coverage needed when multiple patients present for care in one shift.
- C. Exams may not be signed off to another SAFE examiner. Once a case is started, the SAFE examiner remains with the patient through the entirety of the exam.
- D. Two SAFE schedules will be posted monthly, one for response in Santa Clara County and one for response in Santa Cruz County. SAFE examiners must be trained for the County-specific response to be eligible to be on the on-call schedule for that County.
 - a. For the Santa Clara County schedule, a minimum of three (3) SAFE examiners will be scheduled on each shift. Each shift will have:
 - i. one (1) core shift staffed with a coded employee, who was hired for that position, or a per-diem employee to cover when the coded employee is not available
 - ii. two (2) additional SAFE examiners
 - iii. each DAY shift will be staffed with a Nurse Coordinator or Staff Developer as the third SAFE examiner. Any open third shift will be covered with a coded or per diem staff member, if the shift does not occur immediately before or after a scheduled core or on-call shift, unless approved by the Nurse Manager.
 - b. For the Santa Cruz County schedule, each shift will have a minimum of one (1) on-call SAFE examiner scheduled

E. CORE shifts

- a. Each eight (8) hour SAFE shift requires one SAFE examiner to be on-site for immediate response for patients, providers, and SAFE operational needs. This is a CORE shift.
- b. Some eight (8) hour SAFE shifts may be filled with a second core shift comprised of a combination of coded and/or per diem staff.
- c. Per diem staff may be scheduled into a CORE shift for PTO and absences
- d. Any CORE shift that becomes available after the final schedule is posted, may be filled by coded SAFE staff who wish to work overcode, or by per diem SAFE staff who have provided availability for that shift. Skills, experience, and competency, and willingness to

train new staff shall be taken into account, at the sole discretion of the Nurse Manager, when determining which staff work the available shift.

F. ON-CALL SAFE shifts

- a. In addition to the CORE shift, up to two (2) on-call shifts may also be available on each PM SAFE shift. For DAY and NOC shifts, a minimum of one on-call shift will be available
- b. On-call shifts are covered by coded and per diem staff
 - i. For per diem staff, a minimum of six (6) scheduled on-call shifts, or mix of CORE and on-call shifts, are required per month to meet minimum competency
 - ii. Any SAFE examiner scheduled in an on-call SAFE shift will be required to
 - 1. be immediately available to answer and respond to the call
 - 2. arrive to the patient within one hour of being called in.
 - 3. be available for the entirety of their scheduled shift to respond to the patient and stay for the entirety of the SAFE exam, even if that occurs after the end of their scheduled on-call shift
- G. SAFE Nurse Coordinator and SAFE Staff Developer shift coverage
 - a. Nurse Coordinators (NC) and Staff Developers (SD) are trained SAFE examiners
 - b. One NC or SD will be scheduled into a DAY SAFE shift
 - c. NC and SD are generally last to be called to a case, unless training staff. NC and SD may be prioritized to take shorter follow up cases.
 - d. May flex to cover openings in schedule as needed
 - e. NC and SD that are not on the schedule, may take a case for training/precepting needs ahead of scheduled staff (coded and per diem)
- H. SAFE shifts will not be scheduled back-to-back, or in a contiguous manner, to ensure the maximum number of SAFE examiners are available for patient and operational needs, unless approved by the Nurse Manager
 - a. During the draft schedule release or after final schedule posting, SAFE examiners may pick up 4 hours of on-call immediately before or after a scheduled shift (coded and per diem)
 - b. Staff scheduled in a CORE shift may not be scheduled in the four hours preceding that CORE shift, unless approved by the Nurse Manager
- I. On-Call Scheduling

Shifts will be distributed in accordance with the parameters below to allow for a balanced schedule that ensures preceptor and shift coverage based on the need to maintain competency and experience.

- a. Shift Selection for any open shift will be determined in the following order:
 - i. First, any Safe Examiner coded nurse who is willing and approved for preceptor duties will be allowed to pick up on-call shifts up to a maximum of

- 24 hours per pay period; and then per diem nurses who are willing and approved for preceptor duties will be allowed to pick up on-call shifts to a maximum of 48 hours per month during this round of scheduling.
- ii. Second, any remaining preceptor shifts will then be offered to coded nurses willing and approved to precept followed by any per diem willing and approved to precept.
- iii. Third, for up to a maximum of 24 hours per pay period, remaining shifts will then be offered to coded nurses who did not pick up any shifts under the previous steps above; then, for up to a maximum of 48 hours per pay period, remaining shifts will then be offered to per diem nurses who did not pick up shifts under the previous steps above.
- iv. Fifth, any shifts that remain unfilled will then be offered to coded staff, then per diem nurses.
- b. Preceptor/Trainer has priority over non-preceptor/trainer

b. County-specific SAFE Schedules

a. SAFE examiners must be trained for the County-specific response to be eligible to be on the on-call schedule for that County.

c. Schedule posting

- a. Initial schedule release opened on the staff meeting two months prior to the scheduled month (i.e., August schedule is opened at the June staff meeting)
 - i. Coded and per diem staff may provide availability for open shifts
- b. Draft schedule release posted one month prior to the scheduled month
 - i. Coded and per diem staff may request any open shift during for one week after the draft schedule is posted
- c. Final schedule will be approved and made available for viewing no later than two weeks before the schedule begins
- d. The current schedule will be posted in the team office and will be available electronically

d. Changes in schedule

- a. Applies to coded and per diem staff
- b. It is each staff member's responsibility to communicate any changes in their scheduled shift(s).
 - i. Once the schedule is posted, it the responsibility of the SAFE examiner to cover their scheduled shift
- c. Notify the Nurse Manager, and include the Nurse Coordinators, and timekeeper, to communicate any changes in the final schedule. Final schedule changes must be approved by the SAFE Nurse Manager.
- d. Notify the Nurse Manager, and include the Nurse Coordinators, and timekeeper, if a change in the schedule is needed for illness or emergency in accordance with the timeframes noted in NP-11 section 111.A.1 and 111.F.

e. On-call SAFE shifts will be considered the same as a scheduled shift and subject to progressive discipline for tardiness, absenteeism, etc. guidelines).

B. DEVELOPMENT AND APPROVAL OF POLICY:

- 1. Method
 - a. Developed and approved by authorized representatives of SCVMC Nursing, SCVMC Adult/Adolescent SAFE Program, Medical Staff, and Administration

CLINICAL REFERENCES:

Board of Registered Nursing (n.d.). *An explanation of the scope of RN practice including standardized procedures*. https://www.rn.ca.gov/pdfs/regulation/npr-b-03.pdf

U.S. Department of Justice Office on Violence Against Women. (2013). *A National Protocol for Sexual Assault Medical Forensic Examinations: Adult/Adolescents*. https://www.ojp.gov/pdffiles1/nij/206554.pdf

RELATED AD-14: Schedule Planning for Staff **POLICIES:** NP-11: Unscheduled Absences

ATTACHMENTS:

1. Non-applicable

POLICIES REPLACED: 6634-024

- OCH n/a
- SLRH n/a
- VMC #6634-024

Issued: Non-applicable

Revised: December 2023

Review By: December 2024

APPROVAL PATH:

Department or Committee	Responsible Person	Date
Adult/Adolescent SAFE Program	Kim Walker, Nurse Manager	Date

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Adult/Adolescent SAFE Program	Linda Truong, MD	Date
Committee (P&T)	Andrea Cerveka, MD	Date
Nursing Standards Committee	Irma Alcaraz, Chair	Date
Executive Nursing Council	Jill Sproul, Chair	Date
Chief Nursing Officer	Andrea Brollini, RN	Date
Medical Leadership Council, OC	H Mehrdad Rezaee (Sonia [Ruby]Torres)	Date
Medical Leadership Council, SLI	RH Edward Omron, MD (Brittany Slibsager)	Date
Medical Leadership Council, VM	Yvonne Karanas	Date
Enterprise Medical Executive Co	mmittee Yvonne Karanas	Date
Health & Hospital Committee	Paul Lorenz (Board of Supervisors)	Date