

**Sexual Assault Medical Forensic Services
Implementation Task Force**

Wednesday, November 17, 2021
1:00 pm – 3:30 pm

Meeting Minutes

I. Opening Remarks and Roll Call

- Karen Senger, Task Force Co-Chair, Illinois Department of Public Health, called the meeting to order at 1:00 pm. The meeting was held electronically pursuant to Public Act 101-0640, and a verbatim audio and video recording of this meeting was made. Please email sane@ilag.gov to request a link to the recording.
- Roll Call was taken, and a quorum was present. The Roll Call vote can be found at the end of the document.

II. Approval of the Meeting Minutes for June 25, 2021, and August 18, 2021

- The minutes for June 25, 2021, and August 18, 2021, were reviewed, and some typographical errors were identified for correction.
- Sarah Beuning motioned to approve the minutes, incorporating the identified corrections. Dr. Monika Pitzele seconded the motion. The minutes were approved by a Roll Call vote, which can be found at the end of the document.

III. Illinois Department of Public Health Update

- Karen Senger provided an update for IDPH.
- IDPH SASETA Plan Submission
 - Hospitals will need to submit new SASETA Transfer and Treatment plans in 2022. Letters will be sent to providers in mid-December with a due date, the due date will also be available at <https://dph.illinois.gov/>. IDPH will email the letters to the Hospital's CEO and the last known SANE contact on record.
 - Treatment Hospitals were reminded of the January 1, 2023, QMP deadline and were encouraged to look at their data, including the number of sexual assault patients presenting for services, to determine if it would be appropriate to remain a Treatment Hospital or change to a Transfer Hospital or Treatment Hospital with Approved Pediatric Transfer.
- IDPH Data Collection
 - Provider data is now available on the IDPH website for January 2021 – June 2021. Data for July 2021 – December 2021 is due January 15, 2022.

Types of Providers with Approved Sexual Assault Treatment or Transfer Plans

	2019	Nov. 2020	Feb. 2021	Aug. 2021
Treatment	110	89	85	84
Treatment with Approved Pediatric Transfer	41	51	52	48
Transfer	40	46	49	54
Approved Pediatric Health Care Facilities	0	0	0	0
Out-of-State Hospitals	2	2	2	2
Federally Qualified Health Care Facilities	0	0	2	2

- Federally Qualified Health Centers Update
 - Sexual Assault treatment plans have been approved for two FQHCs.
 - There was a legislative initiative to extend the authorization for FQHCs to provide medical forensic services until January 1, 2024.
 - Administrative Rules have been drafted to align with the January 1, 2024, date.
 - There will be some additional legislative revisions in the spring session related to this extension to align with the data collection requirements for out-of-state hospitals. This will allow IDPH to assess the frequency and needs of medical forensic services by FQHCs.
- Approved Pediatric Health Care Centers Update
 - No pediatric health care centers have submitted an application to provide medical forensic services.
- Out-of-State Hospitals Update
 - A third out-of-state hospital expressed interest in providing medical forensic services under SASETA but has yet to apply.
 - IDPH completed full site surveys at the two approved out-of-state hospitals.
 - Concerns identified included a lack of documentation or inconsistency with notifying an Illinois rape crisis center for patients who present to the hospitals.
 - It appears most Illinois sexual assault patients are walking into these facilities and are not being transferred from Illinois hospitals.
- Administrative Rules Update
 - Amendments to the Sexual Assault Survivors Emergency Treatment Code to include the definition and criteria for sexual assault forensic examiners (SAFEs) and the mandated use of Check Point were approved on September 24, 2021. The Code is available online at <https://ilga.gov/commission/jcar/admincode/077/07700545sections.html>.
 - Forthcoming proposed rules include
 - Updates relevant to the extension of the FQHC sunset.
 - Clarification of language relating the requirement to offer medical forensic services within 7 days, to match the statutory language.

- Amendments relating to law enforcement remaining in the room for certain individuals in custody and the rights of those patients for privacy and access to advocacy services.
- The requirement that an areawide treatment plan agreement specifies which facility is responsible for providing or arranging transportation for the patient back to the transfer hospital.
- Amendments relating to the duties of Transfer Hospitals when a patient declines to be transferred to a Treatment Hospital will continue to be worked on in the Areawide Subcommittee. When a patient declines transfer, they are still an emergency room patient to be treated and not just being discharge without the appropriate services.

IV. Office of the Illinois Attorney General Update

- Jaclyn Rodriguez, Task Force Co-Chair, Office of the Illinois Attorney General (OAG) provided an update for the OAG.
- Sexual Assault Nurse Examiner Program Trainings
 - An overview of 2021 training was provided.
 - An additional PA training was added for a total of two PA and three AA SANE trainings in 2021.
 - A 6th Foundation training will be held on December 10th. The number of Foundation trainings has decreased because more people can attend the virtual format, increasing the capacity for each training held. Applications for the training are still being accepted.
 - Forty-five nurses participated in two in person clinical trainings held this year.
 - A 2022 SANE training schedule has been presented to the OAG administration for approval. It is the office's goal to announce any upcoming trainings 8 – 12 weeks in advance of the training date. The OAG is also considering an alternative scheduling for the 40-hour trainings rather than the scheduling four in person training days for the same week.
- Training attendance statistics for the 2020 and 2021 PA and AA training were reviewed. Both trainings had clinicians take the trainings a second time as refresher.
- The estimated number of practicing SANES and nationally-certified SANES in Illinois continues to increase.
- Rural Grant Partnership Update
 - The office's 2016 Rural Grant from US DOJ has been re-awarded.
 - The current grant for the Western Central Region will be expanded to nine counties, up from five, and now include pediatric services, in addition to adult/adolescent services.
 - The grant was also expanded to 10 counties in the Eastern Central Region to create a 24/7 On-Call SANE program and SART for hospitals in these counties.

V. Illinois State Police Update

- Brenda Danosky provided an update for ISP.
- Sirchie Kits
 - About 1-2 weeks ago Sirchie's network system was entirely compromised, and shutdown for about a week and half. Sirchie has resumed sending out Evidence Collections Kits to hospitals. Please inform Brenda of any problems with the kits, such as missing components.
- CheckPoint
 - A new 24/7 Help Desk Number for healthcare providers, law enforcement, and state's attorneys has been added to the website. If the Help Desk cannot assist the caller, the issue will be sent to Brenda to address. Please call the Help Desk first, particularly with any IT issues. If a hospital's IP address has changed, the hospital will not be able to log in until the Help Desk resets the hospital's information.
- Drug Facilitated Sexual Assault Urine Cups
 - Jaclyn Rodriguez, OAG, provided information regarding an update to the Medical Personnel Instruction Sheet for toxicology.
 - Specimen containers with integrated sample transfer mechanism should not be used due to leaks caused by the mechanism.
 - Specimen tubes holding 5-10ml should also not be used. The size of the urine sample is too small to test.
 - Specimen cups should not be take out of DUI kits.
 - Providers should use a clean dry specimen cup container with a screw top lid, that closes tightly.
 - The new instruction sheet is available on ISP's website available at <https://isp.illinois.gov/StaticFiles/docs/ForensicServices/6-387.pdf>.

VI. Committee Reports

- Areawide Treatment Plan Committee
 - Jaclyn Rodriguez summarized the Committee meetings held on October 28, 2021, and November 8, 2021. The committee discussed the following **proposals** for changes to the administrative rules.
 - Sec. 545.65 Transfer of Sexual Assault Survivor
 - Amend paragraph (c) to require that a medical screening examination and any needed stabilizing treatment must be provided to all sexual assault patients, regardless of whether the patient agrees to or declines a transfer to a Treatment Hospital.
 - Amend paragraph (m) to require that a safety/risk assessment shall be performed prior to transfer in order to determine the best mode of transportation for the patient.
 - Amend paragraph (r) to add language
 - requiring that oral and written information be provided to survivors about medications, medical treatment, and

testing.

- that when complying with Sec. 3.2 of the Criminal Identification Act, the healthcare provided should inform survivors that they do not have an obligation to speak with law enforcement or wait at the hospital to be interviewed.
 - about the required notifications to DCFS and Dept. of Aging, as appropriate.
 - to require distribution of a medical forensics services fact sheet specific to survivors who decline to be transferred.
 - To require that hospitals notify rape crisis center advocates at the transfer facility where they will be receiving medical care.
 - Amend paragraph (o) to require that Transfer Hospitals offer to call a rape crisis hotline for support, for any survivor that declines to be transferred.
 - Require that Transfer Hospitals offer drug facilitated a sexual assault urine collection
- Cost of Care Committee
 - Dr. Monika Pitzele presented proposed changes to SB 969, which was sponsored by Senator Morrison last year and will be refiled in 2022.
 - Increase the reimbursement rate for medical forensic services to a flat rate of \$3,000 for both Adult/Adolescent patients and pediatric patients.
 - Clarify that if a survivor opts out of using private insurance, the hospital may bill the Department of Healthcare and Family Services Sexual Assault Emergency Treatment Program.
 - Extend the timeframe of the sexual assault services voucher from 90 days to 180 days to account for CDC recommendations for HepB and HPV prophylaxis doses up to 6 months, and for repeat testing for syphilis after 3 months and HIV at 6 months.
 - Discussion regarding concerns and questions regarding the concept of allowing survivors to opt of using private insurance to place among members.
 - On-Call SANE/SAFE Programs Committee
 - Jaclyn Rodriguez reviewed suggestions regarding how to move forward with the development of SANE programs, despite the QMP deadline extended to January 1, 2023, that were raised during committee meetings held on October 25, 2021, and November 8, 2021.
 - Emphasizing that moving back the deadline allows programs time to increase staff.
 - A joint communication from OAG, IDPH and IHA may be more impactful than a single provider trying to explain this to their administration.

- Prioritizing calls in certain regions and areas to encourage program development and collaboration.
 - Encouraging hospital leadership to attend the Foundation Training for awareness and education.
- Out-of-State Areawide Treatment Plan Subcommittee
 - Jessica O’Leary reviewed the Goals the subcommittee had set forth and discussed how to gather the information needed to draft the Task Force report to General Assembly on impact of transfers to out-of-state hospitals on sexual assault survivors.
 - The subcommittee requested feedback on forms created to gather previously identified information from rape crisis centers and state’s attorneys’ offices. Jessica presented the draft forms.
 - Page 1 – Explanation and Instructions.
 - Page 2 – Worksheet (The purpose of the worksheet is to allow RCCs and SAOs to gather information and notes on individual cases and would remain internal to the agency/organization.)
 - Page 3 – Quarterly Data Summary (Contains the de-identified information that the Task Force is requesting.)
- Urban Areawide Treatment Plan Subcommittee
 - No update
- Rural Areawide Treatment Plan Subcommittee
 - No update
- Nursing School Curriculum Committee
 - No update
- Telehealth Committee
 - Lisa Mathey, Lurie Children’s Hospital, provided an update on the committee’s goal and previous meetings as well as what is planned for future meetings.
 - During the last three meetings the committee was in the information gathering phase.
 - Presentations were provided by health providers in other states to on how telehealth is used in their states with sexual assault patients.
 - Findings were presented from a formal statewide needs assessment survey conducted by Northwestern and Lurie’s hospitals on SASETA readiness and thoughts on telehealth support. Data was collected from October 2020 to April 2021 from hospitals in rural and urban areas across the state.
 - 90% of respondents reported significant barriers to achieving ideal staffing levels. The top three barriers included 1) education and training, 2) difficulty finding interested staff, and 3) staff turnover.

- 96% of respondents could envision using telehealth during the medical forensic exam.
 - Discussed how telehealth could increase equitable services to patients across the state.
 - Discussed the use of telehealth to improve SANE mentorship and preceptorship.
- Future meetings will focus on provider-to-provider support, prehospital and transfer related support, and peer review.

VII. Task Force Members Announcements or Concerns

- Amy Barry commented on the telehealth committee report and thanked Lisa and the committee for its efforts.

VIII. Public Comment

- A question was asked if there were any concerns or issues if a sexual assault survivor were to have contact with a rape crisis advocate while and a Transfer Hospital and later work with an advocate from a different rape crisis center at a Treatment Hospital.
 - Sarah Beuning will raise the question of how best to handle the issue of transfer hospitals contacting rape crisis centers with ICASA’s Public Affairs Committee. If a requirement is placed on transfer hospitals to contact advocates when a transfer is declined, ICASA would need to develop internal policies on what that response would look like.

IX. 2022 Task Force Meeting Dates

- Friday, February 25, 2022: Virtual
- Tuesday, May 24, 2022: Tentative
- Thursday, August 18, 2022: Tentative
- Wednesday, November 16, 2022: Tentative

X. Adjournment

- Amy Barry motioned to adjourn the meeting. Joseph Burton, MD seconded the motion. The motion was approved by a Roll Call vote and the meeting was adjourned at 3:27pm. The Roll Call vote can be found at the end of the document.

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Roll Call and Votes

	Attendance		Vote to Approve Minutes of the 6/25/2021 and 8/18/2021 Full Task Force Meetings		Vote to Adjourn Meeting	
	Present	Absent	Yes	No	Yes	No
Amy Barry	X		X		X	
Ann Adlington	X		X		X	
Arvind Goyal, MD		X				
Brenda Beshears		X				
Brenda Danosky	X		X		X	
Channing Petrak, MD		X				
Christy Alexander	X		X		X	
Debra Perry	X				X	
Emily Sifferman, MD	X		X			
Eva Hopp		X				
Jaclyn Rodriguez	X		X		X	
Jamie Psarras	X		X		X	
Jessica O'Leary	X		X		X	
Joseph Burton, MD	X		X		X	
Julie Morrison, Senator		X				
Karen Senger	X		X		X	
Kim Mangiaracino		X				
Lisa Mathey	X		X		X	
Marites Gonzaga Reardon		X				
Monika Pitzele, MD	X		X		X	
Nancee Brown		X				
Robyn Gabel, Representative		X				
Sarah Beuning	X		X		X	
Scott Cooper, MD	X		X		X	
Sue Rezin, Senator		X				