



PROTOCOL and TRAINING GUIDELINES FOR THE MEDICAL STANDARD - 2017

Training Guidelines for Medical Providers:

- 1. According to the <u>NCA Medical Standard for Accreditation</u>: *Medical evaluations should be conducted by healthcare providers with specific training in child sexual abuse and that meets one of the following training standards:*
 - a. Child Abuse Pediatrics Sub-board eligibility or certification or
 - b. Physicians without such eligibility or certification, Advanced Practice Nurses, and Physician Assistants that have a minimum of 16 hours of formal didactic training in the medical evaluation of child sexual abuse **or**
 - c. SANE (Sexual Assault Nurse Examiners) without advanced practitioner training must have a minimum of 40 hours of coursework specific to the medical evaluation of <u>child</u> sexual abuse, followed by a competency-based clinical preceptorship. This means a preceptorship with an experienced provider in a clinical setting where the SANE can demonstrate competency in performing exams.
- 2. Providers should be familiar with the article: Adams JA, Kellogg ND, Farst KJ, Harper NS, Palusci VJ, Frasier LD, Levitt, CJ, Shapiro RA, Moles RL, Starling SP, *Updated Guidelines for the Medical Assessment and Care of Children Who May Have Been Sexually Abused*, Journal of Pediatric and Adolescent Gynecology (2015) and continue to stay abreast of current research and best practices in the field.
- 3. According to the <u>NCA Medical Standard for Acreditation</u>, medical professionals providing services to CAC clients must demonstrate continuing education in the field of child abuse consisting of a minimum of 8 hours every 2 years of CEU/CME credits.

Expectations:

- 1. Medical providers should regularly review cases with an expert but are required to have at least 50% of all positive exams reviewed with an expert.
- 2. Medical evaluations should be documented both in writing and through photodocumentation.
- 3. The Medical provider will participate in the multidisciplinary team case review on a regular basis.

Continuous Quality Improvement (CQI):

- 1. <u>All</u> examiners should have abnormal exams reviewed by an expert in the field. **Beginning in 2017**, the <u>NCA Medical Standard for Accreditation</u> states that "<u>all</u> medical professionals providing services to CAC clients must demonstrate, at a minimum, that 50% of all findings deemed abnormal or "diagnostic" of trauma from sexual abuse have undergone expert review by an advanced medical consultant".
 - a. An "abnormal" exam is one that has acute or healed physical findings in the ano-genital area felt to indicate that abuse/assault has occurred. Laboratory testing for STI's or pregnancy and DNA evidence collection are NOT included in the definition of an abnormal exam.