**MA SANE Advisory Board Meeting**

12 June 2017 10:00am-12:00pm

**Attendees:** Carlene Pavlos, Kristen Sullivan, Nancy Alterio, Jennifer Franco, Gina Scaramella, Cheryl Re, Aleigh Jerome, Dr. Ylisabyth S. Bradshaw, Kristi Holden, Anuj Goel, Gina Amodio, Tammy Mello, Katherine Dudich, Joan Sham, Jennifer Bastin, Cindy Moore, Yeji Lee, Kelly Shara, Sunney Poyner, Diane Coffey, Deb Perry, Dr. Alice Newton, Avinash Raghavendra, Leah Gillen

**Welcome and Introductions**

**Meeting called to order:** 10:07am

**24 October 2016 Minutes** – Minutes were approved as written

**Budget:** FY18 Governor’s proposed budget is $4,728,855. This is a maintenance figure to the FY17 budget. The final budget should be released in early July 2017. This figure includes funding for Rape Crisis Centers and Massachusetts Children’s Alliance.

**Program Updates:**

* Congratulations to the Boston SANE Team on receiving the Boston Police Distinguished Service Award. This was presented to Claire Shastany during a Trauma-Informed Response training organized by the Cambridge Police Department.
* Staffing Transitions
  + Jennifer Bastin has replaced Ginhee Sohn as the SANE Program Coordinator
  + Cindy Moore has rejoined SANE as the Pediatric Clinical Coordinator
  + Mildrine Tulysse will transitioning to the Middlesex CAC once a new Pediatric SANE is hired for Bristol County
  + Rachel Niemiec is providing Pedi SANE coverage for Plymouth and Norfolk CACs.
* SANE Trainings
  + Two certification training within a six month period (Nov ‘16 and Apr ‘17) which resulted in 40 new SANEs
  + Digital Photography Skills Day training in June to cover the use of alternative light sources during forensic exams
  + SANE Program Update for all active SANE nurses scheduled for 2 Nov 2017
  + A number of state-wide trainings have occurred since the previous meeting

(see appendix 1 for a detailed list)

* Updated MOUs have been developed and being reviewed by the DPH Legal Office.
* Adolescent Taskforce: A multi-disciplinary group to assess the special needs of patients aged 12-17 and develop best practices for response and care. There has been an incredible commitment from all participants. Meetings are still on-going.
* Medical STI Taskforce: A group of clinicians working to align SANE protocols with the most recent CDC guidelines regarding STI testing. All protocol changes will be issued during the SANE Update Training in November ‘17.
* CSEC/Trafficking Working Group: A multi-disciplinary group exploring SANE’s role with these populations working in conjunction with the state’s efforts to address these issues. The first meeting will be held June 14, 2017.
* MA Pedi Kit Working Group: A multi-disciplinary group reviewing the MA Pedi Kit. First meeting just occurred in June ’17. All changes will be rolled out in July 2018 for the next kit printing and will be accompanied by SANE-wide trainings.
  + Per board discussion: DCF, Hospital Social Work, and Rape Crisis will be consulted regarding any kit change suggestions and application protocol changes.
  + Dinamarie McCarthy will represent DCF at future meetings.
* Patient Scripts for SANE services are currently being printed for distribution in English, Spanish, and Portuguese, as well as an additional script specifically relating to telenursing.

**House Bill 3614**

* Bi-partisan bill: An Act Relative to the Tracking and Testing of Sexual Assault Kits has been filed by Representatives Gentile and Higgins with the intent of developing a statewide tracking system for all completed sexual assault kits. Includes language that allows survivors to anonymously track the location of their kits, and reporting requirements regarding kit processing parameters to the judiciary by the State Crime Lab.

**National Telenursing Center**

* In operation for a full year at 6 sites: St. Anne’s Hospital, Metrowest Medical Center, Naval Hospital 29 Palms, Naval Hospital Camp Pendleton, Sutter Lakeside Hospital, Hopi Health Care Center; serviced 87 patients during forensic examinations and completed 56 additional consults for patients who may not have met the criteria for a forensic examination.
* Response has been overwhelmingly positive as per Evaluation Team data. Only 9 patients have declined NTC services. This is a model of SANE service delivery that may be helpful in reaching vulnerable patient populations in settings where they are cared for such as homeless patients, patients with disabilities and children.
* Action Plan: SANE is looking for individuals to join SANE/TeleSANE Working Group to explore options for expansion of SANE/TeleSANE across MA. Please email Joan Sham to sign up. SANE will also be reaching out directly to encourage individuals to join.

**Meeting Adjourned at 11:58am**