

April 29, 2024,

The Indiana Board of Nursing:

I am writing about the Forensic Nursing Continuing Education Rule Request for comments.

A Forensic Nurse since 2017, I attended the evidence-based course in Marion County, which is now offered through the Indiana Emergency Nurses Association (IENA).

The IENA Forensic Nurse Education Course was and is taught by current practicing Forensic Nurses in addition to attorneys who are prosecutors, Forensic survivors, Law Enforcement agents, all of which are critical to our learning. We work very closely together in an interprofessional team to make a difference in victim's lives and to assure that we are providing the best care and guidance to them through the process.

There are concerns with this new Indiana Code in a variety of ways.

- 1) The Indiana Sane Project is coordinated by an individual on the Indiana Board of Nursing, and the International Association of Forensic Nurses and it is unclear if she is currently practicing as a Forensic Nurse. The Indiana Sane State Coordinator teaches for the Indiana Sane project as a paid contractor and it is also not clear if she is a practicing Forensic Nurse.
- 2) The limitation on who can administer the Forensic Nurse Education Courses as it limits the interprofessional nature that is currently in the Indiana Emergency Nurse's Association's Programs.
- 3) The Indiana Sane Project website indicates that it has and is supported by "Members of the ENA".
 - a. it is very clear that the same support is not being shown to the ENA and their education, as it has been excluded from consideration.
 - b. The IENA education is used across the state for Trauma Nurse Core Courses(TNCC), Emergency Nursing Pediatric Courses(ENPC), and Pediatric Advanced Life Support (PALS) which are taught even more widely than Forensic Nursing Courses.
 - c. The IENA courses are accredited by the American Nurse's Credentialing Center.
 - d. There are fantastic classes offered by the IENA for forensics, as well as by the Academy of Forensic Nurses.
 - e. Steering all education to one place appears to be a conflict of interest when these courses are based on the evidence. It would be like saying all nurses must attend one school for their nursing degree.
 - f. Limiting the places Forensic Nurse Education can be taught will deter the number of new nurses since the Sane project is located in southern Indiana and not practical for those in central or northern Indiana to attend. This limitation is also exclusionary for all health systems to be able to get their nurses to education that is inconvenient for the staff who are desperately needed in their current work setting as we continue to experience a statewide and national nursing shortage. Additionally, most healthcare settings are not paying for this specialized training and it comes out of the RN pocket to attend the classes.

- 4) It will be important to know what is in place to assure that the Sane Project is teaching best practice, and has a strict peer review process in place, since it is not being administered by currently practicing Forensic Nurses. Transparency is of the utmost importance.
- 5) The Indiana Sane Project and the Indiana Sane Coordinator positions are both grant funded. What is the plan for if / when the grant is no longer available?

I have attached additional concerns in [Blue Below](#). I hope that you take these concerns, and those of my peers, and make the best decision for forensic nurses that are currently practicing and those that choose to join our practice in the future.

Indiana Code [IN Code § 25-23-1-35 \(2023\)](#), Chapter 1, Licensing of Nurses; Creation of Board; Education Programs. Requirements to Practice as a Forensic Nurse; Continuing Education.

For the purposes of Ind. Code 25-23-1-35(a)(2)(B), “substantially equivalent” means:(1)an out-of-state SANE training program offering didactic and clinical components **that meet the requirements of Ind. Code 25-23-1-35(a)(2);**(2)a graduate degree program in forensic nursing, offering clinical and didactic components **that meet the requirements of Ind. Code 25-23-1-35(a)(2);** or(3)a SANE training course approved by the International Association of Forensic Nurses (“IAFN”) in addition to clinical components that meet the requirements of **Ind. Code 25-23-1-35(a)(2).**

[I am struggling to understand why number 3 must have a layer of approval that the others don't-I would suggest it just say “A SANE training program that meets the clinical components of IN Cod 25-31-35\(a\)\(2\)”](#)

(b)A candidate program that intends to apply for Board approval shall submit a completed application on forms provided by the Board and shall request an appearance before the Board. The application shall include evidence of resources necessary to start a program.

[Why is this so strict? Others do not have to do this. Who is approving this and is there a time frame?](#)

(c)After an appearance with the candidate program, the board shall approve or disapprove the application for program approval upon evidence:(1)submitted in the application; and(2)presented at the Board appearance.

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All contact hours of continuing education must be approved by a nationally approved sponsor of continuing education for nurses and be relevant to the practice of a forensic nurse, **as determined by the Education Compliance Officer.**

[Does someone having CEUs make them proficient as a Forensic Nurse? Should there be some level of PRACTICING HOURS? A nurse with a forensic license could work in any nursing role and do the CE's and remain licensed without validation of continued competence. Does requiring an RN to get CE's make an RN competent?. The literature does not support that taking CE courses equates to competence, this is why the Indiana State Board of Nursing has never required nurse to have CE's.](#)

SCOPE OF RULE:

b. Scope of the Rule

The proposed rule explains that the Professional Licensing Agency prescribes the manner in which forensic nurse continuing education programs need to apply for Board approval. The proposed rule outlines the number of contact hours of continuing education are required to obtain and maintain a forensic nurse license. The proposed rule explains how a continuing education program could meet the standard of being "**substantially equivalent**" to a continuing education program identified by the state department of health's statewide sexual assault nurse examiners (SANE) coordinator and administered by the Indiana SANE training project.

Why is this rule identified by the State Department of Health SANE Coordinator and Administered by the Indiana SANE Training project when the individuals administering these programs are not currently practicing as Forensic Nurses?

III. Impacted Parties

In Indiana, there are 134,584 Registered Nurses. A publication by the Bowen Center for Health Workforce Research and Policy entitled "The Data Report: 2021 Indiana Nursing Licensure Survey" indicates that 493 nurses reported providing services as a sexual assault nurse examiner (a forensic nurse) during the 2021 nursing license renewal period. The International Association of Forensic Nurses (IAFN), an association that offers certifications for forensic nurses, reports that there are 43 board certified SANE-A (adult and adolescent sexual assault nurse examiners) and 22 board certified SANE-P (pediatric sexual assault nurse examiners) in Indiana. **Board certification by IAFN is not a requirement to become a forensic nurse.**

This limits nurses to be able to sit for the Sexual Assault Nurse Examiner – Adult Examination offered by the American Nurses Credentialing Center. Many healthcare organizations see more Interpersonal violence (IPV) versus Sexual Assault (SA). It makes sense that since there are other certifications for Forensic Nurses there should be more opportunities for the Forensic Course than just the SANE PROJECT and the International Association of Forensic Nurses and should be considered for Forensic Nurse Education.

First, the proposed rule defines "substantially equivalent", which explains what standards forensic nursing continuing education programs must meet to be substantially equivalent to biennial forensic nursing education programs identified by the state department of health's statewide sexual assault nurse examiners (SANE) coordinator and administered by the Indiana SANE training project. **How will this be determined?**

How will nurses not practicing in Forensic Nursing identify what is in the best interest of ALL Indiana Forensic Nurses?

Second, the rule explains how many contact hours of continuing education to submit to become a licensed forensic nurse. The Professional Licensing Agency can begin issuing forensic nurse licenses and the Indiana State Board of Nursing can begin regulating the licensed forensic nurses under IC 25-23-1-35(a)(2)(B) using the proposed rule's guidelines. **Is this an additional cost to practicing nurses?**

A third direct benefit of the proposed rule is that registered nurses who perform forensic examinations will be held to uniform standards laid out in the rule for training requirements, which will lead to a more uniformly trained workforce of forensic nurses. As a result of the defined training requirements in the proposed rule, registered nurses who perform forensic examinations will become more competent. If a patient is treated by a forensic nurse for a forensic exam, the patient can reasonably believe that the forensic nurse is a licensed forensic nurse and is competent to perform the forensic examination. Due to the defined continuing education requirements in the proposed rule, patient care for those needing forensic exams will be more standardized and will improve due to the defined training requirements for nurses to practice as forensic nurses. It should, and has been practice that a facility transfers a patient to a trained facility with a forensic nurse.

Uniform standards are there and are currently in place. This proposed rule has nothing to do with what is currently in place and will continue to be in place with or without this rule. IF anything, our State SANE Coordinator should be going to hospitals trying to recruit SANEs, and or teaching the facilities what to do when they don't have a SANE Program, and how to transfer to places that do.

Fourth, the proposed rule's defined number of forensic nursing continuing education contact hours will improve criminal investigations because the collection of evidence for criminal cases involving sexual assault, intimate partner violence, and child abuse will likely be more standardized and will improve. Forensic nurses will also become more informed witnesses for criminal cases because SANE training includes training on how to testify in court.

The IENA and the Association of Forensic Nursing also have fantastic classes to show how to testify. In Maricao County we work very closely with the Prosecutor's Office so those Forensic Nurses that practice in our county are prepared to testify. It is critical that Forensic Nurses have interprofessional connections in their respective counties to assure that relationships are formed and that Forensic Nurses are prepared to support victims.

The fifth direct benefit of the proposed rule is that employers seeking to fill forensic nurse positions will be able to determine whether an applicant is qualified to be a forensic nurse when the employer verifies whether the applicant is a licensed forensic nurse. The employer will be able to rely on the proposed rule that determines the number of contact hours a nurse must complete to become licensed. **CEs do not determine the ability to practice.**

I appreciate your time and thoughtful consideration into my concerns as a practicing Forensic Nurse. Limiting Forensic Nurse education to one provider limits Indiana Forensic Nurse Examiner Practice, continuing education, and continued competence. Thank you for your time.

Sincerely,

Drenda (Martin) Bell, RN

Forensic Nurse Examiner

These are my opinions and do not necessarily reflect those of my employer.

From: [Conley, Jennifer](#)
To: [Hart, Nicholas](#)
Subject: forensic nurses
Date: Friday, May 3, 2024 1:40:12 PM
Attachments: [image001.png](#)
[image002.png](#)
[image003.png](#)
[image004.png](#)
[image005.png](#)
[image006.png](#)
[image007.png](#)
[image008.png](#)

**** This is an EXTERNAL email. Exercise caution. DO NOT open attachments or click links from unknown senders or unexpected email. ****

Mr. Hart,

I am a registered nurse of 37 years and have practiced as a forensic nurse for 15 years. I have been board certified as a SANE-A since 2009. I wanted to provide you with some comments regarding the ongoing discussion around forensic nursing education.

- In section 2, part 2, it reads *“successfully completes a forensic nursing or sexual assault nurse examiner curriculum approved or administered by the Indiana SANE Training Project”*. In addition to the IN SANE training Project, I believe that a program that has been approved by the International Association of Forensic Nurses (IAFN) should also be included. Some may suggest that the Academy of Forensic Nursing could also be included. I cannot speak to that association as I do not know if they review, and approve, forensic nursing or sexual assault nurse examiner courses. If there is concern about training nurses to perform sexual assault exams, then the weight of that approval may be with the IAFN or the Training Project. Hospitals and programs may hire SANE’s from out of state. If those SANE’s can show that their education was approved by the IAFN, it could save valuable time to allow nurses to begin their orientation and practice, as well as ease the burden on the training project. I agree that SANE/Forensic nursing education programs are not the same. Nurses may complete the 40 hour didactic, as well as clinical hours, but the program has not been reviewed by a panel of experts, even though it was believed that the guidelines set by the IAFN were met.
- I believe that continuing education is essential in the role of the forensic nurse, and that the biannual recommendation of 12 CEU’s is reasonable. To maintain our SANE-A certification, it is an average of ten annually, less than what is being recommended by the Board. But I believe the language used in section 3, *as identified by the state department of health’s statewide SANE coordinator, and administered by the Indiana SANE Training Project or the equivalent as approved by the board* may be too narrow. The forensic nurses are listed under the category of Advance practice registered nurse, and the language used for nurse practitioners is broader. “Acceptable continuing education programs must be approved by a nationally approved sponsor of continuing education for advanced practice nurses, approved by the board, and listed by the IN professional licensing agency as approved hours”. Could it be considered to adapt similar language and include other approved organizations, such as the IAFN, Academy of Forensic Nursing, and other national organizations who provide

education for the enrichment of forensic nurses (ex: End Violence Against Women International, or Collegiate education program) along with the IN SANE training project. The way the law reads, it may cause confusion in creating the belief that continuing education can only come for the training project. Which I understand is not the intent.

Thank you for your consideration.

Respectfully,

Jennifer Conley

Jennifer Conley, MSN, RN, SANE-A

Forensic Nurse Manager | Center of Hope

Community Health Network, East, North and South

1500 N. Ritter | Suite E1408 | Indianapolis, IN 46219

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From: [Kaylie Rambo](#)
To: [Hart, Nicholas](#)
Subject: Forensic Nursing Continuing Education Rule Request
Date: Friday, May 3, 2024 8:46:07 PM

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A third direct benefit of the proposed rule is that registered nurses who perform forensic

examinations will be held to uniform standards laid out in the rule for training requirements, which will lead to a more uniformly trained workforce of forensic nurses. As a result of the defined training requirements in the proposed rule, registered nurses who perform forensic examinations will become more competent. If a patient is treated by a forensic nurse for a forensic exam, the patient can reasonably believe that the forensic nurse is a licensed forensic nurse and is competent to perform the forensic examination. Due to the defined continuing education requirements in the proposed rule, patient care for those needing forensic exams will be more standardized and will improve due to the defined training requirements for nurses to practice as forensic nurses. It should and has been practiced that a facility transfers a patient to a trained facility with a forensic nurse.

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The fifth direct benefit of the proposed rule is that employers seeking to fill forensic nurse positions will be able to determine whether an applicant is qualified to be a forensic nurse when the employer verifies whether the applicant is a licensed forensic nurse. The employer will be able to rely on the proposed rule that determines the number of contact hours a nurse must complete to become licensed. **CEs do not determine the ability to practice.**

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Sincerely,

Kaylie Rambo, RN

Forensic Nurse Examiner

These are my opinions and do not necessarily reflect those of my employer.

Destiny Hefling
590 Ohio St
Franklin, IN 46131
Heflingd@gmail.com

May 2, 2024

LSA Document #24-114
Nick Hart, JD
402 West Washington Street, Room W072 Indianapolis, IN 4620

Indiana State Board of Nursing,

In light of the proposed change to legislation for SANE nurses, I wanted to take some time to write to you regarding my experience with the Indiana SANE Training Project.

I first came into contact with the Indiana SANE Training Project in August of 2022. They provided my initial hands on training to be a SANE nurse at Indiana State University. They have also provided me with hands on training for pediatric SANE training and a skills refresher course. The Project has been invaluable to my career as a sexual assault nurse within my hospital network.

The Project has afforded me access to a vault of knowledge and skills that otherwise might not have been available to me. I have been able to attend various training opportunities, such as the International Association of Forensic Nurses Annual Conference and the International Conference on Sexual Assault, Domestic Violence, and Fighting for Change through funding that I have received from the Indiana SANE Training Project. I have been able to network with other SANE nurses that I have meet through my trainings with the Project.

The Project has also provided me with unlimited support through its staff members that have allowed me to be successful in my career. The Project has made it possible for me to give back to rural communities and to bring services to their citizens that they would have previously had to go to Indianapolis for. The Project has allowed me to bring invaluable healthcare services to rural communities that will help to break the cycle of violence against women and vulnerable populations. The support that the rural community receives from the Project helps to increase prosecution rates and to prevent these survivors from falling through the cracks of the justice system.

It is because of the Indiana SANE Training Project that I have been able to find passion within my nursing career. I have been connected to the International Association of Forensic Nurses (IAFN), which is the premier organization for guidance on SANE services. In the absence of another organization that is capable of providing guidance and setting standards, I think that the IAFN is in an excellent position to help standardize our very specialized section of

healthcare. Allowing for an organization to determine requirements for practicing as a SANE nurse will help to bring credibility and validity to the profession.

I fully support the requirement of continuing education hours as a part of our practice as SANE nurses. This legislation will better the healthcare experience for our patients and develops a deeper sense of trust by mandating continuing education. Not every provider is able to work in a trauma center or in a high volumes facility that regularly sees survivors of violence. This legislation helps to increase access to education for rural SANE nurses and, again, only serves to improve the patient experience. By nature, SANE nurses are advocates for our patients and I firmly believe that the aim of the legislation is to advocate for high quality care for our patients and future patients.

Respectfully,

A handwritten signature in black ink, consisting of a large, stylized loop followed by a series of smaller, connected strokes that form the letters 'J', 'H', and 'F'.

Destiny J. Hefling, BSN, RN, EMT-P
Sexual Assault Nurse Examiner
Hancock Regional Health

From: [Vanduyt Family](#)
To: [Hart, Nicholas](#)
Subject: ISBN FNE CEUs
Date: Friday, May 3, 2024 4:04:19 PM

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SCOPE OF RULE:

b. Scope of the Rule

The proposed rule explains that the Professional Licensing Agency prescribes the manner in which forensic nurse continuing education programs need to apply for Board approval. The proposed rule outlines the number of contact hours of continuing education are required to obtain and maintain a forensic nurse license. The proposed rule explains how a continuing education program could meet the standard of being "**substantially equivalent**" to a continuing education program identified by the state department of health's statewide sexual assault nurse examiners (SANE) coordinator and administered by the Indiana SANE training project.

Why is this rule identified by the State Department of Health SANE Coordinator and Administered by the Indiana SANE Training project when the individuals administering these programs are not currently practicing as Forensic Nurses?

III. Impacted Parties

In Indiana, there are 134,584 Registered Nurses. A publication by the Bowen Center for Health Workforce Research and Policy entitled "The Data Report: 2021 Indiana Nursing Licensure Survey" indicates that 493 nurses reported providing services as a sexual assault nurse examiner (a forensic nurse) during the 2021 nursing license renewal period. The International Association of Forensic Nurses

(IAFN), an association that offers certifications for forensic nurses, reports that there are 43 board certified SANE-A (adult and adolescent sexual assault nurse examiners) and 22 board certified SANE-P (pediatric sexual assault nurse examiners) in Indiana. **Board certification by IAFN is not a requirement to become a forensic nurse.**

This limits nurses to be able to sit for the Sexual Assault Nurse Examiner – Adult Examination offered by the American Nurses Credentialing Center. Many healthcare organizations see more Interpersonal violence (IPV) versus Sexual Assault (SA). It makes sense that since there are other certifications for Forensic Nurses there should be more opportunities for the Forensic Course than just the SANE PROJECT and the International Association of Forensic Nurses and should be considered for Forensic Nurse Education.

First, the proposed rule defines "substantially equivalent", which explains what standards forensic nursing continuing education programs must meet to be substantially equivalent to biennial forensic nursing education programs identified by the state department of health's statewide sexual assault nurse examiners (SANE) coordinator and administered by the Indiana SANE training project. **How will this be determined?**

How will nurses not practicing in Forensic Nursing identify what is in the best interest of ALL Indiana Forensic Nurses?

Second, the rule explains how many contact hours of continuing education to submit to become a licensed forensic nurse. The Professional Licensing Agency can begin issuing forensic nurse licenses and the Indiana State Board of Nursing can begin regulating the licensed forensic nurses under [IC 25-23-1-35\(a\)\(2\)\(B\)](#) using the proposed rule's guidelines. **Is this an additional cost to practicing nurses?**

A third direct benefit of the proposed rule is that registered nurses who perform forensic examinations will be held to uniform standards laid out in the rule for training requirements, which will lead to a more uniformly trained workforce of forensic nurses. As a result of the defined training requirements in the proposed rule, registered nurses who perform forensic examinations will become more competent. If a patient is treated by a forensic nurse for a forensic exam, the patient can reasonably believe that the forensic nurse is a licensed forensic nurse and is competent to perform the forensic examination. Due to the defined continuing education requirements in the proposed rule, patient care for those needing forensic exams will be more standardized and will improve due to the defined training requirements for nurses to practice as forensic nurses. It should, and has been practice that a facility transfers a patient to a trained facility with a forensic nurse. **Uniform standards are there and are currently in place. This proposed rule**

has nothing to do with what is currently in place and will continue to be in place with or without this rule. IF anything, our State SANE Coordinator should be going to hospitals trying to recruit SANEs, and or teaching the facilities what to do when they don't have a SANE Program, and how to transfer to places that do.

Fourth, the proposed rule's defined number of forensic nursing continuing education contact hours will improve criminal investigations because the collection of evidence for criminal cases involving sexual assault, intimate partner violence, and child abuse will likely be more standardized and will improve. Forensic nurses will also become more informed witnesses for criminal cases because SANE training includes training on how to testify in court.

The IENA and the Association of Forensic Nursing also have fantastic classes to show how to testify. In Maricao County we work very closely with the Prosecutor's Office so those Forensic Nurses that practice in our county are prepared to testify. It is critical that Forensic Nurses have interprofessional connections in their respective counties to assure that relationships are formed and that Forensic Nurses are prepared to support victims.

The fifth direct benefit of the proposed rule is that employers seeking to fill forensic nurse positions will be able to determine whether an applicant is qualified to be a forensic nurse when the employer verifies whether the applicant is a licensed forensic nurse. The employer will be able to rely on the proposed rule that determines the number of contact hours a nurse must complete to become licensed. **CEs do not determine the ability to practice.**

I appreciate your time and thoughtful consideration into my concerns as a practicing Forensic Nurse. Limiting Forensic Nurse education to one provider limits Indiana Forensic Nurse Examiner Practice, continuing education, and continued competence. Thank you for your time.

Sincerely,

Kristina Vanduyn, RN
Forensic Nurse Examiner

These are my opinions and do not necessarily reflect those of my employer.



**Indiana Coalition to
End Sexual Assault
& Human Trafficking**
Engage. Educate. Empower.

April 24, 2024

LSA Document #24-114

Nick Hart, JD

402 West Washington Street, Room W072

Indianapolis, IN 46204

To the Indiana State Board of Nursing,

I respectfully submit this letter of support for the proposed changes to 848 IAC 1-2-25 concerning requirements to practice as a forensic nurse and continuing education for forensic nurses.

At the Indiana Coalition to End Sexual Assault and Human Trafficking (ICESAHT), we partner with the network of rape crisis centers and Sexual Assault Response Teams (SARTs) across the state. Rape crisis centers ensure survivors of sexual violence have access to community-based sexual assault victim advocates if they seek medical care following an assault. SARTs promote interagency, multidiscipline collaboration for communities responding to sexual violence. SART members include a core group including sexual assault victim advocates, sexual assault nurse examiners (SANES), law enforcement and prosecutors, and represents diverse experience and expertise specific to their community. They promote victim-centered responses to sexual violence through increased collaboration, education, and lasting improvements across disciplines. On a SART, the SANES serve as liaisons with the medical community, provide current information and best practice standards, collaborate with hospitals to maintain protocols for the care of sexual assault patients, assist with case reviews, and help implement initiatives to prevent sexual violence. Continuing education would enhance the effectiveness of these efforts.

ICESAHT values the important contributions of forensic nurses in supporting survivors of sexual violence and we thank you for considering the proposed changes.

Sincerely,

Beth White, JD

President & Chief Executive Officer

The Indiana State Board of Nursing,

I am writing to you today to raise my concerns for the Forensic Nursing Education Rule (LSA Document #24-114). I am all supportive of continuing education for all nurses Indiana and feel that this is needed at a wider level in Indiana to all nurses. What I have concerns about is the amount of continuing education proposed currently to only forensic nurses. I believe the amount proposed (12 CEU's biennially) will require a financial burden on some forensic nurses. I am the coordinator for our forensic program and most forensic nurses I have hired, had to take a pay cut to become a forensic nurse in the first place. Forensic nurses don't usually get the bonus pays offered or sign on bonuses. A forensic nursing department is not a money maker for hospitals so unless you are lucky to work for a big organization that values community outreach then limited resources are offered to your program. I have already had nurses tell me "Why would I become a forensic nurse when it is lower pay and now, we have required CEU's". We already have a severe shortage of forensic nurses in the state, and I fear this might deter others from becoming a forensic nurse. I would recommend 5-6 biennially is a more reasonable number. Hospital organization will not pay for forensic nurses CEU's so most of this cost will come out of the nurses' pocket.

I did read the Regulatory Analysis of this rule and noticed under the Cost Analysis it states there are free continuing education offered in the State by the Indiana SANE Training Project. I would like to disagree with this statement. The Indiana SANE Training Project advertises at the last minute their continuing education offerings on Facebook and have limited funds for this purpose. I have nurses not on a social media platform and sometimes I don't see the post until after the event. I cannot find these offerings on their website either. What is listed on their website is their SANE Didactic Class which is different than continuing education classes. There is poor communication on when these free CEU's are offered. Recently on a call with the Indiana State Department of Health it was suggested that nurses are usually involved in their professional organization and can receive free CEU's that way. I have nurses that are not members of a professional organization due to cost concerns. Again, I fear this is a financial burden we are imposing on our forensic nurses currently with no plan on how to generate more forensic CEU's in the state. Maybe we should be looking into requiring programs to have a yearly competency to offset this financial burden instead of more CEU's. I find that my nurses love a yearly competency and learn something every year we do this.

The Indiana SANE Training project does offer funds to attend conferences to obtain CEU's. These funds are very limited to those who live in rural communities first. We have had nurses in more urban settings be denied funding for these conferences and the conferences they fund are limited. The Indiana SANE training project does not include other forensic nursing organizations conferences in recent years for their financial support. They have limited their funding to the International Association of Forensic Nurses Conferences and there are more forensic nursing organizations out there (Academy of Forensic Nursing and American Academy of Forensic Science). There are more forensic certifications offered other than SANE-A and SANE-P which the Indiana SANE Training Project only covers these exams which they are not ABSNC accredited exams and therefore can't be used by a Magnet Hospital. Advanced Forensic Nursing Certification (AFN-C) and the Generalist Forensic Nursing Certification (GFN-C) are two other forensic certifications that include more than just the aspect of sexual assault care. The AFN-C and GFN-C are currently going through the process of receiving ABSNC accreditation since they are newer certifications. Our forensic nurses see more physical assaults and domestic violence patients than sexual assaults and these certifications are better aligned with our growing patient population. Also, the Indiana Emergency Nurses Association has a very active forensic nursing committee that provides some forensic CEU's in the state, but the Indiana SANE Training Project has declined to work with this committee. I have concerns that we are not teaching the whole scope of forensic nursing to nurses when we limit ourselves to this forensic CEU rule process as proposed and only focusing on sexual assault. The Indiana SANE Training Project funds are for sexual assault nursing education leaving a diverse population who experience interpersonal violence that goes untouched by a forensic nurse. This rule seems like it will allow the Indiana SANE Training Project, the Indiana Department of Health, and the Indiana State Board of Nursing the power to direct forensic nursing education in Indiana. This has never been done with any other specialty nursing career in Indiana. Emergency Nurses Association hold specialty classes for trauma nurses and pediatric nurses but we don't regulate those teaching like this rule is proposing on forensic nurses.

One of my biggest concerns about this rule is the regulation of our SANE Didactic Class and a forensic nursing license in Indiana which I am confused on how this was added to the rule when the Indiana Code is talking about continuing education only. The Indiana SANE Training Project is not the only organization in Indiana to teach this class. The Marion County SANE Didactic Class which is now called the Indiana ENA SANE Didactic Class has been around for over 20 years. I took this class in 2010 when I first started my forensic career. This Didactic Class was paused for a while around COVID but this year we are holding our first class. There are classes offered at times in Northern Indiana and another great class that is virtual created by Sigma Theta Tau. All these classes have been around since before the Indiana SANE Training Project or the SANE Coordinator position at the State Board of Health was created. I am questioning why when we have a severe shortage of forensic nurses, we are limiting ourselves once again to one organization training or everyone must seek approval for a class they have been teaching for years. To get approval through the ISBN would be a nightmare since often we hold this class when we see a demand. To wait maybe months for approval from the ISBN would be a burden. I did notice a statement under the "Estimate of Compliance Costs for Regulated Entities" in the third paragraph that states "The candidate program could seek to be identified by the state department of health's SANE Coordinator and become a program administered by the Indiana SANE Training Project". I am unsure if this statement is meaning all approved SANE Didactic Programs will have to be labeled a program administered by the Indiana SANE Training Project when the SANE Didactic Class has not been created by them.

Also, the language that a class must be approved by the IAFN is not a standard practice across the Nation. To get a course approved through IAFN you must pay \$500 and then it is approved. IAFN does not mandate a program be approved by them but to follow the SANE educational guidelines and provide CEs through an approved ANCC institution. I know of multiple excellent SANE Didactic classes taught by national forensic leaders across different states, and they all tell me they don't spend the \$500 to get a stamp of approval from IAFN. I have even talked with one of the contributors of the IAFN SANE education guidelines (Diane Faugno) and she currently teaches in Georgia using the IAFN guidelines but does not pay the \$500 to get the stamp of approval. All their nurses can set for any exam after taking their SANE Didactic Class with no issues. What is a standard of practice is to follow the IAFN guidelines which are free on their website when creating the curriculum for the SANE Didactic Class. If every class must pay \$500 for this additional approval, then that is just another added expense and burden on the planning committee of the class. I would recommend removing the approval process for the SANE Didactic Trainings but still include the training must follow the IAFN SANE education guidelines.

In the regulatory analysis, the fifth direct benefit listed is that an employer will be able to determine if an applicant is qualified to be a forensic nurse when the employer verifies whether the applicant is a licensed forensic nurse. This is a false statement. I have only hired one person that has had the SANE Didactic Class before applying for a forensic nursing position. Most forensic nurses hired at organizations do not have the class before employment. Currently when I hire a nurse, they do the virtual Sigma Theta Tau training on-line or if available the Marion County SANE Didactic Class (now called Indiana ENA SANE Didactic Course) which both follow the IAFN curriculum guidelines but are not "approved" by IAFN. At our facility we complete a 10 week of orientation and have a lengthy orientation packet to complete. Most hospitals I am familiar with do about the same. Per IAFN SANE educational guidelines, a clinical manager or educator must verify that a forensic nurse is clinically competent before practicing on their own. This is an institutions' responsibility to ensure their forensic nurses are competent to practice not the Indiana SANE Training Project or Indiana Department of Health SANE coordinator's responsibility.

Currently our program has a TeleSANE program that is funded by the OVC in partnership with IAFN. Right now, we only do consultations only via an iPad to the outside hospital that doesn't have forensic services. Most other TeleSANE programs across the nation guide another nurse through a sexual assault exam via the iPad when there is no forensic nurse available in rural communities. This is a benefit to the patient because currently we transfer the patient maybe hours to downtown Indianapolis for a sexual assault exam if the patient wants an exam. This is currently being done in Texas and Oklahoma with great success. Would this not be allowed if we moved to this model like Texas and Oklahoma? Technically, the bedside nurse is not a forensic nurse, but the licensed forensic nurse would be guiding the non-forensic nurse through the exam. I am unsure if this rule was to pass as is if this would be allowed or not.

I am afraid I have more questions about this proposed rule that nobody could answer in previous Q&A sessions held by the State SANE coordinator at the Indiana Dept. of Health. What if a school of nursing develops a forensic nursing program? There are programs out there for forensic nursing degrees (i.e. Texas A&M, Oakland University). How will this rule affect those type of programs developed by a university? What if the grant runs out for the Indiana SANE Training Project or the Indiana State Board of Health SANE Coordinator Position since these are grant funded positions? When this was being proposed in the legislature in 2021 our forensic voices were not heard, and this proposal was not properly vetted within the forensic community. This was brought forth to the Indiana ENA forensic committee at that time and we had some concerns over the language proposed but our voices fell on deaf ears. We were told at that time this only affects continuing education for forensic nurses and not the initial training for forensic nurses. I am unsure as to how this Indiana Statue on forensic nursing continuing education turned into a rule about initial forensic nursing training and licensure. The Indiana ENA forensic committee was fine with the continuing education requirements when this was proposed. This has caused a great divide in our Statewide forensic community over this issue which I am sad to see. I am passionate about forensic nursing and the care we provide to our patients. I just wish our focus could be on better care and access to exams for our patients. I am finding that the forensic nurses in our state are awesome at what they do, and we have a lot of Nationally recognized forensic nurses in Indiana. Usually, it is the non-forensically trained health care workers that are lacking in proper care to our patients when no forensic nurse is available. In a world with virtual options and expanding forensic services, we should not be having someone drive 2 hours for a sexual assault exam or be told to come back later for an exam when a nurse is available!

Thank you for allowing us to comment on these very important issues proposed in this rule.

Sincerely,

A handwritten signature in black ink, appearing to read 'Natalie Calow', with a stylized, cursive script.

Natalie Calow MSN, RN, CEN, AFN-C

Nicole Perkins
300 Wintergreen Drive
Yorktown, IN 47396

May 1, 2024

Indiana Professional Licensing Agency
Attn: Nursing Board
402 West Washington Street, Room W072
Indianapolis, IN 46204

Indiana State Board of Nursing,

This letter is to express my expert opinion regarding the content outlined in LSA Document #24-114 concerning requirements to practice as a forensic nurse and continuing education for forensic nurses.

I have been practicing as a forensic nurse in East Central Indiana for twelve years and have obtained three certifications in forensic nursing: two from International Association of Forensic Nurses (IAFN) and one from the Academy of Forensic Nursing (AFN). Over the years I have had the pleasure of teaching forensic nursing courses with the Indiana SANE Training Project, Emergency Nurses Association (ENA), and Indiana University – Purdue University Columbus (IUPUC).

IC 25-23-1-35 was created with minimal feedback from nurses working in this specialty. I am grateful for the opportunity to formally provide recommendations to this proposed rule and to come together as a united and dedicated team, caring for fellow Hoosiers on the worst days of their lives. Collaborative and transparent communication is essential to providing seamless forensic care to all corners of our state.

While I am supportive of continued education requirements, I question why forensic nursing is the first and only nursing specialty in the state to require a specific license type and continuing education. I feel there should be education requirements for all nurses and portions of those requirements could be allotted for the nurses' specific specialty.

Upon reviewing the information provided, I encourage the Board to examine the requirements of the available forensic certifications and consider waiving the continued education requirements for nurses who obtain and maintain board certification. The IAFN and AFN certification handbooks are enclosed for review.

Each board certification has education requirements and is renewed every three years with an application fee ranging from \$175-\$605, depending on submission timeframe and membership status. Submitting proof of completion of all CEUs is typically the most tedious part of maintaining certification as everything is entered on an electronic form. Waiving the continued education requirements for board certified nurses would remove the task of submitting those CEUs into an additional electronic form with licensure renewal. Also, this would allow for a wider option of CEUs versus being limited to what is approved by the state SANE coordinator or provided by the Indiana SANE training project.

Additionally, I would like to request clarification of "the forensic nurse license" created by IC 25-23-1-35. Is this an additional nursing license for us? If not, does this license cover our nursing practice with non-

forensic patients? If we obtain a forensic nurse license and leave forensic nursing, is there a notification process we need to follow?

Thank you for considering my concerns. I trust that you will take appropriate action to address this matter and ensure that our patients remain at the forefront of all decision making.

Respectfully,

A handwritten signature in black ink, reading "Nicole Perkins RN". The signature is written in a cursive, flowing style.

Nicole Perkins BSN, RN, SANE-A, SANE-P, GFN-C, CPST

Enclosures:

Sexual Assault Nurse Examiner (SANE-A® and SANE-P®) 2024 Certification Examination Handbook
Forensic Nursing Certification Board (FNCB) Certification Examination Application Manual 2024

2024

CERTIFICATION RENEWAL HANDBOOK

Sexual Assault Nurse Examiner

(SANE-A® and SANE-P®)



INTERNATIONAL
ASSOCIATION OF
**Forensic
Nurses**

COMMISSION FOR
FORENSIC NURSING
CERTIFICATION

After You Submit Your Application	22
NOTIFICATION OF CERTIFICATION RENEWAL STATUS.....	22
USE OF THE CREDENTIALS	22
APPEALS PROCESS.....	23
DISCIPLINARY AND COMPLAINTS POLICY	23
Contact Information	24

QUESTIONS? COMMENTS? SUGGESTIONS?
certification@ForensicNurses.org

Questions?

CFNC c/o International Association of Forensic Nurses

6755 Business Parkway, Ste 303

Elkridge, MD 21075

p: 410.626.7805

f: 410.626.7804

certification@ForensicNurses.org

www.ForensicNurses.org

ELIGIBILITY REQUIREMENTS

To be eligible to renew the SANE-A and/or SANE-P certification, you must:

1. Hold current certification in the renewing specialty (i.e., SANE-A or SANE-P);

AND

2. Hold an active, unrestricted license as a registered nurse (RN) or advanced practice registered nurse (APRN) in the United States or a US territory!

OR

Hold an active, unrestricted license as a first-level general nurse (or the equivalent) in the country/jurisdiction of practice;²

AND

3. Have *practiced*³ as a sexual assault nurse examiner for a minimum of 300 hours within the past 3 years. At least 200 of the 300 hours must focus on the population for which the applicant seeks certification (e.g., for the SANE-A exam and recertification, at least 200 of the applicant's 300 SANE-related practice hours focus on the adult/adolescent patient population; for the SANE-P exam, at least 200 of the applicant's 300 SANE-related practice hours focus on the prepubescent patient population, for SANE-P recertification, 200 of the 300 hours may focus on the prepubescent and/or adolescent patient population);

AND

4. Obtain either the required continuing education hours

OR

Achieve a passing score on the certification examination.

The eligibility requirements for recertification were initially established based on the first job analysis studies conducted for the exams. The CFNC reviews the eligibility requirements annually and updates, as needed.

NONDISCRIMINATION POLICY

The Association/CFNC do not discriminate against any applicant or candidate for certification on

² Applicants who do not have a US RN license must have completed a post-secondary nursing education program that includes classroom instruction and clinical practice in medical, surgical, obstetric, pediatric, and psychiatric nursing. To confirm eligibility, these applicants may be asked to provide a transcript from their nursing education program.

³ *Practice* includes any combination of the following activities:

- Providing direct patient care as a SANE
- Taking on-call shifts to respond to patients as a SANE even if not seeing a patient (*Limit: No more than 100 hours*)
- Teaching/precepting SANEs (including via telehealth modality)
- Providing direction/consultation on SANE issues/cases (including via telehealth modality)
- Participating in peer review of SANE cases

expires. You must [register/pay](#) and submit by the established deadlines.

To renew by CE, you must:

- Meet the certification renewal eligibility requirements;

AND

- Register and submit the appropriate fee(s);

AND

- Complete and submit your Renewal Application;

AND

- Retain records of your continuing education activity. Do not submit supporting documentation of attendance at each activity unless we notify you that your application has been designated for audit.

DEADLINES AND FEE SCHEDULE

	IAFN Member Application Fee	Non-Member Application Fee	Int'l* Member Application Fee	Int'l* Non-Member Application Fee
Until Apr 30, 2024: early filing-fee applies	\$175	\$325	\$250	\$375
May 1–Oct 1, 2024: standard filing-fee applies	\$275	\$425	\$350	\$475
Oct 2–Oct 15, 2024: late filing-fee applies	\$455	\$605	\$530	\$655

*International=residence outside the US or Canada

The application must be RECEIVED in the Association's home office by the deadline date. No application will be accepted after the late-filing deadline October 15 2024, 11:59 PM ET.

You must first register and remit payment via credit card (or promo code) at that time. Call the home office in advance if arranging any alternate payment (i.e., personal check, money order, certified check). If a check is returned for insufficient funds, you will be required to pay a \$45 returned-check fee and then must remit by money order, certified check, or credit card.

2. Log in to your IAFN profile (portal)
3. Under **Certifications**, select the certification you are renewing
4. Click **Print**
5. Note the **Certification Date**—enter this date on your application in the **Certification Date** field. That is your start date for claiming any appropriate CE

The stop date to accrue CE is October 1 of the year your certification expires.

CE activities that you attended prior to the date of your initial certification (or most recent recertification) are not accepted. You may apply to your next renewal cycle any CE hours obtained after October 1 in the year you renew.

Content of CE Activities

Renewal by meeting CE requirements ensures that you have participated in professional development activities that are directly related to the body of knowledge for SANEs as defined by the respective exam content outlines.

All CE activities submitted must relate to the test content outline of the certification being renewed (e.g., SANE-A test content outline for SANE-A; SANE-P test content outline for SANE-P).

The CFNC is unable to provide approval of courses prior to attendance. For your convenience, however, the CFNC has designated for renewal purposes all courses offered in the Association's Online Learning Center, at the Annual Conference, and on the SAFETA.org web site.

SANE-A: Is the topic of the session you plan to claim listed on the SANE-A test content outline below? If not, do NOT list. Only topics listed will be credited for renewal purposes.

SANE-A® Test Content Outline

Domain 1: Assessment and Documentation - 32%	
0101	Identify urgent/emergent medical problems (e.g., strangulation, head injury, wounds, drug/alcohol intoxication) that require medical treatment prior to and/or during the medical forensic examination.
0102	Assess safety needs of the patient (e.g., bed rails, medical equipment, environment, patient identity) and implement safety measures during the SANE evaluation.
0103	Identify the acute and long-term emotional and psychological response (e.g., neurobiological, suicidal ideation, post-traumatic stress disorder) to sexual assault.
0104	Obtain and document the health history (e.g., medical, psychosocial, developmental).
0105	Obtain and document the sexual assault history.
0106	Assess the patient for indicators of alcohol- and/or drug-facilitated sexual assault.
0107	Assess the patient's level of development (e.g., physical, psychological, cognitive).
0108	Assess the patient for sexually transmitted infections and/or exposure risk.
0109	Assess the patient for pregnancy and/or pregnancy risk.
0110	Assess the patient's immunization status (e.g., tetanus, hepatitis B, HPV).

Domain 5: Professional Practice - 12%	
0501	Implement safety measures (e.g., physical, environmental, equipment) for the safety of the SANE during and after the medical forensic examination.
0502	Implement principles of confidentiality (e.g., privacy laws, release of information, restricted vs. nonrestricted reporting).
0503	Implement principles of informed consent and informed refusal.
0504	Evaluate and utilize current evidence-based practice (e.g., research, professional development, guidelines).
0505	Participate in peer review, case review, and quality improvement processes.
0506	Implement strategies to collaborate with interprofessional team members.
0507	Identify risks, prevention, and interventions for vicarious trauma.
0508	Incorporate ethical principles in professional practice (i.e., autonomy, beneficence, nonmaleficence, justice).

SANE-A® Reference List

This reference list contains recommended resources to assist you in preparing for the certification examination. This list is not all-inclusive; other references may help you to study, including information in the *Journal of Forensic Nursing* and other peer-reviewed journals.

Alexander, R., & Harper, N. S. (2019). *Medical response to child sexual abuse: A resource for professionals working with children and families* (2nd ed.). STM Learning Inc.

American Nurses Association & International Association of Forensic Nurses. (2017). *Forensic nursing: Scope and standards of practice* (2nd ed.). Nursesbooks.org.

Centers for Disease Control & Prevention (CDC). (2016). [*Updated guidelines for antiretroviral postexposure prophylaxis after sexual, injection drug use, or other nonoccupational exposure to HIV—United States, 2016*](#). CDC.

Hammer, R. M., Moynihan, B., & Pagliaro, E. M. (2013). *Forensic nursing: A handbook for practice* (2nd ed.). Jones & Bartlett Learning, LLC.

International Association of Forensic Nurses. (2013). *Atlas of sexual violence* (T. Henry, Ed.). Mosby.

International Association of Forensic Nurses (IAFN). (2018). [*Sexual assault nurse examiner \(SANE\) education guidelines*](#). IAFN.

Ledray, L. E., & Burgess, A. W. (2019). *Medical response to adult sexual assault: A resource for clinicians and related professionals* (2nd ed.). STM Learning Inc.

Lynch, V. A., & Duval, J. B. (2011). *Forensic nursing science* (2nd ed.). Mosby.

Mezey, G. C., & King, M. B., eds. (2000). *Male victims of sexual assault* (2nd ed.). Oxford University Press.

National Sexual Violence Resource Center (NSVRC). (2018). [*Sexual assault response team \(SART\) toolkit*](#) (2nd ed.). NSVRC.

SANE-P: Is the topic of the session you plan to claim listed on the SANE-P test content outline below? If not, do NOT list. Only topics listed will be credited for renewal purposes.

SANE-P® Test Content Outline

Domain 1: Assessment and Documentation - 34%	
0101	Identify urgent/emergent medical problems (e.g., strangulation, head injury, wounds, drug/alcohol intoxication) that require medical treatment prior to and/or during the medical forensic examination.
0102	Assess safety needs of the patient (e.g., bed rails, medical equipment, environment, patient identity) and implement safety measures during the SANE evaluation.
0103	Identify the acute and long-term emotional and psychological response (e.g., neurobiological, suicidal ideation, post-traumatic stress disorder) to sexual assault/abuse.
0104	Obtain and document the health history (e.g., medical, psychosocial, developmental, behavioral).
0105	Obtain and document the sexual assault/abuse history.
0106	Assess the patient for indicators of alcohol- and/or drug-facilitated sexual assault/abuse.
0107	Assess the patient's level of development (e.g., physical, psychological, cognitive, sexual maturation).
0108	Assess the patient for sexually transmitted infections and/or exposure risk.
0109	Assess the patient for pregnancy and/or pregnancy risk.
0110	Assess the patient's immunization status (e.g., tetanus, hepatitis B, HPV).
0111	Conduct a comprehensive head-to-toe physical assessment and document findings (e.g., narrative, diagrammatic).
0112	Assess orifices involved in the sexual assault/abuse for trauma by using appropriate methods or adjuncts (e.g., speculum, anoscope, magnification, toluidine blue dye, catheter technique, positioning).
0113	Distinguish trauma from normal and abnormal physical findings (e.g., normal variances, mimics of abuse).
0114	Complete photographic documentation by using principles of forensic photography.

Domain 2: Evidence Collection - 14%	
0201	Identify items for evidence collection based on the circumstances or events (e.g., time frame, orifices involved, body contact).
0202	Collect biological and trace specimens from involved orifices and other body areas of contact by using appropriate methods or adjuncts (e.g., alternate light sources, toxicology kits, sexual assault evidence kits).
0203	Collect reference samples (e.g., blood, buccal swab) for the patient's DNA.
0204	Preserve forensic sample integrity (e.g., knowledge of biological degradation, chain of custody)
0205	Document clothing and biological and trace specimens collected.

Domain 3: Patient Management - 30%	
0301	Utilize appropriate communication resources (e.g., interpreters, technology, translation services) based on patient and/or caregiver needs.

SANE-P® Reference List

This reference list contains recommended resources to assist you in preparing for the certification examination. This list is not all-inclusive; other references may help you to study, including information in the *Journal of Forensic Nursing* and other peer-reviewed journals.

- Alexander, R., & Harper, N. S. (2019). *Medical response to child sexual abuse: A resource for professionals working with children and families* (2nd ed.). STM Learning Inc.
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- Panel on Antiretroviral Guidelines for Adults and Adolescents. (2022, September 21). [Guidelines for the use of antiretroviral agents in adults and adolescents with HIV](#). Department of Health and Human Services.
- Price, B., & Maguire, K. (2016). *Core curriculum for forensic nursing*. Lippincott Wolters Kluwer.
- US Department of Justice, Office of Justice Programs, National Institute of Justice. (2017). [National best practices for sexual assault kits: A multidisciplinary approach](#). US Department of Justice, Office of Justice Programs.
- US Department of Justice, Office of Justice Programs, Office for Victims of Crime. (2018). [SANE program development and operation guide](#). National Institute of Justice & US Department of Justice, Office of Justice Programs.
- US Department of Justice, Office on Violence Against Women. (2013). [A national protocol for sexual](#)

Renewal Application Categories

WHAT IS CATEGORY A?

Category A includes attendance at:

- Conferences
- Conventions
- Workshops
- Seminars
- Webinars
- Peer review meetings/sessions

You must claim—and receive credit for—a minimum of 30 hours of CE under Category A. All Category A CE activities must meet the following criteria:

- **Educational content is specific to the test content outline** (i.e., SANE-A renewal content reflects the SANE-A test content outline; SANE-P renewal content reflects the SANE-P test content outline).
- You may attend 1 initial SANE-A or SANE-P training course for a maximum of 1 time (that is, attending 1 course or the other) per renewal cycle. Considered basic preparation, these courses are credited at 25% of the CE contact hours granted.
 - The Virtual Practicum DVD may be claimed 1 time per renewal cycle. As basic training, it is credited at 25% of the CE contact hours granted.
- Single-topic courses/workshops/sessions (i.e., strangulation, human trafficking, intimate partner violence, etc.) are credited at a maximum of 10 Category A hours per topic.
- At least 12 of the 30 Category A hours must be from an accredited/approved continuing nursing education provider. Certificants outside the United States shall have the alternative requirement that at least 12 of the 30 hours of CE under Category A have been hosted/provided by a nursing organization or employer.
- Individual CE sessions with the same date of completion will be credited at a maximum of 24 hours.

- poster development = 1 hour toward renewal
- poster development and presentation = 2 hours toward renewal
- SANE Nursing Preceptorship:
Participation as a preceptor for sexual assault nurse examiners may be used. This is typically a one-on-one relationship with specific, mutually determined goals. The total hours can be accumulated through multiple preceptorships with different preceptees including via telehealth modality. To submit the precepting experience for renewal, you must have precepted for at least 45 hours. Credit is given as follows:
 - each 45 hours as a preceptor = 5 hours toward renewal

COMPLETING THE APPLICATION

- List a valid, *personal (not work)* email address to ensure confidential communication about your certification renewal status.
- List only those CE activities that meet both topic and timing criteria. **You must accrue your CE between your Certification Date/Start Date for CE and October 1, 2024.**
- Please retain all renewal documentation for at least 6 months after the renewal deadline.

DUAL CERTIFICANTS

If renewing both the SANE-A and SANE-P certifications, you must register/pay for and submit a separate application for each certification. You may list the same CE activity on both applications IF the CE topic is reflected on both the SANE-A and SANE-P test content outlines.

INCOMPLETE RENEWAL APPLICATIONS

Complete all sections/fields of the application. Applications are considered incomplete if: 1) any required information is missing; 2) the appropriate fee is not paid; or 3) you do not submit the requisite number of CEs required for renewal. If your application is incomplete, the Association's staff will notify you once via email sent to the email address you listed on your application. The email will detail what you must submit to complete your application and include a deadline in which to submit. If you fail to complete/respond by the designated deadline, the renewal application will be subject to denial and may be subject to an additional processing fee. Only completed applications are processed.

Online Application Process

Plan to:

- 1) Register (and apply) listing a valid, *personal (not work)* email address. This helps ensure you will receive the IMMEDIATE email with confirmation after completion. A \$25 fee applies to resend a renewal email if you fail to list a personal email address.
- 2) Pay by credit card (or promo code).

- Published journal article – the Table of Contents listing the title of the article and you as an author
- Presentation – the course brochure or advertisement listing you as a presenter
- Poster presentation – the meeting brochure/syllabus, photograph of the poster, title page of the PowerPoint, or copy of the abstract acceptance letter, each listing the title of the poster presentation and you as an author
- Preceptorship hours – a log with the date, time, and name of the person(s) you supervised and a brief description of each activity you supervised or a letter from your supervisor verifying this activity

If your audit submission contains areas of nonadherence, you will be granted at least 3 days to submit additional information. If you then fail to timely submit, your application will be denied. If your application is designated for audit and you fail to respond/submit the requested documentation within the established deadline(s), the renewal application will be denied.

After You Submit Your Application

NOTIFICATION OF CERTIFICATION RENEWAL STATUS

The Association will email a renewal approval notice to the email address you listed on your application, typically within 5-10 business days of your submission. The Association will email the certificate and official notice to the home email address provided on your application/IAFN profile (portal).

If your application to recertify by CE is at risk of being denied, the Association's staff will email you at the email address you listed on your application, detail the issue and what is needed, and request you respond by a given deadline. If you fail to respond within the deadline, the application will be denied. If you fail to meet the renewal criteria specified, the recertification application will be denied and the Association will email a confidential letter to the email address you listed on your application, detailing the reason(s) for denial, refund policy, appeals process, and date of certification expiration. To recertify, you must then meet the eligibility criteria for the certification exam, and test and achieve a passing score. **No uniformly applied efforts, which may exceed the times or means for contact outlined herein, may comprise a viable basis for appeal.**

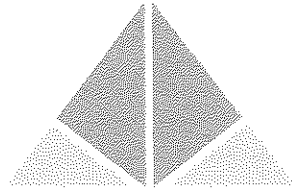
USE OF THE CREDENTIALS

After achieving certification, you may use the credentials in all correspondence and professional relations. The credential is typically placed after your name, following any academic degrees and licensure (e.g., Mary Smith, BSN, RN, SANE-A). If you have earned both the SANE-A and the SANE-P credentials, list them separately (e.g., Mary Smith, BSN, RN, SANE-A, SANE-P). You may use the credential as long as the certification remains valid, which is 3 years, barring disciplinary action. For more information, please see [Use of Credentials](#).

Contact Information

CFNC c/o International Association of Forensic Nurses
6755 Business Parkway, Ste 303
Elkridge, MD 21075
p: 410.626.7805
f: 410.626.7804
certification@ForensicNurses.org
www.ForensicNurses.org

Revised 3/6/2024---PSH



Forensic Nursing Certification Board

**Forensic Nursing Certification Board (FNCB)
Certification Examination Application Manual**

**Generalist Forensic Nurse Certified (GFN-CTM)
Advanced Forensic Nurse Certified (AFN-CTM)
Micro-Certifications**

2024

[Forensicnursingcertificationboard.org](https://forensicnursingcertificationboard.org)

INTRODUCTION

The Forensic Nursing Certification Board (FNCB) is an independent certifying agency. The board does collaborate with the Academy of Forensic Nursing (AFN), a membership organization, but both organizations operate as separate and autonomous entities.

Certification examinations (including micro-certifications) offered through the FNCB, and associated credentials are copyrighted, safeguarding the integrity and proprietary nature of the examination materials and certification titles. The FNCB copyright and trademark legal protection ensures the authenticity and reliability of the certification process, maintaining standards of excellence in a forensic nurse's practice.

This handbook is a guide for those wishing to take the following certification exams.

- Advanced Forensic Nurse – Certified (AFN-C)
- Generalist Forensic Nurse – Certified (GFN-C)
- Micro-certifications
 - Interpersonal Violence Strangulation Evaluation – Certified (IVSE-C)
 - Additional micro-certifications will be added as approved.

The handbook provides the most up-to-date information regarding eligibility, application, testing, and FNCB policies, and is updated yearly. The 2024 version supersedes all information from previous versions.

Applications are accepted year-round and must be submitted online through the FNCB website. Once submitted, applications are valid for one year. After one year, the applicant must submit a new application and pay the full examination fee. Additional application information is found in this handbook.

Typical application processing time is 2-3 weeks if the application is complete, and all required documents have been submitted. Processing time will be extended if additional information is required.

Email at ForensicNCB@gmail.com is the preferred method of communication. The email address is routinely monitored.

Contact Us

Website: www.goforensicncb.org

Email: ForensicNCB@gmail.com

Certification examinations reflect the evolutionary growth and understanding of the specialty of forensic nursing. Unique requirements exist for the forensic nurse seeking Generalist Forensic Nurse, Advanced Forensic Nurse, or micro-certifications. Upon successful completion of the application and the certification examination, conferral of the GFN-C^{1M}, AFN-C^{1M}, or IVSE-C^{1M} credential signifies the forensic nurse's mastery of minimal content necessary for practice at the generalist or advanced forensic nursing level, as well as an ongoing commitment to professionalism and excellence.

Please note that this examination is not based on a specific job description, such as knowledge exclusive to being a sexual assault nurse examiner, legal nurse consultant, forensic nurse death investigator, etc. This exam is much more inclusive of core content and competencies that are based on the three pillars of knowledge applicable to forensic nursing. So, as you prepare, think of overarching principles that would apply to any role. Study guides outline core content and assist in the preparation for these examinations.

Generalist Forensic Nurse

The **Generalist Forensic Nurse** is a licensed Registered Nurse (RN), who practices in the forensic nursing specialty or any of the related subspecialties, meets the minimum educational requirement, practices the core competencies, and has obtained the experience required for Generalist Forensic Nurse certification. Evidence-based content provides the foundation for educational curricula and practice. Practice for the Generalist Forensic Nurse qualified for certification includes direct patient care, application of scholarship, and supervised leadership.

Advanced Forensic Nurse

The **Advanced Forensic Nurse** is a licensed RN who holds a graduate degree in nursing from an accredited school of nursing, practices in the forensic nursing specialty or any of the subspecialties, practices the core competencies, and has obtained experience required for Advanced Forensic Nurse certification. Evidence-based content provides the foundation for education curricula and practice at the advanced level. Practice for the Advanced Forensic Nurse qualified for certification includes research, service, and education, and may include direct patient care that informs and directs organizations and systems through scholarship and leadership.

Interpersonal Violence Strangulation Evaluation Micro-Certification

The forensic nurse who is a licensed Registered Nurse (RN), who practices in the forensic nursing specialty or any of the related subspecialties, meets the minimum educational requirement, practices the core competencies, and has obtained the experience required for Interpersonal Violence Strangulation Evaluation micro-certification. Evidence-based content provides the foundation for educational curricula and practice.

About FNCB Certification Examinations

FNCB certification examinations are offered online, via remote live proctoring and last approximately 3.5 hours. All examination questions are in a multiple-choice format. Rote questions measure basic knowledge. Questions related to vignettes demonstrate the application of scientific knowledge to practice. Post-examination analysis is completed quarterly for evaluation of question performance, level of difficulty, and ability to meet core competency practices. The FNCB Committee reviews all questions for validity and reliability yearly.

Licensure Requirements

Candidates must hold a current, active, and unencumbered RN license in a U.S. state or territory. Alternatively, they can hold the legally recognized professional equivalent of an RN license from another country.

Experience/Practice Requirements

There are **two** pathways to meet experience and practice requirements. Applicants must meet the criteria in **ONE** of the following pathways to qualify for testing.

Pathway #1 - Education

- Applicants must submit an academic transcript showing successful completion of at least **6 credit hours** of forensic nursing coursework from an accredited nursing program within the **three (3) years before application**.
- Additionally, they need to have a minimum of **one year of forensic nursing practice** and a total of at least **1000 forensic nursing practice hours (completed within the five (5) years before application)**.
- Practice hours **MUST** occur **AFTER** RN Licensure is obtained and may include the following activities:
 - o Direct clinical practice in the role of a forensic nurse or direct supervision of others in a forensic nursing role. (1 hour of practice or supervision = 1 practice hour)
 - o Teaching in an accredited school or college of nursing in a forensic nursing education program at the BSN or graduate level (1 semester hour = 15 practice hours)
 - o Consultation in the role of a forensic nurse (expert consultation and testimony, fact witness, records review, etc). (1 hour of consultation = 1 practice hour)
 - o Participation in forensic-related task forces, community coordinated teams, multidisciplinary teams, and professional organizations. (1 hour of participation = 1 practice hour)
 - o Scholarship and research in forensic nursing topics such as publications, best practice documents, and presenting at conferences or in webinars (AACN, 2021, p. 25). (Applicants will be expected to document the number of hours spent for practice in the areas of scholarship and research. Upon review, applicants may be asked to submit additional documentation as verification.)

Pathway #2 - Practice

- Applicants must complete a minimum of **60 CE credits (contact hours) or equivalent forensic nursing coursework** (1 semester hour of coursework equals 15 CE credits) from an accredited nursing program **within the three (3) years** before the application date. At least 60% of these CE credits must come from ANCC-accredited offerings. Documentation for each session attended at multi-day conferences should be provided (see application supplement to list CE courses).
- Additionally, candidates need to have at least **one year of forensic nursing practice** and a **minimum of 1000 hours of forensic nursing practice** within the **five (5) years** before the application.
- Practice hours **MUST** occur **AFTER** RN Licensure is obtained and may include the following activities:

- Additionally, candidates need to have at least **two years of forensic nursing practice** and a **minimum of 2000 hours of forensic nursing practice** within the five (5) years before the application.
- Practice hours **MUST** occur **AFTER** RN Licensure is obtained and may include the following activities:
 - o Direct clinical practice in the role of a forensic nurse or direct supervision of others in a forensic nursing role. (1 hour of practice or supervision = 1 practice hour)
 - o Teaching in an accredited school or college of nursing in a forensic nursing education program at the BSN or graduate level (1 semester hour = 15 practice hours)
 - o Consultation in the role of a forensic nurse (expert consultation and testimony, fact witness, records review, etc). (1 hour of consultation = 1 practice hour)
 - o Participation in forensic-related task forces, community coordinated teams, multidisciplinary teams, and professional organizations. (1 hour of participation = 1 practice hour)
 - o Scholarship and research in forensic nursing topics such as publications, best practice documents, and presenting at conferences or in webinars (AACN, 2021, p. 25).
(Applicants will be expected to document the number of hours spent for practice in the areas of scholarship and research. Upon review, applicants may be asked to submit additional documentation as verification.)

Interpersonal Violence Strangulation Evaluation-Certified (IVSE-CTM)

To be eligible to apply for the **Interpersonal Violence Strangulation Evaluation-Certified** micro-certification examination, candidates must meet the following criteria:

Education Requirements:

Candidates are required to possess an Associate of Science in Nursing (ASN), diploma, Bachelor of Science in Nursing (BSN), master or doctoral degree from an accredited nursing program approved by the Commission of Collegiate Nursing Education (CCNE) or the Accreditation Commission for Education in Nursing (ACEN).

Licensure Requirements:

Candidates must hold a current, active, and unencumbered RN license in a U.S. state or territory. Alternatively, they can hold the legally recognized professional equivalent of an RN license from another country.

Experience/Practice Requirements:

There are **two pathways** to meet experience and practice requirements. Applicants must meet the criteria in **ONE** of the following pathways to qualify for testing.

Pathway #1 - Education

- Applicants must submit an academic transcript showing successful completion of at least **6 credit hours** of forensic nursing coursework from an accredited nursing program within the **three (3) years** before application.

EXAM APPLICATION

Deadlines

Certification examination applications are accepted year-round for the four testing windows per year. As part of a collaborative agreement with the Academy of Forensic Nursing (AFN) current members of this organization receive a discounted fee at the time of purchase. Membership verification is completed for all applicants requesting this discount. Those seeking micro-certifications will receive a discount for having a GFN-C or an AFN-C and for an AFN membership. These fees do not include the cost of official transcripts required for application.

Generalist and Advanced Certification

Application Window	Examination Windows	Fee: AFN Member	Fee: Non-AFN Member
January 1 – December 31	January 1–31 April 1–30 July 1–31 October 1–31	\$395	\$450

Micro-Certifications

Application Window	Examination Windows	Fee: GFN/AFN Certified and AFN member	Fee: GFN/AFN Certified Non-AFN member	Fee: Non-GFN/AFN Certified AFN member	Fee: Non-GFN/AFN Certified Non-AFN member
January 1 – December 31	January 1–31 April 1–30 July 1–31 October 1–31	\$175	\$225	\$395	\$450

Refund Policy

Application fees cannot be transferred to another applicant and are generally non-refundable. If, after review, it is determined that an applicant is not eligible to take the certification examination, the application fee will be returned minus a \$195 processing fee.

Application Payment and Submission

1. Payment and application are only accepted through the designated online systems.
2. To purchase an examination, visit "FN/CB Shopping" at <https://goforensicncb.org/exam-application>. (NOTE: separate applications are required for each certification and micro-certification.)
3. Following payment, locate the application link at the email address you provided during purchase.

3. Ineligible for examination.

- a. An explanation will be provided.
- b. Ineligible applicants will be refunded the application fee minus a \$195 processing fee.

Examination Eligibility Appeal

Applicants determined to be ineligible to take the examination have the right to appeal the decision by submitting a letter to FNCB at ForensicNCB@gmail.com, stating the grounds for the appeal. The appeal must be submitted no later than 30 days after receiving the notification of ineligibility. FNCB will thoroughly review the appeal and provide a decision within 30 days of receiving the appeal submission. It is essential to note that the decision rendered by FNCB following the appeal process is final and cannot be further contested.

Investigation and Management of Candidate Misrepresentation and Non-compliance

Please note that if there are any suspicions of fraudulent submission of materials, FNCB reserves the right to request further supporting evidence. Failure to provide satisfactory evidence may result in the denial of certification. In such cases, FNCB may also report the matter to the applicant's State Board of Nursing for further investigation.

EXAM PREPARATION

Upon approval to sit for the certification, applicants will receive an email from [Instructor/CANVAS](mailto:Instructor@CANVAS.com) within 15 business days, containing instructions on how to access the learning management system. CANVASTM serves as a valuable platform, providing applicants with orientation to the site and offering additional materials essential for effective examination preparation. If an applicant does not receive the email, please check your spam/junk folder. If it is not located there, they are encouraged to contact FNCB at ForensicNCB@gmail.com for assistance.

The content covered in both the Generalist Forensic Nurse Certified, Advanced Forensic Nurse Certified, and Micro-Certification examinations encompasses essential knowledge deemed necessary by FNCB. This knowledge spans various areas, including legal principles, forensic science, and nursing science, all related to trauma, violence, and anticipated health outcomes.

Legal Tenants refer to foundational documents that inform forensic nursing practices at all levels. They outline the rights guaranteed to all citizens and are critical for understanding regulations, legislation, testimony, court proceedings, laws, and the legal system.

Forensic Science addresses national standards in the United States concerning evidence identification, collection, procurement, packaging, transfer, storage, and disposal in healthcare and collaborative systems, such as courts and law enforcement. While state and local forensic science practices, such as laboratory processing (DNA, toxicology, and trace evidence), are not assessed, FNCB expects forensic nurses to comprehend the concepts and purpose of evidence management throughout the life cycle of items collected in association with the forensic nurse-patient relationship.

Forensic Nursing encompasses laws related to mandatory reporting and regulations influencing forensic nursing practices. While state or local laws and regulations are not part of the examination, forensic nurses are expected to grasp the concepts and intentions of federal laws and rules associated with the forensic nurse-patient relationship.

Through this rigorous examination, we aim to ensure that Advanced Forensic Nurses possess a well-rounded understanding of legal principles, forensic science, and nursing concepts crucial to their advanced practice. This enables them to deliver exceptional care, make informed decisions, and contribute significantly to the advancement of forensic nursing as a specialized field.

As the field of forensic nursing continues to evolve, Advanced Forensic Nurses play a pivotal role in driving progress and shaping the future of advanced nursing specialty practice. Through their expertise and leadership, they contribute to the improvement of patient outcomes and the promotion of justice within the healthcare system.

Micro-Certifications

The micro-certification examinations focus on foundational knowledge required for forensic nurses entering specific sub-specialty practice areas. At the generalist level, questions will emphasize generalist practice related to that sub-specialty area across diverse populations and settings throughout the lifespan. Certified nurses will be able to identify healthcare issues, provide recommendations for change, and collaborate with teams to achieve healthy outcomes for patients experiencing trauma, violence, and strangulation. Each micro-certification examination consists of 120 multiple-choice questions, with the content weight distributed as follows: Legal Pillar 20%; Forensic Science Pillar 20%; Nursing Pillar 60%.

Micro-Certification Examination Content		
Legal (20%)	Knowledge (50%)	Application (50%)
Forensic Science (20%)	Knowledge (50%)	Application (50%)
Nursing (60%)	Knowledge (25%)	Application (75%)

Here are several important points regarding the use of practice examinations and examination preparation materials in the context of our certification process:

1. **Flexibility in Study Resources:** Candidates are not required to use practice examinations and/or examination preparation materials provided by FNCB to be eligible to sit for the actual certification examination. FNCB understands that individuals may have their preferred resources for exam preparation.
2. **No Guarantee of Success:** It is essential to emphasize that the use of practice examinations and/or examination preparation materials, whether provided by FNCB or not, does not guarantee successful performance on the actual certification examination. Success is contingent on a candidate's knowledge, skills, and abilities relevant to the certification requirements.
3. **Fair Assessment:** We maintain a commitment to fairness and equity in our certification process. The use of practice examinations and examination preparation materials does not provide an advantage over candidates who choose not to use them. Our certification assessments are designed to evaluate each candidate's competence based on a standardized set of criteria.
4. **Multiple Avenues for Preparation:** Candidates must understand that the use of practice examinations and/or examination preparation materials is not the only or preferred route to adequately prepare for the certification examination. There are various methods and resources

High-speed Internet Access

- Computer access with word processing software capable of delivering documents in these formats: “.doc”, “.docx”, or “.rtf”. PDF conversion software is also required.
- Software: Adobe Reader, Panopto, Canvas, YouTube access, Microsoft Word access

A webcam (internal or external) and a microphone

Processor: 6th Generation Intel Core i3 or equivalent Ram: 6 gigabytes

Examination Postponement

In exceptional situations, it is possible to request an extension of the testing window for the certification examination. However, there are specific guidelines and conditions that candidates must adhere to. **Please note that this option can only be utilized once per certification examination application.**

1. **Early Request for Postponement:** If candidates wish to postpone their examination before the designated testing window opens, they may do so, and they will be rescheduled for the next available testing cycle.
2. **Late Request for Postponement:** Should a candidate wish to request an examination postponement after the testing window has opened, they must provide a valid reason for the delay. The request will be subject to review by FNCB (Forensic Certification Board), and if approved, they will be rescheduled for the next available testing cycle.
3. **Failure to Request or Complete Examination:** Failure to contact FNCB before the scheduled testing window closes or not completing the certification examination within the allotted testing window will result in the forfeiture of the candidate's right to take the test during that cycle.

Candidates who have inquiries or wish to contest their postponement decision are encouraged to reach out to FNCB through email at ForensicNCB@gmail.com.

FNCB values your commitment to the certification process and understands that unforeseen circumstances may arise. FNCB will consider each request carefully and fairly, ensuring that all candidates have an equal opportunity to achieve their certification goals. Please adhere to these guidelines when requesting a testing window extension, and we will do our best to support you throughout the certification journey.

Requests for Testing Accommodations

FNCB and Respondus, a third-party industry-standard testing platform, make reasonable accommodations for disabled certification examination candidates, as defined by the Americans with Disabilities Act of 1990, AS AMENDED with the ADA Amendments Act of 2008. Reasonable accommodations will be made for applicants who speak English as a second language (ESL), or those who have a disability. Reasonable accommodations are individualized based on candidate request, ESL status, and disability submitted documentation.

Applicants who have a disability as defined under the ADA and who are seeking testing accommodation must notify FNCB (ForensicNCB@gmail.com) by submitting documentation from a physician or other qualified healthcare professional that includes the following information:

- A specific diagnosis and date of diagnosis.
- Specific recommendations for testing accommodation(s) including a detailed explanation of why the accommodation is needed. If the accommodation includes extra time, please indicate the amount of time requested.

GFN-C™ signifies the achievement of a body of knowledge unique to the forensic nurse at the professional level of practice. AFN-C™ signifies the achievement of a body of knowledge unique to graduate education in advanced forensic nursing practice. IVSE-C™ signifies the achievement of a body of knowledge unique to the forensic nurse at the professional level of practice with subspecialty knowledge in interpersonal violence and strangulation evaluation.

Certification credentials are generally located after any academic degrees and licensure. FNCB follows the American Nurse Credentialing Center (ANCC) listing of nursing credentials. Please refer to ANCC, [How to display your credentials](#), for additional information regarding the use and ordering of nursing credentials.

Retesting

Applicants who do not pass the initial examination have the option to submit another application for a retest with a one-time discounted examination fee. For AFN members, the first retest costs \$150, while for non-members, it is \$250. However, any subsequent re-attempts will be charged at the full examination cost.

Please note that an examination can only be retaken up to three (3) times every 12 months. Between each testing attempt, applicants must observe a minimum waiting period of 30 days. Additionally, it is important to ensure that all eligibility requirements are met at the time of submitting the retest application.

Application Window	Examination Window	Fee: AFN Member	Fee: Non-AFN Member
January 1 – December 31	January 1 – January 31 April 1 – April 30 July 1 – July 31 October 1 – 31	\$150	\$250

Concerns or Feedback About the Examination Process

Applicants are requested to complete the post-examination survey. Further questions or comments about the examination process may be sent directly to: ForensicNCB@gmail.com

Records Management and Retention

Electronic records of all applicant activity (application, verification documents, examination results, re-certification, etc.) are confidentiality maintained in the FNCB database.

Maintaining your Contact Information

Failure to maintain current contact information may result in missing essential information regarding updates and re-certification. If you have a change in address or phone number, please update your information by visiting the FNCB website under "My Profile"

Denial, Suspension, or Revocation of Certification

References

American Association of Colleges of Nursing (AACN). (2019). *AACN's vision for academic nursing*. <https://www.aacnnursing.org/News-Information/Position-Statements-White-Papers/Vision-for-Nursing-Education>

American Association of Colleges of Nursing (AACN). (2019). *AACN's vision for academic nursing*. <https://www.aacnnursing.org/News-Information/Position-Statements-White-Papers/Vision-for-Nursing-Education>

American Association of Colleges of Nursing (AACN). (2021). *The essentials: Core competencies for professional nursing education*. <https://www.aacnnursing.org/Portals/42/AcademicNursing/pdf/Essentials-2021.pdf>

American Nurses Credentialing Center (ANCC). (2013). *How to display your credentials*. <https://www.nursingworld.org/~4861f9/globalassets/certification/renewals/how-to-display-your-credentials>

The National Academy of Medicine. (2021). *The future of nursing 2020-2023: Charting a path*. doi: <https://doi.org/10.17226/25982>

Appendix A

Pathway #2 (Continuing Education Preparation)

Forensic Nursing CEs (add additional lines if necessary)

- A minimum of 60 CE credits** (contact hours) or an equivalent in college coursework in the three years before the date of application.
- CE must directly apply to the applicant's area of forensic nursing practice.
- 60% of CEs must be ANCC-accredited offerings.
- Multi-day conferences may include professional practice topics or may be focused on a specific topic such as forensic nursing response to trauma, criminology/victimology, criminal justice, and forensic science. For multi-day conferences, please provide documentation of each session attended.
- 1 semester hour of coursework from an accredited nursing program is equal to 15 CE Credits.

Name of CE Activity (in the case of a conference, list each activity separately)	Description of CE Activity and how related to FN role	ANCC accredited (yes/no)	Date of Activity	Number of CEs obtained

CE Certificates must be attached according to accreditation requirements.

Forensic Nursing Practice Hours

- A minimum of one year of forensic nursing practice*
- At least 1000 forensic nursing practice* hours (must be completed within five years before the date of application).

Agency Name	Address	Job Title/Role	Dates of Employment	Number of Hours	Supervisor Name	Supervisor Title	Supervisor Contact Information (email, phone number)

All forensic nursing practice hours will be verified according to accreditation requirements. FNCB will contact the supervisor to verify practice hours. If unable to verify hours directly with the supervisor, FNCB will attempt to contact the applicant to assist with the verification of hours. If hours cannot be verified on the second attempt, the application will be considered incomplete, and the applicant deemed ineligible to sit for the certification examination.

Appendix B

Pathway #2 (Continuing Education Preparation)

Forensic Nursing CEs (add additional lines if necessary)

- A minimum of 90 CE credits** (contact hours) or an equivalent in college coursework in the three years before the date of application
 - CE must directly apply to the applicant's area of forensic nursing practice.
 - 60% of CEs must be ANCC-accredited offerings.
 - Multi-day conferences may include professional practice topics or may be focused on a specific topic such as forensic nursing response to trauma, criminology/victimology, criminal justice, and forensic science. For multi-day conferences, please provide documentation of each session attended.
 - 1 semester hour of coursework from an accredited nursing program is equal to 15 CE Credits.

Name of CE Activity (in the case of a conference, list each activity separately)	Description of CE Activity and how related to FN role	ANCC accredited (yes/no)	Date of Activity	Number of CEs obtained

CE Certificates must be attached according to accreditation requirements.

Forensic Nursing Practice Hours

- A minimum of two years of forensic nursing practice*
- At least 2000 forensic nursing practice* hours (must be completed within the five years before the date of application).

Agency Name	Address	Job Title/Role	Dates of Employment	Number of Hours	Supervisor Name	Supervisor Title	Supervisor Contact Information (email, phone number)

All forensic nursing practice hours will be verified according to accreditation requirements. FNCB will contact the supervisor to verify practice hours. If unable to verify hours directly with the supervisor, FNCB will attempt to contact the applicant to assist with the verification of hours. If hours cannot be verified on the second attempt, the application will be considered incomplete, and the applicant deemed ineligible to sit for the certification examination.

Appendix C

Pathway #2 (Continuing Education Preparation)Forensic Nursing CEs (add additional lines if necessary)

- A minimum of 60 CE credits** (contact hours) or an equivalent in college coursework in the three years before the date of application.
 - CE must directly apply to the applicant's area of forensic nursing practice.
 - 60% of CEs must be ANCC-accredited offerings.
 - Multi-day conferences may include professional practice topics or may be focused on a specific topic such as forensic nursing response to trauma, criminology/victimology, criminal justice, and forensic science. For multi-day conferences, please provide documentation of each session attended.
 - 1 semester hour of coursework from an accredited nursing program is equal to 15 CE Credits.

Name of CE Activity (in the case of a conference, list each activity separately)	Description of CE Activity and how related to FN role	ANCC accredited (yes/no)	Date of Activity	Number of CEs obtained

CE Certificates must be attached according to accreditation requirements.

Forensic Nursing Practice Hours

- A minimum of one year of forensic nursing practice*
- At least 1000 forensic nursing practice* hours (must be completed within five years before the date of application).

Agency Name	Address	Job Title/Role	Dates of Employment	Number of Hours	Supervisor Name	Supervisor Title	Supervisor Contact Information (email, phone number)

All forensic nursing practice hours will be verified according to accreditation requirements. FNCB will contact the supervisor to verify practice hours. If unable to verify hours directly with the supervisor, FNCB will attempt to contact the applicant to assist with the verification of hours. If hours cannot be verified on the second attempt, the application will be considered incomplete, and the applicant deemed ineligible to sit for the certification examination.



Public Comment - LSA Document #24-114

Background of the Indiana SANE Training Project:

The *Indiana SANE Training Project* (Project) is a program of the Southwest Indiana Area Health Education Center (AHEC) (part of the Indiana AHEC Network) and is hosted at the University of Southern Indiana in the College of Nursing and Health Professions. The Project was established in late 2018 with an award from Health Resources and Services Administration (HRSA) Advanced Nursing Education – Sexual Assault Nurse Examiner (ANE-SANE) Program. Originally, the Project was one of 19 recipients nationally.

The Project was tasked with evaluating and addressing the forensic nursing workforce throughout the state of Indiana and providing a coordinated, comprehensive statewide approach to training and educating healthcare providers serving patients with medical forensic needs. To date, the Project has offered over 70 training activities with more than 1100 participants. Prior to the Project, data on the number of forensic nurses in Indiana was nearly non-existent, and information on the availability of forensic nursing services was scarce. The Project now aggregates self-reported information by county each quarter to produce the Indiana Medical Forensic Examination (MFE) Providers listing, and according to this information, since 2019, the number of counties with access to adult/adolescent MFE has increased from 33 to 45 counties, and for pediatric MFE from 17 to 28.

Partnerships have been critical to the Project from the start, and current statewide and national partners include the Indiana Coalition to End Sexual Assault and Human Trafficking, International Association of Forensic Nurses, Indiana State Police Crime Lab, Indiana Criminal Justice Institute, Indiana Chapter of the National Children's Alliance and Indiana Prosecuting Attorneys Council. There are numerous other local and regional partners who contribute to the Project, and it is critical to have not only multidisciplinary support and guidance, but also accountability to these partners.

Background – Senate Bill 7

In 2020, the Rape Abuse and Incest National Network (RAINN) prioritized legislative efforts to implement training guidelines and standards for Sexual Assault Nurse Examiners at the state level. These efforts were focused on many different states across the United States. Through these efforts, State Senator Michael Crider, Indiana District 28, authored Senate Bill 7 to address forensic nurse education in Indiana.

Discussion during the development of Senate Bill 7 included the need for the following:

- Formal data collection related to who is practicing as a forensic nurse and where
- Consistent approach to training and supporting forensic nurses on a statewide level
- Continuing education requirements to ensure current, effective and evidence-based practice

- Establishment of the role, and delegation of duties, for Indiana's Statewide SANE Coordinator
- Oversight to ensure education aligns with evidence-based practices and Indiana statutes and regulations

In addition, the legislation was not intended to restrict anyone from practice, create any issues where practicing nurses need to be retrained (unless the initial training was inadequate or could not be substantiated) or create obstacles to limit the continuing education opportunities, as long as they are relevant to practice and provided by an accredited provider.

As Senate Bill 7 was being drafted, Senator Crider and RAINN contacted the *Indiana SANE Training Project* both for information and to partner as the educational resource due to the Project's success and demonstrated ability to meet the needs of the entire state. During the legislative process, the Project recognized the importance of expertise, insight and collaboration from others invested in this work across Indiana. Therefore, the Project sought support and feedback from statewide partners, forensic nurses, nursing organizations and multidisciplinary partners throughout the state, including the Indiana Emergency Nurses Association Forensic Committee. In January 2021, this committee voted unanimously to support Senate Bill 7 with all 35 participants in attendance in agreement.

Throughout the legislative process, Senator Crider worked alongside the Indiana State Nurses Association and their lobbyist. The legislation also had support on the national level from RAINN, as well as the Academy of Forensic Nurses and the International Association of Forensic Nurses. At that time, the Indiana Chapter of the International Association of Forensic Nurses was inactive so could not be sought for participation.

Approach - Indiana SANE Training Project

The Project relies on evidence-based practices to support nursing assessment, diagnoses, planning, implementation and evaluation and best practices in trauma-informed, patient-focused care. The Project integrates the latest solutions in forensic techniques that are supported by sound scientific backing and encourages participants to evaluate and consider sources of information for bias, accuracy, consistency, and have undergone a peer review process. As much of the training is specific to the care of patients post sexual assault, the Project follows the IAFN Education Guidelines and seek IAFN approval when appropriate.

The Project activities support nurses, but they also help create an infrastructure throughout Indiana that increases access to medical forensic examinations for the patients who require this level of care and addresses barriers identified in the state. The Project relies on supportive collaborations of multidisciplinary partners across Indiana to advocate for the value of forensic nurses, not only because of their immense value to patient outcomes, but also as a means of supporting the criminal justice system and minimizing the lifelong societal impacts of victimization.

Nurses who participate in the Project receive an individualized training plan listing approved activities. This training plan must be signed by the nurse and their direct supervisor. This ensures that hospital leaders are connected to the Project and aware of the expectations and resources offered to their employees, and it provides an opportunity to build connections with the hospital to develop a strong foundation for SANE programs and forensic nursing services.

For didactic courses, the Project works with established partnerships and selects opportunities that promote best practices, meet or exceed the IAFN Education Guidelines and/or are approved by the

IAFN. Any SANE didactic courses supported or included in the Project are audited and reviewed for objectives, content, evaluation methods and integrity of information to ensure best practices and educational consistency. This also ensures the information supports any applicable state laws, including the Indiana Criminal Code.

In addition to the initial SANE didactic courses, the Project supports additional online educational opportunities to provide flexible learning options for nurses. The online options include both nationally or internationally-recognized learning platforms specific to assault and abuse, as well as content developed by the Project to address Indiana-specific information requested by nurses or partners. This content includes a variety of educational topics relevant to forensic nursing practice, including, but not limited to the Indiana Sexual Assault Kit Tracking System, legal considerations, implementing advocacy resources, evidentiary blood draws, forensic biology and case reviews.

Related to clinical competence and effective prosecutorial support for nurses, the Project offers Clinical Refreshers, Clinical Skills Labs, and Courtroom Testimony trainings. The Clinical Refreshers provide an opportunity for nurses who are in low volume facilities or who need updated training to work with experienced forensic nurses and standardized patients to improve their clinical skills and confidence in a safe environment. The Refresher provides 7.5 hours of continuing education through Joint Accreditation at the Center for Health Professions Lifelong Learning at the University of Southern Indiana.

The Clinical Skills Labs are two-day trainings, accredited by IAFN, that provide new nurses with 16 hours of continuing education. The Skills Labs utilize standardized patients in a simulated environment to allow new forensic nurses to practice speculum examinations; to learn appropriate use of forensic techniques in medical forensic examinations; to practice evidence collection techniques, including photography; to learn male and female anogenital structures; and to practice a comprehensive medical forensic exam with the guidance of an experienced forensic nurse. The Skills Labs also include information on body mapping, documentation, creating care plans, discharge planning and follow-up care. Most of the preceptors for the Clinical Skills Labs (and the Clinical Refresher) hold SANE-A and/or SANE-P board certifications from the IAFN, and all are highly-skilled in the field.

The Courtroom Testimony trainings also provide continuing education through the university's Joint Accreditation. This allows nurses to learn from and practice testimony with prosecutors and defense attorneys to prepare them for effective testimony in real-world situations.

The Project works collaboratively with Indiana's Statewide SANE Coordinator; provides technical assistance to health care facilities on policies and procedures, staffing and sustainability related to forensic nursing services; offers peer review support; and mentoring of new nurses. In addition, the Project Coordinator provides assistance to prosecutors and law enforcement across Indiana to support effective prosecution.

The *Indiana SANE Training Project* supports the rules as written and encourages the Indiana State Board of Nursing to recognize the implications associated with forensic nursing practice. Not only are these clinicians supporting patients in the midst of highly traumatic situations, but there are vast medical, social and legal outcomes associated with this care. Because of this, thirty-one (31) other states have enacted statutes, regulations or rules that address forensic nursing practice, education, and/or credentialing. As such, training efforts in Indiana should be highly specialized, include a level of transparency, oversight and accountability, and the clinicians doing this work should have responsibility for continuing education related to the care of patients with medical forensic needs.

The Project has no objections to administering this education and training with Indiana Board of Nursing oversight. In addition, the Project welcomes the opportunity to work with the Board and the Indiana Statewide SANE Coordinator to ensure all trainings offer accurate, evidence-based information and follow best practices to ensure the focus of these efforts remain on supporting survivors in Indiana.

Submitted by:

Jane Friona
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From: [Kele Ivey](#)
To: [Hart, Nicholas](#)
Subject: Requirements to Practice as a Forensic Nurse
Date: Friday, April 26, 2024 11:06:05 AM

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Good morning,

I am writing today to have my concerns regarding the proposed forensic nurse requirements included in the public hearing.

I would like to preface this by saying that I am generally in favor of formal recognition of the practice of forensic nursing and requirements of continuing education. I spent over 20 years working in emergency services, starting as an emergency medical technician and moving up to critical care transport paramedic. I understand the importance of medical personnel staying current with best practices and evidence-based care. I am also board certified through the International Association of Forensic Nurses as a Sexual Assault Nurse Examiner for Adults and Adolescents and am required to obtain regular CEUs in order to maintain that certification. As a program manager, I do require my staff to attend training sessions and obtain continuing education for their roles.

One of my concerns regarding this new statute and the proposed rules for forensic nursing licensure is that it may actually discourage nurses from pursuing a career in forensic nursing. Currently, we do not require registered nurses in Indiana to complete continuing education as part of the renewal process. Additionally, although we inform victims of sexual assault that they have the right to have a nurse trained in sexual assault evidence collection, we do not have any mandate that requires sexual assault medical forensic exams to be performed by SANEs or forensic nurses as other states do. Most hospitals in Indiana do not have forensic nurses. Hospitals that do have SANEs or forensic nurses may only have one or two that have received training, but do not have established programs, especially in rural areas. It is also very common that hospitals with trained SANEs do not offer any additional compensation to those nurses for the training. With rising healthcare costs and cuts to government funding, there is little reason for hospitals to create new programs or incentivize nurses to pursue or retain formal forensic nursing training and any additional barriers will be seen as a further burden to both nurses and healthcare administrators.

Secondly, although this may be outside the purview of this committee, the language of IC 25-23-1-35 is troublesome due to language which involves the Indiana SANE Training Project in the determination of approve courses. The Indiana SANE Training Project is a wonderful and much-needed program that has afforded training and professional development opportunities to nurses throughout Indiana and I am immensely grateful for their support. However, as a grant-established and funded program that is not an official government agency, I do not feel that it is appropriate for the program to be involved in the oversight of forensic nursing licensure. This role should remain with the Board of Nursing and with the statewide SANE coordinator.

Thank you for your time. I look forward to attending the public forum next month and discussing these issues.

Kind regards,

Kele N. Ivey, BSN, AAS, RN, SANE-A | SANE Program Manager

she/her/hers

STAR Center ♦ Methodist Hospitals

600 Grant St.

Gary, IN 46402

office: 219-886-4498 ♦ fax: 219-886-4148

"Safety is being able to trust that those around you WANT to protect you from harm." - Hannah Gadsby



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April 29, 2024,

The Indiana Board of Nursing:

I am writing about the Forensic Nursing Continuing Education Rule Request for comments.

A Forensic Nurse since 2017, I attended the evidence-based course in Marion County, which is now offered through the Indiana Emergency Nurses Association (IENA).

The IENA Forensic Nurse Education Course was and is taught by current practicing Forensic Nurses in addition to attorneys who are prosecutors, Forensic survivors, Law Enforcement agents, all of which are critical to our learning. We work very closely together in an interprofessional team to make a difference in victim's lives and to assure that we are providing the best care and guidance to them through the process.

There are concerns with this new Indiana Code in a variety of ways.

- 1) The Indiana Sane Project is coordinated by an individual on the Indiana Board of Nursing, and the International Association of Forensic Nurses and it is unclear if she is currently practicing as a Forensic Nurse. The Indiana Sane State Coordinator teaches for the Indiana Sane project as a paid contractor and it is also not clear if she is a practicing Forensic Nurse.
- 2) The limitation on who can administer the Forensic Nurse Education Courses as it limits the interprofessional nature that is currently in the Indiana Emergency Nurse's Association's Programs.
- 3) The Indiana Sane Project website indicates that it has and is supported by "Members of the ENA".
 - a. it is very clear that the same support is not being shown to the ENA and their education, as it has been excluded from consideration.
 - b. The IENA education is used across the state for Trauma Nurse Core Courses(TNCC), Emergency Nursing Pediatric Courses(ENPC), and Pediatric Advanced Life Support (PALS) which are taught even more widely than Forensic Nursing Courses.
 - c. The IENA courses are accredited by the American Nurse's Credentialing Center.
 - d. There are fantastic classes offered by the IENA for forensics, as well as by the Academy of Forensic Nurses.
 - e. Steering all education to one place appears to be a conflict of interest when these courses are based on the evidence. It would be like saying all nurses must attend one school for their nursing degree.
 - f. Limiting the places Forensic Nurse Education can be taught will deter the number of new nurses since the Sane project is located in southern Indiana and not practical for those in central or northern Indiana to attend. This limitation is also exclusionary for all health systems to be able to get their nurses to education that is inconvenient for the staff who are desperately needed in their current work setting as we continue to experience a statewide and national nursing shortage. Additionally, most healthcare settings are not paying for this specialized training and it comes out of the RN pocket to attend the classes.

- 4) It will be important to know what is in place to assure that the Sane Project is teaching best practice, and has a strict peer review process in place, since it is not being administered by currently practicing Forensic Nurses. Transparency is of the utmost importance.
- 5) The Indiana Sane Project and the Indiana Sane Coordinator positions are both grant funded. What is the plan for if / when the grant is no longer available?

I have attached additional concerns in Blue Below. I hope that you take these concerns, and those of my peers, and make the best decision for forensic nurses that are currently practicing and those that choose to join our practice in the future.

Indiana Code IN Code § 25-23-1-35 (2023), Chapter 1, Licensing of Nurses; Creation of Board; Education Programs. Requirements to Practice as a Forensic Nurse; Continuing Education.

For the purposes of Ind. Code 25-23-1-35(a)(2)(B), "substantially equivalent" means:(1)an out-of-state SANE training program offering didactic and clinical components that meet the requirements of Ind. Code 25-23-1-35(a)(2);(2)a graduate degree program in forensic nursing, offering clinical and didactic components that meet the requirements of Ind. Code 25-23-1-35(a)(2); or(3)a SANE training course approved by the International Association of Forensic Nurses ("IAFN") in addition to clinical components that meet the requirements of Ind. Code 25-23-1-35(a)(2).

I am struggling to understand why number 3 must have a layer of approval that the others don't-I would suggest it just say "A SANE training program that meets the clinical components of IN Cod 25-31-35(a)(2)"

(b)A candidate program that intends to apply for Board approval shall submit a completed application on forms provided by the Board and shall request an appearance before the Board. The application shall include evidence of resources necessary to start a program.

Why is this so strict? Others do not have to do this. Who is approving this and is there a time frame?

(c)After an appearance with the candidate program, the board shall approve or disapprove the application for program approval upon evidence:(1)submitted in the application; and(2)presented at the Board appearance.

There are many great Educational Programs offered by the IENA. See comments in letter above.

All contact hours of continuing education must be approved by a nationally approved sponsor of continuing education for nurses and be relevant to the practice of a forensic nurse, as determined by the Education Compliance Officer.

Does someone having CEUs make them proficient as a Forensic Nurse? Should there be some level of PRACTICING HOURS? A nurse with a forensic license could work in any nursing role and do the CEs and remain licensed without validation of continued competence. Does requiring an RN to get CEs make an RN competent?. The literature does not support that taking CE courses equates to competence, this is why the Indiana State Board of Nursing has never required nurse to have CEs.

SCOPE OF RULE:

b. Scope of the Rule

The proposed rule explains that the Professional Licensing Agency prescribes the manner in which forensic nurse continuing education programs need to apply for Board approval. The proposed rule outlines the number of contact hours of continuing education are required to obtain and maintain a forensic nurse license. The proposed rule explains how a continuing education program could meet the standard of being "substantially equivalent" to a continuing education program identified by the state department of health's statewide sexual assault nurse examiners (SANE) coordinator and administered by the Indiana SANE training project.

Why is this rule identified by the State Department of Health SANE Coordinator and Administered by the Indiana SANE Training project when the individuals administering these programs are not currently practicing as Forensic Nurses?

III. Impacted Parties

In Indiana, there are 134,584 Registered Nurses. A publication by the Bowen Center for Health Workforce Research and Policy entitled "The Data Report: 2021 Indiana Nursing Licensure Survey" indicates that 493 nurses reported providing services as a sexual assault nurse examiner (a forensic nurse) during the 2021 nursing license renewal period. The International Association of Forensic Nurses (IAFN), an association that offers certifications for forensic nurses, reports that there are 43 board certified SANE-A (adult and adolescent sexual assault nurse examiners) and 22 board certified SANE-P (pediatric sexual assault nurse examiners) in Indiana. Board certification by IAFN is not a requirement to become a forensic nurse.

This limits nurses to be able to sit for the Sexual Assault Nurse Examiner – Adult Examination offered by the American Nurses Credentialing Center. Many healthcare organizations see more Interpersonal violence (IPV) versus Sexual Assault (SA). It makes sense that since there are other certifications for Forensic Nurses there should be more opportunities for the Forensic Course than just the SANE PROJECT and the International Association of Forensic Nurses and should be considered for Forensic Nurse Education.

First, the proposed rule defines "substantially equivalent", which explains what standards forensic nursing continuing education programs must meet to be substantially equivalent to biennial forensic nursing education programs identified by the state department of health's statewide sexual assault nurse examiners (SANE) coordinator and administered by the Indiana SANE training project. How will this be determined?

How will nurses not practicing in Forensic Nursing identify what is in the best interest of ALL Indiana Forensic Nurses?

Second, the rule explains how many contact hours of continuing education to submit to become a licensed forensic nurse. The Professional Licensing Agency can begin issuing forensic nurse licenses and the Indiana State Board of Nursing can begin regulating the licensed forensic nurses under IC 25-23-1-35(a)(2)(B) using the proposed rule's guidelines. Is this an additional cost to practicing nurses?

A third direct benefit of the proposed rule is that registered nurses who perform forensic examinations will be held to uniform standards laid out in the rule for training requirements, which will lead to a more uniformly trained workforce of forensic nurses. As a result of the defined training requirements in the proposed rule, registered nurses who perform forensic examinations will become more competent. If a patient is treated by a forensic nurse for a forensic exam, the patient can reasonably believe that the forensic nurse is a licensed forensic nurse and is competent to perform the forensic examination. Due to the defined continuing education requirements in the proposed rule, patient care for those needing forensic exams will be more standardized and will improve due to the defined training requirements for nurses to practice as forensic nurses. It should, and has been practice that a facility transfers a patient to a trained facility with a forensic nurse.

Uniform standards are there and are currently in place. This proposed rule has nothing to do with what is currently in place and will continue to be in place with or without this rule. IF anything, our State SANE Coordinator should be going to hospitals trying to recruit SANEs, and or teaching the facilities what to do when they don't have a SANE Program, and how to transfer to places that do.

Fourth, the proposed rule's defined number of forensic nursing continuing education contact hours will improve criminal investigations because the collection of evidence for criminal cases involving sexual assault, intimate partner violence, and child abuse will likely be more standardized and will improve. Forensic nurses will also become more informed witnesses for criminal cases because SANE training includes training on how to testify in court.

The IENA and the Association of Forensic Nursing also have fantastic classes to show how to testify. In Maricao County we work very closely with the Prosecutor's Office so those Forensic Nurses that practice in our county are prepared to testify. It is critical that Forensic Nurses have interprofessional connections in their respective counties to assure that relationships are formed and that Forensic Nurses are prepared to support victims.

The fifth direct benefit of the proposed rule is that employers seeking to fill forensic nurse positions will be able to determine whether an applicant is qualified to be a forensic nurse when the employer verifies whether the applicant is a licensed forensic nurse. The employer will be able to rely on the proposed rule that determines the number of contact hours a nurse must complete to become licensed. CEs do not determine the ability to practice.

I appreciate your time and thoughtful consideration into my concerns as a practicing Forensic Nurse. Limiting Forensic Nurse education to one provider limits Indiana Forensic Nurse Examiner Practice, continuing education, and continued competence. Thank you for your time.

Sincerely,

Kristina Vandugyn, ASN

Forensic Nurse Examiner

These are my opinions and do not necessarily reflect those of my employer.

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III. Impacted Parties

In Indiana, there are 134,584 Registered Nurses. A publication by the Bowen Center for Health Workforce Research and Policy entitled "The Data Report: 2021 Indiana Nursing Licensure Survey" indicates that 493 nurses reported providing services as a sexual assault nurse examiner (a forensic nurse) during the 2021 nursing license renewal period. The International Association of Forensic Nurses (IAFN), an association that offers certifications for forensic nurses, reports that there are 43 board certified SANE-A (adult and adolescent sexual assault nurse examiners) and 22 board certified SANE-P (pediatric sexual assault nurse examiners) in Indiana. Board certification by IAFN is not a requirement to become a forensic nurse.

This limits nurses to be able to sit for the Sexual Assault Nurse Examiner – Adult Examination offered by the American Nurses Credentialing Center. Many healthcare organizations see more Interpersonal violence (IPV) versus Sexual Assault (SA). It makes sense that since there are other certifications for Forensic Nurses there should be more opportunities for the Forensic Course than just the SANE PROJECT and the International Association of Forensic Nurses and should be considered for Forensic Nurse Education.

First, the proposed rule defines "substantially equivalent", which explains what standards forensic nursing continuing education programs must meet to be substantially equivalent to biennial forensic nursing education programs identified by the state department of health's statewide sexual assault nurse examiners (SANE) coordinator and administered by the Indiana SANE training project. How will this be determined?

How will nurses not practicing in Forensic Nursing identify what is in the best interest of ALL Indiana Forensic Nurses?

Second, the rule explains how many contact hours of continuing education to submit to become a licensed forensic nurse. The Professional Licensing Agency can begin issuing forensic nurse licenses and the Indiana State Board of Nursing can begin regulating the licensed forensic nurses under IC 25-23-1-35(a)(2)(B) using the proposed rule's guidelines. Is this an additional cost to practicing nurses?

A third direct benefit of the proposed rule is that registered nurses who perform forensic examinations will be held to uniform standards laid out in the rule for training requirements, which will lead to a more uniformly trained workforce of forensic nurses. As a result of the defined training requirements in the proposed rule, registered nurses who perform forensic examinations will become more competent. If a patient is treated by a forensic nurse for a forensic exam, the patient can reasonably believe that the forensic nurse is a licensed forensic nurse and is competent to perform the forensic examination. Due to the defined continuing education requirements in the proposed rule, patient care for those needing forensic exams will be more standardized and will improve due to the defined training requirements for nurses to practice as forensic nurses. It should, and has been practice that a facility transfers a patient to a trained facility with a forensic nurse.

Uniform standards are there and are currently in place. This proposed rule has nothing to do with what is currently in place and will continue to be in place with or without this rule. IF anything, our State SANE Coordinator should be going to hospitals trying to recruit SANEs, and or teaching the facilities what to do when they don't have a SANE Program, and how to transfer to places that do.

Fourth, the proposed rule's defined number of forensic nursing continuing education contact hours will improve criminal investigations because the collection of evidence for criminal cases involving sexual assault, intimate partner violence, and child abuse will likely be more standardized and will improve. Forensic nurses will also become more informed witnesses for criminal cases because SANE training includes training on how to testify in court.

The IENA and the Association of Forensic Nursing also have fantastic classes to show how to testify. In Maricao County we work very closely with the Prosecutor's Office so those Forensic Nurses that practice in our county are prepared to testify. It is critical that Forensic Nurses have interprofessional connections in their respective counties to assure that relationships are formed and that Forensic Nurses are prepared to support victims.

The fifth direct benefit of the proposed rule is that employers seeking to fill forensic nurse positions will be able to determine whether an applicant is qualified to be a forensic nurse when the employer verifies whether the applicant is a licensed forensic nurse. The employer will be able to rely on the proposed rule that determines the number of contact hours a nurse must complete to become licensed. CEs do not determine the ability to practice.

I appreciate your time and thoughtful consideration into my concerns as a practicing Forensic Nurse. Limiting Forensic Nurse education to one provider limits Indiana Forensic Nurse Examiner Practice, continuing education, and continued competence. Thank you for your time.

Sincerely,

Jessica Rand RN, BSN, SANE-A
Forensic Nurse Examiner

Forensic Nurse Examiner

These are my opinions and do not necessarily reflect those of my employer.

I am recently made aware of legislative action to move our existing continuing education programs to appear before the Indiana State Board of Nursing for approval. I understand that the idea behind this new body is to ensure

To the end, it simply seems clearly that our upcoming ANH meeting cannot be just another program at a conference about the environment.

1. We acknowledge with pleasure a grant from the National Science Foundation, Grant No. 444-1081, to the first author (J. H. H.).

Question: In the hypothesis, where does the protein in the trigger bind? What is the trigger?

6. There is a shortage of female nurses in the state, so even if these nurses in Idaho retire, it shouldn't be too big a problem.

3. Does the statement mean they will accept others' approval of a program, otherwise known as having a "staff" instead of levels of continuing education must be approved by a nationally approved sponsor of continuing education for nurses and the information the provision of a document to them. <http://www.nursingworld.org/standards>

Business names, as determined by the 5 decisions
of various arbitrators