

Executive Summary: Developing Mentorship for Novice Sexual Assault Nurse Examiners

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Main Points

Problem: Sexual assault nurse examiners (SANEs) are inherently exposed to vicarious trauma and subjected to high levels of burnout.

Purpose Statement: To create a mentorship model to support newly trained SANEs, reduce the rates of burnout, and increase longevity.

- The DNP project sparked discussion regarding support/mentoring SANEs within the state chapter of forensic nurses and between major healthcare organizations
- Partnership between the state chapter of forensic nurses and a regional Area Health Education Center (AHEC) was established, which resulted in the 1st SANE educational symposium; this was a 2-day educational forum held in April 2024 for newly trained SANEs or those with less than 5-10 cases
- The project coordinator was invited to participate in the symposium as a speaker and facilitated hands-on case scenario simulations with attendees
- Project coordinator mentored classmate – indirectly had a positive effect on her project/program
- The project experienced a high level of attrition among mentee participants. Additional work and research are needed to model's sustainability and generalizability better

Background and Purpose

The Rape, Abuse, and Incest National Network, RAINN, the United States' largest anti-sexual assault organization, estimates that every 68 seconds, an American is sexually assaulted. That statistic alone implies a staggering number of patients needing medical-forensic care and

exhibits the overwhelming need for nurses to be trained as SANEs. However, even more important than training is supporting and retaining nurses who are trained as SANEs.

Personal experience as a SANE is consistent with what is reported in the literature. One facility started by training five nurses, but only three completed the entire didactic and clinical training. After one year, only one nurse, this DNP project coordinator, remained in specialty practice. Similar stories exist across the country; for example, in the article by Hoffman et al. (2023), they report that over 500 nurses received SANE training over a 2-year period in Wisconsin. After the 2-year period, approximately 42 remained in practice.

A study published by Zelman et al. (2022) explored the status of burnout among SANEs in North Carolina; they found that the highest rates of burnout were among those who performed dual roles and those with high percentages of pediatric cases. Furthermore, one of their discussion points centered around the availability of peer support as a mitigating and protective factor against SANE burnout. The literature reports several benefits of mentorship, including increased resilience, increased competence, increased problem-solving skills, increased retention and satisfaction, and it can also bridge gaps in education (Bélanger-Hardy et al., 2023; Hoffman et al., 2023; Torregosa et al., 2023).

The state chapter of forensic nurses has discussed the need to mentor novice SANEs for years, but not much has been done. So, when the project idea was sent to the chapter board, they were excited and supportive, and we established the first letter of agreement between the university and the state chapter.

Methodology

Currently, there is no formal mentorship process or program in the state tailored to SANEs. Mentorship should be customized to the specific needs of the SANE role, but there is no well-

established mentorship model for SANEs. The individuals interested in being mentored for this project were identified through a grant-funded initiative at another university in the state that offered SANE training.

A document initially created by an organization in Texas was shared and, with their permission, adapted for this DNP project. This document became a guideline for developing a mentor/mentee relationship. The literature found generally defined mentorship as a professional relationship between a person with experience that supports, guides, and empowers someone else with less or no experience to help them achieve confidence in practice (Gularte-Rinaldo et al., 2023; Hagrass et al., 2023; Mijares & Radovich, 2020; Venkatesa Permal & Singh., 2022). The guideline includes the definition of mentorship and expectations, conversation starters for mentors/mentees, a conversation tracking table, and a list of resources and references that can supplement education and training.

The university training site agreed to distribute promotional fliers for mentorship and the DNP project. As mentees reached out to the project coordinator, they were matched with practicing SANE mentors from the state chapter. These mentors are responsible for initiating contact with the mentees and establishing a support plan based on the mentees' learning needs and desires. Additionally, mentors are expected to follow the mentor guidelines as necessary and assist in tracking the progress of the mentor-mentee relationship. When the participants from the training sessions expressed interest in mentorship, they completed an initial baseline pre-mentoring survey.

Results

The initial baseline survey captured the desired goals for the mentor/mentee relationship, which will be useful in strengthening and structuring future mentorship opportunities. Identified

goals include professional development, guidance, education, and increased confidence in practice.

Unfortunately, there was a fair amount of attrition, and only one person completed the final survey. Due to the limited number of responses, statistical analysis and conclusions cannot be determined or generalized. However, their response conveyed increased confidence in conducting a forensic exam and that mentoring is beneficial and should be developed further, consistent with the literature.

Strengths/Limitations

Several challenges were encountered in this project; however, each barrier provided valuable insights for building a better mentorship program in the future. For instance, establishing more meaningful contact at the beginning of the SANE training could positively impact mentee participation. Conducting half-day mentor training sessions could help cultivate stronger relationships between mentors and mentees, as studies have shown that mentor programs are more effective when mentors receive proper training. Support from agencies and organizations is essential for the success of a mentorship program. Therefore, mentees and mentors should be allotted time for training and compensated for it, and organizations should collaborate to ensure the completion of the clinical aspects of training.

An unintended positive related to this DNP project is the partnership between the state chapter of forensic nurses and one of the regional AHECs that resulted in the first SANE strength in knowledge symposium that was held in April. This project's coordinator was invited to speak about the DNP project and mentorship at the conference. On the second day, the project coordinator facilitated hands-on training scenarios with conference attendees and genitourinary

teaching assistants. The overall feedback from participants was positive, and there are plans to make this an annual conference that will be offered at other AHEC sites within the state.

Implications and Conclusion

The university training site received a second grant to continue SANE training with the hopes of further developing SANE mentorship within the state. Forensic program directors from major healthcare systems are exploring the logistics of creating the opportunity for a SANE fellowship to be incorporated into the training process.

This DNP project has laid the initial groundwork for mentoring novice and newly trained SANEs. It is encouraging and exciting to see how these upcoming opportunities to develop mentorship within the state further evolve because the work to create a strong network of resilient, supported SANEs is just beginning. Increasing support and training opportunities to create a more robust network of SANEs across this state will increase access to medical-forensic care that patients deserve.

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