

Instructor's Guide/Lesson Plan

The SA Pocket Tool

Background and Overview: The medical evaluation of sexually assaulted children ranging in age from infants to teens is a complex and emotionally charged procedure. Even medical professionals who have special expertise in these evaluations find these cases challenging. It is important to provide the best medical care for these children in the least stressful way possible, while at the same time meeting the evidentiary needs of investigators. Current guidelines for completing sexual assault evaluations in children are too complex and cumbersome to be very useful at the bedside. Health care providers are usually under duress because of time constraints and the tragic circumstances of these cases when completing these evaluations. Too often the examiner omits key elements of documentation, evidence collection and treatments of these children. The SA Pocket Tool provides a user-friendly checklist that is both educational and useful as a checklist while evaluating a child who may have been assaulted.

Learner Audience:

The tool is valuable to health care professionals who may encounter children where there are allegations of sexually abuse or assault. The tool is helpful in navigating diagnostic and treatment options to provide consistent, comprehensive and evidence-based health care. This resource is useful as an educational and clinical tool for clinicians who may need to perform these evaluations. The tool is appropriate for clinicians with a range of experience including:

- attending physicians
- physicians in training including residents and fellows
- medical students
- other health care professionals in practice and in training including
 - nurse practitioners
 - physician assistants
 - sexual assault nurse examiners
 - nurses

Session Objectives:

After reviewing the lecture and SA Pocket Tool, the learner will be able to:

- 1) Utilize this module for instruction of new learners in how to use the SA Pocket Tool
- 2) Identify key steps in implementation of these practice guidelines
- 3) Be able to describe the key elements of the sexual assault evaluation and treatment in the pre-pubertal and the adolescent child.
- 4) Effectively employ the SA Pocket Tool to provide complete medical documentation in acute sexual assault/abuse in children.

Session Time: 2 hours if both sessions are combined. Advanced providers may require only the first session.

Session 1 Time: One hour (may be combined with second session for a workshop or used alone if there are serious time constraints or if the audience is experienced)

5 minutes	Introduction
20 minutes	PowerPoint presentation
30 minutes	SA Pocket Tool- detailed review
10	Debriefing and learners complete evaluation

Session 2 Time: One hour (may be combined with first session for a workshop)

5 minutes	Review of first session
20 minutes	Adolescent case study utilizing the pocket tool
15 minutes	Prepubertal case study utilizing the pocket tool
10 minutes	Debriefing and learners complete evaluation

What packet contains:

The SA Pocket Tool Resource contains the Instructor Manual including reference list, PowerPoint for Sessions 1 and 2 for the user, a two-sided tool with adolescent and pre-pubertal checklists and evaluation tool.

Detailed Plan:

Instructor will identify providers and learners who are interested in providing or learning more about sexual assault evaluations to children and adolescents. The ideal group size is fewer than 12.

The instructor should then become familiar with the packet including the Instructor Manual, PowerPoint slides for Sessions 1 and 2 (may be combined into a single session), two-sided SA Pocket tool, evaluation form and reference list.

The instructor should then identify a classroom and a date and time that will be conducive to providing the sessions.

On the day of the session (Session 1 or both sessions), the instructor should:

1. Arrange seating so that the learners can view the PowerPoint slides and then turn to their peers to discuss the case during demonstration of the tool. Suggest that tissues be available for each group in case discussions become emotional.
2. Gather materials so that each learner has a copy of the tool, pad of paper, pen/pencil, reference sheet and evaluation tool.
3. Load PowerPoint presentation(s) for use and check to make sure that the slides project well.
4. Start session:
 - a. Welcome, introductions and caution that the material may be upsetting to some attendees. Attendees should take care of themselves if the material becomes too distressing.
 - b. Orient to materials provided and how the sessions will be delivered (either as a 2 hour workshop or as 2 separate sessions).
 - c. Provide PowerPoint (See Instructor notes under each slide)
 - d. Provide an opportunity for comments/questions.
 - e. Have attendees complete the evaluation

5. Close the session.

Evaluation/Assessment

An evaluation form for the exercise is included with packet materials to be completed by session attendees as part of the debriefing exercise.

Instructor (Teacher) Qualifications and Responsibilities

- 1) Instructor should be an experienced clinician in evaluating children who are suspected of being sexually abused or assaulted. This individual should be independent in evaluating/assessing sexually abused or assaulted patients.
- 2) Instructor should be comfortable presenting sexual assault cases and in presenting to new learners.
- 3) Instructor should have experience in delivering curricula and in facilitating group case discussions.
- 4) Instructor will need to prepare the room and be skilled in delivering a PowerPoint presentation.
- 5) Instructor will need to divide up the class into one to two small learner groups (each group 3-6) and should be skilled at supervising to ensure that tasks are completed
- 6) Instructor should be skilled at problem solving and alleviating tension related to a highly sensitive subject. Use of humor is an asset.
- 7) Instructor should be knowledgeable about mandated reporting requirements and confidentiality issues in regard to sexual abuse/assault of children.
- 8) Instructor should have access to appropriate resources in case learners become upset or unduly stressed by the subject matter.
- 9) If there is a large group, the ideal instructor to learner ratio is 1:6-12.

Facilities

- 1) Room of adequate size for audience with tables and chairs
- 2) Participants should be able to rearrange room to break out into small groups of 3-4 learners.
- 3) Computer, LCD projector, laser pointer, screen.

Required resources/instructional materials

- 1) Each learner should purchase or acquire a copy of the SA Pocket Tool. This may be accomplished in one of several ways:
 - a. Free- Simply print the PDF tool that is available on MedEdPORTAL (2-page version). You can use a sticker to insert your local resources onto the tool if you wish.
 - b. Purchase -(For details, contact maxiSHARE, a product line of Children's Hospital and Health Systems, 1-800-444-7747 or 414-266-3428 or email maxishare@chw.org)
 - i. A printed maxiSHARE version on polyester paper. They are priced at \$5.95 each.
 - ii. A custom PDF version available through the maxiSHARE site. The requestor is charged a \$50 fee to customize the Referrals section. The requestor then receives the customized PDF (electronic version only). The requestor is responsible for printing.
- 2) Notepad and pencil/pen
- 3) The room should have tissues in case learners become emotional

Advanced Preparation

- 1) Review the SA pocket tool and other resources (see reference list) to familiarize yourself with the evaluation of prepubertal children and adolescents who may have been sexually assaulted (1 hour)
- 2) Review the PowerPoint sessions and case studies (30 minutes)
- 3) Create packets for each learner (30 seconds for each learner)
 - a. SA Pocket Tool
 - b. Pad of paper and pen/pencil
 - c. Evaluation worksheet
- 4) Evaluation Worksheet
 - a. Review/revise as needed specific to learners/audiences
 - b. Print off 1 copy / learner + 10% extra (suggest different color paper so that they stand out in your piles)
- 5) Cautions- Because of the sensitive nature of the case vignettes and the photos, participants should be cautioned prior to the session(s). Caution participants that information may be disturbing and welcome them to step away if needed in order to care for themselves.

Relationship of this session to other educational materials/activities

This module is designed to be free-standing to educate clinician learners on pediatric acute sexual assault/abuse guidelines and to familiarize them with using the innovative SA Pocket Tool. The module should be used in conjunction with other guidelines which are listed in the reference section.

References

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American Academy of Pediatrics, Committee on Adolescence. Sexual assault and the adolescent. *Pediatrics*. 2001;107(6):1476-79

U.S. Department of Justice, Office on Violence Against Women. A National Protocol for Sexual Assault Medical Forensic Examinations (2004 September). Accessed November 30, 2011 and available at: <http://samfe.dna.gov/>

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