

Vermont Forensic Nursing Program

Interim Guidance During COVID-19 Pandemic

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The COVID-19 pandemic is creating challenges to survivors accessing care and forensic nurses providing care in emergency departments throughout Vermont. The Vermont Forensic Nursing Program is issuing this interim guidance to forensic nurses and to advocacy organizations working with survivors seeking care. This guidance will be updated, amended or lifted when the Governor's Emergency Declaration ends.

For the duration of the Emergency Declaration, the Vermont Forensic Nursing program recommends that hospitals and advocacy organizations collaborate to facilitate remote advocacy for survivors seeking care. Hospital based coordinators and advocacy programs should immediately engage in conversations about facilitating remote advocacy. This may be facilitated using either phone or video conferencing. We recommend local advocacy programs work with their hospital based SANE coordinator to facilitate a process similar to that outlined below:

- * Contact an advocate by phone when the patient arrives at the Emergency Department
- * Ask advocate whether it is possible to have a call back number that will eliminate waiting for an answering service to reach them. If not, proceed to contact the advocate through the answering service.
- * Ask advocate whether they have the capability and privacy needed to provide video contact if the patient would like. If they do not have sufficient privacy, proceed with phone advocacy.
- * Prior to the exam, ask the patient if they would like to speak with an advocate – let them know that advocates are often present to help people in their situation, and this is not a request for extra assistance.
- * Using the call-back number provided, facilitate the patient and the advocate speaking by phone.
- * Consider using video if you have access and the patient consents (free video apps such as facetime, skype, zoom)
- * Ensure that they have privacy to maintain confidentiality

* Advocates should ask patients whether they have any concerns about the exam, or if they have any questions about the exam that they would like the forensic nurse to answer.

* If the advocate did not remain on the line for the exam, ask the patient after the exam whether they would like to speak with the advocate again.

* Advocates should inform patients that they will work to reach them by phone the following day, and ask what number and time would work best for them.

* Provide the patient with the organization's number for follow up.

* Advocates should plan to call patient the following day.

We suggest that advocacy organizations and hospitals make a concerted effort to check-in on how remote advocacy is proceeding on a regular basis throughout the crisis, if possible.