



Wisconsin Sexual Assault Nurse Examiner (SANE) Survey Results

Wisconsin Department of Justice, Office of Crime Victim Services
Sexual Assault Nurse Examiner (SANE) Program
March 2022

Why?



The survey sought to...

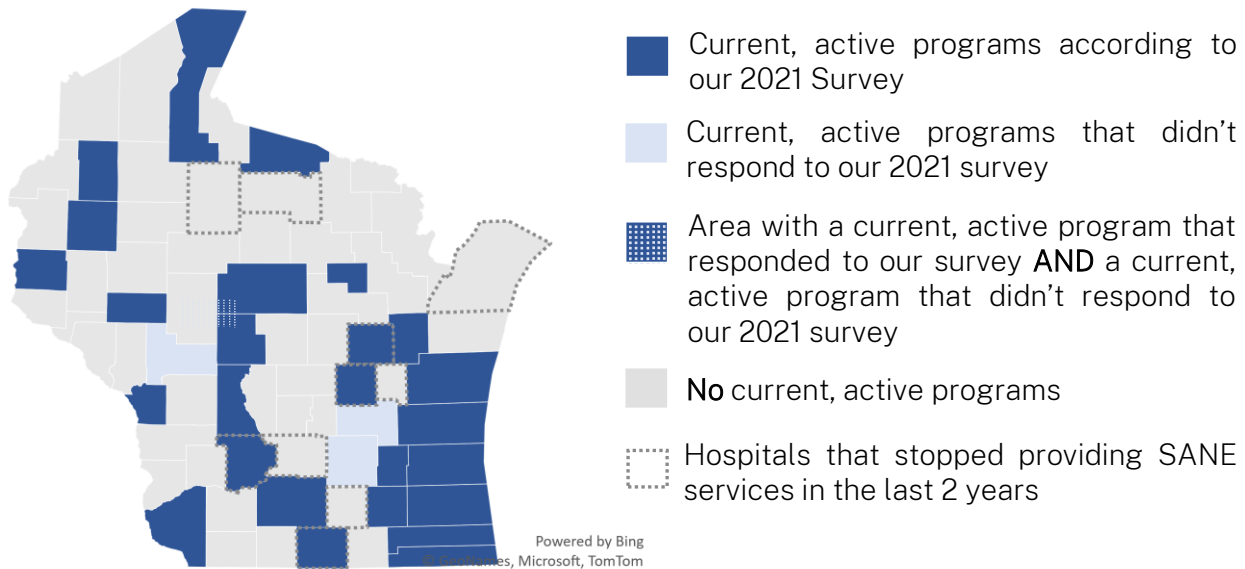
- Inform DOJ's Sexual Assault Nurse Examiner (SANE) program
- Improve SANE sustainability
- Help identify how Wisconsin DOJ's SANE program can better support Wisconsin's SANE programs and nurses



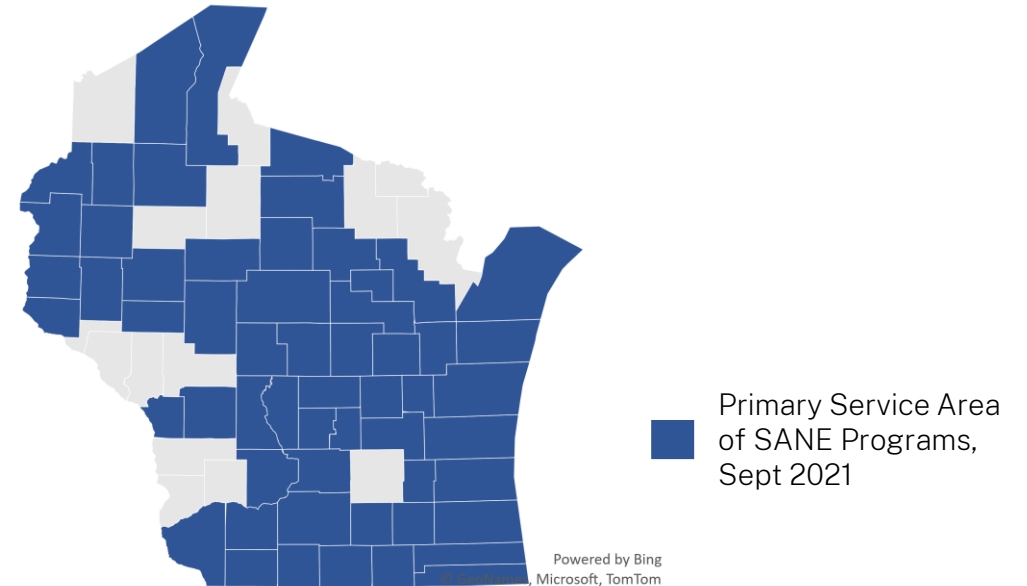
The survey

- In Fall 2021 the WI Department of Justice (DOJ) SANE program disseminated a survey to 34 SANE programs across the state
- We had a 79.4% response rate (i.e., 27 responses). The responses revealed SANE programs located in 26 counties, serving 58 WI counties.

Locations of SANE Programs



WI Counties Served by SANE Programs

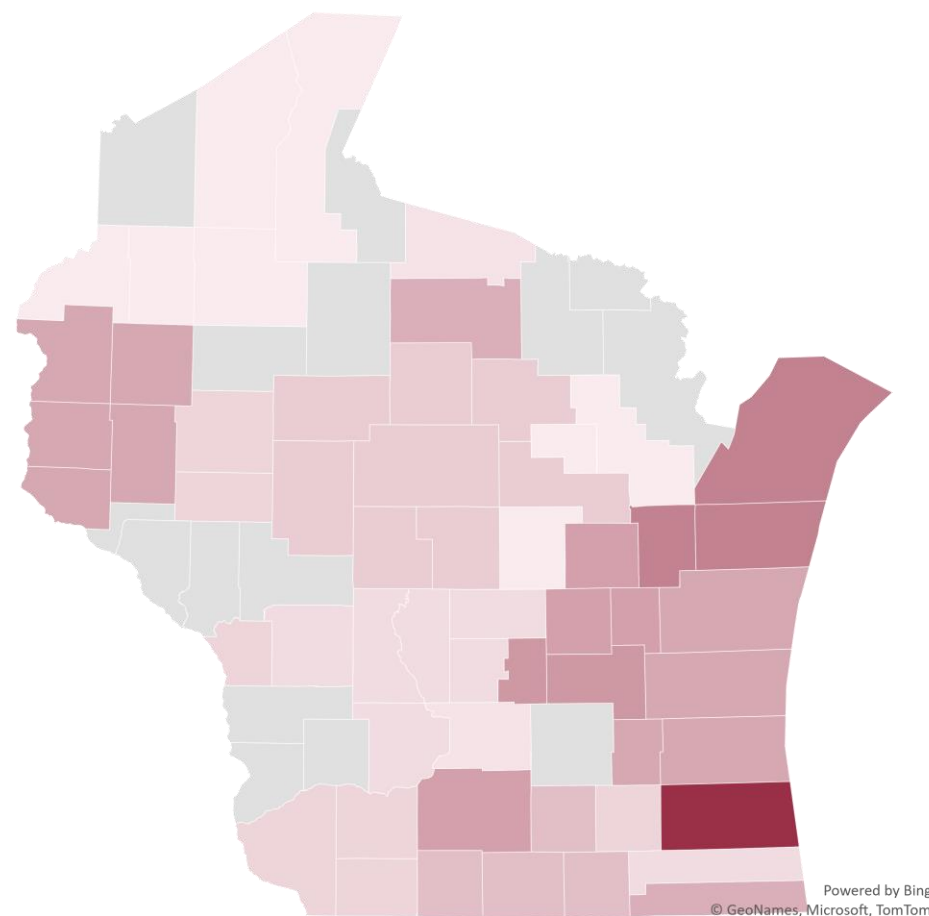




How many SANE nurses are currently practicing in your program?

By practicing, we mean seeing a patient or otherwise actively engaged within the past 6 months

- The 27 SANE programs reported 194 practicing SANEs. This corresponds to, on average, 7.2 SANE nurses practicing per program
- Milwaukee county had, on average, the highest number of practicing SANE nurses (26), followed by Door County, Kewaunee County, and Brown County (15)



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SANE nurses
currently practicing
using SANE primary service area

1 26



What additional support should the DOJ SANE program be providing that we are not currently?

Themes



Continuing education (n=9)



Infrastructure for peer-to-peer support (n=5)

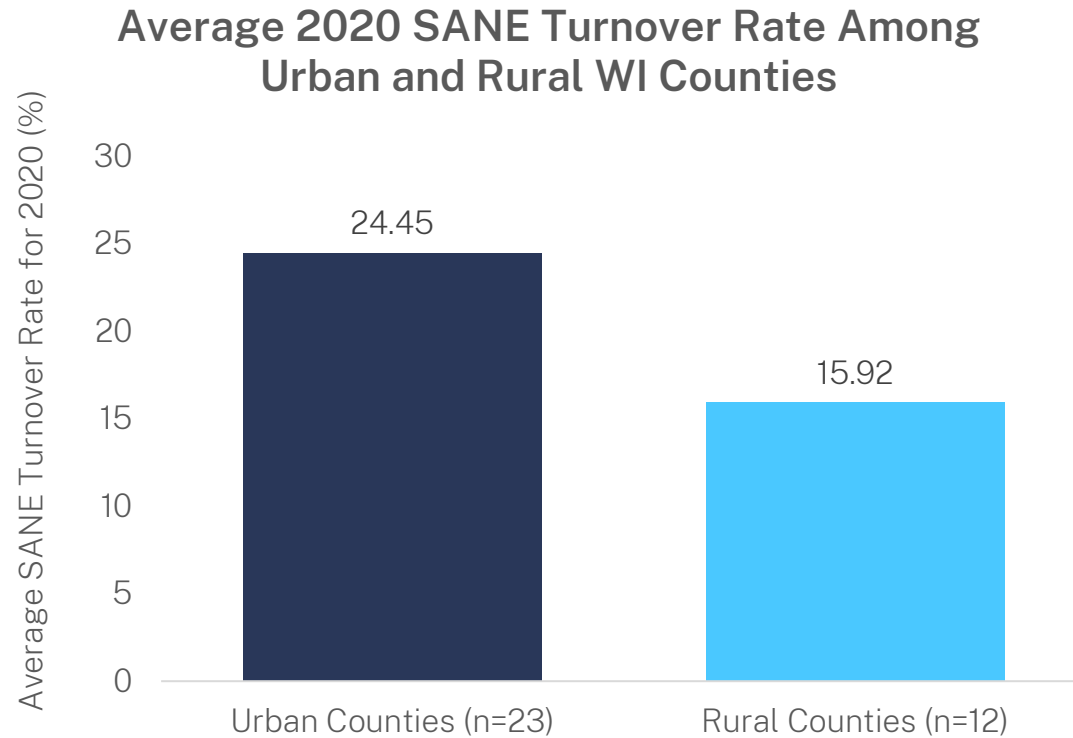


Refresher class (n=4) and more online training options (n=4)



2020 SANE turnover rate

Turnover rate is calculated by dividing the total number of SANE departures in 2020 by the average number of SANE staff during 2020 and multiplying by 100

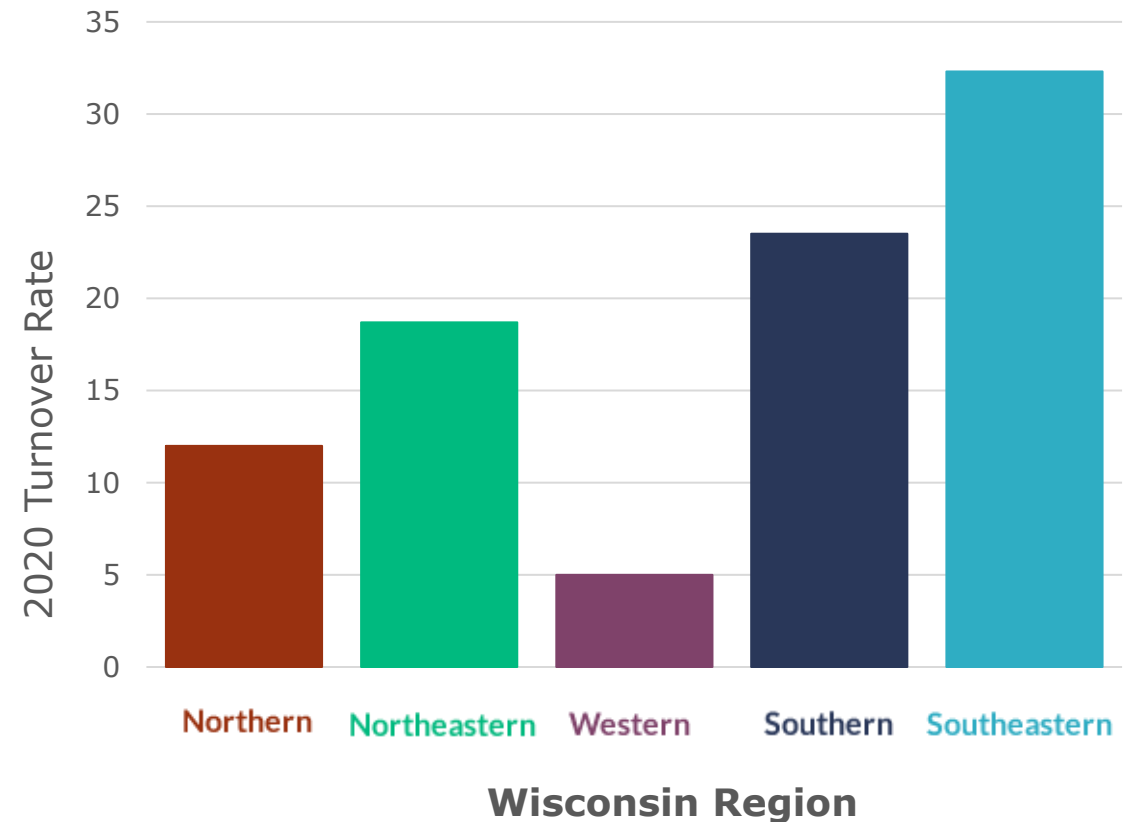
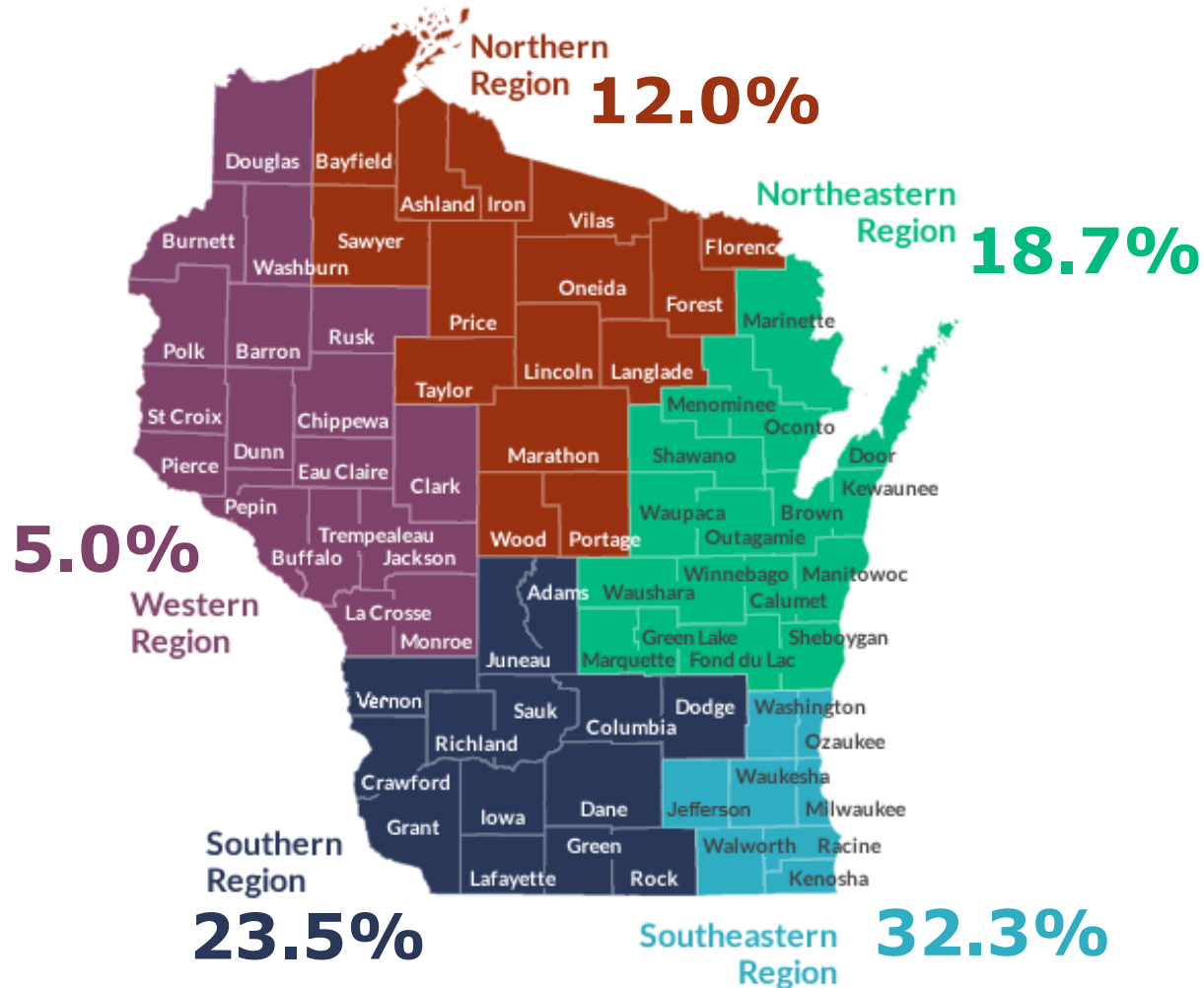


→ Average SANE turnover rate in 2020 was 22.59%, according to the 27 Wisconsin SANE programs

Rural and urban counties were classified using Office of Management and Budget (OMB) rural-urban county classifications



2020 SANE turnover rate by region





Why do you think your turnover rate is what it is?



Programs thought their turnover rate was **low** because their SANEs were **committed to the work**, were not required to take call, and had **peer support**.



Programs thought their turnover rate was **high** because their SANEs were juggling **dual roles or secondary jobs**, lacked sufficient cases and **confidence**, and were navigating **personal reasons**.



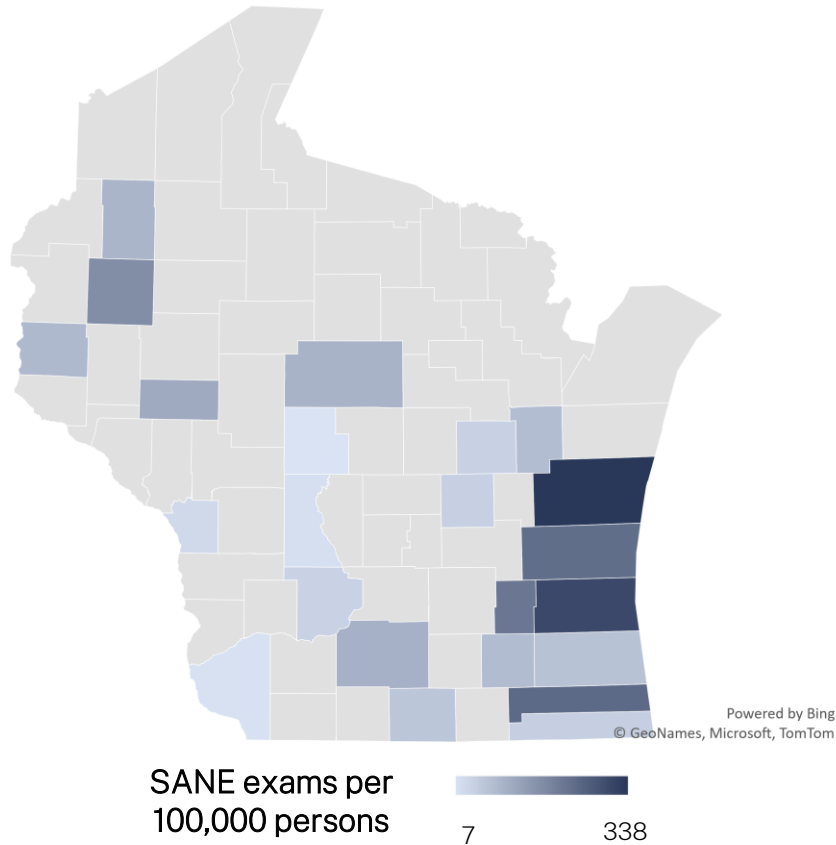
How competent and qualified do your SANEs feel?

- Programs report that experience and consistency of case load, continuing education/training, and guidance from the state contribute to how competent and qualified SANE nurses in their programs feel, respectively.



SANE exams per 100,000 persons

using 2019 5 year American Community Survey population estimates



→ 1,698 exams reported in 2020 from the 27 SANE programs

Map displays exams based on the county where the SANE program is physically located. This is not necessarily where the assault occurred or the only place to receive SANE services.

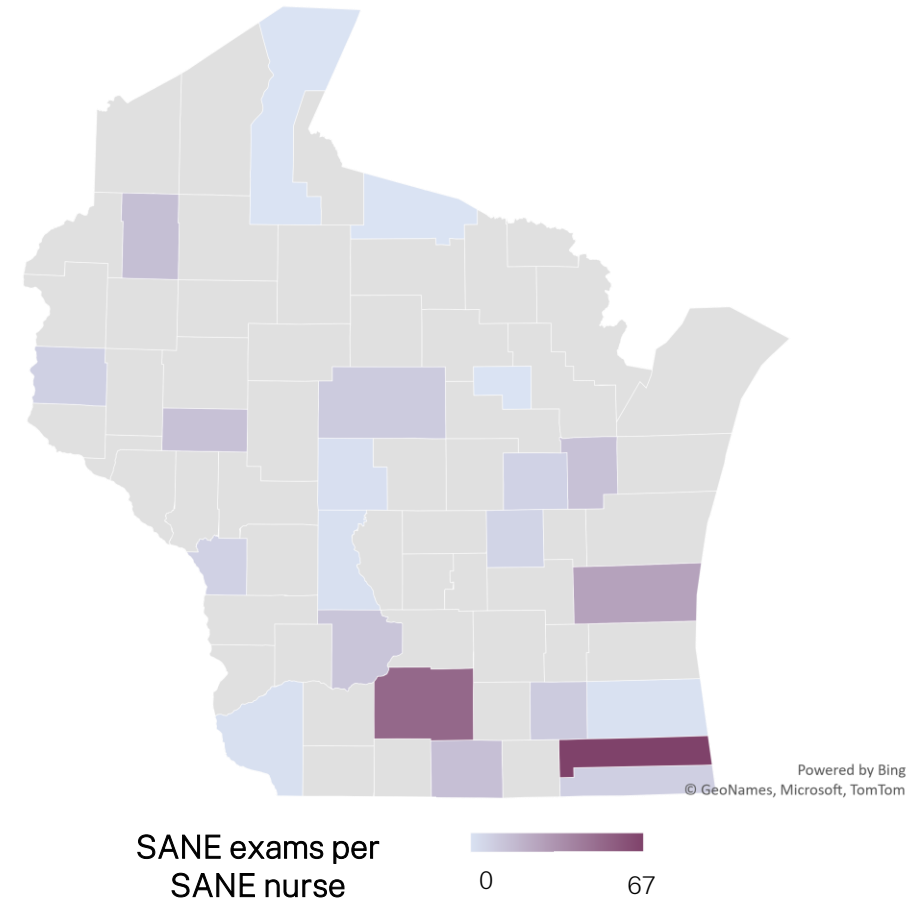


SANE exams to nurse ratio

Ratio of sexual assault burden to nurses at a county level (where the SANE program is physically located)

$$\frac{\text{number of SANE exams in 2020}}{\text{number of practicing nurses in 2020}} \times 100$$

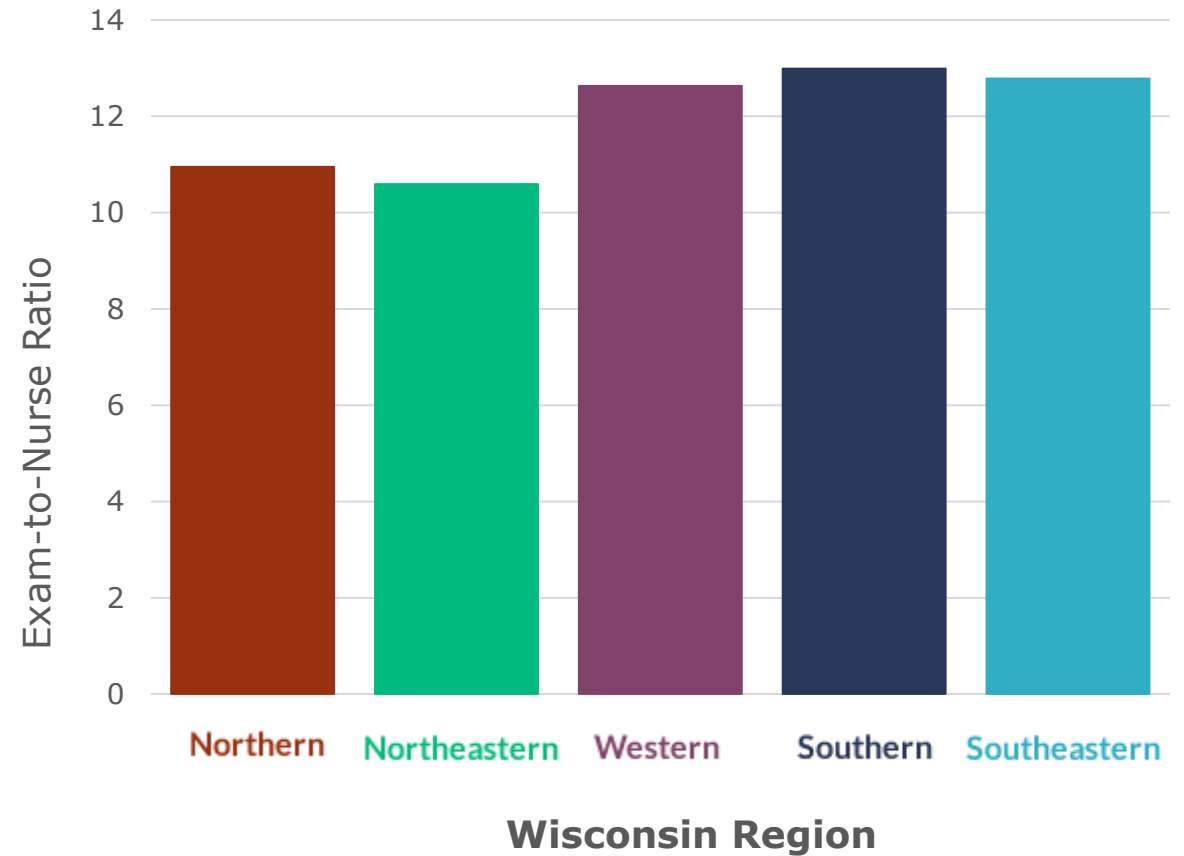
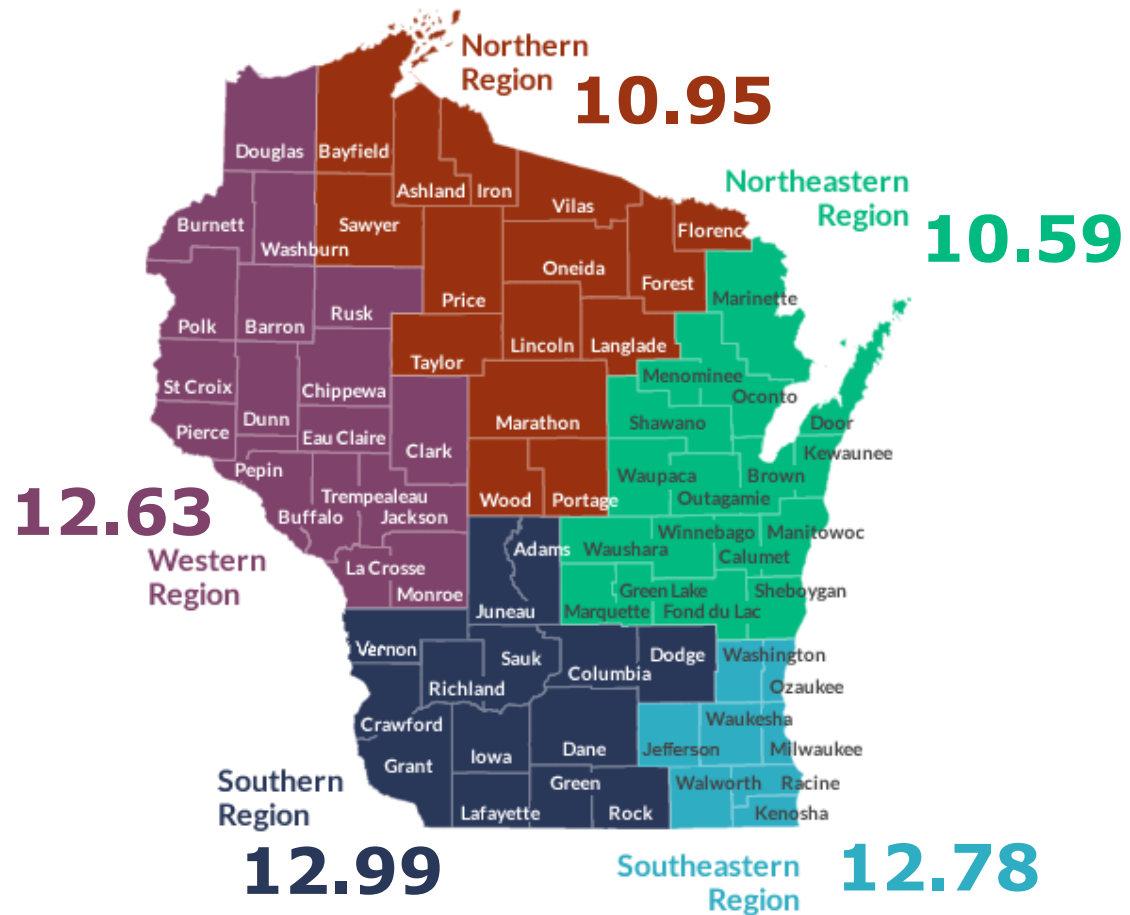
→ Where a higher value corresponds to, on average, more exams per nurse in the county



Map displays exams based on the county where the SANE program is physically located. This is not necessarily where the assault occurred or the only place to receive SANE services.



SANE exams to nurse ratio





If you did have a net loss for SANE exams, what was your net loss for 2020?

- Unknown (n=11)
- 5 responses with net loss estimates– ranged \$40,000 to \$500,000, average of \$167,757

In the future, we'd like to look more into how we may be able to obtain more robust estimates on net loss.



If your program had a higher budget, what would you prioritize using the additional money for?

- On average, if programs had a higher budget, they would prioritize using the additional money for continuing education/training, adding more nurses, and raising the salaries of existing nurses, respectively.

What's next?



- We would like to look further into
 - Sexual assault burden ratio
 - More robust estimates for net loss of SANE exams
- What do our findings mean for DOJ and WI? Beyond?