Implementation and Legal Reform of Tribal SANE Program

Winnebago Comprehensive Health System-Emergency Department, Winnebago, NE



Background

- Winnebago Comprehensive Health System (WCHS)
 is a tribally operated health system located on the
 Winnebago Indian Reservation in northeast
 Nebraska.
- The system serves the Indigenous population of the Winnebago Tribe of Nebraska, as well as other tribal members and community residents in surrounding rural counties.
- The WCHS Emergency Department (ED) operates 9 patient beds, providing 24/7 Emergency Services. The ED see approximately 9000 patient a year
- As a rural tribal facility, WCHS historically lacked onsite forensic nursing services, forcing sexual assault (SA) survivors to travel over 90 minutes to access a Sexual Assault Nurse Examiner (SANE)
- This created significant care gaps, delayed interventions, and led to underreporting—

Key data used to identify the need:

- Zero SANE exams conducted on-site
- Domestic violence shelter staff report that numerous survivors disclosed SA but declined to report due to legal fear and lack of access
- Mandatory reporting laws under tribal code contradicted state law and discouraged disclosure
- Feedback from ED staff and behavioral health revealed uncertainty and discomfort managing SA cases without proper tools or training

Aim

To implement an accessible, culturally informed, and legally aligned SANE program at WCHS by June 1st, anticipating 15 survivors of sexual assault in Year 1 to receive local, trauma-informed forensic exams with the option for anonymous or delayed reporting.

Plan

The QI project followed the Plan-Do-Study-Act (PDSA) cycle and involved the following steps:

- 1. Formation of a multidisciplinary workgroup including ED staff, behavioral health, crisis response, shelter staff, tribal legal counsel, and external experts.
- 2. Stakeholder meetings and legal review to begin the process of aligning tribal mandatory reporting laws with Nebraska statute—allowing for anonymous or delayed reporting.
- 3. SANE training and certification for two ED nurses in partnership with Nebraska forensic nurse consultants, including OIG-certified trainers.
- 4. Development of standardized SANE protocols, polices, documentation templates, and patient pathways.
- 5. Pilot implementation of the SANE program with on-call availability and real-time evaluation.
- 6. Community education and provider training on trauma-informed SA response.

Measure

Process Measures and Outcome Measures:

- Number of SANE-trained nurses
- Availability of on-call SANE coverage
- Use of standardized documentation templates
- Integration with behavioral health and shelter referrals
- Education completion rates for ED and crisis response staff
- Number of completed SANE exams (Target: 15 in Year 1)
- Patient choice of reporting status (Anonymous, Delayed, Immediate)
- Average time from arrival to exam
- Number of behavioral health follow-ups within 7 days
- Community Outreach Educational Events

Results

- Average time to exam: 65 minutes, a major improvement from pre-implementation travel times alone of over 90 minutes one-way
- Increased clinician confidence and competency in handling SA cases
- Successful revision of the Winnebago Tribal Code, now allowing survivors the right to choose if and when to report, aligning with Nebraska law
- Positive feedback from community leaders and elders on the restoration of survivor autonomy and healing-centered care

Next Steps

Sustainability:

- Expand SANE certification to additional ED staff to ensure 24/7 coverage
- Incorporate SANE protocols into annual ED competency training
- Conduct quarterly case reviews and continuous quality improvement updates through the WCHS Quality Committee
- Maintain tribal legal alignment and embed anonymous reporting policy into standard ED intake documentation

Broader Implementation Plans:

- Increase community awareness through youth, school, and elder outreach programs
- Share program model with other tribal and facilities.
- Seek expanded grant funding to support staff development, infrastructure, and patient advocacy services

Team

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