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SECRETARY OF AGING

PA. DEPT. OF HEALTH COMMONWEALTH OF PENNSYLVANOV -7 PM 1:54 DEPARTMENT OF AGING BUREAU OF FACILITY 555 Walnut Street, 5th Flot ICENSURE & CERT. HARRISBURG, PENNSYLVANIA 17101-1919

November 3, 2006

(717) 783-1550

Calvin B. Johnson, M.D., M.P.H. Secretary of Health Post Office Box 90 Harrisburg, PA 17108

Dear Secretary Johnson:

Thank you for sending the Department of Aging an advance copy of the proposed regulations regarding Sexual Assault Emergency Services. We are pleased to have the opportunity to review and comment.

Since passage of the Older Adults Protective Services Act in 1987, the Department has promoted community partnerships to combat elder sexual abuse. We are aware that only one out of four cases of elder abuse is reported and that sexual abuse is believed to be the least reported type of elder abuse. Our goal is ever closer cooperation between professionals such as domestic violence program and victim advocates, protective services workers, sexual violence centers, and law enforcement agencies. We seek an appropriate, sensitive response to sexual abuse that will not further traumatize the older victim. Ideally our response helps heal both the searing emotional harm and physical trauma.

We believe the proposed regulations, by standardizing the treatment provided to sexual assault victims, will strengthen the resources available to elderly victims. We are especially supportive of those sections which strengthen cooperation among hospitals, law enforcement agencies, and the victim. Specifically, we concur with the provisions of Section 101.202(b), which would require hospitals to "maintain records of all examinations, tests and services provided to a sexual assault victim and make the records available to law enforcement at the victim's request, and with the victim's consent."

We recommend that the Department of Health identify additional means of informing the general public of the identity of hospitals that have not chosen to provide sexual assault emergency services. We believe it would be helpful to utilize methods

beyond publishing a list in the Pennsylvania Bulletin and requiring "hospitals electing not to provide sexual assault emergency services to provide notification to the Department, law enforcement, and ambulance and emergency medical care and transport services that these services will not be provided by the hospital." The Department of Aging stands ready to disseminate final rulemaking through the aging network of Area Agencies on Aging, senior community centers and other affiliated agencies and providers. Please also consider a requirement to prominently display signs in key areas such as the Emergency Department, the lobby / registration desk to inform the public that the hospital "does not provide sexual assault emergency services and of its obligation to arrange for transportation at no cost to the victim to a hospital that does provide the service."

We also recommend that Section 101.207(2) be amended to clarify what is meant by "in close proximity." Because we believe that the intent of this section is to expedite and facilitate transportation of victims of sexual abuse to hospitals that provide needed services. The regulations should either define "close proximity" or substitute the phrase "closest Pennsylvania hospital that does provide those services."

We appreciate the opportunity to review these regulations and are prepared to assist in disseminating information about these important regulatory changes. If you need additional information regarding our comments, please contact Wilmarie González, Director for the Bureau of Advocacy, Protection and Education at (717) 783-6207 or by e-mail at wgonzalez@state.pa.us.

Sincerely,

Nora Dowd Eisenhower

Secretary

cc: Gerald F. Radke, Director, DOH