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PA. DEPT. OF HEALTH  
2006 NOV 20 AM 8:53  
BUREAU OF FACILITY  
LICENSURE & CERT.

November 17, 2006

Gerald Radke, Director  
Bureau of Facility Licensure and Certification  
Pennsylvania Department of Health  
Room 932  
Health and Welfare Building  
7<sup>th</sup> and Forster Streets  
Harrisburg, PA 17120

RECEIVED  
2006 NOV 27 AM 11:52  
INDEPENDENT REGULATORY  
REVIEW COMMISSION

Dear Mr. Radke;

The Pennsylvania Coalition Against Rape applauds the Department of Health for its initiative in advocating for a high standard of treatment for victims of sexual violence when they present for treatment and forensic examination in the emergency room.

As you may know, our network of 52 rape crisis centers works diligently to develop relationships with local hospitals in their respective counties to assure that victims receive both compassionate and comprehensive care following what is arguably the worst experience of their lives – the trauma of a sexual assault.

Unfortunately, more than 50 percent of hospitals and healthcare facilities in the Commonwealth are not providing comprehensive care to victims of sexual assault, because they are not dispensing the vital pregnancy-preventing medication, emergency contraception.

As advocates we recognize the importance of providing victims with complete and compassionate care. To that end, we have diligently reviewed the regulations: Proposed Rulemaking for Sexual Assault Victim Emergency Services. Enclosed are our comments for your consideration.

If you have any questions about our comments and proposed enhancements to the regulations, please feel free to contact me at 717.728.9740 ext. 119.

Sincerely,

Delilah Rumburg  
Executive Director  
Pennsylvania Coalition Against Rape

Pennsylvania Coalition Against Rape  
Comments and Changes to Proposed Rulemaking  
Department of Health  
28 PA. Code Chs. 101 and 117  
Sexual Assault Victim Emergency Services  
36 Pa.B. 6403  
Saturday, October 21, 2006

Section 117.51 Principle

- Delete sixth sentence (a) (2).
  
- Delete seventh sentence beginning “All hospitals electing not to.....”

Section 117.52 Minimum requirements for sexual assault emergency services

- Delete (5), renumber (6) as (5)  
*Comment:* Any testing at the time of the forensic exam will only determine if the victim already has an STD not if the victim contracted an STD as a result of the sexual assault. Therefore if an STD is found this information would be a part of the medical record and could potentially be used against the victim in the legal system. Many sexual assault forensic examiner (SAFE) programs in Pennsylvania already simply prophylax for STDs rather than test for this reason.
  
- (6) delete “blood”  
*Comment:* Many STDs such as the very prevalent Chlamydia and gonorrhea are not diagnosed via blood tests.
  
- Insert (b) Promptly upon a sexual assault victim’s presenting to a hospital that provides sexual assault emergency services, the hospital shall:
  - (1) Contact a local rape crisis center or local sexual assault program and
  - (2) Afford the victim the opportunity for the victim to consult with the rape crisis center or sexual assault counselor in person and in private while at the hospital.
  
- Re-letter former letter (b) to (c)

*Comment on proposed changes to 117.52:* In thirty years of providing services to sexual assault victims in Pennsylvania, rape crisis center medical advocates report that victims will access services if the advocate is already present in the hospital when services are offered. It is much less likely that a victim will access services if the hospital asks the question, “Would you like for me to call an advocate for you?”

#### Section 117.53 Emergency contraception

- (a)(1) after the word materials insert the words “approved by the Department of Health”

*Comment:* To ensure appropriate information, consistent with the Federal Food and Drug Administration standards, we believe that the Department should review materials dealing with medication and its efficacy.

#### §117.54 Prevention of sexually transmitted diseases

- Delete “significantly prevalent” and add “including Hepatitis and HIV.”  
*Comment:* Victims should be informed about STDs that are not necessarily significantly prevalent, but also those that are not as prevalent, such as HIV but has major long-term effects. This edit broadens the category of STDs and risks for the victim.
- (1) Delete “and tests that may be conducted.”
- Section 117.54 (c) delete “significantly prevalent”

#### Section 117.55 Emergency contraception informational materials

- (a) 4<sup>th</sup> sentence after the word “hospital” insert “and approved by the Department of Health” for reasons outlined supra.

#### Section 117.58 Hospitals not providing sexual assault emergency services

*Comment:* It shocks the conscience that hospitals could or would choose to opt out of providing emergency services to victims of sexual assault in the Commonwealth of Pennsylvania, in order to avoid providing emergency contraception.

Throughout the Commonwealth, for example in Philadelphia, there are hospitals designated as particularly adept at treating sexual assault victims, with SANE nursing programs and an ongoing relationship with medical advocates from local rape crisis/sexual assault centers. However, the demographic diversity of the Commonwealth does not lend itself to this kind of specialization throughout the state.

It is inconceivable that a victim might be transported to another county to receive services because there is only one hospital in that county. Any sexual assault victim should be able to present to any emergency room in Pennsylvania and receive compassionate treatment and care.

While we acknowledge that legally, there are those hospitals, which because of statutory exemptions may choose not to provide emergency contraception, we do not believe that this choice should be narrowly construed.

Crimes of sexual violence are literally crimes against the Commonwealth. The Commonwealth prosecutes these crimes to enforce laws and protect the community. To that end we:

- encourage victims to report
- ask them to submit to the rigors of a forensic rape exam
- engage in the daunting legal process

At the very least, we should minimize the aftermath trauma for a victim and not turn her/him away from the very institutions that should help in arguably the darkest hour of her/his life. We hope that the Pennsylvania Department of Health regulations would not allow hospitals to completely opt out of providing care for sexual assault victims.