

Congress of the United States

Washington, DC 20515

February 29, 2024

The Honorable Denis McDonough
Secretary of Veterans Affairs
810 Vermont Ave., NW
Washington, D.C., 20420

Dear Secretary McDonough,

We write today regarding the recent report (21-01445-30) released by the Department of Veterans Affairs Office of the Inspector General (OIG) on the Veterans Health Administration's (VHA) capability and capacity to treat survivors of acute sexual assault when they present at a VHA facility. This report, titled *Greater Compliance with Policies Needed Related to the Management of Emergent Care for Patients Presenting with Acute Sexual Assault*, outlined opportunities for VHA emergency departments and urgent care center facilities to improve the delivery of services for survivors of sexual assault seeking care. We urge the Department to act swiftly to ensure VA facilities are prepared and equipped to deliver care to patients presenting with acute sexual assault.

In the report, the OIG found that the majority of VHA facilities use Sexual Assault Forensic Examiner (SAFE) resources to treat survivors of acute sexual assault; however, only six percent of VHA facilities had SAFE-certified personnel to administer these resources. As a result, we urge the Department of Veterans' Affairs (VA) to prioritize SAFE certification in their onboarding processes to ensure that each VHA facility has the necessary personnel to deliver adequate, quality care.

Beyond the lack of SAFE-certified staff, the OIG found a troubling lack of sexual assault kits (SAKs). Previous VA regulations required all VHA emergency departments and urgent care facilities to have access to SAKs for use, but the 2023 Emergency Medicine and VHA Urgent Care directives removed that requirement. Further, the report found 42 percent of VHA facility leaders reported their facilities did not have a SAK available for use.¹ As SAKs are crucial for pursuing justice for survivors in the case of acute sexual assault, we urge the Department to update its guidelines and ensure that all VHA facilities have access to viable SAKs at all times.

For survivors of acute sexual assault, proper and thorough care, including psychological care, is imperative. Per VA guidelines, those who request mental health resources should have initial contact with a mental health provider within 24 hours. While not all survivors may want to request psychological counseling or other mental health resources, survivors must be given the option in a timely manner, and VHA personnel must follow through on those requests. In their report, the OIG found "no documentation of psychological counseling services offered or mental health referrals ordered in 53 percent of visits" to VHA facilities for acute sexual assault.² We

¹ <https://www.vaog.gov/reports/national-healthcare-review/greater-compliance-policies-needed-related-management-emergent>

² <https://www.vaog.gov/reports/national-healthcare-review/greater-compliance-policies-needed-related-management-emergent>

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urge the VA to stand by its guidelines and enforce their policies to ensure all survivors have timely access to requested mental health resources.

The OIG stated that collaboration with community partners equipped to handle acute sexual assault care is essential for VHA facilities to provide proper care to survivors. We encourage the VA to prioritize finding community partners who can offer psychological care resources, as well as forensic medical care, to survivors who present at VHA facilities. When these referrals do take place, the Department should ensure warm handoffs to new providers. The OIG also recommended that the VA update its policies and guidance to ensure appropriate protection and prevention of sexually transmitted infections (STIs) and pregnancy as well as psychological counseling is offered.³

The report acknowledged that the low frequency of acute sexual assault patients presenting to VHA emergency departments and urgent care facilities contributes to the challenges in managing the care needs of survivors.⁴ We concur with the OIG's recommendation to update guidance on acute sexual assault treatment and encourage the VA to proactively implement training systems to ensure that all front-line staff and personnel have the necessary training and experience to properly handle acute sexual assault cases and maintain procedural knowledge. We also believe it is vital that VA law enforcement officers are included in these trainings, and that their policies and guidelines be updated accordingly. Guidelines for VA law enforcement handling acute sexual assault cases should reflect and comply with guidelines for VA clinical staff and health care providers, as well as local law enforcement jurisdictional codes.

We request that the Department respond to this letter with an updated status of all recommendations and their implementation timelines no later than March 15, 2024. Additionally, we request that the VA consider recommending any legislative action it deems necessary to improve the delivery of care for veterans who have survived sexual assault.

Sincerely,



Ann McLane Kuster
Member of Congress



Julia Brownley
Member of Congress

³ <https://www.vaog.gov/reports/national-healthcare-review/greater-compliance-policies-needed-related-management-emergent>

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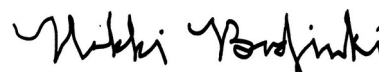
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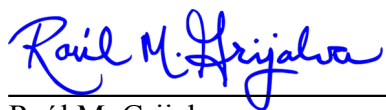


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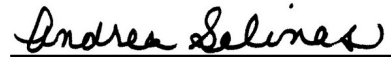


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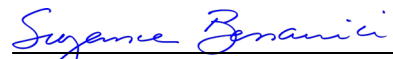
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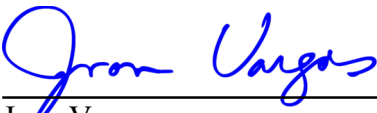
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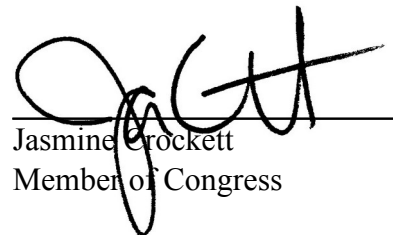
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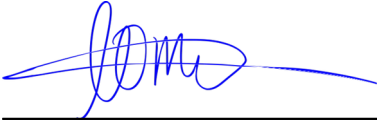


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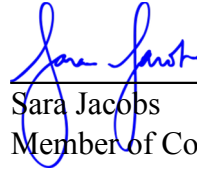


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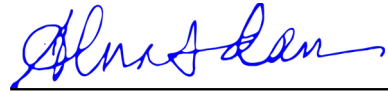
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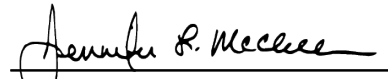
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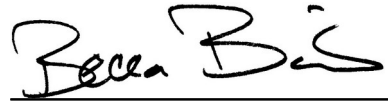
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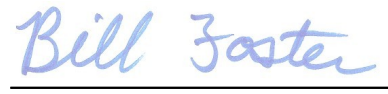
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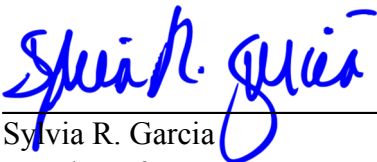
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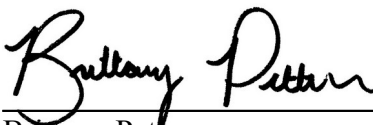


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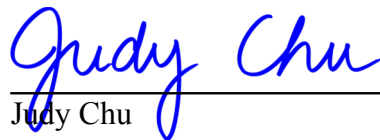
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