in the State or Tribal community and create policies to increase survivor access to trained examiners.

(C) Use the findings to develop and implement a public awareness campaign that includes the following:

(i) An online toolkit describing how and where sexual assault survivors can obtain assistance and care, including medical forensic examinations, in the State or Tribal community.

(ii) A model standard response protocol for health care providers to implement upon arrival of a patient seeking care for sexual assault.

(iii) A model sexual assault response team protocol incorporating interdisciplinary community coordination between hospitals, emergency departments, hospital administration, local rape crisis programs, law enforcement, prosecuting attorneys, and other health and human service agencies and stakeholders with respect to delivering survivor-centered sexual assault care and medical forensic examinations.

(iv) A notice of applicable laws prohibiting charging or billing survivors of sexual assault for care and services related to sexual assault.

(e) Authorization of appropriations

There is authorized to be appropriated to carry out this section $7,000,000 for each of fiscal years 2023 through 2027.

(Pub. L. 117–103, div. W, title V, § 503, Mar. 15, 2022, 136 Stat. 874.)

Editorial Notes

CODIFICATION

Section was enacted as part of the Violence Against Women Act Reauthorization Act of 2022, and also as part of the Consolidated Appropriations Act, 2022, and not as part of the Public Health Service Act which comprises this chapter.

Statutory Notes and Related Subsidiaries

EFFECTIVE DATE

Section not effective until Oct. 1 of the first fiscal year beginning after Mar. 15, 2022, see section 4(a) of div. W of Pub. L. 117–103, set out as a note under section 6851 of Title 15, Commerce and Trade.

NATIONAL REPORT ON SEXUAL ASSAULT SERVICES IN NATION'S HEALTH SYSTEM

Pub. L. 117–103, div. W, title V, § 504, Mar. 15, 2022, 136 Stat. 876, provided that:

''(a) IN GENERAL.—Not later than 1 year after the date of enactment of this Act [Mar. 15, 2022], and annually thereafter, the Agency for Healthcare Research and Quality, in consultation with the Centers for Medicare & Medicaid Services, the Centers for Disease Control and Prevention, the Health Resources and Services Administration, the Indian Health Service, the Office for Victims of Crime of the Department of Justice, the Office on Women's Health of the Department of Health and Human Services, and the Office of Violence Against Women of the Department of Justice (collectively referred to in this section as the 'Agencies'), shall submit to the Secretary of Health and Human Services (referred to in this section as 'the Secretary') a report of existing Federal, Indian Tribe, and State practices relating to medical forensic examinations which may include the findings of the surveys developed under section 503 [42 U.S.C. 280g–4a].

''(b) CORE COMPETENCIES.—In conducting activities under this section, the Agencies shall address sexual assault forensic examination competencies, including—

''(1) providing medical care to sexual assault patients;

''(2) demonstrating the ability to conduct a medical forensic examination, including an evaluation for evidence collection;

''(3) showing compassion and sensitivity towards survivors of sexual assault;

''(4) testifying in Federal, State, local, and Tribal courts; and

''(5) other competencies, as the Agencies determine appropriate.

''(c) PUBLICATION.—The Agency for Healthcare Research and Quality shall establish, maintain, and publish on the website of the Department of Health and Human Services an online public map of availability of sexual assault forensic examinations. Such maps shall clarify if there is full-time, part-time, or on-call coverage.

''(d) REPORT TO CONGRESS.—Not later than 60 days after receiving the report described in subsection (a), the Secretary shall submit to the Committee on Health, Education, Labor, and Pensions of the Senate and the Committee on Energy and Commerce and the Committee on Education and Labor [now Committee on Education and the Workforce] of the House of Representatives recommendations for improving sexual assault forensic examination competencies based on the report described in subsection (a).''

[For definition of terms used in section 504 of div. W of Pub. L. 117–103, set out above, see section 12291 Title 34, Crime Control and Law Enforcement, as made applicable by section 2(b) of div. W of Pub. L. 117–103, which is set out as a note under section 12291 of Title 34].

DEFINITIONS

For definitions of terms used in this section, see section 12291 of Title 34, Crime Control and Law Enforcement, as made applicable by section 2(b) of div. W of Pub. L. 117–103, which is set out as a note under section 12291 of Title 34.

§ 280g–4b. Expanding access to unified care

(a) Establishment of program

The Secretary of Health and Human Services (referred to in this section as the ''Secretary'') shall establish a program (referred to in this section as the ''program'') to award grants to eligible entities for the clinical training of sexual assault forensic examiners (including registered nurses, nurse practitioners, nurse midwives, clinical nurse specialists, physician assistants, and physicians) to administer medical forensic examinations and treatments to survivors of sexual assault.

(b) Purpose

The purpose of the program is to enable each grant recipient to expand access to medical forensic examination services by providing new providers with the clinical training necessary to establish and maintain competency in such services and to test the provisions of such services at new facilities in expanded health care settings.

(c) Grants

Under the program, the Secretary shall award 3-year grants to eligible entities that meet the requirements established by the Secretary.

(d) Eligible entities

To be eligible to receive a grant under this section, an entity shall—

(1) be—

(A) a safety net clinic acting in partnership with a high-volume emergency services provider or a hospital currently providing sexual assault medical forensic examinations performed by sexual assault forensic examiners, that will use grant funds to—

(i) assign rural health care service providers to the high-volume hospitals for clinical practicum hours to qualify such providers as sexual assault forensic examiners; or

(ii) assign practitioners at high-volume hospitals to rural health care services providers to instruct, oversee, and approve clinical practicum hours in the community to be served;

(B) an organization described in section 501(c)(3) of title 26 and exempt from taxation under 501(a) of such title, that provides legal training and technical assistance to Tribal communities and to organizations and agencies serving Indians; or

(C) an Indian Tribe (as defined in section 5304 of title 25); and

(2) submit to the Secretary an application at such time, in such manner, and containing such information as the Secretary may require, including a description of whether the applicant will provide services described in subparagraph (A) or (B) of paragraph (1).

(e) Grant amount

Each grant awarded under this section shall be in an amount not to exceed $400,000 per year. A grant recipient may carry over funds from one fiscal year to the next without obtaining approval from the Secretary.

(f) Authorization of appropriations

(1) In general

There is authorized to be appropriated to carry out this section $10,000,000 for each of fiscal years 2023 through 2027.

(2) Set-aside

Of the amount appropriated under this subsection for a fiscal year, the Secretary shall reserve 15 percent of such amount for purposes of making grants to entities that are affiliated with Indian Tribes or Tribal organizations (as defined in section 5304 of title 25), or Urban Indian organizations (as defined in section 1603 of title 25). Amounts reserved may be used to support referrals and the delivery of emergency first aid, culturally competent support, and forensic evidence collection training.

(Pub. L. 117–103, div. W, title V, § 506, Mar. 15, 2022, 136 Stat. 878.)

Editorial Notes

CODIFICATION

Section was enacted as part of the Violence Against Women Act Reauthorization Act of 2022, and also as part of the Consolidated Appropriations Act, 2022, and not as part of the Public Health Service Act which comprises this chapter.

Statutory Notes and Related Subsidiaries

EFFECTIVE DATE

Section not effective until Oct. 1 of the first fiscal year beginning after Mar. 15, 2022, see section 4(a) of div. W of Pub. L. 117–103, set out as a note under section 6851 of Title 15, Commerce and Trade.

IMPROVING AND STRENGTHENING THE SEXUAL ASSAULT EXAMINER WORKFORCE CLINICAL AND CONTINUING EDUCATION PILOT PROGRAM

Pub. L. 117–103, div. W, title V, § 505, Mar. 15, 2022, 136 Stat. 876, provided that:

''(a) PURPOSE.—It is the purpose of this section to establish a pilot program to develop, test, and implement training and continuing education that expands and supports the availability of medical forensic examination services for survivors of sexual assault.

''(b) ESTABLISHMENT.—

''(1) IN GENERAL.—Not later than 1 year after the date of enactment of this Act [Mar. 15, 2022], the Secretary of Health and Human Services (referred to in this section as 'the Secretary') shall establish a National Continuing and Clinical Education Pilot Program for sexual assault forensic examiners, sexual assault nurse examiners, and other individuals who perform medical forensic examinations.

''(2) CONSULTATION.—In establishing such program, the Secretary shall consult with the Centers for Medicare & Medicaid Services, the Centers for Disease Control and Prevention, the Health Resources and Services Administration, the Indian Health Service, the Office for Victims of Crime of the Department of Justice, the Office on Violence Against Women of the Department of Justice, and the Office on Women's Health of the Department of Health and Human Services, and shall solicit input from regional, national, and Tribal organizations with expertise in forensic nursing, rape trauma or crisis counseling, investigating rape and gender violence cases, survivors' advocacy and support, sexual assault prevention education, rural health, and responding to sexual violence in Tribal communities.

''(c) FUNCTIONS.—The pilot program established under subsection (b) shall develop, pilot, implement, and update, as appropriate, continuing and clinical education program modules, webinars, and programs for all hospitals and providers to increase access to medical forensic examination services and address ongoing competency issues in medical forensic examination services, including—

''(1) training and continuing education to help support sexual assault forensic examiners practicing in rural or underserved areas;

''(2) training to help connect sexual assault survivors who are Indian with sexual assault forensic examiners, including through emergency first aid, referrals, culturally competent support, and forensic evidence collection in rural communities;

''(3) replication of successful sexual assault forensic examination programs to help develop and improve the evidence base for medical forensic examinations; and

''(4) training to increase the number of medical professionals who are considered sexual assault forensic examiners based on the recommendations of the National Sexual Assault Forensic Examination Training Standards issued by the Office on Violence Against Women of the Department of Justice.

''(d) ELIGIBILITY TO PARTICIPATE IN PILOT PROGRAMS.—The Secretary shall ensure that medical forensic examination services provided under the pilot program established under subsection (b), and other medical forensic examiner services under the pilot program are provided by health care providers who are also one of the following:

''(1) A physician, including a resident physician.

''(2) A nurse practitioner.

''(3) A nurse midwife.

''(4) A physician assistant.

''(5) A certified nurse specialist.

''(6) A registered nurse.

''(7) A community health practitioner or a community health aide who has completed level III or level IV certification and training requirements.

''(e) NATURE OF TRAINING.—The continuing education program established under this section shall incorporate and reflect current best practices and standards on medical forensic examination services consistent with the purpose of this section.

''(f) AVAILABILITY.—After termination of the pilot program established under subsection (b)(1), the training and continuing education program established under such program shall be available to all sexual assault forensic examiners and other providers employed by, or any individual providing services through, facilities that receive Federal funding.

''(g) EFFECTIVE DATE.—The pilot program established under this section shall terminate on the date that is 2 years after the date of such establishment.

''(h) AUTHORIZATION.—There are authorized to be appropriated to carry out this section $5,000,000 for each of fiscal years 2023 through 2025.''

[For definition of terms used in section 505 of div. W of Pub. L. 117–103, set out above, see section 12291 of Title 34, Crime Control and Law Enforcement, as made applicable by section 2(b) of div. W of Pub. L. 117–103, which is set out as a note under section 12291 of Title 34].

DEFINITIONS

For definitions of terms used in this section, see section 12291 of Title 34, Crime Control and Law Enforcement, as made applicable by section 2(b) of div. W of Pub. L. 117–103, which is set out as a note under section 12291 of Title 34.

§ 280g–4c. Expanding access to forensics for victims of interpersonal violence

(a) Definitions

In this section:

(1) Community health aide; community health practitioner

The terms ''community health aide'' and ''community health practitioner'' have the meanings given such terms for purposes of section 1616*l* of title 25.

(2) Health care provider

The term ''health care provider'' has the meaning given such term by the Secretary, and includes registered nurses, nurse practitioners, nurse midwives, clinical nurse specialists, physician assistants, and physicians.

(3) Indian tribe; Tribal organization

The terms ''Indian Tribe'' and ''Tribal organization'' shall have the meanings given such terms in section 5304 of title 25.

(4) Institution of higher education

The term ''institution of higher education'' has the meaning given such term in section 1001 of title 20.

(5) Interpersonal violence

The term ''interpersonal violence'' means any form of violence that is emotional and trauma-inducing for victims, families of victims, perpetrators, and communities.

(6) Native Hawaiian organization

The term ''Native Hawaiian organization'' has the meaning given such term in section 11711 of this title.

(7) Secretary

The term ''Secretary'' means the Secretary of Health and Human Services.

(8) Trauma-informed care

The term ''trauma-informed care'' means care received by trauma survivors that is culturally competent in accordance with professional standards of practice and accounting for patients' experiences and preferences in order to eliminate or mitigate triggers that may cause re-traumatization of the patient.

(9) Urban Indian organization

The term ''Urban Indian organization'' has the meaning given such term in section 1603 of title 25.

(b) Demonstration grants for comprehensive forensic training

(1) Establishment of program

The Secretary shall establish a demonstration program to award grants to eligible entities for the clinical training of health care providers to provide generalist forensic services and trauma-informed care to survivors of interpersonal violence of all ages.

(2) Purpose

The purpose of the demonstration program under this subsection is to develop training and curriculum to provide health care providers with the skills to support the provision of forensic assessment and trauma-informed care to individuals, families, and communities that have experienced violence or trauma and to be available to collaborate with members of an inter-professional forensic team.

(3) Term

Grants under this subsection shall be for a term of 5 years.

(4) Eligible entities

To be eligible to receive a grant under this subsection, an entity shall—

(A) be an institute of higher education, including a minority serving institution as described in section 1067q of title 20; and

(B) submit to the Secretary an application at such time, in such manner, and containing such information as the Secretary may require.

(5) Grant amount

Each grant awarded under this subsection shall be in an amount that does not exceed $400,000 per year. A grant recipient may carry over funds from one fiscal year to the next without obtaining approval from the Secretary.

(6) Authorization of appropriations

(A) In general

There is authorized to be appropriated to carry out this subsection $5,000,000 for each of fiscal years 2023 through 2027.

(B) Set-aside

Of the amount appropriated under this paragraph for a fiscal year, the Secretary shall reserve 10 percent for purposes of making grants to support training and curricula that addresses the unique needs of Indian Tribes, Tribal organizations, Urban Indian organizations, and Native Hawaiian organizations. Amounts so reserved may be used to support training, referrals, and the delivery of emergency first aid, culturally competent support, and forensic evidence collection training.