

Floyd County Protocol for Responding to Victims of Sexual Assault  
Sexual Assault Response Team Protocol

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**Introduction**

Development and implementation of The Sexual Assault Response Protocol are overseen by the Sexual Assault Response Team according to OCGA §15-24-2, representatives include: law enforcement (City/County/Sheriff), the District Attorney's Office, County Board of Health, Local Citizen, representative of the Sexual Assault Center (including SANE), the Magistrate Court and any other members as agreed upon by protocol committee. As a branch of this protocol, the Sexual Assault Response Team (SART) subcommittee shall be formed to include: Sexual Assault Center (including SANE), local Law Enforcement and the District Attorney's office, to include other guests as needed.

The protocol is intended to facilitate the provision of consistent, comprehensive, sensitive and non-judgmental treatment of victims as they progress through the health and criminal justice systems. It is also intended to standardize the collection of evidence in order to aid in the prosecution of cases. A further purpose is to develop a coordinated effort among health providers, law enforcement, prosecution, and victim advocates ensuring that victims receive efficient and comprehensive medical care, evidentiary examination, emotional support and referral information. Health care providers, care providers, including hospitals, all branches of law enforcement, including prosecution, and programs which assist victims should use the protocol.

**Persons Covered**

While it is recognized that victims of sexual assault are female and male, old and young, rich and poor, heterosexual and homosexual, this protocol is specific to adolescent and adult females and males ages twelve and greater.

A general definition used in this protocol is that sexual assault includes sexual contact or intimacy performed upon one person by another without mutual consent, or with the inability of the victim to give consent due to age or mental or physical incapacity. In Georgia, there is no one law applicable to the crime of sexual assault. Rather, there are a number of laws that refer to rape, sodomy and aggravated sodomy, statutory rape, sexual battery and aggravated sexual battery, and child molestation and aggravated child molestation.

Existing county child abuse protocol should be followed in conjunction with the Sexual Assault Response Protocol when the victim is a child and has been sexually assaulted. However, if the victim is twelve years or greater, they have the same rights to an exam and it DOES NOT have to be approved by law enforcement.

**Sensitivity to the needs of the victim**

Providing care to the victim will require special sensitivity on the part of law enforcement, medical and support personnel. The victim of sexual assault suffers from physical as well as emotional or psychological trauma. Physical aggression has been used to humiliate, harm or degrade the victim. The victim's sense of self may have been threatened by the hostility and the aggression involved. The victim

may wonder what he or she could have done to deserve this assault. The potential of people learning about the attack and the threat of pregnancy or a sexually transmitted disease may also cause distress. Some victims may fear being denied fair treatment. As the victim reports the incident, the individual may be worried, hurt, frightened, ashamed, isolated, embarrassed, or humiliated. It is important that the victim feel acceptance and support, regardless of the victim's emotional and/or cultural response. The victim may also be feeling fearful and anxious after the assault in dealing with the legal, medical and social systems, and will need assistance and understanding through these phases.

Throughout the protocol, the term "victim" and "survivor" are used interchangeably. In order to help the victim, become a survivor, we must give them full control over decisions.

### **Financial Resources**

O.C.G.A. 17-5-72 provides that a victim shall have the right to a forensic medical examination, regardless of whether the victim participates in the criminal justice system (or cooperates with law enforcement by pursuing prosecution of the crime). A victim is not required to pay, directly or indirectly, for the cost of a forensic medical examination. The cost of a forensic medical examination shall be paid for by Georgia Crime Victims Compensation Program.

For such other medical costs associated with the assault, reimbursement can be claimed through the Victim's Compensation Fund, and payment will be made directly to the provider. However, if a victim is insured or on Medicaid, then those sources will be sought first before Victim's Compensation Fund is administered by the Criminal Justice Coordinating Council (CJCC).

### **Terminology**

**First Response:** The response that occurs the first time a victim notifies an agency that they have been sexually assaulted.

**Forensic Medical Examination:** An examination by a Sexual Assault Nurse Examiner that includes a medical assessment both for health purposes and for the collection and documentation of evidence. Forensic examinations in Georgia require the use of a GBI collection kit.

**Sexual Violence:** Sexual Violence is the term designed to represent any form of sexual assault, not just rape. Sexual violence reflects a number of Georgia codes that apply to rape, sodomy, aggravated sodomy, statutory rape, sexual battery, aggravated sexual battery and sexual harassment. Please see the Floyd County Child Abuse Protocol for children under the age of 12, for children over the age of 12, this protocol will apply for the medical piece.

**SANE:** Sexual Assault Nurse Examiner. A registered professional nurse who has successfully completed both the didactic and clinical training to be a SANE.

**SAC:** Sexual Assault Center of NWGA is a place where both adults and children can be examined, counseling, receive personal advocacy, crisis intervention, legal advocacy, support services and support groups. The SAC also houses an interview room for law enforcement to use at their leisure.

**Please Note:**

The terms "victim" and "survivor" are used interchangeably throughout this document. For the purpose of the SART protocol, they are synonymous.

Because the overwhelming majority of perpetrators of sexual violence are male and the majority of victims are female, we may use the pronoun "he" for denoting a perpetrator the accused and the pronoun "she" for the victim/survivor throughout this document. This in no way minimizes the reality of male victims of sexual violence and the very real barriers they face in reporting crimes of sexual violence.

**Victim Support Services**

1. **Sexual Assault Center of NWGA** provides a 24-hour crisis line, crisis intervention, psychological and emotional support to the victim, accompaniment to exam location, support groups, in house counseling services, advocacy for victims including support throughout the criminal justice system, assists with applying for victim's compensation, offers court accompaniment, liaison between client and law enforcement or other agencies. The SAC NWGA can provide training to medical personnel on the psychological reactions and needs of sexual assault victims. Other trainings are offered upon request. The purpose of using the Sexual Assault Center rather than an Emergency Room is that the it is separate setting for medical and legal examination. It is private, with a separate waiting room and our staff has over thirty years of experience in sexual assault advocacy and medical exams. NOTE: The SAC NWGA does extend its services to child victims under the age of 12 years old via a linkage agreement with Harbor House, the NWGA Child Advocacy Center, to provide forensic medical exams.
2. **Victim Assistance Program** is located in the District Attorney's Office. They provide the victim with information, support, and guidance throughout the criminal justice process. This includes information regarding the status of the court case, explanations of court proceedings, and assistance in applying for financial compensation. The Victim Assistance program also provides victims with emotional support and will make referrals to counselors and other agencies when needed. Victim Advocates are available to accompany victims to court for any court proceeding.
3. **Harbor House, The NWGA Child Advocacy Center** mission is (1) to provide a safe and caring place to evaluate the child who may have been abused, (2) to encourage the collaboration of social and legal agencies for the benefit of the child, and (3) to at all times lessen the trauma suffered by the child. Services provided at the center include: forensic interviews, family advocacy, follow up and support, as well as referral to appropriate agencies and prevention. Harbor House follows the Floyd County Child Abuse Protocol.

Victim service organizations are involved at various points in sexual assault cases but should begin at the time the sexual assault victim reports their assaults and should work with all affected agencies to form a continuum of care for victims.

### **Rome City and Floyd County Police Department**

In an effort to enhance the successful prosecution of incidents of sexual assault and sexual abuse cases, the Rome City and Floyd County Police Departments and its employees will actively participate in the Sexual Assault Response Team and utilize the Sexual Assault Response Protocol. Sexual assault, as used in this section, shall include but not be limited to rape, statutory rape, sodomy and aggravated sodomy.

The SART has been developed through collaborative efforts of the Sexual Assault Center of NWGA, Rome City Police Department, Floyd County Police Department, Floyd County District Attorney's Office, Floyd County Department of Family and Children Services, Floyd County Magistrate Court, Floyd Medical Center, Redmond Regional Medical Center, Floyd County Health Department, Floyd County Prison and Floyd County Sheriff's Office. The intent of the program is to provide extensive care to sexual assault victims in an empathetic and supportive environment, recognizing and supporting the law enforcement interest. A comprehensive evidentiary examination of the victim is provided by medical examiners trained to identify and collect criminal evidence. The medical examiner is also trained to medically screen and care for injuries of the victim. The rights and interests of the victim are also ensured through the use of a victim advocate provided by the Sexual Assault Center of NWGA.

The SART will consist of:

Sexual Assault Nurse Examiner provided by the SAC NWGA

A Victim Advocate provided by the SAC NWGA

LE representative if the victim chooses to report the crime

The SART will meet the victim at a designated location (SAC NWGA if no injuries that warrant ER visit) and commence their examination and investigation. Procedures are outlined below.

#### **Specific Duties**

##### **911/Police Department**

1. Receives initial incident report
2. Dispatches officer to victim location (may or may not be crime scene)
3. At officer's request, contacts patrol supervisor
4. At patrol supervisor's request, contacts investigator
5. Contact SAC (706) 802-0580 or (866) 655-8625.

##### **Responding Officer**

Makes contact with victim

1. Verifies jurisdiction
2. Begins initial investigation
3. Advise 911 to contact patrol supervisor
4. Contact SAC at (706) 802-0580 or (866) 655-8625 to make arrangements to bring victim for services. (EVEN if an exam is not necessary or not within the ten days, there are still services that victim can receive)

**Patrol Supervisor**

1. Responds to reporting officer's location, if needed
2. Advises 911 to contact investigator

**Investigator**

1. Confirms response to location
2. Gathers facts of the case
3. Accompanies survivor to SAC, if needed
  - a. Survivor should only be taken to ER if severe bleeding or medical needs are beyond the scope of SAC services.
  - b. Please discuss with SAC on call staff or Director before taking to ER
4. May remain at the SAC, if needed
5. Receives evidence from SANE and follows department evidence procedures.

Investigator handles all evidence received by SANE according to department evidence procedures, per Georgia Code §17-5-71 which states to store the kit in a locked evidence room for the set amount of time per law if the Victim chooses not to report the crime to give them time to decide.

Note: If a survivor is highly intoxicated or potentially violent, she/he should be taken to the hospital, rather than the SAC, for the sexual assault exam. If the client is not coherent and consent cannot be obtained, the SAC will re-attempt within 24 hours.

Note: If a sexual assault has occurred involving a homicide, all examinations will be done by the GBI Forensic Crime Lab. Responding agency to follow agency protocol.

**Non-Medical Cases**

When a victim reports a crime that does not require a medical (there was no fondling, the assault reported happened more than 10 days ago).

The person the crime is reported to should still call for an advocate via the SAC NWGA hotline. This allows the victim the right to basic services, such as crisis intervention and personal advocacy. It also immediately puts the victim in contact with an advocate. By doing this, you allow the victim to receive the proper services immediately. While a medical exam is what is needed for prosecution, it isn't the only thing that a victim needs.

**Accompaniment Request**

How law enforcement and medical personnel can get an advocate when needed

**Business Hours**

To request an advocate during business hours, Monday through Friday, 9am-5pm, call the office at 706-292-9024. In the event that all staff are out of the office, call the hotline at 706-802-0580.

**After-hours**

To request an advocate after-hours (after 5pm), weekends and holidays, call the hotline at 706-802-0580.

**Floyd Medical Center and Redmond Regional Medical Center**

When a sexual assault survivor presents to the hospital, the emergency room staff should:

1. Call 911 and report the sexual assault and to the SAC hotline and request and advocate come to the ER.
2. Place the victim in a private room.
3. Triage the victim.
4. Do Not allow the victim to undress.
5. Advise the victim of their right to choose to talk to law enforcement.
6. Wait for the SAC Advocate to arrive to discuss options.
7. Victim will be medically screened by a practicing medical provider at the ER facility.
8. ER physician will examine and treat the victim as medically necessary and then discharge to the SAC.
9. ER staff should not insert or remove a catheter, or conduct a pelvic exam without talking to SAC staff first.
10. In the event the client needs to urinate, ER nurse should collect urine sample for SAC.

*Note:* If possible, forensic evidence should be collected before treating injuries, as medical treatment can result in the loss of potentially valuable trace or biological evidence. If possible, and if the survivor is stable, surgery should be delayed until after the forensic exam. Otherwise, the SANE should try to collect forensic evidence in the operating room, while the survivor is being prepped for surgery.

*Note:* Forensic/medical examinations/assessments are provided for female and male survivors of any age.

**Non-Reporting Cases**

In cases where the victim does not report to law enforcement but does want a forensic medical exam, advocates will act in the same capacity they do when a victim chooses to report with these added responsibilities: The person in which the crime was reported to, Hospital staff, Health Department, etc. will call for an advocate via the SAC NWGA hotline at 706-802-0580.

- Advocates will offer support and outline reporting and medical options to the survivors at any point of contact
- Advocate will be responsible for contacting the on-call SANE to set-up exam when contacted by a victim who wants an exam.
- Advocates will respond with the victim to the SAC for the forensic medical exam.
- In the event that a non-reporting victim later decides that she/he wants to prosecute, The SAC NWGA will be the point of contact for the victim. If/when a client calls and decides she/he would like to report, The SAC NWGA will get in touch with law enforcement to take a report.

**Sexual Assault Center of NWGA****Specific Duties****Staff/Advocate**

1. Receives case information from 911/investigator/ER Nurse.
2. Confirms jurisdiction for sexual assault exam.
3. Dispatches SANE to exam location.
4. Dispatches Volunteer Advocate to exam location.
5. Call scheduled SANE
6. Meets survivor and/or Investigator or patrol officer at exam location within 30 minutes.
7. Provides support to survivor and his/her family.
8. Assists investigator and SANE with special needs.
9. Complete crisis report form.
10. Transports medical chart to SAC Victim Advocate.

**Sexual Assault Nurse Examiner (SANE)**

1. Responds immediately to call from staff.
2. Receives case information from staff.
3. Responds to exam location within 60 minutes.
4. Meets with staff for initial information on survivor.
5. Conducts sexual assault exam, following SAC and GBI protocol for forensic evidence collection (see Section III).
6. Maintains Chain of Custody of evidence and turns all evidence over directly to investigator or locked fridge at the SAC.

*Note:* SAC Staff are specifically instructed and trained not to question the survivor about details related to the assault until AFTER the survivor has been interviewed by law enforcement and/or DFCS. Victims have the right to have an advocate present during the law enforcement interview, those interviews can be conducted at the SAC.

**Procedures – Staff****Requests for Medical Exam/Accompaniment**

1. Upon receiving a call for a medical exam, call the detective or 911 (whoever initiated the call) to verify:
  - a. exam location (SAC, Floyd, Redmond,)
  - b. detective's name and law enforcement agency
  - c. details about survivor (age, type of assault, time of assault, etc.)
  - d. special needs (i.e. DFCS, interpreter, etc.)
2. Verify jurisdiction of the case
3. Give the detective or 911 an estimated time of arrival (within 30 minutes of receiving call)
4. Immediately call the on-call SANE and report the exam location
5. Call the Advocate and report the exam location

*Note:* If the SANE does not respond within ten minutes to a call, IMMEDIATELY call another SANE nurse.

**On-site Forensic/Medical Examinations/Assessments**

1. Wait for the detective or patrol officer to arrive BEFORE entering the building, to protect your safety, if feel unsafe entering alone.

2. Upon the arrival of law enforcement, unlock the door of SAC to enter, then IMMEDIATELY relock the door behind you.
3. Watch the parking lot through the office window for the arrival of the SANE, Volunteer Advocate, and significant others.
4. Allow the survivor to sit in the waiting room until the SANE is ready to perform the exam.
5. Assist the detective by showing him/her the office, telephone, interview room, etc., and by providing any necessary supplies (paper, pens, etc.).
6. Attend to the needs of significant others who are present. Explain SAC services and provide resource information as needed.
7. Ensure that the Advocate provides the survivor with SAC brochures, etc., before leaving.
8. Complete a Crisis Report Form before leaving the office. When the rape exam is completed, take the medical chart from the SANE. Place the chart with the Crisis Report Form under the Victim Advocate door.
9. Make sure the SAC is clean and in relative order before leaving.
10. In the event that staff does not feel safe, they may request the detective or patrol officer stay at the SAC until the exam is finished.

#### **Hospital-Based Forensic/Medical Examinations/Assessments**

1. Upon arrival to the hospital, check in with the ER charge nurse or other medical personnel.
2. Allow the Advocate to attend to the needs of the survivor.
3. Attend to the needs of any significant others who are present. Explain SAC services and provide resource information as needed.
4. Talk with the detective to gather pertinent information about the case.
5. Ensure that the advocate provides the survivor with SAC brochures, etc., before leaving.
6. Complete a Crisis Report Form before leaving the hospital. When the rape exam is completed, take the medical chart from the SANE.
7. The following day, return the medical chart and appropriate forms to SAC.
8. Leave ER Crisis Report form with the ER nurse working the case, and make a copy for the file.

*Note:* Use of the SAC keys should be limited to exams and police interviews held at the SAC when an investigator is present. The keys should not be used to enter the office outside of business hours, when a law enforcement officer is not present.



### Sexual Assault Nurse Examiners

#### On-Site Forensic/Medical Examinations/Assessments

*Note:* the following section is primarily directed to the SANE.

##### A. Initial Evaluation

When the survivor is brought to SAC, sit with her/him in a private setting to triage and screen the patient medically.

If the survivor has injuries that require additional medical attention (possibly indicated by unstable vital signs) altered consciousness, and/or peritoneal pain or bleeding, notify the attending detective or law enforcement officer that the survivor needs to be transported immediately to the emergency room. This is also applicable in cases where the survivor is highly intoxicated or potentially violent.

Take a brief assault history from the survivor. If necessary, the investigating officer will be present for this initial assessment. The Advocate will also be present, at the request of the survivor or guardian, to provide emotional support.

Review the initial consent forms with the survivor and have her/him sign the forms before proceeding with the examination.

Explain to the survivor that a routine physical exam (including a Pap smear) will not be conducted. Encourage the survivors to set up an appointment with her physician or health department the following day or the advocate will offer to set up an appointment with the local health department or the victim's primary doctor for a routine physical exam.

##### B. The Sexual Assault Exam

Essential exam components include:

- Forensic evidence collection
- Basic evaluation and preventive care
- Pregnancy evaluation and prevention
- Crisis intervention
- Care of injuries

##### Physical Exam

- includes Pelvic/GU and rectal exam as indicated
- Oropharynx exam in the case of oral penetration
- Skin exam and photographs to document bites, bruises and possible scratches
- Woods lamp exam
- Head to toe assessment

##### Lab Exam

- Pregnancy test
- Drug facilitated kit (if indicated that possible drugs were used)
- STI testing may be done if the assault was post 10 days (testing immediately after an assault will not show positive results if an STI was contracted)

## **Forensic Evidence Collection**

### **Time Frame**

A complete exam including all of the essential components should be done within ten (10) days post-assault. Ten (10) days is the max after the date of the assault that the SANE will/can perform a forensic exam, depending on the circumstances of the case. After (10) days a wellness exam can still be done but after 10 days, no medications will follow.

### **Medical Interview**

Before beginning the exam, the SANE should collect the following history from the survivor:

- **Medical history** - a thorough history is obtained to include menstrual history, OB/GYN history, birth control method, pregnancy status, history of STIs, and hepatitis B and tetanus immunization status.
- **Assault history** – including orifices where violence was used or penetration occurred, objects used for penetration, forms of violence used, and places on the body where violence was used, as well as location of the assault
- **Pertinent medical information** – including allergies and current medication, current pregnancy status or contraception and the last normal menstrual cycle.

### **Medical Assessment**

The SANE should assess the survivor for physical trauma, as well as assess the orifices involved in the assault. The Victim has the right to stop the exam or refuse any part of the exam at anytime.

### **Evidence Collection**

The following evidence may be collected:

- Torn or stained clothing
- Foreign biological matter
- Pubic and head hair combings/plucking for foreign hairs and other materials
- Sperm and seminal fluids from involved orifices
- Saliva for victim secretor status
- Fingernail scrapings or clippings
- Blood & Urine specimen (when date rape drug use is suspected)
- Photographs, drawings, and written documentation of physical injuries

### **Treatment**

- Treatments are offered to survivors as deemed appropriate to the setting and may include: Emergency contraception (if indicated and consistent with the survivor's wishes)
- Antibiotics consistent with CDC recommendations for treatment of STI (gonorrhea, Chlamydia, Trichomonas's, Bacterial Vaginosis)
- All medications are followed in accordance with CDC recommendations and standing orders by the SAC NWGA acting Medical Director.

### **Wellness Exam**

- If the assault has been more than ten days, the victim is offered a physical exam, screening for sexually transmitted infections, and appropriate treatment along with pregnancy testing.

SANE protocols will be maintained per current state and federal guidelines, as well as medical community guidelines and standards, and kept up to date by the SANE team members and the SAC medical director. SAC will provide the most current SANE protocol at every SART meeting.

#### **Crisis Intervention**

While the SANE has received training in Rape Trauma Syndrome and crisis intervention, crisis support and advocacy remain the primary responsibility of the SAC Advocate. Given this, the Advocate should be allowed to remain in the exam room during the forensic exam, with the permission of the survivor.

#### **Care of Injuries/Medications**

Again, if the survivor has injuries that cannot be treated at the SAC office, he/she should be immediately transported to the nearest hospital. Medications administered/prescribed to the survivor shall follow the standing orders of the treating physician.

If possible, the SANE should collect the forensic evidence before treating injuries, as medical treatment can result in the loss of potentially valuable trace or biological evidence. If possible, and if the survivor is stable, surgery should be delayed until after the forensic exam. Otherwise, the SANE should try to collect forensic evidence in the operating room, while the survivor is being prepped for surgery.

If the survivor experiences vomiting prior to, during, or immediately following the forensic examination, the SANE should attend to the survivor by: assessing causative factors and frequency; positioning the survivor to prevent aspiration; and providing an emesis basin and emptying it as necessary. The SANE should not leave the facility while the survivor is experiencing recurrent vomiting episodes.

#### **Chain – of – Custody and Evidence Integrity**

Maintaining chain-of-custody is as important as collecting the proper evidence. Maintaining chain-of-custody is critical to prevent any possibility of evidence tampering and to preclude any doubt about the integrity of the evidence. Completed documentation is essential and must include the signature of everyone who had possession of the evidence from the individual who collected the evidence to the individual bringing the evidence into the courtroom.

The evidence must remain with the SANE at all times. If the SANE must leave the exam room for any reason during the exam, the evidence must go with her. She must be able to testify that the evidence was in her possession from the time it was collected until the time it was given to law enforcement, or secured in a locked refrigerator.

When necessary, a police officer may be in the exam room when the evidence is collected (when the victim is in custody). It is not necessary for a police officer to be in the exam room during the exam to maintain proper chain of custody. The SANE will release all evidence to the investigating officer upon completion of exam. In the event the investigating officer is not at the SAC, the SANE will maintain chain of custody by putting the evidence in the locked evidence room. Signatures of the SANE and the detective on the chain-of-custody document will verify that the chain-of-custody has been maintained. SAC staff may transfer evidence from locked fridge directly to designated law enforcement personnel when SANE is not available. The SAC staff shall sign the evidence document where applicable.

When necessary, the SAC can use the appropriate shipping carrier to send the evidence to another County with their permission and appropriate documentation for chain of custody with proof of delivery.

## **General Policies and Procedures**

### **Informed Consent**

If a patient presents unconscious, unresponsive, intoxicated or under the influence, the SAC NWGA will request that the patient wait for an exam. This period can be up to 24 hours. A patient must be fully coherent and able to understand all options of a sexual assault exam, in order to provide consent for said exam.

If the patient presents to the ER and is given pain medicine that affects coherency, an exam may be put on hold. The only time an exam can be done while the patient is under the influence, is if the patient is a minor, or has a POA that can sign consent. If the patient is a minor, the caregiver or person with custody can sign consent. For individuals who suffer from disabilities, a POA can sign consent. In other cases, if an exam is medically necessary, (patient is on life support, or in a coma), the ER doctor may request a medically necessary exam to determine pelvic injuries. However, in these cases, if there is no POA or custodial parent/caregiver, evidence and information regarding the patient cannot be released to law enforcement without proper consent, unless patient is a minor under the age of 18.

### **Call-out Protocol**

The SAC Medical Director is a licensed physician who assists in overseeing the SANE and On-site Forensic/Medical Exam Programs. The SANE should communicate any problems, complications, or comments directly to the Advocate or Staff Backup. If a nurse requests that the SAC Medical Director be contacted for consultation, the Staff Backup needs to be informed of the circumstances, and the Staff Backup will contact the Medical Director.

The SAC should be called for all victims who have reported sexual assault. The SAC should be given to the opportunity to have immediate contact or conversation with a victim.

### **Medical Charts**

The SANE should review the file to make sure that all forms in the medical chart are complete and all signatures have been received. If any errors are noted, the SANE is expected to respond immediately to correct the errors, since changes in original paperwork necessitate amendments to documents submitted to law enforcement, labs, etc.

In documenting exam observations, the SANE should ensure that wording is complete and correctly depicts her observations. It is essential to cite what was observed and what was not observed with regard to certain interests.

Medical charts that are in question will be forwarded to the SAC Medical Director for review and subsequent case notations. Any case notes made by the Medical Director will provide second-level expert testimony, if necessary.

Upon request, the investigator may receive a copy of the medical chart following the exam. All other information will be released to the court upon request. Information may be released to other sources working with the survivor only with his/her consent. In cases where the survivor is a child, under the age of 18, information will be released to collateral agencies with the consent of the guardian per HIPPA guidelines for medical purposes.

All medical charts will be kept in a locked file cabinet in the SAC exam room and are subject to HIPPA laws. All client files will be kept in a locked file cabinet in the Victim Advocate's office and are subject to HIPPA laws.

**Case Evaluation**

All cases and medical charts are reviewed by the Executive Director on a daily basis. Medical charts are reviewed by the Medical Director on a monthly basis, or as problems arise. All cases are reviewed with the SAC staff on a weekly basis.

Cases will be reviewed with selected investigators on a quarterly basis to report outcomes for statistical purposes.

**Expert Testimony**

The SANE is expected to appear in court if she is called to testify on a specific case. Because of her training and experience, the SANE will likely be qualified to testify as an expert, rather than just a factual witness, in sexual assault cases. Upon receiving notification of an upcoming court appearance, the SANE should review the particular medical chart and her notes in order to prepare testimony.

**After-Care**

The Victim Advocate will continue to provide follow-up services to the survivor as long as he/she needs it. Survivors will be offered in office counseling, support groups, court accompaniment, police accompaniment for interviews and continued emotional support.

### **Berry Police Department**

For incidents of sexual assault, the Berry College Police Department will work with all appropriate agencies to provide assistance to the victim during the investigation of the incident. All incidents will be investigated in accordance with departmental policy.

The following guidelines will be followed by departmental personnel when responding to reports of sexual assault:

#### **Responding Officers**

- Upon receipt of the call, a patrol officer will be dispatched to the location of the victim. Responding officers will take appropriate action to ensure the safety of the victim and identify/secure the crime scene.
- The patrol supervisor will notify the on-call investigator and advise him/her of all known information
- The patrol officer will complete an initial report for the incident.

#### **Role of the Investigator**

- The on-call investigator will respond to the appropriate location and be responsible for the investigation in accordance with departmental policy.
- The on-call investigator will be responsible for notifying the on-call advocate with the SAC NWGA via the 24 crisis line.

### Floyd County Department of Family and Children Services

The Floyd County Department of Family and Children Services investigates reports of child abuse or neglect and provides services to protect the child and strengthen the family. DFCS is also responsible for welfare and employment support (SNAP, Medicaid and TANF) to low-income families, foster care services, finding foster and adoptive homes for abused and neglected children and other services to strengthen families.

For all serious and/or complex reports of abuse or neglect including sexual abuse, Floyd County DFCS conducts a joint investigation with law enforcement as outlined by the Floyd County Child Abuse Protocol.

#### Initial Response

1. Upon receiving a call of sexual abuse on a child under the age of 12, refer to the child abuse protocol, but note that if the abuse was within the past 72 hours, the SAC NWGA can perform a medical exam for the purpose of collecting evidence, sustaining injuries, and medically checking the child.
2. If the child is over the age of 12, the SAC NWGA should be called to provide services. There does not have to be penetration for the child to be seen. Depending on circumstances, there may be other evidence that can be collected, STI testing or treatment, and other services are available.
3. For children under the age of 12, all follow up calls, support services, counseling and support groups will be the responsibility of Harbor (if an interview was done) or that of DFCS. Unless requested by DFCS, the SAC NWGA will not provide these services for children under the age of 12.
4. For children over 12, the SAC NWGA will provide follow up calls, counseling services, support groups and other services as needed. The SAC NWGA will notify DFCS and Harbor House to make them aware of services provided so there is not duplication of services.

### Floyd County Prison

#### Prison Agrees to:

- Make involvement of certified rape crisis advocates a component of the standard response to a report of sexual abuse and/or a request for help from a survivor of sexual violence.
- Any time that an incident or allegation of sexual abuse is discovered or reported within 120 hours of the incident, FLOYD COUNTY PRISON, will call the SAC NWGA for a forensic medical exam, and allow victim to meet with a rape crisis advocate at the PRISON.
- If the incident occurred more than 120 hours prior to the report, the FLOYD COUNTY PRISON will ensure that the victim receives a medical evaluation and any needed treatment; a mental health evaluation and contact information for the SAC NWGA.
- Facilitate follow-up, whenever possible, between the inmate and a SAC NWGA advocate by mail or telephone while the inmate is detained by FLOYD COUNTY PRISON. FLOYD COUNTY PRISON will also provide SAC NWGA contact information to all inmates (who reported a sexual abuse case) upon release. This should be done without regard to the presence or status of an investigation.
- Provide inmates with confidential, 24-hour access to the SAC NWGA's rape crisis hotline, at no cost, through the inmate telephone system.
- Respect the confidential nature of communication between SAC NWGA advocates and clients detained at FLOYD COUNTY PRISON.
- Ensure that SAC NWGA advocates are cleared to enter the prison for meetings, training sessions, or to meet with the clients. Provide other logistical needs, such as a private meeting space for counseling sessions.
- Facilitate the placement of informational cards with instructions on how to access the SAC NWGA's crisis hotline in areas visible to inmates.
- Communicate any questions or concerns to the SAC NWGA staff.

#### Report of Sexual Assault:

1. The initial report is made via inmate, 3rd party, staff member or hotline – the report can be verbal or written.
2. The Security Director or designee takes the report, gathers additional information and contacts the PREA Director.
3. The LE official will determine and secure crime scene. If it is determined that a forensic exam is needed or that advocacy services are needed, the SAC NWGA on call staff will be notified by the Security Director or PREA Director.
4. Inmate will be placed in medical to wait for the SAC NWGA team to arrive.
5. Prison will follow protocol for attending to medical needs that will not interfere with the collection of evidence.

#### Facility

1. All exams will be done at the Floyd County Prison
2. SAC Staff and SANEs will complete the prison in-service training



**SANE**

1. The SAC NWGA on call SANE will arrive at the prison with the Advocate to provide services as outline in the SANE protocol.
2. The prison will provide an officer to stay in the medical suite during the duration of the exam.
3. Once exam is completed, evidence will be handed over to law enforcement within the prison.
4. Inmate will be given aftercare instructions and information on how to access the 24-hour crisis hotline should he need support services.

### Floyd County Sheriff's Office

#### Floyd County Sheriff's Office:

- Agrees to identify and refer victims of sexual assault to SAC for services.
- Agrees to maintain confidentiality of program participants the department is aware are receiving services at SAC.
- Agrees to communicate with mutual parties in agreement concerning a case when permission is provided by the victim or when under court order.
- Agrees to expedite providing victims and SAC staff with written documentation of the incident therefore enabling the victim to proceed with support services and other legal remedies.
- Agree to provide officer during exam for safety.
- Agrees to provide transportation of victim to the SAC for a forensic medical exam.

#### Report of Sexual Assault:

1. The initial report is made via inmate, 3rd party, staff member or hotline – the report can be verbal or written.
2. The Security Director or designee takes the report, gathers additional information and contacts the PREA Director.
3. The LE official will determine and secure crime scene. If it is determined that a forensic exam is needed or that advocacy services are needed, the SAC NWGA on call staff will be notified by the Security Director or PREA Director via the 24-hour hotline at 706-802-0580.
4. Inmate will be transported to the SAC NWGA.
5. Jail will follow protocol for attending to medical needs that will not interfere with the collection of evidence.
6. All exams will be done at SAC NWGA unless otherwise noted.
7. The SAC NWGA on call SANE will arrive at the SAC NWGA with the Advocate to provide services as outline in the SANE protocol.
8. The jail will provide a deputy to stay in the medical suite during the duration of the exam.
9. Once exam is completed, evidence will be handed over to the deputies who accompanied the inmate to the SAC NWGA.

### Floyd County Health Department

The recommendations in this report are limited to the identification, prevention, and treatment of sexually transmitted infections and conditions commonly identified in the management of such infections. The documentation of findings and collection of non-microbiologic specimens for forensic purpose and the management of physical and psychological trauma are NOT included.

BECAUSE WE DO NOT COLLECT FORENSIC EVIDENCE, ALL CLIENTS SHOULD BE ENCOURAGED TO BE SEEN AT THE SEXUAL ASSAULT CENTER OF NWGA.

Should a client come in for treatment, and has not been seen at the SAC NWGA, the Health Department should advise the client of his/her option for evidence collection and should call the on call advocate to come to the HD to discuss these options with the client.

#### Hours of Operation

Monday – Wednesday – 8:00 a.m. – 5:00 p.m.  
(12:00-1:00 Lunch-closed)

Thursday – 8:00 a.m. – 6:30 p.m.  
(12:00-12:30 Lunch-closed)

Friday – 8:00 a.m. – 2:00 p.m.  
No Lunch

This sexual assault protocol is not intended for forensic evidence. The SAC NWGA SANEs are trained to perform those exams. In many cases the SANE nurses will refer these victims to our health department after an initial exam. Usually, prophylactic treatment is given during the SANE visit.

If a client is referred from SAC NWGA for follow-up, please refer to those specific guidelines. For all others, please refer to "Recommendations for management of sexual assault victims self-referred to clinic"

1. A representative from the Sexual Assault Center will call or email the Nurse Manager prior to the visit.
2. There will be no charge for service or medications related to the STI screening, medications or emergency contraception protocols.
3. Clients may give pseudonyms and use the Sexual Assault Center address and telephone number if they desire.
4. The client is not a "Family Planner" and Family Planning Program Guidelines do not apply. The visit will be documented as a STI visit.
5. The Sexual Assault Center provides extensive counseling for victims. Do NOT ask for details of the incident or volunteer recommendations about reporting or pressing charges.
6. If an STI screening is desired, document the visit on an STI visit in the computer.
  - a. Do NOT attempt to get information about the "contact".
  - b. Do NOT counsel on "safe sex" at this visit.
  - c. Do instruct the client about taking any medications dispensed and about following up, if needed. Accept the client's need for anonymity and follow-up through the SAC NWGA.

**Recommendations for STD Management of Sexual Assault Victims**

**Self-Referred to Clinic:**

Clients are offered tests for Chlamydia, syphilis, gonorrhea, HIV, Hepatitis B, and trichomoniasis. Tests for other STD's are provided as indicated. Treatment is provided for any STI found at the time of the visit. The Hepatitis B vaccine series is offered. Post-exposure prophylaxis for HIV is considered. If HIV prophylaxis is needed, the client is referred to Aids Resource Center. Follow-up testing for HIV and syphilis is offered at the appropriate intervals if the initial test results are negative. This is a chargeable STD visit.

## Floyd County District Attorney's Office

### Introduction

A crime is a violation of an act prohibited by statute. A felony crime is a prohibited act which carries possible punishment of one year or more in the State Penitentiary. Under Georgia law, all felonies are in the jurisdiction of Superior Court and are prosecuted by the District Attorney's Office for the Circuit in which the crime was committed. The District Attorney's Office for the Floyd Judicial Circuit prosecutes cases in Floyd County.

It is the ultimate legal responsibility of the prosecutor to determine the disposition of any case, including sexual assault crimes. It is the policy of the District Attorney's Office of the Floyd Judicial Circuit to make such a determination after careful consideration of the feelings and position of the victim, victim's family members and the law enforcement investigator who has the primary responsibility for the investigation. While the majority of cases prosecuted by the District Attorney's Office of the Floyd Judicial Circuit are resolved with the agreement of the victim, such cannot always be the case. In any event, it is the policy of the District Attorney's Office to explain the reasons for disposition of cases to victims. This is especially important when the disposition is contrary to the victim's wishes. If, after hearing the reasons, a victim is not in agreement with the disposition of the criminal case, he or she always has the option of filing a civil suit against the perpetrator in which the victim will be the named party and can direct his or her private attorney as to how to proceed in that action.

### Victim's Rights

In 1995, the Georgia Legislature, at the urging of victims' groups and prosecutors, adopted the Crime Victims' Bill of Rights. The District Attorney's Office of the Floyd Judicial Circuit has continuously, since that time, up-dated the brochure provided to victims on the scene by local law enforcement agencies. This brochure outlines the victim's rights and provides contact information for area resources. The first requirement for a victim to exercise his or her rights is to be made aware of those rights.

Upon initial contact, one of the District Attorney's Victim Advocates attempts to coordinate an immediate face-to-face interview and advises the victim of his or her rights under O.C.G.A. § 17-17-1, et. seq. This meeting is generally held within two weeks of the incident whenever possible. As explained above, another copy of the victim rights form is given to the victim by the District Attorney's Victim Advocate when the victim comes in for the meeting, as well as a copy of a brochure explaining the criminal process in simple terms. The District Attorney's Victim Advocate also explains the availability of victim's compensation and is available to assist in completing the form, as well as contacting the Governor's Criminal Justice Coordinating Council division of Victim Compensation if needed. The District Attorney's Office files appeals of adverse decisions on Victim Compensation if the office believes that the denial was made in error. At the initial meeting, as well as subsequent meetings, the District Attorney's Victim Advocate makes reference to support services appropriate to the needs of the victim. An advocate from the Sexual Assault Center may accompany the victim to this meeting. Unless absolutely necessary for the prosecution of the case, this meeting is for introduction and comfort of the victim only. Our goal is to allow the victim the opportunity to ask questions of the prosecutor and become familiar with the team of individuals working on the case. An interview of the victim is only done at the time it becomes necessary for the prosecutor to hear from the victim directly in preparation

for the trial. Every effort is made to have this type of interview occur only once and as close to trial as possible to minimize the stress on the victim.

Whenever possible, the District Attorney's Office notifies the victim of any proceeding in which the release of the accused will be considered and offers the victim the opportunity to express his or her opinion on the release of the accused pending judicial disposition. If an accused is released on a pre-trial bond, a bond after conviction, or given a probated sentence, the District Attorney's Office requests of the Court to make "no contact with the victim, directly or indirectly," a condition of the release as well as any other necessary conditions of bond. The District Attorney's Office further notifies the victim of his or her right to notify the office if the accused violates the condition of release or if anyone else subjects them to threats or intimidation. Upon a victim's complaint of such and/or other evidence produced, the District Attorney's Office can take action to petition the Court to revoke bond or probation and/or bring criminal charges against such individual.

During any hearing or trial, the District Attorney's Victim Advocate makes all reasonable attempts, consistent with Court facilities, to ensure that the victim waits in an area separate from the accused, his or her friends and family.

Prior to disposition of the accuser's case, the prosecutor offers the victim the opportunity to express the victim's opinion on the disposition of the case, including plea or sentence negotiations and participation in pre-trial or post-trial diversion programs. The opportunity is given for both oral opinion and also in the form of a written Victim Impact Statement.

The District Attorney's Office notifies the victim of all hearing/court dates/post adjudication proceedings which can affect the custodial status or disposition of the case.

This is accomplished by both telephone contact and with written notice when possible. Victims are also notified of appellate/parole decisions and where possible, the prosecutor assists the victim in communicating with both the Department of Corrections and Parole Board. The prosecutor's office also assists the victim with enrolling in the 24 hours automated notification system operated by the Department of Corrections to notify the victim of any escapes from custody by the perpetrator.

#### General Procedures

After a suspect is arrested, the sheriff's department sends a copy of the warrant to the District Attorney. The District Attorney's Office for the Floyd Judicial Circuit primarily uses a vertical prosecution case-assignment system, so that the prosecutor initially assigned the case will follow it through until its conclusion in the office. However, various factors, including District Attorney turnover, legal/personal conflicts, complexity of the case, etc., may occasionally cause a change or addition to the prosecutor initially assigned the case. The latter situation is the exception, but it does occasionally happen. The ultimate assignment of prosecutors to a case is the responsibility of the elected District Attorney who has that legal obligation as part of his official duties.

In every case which appears to be able to be resolved only by trial, as opposed to some other disposition, the prosecutor and advocates make all reasonable efforts to visit the courtroom with the victim when there is no court action taking place in order to acclimate the victim to the courtroom and explain trial procedures in an attempt to raise the comfort level for the victim under admittedly unpleasant circumstances.

Each sexual assault victim is provided the name and phone number of the prosecutor and victim advocates assigned to his or her case, and the staff of the District Attorney's Office is always available to advise and consult with victims, from the date of the incident, to literally decades later when parole issues arise.

Every effort is made to have an advocate and an assistant district attorney present at any meeting with a victim of Sexual Assault. At no time, should a female victim of sexual assault be interviewed by a male advocate or assistant district attorney alone for the comfort of the victim.

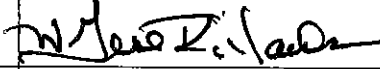




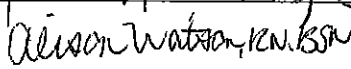

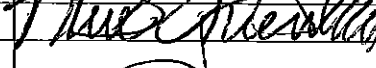


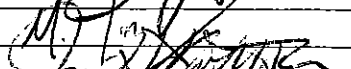
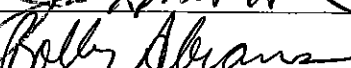
### SART Protocol Understanding and Agreement

The foregoing document reflects a cooperative effort on the part of social service, health and criminal justice organizations to continue to improve and refine their handling of adult victims of sexual violence in Floyd County.

The undersigned agency, department and judicial representatives commit themselves and their organizations to the implantation of the procedures as outlined in this protocol. It is understood that the adoption of this protocol is an ongoing process of cooperation and coordination to facilitate the effective handling of sexual assault cases in Floyd County in such a way as to minimize the trauma to the survivor, afford survivors timely opportunities to meet presenting and future needs, while simultaneously meeting the investigative needs of criminal justice organizations.

The signatories to this protocol are committed to continuing as interagency committee to periodically review and refine this interagency protocol for managing the community response to sexual in the Floyd Judicial Circuit. The committee will identify critical issues; needs and resources required to facilitate and enhance the handling of sexual assault in Floyd County and will meet at least semi-annually.

Adopted this 7<sup>th</sup> day of September, 2017

Name	Agency	Title	Signature
W. Gene Richardson	Floyd County Magistrate Court	Chief Magistrate Judge	
Kim Davis	Sexual Assault Center of NWGA	Executive Director	
Leigh Patterson	Floyd County District Attorney's Office	District Attorney	
Chief Bill Shiflett	Floyd County Police Department	Chief of Police	
Chief Denise McKinney	Rome City Police Department	Chief of Police	
Alison Watson	Floyd County Health Department	Director	
John Quinlivan	Redmond Regional Medical Center	CEO	
Kurt Stuenkel	Floyd Medical Center	CEO	
Lindsey Howerton	Floyd County Department of Family and Children Services	County Director	
Tim Burkhalter	Floyd County Sheriff's Office	Sheriff	
M Long	Floyd County Prison	Warden	
Jamey Vick	NWGA Medical	Medical Director	
Chief Bobby Abrams	Berry College Police Department	Chief of Police	