

# HOUSTON COUNTY GEORGIA



# SEXUAL ASSAULT RESPONSE PROTOCOL

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## **PURPOSE OCGA 15-24-2**

The purpose of this protocol is to establish guidelines for achieving a “best practices” response to criminal allegations of sexual assault or abuse upon persons aged 16 and older in Houston County. These guidelines are designed to ensure a cooperative and coordinated effort between trained personnel from city and county law enforcement agencies, Crisis Line & Safe House, Healthcare Professionals, Houston Hospitals, Inc. d/b/a Houston Healthcare, Robins Air Force Base, and the District Attorney’s Office, to achieve our shared mission. The Houston County Juvenile Division and the Department of Family and Children Services in compliance with the separate and established Houston County Child Abuse/Fatality Protocol will serve sexual assault victims under the age of 16.

Sexual assault for this protocol shall be defined as but not limited to Rape, Sodomy, Aggravated Sodomy, Sexual Battery, Aggravated Sexual Battery, Sexual Assault, Criminal Attempt to Commit Sexual Assault, or any other sexual assault.

## **MISSION STATEMENT**

A cooperative and coordinated Sexual Assault Response Team consisting of all participating disciplines seeks to reduce the ongoing trauma experienced by victims of sexual assault and abuse. Our mission is to maintain the wellbeing of an individual victim while gathering evidence to bring the responsible person(s) to justice.

### **Goals:**

- Provide a sensitive and caring response to victims of sexual assault by all disciplines.
- Ensure that victims are aware of their right to have a victim advocate present at interviews and during medical forensic exams.
- Aim for culturally competent responses to all people.
- Provide quality services regardless of social conditions, including but not limited to race, gender, sexual orientation, gender identity, disability, and age.
- Provide advocacy, forensic medical interviews, examinations, and counseling.
- Ensure that follow-up medical care is offered.
- Provide crisis intervention, advocacy, support and follow up counseling resources for primary and secondary victims.
- Ensure competent, coordinated, and effective services by all disciplines, including initial and ongoing training of team members.

- Maintain quality control through timely case reviews.

## **SEXUAL ASSAULT RESPONSE TEAM (SART)**

### **Structural Components**

A Sexual Assault Response Team is composed of a select group of multidisciplinary representatives from community agencies and systems involved in protecting victims, identifying offenders, and prosecuting crimes, specifically law enforcement, forensic nurse examiners, advocates, and the District Attorney's Office. A strong line of communication between team members is essential to the success of a SART, the welfare of the victim and the successful prosecution of the offender(s.)

### **Confidentiality**

The meetings and proceedings of a committee or subcommittee of the Houston Judicial Circuit Sexual Assault Response Team in the exercise of its duties shall be closed to the public and shall not be subject to open meetings.

Members of the SART and attendees shall not disclose any victim information that is discussed at any meeting except as is required by law. A confidentiality form will be part of the sign in sheet and will be signed by each person present at every meeting.

When meetings are held electronically, case numbers will be used instead of victim's names to maintain the confidentiality of the victim.

## **ISSUANCE AND DISTRIBUTION OF SART PROTOCOL**

1. The Sexual Assault Response Team shall have the responsibility of developing, approving, and implementing the Adult/Adolescent Sexual Assault Response Team Protocol.
2. The Sexual Assault Response Team will review this protocol annually or at the request of any participating agency.
3. The protocol shall be made available to members of the Sexual Assault Response Team and all participating agencies.
4. To encourage active compliance with the protocol, participating agencies shall be charged with distributing the protocol to appropriate staff and training personnel.
5. The protocol committee shall submit a certification of annual compliance to the Criminal Justice Coordinating Council by December 31 of each year.

# **THE SEXUAL ASSAULT RESPONSE TEAM PROTOCOL**

## **Overview**

Sexual assault and sexual abuse cases may be complex and difficult to substantiate legally. Typically, there are few if any physical findings, no eyewitnesses, or other forms of corroborating evidence to substantiate the victim's report. To provide the best possible environment for forensic evidence collection, interagency coordination and planning is crucial. A cooperative team response is an effective way to prevent re-traumatization of victims. Utilizing the SART method will allow the highest likelihood of maintaining the wellbeing of victims and bringing perpetrators to justice. General referral criteria for initiating the SART process includes:

1. The report of sexual assault or abuse occurring within Houston County.
2. The report of sexual assault or abuse occurring outside Houston County, or in an unknown jurisdiction, for which a courtesy report may be accommodated and for which collection of perishable evidence may be accomplished.

## **INITIAL CONTACT AND ASSESSMENT**

Initial contact with the SART may be in a variety of ways. Law enforcement, Crisis Line & Safe House and hospital personnel are the most likely points of contact for initiating the SART process. An ideal response includes:

1. A brief initial interview by the first responder.
2. A forensic medical examination performed by a trained forensic examiner.
3. An in-depth interview to minimize the number of times a victim must recount the assault.
4. Ensuring the victim's questions and concerns are addressed.

## **TEAM MEMBER ROLES AND AREAS OF RESPONSIBILITY**

The participating agencies and their representatives have varying roles and responsibilities during the investigation and justice system involvement. Participating agencies work together to minimize ongoing trauma to the victim while ensuring the highest likelihood of achieving justice.

## **LAW ENFORCEMENT ROLE AND RESPONSIBILITIES**

Law enforcement's overall role in responding to a sexual assault complaint is to:

1. Conduct a comprehensive investigation relating to the complaint, gather evidence needed for a successful prosecution, and apprehend the suspected assailant.
2. Protect the victim and support them by linking them to the appropriate community resources.

## **THE ROLE OF THE FIRST RESPONDING LAW ENFORCEMENT**

Law enforcement will be dispatched to the scene of a sexual assault complaint. Law enforcement will obtain the initial information about the assault and provide reasonable safety and aid to the victim. The first responding law enforcement officers will conduct a preliminary investigation to determine circumstances of the incident, suspect(s), location of evidence, and secure a reported crime scene. If the victim is not at the hospital, contact the Crisis Line & Safe House Sexual Assault Center to determine if the victim is a candidate to go directly to the Sexual Assault Center bypassing the emergency department. If the victim requires emergency medical care, ensure the victim is provided transport to the hospital of their choice for a physical examination to be performed and necessary medical treatment provided. A supervisor should be contacted and briefed by the responding officer.

The supervisor or designee will evaluate the complaint and determine if the investigation requires an immediate response by a detective/investigator or a crime scene investigator. If so, a detective/investigator will respond and assume responsibility for the investigation. If the investigation does not require an immediate response by a detective/investigator, the responding officer or another officer directed by a supervisor will take possession of any evidence collected by medical personnel and file the initial report. This evidence should be transported to the law enforcement agency having jurisdiction and secured as evidence. If a detective/investigator or crime scene investigator does not respond, the first responding law enforcement officer working with their supervisor should ensure that any identified crime scene is adequately processed for evidence.

To accomplish these tasks the first responding law enforcement officer(s) will adhere to the following guidelines:

1. Meet with the reported victim and provide support, and reasonable safety.
2. Assess the victim for medical needs and any other immediate needs.
3. Assess the victim for special needs – child, translator, disabled, etc.
4. Using sensitivity and non-judgmental questions, conduct a brief initial interview of the victim to gather information on the circumstances leading up to the crime, during the crime and after the crime. This determines if the elements of a sexual assault are met.
5. If a recording device is used, to include a body camera, the victim will be advised they are being recorded.
6. Provide the victim with contact information for the investigating agency and the assigned case number for the incident and let the victim know when contact will be made next.
7. Assess crime scene for need of backup and/or detective call out and/or crime scene unit call out.
8. Secure any identified crime scene to preserve its integrity for evidence collection.
9. Determine identity and location of suspect(s).

10. Arrest suspect(s), if appropriate.
11. A suspect exam will need to be completed as soon as possible to obtain physical evidence from the suspect's body. Evidence collection may be conducted via consent by the suspect or by a search warrant.
12. Identify any available witnesses who have information in relation to the incident and conduct documented interview(s).
13. If the victim is not at the hospital, contact the Crisis Line & Safe House Sexual Assault Center to determine if the victim is a candidate to go directly to the Sexual Assault Center, bypassing the emergency department. If the victim requires emergency medical care, ensure the victim is provided transport to the hospital of their choice for a physical examination to be performed and necessary medical treatment provided.
14. Meet with the forensic nurse examiner, if possible, prior to any physical examination of the victim and brief them on the details of the incident.
15. Meet with forensic nurse examiner after the forensic examination of the victim and receive any physical evidence from them relating to the examination and secure it as evidence.

### **THE ROLE OF THE RESPONDING DETECTIVE/INVESTIGATOR**

If the decision is made by the patrol supervisor to have the detective/investigator respond to the scene, the detective/investigator will respond to the appropriate location and begin a thorough investigation of the complaint. To accomplish this task the responding detective/investigator should adhere to the following guidelines:

1. On arrival, meet with the supervisor/responding officer to be briefed.
2. Unless it is imperative to continue the investigation, or the victim requests an immediate interview, the victim should have the opportunity to rest after the sexual assault examination as opposed to having to come immediately to the law enforcement agency for an interview or to provide a written statement. If a recording device is used at any interview the detective/investigator will tell the victim that such a device is being used.
3. Provide the victim with contact information of the investigating agency and the investigating officer.
4. Inform the victim of the criminal investigation procedure.
5. Inform the victim of options related to participating with law enforcement in the criminal investigation, making sure the victim is aware evidence can be collected and held for a minimum of 12 months even if he/she chooses not to move forward with the investigative process. It is important to also explain to the victim, if he/she chooses to participate with law enforcement, of the need to collect physical evidence, arrange a prompt interview, and hand over relevant articles, objects, clothing, etc.

6. Demonstrating sensitivity and using non-judgmental language, inform the victim of the need to ask direct and detailed questions concerning the incident.
7. Determine if a crime has occurred.
8. Evaluate the evidence.
9. Interview any witnesses having information relating to the incident and document their statements.
10. Complete a thorough crime scene investigation and collect evidence relating to the incident.
11. Obtain search warrants, arrest warrants, and arrest the suspect when appropriate.
12. Interview the suspect, complete suspect exam, and document any statements, admissions, or confessions.
13. Review victim information and conduct a follow-up interview of the victim, documenting their statement(s) related to the incident. The detective/investigator should inform the victim they have a right to have an advocate present for any follow-up interviews and if they request an advocate, shall notify the appropriate agency to dispatch a representative to the site of the interview. The detective/investigator shall wait a reasonable amount of time, not to exceed one half hour, for the advocate to arrive before beginning the interview. The detective/investigator shall reserve the right to exclude an advocate from the interview in the event the victim becomes a suspect in a crime, the environment is not safe for the representative, or the victim requests an advocate no longer be present."
14. The follow up interview(s) should be recorded with either an audio or video device and the victim should be made aware of the recording device prior to initiating the interview.
15. When the sexual assault examination begins, the detective/investigator should continue the investigation and not remain with the victim unless requested to do so by medical personnel or the situation warrants their presence, such as after business hours. When the examination is completed, the forensic nurse examiner or other medical personnel will contact the Houston County 911 Center and the detective/investigator, or their designee will return to collect any evidence from them and obtain a briefing from the forensic nurse examiner or other medical personnel concerning the results of the physical examination. If the detective/investigator is unavailable, a law enforcement officer will be dispatched to the Sexual Assault Center or hospital to secure the evidence and obtain the briefing.
16. The detective/investigator should maintain contact with the victim and advocate.
17. Assist and consult the Houston County District Attorney's Office as needed on filing charges and prosecuting the crime.
18. If an investigation of a sexual assault reveals the identity of a suspect and the victim elects not to pursue an investigation or prosecution or for some reason charges cannot be filed against the suspect, the case file and/or investigative report may be forwarded to the Houston County District Attorney's Office for review.

## **LAW ENFORCEMENT ROLE IN COLLECTION OF EVIDENCE FROM A CRIME SCENE**

Investigating officers of a reported sexual assault should determine and locate the crime scene of the incident, if possible and conduct a comprehensive and thorough crime scene investigation by using the following guidelines:

1. Crime scenes should be photographed before any evidence is removed. Attention should be paid to areas that appear to be disturbed or unusual.
2. Any physical evidence that may implicate the suspect should be seized. Such items of evidence include, but are not limited to fingerprints, objects, and materials that potentially contain body fluids such as used condoms, bedding and towels, victim's clothing, suspect's clothing, and fluids.
3. Note any evidence of alcohol and/or drug consumption whenever drug facilitated sexual assault is suspected.
4. In the event a suspect is identified, a suspect exam will need to be completed as soon as possible to obtain physical evidence from the suspect's body. Evidence collection may be conducted via consent by the suspect or by a search warrant.

### **PRESERVATION OF EVIDENCE**

When a forensic medical examination is performed, evidence is collected, and the victim wishes to proceed with a criminal justice response by reporting the sexual assault to law enforcement, the evidence shall be submitted to the Division of Forensic Sciences of the Georgia Bureau of Investigation pursuant to O.C.G.A. 35-1-2 within 30 days of it being collected.

Pursuant to O.C.G.A. 17-5-71, in cases in which the victim reports an alleged sexual assault to law enforcement, the state or local investigating law enforcement agency shall maintain any physical evidence collected as a result of an alleged sexual assault that contains biological material, including, but not limited to, stains, fluids, or hair samples that relate to the identity of the perpetrator of an alleged sexual assault, for 30 years from the date of arrest, or seven years from completion of sentence, whichever occurs last, and if no arrests, then for 50 years.

If the victim does not participate with law enforcement in the investigation or prosecution of a reported sexual assault, the investigating law enforcement agency shall maintain any physical evidence collected as a result of such reported sexual assault that contains biological material, including, but not limited to, stains, fluids, or hair samples that relate to the identity of the perpetrator of the reported sexual assault, for not less than 12 months from the date any such physical evidence is collected and 10 years for Office of Special Investigation (OSI).

Departmental policy may require evidence be held for a longer period than required by Georgia law.



## **Sexual Assault Kit Tracking System (O.C.G.A. 17-5-74)**

As part of The Sexual Assault Reform Act of 2021, a sexual assault kit tracking system (SAKTS) has been developed for the state through a partnership between the Criminal Justice Coordinating Council (CJCC) and the Georgia Bureau of Investigation (GBI). The reform act requires all medical facilities, state, county and city agencies, and persons that handle, process or store sexual assault kits (SAKs) to be registered users and be utilizing the system by July 1, 2022. The goal of SAKTS implementation is aimed at preventing sexual assault kit backlogs and will also allow survivors to track the status of their kit as it moves through the criminal justice system. Kits are identified and moved through the system via a unique kit number. Each agency will comply with The Sexual Assault Reform Act of 2021.

### **MUTUAL AID**

In the event a victim presents to Crisis Line & Safe House and/or a local hospital and evidence is collected, and for unforeseen reasons the agency with jurisdiction is unable to retrieve the evidence in a reasonable amount of time, the local law enforcement agency will accept the evidence into custody and hold it until arrangements can be made to transfer it to the agency with jurisdiction. It is the responsibility of the agency with jurisdiction to contact the local agency to arrange pickup. This is only to be used in rare incidences when the jurisdiction is unable to respond in an appropriate time due to distance or unavailability of personnel.

### **COSTS FOR MEDICAL EXAMINATION AND RETRIEVAL OF PHYSICAL EVIDENCE**

Pursuant to O.C.G.A 17-5-72 a victim shall have the right to have a forensic medical examination regardless of whether the victim participates in the criminal justice system or cooperates with law enforcement in pursuing prosecution of the underlying crime. A victim shall not be required to pay, directly or indirectly, for the cost of a forensic medical examination. The cost of a forensic medical examination shall be paid by the Georgia Crime Victims Emergency Fund, as provided for in Chapter 15 of this title.

### **LAW ENFORCEMENT'S ROLE WITH RELUCTANT VICTIMS**

A victim may want to make law enforcement aware of the assault, but not participate with an investigation. In the event a victim declines to participate with an investigation or request that no report be filed or investigation to take place, law enforcement personnel should refer the victim to Crisis Line & Safe House (478-745-9292) or the Robins Air Force Base Sexual Assault Prevention and Assault Program (RAFB

SAPR) (478-327-7272) to discuss their options. Crisis Line & Safe House and/or SAPR Office will offer support, information, and other services, including local, state, and national referrals.

If a report is made and the victim declines participation with law enforcement, and injuries that require immediate attention are present, the victim should be encouraged to seek medical attention at a health care facility. If injuries are not present, law enforcement should contact the Crisis Line & Safe House Sexual Assault Center to arrange for the victim to receive services if the victim so desires. The officer should explain that there might be a need for prophylactic treatment for sexually transmitted infections or for the prevention of pregnancy. The victim should also be informed that evidence can be collected and held for a minimum of one year by civilian law enforcement or five years if being maintained by OSI even though the victim declines to participate with law enforcement.

## **DEPARTMENT OF DEFENSE (DoD) SEXUAL ASSAULT REPORTING OPTIONS**

Under DoD's Sexual Assault Prevention and Response (SAPR) Policy, there are two reporting options – restricted reporting and unrestricted reporting. Restricted reporting is available to active-duty military, military dependents 18 years of age and older, Air Force Reserve and Air National Guard members in Title 10 status. Air Force civilian employees are also eligible. Retired members of any component are not eligible.

### **Restricted Reporting**

The Department of Defense has directed the implementation of confidentiality in the form of a restricted reporting option that enables a report of allegations of sexual assault to specified personnel, without triggering an investigation. This reporting option gives the individual access to medical care, counseling and a victim advocate but does not initiate the investigative process. The Department of Defense and the Air Force are committed to ensuring that victims of sexual assault are protected, treated with dignity and respect, and provided support.

While the military makes every effort to treat victims with dignity and respect, and to maintain their privacy to the maximum extent of the law, requiring individuals to report sexual assault allegations to command and law enforcement to obtain victim care services may cause some individuals to elect not to report and consequently forgo assistance and care.

### **Assaults that occurred off Robins Air Force Base**

In the event the sexual assault took place off of Robins Air Force Base in Houston County Georgia and the victim is military personnel of the Armed Forces or the Coast Guard or their dependent, defined as an

unmarried biological child, step-children and adopted children, until age 21 or 23 if in college or a spouse, when attached to the Department of Defense and requests a restricted report, the forensic nurse examiner or health care professional aiding the victim should notify, on or before the next business day, the law enforcement agency having jurisdiction and inform them that a qualifying military member or their dependent has filed such a report and provide the law enforcement agency with basic details such as a general location and date and time of incident, offering no identifying information and note that no prosecution or investigation is desired. The responding law enforcement personnel should note in the report or investigative report the reason(s) why the victim elected not to cooperate with the investigation, and no identifying information concerning the victim will be recorded in the report. The forensic nurse examiner or health care professional aiding the victim should with the victim's permission notify the on call RAFB SAPR representative and brief them on the report being made. If the victim requests to not have RAFB SAPR notified, a Crisis Line & Safe House advocate will be offered to the victim. The SAPR office will be contacted by the forensic nurse if not already done by another agency, and non-personal information (date and time of assault only) will be given to the SAPR Office, and a restricted reporting case number (RRCN) will be obtained from the SAPR Office to be attached to the kit and/or the medical forensic record in the event a kit is collected. If the victim consents to or requests that a sexual assault examination be completed, and physical evidence is collected, a law enforcement officer of the law enforcement agency having jurisdiction will take possession of the evidence and secure it for a minimum of one year until it can be fully determined no prosecution or investigative process is desired by the victim. No law enforcement agency will release the obtained information pursuant to Georgia law.

#### **Assaults that occurred on Robins Air Force Base**

The Office of Special Investigations will be notified by the forensic nurse that they have a victim who has requested restricted reporting and only information that is requested by OSI will be given. The forensic nurse will follow the same procedure for contacting the SAPR Office, using non-identifying information on the evidence as with the "Assaults that occurred off Robins Air Force Base" in this section.

#### **Maintaining Safety**

In the event there is concern for the safety of the victim or another person; for example, multiple reports involving the same alleged offender (repeat offender), the offender is known to the victim and a weapon was used and no arrest has been made, and/or strangulation was part of the assault, the forensic nurse shall authorize disclosure of a restricted report and notify the law enforcement agency with jurisdiction.

## **Unrestricted Reporting**

Unrestricted reporting is also an option. During the unrestricted option, the member's chain of command is notified by the SAPR Office or OSI, an OSI and/or local law enforcement investigation is conducted, and services including, but not limited to, Medical, Chaplain, and Special Victims Counsel (SVC) are available.

## **CRISIS LINE & SAFE HOUSE'S (CL&SH) SEXUAL ASSAULT CENTER (SAC)**

The Crisis Line & Safe House Sexual Assault Center will be the designated place for sexual assault patients to receive an assessment of injury, evidence collection and prophylactic treatments with advocacy accompaniment. All forensic nurses who are employed as Sexual Assault Nurse Examiners (SANE) have completed a 40-hour SANE Adult/Adolescent didactic training and completed clinical hours to reach proficiency in the care of the adult/adolescent sexual assault patient. In the event the victim presents to the emergency department or contacts law enforcement, the Crisis Line & Safe House will be notified prior to sending the victim to the Sexual Assault Center by calling 478-745-9292. The forensic nurse will make the determination if the patient is medically stable and can be sent to the Sexual Assault Center. In the event the victim is not medically stable, and the forensic nurse is credentialed at the requesting hospital, a forensic nurse will report to the hospital where the victim is located and complete the medical assessment and collection of evidence at the hospital. In the event the victim is at a medical facility where the forensic nurses are not credentialed to enter, the emergency department staff will be responsible for completing the forensic medical examination.

### **Role and Responsibilities:**

The role of the forensic nurse is to conduct quality forensic medical sexual assault examinations and, with the consent of the victim, provide exam findings to the law enforcement agency with jurisdiction.

### **Patient Consent:**

Consent for medical treatment is not the same as consent for evidence collection. O.C.G.A. 31-9-2 specifies who can consent for medical treatment. Evidence collection and releasing evidence to law enforcement can only be consented to by the patient or, if a minor, the minor's legal guardian. A guardian for an adult person is appointed by the court to make decisions on behalf of someone else.

### **Declining the Collection of Evidence:**

All victims, regardless of age, have the right to have evidence collected and to decline all or part of an examination for evidence collection. Consent for evidence collection, once given, can be withdrawn at any time during the examination. Patients have the right to decline the collection of reference specimens, such as pubic and head hair, blood and/or saliva for typing, and blood or urine for toxicology.

**Patients Lacking the Capacity to Consent:**

If the patient lacks decision making capacity to give informed consent and has no legal guardian, evidence that may be destroyed due to medical care or time may be collected, and held by Crisis Line & Safe House. Chain of custody will be maintained while the victim gains the capacity to consent, a guardian is appointed, or a court order is obtained by law enforcement to release the evidence. Evidence will not be turned over to law enforcement without the permission of the patient or without a court order.

If the patient is a minor, under the age of 18, the informed consent to perform a sexual assault examination shall be obtained from a parent or legal guardian. In the event a parent or legal guardian is unavailable and is not expected to be available in a reasonable amount of time, dependent on type of assault, a court order will be required to release evidence to law enforcement. With the patient's assent and understanding of procedures, evidence can be collected and held by Crisis Line & Safe House maintaining chain of custody while a parent or guardian is reached, and consent is given or until a court order is obtained.

## **FORENSIC MEDICAL EXAMINATION PROCEDURE**

The forensic nurse examiner (FNE) will:

1. Meet the victim at the Sexual Assault Center or the hospital.
2. Verify that the advocate has been notified.
3. Obtain patient consent for the forensic medical exam.
4. Obtain patient's account of occurrence. This may be done through a joint or coordinated interview with the law enforcement officer and advocate. Explain audio/video-taping procedure to the victim if used.
5. Conduct physical assessment.
6. Collect evidence as warranted.
7. Offer and provide medication for prophylactic treatment of certain sexually transmitted diseases.
8. Offer and provide medications for prevention of pregnancy.
9. If the victim is seen in the emergency department, evaluate for continued care and treatment including reporting to the physician and victim's nurse any findings from the exam.
10. Photographs taken by FNEs will be maintained at the Sexual Assault Center with the original chart. Law enforcement will take possession of the sexual assault kit and any other evidence (e.g., clothing, shoes etc.).

## **SUSPECT EXAM**

The examination and evidence collection from the suspect are both an important part of making sure evidence in sexual assault cases is comprehensive and complete. Any evidence that could be transferred from the suspect to the victim may also be transferred from the victim to the suspect. In the event a suspect is identified, a suspect exam will need to be completed as soon as possible to obtain physical evidence from the suspect's body. Evidence collection may be conducted by consent by the suspect or by a search

warrant. At a minimum, the person collecting evidence should be prepared to collect buccal swabs, 25 pulled head hairs, vaginal swabs, penile swabs, scrotal swabs, combed pubic hair, matted hair cuttings, 25 pulled pubic hairs and fingernail scrapings and/or fingertip swabbing. Law enforcement will determine if the clothing or other material on the suspect needs to be collected. All collected evidence will be turned over to the law enforcement officer and secured as evidence.

Any cost incurred related to a suspect exam and evidence collection will be the responsibility of the requesting agency. All evidence collection performed on active-duty members will be funded by the line installation commander.

## **VICTIM ADVOCATE ROLE AND RESPONSIBILITIES**

### **Role of the Victim Advocate (the advocate):**

The advocate's primary role is to provide information, support, accompaniment, advocacy and follow up support services which assure continuity of care to direct and indirect victims of sexual assault and abuse, from the first contact to case closure. These services are provided 24/7/365.

The advocate's responsibilities include assuring the victim's legal rights to have an advocate present at the Sexual Assault Center/hospital for any medical evidentiary or physical examination and have an advocate present at any law enforcement interview.

When a victim is uncertain whether to report a crime, the advocate's role is to provide accurate, relevant, and requested information likely to aid in restoring the victim's sense of control and personal dignity.

Recognizing the profound effects of sexual assault and abuse traumas, a core role of the advocate is to provide referrals for counseling and support services to those who report crimes as well as those who decide not to report. Crisis Line & Safe House advocate(s) and RAFB SAPR Office provide crisis intervention and follow up services after the event as well as referral information for other community resources to support the recovery and well-being of survivors.

### **Role of the Advocate when at the Sexual Assault Center/Hospital:**

1. Responds, when notified, to the Sexual Assault Center/medical facility.
2. Explains victim's rights, responsibilities and relevant laws that may be pertinent to his/her concerns.
3. Accompanies the victim during medical/forensic exams and law enforcement interviews unless declined by the victim.
4. A victim may choose to have an advocate with him/her in one or all law enforcement interviews, legal interviews or medical exams. At the request of the victim, the advocate may be at the site

primarily for support of family, friends, or other support persons. If the victim declines to have an advocate present, the advocate offers information about available services, including referrals to other pertinent resources and remains onsite until the victim is discharged. The detective/investigator shall reserve the right to exclude an advocate from the interview in the event a victim becomes a suspect in a crime, the environment is not safe for the advocate, or the victim requests that an advocate no longer be present.

**Role of the Advocate in Law Enforcement Interview:**

1. Respond to the interview location within 30 minutes of notification. (Law enforcement should call Crisis Line & Safe House (478-745-9292) or RAFB SAPR Office (478-327-7272) as soon as they know an advocate is needed.
2. Provide advocacy and support during the interview process.
3. When/if the detective/investigator feels the need to shift the interview to suspect status, the investigator will inform the advocate in private. The advocate will then leave the interview.

## **DEPARTMENT OF PUBLIC HEALTH**

**Role of the County Health Department:**

The primary role of the County Health Department is to serve as a referral source following a forensic medical examination and as a service provider for victims of sexual assault.

A victim of sexual assault who presents to a County Health Department will be provided information and support. Crisis Line & Safe House's Sexual Assault Center (478-745-9292) may be contacted for direction related to the initial care of the sexual assault patient. The law enforcement agency with jurisdiction will be notified if the victim does not request restricted reporting in accordance with the guidelines set forth by the DOD. See DEPARTMENT OF DEFENSE (DoD) SEXUAL ASSAULT REPORTING OPTIONS section of this Protocol for guidance. Department of Family and Children Services (DFACS) will be notified when appropriate for minors.

If a victim is referred to the County Health Department for follow-up after receiving a forensic exam or, after evaluation at a health care facility, the Health Department Registered Nurse (RN) or Advanced Practice Registered Nurse (APRN) will perform a needs assessment. This will include providing information and education, as well as services such as emergency contraception, testing and/or treatment of sexually transmitted infections, and counseling for appropriate follow-up testing if recommended. Referrals may be made at that time to other health care providers as deemed necessary. Patients will be informed of all services and resources available.

## **DISTRICT ATTORNEY ROLE AND RESPONSIBILITIES**

### **Role of the District Attorney/Assistant District Attorney:**

It is the role of the District Attorney's Office to prosecute criminal violations of the law in the courts of Houston County. Cases are referred by the law enforcement agency in whose jurisdiction the crime occurred. The District Attorney or Assistant District Attorney (DA/ADA) reviews the report and decides whether to proceed with criminal prosecution. It is the role of the District Attorney's Office to prosecute the case in conformance with Georgia Law and policy and procedures of the Houston County District Attorney's Office, and to attempt to secure an outcome which is equitable and just for the defendant, the victim, and the community, considering the circumstances of the offense and the defendant's criminal background. The District Attorney's Office will make every effort to meet with law enforcement personnel, medical personnel, and other witnesses prior to the day of trial to prepare for trial. Additionally, the DA shall argue against bond for a defendant if they do not meet the factors for bond under the statute. If the Defendant is a candidate for bond, the DA shall whenever possible, ask for safeguards that will protect the victim and the community, including but not limited to leg monitor, house arrest, or restriction from going near the victim.

### **Responsibilities of the District Attorney/Assistant District Attorney:**

**Vertical Prosecution:** The Houston County District Attorney's Office will utilize "vertical prosecution" in the handling of sexual assault offenses, whereby attorneys who are specially trained in the prosecution of these cases will attempt to keep the case from inception to completion to reduce trauma to the victim.

### **Victim Contact:**

**Privacy:** The District Attorney's Office will make every effort to protect the privacy of the victim when requested. Whenever photos of the victim's intimate body parts are taken during a physical exam in relation to a criminal case and are required to be disclosed to defense counsel pursuant to the State's discovery obligations or such disclosure is ordered by the Court, the District Attorney's Office will make said photos available for inspection by the defense attorney and or defense expert witness. Said inspection will occur in the District Attorney's Office and the Assistant District Attorney prosecuting the case will make all reasonable efforts to limit the copying and dissemination of said photos.

### **Victim's rights:**

The DA/ADA will be knowledgeable of, and advise the sexual assault victim of his/her rights, including but not limited to:

- The right to confer with the DA/ADA about the case disposition.
- The right to be heard at sentencing.



- The right to receive restitution.
- The right to have a sexual assault advocate present for any interview.

**Familiarity with victim:**

The DA/ADA will ascertain the victim's concerns and wishes and consider them throughout the process. The District Attorney's Office must keep in frequent contact with the victims and keep them advised of the progress of the case. Should dismissal of charges be required at any point, the prosecutor will discuss the dismissal with the law enforcement detective/investigator assigned to the case of plans for dismissal of the charges prior to advising the victim.

**Defense access to victim:**

The DA/ADA shall advise the victim that they are not required to talk with anyone about the case, including the defense attorney and/or the private investigator for the defense. The victim should also be advised that should they wish to speak to someone about the case, the DA/ADA or their investigating officer will be present at the victim's requests.

**Victim's attendance in court:**

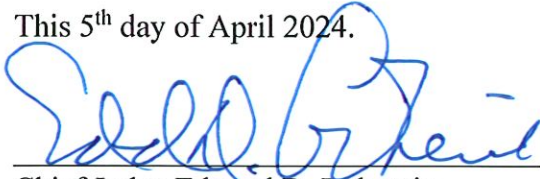
A victim's required presence in court should be scheduled to avoid unnecessary waiting. Arrangements should be made to avoid contact between the victim and the defendant or any defense witnesses. Additionally, the victim should be advised of their right to have support person(s) accompany them.

**Trauma Informed Care**

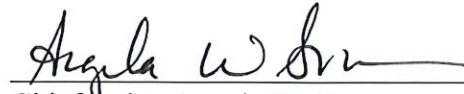
The Houston County Sexual Assault Response Team is committed to the mission of being trauma informed and to promoting trauma informed care principles in our community. We realize that many people experience trauma in their lives either through an event or from secondary trauma and it can come in many forms that impact the way a victim will respond to future traumas. We recognize that traumatic experiences scare, overwhelm, and violate the individual which makes the process of reporting a crime, having a forensic medical exam, and going through the judicial system very overwhelming. We are committed to not causing re-victimization but instead to restore a sense of power, safety, and self-worth to all victims by being trauma informed.

By our signatures, we pledge our commitment to these established guidelines for achieving a “best practices” response to criminal allegations of sexual assault or abuse upon persons aged 16 and older in Houston County and our commitment to abide by the terms of this protocol.

This 5<sup>th</sup> day of April 2024.



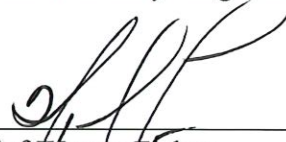
Chief Judge Edward D. Lukemire  
Houston County Superior Court



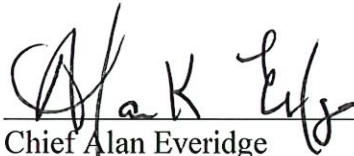
Chief Judge Angela W. Sammons  
Houston County Magistrate Court



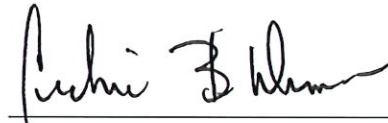
Sheriff Cullen Talton  
Houston County Sheriff's Office



Chief Wayne Fisher  
Warner Robins Police Department



Chief Alan Everidge  
Perry Police Department



Chief Cedric B. Duncan  
Centerville Police Department



SA Antwane Thomas  
OSI Detachment 105



William M. Kendall  
District Attorney, Houston County



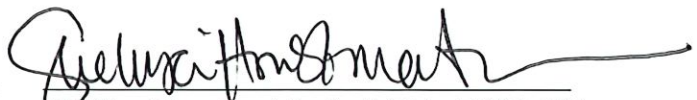
Denise Atkinson, BSN, RN, SANE-A  
Crisis Line & Safe House



Jamie Bormann Deputy Director  
Crisis Line & Safe House



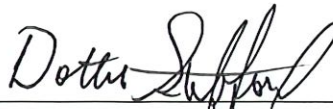
Christina Sikes, RN  
Houston County Health Department  
Assistant Nurse Manager



Shellisa Houston-Martin MBA, MSN, RN-BC  
Houston Healthcare Vice President, COO



Sergio Rios, Col, USAF  
Vice Commander, 78 Air Base Wing



Dottie Stafford  
Citizen