

SEXUAL ASSAULT PROTOCOL FOR LUMPKIN AND WHITE COUNTIES

IN THE SUPERIOR COURT OF ENOTAH JUDICIAL CIRCUIT

Completed Protocol for 2023

WHEREAS, the Legislature of the State of Georgia enacted O.C.G.A. Section 15-24-2 requiring the establishment of a Sexual Assault Protocol; and

WHEREAS, the undersigned established a Sexual Assault Protocol Committee pursuant to O.C.G.A § 15-24-2; and

WHEREAS, the Committee has met on November 6, 2023 and discussed the Protocol, which was approved by a majority vote and which is attached hereto, as the protocol for cases of sexual assault in Lumpkin and White counties of the Enotah Judicial Circuit, Ninth District of the State of Georgia.

NOW THEREFORE IT IS HEREBY ORDERED, this document is accepted by the Court as the protocol to be used in responding to, investigating and prosecuting cases arising from an alleged sexual assault and shall be spread upon the minutes and filed with the Clerk of the Superior Court of Lumpkin County and White County.

SO ORDERED, this tenth day of November, 2023

LUMPKIN AND WHITE COUNTIES SEXUAL ASSAULT PROTOCOL

This Lumpkin and White Counties Sexual Assault Protocol (“Protocol”) is adopted pursuant to O.C.G.A § 15-24-2 for the purpose of outlining the procedures to be used in responding to, investigating and prosecuting cases of sexual assault. The purpose of this Protocol shall be to ensure coordination and cooperation between all agencies involved in sexual assault cases so as to increase the efficiency of all agencies handling such cases and to minimize the stress created for the alleged sexual assault victim by the legal and investigatory process¹.

¹ O.C.G.A. § 15-24-2; provided, however that a failure by an agency to follow the protocol shall not constitute an affirmative or other defense to prosecution of a sexual assault, preclude the admissibility of evidence, nor shall a failure by an agency to follow the protocol give rise to a civil cause of action.

The mission of the Lumpkin and White Counties Sexual Assault Response Team (SART) is to ensure coordination and cooperation between all agencies involved in sexual assault cases, provide victim-centered trauma-informed response to victims, and to minimize stress for the sexual assault victim through the legal, medical and investigatory process.

For purposes of this Protocol, the term **victim** shall refer to victims age 18 and older. Every sexual assault case involving victims under 18 shall refer to the Lumpkin County Child Abuse Protocol or White County Child Abuse Protocol in identifying appropriate services and resources. Per the state model Child Abuse protocol, those services and resources should include the South Enotah Child Advocacy Center and Rape Response in providing services to adolescents in acute cases. Re under the age of 18, DFACS and/or law enforcement shall be notified pursuant to O.C.G. A § 19-7-5.

INITIAL REPORT OF SEXUAL ASSAULT

If a victim of sexual assault decides to report an assault or requests medical services, the victim should be allowed to decide whom to tell. Options include family members, guardians or caretakers, staff of law enforcement, a hospital or other medical facility, or an emergency crisis line operated by a sexual assault center or other crisis agency.

Victim service agencies, at the outset, often play dual roles of providing crisis intervention and acting as liaison with other agencies.

Lumpkin and White counties' victim service agency is Rape Response. The victim service agency should be involved at the earliest possible time after a report of sexual assault, no matter which agency receives the initial report.

1. Initial Response

Whoever is contacted first by the victim should be concerned for the safety and wellbeing of the victim. The following actions should be taken following contact by the victim:

- With the consent of the victim, help identify and address the immediate concerns of the victim, e.g., is he/she in a safe place, are there family members or friends whom the victim wishes to contact, is there a need and want for medical care or transportation to the hospital, if law enforcement needs to be contacted, and is clothing needed to wear home after a forensic medical exam at Rape Response OR Rape Response will provide new clothing to the survivor at the conclusion of a Forensic Medical Exam.
- Contact Rape Response's 24/7 hotline: 770-503-7273 or 1-800-721-1999 or if a Forensic Medical Exam is needed, please contact the on-call SANE from Rape Response per the on-call calendar or call the above hotline.
- Provide information to the victims regarding the importance of preserving evidence

2. Coordination of Services

Although several different agencies come into contact with victims at various stages after the assault is reported, victim service agencies are often considered the “hub of the wheel” for victims, providing support and advocacy throughout the process. Once Rape Response is contacted concerning a victim, the on-call Advocate will immediately notify the parties involved and coordinate services at the victim’s request.

Of course, contact with parties depends on the immediate needs of the victim, and immediate medical services or law enforcement protection may be necessary. Each agency will have procedures in place for how to proceed depending on the immediate needs of the victim.

ADVOCACY (Sexual Assault Advocate and Court Advocate)

The sexual assault victim service agency for Lumpkin and White counties is,

Rape Response (Sexual Assault Advocate)

24 hour Crisis Line: 770-503-7273 or 1-800-721-1999

Survivors who choose to report, and their case goes to the District Attorney’s office, the District Attorney’s Court Victim Advocate provides victim services through the duration of the court process.

The role of the sexual assault victim advocate² is to provide services to the victims of sexual assault regardless of whether or not the victim chooses to participate in the criminal justice process. Victim service agencies should be involved at the earliest possible time after a report of sexual assault, no matter which agency receives the report. They play a very important role in providing a response that keeps the victim central in the process, allowing the investigation and prosecution to be offender focused. Advocacy also has a critical role in promoting the healing process for the victim. Sexual assault victim advocates provide crisis intervention, support, family advocacy, information and referral and other ancillary services to assist the victim throughout the criminal justice process. The support provided by the sexual assault victim advocate also benefits the criminal justice process, because supported, well-informed victims are more likely to continue through the process. Advocates will operate under the guidelines established by *The Georgia Crime Victim’s Bill of Rights* (O.C.G.A. § 17-17-1) and will adhere to best practices as outlined in the *Georgia Sexual Assault Response Team Guide and the Georgia Sexual Assault Certification Standards*.

Responsibilities of the sexual assault victim advocate include:

- Being available to victims and families 24 hours a day, 7 days a week via a 24-hour crisis line staffed by trained community advocates
- Providing services to victims and families that are sensitive to the unique barriers and special considerations that diverse victims encounter in reporting sexual assault crimes

² Defined as a trained sexual assault victim advocate working with a Georgia certified sexual assault center

- Provide emotional support and crisis intervention to victims and their families
- Be present during medical exams and police questioning when appropriate
- Help arrange transportation to and from the hospital or medical facility or collaborate with law enforcement for transportation, if the crime is reported
- Providing options to victims so that they may make informed decisions
- Supporting victims who choose to report to law enforcement by providing a link to eliminate barriers effecting the victim's participation in the criminal justice process
- Maintaining victim confidentiality
- Offering services to non-reporting victims and assisting if and when the victim decides to disclose
- The advocate advises victims of procedures for payment of forensic portion of medical examination, as well as counseling services, by the Georgia Crime Victims Compensation Fund as provided in O.C.G.A. 17-15-15. For reporting cases, The District Attorney's Office Advocate assists helping victims complete compensation applications for non-reimbursed expenses resulting from the crime and to request court ordered restitution as appropriate.
- Notifying victims of all available services such as counseling, crisis intervention, advocacy, support groups and education
- Explaining the Victim's Bill of Rights, O.C.G.A. 17-17-1 et sec, and how to request the various notifications and provide input during the case proceedings

Victims may also work with systems-based Victim Advocates in the District Attorney's office if the case progresses through the criminal justice system to the point of prosecution.

LAW ENFORCEMENT

Lumpkin County/Dahlonega, GA

Lumpkin County Sheriff's Office
385 E. Main St.
Dahlonega, GA 30533
706-864-0414

University of North Georgia
Police Department
246 South Chestatee St.
Dahlonega, GA 30533
706-864-1500

City of Dahlonega Police
465 Ridley Road
Dahlonega, GA 30533
706-482-2716

White County/Cleveland, GA

White County Sheriff's Office
1210 Hulsey Rd.
Cleveland, GA 30528
706-865-5177

Cleveland Police Department
85 South Main St.
Cleveland, GA 30528
706-348-7078

Truett McConnell University
Security
100 Alumni Dr.
Cleveland, GA 30528
706-865-2134 x 3201

Helen Police Department
25 Alpenrosen Strasse
Helen, GA 30545
706-878-2722

The role of the investigating officer is to ensure the safety of the victim and the community and to ascertain if the report of sexual assault meets the elements of a crime under Georgia law. Within their jurisdictions, law enforcement will investigate sexual assault crimes.

Many sexual assault victims are severely traumatized as a result of their attack. This trauma, coupled with the intensely personal nature of the crime, often leaves victims reluctant, embarrassed, or afraid to report the assault to the police. An understandable apprehension about police and court procedures may further increase victim reluctance to report the crime and cooperate with law enforcement.

Police officers and detectives play a crucial role in overcoming the psychological hurdles which confront a victim and then obtaining a victim's cooperation in the assault investigation. Since a victim's ability to cope with the crime and its aftermath may prove critical to the ultimate success of criminal prosecution, it is imperative that law enforcement agencies always treat the victim of sexual assault with the utmost compassion while skillfully guiding the victim's potentially uncomfortable journey through the criminal justice system.

1. Complaint Reporting

The first report of a sexual assault is sometimes made by the victim to a dispatch or communications center of a law enforcement agency. Dispatch or communications staffers are critical in aiding the victim to regain control and composure after an assault. The staffers should remain calm, understanding and non-judgmental while speaking with any victim.

2. Responding Law Enforcement Officer

The first law enforcement officer to reach a sexual assault victim is usually a uniformed or "street" police officer. This officer, as with others who investigate the case, should quickly develop a good rapport with the victim while initiating the gathering of evidence.

- Address victim's physical, medical, and emotional needs
- Contact Rape Response to coordinate a medical exam if victim wishes for one and transportation
- Protect the crime scene
- Conduct initial response as determined by the procedures of the law enforcement agency

3. The Investigator's Role in Sexual Assault Cases

The chief investigator in a sexual assault case has the critical role in the successful prosecution of the case. The importance of obtaining an eventual criminal conviction, however, should coincide with the necessity of protecting the victim's physical and emotional health.

General investigative responsibilities include:

- Identification, apprehension, and interrogation of suspect(s)

- Attendance at the forensic medical exam when possible
- Interview of victim with an offender focused and trauma informed approach
- Interview of witnesses
- Collection and preservation of evidence
- Maintenance of chain of custody
- Timely submitting sexual assault evidence collection kits to GBI crime laboratory regardless of whether a suspect has been identified, per GBI recommendations
- Review of GBI Crime lab reports as soon as possible after they are released to investigating agency, per GBI recommendations
- Determination of probable cause and arrest
- Preparation of case reports with investigative summaries
- Assistance to District Attorney's office in prosecution of case
- Testimony and presentation of evidence in court
- Follow up with the victim concerning arrest of assailant, case developments, and ensure that appropriate support services are available
- The investigating officer will notify the Victim Advocate, located in the District Attorney's office, as soon as possible.

Investigating officers will work with victim advocates to ensure a victim centered response to the investigation and proper notification of case updates to victims. Additionally, law enforcement officers will operate under the guidelines established by *The Georgia Crime Victim's Bill of Rights* (O.C.G.A. § 15-17-1) and adhere to best practices as outlined in the *Georgia Sexual Assault Team Guide*.

MEDICAL FORENSIC EXAMINATION PROCEDURES

Rape Response

Gainesville, GA 30501

770-503-7273

Services for adolescents and adults

ADULTS & ADOLESCENTS

Sexual Assault Examination and Evidence Collection, which follows this narrative, is intended to be used as a guide for examining and treating adult and adolescent victims of sexual assault and for collecting evidence related to a sexual assault. It may be used in place of, or in addition to, an existing medical protocol. It is designed to be used in a variety of settings, for example, in a hospital emergency room, a physician's office, or a sexual assault center that is able to conduct a forensic medical examination and collect the forensic evidence. Collection of physical evidence more than 120 hours after a sexual assault must be guided by the particulars of individual case histories.

THE MEDICAL EXAMINATION

Trained medical forensic examiners are committed to providing culturally sensitive, developmentally appropriate and trauma informed care to optimize the acute and long-term health outcomes of all clients served. Examiners are responsible for collaborating with law enforcement, advocates, and other healthcare professionals to ensure timely delivery of Forensic Medical Services to adult/adolescent reporting and non-reporting patients.

Acute Medical forensic examinations shall be performed at Rape Response. Acute cases are as follows: vaginal assault within 120 hours; anal assault 72 hours; oral assault 24 hours and saliva on skin within 96 hours of the reported sexual assault. Any case that presents outside the time frame of 120 hours requires a medical consultation with the on-call examiner or the Rape Response SANE Program Director to determine the next appropriate steps which may still involve evidence collection through a forensic medical exam. Forensic medical exams should be made available if a patient chooses to report or chooses not to report.

Medical forensic examinations shall be performed by a Sexual Assault Nurse Examiner ("SANE"), physician, nurse practitioner or physician's assistant ("PA") trained in performing such exams.

Medical forensic responsibilities include:

- Obtaining informed consent from the patient for the medical forensic examination, documentation, and evidence collection
- Gathering the medical and forensic history
- Conducting a physical examination
- Coordinating treatment of injuries
- Documentation of biologic and physical findings
- Collection of evidence from the patient
- Documentation of findings
- Providing information, treatment, and referrals for STIs, pregnancy
- Follow-up as needed for additional treatment and/or collection of evidence.
- Providing testimony at trial

BIOLOGIC EVIDENCE COLLECTION

The examiner will collect biologic samples at the request of a patient, in accordance with currently accepted protocol (defined as the *National Protocol for Sexual Assault Medical Forensic Examinations Adults/Adolescents*), to obtain timely biologic reference samples for possible analysis at the GBI Crime Lab. At the conclusion of the sexual assault medical forensic examination, any evidence collected will be

packaged and protected in a manner to ensure the integrity of specimens and the appropriate chain of custody of the evidence.

All biologic samples, fluids, hairs and other evidence requiring GBI analysis will be given directly to the case investigator for processing, using a proper chain of evidence.

Pursuant to SB 304/O.C.G.A. § 35-1-2(b) (as amended), it shall be the duty of every law enforcement officer who takes possession of the evidence collected during a sexual assault forensic medical examination to ensure that such evidence is submitted to the division within 30 days of it being collected.

Drug facilitated sexual assault (DFSA) occurs when a victim is subjected to or made to perform sexual acts while they are incapacitated or unconscious due to the effect(s) of drugs and/or other substance that compromise their ability to consent to such acts. It is important for the examiner to recognize that the patient may have ingested the suspected or reported substance(s) voluntarily.

If possible, a urine sample of 100 milliliters should be collected if collection occurs less than 120 hours since the suspected or known ingestion. Urine may be stored in a secured refrigerator for up to 72 hours and then frozen if long-term storage is required. Although most drugs will be undetectable in the blood beyond 24 hours after ingestion, blood may prove useful in cases where the patient is examined within 24 hours of the known or suspected ingestion. At least 12 milliliters of blood should be obtained in the grey-topped tubes provided in the DFSA kit. Blood samples should never be frozen during temporary or long-term evidence storage.

All biologic evidence collected at the request of a patient who chooses not to initiate and participate in and/or cooperate with a law enforcement investigation shall be maintained by Rape Response.

REQUESTS FOR MEDICAL FORENSIC EXAMINATION

With the consent of the patient, medical forensic examinations can be performed at the request of (1) a law enforcement agency, (2) the District Attorney's Office, (3) a hospital, (4) pursuant to a court order, or (5) at the patient's request pursuant to O.C.G.A. § 17-5-72.

Medical forensic examinations may be requested 24 hours a day by calling the on-call SANE directly or by calling Rape Response's 24/7 crisis line at 770-503-7273.

COSTS OF THE MEDICAL FORENSIC EXAMINATIONS

The cost of examinations shall be paid pursuant to O.C.G.A § 16-6-1(c), O.C.G.A § 17-5-72. Patients shall not be responsible for the payment of medical forensic examination costs.

CONDUCT OF THE MEDICAL FORENSIC EXAMINATION

A SANE, physician, nurse practitioner or PA will perform the examination and assessment.

Medical forensic examinations and biologic evidence collection should be completed as quickly as possible after a report is received.

Medical forensic examinations and biologic evidence collection shall be conducted in accordance with Georgia Bureau of Investigation (GBI) procedures using a GBI Sexual Assault Evidence Kit.

The SANE, physician, nurse practitioner or PA will complete appropriate authorizations relating to the examination.

The SANE, physician, nurse practitioner or PA will photograph and document injuries and prepare a report.

The SANE, physician, nurse practitioner or PA will maintain and document the chain of custody of any evidence collected during the examination and assessment.

The SANE, physician, nurse practitioner or PA will adhere to best practices as outlined in the *Georgia Sexual Assault Response Team Guide*.

PROCEDURES FOR HOSPITALS RECEIVING WALK-IN REPORTS OF SEXUAL ASSAULTS

Hospitals receiving patients reporting incidents of sexual assault shall immediately contact law enforcement in accordance with O.C.G.A § 31-7-9 mandating all non-accidental injuries be reported. Patients will retain the right not to initiate, participate in, and/or cooperate with any law enforcement investigation of such assault. Law enforcement shall provide timely notification of the incident to the Rape Response on-call examiner. The investigating officer is responsible for determining exam eligibility and initiating the SANE on-call.

PROSECUTION

The role of the District Attorney's office is to protect the rights of the victim and ensure a fair and thorough investigation while holding the offender accountable when appropriate. Prosecutors should work in a collaborative fashion with law enforcement, medical forensic and victim advocates.

Enotah Judicial Circuit shall assume ultimate responsibility for informing victims of the status of a case in accordance with the Crime Victim's Bill of Rights. Prosecutors' offices shall establish and maintain direct liaison with victims and victim service agencies.

Prosecutors are responsible for:

- Notification of procedural steps, proceedings, and contact information concerning the perpetrator and the criminal case

- Offer the victim the opportunity to express an opinion on the release of the accused pending judicial proceedings
- Offer the victim the opportunity to express an opinion on the disposition of an accused case
- If victim requests by writing, give prompt advance notification of any scheduled court proceedings and notice of any changes to that schedule, unless the victim requests not to be notified.
- Make decisions on whether or not to prosecute based on consideration of variables of the case
- General procedures for handling sexual assault cases through indictment and trial

Prosecutors will operate under the guidelines established by *The Georgia Crime Victim's Bill of Rights* (O.C.G.A. § 15-17-1) that state, for example, that victims have the right,

- To be treated fairly and with dignity by all criminal justice agencies involved in the case
- To proceedings free from unreasonable delay
- To reasonable, accurate and timely notice of an court proceeding where the release of the accused will be considered
- To reasonable, accurate and timely notice of court proceedings or any changes to such proceedings, including restitution hearings
- To reasonable, accurate and timely notice of the accused's release and/or monitoring program
- To be present at all criminal proceedings in which the accused has a right to be present
- To NOT be excluded from any scheduled court proceedings, except as provided in O.C.G.A. § 17-17-1 or otherwise provided by law
- To a waiting area, during judicial proceedings, that is separate from the accused and his or her relatives, friends and witnesses
- To be reasonably heard at any scheduled court proceedings involving the release, plea or sentencing of the accused
- To complete a Victim Impact Statement and have it presented to the court prior to the sentencing or plea of the accused (O.C.G.A. § 17-10-11)
- To refuse to submit to an interview by the accused, accused's attorney or agent of the accused.
- To a requirement by the court that defense counsel not disclose victim information to the accused (O.C.G.A. § 17-17-10)

If a victim attends any court proceeding, a victim advocate from Rape Response and/or the District Attorney's Office victim advocate will accompany the victim upon the victim's request.

Prosecutors and prosecution based advocates will adhere to best practices as outlined in the *Georgia Sexual Assault Response Team Guide*.

DRUG-FACILITATED SEXUAL ASSAULTS

Victims of drug-facilitated sexual assault have been compromised by alcohol and/or drugs and their ability to consent has been affected. The state of intoxication makes the victim easier to perpetrate on. The

victim may have been forced to consume, tricked into consuming without their knowledge, or knowingly and purposefully consumed drugs and/or alcohol. The perpetrator may take advantage of their state of intoxication or be the cause of it.

The most commonly used substance is alcohol. Other substances include prescription drugs and street drugs. These substances manifest themselves in various types of symptoms and are in the body's system for different amounts of time. SANEs need to be up to date on the various inebriating substances.

When a victim presents as inebriated it is priority to get them medical care and safety. A victim cannot consent to a FME when they are intoxicated. Collection of evidence will be performed when it is possible for the victim to consent. Blood work will be done at the victim's consent.

Evidence must be collected by law enforcement within 96 hours of the FME.

Law enforcement and other first-responders must be educated and knowledgeable about the dynamics of drug-facilitated sexual assault. Intoxication should not create fault on the part of the victim and victims should not be treated in that manner.

Intoxication and various substances may affect memory and the victim's ability to communicate their assault. Memories may develop over time, causing disclosures to come in parts and timelines to be confusing.

RESPONSE TO HUMAN TRAFFICKING

Human trafficking and sexual exploitation involve sexual assault but have different dynamics and require a different response than single occurrence assaults or chronic single perpetrator assaults. Trafficking and exploitation involve the trade of money or goods for sex, may be organized by the third party, may involve the movement of the victim from one place to another, and often have multiple perpetrators. The dynamics involve intense psychological coercion and manipulation on the part of the perpetrator and/or trafficker, creating increasing barriers to victim cooperation. These cases also commonly involve drugs and alcohol, technology, and physical assault. Victims of human trafficking are commonly polyvictimized.

Law enforcement and other first-responders must be educated and knowledgeable about the dynamics of trafficking and exploitation to enhance the ability to identify trafficking/exploitation, collect evidence, and work with victims. Advocates can be used as a tool by law enforcement to help with victim cooperation and guidance on the dynamics of trafficking/exploitation.

Victims of trafficking/exploitation need to be offered the same process and choices of care and evidence collection.

Major changes in the protocol concerning these particular cases are the resources available for victims. Advocates from RAPE RESPONSE will respond as per protocol, however, other resources are necessary to create a wraparound response. RAPE RESPONSE Advocates or other involved parties will contact the Georgia Coalition to Combat Human Trafficking to coordinate services for adult victims. For victims under the age of 18 years, please refer to the Lumpkin or White County Child Abuse Protocols.

Georgia Coalition to Combat Human Trafficking
Hotline Number: 1-866-ENDHTGA (1-866-363-4842)
<http://www.endhtga.org/>
Available 24/7

RESPONSE TO LUMPKIN COUNTY JAIL OR WHITE COUNTY DETENTION CENTER SEXUAL ASSAULT

Colwell Detention Center has an MOU with RAPE RESPONSE that facilitates advocate response to reported sexual assault of inmates. The number of Advocates available for this response is limited due to restrictions within the detention center, so advocacy services will be provided as soon as possible.

Victims of sexual assault within the detention center should be provided resource options and the option of an FME. If a victim needs a FME, the detention center will contact RAPE RESPONSE to request a FME. Procedures for medical response will be followed as normal per the detention center.

First responders will respond to victims at the detention center as victims, not as criminals. However, appropriate caution will be taken, as advised by law enforcement and the detention center staff.

LOCAL SART COORDINATED RESPONSE

All members of the Lumpkin and White counties Sexual Assault Response Team will adhere to best practices as outlined in the *Georgia Sexual Assault Response Team Guide (available summer 2017)*.

Members of the Lumpkin and White Counties SART agree to meet bi-annually for case review, discussion and evaluation to assure the coordination and cooperation between all agencies responding to sexual assault cases in Lumpkin and White counties.

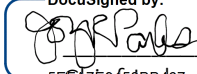
At least one meeting per year will include a review and update to this SART protocol.

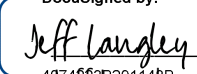
This protocol is to be used by agencies on a case-by-case basis, with the intent to be victim-centered.


Pursuant to O.C.G.A § 15-24-2, members of the Lumpkin and White Counties Sexual Assault Protocol Committee agree to meet annually to review, update and evaluate this Sexual Assault Protocol.

The foregoing Sexual Assault Protocol is hereby adopted and replaces any previously adopted protocol and remains in effect until such time as said protocol is amended and adopted.

This tenth day of November, 2023

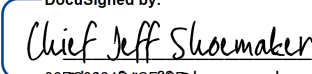
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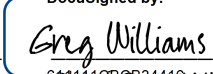
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White County Sheriff's Office

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Cleveland City Police Department

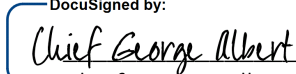
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Chief Greg Williams
University of North Georgia Campus Police

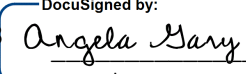
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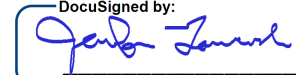
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Chief Athena Barrett
Helen Police Department

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Chief George Albert
City of Dahlonega Police

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Angela Gary, Exec. Director ER & Trauma Svcs.
Northeast Georgia Medical Center

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Jen Tarnowski, Executive Director
Rape Response

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Dr. Zachary Taylor, District Health Director
District 2 Public Health