



<b>Policy Manual</b> <b>Standard Operating Procedure</b>	
<b>SOP Number:</b> 15-15a	<b>Subject:</b> Sexual Assault Investigations
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1. PURPOSE

This directive provides guidelines and procedures for receiving, responding to, and investigating reports of sexual assaults.

2. POLICY

The Georgia Tech Police Department (GTPD) will investigate all complaints of sexual assault and will provide necessary assistance to victims. A victim’s distress may create an unwillingness or psychological inability to assist in the investigation. Officers and investigators play a significant role in both the victim’s willingness to cooperate in the investigation and ability to cope with the emotional and psychological after effects of the crime. Therefore, it is especially important that these cases be handled from a nonjudgmental perspective so as not to communicate in any way to a victim that the victim is to blame for the crime.

### 3. RESPONSIBILITIES

- 3.1 Department employees will comply with this directive when responding to reports of sexual assault.
- 3.2 Division commanders and supervisors will ensure that employees comply with this directive.
- 3.3 The Investigation Division commander will (1) ensure that an investigator responds to and assumes control over investigations involving reports of sexual assaults, and (2) maintain a liaison with the Atlanta Police Department (APD) Sex Crimes Squad.

### 4. ACTION

#### 4.1 Call-Taker Response

- 4.1.1 Due to the trauma of a sexual assault, a victim's behavior may actually be symptomatic of this condition and can range from hysteria, crying and rage to laughter, calmness, and unresponsiveness. There is no one typical reaction, so it is important to refrain from judging or disregarding any victim.
- 4.1.2 When a caller reports a sexual assault, communications personnel will follow standard emergency response to include evaluating and properly prioritizing the call, securing medical assistance, inquiring about a suspect's current location, and obtaining detailed information to identify the suspect. Information about the relationship with the victim, weapon use, and history of violence will also be obtained. Communications personnel will:
  1. Dispatch an officer to the victim's locations, and another officer to the crime scene (if different than the victim's location).
  2. Ensure the duty supervisor acknowledges the complaint. Contact the on-call representative for the Women's Resource Center and advise them of an incident; have them contact the Investigations Division commander or Deputy Chief for further information.
- 4.1.3 To ensure critical evidence is not lost, communications personnel shall:
  - a. Ascertain where the incident occurred; if the incident occurred off-campus, notify the respective jurisdiction and ask the respective agency to send an investigator to the victim's location.

- b. Advise the victim not to bathe, douche, urinate, or make other physical changes.
- c. Advise the victim not to eat food or drink any liquids.
- d. Notify the Communications supervisor and advise him/her to pull the audio recording and printout, and preserve both for the investigation.

## 4.2 Initial Officer Response

### 4.2.1 As part of the emergency response, officers will:

- a. Make contact with the victim as soon as possible to address safety concerns and summon emergency medical assistance if needed;
- b. Evaluate the scene for people, vehicles, or objects involved as well as possible threats;
- c. Relay all vital information to responding officers, investigators, and supervisors, including any possible language barriers;
- d. Secure the crime scene to ensure that evidence is not lost, changed, or contaminated;
- e. Identify and locate witnesses and suspects. Based on the victim's emotional and physical state, questions of the victim concerning the assault and description and location of the suspect shall be limited. Responding officers must identify and interview any potential witnesses, bearing in mind there may be multiple crime scenes. It is especially important the first person the victim told about the sexual assault be identified and interviewed;
- f. Begin a search for the suspect when appropriate;
- g. Any officer who interviews a witness or a suspect, identifies evidence, or processes a crime scene will write his or her own supplemental report detailing the actions he or she took. The assigned investigator will complete the initial incident report.

### 4.2.2 Assisting the Victim: Responding officers will:

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- a. Show understanding, patience, and respect for the victim's dignity and attempt to establish trust and rapport;

- b. Inform the victim that an officer of the same sex will be provided if desired and available.
- c. Advise the victim that a victim's advocate will provide assistance throughout the reporting and investigative process.
- d. Provide victims of sexual assault with the Victims' Bill of Rights brochure (GTPD Form 200).
- e. Advise the victim that an investigator will respond to assume control of the investigation; officers should limit the preliminary interview so that the victim is not then asked the same questions by an investigator.
- f. Secure the crime scene and start a crime scene log. Refer to SOP 15-01 "Crime Scene Processing" for guidance.

#### 4.3 Supervisor Response

- 4.3.1 The responding supervisor will contact the Investigations Division commander and request that an investigator respond to the victim's location.
- 4.3.2 Contact the on-call Dean of Students and advise them of the incident without divulging identifying information of the victim (e.g. name, residence hall room number.)

#### 4.4 Responding Investigator

- 4.4.1 The responding investigator will protect the integrity of the evidence and guard the chain of custody by properly marking, packaging, and labeling all evidence collected, including:
  - a. Clothing worn at the time of the assault and immediately afterward, especially the clothing worn closest to the genitals (such as undergarments, pants, and shorts);
  - b. Photographs and/or videotape of the victim's injuries (if any), the suspect's injuries (if any), and the crime scene prior to processing:
    - When photographing a victim, be sensitive to the location of the injuries on the victim's body,
    - Summon an officer of the same sex as the victim,
    - Photograph victims using drapes and other techniques that help to maintain the victim's dignity,

- Instruct medical personnel to take photographs of the genitalia when needed.
- c. When an investigator suspects a sexual assault may have been facilitated with drugs or alcohol, he or she should determine the time of the incident as soon as possible in order to make decisions regarding the collection of urine and blood samples.
- d. Officers will introduce the need for a medical examination to the victim explaining the importance to investigative and apprehension efforts as well as for the victim's well being. Officers will not coerce victims to go to the hospital or to provide samples for drug screening.
- e. Inquire whether the victim will consent to a forensic examination.
- f. DNA evidence plays a crucial role in the sexual assault investigation. In addition to the victim's and suspect's bodies and clothing, there are many other potential sources such as condoms, sheets, blankets, pillows, and bottles that may contain biological evidence such as blood, sweat, tissue, saliva, hair, and urine. To properly collect DNA evidence, refer to section 4.4 of SOP 15-01 "Crime Scene Processing."
- g. The sexual assault evidence kit will be accepted from the medical staff after it has been properly sealed and labeled.
  1. The kit may contain items requiring refrigeration. Ask the Sexual Assault Nurse Examiner if the kit should be refrigerated.
  2. Do not allow the kit to freeze or be exposed to heat such as being near a car's interior heater.

#### 4.5 Victim Interview Protocol

- 4.5.1 Refer to SOP 15-14 "Child Abuse Investigations" for guidance on investigating sexual abuse of a child.
- 4.5.2 Based on the length of time between the assault and report of the crime and the individual's personal history, the victim may be in crisis and experiencing posttraumatic stress disorder or rape trauma syndrome and exhibiting a range of behaviors that will likely change over time.
- 4.5.3 The victim's response to the trauma of a sexual assault will not be used in any way to measure credibility. When drugs or alcohol are

involved, the victim may have limited recollection or be unable to give a complete account of the crime. Not knowing the details of what happened may exacerbate the trauma experienced by the victim.

- 4.5.4 Accommodate the victim's request for a rape crisis advocate or support person whenever possible; and take responsibility for excluding a support person when appropriate and offer the victim and support person an explanation.
- 4.5.5 Throughout the investigation of the case, officers shall protect the confidentiality of the victim's information in accordance with State laws and policy.
- 4.5.6 In the immediate aftermath of a sexual assault, a victim will not be expected or encouraged to make decisions regarding the investigation or charges related to the offense. Officers will not persuade a victim to sign to decline an investigation.
- 4.5.7 Delayed victim reporting is common in sexual assault cases due to the trauma and fear experienced by victims and should not deter a thorough investigation. Officers will inquire about and document the reasons for a delayed report, while avoiding questions that could be perceived as judgmental or accusatory.

#### 4.6 Forensic Examinations for Victims of Sexual Assault

- 4.6.1 Victim-centered care is paramount to the success of the forensic examination of victims of sexual assault. A timely, professional forensic examination increases the likelihood that injuries will be documented and evidence collected to aid in the investigation and prosecution of sex offenders. Evidence may normally be collected up to 72 hours after the assault, but evidence can be gathered and injuries documented beyond that time, especially if the victim is injured, bleeding, or experiencing pain.
- 4.6.2 The preferred hospital for a forensic examination is Grady Memorial Hospital. The Officer/Investigator transporting a victim for a forensic examination will:
  - a. Ask the victim whether there is anyone who should be called or notified, and facilitate this contact;
  - b. Address any special needs of the victim, such as communication or mobility, and notify the victim advocate of the special need;

- c. If an ambulance is not required, transport the victim to Grady Memorial Hospital if a forensic examination is warranted and the victim consents. The victim will be transported in an unmarked vehicle;
  - d. The Grady Rape Crisis Center has volunteer and on-call victim advocates on-duty and will be automatically notified by hospital staff;
  - e. Advise the victim the forensic examiner will collect any clothing that was worn during or immediately after the sexual assault;
  - f. Grady's victim advocates will provide clothing the victim may need after the examination;
  - g. The Sexual Assault Nurse Examiner (SANE) or physician at Grady will perform the forensic examination and will provide the officer or investigator with the completed and sealed sexual assault evidence kit;
  - h. If a drug-facilitated sexual assault is suspected, provide the Sexual Assault Nurse Examiner with a DUI testing kit to take blood and/or urine samples for GBI submission. Grady will not test blood samples for illegal substances;
  - i. Obtain a signed Authorization to Release Medical Information (provided by Grady) prior to leaving the victim; and
  - j. Encourage a victim who is unwilling to undergo a forensic exam to get medical attention including testing for pregnancy and sexually transmitted diseases. These services can be provided by the GT Women's Clinic at the Stamps Health Center.
- 4.6.3 If a drug-facilitated sexual assault is suspected, it is critical to obtain a urine or blood sample from the victim as soon as possible. The most common "date rape" drug, GHB, may be detected in the blood 4-6 hours and in the urine 6-8 hours after ingestion. Other drugs are detectable for a much longer period. Therefore, samples will still be obtained in cases of delayed reporting. Collected DUI kits should be refrigerated, refer to SOP 16-05, "Submitting Evidence" for further guidance.
- 4.6.4 Prior to a forensic examination, the Sexual Assault Nurse Examiner will ask the victim about the details of the sexual assault with the investigator and advocate present in the room.

- 4.6.5 Investigating officers should not normally be present in the examining room, as the forensic examiner will testify about collection of evidence and the chain of custody.
- 4.6.6 The investigating officer will ask the nurse or physician to brief him or her at the conclusion of the examination.
- 4.6.7 The police report will contain a copy of the forensic exam, if available, and a summary of the findings that note significant information or injury. After the examination, the investigator will transfer all evidence to the department for storage and submission.
- 4.6.8 Protocols for responding to illegal substance abuse by victims (including underage drinking) will be followed and never used to discredit or discourage the victim from reporting the assault. The Departments' priority is to conduct a thorough investigation of a sexual assault rather than prosecute victims for misdemeanor violations.

#### 4.7 Follow-up Interview Protocol

- 4.7.1 An in-depth follow-up interview will be conducted after the victim has been medically examined and treated, and personal needs have been met.
- 4.7.2 In the event that the victim is still under the influence of drugs or alcohol, has been injured, or as a result of the assault has not slept, and barring exigent circumstances requiring an arrest or identification, the investigating officer will delay the interview.
- 4.7.3 The interview will be conducted in a location that is convenient, accessible, and comfortable for the victim. The investigating officer will provide or arrange for transportation for the victim when needed.
- 4.7.4 Assist the victim in developing a safety plan, in the event safety concerns exist, and encourage the victim to call police if the suspect violates any existing criminal or court orders or if the suspect contacts the victim in any way.

#### 4.8 Interview and Sexual Assault Forensic Examination for the Suspect

- 4.8.1 The investigating officer(s) will follow Department policies and procedures on identifying the suspect, conducting the suspect interview, and collecting evidence in a sexual assault investigation.
- 4.8.2 Protocol for Suspect Examination



1. Immediately after the preliminary suspect interview, the investigating officer will determine whether a forensic sexual assault examination should be obtained for the suspect.
2. A search warrant may be needed to collect any evidence from the body of the suspect or even to collect clothing. If the suspect consents to such evidence collection procedures, document voluntary consent with Consent to Search - Form 230.
3. The investigating officer will clearly document the suspect's freedom to decline any part of the examination and to leave at any time.
4. Cotton-tipped swabs or other buccal DNA collectors will be readily available to investigators in the field for purposes of collecting cells from inside of a suspect's cheek for DNA profiling when the investigator has a signed Consent to Search form or warrant.

#### 4.8.3 Evidence Collection:

1. The forensic examiner should document the suspect's medical history, document all injuries that are observed, and collect biological and trace evidence from the suspect's body;
2. If in custody, the suspect will be given a *Miranda* warning before being asked medical history questions by the forensic examiner or investigating officer;
3. If the suspect invokes his right to remain silent, the examiner shall bypass the medical history portion of the examination and continue documenting any visible injury and collecting the appropriate specimens;
4. Both the examiner and attending officer will be prepared to document any spontaneous statements made by the suspect regardless of whether or not the suspect is in custody and whether or not the suspect was provided with a *Miranda* warning;

## 5. DEFINITIONS

Buccal: of or relating to the mouth.

## 6. REFERENCE

SOP 15-01 "Crime Scene Processing"

SOP 15-08 "Criminal Investigations"  
SOP 15-14 "Child Abuse Investigations"  
SOP 8-13 "Victim Witness Assistance"  
SOP 16-05 "Submitting Evidence"  
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