I. PURPOSE

The purpose of this General Order is to provide agency members with guidelines for the investigation of sex offenses.

II. POLICY

It shall be the policy of the Loudoun County Sheriff’s Office to utilize uniform procedures when investigating sex offenses.

Sex crime victims may suffer extreme psychological as well as physical injury. Investigating deputies should be cognizant of this and conduct the investigation with patience and understanding of what the victim has experienced. The deputy’s investigative technique may influence the victim’s cooperation in any subsequent proceedings.

III. PROCEDURE

A. Emergency Communications Center (“ECC”) Responsibilities:

1. This is usually the victim’s first contact with the Sheriff’s Office. Call takers and dispatchers are to show sensitivity toward victims who call the Emergency Communications Center.

2. When ECC personnel receive a sex crime complaint they shall obtain as much information as possible, to include location, lookout, medical needs, etc.

B. Patrol Responsibilities:

1. Patrol units should be dispatched to the scene as a first priority. Other deputies not responding directly to the scene, but in the general area, should begin a search for the suspect, if applicable.

2. When deputies arrive at the scene, their first duty is to determine the victim’s need for medical attention, followed by an attempt to obtain a suspect description, means of escape, vehicle description, direction of travel, and any other relevant information pertaining to the suspect.

3. After the scene has been secured, all deputies not needed should leave the scene and begin a search for the suspect, if necessary.
4. The Special Victims Unit of the Criminal Investigations Division (“CID”) should be notified whenever their expertise is needed or a supervisor determines such notification is appropriate. A CID supervisor shall be contacted at any time to assign the appropriate detective.

5. Cases referred from the County’s Department of Family Services’ Child Protective Services Unit or another social services agency should be turned over directly to CID. Initial reports in such cases will be the responsibility of the assigned detective.

C. The Interviewer’s Responsibilities:

1. If available, a deputy of the same gender as the victim should conduct the interview. However, supervisors will have the authority to make assignments as deemed necessary.

2. Victim reactions are varied, therefore the victim may not have followed recommended procedures regarding crime scene preservation. The victim may have obtained hospital treatment first, showered, changed clothes, etc. The victim should not be lectured for these actions.

3. The interview should be conducted in private. In some cases, the victim may be reluctant to relate details if a friend or family member can overhear the conversation or if others are allowed to walk in and out of the interview area.

4. Before beginning the interview, the deputy should:
   a. Establish rapport with the victim
   b. Explain the need to ask questions that may be embarrassing to the victim
   c. Explain hospital and investigating procedures

5. The interviewing deputy should be patient and allow the victim to tell the story in his/her own words. A certain amount of resistance is to be expected. The victim may not know the meaning of such words as fellatio, cunnilingus, sodomy, etc. Therefore, simple words and phrases should be used so that the victim will be certain to understand the questions being asked.

6. The preliminary interview should be thorough enough to establish the elements of the crime, but might not be in-depth. If the victim’s reaction so warrants, detailed questioning may be postponed; however, the interviewing deputy should make certain that the following points are included:
   a. Elements of the crime (force, threat, intimidation, penetration, no consent, rape, sodomy, etc.)
b. Identification and preservation of physical evidence (bed covers, weapon, clothing, etc.)

c. Identification of any potential suspect(s)

d. Location of the crime scene

e. Timeframe of the offense

7. Section 19.2-9.1 B of the Code of Virginia provides that at no time will a victim of a sex offense be required or requested to submit to a polygraph examination as a condition of proceeding with an investigation of his/her complaint.

D. Victim/Witness Program:

1. Following a crime, the victim shall be provided with a standardized form listing the specific rights afforded to crime victims under §19.2-11.01 of the Code of Virginia, as amended. The form shall include a telephone number so the victim can receive further information and assistance in securing the rights afforded to crime victims.

2. This resource will be provided to the victim and if appropriate, to a family member to assist and support the victim. The interviewing deputy should decide the appropriate time to mention this service. If the victim requests or is too upset to call, the detective may call the service if he/she determines it will be beneficial to the victim at that time.

   a. Delivery of this information should be noted in the IBR or supplemental report.

E. Hospital Procedures

1. The investigating deputy should contact his/her supervisor to make the necessary arrangements for a detective to be called out. It is the detective’s responsibility to authorize a Sexual Assault Nurse Examiner (“SANE”) and have a nurse called and activated before responding to a Forensic Assessment and Consultation Team (FACT) Department. If the victim is at another location, the deputy may be advised to transport the victim. It is the nurse’s protocol to contact a Loudoun Abused Women’s Shelter (“LAWS”) advocate for the victim once they are paged and activated.

2. If awaiting a detective at the FACT Department, the deputy should preserve the evidence on the victim’s body. The deputy should stay with the victim and provide him/her with any required assistance.

3. No one but the SANE is authorized to administer the victim’s Physical Evidence Recovery Kit (“PERK”).
a. The SANE nurse will explain the PERK procedures to the victim prior to the victim entering the examination room. The procedures include taking head and pubic hair samples, vaginal, anal, and/or oral swabs.

i. Under normal circumstances, the detective will not be present in the examination room during the PERK procedures.

ii. Unless the victim wishes to make his/her own arrangements, the investigating deputy will make arrangements for the victim’s transportation home.

iii. The detective will be responsible for preserving the chain of custody regarding the completed PERK.

4. On occasion, a victim may obtain his/her own SANE and PERK and not request or want the involvement of law enforcement. The hospital that has conducted the exam will hold the PERK, contact the law enforcement agency for the jurisdiction in which the offense is believed to have occurred, and require the law enforcement agency to pick up and hold the PERK as evidence. It is possible that the victim may change his/her mind after the initial assault to proceed with an investigation.

a. In these cases where the identity of the victim is unknown to law enforcement, the SANE will mark the evidence as “Jane/John Doe #.” The CID detective will pick up the PERK from the hospital and write an Incident Based Report (“IBR”) using Jane/John Doe as the victim’s name and noting the designated number. The SANE retains the name of the victim.

b. If, at a later date, the victim decides to initiate an investigation/prosecution, the CID detective will return to the hospital, and, with the original designated number, obtain the name of the victim who was initially examined.

c. Unless a victim comes forward and wishes to proceed with an investigation/prosecution, the PERK will be destroyed after two years of being retained in the Evidence Section (§ 19.2-11.6, Code of Virginia).

d. Mandatory requirements are still in effect regarding reporting incidents to Child Protective Services or Adult Protective Services when applicable.

e. Pursuant to §19.2-11.8, Code of Virginia, a PERK received by a law enforcement agency must be submitted to the lab within 60 days of receipt, except under the following circumstances: (1) it is an anonymous kit that will be forwarded to the lab for storage, (2) the kit was collected by the Office of the Chief Medical Examiner as part of a routine death investigation and the law enforcement agency and medical examiner determine that analysis is not warranted, (3) the kit is connected to a criminal offense outside of the Commonwealth, or (4) the kit was
determined by law enforcement not to be connected to a criminal offense.

F. Evidence Collection

1. The SANE will collect all PERK evidence at the hospital and take all photographs of any injuries.

2. The detective shall assist at the hospital, if needed.

3. Due to the severity of sexual assaults, an evidence technician should process each crime scene. If a Crime Scene Investigator is not available, a patrol or CID supervisor should authorize calling one out to the scene. If members of the Forensic Services Unit (“FSU”) are not available, a patrol Evidence Technician may be called for processing of the crime scene.

4. Initial deputies should note any evidence observations to CID/FSU.

5. Victim PERK

   a. When directed by SANE, the PERK must be refrigerated as soon as possible and must be submitted to the lab within seven (7) days.

6. Suspect PERK

   a. When directed by a SANE, a suspect PERK should be collected in any investigation where probable cause exists for crimes such as rape, sodomy, incest, etc. All suspect PERKS must be submitted to the lab within seven (7) days.

   b. The detective assigned to the case or Evidence Clerk may transport the PERK test to the lab.

   c. If an identified suspect will not consent to a PERK, a search warrant for the person will be obtained in a timely manner.