SEXUAL ASSAULT RESPONSE AND INVESTIGATION:
Portland efforts fall short of a victim-centered approach

A REPORT FROM THE CITY AUDITOR
June 2007
June 19, 2007

TO: Mayor Tom Potter  
Commissioner Sam Adams  
Commissioner Randy Leonard  
Commissioner Dan Saltzman  
Commissioner Erik Sten  
Rosanne Sizer, Chief of Police  
Lisa Turley, Director, Bureau of Emergency Communications (BOEC)

SUBJECT: Sexual Assault Response and Investigation: Portland efforts fall short of victim-centered approach, Report #342

Attached is Report #342 containing the results of our audit of Portland’s investigations and response to sexual assaults. The audit was included in our annual audit schedule and was conducted in accordance with generally accepted government auditing standards.

Because the sexual assault response process is a community concern, we are fortunate to have a group of dedicated professionals (the Sexual Assault Response Team) in place to address many of these issues. They have already tackled many of these tough issues and made progress. Indeed, as we completed our report, we learned their attempts to encourage other hospitals to join in offering high quality exams to sexual assault victims is starting to pay off, and that more nurses have recently been trained in the proper procedures for treating rape victims. In addition, members of the Police Bureau and BOEC are already taking action on recommended changes.

We would like to thank the members of the Police Bureau, the Bureau of Emergency Communications, the SART, and community advocates who helped in the preparation of this audit.

As a follow-up to our recommendations, we ask that the Police Chief and the Director of the Bureau of Emergency Communications prepare a status report in one year detailing steps taken to address the report’s recommendations. The status report should be submitted to the Audit Services Division.

GARY BLACKMER         Audit Team: Drummond Kahn
City Auditor                  Ken Gavette
Attachment
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RESPONSES TO THE AUDIT  
Mayor Tom Potter  
Commissioner Randy Leonard  
Rosanne Sizer, Chief of Police  
Lisa Turley, Director, BOEC
Production/Design

This report was produced in-house using desktop publishing software on Pentium 4 personal computers, and a Hewlett Packard Laserjet PCL/Postscript laser printer. It was printed at the Printing and Distribution Division of the City's Bureau of General Services. Adobe InDesign CS PageMaker version was used to design and layout the finished product. Tables were created in InDesign. Some text was initially written in Microsoft Word, then imported into InDesign for formatting and layout.
The City of Portland stands at a crossroads in its handling of sexual assault cases. Currently, Portland's system does not meet best practice standards for responding to victims' needs or investigating cases. Despite positive progress and on-going efforts by local professionals, including representatives from the Police Bureau, victim advocate groups, and the Multnomah County District Attorney's Office, the system does not work as well as it should for victims of sexual assault. Weaknesses in the system have contributed to a sexual assault clearance rate that is far below other comparable cities and, according to the Police Bureau's own records, is in general decline. In addition, any staff reductions to the Police Bureau's Detective Division will continue to put pressure on an investigative system that is under-performing. An increased commitment by all parties will be necessary to move the system toward a victim-centered approach and one that apprehends more criminals.

The sexual assault response system includes not only the Police Bureau's Sexual Assault Detail, but the Operations Branch, the Bureau of Emergency Communications, the local medical community, sexual assault victims and their advocates.

We found that the sexual assault response and investigative process as currently operating does not work well for victims, and may be a primary reason for low clearance rates. In addition, Police Bureau staffing issues, such as frequent turnover, an outdated report routing procedure, and detectives' view of the assignment as less than desirable, also contribute to problems with investigative effectiveness. Specifically, we found opportunities in both the initial reporting process and in the investigative follow-up process to improve victims' experience and increase the likelihood that more cases can be solved.
In the initial reporting process we found:

- Although 9-1-1 call-takers are professional, helpful, and non-judgmental to victims, they do not consistently give required instructions about evidence preservation.

- Patrol officers, who normally are first responders, write detailed, thorough reports, and treat victims respectfully, but it is not clear that advocates, who can assist victims, are consistently notified.

- As the primary provider of sexual assault exams, OHSU's difficult-to-reach location may discourage victims from seeking treatment.

- Multnomah County lacks a sufficient number of specially trained sexual assault nurses. On a population basis, the county ranks 30th out 36 Oregon counties for the number of trained and certified Sexual Assault Nurse Examiners.

In a review of unsolved investigative case files from the Police Bureau’s Sexual Assault Detail, we found:

- Cases are frequently not assigned in a timely manner.

- The burden of keeping cases moving seems to be placed on the victim. Cases are often closed when detectives cannot reach victims or witnesses by phone, or when they refuse to come downtown for interviews.

- Detectives do not always use standard techniques to locate suspects, such as pre-text phone calls and polygraphs in cases where their use may have benefited the outcome.

- Case files are often incomplete, lacking information on lab work, and sometimes without information about how and why a case was concluded. Although Police Bureau staff told us that more complete files are sometimes kept at other locations within the Bureau.

Staffing levels in the Sexual Assault Detail do not appear to be a factor in declining clearance rates. Staffing levels have remained steady
over the past eight years, and reported crime has decreased. Recent transfers and impending retirements, however, may be cause for concern and could further negatively affect clearance rates.

In Chapter 4 we make recommendations to move the entire system towards a more victim-centered approach by expanding the number of hospitals and trained sexual assault nurses available in the area, improving the advice given to victims by 9-1-1 call takers, ensuring that rape victim advocates are called in all cases, and instituting additional supervisory controls over detectives in the Sexual Assault Detail. These and other recommendations are discussed in detail in Chapter 4.

We also encourage all parties involved in the sexual response process to review the IACP Model Policy included as Appendix A of this report, and the Oregon Attorney General's SART Handbook which can be found at http://www.oregonsatf.org/SART/handbook.html. Excerpts of the SART Handbook are included as Appendix B of this report. These documents were used extensively in the preparation of this report and be used by practitioners to identify further improvements.
Chapter 1 Introduction

The magnitude of Oregon's sexual assault problem is considerable. According to a 2003 report, “one out of every six adult women, or about 230,000 adult women in Oregon, has been the victim of forcible rape sometime in her lifetime.” Sexual assault is also one of the most under-reported of all violent crimes in the United States. Various national estimates put the reporting rates for rape at between 16 percent and 33 percent.

It is imperative that Portland meet this challenge by recognizing the scope of the problem, identifying weaknesses in the current system, and taking steps toward implementing a best practice approach. This report is intended to be a step toward those goals.

In recent years, the State of Oregon has put forth significant effort to improve community response to sexual assaults. In 1999, the State Attorney General’s Office formed a task force of concerned citizens and professionals to develop strategies and promote an effective and consistent approach to responding to sexual assaults. Since that time, several important initiatives have been developed, including:

- The Sexual Assault Training Institute (SATI). SATI provides training to advocates, law enforcement, medical professionals, campus staff, prosecutors and offender management professionals.

- A framework for Sexual Assault Response Teams (SARTs). These are community-based teams of professionals from law enforcement and victim advocacy groups who meet regularly for the purpose of improving the response to sexual assaults.
The SATF works to promote a victim-centered response to sexual assault. A victim-centered response recognizes that victims must feel they are believed and trust the system will work for them, or they will not participate in the system. Indeed, victims often choose not to report crimes in the first place because they fear not being believed. The SART Handbook states, “It is critical to the success of the response...that victims believe that reporting and participating in the criminal justice system is a safe and viable option. If they do not... they will not willingly participate in the criminal justice response.” In our review of 62 cases investigated by the Police Bureau, we found that most cases were discontinued due to lack of contact with victims or lack of a victim’s interest to continue. Making a victim feel respected and valued will keep more of them in the justice system, improving investigations and positively impacting clearance rates.

The victim-centered approach recognizes that the victim is the center of the investigation, as in the majority of sexual assaults, the only witness to the assault is the victim themselves. For that reason, the investigation starts with the victim and their cooperation is necessary throughout the process to ensure a successful prosecution of the suspect.
What is sexual assault?

Each state specifically defines what constitutes sexual assault in their penal code, although most are similar in substance. Generally, sexual assault refers to unwanted sexual contact. The degree and manifestation of the contact determines the seriousness of the offense. In Oregon, each specific crime is defined in Section 163 of the Oregon Revised Statutes. The most serious crimes are “Measure 11” crimes which carry the most severe punishments. These crimes include rape, sexual abuse, and sodomy. Rape is generally considered sexual intercourse where force is used, or where the victim is incapacitated and not able to give consent. “Sexual Abuse” refers to unwanted sexual contact of any kind, including sexual intercourse where physical threats may not have been used, but the victim clearly gave verbal “non-consent”.

It is important to note that assaults by an acquaintance, and not by a stranger, are the most common type of sexual assault both in Oregon and nationally.

The sexual assault response process

The community response to a sexual assault can be divided into three primary phases.

First, the reporting of the incident and the initial response. In most cases a sexual assault is reported through the 9-1-1 system. Operators are trained to first provide needed emergency help, then to give instructions pertaining to bathing, washing clothes and other evidence processing. Typically, a patrol officer will be the first to respond to the victim. If the victim is not at a hospital, and an exam is considered necessary, the officer should provide transportation to a medical facility in order to ensure a safe trip.

Victims are normally processed through the emergency room area where they are treated for physical trauma if necessary. A forensic exam may be conducted if the incident is less than 84 hours old.

At this point, the patrol officer normally conducts the initial interview and a victim advocate should be notified. In all cases, it is important
that officers, advocates and medical personnel not be judgmental about whether the victim is truthful or whether the crime actually occurred.

In Oregon, hospitals can apply to the State's Sexual Assault Victims Emergency fund (SAVE) to be reimbursed for the cost of conducting the forensic exam only if the victim decides to report the incident as a crime.

Secondly, a follow-up investigation is conducted by an experienced detective. The detective may become involved during the initial response phase if the patrol officer feels additional expertise is warranted.

Not all cases are assigned for follow-up investigation. Each day the supervisor of the Sexual Assault Detail sifts through many reports weighing each one on the availability of detectives and the presence of solvability factors. After a case is assigned, the detective reviews the case and contacts the victim and witnesses. A thorough follow-up investigation should consist of witness interviews, lab analysis of forensic evidence, corroborating interviews and suspect identification. Detectives use various techniques to identify suspects such as polygraphs, sketch artist renderings of suspects, pre-text phone calls to try to elicit apologies or other information from suspects, and interviews of suspect associates.

Finally, if warranted, a case is prepared and submitted to the District Attorney's Office for prosecution. Prosecutors need thorough documentation to proceed with a case. A well documented report consists of complete records of all contacts made during the investigation, citing dates, times, and locations, all lab reports and analysis, as well as reports by the responding officer and other agencies if appropriate.

Figure 1 shows the various processes and responsible parties involved in handling sexual assaults. Trained, experienced, and compassionate professionals from the Portland Police Bureau, the Bureau of Emergency Communications, the medical community, the victim advocacy community, and the prosecutorial community are all needed to ensure a victim-centered process that works.
Figure 1  The sexual assault response and investigation process

Assault occurs

Reported to public safety agency (911, hospital)

Initial response / preliminary investigation (officer)

Advocate notified (MCVA, PWCL, SARC, etc.)

Follow-up Investigation (detective)

Forensic exam (if willing to report) (hospital)

SAVE Fund application

Case prepared/forwarded for prosecution (detective)

Forensic lab test (state lab)

Other resources: sketch artist, polygraph, fingerprinting

Prosecution (Multnomah County District Attorney)

Source: Audit Services Division review of various policies and procedures, and interviews with Police Bureau staff, local advocates (Multnomah County Victim Advocate Office, Portland Women’s Crisis Line, Sexual Assault Resource Center) and consultants.
**Local professionals work hard for improvements**

Since 2002 Multnomah County has had a SART Committee working to improve the response to sexual assaults. The committee members include professionals from the Multnomah County District Attorney’s Office, the Portland Police Bureau, the Gresham Police Department, Oregon Health and Science University, and various community advocate groups. We attended two of their monthly meetings.

It was clear that the committee recognizes some of the systemic problems we identify in this report and is working hard to make improvements. Examples of their current work includes efforts to expand the number of medical facilities offering high quality sexual assault exams, encouraging the training and availability of SANEs, and generally making the system more responsive to the needs of victims.

Police Bureau representatives, including the present and past supervisors of the Bureau’s Sexual Assault Detail, have been active members of the SART and the Attorney General’s Task Force.

**Portland Police Bureau’s Sexual Assault Detail**

The Portland Police Bureau’s Sexual Assault Detail is responsible for the City’s primary role in the sexual assault response system. It consists of a group of specially trained detectives and staff within the Investigations Branch. Along with the Homicide, Robbery, Fraud and Cold Case units, the Sexual Assault Detail’s primary mission is to identify and apprehend criminal offenders.

During most of our audit period, the detail consisted of five detectives, three trainees, one patrol officer temporarily assigned to handle sexual offender cases, one Police Administrative Support Specialist, and a supervising sergeant. Three of the Detectives are assigned to investigate adult sexual assaults, while one handles elder and vulnerable person assaults, and one handles repeat sex offender cases. We found that the staffing level in the Sexual Assault Detail has remained generally stable over the last eight years.

The detail is responsible for investigating Measure 11 sexual assaults involving victims 14 years of age or older, stalking complaints, incest and bigamy cases. Cases perpetrated by a stranger are the highest priority. Cases involving known suspects or acquaintances where the
victim is willing to prosecute are the next highest priority. According to reports from the Bureau, the number of reported cases in the major categories has declined significantly in the past ten years. The number of cases assigned for the past five years (the most complete data easily available from the Bureau) was widely variable as shown in Figure 2.

The “crime clearance rate” is the basic means for measuring the effectiveness of an investigative organization. The crime clearance rate is calculated by dividing the number of crimes “cleared,” either by arrest or exception, by the total reported offenses. A crime is cleared by exception when a suspect is identified but cannot be obtained because he or she is dead, out of the jurisdiction and beyond extradition, or perhaps already in jail for another offense. A crime can also be cleared when it is classified as “unfounded,” meaning there was no actual crime committed.

Data on reported sexual offenses are kept by the Bureau’s Records Division in a manner consistent with strict guidelines developed by

**Figure 2** Sexual assaults reported and assigned

![Figure 2 Sexual assaults reported and assigned](image)

Source: Sexual Assault Detail case management system.
the U.S. Department of Justice. The purpose of these federal guidelines is to allow comparability of data nationally and among local jurisdictions. The program is a cooperative effort of more than 17,000 jurisdictions nationwide, and has been administered by the FBI since 1930. Although there is some debate as to technical definitions and applications, the data set remains recognized as the most reliable compilation of data available for local comparisons.

For the six year period 1999 to 2004 (the last year for which data is available), Portland had the 20th lowest clearance rate for forcible rape among all 21 cities with populations between 500,000 and 1,000,000 (see Figure 3). In addition, data we received directly from the Bureau shows the clearance rates for all the major sexual assault categories have declined in the past ten years (See Figure 4). This has occurred as the total number of reported cases the detail is responsible for has declined.

The statistics above are percentages of cases cleared of all reported. We believe this is the most important measure to the community.

Representatives from the Bureau told us that it is also important to look at the number of cases cleared compared to those actually assigned. Although this is an important measure of individual detective productivity, we are convinced that it less important to the community at large compared to the total reported. Even so, we asked the Bureau to provide reports showing cases assigned and the manner cleared for the five year period 2002 to 2006.

According to that information, the rate for clearing crimes as a percent of those assigned ranged from 31 percent to 37 percent until 2006, when the clearance rate increased to 57 percent. However, a closer examination of the data shows that much of the 2006 increase was due to clearances in the sex offender category. Examples of sex offender cases are offenders who don’t register in a timely manner, or who relocate without giving proper notification and are subsequently arrested. When sexual offender cases are removed from the data, the number of cases cleared by investigative arrest actually declined from 40 in 2005 to 29 in 2006. According to the Bureau a patrol officer was temporarily assigned to the Detail in late 2005 specifically to handle sex offender cases.
Figure 3  Six year clearance rate - forcible rape: 1999-2004

Note: Honolulu data for 1999-2003 only.

Figure 4  Percentage of cases cleared, by type

Objective, scope and methodology

Our primary objective was to identify weaknesses in the sexual assault investigation system and make recommendations to improve declining clearance rates. During our review of literature, we learned that a great deal of criminal justice research has been done on the sexual assault process and that a major problem is keeping victims participating in what can be a long and trying process. It became clear that there are many points in the process where victims may find it desirable to drop out of the system, negatively affecting clearance rates. It was also clear that some aspects beyond the control of the sexual assault detectives determine whether cases are solved. Thus, our scope extended beyond a review of the Sexual Assault Detail and toward a review of the overall system of handling sexual assaults in Portland.

As the City’s Audit Services Division, we do not have authority to audit Multnomah County operations, OHSU operations, or the operations of any of the various community advocacy groups. However, we have made some general observations about their roles and include some recommendations for how the City of Portland may encourage these organizations or provide direct support in the form of funding or staffing.

In order to develop comparative clearance rate data, we requested Uniform Crime Report data from the U.S. Department of Justice. We compared Portland’s clearance rates for forcible rape to all cities between 500,000 and 1 million population. In addition, we analyzed assignment and clearance data given to us by the Sexual Assault Detail.

Unlike our previous audit of Police Investigations, which focused on management processes, much of this audit work concentrates on specific crime solving methods used by the Sexual Assault Detail. Because investigating crimes is a highly technical profession, we hired a consultant to review selected case files. The consultant has almost 20 years of experience in investigating sexual assaults, is an instructor for the State of Oregon Sexual Assault Training Institute, and was recommended to us by the Director of that institute.
Our consultant reviewed 62 randomly selected unsolved case files from 2002 through 2006 (almost 10 percent of all the unsolved cases during that period). We also reviewed many of the cases the consultant examined.

In order to determine the extent to which 9-1-1 call takers are dispensing the correct evidence collection advice to victims, we reviewed and listened to 55 rape calls to the 9-1-1 center from 2006. That represents over one-half of all rape calls to the center during that time period.

To establish comparative workload and staffing information for the Sexual Assault Detail, we contacted police department representatives from twelve of the twenty-one cities with populations between 500,000 and 1 million population. We gathered information on staffing, case assignments, organization, and local medical facilities.

In addition, we interviewed members of the Sexual Assault Detail and two of its supervisors, along with other high ranking members of the Portland Police Bureau. We also interviewed members of the local rape advocate community, one prosecutor from the Multnomah County District Attorney’s Office, and members of the State Attorney General’s Sexual Assault Task Force from around the State. Our consultant also interviewed Sexual Assault staff and members of the Police Bureau’s Patrol Branch to establish their perspective on the work of the Sexual Assault Detail.

This audit work was specifically recommended in our prior audit of Police Investigations. To our knowledge, this is the first local audit of its kind in the United States.

We conducted our work in accordance with generally accepted government auditing standards.
Chapter 2  The initial response

The initial response to a sexual assault is critical to the final outcome of the case and the efficiency with which it is investigated. Collecting evidence in a timely and professional manner, conducting a proper interview with the victim and witnesses, and accurately recording names, places and contacts can save time for detectives in the follow-up investigation. It can also save the victim from repeating her story, and reliving the event, more than is necessary. Perhaps as important is involving victim advocates and utilizing interview techniques that build trust in the victim. This will encourage them to continue with the justice process.

9-1-1 call response can be improved

Call-taking is an important component of the sexual assault investigative process. Collecting the right information at the beginning of the process can facilitate capture of a suspect by identifying them and making a quick apprehension near the crime scene, and can be vital in giving instructions to a victim or a caretaker on how to preserve evidence.

Regardless of the type of call, call-takers are trained to ask basic questions in order to get help started. That includes location of the victim, whether they need police, fire or medical assistance, and if they are injured. If the incident is an assault they also ask for the location of the suspect, for identification traits and whether or not a weapon was used.

Specific to sexual assaults, Bureau of Emergency Communication policy requires call-takers to advise victims not to bathe, and not to wash or destroy clothing or bedding.
In addition, the International Association of Chiefs of Police model guidelines recommend a call-taker proactively ask if the victim has bathed, douched, urinated or made other physical changes, and then to advise against doing so. The model policy also recommends the call-taker advise the victim to collect urine in a clean container if necessary. The victim should also be advised that the crime can still be reported even if they have bathed, urinated or changed clothes.

We listened to 55 of the total 109 calls from 2006 which were categorized as rape calls and categorized as relatively high priority (E,1,2). Each call was evaluated to determine: 1) whether the minimum requirements were met (that is, BOEC’s own policy of advising not to bathe, etc.); and 2) whether call takers gave additional advice such as that suggested in the model policy standards (see above).

We determined from our review that all calls did not present the opportunity to ask questions or give advice about bathing or cleaning. Some examples include calls where the crime was occurring or the suspect was still in close proximity, calls where the victim was so incoherent that only getting a location was possible, calls that were disconnected, and calls that were not actual sexual assaults. Of the 55 original calls, we believe about half presented the opportunity for the call-taker to give instructions about bathing and evidence preservation.

We found that call-takers, without exception, performed their jobs professionally and were not judgmental towards victims. Call-takers took time to calm callers and to assure them that help was on the way. In all but three cases, call-takers asked background questions about suspect locations and weapons. However, we also found that:

- In most cases call-takers did not follow adopted BOEC policy to advise the victim not to bathe, cleanse or destroy clothing and bedding. There were several instances when the call-taker may not have given advice because of extenuating circumstances. Examples included mentally challenged victims, calls from hospital staff (who the call-taker may have assumed knows sexual assault protocols), and intoxicated victims. However, in most cases if the victim was not lucid or was mentally challenged there was a third person to whom
instructions could have been given. In addition, according to our conversations with experienced victim advocates, some hospital personnel do not know correct procedure.

- In the five cases where the call-taker gave the required instructions not to clean, two instances of “wanting to clean” were mentioned first by the victim or caller.
- Call-takers never mentioned collecting urine in a clean bottle. However, this is not a part of the BOEC protocol. In one case where the call-taker mentioned bathroom needs, he advised the victim “not to go”, instead of giving collection procedure advice.

From our review we concluded that call-takers are not consistently following BOEC adopted procedure. In many cases they may assume that hospital staff know the evidence collection protocol, but that is not always the case. Also, calls sometimes come from outside locations where cleaning facilities are not present, or when a patrol officer response is imminent, making the instructions less important.

We recommend that BOEC advise call-takers to follow adopted policies and amend policies to be more consistent with recommendations in the IACP model policy. More detailed recommendations are found in Chapter 4.

The initial response to a sexual assault call is usually through the 9-1-1 system or through a hospital where a victim has already reported. In most cases the first contact with a public safety agency is with a police officer, whose primary duties include assessing whether the victim needs immediate medical attention, collecting evidence (if the officer is called to the scene of a crime), assessing the need for a response from a more experienced detective, transporting the victim to a hospital for an exam, conducting an initial interview, and writing a detailed report which is sufficient to relate the details of the crime and list possible witnesses and suspects. If done correctly, this can save time and effort for the detectives. If done incorrectly, detectives may have to locate and re-interview witnesses, and collect evidence
that may have degraded over time. An officer should also ensure that an advocate is called for the victim. It is imperative that officers not be judgmental about the victim or attempt to determine if a crime actually occurred.

Our consultant’s case review determined that patrol officers generally act in a highly professional and non-judgmental manner despite encountering victims in a variety of emotional and physical states. They also do a good job writing high quality reports. Reports contained excellent details of victim statements, observations of victim demeanor, and clear descriptions of persons involved. In addition, our consultant found that officers were proactive in engaging other units to assist with crime scene processing, they maintained surveillance of suspects, and gathered other information which, if communicated efficiently to detectives, could save substantial time.

It is not clear, however, that victim advocates are consistently notified. This is also supported by comments we heard from local advocates.

Rape victim advocates are a critical part of the system, helping victims navigate the justice system, providing access to an array of local services, and providing a consistent person who will listen, believe and empower them. When victims believe the response is more about them, and not about the report of the crime, they are more likely to want to report the crime and work with law enforcement.

Only 19 of the 62 case files reviewed specifically referenced advocate notification. It is possible that some advocate notifications were done, but not documented.

Best practice suggests that an advocate be notified in every case and be present during the initial stages of the investigation and/or at the hospital. The victim can refuse the help of the advocate once they are present.
Although exact statistics are not available for all area hospitals, it is widely accepted that most of the adult sexual assault examinations in Portland are conducted at the Oregon Health and Science University (OHSU). An indicator of the number of exams conducted at area hospitals is the number of SAVE fund applications made. In 2005 and 2006 OHSU submitted reimbursement requests for 230 sexual assault exams. The only other Portland facility to make any applications was Planned Parenthood of Portland with 5 total. Outside of Portland, Providence St. Vincent submitted 164 applications in the same period and Providence Milwaukie submitted 13.

OHSU is the primary provider of exam services because they were the first hospital to make a commitment to the process about 15 years ago. In general, OHSU has the best trained staff, facilities, and equipment in Portland to administer these exams. Although statistics are not available, we learned that some hospitals do occasionally conduct exams even though the assaults may never be reported to a public safety agency.

A good, victim-centered medical system is convenient for the victim. In addition, it should have enough staff to provide timely service, the proper equipment to conduct full exams to support investigations, and separate exam areas away from emergency rooms.

**OHSU’s location is not convenient for most victims or for police**

OHSU is located in Southwest Portland, atop the West Hills, and on the west side of the Willamette River. Parking and street access to the hospital facility is difficult because of the number of buildings on the OHSU campus and on-going construction. Officer transports from all over the city to OHSU’s hard to access southwest location can mean extra time away from regular patrol duties.

In addition, because OHSU is the most experienced provider of exams, victims are sometimes told they must be transported to OHSU for a more complete exam even after they have been through part of the process at another hospital. This is very frustrating to victims, and likely contributes to victims dropping out of the process.
We mapped the 108 rape calls made to 9-1-1 in 2006 and found that 72 percent of the calls came from east of the Willamette River (opposite from OHSU). Figure 5 shows that many calls came from locations in far east Portland, which means transit time of 30 minutes or more.

We know that victims chose to report to hospitals that are in close proximity to their homes or to where the crime may have occurred. Of the eight cases reviewed by our consultant where the victim reported to a hospital, none reported originally to OHSU, but rather to other area hospitals, presumably in more convenient locations.
Figure 6 shows the distribution of the same calls along with other hospitals in the area which could likely provide exam services. The shaded areas show that by adding only three other hospitals to the network, most of the calls we mapped would come within two miles of a facility. Others could be added, but would not be essential.

Access and convenience could be greatly improved by adding additional, well staffed and well equipped facilities. The SART is actively contacting these hospitals with educational materials and other contact information hoping to convince them to join a regional network.

If costs to the hospitals is a barrier, increased efforts on the part of the City administration might include helping purchase forensic
examination equipment and supplies for hospitals, or helping offset other costs associated with the exams. Equipment is relatively inexpensive. For example, forensic cameras to document physical trauma can be purchased for less than $2,000. A state-of-the-art digital camera system with sexual assault specific reporting software can be purchased for about $15,000. Evidence lockers, refrigerated units and other accessories can be purchased for several hundred dollars. Because investigations should improve with these enhancements, the City should be willing to either purchase them outright or create loan programs, or other financing options.

Multnomah County lacks a sufficient number of SANEs
It is best practice for sexual assault examinations to be conducted by Sexual Assault Nurse Examiners. These specially trained nurses have the skill, knowledge and experience to conduct thorough exams, maintain a victim-centered, compassionate approach, and collect forensic evidence in accordance with well-established protocols. Empirical studies have shown that SANE-collected rape kits are more thorough and have fewer errors than non-SANE kits. In addition, literature suggests that SANE programs increase both reporting and prosecution rates.

Although statistics are not available, anecdotal evidence suggests that victims may be dropping out of the process before they even report crimes due to lengthy waits for exams at OHSU. In some cases, victims may wait hours before a SANE is available to conduct an exam.

Our review of records supplied by the coordinator of the State SANE program shows that Multnomah County is understaffed with SANEs compared to other counties in the State. Figure 7 compares the number of SANEs to selected Oregon counties.

During the audit, we learned that an additional 10 OHSU nurses were receiving SANE training. However, our analysis of comparative county population shows that 10 additional certified SANEs will only improve Multnomah County’s service level ranking from 30th out of 36 counties to 28th.
More trained SANEs would improve the timeliness of exams for victims, mean less time off of regular patrol duties for officers, and ensure professionally conducted exams that will facilitate investigations.

### Figure 7  SANE staffing comparisons for selected Oregon counties

<table>
<thead>
<tr>
<th>County</th>
<th>Total SANE(s) trained and/or certified</th>
<th>Population</th>
<th>% of Total SANE(s) per county population</th>
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Source: State Attorney General’s Sexual Assault Task Force, SANE Coordinator, PSU Center for Population Research, and Audit Services Division analysis.
Chapter 3  **Follow-up investigations**

In order to improve the clearance rate for sexual assault cases, it is necessary to have a sufficient number of well-trained, well equipped, and motivated law enforcement professionals. We also believe it is critical to do what is necessary to keep victims engaged in the process, continuing on through to prosecution. When victims drop out of the process the case remains unsolved and may never be cleared. Maintaining such a pro-active, victim-centered system requires great energy on the part of detectives and supervisors who manage the process.

We found in our review of unsolved cases that investigators sometimes place the burden on the victim to keep the process going. Indeed, a common ending to the cases we reviewed was when the victim could not be reached by telephone, could not provide leads, or decided not to pursue a case after lengthy delays.

Much of this chapter is based on the review of 62 unsolved detective case files from 2002 to 2006. We realize that the unsolved cases do not represent a complete picture of the work of the Sexual Assault Detail. If we undertook an exhaustive examination of solved cases, we might have noted many well done investigations. However, our objective was to determine if there were common elements in unsolved cases, that if addressed differently may have resulted in a higher clearance rate. To that end, we recognize this limitation. However, since the number of unsolved cases by far outnumber the solved ones, we think the recommendations here can be applied to the general work of the detail. According to the Bureau, this body of cases represents ones with inherently the least likelihood of clearance.
Management does recognize some of the issues presented in this chapter and told us they have taken steps to improve record-keeping and to encourage Detectives to meet victims wherever it is convenient for the victim.

Factors contributing to a well-conducted investigation include:

- **Timeliness** - Timely collection of evidence and interviewing of victims, witnesses and suspects is the lifeblood of an investigation. The likelihood that a case can be solved drops dramatically when a case is delayed: memories of witnesses fade, evidence degrades or is misplaced, suspects change locations. In fact, forensic exams are not even conducted if the incident is over 84 hours past.

- **Convenient, compassionate dealing with victims** - In order to stay engaged in the system, victims must trust that the system is working for them. They must not have the burden of the investigation placed on their shoulders.

- **Use of standard investigative techniques** - Standard techniques are taught to detectives and are outlined in best practice literature. Techniques such as pre-text phone calls, location of “outcry” witnesses, and investigative tools such as polygraphs, should be used whenever possible.

- **Effective use of information from the initial investigation and coordination with other Bureau resources** - Detectives have access to detailed reports filed by officers from the initial investigation which could contain critical information about the crime scene, witnesses etc. which could speed an investigation to completion.

- **Complete documentation** - Case files should contain detailed information from lab reports and contacts with other agencies. This aids prosecution and enables another detective, picking up the case at a later date to efficiently pick up where the investigation left off.
Time is critical to an investigation. Of the 62 unsolved cases our consultant reviewed, 37 went unassigned for seven days or more. Several cases exceeded more than a month before assignment. The Detail supervisor, who makes assignments, has three month-old cases awaiting assignment.

In one case, a crime involving the sexual assault of a juvenile was reported in June. After not hearing from the Bureau for a week, the victim’s relative went to the local police precinct office and was given a supplemental report form to fill out herself. The relative states in the report she had not had contact with anyone from the Bureau and asked for someone to please contact her. The case was finally assigned in October, but the victim had changed her mind about reporting the incident. Our consultant states that this may be due to the amount of time that passed since first reporting the incident.

It is important that the system operate with the needs of the victim in mind. This lets the victim know they are valued and builds trust that the system will give them the support they need to get through a trying, complicated justice process. Without such trust victims often drop out, leaving cases unsolved.

Even though it is sometimes desirable to conduct interviews at a neutral site such as a local precinct office (in this case the Justice Center in downtown Portland where the Detective Division is located), this is many times not convenient for the victim. We recognize it is not always necessary to go into the field for interviews, especially in cases that have not been assigned on a timely basis and the crime scene is cold, but the importance of field inspection of crime scenes cannot be overstated. One expert goes so far as to say this is a threshold requirement; that no case can be called truly complete unless the investigator has visited the crime scene.

Despite the acknowledged inconvenience of the Justice Center location, few of the victims in the cases our consultant reviewed were interviewed by Detectives in neighborhood locations, although some were interviewed at hospitals. Detectives’ routine procedure was to
Sexual Assault Response

make several attempts to contact victims by phone. If the victims did not return the calls or refused to come downtown, cases were typically set aside.

Best practice for investigative techniques and standard training for detectives outline several methods typically used by detectives to develop leads and solve cases. A few of these are:

- **Pre-text phone calls** - These are calls made by the victim to the suspect to elicit information about the assault and perhaps an apology.

- **Identification of “outcry” witnesses** - Outcry witnesses are people the victim may have confided in just after the assault. They can sometimes give valuable information about the state of the victim just after the assault, and other types of helpful information.

- **Identification and interview of suspect associates** - Suspects often brag about their offenses or otherwise confide in others. Locating and interviewing these associates can be critical.

- **Use of polygraphs and sketch artist renderings**

Our consultant saw little use of these techniques, despite several instances where they may have been effectively used. It is worth noting as a reminder that most cases reported to the Detail are acquaintance assaults (meaning there was some relationship between the victim and the assailant), yet in only three of the 62 reviewed cases was a suspect contacted by a detective. (The Detail's supervisor told us that his interpretation of the same case files showed that more suspects were contacted than were identified by our consultant.)

In one case, detectives put in a great deal of interview work, but suspended work on the case when suspects and their attorneys failed to cooperate. Our consultant and a representative from the District Attorney's Office believe the case might have benefited from using pre-text phone call methods.
In another case, even though detectives were given the suspect’s first name, the (past) high school he attended and a cell phone number, the detective apparently made no attempt to locate an old yearbook to establish a photo identification. He also did not pursue the cell phone number because it was not a Portland area prefix. The victim was asked to encourage witnesses to contact the Bureau and to develop her own leads. The detective wrote that the case would be suspended until then.

In a third case, the Detective was given the first name of the suspect, his place of employment, and a cell phone number, yet the case file gives no indication the suspect was ever contacted.

Complete case files are important because they give a precise chronology of the work done on a case, they help prosecutors make good cases and they enable someone else to pick up the investigation at a later date and continue effectively. Without such documentation a detective might duplicate work and hinder the future investigation of a case.

In at least two instances where suspects were identified and located by patrol officers, no record exists of who was contacted or what happened to the case.

In another case involving a report from a state of Washington agency, a Portland teenage runaway was possibly being held against her will and employed as a prostitute. The woman made a call from a phone asking for help. No follow-up documentation exists in the file describing how the Portland police responded. There is also no information about the disposition of the case. The Detail’s supervisor says he remembers this case being referred to another agency.

Of the 62 reviewed cases, only five contained any narrative from a lab technician, and none had accompanying lab results from the Oregon State Police, despite several cases where the OSP lab was apparently used.
Organization charts we obtained from the Police Bureau show that the staffing level in the Sexual Assault Detail over the past eight years has been relatively steady. In addition, the number of annually assigned cases per detective is in line with other agencies we contacted.

During the last eight years, the Sexual Assault Detail has had a fairly steady staffing level of between five and six full time, fully trained detectives. Although our research has shown no standard measure for the appropriate caseload for the “average” detective, of nine cities from which we obtained assigned case data, the median annual caseload per detective was 54, compared to Portland’s five year average of 56.

However, recent personnel changes in the Sexual Assault Detail and pending changes in the Detectives Division in general may be cause for alarm. Late in our fieldwork we learned of personnel movements within the Detectives Division that could seriously affect the Detail’s ability to improve clearance rates. The Sexual Assault Detail is losing one detective through transfer, while two trainees, who were nearing the end of their probationary status, are transferring to other units. The Detail’s supervisor indicated he was aware of no other detectives interested in transferring into his unit. He indicated that detectives in other units are also waiting for assignments outside the Detective Division.

We reported in a previous audit that the Detective Division was understaffed compared to other comparable cities we contacted. In the two years since that prior audit, the number of detective positions has actually decreased from 90 to 88. While staffing levels in the Sexual Assault Detail are not totally out of line with other agencies, personnel demands in an already understaffed Detective Division could result in more transfers out of the Detail, likely worsening their performance.
Many factors could explain why cases assignments are delayed, and why detectives might not use the standard techniques available to them in pursuit of these cases. It could also be argued that a more complete review of all cases, including those solved, might reveal a tremendous amount of good quality, timely, detective work. However, our objective is to make recommendations to improve the low clearance rate for sexual assaults. As such, we believe our review of weaknesses in the unsolved cases and possible contributing factors is the best method to improve that rate. In the following section, we review several factors that may hinder detective work and result in lower clearance rates. Those are:

- **Turnover/Lack of experienced detectives.** During the past eight years, the turnover rate for fully trained detectives in the Detail has ranged widely between 33 percent and 60 percent. We were unable to obtain turnover rates for other cities, but we know this is slightly higher than the 17 percent to 50 percent turnover rates we reported in our last audit for other Detective Division Details. Only two detectives have five or more years experience in the Detail.

  In addition, in the past eight years, the Detail has had five supervisors. In our last audit virtually every Detective we spoke with said that turnover in the command ranks caused problems obtaining needed resources, and took valuable time away from their regular duties to provide on-the-job training.

- **Morale/enthusiasm.** It is important that a Detective unit be staffed with enthusiastic professionals. Detectives we spoke with as well as those interviewed by our consultant indicated that the Sexual Assault Detail is not a generally desirable assignment. In addition, Portland detectives in general complain about being stationed at the Justice Center. They complain about a lack of parking, and that detectives in the precincts (property detectives) are given the opportunity to work preferential shifts, including 4/10s. Many Detectives who do come to work in the Sexual Assault Detail are waiting until other assignments open elsewhere in the Detective Division, or to property crimes investigations, which are located in the various precincts.
• **Antiquated report routing procedures.** A likely factor contributing to cases that are somewhat delayed in assignment (approximately seven days) is the antiquated system of report routing in the Police Bureau.

When officers write initial reports, they are generally faxed to the Records Division where they are assigned case numbers. Copies of the report are made and they are routed through inter-office mail to the appropriate units within the Bureau. This typical routing procedure can take anywhere from four to eight days. In high priority cases, where a detective is the first responder, the Detail has the report immediately.

Recent improvements whereby the Records Division scans written field reports into an electronic database for immediate retrieval by users in the Justice Center, represent a significant step toward a full electronic reporting system. In our recommendations (Chapter 4), we encourage the Bureau to continue its work on electronic field reporting.

• **Need for additional, specialized training.** Like many Detective functions, sexual assault investigations demand specialized training. In many acquaintance assault cases, which comprise the majority of cases, specialized interview techniques are needed to even establish whether a crime occurred.

Our consultant reviewed training records supplied by the Training Division of the Bureau and found that Detectives had, on average, about 70 hours of job specific training. We found our training requirements to be similar to those in other cities we contacted. Our consultant, however, noted a lack of training in specific subjects relating to suspect interview and interrogation techniques.
Dealing with sexual assaults is a community justice issue. It is not just a law enforcement issue (although that is where the City of Portland’s primary role lies in the current system). Best practice to deal with sexual assaults is to create a victim-centered approach where the needs of the victim are at the center of the process. Research shows that when victims’ needs are met they are more likely to stay involved with the criminal justice system, and more offenders will be apprehended and brought to justice. When victims feel they are not believed, or otherwise do not trust that the system will work for them, they tend to drop out of the process. This puts the community at risk to re-offenders.

Despite the on-going efforts of a dedicated community of law enforcement personnel, prosecutors, victim advocates and medical personnel, our system has many improvements to make to achieve the goal of a victim-centered process.

Unfortunately, because of the overlapping responsibilities of these government and nonprofit institutions, it is impossible to mandate change centrally. It is the intention of our recommendations to encourage the City of Portland to increase its effort to support these groups by committing personnel and funding if necessary. As we discuss in the recommendations, moderate expenditures could make a great difference.

Because the local Sexual Assault Response Team is already working on many of these issues, and because city residents in general, and the Police Bureau in particular, would benefit from a more victim-centered system, we make the following recommendations to support these community efforts.
In order to improve the initial response to sexual assault calls, we recommend the Commissioner-in-Charge direct the Bureau of Emergency Communications to:

1. **Advise call-takers to follow adopted policy concerning bathing, cleaning and destroying evidence.**

   Instruct call-takers to give advice to all callers when appropriate and when given the opportunity. This includes medical personnel and persons who may be caring for a victim before police or an advocate arrives to assist. Obviously, this may not be possible or appropriate in certain instances, such as when the caller is not lucid and is not being assisted by another person, or when a police response is imminent.

2. **Amend the existing policy to add advice to the victim that the crime can be reported even if they have cleaned or bathed.**

   This follows the IACP model policy.

We recommend the Mayor’s Office direct the Portland Police Bureau to:

3. **Instruct first responders, whether they are officers or detectives, to always notify a victim advocate.**

   This should occur at the first opportunity and then at several other points in the process. These calls should be documented in the initial report. Advocates should be called as a matter of course, and can be refused by the victim once they are on scene. This follows the State Attorney General’s best practice policy. Supervising Sergeants in the precincts who review initial field reports should ensure this is done.
To improve the medical community response, we recommend the Mayor’s Office work with the SART to support the following initiatives already underway by the SART:

4. **To expand the number of hospitals offering high quality, full forensic exams to victims.**

The SART has sent letters of introduction to several local hospitals offering to meet with them and provide educational materials concerning the community benefits of offering these services. As we demonstrated in Chapter 2, although a network of all hospitals might be a good thing, the addition of only three more to the system could provide significantly improved coverage for victims.

If costs to the hospitals is a barrier, increased efforts on the part of the City administration might include helping purchase forensic examination equipment and supplies for hospitals, or helping offset other costs associated with the exams. Equipment is relatively inexpensive. For example, forensic cameras to document physical trauma can be purchased for less than $2,000. Evidence lockers, refrigerated units and other accessories can be purchased for several hundred dollars. Because investigations should improve with these enhancements, the City should be willing to either purchase them outright or create loan programs, or other financing options. The City may also consider direct contributions to the Sexual Assault Victim’s Emergency (SAVE) Fund.

5. **To increase the number of Sexual Assault Nurse Examiners (SANEs) at local hospitals.**

City representatives should work with the SART to identify ways to increase the number of area SANEs. Efforts might include funding scholarships or other SANE training activities.
In order to improve the investigative response by the Sexual Assault Detail and increase the number of cleared cases, we recommend the Mayor’s Office direct the Portland Police Bureau to:

6. Improve the antiquated system of report routing.

Timely reports to the Sexual Assault Detail are critical. Recent improvements to the availability of on-line records through Records Division imaging of reports is a significant step, but more should be done. In the interest of all detective details, the Bureau should move forward with an electronic field reporting system to ensure incident reports are available to detectives as soon as possible. These systems are in use in other Police Departments.

7. Protect the number of Sexual Assault Detectives.

It is critical to have an appropriate number of specially trained detectives to respond to sexual assaults. While our calls to other agencies indicated that the detective case load is about average, any reduction in the work force now could dramatically affect the Detail’s ability to solve more crime.

8. Formalize the review of individual case files by the Sexual Assault supervisor.

A formal case review sheet should be developed to consistently document case details and measure detective work against established standards for completeness and routine investigative procedures. This will allow the supervisor to document employee work for corrective action or even for commendation. The supervisor would not have to review all cases in detail, but could pay special attention to employees who may need additional coaching or training opportunities. Additional personnel documentation will allow new supervisors to quickly evaluate the detail’s performance on a group and individual basis.
9. **Recommendations**

   **Require better case documentation, including developing a more concise case management form.**

   A consistently used case management sheet can be used as a summarized activity cover sheet for a case file. This will enable a detective to keep track of their own work, and pick up a case more easily when there are periods of inactivity. It would also enable another detective who later picks up a case to begin work more efficiently. A consistently used cover sheet is also a tool for the supervisor to monitor the work on a case and offer advice or guidance.

10. **Continue to encourage Detectives to offer to meet victims at alternative locations to meet victim needs.**

    In addition to methods such as providing taxi fare, bus fare or other transportation for victims, the Bureau should consider providing temporary work spaces for detectives at various neighborhood locations, such as precincts and community centers. To foster a more victim-centered process it is critical for the victims, police officers and detectives to be in convenient proximity. Victims would be more easily contacted and find it easier to respond to requests for information if detectives were closer to their neighborhoods. In addition, this would be significant step forward in community policing.

11. **Provide additional training for sexual assault detectives in interviewing, lead development, and other sexual assault-specific techniques.**

    Courses are taught by the Sexual Assault Training Institute and by other private providers of nationally recognized coursework.

    We also encourage all parties involved in the sexual response process to review the IACP Model Policy included as Appendix A of this report, and the Oregon Attorney General’s SART Handbook which can be found at http://www.oregonsatf.org/SART/handbook.html. Excerpts of the SART Handbook are included as Appendix B of this report. These documents were used extensively in the preparation of this report and be used by practitioners to identify further improvements.
Sexual Assault Response
I. PURPOSE

The purpose of this policy is to provide officers and investigators with guidelines for responding to reports of sexual assault, assisting victims, collaborating with local health and service agencies, and conducting interviews with victims, witnesses, and suspects. Because of the special needs involved in sexual assault investigations, this policy is an all-inclusive document that covers first response, investigation, and prosecution.

II. POLICY

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.

III. DEFINITIONS

Sexual Assault. As used in this policy refers to felony crimes of sexual violence. Specific statutory definitions of sex crimes vary by state. In most states, crimes of felony sexual assault include one of the following sexual acts:
- Penile-vaginal intercourse
- Contact between the genitals and mouth
- Contact between an anus and a penis
- Penetration of the vagina or anus with a foreign object

Sexual assault generally constitutes a felony when one of the following conditions exist:
- Force was used or threatened, even if there is no bruise or injury to the victim
- The victim was afraid, even if this did not lead the victim to physically resist
- The victim was disabled and could not legally give consent (that is, the victim could not understand the nature or condition of the act due to illness or disability)
- The victim was severely intoxicated or unconscious as a result of drugs or alcohol and was therefore unable to give informed consent at the time of the sexual act
- The victim was under the age of legal consent at the time of the sexual act

Victim Advocate. This generic term may apply to a wide range of service providers, rape crisis counselors, social workers, victim witness providers within a prosecutor’s office, and law enforcement officers, including departmental victim assistants. Depending on the primary functions of these different advocates, the levels of confidentiality and privilege they have will vary and should, therefore, always be understood by each member of the sexual assault response team and communicated to the victim.

IV. PROCEDURES

A. Dispatcher or Call-Taker Response

1. Due to the trauma of a sexual assault, a victim reaching out for assistance may be in crisis. The victim’s behaviors 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.
2. When a caller reports a sexual assault, communications personnel shall 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 shall also be obtained.

3. To ensure critical evidence is not lost, communications personnel shall:
   a. Ask whether the victim has bathed, drenched, urinated, or made other physical changes and advise against doing so
   b. Ask the victim to use a clean jar to collect the urine should the victim have to urinate
   c. Let the victim know that other evidence may still be identified and recovered so the crime should still be reported if the victim has bathed or made other physical changes
   d. Preserve the communications tape and printout for the investigation
   e. Explain to the caller that these questions will not delay an officer’s response to the caller’s location

B. Initial Officer Response

1. Emergency Response
   As part of the emergency response, officers shall:
   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 and supervisors, including any possible language barriers
   d. Secure the crime scene to ensure that evidence is not lost, changed, or contaminated
   e. Request assistance from detectives, field evidence technicians, crime laboratory personnel, and the prosecuting attorney when appropriate
   f. Begin a search for the suspect when appropriate

2. Assisting the Victim
   As part of the emergency response, officers shall:
   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. Contact a victim advocate as soon as possible to provide assistance throughout the reporting and investigative process.
   d. Supply victims of sexual assault with the phone number for the Rape, Abuse, and Incest National Network (RAINN) Hotline, 1-800-656-HOPE. Operators at this hotline connect the caller with the rape crisis center closest to the victim’s location.
   e. Request a response from investigations, and clearly explain his or her role and limit the preliminary interview so that the victim is not then asked the same questions by a detective.
   f. Be aware that a victim of sexual assault may bond with the first responding officer. It is important to explain the role of the different members of the sexual assault response team and help with transitions through introductions.
   g. Record observations of the crime scene, including the demeanor of the suspect and victim and document any injuries or disheveled clothing.

3. Evidence Collection Issues
   a. Officers shall request assistance or direction from crime scene technicians and forensic scientists.
   b. Responding officers shall protect the integrity of the evidence and guard the chain of custody by properly marking, packaging, and labeling all evidence collected, including:
      (1) 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)
      (2) Photographs and 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
      (3) Diagram of the crime scene(s)
   c. When an investigating officer suspects that 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 shall 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 shall not coerce victims to go to the hospital or to provide samples for drug screening.

e. 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, officers shall:

(1) Use sterile gloves and change as needed
(2) Use sterile swabs, papers, solutions, and tools
(3) Package evidence in individual envelopes
(4) Avoid touching the area where potential DNA evidence may exist
(5) Avoid talking, sneezing, and coughing over evidence
(6) Air dry evidence before packaging
(7) Put evidence into new paper bags or envelopes, not plastic

f. The sexual assault evidence kit shall be accepted from the medical staff after it has been properly sealed and labeled.

(1) The kit will contain whole blood that requires that the kit be placed and logged into an evidence refrigerator as soon as possible. The kit may also contain a urine sample for toxicology testing. If it does, the urine sample shall also be refrigerated.

(2) Investigating officers or supervisors shall have access to the evidence refrigerator after regular business hours, on weekends, and on holidays.

(3) The kit shall not be allowed to freeze or be exposed to heat such as being near a car’s interior heater.

4. Stranger vs. Nonstranger Assaults

Responding officers shall be familiar with common defenses to the charges of sexual assault.

a. Nonstranger Assault

The majority of nonstranger sexual assaults result in a consent defense. Thus, evidence of particular importance includes:

(1) Evidence of physical or verbal resistance on the part of the victim
(2) Evidence of genital or nongenital injury
(3) Detailed account of the victim’s thoughts and feelings during the assault

4) Information regarding the suspect’s size and strength in comparison to the victim’s

5) Information regarding the environment in which the assault took place (such as isolation, soundproofing)

6) Information regarding the victim’s behavior after the assault, including posttraumatic stress

b. Stranger Assault

Evidence in stranger sexual assaults often center on a question of identification pending the processing of DNA evidence. Therefore, investigative strategies must remain flexible. An identity defense will typically include latent fingerprints, line-ups, DNA, and trace evidence.

5. 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 that there may be multiple crime scenes. It is especially important that the first person the victim told about the sexual assault be identified and interviewed.

6. Documentation

Any officer who interviews a witness or a suspect, identifies evidence, or processes a crime scene shall write his or her own report detailing the actions he or she took. These supplemental reports shall be compiled by the first responding officer for the follow-up investigation regardless of whether an arrest is made.

C. Preliminary Victim Interview

Sexual assault investigations typically include both a preliminary and subsequent in-depth interview with the victim. The preliminary interview is intended to establish whether a crime has occurred. In the initial response, the officer shall first establish the elements of the crime(s) and identify any and all witnesses, suspect(s), evidence, and crime scene(s). The officer must understand and the report indicate that the preliminary interview is not intended to be a comprehensive or final interview. Additional interviews will be needed as the investigation develops.

1. Involve a Victim Advocate

Every effort shall be made by the investigating officer to contact a victim advocate as soon as possible. If the victim declines assistance from an advocate, the investigator shall provide the victim with written referrals for community resources specifically designed to help victims of sexual assault.
2. Victim Interview Protocol
   a. 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.
   b. The victim’s response to the trauma of a sexual assault shall 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.
   c. Interviews shall be conducted promptly if the victim is coherent and consensual.
   d. Proceeding with or conducting a thorough investigation shall not be contingent upon laboratory findings.
(1) Investigators shall:
   - Remain patient and maintain an open mind while listening to the victim’s account
   - Remember that victims may struggle with gaps in memory
   - Avoid leading questions while conducting the interview
   - Use simple terminology appropriate to the victim’s age, sophistication, and intelligence
   - Avoid using jargon or police, medical, or legal terms
(2) Prior to initiating the interview, the officer shall:
   - Interview any witness who might have seen or spoken with the victim before, during, or after the assault
   - Accommodate the victim’s request for a rape crisis advocate or support person whenever possible
   - Take responsibility for excluding a support person when appropriate and offer the victim and support person an explanation
   - Secure a private location for the interview that is free from distractions
   - Express sympathy to the victim and an interest in the victim’s well-being
   - Inform the victim of the need and importance of full disclosure of any and all recent drug use
(3) During the interview, the officer shall:
   - Obtain contact information for the victim, including temporary accommodations
   - Explain the nature of the preliminary interview and the need for follow-up contacts
   - Ask victims to explain what they remember and how they felt
   - Revisit the possibility of a support person for victims who initially declined the offer
   - Explain that other professionals such as forensic examiners, detectives, evidence technicians, and prosecutors may have additional questions
(4) At the conclusion of the initial interview, the officer shall:
   - Give the victim the investigator’s contact information
   - Encourage the victim to contact the investigator with any additional information or evidence
   - Remind the victim that visible evidence of injury may appear later, and to contact the investigators for additional photographs or other documentation
   - Ensure that requests for victim protection orders are made where indicated
   - Provide written referrals for victim service organizations
   - Provide transportation when reasonably possible
   - Inform the victim about next steps in the investigation
3. Protecting Victim Rights
   a. Throughout the investigation of the case, officers shall protect the confidentiality of the victim’s information to the maximum extent possible by law and policy.
   b. In addition, victims should be provided information on:
(1) The rights of a crime victim
(2) How to contact police if harassed or intimidated by the suspect(s)
(3) How to obtain written permission from the victim prior to releasing information
(4) The definitions of information that is part of the public record and confidential
(5) The possibility of media coverage and information the media has access to regarding sexual assault crimes
4. Arrest and Prosecution Decisions
   In the immediate aftermath of a sexual assault, a victim shall not be expected or encouraged to make decisions regarding the investigation or charges related to the offense. Officers shall not introduce any forms for a victim to sign to
5. Delayed Reports
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 shall inquire about and document the reasons for a delayed report, while avoiding questions that could be perceived as judgmental or accusatory.

D. Forensic Examinations for Victims of Sexual Assault
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 92 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.

1. Investigating Officer Actions
   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. Explain the purpose of the forensic examination and its importance to the investigation and provide the victim with information on the procedure
   d. Inquire whether the victim will consent to a forensic examination
   e. Inform the victim of the right to decline any or all parts of the examination
   f. Explain to the victim the potential consequences if any part of the examination is refused
   g. Notify a victim advocate to offer the victim support when a forensic examination is to be conducted
   h. Transport the victim to the designated medical facility if a forensic examination is warranted and the victim consents
   i. Advise the victim that the forensic examiner will collect any clothing that was worn during or immediately after the sexual assault
   j. Assist in arranging for clothing the victim may need after the examination
   k. Seek permission from the victim to collect a urine sample for drug screening
   l. Obtain a signed release from the victim for access to medical records
   m. Encourage a victim who is unwilling to undergo a forensic exam to get medical attention including testing for pregnancy and sexually transmitted diseases

2. Coordination with Forensic Examiner
Responding officers shall coordinate with other professionals such as forensic examiners and criminalists to determine whether a forensic examination is indicated.
   a. When a forensic examination is indicated, the investigating officer shall brief the examining nurse or physician about the details of the sexual assault, as they are known at that time.
   b. 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.
   c. The nurse or physician shall brief the investigating officer at the conclusion of the examination.
   d. The police report shall contain a copy of the forensic exam, if available, and a summary of the findings that note significant information or injury. After the examination, all the evidence shall be transferred to the department for storage.

3. Presence of a Victim Advocate
When it is determined that a forensic examination will be conducted, a victim advocate or a support person of the victim's choosing shall be allowed to be present in the room and during the interview, unless it would be harmful to the investigation. The officer shall take responsibility for excluding a support person, when appropriate, and providing an explanation to the victim and the support person.

4. Drug-Facilitated Sexual Assault Considerations
   a. If a drug-facilitated sexual assault is suspected, it is critical to obtain a urine sample from the victim as soon as possible. If it has been less than 24 hours since the time of the assault, also obtain a blood sample in a grey-top tube.
   b. Protocols for responding to illegal substance abuse by victims (including underage drinking) shall be followed and never used to discredit or discourage the victim from reporting the assault. The department priority is to conduct a thorough investigation of a sexual assault rather than prosecute victims for misdemeanor violations.
   c. Because of the delay in reporting most sexual assaults, laboratories capable of testing urine and blood samples at very low levels for those drugs commonly used to facilitate sexual assault are essential.
5. Reimbursement for the Examination
   a. The department will not pass the cost of the forensic exam onto the victim of a sexual assault, but shall seek sources of financial support from the community or state for these expenses
   b. Officers shall not use the state compensation program as means to encourage cooperation from victims
   c. In the case of a victim who is unable at this time to proceed with an investigation, financial concerns shall be addressed prior to the examination

E. Follow-Up Victim Interview
   Prior to a follow-up interview, the investigating officer shall consult with agency personnel who responded to the scene, retrieve communications tapes and printouts, and review all reports. The officer should coordinate with relevant agencies, assistance organizations, service providers, or sexual assault response professionals to address the needs of the victim and to discuss the best means for keeping the victim informed.

1. Investigative Strategy
   In preparing for the interview, the investigator shall develop an investigative strategy based on the nature of the assault and the possible defenses available to the suspect (such as denial, mistaken identity, or consent). This strategy shall guide the questions and other evidence collection efforts. Critical evidence collection efforts include evaluating whether a pretext phone call is appropriate and re-photographing injuries to document changes in visible injuries.

2. Follow-Up Interview Protocol
   a. An in-depth follow-up interview shall be conducted after the victim has been medically examined and treated, and personal needs have been met.
   b. 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 interview shall be delayed.
   c. Arrange for equipment to tape record or videotape the interview so the officer can focus on listening.
   d. The interview shall be conducted in a location that is convenient, accessible, and comfortable for the victim. The investigator shall provide or arrange for transportation for the victim when needed.
   e. At the start of the follow-up interview, the officer shall:
      (1)Discuss the purpose and scope of the interview
     (2)Review contact information for both the victim and investigator that may need to be updated
     (3)Explain the victim’s rights, including confidentiality
     (4)Explain the need to tape record or videotape the interview and request the victim’s consent
     (5)Address arrest decisions including an explanation of the status of the case
   f. While conducting the follow-up interview, the officer shall:
      (1)First allow the victim to describe what occurred without interruption
      (2)Relay what he or she heard for accuracy, identify new information or developments, and ask questions
      (3)Clarify any inconsistencies with earlier accounts of the sexual assault in a nonthreatening manner
      (4)Document the victim’s actions in response to the attack, the victim’s state of mind during the attack, specific statements made by the perpetrator, and the nature of any relationship with the suspect and explain the importance of these questions from a prosecutorial standpoint
      (5)Inquire about any circumstances that may indicate the use of a drug to facilitate the sexual assault (such as whether the victim experienced any loss of memory, disorientation, severe illness, or hallucinations)
      (6)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
   g. Once a thorough follow-up investigation has been completed, the investigating officer shall:
      (1)Evaluate impounded evidence and determine which items might have probative value based on the statements and other information
      (2)Submit a lab service request such as DNA, biology, trace, or toxicology based on the assessment of the evidence
      (3)Present the complete case file including forensic results as soon as available to the prosecuting attorney for review and work with the prosecutor’s office to develop the case
      (4)Encourage the victim’s continued sup-
port in the investigation, apprising the victim of future investigative and prosecutorial activities that will or may require involvement
(5) Familiarize the victim, prior to trial, with the types of defense strategies and inquiries that may be made during cross-examination

3. When Lacking the Victim’s Involvement
This department shall respect a victim’s inability, or decision not, to be involved in criminal justice proceedings and always be willing to offer continued assistance and referrals.

F. Contacting and Interviewing the Suspect
1. The investigating officer(s) shall follow department procedures on identifying the suspect, conducting the suspect interview, and collecting evidence in a sexual assault investigation.
2. Involvement of a victim in a pretext phone call to the suspect should take into consideration the victim’s emotional and physical state. A victim advocate should be present whenever possible to offer support.

G. Sexual Assault Forensic Examination for the Suspect
This department will work with other agencies and community organizations to establish protocols regarding where the forensic examination of the suspect will take place, who will pay for it, and what steps will be involved. It is essential that the victim and suspect examinations must take place in different locations.
1. Protocol for Suspect Examination
   a. Immediately after the preliminary suspect interview, the investigating officer shall determine whether a forensic sexual assault examination should be obtained for the suspect.
   b. 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, documentation of voluntary consent shall be provided in the police report.
   c. The investigator shall clearly document the suspect’s freedom to decline any part of the examination and to leave at any time.
   d. First-line officers and supervisors shall be trained to collect cells from inside a suspect’s cheek for DNA profiling. Cotton-tipped swabs or other buccal DNA collectors shall be readily available to investigators in the field.
2. Evidence Collection
   a. The forensic examiner shall document the suspect’s medical history, document all injuries that are observed, and collect biological and trace evidence from the suspect’s body
   b. If in custody, the suspect shall be given a Miranda warning before being asked medical history questions by the forensic examiner or investigator
   c. 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
   d. Both the examiner and attending officer shall 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

H. Role of the Supervisor
First-line supervisors shall demonstrate a detailed understanding of victim issues and proper response by subordinates. Supervisors shall:
1. Respond to assist officers investigating felony sexual assaults
2. Exhibit sensitivity to victims and ensure that victims are dealt with properly by clarifying their expectations of line officers
3. Assist in locating resources to effectively investigate sexual assaults
4. Encourage problem-solving partnerships to enhance cooperation between the department and community organizations such as rape crisis centers and forensic examination programs using a victim-centered approach
5. Include victim services information regularly at roll call
6. Develop and encourage community partnerships to reduce the risk of sexual assault
7. Create opportunities for ongoing training to improve the skills needed to properly investigate sexual assault
8. Work to increase interagency communication between law enforcement and prosecutors to ease the transition for victims moving from the investigation phase to prosecution
9. Incorporate victim services issues into the evaluations of officers and detectives
10. Recognize and reward officers for rendering effective victim services

I. Blind Reporting
In the aftermath of a sexual assault, a victim may not have the emotional or physical capacity to commit to a full investigation and a court trial. Departments should consider establishing blind reporting systems to allow victims to take the investigative process one step at a time. This will allow time for the victim to establish trust with an investigator and become comfortable with the
Every effort has been made by the IACP National Law Enforcement Policy Center staff and advisory board to ensure that this model policy incorporates the most current information and contemporary professional judgment on this issue. However, law enforcement administrators should be cautioned that no “model” policy can meet all the needs of any given law enforcement agency. Each law enforcement agency operates in a unique environment of federal court rulings, state laws, local ordinances, regulations, judicial and administrative decisions and collective bargaining agreements that must be considered. In addition, the formulation of specific agency policies must take into account local political and community perspectives and customs, prerogatives and demands, often divergent law enforcement strategies and philosophies; and the impact of varied agency resource capabilities among other factors.

This project was supported by Grant No. 2000-DD-VX-0020 awarded by the Bureau of Justice Assistance, Office of Justice Programs, U.S. Department of Justice. The Assistant Attorney General, Office of Justice Programs, coordinates the activities of the following program offices and bureaus: the Bureau of Justice Assistance, the Bureau of Justice Statistics, National Institute of Justice, Office of Juvenile Justice and Delinquency Prevention, and the Office of Victims of Crime. Points of view or opinions in this document are those of the author and do not represent the official position or policies of the United States Department of Justice or the IACP.

This policy was developed by IACP’s Police Response to Violence Against Women Project under grant no. 97-WT-VX-K003 from the U.S. Department of Justice, Office on Violence Against Women in cooperation with the IACP National Law Enforcement Policy Center (NLEPC). The information herein was gathered from agencies and subject matter experts throughout the United States. For a complete listing of model policies published by the NLEPC and information on how to order policies, please visit: www.theiacp.org/pubinfo/PolCtr.htm.

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Appendix B  **Excerpts from SART Manual**

This excerpt focuses on best practices for advocates and law enforcement. The entire text can be found at:

www.oregonsatf.org/documents/ORSARThandbookVersionII.pdf
June 14, 2006

Dear SART Member:

The Attorney General’s Sexual Assault Task Force (Task Force), at the request of individuals and groups across the state, has produced this Handbook in support of Sexual Assault Response Teams (SART) working to improve their community’s response to adult and adolescent sexual assault.

The mission of the Task Force includes supporting the improvement of a victim-centered, offender-focused, collaborative and consistent response to sexual assault in Oregon. The development of county SARTs has been shown to be an effective way to develop just such a response. The first Handbook was published in late 2002 and, because SARTs were so new in our state, included little Oregon-specific information. This 2006 version was mostly drafted by Heather Huhtanen, Sexual Assault Training Institute Director of the Task Force. It was revised, amended, and refined by members of the Criminal Justice, Medical Forensic, Offender Response and Victim Response Committees.

The Task Force conducted a survey of Oregon’s SARTs earlier this year and the Handbook includes a snapshot of the status of the SARTs as well as samples of protocols, working agreements, and forms developed and used by different counties across the state.

Oregon’s sexual assault victims deserve the very best response we can offer them and Oregon’s offenders deserve accountability for the crimes they commit. An organized SART is a proven strategy for success to attain both of these goals. I remain committed, as does the Task Force, in doing everything in our power to support the efforts of local communities to effectively collaborate in order to address these difficult issues. Please use the website www.oregonsatf.org to access further resources in support of your efforts.

Sincerely,

HARDY MYERS
Attorney General
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What is a SART?

Although a SART literally stands for “sexual assault response team”, the term often conjures that of a SWAT team. This is not the intent, purpose, or function of a SART. In some cases a SART may operate a 24-hour response—where the advocate, the law enforcement, the SANE and even the prosecutor are dispatched day or night in the event of a report of sexual assault. The most critical work of a SART is its function as a vehicle for collaboration, relationship building, and education among and between professionals. A SART is an opportunity to:

- Become familiar with the roles and responsibilities of each response/discipline.
- Develop relationships with individual responders and the agencies they represent, so that optimum referrals and information can be provided to each other and the victim.
- Identify the available resources, avoid duplication, and collaborate on effective delivery.
- Share information, knowledge, and expertise between and among members.
- Establish rapport with individual responders and the agencies they represent so that, in the event of a challenge or miscommunication, there is the best opportunity for resolution.
- Develop a protocol for a seamless response that ensures that victims and responders will not be left outside of the information loop.
- Educate collaborative partners and the public in order to increase awareness of the scope of the problem, identify solutions, and provide leadership in prevention efforts.

The essence of a SART is collaboration—collaborating to mitigate the effects of sexual assault on individual victims and their loved ones, to increase victim and community safety, and to prevent future victimization.

Victim Centered

The Attorney General’s Sexual Assault Task Force actively works to promote the development and implementation of a victim centered response to sexual assault. This is largely based on the value that justice represents much more than a successful prosecution (or plea agreement). Rather, in addition to attending to the goal of winning a conviction and holding offenders accountable, true justice ensures that victims—those who have been harmed—have an experience of justice. Justice is served when victims are listened to and taken seriously. This point is particularly important given that one of the primary reasons victims choose not to report is the fear of not being believed. Furthermore, research has increasingly demonstrated that victims of sexual assault who experience a supportive and compassionate response, regardless of the criminal justice system outcome, have lower rates of post traumatic stress than victims who experience secondary trauma in the form of disbelief and blame. It is therefore well within the scope of the SART and individual responders to play a role in mitigating the harm and trauma that victims experience—to play a role in seeing that victims experience justice.

Due to the complicated nature of responding to, investigating, and prosecuting sexual assault cases, justice must also include a venue for responders to feel good about their work and role, regardless of whether a case is resolved with a conviction. Meaning, if each responder did the very best that they could and the victim felt supported and cared for, the response was a success and justice was served!

A victim centered response recognizes that the one person who all responders are responsible to, in the event of a reported sexual assault, is the victim. The victim is therefore at the center of and central to the response of each and every responder and the response as a whole. Consequently, it is critical to the success of the response, as well as individual responders, that victims believe that reporting and
participating in the criminal justice system is a safe and viable option. If victims do not believe this is the case, they will not come forward, they will not report, and they will not (willingly) participate in the criminal justice system response. This inhibits the SARTs ability to fulfill its function—to mitigate the effects of sexual assault on individual victims and their loved ones, to increase victim and community safety, and to prevent future victimization. SARTs have an obligation to provide a victim centered response to sexual assault to ensure that victims have confidence in reporting and participating in the criminal justice system. Each victim who chooses to report provides the SART with an opportunity to increase victim and community safety.

In practice, a victim centered collaborative response includes:

- Giving time and consideration to the victim’s needs and wishes.
- Prioritizing the safety and well-being of the victim, including giving consideration to the impact that various systems’ responses may have (eg; media, no-file, plea negotiations, etc.).
- Acknowledging that effectively providing for victim safety requires victim input.
- Recognizing that the harm and trauma experienced by a victim does not relate to the level of violence used by the offender as much as it relates to the victim’s belief that they are supported and believed.
- Prioritizing the privacy of the victim and their right to (reasonable) confidentiality.
- Providing trained, professional, thorough, compassionate, and knowledgeable responders during every step of the response.
- Demonstrating professionalism and respect among and between responders.
- Recognizing the importance of supporting the work and role of each responder.
- Recognizing that victims of sexual assault are never responsible, in all or part, for their victimization, regardless of the circumstances leading up to or surrounding the assault (e.g.; lifestyle, choices, behavior, etc.).
- Recognizing that the response of friends, family and (system) responders, or the lack thereof, can either increase or mitigate the harm and trauma that victims suffer as a result of the assault.
- Recognize that offenders are always responsible for the assault.

Victim Blaming

One of the more challenging roles of SART members is to interrupt victim blaming and educate the community (and fellow SART members) about the myths and misconceptions that are often associated with sexual assault. Victim blaming refers to holding victims responsible, even in part, for being sexually assaulted. Victim blaming typically utilizes the argument, that if the victim had not made a particular choice, engaged in a particular activity or acted in a particular way, they would not have been sexually assaulted. This argument is problematic for several reasons—one, there is no particular activity, choice or behavior where sexual assault is a natural (and usual) consequence; two, victims exist who do not necessarily engage in activities, choices or behaviors that are widely viewed as risky; and three, the only common denominator for incidents of sexual assault is the sex offender himself (or herself). For example, drinking or using drugs at a party to the point of passing out might be considered a “high risk” behavior. However, sexual assault is not a natural consequence of the behavior of drinking or using to the point of passing out. First, not all women (and men) who drink to the point of passing out are sexually assaulted. Second, a sexual assault will only occur if there is an individual at the party who is willing to engage in sexual contact with someone without their consent and mutuality. That is, some, perhaps the vast majority of party-goers, may merely notice the passed-out person, while others may demonstrate a measure of care and concern and cover them up, or place a bowl near them should they need to vomit, or perhaps check to make sure that they are not suffering from alcohol or drug poisoning. It is therefore not the behavior of
the victim that leads to or results in sexual assault, but rather the conscious choice of the offender. You merely have to ask yourself, would you sexually assault someone who is unconscious from alcohol or drugs? No. Well why not—because you are not a sex offender!

Offender Focused

In the same way that victim centered refers to providing a thorough, professional and compassionate response to victims, offender focused refers to the investigative and prosecutorial efforts made to hold offenders accountable for their actions and behaviors.

An offender focused response recognizes that offenders purposefully and intentionally select victims with whom they can successfully commit a sexual assault—victims who are perceived by offenders as vulnerable, accessible, and lacking in credibility. An offender focused response will therefore focus on the actions, behaviors, history, character, lifestyle, and values of the offender. Offender focused also recognizes what we know to be true about (adult) sex offenders:

- Adult sex offenders are often repeat or serial offenders.³
- Adult sex offenders most often target individuals known to them, whether it is a brief encounter or a close relation.⁴
- Adult sex offenders often commit other person crimes including stalking, domestic violence, child abuse, and child sexual abuse.⁵
- Adult sex offenders usually use instrumental violence or the “con” attack rather than a weapon or more apparent forms of violence.⁶
- Adult sex offenders are practiced liars and often have a history of evading detection through deception and manipulation.⁷

Successful sexual assault investigations and prosecutions will therefore incorporate this information and seek to identify additional victims, corroborate details that illustrate the planning and premeditation involved, illustrate victim selection, and address grooming or the “con” attack. Offender focused ultimately recognizes that if it weren’t for sex offenders there wouldn’t be sexual assault.

Notes

4 ibid
5 ibid
6 ibid
The Role of Advocates

The role of advocates in the response to sexual assault is to provide crisis intervention services, support, information, referrals, and ancillary services, including assistance with transportation, housing, and/or childcare. Best practice utilizes trained advocates to accompany victims through the health care, social service, and criminal justice systems. Advocacy services should be initiated automatically rather than asking the victim if they would like an advocate to be called. Victims may then have the option to decline advocacy services when the advocate is already on site.

Advocates help victims navigate the criminal justice system, provide education on the dynamics of sexual assault, provide access to an array of local services, and develop safety plans. More difficult to define, but of great importance, is the role advocates play in bearing witness to the experience of the victim; they do this by listening, believing, empowering, serving as a buffer, interrupting victim blaming, and honoring the choices that a victim makes. Advocates are uniquely positioned to offer victims the array of options available and to support the choices victims make. For advocates, the outcome that the victim identifies she or he wants—not the needs of the system—define the advocacy strategy.

Advocates are uniquely positioned to offer victims the array of options available and to support the choices victims make.

As the first point of contact for many victims of sexual assault, advocates share the responsibility of initiating, when the victim chooses, the multidisciplinary response to sexual assault. Furthermore, advocates are a necessary and integral part of providing a victim centered response. There is no other discipline whose primary function is to advocate for the interest of, and at the direction of, victims. Many victims may trust the advocate more than other responders because of this role. After the initial response, because of the trust developed between the victim and the advocate, the advocate may be the logical choice as a communication center for information that needs to go to and from the victim and other responders. Furthermore, this allows other responders to focus on their primary responsibilities of medical care, investigation or prosecution, and the advocate to focus on victim support and communication.

Victim Centered—Because the advocates role is primarily, if not exclusively, focused on the needs, choices, and input of the victim, advocates are a necessary component of a victim centered response to sexual assault. Advocates are often in the very best position to provide voice to the specific and general concerns of victims. As mentioned above, advocates may also be the logical choice to serve as a liaison between the victim and other responders.

Offender Focused—Although advocates are not likely to have direct contact with offenders, they certainly play a role in helping to maintain the focus of the investigative and prosecutorial response to the offender. Due to the context in which sexual assault occurs, it is not uncommon to see family and friends, the community, and responders question the victims responsibility, in all or part, for the sexual assault. The advocate’s role is to intervene and redirect this line of questioning. Questioning of this kind is also called victim blaming and is addressed more specifically at the end of this section as well as in the Victim Centered Collaborative Response chapter.

Types of Advocacy Agencies and Programs

Community-based Advocates—Community-based advocates are housed in local non-profit organizations whose primary purpose is to provide services to victims regardless of whether or not the victim is involved with the criminal justice process. Since only a small percentage of sexual assault victims report the crimes against them, community-based advocates spend the majority of their time providing support and services for victims who have no contact whatsoever with the criminal justice system.
Community-based advocacy has a rich history of grassroots organizing within a context of larger social change. The commitment to a broad understanding of the issues of violence against women allows community-based advocates to provide services to victims with an understanding of the dynamics of sexual assault. This assists them in addressing the victim-blaming that occurs not only by victims themselves, but also by family, friends and, at times, other responders.

In Oregon there are two stand-alone community-based sexual assault programs, Sexual Assault Support Services (SASS) in Eugene and Sexual Assault Response Center (SARC) in Hillsboro. The other non-profit advocacy agencies in Oregon are dual programs that serve both victims of domestic and sexual violence.

**Victim Assistance Program (VAP) Advocates** — The role of VAP advocates is to provide support and communication to victims who are involved with the criminal justice system. All of Oregon’s 36 counties have a Victim Assistance Program which is part of the District Attorney’s Office. These programs were initiated as a result of the crime victims rights movement of the 1970’s and 1980’s which recognized that victims of crime and the families of homicide victims deserved support and assistance while navigating the criminal justice system. Several of Oregon’s VAP programs initially started as Rape Victim Advocacy (RVA) programs and have a long history of providing response to victims of sexual assault.

Some VAP advocates may only have the resources to provide court notification services to victims, while others may provide court accompaniment as well as an array of additional services and assistance. VAP advocates provide services to victims of all crimes, including sexual assault and domestic violence.

**Culturally Specific Advocates/Non-Traditional Service Providers** — Culturally specific advocates/non-traditional service providers are advocates who provide services and assistance to a specific population, such as specific ethnic populations, communities of color, immigrants and refugees, people with developmental disabilities, or those who work in the sex industry. The services provided by these mostly non-profit organizations are not necessarily specific to sexual violence but provide a broad variety of services, such as translation or interpretation, civil legal assistance, social services, transportation, housing, childcare, and education.

In Oregon, the urban areas have many such organizations and the rural areas have very few. Some of the community-based advocacy agencies and Victim Assistance Programs may also have culturally specific advocates on staff in order to better meet the needs of their local area and community.

**Law Enforcement Advocates** — Law enforcement advocates are based in law enforcement agencies and support an array of victims, including victims of sexual assault. Oregon has very few law enforcement-based advocates; those that do exist are typically funded by grant monies specific to domestic violence.

**Campus Advocates** — Campus advocates are usually campus staff of the women’s center, the dean’s office, or health services who, as a part of their responsibilities and duties, provide services and advocacy to student victims of sexual assault. They may also include student volunteers who provide peer support.

**Tribal Advocates** — Tribal advocates are based within some of the larger Tribes, such as the Confederated Tribes of Warm Springs and the Confederated Tribes of the Umatilla Indian Reservation. Victim advocacy services may be located within the social or health service programs and provide sexual assault victim advocacy as one part of a larger scope of services. Some Tribes contract and collaborate with local community-based agencies to provide sexual assault and/or domestic violence specific services.

**Hospital-based Advocates** — Hospital-based advocates work directly out of a hospital or medical center. At this time, there is one hospital-based advocate in Oregon, housed within the Asante Health Systems in Medford. There are additional individuals working out of hospitals and medical centers who might also provide some level of advocacy services to victims of sexual assault, such as mental health staff or social workers.
Best Practices for Advocates

Victims' Choices Define the Strategy (Empowerment Philosophy)—Advocates do not encourage or discourage victims to report or participate in the criminal justice system; rather, advocates assist victims in making informed decisions. When victims are unsure, advocates encourage victims to preserve their options by proceeding with the process of forensic evidence collection. Whatever outcome the victim is looking for will define the strategies chosen by the advocate.

24-Hour Response—Most populated areas of Oregon provide 24-hour advocacy response to sexual assault. The 24-hour program may be based out of the county Victim Assistance Program, the local community-based agency, or the county Sheriff’s Office. Regardless of where the 24-hour response is based, there are several considerations for determining which agency is able to provide the best practice response:

- Which entity has the staff to consistently respond?
- Which entity can provide a response that does not automatically initiate the criminal justice system response?
- Which entity will provide the most complete array of services regardless of whether the victim chooses to report the assault?
- Which entity has responders with sexual-assault specific training and who are familiar with the medical forensic response, including the Sexual Assault Victim Emergency Response (SAVE) Fund?
- Which entity can provide the highest level of confidentiality to victims?

These considerations are fundamental to providing a victim centered 24-hour response to victims of sexual assault. The goal is for victims of sexual assault to receive the very best response available in the aftermath of a sexual assault—regardless of whether they choose to report the assault. However, it is known that when victims believe that the response is about them—and not about the report of the crime—they are more likely to want to report the crime and work with law enforcement and medical responders.

Co-Advocacy/Team Advocacy—It is the best practice for victims of sexual assault to be assigned at least two advocates from the first contact. This allows one advocate to concentrate on the needs of the victim and the other to assist with family, friends, and communication with other responders. The pair of advocates may come from the same agency, or ideally, from the two agencies who will most likely be involved in the criminal justice case, such as the VAP, a culturally specific agency, or a staff member from DHS who provides services to the elderly and people with disabilities.

Given the wide array of advocates in Oregon, it is critically important to identify advocates and advocacy services that can assist with providing a seamless, thorough, and specific response to individual victims. Regardless of the sex, sexual orientation, gender identification, race, religion, ability, socio-economic status, or history of involvement with the criminal justice system, advocates are responsible for identifying the resources and assistance necessary to meet the specific needs of each victim. Co-advocacy is an opportunity to work closely with advocates based out of different disciplines and with different expertise on behalf of victims. Another reason it is in the victim’s best interest to have more than one advocate assigned to her or his case is that it makes it more likely that, in a time of crisis or need for support, at least one advocate will be available.

Vertical Advocacy—It is the best practice for victims of sexual assault to have the same advocate(s) from the first contact through the point at which advocacy services are no longer wanted by the victim; this is vertical advocacy. This practice recognizes the importance of the bond, privacy, trust building, and case familiarity for both the victim and the advocate(s).

Secondary Victim Services—It is the best practice to offer services to the family and/or friends of sexual assault victims. This practice recognizes the traumatic effect that sexual violence has on the loved ones of victims. It also recognizes that the loved ones of a victim are often feeling extreme levels of anger and need a way to vent these feelings—other than to the victim.

Best practice also recognizes the importance of using different advocates for family members or
friends who wish to access services. The need to ensure confidentiality and objectivity is vital; in cases where advocacy resources are limited, it is recommended that the advocate engage in a conversation with the victim and her or his loved ones to discuss and determine issues related to confidentiality and the provision of services. This includes clarifying that the victim decides who is involved and who receives what information.

Collaboration—As a part of a collaborative multidisciplinary response, and at the request of the victim, advocates may initiate the involvement of the Sexual Assault Nurse Examiner (SANE) or medical responder, law enforcement, or culturally specific providers. Advocates will also reach out to individuals and agencies on behalf of victims to access medical, social service, and legal services as desired.

Information and Referral—Advocacy regularly includes the provision of accurate information to victims and referrals to other agencies for services. It is vital that advocates keep their information accurate and their referral database up-to-date. The best practice for making referrals is for advocates to facilitate the contact between the victim and the referral agency, service, or individual. Advocates will want to avoid making “cold referrals” or handing victims a name and phone number or a list of services/agencies with contact information, unless that is the preference of the victim.

It is important for victims to receive information in writing, preferably in their first language, which they can refer to again and again. Written information will cover an array of issues, including medical follow-up, victim impact, post traumatic stress, coping mechanisms, and contact information for other services. Other vital information includes giving the victim a clear expectation of what to expect from: other responders, medical procedures, billing issues, criminal justice process and timeline, and crime victims compensation.

Confidentiality and Privilege—Victims of sexual assault are often cautious about disclosing the circumstances leading up to the assault and details of the assault itself—in fact, some victims wait years to disclose or never disclose at all. It is best practice to offer a support person to victims of sexual assault who will provide them with a reasonable expectation of confidentiality and make their best effort at maintaining privilege on behalf of victims.

- **Confidential** communication is communication made with the expectation of privacy. Information that is confidential is private information and is not accessible or known to other people.

Confidential information can be subpoenaed.

- **Privileged** communication is communication that is entitled to protection from disclosure in court or other legal proceedings. Information that is privileged has greater protection than information that is confidential.

Privileged information may be subpoenaed but it is protected and only the holder of the privilege (the victim) may waive the privilege to release the information being subpoenaed.

All advocacy agencies and programs have the ability to make a commitment to provide victims with a reasonable expectation of confidentiality with respect to their conversations and exchanges. Community-based advocates must obtain written permission from victims prior to contacting or sharing information with any other service providers and responders. VAP advocates, law enforcement advocates, and other government based advocates are considered “agents” of the government entity for which they work; they are not in a position to guarantee confidentiality to the victim. It is therefore the best practice for advocates to inform victims, prior to the victim’s disclosure, the level of confidentiality that can—and cannot—be afforded to them.

Mandatory Reporting Responsibilities—Advocates who work for community-based agencies are not mandatory reporters of child abuse. Government-based advocates are mandatory child abuse reporters. The law requires that reports of child abuse be made to law enforcement or to DHS—not to parents. It is best practice for advocates to disclose to victims their reporting obligations, as well as the obligations of other responders, as a part of their initial contact.

- Although adolescent victims aged 15-17 are allowed to consent to medical care without
parental consent, they are still considered children with respect to child abuse reporting. Again, a report need only be made to law enforcement or DHS—parents do not need to be notified. However, some law enforcement agencies and medical facilities have a policy to inform parents of the sexual assault, even against the expressed wishes of the adolescent. It is vital for advocates to know the practice of their local agencies and hospitals and, if it is local practice, inform adolescents that law enforcement or DHS may notify parents.

Personal Representative (Oregon Laws Chapter 490)—Victims of person crimes, who are 15 years and older, are entitled to have a “personal representative” present with them during the investigation, medical examination, and prosecution of the crime. The only restrictions on this are in interviews occurring at a Child Advocacy Center and Grand Jury proceedings. Advocates are the best practice to act as personal representatives for victims of sexual assault (see a summary of SB 198, Personal Representative Law, in the Appendices). Advocates, and other individuals who act as personal representatives, are encouraged to keep records of the cases in which they are prohibited by law enforcement, a health care provider, prosecutor, court, or protective service worker from accompanying a victim. This documentation will assist the agency and the victim if there is a wish to follow-up on the incident.

Sexual Assault Emergency Medical Response (SAVE) Fund—The SAVE Fund repealed ORS 147.375 mandating law enforcement agencies to pay for forensic evidence collection using the Oregon State Police Sexual Assault Forensic Evidence (SAFE) Kit. The SAVE Fund took effect on March 1, 2004 and covers the cost of forensic evidence collection, a medical exam and sexually transmitted infections (STI) and emergency contraception (EC) prophylaxis for victims of sexual assault. Collection of a SAFE Kit can be authorized by law enforcement for up to 84 hours post assault. Law enforcement officers are encouraged to expand this timeframe in cases with extenuating circumstances (multiple offenders, kidnapping, minimal or no bathing, etc.). Victims who choose not to report are eligible to utilize the SAVE Fund to access a medical exam, and receive STI and EC prophylaxis up to 7-days post assault—authorization by Law Enforcement is not required for this “partial” exam or for the STI and EC prophylaxis.

• Adolescents 15-17 years of age have the right to consent to or refuse a medical forensic exam (ORS 109.640). Parental consent is not required in order for medical staff to conduct the exam. However, hospital staff or law enforcement officers may, by policy or personal value, decide to notify parents of the sexual assault.

• Medical forensic exams should not be performed on individuals who refuse.

Mental Health Services—As part of standard advocacy services, advocates may offer information on the availability of local mental health services to victims. It is important to remember that specific sexual assault training is not a standard part of the education of mental health providers; however, most have had training in trauma response. It is best practice to develop and maintain a list of local counselors who have the best training and the most interest in providing support to victims who have experienced sexual assault in the recent and more distant past.

Documentation—In order to ensure that the wide array of the needs of victims are met, advocates are encouraged to track and document services, information, and referrals. In documentation, it is best practice for advocates to describe the services provided but exclude details of the victim’s personal history. Advocates should never document their own personal observations of the victim’s demeanor, disclosures, and responses to the provision, or lack thereof, of services.

Victim Blaming

One of the more challenging roles of advocates is to interrupt victim blaming and educate community and SART members about the myths and misconceptions that are often associated with sexual assault. Victim blaming refers to attitudes or beliefs which hold victims responsible, even in part, for being sexually assaulted. Victim blaming typically utilizes the argument that if the victim had not made a particular choice, engaged in a particular activity, or acted in a particular way, she or he would not have been assaulted. This type of second-guessing is usually one that victims are
already doing to themselves—hearing any variation of this theme from others adds to the trauma already being experienced.

An effective strategy for advocates to utilize in supporting victims and addressing victim blaming is to reframe the experience for the victim, family, and/or friends. An example of reframing is to identify the specific way the victim is being blamed, such as for drinking alcohol. The next step is to identify what the natural consequences are for drinking alcohol—or even for drinking too much alcohol. The natural consequences are headache, making a fool of oneself, throwing up, perhaps falling down. These are consequences that might be faced by every person that drinks too much alcohol. The next reframing technique is to ask if everyone that drinks too much is sexually assaulted. The answer, of course is no. The next question is, why not? It is because there is not a sexual offender in place—with a plan—every time and place that a person drinks too much. There will only be a sexual assault, regardless of the alcohol level of any person in the room, if there is also a sexual offender present who will, with no thought of anyone else, use the situation to commit a sexual assault.

Reframing is a powerful tool and addressing victim blaming an important role for advocates.
Chapter 4: Law Enforcement Response

The Role of Law Enforcement

The role of law enforcement is to protect and serve the public. In cases of sexual assault, this role translates into looking after the safety of the victim and, ultimately, the community. In addition to the role of protecting the public and investigating reports of crime, law enforcement agencies are often the point of original contact for the victim and serve as the gateway to the multidisciplinary response. The primary responsibility of law enforcement is to determine whether the report of sexual assault meets the criteria of a crime as defined by Oregon Revised Statutes. Determining the criteria of a crime or multiple crimes reported by the sexual assault victim involves piecing together a factual history of the assault by collecting statements by the victim, witnesses, and suspect(s) as well as physical and corroborative evidence.

In cases where law enforcement determines that the report of sexual assault does not meet the criteria of a crime, law enforcement has a continuing obligation to assist the victim with information and referrals.

Victim Centered—Law enforcement’s role in maintaining a victim centered response is to treat each victim with consideration, professionalism, and compassion—to leave their personal values, morals, and opinions at the door. Because victims are often selected very specifically by offenders for their perceived accessibility, vulnerability, and lack of credibility, they may also be perceived by responders as individuals who are more likely to be deceptive—to lie about the assault. A victim centered law enforcement response recognizes that victims of sexual assault are actually most often those individuals who are perceived as lacking in credibility, those on the fringe of crime, those who use drugs and alcohol, etc.

Offender Focused—Law enforcement play a critical role in maintaining an offender focused investigation. Since earnest resistance by the victim was eliminated from the Oregon Revised Statutes sex crimes (2001), law enforcement investigations, unless the victim was unable to grant consent, should focus on the offender’s use of force or threat of force. Additionally, with increasing amounts of research available on incarcerated and “undetected” sex offenders, it is clear that sex offenders are most often repeat offenders and may often commit “crossover” offenses (domestic violence, child abuse, child sexual abuse, and stalking). Offender focused investigations require an exhaustive background investigation on individuals who are reported to commit sexual offenses in order to identify additional victims and/or similar bad acts. Additionally, offender focused investigations collect corroborative details that can help to explain the broad continuum of force, or threat thereof, as it relates to sexual assault. For example, the continuum of use of force for law enforcement begins with physical presence. It stands to reason that physical presence, in the context of sexual assault, could also be perceived as threat of force. Offender focused investigations address the instrumental ways in which force or threat of force is used in order to attempt or complete a sexual assault.

Best Practice—First Response

Initiating the Collaborative Response—When the victim first contacts 911, law enforcement becomes the gateway to the collaborative multidisciplinary response. This means that law enforcement may need to initiate the involvement of advocates, SANEs (or other medical responders), culturally specific providers, DHS, translators/interpreters, or mental health providers at various stages of the response. At a minimum, contacting and initiating advocacy and medical response is standard practice for sexual assault response. It is best practice for law enforcement to initiate, for example, the medical response prior to, or en route to the medical facility. This is also the appropriate time to initiate an advocacy response. Ideally dispatch has the capability
to automatically initiate advocacy services when they receive a sexual assault call. However, in cases where dispatch cannot assume this responsibility, the law enforcement officer will need to initiate advocacy services. If the victim does not wish to go through a medical forensic exam, advocacy should still be initiated. Advocacy services should be initiated automatically, rather than asking the victim if they would like an advocate to be called. Victims have the option to decline advocacy services when the advocate is already on site.

Please see the Appendices for a summary of SB 198, the Personal Representative Law, for details related to the obligation of all responders to support the choices of victims to have a personal representative present during the medical exam and criminal justice interviews.

Role of Law Enforcement During the Medical Forensic Exam—Law enforcement can be present and participate with the medical professional during the taking of the assault and forensic history. However, it is a conflict of interest and a violation of basic medical rights for law enforcement to be present during the physical portion of the medical forensic exam or the medical history. The medical practitioner and a support person (advocate, friend, or family member) are the only individuals appropriate to be present during the medical forensic exam (the portion of the exam where the patient is asked to disrobe for the purposes of documentation, evidence collection, and a physical examination). Law enforcement officers cannot fulfill the role of support person in addition to their role as investigator.

Initial Victim Statement—The purpose of the initial victim statement is to obtain basic information: who, what, where, when and, how. In addition, and most important to law enforcement, is the establishment of the elements and location(s) of the crime. Law enforcement will encourage the victim to provide a narrative of the incident, beginning and ending where the victim chooses, by asking “can you tell me what happened?”

Law enforcement should avoid interrupting the victim to clarify details, information, or language during the initial narrative. Once the narrative has been completed, the interviewer can clarify and obtain necessary details related to who, what, where, when, and how of the reported assault. The initial victim statement is not a comprehensive victim interview. It is intended to be used to determine the next steps, such as initiating SAFE Kit collection or other medical response, calling for resources, or securing evidence. Pursuant to Oregon Laws Ch. 490, victims are entitled to have a personal representative with them during the initial interview.

Personal Representative (Oregon Laws Ch. 490)—Victims, 15 years and older, of person crimes are entitled to have a “personal representative” present with them during most phases of the investigation, medical examination and prosecution of the crime.

- Law enforcement officers are encouraged to work with local advocacy agencies to offer advocates as personal representatives to victims of sexual assault. Law enforcement should avoid informing victims of their right to a personal representative with friends and family present in order to avoid having friends and family pressure victims to be their personal representative. Additionally, the best practice is to initiate advocacy services on the victim’s behalf. Victims may decline advocacy services once the advocate is on site (see the Appendices for a summary of SB 198, the Personal Representative Law).

Best Practice—Investigative Response

Coordinated Interview/Assault History—The best practice for law enforcement response is to dispatch officers who have had training specifically on sexual assault investigations and response. Once the response is initiated, law enforcement, SANEs (or medical responders) and advocates are encouraged to make every effort to minimize the number of times that a victim is asked to narrate the details of the assault. In cases where victims are seen for the purpose of a medical and/or forensic exam, it is standard practice for the SANE to obtain a history of the assault. This history informs the SANE of where to look for and gather physical and corroborative evidence on the victim’s body. It is appropriate and useful for law enforcement to be present during the assault history, but not the medical history. This is the most appropriate time for the SANE and law enforcement to explain the process.
for the medical response and the next steps for the law enforcement response.

Once the assault history and medical forensic exam have been completed, and the victim has been allowed to dress, law enforcement is free to begin the complete victim interview. In many instances the assault history provided to the SANE will comprise much of the information necessary for the initial victim interview by law enforcement. This combined effort by law enforcement and SANEs, or other medical professionals, to coordinate their efforts by beginning with a victim interview and following up with an assault history minimizes the need for multiple interviews and allows law enforcement to focus on clarifying details.

The critical piece of a coordinated interview and assault history is to identify in advance who will be asking the questions, who will be present, and where the interview/assault history will take place. It is the right of the victim to have a personal representative with them during the victim interview/assault history as well as the medical forensic exam. It is recommended that advocates be utilized for this purpose. When the advocate is there to look after the emotional needs and other concerns of the victim, law enforcement and medical professionals are able to focus on their investigative, medical, and forensic responsibilities.

**Photos of the Victim**—The purpose of photographs of the victim are to document injury. Non-genital photos are evidence and should be seized and logged as evidence (and not be attached to the police report which becomes part of the public record). Genital injury photos should be maintained by the hospital as a part of the medical forensic exam chart which then becomes part of the medical record. This provides for an additional layer of privacy protection for victims as a photo specific subpoena should be required in order to access photos in the medical record.

- Non-genital photos can be taken by the medical professional or law enforcement while genital photos should only be taken by a medical professional and not in the presence of law enforcement. It is recommended that non-genital photos which require medical interpretation also be maintained by the hospital as a part of the medical record.

**Complete Victim Interview**—The purpose of the complete victim interview is to:

- Confirm, clarify and expand on the initial victim interview.
- Confirm and establish the elements of the crime.
- Develop corroborative details related to the assault and the circumstances surrounding the assault.
- Identify the theme of the investigation and likely defense.

Complete victim interviews take time. Law enforcement will want to ensure that there is time enough to complete the interview and to avoid limiting the interview due to outside time constraints. The ability, comfort, and needs of the victim should be considered throughout the course of the interview. Cultural differences, cognitive abilities, fear, embarrassment, self-blame, and other factors specific to that victim may influence her or his ability to communicate in a concise and efficient manner. Law enforcement will want to make every effort to ensure that the victim is comfortable in order to facilitate disclosure of as many details of the assault as possible. Victims are entitled to have a personal representative with them during all law enforcement interviews.

Offenders often target victims that they perceive will not be believed if they report the crime. This is especially true of victims who are minors, individuals involved in lesser crimes, those who abuse alcohol or other drugs, and those with physical and/or mental disabilities. Victims may also fear that they will not be believed. Consequently, law enforcement will want to:

- Establish rapport before beginning the interview.
- Reassure victims that the only reason for law enforcement’s presence is to investigate the sexual assault.
- Avoid asking “why did you” or “why didn’t you” questions that can be interpreted as blaming, unless the context and purpose of the question is explained to the victim.
• Give the victim undivided attention for the duration of the interview.

• Keep in mind that people will engage in behaviors outside of the experience of many responders’ expectations and comfort (such as prostitution or drug use).

• The more responders can leave their own biases at the door, the more likely the victim will be forthcoming and cooperative.

**Case Clearance**—Cases that are incomplete, inconclusive, or when follow-up information is unavailable or insufficient to support the report should be cleared as inactivated or suspended. It is recommended that cases be cleared as unfounded ONLY when the investigation establishes a crime was not committed. Additional forms of case clearance, such as by exception (suspect dies, pleads to other charges, or prosecutor declines to prosecute) or arrest, should be utilized as appropriate.

**Utilizing Investigative Tools**—Law enforcement is encouraged to utilize all available tools at their disposal when investigating charges of sexual assault. This will ensure cases are resolved conclusively, consistently, and professionally. An incomplete or questionable victim interview should not be the sole factor used to determine whether or not a particular investigative tool is chosen by law enforcement. Best practice is to utilize a variety of investigative tools as a standard part of the law enforcement response to a report of sexual assault. These tools include:

• **Suspect Interview**—Unless the suspect is unknown, suspect interviews should be conducted as a standard part of the law enforcement investigative response to a report of sexual assault. Because the majority of sexual assault reports involve victims and suspects who are known to each other, the investigation is likely to be a lengthy process of collecting corroborative details of the assault that will have to be investigated before an arrest or charging decision can be made.

Remember that the most common response of suspects is to: (1) deny the allegation completely; and (2) deny that the sexual act was nonconsensual. Best practice includes not dismissing the victim’s report based solely on the suspect’s description of the incident. Sex offenders will often come across as more credible than their victims.

Suspect interviews will generally be conducted in a non-custodial setting. This includes interviews at the law enforcement agency, as long as they are voluntary. Suspect interviews should always be conducted in person in order to observe the suspect’s body language and reactions. The purpose of a suspect interview is to elicit provable lies, implausible accounts, partial truths, lack of denial, and partial or complete admissions.

• **Pretext Phone Call**—Pretext phone calls are important tools in non-stranger sexual assault investigations and should be considered for situations in which the victim might reasonably contact the suspect by phone. Pretext phone calls may not elicit a confession or apology, but often provide important corroborative details or a lack of denial.

• **Victim Outcry Witnesses**—Victims routinely disclose sexual assault to a friend or family member prior to making a report. Additionally, they may seek frequent or regular support from multiple individuals in the aftermath of a sexual assault. These outcry witnesses may not be initially identified to law enforcement because of the victim’s reluctance to involve others in a police investigation. However, collecting victim outcry statements may provide corroborative details, additions to the timeline and/or increase the credibility of the victim’s account.

• **Suspect Disclosure Witnesses**—Suspects routinely brag or disclose their sexual “conquests” to friends, co-workers and/or acquaintances. Suspect disclosure witnesses can corroborate the sexual acts described by the victim and provide insight into suspect’s perception of the incident and behavior surrounding the incident.

• **Polygraph**—Although polygraph results cannot be used in court, polygraphs are an important investigative tool. Polygraph results that show the suspect is deceptive can be used to confront the suspect and his denials and possibly elicit a partial or complete admission.
or confession. To ensure an accurate and useful polygraph result, it is important that the questions that will be asked of the suspect be discussed first with the polygrapher.

**Polygraphs should never be used with victims to determine whether or not a sexual assault occurred.**

- **Search Warrants**—Search warrants should be considered for the collection of physical evidence as well as corroborative evidence; for example, when a sexual assault occurred at the suspect’s residence, a place where the victim has not been before. This may provide an opportunity to collect corroborative details of the physical setting of the residence. Searching, sketching, and photographing the suspect’s residence can corroborate the victim’s description of the assault and other important details of the victim’s report. Search warrants should always be considered to collect evidence from a location under the suspect’s control. However, law enforcement officers executing the search warrant should always ask the suspect for consent to search before serving the warrant—it is always a good practice to ensure the admissibility of evidence seized by a search warrant by attempting to obtain the suspect’s consent.

- **Identification of Additional Victims (similar/prior bad acts)**—Law enforcement will want to actively seek identification of additional victims. Sex offenders are commonly serial offenders as well as crossover offenders—they may offend against children, adolescents and adults. Identification of additional victims can be done by interviewing a suspect’s friends, family, acquaintances, roommates, co-workers, fellow students, former girlfriends, and anyone within their immediate or extended social circle. Additionally, when law enforcement is investigating potential serial crimes, they may want to consider contacting their community-based program which may have information on other victims. While advocates cannot confirm or deny information without receiving permission from the victim in question, this has been a successful strategy in several jurisdictions.

- **Evidence Collection**—Evidence in sexual assault cases is most often found in three areas—on the victim, on the suspect and at the physical location of the incident. Law enforcement is encouraged to consider exigency (the likelihood that the evidence will degrade or be lost completely) when prioritizing the collection of evidence. Particularly with suspects, exigency of evidence can be a critical issue to identify immediately. As it relates to evidence on a suspect, search warrants may be necessary. Similarly, a search warrant may be necessary to search the location of the assault. Location sketches and photos should be a standard part of crime scene response. In sexual assault cases, in particular, it may be difficult to determine what is relevant and what is not. Photos and sketches will provide documentation and evidence that, because of changes to the scene over time, may not be available later.

- **Submitting Evidence to the Crime Lab**—Law enforcement will determine, in consultation with the district attorney’s office, what, if any, evidence is submitted to the OSP Crime Lab for analysis. Consideration should be given to submitting evidence contemporaneously with the investigation of the case.

**Unknown Suspects**—The best practice is to submit kits to the crime lab when the suspect is unknown in order to include the DNA profile of the suspect in CODIS.

**Next Steps:**

**Complete Police Report**—Complete, thorough, and accurate documentation of the initial police report and the statements of the victim, witnesses, and suspect is the foundation of a good investigative technique. It is important that law enforcement complete their reports as soon as possible, ideally within one to two days following their contacts related to the investigation. Accuracy and detail are paramount to good sexual assault investigations. Completing an initial sexual assault report is a priority as investigative follow-up cannot begin until the initial report has been completed.
Law enforcement reports should:

• Contain all the elements of the crime.
• Be objective (and not include opinions from the author).
• Be written in first-person.
• Include details of the circumstances leading up to the assault as relayed by the victim.
• Be written using the victim’s language and terminology; avoid sanitizing the language.
• Include direct quotes from the victim.
• Avoid law enforcement jargon (exited, alleges, suspect, etc.).

Case Forwarding—It is the best practice for law enforcement agencies to forward all completed sexual assault investigations to the district attorney’s office for review.

Information and Referral—The best practice law enforcement response includes providing victims of sexual assault with immediate and ready access to an advocate. Advocates are in the best position to provide information and referral specific to the needs of the victim and her/his family. However, in cases where contact is made with a victim and an advocate is not immediately available, law enforcement will want to provide information and referrals to the victim regarding local advocacy services as well as other services that may be necessary. Law enforcement will want to provide victims with written materials that include the name of an advocate or advocacy agency and their contact information.

Communicating Next Steps—Victims of sexual assault, like most community members, may not be familiar with the criminal justice system response. In fact, their understanding and expectations may be largely based on what they see in the media and on television. It is therefore critical to complete each victim contact by providing information on what is to come next, including information on the timeline and contact information for the law enforcement official handling the case. Information will also include explaining to the victim that the initial charges determined by the investigating agency may not be the charges that are ultimately filed by the district attorney’s office, if it chooses to file on the case at all. Law enforcement will also want to acknowledge that disclosure is a process and encourage the victim to contact them with additional information.

Additional Considerations:

Sexual Assault Emergency Medical Response (SAVE) Fund—The SAVE Fund repealed ORS 147.375 mandating law enforcement agencies to pay for forensic evidence collection using the Oregon State Police Sexual Assault Forensic Evidence (SAVE) Kit. The SAVE Fund took effect on March 1, 2004 and covers the cost of forensic evidence collection, a medical exam, prophylaxis for sexually transmitted infections (STI), and emergency contraception (EC) for victims of sexual assault. Collection of a SAFE Kit can be authorized by law enforcement for up to 84-hours (3.5 days) post assault. Law enforcement is encouraged to expand this timeframe in cases with extenuating circumstances, such as multiple offenders, kidnapping, or minimal or no bathing by the victim.

The purpose of the SAVE Fund is to enable law enforcement to authorize forensic evidence collection for victims of sexual assault without consideration for whether or not the report is considered questionable, prosecutable, or necessarily warranting a medical response. Victims of sexual assault, at a minimum, deserve a thorough and comprehensive medical response. Law enforcement officers are encouraged to avoid making judgments or determinations prior to initiating a fundamental investigative step—the collection of forensic evidence and/or a medical exam.

Law Enforcement Access to Medical Information (HIPPA)—A release of health information is necessary in order for law enforcement to obtain health information from a crime victim/patient. If the crime victim/patient is conscious and capable of providing information, the patient may agree orally or in writing. It is best practice to obtain a written release of information. If a crime victim/patient is not capable of expressing an opinion regarding disclosure or an emergency circumstance exists that prevents the provider from obtaining the patient’s agreement, information may be disclosed without the patient’s agreement if:
A law enforcement official represents that:

- The information is needed to determine whether a violation of law by a person other than the patient has occurred; and
- The information will not be used against the patient; and
- Immediate law enforcement activity would be materially and adversely affected by waiting until the patient is able to agree to the disclosure; and
- The hospital determines, in exercising professional judgment, that the disclosure is in the patient’s best interest.

Please see the Appendices for sample “Release” forms for medical providers and law enforcement.

Medical Records Accessed by a Subpoena also require the victim’s written authorization. It is critically important that the scope of the records subpoenaed is clearly described, with dates specific to the relevant medical response. This will avoid law enforcement and other members of the criminal justice system becoming responsible for confidential medical records.

- All medical records that are obtained should be immediately logged as evidence. Medical records should never be included as a part of the police/investigative reports which are public records.

Taped, Recorded and Written Statements (victims and suspects)—Videotaping and tape-recording statements from victims and suspects has advantages and disadvantages. Law enforcement agencies are strongly encouraged to develop a policy related to recording victim and suspect statements in cases of sexual assault. The policy should consider the following advantages of taping or recording statements:

- Reliable method of documentation.
- Record details that may not be summarized or captured in a written report.
- Record demeanor and affect.

The policy should also consider the following disadvantages:

- Record omissions, inconsistencies, and/or partial truths (victim).

Whatever policy is developed by a particular law enforcement agency as it relates to taping and/or recording victim and suspect statements should also include a way to address the above disadvantages. Additionally, victims and suspects do not need to be treated the same and, in fact, there is good reason to develop taping/recording policies that are distinct.

- Taped/Recorded Statements—All suspects need to first be advised of the recording of the statement on tape. Additionally, taped and recorded statements should be logged as evidence and not included as a part of the police/investigative report.

- Written Statements—Written statements can be used for suspect interviews if taping or recording is not the practice. Written statements can be generated by the suspect and signed—although the disadvantage of allowing suspects to use their own language is that they will undoubtedly minimize and justify their actions. The other option is for law enforcement to generate a statement and have the suspect review and sign it. Suspects who take issue with particular language or components of the statement can cross out and “addend” that portion of the statement and then sign it. This provides a clear indication that the suspect read the statement, went as far as making corrections and then signed off on it—making the argument of coercion difficult.

Reluctant and/or Recanting Victims—It is not uncommon for victims of sexual assault to be reluctant about reporting or participating in the criminal justice system. Victims who are reluctant may also ultimately recant in an effort to disengage the system. Law enforcement will therefore want to avoid jumping to the conclusion that the report was false or unfounded. More likely, the victim, as a result of internal, family, or socio-cultural pressures, is making her or his best effort to avoid further participation in the investigation and/or prosecution. Consider the influences that relate to a victim’s willingness to participate (and/or recant):
• **Internal Influences**—Victims are likely to feel embarrassed, ashamed, and even unsure of what it was that happened to them. Victims may fear that law enforcement and other responders will not believe them if they do report. Victims may also want to put the assault behind them and avoid repeating the story, answering questions, or being confronted by the perpetrator in court.

• **External Influences**—Victims may feel pressure from their friends, family, or community (cultural, religious, etc) to report or not report. Victims may also encounter responders (within the criminal justice system) who have victim blaming attitudes and believe misconceptions related to sexual violence.

• **Socio-Cultural Influences**—Victims may feel particularly uncomfortable with specific or humiliating facts about the assault, such as sodomy. Victims may also feel protective about private information related to their situation or behavior, such as pregnancy or drug use. Finally, victims who have some familiarity with the criminal justice system may have a past that they fear will discredit them from receiving justice.

Ultimately, victims are as likely to believe misconceptions about sexual assault and blame themselves in all or in part for the assault, which makes them unsure about prosecution.

**Custodial vs. Non-custodial Suspects** —A collaborative understanding between law enforcement and the prosecutor must be established on how the prosecution of sexual assault cases will be initiated. The decision on whether to initiate prosecution by direct presentation to the grand jury prior to arrest is based on:

• Whether or not the investigation is complete.
• Whether medical or business records obtained by subpoena are available.
• Whether the victim is prepared to provide testimony.
• An assessment of the impact of the case on community safety.

**Collaboration with Department of Corrections (parole/probation)**—Law enforcement officers are encouraged to utilize probation and parole staff as a resource in the investigation of sexual assault cases. Department of Corrections and probation/parole staff may be able to provide:

• Detailed descriptions of the suspect (tattoos, scars, etc).
• Detailed history of the suspect (Modus Operandi, typology/arousal information).
• Suspect contacts (friends, family, co-workers).

Additionally, the **Sex Offender Registration and Notification Unit**, managed by the Oregon State Police, can also be a good resource and investigative tool for law enforcement in investigating sexual assaults.

**Notes**

2. David Lisak and Paul Miller, in their research journal article, “Repeat Rape and Multiple Offending Among Undetected Rapists”, found that the majority of the rapists in their research sample were repeat offenders and also committed other acts of interpersonal violence including battery, child physical abuse, and child sexual abuse. *Violence and Victims*, Vol 17, No. 1 (2002).
RESPONSES TO THE AUDIT
June 11, 2007

Gary Blackmer, Auditor
City of Portland
1221 SW 4th Avenue
Portland, Oregon 97204

Dear Mr. Blackmer,

Thank you for the opportunity to respond to the audit “Sexual Assault Response and Investigation: Portland efforts fall short of a victim-centered approach.”

As Commissioner of Police, and as a retired police officer, I am acutely aware of the issues and needs of victims of crime, and particularly of those who have suffered crimes of violence. I am troubled by your findings of less-than adequate response, dedication and follow-through by Portland Police Bureau detectives in the Sexual Assault Division. I am confident that Chief Sizer will remedy this situation as she re-organizes the Bureau and re-commits the Police Bureau to the principles and practices of community-oriented policing; and as they incorporate the recommendations you have offered.

I am pleased at your systemic approach that identifies how we can improve our entire public safety systems’ response to victims of crime. I will ask the Police Bureau to follow suit by continuing to coordinate with the Bureau of Emergency Communications (BOEC), the District Attorney’s Office and the county’s Sexual Assault Nurse Examiners (SANE). Only by consistent collaboration, coordination, and communication can we keep each other accountable while serving Portlanders with dignity and care.

I have asked Chief Sizer to engage the public as she develops a plan to address these issues, and will see that they are made available to Portland residents upon request.

Sincerely,

Tom Potter
Mayor
8 June 2007

Auditor Gary Blackmer
1221 SW 4th Ave, Room 140
Portland, OR 97204

Dear Mr. Blackmer,

Thank you for your report on a Sexual Assault Response and Investigation: Portland Efforts Fall Short of a Victim Centered Approach. I appreciate the opportunity to address this matter within the Bureau of Emergency Communications. BOEC strives to provide the best possible service, and we welcome the suggestions for improving the response to victims of sexual assault so that we may better serve the public.

I discussed the outcome of the report with Lisa Turley, Director of BOEC, and am pleased to report that the bureau has already implemented changes in the way they receive sexual assault calls based on the results of your audit. Currently, staff is being retrained on protocol for taking sexual assault calls. They also have at their disposal a triage card with all available information regarding sexual assault questions.

Thank you again for bringing this matter to our attention. I am confident the changes made in the bureau will significantly improve the service we provide to victims of sexual assault.

Sincerely,

Commissioner Randy Leonard
June 8, 2007

Gary Blackmer
City Auditor
1221 S.W. 4th Avenue, Room 310
Portland, OR 97204

RE: Sexual Assault Detail (SAD) Audit

Dear Mr. Blackmer:

On behalf of the Portland Police Bureau, I want to extend my sincere thanks and appreciation for the time and effort the City Auditor’s Office, specifically, Drummond Kahn, put forth with the audit of the Police Bureau’s Sexual Assault Detail (SAD).

We welcome this third-party review of the systems and procedures that are in place to investigate and care for victims of sexual assault. When a sexual assault occurs, there are many partners that come together, including the initial call taker, police as the first on-scene responders, investigators, health care providers, victim advocates and prosecutors. This audit is a reminder of how critical each role in the system is to ensuring that the victim’s needs are met and that the case is investigated to the best of our ability.

This holistic approach discussed in the audit is the ideal model for sexual assaults. I believe that as a society and as a law enforcement agency, we have come far in the way we treat victims of sexual assault and the resulting investigations. However, there is always room for improvement. As with anything we do, the critical component seems to be the communication between all the players at the table. Though some of the recommendations outlined in Mr. Kahn’s audit apply to other partners of the Portland Police Bureau, it is still vital that we all discuss them and approach them as partners working toward the same goal.

Some of the recommendations are already being implemented prior to the release of this report. For example, the Police Bureau has been working toward improving our
reporting system, including the lag time between the initial investigation and detective review. We are also working at ensuring the staffing recommendations for detectives are implemented.

In addition, Mr. Kahn cites case tracking issues, investigative techniques and report writing procedures as issues that need addressing. We are making improvements toward our case management system, including directives and training to ensure that it is properly used.

I would like to make it clear that the Police Bureau agrees with the audit that the response to the victim must continue to be the highest priority. Meeting directly with the victim, ensuring he or she has proper support through a victim advocate and obtaining any additional applicable training for detectives are all necessary. A victim-centered approach by all partners must be fully adopted.

This audit highlighted improvements that are needed throughout the entire system in responding to sexual assaults. Those improvements are needed, but I would be remiss if I did not take this opportunity to highlight that there is extraordinary work that sexual assault detectives do every day, in what can be a thankless, but essential job. In an emotionally charged situation, detectives strive to respond in a compassionate and professional manner and have worked exhaustively on cases to ensure successful prosecutions.

Once again, I want to thank the Auditor’s office for this report and the opportunity to respond to its recommendations.

Sincerely,

ROSANNE M. SIZER
Chief of Police

RMS/tws
June 8, 2007

Auditor Gary Blackmer
1221 SW 4th Avenue, Room 140
Portland, OR 97204

Mr. Blackmer,

Thank you for the opportunity to comment on the audit of the City of Portland’s handling of sexual assault reports, and in particular, on the Bureau of Emergency Communications’ role in these incidents.

I am pleased to see independent validation that BOEC calltaking personnel were found to be “professional, helpful, and non-judgmental to victims.” Maintaining a high level of empathetic professionalism is important to us. Being able to quickly gain trust from callers, especially those who are victims, allows our calltakers to process calls in the most efficient and thorough manner possible, and thus get appropriate public safety response to them quickly.

In response to the two process improvement recommendations noted in the report:
1) Advise calltakers to follow adopted policy concerning bathing, cleaning, and destroying evidence.
2) Amend the existing policy to add advice to the victim that the crime can be reported even if they have cleaned or bathed.

I would like to advise you that BOEC found these suggestions extremely helpful and we have already taken the necessary steps to make these suggestions part of our process.

The Mission of the Bureau of Emergency Communications is to serve the community by providing the vital link to the proper emergency service response using the most efficient operating systems available. We appreciate your assessment of our ability to provide that assistance and your suggestions for improving our level of service.

Respectfully,

[Signature]
Lisa Turley
Director
This report is intended to promote the best possible management of public resources. This and other audit reports produced by the Audit Services Division are available for viewing on the web at: www.portlandonline.com/auditor/auditservices. Printed copies can be obtained by contacting the Audit Services Division.