

Sexual Assault Response Protocol Guide for Division of Quality Assurance Staff

This Sexual Assault Response Protocol (SARP) is an investigative tool that serves as guidance to determine if the entity responded appropriately to a potential sexual assault of a person living and receiving care in the health and residential care facilities regulated by the Division of Quality Assurance (DQA). It is to be used by surveyors and is available for an entity for use in investigating a potential sexual assault. This protocol is part of a training initiative that also includes an on-demand training that will be available in Cornerstone.

Access SARP, reporting requirements and resources at the Wisconsin Department of Health Services (DHS) website at: www.dhs.wisconsin.gov/regulations/sexual-assault.htm.

Did the entity take the following steps in its response?

- 1. Ensure victim's physical and emotional safety.
- 2. Call 911.
- 3. Develop responses that avoid victim re-traumatization.
- 4. Ensure entity staff who are responding to a reported sexual assault incident are trained to appropriately handle any report.
- 5. Ensure throughout the entire process the thorough and accurate documentation of information, observations, and entity decisions.
- 6. Ensure that records and any physical evidence are collected, preserved, and protected.
- 7. Provide assistance and support to all victims and hold abusers accountable by conducting adequate and complete investigations.

General Information:

If an entity contacts DQA to report a sexual assault and seeks advice about how to respond, proceed as follows:

- Direct the entity to immediately report to local law enforcement, if not done already.
- Direct the entity to Sexual Assault Response Protocol (SARP), Reporting Requirements and Resources, available on the DHS website at: www.dhs.wisconsin.gov/regulations/sexual-assault.htm.

PROBE	GUIDANCE	CONSIDERATION
Victim Protection Is or was the victim protected?	 Do not leave victim until safety of victim is ensured. If you are alone, contact another surveyor or call for immediate assistance from entity staff. Contact your supervisor to advise him or her of the situation or for further direction. Supervisors: Provide guidance to staff about how to proceed or assign staff to assist with the situation. Contact DQA Administration to advise them of the situation. At any time, contact Office of Legal Counsel (OLC) as needed for assistance. If entity is aware that a sexual assault has occurred: Ensure entity protected the victim and evidence. Determine what, if anything, the entity did to protect the victim(s) from further harm? If the entity knew and took no steps to protect the victim or the evidence from further harm or interference, determine why no action was taken. Determine whether the entity knew of or had reason to believe there may have been previous incidents involving the suspected perpetrator and this victim or other victims. 	Refer to "Sexual Assault Response Protocol Resources" for victim support services www.dhs.wisconsin.gov/regulations/sexual-assault.htm

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 Was the entity administrator informed of the incident? Who knew? 	 If the entity administrator is still not aware of the incident, inform the entity administrator (unless that person is the suspected perpetrator) of the information you have concerning the assault. If the entity administrator is the suspected perpetrator, contact your supervisor for further direction. Supervisors: If the administrator is the suspected perpetrator, determine whether to contact law enforcement or another official within the entity with the authority to act under the circumstances. Determine if administrator was notified or aware of the incident. What did the administrator do after being informed? If the administrator was not informed, who knew of the incident? What did they do with the information? Did they tell anyone? If so, who and when? Why did they respond in that way? 	 DQA staff focus: How did the entity respond (or fail to timely respond) to the information they received? What did the entity staff know, when did they know it and how did they respond? Were there opportunities for cares to be provided by staff? If so, during cares: Were there injuries of unknown origin that should have been examined? Did the victim make any statements or complaints? Did the staff observe any changes in the victim's behavior or responses? Other appropriate entity contacts may include: Licensee, Chief Executive Officer (CEO), Director of Operations (DO), Regional or Area Administrator, Director of Nursing (DON), RN supervisors, Social Worker, Medical Director. Appropriate contacts outside the entity may include: Local law enforcement, Wisconsin Department of Justice, the regional ombudsman, county Elder Abuse or APS workers. Refer to "Sexual Assault Response Protocol Resources" for contact information.

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 How did the entity respond at the time? How does the entity respond now? 	 How did the entity respond to the incident? Observe the entity's response to the incident. Obtain a copy of the policies and procedures in place at the time of the incident and current policies and procedures, if different. Did the entity's policies and procedures: Appropriately address victim protection and evidence preservation? Identify when and how to report an incident Require prompt reporting of sexual abuse? Require reporting the incident to law enforcement? Did the entity follow their policies and procedures as written? If not, determine how it responded differently and why the policies and procedures as written were not followed. Review staff training. What was offered, by whom, to whom and when? If none was offered, why not? Has the entity posted procedures or contact information for staff and residents and families to report incidents of abuse? If no policies and procedures were in place at the time, examine whether the entity's response was appropriate and thorough. 	 Ensure policies and procedures are developed according to recognized professional standards Do the entity's written policies and procedures require prompt reporting of suspected mistreatment, including physical and sexual abuse? What is the entity's procedure for protecting residents and preventing abuse? Training? Residents aware of reporting procedures? Staff and volunteers aware of responsibilities to report all suspected abuse? Residents and families encouraged to report? If the entity deviates from its own written policies and procedures, determine how and why. REMINDER: If the suspected abuser is a caregiver or employee, the entity must report the incident to Office of Caregiver Quality (OCQ) via the Misconduct Incident Reporting System: https://www.dhs.wisconsin.gov/misconduct/mir.htm Supervisors: Ensure notification of other agencies, as required (e.g., CMS, DSPS, APS).

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 Has law enforcement been contacted? If not, has law enforcement been contacted now? 	 Did the entity administrator (or his or her designee) immediately contact law enforcement? If so, what agency and law enforcement personnel responded? When did they respond? What did they do? Consider interviewing the responding officer. If law enforcement was not contacted, determine why not and advise the administrator to make contact If the administrator does not or refuses to contact law enforcement, contact your supervisor for further direction. Supervisor: Ask to speak with the administrator directly. If the administrator continues to resist contacting law enforcement, obtain the administrator's explanation or reason for choosing not to report the incident. If continues to refuse, contact law enforcement directly and report the situation or direct the on-site DQA staff to do so. At any time, contact OLC for guidance or further direction. After law enforcement is called, on-site DQA staff is to stay with the victim until law enforcement arrives. Surveyor will take further direction from law enforcement. Contact DQA Administration to advise him or her of the situation. 	 Local law enforcement agencies should be contacted immediately when a sexual assault is reported and when there is a continued risk of harm to the victim or others. When law enforcement is involved, DQA staff should coordinate their investigation activities with the law enforcement personnel who respond to the report.

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 Preserving Evidence Was any evidence preserved? Is there potential evidence remaining? 	 Did the entity immediately move to protect and preserve any possible remaining potential evidence? If so, what did they do? Did the entity wait for law enforcement's arrival for evidence collection? If so, how did the entity protect and preserve the scene and other potential evidence until law enforcement arrives. If not, ask the entity why they did not protect and preserve any physical evidence of the suspected crime present at the crime scene? 	 Physical items containing evidence may include clothing, bedding, towels, cloths, gloves, incontinence products, rugs, furniture, and objects. The victim's body (internal and external) may contain physical evidence. It is recommended that evidentiary exams be completed within 96 hours after a sexual assault; however, post 96-hour exams can be done under certain circumstances DNA evidence may be viable up to 1 week The victim's mind contains evidence (memory) of the incident. Access to area and victim is restricted only to essential staff. Entity staff should avoid wiping, washing or bathing the victim or changing the victim's clothes or bedding or touching or moving the items in the room in order to preserve possible evidence of the assault.

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Additional Victims Are there or could there have been other victims?	 Did the entity determine whether the perpetrator had access to or contact with other clients; was the possibility of other victims investigated? If so, how did the entity respond? If not, why not? Did the entity take steps to protect other clients from harm pending the outcome of the matter? What steps did it take? 	 The entity should determine or have taken steps to determine whether others have been harmed. If there is one victim and time has passed without the perpetrator being detected, there may be others. If there are or could be other victims, the entity should follow the victim protection, evidence collection and reporting steps outlined above.

Notes: