

## OPERATING PROCEDURES

**Reporting requirements** - reporting applies to situations where the DHS client either:

- \* Resides in a residential service directly managed by the Government.
- \* Is a statutory client of the Department.

DHS will report to police all allegations of physical or sexual assault, whether or not the victim has consented to the reporting of the incident.

The reporting requirement covers allegations of assault on a:

- \* Client by a staff member or volunteer.
- \* Client by a client.
- \* Client by a visitor or other non-staff member.
- \* Staff member or other person by a client.

**Police attendance** - in most instances reports will be made direct to the local CPS office. Where an immediate police response is required reports will be made to the Police Communication Centre (D24) or local communication centre.

Where the allegation is of a sexual offence, see section 5.1.13, *Operating Procedures*.

**Assistance** - DHS staff are wherever possible, required to assist police with any investigation. Where appropriate the services of the Victorian Institute of Forensic Medicine should be considered.

**5.1.13****SEXUAL OFFENCES****Code of Practice for Sexual Assault Cases**

These instructions must be read in conjunction with the Police Code of Practice for Sexual Assault.

**Functions of Police**

Members of the Victoria Police have three main functions in sexual assault cases:

- \* Protect and support victims.
- \* Establish that a crime has been committed by gathering evidence. This includes interviewing the victim and arranging an immediate medical examination where necessary.
- \* Identify, apprehend and prosecute the offender(s).

### **Complaints**

If a member is concerned about the performance of workers or procedures adopted in a Centre for Sexual Assault (CASA) or Hospital Crisis Care Unit (HCCU), contact the local Community Policing Squad (CPS) who will initiate follow-up action with the Centre's Co-ordinator to address these concerns.

A similar procedure applies where a CASA or HCCU wishes to raise concerns about police involvement. See Code of Practice.

### **Non-English Speaking Victims**

In cases where the victim is non-English speaking or is not proficient with the English language, an interpreter of the same sex as the victim should be provided as soon as possible. See section 1.3.13, *Operating Procedures*.

### **Guidelines for Members who Receive the Initial Report**

#### **Member receiving initial complaint -**

- \* Listen carefully and be supportive.
- \* Quickly obtain brief details about what has happened.
- \* Contact relevant police and other services if required:
  - request an ambulance if urgent medical attention is required.
  - dispatch a response unit.
  - notify CPS and CIB to attend.
  - notify the on-call Forensic Medical Officer, or, where it is estimated that there will be a considerable delay in the arrival of the on-call Forensic Medical Officer, the back-up Forensic Medical Officer should be called.
- \* Inform the victim about retaining forensic evidence.
- \* When a past sexual assault (which occurred days, months or even years prior) is reported, providing the victim with crisis counselling support and medical care (where required) is still the primary consideration. If the victim does not require medical care refer them to a CASA.

#### **Guidelines for members who are first on scene -**

- \* Protect and support the victim.
- \* Confirm or establish details to identify the offender(s).
- \* Preserve the crime scene.
- \* Ensure that a CPS member has been notified to attend at the earliest opportunity.
- \* Stay with the victim until a CIB or CPS member is available to take charge.

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**Guidelines for CPS members -**

- \* Care for the victim.
- \* Provide information about a medical examination and other support services. Advise the victim that they will be taken to the nearest CASA or HCCU for a medical examination. The Forensic Medical Officer is the only person who can make the decision, in conjunction with the victim, as to whether a medical examination should be conducted. If a medical examination is conducted, police members, the CASA counsellor/advocate and the Forensic Medical Officer should not be present whilst the victim undresses, unless otherwise requested by the victim. The Forensic Medical Officer or a police member should brief the victim about how to handle the clothing, etc., as they undress, in order to ensure the preservation and continuity of evidence.
- \* In cases of recent sexual assault, the victim should be taken to the nearest CASA or HCCU as soon as possible and in any event no later than two hours after the arrival of the first police member. There should be no exceptions to this unless the victim's wishes are to the contrary
- \* Request that a police communications centre contact the CASA (or after hours service) at the same time as the on-call Forensic Medical Officer at the HCCU, and notify them that a victim is being brought in for examination and support.
- \* Conduct a preliminary interview.
- \* Check that all possible evidence has been secured -
  - this includes evidence at the crime scene, any medical evidence and the victim's clothing. Make sure exhibits are properly labelled and taken to VFSC without delay.
  - make notes of the victim's physical condition. Where appropriate, and the victim consents, ensure that photographs are taken of any injuries inflicted during the assault.
- \* Provide the victim with information about support services.
- \* Complete paperwork and provide name and contact number to the victim.
- \* Ensure follow up contact with the victim is made.

**Guidelines for members interviewing a sexual assault victim** - see section 4.5.4, *Operating Procedures*.

**Guidelines for investigators -**

- \* Follow crime scene procedures as listed in section 4.2.1, *Operating Procedures*.
- \* Consider the victim -
  - introduce yourself and explain your role.

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- make sure priority is given to the physical and emotional welfare of the victim.
  - do not attempt to undertake extensive investigative procedures involving the victim until a medical examination has been conducted.
  - in cases of recent sexual assault, the victim should be taken to the nearest CASA or HCCU as soon as possible and in any event no later than two hours after the arrival of the first police member. There should be no exceptions to this unless the victim's wishes are to the contrary
- \* Monitor the progress of the victim's statement.
  - \* Keep the victim informed about the investigation.
  - \* Where a decision is made not to continue investigations or not to lay charges-
    - make sure that the decision and reasons for it are communicated to the victim both verbally and, if requested, in writing.
    - tell the victim that they have a right to request the Director of Public Prosecutions for a review if a decision not to charge has been made.

**Procedures for No Further Police Action**

When a victim does not wish for police to take further action in regard to the alleged sexual assault, see section 4.4.2, *Operating Procedures*.

**Exclusion of Sexual Assault Victim Details from Task Reports**

Do not include on Task Reports the details of the identity of a sexual assault victim, or any other details that may lead to their identification. Where there is an operational necessity to have this information, obtain it from the LEAP database.

**Rape Squad Notification**

The Rape Squad must be immediately notified of offences (as listed below), when either:

- \* Committed by person(s) unknown to the victim.
- \* There is an indication of unusual or bizarre circumstances.
- \* A suspect is arrested.

Offences:

- \* Rape or attempted rape.
- \* Abduction or attempted abduction for sexual purposes.
- \* Child stealing or attempted child stealing.

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- \* Any serious sexual assault.
- \* Sexually motivated burglaries.

**Child Exploitation**

**Purpose** - the Child Exploitation Squad (CES) investigates allegations of child sexual exploitation. The CES also maintains a data base of suspects/offenders and can provide operational support to members on request.

**Notification** - members should consult the CES where either:

- \* The suspect is a person having care, custody or control of the victim in a professional capacity.
- \* The suspect is believed to be associated or affiliated with other paedophile offenders.
- \* The suspect is believed to have offended against multiple victims outside his or her immediate family situation.
- \* Pornographic films, items or publications depicting children are suspected or located.
- \* On the apprehension of any persons for a sexual offence (other than incest) against persons under 16 years or where a suspect has been nominated for such offence.

**Charges** - where a person is charged with any sexual offence against a victim under the age of 16 years the informant must notify the CES.

**Office of Pre-School and Child Care (OPCC)**

A protocol exists between OPCC and Victoria Police regarding the investigation of allegations of abuse of children attending children's services.

Members who become aware of a child suffering some form of abuse while attending a children's service are to comply with the guidelines as stated in the protocol. Further information is available from CES and CPS Co-ordinator's Office.

**5.1.14 MOTOR VEHICLE THEFT****Vehicle Theft Report**

**General** - the Vehicle Theft Report [Form L5] is used to record stolen vehicles, stolen vehicle engines, and the theft of all issued registration plates for any vehicle. A Vehicle Recovery Report [Form L23] is used to report the recovery of any of the above.

**Member responsible for taking report** - to ensure adequate security of a recovered stolen vehicle the member taking an initial report [Form L5] must: