

Victoria Police Manual – Procedures and Guidelines

Sexual offence investigations

Source Policy

These Procedures and Guidelines support and must be read in conjunction with the following:

- **VPMP Crime reporting and investigations**
- Sex Offenders Registration Act 2004
- Code of Practice for the Investigation of Sexual Assault

Application

Procedures and Guidelines are provided to support the interpretation and application of rules and responsibilities. They include recommended good practices and assessment tools to help employees make lawful, ethical and professional decisions. Employees should use the **Professional and ethical standards** to inform the decisions they make to support interpretation of Procedures and Guidelines.

Procedures and Guidelines are not mandatory requirements on their own. However, where rules and responsibilities state that employees must have regard to Procedures and Guidelines, the Procedures and Guidelines must be used to help make decisions in support of the rules.

Procedures and Guidelines

1. Code of Practice for the Investigation of Sexual Assault

The following Guidelines summarise the Code of Practice for the Investigation of Sexual Assault.

2. Responsibilities of reporting and attending member

2.1 *Employee receiving the initial complaint*

Obtain brief details about what has happened and contact relevant police and other services as required. In particular:

- request an ambulance if medical attention is required
- notify the PCC and/or dispatch a response unit

- notify the Sexual Offences and Child Abuse Investigation Teams (SOCIT) and CIU to attend
- notify a supervisor
- notify the on-call FMO or the back-up FMO, where the on-call FMO arrival will be considerably delayed.

2.2 *First member on the scene*

Remain with the victim until a detective or SOCIT member is available to take charge.

3. SOCIT member responsibilities

- Notify DHS Child Protection if mandatory reporting criteria are met - refer to VPMP Protecting children.
- Contact the Centre Against Sexual Assault (CASA) (or after hours service) at the same time as the on-call FMO at the Crisis Care Unit (CCU), and notify them that a victim is being brought in for examination and support.
- Provide the victim with written information about support services.
- Complete paperwork and provide the victim with your contact details and the contact details of the nearest SOCIT.

3.1 *Handling evidence and exhibits*

- Ensure that all possible evidence, including evidence at the crime scene, medical evidence and the victim's clothing, has been secured.
- Ensure that exhibits are properly labelled and taken to VPFSC without delay.
- Make note of the victim's physical condition. Where appropriate, and the victim consents, ensure that photographs are taken (preferably by the FMO) of any injuries inflicted during the assault.

3.2 *Interviewing the victim*

- Unless the victim requests otherwise, a SOCIT member of the same sex should conduct the interview and take a full statement.
- Conduct the interview in a private, comfortable setting and limit the number of persons present.
- Explain to the victim why and how the interview is to be conducted.

- Take into account the physical and emotional state of the victim. Consult with the attending FMO and the victim or a sexual assault counsellor acting on the victim's behalf.
- If the victim has a cognitive impairment, conduct the interview with the assistance of an independent third person, see **VPMG Interviewing specific categories of person**.
- If the victim is a child, have a parent, guardian or independent third present where appropriate, **VPMG Interviewing specific categories of person**.
- If necessary, obtain an interpreter of the same sex as the victim.
- Consider a VARE statement - refer to the **VPMP Interviews and statements**.

3.3 *Facilitating medical care and forensic examination of the victim*

- Unless the victim requests otherwise, take them to the nearest CASA or CCU as soon as possible and no later than two hours after arrival of the first member.
- Request that the PCC contact the CASA/CCU at the same time as arranging an on-call FMO.
- Notify the FMO and the CASA/CCU that a victim is being conveyed to the Unit for examination and support.
- Where the victim is a child:
 - contact the appropriate paediatric forensic medical service as soon as possible. In metropolitan areas contact services for children victims through the Victorian Forensic Paediatric Medical Service (phone 1300 661 142).
 - for rural areas, or where it is not in the child's best interests to be transported to one of the above areas, contact the Victorian Institute of Forensic Medicine (VIFM) for advice.
 - liaise with Child Protection, DHS in accordance with **VPMP Protecting children**

When dealing with a past sexual assault, assess the need for crisis care and a forensic examination. Seek advice from any of the following:

- Gatehouse Centre
- a CASA
- VIFM
- nearest CCU

The FMO will consult with the victim and decide which medical procedures are to be conducted.

4. Investigating member responsibilities

4.1 *General responsibilities*

Give priority to the physical and emotional welfare of the victim. In particular:

- introduce yourself and explain your role
- ensure a police member (preferably from a SOCIT) stays with the victim
- only undertake extensive investigative procedures involving the victim once a medical examination has been conducted.

If a suspect is interviewed, inform the victim and obtain their views on bail. Advise the victim of any bail application and bail conditions designed for their protection.

Submit an Information Report to the Sex Offender Registry via Interpose upon completion of an investigation into a Schedule offence under the Sex Offenders Registration Act 2004.

Offer the victim an opportunity to complete a Victim Impact Statement - refer to VPMP Victims Support.

Submit the Sexual Offences List Information Sheet for committal hearings [Form 1321] and summary hearings [Form 1320]. Also submit the Victim Notification Form [Form 1305]. Refer to VPMG Brief preparation and management for more information about preparing briefs of evidence for sexual offences.

4.2 *Drug and alcohol testing of sexual assault victims*

- Where there is a reasonable belief that a victim may have been induced by drugs, consult with an FMO regarding obtaining a blood or urine sample. Samples should be taken within 12 hours of exposure.

After the samples have been obtained, take the samples and toxicology reporting request form (supplied by the FMO) to the VIFM within two hours. Where this is not possible, store the samples at the station and ensure they are:

- refrigerated
 - recorded in the Property Book
 - delivered to the VIFM as soon as possible.
- The relevant Department is responsible for the costs involved in the testing of the samples.

5. No further police action/withdrawal of complaint

5.1 *Victim does not want further police action at the time of first report or during any subsequent investigation*

When a victim reports a sexual assault to police and at the time of first report or at any stage during a subsequent investigation, the victim requests to have their complaint withdrawn:

- Record details of the offence on LEAP and document as much evidence as possible
- A statement of no further police action cannot be taken within the first 48 hours of the initial report
- After the first 48 hours a Sergeant must contact and speak to the victim to confirm their wishes. A statement requesting a complaint to be withdrawn can be taken by any member, but must be overseen by a Sergeant
- The statement is not to be in a pre-typed or pro-forma style
- The statement is to include:
 - the nature of the original allegation
 - reason for withdrawal of support
 - the fact that the decision is of their own free will
 - the impact on the victim/family if the investigation continues
 - if victim has been advised by solicitor/family to withdraw the complaint.
- Between two to four weeks after taking the statement, the victim is to be contacted by a Sergeant (preferably the same Sergeant who oversaw the taking of the statement) to confirm their desired course of action.
- If a statement is not able to be taken then a notation of the circumstances is to be recorded in the Interpose investigation and/or LEAP.
- Encourage the victim to attend a CASA, CCU or doctor for a medical examination
- Advise the victim that during the medical examination, forensic evidence may be retained and could be used in any future police investigation should the victim change their mind about police involvement.

5.2 *Decision is made to discontinue the investigation or not to lay charges*

The investigating member should ensure that:

- The decision and its reasons are communicated to the victim verbally and in writing (using the pro-forma letter contained in the **Code of Practice for the Investigation of Sexual Assault**)

6. Offender welfare management

Where a member interviews a person for a child sex offence extra consideration is to be given to the suspect's post interview welfare. Members are to ensure a copy of the welfare pamphlet available from the Crime Command, SOCIT Coordination Team intranet page is given to the suspect and any support person accompanying the suspect.

Further Advice and Information

For further advice and assistance regarding these Procedures and Guidelines, contact your local SOCAU or SOCIT unit, or your supervisor.

Update history

Date of first issue	22/02/10	
Date updated	Summary of change	Force File number
22/07/13	Removal of offer for victim to seek OPP review in non-proceeding case in accordance with DPP request. Updated references to SOCAU with SOCIT	FF-077007 1
03/03/2014	Section 5 updated re withdrawal of complaint	FF 083057
31/03/2014	Addition of offender welfare management considerations	FF 082564