Responding to Sexual Assault in Custody

Last Updated: June 2022

Next Review Date: March 2023

Owner: Chief Nurse / Director Physical Health

1. Purpose

To provide guidance to staff when responding to an alleged recent or past disclosure of sexual assault.

Please note: Health are not required to carry out a formal sexual assault assessment or medical examination; this should always be referred to a Sexual Abuse Assessment and Treatment Service (SAATS).

2. Response

In an acute situation provide emergency care and/or immediate first aid.

Custodial are responsible for cordoning off as appropriate the area the alleged assault took place in, as a crime scene for police.

All conversations after an alleged sexual assault takes place in a private area, where the conversation cannot be overheard, and by the most appropriate clinician available.

During this conversation provide reassurance and support using statements such as:

- I'm sorry this has happened to you. So that I can help you, I need to ask a couple of questions, can you tell me what has happened to you, when this happened to you?
- Do you have any pain? Or tell me about any symptoms you have?

- Can we arrange for you to talk to the Sexual Assault Assessment team who can make sure you're ok and help deal with any concerns you may have about your health?
- The Sexual Assault Assessment Team will talk you through your options. One of these is to have a physical exam and evidence collection
- The Department of Corrections is obliged to inform police (Custody will do this) but you have the choice as to whether you want to speak with police or not

2.1. Sexual Abuse and Assessment Team (SAATS)

SAATS provide specialist sexual assault medical services to people of all ages and genders who may have experienced sexual assault.

The local SAATS is contacted for advice in all instances.

With consent, arrangements can be made for a sexual assault assessment.

Contact with the local SAATS is usually done by calling the local DHB operator and asking to be put through to the SAATS Team or search here Find a specialist sexual assault medical service 3

2.2. Decline SAATS Team Assessment

If a person declines an assessment from the SAATS then offer to arrange a consultation by phone.

If the person declines any involvement with the SAATS then the medical officer is notified, and an appointment booked urgently.

The medical officer will provide a general medical assessment (not a sexual assault assessment) which will involve

- Assessment, treatment, and documentation of any injuries
- Completion of ACC 45
- Record in Classifications using READ code SN571

All documentation is written in a clear and factual manner. Noting how the person presents, any injuries and exactly what they tell you happened verbatim.

3. Preparation

Use Getting Specialist Medical Health After Sexual Assault

as a guide to help prepare the person to meet with the SAATS team. A copy is given to the person as well.

3.1. Preserving Evidence

When a person agrees to a SAATS assessment and/or wishes to involve the police, it is important to preserve DNA, semen and trace evidence, which deteriorates over time, and may be lost with washing or contact with other people or through medical interventions.

If possible, ensure the person does NOT do any of the following

- wash
- change clothes
- pass urine (If need to advise not to wipe, and also collect a urine sample)
- pass a bowel motion
- eat and/or drink
- brush hair and/or teeth
- rinse mouth.

All items of interest (sheets, clothing etc) from the cell or place of assault are placed into an evidence bag by Custody Officers using clean gloves.

4. Transfer for Assessment

If the advice from the SAATS team is for an assessment to take place off site, then arrangements are made following the transfer of a patient procedure.

Depending on local arrangements, off site examinations may be done at a sexual health clinic, an emergency department, a dedicated sexual assault clinic, or at a police station.

Sexual Assault examinations may also be conducted on-site if suitable medical examination rooms are available (e.g., all surfaces can be wiped down to prevent DNA decontamination) and if the local SAATS are able to travel to the site.

Health Services ensures that prison security is aware of the patients' appointment and are mindful that Officers escorting are sensitive to the situation.

5. Custody during Assessment

It is preferable that Custody Officers are not in the room during an exam. If they must be in the same room, they can stand behind a curtain or outside the door and/or long chains are used if required.

Corrections health services staff are able to support the person during an assessment if consent is gained, but they do not provide any custodial / security duties while in the room.

6. Notification

The Health Centre Manager is notified as soon as possible.

Due to the potential for continued or future assault, then the Prison Director and Principal Custody Officer are notified by the Health Centre Manager as soon as possible.

7. Follow Up

Ensure all Health Services notes are documented in the electronic clinical file.

Refer to site Clinical Nurse Specialist or Intervention Support Program team for guidance.

Refer, if consented, to external support groups / counselling.

Welfare checks are scheduled in consultation with mental health services and the person concerned.

Welfare checks are preferably made by the same person or by a small group of staff members to provide continuity and to prevent re-traumatisation.

8. Other Policies, Legislation and Related Documents

The following policies, legislation and documents should be considered when reading this policy:

Informed Consent