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NAVSUPPACT NAPLES INST 1752.4B
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NAVSUPPACT NAPLES INSTRUCTION 1752.4B

From: Commanding Officer, U.S. Naval Support Activity, Naples, Italy

Subj: SEXUAL ASSAULT PREVENTION AND RESPONSE (SAPR) PROGRAM

Ref: (a) OPNAVINST 1752.1C
(b) DoD Directive 6495.01 of 23 January 2012
(c) OPNAVINST 1752.2B
(d) DoD Instruction 6495.02 of 28 March 2013
(e) SECNAVINST 1752.4
(f) CNO WASHINGTON DC 1812287 Jul 13 (NAVADMIN 181/13)
(g) Manual for Courts-Martial (MCM)
(h) MILPERSMAN 15560
(i) OPNAVINST F3100.6J
(j) SECNAVINST 1730.9
(k) DoD Publication 6025.18R of January 2003
(l) SECNAV M-5510.30
(m) CNICINST 1752.4
(n) CNO WASHINGTON DC 281611Z Apr 14 (NAVADMIN 095/14)
(o) DTM-14-007 of 30 September 2014

Encl: (1) Sexual Assault Prevention and Response Definitions
(2) Navy Policy Regarding Confidentiality for Victims of Sexual Assault
(3) Navy Commander's Checklist for Prevention and Response to Allegations of Sexual Assault
(4) Situation Report (SITREP) Guidance
(5) Sexual Assault Prevention and Response (SAPR) Command Duty Officer Procedure for Responding to Sexual Assault
(6) Crime Victim's Bill of Rights

1. Purpose. To issue policy, provide guidance, and designate responsibility for implementation of the Commanding Officer (CO), U.S. Naval Support Activity, (NAVSUPPACT) Naples, Italy Sexual Assault Prevention and Response (SAPR) Program per references (a) through (o). This instruction has been substantially revised and should be viewed in its entirety.

2. Cancellation. NAVSUPPACT NAPLES INST 1752.4A.

3. Definitions. Terms used, in this instruction, are defined in references (a) and (b), and enclosure (1). Sexual assault as used in this instruction applies to all such offenses against persons 18 years of age or older, and which are not otherwise considered child sexual abuse or domestic abuse as defined in reference (c) and enclosure (1).

4. Applicability. Per reference (b), this instruction applies to NAVSUPPACT Naples, Italy and all other organizational entities within the Naples, Italy general area of responsibility (AOR) to include:

a. Active duty members of the military services (Army, Navy, Air Force, Marine Corps, and Coast Guard, when attached to a Naval command) who are eligible to receive treatment in a military treatment facility (MTF).

b. Members of the National Guard and Reserve component of the military services and their family dependents 18 years of age or older when performing active service and inactive duty training. Reference (b), outlines additional SAPR and medical services provided to such personnel and eligibility criteria for Restricted Reporting options for victims of sexual assault.

c. Military dependents 18 years of age and older who are eligible for treatment in the military healthcare system, at installations in the continental United States (CONUS) and outside the continental United States (OCONUS), and who were victims of sexual assault perpetrated by someone other than a spouse or intimate partner. Reference (c), outlines the full range of services to victims of domestic abuse who are sexually assaulted by someone with whom they have an intimate partner relationship.

d. Non-military personnel who are only eligible for limited medical services in the form of emergency care. These non-military personnel will also be offered the limited SAPR services of a Sexual Assault Response Coordinator (SARC) and a SAPR Victim Advocate (VA) while undergoing emergency care OCONUS. These limited medical and SAPR services shall be provided to:

(a) Department of Defense (DoD) civilians and their family dependents 18 years of age and older when they are stationed or performing duties OCONUS and eligible for treatment in the military healthcare system at military installations OCONUS. Reference (b) and enclosure (2) explain reporting options available to DoD civilians and their family dependents 18 years of age and older.

(b) U.S. citizen DoD contractor personnel when they are authorized to accompany the Armed Forces in a contingency operation OCONUS and their U.S. citizen employees.

e. Service members who are on active duty but were victims of sexual assault prior to enlistment or commissioning. These service members are eligible to receive full SAPR services and either reporting option.

f. On a space available basis, retired members of the military services and their family dependents 18 years of age and older.

g. Victims of sexual assault occurring under Department of Navy jurisdiction are eligible, regardless of affiliation, for advocacy services on a humanitarian basis.

h. Effective 31 August 2013, same-sex domestic partners of military members and, where applicable, children of the same-sex domestic partners, who are 18 years of age and older, and who were victims of sexual assault perpetrated by someone other than a spouse or intimate partner, and hold an Identification and Privilege Card (DD Form 1173) in accordance with DoD Manual 1000.13, Volume 1 "DoD Identification (ID) Cards: ID Card Life Cycle," August 31,2013, are eligible for the SAPR services of a SARC and SAPR VA, and limited emergency care medical services at a military Medical Treatment Facility (MTF), unless otherwise eligible for additional medical care in a military MTF. Same-sex domestic partners of military members and, where applicable children of the same-sex domestic partners, who are 18 years of age and older may file Unrestricted or Restricted reports of sexual assault (see reference (c)). Sexual assault that occurs within a domestic relationship or involves child abuse will be coordinated through FAP.

5. Background

a. The Navy's first sexual assault prevention and intervention program was established in 1994 as the Sexual Assault Victim Intervention (SAVI) Program for the purpose of providing consistent, standardized response to sexual assault incidents through sexual assault awareness and prevention education, victim advocacy, and data collection. In October of 2005 reference (a) established the overarching elements of sexual assault prevention and response policy for the Department of Defense. The DoD Sexual Assault Prevention and Response Office (SAPRO) established in 2005 serves as the single point of authority for sexual assault policy for the military services.

b. Reference (f), establishes the Director, Twenty-First Century Sailor Office (OPNAV N17) Chief of Naval Personnel (CNP) as the single executive agent for the Navy's SAPR Program. The CNP will align strategy, policy and programs with the Department of Navy Sexual Assault Prevention and Response Office (DONSAPRO).

c. References (a), (b), (d), and (e) outline Department of Defense (DOD) and Department of Navy (DON) policy and procedures for the three components of the SAPR Program:

(1) Prevention and awareness education to reduce sexual assault incidents.

(2) Standardize data collection and reporting of sexual assault.

(3) Victim advocacy. The SAPR Program provides a standardized approach to the implementation of this policy within all commands throughout the Navy to ensure sensitive, coordinated, and effective response to victims of sexual assault.

6. Policy

a. Sexual assault is a criminal act incompatible with the DON core values, high standards of professionalism, and personal discipline. Military personnel alleged to have committed a sexual offense may be subject to court martial under reference (g). Additionally, such military personnel are subject to being

processed for administrative action separation per reference (h), articles 1910-142 or 1910-010. Commanders shall take appropriate legal action under U.S. laws and regulations on all allegations of sexual assault.

b. The DoD goal is a culture free of sexual assault, through an environment of prevention, education and training, response capability, victim support, reporting procedures, and appropriate accountability that enhances the safety and well being of all persons covered by this instruction and reference (b).

c. The SAPR Program shall focus on the victim and doing what is necessary and appropriate to support victim recovery, and also, if a service member, to support that service member to be fully mission capable and engaged. The SAPR Program shall provide care that is gender-responsive, culturally-competent, and recovery-oriented as defined in enclosure (1).

d. Standardized SAPR requirements, terminology, guidelines, protocols for instructional materials shall focus on awareness, prevention, and response at all levels, as appropriate.

e. The SARC shall serve as the single point of contact for coordinating appropriate and responsive care for sexual assault victims. SARCs shall coordinate sexual assault victim care and sexual assault response when a sexual assault is reported. The SARC shall supervise SAPR VAs, but may also be called upon to perform victim advocacy services.

f. The SAPR VA shall provide non-clinical crisis intervention and ongoing support, and referrals for adult sexual assault victims. Support will include providing information on available reporting options and resources to victims.

g. Command sexual assault awareness and prevention programs, as well as law enforcement and criminal justice procedures that enable persons to be held accountable for their actions, as appropriate, shall be established and supported by all commanders.

h. An immediate, trained sexual assault response capability shall be available for each report of sexual assault in all locations, including deployed locations. The response time may be affected by operational necessities, but will reflect that sexual assault victims shall be treated as emergency cases.

i. Victims of sexual assault shall be protected from coercion, retaliation, and reprisal in accordance with reference (e) of this instruction.

j. Victims of sexual assault shall be protected, treated with dignity and respect, and shall receive timely access to appropriate services. All service members and DON employees shall receive comprehensive medical treatment, including emergency care treatment and services, as described in reference (b) and enclosure (1).

k. The DoD is committed to ensuring victims of sexual assault are protected; treated with dignity and respect; and provided support, advocacy, and care. The DoD supports effective command awareness and prevention programs. The DoD also strongly supports applicable law enforcement and criminal justice procedures that enable persons to be held accountable for sexual assault offenses and criminal dispositions, as appropriate. To achieve these dual objectives, DoD preference is for complete Unrestricted Reporting of sexual assaults to allow for the provision of victim services and to pursue accountability. However, unrestricted reporting may represent a barrier for victims to access services, when the victim desires no command or law enforcement involvement. Consequently, the DoD recognizes a fundamental need to provide a confidential disclosure vehicle via the Restricted Reporting option.

l. Per reference (f), enlistment or commissioning of personnel in the military services shall be prohibited and no waivers are allowed when the person has a qualifying conviction for a crime of sexual assault. Enclosure (1) further defines "qualifying conviction."

7. Action

a. Commanding Officer, NAVSUPPACT Naples, Italy shall:

(1) Establish a SAPR Program that creates a culture of no tolerance to sexual assault, provides education and training to optimize response capability, to include victim support, reporting procedures and accountability that enhances the safety and well being of all.

(2) Ensure a 24 hour, 7 days-a-week response capability to all reports of sexual assault. The DoD SAFE HELPLINE at +1-877-995-5247 is the sole number advertised as the Navy's SAPR Victim Advocate 24/7 response line on installation websites for CONUS bases. For OCONUS installations, sites will continue to advertise both the SAFE HELPLINE and the on-call SAPR VA number per reference (g).

(3) Ensure an effective SAPR program that incorporates a coordinated approach between medical, mental health, legal, investigative services, security, chaplains and Fleet and Family Support Center staff.

(4) Designate an installation SARC to provide overall management of the SAPR program and to implement and administer provisions contained in this instruction and in references (a) and (b), (f) and (h).

(5) Chair the monthly installation Sexual Assault Case Management Group (SACMG) or designate this responsibility to the installation Executive Officer. Reference (b) outlines specific responsibilities of the SACMG.

(6) Provide coordination of the SAPR Program per references (b) and (h) and direct the SARC to implement a highly responsive SAPR Program.

(7) Ensure installation activities, agencies, and personnel are advised and have access to SAPR Program services and supportive resources.

(8) Ensure installation Command Duty Officers reference enclosures (4) and (5) for reporting and notification procedures when responding to a report of sexual assault.

(9) Ensure all eligible personnel have access to a well-coordinated, highly responsive SAPR VA Program and DoD civilian employees are afforded victim advocacy support. Ensure all service members, family members, and civilian personnel are made aware of Navy resources available to assist victims of sexual assault, including Navy chaplains.

(10) Ensure availability of psychological and supportive counseling for sexual assault victims.

(11) Establish a SACMG per reference (b), (m), and enclosure (1).

(12) Ensure the SARC and SAPR VAs receive the required initial and refresher training.

(13) Where appropriate and useful, establish Memorandum of Understanding with relevant community agencies to supplement efforts to implement program requirements.

b. All COs/Officers-in-Charge.

(1) Will attend the Sexual Assault Case Management Group (SACMG) when there is a victim from their command (non-delegable) per ref (m).

(2) Ensure that the command triad receives the SAPR CO Command Toolkit within 30 days of taking command per ref (f).

(3) Ensure Navy's sexual assault prevention policy becomes an integral part of day-to-day personnel management and provides the safest possible emotional and physical command environment.

(4) Utilize enclosure (3) to develop comprehensive command prevention and response to allegations of sexual assault.

(5) Designate a SAPR command point of contact (POC) who is responsible for facilitating awareness and prevention training, maintaining current information on victim resources, and providing oversight of command compliance with SAPR Program

requirements. The SAPR command POC is responsible to conduct annual SAPR general military training (GMT). The command SAPR POC may be trained as a command SAPR VA. Reference (e), provides specific guidance for SAPR general military training protocols and documentation requirements.

(6) Ensure the availability of trained SAPR VAs within the ranks to respond 24/7 to victims when a sexual assault occurs in locations where installation SAPR VAs are not available (e.g., when deployed). Ensure SAPR VAs who provide support when the command is deployed or underway have been screened by the SARC and have received 40 hours of initial SAPR VA training before providing support to victims and report to the SARC when performing advocate duties.

(7) At the time of designation, ensure the command SAPR DCC and the command SAPR POC receive eight hours of required training respectively, regarding performance of their responsibilities under the SAPR Program from the SARC.

(8) Ensure service members receive annual sexual assault prevention and response training updates at the command level. The focus of this training is to ensure all personnel have a working knowledge of what constitutes sexual assault and sexual harassment, why sexual assault is a crime, personal avoidance of risk, and the meaning of consent. Additionally, the training should provide personnel with information on the reporting options available to them and the exceptions and/or limitations of each option. To help service members understand the nature of sexual assault in the military environment, this training should be scenario-based, using real life situations to demonstrate the entire cycle of reporting, response, and accountability procedures. Additional guidance on GMT specific to the SAPR Program can be found in references (b) and (e).

(9) Ensure victims of sexual assault receive reasonable protection from the alleged offender(s). In cases where victim and alleged offender are assigned to the same command, the CO should consider relocating the victim or the alleged offender until the case is legally settled and/or the victim is considered out of danger. The CO will consider both the physical and emotional well-being of the victim in making this decision. Reference (b) provides specific guidance on expedited transfers requested by the victim.

(10) Advise service members who have filed an unrestricted report of sexual assault of their option to request transfer from the command to which they are assigned. Reference (b) provides specific guidance regarding requests for transfer.

(11) Ensure all administrative separation actions involving victims of sexual assault are reviewed by the Commander, Navy Personnel Command (PERS-832) to ensure a victim receives full and fair consideration of their military service and such determinations are consistent and appropriate per references (g) and (h).

(12) Ensure swift, sensitive, and fair response to sexual assault allegations, and when appropriate, prosecutions of sexual assault cases. Reference (o), provides additional guidance regarding Sexual Assault Initial Disposition Authority (SA-IDA).

(13) Ensure victims receive case updates within 72 hours of the last SACMG. This obligation may not be delegated. At the victim's request, this may be in writing or delivered via the SARC, Deployed Resiliency Counselor (DRC), SAPR VA, or UVA per ref (m). The CO may also consider utilizing the VLC for victim updates.

(14) Ensure all allegations of sexual assault within the ranks are referred, as soon as practicable, to NCIS. Internal command inquiry or investigation shall be reserved only for incidents of alleged sexual assault for which NCIS or civilian law enforcement has declined to investigate. COs shall ensure all levels of command authority, including command duty watch standers, are advised of and adhere to this requirement.

(15) Ensure cases involving allegations of rape, sexual assault, forcible sodomy, and attempts to commit those offenses under article 120, UCMJ, are forwarded to SA-IDA for action. This applies to other offenses arising from or relating to the same incident(s) whether committed by the alleged perpetrator or the alleged victim of the rape, sexual assault, forcible sodomy, or attempts thereof.

c. Installation SARC.

(1) Implement and administer all aspects of the command SAPR Program per references (a), (b), (d) and (e).

(2) Ensure there is a Navy-wide confidential advocate hotline which will provide for around-the-clock sexual assault response capability and timely access to appropriate victim services and advocacy.

(3) Ensure training is provided to SAPR VAs, command SAPR POCs, command SAPR Liaisons and command SAPR DCCs. Coordinate and provide SAPR VAs initial and annual refresher training. Provide command triad SAPR CO Command Toolkit within 30 days of CO taking command per ref (f).

(4) Facilitate sexual assault awareness and prevention training and ensure commands have access to SAPR educational materials.

(5) Provide oversight of assigned SAPR VAs both ashore and afloat. Oversight includes maintenance of a roster of trained SAPR VAs, recall system, collateral contact, and consultations on all sexual assault cases.

(6) Provide case management for all identified cases including tracking services for victims from initial report to resolution and ensure monthly updates are provided to the victim.

(7) Per reference (b) and enclosure (1), assign an alpha-numeric Restricted Reporting Case Number to Sexual Assault Forensic Examination kits for restricted reports and inform the victim when evidence is almost five years old.

(8) Maintain Victim Reporting Preference Statement (DD Form 2910) and Sexual Assault Report Incident Data Form (DD Form 2965) for all restricted and unrestricted reports.

(9) Co-chair the SACMG and ensure the group meets monthly to review all pending and newly reported cases, facilitate victim updates and ensure system coordination, accountability, and victim access to quality services per reference (b).

8. Data Collection, Reporting, and Forms

a. Incidents of sexual assault shall be reported to the responsible Echelon 2 commands by means of an OPREP-3 NAVY BLUE or OPREP-3 NAVY UNIT SITREP per reference (l). Commander, Navy Installations Command will coordinate the collection and submission of the annual restricted report incident data to Secretary of Defense through the DONSAPRO Office.

b. Military Protective Order, DD Form 2873, Victim Reporting Preference Statement, DD Form 2910, and DD Form 2965 are available at: http://www.dtic.mil/whs/directives/infomgt/forms/formsprogram.htm.

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SEXUAL ASSAULT PREVENTION AND RESPONSE DEFINITIONS

1. Alpha-Numeric Restricted Reporting Case Number (RRCN). For restricted reports of sexual assault the SARC shall generate an Alpha-Numeric RRCN unique to each incident that shall be used in lieu of personal-identifying information to label and identify the evidence collected from a Sexual Assault Forensic Exam (SAFE). Upon completion of the SAFE, the healthcare provider will package, seal, and label the evidence containers with the RRCN.

2. Child. An unmarried person under 18 years of age eligible for care through a DoD medical treatment program. The term "child" means a biological or adopted child, stepchild, foster child, or ward. The term also includes any individual of any age who is incapable of self-support because of mental or physical incapacity and for whom treatment in a Department of Defense medical treatment program is authorized.

3. Child Sexual Abuse. Sexual activity with a child for the purpose of sexual gratification of the alleged offender or some other individual. Such abuse includes child exploitation, molestation, rape, intercourse with a child and sodomy. Actions including, but not limited to: the employment, use, inducement, enticement, or coercion of any child to engage in, or having a child assist another person to engage in any explicit conduct (or any simulation of such conduct). This also includes internet solicitation, or other sexual activity between the offender or a third party and a child. (This definition is not all inclusive)

4. Confidential Communication. Oral, written or electronic communications of personally identifiable information concerning a sexual assault victim and the sexual assault incident provided by the victim to the SARC, Sexual Assault Prevention and Response (SAPR), Victim Advocate (VA), or healthcare personnel in both a Restricted and unrestricted report.

5. Consent. Words or overt acts indicating a freely given agreement to the sexual conduct at issue by a competent person. An expression of lack of consent through words or conduct means there is no consent. Lack of verbal or physical resistance or submission resulting from the accuser's use of force, threat of force, or placing another person in fear does

not constitute consent. A current or previous dating relationship or the manner of dress of the person involved with the accused in the sexual conduct at issue shall not constitute consent. There is no consent where the person is sleeping or incapacitated, such as due to age, alcohol or drugs, or mental incapacity.

6. Crisis Intervention. Emergency non-clinical care aimed at assisting victims in alleviating potential negative consequences by providing safety assessments and connecting victims to needed resources. Either the SARC or SAPR VA will intervene as quickly as possible to assess the victim's safety and determine the needs of victims and connect them to appropriate referrals, as needed.

7. Culturally-Competent Care. Care that provides culturally and linguistically appropriate services.

8. Domestic Abuse

a. Domestic violence or;

b. a pattern of behavior resulting in emotional/ psychological abuse, economic control, and/or interference with personal liberty when such violence or abuse is directed toward a person who is:

(1) A current or former spouse;

(2) A person with whom the abuser shares a child in common; or

(3) A current or former intimate partner with whom the abuser shares or has shared a common domicile.

9. Domestic Violence. An offense under the U.S.C., the Uniformed Code of Military Justice (UCMJ), or State law that involves the use, attempted use, or threatened use of force or violence, or the violation of a lawful order issued for the protection of a person who is:

(a) A current or former spouse;

(b) A person with whom the abuser shares a child in common; or

(c) A current or former intimate partner with whom the abuser shares or has shared a common domicile.

10. Defense Sexual Assault Incident Database (DSAID). A DoD database that captures uniform data provided by the Military Services and maintains all sexual assault data collected by the Military Services. This database shall be a centralized, case-level database for the uniform collection of data regarding incidence of sexual assaults involving persons covered by this instruction. DSAID will include information when available, or when not limited by Restricted Reporting, or otherwise prohibited by law, about the nature of the assault, the victim, the offender, and the disposition of reports associated with the assault.

11. Emergency. A situation that requires immediate intervention to prevent the loss of life, limb, sight, or body tissue to prevent undue suffering. Regardless of appearance, a sexual assault victim needs immediate medical intervention to prevent loss of life or undue suffering resulting from physical injuries internal or external, sexually transmitted infections, pregnancy, or psychological distress. Sexual assault victims shall be given priority as emergency cases regardless of evidence of physical injury.

12. Emergency Care. Emergency medical care includes physical and emergency psychological medical services and SAFE.

13. Final Disposition. The conclusion of any judicial, non-judicial, or administrative actions, to include separation actions taken in response to the offense, whichever is later in time. If the final command determination is that there is insufficient evidence or other legal issues exist that prevent judicial or administrative action against the alleged perpetrator, this determination shall be conveyed to the victim in a timely manner.

14. Gender-Responsive Care. Care that acknowledges and is sensitive to gender differences and gender-specific issues.

15. Healthcare Personnel. For the purpose of this instruction, healthcare personnel includes all healthcare providers. This includes persons assisting or otherwise supporting healthcare providers in providing healthcare services (e.g., administrative personnel assigned to a military medical treatment facility, or mental/behavioral healthcare personnel).

16. Healthcare Provider. For the purpose of this instruction, those individuals who are employed or assigned as healthcare professionals, or are credentialed to provide health care services at a military medical or military dental treatment facility, or who provide such care at a deployed location or in an official capacity. This also includes military personnel, DoD civilian employees, and DoD contractors who provide health care at an occupational health clinic for DoD civilian employees or DoD contractor personnel.

17. Privilege. A victim has a "privilege" to refuse to disclose and to prevent any other person from disclosing a confidential communication made between the victim and a SAPR VA, in a case arising under the UCMJ, if such communication was made for the purpose of facilitating advice or supportive assistance to the victim.

18. Qualifying Conviction. A state or federal conviction, or a finding of guilty in a juvenile adjudication, for a felony crime of sexual assault and any general or special court-martial conviction for a UCMJ offense, which otherwise meets the elements of a crime of sexual assault, even though not classified as a felony or misdemeanor within the UCMJ. In addition, any offense that requires registration as a sex offender is a qualifying conviction.

19. Restricted Reporting. Defined in enclosure (2) of this instruction.

20. Recovery Oriented Care. Focus on the victim and on doing what is necessary and appropriate to support victim recovery, and also, if a service member, to support that service member to be fully mission capable and engaged.

21. Sexual Assault. Sexual assault can be defined as intentional sexual contact, characterized by use of force, physical threat or abuse of authority or when the victim does not or cannot consent, Sexual assault includes rape,

nonconsensual sodomy (oral or anal sex), indecent assault, (unwanted, inappropriate sexual contact or fondling), or attempts to commit these offences. Sexual assault can occur without regard to gender. For this instruction, the term sexual assault includes all of the terms listed in (a) though (e) below and applies to adult victims and perpetrators.

a. Assault with Intent to Commit Rape. An assault with intent to commit rape. The accused must have intended to complete the offense of rape and to overcome any resistance by force.

b. Assault with the Intent to Commit Sodomy. An assault against a human being committed with the specific intent of completing the offense of sodomy.

c. Indecent Assault. An assault with the intent to gratify the lust or sexual desires of the accused.

d. Rape. An act of penile-vaginal intercourse by force and without consent. Penetration, however slight, is sufficient to complete the offense.

e. Forcible Sodomy. An act done by force and without consent whereby one person takes into their mouth or anus the sexual organ of another person (of the same or opposite sex) or of an animal; places their sexual organ in any opening of the body other than the sexual parts of another person; or has penile-vaginal intercourse with an animal. Penetration, however slight, is sufficient to complete the offense.

22. Sexual Assault Case Management Group (SACMG). The SACMG is a multi-disciplinary case management group convened by the installation Commanding Officer or installation Executive Officer and co-chaired by the installation SARC. This responsibility for chair and co-chair cannot be delegated further, per reference (b). The SACMG meets monthly, even if there are no unrestricted cases to review. If there are no cases to review, training will be provided to the SACMG members. The purpose of the SACMG is to:

a. Review individual "unrestricted" sexual assault cases.

b. Facilitate monthly victim updates

c. Direct system coordination, accountability and victim access to quality services.

d. The SACMG carefully considers and implements immediate, short-term and long-term measures to facilitate and assure the victim's well-being and recovery from sexual assault. Per reference (m) membership consists of the following individuals who are involved with and working on a specific case:

(1) Core Membership:

(a) Commanding Officer or Executive Officer, NAVSUPPACT, Naples, Italy;

(b) Installation SARC;

(c) Mental health representative;

(d) Installation Staff Judge Advocate

(e) Chaplain

(2) Non-Core Membership (attendance required bases upon direct involvement with the individual case being reviewed);

(a) Victim's Commanding Officer (CO);

(b) Sponsor's CO, if the victim is an eligible family member;

(c) Commander, Commanding Officer, Officer in Charge (OIC) if victim is DoD employee (OCONUS);

(d) Victim's SAPR Victim Advocate (VA);

(e) MCIO Special Agent involved with and working on specific case;

(f) Victim Witness Assistance Program (VWAP);

(g) Victim's medical healthcare provider;

(h) Victim's mental health provider (as applicable);

(i) Victim's Legal Counsel (VLC);

(k) Installation/Base security (as applicable);

(l) Assigned Safety Assessment personnel (if applicable);

(m) Other professionals may be permitted by the Chair if directly involved with a specific case being reviewed (if applicable).

23. Sexual Assault Initial disposition authority (SA-IDA) Effective 28 June 2012, authority to dispose of certain sexual assault cases will be withheld at the O-6 special court-martial convening authority level. This officer will be known as the SA-IDA. Reference (o) provides additional guidance.

24. SAPR VA. A person who, as a victim advocate, shall provide non-clinical crisis intervention, referral, and ongoing non-clinical support to adult sexual assault victims. Support will include providing information on available options and resources to victims. The SAPR VA, on behalf of the sexual assault victim, provides liaison assistance with other organizations and agencies on victim care matters and reports directly to the SARC when performing victim advocacy duties. Personnel who are interested in serving as a SAPR VA are encouraged to volunteer for this duty assignment.

25. SAFE Kit. The medical and forensic examination of a sexual assault victim under circumstances and controlled procedures to ensure the physical examination process and the collection, handling, analysis, testing, and safekeeping of any bodily specimens and evidence meet the requirements necessary for use as evidence in criminal proceedings. The victim's SAFE Kit is treated as a confidential communication when conducted as part of a Restricted Report.

26. Victim. For purposes of this instruction, a victim is any person who asserts direct physical, emotional or pecuniary harm as a result of the commission of a sexual assault.

NAVY POLICY REGARDING CONFIDENTIALITY FOR VICTIMS OF SEXUAL ASSAULT

1. The Navy is fully committed to ensuring victims of sexual assault are protected; treated with dignity and respect; and, provided support, advocacy, and care. Sexual assault is the most under-reported violent crime in our society. Assuring privacy and providing a confidential disclosure option is critical to discharging our commitment to fully support victims of sexual assault. The magnitude of these changes requires extensive, in-depth training for Navy personnel and specialized training for commanding Officer (CO), Sexual Assault and Response Coordinator(SARC), Sexual Assault Prevention and Response (SAPR), Victim Advocate (VA), Naval Criminal Investigative Service (NCIS), law enforcement, chaplains, legal staff, and home care providers (HCP).

2. This policy provides for confidential, restricted reporting for service members and their military dependents 18 years of age and older who are victims of sexual assault, per reference (f). Other Department of the Navy (DoN) personnel who are victims of sexual assault will be afforded the option of reporting to civilian law enforcement whenever the sexual assault does not fall under Navy jurisdiction or when reporting is not otherwise required by law or international agreement.

3. For the purpose of this policy, confidentiality or confidential reporting is defined as providing an option for victims of sexual assault to report the assault to specified individuals without triggering mandatory command notification or official investigation of the incident. This option affords a victim access to medical care, counseling, and SAPR Victim Advocacy without initiating the investigative process.

a. Per reference (j), a victim of sexual assault has a privilege to refuse to disclose and to prevent any other person from disclosing confidential communication made between the victim and a SAPR VA, in a case arising under the Uniform Code of Military Justice (UCMJ), if such communication was made for the purpose of facilitating advice or supportive assistance to the victim.

b. Consistent with reference (k), victims may also report a sexual assault to a chaplain and be afforded confidential communication which is not altered or affected by Department of Defense (DoD) requirements.

4. The Navy is committed to establishing a system whereby a victim can maintain confidentiality with the understanding that fully reporting an incident activates both SAPR Victim Services and accountability actions. Service members who are sexually assaulted have the following reporting options:

a. "Unrestricted" reporting affords victims of sexual assault official investigation of their allegation, in addition to receiving available SAPR VA support and care. Victims making unrestricted reports should use current reporting channels (i.e., chain of command, command SAPR VA, law enforcement, or the installation SARC.) The responsible (on-call) SAPR VA will be notified immediately upon receipt of an unrestricted report and will offer the victim support and information per this instruction.

b. "Restricted" reporting permits victims to disclose sexual assault to specified individuals without triggering mandatory command notification or official investigation.

(1) Service members who are sexually assaulted and desire restricted reporting must report the sexual assault to the installation SARC, SAPR VA, or HCP. Licensed clinicians who are privileged to provide clinical services in a Fleet Family Support Center are considered HCPs and may receive a restricted report of sexual assault from a service member victim. Consistent with current policy, victims may also report the sexual assault to a chaplain. Although a report to a chaplain is not a restricted report under this policy, it is a communication that may be protected under the Military Rules of Evidence or applicable statutes or regulations. Restricted reporting is in addition to the current protections afforded communications with a chaplain and does not alter or affect those protections.

(2) HCPs, both afloat and ashore, will initiate appropriate care and treatment, activate the responsible, on-call SAPR VA, and report the assault to the installation SARC in lieu of reporting to law enforcement or the command.

(3) As required by this instruction, the responsible SAPR VA will respond, offer advocacy and support, and provide the victim information on the process of restricted and unrestricted reporting. Victims will be informed and will acknowledge in writing, using DD Form 2910, Victim Reporting preference Statement, their understanding of restricted reporting, the exceptions to and limitations on, restricted reporting, including their understanding that restricted reporting limits the availability of protective actions that can be taken without command notification and may hinder the government's ability to prosecute the assailant.

(4) With the victim's consent, a trained DoD/DoN HCP may conduct a Sexual Assault Forensic Exam (SAFE) in a manner that collects and preserves evidence with non-identifying information about the victim. In the absence of a trained DoD provider. The victim will be appropriately referred to a non-DoD HCP for the SAFE, which may preclude collection of forensic evidence under restricted reporting. SARCs, SAPR VAs or HCPs shall inform the victim of an State or local reporting requirements whenever a SAFE is conducted by a civilian medical facility. DoN procedures for storage and retrieval of forensic evidence are as follows:

(a) The installation SARC or SAPR VA will assign a Alpha-Numeric Restricted Reporting Case Number using the convention promulgated by Commander, Naval Insulation Commands, noting the number on the signed DD 2910 and providing the number to the HCP.

(b) The SARC is responsible for notifying NCIS Regional Forensic Laboratory that a SAFE has been collected under restricted reporting and is being mailed by the responsible military treatment facility (MTF). The MTF is responsible for maintaining chain of custody, packaging, and mailing the SAFE using procedures that have been disseminated by the Bureau of Medicine.

(c) Forensic evidence collected under restricted reporting will be maintained for five years, per reference (b), and then destroyed. The installation SARC is responsible for tracking SAFE destruction dates and for using all means possible

to notify the victim 30 days prior to destruction that the forensic evidence is scheduled for destruction. This notification is to provide the victim a last opportunity to reconsider their restricted report and not to extend the destruction date.

(d) When a victim elects to change from restricted to unrestricted reporting, the SARC will notify NCIS, ensure the change in reporting is noted on the victim's Victim Reporting Preference Statement (DD Form 2910), and provide the Alpha-Numeric RRCN to the responsible Special Agent who will follow NCIS established protocols.

5. When a victim discloses sexual assault to someone other than the installation SARC, SAPR VA or HCP, the victim will be informed that such disclosure may result in command notification and a full investigation of the allegations.

6. When sexual assault is disclosed to the command or to law enforcement from a source independent of the specified individuals identified above, the command shall report the incident to NCIS, who is authorized to initiate an independent investigation of the complaint. Per reference (b), if an investigation of the sexual assault is initiated as a result of information being disclosed to command or law enforcement from a source independent of the restricted reporting option, any covered communications disclosed to the installation SARC, SAPR VA, or HCP under restricted shall not be disclosed to command or law enforcement until the victim authorizes disclosure in writing or another exception applies.

7. In cases where a service member victim elects restricted reporting, the installation SARC, responsible SAPR VA, or HCP may not disclose covered communications to command authorities or law enforcement, either within or outside DoD, except as provided in paragraph 10 below.

8. The installation SARC shall report information concerning all sexual assault incidents within 24 hours of the sexual assault report. This report will be made to the victim's CO and the installation CO, for incidents occurring on the installation. This report is for the purposes of public safety and command responsibility and will be absent any information that could

reasonably lead to personal identification of the victim or the alleged assailant. This reporting channel affords commanders better understanding of the true scope of sexual violence within the Navy, at least some of which has been previously unreported. Per reference (f), the commander may use the information to enhance prevention or training measures, or to assess the organization's climate for contributing factors, but may not use this information for investigative purposes or in a manner that is likely to discover, disclose, or reveal the identities being protected. Commands are not required to forward OPREP-3 NAVY BLUE or OPREP-3 NAVY UNIT SITREPS for restricted reports.

9. Per reference (l), confidentiality of medical information will be maintained regardless of whether the victim chooses restricted or unrestricted reporting.

10. When a victim elects restricted reporting, the prohibition on disclosing covered communications will be suspended when:

a. The victim provides written authorization to disclose to command officials or law enforcement.

b. Disclosure to command officials or law enforcement is necessary to prevent or lessen a serious and imminent threat to the health or safety of the victim or another person.

c. Disclosure to disability retirement boards and officials by a HCP is required for fitness for duty in disability determinations, and is limited to only the information necessary to process disability retirement determinations or determine fitness for duty.

d. Disclosure is required for the supervision of direct victim treatment or services by the installation SARC, responsible SAPR VA, or HCP.

e. Disclosure is required by federal or state statute or applicable U.S international agreement or is ordered by military or civilian courts of competent jurisdiction. In the latter case, the installation SARC, responsible SAPR VA, or HCP will consult with the servicing legal office, to determine if an exception applies and they have a duty to obey before they disclose information other than non-identifying information.

11. The HCP may inform commands of any possible adverse duty impact related to a victim's medical condition and prognosis per reference (1). These circumstances do not warrant an exception to confidentiality policy whereby details of sexual assault are considered covered communication and may not be disclosed.

12. Improper disclosure of covered communications, improper release of medical information, or other violations of this policy are prohibited and may result in discipline under the UCMJ or State statute, loss of professional credentials, or other adverse personnel or administrative actions.

13. Restricted reporting does not create any actionable rights for the alleged offender or the victim, nor does it constitute a grant of immunity for any actionable conduct by the offender or the victim. Covered communication that has been disclosed may be used in disciplinary proceedings against the offender or victim, even if the communication was improperly disclosed.

14. DoD and Navy leadership recognize the potential impact of restricted reporting on investigations and the ability of commanders to hold perpetrators accountable. Such risks were carefully considered and were outweighed by the overall interest of providing sexual assault victims access to medical care and support.

NAVY COMMANDER'S CHECKLIST FOR PREVENTION AND RESPONSE TO ALLEGATIONS OF SEXUAL ASSAULT

1. Commanding Officers (CO) are responsible for ensuring a command climate that condemns sexual assault; provides victims with sensitive care, resources, and support; reports incidents of sexual assault; and, holds offenders accountable for their actions.

2. The following checklist includes all the essential elements for meeting command SAPR Program requirements and for ensuring effective command prevention and response to incidents of sexual assault. Following these guidelines ensures commanders address all areas and provide a timely and sensitive response to each incident of sexual assault.

Before Sexual Assault Occurs - Prevention

1. Establish a command climate of prevention that is predicated on mutual respect and trust, which recognizes and embraces diversity, and values the contributions of all of its members.

2. Reassure members of your personal commitment to maintaining a healthy environment that is safe and contributes to the members' well-being and mission accomplishment.

3. Ensure a safe emotional and physical environment for all members of the command. Institute and publicize a means for members to inform the chain of command of situations that place members at risk of sexual assault.

4. Reiterate your "zero tolerance" policy on sexual assault and the potential consequences for those who violate the law.

5. Ensure command-wide compliance with annual mandatory sexual assault awareness and prevention education general military training (GMT) requirements, to include use of the Department of Defense (DoD) definition of sexual assault. Emphasize the importance of the command zero tolerance message through leadership participation in sexual assault GMT.

6. Keep a "finger on the pulse" of the organization's climate and respond with appropriate action toward any negative trends that may emerge.

7. Include sexual assault questions regarding command involvement in preventing sexual assault incidents when conducting command climate assessments.

8. Carefully select a command Drug and Alcohol Program Advisor (DAPA) and ensure they are trained in the Sexual Assault and Response Coordinator (SARC) Program, emphasizing the link between sexual assault and alcohol misuse.

9. Provide ongoing unit education regarding responsible use of alcohol and Navy Alcohol and Drug Abuse Prevention programs. Promote positive social programs through Morale, Welfare, and Recreation.

10. Designate a SAPR point of contact who is responsible for:

a. Coordinating and implementing command awareness and prevention education training

b. Maintaining current information on available victim support services in the geographical area.

c. Ensuring command SAPR Program compliance including collection and maintenance of sexual assault data by the designated Data Collection Coordinator (DCC).

11. Ensure SAPR command POCs receive four hours of required training on sexual assault responsibilities under the SAPR Program.

Before Sexual Assault Occurs - Response Preparation

1. Request a brief from the Sexual Assault and Response Coordinator(SARC) on installation sexual assault incident management and resources. The SARC is located at the Fleet and Family Service Center (FFSC).

2. Ensure good coordination between installation and command assets when preventing or responding to sexual assault incidents.

3. Establish good working relationship with the SARC to ensure effective and ongoing command interface regarding sexual assault prevention and response.

4. Educate all members on DoD/Navy confidentiality policy to include:

a. Publicizing broadly that members may make restricted reports of sexual assault to the SARC, designated SAPR VA, or healthcare provider. Reports to chaplains are also confidential.

b. Publishing names and contact information for personnel to whom a restricted report may be made.

Pre-deployment Planning

1. Ensure availability of trained, volunteer VAs aboard to respond if a sexual assault occurs in foreign ports or while underway.

2. Ensure sufficient trained Victim Advocate (VA) to ensure 24/7 response to sexual assault whenever Navy installation assets are not available.

a. Ensure VAs report to the installation SARC for oversight and supervision of all advocacy responsibilities and services.

b. Ensure the installation SARC screens and trains all volunteer VAs to ensure a good fit for this very sensitive position.

c. Ensure afloat/deploying VAs receive required initial and refresher training.

d. Identify both immediately available and nearby trained medical, investigatory, and chaplain assets that can be utilized if a sexual assault occurs out of homeport or while underway.

e. Ensure member compliance with deployment sexual assault training.

3. Appoint a DCC who liaisons with governmental agencies to obtain and maintain required sexual assault data for command reporting requirements.

4. Provide clear direction to the DCC regarding tracking of required message traffic and thorough collection of sexual assault information, ensuring the victim, and accused are not contacted for this information.

5. Ensure DCC attends two hours of required training on sexual assault and their responsibilities under the SAPR Program.

6. Conduct a review of command sexual assault awareness and prevention education, reporting, victim support processes, and watch stander protocols to ensure program standards are met in accordance with this checklist.

When a Sexual Assault Occurs - Victim

1. Ensure the physical safety and emotional safety of the victim, determine if the alleged offender is still a threat to the victim, and if the victim desires/needs protection.

2. Ensure the victim receives emergency medical treatment if indicated and offer medical care in all other circumstances.

3. Assist with or provide immediate transportation for the victim to the appropriate medical facility.

4. Ensure the victim is advised of the need to preserve evidence (by not bathing, showering, washing garments, etc.) while awaiting the arrival of NCIS.

5. Collect only the necessary information to include the victim's identity, location, and time frame of the incident, name and/or description of the offender(s), taking care not to ask detailed questions or pressure the victim for information about the incident.

6. Activate the on-call VA and request immediate assistance. The VA will ensure the victim understands the medical, investigative, and legal process, and is advised of their victim rights, even if the victim ultimately declines ongoing VA support.

7. Notify NCIS as soon as the victim's immediate safety is assured and if any emergency medical treatment is required or requested.

8. Take action to safeguard the victim from any formal or informal investigative interviews or inquiries, except those conducted by NCIS or civilian law enforcement.

9. Guard the victim's right to confidentiality and privacy by strictly limiting the "need to know" personnel.

10. Ensure command protocols limit required command notification of the incident to the smallest necessary number (e.g., CO, Executive Officer, Command Master Chief).

11. Be sensitive to the needs of the victim's family.

12. Ensure the victim consents in writing regarding the release of information to anyone (including parents, friends, etc.). Only in cases where the victim has suffered life-threatening injuries will the next of kin be notified without prior approval from the victim.

13. Provide the victim a referral to the duty Chaplain if the victim desires pastoral assistance.

14. Seek consultation from legal and NCIS and determine if the victim desires/needs a Military Protective Order (MPO), particularly if the victim and the accused are assigned to the same command, duty location, or living quarters. DD Form 2873 shall be used when a MPO is issued.

15. Strongly consider temporary re-assignment of either the victim or accused when they are assigned to the same command, duty location, or living quarters.

16. Consider both the physical and emotional well being of the victim in determining the need for temporary reassignment.

17. To the maximum extent possible, the victim's preference should be honored when making reassignment determinations.

18. Communicate regularly with the SAPR Command Liaison to accommodate the victim's wishes to the extent possible regarding their safety, health, and security, as long as a critical mission or a through investigation is not comprised.

19. Determine how to address the victim's collateral misconduct. Absent overriding considerations, consider the victim's misconduct in context and exercise command authority to defer disciplinary actions for the victim's minor misconduct until after the final disposition of the sexual assault case.

20. When practicable, consult with the servicing legal office, NCIS and notify the installation SARC or assigned VA prior to taking administrative or disciplinary action affecting the victim.

21. Avoid automatic suspension or revocation of a security and/or personnel reliability program (PRP) clearance, understanding the victim may be satisfactorily treated for their related trauma without compromising their PRP status. Use established national security standards when making final determinations.

22. Ensure ongoing communication and coordination of actions between commands if the alleged offender is assigned to another command.

When a Sexual Assault Occurs - Alleged Offender

1. Notify NCIS as soon as possible after receiving a report of a sexual assault incident.

2. Consult with servicing legal office before questioning or discussing the allegations with the alleged offender.

3. Avoid discussing or questioning the sexual assault allegation with the alleged offender, since doing so may jeopardize the criminal investigation.

4. If questioning does occur, advise the service member suspected of committing a UCMJ offense of their rights under Article 31 of Chapter 47 of the UCMJ.

5. Safeguard the alleged offender's rights and preserve the integrity of a full and complete investigation, to include limitations on any formal or informal investigative interviews or inquiries by personnel other than those assigned to NCIS or civilian law enforcement.

6. Emphasize that every alleged offender is presumed innocent until proven guilty.

7. Strictly limit information about the investigation to those who have a legitimate reason to know.

8. Ensure procedures are in place to inform the alleged offender about available counseling support through the Fleet and Family Service Center, Behavioral Health, and Chaplains.

9. Monitor the well-being of the alleged offender, particularly any indications of suicide potential, and ensure appropriate intervention occurs if indicated.

10. Determine the need for a military protective order (MPO) (after consultation from legal/law enforcement/SARC/assigned VA). DD Form 2873 shall be used when a MPO is issued.

11. Ensure ongoing communication and coordination of actions between commands if the victim is assigned to another command.

When a Sexual Assault Occurs - Unit Considerations

1. Take all necessary action to ensure it does not become general knowledge within the command that a sexual assault has occurred.

2. When information regarding sexual assault becomes known within the ranks, the following actions will be considered:

a. Encourage members to be appropriately supportive of each other within the organization, to include both the victim and the alleged offender in the incident.

b. Advise those who may have knowledge of the events leading up to or surrounding the incident to fully cooperate with any investigation.

c. Ensure proper authorities are available to explain to witnesses, the potential consequences of discussing any details related to the on-going investigation.

d. Discourage members from participating in "barracks gossip." Take action if either the victim or the alleged offender reports they are being subjected to harassment, reprisal, retaliation, ostracism, threats, or other pressure regarding the incident from command members.

e. Consider unit refresher training or have an outside expert address the unit regarding preventive measures, as well as some of the emotional or psychological feelings that may manifest itself and affect the command.

SITUATION REPORT (SITREP) GUIDANCE

1. All unrestricted reports of alleged sexual assault that involve victims and alleged offenders who are family members, active duty members, or reservists on active duty will be reported through the submission of a SITREP regardless of the military affiliation of the victim or alleged offender. In addition, a SITREP is submitted for reports of allegations of sexual assault of active duty members of another service assigned to a Navy command.

a. Submit reports via the OPREP-3 NAVY BLUE or OPREP-3 NAVY UNIT SITREP, per the format for reporting sexual assault incidents contained in reference (i). Include in the SITREP the data elements contained in the Sexual Assault Incident Data Collection Report Form (NAVPERS 1752/1).

b. Messages must be submitted on incidents involving civilians sexually assaulted under Department of the Navy jurisdiction. Reporting commands for both victim and alleged offender will coordinate efforts for submission of the SITREP.

c. If neither the victim nor the alleged offender is a Navy member, the commander of the installation or activity where the sexual assault occurs will report per reference (j).

2. The Sexual Assault Incident Data Collection Report Form is intended to serve as a recording/reporting tool for capturing information required for inclusion in the initial and follow-on message traffic.

3. The command with cognizance over the victim is responsible for forwarding monthly status/follow-on OPREP-3 NAVY UNIT SITREPS to provide new or revised information only, with a final OPREP-3 NAVY UNIT SITREP documenting official resolution of the case. A final, official resolution refers to completion of judicial, investigative, disciplinary, and/or administrative actions (e.g., defendant found guilty/not guilty, alleged offender administratively separated, no action taken due to insufficient evidence).

SEXUAL ASSAULT PREVENTION AND RESPONSE COMMAND DUTY OFFICER PROCEDURE FOR RESPONDING TO SEXUAL ASSAULT

1. Once a report of sexual assault of an adult victim (18 years of age or older) is received, the following steps and procedures are required:

2. **DO NOT ASK THE VICITM FOR DETAILS OF THE ASSAULT**

3. Assess for safety, ask the victim if they are in a safe place; ask for military affiliation and status.

4. Encourage the victim to seek medical treatment, U.S. Naval Hospital Naples, Italy, emergency room.

5. Advise the victim to not destroy possible evidence by bathing, douching, changing clothes, cleaning, changing the crime scene, eating, or drinking.

6. Inform the victim the on-call Sexual Assault Prevention and Response (SAPR) Victim Advocate will be contacted; provide the victim with the SAPR Victim Advocate (VA) telephone number.

7. Contact the SAPR 24/7 on-call SAPR victim advocate, 335-640-6621.

8. For all unrestricted sexual assault reports, notify Naval Criminal Investigative Service (NCIS).

9. Complete a SITREP/OPREP for all unrestricted reports of sexual assault within 60 minutes per reference (i). Contact the Sexual Assault and Response Coordinator (SARC) or the NCIS duty agent for additional information. NEVER CONTACT THE VICTIM.

Sexual Assault Prevention and Response Program
Fleet and Family Support Center
SARC: DSN: 629-6534, COMM: +39-081-811-6534
Duty Cell: 338-736-3287

SAPR 24/7 Response Line: +39-335-640-6621
24/7 DoD Safe Helpline: +1-877-995-5247
(long distance charges apply)

CRIME VICTIM'S BILL OF RIGHTS

1. The right to be treated with fairness and with respect for the victim's dignity and privacy.

2. The right to be reasonably protected from the alleged offender.

3. The right to be notified of court proceedings.

4. The right to be present at all public court proceedings related to the offense, unless the court determines that testimony by the victims would be materially affected if the victim heard other testimony at trial.

5. The right to confer with the attorney for the government in the case.

6. The right to receive available restitution.

7. The right to be provided information about the conviction, sentencing, imprisonment, and release of the offender.