

YOUTH SERVICES INTERNATIONAL Springfield Academy		
Chapter: Security and Control	Subject: Sexual Abuse/Assault Prevention and Intervention	Number: 913
		Page: 1 of 6
		Date: September 1, 2000
		Updated:

A. POLICY

YSI will provide guidelines to help prevent sexual assaults on students, to address the safety and treatment needs of students who have been sexually assaulted, and to discipline and prosecute those who sexually assault students. The anticipated results of this policy are effective procedures to prevent sexually assaultive behavior, the medical, psychological, safety, and social needs of victims of Sexual Abuse/Assault will be promptly met, all allegations of Sexual Abuse/Assault will be promptly and effectively reported and investigated, and assailants, once identified, will be controlled, disciplined, and/or prosecuted.

B. DEFINITIONS

Student-on-Student Sexual Abuse/Assault: One or more students engaging in, or attempting to engage in a sexual act with another inmate or the use of threats, intimidation, inappropriate touching, or other actions and/or communications by one or more students aimed at coercing and/or pressuring another inmate to engage in a sexual act. Sexual acts or contacts between students, even when no objections are raised, are prohibited acts.

Staff-on-Student Sexual Abuse/Assault: Engaging in, or attempting to engage in a sexual act with any student or the intentional touching of a student's genitalia, anus, groin, breast, inner thigh, or buttocks with the intent to abuse, humiliate, harass, degrade, arouse, or gratify the sexual desire of any person. Sexual acts or contacts between a student and a staff member, even with no objections are raised, are always illegal.

C. PROCEDURES

Program Coordination

The Facility Administrator and the Assistant Facility Administrator shall be responsible for the implementation and enforcement of this policy and to develop programming to prevent sexual abuse/assault, intervening when sexual abuse/assault do occur,

investigating allegations of sexual abuse/assault and starting to the process of disciplining and prosecuting the prosecuting the perpetrators of sexual abuse/assault.

The Facility Administrator will assign the task of implementing programming to ensure students have knowledge of this policy to the Group Living Director and the Supervisor of Case Management. The specific elements of the program will include educating and training staff and students, safeguarding, assessing, treating, and managing sexually assaulted students, and investigating, disciplining, and/or prosecuting perpetrators of sexual assault.

Prevention

All staff and students are responsible for being alert to signs of potential situations in which sexual assaults might occur.

1. All students entering the facility are screened consistent with applicable Health Services, Psychology Services, and Case Management policy. When an student reports having been a victim of sexual abuse/assault and expresses a willingness to participate in treatment, staff shall refer the student to Psychology Services. Psychology Services staff shall assess the student's need for treatment and discuss available treatment options when appropriate.

Preventing sexual abuse/assault also suggests that staff should attempt to identify sexually assaultive students. In fact, care must be taken to identify and document any history of sexually assaultive behavior. Accordingly, during intake screening procedures, staff shall review available documentation (e.g., judgment and commitment orders, criminal records, pre-sentence investigation reports, file data, etc.) for any indication that an student has a history of sexually aggressive behavior. Staff shall refer any student with a history of sexually abusive behavior to Psychology Services staff for an assessment and possible treatment. The results of this assessment along with any treatment recommendations and the student's motivation to participate in treatment should be documented in the student's file.

2. All staff shall be trained to recognize the physical, behavioral, and emotional signs of sexual assault, understand the identification and referral process when an alleged sexual assault occurs, and have a basic understanding of sexual assault prevention and response techniques.

For new employees, a discussion of sexual abuse/assault prevention and intervention shall be part of Orientation training and should include a review of the facility's sexual abuse/assault policy and staff responsibilities to prevent and report sexual assaults. For existing staff, more extensive information about the program shall be included as a part of Annual Refresher Training. The Facility Administrator shall designate one staff member each year to conduct this training session.

In addition to Annual Refresher Training, specialized training should be made available to staff who are likely to be most involved in the treatment or management of sexually assaulted students.

3. As part of the institution's Admission and Orientation Program, a staff member shall include a brief, candid presentation about the Sexual Abuse/Assault Prevention and Intervention Program, including, how students can protect themselves from becoming victims while placed in the program, treatment options available to victims of sexual assault, and methods of reporting incidents of sexual abuse/assault.

This presentation shall also include information on services and programs (counseling, sex offender treatment) for sexually assaultive or aggressive students. Each student shall also receive an information pamphlet summarizing key elements of this presentation.

Prompt and Effective Intervention

Staff sensitivity toward students who are victims of sexual abuse/assault is critical. Staff shall take seriously all statements from students that they have been victims of sexual assaults and respond supportively and non-judgmentally. Any student who alleges that he or she has been sexually assaulted shall be offered immediate protection from the assailant and will be referred for a medical examination as well as a clinical assessment of the potential for suicide or other related symptomatology.

1. **Referral.** Staff shall provide services to victims and shall conduct investigations of sexual abuse/assault incidents. Information concerning the identity of an student victim reporting a sexual assault, and the facts of the report itself, shall be limited to those who have a need to know in order to make decisions concerning the student-victim's welfare and for law enforcement/investigative purposes.

When a staff member(s) is alleged to be the perpetrator of student sexual abuse/assault, the Facility Administrator shall be advised immediately. The Facility Administrator shall refer the incident directly to the South Dakota Department of Social Services, Child Protection Agency, the Federal Bureau of Prisons, the Regional Director of Operations, the appropriate corporate personnel, the referring agency and the parent(s) or guardian(s) of the student. The timely reporting of all incidents and allegations is of paramount importance. When a student(s) is alleged to be the perpetrator, it is the Facility Administrator's responsibility to ensure that the incident is referred to the appropriate law enforcement agency having jurisdiction.

- (a) **Normal Business Hours.** During normal business hours, staff shall promptly advise the Facility Administrator of any student who has been, or claims to have been, sexually assaulted. The Facility Administrator or designee shall

immediately provide for the student's physical safety and ensure that the student is promptly referred to appropriate Health Services and Psychology Services staff for examination and treatment. The Facility Administrator shall also ensure that the appropriate notifications and reports are made.

- (b) Non-business Hours. During the evening and night shifts, when the potential for sexual assaults is greater, staff shall immediately notify the Group Leader or Team Leader, who shall notify the Facility Administrator, Group Living Director, Health Services staff, and on-call Psychologist. Staff shall immediately provide for the physical safety (e.g., separating the assailant from the victim) of the student who reports being sexually assaulted. Health Services and Psychology Services staff shall promptly inform the Group Leader or Team Leader of their initial findings and treatment recommendations.
- (c) Medical Report of Injury. When an assault is reported, Health Services staff shall encourage the student to complete health care needs assessment and the student shall be seen by a physician immediately.
- (d) Services. At a minimum, the following services should be available to all students who claim to be the victim of a sexual abuse/assault during their stay in the program. These services should be provided in an environment that meets both the student's safety and therapeutic needs.

- (1) Medical. Examination, documentation, and treatment of injuries arising from an alleged sexual assault, including testing for HIV and other Sexually Transmitted Diseases (STD).

- (2) Mental Health Services. Crisis intervention, assessment of treatment needs, documentation of evaluation and treatment needs, psychiatric referral, and/or other treatment options including referral to community mental health resources in his or her release area.

- (3) Social. Family support and/or peer support should be provided, when available and appropriate. Psychology services staff should be sensitive to family concerns if the student-victim notifies relatives or friends of the assault.

- (4) Protective. Staff consultation and/or action to prevent further assaults should be considered (e.g. closer supervision, protective custody, transfer, etc.)

c. Responsibilities. All staff are responsible for immediately referring cases of sexual abuse/assault when they become aware of them to the appropriate medical, psychological, and program staff. All staff are also expected to handle allegations of sexual abuse/assault sensitively and non-judgmentally. Additionally, staff in specific institution departments have more defined roles:

- (1) Unit Team staff, particularly the Team Leader, Group Leader, Case Manager, and Youth Counselor, shall closely monitor and supervise any student who has been sexually assaulted. This may include additional team meetings, application of closer monitoring policies, and the careful review of security and housing assignments.

Additionally, unit staff are to refer students who have committed sexual assaults to Psychology Services staff for an evaluation and possible treatment (which may be impacted in part by pending disciplinary or legal actions). Refusal to participate in treatment, when it is determined to be necessary, must be documented by Psychology Services staff and placed in the medical section of the Student File.

- (2) Psychology Services staff shall offer appropriate care, which may include mental health evaluation and counseling, support services, and follow-up care/tracking. Competency issues of the victim may need to be addressed.
- (3) Chaplaincy staff shall offer support and pastoral care, when requested by the victim.
- (4) Administrative staff shall coordinate such matters as evidence and witness testimony collection and corroboration and consultation on administrative and disciplinary issues.

Investigation and Prosecution

If an student alleges sexual assault, a sensitive and coordinated response is necessary.

- (1) Appropriate referrals shall be made to South Dakota Department of Social Services, Child Protection Agency, Bureau of Prisons, referring agency and local law enforcement.
- (2) Appropriate staff shall preserve the crime scene and collect information/evidence in coordination with the referral agency and consistent with evidence gathering/processing procedures outlined in this Policy and Procedure Manual.
- (3) Based on such factors as availability of in-house expertise and general security considerations, the Facility Administrator will use a contracted clinical care service to examine the victim. The results of the physical examination and all collected physical evidence are to be provided to local law enforcement. Appropriate infectious disease testing, as determined by Health Services staff, may be necessary. Part of the investigative process may also include an examination of and collection of physical evidence from the suspected assailant(s).

Transfer of Students to Hospitals/Other Institutions

In institutions where Health Services staff are not trained or certified in sexual assault evidence gathering, the student should either be examined at the institution by trained health care professionals from the local community or be transported to a local community facility that is equipped (in accordance with local laws) to evaluate and treat sexual assault victims. If necessary to sustain life and/or stabilize vital functions, Health Services staff shall make emergency referrals to an appropriate community medical center for students seriously injured as a result of a sexual assault.

Tracking Sexual Assaults

The major purpose of the facility’s Sexual Abuse/Assault Prevention and Intervention Program is to protect students in Springfield Academy custody. Monitoring and evaluation are essential to assess both sexual assault levels and agency effectiveness in reducing sexually abusive behavior. Accordingly, the Facility Administrator must maintain two types of files.

- a. General files which includes data on the victim(s) and assailant(s) of a sexual assault, crime characteristics, and formal and/or informal action(s) taken.
- b. Investigative files which are opened following any allegation of sexual assault which include copies of all reports, medical forms, supporting memos and videotapes, and any other evidentiary materials pertaining to the allegation.

The Facility Administrator shall maintain these files chronologically in a secure location. Each Facility Administrator shall maintain a current listing of the names of sexual assault victims and assailants along with the dates and locations of all sexual assault incidents occurring within the institution on his or her computerized incident index system.

ACA STANDARD(S):

Approved by: _____ Date: _____
Assistant Facility Administrator

_____ Date: _____
Facility Administrator