



Hennepin County Sexual Assault Response Protocol

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Many thanks go to the participating agencies who provided representation on the team during the formative years and through the publication of this document. Specifically, we would like to thank the following agencies for their tireless work:

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Aurora Center

Avenues for Homeless Youth

Comunidades Latinas Unidas en Servicio (CLUES)

Cornerstone Advocacy Services

Community University Health Care Center

Division of Indian Work

Hennepin County Adult Protection Services

Hennepin County Attorney's Office

Hennepin County Department of Community Corrections

Hennepin County Sheriff's Office

Mid-Minnesota Legal Aid

Minneapolis Police Department

Minnesota Coalition Against Sexual Violence

Minnesota Indian Women's Resource Center

Sexual Assault Resource Services (SARS)

Sexual Violence Center

University of Minnesota Police Department

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INTRODUCTION AND ORIENTATION TO PROTOCOL

Team History

In December 2009, SVC received support from the Minneapolis Foundation to form a Sexual Assault Multidisciplinary Action Response Team (SMART) in Hennepin County—the largest county in Minnesota with approximately 1.2 million residents. SVC convened the first SMARTeam meeting in August 2010 and has continued to meet monthly, rotating meeting sites among team member agencies. The team uses the national eight-step protocol process, based on the book *Improving Response to Crime Victims: An 8-Step Model for Developing Protocol*, by Anita Boles and John Patterson also used by other Minnesota based multi-disciplinary teams. The Minnesota Coalition Against Sexual Assault (MNCASA) provides technical assistance through the Sexual Violence Justice Institute (SVJI).

Since 2010, the team has undertaken and completed the first steps of the protocol process including: (1) Inventory of Existing Services, (2) Victim Experience Survey, and (3) Community Needs Assessment (CNA). The CNA was published and released in fall of 2014 with the support of prominent figures such as the Mayor of Minneapolis and the Hennepin County Attorney. In 2015, the team worked to collaboratively write a set of grounding statements and philosophies represented in this text. During the spring of 2016, the team underwent the difficult and rewarding process of protocol development. Through numerous edits and extensive work with internal and external community partners, the team proudly produced this document.

Design of the Protocol

Hennepin County is an extraordinarily diverse county and impressively hosts a variety of programs to support victim/survivors in their efforts to find healing, safety, and justice. As such, the purpose of this protocol is not to provide a clear set of required procedures, but rather, to offer clear guidelines and recommendations that each discipline can rely upon to inform their daily work. Effective protocol should provide enough information to similarly shape policies and practice without restricting informed decision-making required to meet the unique needs of victim/survivors. While this protocol has been written specifically for serving adult victim/survivors in Hennepin County, we have offered information regarding minors (ages of approximately 13-17) throughout the document; working with youth under the 13 years of age has not been addressed in this document. There is a great deal of overlap between working with minor and adult victim/survivors, as such, many elements of this protocol can be applied to either case. However, there are a number of critical differences that must be observed, and professionals should consult the appropriate resources when working with minors.

In addition to providing guidelines, this document has been designed to elicit feedback from individual programs and agencies as they evaluate their specific trainings and procedures. The county should and will continue to revise this document to reflect the changing needs and landscapes of working with victim/survivors. Protocol is designed to be a living document that shapes and reflects the community. As such, the work of the team remains ongoing in an effort to be support victim/survivors in Hennepin County.

STATEMENT OF PURPOSE

“Having a protocol for Hennepin County assures that a victim of sexual assault receives consistent, quality services, and information regardless of how/where they enter the system.”

A county-wide protocol accomplishes a number of important tasks for those who work with victim/survivors of sexual violence. Above all, the protocol process works to improve the victim/survivor experience and enhance the systems response in Hennepin County. Through the process of improving experience and response, the protocol also functions as guidelines that do the following:

- Strengthen interagency communication and cooperation,
- Create consistent standards for agencies, and
- Clarify the roles and responsibilities of the participating SMARTeam agencies.

Establishing expectations of agency partners through protocol provides clear paths to effective communication and offers avenues of accountability for all disciplines operating in a highly diverse county, such as Hennepin. For agencies involved in advocacy, corrections, law enforcement, medical, and prosecution, protocol builds upon a core set of five principles that span across each discipline.

Five Core Principles

Service providers responding to sexual assault in Hennepin County adhere to five core principles that frame all interactions with the victim/survivor seeking support. Each principle serves as a tool in facilitating interactions with victim/survivors and other service agencies as well as frames the development and implementation of the protocol. Anyone connecting with service providers can reasonably expect the following principles to frame each interaction, regardless of entry point with each discipline:

1. Compassion: All interactions are grounded in respect and understanding, regardless of personal beliefs.
 - a. This includes using trauma informed approaches in interactions with victim/survivors.
2. Collaboration: Evidence and principles-based systems of support integrate practices, procedures, and services within and across agencies, systems, and policies. Service providers cooperatively work with the victim/survivor as well as other agencies and organizations.
3. Communication: Information regarding services, policies, processes, and decisions will be provided in a timely manner. Service providers have a responsibility to clearly inform others regarding their roles, limitations, and aspects of contact with their agency, to the greatest degree possible.
 - a. Service providers must educate and inform victim/survivors.
 - b. Service providers should share information with other agencies and organizations regarding service provision, when possible.
 - c. Service providers should educate the public and other organizations about their work.
4. Choice: Each service provider explains all options a victim/survivor has. In doing so, the service provider seeks to uphold and promote the wishes of the victim/survivor to the fullest possible extent.

5. Cultural responsiveness: Service providers will maintain a culturally responsive approach when working with victim/survivors of sexual assault. This includes seeking out culturally specific information or resources when beneficial and providing appropriate referrals to agencies if the victim/survivor wishes.
 - a. Service providers seek out education on working with culturally specific groups

Victim Experience

At each step of the victim/survivor’s path to healing and justice, the Hennepin County SMARTeam is committed to ensuring that victim/survivors feel they have been empowered to make informed decisions regarding their experiences through collaborative work with service providers. We resolve to work to create the conditions that victim/survivors feel safe and respected when engaging with each individual and process in disclosing their victimization. As a SMARTeam, we agree that agencies have a responsibility to provide paths to other processes and systems through facilitated referrals while never pressuring a victim/survivor to engage with any agency or process. In short, when someone goes through any element of the process in Hennepin County, the goal is that they will feel supported and that it was a worthwhile endeavor to disclose their victimization.

Success in Hennepin County

As a team, we recognize the primary indicator of a SMARTeam’s success is the improved services and procedures for supporting victim/survivors. There are a number of ways that our work with the team highlights that improvement. For example, through the work of the team, each organization has a better knowledge of available resources in the county to offer to victim/survivors. There is also greater understanding of the role that each organization or system plays in responding to disclosures of sexual assault in Hennepin County, which result in increased cooperative relationships among agencies to meet the needs of victim/survivors. These relationships allow for critical feedback about gaps in system response, which encourages agencies to improve their processes to better serve victim/survivors. Additionally, co-learning improves the services to victim/survivors as members of the team provide cross training to increase the understanding and responsiveness of other organizations. These successes are some of the tangible ways that the Hennepin County SMARTeam continuously improves services and procedures for victim/survivors through the use and revision of the protocol.

GUIDING PRINCIPLES

Culturally Responsive Service in Hennepin County

With nearly 1.2 million residents, Hennepin County is home to a broad range of diverse communities. The SMARTeam and all participating agencies acknowledge and affirm the importance of providing culturally responsive services to victim/survivors—this means with each individual, service providers make adaptations that reflect the realities of the cultural identities important to that victim/survivor. Cultural responsiveness encompasses all intersectional elements of social identity as well as the recognition of the roles power and privilege play in interactions with all systems.

Further, a culturally responsive approach recognizes that one person/organization cannot know and should not be expected to know everything about all cultures; however, when working with victim/survivors, we must honor the victim/survivor's cultural values. To meet this end, service providers will collaborate with the individual victim/survivor and other organizations to develop an approach that allows the victim/survivor to find healing and justice that is meaningful as defined by them. Being responsive requires responders to take a supportive approach with a personal and organizational commitment to on-going education, and in close collaboration with culturally specific organizations. There is a list of culturally based advocacy services within Hennepin County located in Appendix A.

Victim Centered in Hennepin County

"[Victim centered] It incorporates a set of skills that reflect and reinforce values that center on how to discover and balance what is 'important to' and 'important for' a person."

The SMARTeam of Hennepin County identifies the importance of maintaining a *victim centered* approach in all interactions with those who have experienced sexual assault. *Victim centered*, for our team, means that all agencies participating in the fields of advocacy, corrections, law enforcement, medical, and prosecution provide services to victims that prioritize a victim/survivor's needs. Prioritizing and being sensitive to victim/survivors' needs requires:

- Service providers to actively listen with compassion,
- to empower victim/survivors to make choices,
- to respectfully uphold those decisions, regardless of personal feelings or biases

In Hennepin County, taking a *victim centered* approach means that victim/survivors are treated with dignity and can expect that agencies will cooperate with community partners to access the services most needed for their healing.

Defining *victim centered* helps to minimize experiences of re-traumatization and increase feelings of safety throughout a victim/survivor's healing process. Additionally, defining *victim centered* serves to establish standards for the highest degree of accountability, transparency, and cooperation among all responding agencies throughout the county. These elements are integral to a *victim centered* approach, as each of us play an important part in empowering each individual victim/survivors to find healing, safety, and justice within all aspects of the various systems that serve victim/survivors of sexual assault.

Accountability

"Accountability at an individual level means that the individual who commits acts of sexual assault is responsible for their own behavior."

The SMARTeam identifies the importance of creating mechanisms of accountability to victim/survivors as a principle of our team. Furthermore, we agree to uphold standards of accountability even more broadly, by focusing on systems of accountability that will impact both individuals who commit sexual assault and each of the five disciplines represented on the team as well. Above all, our disciplines agree

that, in order to hold perpetrators accountable for their actions, we must work collaboratively across our disciplines and share resources specifically with perpetrators in mind.

Individual Level Accountability

At the core of accountability for individuals, we hold that perpetrators must face appropriate consequences as well as receive rehabilitation through education and prevention efforts. This individual level accountability includes thorough and objective investigations into every instance of sexual assault reported in Hennepin County. Those who perpetrate must have opportunities to comprehend the impact of their actions and take responsibility for the violence they have committed. Depending on the case and the needs of the victim/survivor, this process may vary for each individual.

Systems Level Accountability

At the systems level, the Hennepin County SMARTeam acknowledges the importance of holding our own agencies as well as partner agencies to a high standard of accountability in cases of sexual assault. While we do acknowledge the limitations our disciplines face, we commit to constantly striving to improve our processes as well as understand one another's unique roles in responding to sexual assault. Ways that we commit to systems-level accountability include developing stronger referral processes to other agencies and disciplines with an emphasis on sharing information whenever possible. We expect our agencies and other organizations to use transparent processes that are free of personal bias. In the event of a concern about another agency or organization, we commit to proactively holding our agencies as well as others accountable by providing direct and constructive feedback with the intent of improving responses and processes in cases of sexual assault.

“Accountability is the act of providing constructive feedback between agencies without it being interpreted as hostile or offensive, but rather, collaborative, helpful and supportive of the overall mission.”

ADVOCACY PROTOCOL

ROLE OF THE ADVOCATE

An advocate's primary role is to provide support, information, options, and advocacy to the victim/survivor of sexual assault as well any secondary survivors. Advocacy works on a model based in peer support, empowerment, and encouragement. Advocates are uniquely positioned to facilitate communication through all stages following a sexual assault, as they work within and through many systems. **Other responders should involve advocates as soon as possible and throughout any and all processes such as medical forensic exams, reporting to law enforcement, or during legal proceedings.** Please see APPENDIX A for more information on agencies for referrals.

Typically, victim advocates go through formal training. Advocates who attend a mandated 40 hour training and work in a crisis center focused on responding to sexual assault are classified as "sexual assault counselors" under Minnesota statute [595.02, and the information a victim/survivor shares is protected under judicial privilege \(see glossary\)](#). Importantly, not all advocates are defined as "sexual assault counselors" under the statute, and this distinction should be made clear to victims/survivors. For example, a victim-witness advocate who works at the county attorney's office is not defined as a "sexual assault counselor" for purposes of the privilege statute. For the purposes of this document, the term "advocate" will be used to indicate any individual who provides services to victim/survivors and "sexual assault counselor" will be used to indicate those who qualify under the statute.

In their interactions, advocates focus on validating and honoring the needs of the victim/survivor as well as providing crisis intervention, assessing for safety concerns, explaining systems responses, and offering referrals to other services. In all interactions, victims/survivors should be presented with the option to receive advocacy services as the involvements of advocates can increase feelings of comfort for victims/survivors. Advocates ensure that victim/survivors understand informed consent, meaning that the victim/survivor will not release any information to a third party without a thorough understanding of the risks and benefits of doing so. An advocate can only communicate with a third-party when the victim-survivor signs a release. Mandated reporting and court orders are the only exceptions to this rule.

Advocates provide three major types of services—dependent upon agency resources and scope—such as *general advocacy* (in-person counseling or over the phone), *legal advocacy*, and *medical advocacy*. Advocates do not and should not provide medical or legal advice during their work with victim/survivors; rather, their role is to provide and explain all available options to primary as well as secondary victims/survivors.

KEY TASKS FOR ADVOCATES

- Explain rights to victim/survivor under the law and within the advocacy relationship
- Address any safety considerations for victim/survivor
- Clarify advocate's roles, responsibilities, and limitations (i.e. confidentiality or mandated reporting)
- Be supportive and empowering to each victim/survivor
- Provide information, options, and resources to allow for informed decision-making

- Act as a liaison between victims/survivors and systems
- Offer referrals to other agencies to meet the individual needs of the victim/survivor

GENERAL ADVOCACY

General advocacy includes a range of activities such as meeting one-on-one with a victim/survivor, providing services over the phone, leading support groups, or other activities involved in providing support to victim/survivors in non-specific settings. When engaging in one-on-one advocacy, advocates within Hennepin County are expected to use the following guidelines whenever possible.

- Provide victim-centered (see [page 10](#)) crisis intervention and emotional support
 - Listen and respond to the victim/survivor without judgment or conclusions
 - Respect and support decisions made by the victim/survivor
 - Explain confidentiality protections and informed consent as well as mandated reporting requirements
- Explain any costs or conditions of services as well as limitations of advocate's position.
 - Early in advocacy, state whether advocate can extend judicial privilege under the Minnesota state statute to empower survivor to make informed choices about the information they wish to disclose
- Offer support, options, and referrals to victim/survivor
 - Provide explanation of all options and potential outcomes
- Explain process of police reporting and/or medical evidence collection process.
 - Please see Medical Protocol on [page 24](#) for further information on the 120 hour timeframe for evidence collection
- Collaborate with the victim/survivor to determine needs throughout all interactions
 - Determine and provide any specific requirements of the victim/survivor i.e. culturally specific resources, language interpretation, or physical/developmental needs
- Empower victim/survivor to communicate their needs and work to fulfill their requests to the best of advocate's ability
- Assist victim/survivor in identifying and addressing any immediate concerns such as: temporary safe housing, physical safety, protection of dependents, access to benefits or transportation
- Ensure victim/survivor has access to follow-up services and referrals, as needed
 - Offer legal or medical advocacy, through own agency or through another agency

LEGAL ADVOCACY

Legal advocacy includes activities such as providing assistance to victim/survivors while reporting to police, during criminal or civil proceedings, filing documents to obtain Harassment Restraining Orders or Orders for Protection, providing referrals to civil/legal representation, as well as any other services connected to the legal system. These activities should occur regardless of any assumed outcomes of engaging with legal systems. Advocates are not attorneys; therefore, advocates *cannot* and *should not* provide any legal advice or counsel. When providing legal advocacy, advocates are expected to use the following guidelines whenever possible.

- Offer victim-centered services as outlined in general advocacy protocol

- Inform survivor of options in regards to reporting and discuss merits of each
 - Immediate, delayed, or no reports (see glossary for definitions of each)
- When possible, call ahead to precincts, attorneys, or other services to inform them of the situation and ensure someone will be available to respond to request for services
- Educate personnel about specific needs or concerns of the victim/survivor, within the boundaries of confidentiality and only with the informed written consent of the victim/survivor
- Cooperate with personnel whenever possible and explain the role and limitations of advocates
- During procedures, ensure to accompany victim/survivor and advocate for their needs, as allowable within the setting
 - Take down all information such as police names, badge numbers, case numbers, or date of paperwork for victim/survivor to be able to follow-up at a later time
 - Prepare victim/survivor regarding the potential of seemingly invasive questions as a difficult, but, necessary part of the legal process
 - For the purpose of building rapport and to give more information to empower victim/survivor, request that personnel explain why they may be asking certain questions
 - The advocate may be present for the interview but cannot participate.
- During reporting or submission of paperwork, advocates may stay with the victim/survivor to provide support, but cannot offer advice or legal counsel
 - Explain importance of victim/survivors disclosing information surrounding the assault
- In the event of criminal proceedings, foster relationships between victim/survivor with Victim Witness in the Attorney's office (see **Legal Protocol** on page 28 for more detail)
 - Victim Witnesses cannot maintain judicially privileged communication
- The role of the advocate is to support, facilitate, and ensure the victim/survivor's voice is heard. *Advocates can be present but may not participate in law enforcement or legal interviews nor complete paperwork for victim/survivors. Advocate cannot provide legal advice during legal advocacy work or at any time.*
- <http://www.lawhelpmn.org/> offers some guidance for civil legal assistance
 - Please see the Legal Protocol on page 30 for further information on civil legal options

MEDICAL ADVOCACY

Medical advocacy generally refers to when an advocate is called by the medical facility to accompany victim/survivors during the completion of medical forensic examination at a medical facility in Hennepin County. As a county-wide standard, advocates have a 60-minute limit in which they must respond and arrive at the medical facility, if available. At the time of this writing, there are nine medical facilities at which victim/survivors can access medical forensic exams in Hennepin County, and the facilities are as follows:

- Abbott Northwestern
- Abbott Northwestern WestHealth
- Fairview Southdale

- Hennepin County Medical Center (HCMC)
- Maple Grove Hospital
- Methodist Hospital
- North Memorial Medical Center
- University of Minnesota Medical Center (East Bank)
- University of Minnesota Medical Center (West Bank)

When providing medical advocacy, advocates cannot assist with nor participate in any aspect of the evidence collection portion of the exam—even if a medical providers requests it—so as to preserve the proper chain of custody for evidence. When attending a medical advocacy, advocates in Hennepin County will use the following guidelines whenever possible.

- Describe advocate role, responsibilities, and limitations upon arrival to medical facility
 - Introduce self to the victim/survivor as well as relevant personnel such as security, attending nurses, or law enforcement.
- Offer victim-centered services as outlined in general advocacy protocol
 - Outline procedures and processes for victim/survivor
 - Explain that a victim/survivor may decline or modify advocacy services throughout interaction
 - Remind victim/survivor of the right to refuse any element of the exam
 - Discuss merits of each choice, as needed
- Act in coordination with the attending Forensic Nurse Examiner throughout the examination while advocating for the victim/survivor
 - Intervene on behalf of victim/survivor, if necessary and appropriate
 - When possible, speak with Forensic Nurse Examiners or medical providers in a confidential location and immediately after the incident
- Stay for the duration of the exam and if possible, any immediate follow-up (i.e. waiting for discharge or prescriptions)
 - Discuss and address safe transportation and housing options with victim/survivor
 - If an officer is already present to take a statement, support victim/survivor during this process and follow legal advocacy protocol
 - If an officer is not present, provide reporting options to victim/survivor in conjunction with Forensic Nurse Examiner
- During evidentiary exam:
 - Provide victim/survivor the option to have an advocate present or wait outside of the room
 - If present, stand or sit near the head of the bed
 - *Do not assist with any part of the exam or provide medical advice or opinion*
 - *Do not take notes during any part of the exam including the account of incident interview with the patient*
 - Validate victim/survivor and ensure their comfort in whatever way possible
- Discuss insurance confidentiality and potential cost of services with victim/survivor
 - Provide resources to assist when possible
- Offer follow-up services with agency or an agency able to provide those services
- Immediately address any concerns or questions that occurred during the course of the exam with the attending Forensic Nurse Examiner.

SPECIAL CONSIDERATIONS AND OBLIGATIONS FOR ADVOCATES

Best Practices in Ethics and Boundaries

- Though advocacy is typically community based, advocates are expected to uphold the highest standard of ethics and boundaries
 - Typically, advocacy should use the ethics and boundaries established in the best practices of therapeutic services, such as those followed by licensed clinicians
 - These boundaries may change dependent upon cultural norms and practices

Confidentiality and Reporting Obligations

- Confidentiality is one of the reasons advocacy may be a desired resource. As such a sexual assault counselor can offer confidential services that, in the absence of written release by the victim/survivor, can only be breached by mandated reporting or by court order
 - Prior to providing services, advocates must discuss the nature of confidentiality, both protections provided as well as limits, with victims/survivors
 - Advocates should be prepared to explain their confidentiality obligations to other professionals.
- Advocates who are able to extend judicial privilege under the statute also have obligations to confidentiality under state and federal law
- An advocacy program should have a clear policy and protocol for when subpoenas are served upon the agency or an advocate or when information held by the program is the subject of a court order.
- Advocates in Minnesota are not subject to licensure; however, they may have licensure through another professional avenue (i.e. a license in social work)
 - Advocates should adhere to the highest mandated reporting obligations required under their licensure.

Data Collection and Victim/Survivor Files

- Advocates in Minnesota are not bound by HIPPA obligations, however, their communications are bound by the Minnesota statute [13.04](#) (aka the Tennessean Warning) surrounding data practices
 - Brief summary: Victim/survivors must be made aware of what private or confidential data will be collected, how it will be used and maintained, as well as how and when it will be destroyed

Informed Consent

- Victim/survivors must be provided with clear guidelines for their interactions with advocacy in order to establish informed consent
 - This includes providing victim/survivors with information regarding confidentiality, judicial privilege, as well as mandated reporting obligations
- Individuals with intellectual or developmental disabilities as well as vulnerable adults may have legal guardians.
 - Do not assume, however, that all adults with intellectual or developmental disabilities are vulnerable adults or have legal guardians.

- o Age alone is not a basis for a vulnerable adult definition
- o Depending upon the type of guardianship, advocates may have to obtain consent from the guardians. Be aware that a guardian may be the one harming the vulnerable adult.

LAW ENFORCEMENT PROTOCOL

Victims are never required to report their assault to law enforcement nor are they required to get a medical forensic exam. While reporting is strongly encouraged, victims should never be forced to start or complete a report/exam.

ROLE OF THE RESPONDING OFFICER

The primary role of the first responder is to attend to the victim's immediate life and safety concerns as well as secure any crime scene.¹ After responding to immediate concerns and/or securing the crime scene, the officer is responsible for conducting a preliminary interview to gather enough information to determine whether the elements of a crime have been met and by whom. These details should include obtaining all necessary information to complete reports including, witnesses, names, addresses, phone numbers, and other pertinent facts. To the best of their ability, officers will remain impartial—though not indifferent—throughout contact with victims.

Responding officers should make sure any available evidence has been collected—from victims as well as perpetrators—while maintaining chain of custody and avoiding cross-contamination. Examples of evidence may be undergarments, clothing, or other items. Officers should ensure the victim is transported to an appropriate medical facility (see [page 14](#) for listing of facilities) for a medical forensic exam, if the victim wishes to have an exam. Perpetrators may also undergo a medical forensic exam to collect evidence. Officers can also help arrange for transportation home or to safe location of the victim's choosing after the exam. Lastly, officers are responsible for entering the police report in a timely manner and per department procedures. When responding to sexual assault reports, law enforcement personnel within Hennepin County are expected to use the following guidelines whenever possible.

KEYS TASKS FOR RESPONDING OFFICER

- Provide a safe and private environment for the victim to speak with an officer
 - Avoid talking through glass walls or partitions
 - Do not interview victims in the back of a squad car
- Attend to the victim's immediate health and safety concerns
 - Build rapport with the victim through listening with empathy and patience
 - Do not blame or shame victims for the assault
- Explain the importance of questions for clarification purposes and that some questions may seem pointed but must be asked to gather initial evidence
- Take a police report for all victims who want to report a sexual assault
 - If the incident does not meet the criteria of a sexual offense as determined by Minnesota State Statutes ([609.341-609.3451](#) and [Criminal Sexual Conduct](#))

¹ Every investigative agency has a reporting system in place and uses specific terms such as “victim,” “suspect,” and “arrested person,” etc. These terms shall be used in this protocol to ensure that they are consistent for reporting procedures on all crimes as well as for purposes of local and federal tracking. These terms, in no way, place blame or guilt to any person who has experienced a sexual assault.

- Definitions), complete an info report or use applicable reporting code for the criminal elements
- When collecting contact information, clarify which mode of contact is safe and confidential
 - Provide the victim with the case report number and contact phone numbers for your agency
 - Offer any relevant support resources to the victim
 - Give the crime victim rights information to victim
 - Comply with all department procedures for crimes
 - With recent assaults (<120 hours), ask victim not to wash, change clothes, or clean the crime scene until evidence is gathered
 - If assault has just occurred, ask victims to refrain from eating or drinking anything
 - Evidence should be placed in paper bags to preserve any evidence
 - This is true for evidence collected from perpetrators as well
 - If it is appropriate or requested, use an interpreter to aid with the interview
 - Do not use a victim's family or friends as interpreters, unless it is an emergency
 - Rule out family/friends as potential suspects prior to using as interpreters
 - Explain importance of a medical forensic exam for collection of evidence
 - Do not record medical forensic exam by audio, video, cell phone, body camera or other means
 - Reference and comply with agency policy, as mandated
 - Do not make promises to the victim that an officer does not have control over
 - Be honest and explain all processes to the victim.
 - For delayed reports (>120 hours), collect possible evidence at the time of the report
 - Do not tell the victim to collect it themselves to hold for an investigator
 - Make appropriate arrangements for the victim's transportation to safe location
 - See *Transportation* under "Special Considerations and Obligations for Law Enforcement" for more information
 - Officers must make cross reports of vulnerable populations to the appropriate authorities
 - For vulnerable adults, use the Minnesota Adult Abuse Reporting Center ([MAARC](#))
 - For reports regarding minors, definitions related to maltreatment and reporting obligations.

ROLE OF THE INVESTIGATOR

If the case is assigned, investigators follow-up with victims after the initial report has been made. The investigator is responsible for conducting an in-depth, fair, and impartial investigation. The investigator also gathers further evidence to support and build a case to present to the prosecutor for potential charges. Investigators should provide the victim with essential information regarding the case and follow-up on case outcomes. Investigators within Hennepin County are expected to use the following guidelines whenever possible.

KEY TASKS FOR INVESTIGATORS

- Contact the victim within 24 hours after case assignment
 - When possible, clarify which mode of contact is safe and confidential
 - If the victim does not respond to initial contact, attempt a second form of contact such as a letter, email, or follow-up visit
- Arrange for an in-person interview with the victim whenever possible

- Explain the investigative process so victims understand the process and what investigators can do
- Build rapport with the victim and employ Forensic Experiential Trauma Interview ([FETI](#)) techniques when appropriate
 - Do not minimize the victim's case or feelings
 - Have patience
 - Show empathy
- Explain to the victim the importance of the interview for clarification purposes
 - Explain that some questions may seem pointed but must be asked to gather more evidence for the prosecutor
- Inform victim they have the right to stop the interview at any time
- Allow victims to have a victim advocate present during interviews, when feasible or as requested
 - Advocates should only be excluded if their presence *seriously* undermines interview progress
- Follow up with the victim in a timely manner on the case outcome, charged, declined etc.
- For forensic interviews with minors or vulnerable adults, law enforcement officials can refer to Cornerhouse

UNIQUE CONSIDERATIONS FOR HENNEPIN COUNTY SHERIFFS

The Hennepin County Sheriff's Office has trained personnel who stand ready to investigate allegations of sexual assault occurring in Hennepin County. The Hennepin County Sheriff's Office has primary jurisdiction and/or provides investigative services to many specific areas of Hennepin County including: Fort Snelling, Greenfield, Corcoran, Hennepin County facilities and buildings, Hennepin County Adult and Juvenile Correctional Facilities—including Prison Rape Elimination Act (PREA) cases, unincorporated areas of Hennepin County, or areas of Hennepin County not serviced by a police department.

The Hennepin County Medical Center is a building where the Sheriff's office is the primary responder; however, as of this writing, a report of a sexual assault at HCMC will be handled by MPD. Please note that this list is not an inclusive list and that a number of circumstances apply for determining a Sheriff's Office response. Hennepin County Sheriff's Office Communications can be contacted 24/7 to request a sheriff's office response.

UNIQUE CONSIDERATIONS FOR SUBURBAN POLICE

In Hennepin County, suburban law enforcement agencies have varying levels of resources when responding to sexual assaults. Some agencies may have first responders who will take an initial report and then, refer the case to an investigator. In other cases, the responding officer follows the case through the entire investigation.

Often, evidence collection in sexual assault cases requires the use of specialized forensic evidence identification and collection equipment. Suburban agencies are encouraged to utilize outside agencies that have access to this equipment when investigating and collecting evidence at the location where a sexual assault is reported. At this time, holding of sexual assault kits is determined per each agency's protocol.

UNIQUE CONSIDERATIONS FOR UNIVERSITY OF MINNESOTA POLICE

The University of Minnesota employs a licensed police force, the University of Minnesota Police Department (UMPD). UMPD investigates sexual assaults that occur on University property. Off-campus housing/apartments and fraternities will not normally be investigated by the UMPD. However, a UMPD officer may be the first officer on-scene for any 911-call close in proximity to University property.

The Ramsey County Adult Sexual Assault Response Protocol will be utilized for sexual assaults that occur in Ramsey County such as on the Saint Paul campus. [Link to Ramsey County Adult Sexual Assault Response Protocol] Additionally, the University of Minnesota operates a unique victim advocacy program for students, The Aurora Center. Aurora will help victims notify the proper law enforcement agency and/or campus authorities, provide support, and short-term counseling to the victim. Additionally, officers will need to cooperate with offices such as the Office for Student Conduct & Academic Integrity and the Equal Opportunity and Affirmative Action.

- Officers investigating or receiving a report of a sex assault shall, typically by issuance of a victim's right's information card, inform the victim of the following:
 - Victims have the right to apply for reparations
 - Victims have the right to request that the Department withhold public access to information that would reveal the victim's identity
 - Victims have the right to be informed about the nearest crime victim assistance program or resource (Aurora Center)
 - Victims have the right to be informed of and participate in the prosecution process if an offender is charged, including the right to request restitution.

SPECIAL CONSIDERATIONS AND OBLIGATIONS FOR LAW ENFORCEMENT

Case Follow-up

- In the event victims have not been contacted by law enforcement regarding the status of their cases, victims may call the responding agency for an update

Law Enforcement Holding of Medical Forensic Exam Kits

- The following is a process for the City of Minneapolis, other jurisdictions will have different processes and should follow their internal procedures
 - This model can be used as a guide for other departments
- Minneapolis Police Department will hold Medical Forensic Exam Kits—in which a victim did not report—for 18 months (See Medical Protocol on page 24 for more information)
 - After 18 months, kits will be destroyed
- All kits that Minneapolis Police Department receives in which there is no police report will remain anonymous through assigning a unique identifying number to the kit
 - Unique identifying numbers are assigned by the Lead Forensic Nurse Examiner at Hennepin County Medical Center (HCMC)
 - These numbers and names will be kept on file in a secure database at HCMC
- If the victim chooses to report to law enforcement during the 18 month hold, their name will be matched to the unique identifying number through the Forensic Nurse Examiner nurse
 - The kit will be processed and attached to the case
- The Lieutenant of Sex Crimes will pull one case number and write one Recover Property report at the beginning of each calendar year

- o All anonymous medical forensic exam kits from the City of Minneapolis, with the exception of U of M property will be inventoried under that report

Pre-existing Warrants for Arrest of a Victim

- The MPD does not hold the practice of running victims for outstanding warrants
- If a victim self-discloses that they have a misdemeanor warrant, the officer/investigator will recommend that the victim attend to that warrant as soon as possible
- If a victim self-discloses that they have a felony/bench warrant, the Minneapolis Police must book the victim, as there is no discretion on behalf of the officer/investigator
 - o The disclosure of the felony or bench warrant does not impact status as a victim and the officer/investigator must still see that the victim receives all standard services for a sexual assault
 - Example: Medical Forensic Exams, reporting of the sexual assault, victim-centered approach, support services, etc.

Prison Rape Elimination Act (PREA)

- [PREA](#) mandates that all correctional facilities receiving federal funds must take steps to analyze and prevent acts of sexual assault; facilities must adopt a zero-tolerance policy regarding sexual assault of inmates
 - o Complaints must be made to the correctional facility PREA coordinator
 - o Hennepin County Sheriff's Office is typically the investigating party on behalf of correctional facilities in Hennepin County, in the event of PREA complaints
- Inmates must have equal access to support services while incarcerated as they would in their communities—this requires partnership with advocacy agencies
 - o See APPENDIX A for a list of service providers in Hennepin County

Title IX

- [Title IX](#) compliance often limits the ability of college personnel and officers to share information regarding sexual assault cases
 - o University officials will make all reasonable efforts to share information with relevant parties while remaining in compliance
 - o Under Title IX, colleges are required to conduct their own investigations and law enforcement should coordinate cases with appropriate personnel

Transportation for Victims

- Unless injured or incapacitated, avoid the use of ambulance as transportation to medical facilities
 - o Officers should follow their agency's internal protocol
 - o Conditions such as strangulation, loss of consciousness, or active psychosis necessitates transportation via ambulance
- Officers should work with appropriate personnel to coordinate safe transportation for victims within and/or across jurisdictions
 - o Work with advocacy organizations to arrange transportation, as appropriate

MEDICAL PROTOCOL

Victims are never required to get a medical forensic exam nor are they required to report their assault to law enforcement. While exams and reporting are strongly encouraged, victims should never be forced to start or complete an exam/report.

ROLE OF FORENSIC NURSE EXAMINERS (FNE)

All people who seek a Medical Forensic Exam should receive equitable services regardless of identity, status, or history.

Forensic nurse examiners are registered nurses with specialized training in order to respond to sexual assaults. The training consists of a 40-hours of education in evidence collection, injury identification, anatomy and physiology, forensic experiential interviewing, forensic documentation and photography, and crisis intervention. Forensic nurse examiners respond to any medical facility within Hennepin County (see [page 14](#) for listing of medical facilities) and respond to cases of acute sexual violence. “Acute” is defined as assaults having occurred within the previous 120 hours.

FNEs provide information to law enforcement for ongoing investigations and can be called upon to testify in court as fact and expert witnesses. FNEs are responsible for providing community outreach and resources as well as training for partners such as advocates, law enforcement, prosecution, and colleges/universities. Forensic nurse examiners play a crucial role in educating other health care professionals about the medical forensic exams and providing care to patients² experiencing trauma.

KEY TASKS FOR FORENSIC NURSE EXAMINERS

- Assess patient for any life threatening injuries and provide necessary crisis intervention
- Explain purpose and components of medical exam
- Obtain patient’s consent for the exam
 - Inform patients that they may decline the exam or any component of the exam
 - Consent for the exam is an on-going process, FNEs are responsible for ensuring a patient continues to give consent throughout exam
- Obtain account of incident from patient
- Complete relevant components of physical and anogenital exam
 - Document and photograph any injuries
 - Collect specimens for potential evidence

² Every medical agency has a reporting system in place and uses specific terms such as “patient,” “perpetrator,” and “suspect,” etc. These terms shall be used in this protocol to ensure that they are consistent for reporting and training procedures. These terms, in no way, place blame or guilt to any person who has experienced a sexual assault.

- Discuss risk and treatment options regarding HIV, sexually transmitted infections, and pregnancy
- Provide patient with resources and follow-up during discharge planning
 - Address any safety concerns and discuss practical steps to act upon safety concerns raised
 - This step is often best done in conjunction with advocacy and advocacy resources
- Ensure chain of custody is maintained for all evidence collected during exam
 - Facilitate access to and evidence retrieval for law enforcement

MEDICAL FORENSIC EXAMINATION PROTOCOL

- Whenever possible, Forensic Nurse Examiners are expected to respond to the medical facility within 60 minutes of being paged for a forensic exam
 - 60 minutes is the reasonable expectation barring unforeseen circumstances
 - Advocates are paged simultaneously to respond to medical forensic exams (See Medical Advocacy Protocol on [page 14](#))
- FNEs will obtain consent from patients prior to beginning exams
 - FNEs will follow agency consent procedures
 - For patients experiencing temporary incapacitation (less than 12 hours), healthcare professionals are instructed to consult with the FNE to determine whether and/or when to proceed with a medical forensic exam
 - Minors may make certain decisions regarding health care without prior permission from a parent or guardian, such as accessing [forensic exams](#)
 - Vulnerable adults can provide consent to emergency medical services
- When obtaining *account of incident* from the patient, FNEs should use the forensic experiential trauma interview technique (FETI)
 - The *account of incident* is the portion of the exam where the FNE takes down the patient's recounting of the sexual assault, using the patient's words.
 - Please see the following link for explanation and examples of [FETI](#)
- FNEs should understand and implement trauma-informed practices with patients—this means learning and honoring a patient's values/needs, whenever possible
 - For example, getting a patient's consent before touching them or offering choices whenever available
- When a patient has to provide their clothing for evidence, FNEs will provide an Assault Survivor Kit to the patient
 - These kits are donated by the [Assistance League](#) and include items such as T-shirt, sweatpants, socks/underwear, and a hygiene kit.
- FNEs should follow evidence-based practices and current [Center for Disease Control](#) (CDC) guidelines regarding HIV and STI prophylaxis as well as emergency contraception.
 - Discuss the need to follow-up with a primary care provider or another clinic for continued testing and check-ups regarding health

- FNEs also provide forensic evidentiary exams for perpetrators, at the request of law enforcement
 - These exams are performed only with a warrant
 - Evidentiary exams should not be performed in the same exam room as exams for the victim of the sexual assault
 - When possible, a different FNE should conduct the perpetrator's evidentiary exam
 - If a patient chooses to report and the perpetrator is identified as a law enforcement officer, the FNE will call the law enforcement agency of the officer and ask to speak with the supervisor in order to involve Internal Affairs early
- Forensic nursing is an ever evolving field and FNE programs and allied staff should prioritize education on new and evidence-based practices for the discipline

SPECIAL OBLIGATIONS AND CONSIDERATIONS FOR FORENSIC NURSE EXAMINERS

Anonymous Storage of Samples and Specimens Collected During Medical Forensic Examinations

- Please see Law Enforcement Protocol on [page 18](#) for further information

Billing for Medical Forensic Exam

- FNE will explain to patients that the [medical forensic exam](#) will be billed to the county in which the assault occurred
 - All other billing is at the discretion of the medical facility and in compliance with Minnesota statute [609.35](#) and Violence Against Women Act
 - Patients should be informed of any additional costs
 - Patients have the option to seek [reparations](#) from any crime as long as the patient reports to and cooperates with law enforcement

Chain of Custody

- It is the responsibility of the FNE to ensure chain of custody is maintained throughout the exam
 - This includes: urine toxicology, blood toxicology, medical forensic exam kit, and any clothing collected

Confidentiality

- FNEs should maintain a patient's confidentiality—including minors and vulnerable adults—and limit disclosure of information
 - Disclosure of information should be made with the patient's consent
 - Confidentiality can be broken only under the circumstances of a patient threatening harm to self or others or in the case of mandated reporting
- FNEs are expected to follow all HIPAA policies and hospital regulations
 - In certain cases, such as mandated reports, information is shared with relevant criminal justice system representatives

- o Please see the [45 CFR 164.512](#) for more information
- Exams are considered confidential services for patients, including minors and vulnerable adults

Interpretation and Accessibility Needs

- Hospitals have access to language lines as well as American Sign Language interpreters
 - o Language interpretation is available 24/7 and these resources will be used per the patient's request

Mandated Reporting Obligations

- Forensic Nurse Examiners Officers are mandated reporters of vulnerable populations
 - o For vulnerable adults, use the Minnesota Adult Abuse Reporting Center ([MAARC](#))
 - o For [minors, definitions](#) related to maltreatment and reporting obligations
 - When working with minor patients, FNE's should seek out assistance with expertise in child abuse pediatrics

Prison Rape Elimination Act (PREA)

- Patients who are incarcerated have the legal right to access medical forensic exams, and FNEs must obtain consent before any exam
 - o Evidence collected is given to the Hennepin County Sheriff's Office or other appropriate law enforcement agency rather than prison/jail personnel connected to the incident
 - o Please see the Law Enforcement Protocol on [page 18](#) for more information

Prolonged Incapacitation for Patients

- In the event a patient experiences prolonged incapacitation (more than 12 hours) and there is reasonable suspicion of a sexual assault, the FNE will conduct an exam based on implied consent
 - o Evidence will be held at the examining hospital until the patient gains consciousness or a court order is obtained

Supporting the Work of FNE's

- Each program should have qualified medical directors to support the work of FNEs; this director should be actively seeking out best practices and current research to inform the work
 - o Nurses cannot make diagnosis and require this support

LEGAL PROTOCOL

PROTOCOL FOR PROSECUTION

ROLE OF THE PROSECUTOR'S OFFICE

The Hennepin County Attorney's Office, Adult Prosecution Division office consists of a group of experienced attorneys who specialize in the prosecution of sexual assault cases; this office works with law enforcement agencies, victims, witnesses, and the court system. The attorneys review police reports that are referred to the office in order to determine whether there is sufficient, credible, admissible evidence to prove a case beyond a reasonable doubt in order to obtain a conviction at trial. The prosecutor may request more information from the law enforcement investigator in order to help make a final decision about charging a case. A prosecutor makes the decision whether to decline when there is insufficient evidence to support prosecution. Once a case is charged the prosecuting attorney engages in all trial motions, arguments, and negotiations to see the case through to completion.

It is a prosecutor's role to be fair and just in applying the law and in taking any case through the court system. Sexual assault cases involve difficult and sensitive issues. Such cases require specialized knowledge in understanding and interpreting laws relating to sexual crimes. The sexual assault prosecutor is specially trained to recognize and work with trauma related behavior of victims, in addition to understanding the complexity of criminal sexual conduct statutes and sentencing provisions. Prosecuting sexual assault requires working knowledge of DNA, the use of expert witnesses, understanding forensic medical exam procedures, and recognizing good investigative techniques that will provide corroborating evidence surrounding the facts of each case.

KEY TASKS FOR PROSECUTORS

- Work with law enforcement agencies, medical personnel, probation officers, advocacy organizations, and other systems at every stage of a case
- Work closely with Victim Services Division, in the County Attorney's Office, to support victims throughout the court process and prepare witnesses to provide testimony
- Evaluate each case and make a decision to decline, defer for more information, or charge
- Balance victim needs with public safety in all considerations
- Understanding the motivations and methods of operation of sexual offenders
- Ensure compliance with victim rights under Minnesota Statute [611A](#)

PROSECUTION PROTOCOL

- Each fact scenario is unique and has a variety of strengths and challenges
- In building cases, it is essential that prosecutors consider a number of issues:

- Collaborate with law enforcement in order to build stronger cases
- Consider all possible criminal charges for case
- Assess for heinous elements, as defined by Minnesota Statute
- Consider previous history of offender (Spreigl or other case evidence)
- Consider sentencing options
- If a prosecutor decides to decline a case, prosecutors should offer to meet with the victim to discuss reasons and factors related to that decision
- Request bail and/or conditions of pre-trial release
 - Request domestic abuse no contact orders (DANCO) or other appropriate criminal no-contact orders
- Address and respond to all defense motions
- Offer plea negotiations when necessary or when indicated
 - Consider victim input when making these decisions
- Assess for upward departure grounds
 - “Upward departure grounds” is charging beyond the guidelines and up to statutory maximum
- Respond to information requests on statute of limitations
- Prepare witnesses for providing testimony
- Engage expert witnesses, when appropriate
- Connect victims with a Victim Witness advocate from the Victim Services Division

SPECIAL CONSIDERATIONS AND OBLIGATIONS FOR PROSECUTION

- *Charging Decisions*
 - Prosecutors must weigh a variety of considerations based upon the type and strength of the evidence while holding accountable those who break the law
 - Prosecutors may charge, decline, or defer cases in a timely manner
- *Needs of Victims*
 - A prosecution team must be mindful of the needs of the victim, as well as to support and inform the victim throughout the court process of court hearings, motion results, any offers to negotiate, during trial testimony and at sentencing as required under Minnesota Statute 611A.
- *Public Safety*
 - Prosecutors must weigh the needs of the public in regard to safety when deciding whether to charge or how to negotiate a case
- *Pre-existing Warrants*
 - Please see Law Enforcement protocol on page 18 for more information on this topic
- *Suspects*
 - A prosecutor must consider whether the strength of the evidence is enough to result in a conviction which has serious consequences for the offender (jail, prison time, sex offender registration)
- *Victim Information Privacy*

- o Steps need to be taken whenever possible to ensure that identifying information of victims is altered or redacted to maximize victim privacy
- o Pursuant to Minnesota Rules of Criminal Procedure, any document or reports in the prosecution's possession is provided to defense
 - Prosecutors should take measures to protect information contained in victim's confidential records such as therapy or medical records
- *Victim Services Division in the County Attorney's Office*
- o Victim Witness advocates work with victims to provide: information about how the criminal justice system works as well as addressing the role of the victim in relation to other stakeholders within the criminal justice system, emotional support, victim's rights information, input on sentencing, HIV orders, resources/referrals for counseling or services pertaining to safety issues, assistance applying for and/or obtaining restitution and reimbursement from Crime Victims Reparation Board (CVRB)
 - Restitution includes such things as: lost wages, reimbursement for physical property damage, or counseling and/or medical expenses
 - HIV orders for perpetrators are followed up on through a medical provider
- o Witness advocates work with witnesses by providing information and assistance to participate in the criminal justice process
- o Victim Witness Advocates provide or arrange for language-based services throughout the criminal justice process
- o Victim Witness Advocates can not extend judicial privilege under the state statute and their records may be requested as discovery and exculpatory information must be disclosed to the defense
 - Victim Witness Advocates have a responsibility to explain the limits of their confidentiality to victims
 - Please see [page 13](#) for more information for differences between criminal justice based advocates and community advocates

PROTOCOL FOR CIVIL LEGAL SERVICES

ROLE OF CIVIL LEGAL SERVICES CASE HANDLERS

Civil legal remedies can provide powerful means to increase victims' safety, stability and economic security. A victim of sexual assault seeking legal recourse may choose to pursue civil legal remedies either along with, or instead of, engaging with the criminal justice system.

Civil legal services case handlers work for, or volunteer at, organizations or agencies providing free or low cost civil legal assistance; case handlers include attorneys, as well as legal assistants and students who are supervised by attorneys. Civil legal services case handlers assist a wide

range of clients³. They provide clients with information about available civil legal relief and advice about civil legal options. Clients then decide what action to take, if any. The amount of assistance that the case handler provides varies from case to case, ranging from advice, to limited service, to full representation.

Information about a variety of civil legal issues is available at the [Law Help MN](#) website, which includes a section specifically for [violence and abuse](#) victims. This website also provides information about [civil legal services providers in Hennepin County](#) and how victims can request civil legal services.

KEY TASKS FOR CIVIL LEGAL SERVICES CASE HANDLERS

- Provide information to empower client to make civil legal decisions
 - Explain civil legal options and possible outcomes associated with each option
 - Understand client's goals, and discuss realities of achieving those goals
- Describe specific civil legal services that the case handler is able to provide, including any limits on service
 - If unable to provide needed civil legal services, offer referrals
- Offer holistic services to support longer term safety, stability, and economic security
 - Recognize that clients may have needs across multiple areas of law as well as needs outside of their legal concerns, and provide referrals as needed
- Address any issues regarding client's safety through safety planning as well as referrals to and coordination with advocates and other service providers
- Provide outreach and education on civil legal remedies to community members and service providers

CIVIL LEGAL SERVICES PROTOCOL

Organizations and agencies providing civil legal services handle a wide range of civil legal matters that could be relevant to victims. The following list highlights areas of law handled by civil legal services providers in Hennepin County and notes in parentheses specific case types that may be especially helpful to victims:

- Orders for Protection
- Harassment Restraining Orders
- Family law (divorce and custody)
- Housing law (housing access, evictions, repairs, and implementation of Violence Against Women Act housing protections)
- Housing discrimination (sexual harassment and sexual violence in housing)

³ Agencies use specific terms such as “client” and these are present in this document. These terms shall be used to ensure that they are consistent for reporting and training procedures. These terms, in no way, place blame or guilt to any person who has experienced a sexual assault.

- Public benefits law (benefits terminations, reductions, and appeals)
- Immigration law (relief for victims of violence and abuse, such as U visas and VAWA petitions)
- Consumer law (debt and loan issues)
- Seniors law (elder abuse)
- Youth law (sexual exploitation, child protection, and abuse and neglect)
- Tax law (federal income tax audit and debt issues)
- Disability law (disability discrimination, access to services, abuse, and neglect)

When engaging with sexual assault victims, civil legal services case handlers within Hennepin County should use the following guidelines whenever possible.

- From first contact, take steps to help client feel comfortable and welcome
- Clarify what methods of contact are safe and confidential
- When asking clients about their history in order to assess or develop a claim:
 - Explain confidentiality
 - Ask open-ended questions
 - Listen carefully and without assumptions
- If assistance will be limited in nature:
 - Inform client of the services that can be provided
 - Explain potential next steps to take with another legal professional or *pro se* (self representation)
- If case work with client will be ongoing:
 - Explain steps and potential timeline as well as delineate case handler's tasks and client's tasks
 - Tailor casework to client's unique circumstances, needs, cultural preferences, and/or disability status
- Provide impartial interpreters for clients with any language-based needs, and check in regarding clarity and/or other interpreting issues
- If disclosure of prior trauma is part of the civil legal case, be mindful of the emotional impact of disclosure
- Identify and address multiple legal issues that may affect client and offer appropriate referrals
 - Coordinate with other counsel as needed
- Encourage and support client in accessing resources within the community and offer referrals to advocacy, mental health services, and other providers/agencies
 - Especially note the importance of providing resources for particularly vulnerable populations, including clients with disabilities, the elderly, and youth
- Offer support, information, and referrals as clients interface with other systems, including the criminal justice system

SPECIAL OBLIGATIONS AND CONSIDERATIONS FOR CIVIL LEGAL SERVICES

- *Assisting Victims Who Were Born Outside of the United States and/or Non-Citizens*
 - There are civil legal services available for non-citizens who live in Hennepin County
 - Services available include help with immigration law issues, such as applications for U nonimmigrant status (also called “U visas”) for certain crime victims, VAWA petitions for certain victims of domestic abuse, and other relief under immigration law
- *Case Acceptance Limitations*
 - Before starting work with a civil legal services case handler, potential clients typically participate in an intake process, and each organization establishes case priorities and client eligibility criteria to guide case acceptance
 - If a case cannot be accepted, referrals are offered to other civil legal services providers, if applicable, and the private bar
 - There is a high demand for civil legal services and limited resources
- *Ethics and Confidentiality*
 - Case handlers are bound by the rules of professional conduct governing attorneys in Minnesota
 - Client's confidential information can be disclosed only with explicit permission
 - Case handlers are not mandated reporters for child protection and adult protection purposes
 - If a client requests the presence of a support person who is not a sexual assault counselor, it is the case handler's responsibility to inform client of implications and limits of judicial privilege
- *Working with Outside Attorneys and Service Providers*
 - Working with outside counsel and service providers can be important to achieving client's civil legal goal
 - An advocate's presence or involvement can also often provide support and comfort to victims
 - Coordination and collaboration is appropriate when it complies with rules of professional conduct and furthers the development of the civil legal case

GLOSSARY OF TERMS AND ABBREVIATIONS

TERMS

Advocacy- Advocacy on the individual or systems level is acting with or on behalf of an individual or group to resolve an issue, obtain a needed support or service, or promote a change in the practices, policies, and/or behaviors of third parties.

Advocate- refers to a sexual assault advocate, whether paid or unpaid, who has undergone 40 hours of training in compliance with Minnesota State Statute § 595.02 (1).

Consent – Minnesota Statute § 609.341 Subd. 4 defines consent as words or overt actions by a person indicating a freely given present agreement to perform a particular sexual act with the actor. Consent does not mean the existence of a prior or current social relationship between the actor and the complainant or that the complainant failed to resist a particular sexual act. *For other forms of nonsexual consent, see informed consent.*

Criminal Sexual Conduct- Minnesota law classifies the crime of criminal sexual conduct into five categories: first- through fifth-degree criminal sexual conduct, with first-degree carrying the most severe penalties and fifth-degree the least. Minn. Stat. §§ 609.342 to 609.3451. Generally speaking, the first-degree and third-degree crimes apply to sexual conduct involving sexual penetration of the victim; the second-, fourth-, and fifth-degree crimes apply to sexual conduct involving sexual contact with the victim without sexual penetration. For a more in depth explanation, see Minnesota Statutes and definitions in Appendix F.

Forensic Experiential Trauma Interview- utilizes information about the parts of the brain that experience trauma. This technique not only reduces the inaccuracy of the information obtained but enhances understanding of the experience, increasing the likelihood that judges and juries will also understand the event.

Harassment Restraining Order - a court order to protect someone who has repeatedly experienced unwanted acts, words, or gestures toward them, which cause, or are intended to cause substantial adverse effect upon their safety, security or privacy.

Informed Consent – Permission granted for services and/or information sharing with full knowledge of the possible risks and benefits.

Order for Protection- a court order stating that one person cannot: stalk, physically abuse, harass, willfully deprive, neglect, exploit, intimidate a dependent, or interfere with another person's person liberty.

Post-Traumatic Stress Disorder- a mental health condition that is triggered by a terrifying event—either experiencing it or witnessing it. Symptoms may include flashbacks, nightmares and severe anxiety, as well as uncontrollable thoughts about the event.

Primary Victim/Survivor – An individual who has been subjected to sexual violence. Any person can be a primary victim/survivor.

Rape Culture- a culture in which rape is prevalent and pervasive and is sanctioned and maintained through fundamental attitudes and beliefs about gender, sexuality, and violence.

Secondary Victim/Survivor – An individual who has been affected by another's experience of sexual violence. Secondary victims/survivors can include intimate partners, friends, and family of the primary victim/survivor.

Sexual Assault- Unwanted, coerced and/or forced sexual penetration and/or touch. Penetration may be of the victim or forcing the victim to penetrate the actor; penetration can be accomplished with either a body part or other object. Similarly, contact can be sexual contact with the victim or forcing a victim to touch the actor.

Sexual Assault Evidence Collection Kit- a set of items used by Sexual Assault Nurse Examiners to gather and preserve physical evidence following a sexual assault in a Sexual Assault Medical Forensic Exam.

Sexual Assault Medical Forensic Exam- medical exam provided to victims of sexual offenses that includes a medical screening, an examination for medical injuries, treatment for sexually transmitted infections, and, if appropriate, delivery of post exposure HIV prophylaxis.

Sexual Assault Multidisciplinary Action Response Team- a multidisciplinary interagency team of individuals working collaboratively to provide services for the community by offering specialized sexual assault intervention services.

Sexual Assault Nurse Examiner- a nurse who has specialized education and clinical experience in the treatment of sexual assault patients and the collection of forensic evidence.

Sexual Violence- includes all forms of sexual trauma including rape (date, acquaintance or stranger), intimate partner sexual violence, alcohol or drug facilitated sexual assault, child sexual abuse and incest, female genital mutilation, stalking, pornography, commercial sexual exploitation and prostitution, professional sexual exploitation, systematic sexual abuse, sexual harassment, street harassment, and bullying.

Trauma-Informed Approach– Representatives of an agency make a collective commitment to and understanding of the prevalence and impact of trauma, the role that trauma plays, and the complex and varied paths in which people recover and heal from trauma in the communities they serve. A trauma-informed approach is designed to avoid re-traumatizing those who seek assistance.

Uniform Crime Report- Annual publications containing criminological data compiled by the Federal Bureau of Investigation (FBI) and intended to assist in identifying law enforcement problems, especially with regard to murder and non-negligent Manslaughter, forcible rape, Robbery, aggravated assault, Burglary, larceny-theft, motor vehicle theft, and Arson. These studies provide a nationwide view of crime because they are based on statistics submitted by law enforcement agencies across the United States.

Victim-Centered- while we as a united SMARTeam will be defining our version of victim-centered, this term is traditionally understood as the systematic focus on the needs and concerns

of a sexual assault victim/survivor to ensure the compassionate and sensitive delivery of services in a nonjudgmental manner.

Victim Hierarchy- The result of conscious and/or unconscious ranking of a victim's/survivor's credibility, faults for sexual violence, legitimacy as a victim in criminal legal processes, and deservingness of support. Victim hierarchies can be established and reinforced by media, law enforcement, courts, family and friends, medical professionals, and even sexual assault services. Victims/Survivors can fall lower in the hierarchy when they are a part of one or more marginalized groups because are less likely to be believed and more likely to be blamed or even punished and re-victimized.

Victim/Survivor– A person who has been subjected to or secondarily affected by sexual violence. This term avoids labeling people with a status they do not claim and leaves the decision of how to identify up to each individual person. See also *Primary Victim/Survivor* and *Secondary Victim/Survivor*.

ABBREVIATIONS

CSC- Criminal Sexual Conduct

DOCCR- Department of Community Corrections and Rehabilitation

FAAB- Female Assigned At Birth

FBI- Federal Bureau of Investigation

FETI- Forensic Experiential Trauma Interview

HCAO- Hennepin County Attorney's Office

HRO- Harassment Restraining Order

LGBTQ- Lesbian/Gay/Bisexual/Trans/Queer

MNCASA- Minnesota Coalition Against Sexual Assault

OFP- Order For Protection

PTSD- Post Traumatic Stress Disorder

SAE- Sexual Assault Exam

SAEK- Sexual Assault Evidence Kit

SANE- Sexual Assault Nurse Examiner

SARS- Sexual Assault Resource Service

SMART- Sexual Assault Multidisciplinary Action Response Team

SVC- Sexual Violence Center

SVJI- Sexual Violence Justice Institute

UCR- Uniform Crime Report

UMPD- University of Minnesota Police Department

VAWA- Violence Against Women Act

APPENDIX A: SERVICE PROVIDERS RESOURCE LIST

Arc Greater Twin Cities

2446 University Ave W #110
St Paul, MN 55114
Business: 952-920-0855

Asian Women United of Minnesota (AWUM)

P.O. Box 6223
Minneapolis, MN 55406
24-Hr Crisis: 612-724-8823
Business: 612-724-0756

Aurora Center

University of Minnesota
128 Pleasant St SE,
Minneapolis, MN 55455
Business: 612-626-9111

Casa De Esperanza

1821 University Ave W
St Paul, MN 55104
Business: 651-646-5553

Communication Services for the Deaf of Minnesota

2800 Rice St Suite 154
St Paul, MN 55113
Business: 877-456-7589

Comunidades Latinas Unidas en Servicio (CLUES)

720 E Lake St
Minneapolis, MN 55407
Business: 612-746-3500

Cornerstone Advocacy Services

1000 E 80th St
Bloomington, MN 55420
Business: 952-884-0376
Crisis Hotline: 1-866-223-1111

[Community University Health Care Center \(CUHCC\)](#)

2001 Bloomington Ave S
Minneapolis, MN 55404
Business: 612-301-3433

[Division of Indian Work](#)

1001 E Lake St
Minneapolis, MN 55407
Business: 612-721-8687

[Hennepin County Adult Protection Services](#)

300 S 6th St # A1400
Minneapolis, MN 55487
Business: 612-348-8526

[Hennepin County Attorney's Office](#)

C-2000 Government Center
300 South Sixth Street
Minneapolis, MN 55487
Business: 612-348-5550

[Hennepin County Adult Probation](#)

300 South 6th St #302
Minneapolis, MN 55487
Business: 612-348-3645

[Hennepin County Sheriff's Office](#)

350 S 5th St #6
Minneapolis, MN 55415
Business: 612-348-3744

[Isuroon](#)

3416 Nicollet Ave S
Minneapolis, MN 55408
Business: 612-886-2731

[Mid-Minnesota Legal Aid](#)

430 First Avenue North #300
Minneapolis, MN 55401
Business: 612-332-1441

[Minneapolis Police Department \(Sex Crimes\)](#)

350 S 5th St #130

Minneapolis, MN 55415
Business: 612-673-3000

[Minnesota Coalition Against Sexual Violence](#)
161 St Anthony Ave # 1001
St Paul, MN 55103
Business: 651-209-9993

[Minnesota Indian Women's Resource Center](#)
2300 15th Ave S
Minneapolis, MN 55404
Business: 612-728-2000

[OutFront Minnesota](#)
310 East 38th Street, Suite 209
Minneapolis, MN 55409-1337
Business: 612-822-0127
Crisis: 612.822.0127, Option 3

[Sexual Assault Resource Service \(SARS\)](#)
701 Park Avenue
Orange Building, 2.220
Minneapolis, MN 55415
Business: 612-873-5832

[Sexual Violence Center](#)

3757 Fremont Ave N
Minneapolis, MN 55412
Business: 612-871-5111
24-Hour Crisis: 612-871-5111

[University of Minnesota Police Department](#)

511 Washington Ave SE # 1
Minneapolis, MN 55455
Business: 612-624-3550

APPENDIX B: MAP OF HENNEPIN COUNTY



Image Source: <http://metrobiketrails.weebly.com/hennepin-county.html>