



UNITED STATES MARINE CORPS
HEADQUARTERS AND SERVICE BATTALION
HEADQUARTERS MARINE CORPS, HENDERSON HALL
ARLINGTON, VA 22214-5000

IN REPLY REFER TO:

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CO

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From: Commander, Headquarters and Service Battalion,
Headquarters Marine Corps, Henderson Hall

To: Distribution List

Subj: HEADQUARTERS AND SERVICE BATTALION, HEADQUARTERS MARINE
CORPS, HENDERSON HALL SEXUAL ASSAULT PREVENTION AND
RESPONSE PROGRAM STANDARD OPERATING PROCEDURE

Ref: (a) DODD 6495.01, SAPR Program
(b) DODI 6495.02, SAPR Program Procedures
(c) SECNAVINST 1752.4C, DON SAPR Program
(d) MCO 1752.5C, Sexual Assault Prevention and Response
(e) NAVMC 1752.5, Sexual Assault Prevention and Response
Procedures
(f) MCO 3504.2A Operations Event/Incident Report (OPREP-
3) Reporting
(g) DODI 5505.18, Investigation of Adult Sexual Assault
in the Department of Defense
(h) DODI 6400.06, DoD Coordinated Community Response to
Domestic Abuse Involving DOD Military and Certain
Affiliated Personnel

Encl: (1) Terms and Definitions
(2) H&S BN, HQMC Henderson Hall SAPR Resources and
Support
(3) Commander's Smart Pack
(4) Non SAPR Personnel Watch Stander Checklist
(5) SHARP/SAPR Duty Phone SOP
(6) Confidentiality Exceptions to Restricted Reporting

1. Situation

a. Background. The potential threat to Headquarters and Service Battalion, Headquarters Marine Corps, Henderson Hall (H&S BN, HQMC, Henderson Hall) from sexual violence requires a Sexual Assault Prevention and Response (SAPR) program. In compliance with the references, this Standard Operating Procedure (SOP) establishes the H&S BN, HQMC, Henderson Hall SAPR program, which fosters a supportive environment where members can trust the chain of the command when reporting sexual assault or factors that increase the risk of sexual assault.

Subj: HEADQUARTERS AND SERVICE BATTALION, HEADQUARTERS MARINE CORPS, HENDERSON HALL SEXUAL ASSAULT PREVENTION AND RESPONSE PROGRAM STANDARD OPERATING PROCEDURE

Implementing these standards will ensure a safe physical and emotional environment for all members of the command.

b. Scope

(1) This SOP implements direction, guidance, and tasks to all H&S BN, HQMC, Henderson Hall personnel. This includes personnel assigned to Reporting Unit Codes (RUC) 54008 and 88600 regardless of their physical place of duty.

(2) This SOP standardizes local reporting protocol, procedures, and requirements for commands and subordinate commands supported by the H&S BN, HQMC, Henderson Hall SAPR program.

(3) This SOP educates personnel on what constitutes sexual assault; that it is a crime conflicting with Marine Corps values, and that it is punishable under the Uniform Code of Military Justice (UCMJ) and other federal and local civilian laws.

2. Mission. The SAPR program will educate every individual in H&S BN, HQMC, Henderson Hall on what constitutes sexual assault and spread awareness that it is a crime incompatible with Marine Corps values. Together, we will work to create a culture of prevention and respect with the goal of eliminating sexual assault. In the event that a sexual assault does occur, H&S BN, HQMC, Henderson Hall SAPR program will provide prompt, competent, and on-going care to victims to facilitate their access to all viable resources and support their recovery.

3. Execution

a. Commander's Intent

(1) Purpose. Individuals assigned to H&S BN, HQMC, Henderson Hall SAPR program are responsible for providing information pertaining to SAPR policies, procedures, and the resources available; and for providing support to victims of sexual assault.

(2) Method. Victims of sexual assault must be treated with sensitivity, dignity, and respect.

(a) Sexual assault victims shall be treated as emergency cases regardless of whether physical injuries are

Subj: HEADQUARTERS AND SERVICE BATTALION, HEADQUARTERS MARINE
CORPS, HENDERSON HALL SEXUAL ASSAULT PREVENTION AND
RESPONSE PROGRAM STANDARD OPERATING PROCEDURE

evident, per references (a) through (d). Upon request, victims will receive appropriate healthcare services, not limited to, medical, emotional, psychological, and social services with the assistance from their Sexual Assault Response Coordinator (SARC) and SAPR Victim Advocate (VA). Victims have the right to decide which healthcare services they want to receive and may refuse any or all services if desired. All personnel involved in a victim's care will protect the identity of the victim. Any information about the case or victim shall only be released to those with a need to know. In the case of an unrestricted report, information about the case shall be disclosed only to personnel with an official need to know which includes the Installation Commander, Battalion Commander, and/or Naval Criminal Investigation Service (NCIS) (authorized information only).

(b) Victim safety is critical at all times. Victims who decide to make a restricted report will have that choice honored fully, with extreme care taken to ensure that the report remains restricted. Victims who elect to make an unrestricted report must feel confident that their personal safety will be protected and that the command will take all necessary steps to prevent coercion, ostracism, discrimination, and reprisal.

(c) H&S BN, HQMC, Henderson Hall is committed to taking necessary steps to prevent and eradicate retaliatory behavior by improving resources and providing tools for commanders, supervisors, and peers to prevent and respond to retaliation.

(d) Victims, witnesses, SAPR personnel, Equal Opportunity personnel, first responders, or bystanders who intervene, who experience incidents of retaliation of any type can report such incidents to the Command Inspector General, Command Staff Judge Advocate (SJA), Military Criminal Investigative Organization (MCIO), or the chain of command.

(3) End State. The H&S BN, HQMC, Henderson Hall SAPR program SOP fosters a command environment that supports the prevention of sexual assaults. This SOP provides the framework for timely, competent care for victims of sexual assault.

b. Concept of Operations. This SOP defines who is eligible for SAPR support services, what actions are required upon a report of a sexual assault, what SAPR resources are available, and how H&S BN, HQMC, Henderson Hall SAPR program is maintained.

Subj: HEADQUARTERS AND SERVICE BATTALION, HEADQUARTERS MARINE
CORPS, HENDERSON HALL SEXUAL ASSAULT PREVENTION AND
RESPONSE PROGRAM STANDARD OPERATING PROCEDURE

This SOP should be used in conjunction with the references, and any applicable MARADMINS or Memoranda for the Record, to ensure compliance with policies and procedures established by the Commandant of the Marine Corps (CMC) and the Department of Defense (DOD).

(1) Restricted reporting

(a) By definition, restricted reports can come only from the victims themselves. This process affords members of this command the option to disclose that they are the victim of a sexual assault to specified individuals (SARC, SAPR VA, Healthcare personnel, counselors, Victim Legal Counsel, and chaplain) on a requested confidential basis.

(b) Under these circumstances, the victim's report and any details provided to specified individuals will not be reported to NCIS or to the command to initiate an official investigation. Victims are cautioned only to disclose a sexual assault to specified individuals to avoid third party reporting.

(c) If a victim discloses a sexual assault to a Marine in his or her direct chain of command, then the Marine is a mandated reporter, and required to make the appropriate notifications to chain of command.

(d) Disclosure of a sexual assault does not automatically initiate an unrestricted report unless that disclosure is to Law Enforcement. The victim shall be referred to the SARC or SAPR VA to discuss reporting options. The SARC and SAPR VA are the only sources that can take the official report via form DD2910. All other individuals, including Healthcare personnel, counselors, Victim Legal Counsel (VLC) and chaplain, can maintain confidentiality but not make an official report.

(2) Non-Participating Victim. Per the references, victims have the right to not participate in an Military Criminal Investigation Organization (MCIO) investigation (e.g., NCIS). The investigating agency is required to contact the victim. Victims choosing not to participate in MCIO investigations initiated upon third-party reports or by command (e.g., if a Service member reports a sex-related offense to a supervisor in the chain of command) may do so by signing a 540K Victim Preference Statement indicating their decision not to participate in an investigation. Victims are encouraged to

Subj: HEADQUARTERS AND SERVICE BATTALION, HEADQUARTERS MARINE CORPS, HENDERSON HALL SEXUAL ASSAULT PREVENTION AND RESPONSE PROGRAM STANDARD OPERATING PROCEDURE

consult with an SVC or VLC and provide the MCIOs with written notice of their decision as soon as possible.

(3) Unrestricted reporting. All Marines and Sailors are encouraged to make an unrestricted report of sexual assault in order to achieve the objectives in goals of the references. In unrestricted reporting, only "need to know" information regarding the sexual assault will be disclosed to the Battalion Commander, SARC, SAPR VA. The Commander will notify law enforcement personnel to initiate an investigation. Marines and Sailors who feel comfortable enough to report that they were sexually assaulted must feel confident they will be treated with sensitivity, decency, and respect. Victims will receive appropriate medical, emotional, and social care with help from their SARC and SAPR VA. Victim safety is paramount at all times.

(4) Confidentiality. Per the references, confidentiality applies to all covered communications. Covered communications are oral, written, or electronic communications of personally identifiable information made by a victim to a SARC, SAPR VA, chaplain, or healthcare provider (Medical or mental health) related to their sexual assault. The Chaplain Corps operates under the clergy-penitent privilege. All involved parties must maintain the integrity of the confidentiality policy, except in those instances described in reference (d). All Marines and Sailors are required to report an incident of sexual assault, which comes under their observation immediately to their chain of command or law enforcement. Exceptions to this policy applies to SARCs, SAPR VAs, Family Services, healthcare personnel, and members of the Chaplain Corps.

(5) The H&S BN, HQMC, Henderson Hall SARC will implement and manage the SAPR Program.

(6) The command shall maintain a minimum of two SAPR VAs in the grade of E-5 and above.

(7) A credentialed SARC or SAPR VA appointed by H&S BN, HQMC, Henderson Hall will conduct annual training, using the most up-to-date training resources and guidance provided by Headquarters Marine Corps SAPR, to include compliance with maximum class size. The battalion S-3 will coordinate training throughout the fiscal year. Training statistics for all of

Subj: HEADQUARTERS AND SERVICE BATTALION, HEADQUARTERS MARINE
CORPS, HENDERSON HALL SEXUAL ASSAULT PREVENTION AND
RESPONSE PROGRAM STANDARD OPERATING PROCEDURE

Henderson Hall will be reported to the Commanding Officer (CO) weekly in the Commander's Update Brief (CUB) training slides.

(8) All newly hired Non Appropriated Funds (NAF)/ General Schedule (GS) employees attached to Henderson Hall will receive initial SAPR training from the SARC in person. NAF/GS employees will take annual training after initial in person training via Ethos Learning or other training systems used by the department.

(9) Pre-Deployment briefs, for the purpose of this SOP, will be provided to any group of H&S BN, HQMC, Henderson Hall personnel going TAD outside of the NCR. The S-3 and the SARC will coordinate these briefs, which are mandatory for all Marines.

(10) Family Advocacy Program (FAP) will provide all adult intimate partner (including "dating") sexual assault victims support services. SAPR will continue to provide services to all adult sexual assaults who are non-intimate partners and to adult sexual assault victims who are unmarried intimate partners when they are not: a current or former spouse, share a child in common or a currently or previously shared a common domicile and domestic abuse is not present. If the victim falls under one of the three categories (spouse/child/share domicile) then the victim will be referred to FAP. **FAP and SAPR personnel must ensure that adult victims of sexual assault will never encounter a "wrong door" when seeking care and services.**

(11) Welcome Aboard Briefs will be provided for all new personnel to H&S BN, HQMC, Henderson Hall, the last Tuesday of every month (during the Non-PCS season) and every Tuesday of the month (during the PCS season). Dates for the Welcome Aboard Brief are listed in the calendar year annual training plan published by the S-3. The SARC or SAPR VA will provide the brief and will include points of contact and resources specific to H&S BN, HQMC, Henderson Hall SAPR program.

(12) During the check-in/check-out process, any personnel receiving SAPR services shall receive a SAPR brief, including resources and a warm hand-off to the next location. SAPR contact information, SARC phone number, and 24/7 Sexual Assault Helpline, will be advertised on the check-in/check-out sheets. All Marines will check-in/out with a SAPR VA.

Subj: HEADQUARTERS AND SERVICE BATTALION, HEADQUARTERS MARINE CORPS, HENDERSON HALL SEXUAL ASSAULT PREVENTION AND RESPONSE PROGRAM STANDARD OPERATING PROCEDURE

(13) The Command will provide contingency protocols in order to maintain a continuity of operations in the event of a natural disaster, pandemic, or other events impacting normal operations. Protocols shall adhere to the Commander's intent. Contingency plans will include safety measures for the staff and clients, access to resources, and reporting of sexual assault.

c. Tasks. Enclosures are provided as information to assist personnel at all levels. The command will treat every report of sexual assault seriously by following proper guidelines per references the references.

(1) Commander. I, as the commanding officer and per MCO 1752.5C, will do the following:

(a) Ensure all leaders, supervisors, Service members, and employees are familiar with this SOP, the enclosures herein, and comply with the references. Ensure that the contents of this SOP are prominently displayed in high traffic areas around the command.

(b) Establish a command climate of prevention that is predicated on mutual respect and trust that recognizes and embraces diversity, the values, and contributions of its entire Marine Corps community.

(c) Reassure members of your personal commitment to maintaining a healthy environment that is safe and contributes to their well-being and mission accomplishment. Encourage professional workplace behavior and intervention against those who do not behave respectfully.

(d) Ensure that all Marines and Sailors in your command receive annual, pre, and post-deployment training regarding sexual assault facilitated by a Marine Corps assigned SARC/SAPR VA.

(e) Within 30 days of assuming command, attend the H&S BN, HQMC, Henderson Hall SAPR Resource Brief. Ensure a copy of the completion certificate is maintained in the Command Inspection Binder.

(f) Publish a SAPR policy statement for the command and post copies in common areas within 30 days of assuming command.

Subj: HEADQUARTERS AND SERVICE BATTALION, HEADQUARTERS MARINE CORPS, HENDERSON HALL SEXUAL ASSAULT PREVENTION AND RESPONSE PROGRAM STANDARD OPERATING PROCEDURE

(g) Ensure the SARC has direct and unimpeded access to the CO, when necessary.

(h) Notify NCIS Washington Field Office 202-433-3858 or Multiple Threat Alert Center (MTAC) 24/7 watch officer at 571-305-4777 immediately regarding all unrestricted reports of sexual assault. The command is not authorized to conduct an internal or command investigation at any time for an allegation or report of sexual assault.

(i) Notify the H&S BN, HQMC, Henderson Hall SARC at 202-439-5827 immediately on all reports of sexual assault to initiate SAPR services or to provide information and referral assistance.

(j) Collaborate with the H&S BN, HQMC, Henderson Hall SARC to generate the essential information for the Operations Event/Incident Report (OPREP-3) Serious Incident Report (SIR) per reference (f). SIR must be submitted immediately after receiving notification of unrestricted report and allegations of sexual assault, to include incidents involving civilians.

(k) The victim's CO shall submit an OPREP-3 SIR when the victim is a Marine or other Service member assigned to H&S BN, HQMC, Henderson Hall.

(l) The alleged offender's CO shall submit the OPREP-3 SIR when the victim is a civilian or military dependent and the alleged offender is a Marine or Service member assigned to H&S BN, HQMC, Henderson Hall.

(m) OPREP-3 SIR are not required for reports of sexual assault that occurred prior to service, unless a concern for media inquiry exist.

(n) Submit the SAPR 8-Day Incident report via the www.thegearlocker.org within eight days of the sexual assault report in accordance with reference (d).

(o) For all allegations of a sexual assault reported to the command that could generate media interest, immediately notify the command Public Affairs Officer (PAO)/Communication Directorate (CD) to establish proper protocols in dealing with the media, as required.

Subj: HEADQUARTERS AND SERVICE BATTALION, HEADQUARTERS MARINE CORPS, HENDERSON HALL SEXUAL ASSAULT PREVENTION AND RESPONSE PROGRAM STANDARD OPERATING PROCEDURE

(p) In all cases of collateral misconduct, consider deferring the victim's disciplinary proceeding until the final disposition of the sexual assault case, in accordance with reference (d). Contact the command Staff Judge Advocate for further guidance regarding this matter.

(q) Attend the monthly Joint Base Fort Myer-Henderson Hall Sexual Assault Response Board (SARB) and Sexual Assault Response Team (SART) in support of any open unrestricted case. The Installation SARC will provide the schedule of dates for the SARB/SART.

(r) Notify the victim within 72 hours with updated information from the SARB.

(s) Chair the High-Risk Response Team (HRRT) when necessary in accordance with reference (e). Provide weekly reports to the Installation Commander.

(t) Ensure action is taken on all requests for Expedited Transfers in accordance with reference (d) and (e).

(u) Ensure a minimum of one qualified, credentialed SARC and two qualified, credentialed SAPR VAs are appointed, in writing, for the command.

(v) Ensure a diverse group of SAPR VAs are appointed to ensure coverage throughout the command to include RUCs 54008 and 88600 located throughout the National Capital Region (NCR), across the country and stationed throughout the globe to include locations such as JBM-HH, Pentagon, Fort Belvoir, Patuxent River, Indian Head, A/MOI ROTC locations, etc.

(w) Evaluate the SARC performance of SAPR procedures and program implementation and serve as the second-line reviewer of the SARC's performance evaluations. Report any changes in writing to H&S BN, HQMC, Henderson Hall SARC billet to the HQMC SAPR at SMB.manpower.SAPR@usmc.mil.

(x) In the event a certified SARC or SAPR VA has been accused of a violation, named in a complaint, or is the subject of an investigation, follow procedures outlined in reference (e) for suspension, revocation, and reinstatement.

(y) If the SARC is unable to complete his/her duties due to TAD, extended liberty period/personal leave or reports of

Subj: HEADQUARTERS AND SERVICE BATTALION, HEADQUARTERS MARINE CORPS, HENDERSON HALL SEXUAL ASSAULT PREVENTION AND RESPONSE PROGRAM STANDARD OPERATING PROCEDURE

allegations against the SARC, H&S BN, HQMC, Henderson Hall shall request coverage of SARC duties. Requests should be made via phone or email to SARC at Marine Barracks Washington (MBW) 202-433-2783, Marine Corps Base Quantico 703-784-3552, and/or MCICOM SARC at 571-302-6156.

(z) Safeguard all confidential information pertaining to victims and any Personally Identifiable Information (PII).

(aa) Create and execute a local SAPR community outreach and awareness campaign, to include planning of local events to promote Sexual Assault Awareness and Prevention Month, and training events for by-stander intervention.

(ab) Ensure DoD Safe Helpline and local resources are promoted throughout the BN and on command website and homepage.

(2) Executive Officer

(a) Attend the H&S BN, HQMC, Henderson Hall SAPR Resource Brief with the Commander.

(b) Ensure personnel throughout the command are familiar with this SOP.

(c) When H&S BN, HQMC, Henderson Hall has an open unrestricted sexual assault case, attend the monthly Joint Base Myer-Henderson Hall SARB when the Commander is unavailable to ensure a comprehensive response for the victim.

(d) Oversee the day-to-day administrative activities of the SARC.

(3) Sergeant Major

(a) Attend the H&S BN, HQMC, Henderson Hall SAPR Resource Brief with the Commander.

(b) Ensure personnel throughout the command are familiar with this SOP.

(4) S-1

Subj: HEADQUARTERS AND SERVICE BATTALION, HEADQUARTERS MARINE CORPS, HENDERSON HALL SEXUAL ASSAULT PREVENTION AND RESPONSE PROGRAM STANDARD OPERATING PROCEDURE

(a) When there is an allegation of sexual assault reported to the command, the Adjutant will assist the CO with the submission of an OPREP-3/SIR per reference (f).

(b) For all allegations of sexual assault reported to the command that may generate media interest, immediately notify PAO/CD to establish proper protocols in dealing with the media.

(c) Treat all relevant reports and information, herein, Controlled Unclassified Information (CUI). Information will only be provided to personnel with an official need-to-know, to include Adjutant and Adjutant Chief (in the absence of the H&S BN, HQMC, Henderson Hall Adjutant).

(d) Ensure a copy of this SOP, SARC contact information, 24/7 Sexual Assault Helpline, and reporting protocols are in the H&S BN, HQMC, Henderson Hall Officer of the Day (OOD) Binder.

(5) S-3

(a) Coordinate with the Command SARC to ensure SAPR annual training requirements are included in the H&S BN, HQMC, Henderson Hall Training and Exercise Employment Plan (TEEP).

(b) Publicize annual SAPR training requirements.

(c) Track annual SAPR training requirements for the command.

(d) Enter SAPR training completion into Marine Corps Training Information Management System (MCTIMS) within 3 days of receiving training roster.

(e) Provide SARC with updated training stats weekly.

(f) Provide logistical support for all SAPR training to include meeting space, a laptop, speakers, projectors, screens, and additional equipment as requested by the instructor.

(g) The Public Affairs Officer within the S-3 will assist with updating and support of SAPR website <https://www.hqmc.marines.mil/Agencies/Headquarters-and-Service-Battalion/Sexual-Assault-Prevention-and-Response/>

Subj: HEADQUARTERS AND SERVICE BATTALION, HEADQUARTERS MARINE
CORPS, HENDERSON HALL SEXUAL ASSAULT PREVENTION AND
RESPONSE PROGRAM STANDARD OPERATING PROCEDURE

(6) Sexual Assault Response Coordinator (SARC)

(a) Serves as the SME to the H&S BN, HQMC, Henderson Hall CO and oversees all facets of the Henderson Hall SAPR program as a program manager. The H&S BN, HQMC, Henderson Hall SARC is the central point of information regarding the program. Per this SOP, the SARC ensures all tasks are carried out in compliance with references (a) through (h).

(b) Serves as the single point of contact to coordinate sexual assault response when a sexual assault is reported for H&S BN, HQMC, Henderson Hall personnel.

(c) Comply with D-SAACP credentialing requirements. Complete 16 hours of Continuing Education Units (CEU) annually to obtain required 32 CEU hours for biennial recertification.

(d) Offer appropriate referrals to sexual assault victims and facilitate access to referrals.

(e) Collaborate with the SAPR VA to facilitate the support services requested by the victim. Resources are listed in enclosure (2). Additional resources can be researched via DoD SAFE Helpline website for geographically dispersed locations both within the Continental United States and Outside the Continental United States.

(f) Notify the Joint Base Fort Myer-Henderson Hall Installation Commander via email/phone call thru the Installation SARC immediately on all restricted and unrestricted reports of sexual assault. All notifications will be made refraining from identifying any of the victim's Personal Identifiable Information (PII).

(g) Notify H&S BN, HQMC, Henderson Hall Commander via phone call immediately upon receiving an unrestricted report of sexual assault through a signed form DD 2910.

(h) In collaboration with the SAPR VA, track case support services provided to a sexual assault victim from initial report through disposition and resolution. Explain the Expedited Transfer process to the victim. Explain the purpose of the Victim Legal Counsel as it relates to legal services for victims of sexual assault. When a sexual assault occurs as a

Subj: HEADQUARTERS AND SERVICE BATTALION, HEADQUARTERS MARINE CORPS, HENDERSON HALL SEXUAL ASSAULT PREVENTION AND RESPONSE PROGRAM STANDARD OPERATING PROCEDURE

result of domestic abuse, domestic violence, or involves child abuse provide a warm handoff to Family Advocacy Program (FAP).

(i) Attend monthly SARB and quarterly SART aboard Joint Base Fort Myer-Henderson Hall. Review any open unrestricted cases. The Installation SARC will provide dates for SARB/SART. Installation SARC will maintain all minutes.

(j) Ensure a comprehensive response to each victim by participating in the monthly SARB aboard Joint Base Fort Myer-Henderson Hall. Coordinate with the CO and SAPR VA to ensure the victim is provided any updates within 72 hours of SARB. Track updates via an entry in DSAID.

(k) Enter form DD 2910s and all case information accurately into the Defense Sexual Assault Incident Report Database (DSAID) within 48 hours of victim response.

(l) Maintain signed form DD 2910 under double lock and key in the Henderson Hall SARC office located in building 12 room 106 on Henderson Hall.

(m) Safeguard all confidential information pertaining to victims. All emails containing PII are sent encrypted.

(n) Maintain a copy of each SAPR VA's appointment letter, supervisor's statement of understanding (page 10 of the D-SAACP Application Form), VA 40-hour Certificate of Training, and D-SAACP Credentialing Certificate.

(o) Supervise the SAPR VAs during the performance of advocacy duties, including conducting training. Assign SAPR VA cases, provide oversight of all sexual assault cases, and ensure SAPR VAs are providing appropriate referrals and care.

(p) Ensure a copy of the Battalion's SAPR policy letter is posted throughout the command's common areas, to include Marine Corps departments at the Pentagon and areas where Marine Corps personnel, who are attached to Henderson Hall, work and live.

(q) Post SARC poster with his/her photograph in the command's common areas such as company/section read boards, Marine Corps workspace within the Pentagon, Bachelor Enlisted Quarters (BEQ), and supporting agencies, along with contact

Subj: HEADQUARTERS AND SERVICE BATTALION, HEADQUARTERS MARINE CORPS, HENDERSON HALL SEXUAL ASSAULT PREVENTION AND RESPONSE PROGRAM STANDARD OPERATING PROCEDURE

information, reporting options, and exceptions to confidentiality. Informational posters should be placed in male and female bathrooms within H&S Bn. Maintain a list of the locations of all posters for quality assurance. (See SARC binder for location of all photos.)

(r) Post Command SAPR Policy Statement, CATCH Poster, VLC Flyer, VA MST Flyer, Retaliation flyer, and Retaliation outside chain of command flyer in command's common areas such as company/section read boards, and Marine Corps workspace within the Pentagon, Bachelor Enlisted Quarters (BEQ), and supporting agencies.

(s) Provide the annual SAPR training plan to S-3 for inclusion in the H&S BN, HQMC, Henderson Hall TEEP, including pre and post-deployment training, Annual Training, SNCO Annual, Take-A-Stand, and Step-up. Maintain and track all training rosters and ensure entry in MCTIMS.

(t) Facilitate/co-facilitate SAPR Annual, SNCO Annual, pre and post-deployment training, Take-A-Stand, and Step-up using customized training per rank and ensure limited class sizes are met per reference (d).

(u) Track and maintain SAPR training completion documents. Reflect data on the Commander Update Brief (CUB) weekly.

(v) Facilitate the development and collaboration of SAPR public awareness campaigns for victims of sexual assault. Publicize the DOD Safe Helpline and H&S BN, HQMC, Henderson Hall SAPR resources on all outreach materials, and command websites.

(w) Manage the recertification, SAPR profile, and annual continuous learning requirements for each SAPR VA within the command; provide quarterly updates to the H&S BN, HQMC, Henderson Hall command.

(x) Ensure all duty watch-stander personnel have the SAPR VA's and SARC's point of contact information in the event a victim of a sexual assault needs assistance. All information is found in the Duty binder under the "Duty SAPR SOP" enclosure (4).

(y) Provide all new joins with the SAPR VA/SARC contact information at the New Join brief along with the unit's

Subj: HEADQUARTERS AND SERVICE BATTALION, HEADQUARTERS MARINE CORPS, HENDERSON HALL SEXUAL ASSAULT PREVENTION AND RESPONSE PROGRAM STANDARD OPERATING PROCEDURE

pamphlets and resources on how to report a sexual assault. Ensure SAPR VA are included on the battalion's check-in/out sheet.

(z) Manage the command SAPR website by coordinating with the Public Affairs Officer within the S-3 to assist with updating and support of SAPR website ensure content is accurately displayed.

(aa) Conduct quarterly quality assurance audits to check for SAPR VA public awareness documents posted throughout the command, and ensure the SAPR website displays the 24/7 help line within 2-clicks of the homepage.

(ab) Ensure staffing of the Joint Base Myer-Henderson Hall 24/7 Sexual Assault Helpline by credentialed SAPR Personnel in accordance to enclosure 5.

1. Obtain periods of non-availability quarterly (first week of Oct, January, April, and July) from SAPR VA. Provide quarterly scheduling of duty on the 24/7 Support Line via email.

2. Detailed instruction for staffing of the H&S BN, HQMC, Henderson Hall 24/7 Helpline is provided in enclosure 5.

(ac) After consultation with the SJA or other concerned parties (e.g. NCIS), establish appropriate Memoranda of Understanding (MOU) with off base non-military facilities for all incidents of sexual assault involving military personnel to identify protocol and utilization of SAPR services for H&S BN, HQMC, Henderson Hall. The battalion has an established MOU with INOVA Fairfax Hospital. The MOU is located in the SARC and S-1 workspace.

(ad) Conduct Command Team SAPR Resource brief to commanders within 30 days of assuming command.

(ae) Attend the monthly Force Preservation Council (FPC) as a resource only. No SAPR related cases or case-details shall be discussed at the FPC.

(af) Review and maintain SAPR SOP annually to ensure it is in accordance with established policies.

Subj: HEADQUARTERS AND SERVICE BATTALION, HEADQUARTERS MARINE CORPS, HENDERSON HALL SEXUAL ASSAULT PREVENTION AND RESPONSE PROGRAM STANDARD OPERATING PROCEDURE

(ag) Manage the budget for SAPR, to include but not limited to Sexual Assault Awareness and Prevention Month (SAAPM) and implement prevention and response campaigns as requested by HQMC Sexual Assault Prevention and Response Office (SAPRO).

(ah) Conduct ongoing and continuous programmatic reviews of SAPR program through internal command audits, peer reviews by MCICOM and/or MBW and external review by IG when prompted by Command.

(ai) Complete timely response to all taskers from HQMC SAPR.

(aj) Perform all duties in accordance with references (a) to (h).

(7) SAPR Victim Advocate

(a) Report directly to the SARC while carrying out sexual assault advocacy responsibilities.

(b) When assigned provide coverage for the 24/7 Sexual Assault Helpline per (ARMY SOP). Provide periods of non-availability quarterly (first week of Oct, January, April, and July) to Henderson Hall SARC via email.

(c) Notify the SARC via phone or encrypted email immediately of all H&S BN, HQMC, Henderson Hall personnel who file a report of sexual assault. Complete form DD 2910 and the Safety Assessment Tool with the victim. Provide initial contact information to H&S BN, HQMC, Henderson Hall SARC in-person, or via encrypted email immediately after contact with SARC. Provide all hard copies of the forms within 24 hours of a filed report of sexual assault to the SARC. Maintain hard copies of forms in secured envelop in the "go bag" prior to delivery to SARC.

(d) Facilitate care, provide referrals, and non-clinical support to the adult victim of a sexual assault. Support will include providing information on available options and resources so the victim can make informed decisions about his or her case.

(e) Coordinate local resources (NCIS at Anacostia, or local hospitals where SAFE is performed, i.e. Navy Yard, MCB Quantico, or INOVA Fairfax hospital and counseling services), if desired by the victim.

Subj: HEADQUARTERS AND SERVICE BATTALION, HEADQUARTERS MARINE CORPS, HENDERSON HALL SEXUAL ASSAULT PREVENTION AND RESPONSE PROGRAM STANDARD OPERATING PROCEDURE

(f) Notify SARC immediately via phone or encrypted email if the victim is requesting an Expedited Transfer. Refer victim to SARC to begin process for Expedited Transfer.

(g) Provide a copy of form DD 2910, form DD 2701, the Victim Legal Counsel (VLC) Information Brochure, and the DoD CATCH a Serial Offender Program Victim Info Sheet to the victim.

(h) Notify the SARC via phone or in-person in cases of a Permanent Change of Station or End of Active Service. When working with a victim, coordinate with the SARC a warm handoff to the next duty station.

(i) Notify emergency medical personnel immediately if a victim is suicidal and law enforcement if a victim is homicidal. **Remain with the victim until their care has been handed-off and acknowledged by a first responder. Notify the SARC as soon as possible.**

(j) Ensure that each victim is aware of the process to submit CATCH, the methods to report retaliation, and how to request a military protective order or civilian restraining order.

(k) Should a reservist report an incident of sexual assault, if elected, SAPR services are available to that victim. Medical entitlements are dependent upon a Line of Duty (LOD) determination is required. The SAPR VA or SARC, in collaboration with Henderson Hall's Limited Duty Coordinator **(703) 614-1765**, will support the reservist through the LOD process. In the event a restricted report is filed, the SAPR VA is authorized direct liaison with the Western Recruiting Region (WRR), MED at MCB Quantico. WRR, MED will ensure the privacy of the request is maintained and that members within the command do NOT have access to information regarding the request for medical benefits. **Do not** coordinate any parts of a restricted report LOD determination through the chain of command or Limited Duty Coordinator. The point of contact to send all restricted report LOD determination is the Wounded Warrior Regiment at **(703) 432-1868** or Marine Forces Reserve (MFR) crisis line at **(504) 655-3521**.

(l) Should a sister service member, regardless of branch of service, contact Joint Base Myer-Henderson Hall 24/7

Subj: HEADQUARTERS AND SERVICE BATTALION, HEADQUARTERS MARINE
CORPS, HENDERSON HALL SEXUAL ASSAULT PREVENTION AND
RESPONSE PROGRAM STANDARD OPERATING PROCEDURE

helpline, SAPR VA will provide services, then provide a warm
hand-off to sister service SARC/SAPR VA.

(m) When assigned to an open unrestricted sexual
assault case, attend the monthly SARB aboard Joint Base Myer-
Henderson Hall with the Commander and SARC to ensure a
comprehensive response for the victim.

(n) Use the current listing of local victim support
services to provide appropriate referrals to victims of sexual
assault. Additional resources can be researched via DoD SAFE
Helpline website for geographically dispersed locations both
within the Continental United States and Outside the Continental
United States. See enclosure (2).

(o) Provide SAPR annual training customized by rank
for all Marines and Sailors within the battalion, active and
reserve units in accordance with reference (a).

(p) Maintain and ensure a copy of the sign-in roster
is provided to S-3 for MCTIMS input.

(q) Instruct H&S BN, HQMC, Henderson Hall New Join
Briefs utilizing the standardized talking points.

(r) Assist with the development and collaboration of
SAPR public awareness campaigns.

(s) Comply with D-SAACP credentialing requirements.
Complete 16 hours of CEUs annually to obtain required 32 CEU
hours for biennial recertification. Submit training completion
documents to the SARC.

(t) Ensure a copy of the command's SAPR policy
letter is posted throughout the commands common area to include
office spaces on and off installation.

(u) Post the SAPR VA's posters throughout the
command's common areas to include office spaces on and off
installation. Maintain a list of where posters are located and
conduct quality assurance checks on a quarterly basis. Email
SARC once checks are completed.

(8) Officer of the Day (OOD/AOOD)

Subj: HEADQUARTERS AND SERVICE BATTALION, HEADQUARTERS MARINE CORPS, HENDERSON HALL SEXUAL ASSAULT PREVENTION AND RESPONSE PROGRAM STANDARD OPERATING PROCEDURE

(a) Ensure that all watch personnel are familiar with enclosure (5) of this SOP, how to access SAPR resources, and the location of the SAPR Protocol Binder while on duty.

(b) Notify the Command SARC immediately on all reports of sexual assaults to initiate operational support or to provide information and referral assistance. Contact can be made at the H&S BN, HQMC, HH SAPR office at 703-693-4733 during business hours or the SARC duty cell at 202-439-5827.

(c) Protecting the privacy of the victim is paramount. The OOD will not enter any PII in the logbook or any information that will identify the victim. See enclosure (4) for the non-SAPR Personnel Watch Stander Checklist.

(d) If the OOD becomes aware of a sexual assault they are mandated to report the assault to the CO immediately. Asking for the SARC or SAPR VA information does not constitute as "becoming aware". The OOD is not to interview witnesses or the victim or conduct any investigation.

(e) OODs are not authorized to discuss the assault with any individual except the CO, XO, SgtMaj, SARC/SAPR VA, and law enforcement.

(9) Chaplain

(a) Ensure all H&S BN, HQMC, Henderson Hall military religious personnel are aware of the policies for providing support to military victims of sexual assault, outlined within this SOP and references (a) through (d).

(b) Inform all victim of SAPR services and refer them to the H&S BN, HQMC, Henderson Hall SARC or SAPR VAs. Chaplain can only make a referral for SAPR services; the Chaplain cannot take a report of sexual assault.

(10) Family Advocacy Program

(a) Will notify SARC within 48 hours of an unrestricted report of sexual assault.

(b) Collaborate with SARC/SAPR VA to ensure victim receives maximum support.

(c) Collaborate with SAPR program during Sexual Assault Awareness Prevention Month and other command events.

Subj: HEADQUARTERS AND SERVICE BATTALION, HEADQUARTERS MARINE CORPS, HENDERSON HALL SEXUAL ASSAULT PREVENTION AND RESPONSE PROGRAM STANDARD OPERATING PROCEDURE

(11) NAF/Manpower Human Resource

(a) Ensure civilian employees are familiar with the contents of this order.

(b) Encourage civilian employees who are a victim of sexual assault to speak with the SARC.

(c) Facilitate the development and collaboration of SAPR public awareness campaigns for victims of sexual assault. Publicize the DOD Safe Helpline and SAPR resources to civilian employees.

(d) Coordinate with SARC to schedule and conduct SAPR training for all new civilian workforce.

4. Coordinating Instructions

a. This SOP will be revised as substantial changes to the SAPR program occur. In the interim, this SOP shall be used in conjunction with the references, and any applicable Memoranda for the Record, to ensure compliance with policies and procedures established by the DoD, Secretary of the Navy, and CMC.

b. Memoranda of Understanding/Agreements (MOU/MOA) pertaining to H&S BN, HQMC, Henderson Hall will be initiated and/or revised, as directed by H&S BN, HQMC, Henderson Hall S-1.

c. High-Risk Response Team (HRRT) will be formed if a victim is assessed to be in a high-risk situation per reference (e).

d. Request for Expedited Transfer (ET) will be processed in accordance to reference (b) and (e).

e. All new individuals who join the command shall attend the H&S BN, HQMC, Henderson Hall New Join Brief; there will be portion that covers the H&S BN, HQMC, Henderson Hall SAPR Program.

f. H&S BN, HQMC, Henderson Hall personnel not located within the NCR shall become familiar with enclosure (2) regarding SAPR resources in their area.

5. Administration and Logistics

Subj: HEADQUARTERS AND SERVICE BATTALION, HEADQUARTERS MARINE CORPS, HENDERSON HALL SEXUAL ASSAULT PREVENTION AND RESPONSE PROGRAM STANDARD OPERATING PROCEDURE

a. Administration

(1) Recommendations concerning the contents of this order shall be submitted to the CO via the XO and Command SARC.

(2) Form DD 2910 is the only hard copy form that contains victim PII. The DD 2910 is maintained under double lock and key and uploaded into SAPR system DSAID.

(3) Records created as a result of this SOP shall comply with records management requirements to ensure the proper maintenance and use of records, regardless of format or medium, to promote accessibility and authorized retention per the approved records schedule and SECNAV M-5210.1.

b. Logistics

(1) The SARC will maintain SAPR annual training rosters for three years per reference (e).

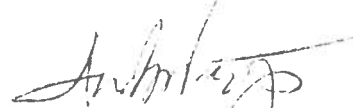
(2) Form DD 2910, Victim Reporting Preference Statement, will be maintained by the H&S BN, HQMC, Henderson Hall SARC.

(3) H&S BN, HQMC, HH SAPR Program non-PII information is backed up on the SARC external hard drive quarterly. Archived program information beginning in March 2018 is on the SARC hard drive.

6. Command and Signal

a. Command. This SOP is applicable to civilian government employees, military personnel, contractors (per their contacts) serving under the General Court-Martial Convening Authority of the Commander, Headquarters and Service Battalion, Headquarters Marine Corps, Henderson Hall.

b. Signal. This SOP is effective as of the date signed.


A. R. WINTHROP

TERMS AND DEFINITIONS

Unless otherwise noted, these terms and their definitions are for the purpose of this Order. Refer to the Appendices and Glossaries in references (a) through (d) for terms not defined in this SOP.

1. Actionable Rights. Restricted Reporting does not create any actionable rights for the victim or alleged offender or constitute a grant of immunity for any actionable conduct by the alleged offender or the victim.

2. Applicability. The Sexual Assault Prevention and Response (SAPR) Program Procedures are outlined in Department of Defense Instruction (DoDI) 6495.02 and apply to the following:

a. The Office of the Secretary of Defense, the Military Departments, the Office of the Chairman of the Joint Chiefs of Staff and the Joint Staff, the Combatant Commands, the Inspector General of the Department of Defense (IG DoD), the Defense Agencies, the DoD Field Activities, and all other organizational entities within the DoD (hereinafter referred to collectively as the "DoD Components").

b. National Guard (NG) and Reserve members who are sexually assaulted when performing active service, as defined in section 101(d)(3) of Title 10, United States Code, and inactive duty training.

(1) If reporting a sexual assault that occurred prior to or while not performing active service or inactive training, NG and Reserve members will be eligible to receive timely access to SAPR advocacy services from a SARC and a SAPR VA, and the appropriate non-medical referrals, if requested, in accordance with section 584(a) of the National Defense Authorization Act (NDAA) for Fiscal Year (FY) 2012, as amended by Section 1724 of the NDAA for FY 2014.

(2) They also have access to a Special Victims Counsel (SVC) in accordance with section 1044e of Title 10, United States Code and are eligible to file a Restricted or Unrestricted Report.

(3) Reports of prior-to-military service sexual assault shall be handled in accordance with the procedures for Restricted and Unrestricted Reports outlined in references (b) and (c), as appropriate based on the type of report made (Restricted or Unrestricted).

(4) Reserve Component (RC) members can report at any time, and do not have to wait to be performing active service or be in inactive training to file their report.

c. Military dependents 18 years of age and older who are eligible for treatment in the military healthcare system (MHS), at

installations in the continental United States (CONUS) and outside of the continental United States (OCONUS), and who were victims of sexual assault perpetrated by someone other than a spouse or intimate partner. Adult military dependents may file unrestricted or restricted reports of sexual assault.

d. The following non-military individuals who are victims of sexual assault are only eligible for limited emergency care medical services at a military treatment facility, unless that individual is otherwise eligible as a Service member or TRICARE (<http://www.tricare.mil>) beneficiary of the military health system to receive treatment in a Military Treatment Facility (MTF) at no cost to them. At this time, they are only eligible to file an Unrestricted Report. They will also be offered the LIMITED SAPR services to be defined as the assistance of a SARC and a SAPR VA while undergoing emergency care OCONUS. These limited medical and SAPR services shall be provided to:

(1) DoD civilian employees and their family dependents 18 years of age and older when they are stationed or performing duties OCONUS and eligible for treatment in the MHS at military installations or facilities OCONUS. These DoD civilian employees and their family dependents 18 years of age and older only have the Unrestricted Reporting option.

(2) U.S. citizen DoD contractor personnel when they are authorized to accompany the Armed Forces in a contingency operation OCONUS and their U.S. citizen employees. DoD contractor personnel only have the Unrestricted Reporting option. Additional medical services may be provided to contractors covered under this instruction in accordance with DoDI 3020.41 as applicable.

d. Service members who were victims of sexual assault PRIOR to enlistment or commissioning are eligible to receive SAPR services under either reporting option. The DoD shall provide support to Service members regardless of when or where the sexual assault took place. The SARC or SAPR VA will assist a victim to complete a DD Form 2910, "Victim Reporting Preference Statement," and provide advocacy services and the appropriate referrals, if requested, for victimization occurring prior to military service.

(1) Prior military service victimization includes adult sexual assault (including stranger sexual assault and intimate partner sexual assault, if the victim is no longer in the same intimate relationship) and sexual assault that was perpetrated on the Service member while he or she was still a child.

(2) Reports of prior-to-military service sexual assault will be handled in accordance with the procedures for Restricted and

Unrestricted Reports outlined in this instruction, as appropriate based on the type of report made (Restricted or Unrestricted).

e. DoDI 6495.02 does NOT apply to victims of sexual assault perpetrated by a spouse or intimate partner, or military dependents under the age of 18 who are sexually assaulted. The Family Advocacy Program (FAP), as described in DoD 6400.1 and MCO 1754.11, provides the full range of services to those individuals. When a sexual assault occurs as a result of domestic abuse or involves child abuse, the Installation SARC and the Installation FAP staff will direct the victim to FAP.

3. Case Management Group. The Case Management Group (CMG) is a multidisciplinary group that meets monthly to review individual cases of Unrestricted Reports of sexual assault. The group facilitates monthly victim updates and directs system coordination, accountability, and victim access to quality services. At a minimum, each group shall consist of the following additional military or civilian professionals who are involved and working on a specific case: Sexual Assault Response Coordinator (SARC), Sexual Assault Prevention and Response Victim Advocate (SAPR VA), military criminal investigator, Department of Defense (DoD) law enforcement, healthcare provider, mental health and counseling services, chaplain, command legal representative or SJA, and victim's commander.

4. Confidential Communications. Oral, written, or electronic communications of personally identifiable information concerning a sexual assault victim and the sexual assault incident provided by the victim to the SARC, SAPR VA, or healthcare personnel in a Restricted Report. This confidential communication includes the victim's SAFE Kit and its information. See <http://www.archives.gov/cui>.

5. Consent. Words or overt acts indicating a freely given agreement to the sexual conduct at issue by a competent person. An expression of lack of consent through words or conduct means there is no consent. Lack of verbal or physical resistance or submission resulting from the accused's use of force, threat of force, or placing another person in fear does not constitute consent. A current or previous dating relationship or the manner of dress of the person involved with the accused in the conduct at issue shall not constitute consent. There is no consent where the person is sleeping, unconscious, incapacitated, or not legally competent such as due to age, alcohol, drugs, or mental incapacity.

6. Credible Information. Information that, considering the source and nature of the information and the totality of the circumstances, is sufficiently believable to presume that the fact or facts in question are true.

7. Credible Report. Either a written or verbal report made in support of an Expedited Transfer that is determined to have credible information.

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

9. Disclosure of Confidential Communications. In cases where a victim elects Restricted Reporting, the SARC, SAPR VA, and healthcare personnel may not disclose confidential communications or the Sexual Assault Medical Forensic Exam (SAMFE) [previously referred to as a 'SAFE'] and the accompanying Kit to DoD law enforcement or command authorities, either within or outside the DoD, provided in reference (b).

a. In certain situations, information about a sexual assault may come to the commander's or DoD law enforcement official's (to include Military Criminal Investigative Organizations (MCIO's)) attention from a source independent of the Restricted Reporting avenues and an independent investigation is initiated. In these cases, SARCs, SAPR VAs, and healthcare personnel are prevented from disclosing confidential communications under Restricted Reporting, unless an exception applies.

b. An independent investigation does not, in itself, convert the Restricted Report to an Unrestricted Report.

c. Improper disclosure of confidential communications or improper release of medical information are prohibited and may result in disciplinary action pursuant to the Uniformed Code of Military Justice (UCMJ) or other adverse personnel or administrative actions.

10. Defense Sexual Assault Incident Database. The Defense Sexual assault Incident Database (DSAID) is a DoD database that captures uniform data provided by the Military Services and maintains all sexual assault data collected by the Military Services. This database shall be a centralized, case-level database for the uniform collection of data regarding incidence of sexual assaults involving persons covered by this references (b) and (c). DSAID will include information when available, or when not limited by Restricted Reporting, or otherwise prohibited by law, about the nature of the assault, the victim, the offender, and the disposition of reports associated with the assault. DSAID shall be available to the SAPR office and the DoD to develop and implement congressional reporting requirements. Unless authorized by law, or needed for internal DoD review or analysis, disclosure of data stored in DSAID will only be granted when

disclosure is ordered by a military, Federal, or State judge or other officials or entities as required by a law or applicable U.S. international agreement.

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

12. Emergency Care. Emergency medical care includes physical and emergency psychological medical services and a SAMFE consistent with the U.S. Department of Justice, Office on Violence Against Women, "A National Protocol for Sexual Assault Medical Forensic Examinations, Adults/Adolescents."

13. Expedited Victim Transfer Requests. A Service member who files an Unrestricted Report of sexual assault shall be informed by the SARC, SAPR VA, or the Service member's commanding officer (CO), or civilian supervisor equivalent (if applicable), at the time of making the report, or as soon as practicable, of the option to request a temporary or permanent Expedited Transfer from their assigned command or installation, or to a different location within their assigned command or installation in accordance with section 673 of Title 10, United States Code. The Service members shall initiate the transfer request and submit the request to their COs. The CO shall document the date and time the request is received.

14. Family Advocacy Program. A DoD program designated to address child abuse and domestic abuse in military families and child maltreatment in DoD sanctioned activities in cooperation with civilian social service agencies and military and civilian law enforcement agencies. Prevention, advocacy, and intervention services are provided to individuals who are eligible for treatment in military medical treatment facilities.

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

16. Healthcare Personnel. Persons assisting or otherwise supporting healthcare providers in providing healthcare services (e.g., administrative personnel assigned to a military MTF). Includes all healthcare providers.

17. Healthcare Provider. Those individuals who are employed or assigned as healthcare professionals, or are credentialed to provide healthcare services at a MTF, or who provide such care at a deployed location or otherwise in an official capacity. This also includes

military personnel, DoD civilian employees, and DoD contractors who provide healthcare at an occupational health clinic for DoD civilian employees or DoD contractor personnel. Healthcare providers may include, but are not limited to:

a. Licensed physicians practicing in the MHS with clinical privileges in obstetrics and gynecology, emergency medicine, family practice, internal medicine, pediatrics, urology, general medical officer, undersea medical officer, flight surgeon, psychiatrists, or those having clinical privileges to perform pelvic examinations or treat mental health conditions.

b. Licensed advanced practice registered nurses practicing in the MHS with clinical privileges in adult health, family health, midwifery, women's health, mental health, or those having clinical privileges to perform pelvic examinations.

c. Licensed physician assistants practicing in the MHS with clinical privileges in adult, family, women's health, or those having clinical privileges to perform pelvic examinations.

d. Licensed registered nurses practicing in the MHS who meet the requirements for performing a SAFE as determined by the local privileging authority. This additional capability shall be noted as a competency, not as a credential or privilege.

e. A psychologist, social worker or psychotherapist licensed and privileged to provide mental health care or other counseling services in a DoD or DoD-sponsored facility.

18. Hospital Facilities (Level 3). Minimum operational functions required for a Level 3 hospital include: command, control, and communications; patient administration; nutritional care; supply and services; triage; emergency medical treatment; preoperative care; orthopedics; general surgery; operating rooms and central materiel and supply services; anesthesia, nursing services (to include intensive and intermediate care wards); pharmacy; clinical laboratory and blood banking; radiology services; and hospital ministry team services.

19. Independent Investigations. Independent investigations are not initiated by the victim. If information about a sexual assault comes to a commander's attention from a source other than a victim (victim may have elected Restricted Reporting or where no report has been made by the victim), that commander shall immediately report the matter to an MCIO and an official (independent) investigation may be initiated based on that independently acquired information.

a. If there is an ongoing independent investigation, the sexual assault victim will no longer have the option of Restricted Reporting when:

(1) DoD law enforcement informs the SARC of the investigation, and

(2) The victim has not already elected Restricted Reporting.

b. The timing of filing a Restricted Report is crucial. In order to take advantage of the Restricted Reporting option, the victim must file a Restricted Report by signing a DD Form 2910 BEFORE the SARC is informed of an ongoing independent investigation of the sexual assault.

(1) If a SARC is notified of an ongoing independent investigation and the victim has not signed a DD Form 2910 electing Restricted Report, the SARC must inform the victim that the option to file a Restricted Report is no longer available. However, all communications between the victim and the victim advocate will remain privileged except for the minimum necessary to make the Unrestricted Report.

(2) If an independent investigation begins AFTER the victim has formally elected Restricted Reporting (by signing the DD Form 2910), the independent investigation has NO impact on the victim's Restricted Report and the victim's communications and SAMFE Kit remain confidential, to the extent authorized by law and DoD regulations.

20. Installation. A base, camp, post, station, yard, center, homeport facility for any ship, or other activity under the jurisdiction of the Department of Defense, including any leased facility. It does not include any facility used primarily for civil works, rivers and harbors projects, flood control, or other projects not under the primary jurisdiction or control of the DoD in accordance with DoD 4165.66-M.

21. Installation Commander. Commander of a base, camp, post, station, yard, center, homeport facility for any ship, or other activity under the jurisdiction of the DoD, including any leased facility. It does not include any facility used primarily for civil works, rivers and harbors projects, flood control, or other projects not under the primary jurisdiction or control of the DoD.

22. Law Enforcement. Includes all DoD law enforcement units, security forces, and MCIOs.

23. Mandatory Reporting Laws and Cases Investigated by Civilian Law Enforcement. Health care may be provided and SAMFE Kits may be performed in a jurisdiction bound by State and local laws that require certain personnel (usually health care personnel) to report the sexual assault to civilian agencies or law enforcement.

a. In some cases, civilian law enforcement may take investigative responsibility for the sexual assault case, or the

civilian jurisdiction may inform the military law enforcement or investigative community of a sexual assault that was reported to it.

b. In such instances, it may not be possible for a victim to make a Restricted Report or it may not be possible to maintain the report as a Restricted Report.

c. To the extent possible, DoD will honor the Restricted Report; however, sexual assault victims need to be aware that the confidentiality afforded their Restricted Report is not guaranteed due to circumstances surrounding the independent investigation and requirements of individual State laws.

24. Military Criminal Investigative Organizations. The Military Criminal Investigative Organizations (MCIOs) consist of the U.S. Army Criminal Investigation Command, Naval Criminal Investigative Service, and Air Force Office of Special Investigations.

25. Medical Care. Includes physical and psychological medical services.

26. Military OneSource. A DoD-funded program providing comprehensive information on every aspect of military life at no cost to active duty, National Guard, and Reserve members, and their families. Military OneSource has a mandatory reporting requirement.

27. Military Services. The term, as used in the SAPR Program, includes Army, Air Force, Navy, Marines, Reserve Components, and their respective Military Academies.

28. Non-Identifiable Personal Information. Non-identifiable personal information includes those facts and circumstances surrounding the sexual assault incident or that information about the individual that enables the identity of the individual to remain anonymous. In contrast, personal identifying information is information belonging to the victim and alleged assailant of a sexual assault that would disclose or have a tendency to disclose the person's identity.

29. Non-Participating Victim. Victim choosing not to participate in the military justice system. For victims choosing either Restricted or Unrestricted Reporting, the following guidelines apply:

a. Details regarding the incident will be limited to only those personnel who have an official need to know.

(1) The victim's decision to decline to participate in an investigation or prosecution should be honored by all personnel charged with the investigation and prosecution of sexual assault cases, including, but not limited to, commanders, DoD law enforcement officials, and personnel in the victim's chain of command.

(2) If at any time the victim who originally chose the Unrestricted Reporting option declines to participate in an investigation or prosecution, that decision should be honored in accordance with this subparagraph.

(3) However, the victim cannot change from an Unrestricted to a Restricted Report.

(4) The victim should be informed by the SARC or SAPR VA that the investigation may continue regardless of whether the victim participates.

b. The victim's decision not to participate in an investigation or prosecution will not affect access to SARC and SAPR VA services, medical and psychological care, or services from an SVC or Victims' Legal Counsel (VLC). These services shall be made available to all eligible sexual assault victims.

c. If a victim approaches a SARC, SAPR VA, or healthcare provider and begins to make a report, but then changes his or her mind and leaves without signing the DD Form 2910 (the form where the reporting option is selected), the SARC, SAPR VA, or healthcare provider is not under any obligation or duty to inform investigators or commanders about this report and will not produce the report or disclose the communications surrounding the report. If commanders or law enforcement ask about the report, disclosures can only be made in accordance with exceptions to the MRE 514 or MRE 513 privilege, as applicable.

30. Official Investigative Process. The formal process a commander or law enforcement organization uses to gather evidence and examine the circumstances surrounding a report of sexual assault.

31. Open With Limited Information. Entry in DSAID to be used in the following situations: victim refused or declined services, victim opt-out of participating in investigative process, third-party reports, local jurisdiction refused to provide victim information, or civilian victim with military subject.

32. Personal Identifiable Information. Includes the person's name, other particularly identifying descriptions (e.g., physical characteristics or identity by position, rank, or organization), or other information about the person or the facts and circumstances involved that could reasonably be understood to identify the person (e.g., a female in a particular squadron or barracks when there is only one female assigned).

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

34. Reporting Options. Service members and military dependents 18 years and older who have been sexually assaulted have two reporting options:

a. Unrestricted or Restricted Reporting. Unrestricted Reporting of sexual assault is favored by the DoD. However, Unrestricted Reporting may represent a barrier for victims to access services, when the victim desires no command or DoD law enforcement involvement.

b. Consequently, the DoD recognizes a fundamental need to provide a confidential disclosure vehicle via the Restricted Reporting option. Regardless of whether the victim elects Restricted or Unrestricted Reporting, confidentiality of medical information shall be maintained in accordance with DoD 6025.18-R.

c. DoD civilian employees and their family dependents and DoD contractors are only eligible for Unrestricted Reporting and for limited emergency care medical services at an MTF, unless that individual is otherwise eligible as a Service member or TRICARE beneficiary of the military health system to receive treatment in an MTF at no cost to them in accordance with reference (c).

35. Responders. Includes first responders, who are generally composed of personnel in the following disciplines or positions: SARCs, SAPR VAs, healthcare personnel, law enforcement, and MCIOs. Other responders are judge advocates, chaplains, and commanders, but they are usually not first responders.

36. Respond, Response, or Response Capability. All locations, including deployed areas, have a 24 hour, 7 day per week sexual assault response capability.

a. The SARC shall be notified, respond, or direct a SAPR VA to respond, assign a SAPR VA, and offer the victim healthcare treatment and a SAFE.

b. In geographic locations where there is no SARC onsite, the on-call SAPR VA shall respond, offer the victim healthcare treatment and a SAFE, and immediately notify the SARC of the sexual assault.

c. The initial response is generally composed of personnel in the following disciplines or positions: SARCs, SAPR VAs, healthcare personnel, law enforcement, and MCIOs.

d. Other responders are judge advocates, chaplains, and commanders. When victims geographically detached from a military installation, the SARC or SAPR VA will refer to local civilian providers or the DoD Safe Helpline for resources.

37. Restricted Reporting

a. This reporting option does NOT trigger an investigation. The command is notified that "an alleged sexual assault" occurred, but is not given the victim's name or other personally identifying information. Restricted Reporting allows Service members and military dependents who are adult sexual assault victims to confidentially disclose the assault to specified individuals (SARC, SAPR VA, or healthcare personnel) and receive healthcare treatment and the assignment of a SARC and SAPR VA.

(1) A sexual assault victim can report directly to a SARC, who will respond or direct a SAPR VA to respond, offer the victim healthcare treatment and a SAFE, and explain to the victim the resources available through the DD Form 2910, where the reporting option is elected.

(2) The Restricted Reporting option is only available to Service members and adult military dependents.

(3) Restricted Reporting may not be available in a jurisdiction that requires mandatory reporting, or if a victim first reports to a civilian facility or civilian authority, which will vary by State, territory, and overseas agreements.

(4) If a victim elects this reporting option, a victim may convert a Restricted Report to an Unrestricted Report at any time. The conversion to an Unrestricted Report will be documented with a signature by the victim and the signature of the SARC or SAPR VA in the appropriate block on the DD Form 2910.

b. Only the SARC, SAPR VA, and healthcare personnel are designated as authorized to accept a Restricted Report. Healthcare personnel, to include psychotherapists and other personnel listed in Military Rule of Evidence (MRE) 513 of the Manual for Courts-Martial, United States, who received a Restricted Report (meaning that a victim wishes to file a DD Form 2910 or have a SAMFE) shall contact a SARC or SAPR VA in accordance with requirements in Enclosure (7) of reference (b), to assure that a victim is offered SAPR services and so that a DD Form 2910 can be completed and retained.

c. A SAMFE and the information contained in its accompanying Kit are provided the same confidentiality as is afforded victim statements under the Restricted Reporting option. See Enclosure (8) of reference (b).

d. In the course of otherwise privileged communications with a chaplain, SVC/VLC, or legal assistance attorney, a victim may indicate that he or she wishes to file a Restricted Report.

(1) If this occurs, a chaplain, SVC/VLC, and legal assistance attorney shall, with the victim's consent, facilitate contact with a SARC or SAPR VA to ensure that a victim is offered SAPR services and so that a DD Form 2910 can be completed.

(2) A chaplain, SVC/VLC, or legal assistance attorney cannot accept a Restricted Report.

e. A victim has a privilege to refuse to disclose and to prevent any other person from disclosing a confidential communication between a victim and a SARC and SAPR VA, in a case arising under the UCMJ, if such communication is made for the purpose of facilitating advice or supportive assistance to the victim in accordance with MRE 514 of Manual for CourtsMartial, United States.

f. A sexual assault victim certified under the personnel reliability program (PRP) is eligible for both the Restricted and Unrestricted Reporting options. If electing Restricted Reporting, the victim is required to advise the competent medical authority of any factors that could have an adverse impact on the victim's performance, reliability, or safety while performing PRP duties. If necessary, the competent medical authority will inform the certifying official that the person in question should be suspended or temporarily decertified from PRP status, as appropriate, without revealing that the person is a victim of sexual assault, thus preserving the Restricted Report.

38. Restricted Reports to Commanders

a. For the purposes of public safety and command responsibility, in the event of a Restricted Report, the SARC shall report non-personally identifiable information (PII) concerning sexual assault incidents (without information that could reasonably lead to personal identification of the victim or the alleged assailant only to the Installation Commander within 24 hours of the report. This notification may be extended by the commander to 48 hours after the Restricted Report of the incident when there are extenuating circumstances in deployed environments.

(1) To ensure oversight of victim services for Restricted Report cases, the SARC will also confirm in her or his report that the victim has been offered SAPR advocacy services, an explanation of the notifications in the DD Form 2910; medical and mental healthcare and informed of his or her eligibility for an SVC/VLC.

(2) The SAPR 8-day Incident Report is not required for Restricted Reports in accordance with section 1743 of the National Defense Authorization Act for Fiscal Year 2014.

(3) SARC and SAPR VA communications with victims are protected by the Restricted Reporting option and the MRE 514 privilege of the Manual for Courts-Martial, United States.

b. Even if the victim chooses not to convert to an Unrestricted Report, or provide PII, the non-PII information provided by the SARC makes the Installation Commander aware that a sexual assault incident was reported to have occurred.

(1) Restricted Reporting gives the Installation Commander a clearer picture of the reported sexual assaults within the command.

(2) The Installation Commander can then use the information to enhance preventive measures, to enhance the education and training of the command's personnel, and to scrutinize more closely the organization's climate and culture for contributing factors.

c. Neither the Installation Commander nor DoD law enforcement may use the information from a Restricted Report for investigative purposes or in a manner that is likely to discover, disclose, or reveal the identities of the victims unless an exception to Restricted Reporting applies. Improper disclosure of Restricted Reporting information may result in disciplinary action or other adverse personnel or administrative actions.

39. Re-Victimization. A pattern wherein the victim of abuse or crime has a statistically higher tendency to be victimized again, either shortly thereafter or much later in adulthood in the case of abuse as a child. This latter pattern is particularly notable in cases of sexual abuse.

40. Safe Helpline. A crisis support service for members of the DoD community affected by sexual assault. The DoD Safe Helpline:

a. Is available 24/7 worldwide with "click, call, or text" user options for anonymous and confidential support.

b. Can be accessed by logging on to www.safehelpline.org or by calling 1-877-995-5247, and through the Safe Helpline mobile application.

c. Is to be utilized as the sole DoD hotline.

d. Does not replace local base and Installation SARC or SAPR VA contact information.

41. Sexual Assault Medical Forensic Exam Kit. The Sexual Assault Medical

Forensic Exam (SAMFE) [previously referred to as a 'SAFE']. A medical and forensic examination of a sexual assault victim under circumstances and controlled procedures to ensure the physical examination process and the collection, handling, analysis, testing, and safekeeping of any bodily specimens and evidence meet the requirements necessary for use as evidence in criminal proceedings.

The victim's SAMFE Kit is treated as a confidential communication when conducted as part of a Restricted Report.

42. Safety Assessment. A set of guidelines and considerations post-sexual assault that the responsible personnel designated by the Installation Commander can follow to determine if a sexual assault survivor is likely to be in imminent danger of physical or psychological harm as a result of being victimized by or reporting sexual assault(s).

a. The guidelines and considerations consist of a sequence of questions, decisions, referrals, and actions that responders can enact to contribute to the safety of survivors during the first 72 hours after a report, and during other events that can increase the lethality risk for survivors (e.g., arrests or command actions against the alleged perpetrators).

b. Types of imminent danger may include;

(1) Non-lethal, lethal, or potentially lethal behaviors;

(2) The potential harm caused by the alleged perpetrator, family/friend(s)/acquaintance(s) of the alleged perpetrator; or

(3) The survivors themselves (e.g., harboring self-harm or suicidal thoughts).

c. The safety assessment includes questions about multiple environments, to include home and the workplace.

d. Survivors are assessed for their perception or experience of potential danger from their leadership or peers via reprisal or ostracism.

e. The safety assessment contains a safety plan component that survivors can complete and take with them to help improve coping, social support, and resource access during their recovery period.

43. Sexual Assault Prevention and Response Office. The Sexual Assault Prevention and Response Office (SAPRO) serves as the DoD's single point of authority, accountability, and oversight for the SAPR program, except for legal processes and criminal investigative matters that are the responsibility of the Judge Advocates General of the Military Departments and the Inspector General, respectively.

44. Sexual Assault Prevention and Response Program. The Sexual Assault Prevention and Response (SAPR) Program is a DoD program for the Military Departments and the DoD Components that establishes SAPR policies to be implemented worldwide. The program objective is an environment and military community intolerant of sexual assault.

45. Sexual Assault Prevention and Response Victim Advocate. A Sexual Assault Prevention and Response Victim Advocate (SAPR VA) is a person

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

46. Sexual Assault Response Coordinator. The Sexual Assault Response Coordinator (SARC) is the single point of contact at an Installation or within a geographic area who oversees sexual assault awareness, prevention, and response training; coordinates medical treatment, including emergency care, for victims of sexual assault; and tracks the services provided to a victim of sexual assault from the initial report through final disposition and resolution.

47. Secondary Victimization. The re-traumatization of the sexual assault, abuse, or rape victim. It is an indirect result of assault that occurs through the responses of individuals and institutions to the victim. The types of secondary victimization include victim blaming, inappropriate behavior or language by medical personnel and by other organizations with access to the victim post assault.

48. Senior Commander. An officer, usually in the grade of O-6 or higher, who is the Commander of a military Installation or comparable unit and has been designated by the Military Service concerned to oversee the SAPR Program.

49. Service Member. An active duty member of a Military Service. In addition, National Guard and Reserve Component members who are sexually assaulted when performing active service, as defined in section 101(d)(3) of Title 10, United States Code, and inactive duty training.

50. Sexual Assault. Intentional sexual contact characterized by the use of force, threats, intimidation, or abuse of authority or when the victim does not or cannot consent. As used in this Instruction, the term includes a broad category of sexual offenses consisting of the following specific UCMJ offenses: rape, sexual assault, aggravated sexual contact, abusive sexual contact, forcible sodomy (forced oral or anal sex), or attempts to commit these offenses.

51. Special Victims' Counsel. Special Victims' Counsel (SVC) are attorneys who are assigned to provide legal assistance and representation in accordance with section 1044e of Title 10, United States Code and Service regulations. The Air Force, Army, NG, and Coast Guard refer to these attorneys as SVC. The Navy and Marine Corps refer to these attorneys as Victims' Legal Counsel (VLC).

52. Special Victim Investigation and Prosecution Capability. In accordance with the National Defense Authorization Act for Fiscal Year 2012, a distinct, recognizable group of appropriately skilled professionals, including MCIO investigators, judge advocates, victim witness assistance personnel, and administrative paralegal support personnel, who work collaboratively to:

a. Investigate and prosecute allegations of child abuse (involving sexual assault or aggravated assault with grievous bodily harm), domestic violence (involving sexual assault or aggravated assault with grievous bodily harm), and adult sexual assault (not involving domestic offenses).

b. Provide support for the victims of such offenses.

53. Trauma Informed Care. An approach to engage people with histories of trauma that recognizes the presence of trauma symptoms and acknowledges the role that trauma has played in their lives. Trauma-informed services are based on an understanding of the vulnerabilities or triggers of trauma survivors that traditional service delivery approaches may exacerbate, so that these services and programs can be more supportive and avoid re-traumatization.

54. Unrestricted Reporting

a. This reporting option triggers an investigation, command notification, and allows a person who has been sexually assaulted to access healthcare treatment and the assignment of a SARC and a SAPR VA.

(1) When a sexual assault is reported through Unrestricted Reporting, a SARC shall be notified, respond or direct a SAPR VA to respond, offer the victim healthcare treatment and a SAFE, and inform the victim of available resources.

(2) The SARC or SAPR VA will explain the contents of the DD Form 2910 and request that the victim elect a reporting option on the form.

(3) If the victim elects the Unrestricted Reporting option, a victim may not change from an Unrestricted to a Restricted Report.

b. If the Unrestricted option is elected, the completed DD Form 2701, which sets out victims' rights and points of contact, shall be distributed to the victim in Unrestricted Reporting cases by DoD law enforcement agents.

c. If a victim elects this reporting option, a victim may not change from an Unrestricted to a Restricted Report.

55. Unrestricted Reports to Commanders. The SARC shall provide the Installation Commander and the immediate commander of the sexual assault victim (if a civilian victim, then the immediate commander of alleged military offender) with information regarding all Unrestricted Reports within 24 hours of an Unrestricted Report of sexual assault.

a. This notification may be extended by the commander to 48 hours after the Unrestricted Report of the incident when there are extenuating circumstances in deployed environments.

b. SARC and SAPR VA communications with victims are protected under the MRE 514 privilege.

c. For Unrestricted Reports, the 8-day incident report will be filed in accordance with section 1743 of the National Defense Authorization Act for Fiscal Year 2014.

56. Victim. A person who asserts direct physical, emotional, or pecuniary harm as a result of having been the recipient of a sexual assault. The term encompasses all persons 18 and over eligible to receive treatment in military medical treatment facilities; however, the Restricted Reporting Program applies to Service members and their military dependents 18 years of age and older. For additional persons who may be entitled to Restricted Reporting, see eligibility criteria in reference (c).

57. Victim Confiding in Another Person. In establishing the Restricted Reporting option, DoD recognizes that a victim may tell someone (e.g., roommate, friend, family member) that a sexual assault has occurred before considering whether to file a Restricted or Unrestricted Report.

a. A victim's communication with another person (e.g., roommate, friend, family member) does not, in and of itself, prevent the victim from later electing to make a Restricted Report.

(1) Restricted Reporting is confidential, not anonymous, reporting.

(2) However, if the person to whom the victim confided the information (e.g., roommate, friend, family member) is in the victim's officer or non-commissioned officer chain of command or DoD law enforcement, there can be no Restricted Report.

b. Communications between the victim and a person other than the SARC, SAPR VA, healthcare personnel, assigned SVC/VLC, legal assistance officer, or chaplain are NOT confidential and do not receive the protections of Restricted Reporting.

58. Victim and Witness Assistance Program. The Victim and Witness Assistance Program (VWAP) provides guidance in accordance with DoD Instruction 1030.2 for assisting victims and witnesses of crime from

initial contact through investigation, prosecution, and confinement. Particular attention is paid to victims of serious and violent crime, including child abuse, domestic violence, and sexual misconduct.

59. Victims' Legal Counsel. Victims' Legal Counsel (VLC) are attorneys who are assigned to provide legal assistance and representation in accordance with section 1044e of Title 10, United States Code and Service regulations. The Navy and Marine Corps refer to these attorneys as VLC. The Air Force, Army, NG, and Coast Guard refer to these attorneys as SVC.

COMMANDER'S SMART PACK



SEXUAL ASSAULT PREVENTION AND RESPONSE

Table of Contents

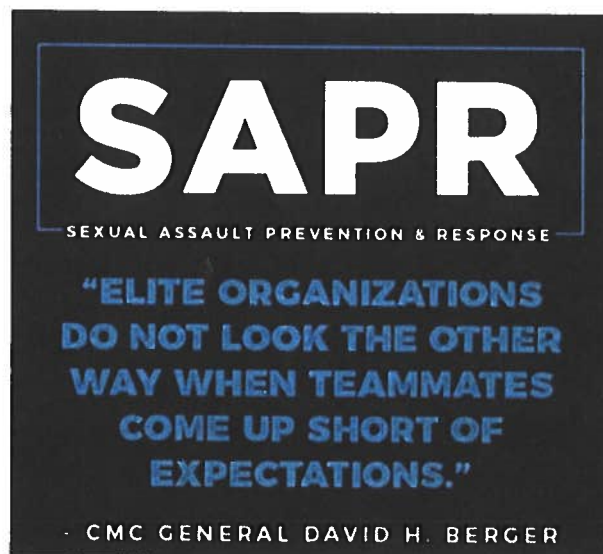
| | |
|--|----|
| Purpose | 3 |
| Commander's Responsibilities | 4 |
| SAPR Resources and Links | 5 |
| Local Resource List | 6 |
| Definitions | 7 |
| SAPR Personnel | 8 |
| SAPR VA & SARC Selection Criteria | 9 |
| SAPR VA & SARC Selection Checklist | 10 |
| Interview Questions for SAPR Personnel | 11 |
| SAPR Personnel Suspension & Revocation | 12 |
| Eligibility for SAPR Services | 13 |
| Restricted Reports | 14 |
| Expanded Eligibility to File Restricted Reports | 15 |
| Restricted Report Process | 16 |
| Unrestricted Reports | 17 |
| Unrestricted Report Process | 18 |
| Case Management Group | 19 |
| The Sexual Assault Response Team | 20 |
| High Risk Response Team | 21 |
| 8-Day Incident Report | 22 |
| 8-Day Incident Report Quick Facts | 23 |
| Serious Incident Report | 24 |
| Expedited Transfer | 25 |
| Readjusting After a Sexual Assault | 27 |
| Talking to Someone After a Sexual Assault | 28 |
| Tips to Respond to Misconceptions | 29 |
| Facts About Sexual Assault Perpetrated Against Men | 31 |
| Managing an Alleged Offender in the Unit | 32 |
| Retaliation | 33 |
| Prevention | 34 |
| Preventing Sexual Violence | 35 |
| The Watch List | 37 |

Purpose

This Smart Pack provides Marine Corps leaders easy access to key Sexual Assault Prevention and Response (SAPR) processes and resources in one simple format. This Smart Pack is a tool, but is not all encompassing.

This Smart Pack includes information and resources for leaders when managing a sexual assault in their area of responsibility (AOR), including introducing the team who will provide services to people who report sexual assault and reported offenders.

For additional examples, situations, or questions, consult the appointed Sexual Assault Response Coordinator (SARC). SARCs are the subject matter experts (SMEs) and main points of contact (POCs) to support commanders on SAPR policies and procedures. The SARC's AOR does not include sexual harassment (see Equal Employment Opportunity (EEO)), child abuse, or intimate partner violence (see Family Advocacy Program (FAP)). SARCs will provide warm handoffs to the most appropriate service when people come to SAPR to report sexual harassment or child or domestic abuse incidents.



Commander's Responsibilities

If there is a sexual assault in the unit, leadership must respond swiftly, appropriately, and sensitively to protect the Marine and maintain a positive and cohesive command climate. It is equally important for leaders to engage in efforts to do as much as possible to prevent a sexual assault from occurring within their ranks.

- Foster a command environment that encourages the prevention of sexual assaults and reporting of sexual assaults without fear of retaliation, reprisal, ostracism, or maltreatment.
- Appoint at least two SAPR VAs for each battalion, squadron, or equivalent level command. Commanders are encouraged to appoint more than two SAPR VAs (see selection criteria on page 11 of this guide).
- Include SAPR VAs on the check-in/check-out sheet and the unit's new-join brief (if applicable). A SARC can support if the SAPR VA is unavailable.
- Publish an Order/Standard Operating Procedure (SOP) for SAPR functions within your AOR.
- Publish a Command Policy Statement, **within 90 days of assuming command**, that supports SAPR program objectives and post it in common and high traffic areas.
- Ensure maintenance of a current copy of SARC/SAPR VA appointment letters, training certifications and credentialing and signed DD form 2950 and DD form 2950-1.
- Evaluate SARC performance of SAPR procedures and program implementation, in accordance with HQMC SAPR guidance.
- The appointing commander, at a minimum, shall be the reviewer on all performance evaluations for civilian SARCs.
- Follow procedural guidelines to manage suspensions and revocations of SAPR personnel and ensure a contingency plan is outlined within the unit's SAPR SOP.
- Provide staffing and logistical support, including reimbursement of incidental expenses, for civilian SARCs and SAPR VAs to provide advocacy services required for SAPR program.
- In deployed site planning and set-up, consider sexual assault prevention and risk reduction measures (e.g., camp layout, lighting, billeting, noise, etc.).
- Ensure all required SAPR Annual Training is completed using the corresponding training per appropriate rank and provided by a credential SAPR VA and/or SARC.

SAPR Resources and Links

Policies

- DoDD 6495.01, Sexual Assault Prevention and Response Program
- DoDI 6495.02, Vol 1, Sexual Assault Prevention and Response Program Procedures
- DoDI 6495.02, Vol 2, Sexual Assault Prevention and Response Education and Training
- DoDI 6495.03, Defense Sexual Assault Advocate Certification Program (D-SAACP)
- MCO 1752.5C, Sexual Assault Prevention and Response Program
- NAVMC 1752.5, Sexual Assault Prevention And Response Procedures

SAPR Gear Locker Page

- Includes links to the SAPR 8-Day Incident portal, FAQs, and other resources
- <https://hqmcportal.hqi.usmc.mil/sites/family/mfb/SitePages/Home.aspx>
- Follow directions on the right side of the screen under Create a new account

SAPR Leadership Toolkit

- Includes all of the most up-to-date SAPR policies, templates, forms, and resources
- <https://hqmcportal.hqi.usmc.mil/sites/family/mfb/SAPR/SitePages/LeadershipToolkitCommand.aspx>

HQMC Email Contact Address

- SMB.Manpower.SAPR@usmc.mil

Inspector General of the Marine Corps (IGMC) Inspections Division Resources

- Includes links to the updated Functional Area Checklists (including SAPR), key findings, and best practices
- <https://www.hqmc.marines.mil/igmc/Units/Inspections-Division/>

Sexual Assault Resources

- Department of Defense (DoD) SAPR: www.sapr.mil
- Installation 24/7 Sexual Assault Support Line: _____
- DoD Safe Helpline: 1-877-995-5247 and <https://safehelpline.org>
- Rape, Abuse & Incest National Network (RAINN): www.rainn.org
- National Organization for Victims Assistance (NOVA): www.trynova.org

Resources for Males who Report a Sexual Assault

- 1 in 6: <https://1in6.org>
- Hope for Healing: www.hopeforhealing.org/male.html
- Male Survivor: www.malesurvivor.org

Local Resource List

Installation 24/7 Phone Line: _____

| Position/Office | Point of Contact | Office Location | Phone Number(s) |
|---|------------------|-----------------|-----------------|
| Command Sexual Assault Response Coordinator (SARC) | | | |
| Installation Sexual Assault Response Coordinator (SARC) | | | |
| Family Advocacy Program (FAP) | | | |
| Community Counseling Program (CCP) | | | |
| Substance Abuse Program (SAP) | | | |
| Military Treatment Facility (MTF) | | | |
| Local Emergency Room | | | |
| Provost Marshal Office (PMO) | | | |
| Military Criminal Investigative Organization (MCIO) | | | |
| Victim's Legal Counsel (VLC) | | | |
| Chaplain | | | |
| Local Civilian Rape Crisis Center | | | |

Definitions

Sexual Assault, DoDI 6495.01, Vol 1

Intentional sexual contact characterized by the use of force, threats, intimidation, or abuse of authority or when the victim does not or cannot consent. As used in this Instruction, the term includes a broad category of sexual offenses consisting of the following specific UCMJ offenses: rape, sexual assault, aggravated sexual contact, abusive sexual contact, forcible sodomy (forced oral or anal sex), or attempts to commit these offenses.

Consent, Uniformed Code of Military Justice

The term "consent" means a freely given agreement to the conduct at issue by a competent person. An expression of lack of consent through words or conduct means there is no consent. Lack of verbal or physical resistance does not constitute consent. Submission resulting from the use of force, threat of force, or placing another person in fear also does not constitute consent. A current or previous dating or social or sexual relationship by itself or the manner of dress of the person involved with the accused in the conduct at issue does not constitute consent. A sleeping, unconscious, or incompetent person cannot consent. A person cannot consent to force causing or likely to cause death or grievous bodily harm or to being rendered unconscious. A person cannot consent while under threat or in fear. All the surrounding circumstances are to be considered in determining whether a person gave consent.

Sexual Harassment, MCO 5354.1F

Knowing, reckless, or intentional conduct with a nexus to military service that:

- Involves unwelcome sexual advances, requests for sexual favors, and deliberate or repeated offensive comments or gestures of a sexual nature when:
- Submission to such conduct is made either explicitly or implicitly a term or condition of a person's job, pay, or career;
- Submission to or rejection of such conduct by a person is used as a basis for career or employment decisions affecting that person; or
- Such conduct has the purpose or effect of unreasonably interfering with an individual's work performance or creates an intimidating, hostile, or offensive working environment; or,
- Is so severe or pervasive that a reasonable person would perceive, and the victim does perceive, the work environment as hostile or offensive.

Any knowing, reckless, or intentional use or condonation, by any person in a supervisory or command position, of any form of sexual behavior to control, influence, or affect the career, pay, or job of a Service member or DoD employee.

Any conduct whereby a Service member or DoD employee knowingly, recklessly, or intentionally and without proper authority but with a nexus to military service makes deliberate or repeated unwelcome verbal comments or gestures of a sexual nature.

There is no requirement for concrete psychological harm to the complainant for behavior to constitute sexual harassment. Behavior is sufficient to constitute sexual harassment if it is so severe or pervasive that a reasonable person would perceive, and the complainant does perceive, the environment as intimidating or offensive.

SAPR Personnel

Sexual Assault Prevention & Response Victim Advocate (SAPR VA)

Civilian billet at the installation level and commander-appointed collateral duty billet (E-5 and above) at the command/unit level

- Provides 24/7 victim advocacy and non-clinical support to those who report a sexual assault
- Facilitates annual training, command team trainings, pre- and post-deployment briefs, and new hire briefs and check ins/outs. May provide status updates at the monthly Case Management Meeting (CMG).

Command SARC

Civilian or commander-appointed collateral duty billet (Maj O4/CWO3 and above) at the O-6 and General Officer level

- Serves as SAPR SME and POC for commander, subordinate units, and SAPR VAs in AOR.
- Provides case status updates at the monthly CMG.
- Maintains oversight of SAPR program, victim care, reporting requirements, prevention, and training.
- Monitors data, identifies systemic issues, and ensures policy compliance.
- Maintains appointment letters and D-SAACP certifications for AOR.

Installation SARC

Civilian subject matter expert

- Provides SAPR guidance and support to the installation commander, tenant commanders, and command SARCs.
- Facilitates and co-chairs the monthly CMG that reviews unrestricted cases at the installation and the quarterly CMG SART.
- Manages the installation 24/7 Sexual Assault Support Line.
- Monitors data and recommends appropriate actions to mitigate risks and improve services.
- Provides supervision/guidance to all civilian SAPR VAs at the installation.
- Maintains appointment letters and D-SAACP certifications for AOR.

Marine Corps Forces (MARFOR) SARC

Civilian or commander-appointed collateral duty billet (Maj O4/CWO3 and above) at the O-6 and General Officer level

- SAPR SME who provides guidance and acts as a conduit of information between Headquarters Marine Corps (HQMC) SAPR, installations, and Marine Expeditionary Forces and Major Subordinate Commands.
- Monitors data, identifies systemic issues and best practices, develops appropriate corrective actions, ensures compliance with policy, and conducts routine audits.
- Maintains appointment letters and D-SAACP certifications for AOR.

SAPR VA and SARC Selection Criteria

In order for a SAPR program to be effective, it is imperative that the right people are selected to fulfill the roles of a SAPR VA or SARC. Leaders are encouraged to engage in the selection process to select people who are passionate about the SAPR program and display the skills necessary to provide advocacy, conduct SAPR Training, have tough conversations, and be a representative of the SAPR program beyond the minimum requirements. The following pages provide selection requirements, qualities to look for in a potential SAPR personnel candidate, and recommended interview questions to assist in the selection process.

Commanders must complete the required eligibility screening of prospective for SAPR VAs and SARCs:

1. Candidate must have a complete background investigation.
2. Check the National Sex Offender Search prior to recommending a candidate for selection at: <http://www.nsopw.gov/en/Search/Verification>. Registered sex offenders are automatically disqualified.
3. Review results of a background check from the local Provost Marshal's Office (PMO) to ensure candidate is qualified to proceed with certification. The candidate must not have any of the disqualifiers outlined in DoDI 6495.03.
4. Complete the Commander's Checklist (located in Leadership Toolkit, example on next page <https://hqmcportal.hqi.usmc.mil/sites/family/mfb/SAPR/SitePages/LeadershipToolkitCommand.aspx>).
5. Ensure the individual obtained a T3/Secret Clearance.

Prospective SAPR VAs and SARCs need to:

1. Obtain the close date of current T3/Secret Clearance from the local Security Manager.
2. Request a background check from the local Provost Marshal's Office (PMO).
3. Complete the initial 40-hour SAPR VA training.
4. Obtain D-SAACP Certification by submitting the DD form 2950 and all supporting documentation.

SAPR VA & SARC Selection Checklist

Collateral-duty personnel selected to serve in the capacity of SAPR VA or SARC should exhibit the following character qualities:

- ☐ Epitomize Core Values of Honor, Courage, and Commitment
- ☐ Ability to work with all ranks
- ☐ Strong communication skills
- ☐ Approachable, to include but not limited to, ability to listen to all persons regardless of race, sex, sexual orientation, national origin, religion, gender identity, or rank/position
- ☐ Ability to gain and maintain rapport, be an empathetic listener
- ☐ Ability to discuss and train SAPR topics
- ☐ Ability to be discreet and maintain confidentiality
- ☐ Ability to manage high stress situations
- ☐ Ability to consistently exercise good judgment
- ☐ Ability to work within established policies
- ☐ Ability to conduct training for unit personnel

Criteria for collateral-duty personnel that **cannot be waived**:

- ☐ No record of courts-martial
- ☐ No record of retaliatory behavior
- ☐ No adverse Fitness Reports, Nonjudicial Punishments (NJPs), or adverse page 11 entries (i.e., Marine Corps Separations Manual para 6105 counseling) in the last three years
- ☐ Not currently assigned as Executive Officer (XO), Sergeant Major (Sgt.Maj.), Company Commander, First Sergeant (1stSgt), legal officer/SJA, Equal Opportunity Representative (EOR) or Equal Opportunity Advisor (EOA), Suicide Prevention Program Coordinator (SPPC), Suicide Prevent Program Officer (SPPO), non-administrative law enforcement personnel, Substance Abuse Control Officer (SACO), Deployment Readiness Coordinator, Recruiting Readiness Coordinator, Reserve Recruiting Readiness Coordinator, Victim/Witness Assistance Council (VWAC), or chaplain

The following criteria represent lessons learned from successful tenures as collateral-duty SAPR VAs or SARCs. Ensure the candidate:

- ☐ Has at least 12 months left before PCS or end of active service (EAS)
- ☐ Has a flexible schedule and ability to be available 24/7
- ☐ Meets rank requirement for billet

These are applicable to collateral-duty uniformed candidates and full-time civilian candidates. Commanders should work with the supporting Human Resources Office (HRO) and MARFOR SARC when starting a hiring action for a SAPR VA or SARC.

Interview Questions for SAPR Personnel

The following questions can help to determine if someone is a good fit to serve in the role of a SARC or SAPR VA. These questions can also be part of an interview for civilian billets.

- Why are you interested in serving as a SAPR VA or SARC?
- This position requires you to attend the mandatory 40 hours of initial SAPR training and obtain 32 hours of continuing education training every 2 years. What concerns or barriers do you foresee in meeting this requirement?
- This position requires you to be on call periodically (including during late night and early morning hours, as well as weekends) to respond to sexual assault victims. What concerns or barriers do you have in executing this part of the job?
- Based upon your understanding of the role of the SAPR VA or SARC, what do you perceive will be most challenging to you in fulfilling this role?
- What is your experience in conducting training?
- How comfortable are you discussing and providing training on sexual assault?
- How would you handle a situation where someone reports a sexual assault and you do not share the individual's beliefs or agree with the person's decisions following the sexual assault?
For example: Someone becomes pregnant as a result of the sexual assault and does not want to get an abortion but would rather have the baby adopted after birth. You do not agree with this decision.
- Do you have experience in this field?
- How do you think we as a unit should prevent sexual assault?
- How would you respond to a commander who oversteps or proposes actions that are outside of policy for someone who is sexually assaulted?
- How will you recognize others' efforts in supporting the SAPR program through advocacy and prevention?

SAPR Personnel Suspension & Revocation

If a certified SAPR VA or SARC is the subject of an investigation, an alleged violation, or named in a complaint, execute the following actions **within 24 hours**:

- Initiate an investigation or inquiry into the incident, along with the servicing legal office, the supporting SARC, and the HRO, as applicable.
- Report any allegations of sexual assault against a SARC or SAPR VA to the appropriate Military Criminal Investigative Organization (MCIO) and complete a Commander's Critical Information Requirements (CCIR) report.
- Notify named SAPR personnel in writing of the allegation, investigation, or inquiry and suspend their authority to perform SAPR duties pending the outcome of the investigation.
- Once the SAPR VA or SARC is suspended, collect the D-SAACP certification, ID card, and command-issued, SAPR program cell phone(s).
- Do not use the SAPR VA/SARC in a SAPR role while they are suspended/revoked.
- Remove the individual's information from internal, external, and public facing media.
- Notify HQMC SAPR of the contingency plan and identified SAPR personnel to cover the suspended individual's AOR.

Within 72 hours of receiving the results from the investigation or inquiry:

- Notify the suspended individual in writing of the investigation outcome. Include your decision to recommend reinstatement, maintain suspension, or to revoke certification and SAPR credentials.
- To reinstate the individual's D-SAACP certification, send reinstatement recommendation letter to HQMC SAPR via email to SMB.manpower.SAPR@usmc.mil. HQMC SAPR will route appropriately to the DoD certifying authority for decision.
- If reinstated by the DoD certifying authority, commanders will return D-SAACP certification and ID card and authorize the individual to return to duties by signing a new appointment letter.
- If the commander's decision is to recommend maintaining suspension or to revoke certification and SAPR credentials, notify HQMC SAPR. Submit a copy of the notification letter to HQMC SAPR via email to SMB.manpower.SAPR@usmc.mil.

Procedures and templates are located in NAVMC 1752.5 and in Leadership Toolkit on Gear Locker.

Eligibility for SAPR Services

The SAPR program offers services to Service members and eligible adult dependents who have been sexually assaulted. If a minor under the age of 18 or intimate partner is sexually assaulted, they are eligible for services with the Family Advocacy Program. All SAPR personnel are trained to provide a warm handoff to the appropriate program in cases where someone is not eligible for SAPR services.

- Active duty Service members, National Guard (NG) members, and Reserve Component (RC) members are eligible to receive SAPR advocacy services from a SAPR VA or SARC, regardless of whether the assault took place while on active duty, prior to enlistment or commissioning, or while performing inactive duty training. All are eligible to file either a Restricted or Unrestricted Report.
- Commanders can assist the NG or RC member in requesting contractual active duty status (or be brought onto active duty status) to complete a Line of Duty (LOD) in order to assure continuity of healthcare.
- Military dependents, 18 years of age and older, are eligible for treatment in the Military Health System (MHS) if they were sexually assaulted by someone *other than* a spouse or intimate partner and may file Unrestricted or Restricted Reports of sexual assault.
- Non-military individuals who report a sexual assault are only eligible for limited emergency care medical services at military treatment facilities, unless they are former Service members or TRICARE beneficiaries of the MHS to receive treatment in military treatment facilities, at no cost. At this time, these individuals are only eligible for the Unrestricted Reporting option.
- Additionally, non-military individuals may receive **limited** SAPR services, defined as the assistance of a SAPR VA or SARC, while undergoing emergency care outside the continental United States (OCONUS). This includes:
 - ⇒ DoD civilian employees and their family dependents 18 years of age and older when they are stationed or performing duties OCONUS and eligible for treatment in the MHS at OCONUS military installations or facilities.
 - ⇒ U.S. citizen DoD contractor personnel, when they are authorized to accompany the Armed Forces in a contingency operation OCONUS. DoD contractor personnel only have the Unrestricted Reporting option. DoDI 3020.41 (reference (q)) outlines available medical services for DoD contractor personnel OCONUS.

Restricted Reports

Restricted Reports allow people who were sexually assaulted to **confidentially** disclose the assault to specified individuals (i.e., SARC, SAPR VA, or healthcare personnel), receive medical treatment (including emergency care), counseling, and assignment of a SARC and SAPR VA.

With a **Restricted Report**, there **will not be an official investigation of the crime** or additional protective measures, like military protective orders (MPOs), civilian protective orders (CPOs) or requests for an Expedited Transfer (ET). A Safety Assessment will be conducted by the SARC.

People who elect to file a **Restricted Report** can speak confidentially with a Special Victim's Counsel (VLC), legal assistance attorney, or chaplain about the sexual assault without triggering a report, command notification or an investigation. However, please note that the VLC, legal assistance attorney, or chaplain cannot take an official **Restricted Report** of sexual assault. Official **Restricted Reports** can be taken only by specified SAPR or healthcare personnel noted above.

Commander will NOT:

- Be notified of a Restricted Report.
- Take action on a Restricted Report.

SARC will:

- Notify installation commander of a Restricted Report with no PII regardless of service affiliation.
- Offer services and referrals (no MPO or ET unless converted to Unrestricted Report).
- Conduct a safety assessment.

Installation commander will NOT:

- Release Serious Incident Report (SIR).
- Notify MCIO.
- Submit an 8-Day report.
- Convene a CMG.

Changing a Restricted Report to an Unrestricted Report

- Individuals who reported a sexual assault can elect to convert their report at any time.
- SARC will notify the commander if a report is converted to Unrestricted.

Expanded Eligibility to File Restricted Reports

Individuals are eligible to file a Restricted Report, providing they did not personally report the sexual assault incident to law enforcement, to include MCIOs, and they did not previously elect to make an Unrestricted Report by signing a DD Form 2910, with a SARC or SAPR VA on the same sexual assault incident.

Individuals are eligible to file Restricted Reports **even** in the following cases:

- They disclosed the sexual assault incident to their **commander** or to **personnel in the chain of command**.
- There is an ongoing MCIO investigation into the sexual assault incident initiated by a third party and not due to the victim's disclosure to law enforcement.
- The MCIO investigation into the sexual assault incident has been closed.

This does not negate the commander's responsibility to immediately report all allegations of sexual assault to the Naval Criminal Investigative Service (NCIS) or the appropriate MCIO/ law enforcement agency as well as follow proper administrative protocols for a third-party report.

- (SIR/OPREP-3 and 8-Day) *Reminder: This is the standard reporting requirement for any allegation of sexual assault. The victim's reporting choice (RR or UR) is not a required data point for these notifications. See MCO 3504.2A for more information and a template.*

If the victim's discloses to the commander that they have filed a **Restricted Report** the commander **shall not** ask the SARC any details nor shall they speak to the victim regarding the sexual assault.

- All third party reports will be heard at **Case Management Group (CMG)**
- Updates will come from the **MCIO** regarding the status of the case.
- The victim has the right to receive the **72-hour notification** via the CO, SARC/VLC, or may decline to receive updates.
- The SARC will notify the **commander and CMG members** of the victim's choice.
- If the victim decides to receive the 72-hour notification from the commander, **only case updates, victim's safety and referrals** will be discussed, no details regarding the incident shall be discussed.

Changing a Restricted Report to an Unrestricted Report

- Individuals who reported a sexual assault can elect to convert their report at any time.
- SARC will notify the commander if a report is converted to Unrestricted.

Restricted Report Process

Person reports a sexual assault to SARC, SAPR VA, or 24/7 Helpline.

SARC/SAPR VA conducts Safety Assessment and assists them with completing DD Form 2910 (Restricted Report selected).

SAPR VA offers services (SAFE, advocacy, referrals, VLC, CATCH).

SARC manages case, enters data into DSAID, and continues to check in with reporter periodically.

SARC notifies installation commander (no PII) within 24 hours.

If person who reported the sexual assault elects to convert case to Unrestricted, follow Unrestricted Report process.

At one-year anniversary, SARC contacts person who reported the sexual assault to discuss next steps, further advocacy, and/or case closure.

Unrestricted Reports

Unrestricted Reporting is a method for a person to report a sexual assault **AND initiate an official investigation**. A person can request additional protective and support measures like military protective orders (MPOs) or requests for an Expedited Transfer (ET) with an **Unrestricted Report**.

Commander's immediate requirements:

- Ensure the person who reported the sexual assault is safe.
- Commander will chair the High-Risk Response Team (HRRT), if required.
- Ensure that the person who reported the sexual assault receives timely access to comprehensive medical and psychological treatment, including emergency care treatment, and a Sexual Assault Forensics Exam (SAFE), unless they decline those services.
- Notify the SARC **immediately** and ensure that the SAPR VA or SARC makes contact with the person who reported the sexual assault as soon as possible.
- Notify the MCIO.
- Consult with SJA for assistance.
- Ensure person who reported the sexual assault has access to support personnel: VLC, Community Counseling Program, and chaplain.
- Execute MPOs if the person who reported the sexual assault desires or is assigned to the same unit, duty location or living quarters as the reported offender.

Commander's Requirements within 6 Hours:

- Submit Operations Event/Incident Report (OPREP-3)/Serious Incident Report (SIR).

Commander's Requirements within 8 Calendar Days:

- Prepare and submit SAPR 8-Day Incident Report to the HQMC portal (Gear Locker). *

Commander's Requirements within 30 Calendar Days:

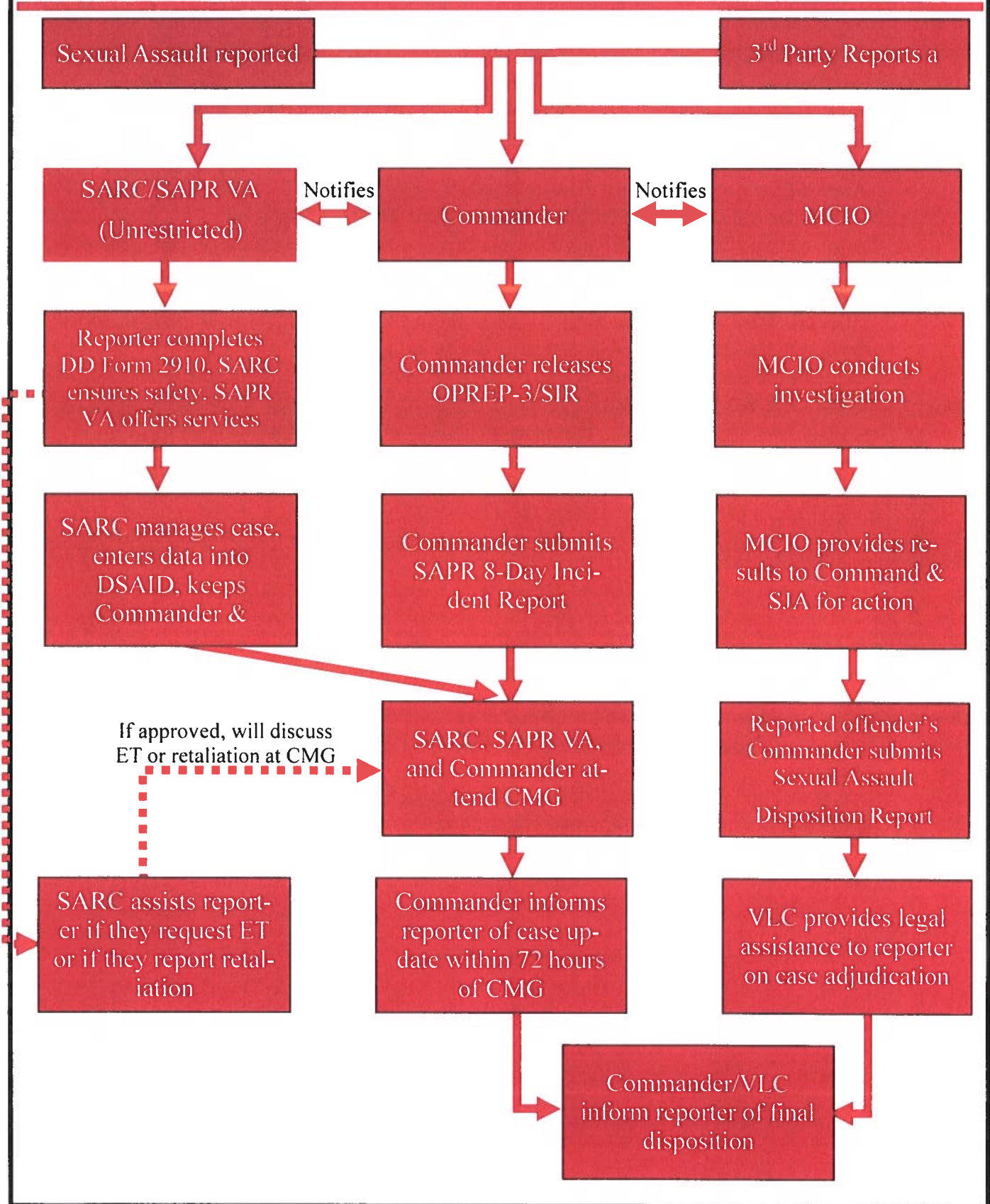
- Attend the CMG every 30 days while the case is open. Contact the SARC for information about the CMG.*
- Provide monthly report and investigation status updates to the person who reported the sexual assault with within 72 hours after each CMG.*

*** NON-DELEGABLE command requirements**

Ongoing

- Support the person who reported the sexual assault.
- Protect the person who reported the sexual assault, SARC, SAPR VA, and any other witnesses or bystanders from coercion, ostracism, discrimination, or reprisals.
- **DO NOT** conduct any internal command- directed investigation of the sexual assault.

Unrestricted Report Process



Case Management Group

The CMG is a monthly meeting to review all official **Unrestricted Reports** (signed DD Form 2910s), and/or cases of sexual assault an MCIO is investigating, and retaliation reports from uniformed sexual assault complainants.

The purpose of the CMG is to ensure the person who reported the sexual assault has access to all services available in a timely manner, address all safety concerns and **focus on:**

- **Victim safety:** Ensuring that personnel designated to conduct safety assessments have specialized training to include assessment of suicidal ideation and risk to harm and ensuring the re-administration of safety assessment monthly or when a new safety concerns arises or an existing safety concern escalates; victim files a complaint of retaliation; or when the victim request a Military or Civilian Protective Order.
- **Victim services and retaliation reporter referrals:** Ensuring that the victim/reporter has access to restorative services and if they experience any barriers to accessing services that a course of action to overcome the barrier is discussed and implemented. SAPR system coordination and accountability-includes tracking the number of days between the date of approval for an expedited transfer to the date that the victim physically departs the losing station via PCS/PCA. All expedited transfers that take longer than 30 calendar days must be reported to the CMG Chair who will review the circumstances of the delay and have the circumstance documented within the CMG minutes. If the delay increases the risk of harm to the victim the CMG will direct a High Risk Response Team (HRRT) be initiated.
- Ensuring that retaliation allegations follow a set process during CMG and through coordination with CIG. Tenant commanders are required to adhere to the CMG/Retaliation policy.

COs of Service members within their command who file an Unrestricted Report:

- Must attend monthly CMG meetings until the case has reached a final disposition and the person who reported the sexual assault no longer requires SAPR services.*
- Must update the person who reported the sexual assault of the current case status within 72 hours of each CMG meeting.*
- Track the timeframe for Expedited Transfers
- May stand up an High Risk Response Team (HRRT) if there is a high-risk situation.
- May invite their Senior Enlisted Advisor to attend with, but not in lieu of, the CO.

* Non-delegable requirements

The Sexual Assault Response Team (SART)

The Sexual Assault Response Team (SART) is a quarterly, multidisciplinary team meeting, in addition to the CMG, that works collaboratively to make system-wide improvements in response to sexual assault reports and retaliation complaints (with a nexus to sexual assault). The goals of the SART include:

- Provide a joint, effective, and thoughtful approach to people who have reported a sexual assault and retaliation complaints.
- Increase victim and complainant endurance for seeing the applicable process through to completion by providing sustained support, while reducing re-victimization.
- Identify deficiencies or barriers in services or processes and facilitate timely resolution.
- Support first responders, providing a collaborative approach toward efficient investigative practices, forensic evidence collection, and victim advocacy and care.
- Promote consistency and coordination by and between command, law enforcement, advocates, forensic examiners, prosecutors, and other stakeholders.
- Provide a forum for problem-solving and development and implementation of comprehensive best practices.
- Assist communities in the creation, evaluation, and development of coherent and effective protocols, processes, and policy related to care for military victims of sexual assault.
- Identify issues having a significant impact on the SAPR program aboard the installation and facilitate an effective resolution.
- This meets the intent of the CMG quarterly meeting outlined in DoDI 6495.02 vol 1, Enclosure 9.

High Risk Response Team

Following a report of sexual assault, the SAPR VA/SARC completes a Safety Assessment to determine safety concerns. In a high-risk situation, the SARC notifies the respective CO who **immediately convenes and chairs** an HRRT. (Not required if SARC becomes aware of the situation when the reporter is under the care of a behavioral health or medical provider or command is engaged with the reporter concerning the high-risk situation).

- HRRT, at a minimum, shall include the reported offender's immediate commander; the respective SARC and SAPR VA; the MCIO; SJA and the VWAP/VLC assigned to the case; and the victim's healthcare provider or mental health and counseling services provider.
- The SARC documents the HRRT meetings in Defense Sexual Assault Incident Database (DSAID).
- The HRRT makes initial report to the installation commander and SARC **within 24 hours** of activation, and provides updates at least weekly while the situation is high-risk.

The HRRT assessment of the victim includes, but is not limited to, the evaluation of the following:

- (1) Victim's safety concerns.
- (2) Alleged offender's access to the victim or whether the alleged offender is stalking or has stalked the victim.
- (3) Previous or existing relationship or friendship between the victim and the alleged offender, spouses or dependents.
- (4) Whether the alleged offender (or someone acting on behalf of the offender, e.g., friends, family, etc.) has destroyed victim's property; threatened or attacked the victim; threatened, attempted, or has a plan to harm or kill the victim or the victim's family members; or intimidated the victim to withdraw participation in the investigation or prosecution.
- (5) Whether the victim or alleged offender has threatened, attempted, or has a plan for harm, suicide, or homicide.
- (6) Whether the alleged offender has used a weapon, threatened to use a weapon, or has access to a weapon that may be used against the victim.
- (7) Whether the victim has sustained serious injury during the sexual assault incident.
- (8) Whether there has been a violation of the civilian protective order (CPO) or military protective order (MPO).
- (9) The following may be evaluated as the situation warrants:
 - (a) History of drug or alcohol abuse by either the victim or the alleged offender.
 - (b) Whether the alleged offender has begun to exhibit erratic or obsessive behavior, rage, agitation, or instability.
 - (c) Whether the alleged offender has a history of law enforcement involvement regarding domestic abuse, assault, or other criminal behavior.
 - (d) Whether the alleged offender is a flight risk.

HRRT provides a final report to the CMG chair and co-chair once it is determined that the person who reported the sexual assault is no longer in a high-risk status. The final report will include details of actions taken to mitigate or eliminate the identified risk(s).

8-Day Incident Report

Commanders are **required** to submit an 8-Day Incident Report within eight calendar days for **all Unrestricted Reports** of adult sexual assault. The report focuses on victim care and command response and is available on the SAPR Gear Locker: <https://hqmcpportal.hqi.usmc.mil/sites/family/mfb/SitePages/Home.aspx>.

| Incident | Is 8-Day Incident Report Required? |
|---|--|
| SARC formally notifies commander of a signed Unrestricted Report (DD 2910). | Yes |
| MCIO informs commander of an opened sexual assault case. (This includes active duty and prior-to-service cases, and cases involving civilian adults). | Yes, if adult sexual assault. Yes, if Marine is now an adult and is reporting a prior-to-service sexual assault. No, if child sexual assault (Marine accused of sexual assault on a civilian when both were minors at the time of incident). No, if person reporting the sexual assault is a minor. SARC's shall not input minor's cases into the Defense Sexual Assault Incident Database (DSAID). |
| Command receives a third-party report of sexual assault (another Marine, friend, family member, letter, etc.). | Yes, if the command is responsible for the person who was sexually assaulted (i.e., member of their command). (Person may elect or not elect to sign DD 2910) and there is a criminal case number (CCN), the investigative case number assigned by a MCIO. |
| Command receives information that a sexual assault occurred while a Marine (person who reported sexual assault or reported offender) is on leave or is making a permanent change of station (PCS) move and has not checked into the next command. | Yes, if the command received the initial report with a signed DD 2910 or MCIO assigned a CCN. |
| Marine accused of sexual assault against spouse. | No, this is not a SAPR case. Refer this case to FAP. |

This is not all encompassing. For additional examples, clarification, or questions, please consult your appointed SARC.

8-Day Incident Report Quick Facts

- The SAPR 8-Day Incident Report is on the SAPR Gear Locker: <https://hqmcportal.hqi.usmc.mil/sites/family/mfb/SitePages/Home.aspx>
- Submit an 8-Day Incident Report when there is an open, **Unrestricted Report** case of adult sexual assault involving a military Service member in DSAID or an investigation initiated by a MCIO and assigned a criminal case number (CCN).
- If the person who reported the sexual assault is a Service member, their **immediate commander** prepares and submits an 8-Day Incident Report.
- If the person who reported the sexual assault is a non-Service member, the **reported offender's immediate commander** prepares and submits an abbreviated 8-Day Incident Report.
- 8-Day Incident Report Helpful Hints:
 - ⇒ The 8-Day Incident Report can be saved to input additional information at a later time. Clicking "*Save/Submit Form*" will save the report. The submitter can continue to update the report inside of the 8-day window. HQMC will not process the 8-Day Incident Report inside of the 8-day window. When the "*Save/Submit Form*" button is selected, a copy of the updated report is forwarded to both the SARC and the CO, provided their respective contact information is correct in the "General Information" section.
 - ⇒ In order to provide an electronic copy of the report to the installation commander, the first O6, and the first GO in the chain of command, in the "General Information" section, enter the email address of the installation commander, the first O6, and the first GO in the person who reported the sexual assault or subject's chain of command. You must click "*Submit Form & Email Form to First O6/First GO/Installation CO*" in order to complete the action. "Save/Submit" will only send the report to the CO.
- For additional support, please contact HQMC SAPR at SMB.manpower.SAPR@usmc.mil.

Serious Incident Reports

Report **all Unrestricted Reports**/incidents of actual, suspected, or reported sexual assault in an OPREP-3 SIR. (Do not submit an OPREP-3 for Restricted Reports.)

BLUF: Upon notification of an Unrestricted Report of sexual assault, command submits an OPREP-3 SIR. Template for OPREP-3 SIR is in MCO 3504.2A.

- This does not distinguish between Service members and civilians.
- This does not distinguish between active duty service and prior to service.
- This does not distinguish between SAPR and FAP.
- The SIR is not dependent upon person who reported the sexual assault participation.
- This applies when information comes to the commander's knowledge via MCIO, directly disclosed by the person who reported the sexual assault, formal notification from the SARC, or third party.

Please ensure that the OPREP-3 **does not contain:**

- PII violations: Names or more than one of the following: rank, unit, ethnicity. This is for both victim and subject.
- Restricted to Unrestricted conversion in the synopsis, as the installation commander is the only commander authorized to receive the notification of a Restricted Report and therefore this information is not required for the unit commander.
- Details of the sexual assault (e.g., victim was penetrated, victim was orally assaulted and beaten).

| Incident | Action |
|--|--|
| SARC formally notifies commander of a signed Unrestricted Report (DD 2910/VRPS). | Submit OPREP-3 SIR. |
| MCIO informs commander of an opened sexual assault case. This includes active duty and prior to service cases. | Submit OPREP-3 SIR. |
| Person who reported the sexual assault directly discloses incident to commander. This includes active duty and prior to service cases. | Submit OPREP-3 SIR. |
| Command receives a 3rd party report of sexual assault (another Marine, friend, family member, letter, etc.). | Submit OPREP-3 SIR. |
| Command receives information that a sexual assault occurred while a Marine (accused or person who reported the sexual assault) is on leave or is in route PCSing and has not checked -into the next command. | Submit OPREP-3 SIR. |
| Marine accused of sexual assault against spouse. | Submit OPREP-3 SIR. SARC will inform HQ SAPR this is a FAP case. |

Expedited Transfers

UNRESTRICTED REPORTS ONLY

- Expedited Transfers (ET) address situations where the person who reported the sexual assault feels safe, but *uncomfortable*, and to assist the person's recovery by moving the person to a new location. Concerns of safety necessitate a safety move, not ET.
- A Marine requests an ET via the SARC. No one can request an ET on behalf of the Marine.
- Military adult dependents are eligible for an Expedited Transfer.
- SARC will submit request to the CO as soon as possible.
- CO has **five calendar days** after receipt of the ET to approve/disapprove.
- CO should consult with supporting SJA and consider the following:
 - ⇒ Nature and circumstances of the offense
 - ⇒ If a temporary transfer would meet the Marine's needs and operational needs of the unit
 - ⇒ Training status of the Marine requesting the transfer
 - ⇒ Parent command input, if attached (e.g., Temporary Assigned Duty (TAD), Fleet Assistance Program (FAP))
 - ⇒ Status of the investigation, potential impact on the investigation, and future disposition of the offense based on consultation with the investigating MCIO
 - ⇒ Location of the alleged offender
- When CO approves ET:
 - ⇒ **DO NOT** contact Manpower Management.
 - ⇒ Assign personnel within the command whenever possible to assist with any out-processing requirements.
 - ⇒ Ensure Service member receives detaching evaluation, fitness report, or other evaluation IAW Service policy.
 - ⇒ Advise of the requirement of an intake meeting with the gaining commander if the victim seeks continued advocacy, legal, or healthcare services at the new location.
 - ⇒ Advise of the requirement of an intake meeting with the new SARC to determine if the victim wants to continue advocacy services.
 - ⇒ Sign ET and send it back to the SARC (template in Leadership Toolkit <https://hqmportal.hqi.usmc.mil/sites/family/mfb/SAPR/SitePages/LeadershipToolkitCommand.aspx>).
 - ⇒ SARC will forward approved request to HQMC SAPR personnel.
 - ⇒ HQMC SAPR will liaise with Manpower Management.

Expedited Transfers

UNRESTRICTED REPORTS ONLY

When CO does not approve ET:

- Use template on Leadership Toolkit to communicate disapproval to the person who reported the sexual assault and SARC.
- Marine can request in writing a review by the first GO in the chain of command.
 - ⇒ The GO must either approve or disapprove within five calendar days.
 - ⇒ The SARC forwards the ET package to HQMC SAPR.

Readjusting After a Sexual Assault

Readjusting after a sexual assault is an important part of healing for the person who reported the sexual assault, others in the unit, and for the leadership team. Consider these tips following a sexual assault report:

- Monitor the safety of person who reported the sexual assault.
- Allow those with knowledge of the incident to cooperate with an investigation in accordance with the policy, regulations, and standards of the Marine Corps and the UCMJ.
- Know that people who were sexually assaulted are *not required* to participate in an investigation.
- Remember that trauma responses look different for everyone so their paths to healing will also look different.
 - ⇒ Healing may look like time for yoga, acupuncture, meditation, or seeing the chaplain, not just counseling or medical. Recent research shows yoga can be very effective for healing trauma.
 - ⇒ Ensure the immediate chain of command for the person who was sexually assaulted and alleged offender support them in engaging services while protecting their privacy.
 - ⇒ Trauma is not a one-time occurrence, significant dates, events, or even sights or smells can trigger a trauma response.
 - ⇒ Talk to your SARC about particular dates (following a court martial, anniversary dates, after a forensic exam) and consider adjusting the Marine's workload or schedule during those times to allow for time away from work or to engage in services.
- Remind your Marines:
 - ⇒ The reported offender is presumed innocent until proven guilty.
 - ⇒ Each report is considered credible until proven otherwise.
 - ⇒ Retaliation is not tolerated within the unit against the person who reported the sexual assault, reported offender, and bystanders (SARC, SAPR VA, VLC, etc.).
 - ⇒ Everyone should wait before reaching conclusions.
 - ⇒ Gossip will not be tolerated and investigations should not be discussed with others.
- Monitor for incidents of coercion, ostracism, discrimination, or reprisals against the person who reported the sexual assault.
- Review for conditions that may have contributed or influenced circumstances leading to the sexual assault:
 - ⇒ Past unit climate assessments
 - ⇒ Unit policies
 - ⇒ Personnel practices
 - ⇒ Reduce risk factors and increase protective factors
- Work with experts (SAPR, EO, SJA, and NCIS) regarding training, prevention, and response measures.

Talking to Someone After a Sexual Assault

Knowing what to say after individuals have disclosed a sexual assault can be difficult. While there is no one “right” thing to say, an empathetic response to their disclosure is crucial. Listen, be there, and communicate without judgment. **Be patient.** Remember, there is no timetable for recovering from trauma.

Avoid putting pressure on them to engage in activities they aren’t ready to do yet.

- Understand that there will be good days and setbacks.
- Encourage them to practice good self-care during this difficult time, and remember to take care of yourself as well so you can be there for them.

Here are some phrases to show support:

- **“I’m sorry this happened to you.”** Showing empathy can build rapport.
- **“I’m here to help you get support.”** They trusted you and shared what happened to them. Let them know that you are there to ensure their safety and will respect their privacy.
- **“How can I help?”** Let them know that you are there for them. Ask how you can help put decisions into their hands and help them feel more in control about what is happening.

Encourage them to get support and information from professional resources, but realize that only they can make the decision to get help. You can also contact DoD Safe Helpline yourself to talk directly with staff to get suggestions and information on how to support individuals who have reported a sexual assault.

Phrases to AVOID:

- **Why/What/How questions.** Avoid questioning what they are telling you happened. Avoid questioning aspects of the event. Don’t ask “What were you doing out so late?” or “How were you dressed?” It is never their fault. Leave the fact finding for the MCIO.
- **“It wasn’t the reported offender’s fault.”** The reported offender’s actions are inexcusable.
- Excuses for the reported offender are detrimental to the person who reported the sexual assault’s long-term mental health and can compromise building trust in command leadership.
- **“You have to report/go to the hospital/etc.”** Empower them. Do not tell them what they must do. Never make them feel responsible for the alleged offender’s future actions. (“You have to report this if you don’t want him/her to do this to anyone else”). You can suggest what course of action they can take, if they ask for your advice.
- **“It could have been worse”** or **“At least _____ didn’t happen.”** There is no hierarchy of pain. Remember that one kind sexual assault isn’t more or less legitimate than another. The ways in which sexual assault violence will affect a people differently, and one type of trauma is not more or less than another.

Tips to Respond to Misconceptions

Often times leaders hear others talk about sexual assault in a way they know is wrong, but may not know how to respond or the right information to say instead. The table below pulls together talking points, data, and research to help leaders dispel misconceptions about sexual assault.

| If you hear... | Consider this... |
|---|---|
| Frequent use of the word "victim." | Research shows that many Marines who have experienced sexual assault do not want to be called a "victim." When talking about a specific person or situation, use "Marine" instead of "victim." |
| Exclusive use of "she/her" when discussing a hypothetical scenario of sexual assault. | Not everyone who is sexually assaulted is a woman and not all offenders are men. When using hypothetical scenarios, make a conscious effort to include men and women. |
| Exclusive use of "she/her" pronouns when discussing SAPR VAs. | What do you think your SAPR VAs will look like? Are they men or women? Race or ethnicity? MOS? The most important things to consider when selecting a potential SAPR VA is if the Marine is a good fit for the job based on policy requirements, their desire to be a SAPR VA, and ability to do the job. Consider selecting Marines inclusive of different ranks, races, genders, and backgrounds in the event that a Marine who is sexually assaulted would like to switch to another SAPR VA with whom they feel more comfortable. |
| "They should have fought more," "The Marine knows MCMAP," or "I would have fought back." | The body responds to trauma in different ways: fight, flight, and freeze, or any combination thereof. This response is automatic and beyond the person's conscious control. It may be true that a Marine's training may make them less likely to freeze or flee during trauma. However Marines do not train under conditions like sexual assault, and they are not trained to view a fellow Marine, friend, or coworker as an enemy. |
| "What about the Sgt's career?" or "But if the Sgt is a good Marine, it can't be true" or "The Cpl is lying." | NCIS investigates all allegations of sexual assault and reports their findings to the command. The Sexual Assault Initial Disposition Authority (SA-IDA) determines the validity of the report. |
| "He just wants an expedited transfer" or "He's just trying to get out of a CFT with that expedited transfer" or "He's just trying to avoid PT." | HQMC SAPR data indicates the expedited transfer process is not abused in the Marine Corps. In FY20, the Marine Corps processed 80 ET requests; 91% of these were approved by either the victim's immediate Commander or following a General Officer review. An Expedited Transfer does not exclude a Marine from any fitness or unit readiness requirements. |

Tips to Respond to Misconceptions

| | |
|--|--|
| <p>“If Marines just wouldn’t drink, there wouldn’t be any sexual assault.”</p> | <p>Report data tells us that there is a relationship between alcohol use and sexual assault, but we cannot determine if there is a causation effect. Regardless if alcohol is involved, no one asks for or deserves to be sexually assaulted. The responsibility is on the offender.</p> |
| <p>“(Real) men can’t be sexually assaulted.” or “Sexual assault doesn’t affect men.”</p> | <p>Any person can be sexually assaulted, regardless of their gender or that of the offender. Sexual contact/sexual act without consent is sexual assault. It is estimated that half of all sexual assault victims in the military are men, yet men constitute about 25% of Marine Corps SAPR reports.</p> |
| <p>“He’s gay.” or “Maybe he’s homosexual.” or “He was probably flirting with the offender.”</p> | <p>Sexual orientation of either the person who is sexually assaulted or the offender is not a factor in the commission of sexual assault. Most sexual assaults are about power and control, not sexual pleasure.</p> |
| <p>“What was he doing there in the first place?” “She must have asked for it.” or “He must have been leading that Sgt on.” “If the person became aroused, he obviously wanted it.”</p> | <p>It is never the fault of the person who was sexually assaulted. No one asks to be sexually assaulted. A current or previous dating or social or sexual relationship by itself or the manner or dress of a person does not constitute consent. A person’s previous sexual acts, experience, and/or history does not constitute consent. Sexual arousal is a physiological response to which the victim has little/no control, and does not indicate consent.</p> |
| <p>“If the offender isn’t in the Command, why does the victim need to leave?”</p> | <p>It’s not always about getting away from the offender. Some people may choose to request an Expedited Transfer to be closer to family or a stronger support system, or others in his/her unit may know about the assault and have made it uncomfortable for the Marine.</p> |
| <p>“If the Marine asks for an Expedited Transfer, it’s a failure on my part as a commander.”</p> | <p>A Marine may request an Expedited Transfer for a number of reasons: desiring geographic distance from the offender or location where the sexual assault occurred; or a wish to move closer to a support system.</p> |

Facts About Sexual Assault Perpetrated Against Men

- **Military men experience sexual assault perpetrated by men and women.** Perpetrators of sexual assault are most often men. However, in a 2016 force-wide survey, about a third of military men indicated that a woman was involved as a perpetrator of their sexual assault.
- **Men are more likely than women to experience sexual assault in the form of hazing or bullying.** According to a 2016 force-wide survey, when compared to military women, military men are more likely to characterize their sexual assault as hazing or bullying, indicate the incident occurred at work during duty hours, and experience multiple incidents in the past year.
- **Men of all sexual orientations are victims of sexual assaults.** Men of all sexual orientations may experience sexual assault. However, evidence indicates that anti-gay violence leads some perpetrators to target other men, even if those targets aren't necessarily gay.
- **Men can have unexpected reactions during traumatic events.** Anyone who experiences a traumatic event can encounter unexpected and surprising physiological and psychological reactions. Men can experience erections or even ejaculate in response to unwanted physical stimuli, including sexual assault. None of these physical reactions is an indication of consent.
- **Men and women alike can experience difficulties after a sexual assault.** As a consequence of sexual assault, both men and women may experience depression, intimacy issues, anxiety, post-traumatic stress disorder, substance abuse, anger, shame, embarrassment, and guilt. Men also face unique challenges reconciling their masculine identity after a sexual assault.
- **Men are less likely than women to report sexual assault.** According to prevalence estimates in the FY18 WGRA (Workplace and Gender Relations Survey of the Active Duty), 43% of female Marines and 15% of male Marines reported their sexual assault. Furthermore, when military men reported their sexual assault, they indicated experiencing less satisfaction than women with the services they received and their leadership's response.

See page 5 for resources for men who are sexually assaulted.

Managing an Alleged Offender in the Unit

Based on current sexual assault data, it is highly likely the alleged offender and person who reports a sexual assault will be in the same unit. There are several things for leaders to consider in these situations including ensuring the welfare of the alleged offender. The SAPR program is the go-to resource for taking care of the person who reported the sexual assault. All questions or concerns about the alleged offender should be brought to SJA.

- Notify the appropriate MCIO immediately after receiving a report of sexual assault by someone in your unit.
- Ensure the alleged offender's safety:
 - ⇒ Monitor the well-being of the alleged offender, particularly for any indications of suicidal ideation or unhealthy attempts to cope with stress.
 - ⇒ Consult with medical and mental health providers for assistance and appropriate courses of action, as needed.
 - ⇒ Monitor the alleged offender for erratic or violent behavior that may endanger the safety of the person who reported the sexual assault, or others.
 - ⇒ Participate in any convened HRRT.
 - ⇒ Determine the need for a MPO (DD Form 2873) with assistance from the SARC, SAPR VA, legal, and/or MCIO.
- Monitor for incidents of coercion, ostracism, discrimination, or reprisals against the reported offender in person, in the unit/workplace, or through email, text, phone, or social media.
- Upon disposition of a sexual assault allegation, the command must submit the Sexual Assault Disposition Report (SADR) within **two business days**.
- **DO NOT conduct an internal command-directed investigation**, delay immediate contact with the MCIO, or attempt to access the credibility of the report, avoid questioning the alleged offender about the sexual assault allegation.
- Strictly limit information pertinent to an investigation to those with an official need-to-know.
- Ensure procedures are in place to inform the reported offender about the investigative, legal, and command processes and defense legal services that may be involved.
- As appropriate, refer the alleged offender to available counseling, groups, or other services. Verify via the SARC that the person who reported the sexual assault and alleged offender are not in the same counseling groups, classes, or other gatherings.

Retaliation

Retaliation has significant ramifications on people who report a sexual assault, first responders who support people who are sexually assaulted, and the health of an entire command. Emphasize that acts of retaliation are not tolerated and the person(s) who commits any of these acts are subject to disciplinary action in accordance with the UCMJ. For all questions or concerns on retaliation, contact SJA.

Retaliation includes:

- Maltreatment
- Ostracism
- Reprisal
- Restriction

Retaliation can occur against:

- Person who reported the sexual assault
- Reported Offender
- Witnesses
- Bystanders
- First Responders (to include SARC/SAPR VA)

Incidents can occur:

- In person
- In the unit or workplace
- Through electronic communications
- On social media

If retaliation occurs, notify:

- Inspector General
- Military Equal Opportunity
- NCIS
- SJA

CMG Chair will:

- Ask at every CMG meeting during each case review if the person who reported the sexual assault, witnesses, bystanders (who intervened), SARCs and SAPR VAs, responders, or other parties to the incident have experienced any retaliation incidents.
- Develop a plan to immediately address the issue of reported incidents.
- Monitor for status updates at the CMG until the case of the person who reported the sexual assault is closed.

Prevention

Sexual assault prevention starts with you as a leader. Protective factors are attitudes, beliefs, and behaviors associated with positive outcomes for the organization. These 10 characteristics from DECOS are indicators of a healthy command and reduce the likelihood of sexual harassment, sexual assault, or a suicide related incident:

- Cohesion
- Connectedness
- Engagement and commitment
- Fairness
- Inclusion
- Leadership support
- Morale
- Transformational leadership
- Work-life balance
- Safe storage for lethal means

These elements are deeply embedded within Marine Corps leadership and all within your ability to influence. There are many programs within the Marine Corps staffed with personnel and programs equipped to assist you in each of these categories.

- Embedded Preventive Behavioral Health Capability
- Family Advocacy Program– Prevention & Education
- Substance Abuse Program– Prime for Life
- Military Life Counselors
- Unit Marine Awareness and Prevention Integration Training
- Operational Stress Control and Readiness
- Semper Fit– Health Promotions, community fitness, unit recreation
- Single Marine CProgram
- Family Readiness Program (LINKS, LifeSkills)
- Chaplains
- Marine for Life
- Voluntary Education
- Leadership Scholar Program
- Skillbridge

It is also helpful to identify and address harmful behaviors that can lead to a higher likelihood of a sexual assault occurring in a unit. Knowing these behaviors can allow leaders to address them early before they escalate. The Preventing Sexual Violence Risk and Protective Factors Report and the Department of the Navy's Watch List are both useful tools to identify harmful behaviors in individual Marines and a unit's climate.

Preventing Sexual Violence

Risk and Protective Factors Annual Research Report—2021

PURPOSE

Based on a review of academic and professional research, this document identifies risk and protective factors that have routinely been shown to be associated with sexual assault and other forms of sexual violence. Risk and protective factors for both victimization and perpetration are provided.

RISK FACTORS

The risk factors identified below were selected because they are potentially modifiable or are factors that can be used to identify groups to target for sexual violence prevention. No single risk factor is sufficient to predict the occurrence of sexual violence. This list is not exhaustive but includes the most common risk factors associated with sexual violence.

The following are associated with an *increased risk of perpetration of sexual violence*:

Individual:

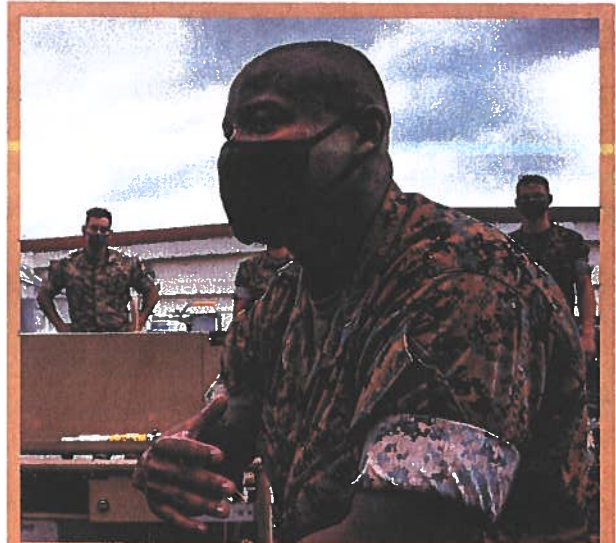
- Strong adherence to traditional gender norms
- Aggressiveness/Acceptance of violence
- Alcohol and drug use
- Coercive sexual fantasies
- Exposure to sexually explicit media
- Hostility towards women
- Hyper-masculinity
- Prior sexual victimization or perpetration
- Lack of empathy
- Sexual risk-taking

Relationship/Family:

- Association with sexually aggressive and hyper-masculine peers
- Childhood history of physical, sexual, or emotional abuse
- Family environment characterized by physical violence and conflict
- Involvement in a violent or abusive intimate relationship

Community/Society:

- Norms that support male superiority and sexual entitlement
- Norms that support sexual violence



EFFECTS OF A PANDEMIC

Emerging evidence suggests that the social and economic realities associated with the ongoing global COVID-19 pandemic may be contributing to an increase in sexual violence. Travel restrictions and social distancing measures designed to combat the spread of COVID-19 have also brought increased social isolation and economic anxiety.

Factors associated with COVID-19 measures that might increase risk of sexual violence include:

- Less contact with family and friends
- Loss of employment
- Increased social isolation
- Economic insecurity
- Disruption of support and response capabilities

RISK FACTORS (CONT.)

The following are associated with an *increased risk of sexual violence victimization*:

Individual:

- Alcohol and drug use
- Being a woman
- Being young
- Maltreatment in childhood
- Previous victimization

Community/Society:

- Norms that support male superiority and sexual entitlement
- Norms that support sexual violence

PROTECTIVE FACTORS

Research on protective factors related to sexual violence continues to emerge and develop, but at present remains understudied when compared to risk factors. The protective factors identified below were selected because they are potentially modifiable or are factors that can be used to identify groups to target for sexual violence prevention. This list is not exhaustive but includes the most common protective factors associated with sexual violence.

The following are associated with a *decreased risk of perpetration of sexual violence*:

Individual:

- Emotional health and connectedness
- Empathy and concern for how one's actions affect others

Relationship/Family:

- Parental use of reasoning to resolve family conflict

The following are associated with a *decreased risk of sexual violence victimization*:

Relationship/Family:

- Social connectedness

Community:

- Coordination among community agencies

PREVENTION STRATEGIES

No one specific risk factor is the cause of sexual violence. Similarly, no one specific protective factor can prevent sexual violence. Any prevention strategy must take a multifaceted approach.

- Build community support (e.g., leadership support, community unity, community resources)
- Encourage norms and behaviors that create protective environments
- Educate community members on how to identify what to do in high-risk situations

COVID-19 CONSIDERATIONS

Cultivating social connections during periods of isolation and stress is key to maintaining healthy communities. Work with the community to reduce the impacts of social isolation. Make sure that resources (hotline numbers, telehealth outlets, shelters, crisis centers, and counseling) are available and known to the community.

RESEARCH AND PROGRAM EVALUATION

Please contact us at behavioral.programs.research@usmc.mil with any questions. This report is also on the Gear Locker: <https://hqmportal.hqi.usmc.mil/sites/family/mfc/BHINT/researchana/default.aspx>.

THE WATCH LIST

Analysis of the 2018 Workplace and Gender Relations Survey of Active Duty Members revealed the "Top Five Signals" identifying when Marines may be at higher risk of sexual assault. Many of these same areas can be assessed using the Defense Organizational Climate Survey (DEOCS). If a Marine experiences one of the measured behaviors below, their risk for sexual assault may increase.

Top 5 Signals of Risk for Sexual Assault

When it comes to the safety of our teammates, we all have the Watch.

If Marines Experience...

A Marine is at higher risk of sexual assault when a coworker does any of the following:

SEXUAL HARASSMENT

risk of Sexual Assault increases

8x for Women
51x for Men

- Repeatedly tells sexual "jokes"
- Embarrasses, angers or upsets the Marine by repeatedly suggesting they don't act like their gender is supposed to
- Displays, shows or sends sexually explicit materials (e.g. pictures, video)
- Repeatedly asks questions about their sex life or sexual interests that makes them uncomfortable, angry or upset
- Repeatedly makes sexual comments about their appearance, body
- Takes or shares suggestive pictures or videos of them when they don't want to
- Repeatedly attempts to establish unwanted romantic or sexual relationship
- Intentionally touches them in sexual way when they do not want them to
- Makes them feel they would be punished/treated unfairly for not doing a sexual act

GENDER DISCRIMINATION

risk of Sexual Assault increases

3x for Women
18x for Men

A Marine is at higher risk of sexual assault, if a Marine's career is hurt as coworkers:

- Mistreat, ignore, exclude, or insult them because of their gender

LACK OF RESPONSIBILITY & INTERVENTION

risk of Sexual Assault increases

3x for Women
8x for Men

A Marine is at higher risk of sexual assault, when the Marine's unit:

- Does not make it clear that sexual assault has no place in the military
- Does not promote a unit climate based on mutual respect and trust
- Does not lead by example by refraining from sexist comments and behaviors
- Does not recognize and immediately correct incidents of sexual harassment
- Does not encourage bystander intervention to assist others in situations at risk for sexual assault or other harmful behaviors
- Leaders did not publicize sexual assault report resources
- Marines did not encourage victims to report sexual assault

WORKPLACE HOSTILITY

risk of Sexual Assault increases

3x for Women
7x for Men

A Marine is at higher risk of sexual assault, when the Marine's coworkers:

- Intentionally interfere with their work performance
- Do not provide information or assistance when they need it
- Take credit for their work or ideas
- Gossip/talk about them
- Use insults, sarcasm or gestures to humiliate them
- Yell when angry at them

LACK OF RESPECT & COHESION

risk of Sexual Assault increases

3x for Women
6x for Men

A Marine is at higher risk of sexual assault, when the Marine's unit is:

- Low in unit cohesion
- Low in respect from or for Chain of Command
- Low in respect for others from diverse backgrounds
- Low in ability to deal effectively with adversity or conflict when it occurs
- Low in gender respect: Women and men treat each other poorly
- Low in support: Marines do not provide help to one another when personal problems arise

Encl (3)

THE WATCH LIST

Top Ten Tips for Commanding Officers



- 1. CLIMATE BRIEFS:** From All-Hands to small discussion groups, commit to having routine, ongoing conversations about command climate. Active listening increases your understanding of team concerns and empowers you to adapt as needed.
- 2. WALK THE DECK:** Daily engagement builds rapport, trust and confidence between leaders and Marines. You are more likely to learn about potential harmful behaviors when you take part in direct conversations with your Marines in real time. These personal interactions show that you respect your Marines and care about how they are doing.
- 3. IF YOU SEE SOMETHING, SAY SOMETHING:** If you see or hear inappropriate conduct in public, respond immediately. On the spot corrections communicate standards of professional and appropriate conduct for all Marines and dispel any confusion about unacceptable behavior.
- 4. ONE SIZE DOES NOT FIT ALL:** A single set response to every command climate issue is unlikely to work. In a learning institution, mistakes can be opportunities to learn and grow, and not all comments made are intended to be malicious. As a positive leader with your finger on the pulse of command climate, you can improve morale and esprit de corps by taking all reports seriously and addressing them in a swift manner.
- 5. DO NOT WAIT UNTIL IT ESCALATES:** Early intervention is important. Watch List behaviors are indicators of eroding good order and discipline within your command. Stopping these behaviors early and consistently can prevent more serious destructive behaviors from occurring over time.
- 6. TAKE ALL SEXUAL HARASSMENT COMPLAINTS SERIOUSLY:** Trust your Marines when they report sexual harassment, as they are trusting you to uphold the standards. Studies show most people have tried everything they can to resolve the situation before making a sexual harassment complaint.
- 7. LOOK BENEATH THE SURFACE:** Complaints about Watch List behaviors may indicate deeper issues. Use additional assessment tools such as a command climate survey to better understand how your Marines are experiencing the climate. Action what you know. Remain flexible and ready to pivot as climate information comes to your attention.
- 8. DEVELOP A REPORTING CULTURE:** Cultivate a command climate where Marines have confidence to report without fear of reprisal. A firm, fair and consistent approach to reporting wrongdoing builds confidence in the systems that support Marines. Trivializing Watch List behaviors could lead to a more permissive command climate.
- 9. WHEN IN DOUBT, CALL IN THE EXPERTS:** Most of the Watch List behaviors are violations of Marine Corps instructions and the Uniform Code of Military Justice. Routinely check in with a Judge Advocate officer or other relevant subject matter experts if you are unsure about how to respond to a potential issue.
- 10. DO NOT DELEGATE IT. OWN IT:** Make sure everyone understands your goal is to help and protect those under your command. Hold yourself accountable. If health and welfare are at risk, then you absolutely want to be informed and involved.



UNITED STATES MARINE CORPS
HEADQUARTERS AND SERVICE BATTALION
HEADQUARTERS MARINE CORPS, HENDERSON HALL
Arlington, VA 22204-5000

1752
SARC
28 Jul 22

From: Program Manager, Sexual Assault Response Coordinator
To: To whom it may concern

Subj: SEXUAL ASSAULT RESPONSE DUTY INSTRUCTIONS
FOR DESIGNATED DUTY WATCH OFFICER.

Ref: (a) DoDD 6495.01, Sexual Assault Prevention and Response
(SAPR) Program
(b) DoDI 6495.02, Sexual Assault Prevention and Response
(SAPR) Program Procedures
(c) MCC 1752.50, Sexual Assault Prevention and Response
Program

Sect: (1) SAPR call instruction for Watch Officers
(2) Procedures for answering a sexual assault call
(3) SAPR Local Resources and Supports

1. Situation. In accordance with the references, it is essential that Command personnel, Watch Officers, Sexual Assault Response Coordinators (SARC's), Sexual Assault Program Victim Advocates (SAPR VA's), Civilian Victim Advocates (VA's), and first responders are aware of the Commanders response protocol for allegations of sexual assault. This instruction will establish continuity between H&S Bn, HQMC, Henderson Hall Sexual Assault Prevention and Response (SAPR) staff, Watch Officers, and SAPR VA's.

2. Mission. Annually, H&S Bn, HQMC, Henderson Hall SAPR staff shall review this instruction and ensure that the information contained within is in compliance with the current orders and directives.

3. Execution

a. Commander's Intent and Concept of Operations.

(1) Commander's Intent. Sexual Assault First Responders such as SARC's SAPR VA's, VA's, Health Care Provider (HCP), or Chaplains are trained to provide immediate assistance and support to victims of sexual assault. In order to standardize H&S Bn, HQMC, Henderson Hall Watch Officer procedures, the following apply:

(a) It is essential that Watch Officers are aware of the proper referral procedures when a telephone call is received requesting information/assistance from SAPR personnel such as the SARC, SAPR VA, VA, HCP, or Chaplain. These SAPR representatives

are the most appropriate personnel to provide information or victim support services. In order to protect the caller's option of making a "Restricted" report, it is critical that Watch Officers are not inquiring into the circumstances of the caller's request, unless the caller specifically states that he/she would like to make an official report to command officials or law enforcement.

(b) Section (1) provides proper referral procedures when a telephone call is received requesting information about sexual assault policy, resources, and assistance. If the caller would like information for local support agencies or rape crisis centers, see section (3) for listings.

b. Concept of Operations. Victims of sexual assault have two methods of reporting a sexual assault: Unrestricted and Restricted

(1) UNRESTRICTED REPORTING. Includes all suspected, alleged, or actual sexual assaults made known to the command or law enforcement for formal investigation.

(2) RESTRICTED REPORTING. Affords military victims of sexual assault the option to make a confidential report to specified individuals (SAPC, SAPP VA, VA, Healthcare Providers, Counselors and Chaplains).

4. Admin and Logistics

(a) Admin. This enclosure will be maintained by all H&S Bn, HQMC, Henderson Hall SAPC's, SAPP VA's and filed in all Watch Officers duty binder.

(b) Logistics. Strict adherence to the procedures in the enclosure will be verified by phone and during internal and external inspections.

5. Command and Signal

(a) Command. This enclosure is applicable to all H&S Bn, HQMC, Henderson Hall Watch Officers.

SECTION 1
SAPR Call Instruction

H&S Bn, HQMC, Henderson Hall
Watch Officers responding to Victims of Sexual Assault

The following is general information to be used by Watch Officers when in official capacity of watch stander.

H&S Bn, HQMC, Henderson Hall has in place a 24/7 Sexual Assault Helpline staffed by Sexual Assault Program Victim Advocates (SAPR VA's), and a Sexual Assault Respond Coordinator (SARC). The duty could be contacted in two ways to respond to a sexual assault.

1. When a caller contacts the Duty directly inquiring about sexual assault services:

- o Ensure the caller is not in any immediate physical danger, if caller is in immediate danger or needs immediate medical attention call 911
- o Do NOT ask the caller ANY detailed questions (must maintain restricted reporting option)
- o Provide 24/7 Helpline number to caller **202-498-4009**
- o Record the callers number to relay to the SARC or SAPR VA (**DO NOT ASK FOR NAME OR LOG THE NUMBER IN THE DUTY LOG BOOK**)
- o If the caller discloses his/her name, keep it confidential on a need to know basis only.
- o Immediately contact the SARC/SAPR VA at 202-498-4009
- o Destroy the number once you make contact with the SARC/SAPR VA

2. When a victim or third party wishes to report a sexual assault to the Duty, Law enforcement or Command officials:

- o Ensure the caller is not in any immediate physical danger, if caller is in immediate danger or needs medical attention call 911
- o Do NOT ask the caller ANY detailed questions related to the incident
- o Immediately contact the SARC/SAPR VA at the 24/7 Helpline number **202-498-4009**
- o Do NOT attempt to begin an investigation or search out the alleged offender
- o Do NOT log in any names or PII of victim or alleged offender in the duty log book, simply state a sexual assault incident was reported and the SARC/SAPR VA/PMO/NCIS/CO have been notified.

SECTION 2
HOW TO ANSWER A SEXUAL ASSAULT CALL:

1. Answer duty phone appropriately - Calls should be answered live with a **no more than 15 minute call-back response** requirement for miss calls.

2. If the caller is inquiring or requesting Sexual Assault assistance/services, access safety of the caller and immediately read the following script:

"Before you disclose any information to me, I ask that you write down the number to the Henderson Hall Sexual Assault **24/7 helpline at 202-498-4009**. I can also contact the SARC/SAPR VA to return your call. The SARC/SAPR VA is able to accept Confidential and Restricted reports of Sexual assault. I must inform you that I am a mandatory reporter; if you disclose information concerning a sexual assault to me I MUST report. Are you ready or able to write down the number?"

"The Joint Base Myer Henderson Hall **24/7 helpline number is 202-498-4009.**"

"Now, may I have a return phone number to relay to the SARC/ SAPR VA?"

- If **YES**- Only ask for the number to pass to the SARC/SAPR VA- **NO NAMES** (destroy number once you make contact with the SARC/SAPR VA)
- If **NO**- Ask the caller to contact the 24/7 Helpline for further assistance
- If caller wants to **Report a Sexual Assault** to you- Take information, contact NCIS, CO, SARC/SAPR VA.

Confidentiality and the **Restricted Reporting** option are of utmost importance in sexual assault cases. **DO NOT** asks the caller to disclose information to you concerning the assault. Encourage the caller to call the 24/7 Helpline and/or allow you to call the SARC/SAPR VA.

Record **ONLY** in the duty log that a call was referred to the Helpline or SARC/SAPR VA. No Personally Identifiable Information (PII) should be recorded...EVER..



UNITED STATES MARINE CORPS
HEADQUARTERS AND SERVICE BATTALION
HEADQUARTERS MARINE CORPS, HENDERSON HALL
ARLINGTON, VA 22214-5000

1752
SARC

From: Program Manager, Sexual Assault Response Coordinator
To: Command Adjutant, H&S Bn, HQMC, Henderson Hall

Subj: SEUXAL ASSAULT RESPONSE DUTY INSTRUCTIONS
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H&S Bn, HQMC, Henderson Hall

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1. Answer duty phone appropriately - Calls should be answered live with a **no more than 15 minute call-back response** requirement for miss calls.

2. If the caller is inquiring or requesting Sexual Assault assistance/services, access safety of the caller and immediately read the following script:

"Before you disclose any information to me, I ask that you write down the number to the Henderson Hall Sexual Assault **24/7 helpline at 202-498-4009**. I can also contact the SARC/SAPR VA to return your call. The SARC/SAPR VA is able to accept Confidential and Restricted reports of Sexual assault. I must inform you that I am a mandatory reporter; if you disclose information concerning a sexual assault to me I MUST report. Are you ready or able to write down the number?"

"The Joint Base Myer Henderson Hall **24/7 helpline number is 202-498-4009.**"

"Now, may I have a return phone number to relay to the SARC/ SAPR VA?"

- If **YES**- Only ask for the number to pass to the SARC/SAPR VA- **NO NAMES** (destroy number once you make contact with the SARC/SAPR VA)
- If **NO**- Ask the caller to contact the 24/7 Helpline for further assistance
- If caller wants to **Report a Sexual Assault** to you- Take information, contact NCIS, CO, SARC/SAPR VA.

Confidentiality and the **Restricted Reporting** option are of utmost importance in sexual assault cases. **DO NOT** asks the caller to disclose information to you concerning the assault. Encourage the caller to call the 24/7 Helpline and/or allow you to call the SARC/SAPR VA.

Record ONLY in the duty log that a call was referred to the Helpline or SARC/SAPR VA. No Personally Identifiable Information (PII) should be recorded...EVER...

CONFIDENTIALITY EXCEPTIONS

Sexual assault victims shall be informed of these exceptions to confidentiality as soon as practical after receiving assistance or services under a restricted report. The prohibition on disclosing confidential communications shall be waived when the following reasons apply:

- Disclosure to command officials or law enforcement is authorized by the victim in writing.
- Disclosure to command officials or law enforcement is necessary to prevent or lessen a serious and imminent threat to the health or safety of victim or another.
- Disclosure by a healthcare provider to the Disability Retirement Boards and officials is required for fitness for duty and for disability retirement determinations, limited to only that information which is necessary to process disability retirement determinations.
- Disclosure to the SARC, victim advocates or healthcare provider is required for the supervision of direct victim services.
- Disclosure to military or civilian courts of competent jurisdiction when ordered or required by federal or state statute. SARCs, victim advocates and healthcare providers will consult with the servicing legal office in the same manner as other recipients of privileged information to determine if the criteria apply and they have a duty to obey. Until those determinations are made, only non-identifying information should be disclosed.
- Disclosure of suspected and alleged child abuse will be made to law enforcement.
- Disclosure of sexual assault by a spouse will be deemed a domestic violence case and shall be referred to FAP.

The SARC will evaluate the information provided and determine whether an exception applies. If needed, the SARC shall do so in consultation with the Staff Judge Advocate (using non-identifying personal information). When there is uncertainty or disagreement on whether an exception applies, the matter shall be brought to the attention of the senior commander for decision. Disclosures (made under the authority of the Exceptions to Confidentiality) will be limited to information necessary to satisfy the purpose of the exception. Further disclosure will not be made unless the victim authorizes the disclosure in writing.

Line of Duty (LOD) Determination for Reserve Marines on Active duty Protocol:

Ref: MCO 1700.2B

When a drilling reservist is a victim of sexual assault, a LOD is required. The SARC/UVA will support the victim through the LOD process.

- Regardless of options elected, a reservist victim shall receive SAPR services if elect to.
- The Wounded Warrior Regiment, Reserve Medical (WWR, RMED/LOD) section is the Marine Corps LOD determining activity for drilling reservist
- Upon positive LOD, a LOD determining is given to the victim, a LOD determining allows the reservist to receive continued services from a MTF while in a non-drilling status
- The **restricted** reporting does not extend to pay and allowances or travel and transportation incident to the healthcare entitlement. In order to receive the full range of entitlement authorized, the reservist may request an unrestricted LOD determination.

If a Reservist is a victim of sexual assault do the following:

Unrestricted Report:

- Thoroughly explain the process and reporting options available, and provide continuous SAPR services/support as in all unrestricted cases.
- UVA shall notify SARC via phone or in person of the need for the LOD determination.
- SARC shall contact the WWR, RMED/LOD section.
- MedHold and LOD benefits will be handled in the same manner as a regular medHold or LOD benefits request. (see MCO 1770.2B para. 4 (2a)& 2.
- If on orders for more than 30 days, inform him/her that they have the option to remain or be released from active duty for medical treatment. If him/her choose to remain on active duty, ensure pg. 11 is reviewed and signed (encl 1), along with the MTF documentation; if him/her choose to be released from active duty and receive care via LOD Benefits, have him/her sign pg 11 (encl 2)and process paperwork thru the Limited duty coordinator.
- MTF has to initiate a medical board proceeding to substantiate that condition for medical hold.
- A 60 day grace period can be provided if he/she is approaching an EAS within the next few days, **ensure to contact monitor for orders modification**. During that 60 day window/grace period he/she will be evaluated at the MTF and a determination will be made if the condition has the potential to be (1) unfitting and require retention on active duty for treatment or processing into disability evaluation; **OR** (2)not unfitting and the Marine is declared fit for release from active duty. The member can receive follow on care through the LOD program.
- SARC/VA/CO will ensure strict access to medical records and disciplinary records are maintained.

Restricted Report:

- Thoroughly explain the process and reporting options available, and provide continuous SAPR services/support as in all restricted cases.
- SARC/UVA are authorize direct liaison with the limited duty coordinator at WRR, RMED. WRR, RMED will ensure the privacy of the request is maintained and that members within the chain of command **DO NOT** have any access to information regarding the request for medical benefits.
- **DO NOT coordinate any parts of the LOD determination thru the chain of command or Limited Duty Coordinator.**