



IM32

**SEXUAL ASSAULT INVESTIGATIONS**

IM32

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**POLICY**

1. Sexual assaults are to be responded to and investigated:
  - a) in a culturally safe manner, with dignity, compassion, and sensitivity, and applying a victim-centered approach; and
  - b) recognizing the importance of collaborating with health and social services, and supporting the reporting of sexual assaults in a manner that fosters equity and trust between the public and the police.

BCPPS 5.4.1 (1b) (1c) (1e) (1f)
  
2. The Chief Constable shall ensure all members have completed trauma-informed investigative training, as required by British Columbia *Provincial Policing Standards*, and that all members are able to recognize that the victim has experienced a traumatic event and apply their training to seek to ensure victims' safety and wellbeing.
 

BCPPS 5.4.1 (1a)
  
3. The Chief Constable shall provide procedures, pursuant to this Policy, regarding sexual assault response and investigation.



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## REASON FOR POLICY

4. To seek to ensure members prioritize the victim's safety and wellbeing when responding to and investigating sexual assault cases.

## RELATED POLICIES

CS30 – Victim Services  
CS32 – Protection of Children  
EM21 – Training  
IM10 – Criminal Investigations  
IM31 – Intimate Partner Violence  
IM33 – Third Party Reporting of Sexual Assaults  
IP20 – Statements  
IR47 – Missing Persons

## DEFINITIONS

5. For the purposes of this Policy, the following definitions will apply:

**Cultural Safety:** physically, socially, emotionally, and spiritually safe environment created by recognizing and respecting the cultural identities of others and considering social and historical contexts as well as structural and interpersonal imbalances.

**Sexual Contact:** the deliberate touching, either directly or through clothing, of a person's intimate body parts, or using force to cause a person to touch their own or another person's intimate body parts.

**Consent:** words or actions by a person who is legally and functionally competent to give informed approval, indicating a given agreement to engage in sexual contact.

**Sexual Assault (CCC s. 271):** sexual contact with the intent to abuse, humiliate, harass, arouse, or gratify the sexual desire of any person, without the consent of both parties. Sexual assault may range from unwanted touching of an intimate body part to forced sexual intercourse and may include parties who are known to each other or who are in a relationship.

**Examples of sexual contact without consent may include:** a person expressed words or actions that indicated they did not want sexual contact (including continued contact), a person submitted to



sexual contact due to threats, coercion or force, a person was unable to give consent due to impairment or age, or a person submitted to sexual contact due to an exertion of power or authority.

**Forensic Examination:** medical-legal processes performed by a trained health professional that include the collection of biological material, recording relevant patient history, documenting any injuries, and the secure storage of collected samples.

## PROCEDURES

### General

6. All employees shall seek to treat the victim with respect and compassion and consider whether special supports may be required (e.g., interpreter, elder, accompaniment).
7. The investigation process shall not be biased against the complainant based on the following factors:
  - a) relationship status, gender identity, sexual orientation, socioeconomic status, ethnicity, or race of the suspect/victim;
  - b) co-habitation of the suspect and victim at the same premises;
  - c) denial by either party that the assault occurred or assurances that the assault will cease;
  - d) preference by the complainant that no arrest be made or that they will not proceed to prosecution;
  - e) history of the complainant, including prior complaints or service calls;
  - f) lack of visible injuries or indication of assault; and
  - g) intoxication or drug use by the complainant.

BCPPS 5.4.1 (1g)  
BCPPS 5.4.2 (1a-e)

8. All members of the Sexual Offences Section (SOS) shall take advanced training, as available and as prescribed by the Deputy Chief, Administration Bureau, and in compliance with the British Columbia *Provincial Policing Standards*.



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## Receiving a Report & Initial Response

9. In response to a report, made in-person or by phone, alleging a sexual assault:
- a) a member is to be assigned to investigate;
  - b) the complainant is not to be directed to return at another time, or to complete a written statement and return it later; and
  - c) the timeliness of the complainant's report (e.g., several days after the event) does not diminish the perceived severity of the incident and must not affect the police response.

BCPPS 5.4.2 (3a-c)

10. If the incident occurred in another police jurisdiction:
- a) the employee receiving the complaint shall not only direct the victim to that jurisdiction, but shall ensure a referral to the correct police agency, as soon as practicable, and inform the complainant of the process;
  - b) a risk assessment and investigation shall not be delayed pending determination of jurisdiction and shall be conducted by a member;
  - c) members shall initiate and continue a file on PRIME and CPIC, until it has been transferred to the agency of jurisdiction;  
  
Note: transfer to another jurisdiction is not complete until the agency confirms its receipt of the report and has generated a file number.
  - d) the member or employee shall advise the complainant of the transfer and provide them with the file number of the agency of jurisdiction;
  - e) the member shall document the receipt of the report, its transfer and any other actions taken; and
  - f) conclude the file with supervisor approval.

BCPPS 5.4.2 (3d-i)

11. Members responding to a report of sexual assault shall:



- a) encourage the victim to seek medical care and assist the victim in doing so, or request medical care where immediate medical attention is required;  
BCPPS 5.4.1 (1d)  
BCPPS 5.4.2 (2c)
- b) ensure the scene is safe for the victim(s) or the public, including requesting or providing medical attention or mental health resources where necessary;
- c) provide the victim with clothes or a blanket, if necessary;
- d) notify their supervisor, Victim Services, and SOS;  
BCPPS 5.4.2 (2d)
- e) provide the victim a referral to Victim Services; and
- f) seek to identify and secure all associated evidence.  
BCPPS 5.4.2 (2a) (2b)

**Forensic Nursing Service & Examination**

- 12. When receiving a report of sexual assault from a victim or a third party, the member shall provide information and assist in arranging a forensic examination, as follows:
  - a) inform the person that a forensic examination must be completed within seven days of the incident, but that the person may report the sexual assault anytime after a forensic examination;  
BCPPS 5.4.3 (1c)
  - b) refer the victim to Fraser Health’s Forensic Nursing Service (FNS) at the Surrey Memorial Hospital or Abbotsford Regional Hospital, or other appropriate institution;  
BCPPS 5.4.3 (1b)
  - c) if transportation is required to facilitate a victim’s attendance for forensic examination:
    - i. notify the SOS or Victim Services to provide transportation,
    - ii. request assistance from the Surrey Mobile Assault Response Team, or



- iii. if none of the foregoing are available, obtain supervisor approval to transport;

BCPPS 5.4.3 (1c)

- d) advising the victim their care is their own choice, and they may choose one of the following options upon arriving at the hospital:
  - i. medical care with no evidence collection,
  - ii. medical care and collection of evidence for a report to the Department, in which case a medical-legal report and all evidence will be given to the Department, or
  - iii. medical care and collection of samples for storage, in which case the victim has up to one year to report to the police and have the medical-legal report and evidence provided to them; and

Note: This information is also provided by Fraser Health.

BCPPS 5.4.3 (1a)

- e) providing the victim with a health records release form to obtain their signed consent for a medical-legal report to be released by FNS to the Department.

BCPPS 5.4.3 (1c)

- 13. If receiving a medical-legal report of a forensic investigation from FNS, members shall ensure they also receive a signed copy of the health records release form (signed by the victim).

### **Investigation**

- 14. Investigating members shall consider the following factors:
  - a) whether the assault occurred in the context of an intimate partner relationship, in which case it shall be investigated in accordance with Policy IM31 – *Intimate Partner Violence*;
  - b) whether the assault is suspected to be serial or predatory in nature, in which case the file will be transferred to the SOS to investigate utilizing Major Case Management (refer to Policy IM10 – *Criminal Investigations*);



- c) the nature of the incident (e.g., what offence occurred, when and where it occurred, stranger or known assailant, if the victim was incapacitated, any witnesses, ongoing risks) in relation to the investigative steps or forensic evidence to be pursued;
  - d) whether a public warning is required for the safety of the public, in which case the member shall notify their supervisor to consult with the Duty NCO; and  
BCPPS 5.4.2 (7) (8)
  - e) release conditions for the protection or safety of the victim(s), witness(es), or the public prior to releasing a subject from custody.  
BCPPS 5.4.2 (14a)
15. The investigating member shall advise Victim Services, as soon as practicable, of the reported incident and engage with Victim Services throughout the course of the investigation, in accordance with Policy CS30 – *Victim Services*.  
BCPPS 5.4.2 (9)
16. The investigating member shall notify their supervisor and seek guidance at all stages of the investigation (e.g., if specialized services are required, scene management, victim interviews), and receive supervisor review and approval to conclude a file.  
BCPPS 5.4.2 (2g) (11)
17. The investigating member shall consult with the SOS throughout the investigation, including specialized circumstances that exist (e.g., age or gender of the victim, Indigenous victim, special needs surrounding the offence, unknown suspect), and the Sergeant, Vulnerable Sector Unit, may determine if the SOS will assume responsibility of the file.
18. The supervisor is responsible for:
- a) considering the use of specialized investigative services and techniques at all stages of the investigation;
  - b) conducting a risk assessment and working with Victim Services to ensure mitigation strategies are implemented or a safety plan is developed; and
  - c) ensuring the following member responsibilities are adhered to, and the appropriate file documentation thereof:



- i. trauma-informed practice is utilized throughout the investigation,
- ii. a referral to Victim Services has been made, if requested by the victim,
- iii. the victim was encouraged to seek medical assistance and/or a forensic examination,
- iv. victim and witness interviews,
- v. secured evidence (e.g., photographs, forensic records),
- vi. ViCLAS report,
- vii. report to Crown Counsel, and
- viii. Uniform Crime Recording coding.

BCPPS 5.4.2 (12)

## Children

19. When a person under 19 years of age is the victim of or witness to a sexual assault, or normally resides in a residence where a sexual assault has occurred or is being investigated, members shall:
  - a) notify the Ministry for Children and Family Development (MCFD); and
  - b) consider and investigate as appropriate, whether an offense related to child abuse or neglect has been committed.
20. The investigating member shall make arrangements with an MCFD social worker, if required, regarding the child's safety, including, for example, to return the child to a safe location identified by the victim or complainant.
21. If a situation affecting children is of an immediate serious nature and an MCFD social worker is not readily available, members may 'take charge' of the children in accordance with the *Child, Family and Community Service Act*.
22. If children are out of the home when a police response occurs, the member, in consultation with an MCFD social worker, shall take steps to locate the children and ensure their safety.



23. When a criminal offence related to child abuse or neglect may have occurred, members shall ensure a thorough investigation into the allegations and the potential for charges, in collaboration with an MCFD social worker.

BCPPS 5.4.2 (15)

### **Interviews**

24. Interviews shall be conducted separately for each interviewee, and except in exigent circumstances:

- a) by a member with specialized interview training;
- b) if the interviewee is a child, by a member with child interview training; and
- c) with consideration and accommodation of the interviewee's needs in relation to being interviewed, including:
  - i. delaying the interview due to heightened emotional state,
  - ii. allowing the interviewee to be accompanied by a person(s), or
  - iii. the interviewing member's gender, age, or other factor (e.g., a female member should be present for a female victim).

BCPPS 5.4.4 (1) (2ai)

25. If the member has difficulty obtaining a statement from the victim or there appear to be special circumstances surrounding the version of the events provided by the victim, the member shall consult with the SOS.
26. Members shall document all decisions related to the interview(s), including the reasons why a statement of a victim, witness, or subject was not sought or obtained.
27. The member shall again refer the interviewee to Victim Services following an interview, if requested by the victim.

### **Documentation**

28. All details and stages of the investigation shall be recorded in the investigating member's notebook, with consideration of the privacy of the victim in relation to the investigation.



29. Where charges are not recommended, or an allegation of sexual assault is deemed unfounded, the rationale must be documented in the file.

\*Revised Dates:  
N/A