Sexual offence investigations

Context

The aims of Victoria Police in relation to the investigation of sexual crime include:

- increasing the confidence of sexual crime victims and the public in police management of sexual crime and minimising trauma experienced by sexual crime victims during the investigation
- providing a coordinated approach to the handling of sexual crime cases by Victoria Police, Centres Against Sexual Assault (CASAs), forensic medical services and other victim support services
- increasing the apprehension of offenders
- maximising successful prosecutions
- achieving good practice through consistent, transparent and accountable response to, and investigation of, sexual offences.

Victoria Police is committed to supporting victims of sexual crime and acknowledges that due to complex issues surrounding sexual crime investigations there may be times when a victim may request that no further police action be taken in relation to an investigation. In these circumstances, any evidence gathered needs to be retained for future intelligence opportunities or re-investigation where the victim later decides to proceed with the matter.

Victims of sexual crime may also delay reporting the crime to police until long after the incident. This policy provides guidance for members investigating recent and historical sexual offences.

Contents

Scope and application

This policy applies for all sexual offence investigations and should be used with the Code of Practice

for the Investigation of Sexual Crime.

Responsibilities and procedures

1. Responsibilities of reporting and attending member

1.1 *Employee receiving the initial complaint*

Obtain brief details about what has happened and contact relevant police and other services as required. In particular:

- request an ambulance if medical attention is required
- notify the Police Communications Centre (PCC) and/or dispatch a response unit
- notify the Sexual Offences and Child Abuse Investigation Teams (SOCIT) and/or CIU to attend
- notify a supervisor.

1.2 *First member on the scene*

Remain with the victim until a detective or SOCIT member is available to take charge. The victim may have a support person of their choice present unless this will interfere with the investigation or risk contaminating evidence.

2. SOCIT member responsibilities

2.1 *General responsibilities*

SOCIT members are responsible for:

- notifying DHHS Child Protection if mandatory reporting criteria are met - refer to **VPM Protecting children**
- with the victim's consent, notifying the on-call Forensic Medical Officer (FMO) or the back-up FMO, where the on-call FMO arrival will be considerably delayed
- notifying the Centre Against Sexual Assault (CASA) (or after-hours service) and the on-call FMO at the Crisis Care Unit (CCU) that a victim is being brought in for examination and support
- providing the victim with written information about support services. Make the appropriate notifications and referrals in line with **VPM Victim support**
- completing paperwork and providing the victim with member's contact details and the contact details of the nearest SOCIT.

2.2 *Responding to a third party report*

- Where a third party, such as a survivor advocacy group, support group, solicitor or institution, reports a crime on behalf of the victim, contact the victim through the third party that made the report.
- Where the victim does not want to talk to police, use any other available avenue of enquiry to investigate related or ongoing matters.
- Record the third party report on Interpose as an information report for intelligence purposes.

2.3 *Handling evidence and exhibits*

- Ensure that all possible evidence, including evidence at the crime scene, medical evidence and the victim's clothing, has been secured.
- Ensure that exhibits, including Forensic Medical Examination Kits (FMEK) or Early Evidence Kits (EEK), are recorded on Property and Laboratory Management (PALM) and are properly labelled. Where forensic examination is required, submit an exhibit examination request via the Forensic Portal without delay (see **VPM Forensic services and examinations**). Take all accepted exhibits to a Forensic Services location as soon as possible.
- Make note of the victim's physical condition. Where appropriate, and the victim consents, ensure that photographs are taken (preferably by the FMO) of any injuries inflicted during the assault.

2.4 *Facilitating medical care and forensic examination of the victim*

- Unless the victim requests otherwise, take them to the nearest CASA or CCU as soon as possible and no later than two hours after arrival of the first member.
- Where the victim is a child:
  - contact the appropriate paediatric forensic medical service as soon as possible. In metropolitan areas contact services for children victims through the Victorian Forensic Paediatric Medical Service (phone 1300 661 142)
  - for rural areas, or where it is not in the child's bests interests to be transported to one of the above areas, contact the Victorian Institute of Forensic Medicine (VIFM) for advice
  - liaise with Child Protection, DHHS in accordance with **VPM Protecting children**.
- When dealing with a past sexual assault, assess the need for crisis care and a forensic examination. Seek advice from any of the following:
  - Gatehouse Centre
  - a CASA
  - VIFM
  - nearest CCU.
- The FMO will consult with the victim and decide which medical procedures are to be conducted.

2.5 *Interviewing the victim*

- Unless the victim requests otherwise, a SOCIT member of the same sex should, where practicable, conduct the interview and take a full statement.
- Conduct the interview in a private, comfortable setting and limit the number of persons present.
- Explain to the victim why and how the interview is to be conducted.
- The victim may have a support person of their choice present unless this will interfere with the investigation or risk contaminating evidence.
- Take into account the physical and emotional state of the victim. Consult with the attending FMO and the victim or a sexual assault counsellor acting on the victim's behalf.

- If necessary, obtain an interpreter of the same sex as the victim.

Children and cognitively impaired victims

Where the victim is a child or has a cognitive impairment consider taking a Visual Audio Recorded Evidence (VARE) statement and if the victim:

- has a cognitive impairment, conduct the interview with the assistance of an independent third person
- is a child, have a parent, guardian or independent third person present where appropriate.

See **VPM Interviews and statements** for additional information.

3. Investigating member responsibilities

3.1 *General responsibilities*

- Give priority to the physical and emotional welfare of the victim. In particular:
  - introduce yourself and explain your role
  - ensure a police member (preferably from a SOCIT) stays with the victim
  - only undertake extensive investigative procedures involving the victim once a medical examination has been conducted.
- Where it is confirmed that the alleged offender is deceased, as may be the case in an historical report, submit the LEAP report and ensure appropriate referrals are in place to support the victim. See **VPM Victim support** for details.
- Members should not take a statement from a victim of a sexual offence or historical child abuse where the alleged offender is deceased. A crime report should still be taken in these instances.
- If a suspect is interviewed, inform the victim and obtain their views on bail. Advise the victim of any bail application and bail conditions designed for their protection.
- Where a suspect is charged with an historical sexual offence, ensure the correct charge/s are laid based on the legislation at the time of the incident. Refer to the OPP – Historical Sex Offences Ready Reckoner or contact Prosecutions for advice.
- Submit the Sexual Offences List Information Sheet for Committal Hearings [Form 1321] and Summary Hearings [Form 1320]. Also submit the Victim Notification Form [Form 1305]. Refer to **VPMG Brief preparation and management** for more information about preparing briefs of evidence for sexual offences.
- Submit an Information Report to the Sex Offenders Registry via Interpose upon completion of an investigation into a Schedule offence under the *Sex Offenders Registration Act 2004*.
- Offer the victim an opportunity to complete a Victim Impact Statement - refer to **VPM Victim support**.

3.2 *Drug and alcohol testing of sexual assault victims*

- Where there is a reasonable belief that a victim may have been induced by drugs, consult with an FMO regarding obtaining a blood or urine sample. Samples should be taken within 12 hours of exposure.

- After the samples have been obtained, take the samples and toxicology reporting request form (supplied by the FMO) to the VIFM within two hours. Where this is not possible, store the samples as the station and ensure they are:
  - refrigerated
  - recorded in the Property Book
  - delivered to the VIFM as soon as possible.
- The relevant Department is responsible for the costs involved in the testing of the samples.

4. No further police action/withdrawal of complaint

4.1 *Victim does not want further police action at the time of first report or during any subsequent investigation*

When a victim reports a sexual assault to police and at the time of first report or at any stage during a subsequent investigation, the victim requests to have their complaint withdrawn:

- record details of the offence on LEAP and document as much evidence as possible
- encourage the victim to attend a CASA, CCU or doctor for a medical examination. Advise the victim that during the medical examination, forensic evidence may be retained and could be used in any future police investigation should the victim change their mind about police involvement
- a statement of no further police action should be taken but this cannot be done within the first 48 hours of the initial report. After the first 48 hours a sergeant must contact and speak to the victim to confirm their wishes. See below for details about the statement requirements. If a statement can not be taken then a notation of the circumstances is to be recorded in the Interpose investigation and/or LEAP
- a sergeant (preferably the same sergeant who oversaw the taking of the statement) must contact the victim between two to four weeks after taking the statement to confirm their desired course of action
- ensure PALM is updated, including the request that the forensic exhibits are retained.

The statement of no further police action

- A statement requesting a complaint to be withdrawn can be taken by any member, but must be overseen by a sergeant.
- The statement must:
  - not to be in a pre-typed or pro-forma style
  - include:
    - the nature of the original allegation
    - reason for withdrawal of support
    - the fact that the decision is of their own free will
    - the impact on the victim/family if the investigation continues
    - if victim has been advised by solicitor/family to withdraw the complaint.

4.2 *Decision is made to discontinue the investigation or not to lay charges*

The investigating member should ensure that the decision and its reasons are communicated to the victim verbally and in writing (using Brief not authorised [Form

1290C] or Charges withdrawn [Form 1290H].

5. Interviewing a person suspected of child sex offences

5.1 *Suspect welfare considerations*

- Due to existing relationships between victims and suspects, investigation activities may come to the attention of suspects, increasing their risk of suicide and/or self-harm.
- The identified risk periods for suspects are:
  - time of disclosure – victim to authority
  - at initial police contact
  - shortly before or after police interview
  - rejection from family/community
  - first court appearance
  - immediately before sentence/trial.

5.2 *Prior to interview*

- Members intending to interview a person in relation to allegations of sexual offences involving children and/or child abuse material need to be aware of the suspect's welfare. They are considered to be at a higher risk of suicide and/or self-harm because they may:
  - have no prior criminal history or contact with the justice system
  - experience a significant loss of reputation, fear of prison life, or rejection from family and community
  - be unfamiliar with legal processes.
- Arrest plans should, in the event a suspect is not located have contingencies which ensure the nature of the enquiry is not identified to the suspect prior to arrest.
- When making any enquiries, members should avoid using phone messages, calling cards or arranging arrest by appointment.
- When any in-person contact is made and the suspect becomes aware that they are under investigation, police are to conduct a thorough risk assessment by asking informal questions and responding to the outcome of that assessment.
- Police are to ensure that the suspect is provided with the *Information and Support Referral* brochure, regardless of the outcome of the assessment. The brochure is available on the Family Violence Command intranet page under Sexual Offences and Child Abuse Team > Resources.
- If a member becomes aware of a specific concern for a suspect's welfare, that concern must be considered when planning any subsequent police actions.

5.3 *Responsibilities of interviewing members*

- During the interview process and in reference to informal questioning from the Suspect Welfare Management Practice Notes, members should consider having the following approach:
  - Acknowledge: Provide an empathetic response to the suspect's current situation. Empathetic responses are not colluding nor is it condoning of the suspect and their alleged offence

  - Ask: Opens up lines of communication to ascertain if immediate response is required
  - Emphasise: Reinforces importance of consideration for suspect's current and ongoing welfare.

- Suspect Welfare Management Practice Notes can be found on the Family Violence Command intranet page: Sexual Offences and Child Abuse Team>Resources > Suspect Welfare Management.
- Ensure any immediate risks or concerns conveyed by the suspect are addressed.
- Offer to contact a nominated support person on behalf of the suspect.
- Consider a support referral for the suspect and any affected family members via Victoria Police e-Referral (VPeR) if consent is given.
- Ensure the suspect and any support person accompanying the suspect have received a printed copy of the *Information and Support Referral* brochure.

5.4 *Post-interview welfare*

- If members become aware of any risk to the victim's safety post-interview, they must take steps to ensure the ongoing safety of that victim.
- Members must ensure victim notifications and referrals have been made in accordance with **VPM Victim support**.
- Extra consideration is to be given to the suspect's welfare after the interview Ensure they have been provided a copy of the *Information and Support Referral* brochure.

5.5 *Responsibilities of supervisor*

Prior to release of the suspect, the supervisor is to ensure:

- any immediate risks or concerns conveyed by the suspect are addressed
- the suspect and any affected family member present has been offered a direct welfare support referral via VPeR
- interviewing members have offered to contact a nominated support person on behalf of the suspect
- for suspects under 18 years old, that arrangements are made prior to release for a suitable person in a position of care (i.e. parent/guardian) to provide ongoing assessment and monitoring of the child. The supervisor is to provide advice to the child's carer (if appropriate) regarding the high risk of suicide/self-harm.

5.6 *Notification of offences to employer and/or regulatory authority*

For further details on notifying employers and/or regulatory authorities of a persons suspected or actual involvement in certain offences, see **VPM Notification of offences.**

6. Retention of evidence kits

- Work unit managers are to ensure that FMEKs/EEKs are retained for a minimum of 50 years, depending on the possibility of further evidence becoming available.
- Where exhibits are stored at a local level they must be stored at a designated property office.

- Where necessary the Warehouse & Distribution Unit, Operational Infrastructure Department can be used to store these exhibits.
- Where exhibits are transferred to the Warehouse & Distribution Unit, PALM is to be updated.

Related documents

- VPM Victim support
- *Sex Offenders Registration Act 2004*
- Code of Practice for the Investigation of Sexual Crime
- Victoria Police e-Referral (VPeR) System Practice Guide

Further advice and information

For further advice and assistance regarding this policy, contact your local SOCIT unit, or your supervisor.

Update history

DATE UPDATED	SUMMARY OF CHANGE	FORCE FILE NUMBER
26/11/18	Published to replace VPMG Sexual offence investigations and to update suspect welfare considerations under section 5.	FF – 119179
13/07/20	Amended to emphasise significance of suspect welfare management and require suspects be provided with IRS brochure.	FF-137699 3
30/12/20	Updated in response to Royal Commission into the Institutional Response into Child Sexual Abuse recommendations. Includes: Victim support, third party reporting, complaint withdrawal, suspect support.	FF-154475
30/09/21	Updated to incorporate **CCI 07/17 Retention of evidence kits from sexual crime investigations**.	FF – 197590
10/07/24	Inclusion of requirement to submit a Forensic Portal Request when an exhibit requires forensic examination. Clarification that this applies to all exhibit types, including FMEKs and EEKs.	FF-251264
19/06/2025	Consequential amendments relating to **VPM Protecting children**.	FF-197943-1
22/09/2025	Added new Victoria Police e-Referral (VPeR) System Practice Guide to Related documents section	FF-266230