WACHS SOUTH WEST Effective: 03 August 2020

Emergency Department Sexual Assault Presentation Procedure

1. Guiding Principles

This procedure is to guide practitioners who provide access to medical care, psychological care and forensic specimen collection in WA Country Health Service (WACHS) South West sites for patients who present with sexual assault.

This procedure should be used in conjunction with the <u>WACHS Responding to Sexual Assault Policy</u>.

This procedure is founded on the Sexual Assault Resource centre (SARC) Medical and Forensic Manual, 2010 (here in referred to as the SARC Manual). A SARC Doctor and counsellor are available 24 hours a day, 7 days a week for advice. Refer to Appendix 2 for contact details

2. Procedure

This procedure is to be used in conjunction with the <u>WACHS Responding to Sexual Assault Policy</u>. The procedure of providing care to patients who present with sexual assault is presented as a flowchart in <u>Appendix 1</u>.

All patients presenting are triaged as per the Australasian Triage Score by staff competent to triage.

Secondary assessment includes completion of <u>MR3 SARC Emergency Care: History</u> and Checklist.

3. Definitions

Forensic Gazetted Nurse	A registered nurse, midwife or nurse practitioner who has completed the Forensic Gazetted Nursing course, Sexual Assault Resource Centre, Department of	
	Health, Western Australia.	
Sexual Assault	The working definition of sexual assault as used by the Sexual Assault Resource Centre is:	
	 any sexual behaviour or act which is threatening, violent, forced, coercive or exploitive and to which a person has not given consent or was not able to give consent 	
	 sexual assault is not a medical diagnosis, it is a legal definition. 	

4. Roles and Responsibilities

All Staff are required to work within policies and guidelines to make sure that WACHS is a safe, equitable and positive place to be.

Regional Nursing Midwifery Director and Medical Director

Accountable for maintenance of, compliance with, evaluation and review of this procedure.

Emergency Department Medical Officer / General Practitioner

Provide injury management, Sexually Transmitted Infection and emergency contraception care within their scope of practice.

Gynaecological Consultant/Registrar or other Specialist Consultants

Provide care, support and advice on apparent genital trauma or other injuries within their scope of practice.

Regional Nurse Educators

Responsible for facilitating training and learning opportunities and providing resources related to sexual assault, including the WACHS, South West, Learning and Development intranet resource page.

Forensic Gazetted Nurses

Responsible for maintaining their currency in this area and working within their scope of practice. Additionally they train registered nurses, midwives or nurse practitioners in preliminary forensic specimen collection.

Trained registered nurses, midwives or nurse practitioners with preliminary forensic specimen collection skills

Responsible for maintaining currency in this area and working within their scope of practice.

5. Compliance

Failure to comply with this procedure may constitute a breach of the WA Health Code of Conduct (Code). The Code is part of the <u>Integrity Policy Framework</u> issued pursuant to section 26 of the <u>Health Services Act 2016</u> (WA) and is binding on all WACHS staff which for this purpose includes trainees, students, volunteers, researchers, contractors for service (including all visiting health professionals and agency staff) and persons delivering training or education within WACHS.

WACHS staff are reminded that compliance with all policies is mandatory.

6. Records Management

All WACHS clinical records must be managed in accordance with <u>Health Record Management Policy</u>.

7. Evaluation

Monitoring of compliance with this document is to be carried out by nominated staff as directed by the Regional Nurse Director, six monthly then annually by the audit of patient records to assess compliance with the established care pathways.

8. Standards

National Safety and Quality Health Service Standards 1.1b, 1.1c, 1.7a, 1.27a, 6.1, 6.11

9. Legislation

<u>Criminal Investigations Act 2006</u> (WA) Section 103: Who may do forensic procedure <u>Criminal Investigation (Identifying People) Regulations 2002</u> (WA) 4: Qualified Persons <u>Children and Community Services Act 2004</u> (WA) SECT 124B: Duties of certain people to report sexual abuse of children

10. References

SARC Medical and Forensic Manual; Sexual Assault Resource Centre, Department of Health, Western Australia, 2010 (Access restricted to trained staff)

SARC, Wee & Wipe poster and information sheet, Sexual Assault Resource Centre,

Department of Health, Western Australia, 2013

Identifying and responding to child abuse and neglect – A Guide for Professionals

11. Related Forms

MR3 SARC Emergency Care: History and Checklist

12. Related Policy Documents

WACHS Responding to Sexual Assault Policy
WACHS Identifying, Preventing and Responding to Abuse of Older People Policy

13. Related WA Health System Policies

OP 1928/05 OP 1928/05 Coordinated Medical And Forensic Response to Those Experiencing a Recent Sexual Assault and Present to an Emergency Department OD 0606/15 OD 6060/15 Guidelines for Protecting Children 2015

14. Policy Framework

Clinical Governance, Safety and Quality

15. Appendices

Appendix 1: WACHS South West Emergency Department Sexual Assault -

Presentation Procedure Flowchart

Appendix 2: WACHS South West Local Information Sheet for Emergency Department **Sexual Assault Presentations**

Appendix 3: SARC, Wee & Wipe poster and information sheet, Sexual Assault

Resource Centre, Department of Health, Western Australia, 2013

This document can be made available in alternative formats on request for a person with a disability

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Directorate:	Nursing and Midwifery Services	EDRMS Record #	ED-CO-16-74936
Version:	3.00	Date Published:	03 August 2020

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Date of Last Review: July 2020 Page 4 of 8 Date Next Review: July 2025

Appendix 1: WACHS South West Emergency Department Sexual Assault - Presentation Procedure Flowchart

Assess where Patient presents to Emergency Department Adhere to Mandatory patient to be seen. Triage as per ATS Reporting Child Sexual Referral criterion: Assault requirements All children <13 for patients 18 years or Notify Waratah with patient's consent years to Child younger Protection Unit, Perth Children's Wee & Wipe/EEK (Appendix 3), offered by Hospital (PCH), appropriately trained staff to patient needing Nedlands to urinate urgently. Obtain consent (can be Persons 13 to 16 verbal initially) - then document years with child *Information and protection issues to **Child Protection** options: Secondary assessment – including MR3 1. Psychological care: Unit, PCH, Initiate medical review and care: injury Nedlands Sexual Assault management, STI and emergency Counselling contraception care (Waratah, Bunbury) For Genital trauma consult Gynaecological Informed consent 2. Forensic Registrar/Consultant or other relevant in sexual assault management: specialist consultant at Bunbury Hospital presentations must preliminary sampling be obtained for and/or full forensic medical and 3. Medical care follow forensic Patient provided with information and up recommendations options* by the nurse/midwife, examination, and specimen collection ED Coordinator or medical officer (document in notes) Consent given by patient for forensic Decline by patient for forensic examination examination (document decision in notes) (document decision in notes) If Wee & Wipe / EEK collected earlier and Offer Sexual Assault Counselling (Waratah) the patient is undecided if they want to keep if declined previously the specimens, discuss storage option with patient (as per the WACHS Responding to Sexual Assault Policy) Arrange Full Forensic sampling (offer Wee & Wipe/EEK sampling where unavoidable delay for full forensic examination): Option 1 – South West with Forensic Gazetted Provide referral information on discharge: Nurse or trained Medical Officer/GP SARC, Waratah and GP follow up Option 2 - Referral to SARC, Subiaco This flowchart is to be used with the If local examination available - contact police re WACHS South West Emergency collection of specimens. If delay for pickup -Department Sexual Assault Presentation storage (as per WACHS Responding to Sexual Procedure Information Sheet Assault Policy) These two documents are to be kept together in the emergency department If no local examination available, and Wee and for reference by staff. Wipe/EEK collected earlier – discuss storage with patient (as per the SW ED Sexual Assault Presentation Procedure)

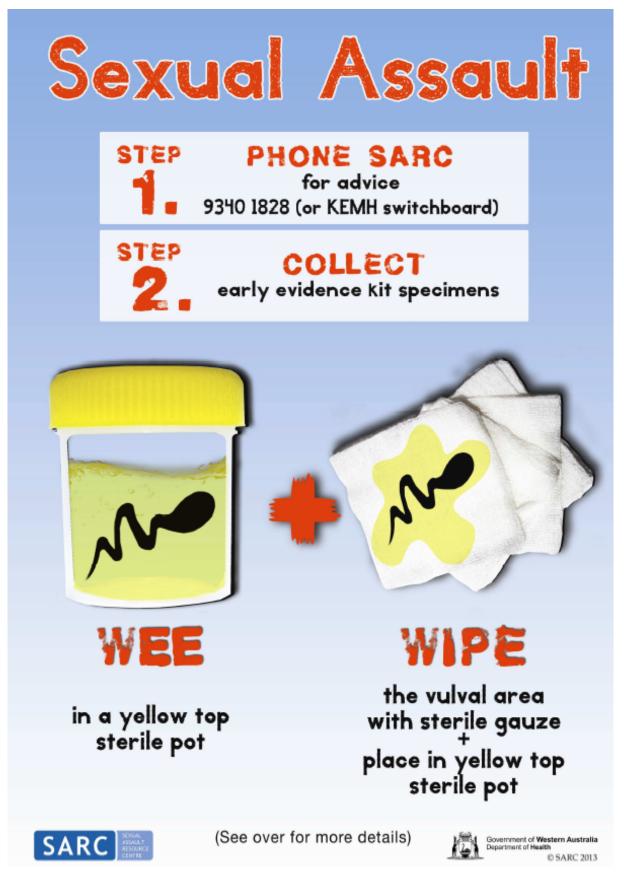
Appendix 2: WACHS South West Local Information Sheet for Emergency Department Sexual Assault Presentations

This information sheet is to be used with the WACHS South West Emergency Department Sexual Assault Presentation Procedure Flowchart.

These two documents are to be kept together in the Emergency Department for reference by staff.

Local Forensic Gazetted Nurse (FGN) name(s)	
(If no local FGN available – indicate this in the box and refer to the South West FGN availability list)	
Waratah Support Centre	9791 2884 (office hours) or 0438949628 (out of hours)
Police – officer in charge SW Detectives	0459 899 565 (this number is attended 24hrs a day)
Sexual Assault Referral Centre (SARC) in Perth	24 hour emergency line 1800 199 888 or (08) 6458 1828
Other local counselling services	
Location of locally stored sensitive information on site	
Location of designated locked storage fridge/cupboard on site	

Appendix 3: SARC, Wee & Wipe poster and information sheet, Sexual Assault Resource Centre, Department of Health, Western Australia, 2013



Early Evidence Kit Specimens (EEKs)

Allow for patient comfort (while preventing evidence loss) prior to a forensic examination. Pre-made Early Evidence Kits (EEKs) contain all the required equipment and stationary.

Alternatively standard hospital supplies can be used for the required equipment and stationary (in this document this is in italics).

EEKs stationary:

Labels (plain labels with Patient's name and D.O.B.) not patient labels which contain other personal information) Consent Form (standard consent form)

A4 envelope for forensic specimens (plastic specimen container bags)

Red evidence label (a label with: patient name, D.O.B., collector's name, date, time)

EEK forensic specimen list (record the specimens taken in patient's notes)

Bright yellow sticker: "Please Forward to C.C.WA" (for suspected drug facilitated assault add: forward to C.C. WA, to the urine specimen label)

<u>Consent:</u>
Consent needs to be obtained prior to collection and handover of specimens. If indicated by clinical circumstances verbal consent / assent maybe obtained initially and, when the patient is able to, this should be followed with documented written consent prior to handover of specimens.

There is no need for the taking of these specimens to be observed

Sample / reason for collecting	Equipment	Procedure
Oral rinse: Following penetration of mouth by penis (even if no ejaculation), finger, object, biting the assailant	10 mls sterile water 1 yellow topped collection pot labelled: • oral rinse 1 pair of gloves	Patient to: wear gloves and hold pot, place sterile water in mouth, rinse thoroughly around mouth, spit fluid in to collection pot, replace top
"Wee + wipe" (females) (Urine (first part) and vulval wipe) Following penetration / attempted penetration of vagina by penis (even if no ejaculation), finger, object Urine for toxicology: Following suspected drug facilitated assault	2 yellow topped collection pots labelled: • urine (first part) • vulval wipe Sterile gauze 1 pair of gloves PLEASE FORWARD TO C.C. WA	Patient to be given items and go to the bathroom where they should: Put on gloves Pass first part of urine in to collection pot and replace top Use gauze to very gently wipe vulva and then place in the other collection pot, replace top Nurse / doctor to attach the bright yellow sticker / Label to the urine sample
"Wee +wipe" (males) Urine (first part) Following the patient's penis in contact with a mouth/body cavity Urine for toxicology: Following suspected drug facilitated assault	2 yellow topped collection pots labelled: • urine (first part) • penile wipe 1 pair of gloves Sterile gauze 10mls sterile water Bright yellow sticker: PLEASE FORWARD TO C.C. WA	Patient to be given items and go to the bathroom where they should: Put on glowes Pass first part of urine in to container and replace top Moisten gauze with water, wipe the shaft and tip of penis and place this gauze in the other collection pot, replace top Nurse / doctor to attach the bright yellow sticker / Label to the urine sample
Peri-anal wipe Following penetration / attempted penetration of anus by penis (even if no ejaculation), finger, object (if patient needs to open bowels)	1 yellow topped collection pot labelled: • peri-anal wipe Sterile gauze 1 pair of gloves 10 mls sterile water	Patient to be given items and go to the bathroom where they should: Put on gloves Moisten gauze with water and wipe around the outside of the anus and place this gauze in the collection pot, replace top
Blood Following suspected drug facilitated assault	2 fluoro-oxalate (grey-top) if available, or 2 EDTA (purple top) blood tubes labelled Sterile water	Clean skin with sterile water not alcohol wipe Collect blood Additionally document on the label the exact time of collection and the patient's weight
Clothing If patient required to change for clinical reasons	Large paper bags	Change gloves between items, place each item in a separate paper bag, seal each bag with a red evidence label / Label

Handover: Place all the specimens and a copy of the consent and specimen list in the envelope/plastic bag, securely seal it with the red evidence label / completed label, and sign across this with your name. Hand this either to the police or to the patient to bring to SARC, document in the notes.

Please telephone SARC Doctor for advice (9340 1828 or via King Edward Memorial Hospital switchboard on 9340 2222)