



UNITED STATES MARINE CORPS
MARINE CORPS INSTALLATIONS NATIONAL CAPITAL REGION
MARINE CORPS BASE QUANTICO
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QUANTICO, VIRGINIA 22134-5001

IN REPLY REFER TO:
MCINCR-MCBQO 1752.3
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MARINE CORPS INSTALLATIONS NATIONAL CAPITAL REGION-MARINE CORPS BASE QUANTICO
ORDER 1752.3

From: Commander, Marine Corps Installations National Capital Region-Marine
Corps Base Quantico

To: Distribution List

Subj: STANDARD OPERATING PROCEDURES FOR SEXUAL ASSAULT PREVENTION AND
RESPONSE (SAPR) PROGRAM (SHORT TITLE: SOP FOR SAPR PROGRAM)

Ref: (a) MCO 1752.5B
(b) DoDI 6495.02 W/Ch 2
(c) DoDD 6495.01 W/Ch 1
(d) SECNAVINST 1752.4B
(e) MARADMIN 285/16

Encl: (1) NCR Command and Legal Relationships Chart as of Aug 2015
(2) Terms and Definitions
(3) MCINCR-MCBQ SAPR Resources for Victims to Report Retaliation
(4) Commander's Protocol for Responding to Allegations of Sexual
Assaults
(5) MCINCR-MCBQ SAPR Local Community and National Resources Quick
Reference Guide
(6) MCINCR-MCBQ Non SAPR Personnel Watch Stander Checklist
(7) Sexual Assault Unrestricted Report and Response Flow Chart
(8) Sexual Assault Restricted Report and Response Flow Chart

1. Situation

a. Background. The potential threat to Marine Corps installations from sexual violence requires a robust Sexual Assault Prevention and Response (SAPR) program that establishes a command climate of prevention, predicated on professionalism, mutual respect and trust that recognizes and embraces diversity, prevents unacceptable conduct, values the contributions of all of its members, and eliminates elements incompatible with a safe, sexual assault-free environment. This Order establishes the Marine Corps Installations National Capital Region-Marine Corps Base Quantico (MCINCR-MCBQ) SAPR program in compliance with the references, to institute and publicize a safe, supportive environment where members feel comfortable coming forward to inform the chain of command of situations that place individuals at risk of sexual assault, ensuring a safe emotional and physical environment for all members of the command.

b. Scope

(1) This Order applies to MCINCR-MCBQ and provides direction, guidance, and tasks to MCINCR-MCBQ Major Subordinate Commands (MSCs), tenant

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commands and activities, and additional organizations serving under the General Courts-Martial Convening Authority (GCMCA) of the Commander, MCINCR-MCBQ, in accordance with the references. Situations not covered in this Order can be found in more detail within the references.

(2) This Order standardizes local reporting protocol, procedures, and requirements for all commands supported by the MCINCR-MCBQ SAPR Program.

(3) This Order ensures all commands have the necessary resources to improve their capability to support victims of sexual assault in order for commands to meet mission requirements, prevent sexual violence, and foster an ethical and just climate intolerant of retaliation.

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

2. Mission. MCINCR-MCBQ executes a comprehensive SAPR program in order to ensure adequate procedures are in place to effectively prevent and respond to allegations of sexual assault.

3. Execution

a. Commander's Intent

(1) Purpose. To ensure that all individuals who are tasked with assisting personnel aboard the Installation with the SAPR program are provided adequate information pertaining to all policies, procedures, and resources available to respond to reports of sexual assault.

(2) Method. This Order clearly mandates that victims of sexual assault shall be treated with sensitivity, dignity, and respect.

(a) Sexual assault victims shall be given priority, and shall be treated as emergency cases regardless of whether physical injuries are evident, per references (a) through (d). Upon request, victims will receive appropriate healthcare (medical, emotional, psychological, and social) services unless he/she refuses care. Care will be given to ensure that the identity of a victim of sexual assault is released only to those who have a need to know. In the case of an unrestricted report; the unit commander, Provost Marshal's Office (PMO), or Naval Criminal Investigative Service (NCIS). In the case of a restricted report; the Sexual Assault Response Coordinator (SARC) and/or the Sexual Assault Prevention and Response Victim Advocate (SAPR VA) who is providing direct care support services and case management.

(b) Victim safety is paramount at all times. Victims who choose to make a restricted report will have that choice honored to the fullest extent. Victims who choose to make an unrestricted report must feel confident that their personal safety will be protected and that they will be protected from coercion, ostracism, discrimination, or reprisal.

(c) Too often, military victims of sexual assault and complainants of sexual harassment disclose they were subjected to abusive behavior by their co-workers, exclusion by their peers, or disruption of their career. As victims make the difficult choice to report sexual assault

or sexual harassment, the Installation is committed to eliminating retaliatory behavior, improving resources for reporters, and providing tools for commanders, supervisors, first responders, and peers to prevent and respond to retaliation against those who report violations. Ending retaliation is crucial to effectively addressing sexual assault and sexual harassment aboard the Installation.

(d) If witnesses, SAPR personnel, Equal Opportunity personnel, first responders, or bystanders who intervene, experience incidents of retaliation of any type, they can report such incidents to the Command Inspector General, Command Staff Judge Advocate, Military Criminal Investigative Organization (MCIO), or the Chain of Command. Additional definitions, avenues to report, important considerations when reporting, resources, and points of contact are contained in MARADMIN 285/16.

(3) End State. A clearly-defined SAPR SOP that ensures the integrity of the SAPR program, while supporting mission readiness, training and education.

b. Concept of Operations. The Order defines who is eligible for SAPR support services, what actions are to be taken upon receipt of an allegation of sexual assault, when action is required, where operational and administrative resources are located, how the SAPR program is maintained, and why proper implementation is critical to unit readiness and mission success. This Order 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.

(1) Implementation of the SAPR program aboard the Installation shall be managed by the MCINCR-MCBQ Installation SARC.

(2) The MCINCR-MCBQ Installation SARC shall be assigned as a primary staff member of the MCINCR-MCBQ headquarters staff, reporting directly to the Commander, MCINCR-MCBQ. As directed, the MCINCR-MCBQ Installation SARC shall;

(a) Be responsible for the tactical execution of the SAPR program for MCINCR-MCBQ personnel and MSCs;

(b) Provide base operational support to tenant activities and Command SARCs receiving administrative support via Headquarters and Service Battalion (HQSVB BN); and,

(c) Provide base operational support to those National Capital Region (NCR) tenant activities who receive limited operational and/or administrative support from MCINCR-MCBQ such as; Marine Corps Embassy Security Group, Marine Cryptologic Support Battalion, Wounded Warrior Regiment, Marine Helicopter Squadron One, Naval Air Station Patuxent River, Henderson Hall, 8th & I, and Marine Corps Systems Command, as noted in enclosure (1) and per the regulations and guidelines published in the references.

(3) The SAPR office supporting staff shall consist of one full-time civilian SAPR Program Assistant, a minimum of two civilian SAPR VAs, and one Service member (E-6 or above). Additional program support shall be provided by uniformed and civilian Command SARCs and uniformed SAPR VAs from each

command aboard the Installation in order to provide a 24 hours, 7 days per week sexual assault response capability by staffing the MCINCR-MCBQ 24/7 Sexual Assault Support Line on a rotational basis.

(4) Commanders and Law Enforcement personnel shall immediately notify the MCINCR-MCBQ Installation SARC on all reports of sexual assault that occur on and off the Installation that involves MCINCR-MCBQ Marines, Military dependents 18-years and older (incidents involving dependents younger than the age of 18 are reported directly to law enforcement and are not eligible for the SAPR program), or when the victim is a civilian and the alleged offender is an Active-Duty Service member assigned to a unit covered by this Order by calling the MCINCR-MCBQ 24/7 Sexual Assault Support Line at (703) 432-9999 or the MCINCR-MCBQ SAPR office at (703) 784-3557 during normal business hours. Commands that have appointed a Command SARC, shall immediately notify their Command SARC.

(5) Victims of sexual assault have two methods of reporting the assault: restricted reporting and unrestricted reporting. For the purpose of this Order, these terms and their definitions, and others are listed in enclosure (2). Refer to the glossaries in references (a) through (d) for additional terms related to the SAPR program not defined in this Order.

(6) Regardless of the method of reporting, sexual assault victims will have access to SAPR personnel for either information and referrals or full SAPR support services, if found eligible per references (a) through (d); such as, advocacy, escorts, and case management under the guidance of the MCINCR-MCBQ Installation SARC and/or Command SARC.

(7) Information regarding Restricted Reports shall only be released to persons authorized to accept Restricted Reports or as authorized by law or DoD regulation. Information regarding Unrestricted Reports shall only be released to personnel with an official need to know or as authorized by law. Unauthorized disclosure of confidential communications under Restricted Reporting, Unrestricted Reporting, or improper release of medical information are prohibited and may result in disciplinary action pursuant to the UCMJ or other adverse personnel or administrative actions.

(8) Any threat to life or safety of a Service member who is a victim of sexual assault shall be immediately reported to command and DoD law enforcement authorities. A request to transfer the victim under these circumstances will be handled per established Service regulations.

(a) Safety issues are NOT handled through an Expedited Transfer. They are handled through a fast safety move following applicable DoD and Service-specific procedures. (An Expedited Transfer may take longer than a safety move.)

(b) The intent behind the Expedited Transfer policy is to address situations where a victim feels safe, but uncomfortable. For example, where a victim is experiencing ostracism and retaliation. Additionally, the intent behind the Expedited Transfer policy is to assist in the victim's recovery by moving the victim to a new location, where there is expected to be less knowledge of the circumstances of the sexual assault.

(c) Resources for reports of retaliation are contained in reference (e) and enclosure (3) of this Order.

(9) When a sexual assault occurs as a result of domestic violence or any type of child abuse, the SARC or SAPR VA will provide support until a Family Advocacy Program (FAP) Victim Advocate arrives and a proper "warm hand-off" is conducted for further care, advocacy, and case management.

c. Tasks

(1) Chief of Staff, MCINCR-MCBQ

(a) Notify the Commander, MCINCR-MCBQ immediately of all reports of sexual assault. Contact the MCINCR-MCBQ Installation SARC to initiate SAPR support services or provide information and referral assistance. Contact can be made via the 24/7 MCINCR-MCBQ Sexual Assault Support Line at (703) 432-9999 or via the MCINCR-MCBQ SAPR Office at (703) 784-3557 during working hours.

(b) Provide notification to the Commanding General, Marine Corps Installations Command.

(c) As directed by the Commander, MCINCR-MCBQ chair the monthly Case Management Group (CMG) meetings for all MCINCR-MCBQ MSCs, tenant commands and activities, and additional units serving under the GCMCA of the Commander, MCINCR-MCBQ. Verify that if a Marine chooses to file a complaint of retaliation in connection with a sexual assault, the information is elevated to the CMG for monthly updates to ensure that the complaint is tracked from initiation to resolution and supportive services are provided, as needed, in compliance with reference (e). Verify that the Sexual Assault Response Team (SART) meetings are being conducted per references (a) through (d).

(d) Notify the Commander, MCINCR-MCBQ immediately when a victim is assessed to be in a High-Risk situation. This will initiate the immediate call to stand-up a multi-disciplinary High-Risk Response Team (HRRT) in accordance with the guidance in Enclosure 9 of reference (b). This will be done even if the victim is not physically located on the Installation.

(2) Commanders/Directors of Major Subordinate Commands (MSCs), Tenant Commands, and Activities

(a) Ensure that all leaders, supervisors, and subordinate commands are familiar with this Order, the enclosures herein, and are in compliance with the references and with this Order. Ensure that the contents of this Order are prominently displayed in high traffic areas around the command.

(b) If there is an allegation of sexual assault, ensure that the procedures outlined in the references are effectively completed. Actions must be focused on ensuring the physical safety, emotional security, and medical treatment of the victim and notification of to the appropriate MCIO.

(c) Ensure compliance with the "Commander's Protocol for Responding to Allegations of Sexual Assaults" located in Appendix D of reference (a). A copy of Appendix D is provided as enclosure (4) to this Order.

(d) Publish a SAPR policy statement and Standard Operating Procedures for commands under their charge in compliance with reference (a).

(e) Notify NCISRA-Quantico immediately on all unrestricted reports of sexual assault. An internal investigation is not authorized prior to or in lieu of contacting the appropriate MCIO or law enforcement when responding to allegations of sexual assaults.

(f) Notify the MCINCR-MCBQ Installation SARC and/or Command SARC immediately on all reports of sexual assault to initiate SAPR services or to provide information and referral assistance. Contact can be made via the 24/7 MCINCR-MCBQ Sexual Assault Support Line at (703) 432-9999 or via the MCINCR-MCBQ SAPR Office at (703) 784-3557 during working hours.

1. The MCINCR-MCBQ Installation SARC shall be notified, respond, or direct a SAPR VA to respond and offer the victim healthcare treatment and a Sexual Assault Medical Forensic Exam (SAMFE) [previously known as a 'SAFE'].

2. In geographic locations where there is no SARC onsite, the on-call SAPR VA will respond from the MCINCR-MCBQ 24/7 Sexual Assault Support Line at (703) 432-9999 and offer reporting options, the contents of DD Form 2910, options for healthcare treatment and/or a SAMFE, the location of the nearest SAPR VA in the region, and immediately notify the MCINCR Installation SARC of the sexual assault.

(g) Collaborate with the MCINCR-MCBQ Installation SARC and/or Command SARC to generate the basic information for the Operations Event/Incident Report (OPREP-3) Serious Incident Report (SIR) per references (a) through (d).

1. An investigative summary of the case and the offender information shall be obtained from the MCIO.

2. Ensure an OPREP-3 SIR is submitted upon notification of a sexual assault, utilizing the example format located in MCO 3504.2A.

3. The Victim's Commanding Officer (CO) shall submit an OPREP-3 SIR when the victim is a Marine or other Service member assigned to a Marine Corps unit.

4. 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 a Marine Corps unit.

5. OPREP-3 SIRs are not required for reports of sexual assault that occurred prior to service, unless a concern for media inquiry exists.

6. The Victim's CO or the Alleged Offender's CO shall notify the MCINCR-MCBQ Installation SARC and/or Command SARC when the OPREP-3 SIR has been submitted to the Communications Center. Notification can be made via email or telephone.

(h) Collaborate with the MCINCR-MCBQ Installation SARC and/or Command SARC to generate victim referral information for the SAPR 8-Day Incident Report, per the references.

1. The Victim's CO shall ensure the SAPR 8-Day Incident Report is submitted via the eHQMC portal no later than the 8th day.

2. The Victim's CO shall establish an eHQMC portal account (O-5/O-6 level Commanders). To gain access, request permissions through Headquarters Marine Corps via <https://ehqmcsupport.usmc.mil/sites/mcwar/default.aspx>

3. The Victim's CO shall notify the MCINCR-MCBQ Installation SARC and/or Command SARC when the SAPR 8-Day Incident Report has been submitted via the eHQMC portal in order to document compliance per reference (a). Notification can be made via email or telephone.

(i) Consult with the Staff Judge Advocate in conjunction with local authorities and the U.S. State Department (if applicable) to confirm current jurisdictional reporting requirements for sexual assault cases off base and in foreign countries.

(j) Attend the monthly MCINCR-MCBQ CMG as directed by references (a) through (d) in support of any open unrestricted sexual assault case within your command.

(k) Provide support for the MCINCR-MCBQ 24/7 Sexual Assault Support Line by ensuring that all Command SARCs and SAPR VAs are reasonably available for duty on a rotational basis. The MCINCR-MCBQ 24/7 Sexual Assault Support Line is staffed on a 7-day rotational basis to respond to victims of sexual assault. Per references (a) through (d), all SAPR personnel appointed as SARCs and SAPR VAs shall be credentialed via the DoD Sexual Assault Advocate Certification (D-SAACP) program. Likewise, SAPR personnel supporting the MCINCR-MCBQ 24/7 Sexual Assault Support Line shall be D-SAACP credentialed and appointed in writing within their current command.

(l) Ensure all locations, including foreign posts, have a 24/7 sexual assault response capability.

(3) Installation SARC, MCINCR-MCBQ

(a) Provide guidance, assistance, and base operational support to all MCINCR-MCBQ MSCs, tenant activities, and additional units serving under the GCMCA of the Commander, MCINCR-MCBQ, to allow for the effective administration of the SAPR Program.

(b) Notify the Commander and the Chief of Staff, MCINCR-MCBQ immediately on all reports of sexual assault that occur on and off the Installation that involves MCINCR-MCBQ Marines, Military dependents 18-years and older, or when the victim is a civilian and the alleged offender is an Active-Duty Service member assigned to a unit covered by this Order.

(c) Notify NCISRA-Quantico of all unrestricted reports of sexual assault per references (a) through (d).

(d) Verify eligibility for SAPR support services as stated in references (a) through (d) and defined in enclosure (2).

(e) Coordinate with the Office of Counsel and Command Staff Judge Advocate for guidance on all matters not covered by this Order pertaining to

jurisdictional reporting requirements Outside Contiguous United States (OCONUS) and resources authorized for organizations not co-located with their parent command aboard MCINCR-MCBQ.

(f) Coordinate with the Office of Counsel, Command Staff Judge Advocate, Command Inspector General, or the Human Resources and Organizational Management Branch for guidance on all matters not covered by this Order pertaining to unrestricted reports made by, or against, any non-service member (i.e., civilian government employees, contractors, U.S. citizens, and foreign nationals) on or off the Installation or OCONUS.

(g) Facilitate timely access to comprehensive medical and psychological treatment, including emergency care treatment and services, as described in Enclosure (7) of reference (b), if requested by the victim. Sexual assault victims shall be given priority, and treated as emergency cases per references (a) through (d). Emergency care shall consist of emergency medical care and the offer of a SAMFE. The victim shall be advised that even if a SAMFE is declined the victim shall be encouraged (but not mandated) to receive medical care, psychological care, and victim advocacy.

(h) Provide liaison with healthcare providers from the Naval Health Clinic Quantico during normal business hours and Ft Belvoir Community Hospital, Walter Reed National Military Medical Center, other Military Treatment Facilities (MTFs), or local civilian medical facilities after normal business hours to provide information about medical and counseling services related to care for victims of sexual assault. Provide referrals to the Community Counseling Center for victims requiring ancillary services, as requested.

1. Advise eligible TRICARE beneficiaries who are victims of sexual assault seeking access to medical resources and support services, that they are responsible for ensuring that the services they are requesting have been discussed with their healthcare provider, are covered by military healthcare benefits, and that the appropriate medical referrals and insurance approvals are made.

2. Advise victims who are not beneficiaries of the Military Healthcare System that they can obtain a SAMFE Kit through a local civilian healthcare provider at no cost to them in accordance with the Violence Against Women Act.

(i) Comply with the SAMFE Kit Collection and Preservation as outlined in BUMEDINST 6310.11A and Enclosure (8) of OPNAVINST 1752.1C. For Restricted SAMFE Kits collected aboard the Installation, the Sexual Assault Medical Forensic Examiner will collect, package, and forward the SAMFE Kit to the NCIS Consolidated Evidence Facility in Norfolk, Virginia in accordance with Enclosure (9) of BUMEDINST 6310.11A. For Restricted SAMFE Kits collected at civilian medical facilities off-base, the Examiner will forward the SAMFE Kit in accordance with their internal local procedures. Information regarding on-base and off-base procedures shall be maintained by the MCINCR-MCBQ SAPR office in the medical resources binder. For medical forensic matters not covered by this Order, contact the Navy Medical Clinic Quantico SAMFE Program Manager at (703) 784-1639.

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

(k) Ensure all known case information is accurately entered into the Defense Sexual Assault Incident Database (DSAID) within 48-hours of victim response and that DD Form 2910 (Victim Reporting Preference Statement (VRPS)) is utilized and stored in accordance with references (a) through (d), if applicable. If the victim is a Reservist, information will be sent to MARFORRES via encrypted email for DSAID data entry.

(l) Track and record completion of the OPREP-3 SIR and SAPR 8-Day Incident Report.

(m) Conduct and/or confirm that monthly safety assessments have been completed for all open cases for the purposes of ensuring the victim, and possibly other persons, are not in physical jeopardy. A safety assessment will be available to all Service members, adult military dependents, and civilians who are eligible for SAPR services, even if the victim is not physically located on the Installation. Ensure that the applicable information is updated into the Defense Sexual Assault Incident Database (DSAID).

(n) Immediately contact the Commander, MCINCR-MCBQ or Chief of Staff, MCINCR-MCBQ, when a victim is assessed to be in a High-Risk situation. This will initiate the immediate call to stand-up a multi-disciplinary High-Risk Response Team (HRRT) in accordance with the guidance in Enclosure 9 of reference (b). This will be done even if the victim is not physically located on the Installation.

(o) Publish the Fiscal Year (FY) MCINCR-MCBQ SAPR Case Management Group (CMG) and Sexual Assault Response Team (SART) calendar each year prior to the beginning of the FY for long-range planning purposes. Coordinate the meetings to take place with the Installation Commander and/or Chief of Staff in the Commander's Conference Room at Lejeune Hall during the last week of the month. Forward a reminder message to all attendees approximately 2-weeks prior and any time or date changes as they are received. Maintain CMG and SART minutes and/or agendas in accordance with references (a) through (d).

(p) Co-chair monthly CMG meetings for all MCINCR-MCBQ MSCs, tenant commands and activities, and additional units serving under the GCMCA of the Commander, MCINCR-MCBQ. Provide administrative support for Command SARC to present their relevant case information at the CMG. If a Marine chooses to file a complaint of retaliation in connection with a sexual assault, elevate that information to the CMG for monthly updates to ensure that the complaint is tracked from initiation to resolution and supportive services are provided, as needed, in compliance with reference (e). Chair the SART meetings per references (a) through (d).

(q) Confirm Service members who file an Unrestricted Report of sexual assault have been informed by the Command SARC or SAPR VA at the time of making the report of the option to request an expedited transfer, in accordance with the procedures for commanders listed in reference (a) and Enclosure 5 of reference (b).

(r) Maintain up-to-date information regarding OCONUS support resources, evidence collection/sexual assault medical forensic exams, and how to obtain advocacy services in a foreign country in the MCINCR MCBQ SAPR office jurisdictional resources binder. Cross-reference, as applicable, with reporting protocols annotated in existing Memorandums of Understanding/Agreement.

(s) Maintain a copy of each Command SARC and SAPR VA's Appointment Letter, Supervisor's Statement of Understanding (page 10 of the D-SAACP Application Form), Victim Advocacy 40-hour Certificate of Training, and D-SAACP Credentialing Certificate in compliance with reference (a) in order to facilitate proper staffing of the MCINCR-MCBQ 24/7 Sexual Assault Support Line and referrals for victims.

(t) Notify the HQMC SAPR office of any Command SARC or SAPR VA revocations.

(u) Host and instruct USMC Victim Advocate Training and Command SARC Courses throughout the Fiscal Year. Personnel assigned as a SARC or SAPR VA shall attend training as directed by reference (a).

(v) Conduct quality assurance audits of the following on a monthly basis (first week of the month), on a quarterly basis (first week of October, January, April, and July), or as needed:

1. The DoD Safe Help Line website for the zip code 22134; report the results via the eHQMC SharePoint Portal for SAPR. (Monthly)

2. Command SARC and SAPR VA appointment and D-SAACP credentialing documents, assignment roster, PCS/EAS dates, and D-SAACP Continuing Education log. (Monthly)

3. Inbound roster for local Commanders. (Monthly)

4. The MCINCR-MCBQ SAPR webpage. Verify that information is current, support information is accurate, and the command 24/7 Support Line and the DoD Safe Helpline Line are accurately displayed. (Quarterly)

5. Local resources and contact information. (Quarterly)

6. Policies and procedures to improve victim care and support services. (Quarterly)

7. MCINCR-MCBQ 24/7 Sexual Assault Support Line response procedures. (Quarterly)

8. Jurisdictional reporting requirements Outside Contiguous United States (OCONUS) and authorized support resources for organizations not co-located with their parent command aboard MCINCR-MCBQ. (Quarterly)

(w) Monitor DON Tracker for inbound tasks and respond accordingly.

(x) Ensure SAPR-related posters, resources, and policy documents are prominently displayed in facilities/common areas aboard the Installation using the most current template published on the eHQMC SharePoint Portal for SAPR in accordance with reference (a).

(y) Create and execute a local SAPR community outreach and awareness campaign, to include the planning of local events to promote Sexual Assault Awareness and Prevention Month and training events for by-stander intervention. Promote the DoD Safe Helpline on all outreach materials and the MCINCR-MCBQ website.

(z) Manage proper protocols for facilities maintenance with the Marine Corps Association and Base Facilities; maintain accountability of all government property to include rental vehicles; supervise personnel; and manage Non Appropriate Funds and Appropriate Funds in conjunction with the appropriate staff directorates and in accordance with the applicable regulations.

(aa) Perform all duties in accordance with the regulations and guidelines set forth in the references and enclosures.

(4) Command SARC's Assigned to Major Subordinate Commands (MSCs), Tenant Commands, and Activities

(a) Become familiar with the contents of the references, this Order, and the enclosures herein.

(b) Ensure compliance with this Order and knowledge of the MCINCR-MCBQ SAPR Local Community and National Resources listed in enclosure (5).

(c) Notify the MCINCR-MCBQ Installation SARC immediately on all reports of sexual assault in order to initiate base operational support or to provide information and referral assistance. Contact can be made via the 24/7 MCINCR-MCBQ Sexual Assault Support Line at (703) 432-9999 or via the MCINCR-MCBQ SAPR Office at (703) 784-3557 during working hours.

(d) Notify the MCINCR-MCBQ Installation SARC of any expedited transfer requests to or from their command.

(e) Ensure all known case information is accurately entered into DSAID within 48-hours of victim response and that DD Form 2910 is utilized and stored in accordance with reference (a) through (d), if applicable. If the victim is a Reservist, information will be sent to MARFORRES via encrypted email for DSAID data entry.

(f) Provide the original DD Form 2910 in-person, via certified mail, or via encrypted email to the MCINCR-MCBQ Installation SARC for filing. Provide a copy to the victim.

(g) Collaborate with a SAPR VA to facilitate the support services requested by the victim. Installation and non-military resources are listed in enclosure (5) and additional resources can be researched that are specific to the location of the victim. The resource feature on the DoD Safe Help Line website can also be utilized to obtain geographical resources within CONUS and OCONUS. Additional listings of national and federal agencies can be obtained from the MCINCR-MCBQ SAPR office.

(h) Attend the MCINCR-MCBQ CMG and SART meetings as directed by reference (a). The Fiscal Year (FY) CMG/SART calendar is published each year prior to the beginning of the FY for long-range planning purposes.

(i) Maintain a copy of each Command SARC and SAPR VA's Appointment Letter, Supervisors Statement of Understanding (page 10 of the D-SAACP Application Form), Victim Advocacy 40-hour Certificate of Training, and D-SAACP Credentialing Certificate in a known secured location and ensure the command has provided a copy of the documents to the MCINCR-MCBQ Installation SARC in compliance with reference (a) in order to facilitate proper staffing

of the Installation's 24/7 Sexual Assault Support Line and to provide accurate referrals for victims. SAPR documentation can be sent via email, delivered in-person, or faxed to (703) 784-3260.

(j) Notify the HQMC SAPR office and the MCINCR-MCBQ Installation SARC of any SAPR VA revocations.

(k) Ensure a copy of the command's SAPR policy letter, Command SARC photo, and SAPR VA photos are posted throughout the command's common areas. Conduct quality assurance checks on a bi-annual basis and provide documentation of the specific locations to the MCINCR-MCBQ SAPR office.

(l) Personnel aboard MCINCR-MCBQ appointed to support the SAPR program (Command SARCs and SAPR VAs) shall support the MCINCR-MCBQ 24/7 Sexual Assault Support Line.

1. Forward periods of non-availability on a quarterly basis (first week of October, January, April, and July) to the MCINCR-MCBQ SAPR office.

2. Personnel shall be D-SAACP credentialed, appointed in writing within their current command, and not pending any administrative or disciplinary action.

3. Detailed instructions for staffing of the MCINCR-MCBQ 24/7 Sexual Assault Support Line are provided in the 'SAPR Duty Resource Binder.' This Binder is checked-out along with a Duty Blackberry and SAMFE response clothing and toiletries prior to standing duty. The tour of duty is Monday to Monday with the change-over process occurring at 0900 each Monday. The SAPR Duty process for the MCINCR-MCBQ 24/7 Sexual Assault Support Line is not to be confused with enclosure (6), which is guidance for 'non-SAPR' personnel standing traditional 24-hour duty assignments within their respective commands.

(m) Assist the Command in creating a FY SAPR Training Plan in order to meet training requirements. Provide the MCINCR-MCBQ Installation SARC with a copy of the command's FY SAPR Training Plan prior to the beginning of the FY in compliance with reference (a).

(n) Perform all duties in accordance with the references.

(5) SAPR VAs Assigned to Major Subordinate Commands (MSCs), Tenant Commands, and Activities

(a) Become familiar with the contents of the references, this Order, and the enclosures herein.

(b) Ensure compliance with this Order and knowledge of the MCINCR-MCBQ SAPR Local Community and National Resources listed in enclosure (5).

(c) Notify the MCINCR-MCBQ Installation SARC and/or Command SARC immediately on all reports of sexual assault in order to initiate base operational support or to provide information and referral assistance. Contact can be made via the 24/7 MCINCR-MCBQ Sexual Assault Support Line at (703) 432-9999 or via the MCINCR-MCBQ SAPR Office at (703) 784-3557 during working hours.

(d) Complete DD Form 2910 and the Safety Assessment Tool with the victim. Annotate the initial information for DSAID on DD Form 2965 (DSAID Data Form) for all reports of sexual assault. Provide the DD Form 2910 and the Safety Assessment Tool to the MCINCR-MCBQ Installation SARC and/or Command SARC either in-person, over the phone, or via encrypted email for filing per reference (a). Provide DD Form 2865 to the MCINCR-MCBQ Installation SARC and/or Command SARC either in-person or transmit the information via telephone. Ensure the safe and confidential handling of all forms until they are forwarded to the SARC. Provide all forms within 24-hours, or as soon as practical of a filed report of sexual assault. If the victim is a Reservist, information will be sent to MARFORRES for DSAID data entry.

(e) Provide a copy of DD Form 2910, DD Form 2701, and the Victims' Legal Counsel (VLC) Information Brochure to the victim.

(f) Notify emergency medical personnel immediately if a victim is suicidal, and law enforcement personnel if a victim is homicidal. Remain with the victim until their care has been handed-off and acknowledged by a first responder. Notify the MCINCR-MCBQ Installation SARC and/or Command SARC via the 24/7 MCINCR-MCBQ Sexual Assault Support Line at (703) 432-9999 or via the MCINCR-MCBQ SAPR Office at (703) 784-3557 during working hours.

(g) Ensure that each victim is aware of the methods to report retaliation and the resolution process, the expedited transfer request process, and contact information for requesting a military or civilian protective order.

(h) Notify the MCINCR-MCBQ Installation SARC and/or Command SARC immediately in-person, over the phone, or via encrypted email of all expedited transfer requests to or from the Installation.

(i) Maintain an up-to-date listing of local victim support services in order to provide appropriate referrals to victims of sexual assault. Collaborate with the MCINCR-MCBQ Installation SARC and/or Command SARC to facilitate the support services requested by the victim.

1. Installation and non-military resources are listed in enclosure (5) and additional resources can be researched that are specific to the location of the victim.

2. The resource feature on the DoD Safe Help Line website can also be utilized to obtain geographical resources within CONUS and OCONUS.

3. Conduct additional research to locate facilities that conduct SAMFES (Military Treatment Facilities (MTFs), Military Health Clinics, local rape crisis centers, etc.); provide behavioral and mental health options (MTFs, Military Health Clinics, Marine and Family Services, Community Counseling Centers, Family Advocacy Program, Civilian Employee Assistance Program, etc.); provide spiritual support (Chaplains, local spiritual groups and organizations, etc.); provide legal and law enforcement support (VLC, Staff Judge Advocates, Victim Witness Assistance Program, Naval Criminal Investigative Service, etc.); and 24/7 support services (DoD Safe Helpline, Sexual Assault Support Line, National Helplines, etc.) that victims can utilize where they are stationed.

4. Additional listings of national and federal agencies can be obtained from the MCINCR-MCBQ SAPR office.

(j) Attend the MCINCR-MCBQ CMG and SART meetings as directed by reference (a). The Fiscal Year (FY) CMG/SART calendar is published each year prior to the beginning of the FY for long-range planning purposes.

(k) Ensure a copy of the SAPR VA's Appointment Letter, Supervisors Statement of Understanding (page 10 of the D-SAACP Application Form), Victim Advocacy 40-hour Certificate of Training, and D-SAACP Credentialing Certificate is maintained in a known secured location and that copies have been provided to the MCINCR-MCBQ Installation SARC and/or Command SARC in compliance with reference (a) in order to facilitate proper staffing of the Installation's 24/7 Sexual Assault Support Line and to provide accurate referrals for victims. SAPR documentation can be sent via email, delivered in-person, or faxed to (703) 784-3260.

(l) Notify the MCINCR-MCBQ Installation SARC and/or Command SARC of any SAPR VA revocations.

(m) Ensure a copy of the command's SAPR policy letter is posted throughout the command's common areas and replaced upon a change of command.

(n) Post the SAPR VA's photograph on the HQMC SAPR approved template in the command's common areas, company/section read boards, and male and female restrooms. The template must include the MCINCR-MCBQ 24/7 Sexual Assault Support Line, reporting options, and exceptions to confidentiality. Maintain a list of where all posters are located in a command SAPR VA turnover binder. Conduct quality assurance checks on a bi-annual basis and provide documentation of the specific location of each SAPR VA posters to the MCINCR-MCBQ Installation SARC and/or Command SARC.

(o) Assist the Command in creating a FY SAPR Training Plan in order to meet SAPR training requirements. Provide the MCINCR-MCBQ Installation SARC and/or Command SARC with a copy of the command's FY SAPR Training Plan prior to the beginning of the FY in compliance with reference (a).

1. Training plans shall include all SAPR training requirements for Marines/Sailors, to include Annual Training, Take-A-Stand, Step-Up, Pre-Deployment/Post-Deployment Training, and other trainings as directed by HQMC SAPR.

2. Maintain and track all sign-in rosters and verify entry into MCTMS.

3. Forward a copy of the sign-in rosters and course evaluations (if applicable) to the MCINCR-MCBQ Installation SARC and/or Command SARC upon completion of each training event as directed by reference (a).

(p) Personnel aboard MCINCR-MCBQ appointed to support the SAPR program (Command SARCs and SAPR VAs) shall support the MCINCR-MCBQ 24/7 Sexual Assault Support Line.

1. Forward periods of non-availability on a quarterly basis (first week of October, January, April, and July) to the MCINCR-MCBQ SAPR office.

2. Personnel shall be D-SAACP credentialed, appointed in writing within their current command, and not pending any administrative or disciplinary action.

3. Detailed instructions for staffing of the MCINCR-MCBQ 24/7 Sexual Assault Support Line are provided in the 'SAPR Duty Resource Binder.' This Binder is checked-out along with a Duty Blackberry and SAMFE response clothing and toiletries prior to standing duty. The tour of duty is Monday to Monday with the change-over process occurring at 0900 each Monday. The SAPR Duty process for the MCINCR-MCBQ 24/7 Sexual Assault Support Line is not to be confused with enclosure (6), which is guidance for 'non-SAPR' personnel standing traditional 24-hour duty assignments within their respective commands.

(q) Perform all duties in accordance with the references.

(6) Healthcare Personnel, Naval Health Clinic Quantico

(a) Ensure that all healthcare personnel are aware of the policies for providing services to military victims of sexual assault, the references, and this Order. Ensure that all personnel have gone through SAPR training in accordance with the references.

(b) Notify the MCINCR-MCBQ Installation SARC and the Navy National Capital Region (NCR) SARC immediately on all reports of sexual assault in order to initiate base operational support or to provide information and referral assistance. Contact can be made via the 24/7 MCINCR-MCBQ Sexual Assault Support Line at (703) 432-9999 or via the MCINCR-MCBQ SAPR office at (703) 784-3557 during working hours. The Navy NCR SARC can be contacted via the 24/7 NCR Duty SAPR VA at (202) 258-6717 or the Navy NCR SAPR office at (202) 685-0440 during working hours.

(c) Be prepared to support SARCs and SAPR VAs with victims of sexual assault and the facilitation of the SAMFE kit.

(d) Provide routine care and follow-up treatment for victims who request medical services and referrals related to the sexual assault.

(e) Attend the MCINCR-MCBQ CMG and SART meetings as directed by reference (a). The Fiscal Year (FY) CMG/SART calendar is published each year prior to the beginning of the FY for long-rang planning purposes.

(7) Command Chaplain, MCINCR-MCBQ and Chaplains Assigned to Major Subordinate Commands (MSCs), Tenant Commands, and Activities

(a) Ensure all military religious service personnel are aware of the policies for providing services to military victims of sexual assault, the references, and this Order. Ensure all personnel have gone through SAPR training in accordance with the references.

(b) Be prepared to provide spiritual support to victims within the command. If a victim requests to file a report of sexual assault, refer them to the MCINCR-MCBQ Installation SARC, Command SARC, or MCINCR-MCBQ SAPR

office. Additional resources will be provided; such as, a SAPR VA, VLC, counseling options, and medical resources and the restricted reporting option may still be available. Contact can be made via the 24/7 MCINCR-MCBQ Sexual Assault Support Line at (703) 432-9999 or via the MCINCR-MCBQ SAPR Office at (703) 784-3557 during working hours.

(c) Attend the MCINCR-MCBQ CMG and SART meetings as directed by reference (a). The Fiscal Year (FY) CMG/SART calendar is published each year prior to the beginning of the FY for long-range planning purposes.

(8) Command Duty Officer (CDO), MCINCR-MCBQ

(a) Ensure that all watch personnel are familiar with enclosure (6) of this Order, how to access SAPR resources, and the location of the SAPR Protocol Binder while on duty.

(b) Notify the MCINCR-MCBQ Installation SARC and/or Command SARC immediately on all reports of sexual assault in order to initiate base operational support or to provide information and referral assistance. Contact can be made via the 24/7 MCINCR-MCBQ Sexual Assault Support Line at (703) 432-9999 (previously known as the 'Duty UVA' or 'On-Call SAPR VA') or via the MCINCR-MCBQ SAPR Office at (703) 784-3557 during working hours.

(c) Maintain confidentiality by not discussing sexual assault cases with anyone except the Installation Commander, Chief of Staff, Commanding Officer, SARC/SAPR VA, or law enforcement on a need-to-know basis.

(d) Maintain confidentiality by entering only those personnel notified and not any PII (or any information that will identify the victim) into the CDO logbook. Protecting the privacy of the victim while making the proper notifications is paramount.

c. Coordinating Instructions

(1) This Order will be revised as substantial changes to the SAPR program occur. In the interim, this Order shall 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 Department of Defense, Secretary of the Navy, and Commandant of the Marine Corps.

(2) Memoranda of Understanding/Agreements (MOU/MOA) pertaining to MCINCR-MCBQ will be initiated and/or revised, as directed, by the MCINCR-MCBQ Business Performance Office.

(a) A standard clause detailing SAPR support services and the notification process shall be included in the next review and revision of each applicable MOU/MOA in compliance with references (a) through (d).

(b) Specific attention will be paid to those commands not co-located aboard MCINCR-MCBQ and civilian organizations providing support services to military personnel.

(c) The MCINCR-MCBQ Installation SARC, the Office of Counsel, and the Command Staff Judge Advocate shall be consulted for each review and staffing pertaining to jurisdictional issues and services provided.

(3) Official taskers mandated by higher headquarters shall be forwarded via DON Tracker. Local request for support, not mandated by the references, will be communicated directly via Senior Command Leadership or internally via the eMCINCR-MCBQ SharePoint Portal. Consultation shall be made with the Assistant Chiefs of Staff, G-3, and G-1, as appropriate, on all taskers involving military personnel, major events, and Site Visits aboard MCINCR-MCBQ.

(4) Augmentation for temporary collateral assignments; such as, support for inspections or advisory panels, shall be reviewed by the Chief of Staff and Installation SARC on a case-by-case basis and subject to availability of personnel.

(a) The MCINCR-MCBQ SAPR Program Assistant and SAPR Officer-In-Charge/Staff Noncommissioned Officer-In-Charge are authorized to augment the MCINCR-MCBQ Command Inspection Program and to conduct assist visits upon completion of mandatory training requirements for all augment inspectors in compliance with NAVMC Directive 5040.6H.

(b) All inspections pertaining to the Inspectors General Checklist 1752 Sexual Assault Prevention and Response Program (SAPR) will be conducted under the direction of the MCINCR-MCBQ Installation SARC.

(5) Travel. A SARC or SAPR VA may be called upon to assist with arranging travel plans for the victim either in conjunction with the Legal Services Support Section (LSSS) or directly with the command for medical or administrative reasons.

(a) Flights for Victims. To ensure victim privacy for non-military justice related travel, the local SARC or SAPR VA is responsible for working with the receiving Installation SARC and VLC to ensure flight arrangement information is appropriately passed to the victim. For military justice related travel, the LSSS shall be involved with the travel coordination and funding process.

(b) Lodging for Victims. For military justice-related lodging, the local SARC or SAPR VA will work closely with the LSSS to ensure that the accused and the victim, are not staying in the same lodging facilities when reservations are made.

4. Administration and Logistics

a. Administration

(1) Recommendations for changes to this Order shall be submitted to the MCINCR-MCBQ SAPR Program (B 19) via the appropriate chain of command.

(2) Records created as a result of this Order 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.

(3) All DD Forms are located at the DoD Forms Management Program website at <http://www.dtic.mil/whs/directives/forms/index.htm>. Additional SAPR documents and the automated SAPR 8-Day Incident Report can be accessed via the eHQMC SharePoint Portal for SAPR at <https://ehqmc.usmc.mil/sites/family/mfb/sitepages/home.aspx> under SAPR MARADMINs.

(4) The most recent version of the following forms shall be used within the SAPR program:

(a) DD Form 2910, "Victim Reporting Preference Statement."

(b) DD Form 2701, "Initial Information for Victims and Witnesses of Crime."

(c) DD Form 2950, "DoD Sexual Assault Advocate Certification Program (D-SAACP) Application Form."

(d) DD Form 2965, "Defense Sexual Assault Incident Database (DSAID) Data Form."

(e) USMC Safety Planning for Victims of Sexual Assault (includes the Safety Screening Tool and Victim Safety Planning Worksheet).

(f) Automated SAPR 8-Day Incident Report (formerly called the SAPR 8-day Brief).

b. Logistics. MSCs shall coordinate through the MCINCR-MCBQ SAPR office on all matters requiring SAPR Program support. Urgent issues will be addressed immediately. Implementation concerns that require a collaborative approach will be reviewed during the SART meeting for course of action development and resolution, or elevated to higher headquarters.

(1) The MCINCR-MCBQ SAPR Office is located at 715-A, Broadway Street, Marine Corps Association (MCA) Annex, 3rd floor, Quantico, VA, 22134, commercial (703) 784-3557 or DSN 278-2557.

(2) The MCINCR-MCBQ 24/7 Sexual Assault Support Line is (703) 432-9999 (previously known as the 'Duty UVA' or 'On-Call SAPR VA').

(3) The MCINCR-MCBQ SAPR website is <http://www.quantico.marines.mil>, select "Offices & Staff" and then "Sexual Assault Prevention and Response."

(4) The DoD Safe Helpline is 1-877-955-5247.

5. Command and Signal

a. Command

(1) This Order is applicable to military personnel, civilian government employees, contractors, family members, and visitors aboard the Installation and all personnel assigned to organizations serving under the GCMCA of the Commander, MCINCR-MCBQ.

(2) When assigned to an official sexual assault case report all case information directly to the MCINCR-MCBQ Installation SARC and/or Command SARC while carrying out sexual assault advocacy responsibilities in order to meet the notification requirements and confidentiality protocols.

(3) MSCs, tenant commands, and tenant activities are responsible for implementing the provisions of this Order, as well as developing appropriate internal SAPR policies and procedures to enhance the command climate, reporting process, and preventative efforts of SAPR program within their command.

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

A handwritten signature in black ink, appearing to read "X All D. Broughton". The signature is written in a cursive style and is positioned above a horizontal line.

A. D. BROUGHTON
Chief of Staff

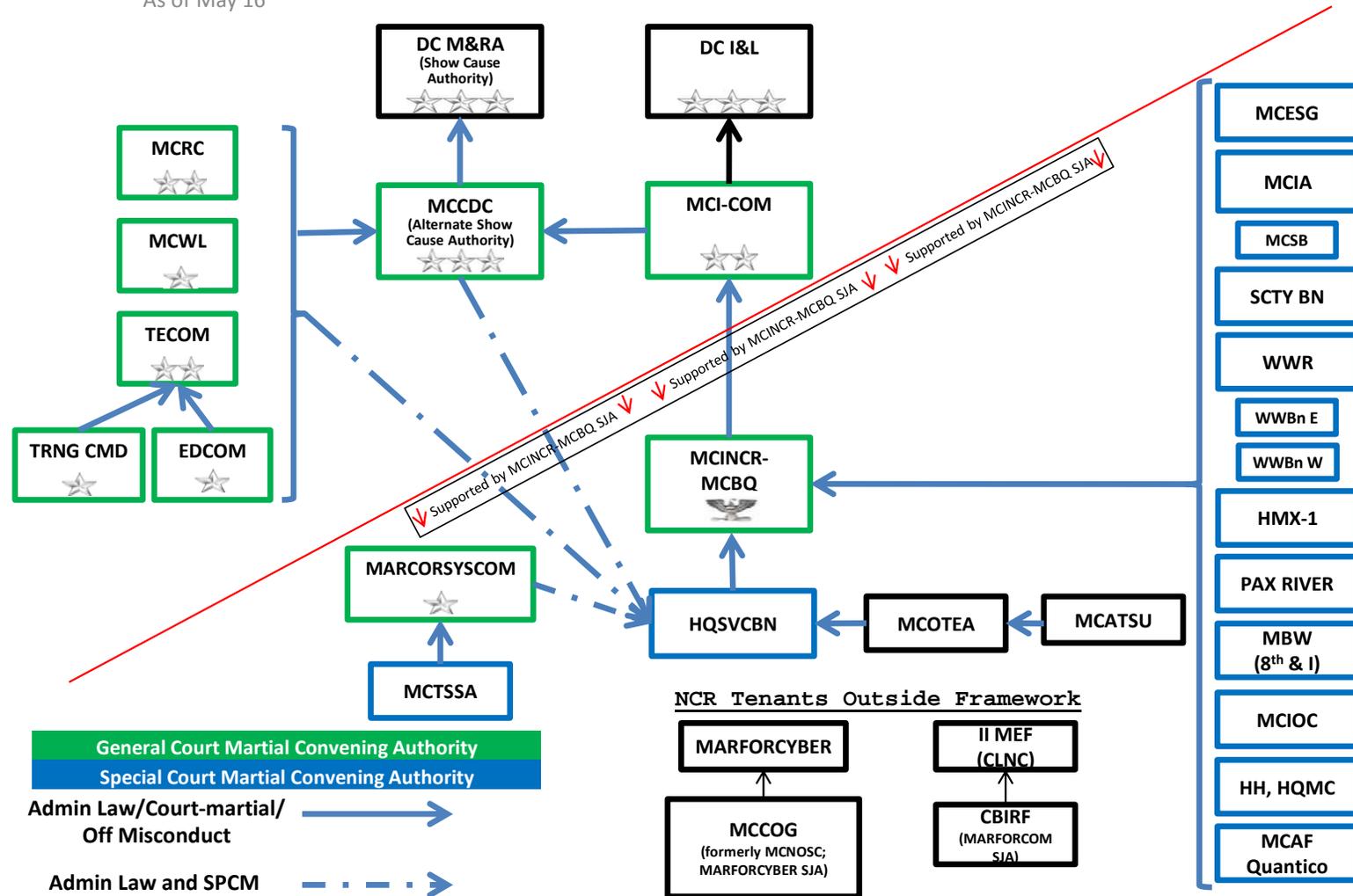
Signed by: BROUGHTON.ALLEN.DALE.1168122922

DISTRIBUTION STATEMENT: A

NCR COMMAND AND LEGAL RELATIONSHIPS CHART

NCR Command & Legal Relationships

As of May 16



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 Order.

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 multi-disciplinary 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 Courts-Martial, 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'] is 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.

MCINCR-MCBQO SAPR RESOURCES FOR VICTIMS TO REPORT RETALIATION

1. Resources for Victims to Report Retaliation, Reprisal, Ostracism, Maltreatment, Sexual Harassment, or to Request an Expedited/Safety Transfer or Military Protective Order (MPO)/Civilian Protective Order (CPO)

a. Sexual Assault Response Coordinators (SARCs) and Sexual Assault Prevention and Response Victim Advocates (SAPR VAs) must inform victims of the resources available to report instances of retaliation, reprisal, ostracism, maltreatment, sexual harassment, or to request a transfer or MPO.

b. If the allegation is criminal in nature and the victim filed an Unrestricted Report, the crime should be immediately reported to a Military Criminal Investigative Organization (MCIO), even if the crime is not something normally reported to an MCIO (e.g., victim's personal vehicle was defaced). Victims can seek assistance on how to report allegations by requesting assistance from:

(1) A SARC, SAPR VA, or Special Victims' Counsel (SVC) SVC/Victims' Legal Counsel (VLC).

(2) A SARC on a different installation, which can be facilitated by the DoD Safe Helpline.

(3) Their immediate commander.

(4) A commander OUTSIDE their chain of command.

(5) Service personnel to invoke their Service-specific reporting procedures regarding such allegations in accordance with SECNAVINST 5370.7D, "Prohibition of Retaliation Against Members of the Armed Forces Reporting a Criminal Offense."

(6) Service Military Equal Opportunity (MEO) representative to file a complaint of sexual harassment.

(7) A General or Flag Officer (G/FO) if the retaliation, reprisal, ostracism, or maltreatment involves the administrative separation of victims within 1 year of the final disposition of their sexual assault case. A victim may request that the G/FO review the separation in accordance with DoD Instruction 1332.14, "Enlisted Administrative Separations" or DoD Instruction 1332.30, "Separation of Regular and Reserve Commissioned Officers."

(8) A G/FO if the victim believes that there has been an impact on their military career because they reported a sexual assault or sought mental health treatment for sexual assault that the victim believes is associated with the sexual assault. The victim may discuss the impact with the G/FO.

(9) An SVC or VLC, trial counsel and Victim Witness Assistance Program (VWAP) representative, or a legal assistance attorney to facilitate reporting with a SARC or SAPR VA.

(10) Service personnel to file a complaint of wrongs in accordance with Article 138 of the UCMJ (section 938 of Title 10, United States Code).

(11) Inspector General, Department of Defense, invoking whistleblower protections in accordance with DoD Directive 7050.06, "Military Whistleblower Protection."

(12) Commander or SARC to request an Expedited Transfer.

(13) Commander or SARC to request a safety transfer or an MPO and/or CPO, if the victim is in fear for her or his safety.

(14) The MCIO, if the allegation is of an act that is criminal in nature and the victim filed an Unrestricted Report. The allegation should immediately be reported to an MCIO.

2. Additional definitions, avenues to report, important considerations when reporting, resources, and points of contact are contained in MARADMIN 285/16.

3. A complete listing of local resources and their contact information is contained in enclosure (5) of this Order. If immediate assistance is required, contact one of the resources listed below:

MCINCR-MCBQ Installation Sexual Assault Response Coordinator (SARC) and Sexual Assault Prevention and Response Victim Advocate (SAPR VA) Coordinator
(703) 784-3557 (DSN: 278-3557)

MCINCR-MCBQ 24/7 Sexual Assault Support Line (On-Call SAPR VA)
(703) 432-9999 (DSN: 378-9999)

MCINCR-MCBQ Command Chaplain
(703) 784-2131 (DSN: 278-2131)

MCINCR-MCBQ 24/7 Command Duty Officer
(703) 784-2707 (DSN: 278-2707)

TECOM Command SARC/MARFOR SARC
(703) 432-0245/0988 (DSN: 378-0245/0988)

TCOM Command SARC
(703) 784-3230 (DSN: 278-3230)

MCRC Command SARC/MARFOR SARC
(703) 784-1999 (DSN: 278-1999)

HMX-1 Command SARC
(571) 494-4784

H&S Bn, HQMC/Henderson Hall Installation SARC
(703) 693-4733

DoD Safe Helpline
1-877-955-5247
Text: "[Installation Name]" to 55-247
Online: www.safehelpline.org

Regional Victims' Legal Counsel (VLC), National Capital Region Legal Services Support Section
(703) 784-4514 (DSN: 278-4514)

Command Staff Judge Advocate
(703) 784-3690 (DSN: 278-3690)

Special Assistant U.S. Attorney/Installation Victim Witness Liaison Officer
(703) 299-3706

Command Inspector General's Office
(703)784-2277 (DSN: 278-2277) Hotline: (703)784-2392

Command Equal Opportunity Advisor
(703) 432-0764 (DSN: 378-0764)

Emergency
911

NCIS Quantico (DCQV)
(703) 784-2993/94/95 (DSN: 278-2993/94/95)

MCINCR-MCBQ Provost Marshals Office (PMO)
(703) 784-2251/2252/2253 (DSN: 278-2251/2252/2253)

COMMANDER'S PROTOCOL FOR RESPONDING TO ALLEGATIONS OF SEXUAL ASSAULTS

1. To prevent sexual assault, all commanders shall:

a. Establish a command climate of prevention predicated on mutual respect and trust, that recognizes and embraces diversity, and values contributions of all members.

b. Remind Marines of their personal commitment to maintaining a healthy environment that is safe and contributes to their well-being and mission accomplishment.

c. Monitor the organization's climate and respond with appropriate action toward any negative trends that may emerge.

2. In the event of a sexual assault, commanders shall:

a. Discourage members from participating in "barracks gossip" or speculation about the case or investigation, reminding all to wait in reaching conclusions until all the facts are known and final disposition of the allegations has occurred.

b. Advise those who may have knowledge of the events leading up to or surrounding the incident to fully cooperate with any investigation.

c. Remind members that discussion of a possible sexual assault incident might compromise an ensuing investigation.

d. Emphasize the alleged offender is presumed innocent until guilt is established by legal and competent evidence beyond reasonable doubt.

e. Coordinate unit refresher training with UVA and/or SARC. Address preventive measures and the impact on the unit. Assess and be cognizant of the needs of the victim at this time, recognizing that increased attention on him/her during this period may be detrimental.

f. Continuously monitor the unit's climate to ensure neither the victim nor the alleged offender is being ostracized, and to prevent organizational splintering.

3. The victim's commander shall:

a. Ensure the physical safety and emotional security of the victim. Determine if the alleged offender is still nearby and if the victim desires/needs protection.

b. Ensure emergency medical care is offered if necessary and/or requested by the victim.

c. Ensure the SARC is notified immediately.

d. Ensure notification to the appropriate military criminal investigative organization (MCIO), as soon as the victim's immediate safety is addressed,

and medical treatment procedures are in motion. To the extent practicable, strictly limit knowledge of the facts or details regarding the incident to only those personnel who have a legitimate need-to-know.

e. Ensure necessary action to safeguard the victim from any formal (official) or informal investigative interviews or inquiries, except those conducted by the authorities who have a legitimate need-to-know.

f. Submit the OPREP-3/SIR report for all unrestricted reports of sexual assault when the victim is a Marine or other Service member assigned to a Marine Corps unit.

g. Complete the SAPR 8-Day brief when the victim is a Marine. Ensure collection of only the necessary information. Do not ask detailed questions and/or pressure the victim for responses or information about the incident.

h. Ensure the victim is advised of the need to preserve evidence (by not bathing, showering, washing garments, etc.) while waiting for the arrival of representatives of the MCIO.

i. Ensure assistance with or provide immediate transportation for the victim to the hospital or other appropriate medical facility. Encourage evidence collection, as there is only a small window of opportunity to collect it.

j. Ensure the victim understands the availability of victim advocacy and the benefits of accepting advocacy and support.

k. Ensure the victim is asked if a support person is needed, which can be a friend or family member, to immediately join the victim. Ensure the victim is advised that this person could later be called to testify as a witness if the case goes to trial.

l. Ensure a UVA/VA is made available to the victim. If not already appointed, the SARC will assign a UVA/VA to meet with and provide support to the victim.

m. Ensure the victim is offered a chaplain and notify accordingly.

n. Determine if the victim desires/needs a "no contact" order or an MPO, DD Form 2873, to be issued, particularly if the victim and the alleged offender are assigned to the same command, unit, duty location, or living quarters.

o. Ensure the victim understands working with a victim advocate is voluntary and the availability of other referral organizations staffed with personnel who can explain the medical, investigative, and legal processes and advise of the victim's support rights.

p. Ensure the victim is advised of the expedited transfer process and facilitate the expedited transfer when requested by the victim. Determine the need for an temporary reassignment to another unit, duty location, or living

quarters on the installation of the victim or the alleged offender being investigated, working with the commander of the alleged offender if different than the victim's commander, until there is a final legal disposition of the sexual assault allegation, and/or the victim is no longer in danger.

q. Attend the monthly CMG meeting until case involving command personnel is closed.

r. Ensure the victim receives monthly reports regarding the status of the sexual assault investigation until its final disposition.

s. Initial disposition authority is withheld to the SA-IDA for all other alleged offenses arising from or relating to a reported sexual assault, whether committed by the alleged offender or the alleged victim. The SA-IDA has the non-delegable responsibility for initial disposition as defined in the Manual for Courts-Martial, 2012. Such offenses commonly include underage drinking, traveling out-of-bounds or to off-limits establishments, fraternization, or adultery. In cases involving a victim's collateral misconduct, the SA-IDA is encouraged to defer a victim's disciplinary proceeding until final disposition of the more serious sexual assault case in accordance with DOD Instruction 6495.02.

t. Avoid automatic suspension or revocation of a security clearance and/or Personnel Reliability Program (PRP) access, understanding the victim may be satisfactorily treated for related trauma without compromising the victim's security clearance or PRP status. Consider the negative impact suspension of a victim's security clearance may have on building a climate of trust and confidence in the Marine Corps sexual assault reporting system, but make the final determination based upon established national security standards.

u. Throughout the investigation, consult with the victim and, when possible, accommodate the victim's desires regarding safety, health, and security, as long as neither a critical mission nor a full and complete investigation are compromised.

v. Listen/engage in support of the victim, as needed. Be available in the weeks and months following the sexual assault, and assure the victim of the commander's support.

4. The alleged offender's commander shall:

a. Ensure notification to the appropriate MCIO as soon as possible after receiving a report of a sexual assault incident.

b. Safeguard the alleged offender's rights and preserve the integrity of a full and complete investigation.

c. Restrict information pertinent to an investigation to those who have an official need-to-know.

d. Ensure procedures are in place to inform the alleged offender, as appropriate, about the investigative and legal processes that may be involved.

e. Ensure procedures are in place to inform the alleged offender about available counseling support.

f. Determine the need of the issuance of an MPO, DD Form 2873.

g. Monitor the well-being of the alleged offender, particularly for indications of suicidal ideation, and ensure appropriate intervention occurs if indicated.

h. Submit an Operations Event/Incident Report (OPREP-3) Serious Incident Report (SIR), for all reports of sexual assault when the victim is a civilian and the alleged offender is a Marine or other Service member assigned to a Marine Corps unit.

MCINCR-MCBQ SAPR LOCAL COMMUNITY AND NATIONAL RESOURCES
QUICK REFERENCE GUIDE

MCINCR-MCBQ Installation Sexual Assault Response Coordinator (SARC) and Sexual Assault Prevention and Response Victim Advocate (SAPR VA) Coordinator
(703) 784-3557 (DSN: 278-3557)

MCINCR-MCBQ 24/7 Sexual Assault Support Line (On-Call SAPR VA)
(703) 432-9999 (DSN: 378-9999)

MCINCR-MCBQ Command Chaplain
(703) 784-2131 (DSN: 278-2131)

MCINCR-MCBQ 24/7 Command Duty Officer
(703) 784-2707 (DSN: 278-2707)

TECOM Command SARC/MARFOR SARC
(703) 432-0245/0988 (DSN: 378-0245/0988)

TCOM Command SARC
(703) 784-3230 (DSN: 278-3230)

MCRC Command SARC/MARFOR SARC
(703) 784-1999 (DSN: 278-1999)

HMX-1 Command SARC
(571) 494-4784

H&S Bn, HQMC/Henderson Hall Installation SARC
(703) 693-4733

Navy Medical Clinic Quantico Sexual Assault Medical Forensic Exam (SAMFE) Program Manager
(703) 784-1639 (DSN: 278-1639)

Regional Victims' Legal Counsel (VLC), National Capital Region Legal Services Support Section
(703) 784-4514 (DSN: 278-4514)

Command Staff Judge Advocate
(703) 784-3690 (DSN: 278-3690)

Special Assistant U.S. Attorney/Installation Victim Witness Liaison Officer
(703) 299-3706

DoD Safe Helpline
1-877-955-5247
Text: "[Installation Name]" to 55-247
Online: www.safehelpline.org

Command Inspector General's Office
(703)784-2277 (DSN: 278-2277) Hotline: (703)784-2392

Command Equal Opportunity Advisor
(703) 432-0764 (DSN: 378-0764)

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LAW ENFORCEMENT

Emergency

911

NCIS Quantico (DCQV)

(703) 784-2993/94/95 (DSN: 278-2993/94/95)

MCINCR-MCBQ Provost Marshals Office (PMO)

(703) 784-2251/2252/2253 (DSN: 278-2251/2252/2253)

Town of Quantico Police Department

(703) 792-6500

Stafford County Sheriff's Office

(540) 658-4450

Prince William County Police Department

(703) 792-6500

Fairfax County Police Department

(703) 691-2131

Metropolitan Police Department, Washington, DC

(202) 727-9099

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MEDICAL SERVICES

Type: Military Medical Services

Name: Naval Medical Clinic

Address: 3259 Catlin Ave., Quantico, VA 22134

Telephone Number: (703) 784-1725/1755

Business Hours: 0800-1630, Monday-Friday

Notes: If requested by the victim, the SARC or SAPR VA can contact the Sexual Assault Forensic Examiner to coordinate the victim's arrival and Sexual Assault Medical Forensic Exam (SAMFE). Victims can also coordinate their own SAMFE independent of a SARC or SAPR VA. Additional guidance will be provided to the victim, by the Examiner, upon initial telephone contact. There are no emergency services available aboard Marine Corps Quantico; therefore, SAMFEs requested after-hours and on weekends, will be conducted at the local medical facilities listed herein.

Type: Military Medical Emergency Services

Name: Fort Belvoir Community Hospital

Address: 9300 DeWitt Loop, Fort Belvoir, VA 22060

Telephone Number: (571) 231-3224

Business Hours: 24/7

Notes: If requested by the victim, the Emergency Room staff will contact the INOVA FACT (the civilian equivalent of a Sexual Assault Forensic Examiner) when a victim presents to the Emergency Room requesting a SAMFE.

Type: Civilian Medical Emergency Services

Name: Mary Washington Hospital

Address: 1001 Sam Perry Blvd., Fredericksburg, VA 22401

Telephone Number: (540) 741-1100

Business Hours: 24/7

Notes: If requested by the victim, the SARC or SAPR VA can contact the on-call Sexual Assault Forensic Examiner to coordinate the victim's arrival and SAMFE. Victims can also coordinate their own SAMFE independent of a SARC or SAPR VA. Additional guidance will be provided to the victim, by the Examiner, upon initial telephone contact.

MENTAL HEALTH SERVICES

Type: Military Mental Health Services/Clinical Counseling

Name: Naval Medical Clinic

Address: 3259 Catlin Ave., Quantico, VA 22134

Telephone Number: (703) 784-1725

Business hours: 0800-1630, Monday-Friday

Notes: Victims can call or walk-in and self-refer for an intake and appointment. Paperwork will be requested from the victim upon scheduling an appointment. This is done in compliance with HIPPA rules and regulations.

Type: Military Emergency Mental Health Services

Name: Fort Belvoir Community Hospital

Address: 9300 DeWitt Loop, Fort Belvoir, VA 22060

Telephone Number: (571) 231-3224

Business Hours: 24/7

Notes: The Emergency Room staff is the primary point of contact when a victim presents to the Emergency Room with a mental health concern. Options and courses of action will be discussed directly with victim by the medical staff.

Type: Military Non-Clinical Counseling

Name: MCCS Behavioral Health Community Counseling Center

Address: Main Side Office, Little Hall, Lower Level, 2034 Barnett Ave., Quantico, VA

Telephone Number: (703) 784-4248

Address: West Side Office, Cox Hall, Camp Barrett, 24009 Montezuma Ave., Quantico, VA

Telephone Number: (703) 432-6442

Business hours: 0800-1630, Monday-Friday

Notes: If requested by the victim, a referral can be made as a warm hand-off to the Community Counseling Center. Per MCO 1754.14, the Community Counseling Center is responsible for coordinating care for victims requiring ancillary services. Care coordination is a collaborative process that assesses, plans, implements, coordinates, monitors and evaluates options and services to meet client needs. This has been shown to greatly improve outcome for victims, particularly trauma victims.

MCINCR-MCBQ Family Advocacy Program

(703) 784-2570 (DSN: 278-2570)

(703) 350-1688, 24/7 Hotline

MCINCR-MCBQ Consolidate Substance Abuse Counseling Center

(703) 784-3502 (Mainside) (DSN: 278-3502)

(703) 432-6442 (Westside) (DSN: 378-6442)

ADDITIONAL COMMUNITY AND NATIONAL RESOURCES

Sexual Assault Victims' Advocacy Service (SAVAS)

www.savasofpwc.org
(703) 497-1192, office
(703) 368-4141, 24-Hour Hotline

Rappahannock Council Against Sexual Assault (RCASA)

www.rcasa.org
(540) 371-1666, 24-Hour Hotline

DC Rape Crisis Center

www.dcrcc.org
(202) 333-RAPE, 24-Hour Hotline
(202) 328-1371, TTY
Male counselors are available

Virginia Sexual and Domestic Violence Action Alliance

www.vadv.org
(800) 838-8238, 24-Hour Hotline, V/TTY

Fort Belvoir Sexual Assault Response Coordinator & Victim Advocacy Program

(703) 919-0986, 24-Hour Hotline

Alexandria Sexual Assault Response & Awareness (SARA)

(703) 683-7273, 24-Hour Hotline

Fairfax-Falls Church Community Services Board, Victim Assistance Network

(703) 360-7273, Hotline

Department of Defense Safe Helpline

www.safehelpline.org
(877) 995-5247

In support of the Department of Defense Sexual Assault Prevention and Response (SAPR) Programs, the DoD Safe Helpline is a groundbreaking crisis support service for members of the DoD community affected by sexual assault. Safe Helpline provides live, one-on-one specialized support and information, and is confidential, anonymous and secure. Safe Helpline services are available worldwide, 24/7 – providing victims with the help they need anytime, anywhere. Users can also text their zip code or installation/base name to 55-247 (in the U.S.) or (202) 470-5546 (outside the U.S.), and Safe Helpline will text back contact information for the resources requested.

Rape, Abuse and Incest National Network (RAINN)

National Sexual Assault Hotline
www.rainn.org
(800) 656-HOPE, partners with 1,100 rape crisis centers across the nation, providing free, confidential advice 24 hours a day, 7 days a week.

National Sexual Assault Online Hotline

<https://ohl.rainn.org/online/>
RAINN also operates the National Sexual Assault Online Hotline which provides live, secure, anonymous crisis support for victims of sexual assault, their friends, and families over RAINN's website. The Online Hotline is free of charge and is available 24 hours a day, 7 days a week.

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Military One Source

www.militrayonesource.com
(800) 342-9647, stateside 24-Hour Hotline
(877) 888-0727, Spanish
00-800-3429-6477, overseas
(484) 530-5908, overseas collect

National Domestic Violence

(800) 799-SAFE, 24-Hour Hotline

National Suicide Prevention Lifeline

(800) 273-TALK (8255), 24-Hour Hotline

National Stalking Resource Center

(800) FYI-CALL (1-800-394-2255), office

National Teen Dating Abuse Helpline

(866) 331-9474, 24-Hour Hotline
(866) 331-8453, TTY

* Additional resources and federal agencies can be obtained from the MCINCR-MCBQ SAPR office.

MCINCR-MCBQ NON SAPR PERSONNEL WATCH STANDER CHECKLIST

Per OPNAVINST 1752.1C dated 13 Aug 2015, upon a command or staff duty officer or quarterdeck watch stander being contacted by an individual who indicates he or she has been sexually assaulted, follow the steps below:

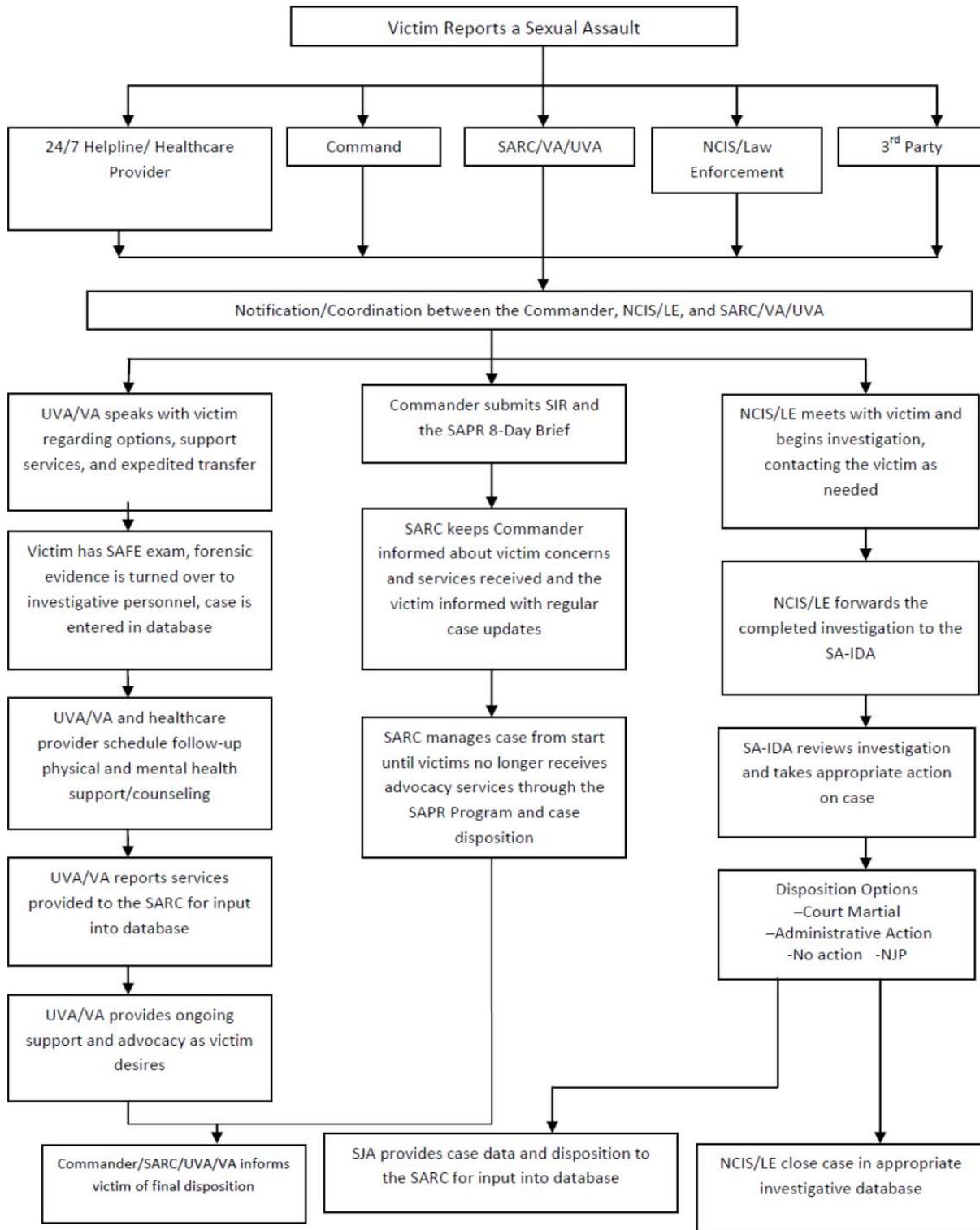
NOTE: Do not ask for the caller's name, rank, or any other means of identification. Doing so could take away the caller's option to make a restricted report.

- Ask the caller if he or she is safe. If not, recommend that the caller proceed to a safe environment or call 911 as appropriate.
- Ask the caller if he or she needs immediate medical attention. If needed, provide the caller information to assist him or her obtain medical services as appropriate. In cases of emergency, recommend the caller contact 911 for immediate assistance.
- Immediately advise the caller, "If you divulge your identity and any information about the assault, your reporting options will be limited to filing only an unrestricted report which would initiate an investigation into the allegation."
- Advise the caller to contact the DoD Safe Helpline, MCINCR-MCBQ Installation SARC, Command SARC, SAPR VA, or Victims' Legal Counsel if he or she desires to make a restricted report. (Point of contact information is provided in enclosure (5) or this Order.)
- Inform the on-call/duty SAPR VA (by calling (703) 432-9999) that you have a caller who desires to be placed in contact with an on-call SAPR VA and pass on the individual's telephone number. If necessary, leave a voice mail for the on-call/duty SAPR VA requesting a call be made to the caller's telephone number provided.
- Before terminating the telephone call, advise the caller that a SAPR VA or SARC will be contacting him or her directly and provide the SAPR VA or SARC contact information to the caller.
- If the caller prefers to be contacted by a SARC, SAPR VA, or Victims' Legal Counsel directly, obtain his or her telephone number, place him or her on hold, and contact the MCINCR-MCBQ on-call/duty SAPR VA at (703) 432-9999.
- If requested, provide the caller with the following contact information:

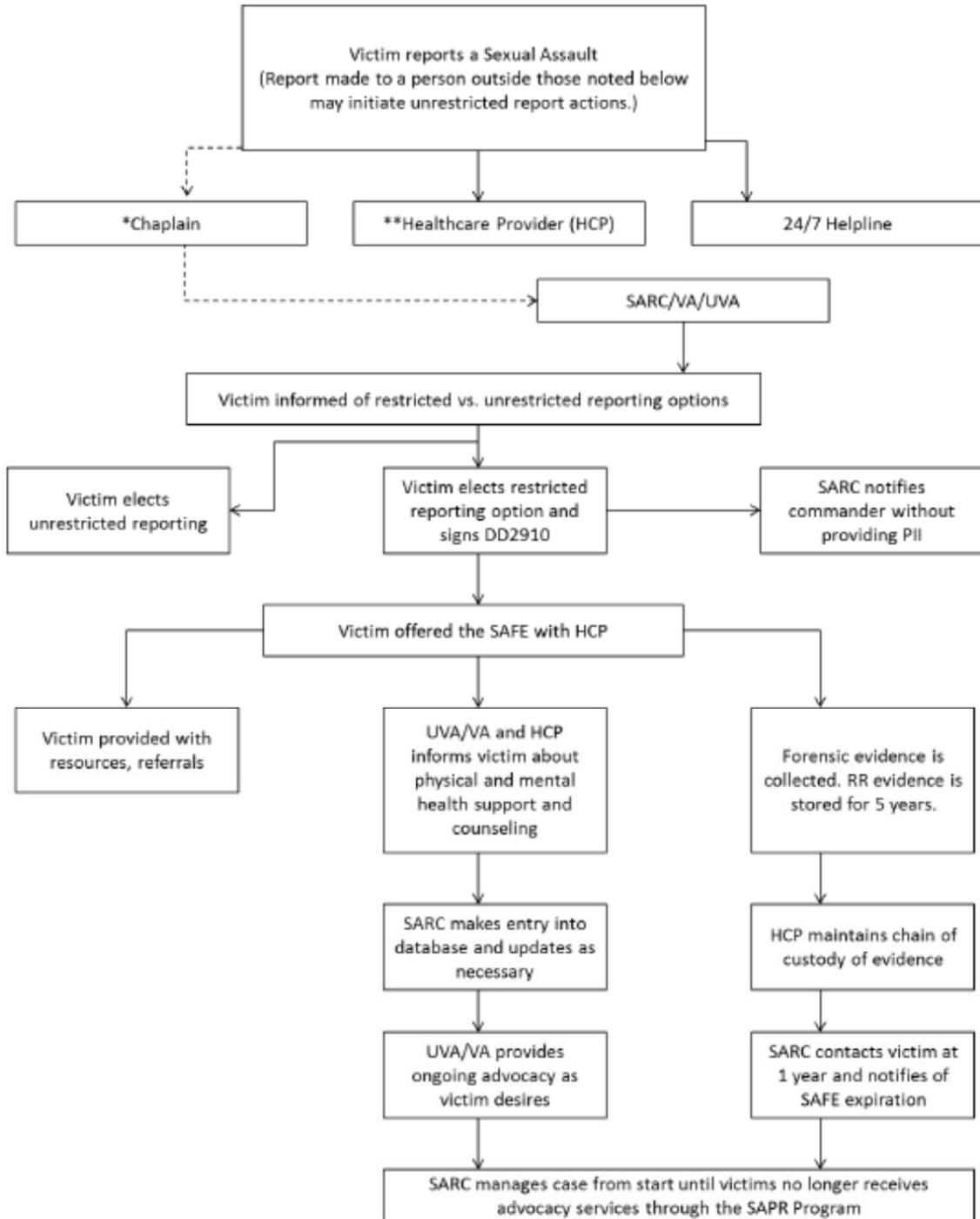
<u>MCINCR-MCBQ Installation SARC and SAPR Office:</u>	(703) 784-3557
<u>MCINCR-MCBQ Chaplain:</u>	(703) 784-2131
<u>MCINCR-MCBQ 24/7 Sexual Assault Support Line:</u>	(703) 432-9999
<u>Regional Victims' Legal Counsel:</u>	(703) 784-4514
<u>NMCQ Sexual Assault Medical Forensic Exam Program Manager:</u>	(703) 784-1639
<u>DoD Safe Helpline:</u>	1-877-955-5247

Note: Contact information for local Command SARCs, medical and counseling resources, and other support agencies is provided in enclosure (5) of this Order.

SEXUAL ASSAULT UNRESTRICTED REPORT AND RESPONSE FLOWCHART



SEXUAL ASSAULT RESTRICTED REPORT AND RESPONSE FLOWCHART



*Because of the rules governing confidential communications to chaplain (SECNAVINST 1730.9), when a victim discloses a sexual assault to the chaplain, the chaplain is not permitted to report the assault to the command or SARC. Chaplains are trained to explain SAPR and the role of the VA. Victims may then speak to a SARC/VA/UVA and select a restricted or unrestricted report.

**Under restricted reporting, victims may disclose a sexual assault to a HCP and be referred to the SARC/VA/UVA to make a formal election.