



Department of Defense INSTRUCTION

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Incorporating Change 9, March 18, 2025

USD(P&R)

SUBJECT: Adult Sexual Assault Prevention and Response: Program Procedures

References: See Enclosure 1

1. **PURPOSE.** This instruction is composed of multiple volumes, each containing its own purpose. In accordance with the authority in DoD Directives (DoDD) 5124.02 and 6495.01 (References (b) and (c)):

a. This instruction establishes and implements policy, establishes procedures, provides guidelines and model programs, delegates authority, and assigns responsibilities regarding the prevention of and response to adult victims of sexual assault and any associated retaliation in the DoD.

b. This volume:

(1) Reissues DoD Instruction (DoDI) 6495.02 (Reference (a)).

(2) Establishes policy, implements Reference (c), assigns responsibilities, and provides guidance and procedures for the Sexual Assault Prevention and Response (SAPR) Program (see Glossary in Reference (c)).

(3) Establishes the processes and procedures for the Sexual Assault Forensic Examination (SAFE) Kit. For forensic examination procedures see DoDI 6310.09, "Health Care Management for Patients Associated with a Sexual Assault" (Reference (aj)).

(4) Establishes the multidisciplinary monthly Case Management Group (CMG), Quarterly CMG (QCMG), and High-Risk Response Team (HRRT) (see Enclosure 9) and provides guidance on how to handle sexual assault.

(5) Establishes SAPR minimum program standards, SAPR training requirements, and SAPR requirements for the DoD Annual Report on Sexual Assault in the Military consistent with Title 10, United States Code (Reference (d)), the DoD Task Force Report on Care for Victims of

Sexual Assault (Reference (e)), and pursuant to References (b) and (c) and Public Laws 106-65, 108-375, 109-163, 109-364, 110-417, 111-84, 111-383, 112-81, 112-239, 113-66, and 113-291 (References (f) through (p)).

(6) Implements section 536 of the National Defense Authorization Act (NDAA) for Fiscal Year (FY) 2016 (Reference (q)) that preempts State laws that require disclosure of personally identifiable information (PII) of the adult sexual assault victim or suspect to local or State law enforcement, except when reporting is necessary to prevent or mitigate a serious and imminent threat to the health or safety of an individual then an exception may apply.

(7) Incorporates and cancels Directive-Type Memorandum (DTM) 11-063 (Reference (r)), DTM 11-062 (Reference (s)), and DTM 14-007 (Reference (t)). It also incorporates and cancels Under Secretary of Defense for Personnel and Readiness (USD(P&R)) memoranda in References (bd) (Revisions to the SAPR Expedited Transfer Policy), (bl) (SAPR services for DoD civilian employees), (bu) (Safe-To-Report policy), and (bw) (Inclusion of Race and Ethnicity in Annual Reports).

2. APPLICABILITY

a. This instruction applies to:

(1) OSD, the Military Departments, the National Guard only when its National Guard members are on Title 10 orders, the Office of the Chairman of the Joint Chiefs of Staff and the Joint Staff, the Combatant Commands, the Office of Inspector General of the Department of Defense (OIG), the Defense Agencies, the DoD Field Activities, and all other organizational entities within the DoD (hereinafter referred to collectively as the “DoD Components”).

(2) National Guard (NG) and Reserve members, when on Title 10 orders, who are sexually assaulted when performing active service, as defined in section 101(d)(3) of Reference (d), and inactive duty training. 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 Sexual Assault Response Coordinator (SARC) and a SAPR Victim Advocate (VA), and the appropriate non-medical referrals, if requested, in accordance with section 584(a) of the NDAA for FY 2012 (Reference (m)), as amended by Section 1724 of the NDAA for FY 2014 (Reference (o)). They also have access to a Special Victims' Counsel, Victims' Legal Counsel, or Victims' Counsel (SVC/VLC/VC) in accordance with section 1044e of Reference (d) and are eligible to file a Restricted or Unrestricted Report. Reports of prior-to-military service sexual assault shall 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). Reserve Component 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.

(3) Military dependents 18 years of age and older who are eligible for treatment in the military health 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 (See Glossary). Adult military dependents may file Unrestricted or Restricted Reports of sexual assault.

(4) 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 (MTF) unless that individual is otherwise eligible as a Service member or TRICARE (<http://www.tricare.mil>) beneficiary of the MHS. This policy does not confer any additional healthcare or other benefits for which the individuals are already eligible by law or other DoD policies. 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 and information on available resources.

(a) DoD civilian employees.

1. In accordance with section 1101 of the NDAA for FY 2023 (Reference (ay)), DoD civilian employees may file Restricted and Unrestricted Reports of sexual assault to the extent provided for in the Appendix to Enclosure 4 of this volume.

2. The DoD Components that have SAPR programs will permit their respective DoD civilian employees to submit Restricted or Unrestricted Reports to their respective SAPR programs and follow the procedures in the Appendix to Enclosure 4 of this volume.

3. DoD Components that do NOT have a SAPR Program, may enter into a written agreement with another DoD component that has an established SAPR program to utilize their SAPR program and resources, in accordance with the terms of the written agreement, subject to the availability of funds and resources.

(b) Adult dependents (18 years of age and older) of civilian employees, stationed OCONUS and who are eligible for treatment in the MHS at military installations or facilities OCONUS pursuant to DoDM 1000.13, Volume 2, Reference (bp), are only eligible to make an Unrestricted Report of sexual assault and will be offered limited SAPR services.

(c) 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, only have the Unrestricted Reporting option and will be offered limited SAPR services. Medical services may be provided to contractors covered under this instruction in accordance with DoDI 3020.41 (Reference (u)) as applicable.

(5) Service members who were victims of sexual assault PRIOR to enlistment or commissioning are eligible to receive SAPR services (see Glossary) and can elect either reporting option. The DoD shall provide support to Service members regardless of when or where the sexual assault took place and the SARC or SAPR VA will assist a victim to complete a DD Form 2910, "Victim Reporting Preference Statement".

(a) Prior-to-military service sexual assault includes adult sexual assault and sexual assault that was perpetrated on Service members while they were still children.

(b) 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).

b. This instruction does NOT apply to victims of sexual assault perpetrated by a spouse or intimate partner (see Glossary), or military dependents under the age of 18 who are sexually assaulted. The Family Advocacy Program (FAP), as described in Volume 2 of DoD Manual 6400.1 (Reference (v)), 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 SARC or SAPR VA will conduct a warm handoff (See Glossary) to the installation FAP staff.

c. DoD components shall comply with collective bargaining obligations, as applicable.

3. DEFINITIONS. See Glossary.

4. POLICY. It is DoD policy, in accordance with Reference (c), that:

a. The volumes in this instruction, DoDI 6495.02, and in SAPR DoD Directive 6495.01 (Reference (c)) establish and implement the DoD SAPR program. Unrestricted and Restricted Reporting options are available to Service members, and their adult military dependents in accordance with this instruction.

b. The DoD goal is a culture free of sexual assault, through an environment of prevention, education and training, response capability (see Glossary), victim support, reporting procedures, and appropriate accountability that enhances the safety and well-being of all persons covered by this instruction and Reference (c).

(1) While an adult sexual assault victim may “disclose” information to whomever they choose, for purposes of the SAPR program an official “report” of adult sexual assault (not FAP-related) is made only when:

(a) A DD Form 2910 or a DD Form 2910-8 is signed and filed with a SARC or SAPR VA,

(b) A Military Criminal Investigative Organization (MCIO) investigator initiates an investigation, or

(c) Reported to in the Safe Helpline, when operational as specifically authorized by the USD (P&R) to implement Section 549H of the NDAA for FY 2022 (Reference (bm)).

(2) For Restricted and Unrestricted Reporting purposes, a report can be made to DoD healthcare (medical and mental health) personnel, but healthcare personnel must then

immediately contact the SARC or SAPR VA to fill out the DD Form 2910. Chaplains and military attorneys cannot take official reports.

(3) State laws that require disclosure of PII of the adult sexual assault victim or suspect to local or State law enforcement by SARCs, SAPR VAs and healthcare personnel (see Glossary) of the Department of Defense are preempted by Section 536 of Reference (q) when a report is made on a DoD installation or in an MTF, except when disclosure of PII is necessary to prevent or mitigate a serious and imminent threat to the health or safety of an individual.

(4) Unless a DD Form 2910 is filed with a SARC or SAPR VA, a sexual assault disclosure to a Chaplain or military attorney may not result in the rendering of SAPR services or investigative action because of the privileges associated with speaking to these individuals. A Chaplain or military attorney should advise the victim to consult with a SARC to understand the full scope of services available or facilitate, with the victim's consent, a warm handoff to a SARC or SAPR VA.

c. Requests for exceptions to policy in any volume of this SAPR instruction may be approved by USD(P&R) and cannot be approved by the Secretaries of the Military Departments or the Chief, National Guard Bureau.

d. The SAPR Program shall:

(1) Apply a victim-centered response and advocacy approach, to support victim recovery, increase safety, reduce risk of revictimization, and ensure Service members are fully mission-capable and engaged.

(2) Require that medical care and SAPR services are trauma-informed and recovery-oriented as defined in the Glossary of Reference (c).

(3) Not provide policy for legal processes within the responsibilities of the Judge Advocates General (JAG) and the Offices of Special Trial Counsel (OSTCs) of the Military Departments provided in sections 801-946 of Reference (d), also known and referred to in this instruction as the Uniform Code of Military Justice (UCMJ); the Manual for Courts-Martial (Reference (w)); or for criminal matters assigned to OIG.

(4) Secretaries of the Military Departments and the Chief, NGB, establish and maintain a Sexual Assault Response Workforce (SARW) within their respective components in accordance with the References (bx) and (by). The Secretaries of the Army and Air Force will work with Chief, NGB, to implement the SARW consistent with DoD memoranda in References (bx), (by), (bz), and the unique structure of the National Guard.

(a) The SARW will be established and executed in accordance with References (bz) and (by), and applicable DoD instructions.

(b) SARCs and SAPR VAs in the SARW are authorized to perform victim advocate duties as defined in this instruction.

(c) To restructure, professionalize, strengthen, and resource the SARW across the DoD, the Secretaries of the Military Departments and the Chief, NGB, in coordination with the Secretaries of the Army and Air Force, shall move SARC and SAPR VAs from the command reporting structure, and significantly reduce reliance of collateral duty for full-time SARC and SAPR VAs (with very limited exceptions).

(d) On SAPR-related matters and to expedite support for sexual assault victims, require that all SARC will have direct, unimpeded access to commanders, including the installation commander.

(5) The terms “SAPR program manager,” “Lead SARC,” “SARC,” and “SAPR VA” will be standardized and used uniformly across the Department, or as modified by USD(P&R).

(6) The Secretaries of the Military Departments will confirm SAPR funding is explicitly designated as such in their respective financial systems.

(a) The Secretary of the Military Department will ensure SAPR funding is made available to the appropriate Service SAPR Program Managers for full execution, in accordance with their respective financial policies and process, unless an exception is approved by the Secretary of the Military Department concerned.

(b) Deviation from executing SAPR funding, including use of SAPR funding for non-SAPR items, will be reported to the Secretary of the Military Department concerned.

(7) The Lead SARC will provide independent SAPR advice and guidance to commanders, including installation commanders. GO/FOs and commanders will NOT designate other personnel on their own staff to provide them guidance or information impacting SAPR Program matters and/or victim assistance. This does not include legal advice from judge advocates or the OSTCs, if applicable. In addition, the Combatant Commands, through their combatant command support agent in accordance with DoDI 4000.19 (Reference (ao)), are authorized to have a Combatant Command SAPR Program Manager.

e. Command sexual assault awareness and prevention programs and DoD law enforcement (see Glossary) that enable persons to be held appropriately accountable for their actions shall be supported by all commanders.

f. Standardized SAPR requirements, terminology, guidelines, protocols, and training materials shall focus on awareness, prevention, and response at all levels, as appropriate.

g. The SARC shall serve as the single point of contact for coordinating care to ensure that sexual assault victims receive appropriate and responsive care. Where an installation has multiple SARC, there shall be a Lead SARC.

h. All SARC shall have direct and unimpeded contact and access to the installation commander (see Glossary) and the immediate commander of the Service member victim and

Service member suspect for the purpose of this instruction and Reference (c). The installation commander will have direct contact with the SARC(s) and this responsibility is not further delegable.

i. A 24 hours per day, 7 days per week sexual assault response capability for all locations, including deployed areas, shall be established for persons covered in this instruction. An immediate, trained sexual assault response capability shall be available for each report of sexual assault in all locations, including in deployed locations.

j. SARCs, SAPR VAs, and other responders (see Glossary) will assist sexual assault victims regardless of Service affiliation.

k. Service member and adult military dependent victims of sexual assault shall receive timely access to comprehensive medical and psychological treatment, including emergency care treatment and services, as described in this instruction and Reference (c).

l. Sexual assault victims shall be given priority and treated as emergency cases.

(1) Emergency care (see Glossary) shall consist of emergency medical care and the offer of a SAFE, which includes both medical forensic care and a collection of samples which may be used as evidence.

(2) See Appendix to Enclosure 4 of this volume for reporting options and services for DoD civilian employees.

m. The victim shall be advised that even if a SAFE is declined the victim shall be encouraged (but not mandated) to receive medical care, including psychological care, and victim advocacy.

n. There will be a safety assessment capability for the purposes of ensuring the victim, and possibly other persons, are not in physical jeopardy. Risk screenings (see Glossary), safety assessments and planning (see Glossary), and needs assessments (see Glossary) will be available to all Service members, adult military dependents, and DoD civilians who are eligible for SAPR services, even if the victim is not physically located on the installation.

(1) The SARCs and SAPR VAs will perform initial and ongoing risk screenings, safety assessments and planning, and needs assessments for all adult sexual assault cases regardless of whether they filed a Restricted or Unrestricted Report.

(2) The installation commander or the deputy installation commander may also identify installation personnel who have been trained and are able to perform risk screenings, safety assessments and planning, and needs assessments of each sexual assault victim, as necessary.

(3) SARCs and SAPR VAs tasked to conduct risk screenings, safety assessments and planning, and needs assessments, must receive specialized training to include protecting the victim's reporting options. As part of the training, SARCs and SAPR VAs will be informed that

the initial risk screening, safety assessment and planning, and needs assessment will be conducted as soon as possible, understanding that any delay may impact the safety of the victim (harm from others or self-harm).

(4) For Unrestricted Reports, if a victim is assessed to be in a high-risk situation, the assessor will immediately contact the installation commander or their deputy, who will immediately stand up a multi-disciplinary HRRT in accordance with the guidance in Enclosure 9 of this volume. This will be done even if the victim is not physically located on the installation.

(5) For Restricted Reports made to SARCS, SAPR VAs or healthcare personnel, if the victim is assessed to be in a high-risk situation, it may qualify as an exception to Restricted Reporting, which is necessary to prevent or mitigate a serious and imminent threat to the health or safety of the victim or another person. The SARC will be immediately notified. The SARC will disclose the otherwise-protected confidential information only after consultation with the staff judge advocate (SJA) of the installation commander, supporting judge advocate, or other legal advisor concerned, who will advise the SARC as to whether an exception to Restricted Reporting applies, in accordance with the guidance in Enclosure 4 of this volume. If the SJA determines that the victim is not in a high-risk situation, then the report will remain Restricted. The SARC will ensure a risk screening, needs assessment, and safety assessment and planning are conducted by the SAPR VA. SARCS can also conduct risk screenings, needs assessments, and safety assessments and planning, as needed.

o. Service members and adult military dependents, who file an Unrestricted Report of sexual assault, shall be informed by the SARC or SAPR VA at the time of making the report, or as soon as practicable, of the option to request an Expedited Transfer, in accordance with the procedures for commanders in Enclosure 5 of this volume. A Service member may request:

(1) A temporary or permanent Expedited Transfer from their assigned command or installation to a different command or installation; or

(2) A temporary or permanent Expedited Transfer to a different location within their assigned command or installation.

p. An enlisted Service member or a commissioned officer who made an Unrestricted Report of sexual assault and is recommended for involuntary separation from the Military Services within one (1) year of final disposition of their sexual assault case may request a general or flag officer (GO/FO) review of the circumstances of and grounds for the involuntary separation in accordance with DoDIs 1332.14 and 1332.30 (References (x) and (y)).

(1) A Service member requesting this review must submit their written request to the first GO/FO in the separation authority's chain of command before the separation authority approves the member's final separation action.

(2) Requests submitted after final separation action is complete will not be reviewed by a GO/FO, but the separated Service member may apply to the appropriate Service Discharge

Review Board or Board of Correction of Military/Naval Records of their respective Service for consideration.

(3) A Service member who submits a timely request will not be separated until the GO/FO conducting the review concurs with the circumstances of and the grounds for the involuntary separation.

q. In accordance with Section 539A of the NDAA for FY 2021 (Reference (bh)) each Secretary of a Military Department and the Chief, NGB, in coordination with the Secretaries of the Military Departments of the Army and Air Force, shall maintain a Safe-to-Report Policy that will include the standards set out in Enclosure 5 and shall apply it in all instances of alleged collateral misconduct (see Glossary) involving a Service member who is a sexual assault victim.

r. DoD Components shall implement a “No Wrong Door” approach that requires trained DoD personnel provide a “warm handoff” (as defined in the Glossary) to the appropriate resource, service provider, or point of contact (POC), whenever possible.

(1) Lead representatives of SAPR, Equal Opportunity, FAP, Victim Witness Assistance Program (VWAP), healthcare (medical and mental health), SVC/VLC/VC, and chaplains at an installation must meet monthly during the first three months after the issuance of their component’s “No Wrong Door” approach to foster liaisons, confirm warm handoffs, and identify any challenges or solutions. After the first three months have elapsed, the Installation Commander, at the QCMG meetings, will ensure these representatives meet at a minimum on a quarterly basis and take steps to ensure the “No Wrong Door” approach is being executed properly.

(2) The Lead SARC will brief any issues and solutions related to “No Wrong Door” involving adult sexual assault reports to the Chair at the QCMG meeting.

s. DoD prohibits granting a waiver for commissioning or enlistment in the Military Services when the person has a qualifying conviction (see Glossary) for a crime of sexual assault, or a conviction for an attempt of a sexual assault crime, or has ever been required to be registered as a sex offender, in accordance with section 657 of Reference (d).

t. A Service member whose conviction of rape, sexual assault, forcible sodomy, or an attempt to commit one of the offenses is final, and who is not punitively discharged in connection with such convictions, will be processed for administrative separation for misconduct in accordance with DoDI 1332.14 and DoDI 1332.30 (References (x) (enlisted personnel) and (y) (commissioned officers)).

u. Information regarding Restricted Reports should only be released to persons authorized to accept Restricted Reports, or as required by law.

(1) MTF personnel shall be aware of Section 536 of Reference (q).

(2) Improper disclosure of confidential communications under Restricted 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.

v. Information regarding Unrestricted Reports should only be released to personnel with an official need to know or as authorized by law. Improper disclosure of confidential communications under 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.

w. The DoD will retain the DD Forms 2910 and 2911, "DoD Sexual Assault Forensic Examination (SAFE) Report," for 50 years in accordance with Section 577 of Reference (n), regardless of whether the Service member filed a Restricted or Unrestricted Report as defined in Reference (c). PII will be protected in accordance with section 552a of title 5, United States Code, also known as the Privacy Act of 1974 (Reference (z)), DoDI 5400.11, Public Law 104-191 (References (aa) and (ab)), and Section 536 of Reference (q).

(1) Document Retention and SAFE Kit Retention for Unrestricted Reports:

(a) The SARC will enter the Unrestricted Report DD Form 2910 in the Defense Sexual Assault Incident Database (DSaID) (see Glossary in Reference (c)) as an electronic record within 48 hours of the report, where it will be retained for 50 years from the date the victim signed the DD Form 2910. The DD Form 2910 is located at the DoD Forms Management Program website at <https://www.esd.whs.mil/Directives/forms/>.

(b) The DD Form 2911 shall be retained in accordance with DoDI 5505.18 (Reference (ac)). The DD Form 2911 is located at the DoD Forms Management Program website at <https://www.esd.whs.mil/Directives/forms/>.

(c) If the victim has a SAFE, the corresponding SAFE Kit will be retained in accordance with Enclosure 8 of this volume. When the forensic examination of a DoD MHS beneficiary is conducted at a civilian facility through a memorandum of understanding (MOU) or a memorandum of agreement (MOA), the requirement for the handling of the forensic kit will be explicitly addressed in the MOU or MOA. The MOU or MOA with the civilian facility will address the processes for contacting the SARC and for contacting the appropriate DoD agency responsible for accepting custody of the SAFE Kit.

(d) Personal property may be returned to the rightful owner in accordance with Enclosure 8 of this volume.

(2) Document Retention and SAFE Kit Retention for Restricted Reports:

(a) The SARC will retain a copy of the Restricted Report DD Form 2910 for 50 years, consistent with DoD guidance for the storage of PII. The 50-year timeframe for the DD Form 2910 will start from the date the victim signs the DD Form 2910. For Restricted Reports, forms will be retained in a manner that protects confidentiality.

(b) If the victim had a SAFE Kit, the Restricted Report DD Form 2911 will be retained for 50 years, consistent with DoD guidance for the storage of PII. The 50-year timeframe for the DD Form 2911 will start from the date the victim signs the DD Form 2910, but if there is no DD Form 2910, the timeframe will start from the date the SAFE Kit is completed. Restricted Report forms will be retained in a manner that protects confidentiality.

(c) If the victim has a SAFE performed, the SAFE Kit will be retained in accordance with Enclosure 8 of this volume in a location designated by the Military Service concerned. When the forensic examination is conducted at a civilian facility through an MOU or an MOA the requirement for the handling of the forensic kit will be explicitly addressed in the MOU or MOA. The MOU or MOA with the civilian facility will address the processes for contacting the SARC and for contacting the appropriate DoD agency responsible for accepting custody of the sexual assault forensic examination kit or SAFE Kit.

(d) Victims who filed a Restricted Report can request the return of their personal property in accordance with the procedures in Enclosure 8 of this volume.

x. Current or former Service members who made a report of sexual assault may contact their respective Service SAPR headquarters office or Service or NG SARCs for help accessing their DD Forms 2910 and 2911. Requests for release of information relating to sexual assaults will be processed by the organization concerned, in accordance with the procedures specified in the sections 552 and 552a of Reference (z), also known as “The Freedom of Information Act” and “The Privacy Act of 1974” respectively.

y. Service members who file Unrestricted and Restricted Reports of sexual assault and/or their dependents shall be protected from retaliation, reprisal, ostracism, maltreatment, or threats thereof, for filing a report, in accordance with Volume 3 of DoDI 6495.02 (referred to in this volume as “Retaliation DoDI”) (Reference (au)) and other applicable DoD regulations.

z. An incident report must be submitted in writing within 8 days after an Unrestricted Report of sexual assault has been made in accordance with section 1743 of Reference (o). This 8-day incident report will only be provided to personnel with an official need to know.

aa. At the time of reporting, victims must be informed of the availability of legal assistance and the right to consult with an SVC/VLC/VC in accordance with section 1044e of Reference (d).

ab. Consistent with the Presidential Memorandum “Implementing the Prison Rape Elimination Act,” (Reference (ad)), sexual assaults in DoD confinement facilities involving Service members will be governed by Part 115 of Title 28, Code of Federal Regulations (Reference (ae)).

ac. The Catch a Serial Offender (CATCH) Program is voluntary and allows an eligible adult sexual assault victim to submit an anonymous entry into the CATCH database to discover if the suspect in their report may have also assaulted another person (i.e., a “potential match” in the

CATCH website). The CATCH Program is implemented through procedures set forth in this volume, DoDI 5505.18 (Reference (ac)), and the procedures in the USD(P&R) CATCH Memo (Reference (ap)) available at www.sapr.mil/catch.

(1) To make a SAPR CATCH entry, victims contact the SARC, who will explain the program and provide a username and password to gain access to the CATCH website. The CATCH entry is anonymous in the CATCH website. Victims interested in submitting a FAP-related CATCH entry shall do so through FAP personnel.

(2) If the entry matches another entry in the CATCH system or involves a suspect in an open or closed investigation in the Law Enforcement Defense Data Exchange (LE D-DEx), the victim will be contacted and asked if they want to participate in the investigation. Participation in the CATCH Program is voluntary. If there is a match, the victim's name will not be provided to law enforcement without the victim's permission. The victim may decline to participate in the process at any point, even after being notified that there was a potential match. There shall be no adverse consequences if the victim does not agree to participate. If victims change their mind about submitting an entry in the CATCH system, they can opt out of the CATCH Program at any time.

(3) If the victim is eligible, the SARC will offer a referral to an SVC/VLC/VC who can answer legal questions about the CATCH Program.

(4) The following individuals are eligible to participate in the CATCH Program:

(a) Current Service members, to include those assigned to the Military Service Academies, and their adult military dependents:

1. Who file, or have already filed, a Restricted Report with a DD Form 2910. A Restricted Report will not be converted to an Unrestricted Report based on the information provided by the victim to the CATCH Program without the victim's written permission on a revised DD Form 2910.

2. Who file, or have already filed, an Unrestricted Report with a DD Form 2910 and the identity of their suspect was not disclosed by the victim or uncovered by law enforcement, to include MCIOs (e.g., third-party report with no suspect identification).

a. Information from the CATCH Entry in the CATCH System: If notified of a potential match, the Unrestricted Reporting victim can decide whether they now want to participate in the investigation.

b. Information from the original Unrestricted Report made to law enforcement: While the information from the CATCH Entry cannot be used by law enforcement to investigate until there is a match and the victim consents, the information from the original Unrestricted Report made to law enforcement can still be used by MCIOs for investigative purposes or as otherwise authorized by law.

3. Who do not want to or are not ready to file an official report of sexual assault (through a DD Form 2910 or to law enforcement) but DO want to submit an entry in the CATCH System. Eligible victims will be able to submit a SAPR-related inquiry (SRI) CATCH Entry through a SARC or SAPR VA with a DD Form 2910-4, “Catch A Serial Offender (CATCH) Program Explanation and Notification Form for SAPR Related Inquiry (SRI) CATCH Entries”. If notified of a potential match, the SRI CATCH Entry victim can decide whether to file an Unrestricted Report and/or participate in the MCIO investigation.

(b) Former Service members and their adult military dependents:

1. Who have already filed a Restricted Report with a DD Form 2910. The Restricted Report will not be converted based on the information provided to the CATCH Program without the victim’s written permission on a revised DD Form 2910.

2. Who have already filed an Unrestricted Report with a DD Form 2910, and the identity of their suspect was not disclosed by the victim or uncovered by law enforcement, to include MCIOs (e.g., third-party report with no suspect identification).

a. Information from the CATCH Entry in the CATCH System: If notified of a potential match, the Unrestricted Reporting victim can decide whether they now want to participate in the investigation.

b. Information from the original Unrestricted Report made to law enforcement: While the information from the CATCH Entry cannot be used by law enforcement to investigate until there is a match and the victim consents, the information from the original Unrestricted Report made to law enforcement can still be used by MCIOs for investigative purposes or as otherwise authorized by law.

3. Who make an SRI CATCH Entry through a SARC or SAPR VA with a DD Form 2910-4, for eligible CATCH suspects as detailed in the DD Form 2910-4.

(c) DoD Civilian Employees in accordance with the Appendix to Enclosure 4.

(5) Victims may print out their CATCH entry, or request a printout, for their records. They may also submit their CATCH entry printout to personnel in the Department of Veterans Affairs as documentation to support their healthcare (medical and mental health) or disability compensation claims, as applicable.

ad. The following DD forms will be used for Restricted and Unrestricted Reporting, retaliation reporting, and to request the return of personal property in Restricted Reporting cases:

(1) DD Form 2910, “Victim Reporting Preference Statement”. Used to elect a reporting option (Restricted or Unrestricted) by the adult sexual assault victim in the SAPR Program and to capture victim contact information for victims who wish to submit entries in the CATCH Program.

(2) DD Form 2910-1, “Replacement of Lost DD Form 2910, Victim Reporting Preference Statement”. While not a common occurrence, if a sexual assault victim requests a

copy of a previously filed DD Form 2910, and the original paper or electronic copy cannot be located, the victim can complete a DD Form 2910-1. If separated, the former or retired Service member will sign the DD Form 2910-1, and then send the form to the nearest SARC or Service headquarters SAPR office.

(a) The Military Services have the flexibility to determine whether to request that the signed DD Forms 2910-1 are sent through secure email or mail.

(b) When completing the DD Form 2910-1, victims may elect to convert their original reporting option from Restricted to Unrestricted.

(c) The DD Form 2910-1 will take the place of the original DD Form 2910 and will be uploaded to the DSAID File Locker for document retention purposes.

(3) DD Form 2910-2, “Retaliation Reporting Statement for Unrestricted Sexual Assault Cases.” Used to file a retaliation report within the SAPR Program on retaliation related to an existing Unrestricted Report, in accordance with the Retaliation DoDI (Reference (au)) and other applicable laws or regulations.

(a) Persons eligible to file a DD Form 2910-2 include:

1. Adult sexual assault victim who has previously made an Unrestricted Report of sexual assault.
2. Adult sexual assault victim’s adult family member (e.g., spouse, son, daughter).
3. Witness.
4. Bystander who intervened.
5. SARC or SAPR VA on the case.
6. Responder.
7. Other party to the incident (e.g., friend, co-worker).

(b) Retaliation reports can also be filed outside the SAPR Program, see “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)” in the Retaliation DoDI (Reference (au)).

(4) DD Form 2910-3, “Return of Victim’s Personal Property in Restricted Sexual Assault Cases Collected During a Sexual Assault Forensic Examination (SAFE).” The SARC or SAPR VA will use the DD Form 2910-3, to document the adult sexual assault Restricted Reporting victim’s request, to describe the personal property requested, and to identify the

Restricted Reporting Case Number (RRCN) that identifies the SAFE Kit in question, in accordance with section 536 of the NDAA for FY 2020 (Reference (be)). This return of personal property request is not applicable for individuals who obtained a SAFE at a civilian facility, and whose corresponding SAFE Kit and personal property are maintained by civilian law enforcement. The DD Form 2910-3 will be uploaded into DSAID, when the module is operational, under the same timeframes as the DD Form 2910.

(5) DD Form 2910-4, “Catch a Serial Offender (CATCH) Program Explanation and Notification Form For SAPR-Related Inquiry (SRI) CATCH Entries.” DD Form 2910-4 provides a method for eligible adult sexual assault victims to submit a CATCH entry without first having to file an official report of sexual assault using DD Form 2910.

(6) DD Form 2910-8, “Reporting Preference Statement for DoD Civilian Employees to Report Sexual Assault.” DoD civilian employees will use DD Form 2910-8 to file their reports of sexual assault through the SAPR program in accordance with the procedures set forth in the Appendix to Enclosure 4 of this volume.

ae. To standardize and facilitate the SAPR Program’s oversight of adult sexual assault and associated retaliation reports during their monthly CMGs meetings, QCMG meetings, and HRRT meetings, the CMG, QCMG, HRRT Chairs and Co-Chairs MUST use the three forms below. The forms serve as checklists to track the requirements in Enclosure 9 of this volume and in Section 4 of the Retaliation DoDI in Reference (au) as applicable. DD Forms 2910-5, 2910-6 and 2910-7 are required to be uploaded into the DSAID. SARC and designated SAPR VAs will upload DD Forms 2910-5, 2910-6, and 2910-7 into the appropriate DSAID meeting minutes tab within 48 hours of the form being completed. In deployed locations, such as combat zones, that have internet connectivity issues, the timeframe is extended to 96 hours. DSAID is the only DoD-authorized database for the electronic retention of DD Forms 2910-5, 2910-6, and 2910-7 to ensure the protection of any potential personally identifiable information and to make forms more easily retrievable in one centralized database. These forms will be retained for 50 years.

(1) DD Form 2910-5, “Monthly Case Management Group (CMG) Meeting Notes for the Sexual Assault Prevention and Response (SAPR) Program.” Captures information discussed in the CMG. DD Form 2910-5 is NOT a substitute for the individual case meeting minutes for EACH victim in DSAID. This is an additional requirement. The SARC still need to document specific information for EACH victim as it relates to information needed in the victim’s case – this is the function of the specific meeting minutes that link to each specific DSAID Case Number for the specific victim.

(a) DD Form 2910-5 is only a checklist to ensure requirements are met for the monthly CMG meetings.

(b) Only one DD Form 2910-5 is completed for each monthly CMG meeting. One DD Form 2910-5 is completed per CMG meeting, not per victim.

(c) The CMG Co-Chair, as the CMG notetaker, fills out the form and the CMG Chair can carefully review, confirm all requirements are met, and sign DD Form 2910-5.

(2) DD Form 2910-6, “Quarterly Case Management Group (QCMG) Meeting Notes for the Sexual Assault Prevention and Response (SAPR) Program.” DD Form 2910-6 incorporates most of the documentation requirements for QCMG meeting minutes. The QCMG Co-Chair, as the QCMG notetaker, shall fill out the form and the QCMG Chair can carefully review, confirm all requirements are met, and sign DD Form 2910-6.

(3) DD Form 2910-7, “High-Risk Response Team (HRRT) Meeting Notes for the Sexual Assault Prevention and Response (SAPR) Program” and the required documentation for subsequent HRRT meetings in the “Supplement to the DD Form 2910-7 High Risk Response Team (HRRT) Meeting Notes for Subsequent HRRT Meetings (Supplement to 2910-7)”.

(a) DD Form 2910-7 will be filed for the first HRRT meeting. DD Form 2910-7 will be signed when the HRRT is completed.

(b) For the subsequent HRRT meetings, the “Supplement to the 2910-7” form will be filed.

(c) Uploading the completed DD Form 2910-7 and subsequent “Supplement to 2910-7” into DSAID will cover the majority of the meeting minute requirements for the HRRT meetings.

(d) When the HRRT is dissolved, the CMG Chair will sign the ORIGINAL DD Form 2910-7, not the last “Supplement to the 2910-7”.

af. Adult sexual assault victims and retaliation reporters can request a copy of their reporting preference form and associated documentation (i.e., DD Forms 2910, 2910-1, 2910-2, 2910-3, 2910-4) directly from a SARC or SAPR VA.

(1) The DD Form 2910 will be retained for 50 years for both Restricted and Unrestricted Reports in accordance with section 1723 of Reference (o). This retention requirement will also apply to DD Forms 2910-1, 2910-2, 2910-3, 2910-4, and 2910-8.

(2) SARCs or designated SAPR VAs who have been authorized to have DSAID access will upload DD Forms 2910, 2910-1, 2910-2, 2910-3 (when the 2910-3 module is operational), 2910-4, and certain 2910-8 into the appropriate DSAID location within 48 hours of the form being completed. DD Forms 2910-8 will be uploaded to DSAID in accordance with instructions in the DD Form 2910-8. In deployed locations, such as areas of combat, that have internet connectivity issues, the timeframe is extended to 96 hours.

(3) DSAID will be the only DoD-authorized database for the electronic retention of DD Forms 2910, 2910-1, 2910-2, 2910-3, 2910-4, and certain 2910-8 to ensure the protection of PII and to make reports more easily retrievable in one centralized database, in accordance with Reference (bf). DSAID will be the system in which the DD Form 2910-3 is retained, once that DSAID upload capability is operational.

ag. Installation commanders (and equivalents) and commanders in comparable locations, will direct that “Reporting Options for Adult Victims of Sexual Assault” be posted in high-traffic locations (including dining facilities). Posted information will include:

- (1) Location and phone numbers and emails for the local SARCs and SAPR VAs.
- (2) Location and phone numbers and emails to contact the SVC/VLC/VC Program.
- (3) Process for reporting to an individual outside the chain of command of the Service member, explicitly to include contact information for the DoD Safe Helpline or a SARC, SAPR VA, and other personnel outside their chain of command.
- (4) Information for the DoD Safe Helpline for crisis intervention, 24/7 worldwide.
- (5) Information for the CATCH Program.
- (6) Information regarding services furnished by the Secretary of Veterans Affairs to survivors of sexual trauma. This should also be posted in areas where sexual assault prevention staff normally post notices or information.
- (7) Assistance available, including contact information for non-DoD providers near each military installation and/or military community under their authority, consistent with DoD regulations and law regarding non-federal entities.

ah. Installation commanders (and equivalents) and commanders in comparable locations, will direct that “Reporting Options for Retaliation Related to an Unrestricted Report of Adult Sexual Assault” are posted in high-traffic locations. Posted information will include:

- (1) “Reporting Options for Adult Victims of Sexual Assault” described in Enclosure 4. However, not all Retaliation reporters will be eligible for an SVC/VLC/VC.
- (2) Information for the IG DoD Hotline for Whistleblower Reprisal Complaints.
- (3) Information about how individuals who believe they have been retaliated against related to a report of sexual assault may report retaliation, including:
 - (a) Adult sexual assault victim who has previously made an Unrestricted Report of sexual assault;
 - (b) Adult sexual assault victim’s adult family member (e.g., spouse, son, daughter);
 - (c) Witness;
 - (d) Bystander (who intervened);
 - (e) SARC or SAPR VA on the case; or

(f) Responder.

ai. For individuals choosing not to file an official report of sexual assault through a DD Form 2910, SAPR Program Managers, Lead SARCs, SARCs (including the Military Service Academy SARCs), and those SAPR VAs authorized to use DSAID will utilize the “SAPR Related Inquiry (SRI) Module” in DSAID to document these instances.

aj. The SAPR program managers, Lead SARCs, SARCs, and SAPR VAs will make the SRI entries in the DSAID module within 48 hours of the SAPR-related inquiry being made by the victim. In deployed locations, such as designated combat zones that may have internet connectivity issues, the timeframe is extended to 96 hours.

ak. SRIs can be divided into four categories:

(1) Sexual Assault Victim Inquiries. The SRI documents inquiries by individuals who allege a sexual assault occurred but who choose not to make an official report through a DD Form 2910; referrals to support services for victims who do not make an official report; and the reason(s) why the individual chose not to make an official report, if the individual disclosed the reason.

(2) Retaliation Reporter Inquiries. The SRI documents inquiries by individuals alleging they experienced retaliation associated with a sexual assault report, but who chose not to make an official report of retaliation through a DD Form 2910-2.

(3) Persons Inquiring as to Reporting Processes or Resources. The SRI documents inquiries by individuals associated with a sexual assault or retaliation incident (e.g., witnesses or supervisors, co-workers, friends, and family members of the sexual assault victim, or retaliation reporter) who approach the SAPR personnel to ask questions about the reporting process or resources.

(4) SRI CATCH Entries. Eligible adult sexual assault victims will be able to submit a CATCH entry without first having to file an official report of sexual assault using the DD Form 2910. This will be accomplished through an SRI DSAID control number that will be placed on the DD Form 2910-4, and used by the SARC to generate a CATCH username and password to be provided to victims so they can submit their SRI CATCH entries in the CATCH system.

(a) An SRI CATCH entry requires the upload of a DD Form 2910-4.

(b) The DD Form 2910-4 is ONLY used for CATCH SRI entries for sexual assault in the SAPR Program.

(c) The DD Form 2910-4 CANNOT be uploaded to DSAID for general SRIs that are NOT CATCH entries.

al. The Department supports the Department of Justice Office for Victims of Crime and DoD SAPRO’s training program, “Strengthening Military-Civilian Community Partnerships to Respond to Sexual Assault” because it increases access to and visibility of civilian community-

based care. As such, when this training is scheduled by DoD SAPRO, the Military Services and National Guard leadership will direct installation commanders to facilitate the training at the installation level.

am. The DD Form 2910 shall include information for Department of Veterans Affairs resources as required by law. In accordance with section 599 of Reference (be) and section 538 of Reference (bh), information on services for trauma associated with the sexual assault at the Department of Veterans Affairs will be included in annual mandatory training materials for SARC and SAPR VAs. SARC and SAPR VAs shall provide the following notifications to victims when filling out the DD Form 2910.

(1) In accordance with section 599 of Reference (be) and section 538 of Reference (bh), SARC and SAPR VAs are directed to advise Service members who report a sexual assault of services for trauma associated with the sexual assault at the Department of Veterans Affairs.

(2) In accordance with section 538 of Reference (bh), at the time of filling out the DD Form 2910, the SARC and SAPR VA will ask if the Service member is separating or retiring from the Military Services. If so, they will provide contact information for the Department of Veterans Affairs Military Sexual Trauma Coordinators nearest to the Service member's residence for healthcare resources and for disability claims. This contact information will appear in the DD Form 2910.

an. In accordance with section 538 of Reference (bh), the Secretaries of the Military Departments and Chief, NGB, shall direct installation commanders and commanders in comparable locations to post information regarding services furnished by the Secretary of Veterans Affairs to sexual assault victims in each area in which sexual assault prevention staff normally post notices or information, and in high-traffic areas (including dining facilities).

ao. In accordance with section 549C of the NDAA for FY 2023 (Reference (ay)), the Secretaries of the Military Departments and Chief, NGB, shall provide information on the availability of legal resources from civilian legal service organizations in accordance with applicable law and DoD regulations relating to non-federal entities.

ap. To convey critical victim information and any victim special needs to the victim's commander, DoD SAPRO will develop and issue a standardized template for "Recommendations for Victim Care and Support for Unrestricted Reports ("Victim's Commander's Package").

aq. The SAPR VA shall prepare the "Victim's Commander's Package" with victim consent as to the contents to be relayed to the victim's commander. The Victim's Commander's Package will be provided to the victim's commander (or civilian equivalent) within 24 hours of filing a DD Form 2910 for an Unrestricted Report. The Victim's Commander's Package will include recommendations to address immediate and ongoing care, to include any known safety concerns or retaliation issues, if any.

(1) The installation SAPR VA shall give the completed package to the SARC to provide to the victim's commanding officer or civilian equivalent.

(2) The victim's commanding officer must review the Victim's Commander's Package and either approve or disapprove the package in writing.

(a) If the commander does not agree with all or some of the recommendations in the package, the SARC will collaborate with the commander to consider other options, to gain approval. If consensus cannot be reached, then the SARC will forward the package to the next GO/FO in the chain of command for review and appropriate action.

(b) If approved, the victim's commander will sign the package.

(3) At the monthly CMG meeting, the CMG Chair will confirm that a Victim's Commander's Package was approved for each Unrestricted Report.

5. RESPONSIBILITIES. See Enclosure 2.

6. PROCEDURES. See Enclosures 3 through 12.

7. INFORMATION COLLECTIONS.

a. The DSAID, the DD Form 2910, and the DD Form 2965, "Defense Sexual Assault Incident Database (DSAID) Data Form," referred to in this volume, have been assigned Office of Management and Budget control number 0704-0482 in accordance with the procedures in Volume 2 of DoD Manual 8910.01 (Reference (af)).

b. The annual report regarding sexual assaults involving Service members and improvement to sexual assault prevention and response programs referred to in paragraph 6.z. of Enclosure 2; paragraphs 1.i., 1.j., and 1.l. of Enclosure 3; Expedited Transfers data reference in Enclosure 5; and sections 1 and 4 of Enclosure 12 of this volume is submitted to Congress in accordance with section 1631(d) of Reference (l) and is coordinated with the Assistant Secretary of Defense for Legislative Affairs in accordance with the procedures in DoDI 5545.02 (Reference (ag)).

c. The quarterly reports of sexual assaults involving Service members referred to in Enclosures 2, 3, 10, 11, and 12 of this volume are prescribed by Reference (b) and have been assigned report control symbol DD-P&R-2205 in accordance with the procedures in Reference (af) and Volume 1 of DoD Manual 8910.01 (Reference (ah)).

d. The Service Academy sexual assault survey referred to in section 3 of Enclosure 12 of this volume has been assigned report control symbol DD-P&R-2198 in accordance with the procedures in References (af) and (ah).

e. The Sexual Violence Support and Experiences Survey (SVSES), referred to in section 1 of Enclosure 12 of this volume and conducted by the Office of People Analytics (OPA), has been assigned the Report Control Symbol DD-P&R-2554 in accordance with the procedures in Reference (af).

8. **RELEASABILITY. Cleared for public release.** This instruction is available on the Directives Division Website at <https://www.esd.whs.mil/DD/>.

9. **SUMMARY OF CHANGE 9.** The changes to this issuance are administrative and update language to comply with Executive Orders 14168 and 14173 (References (cc) and (cd)).

10. **EFFECTIVE DATE.** This instruction is effective March 28, 2013.


Jessica L. Wright
Acting Under Secretary of Defense for
Personnel and Readiness

Enclosures

1. References
2. Responsibilities
3. Oversight of the SAPR Program
4. Sexual Assault and Retaliation Reporting Options and Procedures, Exceptions, and Declination Letters
5. Commander and Management of SAPR Procedures
6. SARC and SAPR VA Procedures
7. Healthcare Provider Procedures
8. SAFE Kit Collection and Preservation
9. SAPR Monthly and Quarterly Case Management for Sexual Assault Reports and Corresponding Retaliation Reports and High-Risk Response Teams
10. SAPRTEC Management and Oversight of Training Requirements for DoD Personnel
11. DSAID
12. Sexual Assault Annual and Quarterly Reporting Requirements

Glossary

Tables

TABLE OF CONTENTS

ENCLOSURE 1: REFERENCES.....	25
ENCLOSURE 2: RESPONSIBILITIES.....	29
UNDER SECRETARY OF DEFENSE FOR PERSONNEL AND READINESS (USD(P&R)).....	29
DIRECTOR, DEPARTMENT OF DEFENSE HUMAN RESOURCE ACTIVITY (DoDHRA).....	30
ASSISTANT SECRETARY OF DEFENSE FOR HEALTH AFFAIRS (ASD(HA)).....	30
DIRECTOR, DHA.....	31
GENERAL COUNSEL OF THE DEPARTMENT OF DEFENSE (GC DoD).....	33
INSPECTOR GENERAL OF THE DEPARTMENT OF DEFENSE (IG DoD).....	33
SECRETARIES OF THE MILITARY DEPARTMENTS.....	34
CHIEF, NGB.....	45
CHAIRMAN OF THE JOINT CHIEFS OF STAFF.....	46
COMMANDERS OF THE COMBATANT COMMANDS.....	46
ENCLOSURE 3: OVERSIGHT OF THE SAPR PROGRAM.....	47
DIRECTOR, DoD SAPRO.....	47
SAPR IPT MEETING, OR AS MODIFIED BY USD(P&R).....	49
ENCLOSURE 4: SEXUAL ASSAULT AND RETALIATION REPORTING OPTIONS AND PROCEDURES EXCEPTIONS, AND DECLINATION.....	51
IMPLEMENTING DoD DUAL OBJECTIVES.....	51
REPORTING OPTIONS SERVICE MEMBERS AND THEIR ADULT DEPENDENTS ...	51
REPORTING OPTIONS FOR DoD CIVILIANS EMPLOYEES.....	54
REPORTING OPTIONS FOR DoD CIVILIAN EMPLOYEES' DEPENDENTS AND DoD CONTRACTORS.....	54
OTHER REPORTING POLICIES.....	54
INITIATING MEDICAL CARE AND TREATMENT UPON RECEIPT OF REPORT	61
REPORTS AND COMMANDERS.....	62
EXCEPTIONS TO RESTRICTED REPORTING AND DISCLOSURES.....	63
ACTIONABLE RIGHTS.....	64
RESOURCES FOR VICTIMS AND OTHERS TO REPORT RETALIATION, REPRISAL, OSTRACISM, MALTREATMENT, SEXUAL HARASSMENT OR TO REQUEST AN EXPEDITED/SAFETY TRANSFER OR MILITARY PROTECTIVE ORDER (MPO)/CIVILIAN PROTECTIVE ORDER (CPO).....	64
APPENDIX TO ENCLOSURE 4: SEXUAL ASSAULT REPORTING OPTIONS AND SERVICES FOR DoD CIVILIAN EMPLOYEES.....	66
ENCLOSURE 5: COMMANDER AND MANAGEMENT OF SAPR PROCEDURES.....	69

SAPR MANAGEMENT	69
INSTALLATION COMMANDER SAPR RESPONSE PROCEDURES	69
COMMANDER SAPR RESPONSE PROCEDURES	70
MOUs OR MOAs WITH LOCAL CIVILIAN AUTHORITIES	74
LINE OF DUTY (LOD) PROCEDURES	74
EXPEDITED TRANSFER REQUESTS FOR SERVICE MEMBERS SEXUAL ASSAULT VICTIMS	76
EXPEDITED TRANSFER REQUESTS FOR ADULT MILITARY DEPENDENTS	87
MILITARY PROTECTIVE ORDERS (MPO)	88
ALLEGED COLLATERAL MISCONDUCT IN SEXUAL ASSAULT CASES, SAFE-TO- REPORT POLICY, AND THE ROLE OF THE OSTC	90
ENCLOSURE 6: SARC AND SAPR VA PROCEDURES	94
SARC PROCEDURES	94
SAPR VA PROCEDURES	100
ENCLOSURE 7: HEALTHCARE PROVIDER PROCEDURES	101
ENCLOSURE 8: SAFE KIT COLLECTION AND PRESERVATION	106
DOCUMENT AND EVIDENCE RETENTION	106
PROCEDURES FOR EVIDENCE RETENTION AND RETURN IN ADULT SEXUAL ASSAULT CASES	106
RELEASE OF PERSONAL PROPERTY IN UNRESTRICTED REPORT SEXUAL ASSAULTS	107
RELEASE OF PERSONAL PROPERTY IN RESTRICTED REPORT SEXUAL ASSAULTS	108
SAPR PROCEDURES FOR SAFES	110
ENCLOSURE 9: SAPR MONTHLY AND QUARTERLY CASE MANAGEMENT FOR SEXUAL ASSAULT REPORTS AND CORRESPONDING RETALIATION REPORTS AND HIGH-RISK RESPONSE TEAMS	114
CMG, QCMG, AND HRRT MEETING PURPOSES	114
SAFETY, VICTIM SERVICES, AND RETALIATION REPORTER REFERRALS	116
SERVICES	119
SAPR QCMG MEETINGS: SYSTEM COORDINATION AND ACCOUNTABILITY	125
ENCLOSURE 10: SAPRTEC OVERSIGHT OF TRAINING REQUIREMENTS FOR DoD PERSONNEL	128
MANAGEMENT OF TRAINING REQUIREMENTS	128
RESPONDER TRAINING REQUIREMENTS	129

ENCLOSURE 11: DSAID.....	139
PURPOSE	139
PROCEDURES.....	139
NOTIFICATION PROCEDURES AND RECORD ACCESS PROCEDURES	140
ENCLOSURE 12: SEXUAL ASSAULT ANNUAL AND QUARTERLY REPORTING REQUIREMENTS.....	141
ANNUAL REPORTING FOR THE MILITARY SERVICES	141
QUARTERLY REPORTS.....	142
ANNUAL REPORTING FOR THE MILITARY SERVICE ACADEMIES (MSAs)	142
ANNUAL REPORTING OF INSTALLATION DATA.....	143
APPENDIX TO ENCLOSURE 12 SEXUAL ASSAULT OFFENSE - INVESTIGATIVE DISPOSITION	144
GLOSSARY	148
PART I: ABBREVIATIONS AND ACRONYMS	148
PART II: DEFINITIONS.....	151
TABLES	
1. Retention or Return to Active Duty of Reserve Component Members for LOD Determination	76
2. DSAID Case Transfers after Victim Transfers to New Location.....	82

ENCLOSURE 1

REFERENCES

- (a) DoD Instruction 6495.02, "Sexual Assault Prevention and Response Program Procedures," June 23, 2006 (hereby cancelled)
- (b) DoD Directive 5124.02, "Under Secretary of Defense for Personnel and Readiness (USD(P&R))," June 23, 2008
- (c) DoD Directive 6495.01, "Sexual Assault Prevention and Response (SAPR) Program," January 23, 2012, as amended
- (d) Title 10, United States Code
- (e) Under Secretary for Personnel and Readiness Report, "Task Force Report on Care for Victims of Sexual Assault," April 2004
- (f) Public Law 106-65, "National Defense Authorization Act for Fiscal Year 2000," October 5, 1999
- (g) Public Law 108-375, "Ronald W. Reagan National Defense Authorization Act for Fiscal Year 2005," October 28, 2004
- (h) Public Law 109-163, "National Defense Authorization Act for Fiscal Year 2006," January 6, 2006
- (i) Public Law 109-364, "John Warner National Defense Authorization Act for Fiscal Year 2007," October 17, 2006
- (j) Sections 561, 562, and 563 of Public Law 110-417, "Duncan Hunter National Defense Authorization Act for Fiscal Year 2009," October 14, 2008
- (k) Public Law 111-84, "National Defense Authorization Act for Fiscal Year 2010," October 28, 2009
- (l) Public Law 111-383, "Ike Skelton National Defense Authorization Act for Fiscal Year 2011," January 7, 2011
- (m) Sections 584, 585, and 586 of Public Law 112-81, "National Defense Authorization Act for Fiscal Year 2012," December 31, 2011
- (n) Public Law 112-239, "National Defense Authorization Act for Fiscal Year 2013," January 2, 2013
- (o) Public Law 113-66, "National Defense Authorization Act for Fiscal Year 2014," December 26, 2013
- (p) Public Law 113-291, "Carl Levin and Howard P. 'Buck' McKeon National Defense Authorization Act for Fiscal Year 2015," December 29, 2014
- (q) Public Law 114-92, "National Defense Authorization Act for Fiscal Year 2016," November 25, 2015
- (r) Directive-Type Memorandum 11-063, "Expedited Transfer of Military Service Members Who File Unrestricted Reports of Sexual Assault," December 16, 2011 (hereby cancelled)
- (s) Directive-Type Memorandum 11-062, "Document Retention in Cases of Restricted and Unrestricted Reports of Sexual Assault," December 16, 2011 (hereby cancelled)
- (t) Directive-type Memorandum 14-007, "Sexual Assault Incident Response Oversight (SAIRO) Report," September 30, 2014, as amended (hereby cancelled)
- (u) DoD Instruction 3020.41, "Operational Contract Support (OCS)," December 20, 2011, as amended

- (v) DoD Manual 6400.01, Volume 2, “Family Advocacy Program (FAP): Child Abuse and Domestic Abuse Incident Reporting System,” August 11, 2016
- (w) U.S. Department of Defense, “Manual for Courts-Martial, United States,” current edition
- (x) DoD Instruction 1332.14, “Enlisted Administrative Separations,” January 27, 2014, as amended
- (y) DoD Instruction 1332.30, “Commissioned Officer Administrative Separations,” May 11, 2018, as amended
- (z) Title 5, United States Code
- (aa) DoD Instruction 5400.11, “DoD Privacy and Civil Liberties Programs,” January 29, 2019, as amended
- (ab) Public Law 104-191, “Health Insurance Portability and Accountability Act of 1996,” August 21, 1996
- (ac) DoD Instruction 5505.18, “Investigation of Adult Sexual Assault in the Department of Defense,” March 22, 2017, as amended
- (ad) Presidential Memorandum, “Implementing the Prison Rape Elimination Act,” May 17, 2012
- (ae) Part 115 of Title 28, Code of Federal Regulations, May 17, 2012
- (af) DoD Manual 8910.01, Volume 2, “DoD Information Collections Manual: Procedures for DoD Public Information Collections,” June 30, 2014, as amended
- (ag) DoD Instruction 5545.02, “DoD Policy for Congressional Authorization and Appropriations Reporting Requirements,” December 19, 2008
- (ah) DoD Manual 8910.01, Volume 1, “DoD Information Collections Manual: Procedures for DoD Internal Information Collections,” June 30, 2014, as amended
- (ai) DoD Instruction 6495.03, “Defense Sexual Assault Advocate Certification Program (D-SAACP),” February 28, 2020
- (aj) DoD Instruction 6310.09, “Health Care Management for Patients Associated with a Sexual Assault,” May 7, 2019
- (ak) DoD Instruction 5505.19, “Establishment of Special Victim Investigation and Prosecution (SVIP) Capability within the Military Criminal Investigative Organizations (MCIOs),” February 3, 2015, as amended
- (al) DoD Instruction 1030.02, “Victim and Witness Assistance,” September 2, 2020, as amended
- (am) DoD Directive 7050.06, “Military Whistleblower Protection,” April 17, 2015, as amended
- (an) Under Secretary of Defense for Personnel and Readiness Memorandum, “Guidelines for the DoD Safe Helpline,” January 22, 2015, as amended
- (ao) DoD Instruction 4000.19, “Support Agreements,” December 16, 2020.
- (ap) Under Secretary of Defense for Personnel and Readiness Memorandum, “Updated Catch a Serial Offender Procedures and New DD Form 2910-4,” June 14, 2023¹
- (aq) Under Secretary of Defense for Personnel and Readiness Memorandum, “Certification Standards for Department of Defense Sexual Assault Prevention and Response Program Managers,” March 10, 2015
- (ar) DoD Instruction 6400.07, “Standards for Victim Assistance Services in the Military Community,” November 25, 2013, as amended

¹ <www.sapr.mil/catch>

- (as) DoD Manual 6025.18, “Implementation of the Health Insurance Portability and Accountability Act (HIPAA) Privacy Rule in DoD Health Care Programs,” March 13, 2019
- (at) DoD Instruction 6400.11, “DoD Integrated Primary Prevention Policy for Prevention Workforce and Leaders,” December 20, 2022
- (au) DoD Instruction 6495.02, Volume 3, “Sexual Assault Prevention and Response: Retaliation Response for Adult Sexual Assault Cases,” June 24, 2022
- (av) DoD Instruction 6495.02, Volume 2, “Sexual Assault Prevention and Response: Education and Training,” April 9, 2021
- (aw) Office of the Assistant Secretary of Defense for Manpower and Reserve Affairs Memorandum, “Clarification of Convalescent Leave Policy for Service Members Recovering from Sexual Assault,” October 20, 2022
- (ax) DoD Instruction 6400.09, “DoD Policy on Integrated Primary Prevention of Self-Directed Harm and Prohibited Abuse or Harm,” September 11, 2020
- (ay) Public Law 117-263, “James M. Inhofe National Defense Authorization Act for Fiscal Year 2023,” December 23, 2022.
- (az) Defense Health Agency Procedural Instruction (DHA-PI) 6310.01, “Healthcare Management of Patients Associated with Interpersonal Violence and the Department of Defense Forensic Healthcare Program,” August 10, 2023²
- (ba) DoD Instruction 6025.13, “Medical Quality Assurance (MQA) and Clinical Quality Management in the Military Health Care System (MHS),” February 17, 2011, as amended
- (bb) Under Secretary of Defense for Personnel and Readiness Memorandum, “Legal Assistance for Victims of Crime,” October 17, 2011
- (bc) DoD 4165.66-M, “Base Redevelopment and Realignment Manual,” March 1, 2006, as amended
- (bd) Office of the Under Secretary of Defense for Personnel and Readiness Memorandum, “Revisions to the Sexual Assault Prevention and Response Program’s Expedited Transfer Policy,” February 10, 2020 (hereby cancelled)
- (be) Public Law 116-92, “National Defense Authorization Act for Fiscal Year 2020,” December 20, 2019
- (bf) Under Secretary of Defense for Personnel and Readiness Memorandum, “Defense Sexual Assault Incident Database Updates Involving the Replacement of Lost Forms, Retaliation Reporting, and Electronic File Locker,” October 15, 2019
- (bg) DoD Instruction 5505.03, “Initiation of Investigations by Defense Criminal Investigative Organizations,” March 24, 2011, as amended
- (bh) Public Law 116-283, “William M. (Mac) Thornberry National Defense Authorization Act for Fiscal Year 2021,” January 1, 2021
- (bi) DoD Instruction 6400.06, “DoD Coordinated Community Response to Domestic Abuse Involving DoD Military and Certain Affiliated Personnel,” December 15, 2021, as amended
- (bj) DoD Instruction 1438.06, “DoD Workplace Violence Prevention and Response Policy,” January 16, 2014, as amended
- (bk) Under Secretary of Defense for Personnel and Readiness Memorandum, “Requirement to Implement Ability for DoD Civilian Employees Who Have Experienced Sexual Assault to Make Requests for Assistance Through the Federal Workplace Violence Prevention and Response Program,” March 11, 2021

² <<https://health.mil/Reference-Center/DHA-Publications/2023/08/10/DHA-PI-6310-01>>

- (bl) Under Secretary of Defense for Personnel and Readiness Memorandum, “Authorization to Provide Sexual Assault Prevention and Response Program Advocacy Services to Department of Defense Civilian Employees,” November 29, 2021 (hereby cancelled)
- (bm) Public Law 117-81, “National Defense Authorization Act for Fiscal Year 2022,” December 27, 2021
- (bn) Independent Review Commission on Sexual Assault, “Hard Truths and the Duty to Change: Recommendations from the Independent Review Commission on Sexual Assault in the Military,” July 2, 2021
- (bo) DoD Directive 5105.77, “National Guard Bureau,” October 30, 2015, as amended
- (bp) DoD Manual 1000.13, Volume 2, “DoD Identification Cards: Benefits for Members of the Uniformed Services, Their Dependents, and Other Eligible Individuals”
- (bq) DoD Instruction 1400.25, Volume 250, “DoD Civilian Personnel Management System: Civilian Strategic Human Capital Planning (SHCP),” June 7, 2016, as amended
- (br) Office of the Chairman of the Joint Chiefs of Staff, “DoD Dictionary of Military and Associated Terms,” current edition³
- (bs) Section 10508, “National Guard Bureau: general provisions,” Title 10, Code of Federal Regulations
- (bt) DoD Instruction 1327.06, “Leave and Liberty Policy and Procedures,” June 16, 2009, as amended
- (bu) Under Secretary of Defense for Personnel and Readiness Memorandum, “Safe-to-Report Policy for Service Member Victims of Sexual Assault,” October 25, 2021 (hereby cancelled)
- (bv) Section 10503, “Functions of the National Guard Bureau: charter,” Title 10, United States Code
- (bw) Under Secretary of Defense for Personnel and Readiness Memorandum, “Inclusion of Race and Ethnicity in Annual Reports on Sexual Assaults,” August 24, 2022 (hereby cancelled)
- (bx) Secretary of Defense Memorandum, “Commencing DoD Actions and Implementation to Address Sexual Assault and Sexual Harassment in the Military,” September 22, 2021
- (by) Under Secretary of Defense for Personnel and Readiness Memorandum, “Guidance for Implementing Tier 1 Recommendations of the Independent Review Commission on Sexual Assault in the Military,” October 13, 2021
- (bz) Office of the Under Secretary of Defense, Comptroller, “DoD Execution Guidance for FY 2023 Independent Review Commission on Sexual Assault in the Military,” July 13, 2023
- (ca) DoD 5500.07-R, “Joint Ethics Regulation (JER),” August 1993⁴
- (cb) DoD Instruction 6040.45, “DoD Health Record Life Cycle Management,” November 16, 2015, as amended
- (cc) Executive Order 14168, “Defending Women from Gender Ideology Extremism and Restoring Biological Truth to the Federal Government,” January 20, 2025
- (cd) Executive Order 14173, “Ending Illegal Discrimination and Restoring Merit-Based Opportunity,” January 21, 2025

³ <<https://jdeis.js.mil/jdeis/index.jsp?>>

⁴ <[>](https://dodsoco.ogc.osd.mil/Portals/102/550007r.pdf)

ENCLOSURE 2

RESPONSIBILITIES

1. UNDER SECRETARY OF DEFENSE FOR PERSONNEL AND READINESS

(USD(P&R)). The USD(P&R), in accordance with the authority in References (b) and (c), shall:

a. Oversee the DoD Sexual Assault Prevention and Response Office (SAPRO) in accordance with SAPR DoDD 6495.01 (Reference (c)).

b. Direct DoD Component implementation of this instruction in compliance with SAPR DoD Directive 6495.01 (Reference (c)) and prevention policies in DoDI 6400.09 (Reference (ax)) and DoDI 6400.11 (Reference (at)).

c. Direct that Director, DoD SAPRO, be informed of and consulted on any changes in DoD policy or the UCMJ relating to sexual assault.

d. With the Director, DoD SAPRO, update the Deputy Secretary of Defense on SAPR policies and programs on a semi-annual schedule.

e. Direct the implementation, use, and maintenance of DSAID.

f. Oversee DoD SAPRO in developing DoD requirements for SAPR education and training for DoD personnel consistent with this instruction, to include establishing DoD SAPRO's Sexual Assault Prevention and Response Training & Education Center of Excellence (SAPRTEC).

g. Appoint a GO/FO or Senior Executive Service (SES) equivalent in the DoD as the Director, DoD SAPRO, in accordance with section 1611(a) of the Ike Skelton NDAA for FY 2011 (Reference (l)), as amended by section 583 of Reference (m).

h. In addition to the Director, DoD SAPRO, assign at least one military officer from each of the Military Services and a National Guard member in title 10 status in the grade of O-4 or above to SAPRO for a minimum tour length of at least 18 months. Of the military officers assigned to the SAPRO, at least one officer shall be in the grade of O-6 or above in accordance with section 1611(d) of Reference (l).

i. Maintain the Defense Sexual Assault Advocate Certification Program (D-SAACP), the DoD-wide certification program (see Glossary), with a national accreditor to ensure all sexual assault victims are offered the assistance of a SARC or SAPR VA who has obtained this certification in accordance with DoDI 6495.03 (Reference (ai)).

j. Designate the SARW as an official Functional Community in accordance with DoDI 1400.25, Volume 250, "DoD Civilian Personnel Management System: Civilian Strategic Human Capital Planning (SHCP)," (Reference (bq)).

k. Issue SARW policy.

1. Maintain the DoD Safe Helpline (see Glossary) to ensure members of the DoD community are provided with the specialized hotline help they need, anytime, anywhere. Require SAPRO, the Military Departments and the Chief, NGB, to promote DoD Safe Helpline awareness and disseminate DoD Safe Helpline outreach materials.

2. DIRECTOR, DEPARTMENT OF DEFENSE HUMAN RESOURCE ACTIVITY (DoDHRA). The Director, DoDHRA, under the authority, direction, and control of the USD(P&R), shall provide operational support, budget, and allocate funds and other resources for the DoD SAPRO as outlined in Reference (c).

3. ASSISTANT SECRETARY OF DEFENSE FOR HEALTH AFFAIRS (ASD(HA)). The ASD(HA), under the authority, direction, and control of the USD(P&R), shall:

a. Establish DoD sexual assault healthcare policies, clinical practice guidelines, related procedures, and standards governing the DoD healthcare programs for victims of sexual assault.

b. Oversee the requirements and procedures in Enclosure 7 of this volume.

c. Establish guidance to:

(1) Give priority to sexual assault patients at MTFs as emergency cases.

(2) Use the acronym “SAFE” as a standard term when referring to forensic examinations under the SAPR Program in accordance with the DoD Dictionary of Military and Associated Terms (Reference (br)). A SAFE includes both medical forensic care and a collection of samples that may be used as evidence.

(3) Require standardized, timely, accessible, and comprehensive medical care at MTFs for eligible persons who are sexually assaulted.

(4) Require that medical care is consistent with established community standards for the healthcare of sexual assault victims and the collection of forensic evidence from victims, in accordance with HA DoDI 6310.09 (Reference (aj)), instructions for victim and suspect exams found in the SAFE Kit, and DD Form 2911.

(a) Minimum standards of healthcare intervention that correspond to clinical standards set in the community shall include those established in DoDI 6310.09 (Reference (aj)). However, clinical guidance shall not be solely limited to this resource.

(b) Prescribe training and certification requirements for sexual assault medical forensic examiners.

(c) Healthcare providers providing care to sexual assault victims in theaters of operation are required to have access to the current version of DoDI 6310.09 (Reference (aj)).

(5) Include deliberate planning to strategically position healthcare providers skilled in SAFE at predetermined echelons of care, for personnel with the responsibility of assigning medical assets.

d. Establish guidance for medical personnel that requires a SARC or SAPR VA to be called in for every incident of sexual assault for which treatment is sought at the MTFs, regardless of the reporting option.

e. Establish guidance in drafting MOUs or MOAs with local civilian medical facilities to provide DoD-reimbursable healthcare (to include psychological care) and forensic examinations for Service members and TRICARE eligible sexual assault victims in accordance with Enclosure 7 of this volume. As part of the MOU or MOA, a SARC or SAPR VA will be notified for every incident of sexual assault.

f. Establish guidelines and procedures for the Surgeons General of the Military Departments to require that an adequate supply of resources, to include personnel, supplies, and SAFE Kits, is maintained in all locations where SAFEs may be conducted by DoD, including deployed locations. Maintaining an adequate supply of SAFE Kits at MTFs and at deployed locations, including operational environments, is a responsibility of the Director, Defense Health Agency (DHA) and of the Secretaries of the Military Departments.

g. In accordance with Enclosure 10 of this volume, establish minimum standards for initial and refresher SAPR training required for all personnel assigned to MTFs and for specialized training for responders and healthcare providers.

4. DIRECTOR, DHA. The Director, DHA, shall:

a. Require that medical care is consistent with established applicable standards for the healthcare of adult sexual assault victims, including forensic exams for adult sexual assault victims and suspects, in accordance with DoDI 6310.09 (Reference (aj)), and instructions in the SAFE Kit and DD Form 2911.

b. Appoint a healthcare provider, in each MTF, to be the Point of Contact concerning SAPR policy and sexual assault care.

c. Require adherence to the SAPR policy in this volume and in Reference (c), to include:

(1) Prioritizing sexual assault patients at MTFs as emergency cases, even if they are delayed reports, in accordance with DoDI 6310.09 (Reference (aj)), as internal injuries or mental health issues can be exacerbated over time.

(2) Using “SAFE” as a standard term when referring to adult forensic examinations under the SAPR Program in accordance with the DoD Dictionary of Military and Associated Terms (Reference (br)), even though the DHA Forensic Healthcare Program may use a different term for forensic examinations associated with other inter-personal violence.

(3) Requiring that healthcare (medical mental health) personnel notify a SARC or SAPR VA of every incident of sexual assault (disclosed to medical personnel or mental health personnel) for which treatment is sought at the MTFs, regardless of the reporting option.

(4) Establishing procedures for MTFs to require that an adequate supply of resources, to include personnel, supplies, and SAFE Kits, is maintained in all locations where the DoD may conduct SAFEs.

(5) Requiring MTF healthcare providers, including mental health providers, to attend monthly CMG meetings, QCMG meetings, and HRRT meetings, in accordance with Enclosure 9 of this volume. In order to prioritize the availability of mental health appointments for victims, an assigned INFORMED REPRESENTATIVE may attend the CMG on behalf of the mental health provider(s) to facilitate the exchange of information regarding the needs of the sexual assault victim, to the extent authorized by DoD Manual 6025.18 (Reference (as)) and DoDI 5400.11 (Reference (aa)).

(6) Requiring MTF commanders or MTF directors (depending on who has jurisdiction over the facility) to assess granting convalescent leave (non-chargeable) to Service members for their treatment and recuperation from sexual assault based on a recommendation from a healthcare provider (medical or mental health) or sexual assault medical forensic examiner in accordance with the procedures in the October 20, 2022 Office of the Assistant Secretary of Defense for Manpower and Reserve Affairs Memorandum, “Clarification of Convalescent Leave Policy for Service Members Recovering from Sexual Assault,” (Convalescent Leave Memo) (Reference (aw)) and DoDI 1327.06 (Reference (bt)).

(a) Convalescent leave is available for both Restricted and Unrestricted Reports.

1. Convalescent leave for adult sexual assault victims who file a RESTRICTED REPORT may be approved by MTF commanders or MTF directors, as they are able to accept a Restricted Report as “healthcare personnel” (see Glossary).

2. In accordance with the policy in the Convalescent Leave Memo in Reference (aw) and DoDI 1327.06 (Reference (bt)), convalescent leave may be approved to start immediately following the release from a medical facility, the completion of a SAFE, or the completion of an appointment with a healthcare (medical or mental health) provider after the sexual assault incident is reported.

(b) Only commanders of Service members, MTF commanders, or MTF directors are authorized to approve convalescent leave, in accordance with section 701(m) of Reference (d) as amended by Section 633 of Reference (ay), DoDI 1327.06 (Reference (bt), and Reference (aw).

d. Require at least one full-time sexual assault medical forensic examiner be assigned to each MTF that has an emergency department that operates 24 hours per day.

e. In cases of MTFs that do not have an emergency department that operates 24 hours per day, require that a sexual assault medical forensic examiner be made available to MHS beneficiaries through an MOU or MOA with local private or public sector entities who provide care to MHS beneficiaries in accordance with DoDI 6310.09 in Reference (aj). The MOU or MOA will require that SARCs or SAPR VAs of the Military Department concerned are immediately contacted and that SAFE Kits are collected and preserved in accordance with Enclosure 8 of this volume.

f. Ensure the DD Form 2911 is retained for 50 years, regardless of whether the Service member filed a Restricted or Unrestricted Report. If the victim had a SAFE Kit, the SAFE Kit will be retained in accordance with Enclosure 8 of this volume.

(1) When the forensic examination is conducted at a civilian facility in accordance with an MOU or an MOA, requirements for handling of the forensic kit will be explicitly addressed in the MOU or MOA.

(2) The MOU or MOA with the civilian facility will address the processes for contacting the SARC and for contacting the appropriate DoD agency responsible for accepting custody of the SAFE Kit.

g. Establish training and certification requirements for forensic healthcare examiners (FHEs) under the Forensic Healthcare Examiner Program as provided for DoDI 6310.09 in Reference (aj).

h. Require that DHA healthcare personnel are trained on the implementation of section 536 of Reference (q).

5. GENERAL COUNSEL OF THE DEPARTMENT OF DEFENSE (GC DoD). The GC DoD, shall:

a. Provide legal advice and assistance on proposed policies, DoD issuances, proposed exceptions to policy, and review of all legislative proposals affecting mission and responsibilities of DoD SAPRO.

b. Inform the USD(P&R) of any sexual assault related changes to the UCMJ.

6. INSPECTOR GENERAL OF THE DEPARTMENT OF DEFENSE (IG DoD). The IG DoD shall:

a. Establish guidance and provide oversight for the investigations of sexual assault in the DoD to meet the SAPR policy and training requirements of this instruction.

b. Inform the USD(P&R) of any changes relating to sexual assault investigation policy or guidance.

c. Collaborate with DoD SAPRO in the development of investigative policy in support of sexual assault prevention and response.

7. SECRETARIES OF THE MILITARY DEPARTMENTS. The Secretaries of the Military Departments shall:

a. Coordinate all Military Service SAPR policy changes with the USD(P&R).

b. Ensure that sexual assault response personnel are trained and have the capabilities to perform assigned responsibilities.

c. Establish SAPR policy and procedures to align to and implement this instruction, to include reporting procedures in Enclosure 4 and in the Appendix to Enclosure 4 in this volume.

(1) Establish and publicize policies and procedures regarding the availability of a Lead SARC, SARC, and SAPR VA.

(2) Require that sexual assault victims receive appropriate and responsive care and that the SARC serves as the single point of contact for coordinating care for victims.

(3) Direct that the SARC or a SAPR VA be immediately called in every incident of sexual assault on a military installation. There will be situations where a sexual assault victim receives medical care and a SAFE outside of a military installation through an MOU or MOA with a local private or public sector entity. In these cases, the MOU or MOA will require that a SARC be notified as part of the MOU or MOA.

(4) When a victim has a temporary change of station or permanent change of station or is deployed, direct that SARCs immediately request victim consent to transfer case management documents. Require the SARC to document the consent to transfer in the DD Form 2910. Upon receipt of victim consent, SARCs shall expeditiously transfer case management documents to ensure continuity of care and SAPR services. All Federal, DoD, and Service privacy regulations must be strictly adhered to. However, when the SARC has a temporary change of station or permanent change of station or is deployed, no victim consent is required to transfer the case to the next SARC. Every effort must be made to inform the victim of the case transfer. If the SARC has already closed the case and terminated victim contact, no other action is needed. See Enclosure 5 for Expedited Transfer protocols and commander notification procedures.

(5) Require the assignment of at least one full-time SARC and one full-time SAPR VA for each brigade or equivalent unit in accordance with section 584 of Reference (m). Additional SARCs and SAPR VAs may be assigned as necessary based on the demographics or needs of the units in accordance with Reference (m). Only Service members or DoD civilians will serve as SARCs and SAPR VAs in accordance with section 584 of Reference (m).

(6) Offer sexual assault victims the assistance of a SARC and/or SAPR VA who has been credentialed by the D-SAACP. D-SAACP certification requirements are contained in the DD Form 2950, "Department of Defense Sexual Assault Advocate Certification Program Application Packet," and Reference (ai).

(7) Issue guidance to ensure that equivalent standards are met for SAPR where SARCs or SAPR VAs are not installation-based but instead work within operational and/or deployable organizations.

(8) Direct development of training and processes to ensure that:

(a) DoD personnel will not stop or otherwise impede a report of sexual assault or a report of retaliation, and that commanders clearly communicate this to their subordinates and to their leadership team (military and civilian equivalent).

(b) DoD personnel will not influence or attempt to influence a victim's reporting selection or attempt to exert inappropriate influence on the victim assistance provided by a SARC, SAPR VA, or other responder to Service members or any person eligible for SAPR services.

(c) When a sexual assault victim wants to report sexual assault or retaliation, or has questions about reporting, they are offered the assistance of a SARC or SAPR VA as soon as possible.

d. Establish guidance to meet the SAPR training requirements for legal, MCIO, DoD law enforcement, responders, and other Service members in Enclosure 10 of this volume.

e. Establish standards and periodic training for healthcare personnel and healthcare providers regarding the Unrestricted and Restricted Reporting options of sexual assault in accordance with Enclosure 10 of this volume.

f. Enforce eligibility standards for healthcare providers to perform SAFEs.

g. Require first responders (see Glossary) to be identified upon their assignment and trained, and require that their response times be continually monitored by their commanders to ensure timely response to reports of sexual assault. The response for MCIOs is governed by DoDI 5505.18 (Reference (ac)) and the Investigations SVIP policy in DoDI 5505.19 (Reference (ak)). See Enclosure 10 of this volume for training requirements.

h. Ensure established response time is based on local conditions but reflects that sexual assault victims will be treated as emergency cases.

i. Upon request, submit a copy of SAPR training programs or SAPR training elements to the USD(P&R) through DoD SAPRO for evaluation of consistency and compliance with DoD SAPR training standards in this instruction and current SAPR core competencies and learning

objectives. The Military Departments will correct USD(P&R) identified DoD SAPR policy and training standards discrepancies.

j. Establish policy that ensures commanders are accountable for implementing and executing the SAPR program at their installations consistent with this instruction, Reference (c), and their Service regulations.

k. Establish guidance to direct that all Unrestricted Reports of adult sexual assault and non-consensual sodomy, including attempts to commit such acts as defined in Reference (d), are immediately reported to the MCIO and the appropriate OSTC is notified.

(1) A unit commander or civilian equivalent, who receives an Unrestricted Report of an incident of sexual assault involving a Service member, shall immediately:

(a) Contact the appropriate MCIO in accordance with DoDI 5505.18.

(b) Notify the appropriate OSTC.

(c) Shall NOT conduct internal, command-directed investigations on sexual assault allegations (i.e., no referrals to appointed command investigators or inquiry officers) or delay immediately contacting the MCIOs or OSTC concerned while attempting to assess the credibility of the report.

(2) Commander(s) of the Service member(s) who is a subject of a sexual assault allegation shall, as soon as possible, provide in writing all disposition data, to include any administrative or judicial action taken, if any, stemming from the sexual assault investigation to the MCIO.

(3) Once the investigation is completed, MCIOs shall submit case disposition data that satisfies the reporting requirements for DSAID identified in Enclosure 11 and the annual reporting requirements in Enclosure 12 of this volume.

l. Establish SAPR policy that requires commanders to be responsive to a victim's desire to discuss their case with the installation commander tasked by the Military Service with oversight responsibility for the SAPR program in accordance with Reference (c).

m. Establish standards for command assessment of organizational SAPR climate, including periodic follow-up assessments. In accordance with section 572(a)(3) of Reference (n), these standards will require that commanders conduct such climate assessments within 120 days of assuming command and annually thereafter.

n. As a shared responsibility with DHA Director, direct installation commanders to maintain an adequate supply of SAFE Kits in all locations where SAFEs are conducted, including operational locations and deployed locations in accordance with this instruction. Direct that Military Service SAPR personnel, to include medical personnel, are appropriately trained on

protocols for the use of the SAFE Kit and comply with prescribed chain of custody procedures described in their Military Service-specific MCIO procedures.

o. Establish procedures that require, upon seeking assistance from a SARC, SAPR VA, MCIO, the Victim Witness Assistance Program (VWAP), or trial counsel, that each Service member who reports that they have been a victim of a sexual assault be informed of and given the opportunity to:

(1) Consult with SVC/VLC/VC, legal assistance counsel, and defense counsel in cases where the victim may have been involved in alleged collateral misconduct and be notified of the Safe-to-Report policy, as applicable.

(a) When the suspect is the commander or in the victim's chain of command, such victims shall be informed of the opportunity to go outside the chain of command to report the offense to other commanding officers or an Inspector General. Victims shall be informed that they can also seek assistance from the DoD Safe Helpline (see Glossary).

(b) The victim shall be informed that legal services are optional and may be declined, in whole or in part, at any time.

(c) Commanders shall require that information and services concerning the investigation and prosecution be provided to victims in accordance with VWAP procedures in DoDI 1030.02 (Reference (a)).

(2) Have a SARC or SAPR VA present when law enforcement or trial counsel interviews the victim.

(3) Have a SARC or SAPR VA, counsel for the government, or SVC/VLC/VC present, when defense counsel interviews the victim, in accordance with Article 46 of the UCMJ (section 846 of Reference (d)).

(4) Be trained on the role of the Offices of Special Trial Counsel.

p. Establish procedures to ensure that, in the case of a general or special court-martial the trial counsel causes each qualifying victim to be notified of the opportunity to receive a copy of the record of trial (not to include sealed materials, unless approved by the presiding military judge or appellate court, classified information, or other portions of the record the release of which would unlawfully violate the privacy interests of any party, and without a requirement to include matters attached to the record under Rule for Courts-Martial (R.C.M.) 1103(b)(3) in Reference (w). A qualifying victim is an individual named in a specification alleging an offense under Articles 120, 120b, 120c, or 125 of the UCMJ (sections 920, 920b, 920c, or 925 of Reference (d)), or any attempt to commit such offense in violation of Article 80 of the UCMJ (section 880 of Reference (d)), if the court-martial resulted in any finding to that specification. If the victim elects to receive a copy of the record of proceedings, it shall be provided without charge and within a timeframe designated by regulations of the Military Department concerned.

The victim shall be notified of the opportunity to receive the record of the proceedings in accordance with R.C.M. 1103(g)(3)(C) in Reference (w).

q. Require that a completed DD Form 2701, "Initial Information for Victims and Witnesses of Crime," be distributed to the victim as required by DoDI 1030.02 (Reference (al)). (DD Form 2701 is located at the DoD Forms Management Program website at <https://www.esd.whs.mil/Directives/forms/>.)

r. Establish procedures to protect Service member victims of sexual assault and/or their dependents from retaliation, ostracism, maltreatment, and reprisal in accordance with section 1709 of Reference (o), DoDD 7050.06 (Reference (am)), and Service regulations. Require the SARC or SAPR VA to inform victims of the resources, listed in Enclosure 4 of this volume, to report instances of retaliation, reprisal, ostracism, or maltreatment to request a transfer or military protective order (MPO).

s. Require SARCs and SAPR VAs to advise victims who reported a sexual assault or sought healthcare (medical and mental health) treatment for sexual assault of the opportunity to communicate with a GO/FO regarding issues related to their military career that the victim believes are associated with the sexual assault.

t. Establish procedures to require commanders to protect the SARC and SAPR VA from retaliation, reprisal, ostracism, or maltreatment related to the execution of their duties and responsibilities.

u. Establish procedures to require commanders to protect witnesses and bystanders who intervene to prevent sexual assaults or who report sexual assaults, from retaliation, reprisal, ostracism, or maltreatment in accordance with section 1709 of Reference (o).

v. Establish Military Service-specific guidance to ensure the Safe-to-Report Policy in Enclosure 5 shall be used in cases that may involve a Service member victim's alleged collateral misconduct, in a manner that is consistent and appropriate to the circumstances, and at a time that encourages continued victim cooperation.

w. Establish Expedited Transfer procedures for victims of sexual assault in accordance with Enclosure 5 of this volume. Procedures shall require commanders who receive an Expedited Transfer request from an eligible victim to provide the servicing SARC a copy of the Expedited Transfer request as soon as practicable without the SARC having to request it from multiple layers of commanders or supervisors.

x. Appoint a representative to the SAPR integrated product team (IPT) in accordance with Enclosure 3 of this volume, and provide chairs or co-chairs for working groups, when requested. Appoint a representative to DoD SAPRO oversight teams upon request.

y. Provide quarterly and annual reports of sexual assault involving Service members to Director, DoD SAPRO, to be consolidated into the annual Secretary of Defense report to

Congress in accordance with Reference (c) and section 1631(d) of Reference (l). (See Enclosure 12 of this volume for reporting requirements.)

z. Support victim participation in semi-annual Survivor Meetings with the Director, DoD SAPRO.

aa. Support victim participation in the SVSES referred to in Enclosure 12 of this volume, conducted by OPA.

ab. Provide budget program and obligation data, as requested by the DoD SAPRO.

ac. Require that reports of sexual assault be entered into DSAID through MCIO case management systems or by direct data entry by SARCs and legal officers. Establish procedures to regularly review and assure the quality of data entered into DSAID.

(1) Data systems that interface with DSAID shall be modified and maintained to accurately provide information to DSAID.

(2) Only SARCs who are credentialed (and maintain that credential) through D-SAACP and legal officers appointed by their Military Service shall be permitted access to enter sexual assault reports and case outcome data into DSAID.

ad. Provide Director, DoD SAPRO, a written description of any sexual assault related research projects contemporaneous with commencing the actual research. When requested, provide periodic updates on results and insights. Upon conclusion of such research, a summary of the findings will be provided to DoD SAPRO as soon as practicable.

ae. Establish procedures for supporting the DoD Safe Helpline in accordance with Reference (an), which provides guidance for the referral database, providing a timely response to victim feedback, and publicizing the DoD Safe Helpline to SARCs, SAPR VAs, Service members, and to persons at military correctional facilities.

(1) Utilize the DoD Safe Helpline as the sole DoD hotline and mobile application to provide crisis intervention, facilitate victim reporting through connection to the nearest SARC, SAPR VA, and other resources as warranted.

(2) The DoD Safe Helpline does not replace local base SARC or SAPR VA contact information.

af. Establish procedures to implement SAPR training in accordance with Enclosure 10 of this volume, to include explaining the eligibility for SVC/VLC/VC for individuals making Restricted and Unrestricted Reports of sexual assault, and the types of legal assistance authorized to be provided to the sexual assault victim in accordance with section 1565b and 1004e of Reference (d). Explain that the nature of the relationship between an SVC/VLC/VC and a victim in the provision of legal advice and assistance will be the relationship between an attorney and

client, in accordance with section 1044e of Reference (d) and Reference (bb). Training should be provided by subject matter experts on the topics outlined in Enclosure 10.

ag. In coordination with the Director, DoD SAPRO, ensure that aggregate reports of sexual assaults are provided to the Commanders of the Combatant Commands for their respective area of responsibility on a quarterly basis, or as requested.

ah. For CMGs:

(1) For the Monthly CMG Meetings.

(a) Require the installation commander or the deputy installation commander chair the multi-disciplinary CMG (see Enclosure 9 of this volume) on a monthly basis to review individual cases of Unrestricted Reporting of sexual assault, facilitate monthly victim updates, direct system coordination, accountability, and victim access to quality services. This responsibility will not be delegated.

(b) Require that the Lead SARC serve as the co-chair of the CMG. This responsibility will not be delegated.

(c) If the installation is a joint base or if the installation has tenant commands, the commander of the tenant organization and their designated Lead SARC shall be invited to the CMG meetings when a Service member in their unit or area of responsibility is the victim of a sexual assault. The commander of the tenant organization shall provide appropriate information to the host commander, to enable the host commander to provide the necessary supporting services.

(d) The Secretaries of the Military Departments shall issue guidance to ensure that equivalent standards are met for case oversight by CMGs in situations where SARCs are not installation based but instead work within operational and/or deployable organizations.

(2) For the SAPR QCMG Meetings. The CMG Chair will schedule and conduct the SAPR QCMG meetings in accordance with Enclosure 9 of this volume.

ai. Establish document retention procedures for Unrestricted and Restricted Reports of sexual assault in accordance with the Policy Section in paragraph 4.w. above the signature of this volume.

aj. When drafting MOUs or MOAs with local civilian medical facilities to provide DoD-reimbursable healthcare (to include psychological care) and forensic examinations for Service members and TRICARE-eligible sexual assault victims, require commanders to include the following provisions:

(1) Notify the SARC or SAPR VA.

(2) Local private or public sector providers shall have processes and procedures in place to assess that local community standards meet or exceed those set forth in DoDI 6310.09 in Reference (aj) as a condition of the MOUs or MOAs.

ak. Comply with collective bargaining obligations, if applicable.

al. Provide SAPR training and education for civilian employees of the military departments in accordance with section 585 of Reference (m).

am. In accordance with section 572(a)(1) of Reference (n), establish a record on the disposition of any Unrestricted Report of rape, sexual assault, forcible sodomy, or an attempt to commit these offenses involving a member of the Military Services, whether such disposition is court-martial, nonjudicial punishment, or other administrative action.

(1) The record of the disposition of an Unrestricted Report of sexual assault will, as appropriate, include information regarding:

(a) Documentary information (i.e., MCIO adult sexual assault investigative reports) collected about the incident, other than investigator case notes.

(b) Punishment imposed, if any, including the sentencing by judicial or nonjudicial means, including incarceration, fines, restriction, and extra duty as a result of a military court-martial, federal or local court, and other sentencing, or any other punishment imposed.

(c) Adverse administrative actions, if any, taken against the subject of the investigation.

(d) Any pertinent referrals made for the subject of the investigation, offered as a result of the incident, such as drug and alcohol counseling and other types of counseling or intervention.

(2) The disposition records will be retained for a period of not less than 20 years.

(a) Documentary information (i.e., MCIO adult sexual assault investigative reports) will be retained in accordance with DoDI 5505.18 (Reference (ac)).

(b) Punishment imposed by nonjudicial or judicial means, adverse administrative actions, any pertinent referrals made for the subject of the investigation, and information from the records that satisfies the reporting requirements established in section 1631 of Reference (l) will be incorporated into DSAID.

an. Require that the commander of each military command and other units specified by the Secretary of Defense conduct, within 120 days after the commander assumes command and at least annually thereafter while retaining command, a climate assessment of the command or unit for purposes of preventing and responding to sexual assaults in accordance with DoDI 1350.02 (Reference (ao)).

(1) The climate assessment will include an opportunity for Service members to express their opinions regarding the manner and extent to which their leaders, including commanders, respond to allegations of sexual assault and complaints of sexual harassment and the effectiveness of such response.

(2) The compliance of commanding officers in conducting organizational climate assessments in accordance with section 572 of Reference (n), as most recently amended by section 1721 of Reference (o), must be verified and tracked.

ao. Mandate a general education campaign to notify members of the Military Services of the authorities available in accordance with chapter 79 of Reference (d), for the correction of military records when a member experiences any retaliatory personnel action for making a report of sexual assault or sexual harassment.

ap. Require the SARCs and SAPR VAs to collaborate with designated Special Victim Investigation and Prosecution (SVIP) Capability personnel during all stages of the investigative and military justice process in accordance with DoDI 5505.19 (investigations SVIP policy) (Reference (ak)), to ensure an integrated capability, to the greatest extent possible, in accordance with DoDI 1030.02 (VWAP DoDI that contains the prosecution SVIP policy) (Reference (al)).

aq. Require that, if a complaint of a sex-related offense is made against a Service member and they are convicted by court-martial or receive non-judicial punishment or punitive administrative action for that offense, a notation to that effect will be placed in the Service member's personnel service record, regardless of their grade.

(1) A notation may NOT be placed in the restricted section of the Service member's personnel service record.

(2) "Sex-related offenses" include a violation of Articles 120, 120a, 120b, 120c, or 125 of the UCMJ (sections 920, 920a, 920b, 920c, or 925 of Reference (d)) or an attempt to commit these offenses punishable under Article 80 of the UCMJ (section 880 of Reference (d)).

(3) The commanding officer of a facility, installation, or unit to which a Service member is permanently assigned or transferred will review the history of sex-related offenses as documented in the Service member's personnel service record. The purpose of this review is for commanders to familiarize themselves with such history of the Service member.

(4) The notation and review requirement should not limit or prohibit a Service member's capacity to challenge or appeal the placement of a notation, or location of placement of a notation, in their personnel service record in accordance with otherwise applicable service procedures.

ar. In accordance with the requirements of section 1743 of Reference (o), require the designated commander to submit a written incident report no later than 8 days after whichever happens first:

(1) An Unrestricted Report of sexual assault has been made to a SARC or SAPR VA through a DD Form 2910; or

(2) An independent investigation has been initiated by an MCIO.

as. Require timely access to a SARC or SAPR VA by any member of the Reserve Component in accordance with Applicability section 2 above the signature of this volume.

at. Require that the Military Service Academies (MSAs) include in their curricula substantive course work that addresses honor, respect, character development, leadership, and accountability, as they pertain to the issue of preventing sexual assault in the Military Services and providing the appropriate response to sexual assault when it occurs.

(1) In addition to the substantive coursework in academy curricula, training will be provided within 14 days after the initial arrival of a new cadet or midshipman at the MSAs and repeated annually thereafter. Training will be conducted in the manner described in Enclosure 10 of this volume, using adult learning methods.

(2) Such training will include, at a minimum, a brief history of the problem of sexual assault in the Military Services, a definition of sexual assault, information relating to reporting a sexual assault, victims' rights, and dismissal and dishonorable discharge for offenders.

au. Ensure that the provisions of title 17 of Reference (o) apply to the MSAs as required by section 552 of Reference (p).

av. If a Service member is a victim of sexual assault and is required to complete Standard Form (SF) 86, "Questionnaire for National Security Positions," in connection with an application, investigation, or reinvestigation for a security clearance, offer them a referral to an SVC/VLC/VC if they have questions on how to respond to question 21 of SF 86.

aw. Require the SARC and the installation FAP staff to coordinate when a sexual assault occurs as a result of domestic abuse, domestic violence, or involves child abuse, to ensure the victim is directed to FAP.

ax. Require commanders to direct SARCs to provide information on incidents of sexual assault for inclusion in the Commander's Critical Information Requirements (CCIR) report. CCIR reportable incidents are those meeting criteria as determined by the Secretary of Defense.

ay. Establish procedures to implement minimum standards for the qualifications necessary to be selected, trained, and certified for assignment as a SAPR Program Manager in accordance with Reference (aq) or as otherwise directed by the USD(P&R).

az. Establish a confidential process, utilizing boards for the correction of military records of the Military Departments by which a sexual assault victim during service in the Military may challenge the terms or the characterization of the discharge or separation on the grounds that the

terms or characterization were adversely affected by being a sexual assault victim in accordance with section 547 of Reference (p).

ba. In accordance with this instruction:

(1) Require commanders at every level to receive training so they can explain to their subordinates:

(a) When an alleged sexual assault is reported in a unit, what is the appropriate, professional response:

1. By the chain of command at every level (officer and enlisted).
2. By peers to a victim and a suspect.

(b) When an alleged sexual assault is reported in a unit, that incidents of retaliation, reprisal, ostracism, and maltreatment violate good order and discipline, erode unit cohesion, and deter reporting of alleged sexual assault incidents.

(2) Commanders shall:

(a) Be provided scenarios to facilitate discussion of appropriate behavior, to include mitigating potential resentment of peers towards victims, bystanders, or witnesses who report a sexual assault.

(b) Receive training to be able to explain to all personnel in their respective chain of command (officer and enlisted) that, when they become aware of allegations of retaliation, reprisal, ostracism, or maltreatment, they must take appropriate measures to protect the individual who reported the allegation(s).

(c) Receive training so they also can explain how to prevent retaliation, reprisal, ostracism, and maltreatment in a unit after a report of an alleged sexual assault.

bb. Direct:

(1) Installation and senior commanders to publicize, by all means available, how to report a sexual assault allegation and how to seek assistance for a sexual assault, including associated reports of retaliation at their locations. This effort shall include publicizing the availability of resources outside a victim's immediate chain of command (i.e., SARCs, SAPR VAs, and the DoD Safe Helpline). Information regarding sexual assault reports and associated reports of retaliation will only be disclosed to personnel with an official need to know or as authorized by law.

(2) Officer and enlisted leaders (including first-line supervisors) to encourage reporting of sexual assault in accordance with DoD policy, as well as reporting of allegations of retaliation in accordance with Department of Defense and Military Service guidance.

(3) That officers, enlisted leaders, and military law enforcement, to include MCIOs, investigators, and SARCs and SAPR VAs, receive updated information on the changes to eligibility for Restricted Reporting in this policy, including:

(a) That victims may elect to make a Restricted Report of sexual assault at all times, EXCEPT IN cases where the victim:

1. Personally reported the incident to law enforcement (including MCIOs) unless the Law Enforcement Sexual Assault Victim Disclosure Exception in DoDI 5505.18 (Reference (ac)) applies; or

2. Previously filed an Unrestricted Report with a signed DD Form 2910 for the same incident.

(b) That a victim can file a Restricted Report EVEN IF:

1. The sexual assault has been inadvertently or previously disclosed to command by the victim, suspect, or third party;

2. The matter has been reported to law enforcement, to include MCIOs, by anyone OTHER THAN the victim; or

3. An investigation is initiated, in progress, or closed.

(c) A victim's election to make a Restricted Report does not preclude command or the MCIO from conducting an investigation of sexual assault. Information provided by the victim or obtained from the victim (including the sexual assault forensic examination), the SARC, SAPR VA, or healthcare will remain confidential and not be disclosed to military law enforcement (to include MCIOs) or command, unless an exception to Restricted Reporting applies in accordance with Enclosure 4 of this volume.

8. CHIEF, NGB. On behalf of and with the approval of the Secretaries of the Army and Air Force, and in coordination with DoD SAPRO and the State Adjutants General, the Chief, NGB, will:

a. Establish and implement SAPR policy and procedures for eligible NG members consistent with this issuance, and consistent with Chief, NGB's, authorities under 10 USC 10503 (Reference (bv)), 10 USC 10508 (Reference (bs)), and DoDD 5105.77 (Reference (bo)), and applicable laws.

b. Require timely access to a SARC or SAPR VA by any NG member as required by section 584(a) of Reference (m), as amended by section 1724 of Reference (o).

c. Require adherence to D-SAACP procedures for credentialing in Reference (ai).

d. Provide quarterly and annual reports of sexual assault involving NG members to the Director, DoD SAPRO.

9. CHAIRMAN OF THE JOINT CHIEFS OF STAFF. The Chairman of the Joint Chiefs of Staff shall monitor implementation of this volume and Reference (c).

10. COMMANDERS OF THE COMBATANT COMMANDS. The Commanders of the Combatant Commands, through the Chairman of the Joint Chiefs of Staff and in coordination with the other Heads of the DoD Components, shall:

a. When exercising operational control over expeditionary forces, establish appropriate plans and capability to provide SAPR services throughout the identified area(s) of responsibility.

b. Require that a SAPR capability provided by the Executive Agent (see Glossary) is incorporated into operational planning guidance in accordance with Reference (c) and this instruction.

(1) Ensure that units deploying to meet short-term requirements (6 months or less) in their area of responsibility have sufficient deployable military SAPR personnel accompanying them to provide victim assistance services during the deployment.

(2) For long-term requirements (more than 6 months) not including deployable ships and submarines, ensure full-time military SARCs and SAPR VAs are available in theater to coordinate and deliver victim assistance services and support in remote or isolated areas.

c. Require the establishment of an MOU, MOA, or equivalent support agreement with the Executive Agent in accordance with Reference (c) and this instruction and require at a minimum:

(1) Coordinated efforts and resources, regardless of the location of the sexual assault, to direct optimal and safe administration of Unrestricted and Restricted Reporting options with appropriate protection, medical care, counseling, and advocacy.

(a) Ensure a 24 hours per day, 7 days per week response capability. Require first responders to respond in a timely manner.

(b) Response times shall be based on local conditions; however, sexual assault victims shall be treated as emergency cases.

(2) Notice to the SARC of every incident of sexual assault on the military installation, so that a SARC or SAPR VA can respond and offer the victim SAPR services. In situations where a sexual assault victim receives medical care and a SAFE outside of a military installation through a MOU or MOA with a local private or public sector entities, as part of the MOU or MOA, the SARC or SAPR VA shall be notified and shall respond.

ENCLOSURE 3

OVERSIGHT OF THE SAPR PROGRAM

1. DIRECTOR, SAPRO. The Director, SAPRO, under the authority, direction and control of the USD(P&R) through the Director, DoDHRA, shall serve as the single point of authority, accountability, and oversight for the DoD SAPR program. DoD SAPRO provides recommendations to the USD(P&R) on the issue of DoD sexual assault policy matters on prevention, response, oversight, standards, training, and program requirements. The Director, SAPRO, shall:

a. Assist the USD(P&R) in developing, administering, and monitoring the effectiveness of DoD SAPR policies and programs. Implement and monitor compliance with DoD sexual assault policy on prevention and response.

b. With the USD(P&R), update the Deputy Secretary of Defense on SAPR policies and programs on a semi-annual schedule.

c. Establish and maintain DoD SAPRO's SAPRTEC in accordance with Enclosure 10 of this volume and volume 2 of DoDI 6495.02 (Reference (av)). Develop, administer, and oversee:

(1) Standardized DoD requirements for SAPR education and training for DoD personnel.

(2) Core curriculum of required trainings for SARC and SAPR VAs and, if requested, for certain other responders as appropriate.

d. Coordinate the management of DoD SAPR Program and oversee the implementation in the Service SAPR Programs.

e. Provide technical assistance to the Heads of the DoD Components in addressing matters concerning SAPR and facilitate the identification and resolution of issues and concerns common to the Military Services and joint commands.

f. Develop strategic program guidance, joint planning objectives, standard terminology, and identify legislative changes needed to advance the SAPR program.

g. Develop oversight metrics to measure compliance and effectiveness of SAPR training, sexual assault awareness, prevention, and response policies, and programs. Collect and maintain data in accordance with these metrics, analyze data, and make recommendations regarding SAPR policies and programs to the USD(P&R) and the Secretaries of the Military Departments.

h. Establish reporting categories and monitor specific goals included in the annual SAPR assessments of each Military Service and its respective MSA, as required by Reference (c) and in accordance with Enclosure 12 of this volume.

i. Acquire quarterly, annual, and installation-based SAPR data from the Military Services and NGB and assemble annual congressional reports involving persons covered by this instruction and Reference (c). Consult with and rely on the Secretaries of the Military Departments in questions concerning disposition results of sexual assault cases in their respective Military Departments.

j. Prepare the annual FY reports submitted by the Secretary of Defense to the Congress on the sexual assaults involving Service members and a report on the members of the MSAs to Congress submitted by the Secretary of Defense.

k. Require SAPRO to develop outreach material pertaining to the availability of the DoD Safe Helpline, and also to provide information on DoD Safe Helpline on the availability of legal resources from civilian legal service organizations, in accordance with section 549C of Reference (ay) and DoD 5500.07-R (Reference (ca)).

l. Maintain, oversee, promote, and publicize the DoD Safe Helpline and its mobile applications, and facilitate victim reporting through its connection to the nearest SARC, SAPR VA, and other resources as warranted.

m. Oversee implementation, use, maintenance, and function of the DSAID to meet congressional reporting requirements, support Military Service SAPR program management, and conduct DoD SAPRO oversight activities.

n. Ensure all sexual assault victims are offered the assistance of a credentialed SARC or SAPR VA.

o. Annually review the Military Services' resourcing and funding of the Defense Forensic Science Center (DFSC) in the area of sexual assault.

(1) Assist the Department of the Army in identifying the funding and resources needed to operate DFSC, to facilitate forensic evidence being processed within 60 working days from day of receipt.

(2) Encourage the Military Services that use DFSC to contribute to the operation of DFSC by ensuring that DFSC is funded and resourced appropriately to complete forensic evidence processing within 60 working days.

p. Act as the DoD liaison between the DoD and other federal and State agencies on programs and efforts relating to sexual assault prevention and response.

q. Oversee development of strategic program guidance and joint planning objectives for resources in support of the sexual assault prevention and response program, and make recommendations on modifications to policy, law, and regulations needed to ensure the continuing availability of such resources.

r. Quarterly include MSAs as a SAPR IPT standard agenda item, and semi-annually meet with the academy superintendents to facilitate oversight of the implementation of SAPR programs.

s. Develop and administer standardized and voluntary surveys for victims of sexual assault on their experiences with SAPR victim assistance, the military health system, the military justice process, and other areas of support. The surveys will be regularly offered to victims and administered in a way that protects victim privacy and does not adversely impact the victim's legal, career, and health status.

t. Chair the SAPR IPT Meeting, or as modified by USD(P&R).

u. Participate in the DoD Victim Assistance Leadership Council in accordance with the Standards for Victim Assistance policy in DoDI 6400.07 (Reference (ar)).

v. Maintain the DoD SAPRO awards program recognizing SARCs and SAPR VAs within the Military Departments, and with consent of the Secretary of the Department of Homeland Security, the SARCS and/or SAPR VAs of the Department of Homeland Security.

w. Administer and monitor the D-SAACP Program for compliance with Reference (ai).

2. SAPR IPT Meeting, or as modified by USD(P&R):

a. Membership. The SAPR IPT shall include:

(1) Director, SAPRO. The Director shall serve as the chair.

(2) Deputy Assistant Secretaries for Manpower and Reserve Affairs of the Department of the Army

(3) Director, Air Force Sexual Assault Prevention and Response Program.

(4) A senior representative of the Department of the Navy SAPRO.

(5) A GO/FO or DoD SES civilian from: the Joint Staff, Manpower and Personnel (J-1); the Office of the Assistant Secretary of Defense for Reserve Affairs; the NGB; the Office of the General Counsel, DoD; and the Office of the Assistant Secretary of Defense for Health Affairs. Other DoD Components' representatives shall be invited to specific SAPR IPT meetings when

their expertise is needed to inform and resolve issues being addressed. A senior representative from the Coast Guard shall be an invited guest.

(6) Consistent with Section 8(c) of Reference (z), also known as “The Inspector General Act of 1978,” the IG DoD shall be authorized to send one or more observers to attend all SAPR IPT meetings in order to monitor and evaluate program performance.

b. Duties. The SAPR IPT shall:

(1) Through the chair, advise the USD(P&R) and the Secretary of Defense on SAPR IPT meeting recommendations on policies for sexual assault issues involving persons covered by this instruction.

(2) Serve as the implementation and oversight arm of the DoD SAPR Program. Coordinate policy and review the DoD’s SAPR policies and programs consistent with this instruction and Reference (c), as necessary. Monitor the progress of program elements and requirements, to include DoD SAPR Strategic Plan tasks, awareness of prevention policies (References (at) and (ax)), and NDAA implementation for adult sexual assault related issues.

(3) Meet every other month. Ad hoc meetings may be scheduled as necessary at the discretion of the chair. Members are selected and meetings scheduled according to the SAPR IPT Charter.

(4) Discuss and analyze broad SAPR issues that may generate targeted topics for Working Groups. Working Groups shall focus on one select issue, be governed by a charter with enumerated goals for which the details will be laid out in individual work plans (see Glossary) and be subject to a definitive timeline for the accomplishment of the stated goals. Issues that cannot be resolved by the SAPR IPT or that require higher level decision making shall be sent to the USD(P&R) for resolution.

c. Chair Duties. The chair shall:

(1) Advise the USD(P&R) and the Secretary of Defense on SAPR IPT recommendations on policies for sexual assault issues involving persons covered by this instruction.

(2) Represent the USD(P&R) in SAPR matters consistent with this instruction and Reference (c).

(3) Oversee discussions in the SAPR IPT that generate topics for Working Groups. Provide final approval for topics, charters, and timelines for Working Groups.

ENCLOSURE 4

SEXUAL ASSAULT AND RETALIATION REPORTING OPTIONS AND
PROCEDURES, EXCEPTIONS, AND DECLINATION LETTERS

1. IMPLEMENTING DoD DUAL OBJECTIVES. The DoD is committed to ensuring victims of sexual assault are protected; treated with dignity and respect; and provided support, advocacy, and care. The DoD supports effective command awareness and prevention programs. The DoD also strongly supports applicable DoD law enforcement and criminal justice procedures that enable persons to be held appropriately accountable for sexual assault offenses and criminal dispositions. To achieve the dual objectives of victim support and offender accountability, DoD preference is for Unrestricted Reporting of sexual assaults to allow for the provision of victims' services and to pursue offender accountability, as appropriate. However, Unrestricted Reporting may represent a barrier for victims to access services when the victim desires no command or DoD law enforcement involvement. Consequently, the DoD recognizes a fundamental need to provide a confidential disclosure vehicle via the Restricted Reporting option. This section provides procedural guidance and considerations to implement the DoD dual objectives.

a. Restricted Reporting Impact. Restricted Reporting will impact investigations and the ability to hold the suspect appropriately accountable. However, such risks shall not outweigh the overall interest in providing a Restricted Reporting option to sexual assault victims.

b. Victim's Perception of the Military Justice System. The DoD seeks increased reporting by victims of sexual assault. A system that is perceived as fair and treats victims with dignity and respect, and promotes privacy and confidentiality may have a positive impact in bringing victims forward to provide information about being assaulted. The Restricted Reporting option is intended to give victims additional time and increased control over the release and management of their personal information and empowers them to seek relevant information and support to make more informed decisions about participating in the criminal investigation. A victim who receives support, appropriate care and treatment, and is provided an opportunity to make an informed decision about a criminal investigation is more likely to develop increased trust that the victim's needs are of concern to the command. As a result, this trust may eventually lead the victim to decide to pursue an investigation and convert the Restricted Report to an Unrestricted Report.

2. REPORTING OPTIONS SERVICE MEMBERS AND THEIR ADULT DEPENDENTS. Service members and military dependents 18 years and older, who have been sexually assaulted, have two reporting options: Unrestricted or Restricted Reporting. Unrestricted Reporting of sexual assault is favored by the DoD, so it can hold offenders appropriately accountable. However, Unrestricted Reporting may present a barrier for victims to access services when the victim desires no command or DoD law enforcement involvement. Consequently, the DoD recognizes a fundamental need to provide a confidential disclosure vehicle via the Restricted Reporting option for those individuals who desire confidentiality to seek support services without prompting notification to command/supervisors, an OTSC, or the investigative

community. Regardless of whether the victim elects Restricted or Unrestricted Reporting, confidentiality of medical information shall be maintained in accordance with DoD Manual 6025.18 (Reference (as)).

a. Unrestricted Reporting. This reporting option triggers an investigation, command (or civilian equivalent) and OSTC notification, and allows a person who has been sexually assaulted to access healthcare (medical and mental health) treatment and the assignment of a SARC and a SAPR VA. A victim may not change their Unrestricted Report to a Restricted Report. 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 (medical and mental health) treatment and a SAFE, and inform the victim of available resources. The SARC or SAPR VA will explain the contents of the DD Form 2910 (for Service members, Reserve Component, and adult military dependents) and request that the victim elect a reporting option on the form. 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. If a victim elects this reporting option, a victim may not change from an Unrestricted to a Restricted Report.

b. Restricted Reporting. This reporting option does NOT trigger an investigation. The command is notified of the sexual assault report, but is not given the victim's name or other personally identifying information. Restricted Reporting allows adult sexual assault victims to confidentially disclose the assault to specified individuals (SARC, SAPR VA, or healthcare personnel), be offered healthcare (medical and mental health) and the assignment of a SARC and SAPR VA. A sexual assault victim can report directly to a SARC, who will respond or direct a SAPR VA to respond and explain the contents of the DD Form 2910 to the victim, including availability of healthcare treatment, if eligible, and other resources. The Restricted Reporting option is only available to Service members, adult military dependents, and DoD civilian employees whose organization has established a SAPR Program. Restricted Reporting may not be available in a jurisdiction that requires mandatory reporting if a victim first reports to a civilian facility or civilian authority. However, section 536 of Reference (q) preempts mandatory reporting laws when a victim reports the sexual assault to a SARC, SAPR VA, or healthcare personnel on the military installation, except where disclosure of personally identifiable information is necessary to prevent an imminent threat to the health or safety of an individual. 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.

(1) Only the SARC, SAPR VA, and healthcare (medical and mental health) 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 Reference (w), who received a Restricted Report shall contact a SARC or SAPR VA in accordance with requirements in Enclosure 7 of this volume, to ensure that a victim is offered SAPR services and so that a DD Form 2910 can be completed and retained.

(2) A SAFE, which includes both medical forensic care and a collection of samples that may be used as evidence, and the information contained in its accompanying SAFE Kit, are all provided the same confidentiality as is afforded victim statements under the Restricted Reporting option. See Enclosure 8 of this volume.

(3) In the course of otherwise privileged communications with a chaplain, SVC/VLC/VC, or legal assistance attorney, a victim may indicate that they wish to file a Restricted Report. If this occurs, a chaplain, SVC/VLC/VC, 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 or DD Form 2910-8 can be completed. A chaplain, SVC/VLC/VC, or legal assistance attorney cannot accept a Restricted Report.

(4) 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 Reference (w).

(5) 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.

(6) Victims covered by this instruction are eligible to file a Restricted Report, providing they did not personally report the sexual assault incident to law enforcement (including MCIOs), unless the Law Enforcement Sexual Assault Victim Disclosure Exception in DoDI 5505.18 (Reference (ac)) applies; and they did not previously elect to make an Unrestricted Report with a SARC or SAPR VA by signing a DD Form 2910 on the same sexual assault incident. Victims covered by this instruction are eligible to file Restricted Reports even if:

(a) They disclosed the sexual assault incident to their commander or to personnel in the chain of command;

(b) There is an ongoing MCIO investigation into the sexual assault incident initiated by a third party and not due to the victim's disclosure to law enforcement; or

(c) The MCIO investigation into the sexual assault incident has been closed.

(7) In accordance with section 1742 of Reference (o), a commander who receives a report of a sex-related offense involving a Service member within their chain of command will immediately refer the report to the MCIO of the Military Department concerned with the responsibility for investigating that offense. The appropriate OSTC shall also be notified.

(a) A commander retains their duty, in accordance with DoDI 5505.18 (Reference (ac)), DoDI 5505.19 (Reference (ak)), section 1742 of Reference (o), and this instruction, to immediately contact the MCIO upon being notified of a sexual assault, WHETHER OR NOT the sexual assault victim or suspect is in their own chain of command.

(b) Military law enforcement and MCIOs retain their duty to initiate a criminal investigation in response to allegations of adult sexual assault in accordance with DoDI 5505.03 (Reference (bg)) and DoDI 5505.18 in Reference (ac), unless the Law Enforcement Sexual Assault Victim Disclosure Exception in DoDI 5505.18 (Reference (ac)) applies.

1. Commanders and personnel in the chain of command will encourage individuals covered by this instruction who report experiencing a sexual assault to meet with a SARC or SAPR VA.

2. The commander and other appropriate personnel in the chain of command will inform:

a. The victim disclosing the sexual assault of the reporting requirements of the Commanders and personnel in the chain of command, including notifying the MCIO and the SARC.

b. The victim that this disclosure (to a Commander or personnel in the chain of command) has no impact on their eligibility to file a Restricted or Unrestricted Report.

3. REPORTING OPTIONS FOR DOD CIVILIAN EMPLOYEES. See Appendix to Enclosure 4.

4. REPORTING OPTIONS FOR DOD CIVILIAN EMPLOYEES' DEPENDENTS AND DOD CONTRACTORS. The family dependents of DoD civilian employees and DoD contractors are only eligible for Unrestricted Reporting and for limited SAPR Services. See Applicability Section at the beginning of this volume.

5. OTHER REPORTING POLICIES.

a. Non-Participating Victim (see Glossary). For victims choosing either Restricted or Unrestricted Reporting, the following guidelines apply:

(1) Details regarding the incident will be limited to only those personnel who have an official need to know. The victim's decision to decline to participate in an investigation or prosecution should be honored by all DoD 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. If at any time the victim who originally chose the Unrestricted Reporting option declines to participate in such an investigation or prosecution, that decision should be honored. The victim should be informed by the SARC or SAPR VA that the investigation/prosecution, as appropriate, may continue regardless of whether the victim participates.

(2) 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/VLC/VC, when eligible for such services as determined by this instruction and regulations of the Military Department concerned.

(3) If a victim approaches a SARC, SAPR VA, or healthcare provider and begins to make a report, but then changes their 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 of Reference (w), as applicable.

b. Non-Participating Victim "Section 540K Declination Letter" for MCIO Investigations.

(1) In MCIO investigations that are initiated upon third-party reports or by command (if a Service member reports a sex-related offense to a supervisor in the chain of command), an individual identified as a victim may, should they desire, submit a Section 540K Declination to Participate in the MCIO Investigation letter (referred to in this instruction as a "Section 540K Declination Letter") to document the decision not to participate in the investigation and reason for declining.

(2) The number of Section 540K Declination Letters filed and reasons for declining participation in the investigation, if known, shall be reported in DSAID. The total number filed may be used to comply with congressional reporting requirements or other requests for information, as appropriate.

(3) Victims may decline to participate in a sexual assault investigation. The victim's declination to participate has no compulsory effect on the investigative or military justice process within the Department of Defense. Such investigation or military justice process may proceed as appropriate, and can continue without the victim's participation. However, in situations where a victim's statement is required to identify the suspect and/or is essential to the furtherance of the case, the victim's declination to participate may result in such investigation being terminated.

(a) By contrast, in cases where a suspect has been identified, military law and policy requires the investigation to continue despite the victim's wishes. This reflects the overarching need in the military not only to promote public safety, but also to ensure good order and discipline within the Military Services.

(b) Cases involving a suspect in a position of authority will be fully investigated by the relevant DoD authorities in all circumstances, despite a victim filing a Section 540K Declination Letter.

(4) Assessing a victim's intended level of participation at the outset of an investigation may allow criminal investigators to determine if conditions permit them to respect the victim's documented desire for privacy.

(a) If conditions allow an investigation to be terminated based on a victim's declination to participate, then the DoD should accede to the victim's desires, whenever practicable.

(b) A victim's declination to participate in an investigation will be fully acknowledged by MCIO criminal investigators; i.e., the MCIO will tell the victim that they understand the victim's concerns.

(c) The MCIO acknowledgment will also:

1. Make it clear to the victim that the victim's decision was considered.
2. Explain whether the victim's decision will drive closure of the case.
3. In cases where investigation must proceed despite the victim's wishes, explain why the case was not closed.

(5) Current policy allows eligible victims to consult with an SVC/VLC/VC or retain private counsel, at their own expense, on a wide variety of military justice process matters, including a desire not to participate in the investigation.

(6) Victims have the right to be heard and to have their decision not to participate in a DoD investigation formally documented. A victim is authorized to use the Section 540K Declination Letter when the appropriate MCIO has initiated an investigation, as required by DoDI 5505.18 in Reference (ac) and DoDI 5505.03 Reference (bg). The following procedures will be followed:

(a) In MCIO investigations that are initiated upon third-party reports or by command (when a victim disclosed their sexual assault to a supervisor in the chain of command, not realizing the supervisor would contact criminal investigators), or pursuant to an exception to Restricted Reporting, the MCIOs concerned will contact the victim as soon as possible after receipt of the allegation and, to the extent practicable, before contacting any other potential witnesses. At that time, the MCIO will determine the victim's desired level of participation and protect victim privacy.

1. MCIOs must provide the victim the opportunity to speak to an SVC/VLC/VC before conducting their victim interview, in accordance with section 1044e of Reference (d) and DoDI 5505.18 in Reference (ac).

2. When the victim intends to decline to participate in the investigation, they will then be encouraged to consult with an SVC/VLC/VC and to provide the MCIOs concerned with written notice of their decision as soon as possible.

3. The MCIO will immediately contact the SARC and also encourage the victim to speak with the SARC to review reporting options and receive information about victims' rights and services.

(b) To protect against the loss of critical evidence and to protect the privacy of the victim, the MCIOs should (whenever practicable) prioritize other investigative activity associated with the allegation and proceed with investigating the offense consistent with this instruction, without the involvement of the victim who reported, until they have spoken to the victim about their intended level of participation or until the MCIOs have received the victim's declination letter.

1. In addition, whenever practicable, the MCIOs concerned will formulate an investigative protocol that aims to protect the victim's privacy until the MCIO has spoken with the victim.

2. In situations when the victim intends to decline to participate in the MCIO investigation, the Section 540K Declination Letter will be the official means by which a victim will document that decision not to participate in the investigation and, if desired, the rationale for the decision. The victim will then be encouraged to consult with an SVC/VLC/VC and provide the MCIOs with written notice of their decision as soon as possible.

(c) In situations where the victim has met with a SARC or SAPR VA, if the victim opts to file an official report through a DD Form 2910, the SARC or SAPR VA must facilitate a Safety Assessment in accordance with this volume and notify the victim of the option to have a SAFE. The SARC or SAPR VA will inform the victim of the opportunity to submit the suspect's information in the CATCH Program.

(d) Regardless of whether the victim filed a DD Form 2910, the SARC/SAPR VA will offer the victim a referral to an SVC/VLC/VC, if eligible, and recommend that the victim meet with an SVC/VLC/VC or consult with retained private counsel to fill out the Section 540K Declination Letter as desired.

(e) If the victim meets with their assigned SVC/VLC/VC, in the course of providing legal advice and representation to the victim and in accordance with Service-specific policies, the following topics should be addressed:

1. Potential implications of requesting that the investigation be terminated, including loss of evidence and investigative leads.

2. The option of requesting to reopen the investigation. However, the victim should also be notified that the passage of time may result in the loss of evidence and the ability to conduct a thorough investigation, limiting the investigator's ability to successfully resume the investigative process.

3. The importance of the victim's decision being freely made and not subject to external influences, such as retaliation, ostracism, coercion, or fear of reprisal.

4. If desired, that an SVC/VLC/VC can assist with the completion of the Section 540K Declination Letter and facilitate the submittal of the letter to the appropriate MCIO.

(f) If the victim does not, or declines to, consult with an SVC/VLC/VC or private counsel and informs the assigned MCIO investigator that they do not want to participate in the investigation, the MCIO investigator will give the victim a Section 540K Declination Letter form; repeat the recommendation that the victim meet with an SVC/VLC/VC for help filling out the letter and the implications associated with doing so; and ask the victim if:

1. Anyone is influencing or coercing the victim to decline to participate in the investigation.

2. Anyone is threatening or retaliating against the victim because of the open sexual assault investigation.

3. They have any safety concerns related to the investigation of the sexual assault incident.

(g) If the victim submits a Section 540K Declination Letter, the MCIO investigator will notify the installation-level field supervisor and request a decision on whether the investigation should be closed. Such decisions will follow established policy and involve legal coordination, as appropriate.

1. The investigation will be paused pending approval by the installation-level field supervisor. The victim's Section 540K Declination Letter and the decision regarding case closure will be documented in the case file with the date and the name of the supervisor.

2. If the installation-level field supervisor approves closing the investigation, the MCIO will notify the victim or the victim's legal representative that the investigation is closed, but can be reopened at any time if the victim changes their mind. The MCIO investigator will document in the case file that the victim (or their designated SVC/VLC/VC or private counsel) was notified and include the date, time, and method of notification.

3. If circumstances do not allow for the termination of the investigation, such as when the identity of the suspect is known or investigators have viable leads to discover it, the installation-level field supervisor will disapprove closing the investigation. The MCIO investigator will notify the victim of that decision to continue the investigation and the reasons for doing so and include the date, time, and method of notification.

4. In all circumstances, the victim's Section 540K Declination Letter will be retained by the appropriate MCIO, as this reflects an investigatory process and not a SAPR advocacy function.

(h) If the victim retains an SVC/VLC/VC or private counsel, the MCIO shall direct all communication to victim's counsel, as appropriate.

(7) Third-party reporters of sexual assault will not be notified of the MCIO's decision to honor the victim's request not to participate in the investigation. Third-party reports often reflect an individual's concern for the safety of the reported victim, the mission, and for society. However, it is not DoD policy to inform a third-party reporter of the status of a criminal investigation when the third-party reporter is not the victim. Consequently, MCIOs will inform third-party reporters upon receipt of an allegation that a status or eventual outcome of an investigation will not be shared with the reporter.

(8) Criminal investigations will proceed according to established policy and procedure when victims do not submit the Section 540K Declination Letter. A delay in submission of the letter may jeopardize the MCIO's ability to close the investigation.

f. 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 SAFE and the accompanying Kit to DoD law enforcement or command authorities, either within or outside the DoD, except as provided in this instruction. In certain situations, information about a sexual assault may come to the commander's or DoD law enforcement official's (to include 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. An independent investigation does not, in itself, convert the Restricted Report to an Unrestricted Report. Improper disclosure of confidential communications 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.

g. 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.

(1) Communication with Another Person. To the extent provided for in this Volume, a victim's communication to another person (e.g., roommate, friend, family member) stating that they were sexually assaulted, does not, in and of itself, prevent the victim from later electing to make a Restricted Report. The individual receiving this personal communication may choose to keep the victim's communication private or may choose to report the incident to command or law enforcement (unless the person is a SARC, SAPR VA, or healthcare personnel. If the person does notify command or law enforcement, the report is considered a "third-party report" and may be investigated by the MCIO. Despite the third-party report, notification to command or law enforcement in this situation, a victim still retains the eligibility to make a Restricted Report. Restricted Reporting is confidential, not anonymous, reporting.

(a) All victim disclosures made directly to law enforcement, to include MCIOs investigators, carry no expectation of confidentiality and are not eligible for a Restricted Report, unless the Law Enforcement Sexual Assault Victim Disclosure Exception is applicable in DoDI 5505.18 (Reference (ac)).

(b) A victim may disclose a sexual assault incident to someone in their chain of command without realizing that, as a result of doing so, personnel in the chain of command are required to immediately notify the commander and the MCIO. However, in this circumstance, while a victim may still elect to file a Restricted Report, such an election does not preclude the initiation of an investigation into the allegations.

(c) Communications between the victim and a person other than the SARC, SAPR VA, healthcare personnel privileged and do not receive the protections of Restricted Reporting. Communications with the victim's assigned SVC/VLC/VC, legal assistance officer, or chaplain may receive other types of confidentiality protections under the MRE.

(2) Law Enforcement Sexual Assault Victim Disclosure Exception. The Law Enforcement Sexual Assault Victim Disclosure Exception (regarding eligibility criteria for Restricted Reporting) is established in policy pursuant to DoDI 5505.18 (Reference (ac)) and is incorporated in this instruction by reference.

h. 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.

(1) A concurrent independent sexual assault investigation by an MCIO will not preclude the individual identified as a victim in the matter from being eligible to file a Restricted Report. For example, if there is an ongoing investigation of the victim's sexual assault and the MCIO notifies the SARC of the investigation before the victim makes a Restricted Report, this has no impact and the victim is still eligible to file a Restricted Report.

(2) Even though the Restricted Report does not directly impact the status of the ongoing investigation, the Restricted Report does provide the victim a level of privacy. As a result of the filing of the Restricted Report, the victim's commander, once they know of the Restricted Report status of the victim, and unless an exception to Restricted Reporting applies, will:

- (a) Not ask the SARC or SAPR VA any details about the Restricted Report.
- (b) Not seek to speak to the victim about the reported sexual assault incident.

(3) Victims retain eligibility for a Restricted Report AFTER the investigation has closed to facilitate access to SAPR advocacy services that facilitate access to healthcare (medical and mental health), SVC/VLC/VC, and a safety assessment. In addition, after filing the Restricted Report, victims receive a copy of the completed DD Form 2910, which they can use with the Department of Veterans Affairs as documentation of their sexual assault report, such as when seeking healthcare services or filing a disability claim.

i. Mandatory Reporting Laws and Cases Investigated by Civilian Law Enforcement.

Healthcare may be provided and SAFE Kits may be performed in a civilian healthcare facility bound by State and local laws that require certain personnel (usually healthcare personnel) to report the sexual assault to civilian agencies or law enforcement. 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. 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. Consistent with section 536 of Reference (q), 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.

6. INITIATING MEDICAL CARE AND TREATMENT UPON RECEIPT OF REPORT. In accordance with DoDI 6310.09(Reference (aj)), healthcare personnel (medical and mental health) will initiate the emergency care and treatment of sexual assault victims, notify the SARC or the SAPR VA in accordance with Enclosure 7 of this volume, and make appropriate medical referrals for specialty care, if indicated. Upon receipt of a Restricted Report, only the SARC or the SAPR VA will be notified. There will be NO report to DoD law enforcement, a supervisory official, or the victim's chain of command, or OSTC by the healthcare personnel, unless an exception to Restricted Reporting applies or applicable law or regulations requires other officials to be notified. Regardless of whether the victim elects Restricted or Unrestricted Reporting, confidentiality of medical information will be maintained in accordance with applicable laws and DoD regulations.

7. **REPORTS AND COMMANDERS**

a. **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 the military suspect) with information regarding all Unrestricted Reports within 24 hours of an Unrestricted Report of sexual assault. 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. SARC and SAPR VA communications with victims are protected under the MRE 514 privilege of Reference (w). For Unrestricted Reports, the 8-day incident report will be filed in accordance with section 1743 of Reference (o).

b. **Restricted Reports to Commanders.** For the purposes of public safety and command responsibility, in the event of a Restricted Report, the SARC shall report non-PII concerning sexual assault incidents (without information that could reasonably lead to personal identification of the victim or the suspect 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. To ensure oversight of victim services for Restricted Report cases, the SARC will also confirm in their report that the victim has been offered SAPR advocacy services, an explanation of the notifications in the DD Form 2910; healthcare (medical and mental health) and informed of their eligibility for an SVC/VLC/VC. The 8-day incident report is not required for Restricted Reports in accordance with section 1743 of Reference (o). SARC and SAPR VA communications with victims are protected by the Restricted Reporting option and the MRE 514 privilege of Reference (w).

(1) 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. Restricted Reporting gives the installation commander a clearer picture of the reported sexual assaults within the command. 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 conditions within the organization's climate and culture for contributing factors.

(2) 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.

8. EXCEPTIONS TO RESTRICTED REPORTING AND DISCLOSURES

a. The SARC will evaluate the confidential information provided under the Restricted Report to determine whether an exception applies.

(1) The SARC shall disclose the otherwise protected confidential information only after consultation with the SJA of the installation commander, supporting judge advocate or other legal advisor concerned, who shall advise the SARC whether an exception to Restricted Reporting applies. In addition, the SJA, supporting judge advocate, or other legal advisor concerned will analyze the impact of MRE 514 of Reference (w) on the communications.

(2) When there is uncertainty or disagreement on whether an exception to Restricted Reporting applies, the matter shall be brought to the attention of the installation commander for decision without identifying the victim (using non-PII information). Improper disclosure of confidential communications under Restricted Reporting, improper release of medical information, and other violations of this guidance are prohibited and may result in discipline pursuant to the UCMJ or loss of privileges, loss of certification or credentialing, or other adverse personnel or administrative actions.

b. The following exceptions to the prohibition against disclosures of Restricted Reporting authorize a disclosure of a Restricted Report only when the SJA consultation described in paragraph 5.a. has occurred and only if one or more of the following conditions apply:

(1) Authorized by the victim in writing.

(2) Necessary to prevent or mitigate a serious and imminent threat to the health or safety of the victim or another person; for example, multiple reports involving the same suspect (repeat offender) could meet this criterion. See similar safety and security exceptions in MRE 514 of Reference (w).

(3) Required for fitness for duty or disability determinations. This disclosure is limited to only the information necessary to process duty or disability determinations for Service members. Disclosure of a Restricted Report under these circumstances does not change the nature of the victim's Restricted Report, nor does it create an obligation for reporting to law enforcement or command for investigation.

(4) Required for the supervision of coordination of direct victim healthcare or services. The SARC, SAPR VA, or healthcare personnel can disclose specifically requested information to those individuals with an official need to know, or as required by law or regulation.

(5) Ordered by a military official (e.g., a duly authorized subpoena in a UCMJ case), Federal or State judge, or as required by a Federal or State statute or applicable U.S. international agreement. The SARC, SAPR VA, and healthcare personnel will consult with the installation commander's servicing legal office, in the same manner as other recipients of privileged

information, to determine if the exception criteria apply and whether a duty to disclose the otherwise protected information is present. Until those determinations are made, only non-PII shall be disclosed.

c. Healthcare personnel may also convey to the victim's unit commander any possible adverse duty impact related to the victim's medical condition and prognosis in accordance with References (aa) and (ba). However, such circumstances do NOT otherwise warrant disclosure of a Restricted Report, unless disclosure is necessary to prevent or mitigate a serious and imminent threat to the health or safety of an individual. Therefore, the confidential communication related to the sexual assault may not be disclosed. Improper disclosure of confidential communications, improper release of medical information, and other violations of this volume and Reference (c) are prohibited and may result in disciplinary or other adverse personnel or administrative actions, or loss of privileges.

d. The SARC or SAPR VA shall inform the victim when a disclosure in accordance with the exceptions in this section of this enclosure is made. Whenever possible, the victim should be notified in advance of the disclosure.

e. If a SARC, SAPR VA, or healthcare personnel makes an unauthorized disclosure of a confidential communication, that person is subject to disciplinary action. Unauthorized disclosure has no impact on the status of the Restricted Report. All Restricted Reporting information is still confidential and protected, to the extent authorized by law and this instruction. However, unauthorized or inadvertent disclosures made to a commander or law enforcement shall result in notification to the MCIO.

9. ACTIONABLE RIGHTS. Restricted Reporting does not create any actionable rights for the victim or suspect or constitute a grant of immunity for any actionable conduct by the suspect or the victim. Additionally, nothing in this instruction confers or is intended to confer any additional benefits or entitlements to which an individual is not already authorized by law or other DoD policy.

10. RESOURCES FOR VICTIMS AND OTHERS TO REPORT RETALIATION, REPRISAL, OSTRACISM, MALTREATMENT, SEXUAL HARASSMENT, OR TO REQUEST AN EXPEDITED/SAFETY TRANSFER OR MILITARY PROTECTIVE ORDER (MPO)/CIVILIAN PROTECTIVE ORDER (CPO). SARCs and 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 located in Paragraph 3.2. of Retaliation DoDI (Reference (au)). A retaliation report within the SAPR Program:

a. Can only be filed for a retaliation associated with an Unrestricted Report of sexual assault. However, the reporter can always file any retaliation report with the OIG or the other resources listed in the Retaliation DoDI (Reference (au)).

b. Will be accomplished by signing a DD Form 2910-2 and in accordance with the procedures in the Retaliation DoDI (Reference (au)).

APPENDIX TO ENCLOSURE 4

SEXUAL ASSAULT REPORTING AND SERVICES FOR DoD CIVILIAN EMPLOYEES

1. This Appendix applies to the Secretaries of the Military Departments, Chief, NGB, and DoD Components that have SAPR programs.
2. This Appendix implements section 1101 of the National Defense Authorization Act for Fiscal Year 2023 (Reference (ay)), authorizing a Restricted and Unrestricted Reporting option for adult sexual assault and related SAPR services for DoD civilian employees to the extent provided for in this Appendix.
3. DoD civilian employees are authorized to file a Restricted or Unrestricted Report of adult sexual assault with their OWN employing organization if their employing organization has a SAPR Program.
4. The authorization to file a Restricted or Unrestricted Report does not confer any additional benefits or entitlements beyond that which is contained in this Appendix, or as provided for in DoDM 1000.13, Volume 2 (Reference (bp)).
5. Organizations that do not have a SAPR Program may enter into a written support agreement with another DoD Component to enable their own civilian employees to make a Restricted or Unrestricted Report of adult sexual assault, and receive limited SAPR services from the supporting organization, subject to the availability of resources and funds.
6. Procedures for Components with SAPR Programs:
 - a. DoD civilian employees who report experiencing adult sexual assault shall be offered the assistance of a SARC and a SAPR VA to assist with filing a Restricted or Unrestricted Report, immediate crisis intervention, and referrals to available resources.
 - b. DoD civilian employees may be provided victim assistance through their employing organization's SAPR Program if available, or through other available resources, including advocacy, support, and referrals available through workplace violence prevention and response programs in accordance with the guidance in DoDI 1438.06 (Reference (bj)) and in the USD(P&R) March 11, 2021 memorandum (Reference (bk)), which authorized DoD civilian employees who have experienced adult sexual assault to obtain advocacy, support, and referrals available through workplace violence prevention and response programs.
 - c. DoD civilian employees (who are not adult dependents of Service members or in the Reserve Component) who elect to file a report of sexual assault through the SAPR Program will use DD Form 2910-8, "Reporting Preference Statement for DoD Civilian Employees to Report Sexual Assault" to file a report of adult sexual assault. The DD Form 2910-8 will be retained for 50 years for sexual assault reports involving a Service member.

(1) If the sexual assault victim is a DoD civilian employee who is also an adult military dependent or a member of the Reserve Component (Reservist or National Guard) eligible for SAPR services, the victim will ONLY use the DD 2910 to file a report and will NOT file a DD Form 2910-8, because their status as a military dependent or Reserve Component member may make them eligible for additional services. A victim would never file both forms.

(2) The DD Form 2910-8 report does not confer any additional entitlements to civilian employment for which DoD civilian employees are not otherwise entitled.

7. If a DoD civilian employee files an Unrestricted Report, law enforcement shall be notified. In addition, the victim's commander, or civilian supervisor, and the OSTC concerned will be notified of the sexual assault report.

8. Components shall comply with collective bargaining obligations, as applicable.

9. Disclosure of an adult sexual assault incident to a union representative does not constitute an official report of sexual assault to the DoD SAPR program. Additionally, union representatives who are not credentialed SARCs or SAPR VA are not authorized to accept a Restricted or Unrestricted Report of sexual assault.

10. The Military Departments, NGB and DoD components that have SAPR programs, should have processes in place addressing how disclosures of sexual assaults to DoD civilian employees serving as union representatives are handled.

11. Filing an Unrestricted or Restricted Report through the SAPR program does not toll or otherwise supersede timeframes established by law or regulation pertaining to federal employment programs.

12. The receipt of a Restricted Report by a SARC or SAPR VA shall not be construed as imputing actual or constructive knowledge of an alleged incident of sexual assault to the DoD for any purpose.

13. Allegations of retaliation by DoD civilian employees will be made through existing programs and procedures independent of the SAPR program.

a. The SAPR Program does NOT accept RETALIATION allegations from DoD civilian employees.

b. DoD civilian employees who believe they are experiencing retaliation should consult with their component's Equal Employment Opportunity Office, Inspector General's Office, or Human Resources office.

14. CATCH Program Eligibility.

a. Current DoD Civilian Employees who file, or have already filed, a Restricted Report using a DD Form 2910-8. The Restricted Report will not be converted to an Unrestricted Report

based on the information provided by the employee through the CATCH Program without the victim's written permission on a revised DD Form 2910-8 (where the Restricted Report is converted to Unrestricted).

b. Current DoD Civilian Employees who file, or have already filed, an Unrestricted Report with a DD Form 2910-8, for eligible CATCH suspects as detailed in the DD Form 2910-8 and the identity of the suspect was not disclosed by the victim or uncovered by law enforcement, to include MCIOs (e.g., third-party report with no suspect identification).

(1) Information from the CATCH Entry in the CATCH System: If notified of a potential match, the Unrestricted Reporting victim can decide whether they now want to participate in the investigation.

(2) Information from the original Unrestricted Report made to law enforcement: While the information from the CATCH Entry cannot be used by law enforcement to investigate until there is a match and the victim consents, the information from the original Unrestricted Report made to law enforcement may be used by MCIOs for investigative purposes or as otherwise authorized by law.

c. Who make an SRI CATCH Entry through a SARC or SAPR VA with a DD Form 2910-4, for eligible CATCH suspects as detailed in the DD Form 2910-4.

ENCLOSURE 5

COMMANDER AND MANAGEMENT SAPR PROCEDURES

1. SAPR MANAGEMENT. Commanders, supervisors, and managers at all levels are responsible for the effective implementation of the SAPR program and policy. Military and DoD civilian officials at each management level shall advocate a strong SAPR program, and provide education and training that shall enable them to prevent and appropriately respond to incidents of sexual assault.

2. INSTALLATION COMMANDER SAPR RESPONSE PROCEDURES. Each installation commander shall:

a. Develop guidelines to establish a 24 hours per day, 7 days per week sexual assault response capability for their locations, including deployed areas. For SARCs that operate within deployable commands that are not attached to an installation, senior commanders of the deployable commands shall ensure that equivalent SAPR standards are met. All SARCs will have direct and unimpeded contact and access to the installation commander (see Glossary), and the immediate commander of both the Service member victim and Service member suspect. The installation commander will have direct contact with the SARC; this responsibility will not be delegated.

b. Require ALL supervisors, officer and enlisted, down to the most junior supervisor, to receive specialized training that explains:

(1) That ALL personnel in the victim's chain of command, officer and enlisted, are required when they become aware of allegations of retaliation, reprisal, ostracism, or maltreatment to take appropriate measures to protect the victim.

(2) What constitutes retaliation, reprisal, ostracism, and maltreatment in accordance with the Retaliation DoDI (Reference (au)), and Military Whistleblower Protections and procedures for reporting allegations of reprisal in accordance with Reference (am).

(3) The resources available for victims (listed in Enclosure 4 of this volume) to report instances of retaliation, reprisal, ostracism, maltreatment, or sexual harassment or to request a transfer or MPO.

(4) That victims who reported a sexual assault or sought mental health treatment for sexual assault have the opportunity to discuss issues related to their military career with the GO/FO that the victim believes are associated with the sexual assault.

c. Ensure that 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.

(1) Identify installation personnel who have been trained and are able to perform a safety assessment of each sexual assault victim, regardless of whether they filed a Restricted or Unrestricted Report. Individuals tasked to conduct safety assessments must occupy positions that do not compromise the victim's reporting options.

(2) The safety assessment will be conducted as soon as possible.

d. In situations where installations do not have a SAFE capability or MOA in place, the installation commander will require that the eligible victim who wishes to have a SAFE be transported via governmental mode of transportation to an MTF or off-base civilian facility that has a SAFE capability.

3. COMMANDER SAPR RESPONSE PROCEDURES. Each Commander shall:

a. Respond appropriately to incidents of sexual assault. Use the "Commander's Checklist for Unrestricted Reports" to facilitate the response to the victim and a suspect, and an appropriate response for a sexual assault within a unit. The "Commander's Checklist for Unrestricted Reports" is located in the SAPR Policy Toolkit for Commanders and SARCs, on <https://www.sapr.mil/toolkit-for-commanders-and-sarcs>. This Checklist may be expanded by the Military Services to meet Service-specific requirements and procedures. The "Commander's Checklist for Unrestricted Reports" is different from the requirement to review the "Victim's Commander's Package," which is developed by the SARC and SAPR VA within 24 hours of the Unrestricted Report, and contains recommendations provided to the victim's commander for the adult sexual assault victim's immediate and ongoing care, to include any known safety concerns or retaliation.

b. Meet with the SARC within 30 days of taking command for one-on-one SAPR training. The training shall include a trends brief for unit and area of responsibility, the confidentiality and "official need to know" requirements for both Unrestricted and Restricted Reporting, and the requirements of the "8-day incident report" in accordance with section 1743 of Reference (o). The Sexual Assault Incident Response Oversight Report is a sample template for the 8-day report and this resource is also located in the SAPR Policy Toolkit for Commanders and SARCs, on <https://www.sapr.mil/toolkit-for-commanders-and-sarcs>. The commander must contact a judge advocate for training on the MRE 514 privilege.

c. Require that the SARC and SAPR VA be notified of every incident of sexual assault reported to DoD personnel involving Service members, including healthcare (medical and mental health) personnel. When notified, the SARC or SAPR VA shall respond to offer the victim SAPR services.

d. Require the SARC to:

(1) Provide the victim's installation commander and immediate commander the information regarding an Unrestricted Report within 24 hours of an Unrestricted Report of sexual assault.

(2) If the victim is a civilian and the suspect is a Service member, the immediate commander of that Service member shall be provided relevant information, to include any SAPR services made available to the civilian. The MCIO provides the suspect's commander with information, to the extent available, regarding the victim, and SAPR services offered, if any, to file the 8-day incident report in accordance with section 1743 of Reference (o).

(3) Provide the installation commander with non-PII, as defined in the Glossary, within 24 hours of a Restricted Report of sexual assault. This notification may be extended to 48 hours after the report of the incident if there are extenuating circumstances in the deployed environment. Command and installation demographics shall be taken into account when determining the information to be provided. To ensure oversight of victim services for Restricted Report cases, the SARC will confirm in their report that the victim has been offered SAPR advocacy services; received explanation of the notifications in the DD Form 2910; offered healthcare (medical and mental health) as applicable; and informed of eligibility for an SVC/VLC/VC. An 8-day incident report is not required for Restricted Reports in accordance with section 1743 of Reference (o).

(4) Receive SARC training to follow procedures in accordance with Enclosure 6 of this volume. Upon implementation of the D-SAACP, standardized criteria for the selection and training of SARCs and SAPR VAs shall include the application criteria in DD Form 2950 and comply with specific Military Service guidelines and certification requirements.

(5) Follow established procedures to store the DD Form 2910 pursuant to Military Service regulations regarding the storage of documents with PII. Follow established procedures to store the original DD Form 2910 and ensure that all Federal and Service privacy regulations are adhered to.

e. Evaluate healthcare personnel per Military Service regulation in the performance of SAPR procedures as described in Enclosure 7 of this volume.

f. Require adequate supplies of SAFE Kits be maintained by the active component. The supplies shall be routinely evaluated to guarantee adequate numbers to meet the need of sexual assault victims.

g. Require DoD law enforcement and healthcare personnel to comply with prescribed chain of custody procedures described in their Military Service-specific MCIO procedures. Modified procedures applicable in cases of Restricted Reports of sexual assault are explained in Enclosure 8 of this volume.

h. Require that a CMG is conducted on a monthly basis in accordance with Enclosure 9 of this volume. Ensure that:

(1) The installation commander will chair the CMG and require the attendance of the appropriate commanders in accordance with the requirements in Enclosure 9 of this volume.

(2) Commanders shall provide victims of a sexual assault who filed an Unrestricted Report monthly updates regarding the current status of any ongoing investigative, medical, legal, Expedited Transfer request, or any other request made by the victim, or command proceedings regarding the sexual assault until the final disposition (see Glossary) of the reported assault, and to the extent permitted pursuant to DoDI 1030.02 (Reference (al)), HIPAA (Reference (ab)), and section 552a of Reference (z).

(a) This is a non-delegable commander duty. However, if the victim specifically requests to receive the update from the SARC and not the commander, then the SARC can provide the update in lieu of the commander. These instances shall be documented by the SARC in DSAID in the individual case meeting minutes for EACH victim. The intent is to require that the commander have direct contact with the victim, but this may make victims anxious, which is not the intent of this victim-focused policy, and therefore the SARC can provide the update at the victim's request.

(b) This update must occur within 72 hours of the last CMG.

(c) Commanders of NG victims who were sexually assaulted when the victim was on title 10 orders and filed Unrestricted Reports are required to update, to the extent allowed by law and regulations, the victim's home State title 32 commander as to all or any ongoing investigative, medical, and legal proceedings and of any actions being taken by the active component against subjects who remain on title 10 orders.

i. Ensure that resolution of Unrestricted Report sexual assault cases shall be expedited.

(1) A unit commander who receives an Unrestricted Report of a sexual assault shall immediately refer the matter to the appropriate MCIO, to include any offense identified by the UCMJ. A unit commander shall not conduct internal command directed investigations on sexual assault (i.e., no referrals to appointed command investigators or inquiry officers) or delay immediately contacting the MCIOs while attempting to assess the credibility of the report. The appropriate OSTC shall also be notified.

(2) The final disposition of a sexual assault under the jurisdiction of DoD shall immediately be reported by the suspect's commander to the assigned MCIO. Dispositions on cases referred by MCIOs to other DoD law enforcement agencies shall be immediately reported to the MCIOs upon their final disposition. When requested by MCIOs, commanders shall provide final disposition of outcomes of sexual assault cases. Service legal officers are responsible for entering and approving the final case disposition input into DSAID and notifying the SARC of the disposition results.

j. Appoint a point of contact to serve as a formal liaison between the SARC and the installation FAP staff (or civilian domestic resource if FAP is not available for a Reserve Component victim) to direct coordination when a sexual assault occurs within a domestic relationship or involves child abuse.

k. Ensure appropriate training of all military responders be directed and documented in accordance with training standards in Enclosure 10 of this volume. Direct and document appropriate training of all military responders who attend the CMG.

l. Identify and maintain a liaison with civilian sexual assault victim resources. Where necessary, it is strongly recommended that an MOU or MOAs with the appropriate local authorities and civilian service organizations be established to maximize cooperation, reciprocal reporting of sexual assault information, and consultation regarding jurisdiction for the prosecution of Service members involved in sexual assault, as appropriate.

m. In accordance with section 1565b(a)(2) of Reference (d), a Service member or an adult military dependent who is the victim of sexual assault shall be informed of the availability of legal assistance and the services of a SARC and SAPR VA as soon as the member or adult military dependent seeks assistance from a SARC, a SAPR VA, an MCIO, a victim or witness liaison, or a trial counsel. The member or adult military dependent shall also be informed that the legal assistance and the services of a SARC or a SAPR VA are optional and may be declined, in whole or in part, at any time.

n. Direct that DoD law enforcement, not affiliated with an MCIO, when applicable, and VWAP personnel provide victims of sexual assault who elect an Unrestricted Report the information outlined in DoDI 5505.18 in Reference (ac) and DoDI 1030.02 in Reference (al) throughout the DoD investigative and legal process. The completed DD Form 2701 shall be distributed to the victim in Unrestricted Reporting cases by DoD MCIO in accordance with Reference (aa).

o. Require that investigation descriptions found in the Appendix to Enclosure 12 in this volume be used to report case dispositions.

p. Establish procedures to protect Service member victims and/or their dependents, SARCs, SAPR VAs, witnesses, healthcare providers, bystanders, and others associated with a report of sexual assault, retaliation, reprisal, ostracism, and maltreatment.

(1) Protect victims of sexual assault from retaliation, ostracism, maltreatment, and reprisal in accordance with whistleblower protections in References (am) and the Retaliation DoDI (Reference (au)), as applicable. Require the SARC or SAPR VA to inform victims of the resources, listed in Enclosure 4 of this volume, to report instances of retaliation, reprisal, ostracism, maltreatment, or sexual harassment or to request a transfer or MPO and/or CPO or to consult with an SVC/VLC/VC.

(2) Require SARCs and SAPR VAs to advise victims who reported a sexual assault or sought mental health treatment for sexual assault that they have the opportunity to discuss issues related to their military career with a GO/FO that the victim believes are associated with the sexual assault.

q. Require that sexual assault reports be entered into DSAID through interface with MCIO case management systems, or by direct data entry by authorized personnel.

r. Designate an official, usually the SARC, to provide the alpha-numeric RRCN, the DSAID case generated unique control number for Restricted Report SAFE Kits.

s. Appoint a healthcare provider, as an official duty, in each MTF to be the resident point of contact concerning SAPR policy and sexual assault care.

t. Submit an 8-day incident report in writing after an Unrestricted Report of sexual assault has been made in accordance with section 1743 of Reference (o). The 8-day incident report will only be provided to personnel with an official need to know.

4. MOUs OR MOAs WITH LOCAL CIVILIAN AUTHORITIES. The purpose of MOUs and MOAs is to:

a. Enhance communications and the sharing of information regarding sexual assault prosecutions, as well as of the sexual assault care and forensic examinations that involve Service members and eligible TRICARE beneficiaries covered by this instruction.

b. Collaborate with local community crisis counseling centers, as necessary, to augment or enhance their sexual assault programs.

c. Provide liaison with private or public sector sexual assault councils, as appropriate.

d. Provide information about medical and counseling services related to care for victims of sexual assault in the civilian community, when not otherwise available at the MTFs, so that military victims may be offered the appropriate healthcare and civilian resources, where available and where covered by military healthcare benefits.

e. Where appropriate or required by MOU or MOA, facilitate training for civilian service providers about SAPR policy and the roles and responsibilities of the SARC and SAPR VA.

5. LINE OF DUTY (LOD) PROCEDURES.

a. Members of the Reserve Components, whether they file a Restricted or Unrestricted Report, shall have access to medical treatment and counseling for injuries and illness incurred

from a sexual assault inflicted upon a Service member when performing active service, as defined in section 101(d)(3) of Reference (d), and inactive duty training.

b. Medical entitlements remain dependent on a LOD determination as to whether the sexual assault incident occurred in an active service or inactive duty training status. However, regardless of their duty status at the time that the sexual assault incident occurred, or at the time that they are seeking SAPR services (see Glossary), Reserve Component members can elect either the Restricted or Unrestricted Reporting option (see Glossary in Reference (c)) and have access to the SAPR services of a SARC and a SAPR VA.

c. Any alleged collateral misconduct by a Service member victim associated with the sexual assault incident will be excluded from consideration as intentional misconduct or gross negligence under the analysis required by section 1074a(c) of Reference (d) in LOD findings for healthcare to ensure sexual assault victims are able to access healthcare (medical and mental health) services.

d. The following LOD procedures shall be followed by Reserve Component commanders.

(1) To safeguard the confidentiality of Restricted Reports, LOD determinations may be made without the victim being identified to DoD law enforcement or command, solely for the purpose of enabling the victim to access medical care and psychological counseling, and without identifying injuries from sexual assault as the cause.

(2) For LOD determinations for sexual assault victims, the commander of the Reserve command in each component and the directors of the Army and Air NG shall designate individuals within their respective organizations to process LODs for victims of sexual assault when performing active service, as defined in section 101(d)(3) of Reference (d), and inactive duty training.

(a) Designated individuals shall possess the maturity and experience to assist in a sensitive situation, will have SAPR training, so they can appropriately interact with sexual assault victims, and if dealing with a Restricted Report, to safeguard confidential communications and preserve a Restricted Report (e.g., SARCs and healthcare personnel). These individuals are specifically authorized to receive confidential communications, as defined by the Glossary of this volume, for the purpose of determining LOD status.

(b) The appropriate SARC will brief the designated individuals on Restricted Reporting policies, exceptions to Restricted Reporting, and the limitations of disclosure of confidential communications as specified in section 5 of Enclosure 4 of this volume. The SARC and these individuals, or the healthcare provider may consult with their servicing legal office, in the same manner as other recipients of privileged information for assistance, exercising due care to protect confidential communications in Restricted Reports by disclosing only non-identifying information. Unauthorized disclosure may result in disciplinary action.

(3) For LOD purposes, the victim's SARC may provide documentation that substantiates the victim's duty status as well as the filing of the Restricted Report to the designated official.

(4) If healthcare (medical and mental health) is required beyond initial treatment and follow-up, a licensed healthcare provider must recommend a continued treatment plan.

(5) Reserve Component members who are victims of sexual assault may be retained or returned to active duty in accordance with Table 1 and section 12323 of Reference (d).

(a) A request described in Table 1 submitted by a Reserve Component member must be answered with a decision within 30 days from the date of the request, in accordance with section 571 of Reference (n).

(b) If the request is denied, the Reserve Component member may appeal to the first GO/FO in their chain of command. A decision must be made on that appeal within 15 days from the date of the appeal, in accordance with section 571 of Reference (n).

Table 1. Retention or Return to Active Duty of Reserve Component Members
for LOD Determinations to Ensure Continuity of Care

If a member of the Reserve Component...		Then...
Is expected to be released from active duty before the determination is made regarding whether they were assaulted while in the LOD in accordance with section 12323 of Reference (d)...	And the sexual assault was committed while they were on active duty	The Secretary concerned, upon the member's request, may order them to be retained on active duty until the LOD determination.
Is not on active duty and the LOD determination is not completed...		The Secretary concerned, upon the member's request, may order them to be recalled to active duty for such time as necessary for completion of the LOD determination. A member eligible for this retention or recall shall be informed as soon as practicable after the alleged assault of the option to request continuation on active duty for the LOD.

6. EXPEDITED TRANSFER REQUESTS FOR SERVICE MEMBER SEXUAL ASSAULT VICTIMS.

a. Any threat to life or safety of a Service member shall be immediately reported to command and DoD law enforcement authorities (see Glossary) and a request to transfer the victim under these circumstances will be handled in accordance with established Service regulations.

(1) 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.)

(2) The intent behind the Expedited Transfer policy in this enclosure is to address situations where a victim feels safe, but uncomfortable. An example of where a victim feels uncomfortable is where a victim may be experiencing ostracism and retaliation. The intent behind the Expedited Transfer policy is to assist in the victim's recovery by moving the victim to a new location, where no one knows of the sexual assault.

b. Service members who file an Unrestricted Report of sexual assault shall be informed by the SARC, SAPR VA, or the Service member's commanding officer, 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 Reference (d). The Service members shall initiate the transfer request and submit the request to their commanders. The commanders shall document the date and time the request is received and shall provide the servicing SARC a copy of ALL Expedited Transfer requests received by command as soon as practicable, without the SARC having to go through multiple commanders or supervisors.

(1) A presumption shall be established in favor of transferring a Service member (who initiated the transfer request) following a credible report (see Glossary) of sexual assault. The commander, or the appropriate approving authority, shall make a credible report determination at the time the expedited request is made after considering the advice of the supporting judge advocate, or other legal advisor concerned, and the available evidence based on an MCIO investigation's information (if available).

(a) Commanders, in consultation with their respective SJA, when assessing whether there is a credible report as part of the Expedited Transfer request, should consider as a factor in their decision that victims who have a history of behavioral problems or alleged collateral misconduct offenses, such as underage drinking, are the very individuals who may be at greatest risk for being sexually assaulted.

(b) If the Expedited Transfer is disapproved because there was no credible report, the grounds on which it was disapproved must be documented. A commander can always transfer a victim on other grounds, e.g., on humanitarian grounds, through a process outside of the Expedited Transfer process.

(2) Expedited Transfers of Service members who report that they are victims of sexual assault shall be limited to sexual assault offenses reported in the form of an Unrestricted Report.

(a) Sexual assault against adults is defined in the Glossary of Reference (c) and includes rape and sexual assault in violation of Article 120 of the UCMJ (section 920 of

Reference (d)), and forcible sodomy in violation of Article 125 of the UCMJ (section 925 of Reference (d)). This instruction does not address victims covered under FAP.

(b) If the Service member files a Restricted Report in accordance with Reference (c) and requests an Expedited Transfer, the Service member must affirmatively change their reporting option to Unrestricted Reporting on the DD Form 2910, in order to be eligible for an Expedited Transfer.

(3) When the suspect is the commander or otherwise in the victim's chain of command, the SARC shall inform such victims of the opportunity to go outside the chain of command to report the offense to MCIOs, other commanding officers or an Inspector General. Victims shall be informed that they can also seek assistance from a legal assistance attorney, the DoD Safe Helpline, or an SVC/VLC/VC. The relationship between an SVC/VLC/VC and a victim in the provision of legal advice and assistance will be the relationship between an attorney and client, in accordance with section 1044e of Reference (d).

(4) In accordance with this instruction, adult sexual assault victims who file Unrestricted Reports are eligible to request an Expedited Transfer. The requesting Service member victim's commander will review, approve or disapprove, and track requests for Expedited Transfers.

(a) In accordance with section 531 of Reference (bh), the application submitted by a Service member for a change of station or unit transfer must be approved or disapproved by the Service member's commander within 5 CALENDAR DAYS of the submission of the application.

(b) If the application is disapproved by the commander, the Service member will be given the opportunity to request a review by the first GO/FO in their chain of command. The GO/FO must make a decision within 5 CALENDAR DAYS of submission of the request for review.

(c) Upon receipt of the Expedited Transfer request from a Service member, the commander must immediately notify the SARC of the Expedited Transfer request. Service member victims not working with a SARC will be referred to the installation or appropriate command-level SARC. Once notified of the Service member victim's request, the SARC will immediately:

1. Inform the requesting Service member victim of the Expedited Transfer process, to include information about services and support, and the MANDATORY INTAKE MEETING with the gaining SARC upon arrival at a new installation, if the request is approved. The SARC will also inform the requesting Service member victim that at the conclusion of the intake meeting with the gaining SARC, the Service member victim may elect to continue or discontinue SAPR program services.

2. Advise the Service member victim of the requirement to have an intake meeting with the gaining commander, if the Service member victim seeks continued advocacy,

legal, or healthcare (medical and mental health) services at the new location, or if the investigation or legal proceeding involving the Service member victim's report is ongoing at the time of the transfer. If the Service member does not continue services and there is no ongoing investigative or legal proceeding, then the intake meeting with the commander is not necessary. However, the intake meeting with the SARC is still required. These are TWO SEPARATE REQUIREMENTS with different criteria.

3. Verify to the commander that the Service member victim has filed an Unrestricted Report through a DD Form 2910, and that it has been entered into the DSAID.

a. If a DD Form 2910 is not on file, the SARC will assist the Service member victim to file an Unrestricted Report through a DD Form 2910 or refer the Service member victim to the appropriate organization (i.e., FAP for domestic abuse or domestic violence related sexual assault victims or other victim assistance program, if not otherwise eligible for SAPR services).

b. The SARC will not provide a copy of the signed DD Form 2910 to the commander; verbal confirmation that a DD Form 2910 was filed is sufficient.

4. Advise the Service member victim of the requirement to have an outbrief meeting with the losing SARC if the Expedited Transfer request is approved.

5. Annotate the Expedited Transfer request and subsequent decision in DSAID, ensuring all fields are completed, upon receipt of the final decision.

(5) The commander shall expeditiously process a transfer request from a command or installation, or to a different location within the command or installation. The commander shall request and take into consideration the Service member's input before making a decision involving a temporary or permanent transfer and the location of the transfer. If approved, the transfer orders shall also include the Service member's dependents (if accompanied) or military spouse (if the military spouse consents). In most circumstances, transfers to a different installation should be completed within 30 calendar days from the date the transfer is approved. Transfers to a new duty location that do not require a change of station move should be completed within 1 week from the date the transfer is approved.

(6) The commander must approve or disapprove a Service member's request for a permanent change of station (PCS), permanent change of assignment (PCA), or unit transfer within 5 calendar days from receipt of the Service member's request. The decision to approve the request shall be immediately forwarded to the designated activity that processes PCS, PCA, or unit transfers (see Glossary).

(7) If the Service member's transfer request is disapproved by the commander, the Service member shall be given the opportunity to request review by the first GO/FO in the chain of command of the member, or an SES equivalent (if applicable). The decision to approve or disapprove the request for transfer must be made within 5 calendar days of submission of the

request for review. If a civilian SES equivalent reviewer approves the transfer, the Secretary of the Military Department concerned shall process and issue orders for the transfer. All transfer requests must be reported in the Services' and NGB Annual Program Review submission; to include all disapproved transfer requests, and the reason for disapproval.

(8) Military Departments shall make every reasonable effort to minimize disruption to the normal career progression of a Service member who reports that they are a victim of a sexual assault.

(9) Expedited Transfer procedures require that a commander or the appropriate approving authority make a determination and provide their reasons and justification on the transfer of a Service member based on a credible report of sexual assault. A commander shall:

(a) Consider the Service member's reasons for the request. The Commander shall ask:

1. The victim's preference of location.
2. Whether the victim prefers the suspect be transferred instead.

(b) Ensure that Permanent Change of Station moves following the final disposition of the victim's case are:

1. Within an appropriate assignment cycle for the victim's career and development.
2. Are not used to inappropriately extricate an individual perceived as problematic from the losing unit.

(c) Consider potential transfer of the suspect instead of the Service member requesting the transfer.

1. Commanders have the authority to make a timely determination and to take action regarding whether a Service member who is alleged to have committed or attempted to commit a sexual assault offense should be temporarily reassigned or removed from a position of authority or from an assignment. This reassignment or removal must be taken not as a punitive measure, but solely for the purpose of maintaining good order and discipline within the member's unit in accordance with section 674 of Reference (d).

2. This determination may be made at any time after receipt of notification of an Unrestricted Report of a sexual assault that identifies the Service member as a suspect.

(d) Consider:

1. Nature and circumstances of the offense.

2. Whether a temporary transfer would meet the Service member's needs and the operational needs of the unit.

3. Training status of the Service member requesting the transfer.

4. Availability of positions within other units on the installation.

5. Status of the investigation and potential impact on the investigation and future disposition of the offense, after consultation with the investigating MCIOs.

6. Location of the suspect.

7. Suspect's status (Service member or civilian).

8. Other pertinent circumstances or facts.

(10) Service members requesting the transfer shall be informed that they may have to return for the prosecution of the case, if the determination is made that prosecution is the appropriate action.

(11) Commanders shall directly counsel the Service member to ensure that they are fully informed regarding:

(a) Reasonably foreseeable career impacts.

(b) The potential impact of the transfer or reassignment on the investigation and case disposition or the initiation of other adverse action against the suspect.

(c) The effect on bonus recoupment, if any.

(d) Other possible consequences of granting the request.

(12) When an Expedited Transfer is approved, notification from the losing commander to the gaining commander will depend on whether there is an open case and continuation of services. If there is neither an open case nor continuation of services, no other action is needed. If there is an open case and services are requested, then notification to the gaining commander will occur to facilitate the investigation and access to services. This procedure applies to any sexual assault victim move (e.g., permanent change of station either on or before the member's normal rotation date, temporary duty inside or out of local area).

(a) When an Expedited Transfer is approved, the losing commander will NOT inform the gaining commander of the sexual assault incident unless one of the following applies:

1. Active criminal investigation.

2. Active legal proceeding.

3. Ongoing victim healthcare (medical or mental health) needs that are directly related to the sexual assault.

4. Ongoing monthly CMG oversight involving the victim or

5. Active SAPR victim support services.

(b) When an Expedited Transfer is approved, the losing commander will inform the gaining commander of the inbound Expedited Transfer if there is an ongoing investigation or legal proceeding or SAPR advocacy services are requested. Subsequently, the gaining commander shall facilitate access to services.

1. The losing commander will limit the information given to objective facts about victim care provided, status of open investigations, and the status of ongoing legal proceedings in order to provide the gaining commander with some context for victim behavior and to facilitate the victim's access to advocacy, healthcare, MCIOs, and legal counsel.

2. The gaining commander will adopt processes to ensure strict confidentiality to the extent provided for in law and DoD regulations. Only the immediate commander of the victim will be notified. The immediate commander may share the notification with the senior enlisted advisor, if deemed necessary to support the victim. All information shall be kept confidential to the extent authorized by law. Additional personnel will be notified by the commander only if they have direct input to the monthly CMG meeting. Every attempt must be made to limit access to the information that a victim has been transferred into the unit as a result of a sexual assault report.

(13) If a victim transfers from the installation, then the processes in Table 2 apply as appropriate.

Table 2. DSAID Case Transfers after Victim Transfers to New Location

IF	THEN
• The victim does NOT seek continued services of a SARC or SAPR VA at the new location after the required intake meeting with the gaining SARC, AND • The investigation or legal proceeding IS ONGOING at the original installation:	• Advise the victim of the requirement to have an intake meeting with the gaining SARC. The gaining SARC will advise the victim of their ability to continue or discontinue SAPR Program services with the gaining SARC at that intake meeting. • If the victim declines services at the new location, AND • The investigation or legal proceeding is

IF	THEN
	ONGOING at the original installation, • Then CMG responsibility remains with the original installation's CMG chair. • The victim will be asked if they would like to receive the monthly update from the CMG meetings at the losing installation. • If the victim wants the CMG updates, then the victim's new commander will participate in person or call in to the CMG meetings and this call in will be documented in the minutes of the CMG. • The new commander will provide the victim a monthly update of their case within 72 hours of the last CMG.
IF	THEN
The victim DOES seek SAPR services at the new location:	• The SARC's advocacy responsibility transfers to the receiving SARC at the victim's new installation (if the victim consents to seek SAPR services at the new location, after the required intake meeting with the gaining SARC), and then the CMG responsibility may transfer to the new location. • If the CMG does transfer to the location of the victim, then the MCIOs at the original installation (if there is an ongoing investigation) and the legal officer at the original installation (if there are ongoing legal proceedings) are required to call in to the new CMG. This MCIO and legal officer call-in will be documented in the CMG notes. • SARC will: ○ Inform the victim of the case transfer process, to include information about services and support, and the mandatory intake meeting with the gaining SARC. ○ Advise the victim of the case transfer to the CMG at the new location. ○ Advise victim of their ability to continue or discontinue SAPR Program services with the gaining SARC. • The MCIOs at the original installation (if there is an ongoing investigation) and the legal officer at the original installation (if there are ongoing legal proceedings) are required to call

IF	THEN
	in to the new CMG. This MCIO and legal officer call-in will be documented in the CMG notes.

(14) In addition to the current procedures stated in Paragraph 12 of this Enclosure, if the request for an Expedited Transfer is approved, the losing commander will:

(a) Notify both the losing SARC and the Service member victim in writing when the Expedited Transfer decision (approval or disapproval) is made to ensure continuity of advocacy services and capture of required data in DSAID. The Military Services may prescribe additional guidance on what constitutes written notification to the losing SARC.

(b) Immediately notify the appropriate personnel assignments entity to begin processing the transfer.

(c) Assign personnel, within the command if possible, to assist Service members with approved Expedited Transfers with any out-processing required for PCS moves, to include facilitating transportation, as necessary.

(d) Ensure Service members with approved Expedited Transfers receive a detaching evaluation, fitness report, or other evaluation in accordance with Service policy.

(e) Advise the Service member victim of the requirement to have an intake meeting with the gaining commander if the Service member victim seeks continued advocacy, legal, or healthcare (medical and mental health) services at the new location, or if the investigation or legal proceeding involving the Service member victim's report is ongoing at the time of the transfer.

1. If the Service member does not continue services and there is no ongoing investigative or legal proceeding, then the intake meeting with the gaining commander is not necessary.

2. However, a warm handoff and intake meeting with the SARC is still required. Explain that these are two separate requirements with different criteria.

3. The losing Lead SARC will coordinate with the gaining Lead SARC to identify the gaining SARC who will be assigned for case transfer.

(f) Notify the Service member victim of the requirement to have a single outbrief meeting with the losing SARC and an intake meeting (to be arranged by the losing SARC) with the gaining SARC. After the intake meeting with the gaining SARC, the Service member victim can decide whether to continue advocacy services at the new location.

(g) Ensure that the Service member victim is scheduled for an outbrief meeting with the losing SARC, so that the losing SARC can answer any remaining questions the Service member victim may have about the transfer process or facilitate any further scheduling.

(15) Losing and gaining SARCs' responsibilities after the approval of an Expedited Transfer are:

(a) The losing SARC will meet with the Service member victim to outbrief and address any SAPR questions about the transfer process. During the outbrief meeting, the losing SARC will inform the Service member victim that:

1. The Service member victim's case will be transferred to the installation SARC at the gaining location for a mandatory intake meeting. At installations with more than one SARC, the Lead SARC will be designated as the gaining SARC for the purposes of the Expedited Transfer and the intake meeting. The losing SARC will explain that:

a. The purpose of the intake meeting with the gaining SARC is to help the Service member victim understand the full range of support options at the new installation; facilitate appointments with healthcare (medical and mental health) personnel, advocacy, legal services, or other response personnel at the new location; and help answer any questions the Service member victim may have.

b. After the intake meeting with the gaining SARC, Service member victims may decline any further SAPR services.

2. If the Service member victim seeks continued advocacy, legal, or healthcare (medical and mental health) services at the new location, or if the investigation or legal proceeding involving Service member victim's report is ongoing at the time of the transfer, the Service member victim must have an intake meeting with the gaining commander. The losing SARC will explain that the intake meeting with the commander and the intake meeting with the gaining SARC are TWO SEPARATE REQUIREMENTS with different criteria.

3. The intake meeting with the commander and the intake meeting with the gaining SARC will not occur at the same time without explicit victim consent. If the victim requests to meet with the commander and gaining SARC at the same time, the SARCs will inform the Service member victim in advance that the communications with the gaining SARC and gaining commander in a joint meeting will not be privileged under MRE 514 of Reference (w).

(b) The losing SARC will facilitate the scheduling of the intake meeting with the gaining SARC, taking into account the Service member victim's leave and transfer or travel time. The losing SARC will provide the Service member victim with the gaining SARC's name and contact information, to include the address of the gaining SARC's office, as well as an appointment date and time.

(c) The losing SARC will follow existing procedures to transfer the case in DSAID to the gaining SARC after annotating all information on the Expedited Transfer. Losing SARCs are not required to obtain Service member victim consent to transfer the case on the DD Form 2910, and will leave Section 8 (“Victim Consented to Transfer of (RR/UR) Case to Another SARC. Not Applicable for Expedited Transfers.”) of the DD Form 2910 blank, since the intake meeting with the gaining SARC is mandatory.

(d) The gaining SARC will follow up with the Service member victim regularly to ensure the intake meeting occurs. During the intake meeting, the gaining SARC will explain the full range of support options at the new installation; facilitate appointments with healthcare (medical and mental health), advocacy, legal services, or other response personnel; inquire as to any changes in victim’s safety; and help answer any questions the Service member victim may have.

1. The gaining SARC will also explain that, after the intake meeting, Service member victims may decline any further SAPR services.

2. However, if there are any changes in victim’s safety, then the SARC will facilitate a safety assessment in accordance with this instruction (e.g., continued ostracism and bullying through social media that may impact victim’s healthcare (medical and mental health), regardless of the transfer to a new location).

(e) The gaining SARC will coordinate with the gaining commander for a separate commander intake meeting, if required. A commander intake meeting is required if there is an ongoing investigation or legal proceeding or SAPR advocacy services are requested; the gaining commander shall facilitate access to services.

(f) The gaining SARC will update the Service member victim’s case in DSAID in accordance with the Service member victim’s decision for continued services.

(g) The gaining SARC will confirm that the appropriate CMG oversight action is taken in the Service member victim’s case in accordance with existing DoD policy in this instruction, depending on whether the victim seeks continued services of a SARC or SAPR VA at the new location and whether the investigation or legal proceeding is ongoing at the original installation. The gaining SARC must confirm this to ensure that, if continued CMG oversight is required, that it does indeed occur and the victim’s case does NOT inadvertently disappear from the CMG agenda.

(16) Require that Expedited Transfer procedures for Reserve Component members, Army NG, and Air NG members who make Unrestricted Reports of sexual assault be established by commanders within available resources and authorities. If requested by the Service member, the command should allow for separate training on different weekends or times from the suspect or with a different unit in the home drilling location to ensure undue burden is not placed on the Service member and their family by the transfer. Potential transfer of the suspect instead of the

Service member should also be considered. At a minimum, the suspect's access to the Service member who made the Unrestricted Report shall be controlled, as appropriate.

(17) Even in those court-martial cases in which the accused has been acquitted, the standard for approving an Expedited Transfer still remains whether a credible report has been filed. The commander shall consider all the facts and circumstances surrounding the case and the basis for the transfer request.

7. EXPEDITED TRANSFERS FOR ADULT MILITARY DEPENDENTS.

a. The SAPR policy regarding Expedited Transfers is expanded to allow the transfer of a Service member whose adult military dependent makes an Unrestricted Report of sexual assault unrelated to domestic abuse. FAP will support victims whose circumstances meet the definition of domestic abuse in accordance with the policy in DoDI 6400.06 (Reference (bi)).

(1) In accordance with section 531 of Reference (bh), the application submitted by a Service member for a change of station or unit transfer must be approved or disapproved by the Service member's commander within 5 calendar days of the submission of the application.

(2) If the application is disapproved by the commander, the Service member will be given the opportunity to request review by the first GO/FO in their chain of command. The GO/FO must make a decision within 5 calendar days of submission of the request for review.

b. Service members must request the Expedited Transfer on behalf of their adult military dependent victims.

c. Adult military dependent sexual assault victims are eligible to request Expedited Transfers through the SAPR Program if:

(1) The victim has filed an Unrestricted Report through a DD Form 2910 in the SAPR Program.

(2) The sexual assault suspect is a Service member or if the suspect has a military nexus (e.g., adult military dependent, DoD civilian employee, or government contractor personnel), or the alleged sexual assault occurred on a DoD installation or facility.

d. The Expedited Transfer will include the Service member and the Service member's dependents, even if they are geographically separated. While the Military Service concerned will ultimately determine whether the Service member will be transferred at the same time as the dependents, the Military Service should favorably consider the Service member's request that:

(1) Only the Service member's dependents be transferred; or

(2) The dependents be transferred expeditiously, and the Service member's transfer be delayed (e.g., the Service member may be deployed and wants to finish the deployment term, or the Service member is in training and wants to complete the training).

e. Service members who request an Expedited Transfer because their adult military dependent was the victim of a reported sexual assault will submit the request to their commander, who will follow guidance outlined in this instruction to make Expedited Transfer determinations. The Service member's commander will:

(1) Assign personnel, within the command if possible, to assist Service members with approved dependent Expedited Transfers with the out-processing required for PCS moves, to include facilitating transportation, as necessary.

(2) Ensure Service members with approved dependent Expedited Transfers receive a detaching evaluation, fitness report, or other evaluation in accordance with Service policy.

f. While adult military dependents are not required to meet with commanders, the Military Services will follow the other procedures described in this enclosure to ensure that the losing and gaining SARCs coordinate the transfer of the adult dependent's case, as well as facilitate the intake meeting with the gaining SARC at the new installation.

g. These procedures involving the mandatory losing SARC outbrief meeting and gaining SARC intake meeting underscore DoD responsibility to ensure that Service members and their adult military dependents who elect an Expedited Transfer have the best chances for success and recovery at their new location.

8. MILITARY PROTECTIVE ORDERS (MPO). In Unrestricted Reporting cases, commanders shall execute the following procedures regarding MPOs:

a. Require the SARC or the SAPR VA to inform sexual assault victims protected by an MPO, in a timely manner, of the option to request transfer from the assigned command in accordance with section 567(c)(2) of Reference (k).

b. Notify the appropriate civilian authorities of the issuance of an MPO and of the individuals involved in the order, in the event an MPO has been issued against a Service member and any individual involved in the MPO does not reside on a military installation at any time during the duration of the MPO pursuant to section 562 of Reference (j).

(1) An MPO issued by a military commander shall remain in effect until such time as the commander terminates the order or issues a replacement order.

(2) The issuing commander shall notify the appropriate civilian authorities of any change made in a protective order, or its termination, in accordance with section 562 of Reference (j).

(3) Pursuant to section 562 of Reference (j), when an MPO has been issued against a Service member and any individual involved in the MPO does not reside on a military installation at any time during the duration of the MPO, notify the appropriate civilian authorities of the issuance of an MPO and of the individuals involved in the order. The appropriate civilian authorities shall include, at a minimum, the local civilian law enforcement agency or agencies with jurisdiction to respond to an emergency call from the residence of any individual involved in the order.

c. Military commanders will, through their installation law enforcement agency, place an active MPO in the National Crime Information Center (NCIC) for the duration of the order. Installation law enforcement will initiate a police report for the MPO, creating the required Originating Agency Case Number, and place the MPO in the NCIC Protective Order File, using PROTECTION ORDER CONDITIONS (PCO) Field Code 08 with the following mandatory caveat in the miscellaneous field: “THIS IS A MILITARY PROTECTIVE ORDER AND MAY NOT BE ENFORCEABLE BY NON-MILITARY AUTHORITIES. IF SUBJECT IS IN POSSIBLE VIOLATION OF THE ORDER, ADVISE THE ENTERING AGENCY (MILITARY LAW ENFORCEMENT).”

d. Advise the person seeking the MPO that the MPO is not enforceable by civilian authorities off base and that victims desiring protection off base should seek a civilian protective order (CPO). Off base violations of the MPO should be reported to the issuing commander, DoD law enforcement, and the relevant MCIO for investigation.

(1) Pursuant to section 1561a of Reference (d), a CPO shall have the same force and effect on a military installation as such order has within the jurisdiction of the court that issued such order. Commanders, MCIOs, and installation DoD law enforcement personnel shall take all reasonable measures necessary to ensure that a CPO is given full force and effect on all DoD installations within the jurisdiction of the court that issued such order.

(2) If the victim has informed the SARC or SAPR VA of an existing CPO, a commander shall require the SARC to inform the CMG of the existence of the CPO and its requirements. After the CPO information is received at the CMG, DoD law enforcement agents shall be required to document CPOs for all Service members in their investigative case file, to include documentation for Reserve Component personnel in title 10 status.

e. MPOs in cases other than sexual assault matters may have separate requirements.

f. The issuing commander will fill out the DD Form 2873, “Military Protective Order (MPO),” and is required to provide the victim(s) and the suspect(s) with copies of the completed form. Verbal MPOs can be issued, but need to be subsequently documented with a DD Form 2873, as soon as possible.

g. Require DoD law enforcement agents document MPOs for all Service members in their investigative case file to include documentation for Reserve Component personnel in title 10

status. The appropriate DoD law enforcement agent representative to the CMG shall brief the CMG chair and co-chair on the existence of an MPO.

h. If the commander's decision is to deny the MPO request, document the reasons for the denial. Denials of MPO requests go to the installation commander or equivalent command level (in consultation with a judge advocate) for the final decision.

i. The number of MPO(s) issued, to include violations, must be included in the Services' and NGB Annual Program Review submission, as required by Reference (k).

9. ALLEGED COLLATERAL MISCONDUCT IN SEXUAL ASSAULT CASES, SAFE-TO-REPORT POLICY, AND ROLE OF THE OSTC.

a. Barrier to Reporting. Collateral misconduct (See Glossary) by the victim of a sexual assault is one of the most significant barriers to reporting assault because of the victim's fear of punishment. Some reported sexual assaults involve circumstances where the victim may have engaged in some form of misconduct (e.g., underage drinking or other related alcohol offenses, adultery, fraternization, or other violations of certain regulations or orders).

b. Safe-to-Report Policy. Establishes mandatory detailed processes and procedures for the identification and treatment of alleged "minor" and "non-minor" collateral misconduct by Service member victims of sexual assault. The Secretaries of the Military Departments and the Chief, NGB, shall ensure their respective mandatory Safe-to-Report Policies are implemented and executed properly in accordance with Section 539A of Reference (bh) and the standards in this volume.

(1) Each of the Military Services and NGB shall apply the Safe-to-Report policy in all instances of alleged collateral misconduct involving a Service member who is a sexual assault victim.

(2) Each of the Military Services and NGB shall track incidents of alleged collateral misconduct that are subject to their Safe-to-Report Policies.

c. Applicability. The Safe-to-Report Policy applies to all members of the armed forces including the Reserve Component of the Armed Forces, and cadets and midshipmen at the Military Service Academies. This policy applies regardless of to whom the victim discloses the sexual assault, and regardless of whether the investigation and/or prosecution, if any, is handled by military or civilian authorities.

d. Role of the Special Trial Counsel.

(1) As set out by policy and law, special trial counsel have exclusive authority over "covered offenses" and may exercise authority over "related offenses," including collateral misconduct allegedly committed by a Service member sexual assault victim.

(2) When special trial counsel exercise authority over a Service member victim's alleged collateral misconduct, the special trial counsel must determine that such alleged collateral misconduct is "non-minor" before court-martial charges alleging collateral misconduct by a victim are preferred or referred.

(a) Special trial counsel will use the analytical framework, criteria, and standards established in this Safe-to-Report Policy.

(b) If the special trial counsel determines the alleged collateral misconduct to be non-minor, the special trial counsel shall provide information to the appropriate organization as required for data reporting requirements established in this policy.

(3) When special trial counsel do NOT exercise authority over the alleged collateral misconduct or when they defer, the commander will determine whether the Service member victim's alleged collateral misconduct is "minor" or "non-minor" utilizing the analytical framework, criteria, and standards established in this Safe-to-Report Policy. Commanders shall consult with the serving Staff Judge Advocate Office when making these determinations.

e. Safe-to-Report Policy Assessment. The threshold issue for the applicability of the Safe-to-Report Policy is determining whether the alleged collateral misconduct in question is "minor" or "non-minor." Commanders with disposition authority over the alleged collateral misconduct, including allegations deferred by a special trial counsel, are responsible for making the "minor" or "non-minor" determination. Commanders must assess the alleged collateral misconduct against aggravating and mitigating circumstances.

(1) If the alleged collateral misconduct is non-minor, then the Safe-to-Report Policy protections do NOT apply and the victim may be subject to disciplinary action.

(2) If the alleged collateral misconduct is deemed minor, then the Safe-to-Report policy protections DO apply and the victim shall NOT be disciplined.

f. Aggravating Circumstances. The Safe-to-Report policies of the Military Departments and NGB will identify the "aggravating circumstances" that increase the gravity of alleged collateral misconduct or its impact on good order and discipline. The existence of aggravating circumstances does not automatically result in making the alleged collateral misconduct non-minor. Aggravating circumstances include, but are not limited to, whether the alleged misconduct intentionally or unintentionally:

(1) Resulted or imminently threatened to result in failure of a specified military mission or objective;

(2) Threatened the health and safety of any person. This does NOT include acts of the victim's own self-harm or acts of self-defense against the suspect(s) of an assault; or

(3) Resulted in significant damage to government property or to the personal property of others, except when such damage was the collateral result of an assault or resulted from an act of self-defense.

g. Mitigating Circumstances. Safe-to-Report policies of the Military Departments and NGB will identify the “mitigating circumstances” that decrease the gravity of alleged collateral misconduct, its impact on good order and discipline, and concern that the collateral misconduct may be Service discrediting. Mitigating circumstances include, but are not limited to:

(1) The victim's age and military experience level.

(2) Whether the suspect of the underlying sexual assault is in a position of authority over the victim or a higher grade than the victim.

(3) Whether the suspect of the underlying sexual assault engaged in actions to stalk, harass, haze, coerce, and/or otherwise influence the victim to engage in sexual behavior.

(4) Whether the alleged collateral misconduct was known to command before the report of sexual assault and, if not known, the likelihood that the alleged collateral misconduct would have otherwise been discovered but for the victim disclosing or reporting the sexual assault.

(5) Whether the victim engaged in misconduct AFTER the sexual assault that may be related to symptoms of exposure to trauma; e.g., the victim engaged in underage drinking as a coping mechanism to alleviate sexual assault trauma symptoms. (See Collateral Misconduct definition in Glossary)

h. Special Trial Counsel’s Exercise of Authority. If the special trial counsel exercises authority over a victim’s alleged collateral misconduct, the commander is precluded from taking disciplinary action against the victim for that misconduct unless the special trial counsel defers.

i. Commander’s Authority. When a special trial counsel does not exercise authority over the alleged collateral misconduct or when the special trial counsel defers, the commander will determine whether the Service member victim's alleged collateral misconduct is minor or non-minor using the analytical framework, criteria, and standards established in this Safe-to-Report Policy. Commanders shall consult with their servicing SJA in reaching these determinations.

j. Determination That the Alleged Collateral Misconduct Is Non-Minor.

(1) Commanders in the grade of O-6 and above who possess special court-martial convening authority retain discretion on whether to discipline and when to discipline the victim. Commanders have discretion to withhold action, if any, on alleged non-minor collateral misconduct, until final disposition of the sexual assault case. Commanders shall not be penalized for such a deferral decision.

(2) Commanders may take into account the trauma to the victim and respond appropriately so as to encourage reporting of sexual assault and continued victim cooperation, while also bearing in mind any potential speedy trial and statute of limitations concerns.

(3) If a commander believes that it would be appropriate to document alleged non-minor collateral misconduct in the interest of rehabilitation, they should consider actions that minimize or eliminate impacts on the victim's career.

k. Determination That the Alleged Collateral Misconduct Is Minor – Triggering of Safe-to-Report Policy Protections.

(1) The following are examples of collateral misconduct that generally should be treated as minor for purposes of the Safe-to-Report policy:

(a) The victim was drinking underage at the time of the sexual assault.

(b) The victim was engaged in an unprofessional relationship with the accused at the time of the sexual assault. An “unprofessional relationship” is a relationship that violated law, regulation, or policy in place at the time of the sexual assault.

(c) The victim was in violation of lawful orders establishing curfews, off-limit locations, school standards, barracks/dormitory/berthing policies, or similar matters at the time of the alleged sexual assault.

(2) The Safe to Report policy does not preclude the commander from taking non-disciplinary administrative action such as referrals to substance abuse screening, or temporarily suspending access to critical positions such as positions in the personnel reliability program (PRP).

ENCLOSURE 6

SARC AND SAPR VA PROCEDURES

1. SARC FUNCTIONS. The SARC reports to, and is supervised and evaluated by, the Lead SARC or as otherwise directed by USD(P&R). The SARC shall:

a. Serve as the single point of contact to coordinate sexual assault response when a sexual assault is reported. All SARCs shall be authorized to perform victim advocate duties in accordance with Military Service regulations and will be acting in the performance of those duties.

b. Comply with all D-SAACP requirements.

c. Be trained in and understand the confidentiality requirements of Restricted Reporting and MRE 514 of Reference (w). Training must include exceptions to Restricted Reporting and MRE 514.

d. Support the installation commander in ensuring that victims of sexual assault receive appropriate responsive care and understand their available reporting options (Restricted and Unrestricted) and available SAPR services.

e. Be authorized by this instruction to accept reports of sexual assault along with the SAPR VA and healthcare personnel.

f. Report to the installation commander to provide regular updates to the installation commander and assist the commander to meet annual SAPR training requirements, including providing orientation briefings for newly assigned personnel and, as appropriate, providing community education publicizing available SAPR services.

g. Provide a 24 hours, 7 days per week response capability to victims of sexual assault, to include deployed areas.

h. Respond to every Restricted and Unrestricted Report (see Glossary) of sexual assault on a military installation and the response shall be in person, unless otherwise requested by the victim.

(1) Based on the locality, the SARC may assign cases to the SAPR VA and provide a timeline to respond and speak to the victim based on Lead SARC instruction.

(2) There will be situations where a sexual assault victim receives medical care and a SAFE outside of a military installation under an MOU or MOA with local private or public sector entities. In these cases, pursuant to the MOU or MOA the SARC or SAPR VA shall be notified, and a SARC or SAPR VA shall respond.

(3) When contacted by the SARC or SAPR VA, a sexual assault victim can elect not to speak to the SARC or SAPR VA, or the sexual assault victim may ask to schedule an appointment at a later time to speak to the SARC or SAPR VA.

i. Provide a response that recognizes the high prevalence of pre-existing trauma (prior to the present sexual assault incident) and empowers an individual to make informed decisions about all aspects in the reporting process and to access available resources.

j. Provide a response that is trauma-informed and recovery-oriented.

k. Be trained and understand how to complete a risk screening and thorough safety planning for all adult sexual assault cases. Help victims identify planned strategies to maintain safety and reduce risk of future harm.

l. Be trained and understand how to conduct initial and ongoing needs assessment to allow the victim to identify, plan, and prioritize their needs throughout the advocacy process.

m. Offer appropriate referrals to sexual assault victims and facilitate access to referrals. Provide referrals at the request of the victim.

(1) Encourage sexual assault victims to follow-up with the referrals and facilitate these referrals, as appropriate.

(2) In order to competently facilitate referrals, inquire whether the victim is a Reservist or an NG member to ensure that victims are referred to the appropriate geographic location.

(3) Provide information on resources and services available.

n. Ensure victim assistance and follow-up contact is provided as needed.

o. Provide information on reproductive health, as appropriate in accordance with DoDI 6310.09 in Reference (aj).

p. Explain to the victim that the services of the SARC and SAPR VA are optional and these services may be declined, in whole or in part, at any time. The victim may decline advocacy services, even if the SARC or SAPR VA holds a position of higher rank or authority than the victim. Explain to victims the option of requesting a different SAPR VA (subject to availability, depending on locality staffing) or continuing without SAPR VA services.

(1) Explain the available reporting options to the victim.

(a) Assist the victim in filling out the DD Form 2910, where the victim elects to make a Restricted or Unrestricted Report. However, the victims, not the SARCs or SAPR VAs, must fill out the DD Form 2910. Explain that sexual assault victims have the right and ability to consult with an SVC/VLC/VC before deciding whether to make a Restricted Report, Unrestricted Report, or no report at all. Additionally, the SARC or SAPR VA shall explain the

eligibility requirements for an SVC/VLC/VC, as well as the option to request SVC/VLC/VC services even if the victim does not fall within the eligibility requirements.

(b) Inform the victim that the DD Form 2910 will be uploaded to DSAID and retained for 50 years in Unrestricted Reports. The DD Forms 2910 and 2911 filed in connection with the Restricted Report shall be retained for 50 years, in a manner that protects confidentiality.

(c) The SARC or SAPR VA shall inform the victim of any local or State sexual assault reporting requirements that may limit the possibility of Restricted Reporting. At the same time, the victims shall be briefed of the protections and exceptions to MRE 514 of Reference (w).

(2) Give the victim a hard copy of the DD Form 2910 with the victim's signature.

(a) Advise the victim to keep the copy of the DD Form 2910 and the DD Form 2911 in their personal permanent records as these forms may be used by the victim in other matters before other agencies (e.g., Department of Veterans Affairs) or for any other lawful purpose.

(b) Store the original DD Form 2910 pursuant to secure storage Military Service regulations and privacy laws. A SARC being reassigned shall be required to assure the Lead SARC of the secure transfer of stored DD Forms 2910 to the next SARC. In the event of transitioning SARCs, the departing SARC shall inform their Lead SARC of the secure storage location of the DD Forms 2910, and the SARC supervisor will ensure the safe transfer of the DD Forms 2910.

(3) Explain SAFE confidentiality to victims and the confidentiality of the contents of the SAFE Kit.

(4) Explain the implications of a victim confiding in another person resulting in a third-party report to command or DoD law enforcement (see Enclosure 4 of this volume).

(5) Provide the installation commander and the immediate commander of the victim (if a civilian victim, then the immediate commander of the suspect), with information regarding an Unrestricted Report within 24 hours of an Unrestricted Report of sexual assault. This notification may be extended to 48 hours after the Unrestricted Report of the incident if there are extenuating circumstances in the deployed environments. This requirement is different from the requirement for the Victim's Commander's Package, which is developed within 24 hours of the Unrestricted Report, and contains recommendations provided to the victim's commander for the adult sexual assault victim's immediate and ongoing care, to include any known safety concerns or retaliation.

(6) Provide the installation commander with non-PII within 24 hours of a Restricted Report of sexual assault. This notification may be extended to 48 hours after the Restricted Report of the incident if there are extenuating circumstances in a deployed environment. Command and installation demographics shall be taken into account when determining the

information to be provided. 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; received a safety assessment; received explanation of the notifications in the DD Form 2910; been offered healthcare (medical and mental health); and informed of their eligibility for an SVC/VLC/VC.

(7) Perform victim advocacy duties, as needed. DoD recognizes the SARC's authority to perform duties as SAPR VAs, even though the SARC may not be designated in writing as a SAPR VA pursuant to Military Service regulation.

(8) Inform the victim that, pursuant to their Military Service regulations, each Service member who reports having been sexually assaulted shall be given the opportunity to consult with legal assistance counsel, and in cases where the victim may have been involved in collateral misconduct, to consult with defense counsel.

(a) Explain the eligibility for SVC/VLC/VC for victims filing Restricted or Unrestricted Reports, and the types of legal assistance authorized to be provided to the sexual assault victim, in accordance with section 1044e of Reference (d). Inform the victim of the opportunity to consult with legal assistance counsel and SVC/VLC/VC as soon as the victim seeks assistance from a SARC or SAPR VA. Explain that the nature of the relationship between an SVC/VLC/VC and a victim in the provision of legal advice and assistance will be the relationship between an attorney and client.

(b) Inform the victim that information concerning the prosecution shall be provided to them in accordance with DoDI 1030.02 (Reference (al)).

q. Facilitate education of command personnel on sexual assault and victim advocacy services.

(1) Facilitate briefings on victim advocacy services to Service members, adult military dependents, DoD civilian employees (OCONUS), DoD contractors (accompanying the Military Services in contingency operations OCONUS), and other command or installation personnel.

(2) Facilitate annual SAPR training.

(3) Utilize SAPR public awareness campaign materials for victims of sexual assault. Collaborate on local events for Sexual Assault Awareness and Prevention Month. Publicize the DoD Safe Helpline on all outreach materials and Service websites.

r. Coordinate medical and counseling services between military installations and deployed units related to care for victims of sexual assault.

s. Conduct ongoing assessments of the consistency and effectiveness of the SAPR program within the assigned area of responsibility.

t. Collaborate with other agencies and activities to improve SAPR responses to and support of victims of sexual assault.

u. Maintain liaison with commanders, DoD law enforcement, and MCIOs, and civilian authorities, as appropriate, for the purpose of facilitating the following protocols and procedures to:

(1) Activate victim advocacy 24 hours a day, 7 days a week for all incidents of reported sexual assault occurring either on or off the installation involving Service members and other persons covered by this instruction.

(2) Collaborate on public safety, awareness, and prevention measures.

(3) Facilitate ongoing training of DoD and civilian law enforcement and criminal investigative personnel on the SAPR policy and program and the roles and responsibilities of the SARC and SAPR VAs.

v. Consult with command legal representatives, healthcare personnel, and MCIOs, (or when feasible, civilian law enforcement), to assess the potential impact of State laws governing the reporting requirements for adult sexual assault that may affect compliance with the Restricted Reporting option and develop or revise applicable MOUs and MOAs, as appropriate.

w. Collaborate with MTFs within their respective areas of responsibility to establish protocols and procedures to direct notification of the SARC and SAPR VA for all incidents of reported sexual assault, and facilitate ongoing training of healthcare personnel on the roles and responsibilities of the SARC and SAPR VAs.

x. Collaborate with local private or public sector entities that provide medical care to Service members or TRICARE eligible beneficiaries who are sexual assault victims and a SAFE outside of a military installation through an MOU or MOA.

(1) Establish protocols and procedures with these local private or public sector entities to facilitate direct notification of the SARC for all incidents of reported sexual assault and facilitate training of healthcare personnel of local private or public sector entities on the roles and responsibilities of SARCs and SAPR VAs, for Service members and persons covered by this policy.

(2) Provide off installation referrals to the sexual assault victims, as needed.

y. When a victim has a temporary or permanent change of station or is deployed, request victim consent to transfer case management documents and, upon receipt of victim consent, expeditiously transfer case management documents to ensure continuity of care and SAPR services. If the SARC has already closed the case and terminated victim contact, no other action is needed.

z. Document and track the services referred to and requested by the victim from the time of the initial report of a sexual assault through the final case disposition or until the victim no longer desires services.

(1) Enter information into DSAID or Military Service DSAID-interface within 48 hours of the report of sexual assault. In deployed locations that have internet connectivity issues, the timeframe is extended to 96 hours.

(2) Maintain in DSAID an account of the services referred to and requested by the victim for all reported sexual assault incidents, from medical treatment through counseling, and from the time of the initial report of a sexual assault through the final case disposition or until the victim no longer desires services. Should the victim return to the SARC or SAPR VA and request SAPR services after indicating that they no longer desired services, the case will be reopened and addressed at the CMG meeting.

(3) Open a case in DSAID as an “Open with Limited Information” case when there is no signed DD Form 2910 (e.g., an independent investigation or third-party report, or when a civilian victim alleged sexual assault with a Service member subject) to comply with section 563(d) of Reference (j) and to ensure system accountability.

aa. Provide information to assist installation commanders to manage trends and characteristics of sexual assault crimes at the Military Service-level and mitigate the risk factors that may be present within the associated environment (e.g., the necessity for better lighting in the showers or latrines and in the surrounding area).

ab. Participate in the CMG to review individual cases of Unrestricted Reports of sexual assault.

(1) The Lead SARC shall serve as the co-chair of the CMG. This responsibility is not delegable. If an installation has multiple SARCs on the installation, there shall be a Lead SARC. If there is only one SARC at a location, that SARC shall serve as the CMG Co-Chair. These designations can be modified at the direction of USD(P&R).

(2) Other SARCs and SAPR VAs shall actively participate in each CMG meeting by presenting oral updates on their assigned sexual assault victim cases, providing recommendations and, if needed, seeking assistance from the chair or victim’s commander.

ac. Familiarize the unit commanders and supervisors of SAPR VAs with the SAPR VA roles and responsibilities, to include the “Supervisor and Commander Statement of Understanding” section in the DD Form 2950. The DD Form 2950 is located at the DoD Forms Management Program website at <https://www.esd.whs.mil/Directives/forms/>.

ad. Offer victims the opportunity to participate in surveys asking for victim feedback on the reporting experience. Inform victims regarding what the survey will ask them and uses of the data collected.

2. SAPR VA PROCEDURES.

a. The SAPR VA shall:

- (1) Comply with DoD Sexual Assault Advocate Certification requirements in D-SAACP.
- (2) Be trained in and understand the confidentiality requirements of Restricted Reporting and MRE 514 of Reference (w). Training must include exceptions to Restricted Reporting and MRE 514.
- (3) Facilitate care and provide referrals and non-clinical support to the adult victim of a sexual assault. Provide a response consistent with requirements for the SARC response in this instruction.
 - (a) Support will include providing information on available options and resources so the victim can make informed decisions about their case.
 - (b) The SAPR VA shall provide victim advocacy for adult victims of sexual assault.
- (4) Acknowledge their understanding of their advocacy roles and responsibilities by reviewing the DD Form 2950.

b. At the Military Service's discretion, victim advocacy may be provided by a Service member or DoD civilian employee. Personnel responsible for providing victim advocacy shall:

- (1) Be notified and immediately respond upon receipt of a report of sexual assault.
- (2) Provide coordination and encourage victim service referrals and ongoing, non-clinical support to the victim of a reported sexual assault and facilitate care in accordance with the Sexual Assault Response Protocols prescribed SAPR Policy Toolkit located on www.sapr.mil. Assist the victim in navigating those processes required to obtain care and services needed. It is neither the SAPR VA's role nor responsibility to be the victim's healthcare (medical and mental health) provider or to act as an investigator.
- (3) Report directly to the SARC while carrying out sexual assault advocacy responsibilities.

ENCLOSURE 7

HEALTHCARE PROVIDER PROCEDURES

This enclosure provides guidance on medical management of victims of sexual assault to ensure standardized, timely, accessible, and comprehensive healthcare for victims of sexual assault, to include the ability to elect a SAFE Kit. This policy is applicable to all MHS personnel who provide or coordinate medical care for victims of sexual assault covered by this instruction.

a. Standardized Medical Care. To ensure standardized healthcare, the Surgeons General of the Military Departments and the Director, DHA, shall:

(1) Require adherence to the guidance recommendations for conducting forensic exams of adult sexual assault victims set forth in DoDI 6310.09 in Reference (aj). Training for sexual assault medical forensic examiners and healthcare providers shall be provided to maintain optimal readiness in accordance with Enclosure 10 of this volume and section 539 of Reference (p).

(2) Require that a SARC is immediately notified by healthcare (medical and mental health) personnel when a victim discloses a sexual assault so that the SARC can inform the victim of both reporting options (Restricted and Unrestricted) and all available services (e.g., SVC/VLC/VC, Expedited Transfers, Military Protective Orders, document retention mandates). The victim can then make an informed decision as to which reporting option to elect and which services to request (or none at all). The victim is able to decline services in whole or in part at any time.

(3) Require the assignment of at least one full-time sexual assault medical forensic examiner to each MTF that has an emergency department that operates 24 hours per day. Additional sexual assault medical forensic examiners may be assigned based on the demographics of the patients who utilize the MTF.

(4) In cases of MTFs that do not have an emergency department that operates 24 hours per day, require that a sexual assault forensic medical examiner be made available to a patient of the facility through an MOU or MOA with local private or public sector entities and consistent with DoDI 6310.09 in Reference (aj), when a determination is made regarding the patient's need for the services of a sexual assault medical forensic examiner.

(a) The MOU or MOA will require that a SARC be notified and that SAFE Kits be collected in accordance with Enclosure 8 of this volume.

(b) When the forensic examination is conducted at a civilian facility through an MOU or an MOA with the DoD, the requirements for the handling of the forensic kit will be explicitly addressed in the MOU or MOA. The MOU or MOA with the civilian facility will address the processes for contacting the SARC and for contacting the appropriate DoD agency responsible for accepting custody of the forensic kit.

(5) Require that MTFs that provide SAFEs for Service members or TRICARE eligible beneficiaries through an MOU or MOA with private or public sector entities verify initially and periodically that those entities meet or exceed standards of the recommendations for conducting forensic exams of adult sexual victims in DoDI 6310.09 in Reference (aj). In addition, verify that as part of the MOU or MOA, a SARC or SAPR VA is notified and responds and meets with the victim in a timely manner.

(6) Require that medical providers providing healthcare to victims of sexual assault in remote areas or while deployed have access to the current version of DoDI 6310.09 in Reference (aj) for conducting forensic exams.

(7) Implement procedures to provide the victim information regarding the availability of a SAFE, which the victim has the option of refusing. If performed in the MTF, the healthcare provider shall use a SAFE Kit and the most current edition of the DD Form 2911.

(8) Require that the SARC be notified of all incidents of sexual assault in accordance with sexual assault reporting procedures in Enclosure 4 of this volume.

(9) Require processes be established to support coordination between healthcare personnel and the SARC and SAPR VA. If a victim initially seeks assistance at a medical facility, SARC notification must not delay emergency care treatment of a victim.

(10) Require that care provided to sexual assault victims shall be recovery-oriented. Healthcare providers providing treatment to sexual assault victims shall recognize the high prevalence of pre-existing trauma (prior to present sexual assault incident) and the concept of trauma-informed care.

(11) If the healthcare provider is not appropriately trained to conduct a SAFE, require that they arrange for a properly trained DoD healthcare provider to do so, if available.

(a) In the absence of a properly trained DoD healthcare provider, the victim shall be offered the option to be transported to a non-DoD healthcare provider for the SAFE Kit, if the victim wants a forensic exam. Victims who are not beneficiaries of the Military Healthcare System shall be advised that they can obtain a SAFE Kit through a local civilian healthcare provider at no cost to them in accordance with Violence Against Women Act as explained in DoDI 6310.09 in Reference (aj).

(b) When a SAFE is performed at local civilian medical facilities, those facilities are bound by State and local laws, which may require reporting the sexual assault to civilian law enforcement.

(c) If the victim requests to file a report of sexual assault, the healthcare personnel, to include psychotherapists and other personnel listed in MRE 513 (Reference (w)), shall immediately call a SARC or SAPR VA, to ensure that a victim is offered SAPR services and so that a DD Form 2910 can be completed.

(12) Require that SAFE Kit evidence collection procedures are the same for a Restricted and an Unrestricted Report of sexual assault, with the exception of the special requirements to safeguard PII in Restricted SAFE Kits in Enclosure 8 of this volume.

(a) Upon completion of the SAFE and securing of the evidence, the healthcare provider will turn over the material to the appropriate Military Service-designated law enforcement agency or MCIO as determined by the selected reporting option.

(b) Upon completion of the SAFE, the sexual assault victim shall be provided with a hard copy of the completed DD Form 2911. Advise the victim to keep the copy of the DD Form 2911 in their personal permanent records as this form may be used by the victim in other matters before other agencies (e.g., Department of Veterans Affairs) or for any other lawful purpose.

(13) Publicize availability of healthcare (medical and mental health), and referral services for suspects who are also active duty Service members. Such care will be administered in a way to respect and preserve the rights of the victim and the suspect, and the physical safety of both.

(14) Require that the healthcare provider, in the course of preparing a SAFE Kit for Restricted Reports of sexual assault:

(a) Contact the designated installation official, usually the SARC, who shall provide the alpha-numeric RRCN, unique to each incident. The SARC will provide the DSAID case generated unique control number for entry as the RRCN. The RRCN shall be used in lieu of PII to label and identify evidence collected from a SAFE Kit (e.g., accompanying documentation, personal effects, and clothing). The SARC shall provide (or the SARC will designate the SAPR VA to provide) the healthcare provider with the RRCN to use in place of PII.

(b) Upon completion of the SAFE, package, seal, and completely label the evidence container(s) with the RRCN and notify the Military Service-designated law enforcement agency or MCIO.

(15) Require that healthcare personnel maintain the confidentiality of a Restricted Report to include communications with the victim, the SAFE, and the contents of the SAFE Kit, unless an exception to Restricted Reporting applies in accordance with Enclosure 4. Healthcare personnel who make an unauthorized disclosure of a confidential communication are subject to disciplinary action and that unauthorized disclosure has no impact on the status of the Restricted Report; all Restricted Reporting information remains confidential and protected. Improper disclosure of confidential communications under Restricted Reporting, improper release of medical information, and other violations of this guidance are prohibited and may result in discipline pursuant to the UCMJ or State statute, loss of privileges, or other adverse personnel or administrative actions.

(16) Require that psychotherapy and counseling records and clinical notes pertaining to sexual assault victims contain only information that is required for diagnosis and treatment. Any

record of an account of a sexual assault incident created as part of a psychotherapy exercise will remain the property of the patient making the disclosure and should not be retained within the psychotherapist's record.

b. Selection, Training, and Certification. For the selection, training, and certification of healthcare providers performing SAFEs in MTFs, refer to standards in Enclosure 10 of this volume.

c. Timely Medical Care. To comply with the requirement to provide timely medical care, the DHA Director and the Secretaries of the Military Departments shall:

(1) Implement processes or procedures giving victims of sexual assault priority as emergency cases.

(2) Provide sexual assault victims with priority treatment as emergency cases, regardless of evidence of physical injury, recognizing that every minute a patient spends waiting to be examined may cause loss of evidence and undue trauma. Priority treatment as emergency cases includes activities relating to access to healthcare, coding, and medical transfer or evacuation, and complete physical assessment, examination, and treatment of injuries, including immediate emergency interventions.

d. Comprehensive Medical Care. To comply with the requirement to provide comprehensive medical care, the DHA Director and the Secretaries of the Military Departments shall:

(1) Establish processes and procedures to coordinate timely access to emergency, follow-up, and specialty care that may be provided in the direct or civilian purchased care sectors for eligible beneficiaries of the Military Health System.

(2) Evaluate and implement, to the extent feasible, processes linking the medical management of the sexually assaulted patient to the primary care manager.

e. Clinically Stable. Require the healthcare provider to consult with the victim, once clinically stable, regarding further healthcare options to the extent eligible, which, in accordance with DoDI 6310.09 (Reference (aj)), shall include, but are not limited to:

(1) Testing, prophylactic treatment options, and follow-up care for possible exposure to human immunodeficiency virus (HIV) and other sexually transmitted diseases or infections (STD/I).

(2) Assessment of the risk of pregnancy, options for emergency contraception, and any follow-up care and referral services to the extent authorized by law.

(3) Assessment of the need for mental health services and provisions for a referral, if necessary or requested by the victim.

f. Other Responsibilities.

(1) The Surgeons General of the Military Departments shall identify a primary office to represent their Department in Military Service coordination of issues pertaining to medical management of victims of sexual assault.

(2) The Combatant Commanders shall:

(a) Require that victims of sexual assault are given priority treatment as emergency cases in deployed locations within their area of responsibility to be transported to an appropriate evaluation site, evaluated, treated for injuries (if any), and offered SAPR VA assistance and a SAFE as quickly as possible.

(b) Require that U.S. theater hospital facilities (Level 3, NATO role 3) (See Glossary) have appropriate capability to provide experienced and trained SARC and SAPR VA services and SAFE providers, and that victims of sexual assault, regardless of reporting status, are medically evacuated to such facilities as soon as possible (within operational needs) of making a report, consistent with operational needs.

(3) See Responsibilities of the DHA Director in Enclosure 2 of this volume.

ENCLOSURE 8

SAFE KIT COLLECTION AND PRESERVATION

1. DOCUMENT AND EVIDENCE RETENTION. For the purposes of the SAPR Program, forensic evidence collection and document and evidence retention shall be completed in accordance with this enclosure pursuant to Reference (c), taking into account the medical condition, needs, requests, and desires of each sexual assault victim covered by this instruction.

2. PROCEDURES FOR EVIDENCE RETENTION AND RELEASE OF PERSONAL PROPERTY IN ADULT SEXUAL ASSAULT CASES. Evidence, to include SAFE Kits, will be retained for Restricted Reports for 10 years from the date of the seizure of evidence. Evidence from Unrestricted Reports will be retained for 10 years from the date of the seizure of evidence AND until after the conclusion of all legal, adverse action, and administrative proceedings, unless otherwise provided for in this instruction.

a. These evidence retention periods are not applicable for individuals who obtained a sexual assault forensic exam at a civilian facility, and whose kit and personal property are maintained by civilian law enforcement. It is also not applicable for evidence seized and/or maintained by civilian law enforcement.

b. The 10-year retention period is implemented to maintain the availability of evidence for the CATCH Program, wherein victim entries are active for 10 years.

c. The SARC will contact ALL victims who filed a Restricted Report (not just those who had a SAFE Kit) 1 year after the reporting date to inquire whether the victim wishes to change their reporting option to Unrestricted. If the victim does not change to an Unrestricted Report, the SARC will:

(1) Inform (or remind, if previously informed) the victim of the CATCH Program and ask if the victim would like to participate.

(2) Explain to victims who underwent a SAFE that the evidence maintained by DoD, including the SAFE Kit, will be retained for a total of 10 years from the time the SAFE Kit was completed and that any evidence from the SAFE will be destroyed at the end of the 10-year period.

(3) However, the SARC will explain that the victim has the right to request the return of any personal property (e.g., phone, clothing, jewelry) collected as part the SAFE.

(4) Emphasize to the victim that they will not be contacted again by the SARC in order to respect their privacy.

(5) Emphasize that the victim may convert their Restricted Report to an Unrestricted Report at any time but should notify the SARC of the intent to convert to Unrestricted before the

10-year evidence retention period elapses, so that evidence collected during the SAFE is not destroyed and can be used during the case.

3. RELEASE OF PERSONAL PROPERTY IN UNRESTRICTED REPORT SEXUAL ASSAULTS.

a. Evidence, to include SAFE Kits, will be retained for Unrestricted Reports for 10 years from the date of the seizure of evidence, AND until after the conclusion of all legal, adverse action, and administrative proceedings, if under the custody and control of DoD.

b. Section 586 of Reference (m), as revised by Section 1561 of Reference (d), allows for the release of personal property. Personal property items collected as evidence in Unrestricted Reporting cases may be returned to their rightful owner before the 10-year period only:

(1) After written evidence disposition is obtained from the designated representative of the Military Department concerned.

(2) When:

(a) It is determined that the allegation is unfounded (false or baseless), that is, the crime did not occur or it was determined through investigation to be a false allegation;

(b) The evidence is taken from a suspect who is later deemed to be the wrong person (i.e. mistaken identity); or

(c) All legal, adverse action, and administrative proceedings related to such allegation in accordance with section 1561 of Reference (d) have concluded.

(3) This return of personal property request is not applicable for Service members, NG members, adult military dependents, or other victims covered by this instruction who obtained a sexual assault forensic exam at a civilian facility, and whose kit and personal property are maintained by civilian law enforcement.

c. Personal property items gathered as evidence that are digital or electronic in nature may be returned to the rightful owner if a forensic copy of the digital or electronic evidence stored on or accessed through an electronic device has been made. The copy must be obtained in forensically sound manner sufficient for command action or prosecution, as appropriate.

4. RELEASE OF PERSONAL PROPERTY IN RESTRICTED REPORT SEXUAL ASSAULTS.

a. Evidence will be retained for 10 years from the date of the seizure of evidence, if under the custody and control of DoD.

b. In accordance with section 536 of Reference (be), adult sexual assault victims who filed a Restricted Report and underwent a SAFE pursuant to the Restricted Report can request the return of their personal property obtained during the SAFE. This return of personal property request is not applicable for Service members, NG members, adult military dependents, or other victims covered by this policy who obtained a SAFE at a civilian facility, and whose kit and personal property are maintained by civilian law enforcement.

c. Requesting the return of personal property will not impact the Restricted nature of the victim's Restricted Report, in accordance with section 536 of Reference (be). As a result of this confidentiality requirement, evidence custodians and any assisting military law enforcement personnel (including MCIO investigators) will NOT report this sexual assault allegation and will NOT initiate an investigation into this matter when they discover the name of the victim and/or suspect with regard to the section 536 request of return of personal property in Restricted Reporting cases.

d. MCIOs will develop procedures that allow for return of personal property to victims who have filed a Restricted Report and provide a DD Form 2910-3, signed by a SARC or SAPR VA and bearing the RRCN of the SAFE Kit. The Military Services will develop procedures utilizing the DD Form 2910-3 in situations where the victim does not initiate the request with the SARC, but rather initiates the request at the Service SAPR leadership level or other locations.

(1) The SARC or SAPR VA will use the DD Form 2910-3 to document the victim's request, to describe the personal property to be released, and to document the RRCN that identifies the SAFE Kit in question.

(2) As required by section 536 of Reference (be), the SARC or SAPR VA will call the victim's attention to the DD Form 2910-3 notification that the request for the return of personal property may negatively impact a future investigation and prosecution if the victim later decides to convert the Restricted Report to an Unrestricted Report, including information submitted into the CATCH Program.

(3) The DD Form 2910-3 will also notify the victim of the CATCH Program and, if eligible, the availability of assistance from an SVC/VLC/VC before filing their request for the property return.

(4) The DD Form 2910-3 will contain a notification for evidence custodians, law enforcement personnel, and MCIO investigators notifying them of the policy exemption, so when they discover the name of the victim and/or suspect, an investigation will NOT be initiated.

(5) After the victim signs the DD Form 2910-3, the SARC or SAPR VA will give the victim the original, signed (or digitally signed) DD Form 2910-3 for the victim to provide to the evidence custodian. The SARC or SAPR VA will also provide the victim a copy of the signed DD Form 2910-3, which the victim should keep in their personal records.

(6) The SARC, or SAPR VA authorized to use DSAID, will upload a copy of the DD Form 2910-3 into DSAID for permanent storage when that DSAID capability is operational, in accordance with established document retention procedures.

(7) Upon receipt of the victim's signed DD Form 2910-3, the SARC will contact the installation MCIO supervisory agent (or the MCIO's designated SAPR agent), provide the RRCN of the appropriate SAFE Kit, and request the kit be located.

(8) The installation MCIO supervisory agent will locate the SAFE Kit and arrange for it to be sent to the installation, if stored elsewhere, using appropriate security measures.

(9) Once the relevant SAFE Kit is at the victim's location, the MCIO supervisory agent and the SARC will arrange for the victim to meet with the evidence custodian to retrieve the personal property in question.

(10) The SARC or SAPR VA will instruct the victim to bring the original (signed in person or digitally) signed DD Form 2910-3 with them to the meeting with the evidence custodian. If the victim has lost the form, the victim will request a copy from the SARC, who will retrieve it from the DSAID File Locker.

(11) Evidence custodians will confirm that the RRCN on the DD Form 2910-3 and the SAFE Kit match, and when provided a copy of the DD Form 2910-3, they will ask the victim to confirm that it is their signature.

(a) If the requested personal property is INSIDE the SAFE Kit box, the evidence custodian will then open the SAFE Kit box and provide the victim with the requested personal property. The evidence custodian will insert the original signed DD Form 2910-3 into the SAFE Kit box to account for the release of the item(s), and then reseal the SAFE Kit box in accordance with established chain of custody procedures.

(b) If the personal property is not in the SAFE Kit box, but in AN EXTERNAL EVIDENCE BAG OR CONTAINER collected as part of the SAFE (e.g., if the forensic examiner collected large clothing items such as jeans that could not fit in the SAFE Kit box), the evidence custodian will not break the SAFE Kit box seal. Instead, the evidence custodian will:

1. Open the external evidence bag or container and provide the victim with the requested personal property.

2. Insert the original signed DD Form 2910-3 into the external evidence bag or container to account for the release of the item(s), and then reseal the external evidence bag or container in accordance with established chain of custody procedures.

(12) If the personal property is missing or damaged, the victim may consult with their SVC/VLC/VC if represented, or can ask the SARC for a referral to an SVC/VLC/VC program of the Military Service concerned, for assistance in addressing this issue. The SARC cannot address evidentiary issues of missing or damaged personal property.

(13) The victim can also make additional requests for return of personal property if there are other pieces of personal property that the victim wants returned.

e. SAFE Kits taken pursuant to a Restricted Report will be disposed of according to established procedure at the end of the 10-year retention period. Law enforcement personnel, MCIO investigators, and support personnel that dispose of SAFE Kits will not initiate an investigation into this matter or report this crime, should they discover the name of the victim and/or suspect while disposing of the kit or associated evidence.

5. SAPR PROCEDURES FOR SAFES.

a. Medical services offered to eligible victims of sexual assault include the ability to elect a SAFE in addition to the general medical management related to sexual assault response, including mental healthcare. The SAFE of a sexual assault victim should be conducted by a healthcare provider who has been trained and certified in the collection of forensic evidence and treatment of these victims in accordance with DoDI 6310.09 (Reference (aj)). The forensic component includes gathering information in DD Form 2911 from the victim for the medical forensic history, an examination, documentation of biological and physical findings, collection of evidence from the victim, and follow-up as needed to document additional evidence.

b. The process for collecting and preserving sexual assault evidence for the Restricted Reporting option is the same as the Unrestricted Reporting option, except that the Restricted Reporting option does not trigger the official investigative process, and any evidence collected has to be placed inside the SAFE Kit, which is marked with the RRCN in the location where the victim's name would have otherwise been written. The victim's SAFE and accompanying Kit is treated as a confidential communication under this reporting option. The healthcare provider shall encourage the victim to obtain referrals for additional medical, psychological, chaplain, victim advocacy, or other SAPR services, as needed. The victim shall be informed that the SARC will assist them in accessing SAPR services.

c. In situations where installations do not have a SAFE capability, the installation commander will require that the eligible victim, who wishes to have a SAFE, be transported to a MTF or local off-base, non-military facility that has a SAFE capability. Local sexual assault medical forensic examiners or other healthcare providers who are trained and certified in accordance with DoDI 6310.09 (Reference (aj)) to perform a SAFE may also be contracted to report to the MTF to conduct the examination.

d. The SARC or SAPR VA shall inform the victim of any local or State sexual assault reporting requirements that may limit the possibility of Restricted Reporting before proceeding with the SAFE.

e. Upon completion of the SAFE in an Unrestricted Reporting case, the healthcare provider shall package, seal, and label the evidence container(s) with the victim's name and notify the MCIO. When the forensic examination is conducted at a civilian facility through an MOU or an MOA with the DoD, the requirement for the handling of the forensic kit will be explicitly addressed in the MOU or MOA. The MOU or MOA with the civilian facility will address the processes for contacting the SARC and for contacting the appropriate DoD agency responsible for accepting custody of the SAFE Kit.

(1) The DoD law enforcement or MCIO representative shall be trained and capable of collecting and preserving evidence to assume custody of the evidence using established chain of custody procedures, consistent with the guidelines published under the authority and oversight of the Inspector General in accordance with DoDI 5505.18 (Reference (ac)).

(2) MOUs and MOAs, with off-base, non-military facilities for the purposes of providing medical care to eligible victims of sexual assault covered under this instruction, shall include instructions for the notification of a SARC (regardless of whether a Restricted or Unrestricted Report of sexual assault is involved), and procedures for the receipt of evidence and disposition of evidence back to the DoD law enforcement agency or MCIO.

f. Upon completion of the SAFE in a Restricted Reporting case, the healthcare provider shall package, seal, and label the evidence container(s) with the RRCN and store it in accordance with Service regulations. When the forensic examination is conducted at a civilian facility through an MOU or an MOA with the DoD, the requirement for the handling of the forensic kit will be explicitly addressed in the MOU or MOA. The MOU or MOA with the civilian facility will address the processes for contacting the SARC and for contacting the appropriate DoD agency responsible for accepting custody of the forensic kit.

(1) The DoD law enforcement or MCIO representative shall be trained and capable of collecting and preserving evidence to assume custody of the evidence using established chain of custody procedures, consistent with the guidelines published under the authority and oversight of OIG. MOUs and MOAs, with off-base, non-military facilities for the purpose of providing medical care to eligible victims of sexual assault covered under this instruction, shall include instructions for the notification of a SARC (regardless of whether a Restricted or Unrestricted Report of sexual assault is involved), procedures for the receipt of evidence, how to request an RRCN, instructions on where to write the RRCN on the SAFE Kit, and disposition of evidence back to the DoD law enforcement agency or MCIO.

(2) The SARC will contact ALL victims who filed a Restricted Report (not just those who had a SAFE Kit) 1 year after the reporting date to inquire whether the victim wishes to change their reporting option to Unrestricted.

(a) If the victim does not change to an Unrestricted Report, the SARC will:

1. Inform (or remind, if previously informed) the victim of the CATCH Program and ask whether the victim would like to participate.

2. Explain to victims who underwent a SAFE that the evidence, if the SAFE Kit is maintained by DoD, will be retained for a total of 10 years from the time the SAFE Kit was completed and that any evidence from the SAFE will be destroyed at the end of the 10-year period.

3. Explain that the victim has the right to request the return of any personal property (e.g., phone, clothing, jewelry) collected as part the SAFE.

4. Emphasize to the victim that they will not be contacted again by the SARC in order to respect their privacy.

5. Emphasize that the victim may convert their Restricted Report to an Unrestricted Report at any time, but should notify the SARC of the intent to convert to Unrestricted before the 10-year evidence retention period elapses, so that evidence collected during the SAFE is not destroyed and can be used during the case.

(b) The victim will be advised again to keep a copy of the DD Form 2910 and the DD Form 2911 in their personal permanent records as these forms may be used by the victim in other matters with other agencies (e.g., Department of Veterans Affairs) or for any other lawful purpose.

(c) If the victim needs another copy of either of these forms, they can request it at this point and the SARC shall assist the victim in accessing the requested copies within 7 business days. The SARC will document this request in the DD Form 2910. For a replacement of a lost DD Form 2910, the DD Form 2910-1 will be used.

(3) At least 30 days before the expiration of the 10-year SAFE Kit storage period, the DoD law enforcement or MCIO shall notify the SARC that the storage period is about to expire and confirm with the SARC that the victim has not made a request to change to Unrestricted Reporting or made a request for any personal effects.

(a) If there has been no change, then at the expiration of the storage period in compliance with established procedures for the destruction of evidence, the designated activity, generally the DoD law enforcement agency or MCIO, may destroy the evidence maintained under that victim's RRCN.

(b) If, before the expiration of the 10-year SAFE Kit storage period, a victim changes their reporting preference to the Unrestricted Reporting option, the SARC shall notify the respective MCIO, which shall then assume custody of the evidence maintained by the RRCN from the DoD law enforcement agency or MCIO, pursuant to established chain of custody procedures. MCIO-established procedures for documenting, maintaining, and storing the evidence shall thereafter be followed.

1. The DoD law enforcement agency, which will receive forensic evidence from the healthcare provider if not already in custody, and label and store such evidence shall be designated.

2. The designated DoD law enforcement agency must be trained and capable of collecting and preserving evidence in Restricted Reports prior to assuming custody of the evidence using established chain of custody procedures.

ENCLOSURE 9

SAPR MONTHLY AND QUARTERLY CASE MANAGEMENT FOR SEXUAL ASSAULT
REPORTS AND CORRESPONDING RETALIATION REPORTS AND HIGH-RISK
RESPONSE TEAMS

1. CMG, QCMG, and HRRT MEETING PURPOSES.

a. The SAPR CMG, QCMG, and HRRT meetings have three separate and mutually supporting purposes:

(1) Safety Assessment and Response. To ensure the victim's safety and the safety of retaliation reporters. Safety concerns encompass harm from others and harm to self (e.g., suicidal ideation).

(a) Safety assessments must be completed for Restricted Reports, Unrestricted Reports, and retaliation reports. However, other than confirming whether a safety assessment was done for an individual who made a Restricted Report, Restricted Reports are not discussed at the CMG.

(b) The HRRT MUST be immediately stood up when the adult sexual assault victim's safety is in jeopardy, and it will meet on a weekly schedule until the safety issue is resolved.

(c) If a safety issue is raised for persons other than the sexual assault victim, the CMG Chair or Co-Chair will immediately contact the commander or civilian supervisor of that person to assess the safety issue and take appropriate immediate action. Actions taken will be reported back to the CMG Chair and Co-Chair for inclusion in CMG the meeting minutes. When immediate action is necessary, the CMG Chair will take appropriate steps.

(2) Victim Services, Retaliation Reporter Referrals, and Tracking. To facilitate referral of victims to appropriate support programs and services and track status of Unrestricted Reports, associated retaliation reports, and Expedited Transfer requests during the monthly CMGs.

(3) SAPR System Coordination and Accountability. To direct effective response system coordination and ensure appropriate accountability through oversight at QCMG meetings.

b. CMG oversight for Unrestricted Reports of adult sexual assaults is triggered by open cases in DSAID initiated by a DD Form 2910 or an investigation initiated by an MCIO. In a case where there is an investigation initiated by an MCIO, but no corresponding Unrestricted DD Form 2910:

(1) The Lead SARC would have no information for the CMG members. During the CMG, the MCIO would provide case management information to the CMG including the SARC.

(2) A SARC would open a case in DSAID indicating the case status as “Open with Limited Information.” The SARC will only use information from the MCIO to initiate an “Open with Limited Information” case in DSAID. In the event that there was a Restricted Report filed prior to the independent investigation, the SARC will not use any information provided by the victim, since that information is confidential.

c. The installation commander or the deputy installation commander shall chair the CMG on a monthly basis to review individual Unrestricted Reports and associated retaliation reports, facilitate monthly victim updates, and direct system coordination, accountability, entry of disposition and victim access to quality services. This responsibility will not be delegated. If there are no cases in a given month, the CMG will still meet to ensure training, processes, and procedures are complete for the system coordination.

d. The Lead SARC shall serve as the Co-Chair of the CMG. This responsibility shall not be delegated. Only a Lead SARC who is a DoD civilian employee may Co-Chair the multi-disciplinary CMG, or as directed by USD(P&R). If an installation has only one SARC, that SARC shall serve as the CMG Co-Chair.

e. Required CMG members shall include: victim’s immediate commander; all SARCs assigned to cases covered by the CMG (mandatory attendance regardless of whether they have an assigned victim being discussed); victims’ SAPR VA, MCIO, and DoD law enforcement representatives who have detailed knowledge of the case; victims’ medical healthcare provider or victim’s mental health and counseling services provider (see “assigned Informed Representative” explanation in the Responsibilities of the DHA Director in Enclosure 2); chaplain, legal representative, or SJA; installation personnel trained to do a safety assessment of current sexual assault victims; victim’s VWAP representative (or civilian victim witness liaison, if available), or SVC/VLC/VC. MCIO, DoD law enforcement, and the legal representative or SJA shall provide case dispositions. The CMG Chair will ensure that the appropriate principal is available. The responsibility for CMG members to attend CMG meetings will not be delegated. Additional persons may be invited to CMG meetings at the discretion of the Chair if those persons have an official need to know, with the understanding that maintaining victim privacy is essential.

f. If the installation is a joint base or if the installation has tenant commands, the commander of the tenant organization and SARCs shall be invited to the CMG meetings. The commander of the tenant organization shall provide appropriate information to the host commander, to enable the host commander to provide the necessary supporting services.

g. CMG members shall receive the mandatory SAPR training pursuant to Enclosure 10 of this volume and the SAPR training in accordance with DoDI 6495.02, Volume 2 (Reference (av)).

h. Secretaries of the Military Departments and Chief, NGB, shall issue guidance to ensure that standards are met for Expedited Transfer requests and ensure oversight by CMGs, QCMGs, and HRRTs is conducted in situations where SARCs are not installation-based.

(1) CMGs, QCMGs, and HRRTs must be conducted as required by this Enclosure.

(2) In deployed environments, status of Expedited Transfer requests and updates from CMGs, QCMGs, and HRRTs must be communicated to the appropriate SARC.

i. In order to standardize and facilitate the SAPR Program's oversight of Unrestricted Reports of adult sexual assault and associated retaliation reports during CMG, QCMG, and HRRT meetings, the Chairs and Co-Chairs of these meetings will complete and sign DD Forms 2910-5 (CMG), 2910-6 (QCMG), and 2910-7 (HRRT).

(1) The use of these three forms is mandatory.

(2) The forms will be shared only with those who have an official need to know or as required by law.

2. SAFETY, VICTIM SERVICES, AND RETALIATION REPORTER REFERRALS.

a. Improved Guidance to SARCs. The Secretaries of the Military Departments and the Chief, NGB, will prescribe procedures identifying and guiding the SARC requirements to discuss the status of victim services, existence of retaliation issues, and safety concerns of each case with the Lead SARC before the CMG, in accordance with this enclosure.

b. Improved Oversight of Victim Safety, Expedited Transfer Completion, and Adjudication of Retaliation Allegations. The CMG Chair conducts oversight of the monthly CMG activities, including:

(1) Ensuring SARCs, SAPR VAs, or other response personnel designated to conduct risk screening and safety assessments of victims making both Restricted and Unrestricted Reports have specialized training, to include assessment of suicidal ideation and risk of harm to self and to/from others. The Military Services will have maximum flexibility to select which personnel conduct safety assessments according to location, mission, and available resources.

(a) If the selected personnel are licensed and credentialed to provide healthcare in an MTF, they are not required to obtain additional training beyond what is needed to maintain licensure and credentialing.

(b) SARCs:

1. Will conduct risk screenings, safety assessments and planning, and needs assessments with victims and may refer victims to mental health at a MTF for a comprehensive clinical safety assessment if they identify concerns for self-harm.

2. Should consult with an appropriate legal authority in situations where risk for self-harm is a concern, but the victim declines a referral to a mental health personnel at an MTF.

3. Safety assessments must be completed for Restricted, Unrestricted, and retaliation reporters. Safety assessments for retaliation reporters will be conducted in accordance with the Retaliation DoDI (Reference (au)).

(2) Completing additional safety assessments when:

- (a) A new safety concern arises or an existing safety concern escalates;
- (b) The victim files a retaliation report associated with an Unrestricted Report; or
- (c) The victim requests assistance with obtaining a military or civilian protective order.

(3) Immediately standing up an HRRT when the victim's safety is in jeopardy. The HRRT will be conducted for the adult sexual assault victim in accordance with this enclosure. The HRRT Chair and HRRT Co-Chair (same as Lead SARC who is the CMG Co-Chair) will provide the CMG Chair with the required updates that are documented in the CMG meeting minutes, which are entered into DSAID by the CMG Co-Chair. The HRRT actions are also documented in the DD Form 2910-7, see below.

(a) If there is a safety issue, the SARC will immediately refer to mental health at an MTF for crisis support and the commander will assess the immediate safety risk, not waiting for the HRRT to be stood up.

(b) While there are no explicit criteria for standing up an HRRT, there will be heightened sensitivity by the CMG Chair where there is a retaliation allegation or a second sexual assault for a victim while in the Military Service.

(4) If a safety issue is raised for persons other than the sexual assault victim, the CMG Chair or Co-Chair will immediately contact the commander or civilian supervisor of that person to assess the safety issue and take appropriate immediate action. Actions taken will be reported back to the CMG Chair and Co-Chair for inclusion in the meeting minutes. If immediate action is necessary, the CMG Chair will take appropriate steps.

(5) Tracking the number of days between the approval date of a victim's request for Expedited Transfer and the date the victim physically departs the losing station (PCS), or the date the victim changes duty assignment location (PCA).

(a) All Expedited Transfers taking longer than 30 calendar days must have documented circumstances for the delay in the CMG minutes, and be reported to the CMG Chair, who must review the circumstances of the delay.

(b) The CMG Chair will direct an HRRT to be initiated when circumstances indicate that the transfer delay appreciably increases risk of harm to the victim.

(6) Confirming that all retaliation reported in the SAPR Program and reviewed at the CMG employ the new DD Form 2910-2.

(7) Ensuring that at every CMG, members strictly adhere to existing procedures to discuss, track, and appropriately refer retaliation reports made by sexual assault victims and others (e.g., SARCs, witnesses) in accordance with Retaliation DoDI (Reference (au)).

(8) Ensuring that reprisal allegations reviewed at the CMG follow the process established to obtain updates from the OIG through the designated email address as described in the Retaliation DoDI (Reference (au)).

(9) Confirming that a Victim's Commander's Package was completed within the required timeframe for each Unrestricted Report and signed off by the victim's commander. Requesting from the appropriate SARC for each victim (on the CMG agenda) whether there were any challenges implementing the recommendations in the Victim's Commander's Package.

(10) Notifying the victim's commander or the GO/FO (whichever is applicable) if apprised that the suspect is the rater, reporting senior, or reviewing officer of the victim of an alleged sexual assault and/or retaliation complaint. Upon notification, the commanding GO/FO or commander will, if required, take appropriate action in accordance with Service instructions and procedures.

(11) Requiring MCIO updates in existing investigations, but not SARC updates, where the victim has filed a Restricted Report (e.g., in situations where the victim disclosed the sexual assault to their command or a third party reported the matter to law enforcement).

c. GO/FO CMG Participation. CMGs must make accommodations for operational requirements and travel commitments of GO/FOs, in an effort to better represent the needs of victims.

(1) SAPR policy requires a GO/FO to attend the CMG when they are the immediate commander of a victim of sexual assault (e.g., when a victim serves on the GO/FO's staff).

(a) To facilitate CMG attendance and representation of the victim, GO/FOs with conflicting operational requirements and travel commitments may designate a military staff member at the O-6 level (or above, as appropriate) with prior commander experience as their alternate to participate at the CMG (referred to in this instruction as the "GO/FO representative").

(b) The GO/FO may NOT designate an individual to serve as the GO/FO representative if the individual is the suspect or the subject of the retaliation complaint.

(2) Such designations will be provided to the CMG Chair in writing, and written designation will be documented in the CMG meeting minutes. The designated GO/FO representative is required to closely follow the progress of victims and their cases. The

designation of an alternate does not absolve GO/FOs of their responsibility to provide updates to the victim within 72 hours of the CMG's completion.

d. CMG Chair Authority of Tenant Commands. In those instances where the installation commander does not possess administrative or operational authority over a tenant commander, the tenant commander is required to adhere to the CMG policy mandates established in this enclosure and in Service policy.

(1) Specifically, a tenant commander is charged to address systemic issues brought to their attention related to the care and support of a Service member or adult military dependent sexual assault victim within their command.

(2) In addition, the tenant commander is required to address any allegations of retaliation, reprisal, ostracism, or maltreatment experienced by the victim, victim's family members, witnesses, bystanders who intervened, SARCs and SAPR VAs, or responders within their command. The tenant commander will report to the CMG Chair on status updates until the victim's case is closed, or until the retaliation allegation has been appropriately addressed, in accordance with the Retaliation DoDI (Reference (au)).

3. SERVICES.

a. The CMG members shall carefully consider and implement immediate, short-term, and long-term measures to help facilitate and assure the victim's well-being and recovery from the sexual assault. They will closely monitor the victim's progress and recovery and strive to protect the victim's privacy, ensuring only those with an official need to know have the victim's name and related details. Consequently, where possible, each case presented before the CMG shall be reviewed independently bringing in only those personnel associated with the case, as well as the CMG Chair and Co-Chair. The same privacy considerations will be used for the review of the associated retaliation reports, in accordance with the Retaliation DoDI (Reference (au)).

b. The CMG Chair and Co-Chair will use the DD Form 2910-5 for each monthly CMG meeting. Only one DD Form 2910-5 is used for each monthly CMG meeting, not individual forms for each victim. Completed forms will be uploaded to DSAID.

(1) As the CMG notetaker, the CMG Co-Chair will fill out the DD Form 2910-5 and the CMG Chair will carefully review the form to confirm all requirements are met before signing the form.

(2) The DD Form 2910-5 is NOT a substitute for the individual case meeting minutes for EACH victim. This is an ADDITIONAL requirement. There is STILL the requirement to document case-specific information for EACH victim as it relates to information needed in the victim's case – this is the function of the specific meeting minutes that link to each specific DSAID Case Number for the specific victim. The DD Form 2910-5 serves as a checklist to ensure requirements in this Enclosure and in the Retaliation DoDI (Reference (au)) are met for

the monthly CMG meetings. Consequently, that is why only one DD Form 2910-5 is completed for each monthly CMG meeting.

c. The CMG Chair shall:

(1) Ensure that the commander(s) of the Service member, who is a subject of a sexual assault allegation, provide in writing all disposition data, to include any administrative or judicial action taken, stemming from the sexual assault investigation to the MCIO. Information provided by commanders is used to meet the Department's requirements for the submission of criminal history data to the Criminal Justice Information System, Federal Bureau of Investigation; and to record the disposition of offenders into DSAID.

(2) Require effective and timely coordination and collaboration among CMG members. At each CMG meeting:

(a) Confirm that the MCIO assigned to an adult sexual assault investigation has notified the SARC as soon as possible, after the investigation is initiated in accordance with Reference (w).

(b) Confirm that all Unrestricted Reports, initiated by a DD Form 2910 or an investigation initiated by an MCIO, are entered into DSAID within 48 hours of the DD Form 2910 being signed by the victim.

(c) Confirm that commanders are providing the final disposition of sexual assault cases to MCIOs. Confirm that the installation commander's or their designated legal officer is providing the SARC the required information for the SARC to enter the final case disposition in DSAID.

(d) Confirm that members of the SVIP are collaborating with SARCs and SAPR VAs during all stages of the investigative and military justice process to ensure an integrated capability, to the greatest extent possible, in accordance with DoDI 1030.02 (the VWAP DoDI contains the prosecution SVIP policy) in Reference (al) and DoDI 5505.19 (contains investigations SVIP policy) in Reference (ak).

(e) Confirm that the SARCs and SAPR VAs have what they need to provide an effective SAPR response to victims consistent with this instruction.

(3) Require that case dispositions, to include cases disposed of by non-judicial proceedings, are communicated to the sexual assault victim, to the extent authorized by law, within 2 business days of the final disposition decision. The CMG Chair will require that the appropriate paperwork (pursuant to Service regulation) is submitted for each case disposition within 24 hours, which shall be inputted into DSAID by the designated officials.

(4) Monitor and require coordination by the Lead SARC for the immediate transfer of sexual assault victim information between SARCs and SAPR VAs, in the event of the SARC's or SAPR VA's change of duty station, to ensure continuity of SAPR services for victims.

(5) Require that the Lead SARC ensures SARCs and SAPR VAs actively participate in each CMG meeting by presenting oral updates (without disclosing protected communications and victim confidentiality), providing recommendations and, if needed, the SARC or the SAPR VA shall affirmatively seek assistance from the CMG Chair or victim's commander.

(6) Require the Lead SARC and SARC provide an update of the status of each Expedited Transfer request and MPO.

(7) If the victim has informed the SARC of an existing CPO, the CMG Chair shall require the SARC to inform the CMG of the existence of the CPO and its requirements.

(8) After protective order documentation is presented at the CMG from the SARC or the SAPR VA, the DoD law enforcement agents at the CMG will document the information provided in their investigative case file, to include documentation for Reserve Component personnel in title 10 status.

d. The CMG Co-Chair shall:

(1) Confirm that all reported sexual assaults are entered into DSAID within 48 hours of the report of sexual assault. In deployed locations, such as areas of combat, that have internet connectivity issues, the timeframe is extended to 96 hours.

(2) Confirm that only the SARC is inputting information into DSAID.

(3) Keep minutes of the monthly meetings to include those in attendance and issues discussed, and upload the completed DD Form 2910-5 into DSAID. CMG participants are only authorized to share case information with those who have an official need to know.

e. For each victim, the assigned SARC and SAPR VA will confirm at the CMG that the victim has been informed of available SAPR services for which they are eligible, including healthcare (medical and mental health), information on convalescent leave, and the availability of legal resources (including legal referrals for explanations of the Safe-to-Report policy and Section 540K Declination Letters) without violating victim confidentiality.

f. For each victim, each CMG member who is involved with and working on a specific case will provide an oral update without violating victim confidentiality or disclosing privileged communications.

g. For each victim, the victim's commander will confirm at the CMG that the victim has received a monthly update from the victim's commander of their case within 72 hours of the last CMG, to ensure timely victim updates in accordance with this instruction.

(1) The victim's commander cannot delegate this responsibility.

(2) Upon request of a victim, a SARC, SAPR VA or SVC/VLC/VC is authorized to provide the update in lieu of the victim's commander. While victims' commanders cannot themselves delegate this responsibility, a victim can request a change. Sometimes Service members feel uncomfortable speaking directly to their commander.

h. If a victim transfers from the installation, then the processes in Table 2 in Enclosure 5 will apply as appropriate.

i. On a joint base or if the installation has tenant commands:

(1) The CMG membership will explore the feasibility of joint use of existing SAPR resources, to include rotating on-call status of SARCs and SAPR VAs. Evaluate the effectiveness of communication among SARCs, SAPR VAs, and first responders.

(2) The CMG Chair will request an analysis of data to determine trends and patterns of sexual assaults and share this information with the commanders on the joint base or the tenant commands. The CMG membership will be briefed on that trend data.

j. At every CMG meeting, the CMG Chair will ask the CMG members if the victim, victim's family members, witnesses, bystanders who intervened, all SARCs and SAPR VAs, responders, or other parties to the incident have reported experiencing incidents of retaliation, reprisal, ostracism, or maltreatment relating to the sexual assault report. If retaliation experiences are conveyed during the CMG, the CMG Chair will follow the procedures in the Retaliation DoDI (Reference (au)).

k. The CMG Chair will confirm with the CMG-Co Chair that individuals who filed a Restricted or Unrestricted Report of sexual assault, or an associated retaliation report, received a safety assessment as soon as possible (even though Restricted Reports are not discussed at the CMG). The CMG Chair will identify installation personnel who have been trained and are able to perform a safety assessment of each sexual assault victim.

(1) Safety Assessment Designees. The CMG Chair will require SARCs and SAPR VAs, who have been trained and are able to perform a safety assessment, to become part of the CMG and attend every monthly meeting.

(2) CMG Safety Assessment Discussion. In addition to confirming that each individual who filed a Restricted and Unrestricted Report of sexual assault, or an associated retaliation report receives a safety assessment as soon as possible, the CMG Chair will discuss safety moves or MPOs, if needed, at the CMG. The status of Expedited Transfer requests and subsequent PCA or PCS moves will also be discussed.

(a) The CMG Co-Chair will confirm that the victims are advised that MPOs are not enforceable off-base by civilian law enforcement.

(b) If applicable, the CMG Chair will confirm that both the suspect and the victim have a hard copy of the MPO.

(3) Standing Up the HRRT. The CMG Chair will immediately stand up a multi-disciplinary HRRT if a victim is assessed to be in a high-risk situation. The purpose and the responsibility of the HRRT is to continually monitor the victim's safety, by assessing danger and developing a plan to manage the situation.

(a) The HRRT shall be chaired by the victim's immediate commander and co-chaired by the CMG Co-Chair (Lead SARC) and, at a minimum, include the suspect's immediate commander; the victim's SARC and SAPR VA; the MCIO, the judge advocate, and the VWAP assigned to the case, victim's healthcare provider, or mental health and counseling services provider; and the personnel who conducted the safety assessment. Additional members may be invited at the discretion of the HRRT Chair and Co-Chair.

1. In situations where the HRRT will discuss a victim's possible suicidal ideations or self-harm, do not invite the suspect's commander UNLESS the suspect is believed to be involved in triggering those thoughts. This is in an effort to protect the victim's privacy. However, in situations where the victim's commander is also the suspect's commander, the victim's commander will always be a member of the HRRT and take on the role of HRRT Chair.

2. In all other cases, the suspect's immediate commander should be invited to be a member of the HRRT.

3. The responsibility of the HRRT members to attend the HRRT meetings and actively participate in them will not be delegated.

(b) The HRRT Chair, with the HRRT Co-Chair, shall make their first report to the installation commander and CMG Chair within 24 hours of being activated. A briefing schedule for the CMG Chair will be determined, but briefings shall occur at least once a week while the victim is on high-risk status.

(c) The HRRT Chair and Co-Chair will use the DD Form 2910-7 and sign off on the form to confirm that all requirements were met. The DD Form 2910-7 (for first HRRT meeting) and the DD Form 2910-7 Supplement (for subsequent HRRT meetings) are NOT substitutes for the individual case DSAID meeting minutes. There is STILL the requirement to document specific information for EACH victim in the DSAID meeting minutes. However, uploading the completed DD Form 2910-7 and subsequent DD Form 2910-7 Supplements will cover the majority of the HRRT meeting minute requirements.

1. The HRRT Chair and Co-Chair will complete the original DD Form 2910-7 for the initial meeting of the HRRT.

a. For the needed subsequent weekly meetings, the HRRT Chair and Co-Chair will use the DD Form 2910-7 Supplement. One DD Form 2910-7 Supplement will be used for EACH subsequent weekly HRRT meeting to document the status of the safety issue for that specific HRRT meeting.

b. For the final HRRT meeting, the original DD Form 2910-7 will be signed by the required parties.

2. The DD Form 2910-7 and corresponding DD Form 2910-7 Supplements will facilitate the weekly briefings to the CMG Chair. The occurrence of the weekly briefings and any direction from the CMG Chair will be documented on the DD Form 2910-7 or the relevant DD Form 2910-7 Supplements.

3. The occurrence of the weekly HRRT briefings will also be documented in the CMG Meeting Minutes in DSAID.

(d) The HRRT assessment of the victim shall include, but is not limited to evaluating:

1. Victim's safety concerns.

2. Suspect's access to the victim or whether the suspect is stalking or has stalked the victim.

3. Previous or existing relationship or friendship between the victim and the suspect, or the suspect and the victim's spouse, or victim's dependents. The existence of children in common. The sharing (or prior sharing) of a common domicile.

4. Whether the suspect (or the suspect's friends or family members) has destroyed the victim's property; threatened or attacked the victim; or threatened, attempted, or has a plan to harm or kill the victim or the victim's family members; or intimidated the victim to withdraw participation in the investigation or prosecution.

5. Whether the suspect has threatened, attempted, or has a plan to commit suicide.

6. Whether the suspect has used a weapon, threatened to use a weapon, or has access to a weapon that may be used against the victim.

7. Whether the victim has sustained serious injury during the sexual assault incident.

8. Whether the suspect has a history of law enforcement involvement regarding domestic abuse, assault, or other criminal behavior.

9. Whether the victim has a civilian protective order or the command has an MPO against the suspect, or there has been a violation of a civilian protective order or MPO by the suspect.

10. History of drug or alcohol abuse by either the victim or the suspect.

11. Whether the suspect exhibits erratic or obsessive behavior, rage, agitation, or instability.

12. Whether the suspect is a flight risk.

13. Additional appropriate topics.

(e) When the victim is no longer deemed to be in a high-risk status, the HRRT Chair will request that the CMG Chair formally dissolve the HRRT. This dissolution of the HRRT will be documented on the original DD Form 2910-7, not the Supplemental forms. The original DD Form 2910-7 must be signed by the CMG Chair, HRRT Chair, and the HRRT Co-Chair.

4. SAPR QCMG MEETINGS: SYSTEM COORDINATION AND ACCOUNTABILITY.

a. SAPR QCMG Meeting Topics.

(1) The CMG Chair will schedule discussions on a quarterly basis at the QCMG meetings on topics including, but not limited to, the following:

(a) System coordination challenges among CMG members.

(b) Timely victim access to healthcare (medical and mental health).

(c) Timely victim access to victim advocacy, legal (SVC/VLC/VC), spiritual, and other services within the installation and through established agreements with external civilian agencies.

(d) HRRT and other organizational responses to victim safety issues.

(e) Retaliation reporting and other associated data.

(f) Timeliness of moves after Expedited Transfer approvals.

(g) Resource sharing in joint environments.

(h) Tenant commander concerns.

(i) Reporting and service access trends for the installation.

(j) Implementation of “No Wrong Door” approach and any barriers or challenges with warm handoff resources. The QCMG Chair will confirm that representatives from SAPR Program, Military Equal Opportunity (MEO), FAP, VWAP, healthcare (medical and mental health), SVC/VLC/VC, and chaplains meet on a quarterly basis to foster liaisons, confirm warm handoffs, and identify any challenges and solutions.

(k) Any other concerns raised to the QCMG Chair and Co-Chair.

(2) This is a separate discussion from individual case management oversight and no information directly related to Unrestricted Reports and/or specific victims will be discussed in order to protect victim privacy. The CMG and the QCMG meetings can be scheduled for the same day, but it is required that the meetings be convened at SEPARATE times and that they each have their distinct membership.

b. SAPR QCMG Meeting Membership. The monthly CMG members required to attend the QCMG meetings include the CMG Chair and Co-Chair, all SARCs assigned to the installation, commanders of victims with open cases, SJAs, and senior representatives from the following:

- (1) Installation MCIOs.
- (2) DoD law enforcement agencies.
- (3) Healthcare (medical and mental health) providers.
- (4) Chaplains.
- (5) Installation personnel trained to do a safety assessment.
- (6) Victim Witness Assistance Personnel.
- (7) SVC/VLC/VC.
- (8) Other personnel invited by the CMG Chair or Co-Chair.

c. SAPR QCMG Meeting Duties for Chair and Co-Chair.

(1) The QCMG Chair and Co-Chair will use the DD Form 2910-6 for each QCMG meeting and sign off on the form to confirm that all requirements were met.

(a) The DD Form 2910-6 incorporates most of the documentation requirements for QCMG meeting minutes.

(b) The QCMG Co-Chair, as the QCMG notetaker, can fill out the DD Form 2910-6 and the QCMG Chair can carefully review, confirm all requirements are met, and sign the DD Form 2910-6. The QCMG Co-Chair will upload the completed DD Form 2910-6 into DSAID.

(2) The CMG Chair is the QCMG Chair and will review minutes and action items at the next quarterly meeting to drive progress and conduct oversight on any open system coordination and accountability issues.

(3) The CMG Co-Chair (i.e., the Lead SARC) is the QCMG Co- Chair and will record the minutes of the quarterly meeting, including all action items assigned by the QCMG Chair to address or improve system response.

ENCLOSURE 10

SAPRTEC MANAGEMENT AND OVERSIGHT OF TRAINING REQUIREMENTS FOR
DOD PERSONNEL

1. MANAGEMENT OF TRAINING REQUIREMENTS.

a. DoD SAPRO will establish and maintain SAPRO's SAPRTEC in accordance with Enclosure 10 of this volume and Volume 2 of DoDI 6495.02 (Reference (av)) to include the development of:

- (1) Standardized DoD requirements for SAPR education and training for DoD personnel.
- (2) Core curriculum of required trainings for SARW members and, if requested, for certain other responders.

b. Commanders, supervisors, and managers at all levels shall be responsible for the effective implementation of the SAPR program training requirements.

c. Military and DoD civilian officials at each management level shall advocate a robust SAPR program and provide education and training that shall enable them to prevent and appropriately respond to incidents of sexual assault.

d. The Military Services and NGB shall provide the requested training and education data for the SAPR annual reporting requirements in accordance with Reference (l) and as explained in Enclosure 12 of this volume.

e. Military and DoD civilian supervisors will refer to DoDI 6495.02, Volume 2, "Sexual Assault Prevention and Response: Education and Training," (Reference (av)), for sexual assault response education and training requirements for:

- (1) Initial entry education and training.
- (2) Accession education and training.
- (3) Annual refresher education and training.
- (4) Pre-deployment education and training.
- (5) Post-deployment education and training.
- (6) Sexual assault response education and training requirements based on position or rank, including:

- (a) Pre-command education and training.

(b) Professional military education.

(c) GO/FO and Senior Executive Service personnel education and training.

(7) Education and training for military recruiters, personnel temporarily assigned to assist recruiters, drill instructors or sergeants, and instructors at formal Service schools.

f. Military and DoD civilian supervisors will enforce the SAPR responder training standards in this Enclosure.

g. Military and DoD civilian supervisors will provide SAPR training and education for DoD civilian employees of the Military Departments in accordance with section 585 of Reference (m).

2. RESPONDER TRAINING REQUIREMENTS.

a. To standardize services throughout the DoD, as required in Reference (c), all DoD sexual assault responders shall receive the same baseline training. First responders are composed of personnel in the following disciplines or positions: Lead SARCs; SARCs; SAPR VAs; healthcare personnel; DoD law enforcement; MCIOs; judge advocates; chaplains; firefighters and emergency medical technicians. Commanders and VWAP personnel can be first responders. Commanders receive their SAPR training separately. Responder training will be conducted by the appropriate entities in the Components.

b. All responder training shall:

(1) Be given in the form of initial and annual refresher training from their Military Service in accordance with Enclosure 2 of this volume. Responder training is in addition to annual training.

(2) Be developed for each responder functional area from each Military Service and shall:

(a) Explain the different sexual assault response policies and critical issues.

1. DoD SAPR policy, including the role of the Lead SARC, SARC, SAPR VA, victim witness liaison, and CMG.

2. Military Service-specific policies.

3. Unrestricted and Restricted Reporting as well as MRE 514 of Reference (w).

4. Exceptions to Restricted Reporting and limitations to use.

5. Change in victim reporting preference election.

6. Victim advocacy resources.

(b) Explain the requirement that SARCs and SAPR VAs must respond in accordance with this instruction.

(c) Describe local policies and procedures with regards to local resources, referrals, procedures for military and civilians as well as collaboration and knowledge of resources and referrals that can be utilized at that specific geographic location.

(d) Explain the range of victim responses to sexual assault to include:

1. Victimization process, including re-victimization and secondary victimization.

2. Counterintuitive behavior.

3. Impact of trauma on memory and recall.

4. Potential psychological consequences, including acute stress disorder and post-traumatic stress disorder.

(e) Explain deployment issues, including remote location assistance.

(f) Explain the possible outcomes of investigations of sexual assault.

(g) Explain the possible flow of a sexual assault investigation. (See flowchart in the SAPR Policy Toolkit, located at <https://www.sapr.mil>.)

(h) Responder training shall be completed prior to deployment.

(i) Recommend, but not require, that SAPR training for responders include safety and self-care.

(j) Explain how to provide a response that recognizes the high prevalence of pre-existing trauma.

(k) Explain the eligibility for SVC/VLC/VC for both Restricted and Unrestricted Reports of sexual assault, and the types of legal assistance authorized to be provided to the sexual assault victim. Explain that the nature of the relationship between an SVC/VLC/VC and a victim in the provision of legal advice and assistance will be the relationship between an attorney and client.

c. SARC training shall:

(1) Provide the responder training requirements in paragraph 2.b. of this enclosure.

- (2) Include:
 - (a) Necessary critical advocacy skills.
 - (b) Crisis intervention.
 - (c) Basic interpersonal, communication, and assessment skills.
 - 1. Appropriate relationship and rapport building.
 - 2. Sensitivity training to prevent secondary victimization.
 - 3. Risk screening, safety assessment and planning, and needs assessment.
- (3) Roles and limitations, to include: command relationship, SARCs' rights and responsibilities, reporting to the Lead SARC and installation commander, and recognizing personal biases and issues.
- (4) Be scenario-based and interactive. Provide for role play where a trainee SARC counsels a sexual assault (role-play) victim and is critiqued by a credentialed SARC and/or an instructor.
- (5) Explain roles and responsibilities and working with SAPR VAs.
- (6) Explain the different reporting options, to include the effects of independent investigations (see Enclosure 4 of this volume). Explain the exceptions to Restricted Reporting, with special emphasis on suspending Restricted Reporting where it is necessary to prevent or mitigate a serious and imminent threat to the health or safety of the victim or another person.
- (7) Provide training on how MCIOs will be entering reports of sexual assault into DSAID through MCIO case management systems or by direct data entry. Provide training on potential discovery obligations regarding any notes entered in DSAID.
- (8) Provide training on document retention and SAFE Kit retention in Restricted and Unrestricted cases. Explain evidence collected in a sexual assault investigation is disposed of in accordance with section 586 of Reference (m), as amended by section 538 of Reference (p), and DoD regulations.
- (9) Provide training on Expedited Transfer and MPO procedures.
- (10) Include the necessary case management skills:
 - (a) Required reports and proper documentation as well as records management.
 - (b) Instruction to complete DD Form 2910 and proper storage according to Federal and Service privacy regulations.

(c) Ability to conduct SAPR training, when requested by the Lead SARC or commander.

(d) Transferring cases to another SARC.

(11) Explain the roles and responsibilities of the VWAP and DD Form 2701.

(12) Inform SARCs of the existence of the SAPRO website at <https://www.sapr.mil>, and encourage its use for reference materials and general DoD-level SAPR information.

(13) Include annual suicide prevention training to facilitate their ability to assist a sexual assault victim who has suicidal ideation.

d. SAPR VA training shall:

(1) Provide the responder training requirements in paragraph 2.b. of this enclosure.

(2) Be scenario-based and interactive. Provide for role play where a trainee SAPR VA counsels a sexual assault victim, and then that counseling session is critiqued by an instructor.

(3) Explain the different reporting options, to include the effects of independent investigations (see Enclosure 4 of this volume). Explain the exceptions to Restricted Reporting, with special emphasis on suspending Restricted Reporting where it is necessary to prevent or lessen a serious and imminent threat to the health or safety of the victim or another person.

(4) Include:

(a) Necessary critical advocacy skills.

(b) Basic interpersonal, communication, and assessment skills.

1. Appropriate relationship and rapport building.

2. Sensitivity training to prevent secondary victimization.

3. Risk screening, safety assessment and planning, and needs assessment.

(c) Crisis intervention.

(d) Restricted and Unrestricted Reporting options as well as MRE 514 of Reference (w).

(e) Roles and limitations, to include: command relationship, SAPR VA's rights and responsibilities, reporting to the Lead SARC and SARC, and recognizing personal biases and issues.

(f) Preparing proper documentation for a report of sexual assault.

(g) Document retention and SAFE Kit retention in Restricted and Unrestricted cases. Explain evidence collected with a sexual assault investigation is disposed of in accordance with section 586 of Reference (m), amended by section 538 of Reference (p), and DoD regulations.

(h) Expedited Transfer and MPO procedures.

(i) Record keeping rules for protected disclosures relating to a sexual assault.

(j) A discussion of ethical issues when working with sexual assault victims as a victim advocate.

(k) A discussion of individual versus system advocacy.

(l) A review of the military justice process and adverse administrative actions.

(m) Overview of criminal investigative process and military judicial requirements.

(n) A review of the issues in victimology.

1. Types of assault.

2. Health consequences such as mental health and physical health.

3. Cultural and religious differences.

4. Victims' rights and the victim's role in holding offenders appropriately accountable and limitations on offender accountability when the victim elects Restricted Reporting.

5. Healthcare management of sexual assault and medical resources and treatment options to include the medical examination, the forensic examination, mental health and counseling, pregnancy, and STD/I and HIV.

6. Identification of safety issues and their immediate report to the SARC or law enforcement, as appropriate.

7. Identification of retaliation, reprisal, ostracism, and maltreatment actions against the victim; procedures for responding to these allegations and their immediate reporting to the SARC and the VWAP; safety planning to include how to prevent retaliation, reprisal, ostracism, and maltreatment actions against the victim.

8. Separation of the victim and suspect as well as the MPO and CPO process.

9. Expedited Transfer process for the victim.

(o) An explanation of the roles and responsibilities of the VWAP and DD Form 2701.

(p) Safety and self-care, to include vicarious trauma.

(5) Include annual suicide prevention training to facilitate their ability to assist a sexual assault victim who has suicidal ideation.

e. Healthcare personnel training shall occur in two distinct training categories: Healthcare personnel training (see Glossary), and the selection criteria, training, and certification standards for healthcare providers performing adult sexual assault forensic examinations in accordance with DoDI 6310.09 (Reference (aj)) and DHA Procedural Instruction (DHA-PI) 6310.01, (Reference (az)).

f. DoD law enforcement (those elements of DoD components authorized to investigate violations of the UCMJ) training shall:

(1) Include the responder training requirements in paragraph 2.b. of this enclosure for DoD law enforcement personnel who may respond to a sexual assault complaint.

(2) Remain consistent with the guidelines published under the authority and oversight of OIG. In addition, DoD law enforcement training shall:

(a) Explain how to respond in accordance with the SAPR program.

1. Law enforcement first responders and law enforcement resources identify the reported sexual assault victim(s) and the location of the purported crime scene(s) to prevent the possible loss or contamination of evidence as well as determine jurisdictional responsibility. First responders and other DoD law enforcement resources may have initial contact with the reported sexual assault victim(s) to obtain this information; ONLY the MCIO will conduct the formal victim interview, in accordance with DoDI 5505.18 (Reference (ac)).

2. When to notify the command, SARC, and SAPR VA.

3. How to work with SAPR VAs and SARCs, and medical personnel.

4. In the event that law enforcement personnel respond to a 911 or emergency call involving sexual assault, how to refer the incident to the appropriate MCIO for investigation (after taking appropriate emergency response actions).

5. Reporting options for adult sexual assault using DD Form 2910 and the CATCH a Serial Offender Program.

6. Reporting options for retaliation relating to the sexual assault report made within the SAPR program using DD Form 2910-2.

(b) Explain how to work with sexual assault victims, to include the effects of trauma on sexual assault victims. Ensure victims are informed of and accorded their rights, in accordance with DoDI 1030.02 (Reference (al)) by contacting the VWAP.

(c) Take into consideration the victim's safety concerns and medical needs.

(d) Review OIG policy and Military Service regulations regarding the legal transfer of the SAFE Kit and the retention of the DD Form 2911 or reports from civilian sexual assault forensic exams in archived files. Explain that if the victim had a SAFE, the SAFE Kit will be retained for 10 years in accordance with DoDI 5505.18 in Reference (ac) and with section 586 of Reference (m), as amended by section 538 of Reference (p). Personal property retained as evidence collected in association with a sexual assault investigation will be retained for a period of 10 years. Personal property may be returned to the rightful owner of such property after the conclusion of all legal, adverse action and administrative proceedings related to such incidents in accordance with section 586 of Reference (m), as amended by Reference (p), and DoD regulations.

(e) Discuss sex offender issues.

(f) Explain the Law Enforcement Sexual Assault Victim Disclosure Exception in accordance with DoDI 5505.18 (Reference (ac)).

(g) Explain the Safe-to-Report Policy in accordance with Enclosure 5 in this volume.

(h) Explain criteria for non-participating victim use of the Section 540K Declination Letter in accordance with DoDI 5505.18 (Reference (ac)).

g. Training for MCIO agents assigned to investigate sexual assaults is detailed in DoDI 5505.18 (Reference (ac)).

h. Judge advocate training shall:

(1) Prior to performing judge advocate duties, adhere to the responder training requirements in paragraph 2.b. of this enclosure for judge advocates who are responsible for advising commanders on the investigation or disposition of, or who prosecute or defend, sexual assault cases.

(2) Explain legal support services available to victims.

(a) Pursuant to the respective Service regulations, explain that each Service member who reports a sexual assault shall be given the opportunity to consult with legal assistance counsel and SVC/VLC/VC and, in cases where the victim may have been involved in collateral misconduct, to consult with defense counsel.

1. Provide information concerning the prosecution, if applicable, in accordance with Reference (af). Provide information regarding the opportunity to consult with legal assistance counsel and SVC/VLC/VC as soon as the victim seeks assistance from an SARC, SAPR VA, or any DoD law enforcement agent or judge advocate.

2. Ensure victims are informed of their rights and the VWAP program, in accordance with DoDI 1030.02 in Reference (al).

- (b) Explain the sex offender registration program.
- (3) Explain issues encountered in the prosecution of sexual assaults.
 - (a) Typologies (characteristics) of victims and sex offenders in non-stranger sexual assaults.
 - (b) Addressing the consent defense.
 - (c) How to effectively prosecute alcohol and drug facilitated sexual assault.
 - (d) How to introduce forensic and scientific evidence (e.g., SAFE Kits, DNA, serology, toxicology).
 - (e) Evidentiary issues regarding MRE 412, 413, and 615 of Reference (w).
 - (f) How to advise victims, SAPR VAs, and VWAP about the military justice process, and MRE 514 of Reference (w). Explain:

1. Victims' rights during trial and defense counsel interviews (e.g., guidance regarding answering questions on prior sexual behavior, interviewing parameters, coordinating interviews, case outcomes).

2. In the case of a general or special court-martial, the trial counsel will cause each qualifying victim to be notified of the opportunity to receive a copy of the record of trial (not to include sealed materials unless approved by the presiding military judge or appellate court, classified information, or other portions of the record the release of which would unlawfully violate the privacy interests of any party, and without a requirement to include matters attached to the record under R.C.M. 1101(b)(3) in Reference (w). A qualifying victim is an individual named in a specification alleging an offense under Articles 120, 120b, 120c, or 125 of the UCMJ (sections 920, 920b, 920c, or 925 of Reference (d)), or any attempt to commit such offense in violation of Article 80 of the UCMJ (section 880 of Reference (d)) if the court-martial resulted in any finding of that specification.

3. Guidance on victim accompaniment (e.g., who may accompany victims to attorney interviews, what is their role, and what they should do if victim is being mistreated).

a. Defense counsel must request interviews through the victim's counsel if the victim is represented by counsel.

b. The victim has the right to be accompanied to the Defense interview, in accordance with section 846 of Reference (d).

4. MRE 412 of Reference (w) and its application to an Article 32 preliminary hearings.

5. Protecting victim privacy (e.g., access to medical records and conversations with SARC or SAPR VA, discovery consequences of making victim's mental health an issue, MRE 514 of Reference (w)).

i. Legal assistance attorney training shall adhere to the responder training requirements in paragraph 2.b. of this enclosure. Attorneys shall receive training in order to have the capability to provide legal assistance to sexual assault victims in accordance with Reference (bb). Legal assistance attorney training shall include:

(1) The VWAP, including the rights and benefits afforded the victim.

(a) The role of the VWAP and what privileges do or do not exist between the victim and the advocate or liaison.

(b) The nature of the communication made to the VWAP as opposed to those made to the legal assistance attorney.

(2) The differences between the two types of reporting in sexual assault cases.

(3) The military justice system, including the roles and responsibilities of the special trial counsel, the defense counsel, and investigators. This may include the ability of the government to compel cooperation and testimony.

(4) The services available from appropriate agencies or offices for mental health counseling and other medical services.

(5) The availability of protections offered by military and civilian restraining orders.

(6) Eligibility for and benefits potentially available as part of transitional compensation benefits found in section 1059 of Reference (d), and other State and Federal victims' compensation programs.

(7) Traditional forms of legal assistance.

j. Chaplains, chaplain assistants, and religious personnel training shall:

(1) Adhere to the responder training requirements in paragraph 2.b. of this enclosure.

(2) Pre-deployment SAPR training shall focus on counseling services needed by sexual assault victims and suspects in contingency and remote areas.

(3) Address:

(a) Privileged communications and the Restricted Reporting policy rules and limitations, including legal protections for chaplains and their confidential communications, assessing victim or suspect safety issues (while maintaining chaplain's confidentiality), and MRE 514 of Reference (w).

(b) How to support victims with discussion on sensitivity of chaplains in addressing and supporting sexual assault victims, identifying chaplain's own bias and ethical issues, trauma training with pastoral applications, and how to understand victims' rights as prescribed in Whistleblowers protections in Reference (am) and DoDI 1030.02 in Reference (al).

(c) Other counseling and support topics.

1. Offender counseling should include: assessing and addressing victim and offender safety issues while maintaining confidentiality; and counseling an offender when the victim is known to the chaplain (counseling both the offender and the victim, when there is only one chaplain at a military installation).

2. Potential distress experienced by witnesses and bystanders over the assault they witnessed or about which they heard.

3. Counseling for SARCs, SAPR VAs, healthcare personnel, chaplains, JAGs, law enforcement or any other professionals, who routinely work with sexual assault victims and may experience secondary effects of trauma.

4. Providing guidance to unit members and leadership on how to mitigate the impact that sexual assault has on a unit and its individuals, while keeping in mind the needs and concerns of the victim.

ENCLOSURE 11

DSAID

1. PURPOSE.

a. In accordance with section 563 of Reference (j), DSAID shall support Military Service SAPR program management and DoD SAPRO oversight activities. It shall serve as a centralized, case-level database for the collection and maintenance of information regarding adult sexual assaults and associated reported retaliation involving persons covered by this instruction. DSAID will include information, if available, about the nature of the assault, the victim, the suspect, investigative information, case outcomes in connection with the allegation, and other information necessary to fulfill reporting requirements. DSAID will serve as the DoD's SAPR source for internal and external requests for statistical data on sexual assault, in accordance with section 563 of Reference (j), and associated retaliation reported through the SAPR Program. DSAID has been assigned Office of Management and Budget control number 0704-0482. DSAID contains information provided by the Military Services, which are the original sources of the information.

b. Disclosure of data stored in DSAID will only be granted when disclosure is authorized or required by law or regulation.

2. PROCEDURES.

a. DSAID shall:

(1) Contain information about sexual assaults reported to the DoD involving persons covered by this instruction, both via Unrestricted Reporting, Restricted Reporting, and SRIs.

(2) Include adequate safeguards to shield PII from unauthorized disclosure. The system will not contain PII about victims who make a Restricted Report. Information about sexual assault victims and subjects will receive the maximum protection allowed under the law. DSAID is accessible only by authorized users and includes stringent user access controls.

(3) Assist with annual and quarterly reporting requirements, identifying and managing trends, analyzing risk factors or problematic circumstances, and taking action or making plans to eliminate or to mitigate risks. DSAID shall store case information. Sexual assault case information shall be available to DoD SAPRO for SAPR program oversight (data validation and quality control), study, research, and analysis purposes. DSAID will provide a set of core functions to satisfy the data collection and analysis requirements for the system in five basic areas: data warehousing, data query and reporting, SARC victim case management functions, subject investigative and legal case information, and SAPR program administration and management.

(4) Receive information from the MCIO case management systems or direct data entry by authorized Military Service personnel.

(5) Contain information pertaining to all victims of sexual assault reported to the DoD through filing a DD Form 2910 or reporting to an MCIO. When a Service member is alleged to have sexually assaulted a civilian or foreign national, the SARC will request and the MCIO will provide the victim's name, supporting PII, and the MCIO case file number, to include the unique identifier for foreign nationals, for entry into DSAID.

(6) A SARC will open a case in DSAID as an "Open with Limited Information" case when there is no signed DD Form 2910 (e.g., an independent investigation or third-party report, or when a civilian victim alleged sexual assault with a Service member) to comply with Section 563(d) of Reference (i) and to ensure system accountability.

b. The DD Form 2965 may be used as a tool for capturing information to be entered into DSAID when direct data entry is not possible, but the DD Form 2965 is not meant to be retained as a permanent form.

(1) SARCs and SAPR VAs will be the primary users of the DD Form 2965, which may be completed in sections as appropriate. Applicable sections of the form may also be used by the MCIO and designated legal officer, if applicable, to provide required investigative and disposition information to SARCs for input into DSAID. Victims will NOT complete the DD Form 2965.

(2) In accordance with General Records Schedule 20, Item 2(a)4, users will destroy the DD Form 2965 immediately after its information has been input into DSAID or utilized for the purpose of developing the 8-day incident report (Reference (o)). In all cases, the DD Form 2965 will not be retained for longer than 8 days and will NOT be mailed, faxed, stored, or uploaded to DSAID. In a Restricted Report case, a copy of the DD Form 2965 will NOT be provided to commanders.

3. NOTIFICATION PROCEDURES AND RECORD ACCESS PROCEDURES.

a. Requests for information contained in DSAID are answered by the Services. All requests for information should be made to the DoD Component that generated the information in DSAID. Individuals seeking to determine whether information about themselves is contained in this system of records or seeking access to records about themselves should address written inquiries to the appropriate Service office (see Service list at <https://www.sapr.mil>).

b. Requests for information to the DoD Components must be responded to by the office(s) designated by the Component to respond to FOIA and Privacy Act requests. Requests shall not be informally handled by the SARCs.

ENCLOSURE 12

SEXUAL ASSAULT ANNUAL AND QUARTERLY REPORTING REQUIREMENTS

1. ANNUAL REPORTING FOR THE MILITARY SERVICES. The USD(P&R) submits annual FY reports to Congress on the sexual assaults involving members of the Military Services. Each Secretary of the Military Departments and the Chief, NGB, must submit their report for the prior FY to the Secretary of Defense through the DoD SAPRO by March 1. The Secretary of the Navy must provide separate reports for the Navy and the Marine Corps. The Secretary of the Air Force must provide separate reports for the Air Force and for the Space Force. The annual report is accomplished in accordance with guidance from the USD(P&R) and section 1631(d) of Reference (l), and includes:

- a. The policies, procedures, and processes in place or implemented by the SAPR program during the report year in response to incidents of sexual assault.
- b. An assessment of the implementation of the policies and procedures on the prevention, response, and oversight of sexual assaults in the military to determine the effectiveness of SAPR policies and programs, including an assessment of how Service efforts executed DoD SAPR priorities.
- c. Any plans for the following year on the prevention of and response to sexual assault, specifically in the areas of advocacy, healthcare provider and medical response, mental health, counseling, investigative services, legal services, and chaplain response.
- d. Matrices for Restricted and Unrestricted Reports of the number of sexual assaults involving Service members that include case synopses, and disciplinary actions taken in substantiated cases and relevant information. See the appendix to this enclosure.
- e. Analyses of the matrices of the number of sexual assaults involving Service members.
- f. May include analyses of surveys administered to victims of sexual assault on their experiences with SAPR victim assistance, the military health system, and the military justice system. De-identified information on certain demographic aspects of victims and reporters of sexual assault will be included, to the maximum extent practicable, in the SAPR annual report using de-identified data from surveys administered to estimate the prevalence of sexual assault or to assess the experiences of victims of sexual assault.
- g. Analysis and assessment of the disposition of the most serious offenses identified in Unrestricted Reports in accordance with section 542 of Reference (p).
- h. As required by section 549G(b) of Reference (bm), race and ethnicity information of the suspect will be included for Unrestricted Reports of sexual assaults, to the maximum extent practicable, in the SAPR annual report; the exclusion of such information will be based on

privacy concerns, impacts on accountability, or other matters of importance as determined and identified by the Secretary of Defense. Information on race and ethnicity of the accused individuals that could reasonably lead to the identification of an individual accused or an adult sexual assault victim will not be requested in the SAPR annual report data call and will not be published in the SAPR annual report.

2. QUARTERLY REPORTS. The quarterly data reports from the Military Services are the basis for annual reports, including the data fields necessary for comprehensive reporting and metrics tracking. The information collected to prepare the quarterly reports has been assigned Report Control Symbol DD-P&R(A)2205. In quarterly reports, the policies and planned actions are not required to be reported. Each quarterly report and subsequent FY annual report shall update the status of those previously reported investigations that had been reported as opened but not yet completed or with action pending at the end of a prior reporting period. Once the final action taken is reported, that specific investigation no longer needs to be reported. This reporting system will enable the DoD to track sexual assault cases from date of initiation to completion of command action or disposition. Quarterly reports are due:

- a. February 15 for investigations opened during the period of October 1 - December 31.
- b. May 15 for investigations opened during the period of January 1 - March 31.
- c. August 15 for investigations opened during the period of April 1 - June 30.
- d. The final quarterly report (July 1 - September 30) shall be included as part of the annual FY report.

3. ANNUAL REPORTING FOR THE MILITARY SERVICE ACADEMIES (MSAs).

Pursuant to section 532 of Reference (i), the USD(P&R) submits annual reports on sexual harassment and violence at MSAs to the House and Senate Armed Services Committees each academic program year (APY). The service academy surveys conducted by OPA have been assigned OMB Control Number 0704-0623.

a. In odd-numbered APYs, superintendents will submit a report to their respective Military Department Secretaries assessing their respective MSA policies, training, and procedures on sexual harassment and violence involving cadets and midshipmen no later than October 15 of the following APY. OPA will simultaneously conduct surveys of cadets and midshipmen to collect information relating to sexual assault and sexual harassment at the MSAs to supplement these reports. DoD SAPRO will summarize and consolidate the results of each MSA's APY assessment, which will serve as the mandated DoD annual report to Congress.

b. In even-numbered APYs, DoD SAPRO and the Office for Civil Rights and Equal Opportunity Policy will conduct MSA site visits and a data call to assess each MSA's policies; training, and procedures regarding sexual harassment and violence involving cadets and

midshipmen; perceptions of Academy personnel regarding program effectiveness; the number of reports and corresponding case dispositions; program accomplishments; progress made; and challenges. Together with the DoD SAPRO and Office for Civil Rights and Equal Opportunity Policy MSA visits, OPA will conduct focus groups with cadets and midshipmen to collect information relating to sexual harassment and violence from the MSAs to supplement this assessment. DoD SAPRO will consolidate the assessments and focus group results of each MSA into a report, which will serve as the mandated DoD annual report to Congress.

4. ANNUAL REPORTING OF INSTALLATION DATA. Installation data is drawn from the annual reports of sexual assault listed in section 1 of this enclosure. The Secretaries of each Military Department must submit their Military Service report of sexual assault for the prior FY organized by installation, to the Secretary of Defense through the DoD SAPRO by March 1 of each year. The Secretary of the Navy must provide separate reports for the Navy and the Marine Corps. Reports will contain matrices for Restricted and Unrestricted Reports of the number of sexual assaults involving Service members organized by military installation and matrices including the synopsis and disciplinary actions taken in substantiated cases.

Appendix

Sexual Assault Offense – Investigation Disposition

APPENDIX TO ENCLOSURE 12

SEXUAL ASSAULT OFFENSE – INVESTIGATION DISPOSITION

Pursuant to the legislated requirements specified in Reference (l), the following terms are used by the Services for annual and quarterly reporting of the dispositions of subjects in sexual assault investigations conducted by the MCIOs. Services must adapt their investigative policies and procedures to comply with these terms.

a. Substantiated Reports. Dispositions in this category come from Unrestricted Reports that have been investigated and found to have sufficient evidence for consideration of action, which may include some form of punitive, corrective, or discharge action against a subject.

(1) Substantiated Reports Against Service Member Subjects. A substantiated report of sexual assault is an Unrestricted Report that was investigated by an MCIO and found to have sufficient evidence to support the action against the subject. Actions against the subject may include initiation of a court-martial, non-judicial punishment, administrative discharge, and other adverse administrative action that results from a report of sexual assault or associated misconduct (e.g., adultery, housebreaking, false official statement).

(2) Substantiated Reports by Service Member Victims. A substantiated report of a sexual assault victim's Unrestricted Report is an Unrestricted Report that was investigated by an MCIO and found to have sufficient evidence to support action against the subject. However, there are instances where an Unrestricted Report of sexual assault by a Service member victim may be substantiated but no action is taken against the person who is the subject of the investigation. These categories include the following: the subject of the investigation could not be identified; the subject died or deserted from the Service before action could be taken; the subject was a civilian or foreign national not subject to the UCMJ; or the subject was a Service member being prosecuted by a civilian or foreign authority.

b. Substantiated Report Disposition Descriptions. In the event that several types of action are taken against the same subject, only the most serious action taken is reported, as provided for in the following list, in descending order of seriousness. For each subject, any court-martial sentence and non-judicial punishment administered pursuant to Article 15 of the UCMJ (section 815 of Reference (d)) is reported annually to the DoD in the case synopses or via DSAID. Further additional actions of a less serious nature in the descending list should also be included in the case synopses reported to the Department. Reference (l) requires the reporting of the number of victims associated with each of the following disposition categories.

(1) Action for Sexual Assault Offense:

(a) Court-Martial Charges Preferred (Initiated) for Sexual Assault Offense. A court-martial charge was preferred (initiated) for at least one of the offenses punishable by Articles 120 and 125 of the UCMJ (sections 920 and 925 of Reference (d)), or an attempt to commit an

Article 120 or 125 UCMJ offense that would be charged as a violation of Article 80 of the UCMJ (section 880 of Reference (d)) (see R.C.M.s 307 and 401 in Reference (w)).

(b) Non-judicial Punishments (Article 15, UCMJ). Disciplinary action for at least one of the UCMJ offenses comprised within the SAPR definition of sexual assault that was initiated pursuant to Article 15 of the UCMJ (section 815 in Reference (d)).

(c) Administrative Discharges. Action taken to involuntarily separate the suspect from military service that is based in whole or in part on an offense within the SAPR definition of sexual assault.

(d) Other Adverse Administrative Actions. In the absence of an administrative discharge action, any other administrative action that was initiated (including corrective measures such as counseling, admonition, reprimand, exhortation, disapproval, criticism, censure, reproach, rebuke, extra military instruction, or other administrative withholding of privileges, or any combination thereof), and that is based in whole or in part on an offense within the SAPR definition of sexual assault. Cases should be placed in this category only when an administrative action other than an administrative discharge is the only action taken. If an “other administrative action” is taken in combination with another more serious action (e.g., court-martial, non-judicial punishment, administrative discharge, or civilian or foreign court action), only report the case according to the more serious action taken.

(2) Action for Other Criminal Offense. Report actions against subject in this category when there is probable cause for an offense, but only for a non-sexual assault offense. Report court-martial charges preferred, nonjudicial punishments, and sentences imposed in the case synopses provided to the DoD. To comply with Reference (l), the number of victims associated with each of the following categories must also be reported.

(a) Court-martial charges preferred (initiated) for a non-sexual assault offense.

(b) Non-judicial punishments (Article 15, UCMJ (section 815 in Reference (d)) for non-sexual assault offense.

(c) Administrative discharges for non-sexual assault offense.

(d) Other adverse administrative actions for non-sexual assault offense.

c. Action Precluded. Dispositions reported in this category come from an Unrestricted Report that was investigated by an MCIO and provided to the authority for consideration of action, but the evidence did not support taking action against the subject of the investigation because the victim declined to participate in the military justice action, there was insufficient evidence of any offense to take command action, the report was unfounded, the victim died prior to completion of the military justice action, or the statute of limitations for the alleged offense(s) expired. Reference (l) requires the reporting of the number of victims associated with each of the following disposition categories.

(1) Victim Declined to Participate in the Military Justice Action. An action is precluded or declined because the victim has declined to further cooperate with military authorities or prosecutors in a military justice action.

(2) Insufficient Evidence for Prosecution. Although the allegations made against the subject meet the required elements of at least one criminal offense listed in the SAPR definition of sexual assault (see Reference (c)), there was insufficient evidence to legally prove those elements beyond a reasonable doubt and proceed with the case. If the reason for concluding that there is insufficient evidence is that the victim declined to cooperate, then the reason for being unable to take action should be entered as “victim declined to participate in the military justice action,” and not entered as “insufficient evidence.”

(3) Victim’s Death. Victim died before completion of the military justice action.

(4) Statute of Limitations Expired. Determination that, pursuant to Article 43 of the UCMJ (section 943 of Reference (d)), the applicable statute of limitations has expired and the case may not be prosecuted.

d. Action Declined. Dispositions in this category come from an Unrestricted Report that was investigated by an MCIO and provided to the authority responsible for taking action, but the report was unfounded as to the allegations against the subject of the investigation. Unfounded allegations reflect a determination that the allegations made did not occur nor were attempted. These cases are either false or baseless. Reference (l) requires the reporting of the number of victims associated with this category.

(1) False Cases. Evidence obtained through an investigation shows that an offense was not committed nor attempted by the subject of the investigation.

(2) Baseless Cases. Evidence obtained through an investigation shows that the alleged offense did not meet at least one of the required elements of a UCMJ offense constituting the SAPR definition of sexual assault or was improperly reported as a sexual assault.

e. Subject Outside DoD’s Legal Authority. When the subject of the investigation or the action being taken is beyond DoD’s jurisdictional authority or ability to act, use the following descriptions to report case disposition. To comply with Reference (l), Services must also identify the number of victims associated with these dispositions and specify when there was insufficient evidence that an offense occurred in the following categories.

(1) Subject is Unknown. The investigation is closed because no person could be identified as the subject.

(2) Subject is a Civilian or Foreign National not Subject to UCMJ. The subject of the investigation is not amenable to military UCMJ jurisdiction for action or disposition.

(3) Civilian or Foreign Authority is Prosecuting Service Member. A civilian or foreign authority has the sexual assault allegation for action or disposition, even though the subject is also subject to the UCMJ.

(4) Subject Died or Deserted. Action is precluded because of the death or desertion of the subject of the investigation.

f. Report Unfounded by MCIO. Determination by the MCIO that the allegations made against the subject did not occur nor were attempted. These cases are either false or baseless. Reference (1) requires the reporting of the number of victims associated with this category.

(1) False Cases. Evidence obtained through an MCIO investigation shows that an offense was not committed nor attempted by the subject of the investigation.

(2) Baseless Cases. Evidence obtained through an investigation shows that the alleged offense did not meet at least one of the required elements of a UCMJ offense constituting the SAPR definition of sexual assault or was improperly reported as a sexual assault.

GLOSSARY

PART I. ABBREVIATIONS AND ACRONYMS

APY	academic program year
ASD(HA)	Assistant Secretary of Defense for Health Affairs
CATCH	Catch a Serial Offender Program
CCIR	Commander's Critical Information Requirement
CMG	Case Management Group
CONUS	continental United States
CPO	civilian protective order
DD	Department of Defense (in reference to forms; e.g., DD Form 2910)
DFSC	Defense Forensic Science Center
DHA	Defense Health Agency
DoDHRA	Department of Defense Human Resource Activity
DoDD	DoD Directive
DoDI	DoD Instruction
D-SAACP	DoD Sexual Assault Advocate Certification Program
DSAID	Defense Sexual Assault Incident Database
DTM	directive-type memorandum
FAP	Family Advocacy Program
FCM	Functional Community Manager
FOIA	Freedom of Information Act
FY	fiscal year
GC DoD	General Counsel of the Department of Defense
GO/FO	general or flag officer
HIV	human immunodeficiency virus
HRRT	High-Risk Response Team
IG DoD	Inspector General of the Department of Defense
IPT	integrated product team
JAG	Judge Advocate General
LOD	line of duty
MCIO	Military Criminal Investigative Organization
MCM	Manual for Courts-Martial
MEO	Department of Defense Military Equal Opportunity (MEO) Program
MHS	military healthcare system

MOA	memorandum of agreement
MOU	memorandum of understanding
MPO	military protective order
MRE	Military Rules of Evidence
MSA	Military Service Academy
MTF	military treatment facility
NCIC	National Crime Information Center
NDAA	National Defense Authorization Act
NG	National Guard
NGB	National Guard Bureau
OCONUS	outside the continental United States
OPA	Office of People Analytics
OIG	Office of Inspector General of the Department of Defense
OPM	Office of Personnel Management
OSTC	Office of Special Trial Counsel
PCA	permanent change of assignment
PCS	permanent change of station
PII	personally identifiable information
POC	point of contact
PRP	personnel reliability program
R.C.M.	Rule for Courts-Martial
RRCN	Restricted Reporting case number
SAFE	Sexual Assault Forensic Examination
SAPR	Sexual Assault Prevention and Response
SAPRO	Sexual Assault Prevention and Response Office
SAPRTEC	Sexual Assault Prevention and Response Training & Education Center of Excellence
SAPR VA	Sexual Assault Prevention and Response Victim Advocate
SARC	Sexual Assault Response Coordinator
SARW	Sexual Assault Response Workforce
SES	Senior Executive Service
SF	standard form
SJA	staff judge advocate
SRI	SAPR-related inquiry
STD/I	sexually transmitted diseases or infections
SVC	Special Victims' Counsel (Army and NG)
SVC/VLC/VC	Special Victims' Counsel (Army and NG) or Victims' Legal Counsel (Navy and Marine Corps) or Victims' Counsel (Air Force)
SVIP	Special Victim Investigation and Prosecution

SVSES	Sexual Violence Support and Experiences Survey
UCMJ	Uniform Code of Military Justice
USD(P&R)	Under Secretary of Defense for Personnel and Readiness
VC	Victims' Counsel (Air Force)
VLC	Victims' Legal Counsel (Navy and Marine Corps)
VWAP	Victim Witness Assistance Program

PART II. DEFINITIONS

Unless otherwise noted, these terms and their definitions are for the purpose of this volume. Refer to the Glossary in Reference (c) for terms not defined in this instruction.

accessions training. Training that a Service member receives upon initial entry into military service through basic military training.

advocacy. Active support that provides information and education to victims and facilitates access to resources and systems following a crime or traumatic event.

certification. Refers to the process by which the Department credentials SARC and SAPR VAs, assesses the effectiveness of sexual assault advocacy capabilities using a competencies framework, and evaluates and performs oversight over SAPR Program manager, Lead SARC, SARC, and SAPR VA training. The certification criteria are established by the Department in consultation with subject-matter experts.

CMG. 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: SARC, SAPR VA, military criminal investigator, DoD law enforcement, healthcare provider and mental health and counseling services, chaplain, command legal representative or SJA, and victim's commander.

collateral misconduct. Collateral misconduct in this instruction refers to the adult sexual assault victim's alleged misconduct that might be in time, place or circumstance associated with the victim's sexual assault incident. Some reported sexual assaults involve circumstances where the victim allegedly may have engaged in some form of misconduct "at or near the time" of the sexual assault or "at or near the time" the victim reports the sexual assault to authorities. Collateral misconduct will often be discovered as a direct result of the report of sexual assault or the ensuing investigation or prosecution of the sexual assault.

confidential communications. Defined in Reference (c).

consent. Defined in Reference (c).

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.

credible report. Either a written or verbal report made in support of an Expedited Transfer that is determined to have credible information. Commanders, in consultation with their respective SJA, when assessing whether there is a credible report as part of the Expedited Transfer request, should consider as a factor in their decision that victims who have a history of behavioral

problems or alleged collateral misconduct offenses, such as underage drinking, are the very individuals who may be at greatest risk for being sexually assaulted.

crisis intervention. Defined in Reference (c).

designated activity. The agency that processes PCS or PCA for Expedited Transfers.

Air Force: Air Force Personnel Center.

Army: Human Resources Command for inter-installation transfers and the installation personnel center for intra-installation transfers.

Navy: Bureau of Naval Personnel.

U.S. Marine Corps: the order writing section of Headquarters Marine Corps.

Air and Army National Guard: the NGB or the Joint Forces Headquarters-State for the State involved.

DSAID. Defined in Reference (c).

emergency. Defined in Reference (c).

emergency care. Defined in Reference (c).

Executive Agent. The Head of a DoD Component to whom the Secretary of Defense or the Deputy Secretary of Defense has assigned specific responsibilities, functions, and authorities to provide defined levels of support for operational missions, or administrative or other designated activities that involve two or more of the DoD Components.

FAP. Defined in DoDI 6400.01 (Reference (v)).

final disposition. Actions taken to resolve the reported incident, document case outcome, and address the misconduct by the suspect, as appropriate. It includes, but is not limited to, military justice proceedings, nonjudicial punishment, or administrative actions, including separation actions taken in response to the offense, whichever is the most serious action taken.

functional community manager. For purposes of the SARW, the designated senior-executive level OSD Functional Community Manager (FCM) represents the interests of the SARW community at meetings within the Department related to that functional community. The OSD FCM is established in accordance with DoDI 1400.25, Volume 250 (Reference (bq)).

healthcare personnel. Persons assisting or otherwise supporting healthcare providers in providing healthcare services in military medical treatment facilities (e.g., administrative

personnel assigned to a DoD healthcare (medical or mental health) facility, emergency room or intake personnel, medics). Includes all healthcare providers.

healthcare provider. Those individuals who are employed or assigned as healthcare professionals, or are credentialed to provide healthcare services at an 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:

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.

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.

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.

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.

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

Military medical treatment facilities. Defined in DoDI 6040.45 (Reference (cb)).

intimate partner. Defined in Reference (bi).

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 Department of Defense in accordance with DoD 4165.66-M (Reference (bc)).

installation commander. Commander of 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 Department of Defense.

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

Law Enforcement Sexual Assault Victim Disclosure Exception. (regarding eligibility criteria for Restricted Reporting) is established in policy pursuant to DoDI 5505.18 (Reference (ac)) and is incorporated in this instruction by reference.

limited SAPR services. The assistance of a SARC and a SAPR VA while undergoing emergency medical care and referral to available resources.

MCIOs. The U.S. Army Criminal Investigation Command, Naval Criminal Investigative Service, and Air Force Office of Special Investigations.

medical care. Includes physical and psychological medical services.

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

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

needs assessment. Process of gathering information to identify the needs of victims and the resources available to help them.

No Wrong Door. Approach used by all responders so that a person seeking services from an organization will be assisted either by direct support or a warm handoff, with the goal of obtaining timely care or advocacy.

non-identifiable information. Defined in Reference (c).

non-participating victim. Victim choosing not to participate in the military justice system.

official investigative process. Defined in Reference (c).

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.

personally identifiable information. Defined in Reference (c).

qualifying conviction. Defined in Reference (c).

recovery-oriented care. Defined in Reference (c).

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.

respond, response, or response capability. All locations, including deployed areas, have a 24 hour, 7 days per week sexual assault response capability. 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. In geographic locations where there is no SARC onsite, the on-call SAPR VA shall respond, offer information to the victim on how to obtain healthcare treatment and a SAFE, and immediately notify the SARC of the sexual assault. The initial response is generally provided by: SARCs, SAPR VAs, healthcare personnel, law enforcement, and MCIOs. Other responders are judge advocates, chaplains, and commanders. When victims are geographically detached from a military installation, the SARC or SAPR VA will refer them to local civilian providers or the DoD Safe Helpline for resources.

Restricted Reporting case number. The alpha-numeric RRCN, which is generated by the SARC, is the DSAID case unique control number for Restricted Report SAFE Kits. See Enclosure 8 for procedures to generate the RRCN.

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.

risk screening. Process that assists responders in the early detection of potential harm to individuals and ensures that advocacy and support is delivered safely, effectively, and appropriately.

Safe-to-Report Policy. Establishes mandatory detailed procedures for the identification of and treatment of alleged “minor” and “non-minor” collateral misconduct by Service member victims of sexual assault, in order to address the issue that collateral misconduct by the victim of a sexual assault. Collateral Misconduct is one of the most significant barriers to reporting assault because of the victim’s fear of punishment. (See definition of collateral misconduct in this Glossary)

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

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

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

Is to be utilized as the sole DoD hotline.

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

SAFE Kit. Defined in Reference (c).

safety assessment and planning. A set of guidelines and considerations to address sexual assault and associated retaliation that the responsible SARC, SAPR VA, or other personnel as designated by the Installation Commander, undertake to determine if a sexual assault victim is likely to be in imminent danger of physical or psychological harm as a result of being victimized by or reporting sexual assault(s). The guidelines and considerations consist of a sequence of questions, decisions, referrals, and actions that responders can take to contribute to the safety of victims during the first 72 hours after a report, and during other events that may increase the lethality risk for victims (e.g., arrests or command actions against the suspect). Types of imminent danger may include non-lethal, lethal, or potentially lethal behaviors; the potential harm caused by the suspect, family/friend(s)/acquaintance(s) of the suspect, or the victims themselves (e.g., harboring self-harm or suicidal thoughts). The safety assessment includes questions about multiple environments, to include home and the workplace. Victims are assessed for their perception or experience of potential danger from their leadership or peers via reprisal or ostracism. The safety assessment contains a safety plan component that victims can complete and take with them to help improve coping, social support, and resource access during their recovery period.

SAPR Program. Defined in Reference (c).

SAPR services. Services provided by a Lead SARC, SARC, and SAPR VA.

SAPR VA. Defined in Reference (c).

SAPRO. Defined in Reference (c).

SARC. The single point of contact at an installation or command, 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. This in no way impacts the responsibilities of commanders detailed in this instruction.

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.

Service member. Defined in Reference (c).

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.

SVC. Attorneys who are assigned to provide legal assistance and representation in accordance with section 1044e of Reference (d) and Service regulations. The Army and NG refer to these attorneys as SVC.

SVIP Capability. In accordance with section 573 of Reference (n), 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:

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)

Provide support for the victims of such offenses.

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.

VC. Attorneys who are assigned to provide legal assistance and representation in accordance with section 1044e of Reference (d) and Service regulations. The Department of the Air Force refers to them as VC.

victim. Defined in Reference (c).

victim assistance. Includes services such as crisis intervention, risk screening, safety assessment and planning, assessment of basic victim/survivor needs, assistance with accessing compensation and restitution applications, provision of information about victims' rights and the criminal justice process, court accompaniment, advocacy with human services agencies, information and referral, access to support services, case planning, case management, staff supervision, consultation with other professionals, education and risk reduction, and administration of victim service policies, programs, and activities.

Victim's Commander's Package. The Victim's Commander's Package that is developed within 24 hours of the Unrestricted Report, will contain recommendations provided to the victim's commander for the adult sexual assault victim's immediate and ongoing care, to include any known safety concerns or retaliation. The "Commander's Checklist for Unrestricted Reports" is different from the requirement to review the Victim's Commander's Package.

VLC. Attorneys who are assigned to provide legal assistance and representation in accordance with section 1044e of Reference (d) and Service regulations. The Navy and Marine Corps refer to these attorneys as VLC. The Army and NG refer to these attorneys as SVC. The Air Force refers to them as VC.

VWAP. See DoDI 1030.02 (Reference (al))

warm handoff. A handoff that is conducted between two responders or providers, while making every effort to protect the victim's privacy. The responder, who was initially approached by the victim, will conduct a warm handoff by accompanying the victim to the correct location in person or, through an approved virtual platform, or through a conference call to introduce them to the appropriate resource, service provider, or POC.