



DEPARTMENT OF THE NAVY  
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NAVSUPPACTNAPLESINST 1752.4D  
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NAVSUPPACT NAPLES INSTRUCTION 1752.4D

From: Commanding Officer, U.S. Naval Support Activity, Naples, Italy

Subj: SEXUAL ASSAULT PREVENTION AND RESPONSE PROGRAM

- Ref:
- (a) OPNAVINST 1752.1C, 13 August 2015, Navy Sexual Assault Prevention and Response Program
  - (b) DoD Directive 6495.01, 11 April 2017, Sexual Assault Prevention and Response Program
  - (c) OPNAVINST 1752.2C, Navy Family Advocacy Program
  - (d) DoD Instruction 6495.02, 11 September 2020, Sexual Assault Prevention and Response Program
  - (e) DoDI 6495.03, 28 February 2020, Defense Sexual Assault Advocate Certification Program (D-SAACP)
  - (f) SECNAVINST 1752.4, Sexual Assault Prevention and Response Program
  - (g) CNO WASHINGTON DC 1812287, Jul 13 (NAVADMIN 181/13)
  - (h) Manual for Courts-Martial (MCM)
  - (i) MILPERSMAN 15560
  - (j) OPNAVINST F3100.6K, 10 August 2021, Special Incident Reporting
  - (k) SECNAVINST 1730.9, Privileged and Confidential Communications to Chaplains
  - (l) DoD Publication 6025.18R, January 2003, DoD Health Information Privacy Regulation
  - (m) SECNAV M-5510.30C, 24 January 2020, Department of the Navy Personnel Security Program
  - (n) MILPERSMAN 1300-1205
  - (o) NAVADMIN 162/15
  - (p) DTM-14-007, 30 September 2014, Sexual Assault Incident Response Oversight (SAIRO) Report
  - (q) Catch a Serial Offender, Memorandum for Secretaries of the Military Departments, Chief of the National Guard Bureau, General Counsel of the Department of Defense, Inspector General of the Department of Defense, 10 June 2019
  - (r) NAVADMIN 329/20 Culture of Excellence Simplify and Align, 16 December 2020

- Encl:
- (1) Sexual Assault Prevention and Response Definitions
  - (2) Navy Policy Regarding Confidentiality for Victims of Sexual Assault
  - (3) Navy Commander's Checklist for Prevention and Response to Allegations of Sexual Assault
  - (4) Sexual Assault Prevention and Response (SAPR) Command Duty Officer Procedure for Responding to Sexual Assault
  - (5) Crime Victim's Bill of Rights

1. Purpose. To issue policy, provide guidance, and designate responsibility for implementation of the Commanding Officer (CO), U.S. Naval Support Activity, (NAVSUPPACT) Naples, Italy, Sexual Assault Prevention and Response (SAPR) program per references (a) through (r).

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2. Cancellation. NAVSUPPACTNAPLESINST 1752.4C

3. Definitions. Terms used, in this instruction, are defined in references (a), (b), (d), and enclosure (1). Sexual assault as used in this instruction applies to all such offenses against persons 18 years of age or older, and which are not otherwise considered child sexual abuse or domestic abuse as defined in reference (c) and enclosure (1).

4. Applicability. This instruction applies to NAVSUPPACT Naples and all other organizational entities within the Naples, Italy, general Area of Responsibility (AOR), to include Active Duty, National Guard, and Reserve servicemembers and their dependents 18 years of age and older, DoD Civilians and their dependents 18 years of age and older (with limited services), 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 (with limited services). Victims of sexual assault perpetrated by a spouse or intimate partner, military dependents under the age of 18 and DoD Civilian dependents under the age of 18 who are sexually assaulted will be referred to the Family Advocacy Program (FAP). When a sexual assault occurs as a result of domestic abuse or involves child abuse, the case will be referred to FAP. Reference (c), outlines the full range of services that are offered.

5. Background

a. The Navy's first sexual assault prevention and intervention program was established in 1994 as the Sexual Assault Victim Intervention (SAVI) Program for the purpose of providing consistent, standardized response to sexual assault incidents through sexual assault awareness and prevention education, victim advocacy, and data collection. In October of 2005 reference (a) established the overarching elements of sexual assault prevention and response policy for the DoD. The DoD Sexual Assault Prevention and Response Office (SAPRO) established in 2005 serves as the single point of authority for sexual assault policy for the military services.

b. Reference (f), establishes the Director, Twenty-First Century Sailor Office (OPNAV N17) Chief of Naval Personnel (CNP) as the single executive agent for the Navy's SAPR Program. The CNP will align strategy, policy and programs with the Department of Navy Sexual Assault Prevention and Response Office (DONSAPRO).

c. References (a), (b), (d), and (e) outline DoD and DON policy and procedures for the three components of the SAPR Program:

(1) Prevention and awareness education to reduce sexual assault incidents.

(2) Standardize data collection and reporting of sexual assault.

(3) Victim advocacy. The SAPR Program provides a standardized approach to the implementation of this policy within all commands throughout the Navy to ensure sensitive, coordinated, and effective response to victims of sexual assault.

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## 6. Policy

a. Sexual assault is a criminal act incompatible with the DON and NAVUPPACT Naples core values, high standards of professionalism, and personal discipline. NAVSUPPACT Naples is committed to ensuring victims of sexual assault are protected; treated with dignity and respect; and provided support, advocacy, and care. NAVSUPPACT Naples supports effective command awareness and prevention programs and strongly supports applicable law enforcement and criminal justice procedures that enable persons to be held accountable for sexual assault offenses and criminal dispositions, as appropriate.

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

c. The SAPR Program must focus on the victim and doing what is necessary and appropriate to support victim recovery, and also, if a service member, to support that service member to be fully mission capable and engaged. The SAPR Program will provide care that is gender-responsive, culturally-competent, and recovery-oriented as defined in enclosure (1).

d. An immediate, trained sexual assault response capability must be available for each report of sexual assault in all locations, including deployed locations. The response time may be affected by operational necessities, but will reflect that sexual assault victims must be treated as emergency cases.

e. Victims of sexual assault must be protected from coercion, retaliation, and reprisal in accordance with reference (e) of this instruction.

f. All service members and DON employees will receive comprehensive medical treatment, including emergency care treatment and services, as described in reference (b) and enclosure (1).

## 7. Action

### a. All tenant COs/Officers-in-Charge

(1) Instill the Navy's sexual assault prevention policy as an integral part of day-to-day personnel management and provide the safest possible emotional and physical command environment.

(2) Provide victims with case updates within 72 hours of the last SACMG. This obligation may not be delegated. At the victim's request, this may be in writing or delivered via the SARC, SAPR VA, UVA, or VLC per reference (e).

(3) Refer all allegations of sexual assault within the NAVSUPPACT Naples, as soon as practicable, to Naval Criminal Investigative Service (NCIS). Internal command inquiries or investigations will be reserved only for incidents of alleged sexual assault for which NCIS or civilian

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law enforcement has declined to investigate or concludes and presents findings to the convening authority that indicated the allegations did not involve a sexual assault. Ensure all levels of command authority, including command duty watchstanders, are advised of and adhere to this requirement.

(4) Forward cases involving allegations of rape, sexual assault, forcible sodomy, and attempts to commit those offenses under article 120, UCMJ, to SA-IDA for action. This applies to other offenses arising from or relating to the same incident(s) whether committed by the alleged perpetrator or the alleged victim of the rape, sexual assault, forcible sodomy, or attempts thereof.

b. Installation SARC

(1) Implement and administer all aspects of the command SAPR program per references (a), (b), (d), and (e).

(2) The SARC will serve as the single point of contact for coordinating appropriate and responsive care for sexual assault victims. The SARC will supervise SAPR VAs, but may also be called upon to perform victim advocacy services.

(3) Maintain an installation-wide confidential advocate hotline which will provide for around-the-clock sexual assault response capability and timely access to appropriate victim services and advocacy.

(4) Provide training to SAPR VAs. Coordinate and provide SAPR VAs initial and annual refresher training. Provide command triad SAPR CO Command Toolkit within 30 days of CO taking command per reference (a).

(5) Facilitate sexual assault awareness and prevention training and ensure commands have access to SAPR educational materials.

(6) Provide oversight of assigned SAPR VAs both ashore and afloat. Oversight includes maintenance of a roster of trained SAPR VAs, recall system, collateral contact, and consultations on all sexual assault cases.

(7) Provide case management for all identified cases including tracking services for victims from initial report to resolution and ensure monthly updates are provided to the victim.

(8) Per reference (d) and enclosure (1), assign an alpha-numeric Restricted Reporting Case Number to Sexual Assault Forensic Examination kits for restricted reports and inform the victim 30 days prior to when evidence is ten (10) years old. The SARC will contact the victim a year after the restricted report to inquire whether the victim wishes to change his or her reporting option to Unrestricted.

(9) Upload the Victim Reporting Preference Statement (DD Form 2910) into DSAID for Restricted and Unrestricted reports. Maintain documentation for 50 years.

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(10) Co-chair the SACMG and require the group to meet monthly and review all open unrestricted cases, facilitate victim updates and ensure system coordination, accountability, and victim access to quality services per reference (d).

(11) Per reference (q), when a victim elects a restricted report, provide the victim with a CATCH username and password, if they so elect to participate in the program. Obtain username and password from: <https://catch.ncis.navy.mil>

c. Civilian Victim Advocate/Unit SAPR Victim Advocates

(1) Be directly accountable to the SARC while carrying out sexual assault advocacy responsibilities in adult sexual assault cases (not under the FAP jurisdiction) and must provide victim advocacy for adult victims of sexual assault.

(2) Acknowledge understanding of advocacy roles and responsibilities using DD Form 2950 DoD Sexual Assault Advocate Certification Program D-SAACP Application Packet for New Applicants.

(3) Complete the training and D-SAACP requirements prior to providing support to sexual assault victims. At a minimum, SAPR VAs and unit SAPR VAs must complete:

(a) Forty hours of DoD-approved SAPR VA training conducted by a Navy SARC or SAPR VA within 90 days of being designated;

(b) Annual National Advocate Credentialing Program-approved refresher training for each 12-month period following the initial D-SAACP certification; and

(c) Training on confidentiality requirements and exceptions of restricted reporting and Military Rule of Evidence 514.

(4) Be notified and immediately respond upon receipt of a report of sexual assault.

(5) Inform the victim of reporting options and services available outlined on the DD Form 2910 to include the availability of a victims' legal counsel.

(6) Provide non-clinical crisis intervention and ongoing support, in addition to referrals for adult sexual assault victims regardless of service affiliation.

(7) Assist the victim in navigating processes required to obtain care and services needed. SAPR VAs and unit SAPR VAs will not serve as the victim's mental health provider or act as an investigator.

(8) Conduct training and educate key command SAPR personnel, assist unit SAPR POCs in providing CNIC-approved training for personnel if requested, and support other responder required training.

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d. Administrative Unit Victim Advocate (AUVA)

(1) Complete the training and D-SAACP requirements prior to providing support to sexual assault victims. At a minimum, SAPR VAs and unit SAPR VAs must complete:

(a) Forty hours of DoD-approved SAPR VA training conducted by a Navy SARC or SAPR VA within 90 days of being designated;

(b) Annual National Advocate Credentialing Program-approved refresher training for each 12-month period following the initial D-SAACP certification; and

(c) Training on confidentiality requirements and exceptions of restricted reporting and Military Rule of Evidence 514.

(2) Be designated in writing by the CO. The AUVA must complete all required training regarding performance of his or her responsibilities under the SAPR program by the responsible SARC or SAPR VA within 90 days of being designated. The designation will include direct access to the CO.

(3) Provide oversight of command compliance with SAPR program requirements.

(4) Ensure members at a command are aware of how to contact a SARC, SAPR VA, unit SAPR VA, or victims' legal counsel.

(5) Maintain current information on victim resources.

(6) In collaboration with the SARC, facilitate quality awareness, prevention and general military training (GMT) to ensure all command members receive annual and periodic SAPR training to include required deployment training.

(7) Ensure all personnel (i.e., servicemembers, DoD civilian personnel who supervise servicemembers) complete SAPR training and the completion is documented.

(8) Obtain and provide to the SARC data on sexual assault incidents necessary to meet DSAID and other reporting requirements.

(9) Provide the SARC copies of all sexual assault related personnel incident reports required in reference (j).

8. Data Collection, Reporting, and Forms. Incidents of sexual assault must be reported to the responsible Echelon 2 commands by means of an OPREP-3 NAVY BLUE or OPREP-3 NAVY UNIT SITREP per reference (j). Commander, Navy Installations Command will coordinate the collection and submission of the annual restricted report incident data to Secretary of Defense through the DONSAPRO Office.

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9. Records Management

a. Records created as a result of this instruction, regardless of format or media, must be maintained and dispositioned per the records disposition schedules located on the Department of the Navy Assistant for Administration, Directives and Records Management Division portal page at: <https://portal.secnav.navy.mil/orgs/DUSNM/DONAA/DRM/Records-and-Information-Management/Approved%20Record%20Schedules/Forms/AllItems.aspx>.

b. For questions concerning the management of records related to this instruction or the records disposition schedules, please contact the local records manager or the OPNAV Records Management Program (DNS-16).

10. Review and Effective Date. Per OPNAVINST 5215.17A, NAVSUPPACT Naples will review this instruction annually on the anniversary of its effective date to ensure applicability, currency, and consistency with Federal, Department of Defense, Secretary of the Navy, and Navy policy and statutory authority using OPNAV 5215/40 Review of Instruction. This instruction will be in effect for 10 years unless revised or cancelled in the interim and will be reissued by the 10-year anniversary date if it still required, unless it meets one of the exceptions in OPNAVINST 5215.17A, paragraph 9. Otherwise, if the instruction is no longer required, it will be processed for cancellation as soon as the need for cancellation is known following the guidance in OPNAV Manual 5215.1 of May 2016.

11. Forms. All applicable forms can be found at:  
<http://www.dtic.mil/whs/directives/infomgt/forms/formsprogram.html>



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SEXUAL ASSAULT PREVENTION AND RESPONSE DEFINITIONS

1. Alpha-Numeric Restricted Reporting Case Number (RRCN). For restricted reports of sexual assault the Sexual Assault Response Coordinator (SARC) will generate an Alpha-Numeric RRCN unique to each incident that must be used in lieu of personal-identifying information to label and identify the evidence collected from a Sexual Assault Forensic Exam (SAFE). Upon completion of the SAFE, the healthcare provider will package, seal, and label the evidence containers with the RRCN.
2. Child. An unmarried person under 18 years of age eligible for care through a Department of Defense (DoD) medical treatment program. The term “child” means a biological or adopted child, stepchild, foster child, or ward. The term also includes any individual of any age who is incapable of self-support because of mental or physical incapacity and for whom treatment in a DoD medical treatment program is authorized.
3. Child Sexual Abuse. Sexual activity with a child for the purpose of sexual gratification of the alleged offender or some other individual. Such abuse includes child exploitation, molestation, rape, intercourse with a child and sodomy. Actions including, but not limited to: the employment, use, inducement, enticement, or coercion of any child to engage in, or having a child assist another person to engage in any explicit conduct (or any simulation of such conduct). This also includes internet solicitation, or other sexual activity between the offender or a third party and a child. (This definition is not all inclusive)
4. Confidential Communication. Oral, written or electronic communications of personally identifiable information concerning a sexual assault victim and the sexual assault incident provided by the victim to the SARC, Sexual Assault Prevention and Response Victim Advocate (SAPR VA), Chaplain, Victim Legal Counsel (VLC), RRC, or healthcare personnel in both a restricted and unrestricted report.
5. Consent. Words or overt acts indicating a freely given agreement to the sexual conduct at issue by a competent person. An expression of lack of consent through words or conduct means there is no consent. Lack of verbal or physical resistance or submission resulting from the accuser’s use of force, threat of force, or placing another person in fear does not constitute consent. A current or previous dating relationship or the manner of dress of the person involved with the accused in the sexual conduct at issue will not constitute consent. There is no consent where the person is sleeping or incapacitated, such as due to age, alcohol or drugs, or mental incapacity.
6. Crisis Intervention. Emergency non-clinical care aimed at assisting victims in alleviating potential negative consequences by providing safety assessments and connecting victims to needed resources. Either the SARC or SAPR VA will intervene as quickly as possible to assess the victim’s safety and determine the needs of victims and connect them to appropriate referrals, as needed.

Enclosure (1)



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7. Culturally-Competent Care. Care that provides culturally and linguistically appropriate services.

8. Domestic Abuse. Domestic violence or a pattern of behavior resulting in emotional/psychological abuse, economic control, and/or interference with personal liberty when such violence or abuse is directed toward a person who is:

- a. A current or former spouse;
- b. A person with whom the abuser shares a child in common; or
- c. A current or former intimate partner with whom the abuser shares or has shared a common domicile.

9. Domestic Violence. An offense under the U.S.C., the Uniformed Code of Military Justice (UCMJ), or State law that involves the use, attempted use, or threatened use of force or violence, or the violation of a lawful order issued for the protection of a person who is:

- a. A current or former spouse;
- b. A person with whom the abuser shares a child in common; or
- c. A current or former intimate partner with whom the abuser shares or has shared a common domicile.

10. Defense Sexual Assault Incident Database (DSAID). A DoD database that captures uniform data provided by the Military Services and maintains all sexual assault data collected by the Military Services. This database must be a centralized, case-level database for the uniform collection of data regarding incidence of sexual assaults involving persons covered by this instruction. DSAID will include information when available, or when not limited by Restricted Reporting, or otherwise prohibited by law, about the nature of the assault, the victim, the offender, the disposition of reports associated with the assault, and reports of retaliation.

11. Emergency. A situation that requires immediate intervention to prevent the loss of life, limb, sight, or body tissue to prevent undue suffering. Regardless of appearance, a sexual assault victim needs immediate medical intervention to prevent loss of life or undue suffering resulting from physical injuries internal or external, sexually transmitted infections, pregnancy, or psychological distress. Sexual assault victims will be given priority as emergency cases regardless of evidence of physical injury.

12. Emergency Care. Emergency medical care includes physical and emergency psychological medical services and SAFE.

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13. Final Disposition. The conclusion of any judicial, non-judicial, or administrative actions, to include separation actions taken in response to the offense, whichever is later in time. If the final command determination is that there is insufficient evidence or other legal issues exist that prevent judicial or administrative action against the alleged perpetrator, this determination will be conveyed to the victim in a timely manner.
14. Gender-Responsive Care. Care that acknowledges and is sensitive to gender differences and gender-specific issues.
15. Healthcare Personnel. For the purpose of this instruction, healthcare personnel includes all healthcare providers. This includes persons assisting or otherwise supporting healthcare providers in providing healthcare services (e.g., administrative personnel assigned to a military medical treatment facility, or mental/behavioral healthcare personnel).
16. Healthcare Provider. For the purpose of this instruction, those individuals who are employed or assigned as healthcare professionals, or are credentialed to provide health care services at a military medical or military dental treatment facility, or who provide such care at a deployed location or in an official capacity. This also includes military personnel, DoD civilian employees, and DoD contractors who provide health care at an occupational health clinic for DoD civilian employees or DoD contractor personnel.
17. Privilege. A victim has a “privilege” to refuse to disclose and to prevent any other person from disclosing a confidential communication made between the victim and a SAPR VA, in a case arising under the UCMJ, if such communication was made for the purpose of facilitating advice or supportive assistance to the victim.
18. Qualifying Conviction. A state or federal conviction, or a finding of guilty in a juvenile adjudication, for a felony crime of sexual assault and any general or special court-martial conviction for a UCMJ offense, which otherwise meets the elements of a crime of sexual assault, even though not classified as a felony or misdemeanor within the UCMJ. In addition, any offense that requires registration as a sex offender is a qualifying conviction.
19. Restricted Reporting. Defined in enclosure (2) of this instruction.
20. Recovery Oriented Care. Focus on the victim and on doing what is necessary and appropriate to support victim recovery, and also if a service member, to support that service member to be fully mission capable and engaged.
21. 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. 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.

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22. Sexual Assault Case Management Group (SACMG). The SACMG is a multi-disciplinary case management group convened by the installation Commanding Officer and co-chaired by the installation SARC. This responsibility for chair and co-chair cannot be delegated further, per reference (b). The SACMG meets monthly, even if there are no unrestricted cases to review. If there are no cases to review, training will be provided to the SACMG members. The purpose of the SACMG is to:

- a. Review individual “unrestricted” sexual assault cases.
- b. Facilitate monthly victim updates.
- c. Direct system coordination, accountability and victim access to quality services.

d. The SACMG carefully considers and implements immediate, short-term and long-term measures to facilitate and assure the victim’s well-being and recovery from sexual assault. Per reference (m) membership consists of the following individuals who are involved with and working on a specific case:

(1) Core Membership:

(a) Commanding Officer (CO) or Executive Officer, U.S. Naval Support Activity (NAVSUPPACT), Naples, Italy;

(b) Installation SARC;

(c) Mental health representative;

(d) Installation Staff Judge Advocate

(e) Chaplain

(2) Non-Core Membership (attendance required based upon direct involvement with the individual case being reviewed);

(a) Victim’s CO;

(b) Sponsor’s CO, if the victim is an eligible family member;

(c) Commander, CO, Officer in Charge (OIC) if victim is DoD employee (OCONUS);

(d) Victim’s SAPR Victim Advocate (VA);

(e) MCIO Special Agent involved with and working on specific case;

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- (f) Victim Witness Assistance Program (VWAP);
- (g) Victim's medical healthcare provider;
- (h) Victim's mental health provider (as applicable);
- (i) Victim's Legal Counsel (VLC);
- (k) Installation/Base security (as applicable);
- (l) Assigned Safety Assessment personnel (if applicable);

(m) Other professionals may be permitted by the Chair if directly involved with a specific case being reviewed (if applicable).

23. Sexual Assault Initial Disposition Duthority (SA-IDA). Effective 28 June 2012, authority to dispose of certain sexual assault cases will be withheld at the O-6 special court-martial convening authority level. This officer will be known as the SA-IDA. Reference (a) provides additional guidance.

24. SAPR VA. A person who, as a victim advocate, will provide non-clinical crisis intervention, referral, and ongoing non-clinical support to adult sexual assault victims. Support will include providing information on available options and resources to victims. The SAPR VA, on behalf of the sexual assault victim, provides liaison assistance with other organizations and agencies on victim care matters and reports directly to the SARC when performing victim advocacy duties.

25. Sexual Assault Forensic Exam (SAFE Kit). The medical and forensic examination of a sexual assault victim under circumstances and controlled procedures to ensure the physical examination process and the collection, handling, analysis, testing, and safekeeping of any bodily specimens and evidence meet the requirements necessary for use as evidence in criminal proceedings. The victim's SAFE Kit is treated as a confidential communication when conducted as part of a Restricted Report.

26. Victim. For purposes of this instruction, a victim is any person who asserts direct physical, emotional or pecuniary harm as a result of the commission of a sexual assault.

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POLICY REGARDING CONFIDENTIALITY FOR  
VICTIMS OF SEXUAL ASSAULT

1. U.S. Naval Support Activity, Naples is fully committed to ensuring victims of sexual assault are protected, treated with dignity and respect and provided support, advocacy, and care. Sexual assault is the most under-reported violent crime in our society. Assuring privacy and providing a confidential disclosure option is critical to discharging our commitment to fully support victims of sexual assault. This requires extensive, in-depth training and specialized training for Commanding Officer (CO), Sexual Assault and Response Coordinator (SARC), Sexual Assault Prevention and Response Victim Advocate (SAPR VA), Naval Criminal Investigative Service (NCIS), law enforcement, chaplains, legal staff, and health care providers (HCP).

2. Provides for confidential, restricted reporting for service members and their military dependents 18 years of age and older who are victims of sexual assault, per reference (b).

3. For the purpose of this policy, confidentiality or confidential reporting is defined as providing an option for victims of sexual assault to report the assault to specified individuals without triggering mandatory command notification or official investigation of the incident. This option affords a victim access to medical care, counseling, Victims Legal Counsel, and SAPR Victim Advocacy without initiating the investigative process.

a. Per reference (d), a victim of sexual assault has the privilege to refuse to disclose and to prevent any other person from disclosing confidential communication made between the victim and a SAPR VA, in a case arising under the Uniform Code of Military Justice (UCMJ), if such communication was made for the purpose of facilitating advice or supportive assistance to the victim.

b. Consistent with reference (j), victims may also report a sexual assault to a chaplain and be afforded confidential communication which is not altered or affected by Department of Defense (DoD) requirements.

4. The Navy is committed to establishing a system whereby a victim can maintain confidentiality with the understanding that fully reporting an incident activates both SAPR Victim Services and accountability actions. Service members who are sexually assaulted have the following reporting options:

a. "Unrestricted" reporting affords victims of sexual assault official investigation of their allegation, in addition to receiving available SAPR VA support and care. Victims making unrestricted reports should use current reporting channels (i.e., chain of command, SAPR VA, law enforcement, or the SARC.) The on-call SAPR VA will be notified immediately upon receipt of an unrestricted report and will offer the victim support and information per this instruction.

b. "Restricted" reporting permits victims to disclose sexual assault to specified individuals without triggering mandatory command notification or official investigation.

Enclosure (2)

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(1) Service members who are sexually assaulted and desire restricted reporting must report the sexual assault to the SARC, SAPR VA, VLC, or HCP. Licensed clinicians who are privileged to provide clinical services in a Fleet Family Support Center are considered HCPs and may receive a restricted report of sexual assault from a service member victim. Consistent with current policy, victims may also report the sexual assault to a Chaplain. Although a report to a Chaplain is not a restricted report under this policy, it is communication that may be protected under the Military Rules of Evidence or applicable statutes or regulations. Restricted reporting is in addition to the current protections afforded communications with a Chaplain and does not alter or affect those protections.

(2) HCPs, both afloat and ashore, will initiate appropriate care and treatment, activate the on-call SAPR VA, and report the assault to the SARC in lieu of reporting to law enforcement or the command.

(3) As required by this instruction, the responsible SAPR VA will respond, offer advocacy and support, and provide the victim information on the process of restricted and unrestricted reporting. Victims will be informed and will acknowledge in writing, using DD Form 2910, Victim Reporting Preference Statement, their understanding of restricted reporting, the exceptions to and limitations of, restricted reporting, including their understanding that restricted reporting limits the availability of protective actions that can be taken without command notification and may hinder the government's ability to prosecute the assailant.

(4) With the victim's consent, a trained DoD/DoN HCP may conduct a Sexual Assault Forensic Exam (SAFE) in a manner that collects and preserves evidence with non-identifying information about the victim. DoN procedures for storage and retrieval of forensic evidence are as follows:

(a) The SARC assigns an Alpha-Numeric Restricted Reporting Case Number (RRCN) using the convention promulgated by Commander, Naval Installation Commands, noting the number on the signed DD 2910 and providing the number to the HCP.

(b) The MTF is responsible for maintaining chain of custody, packaging, and mailing the SAFE using procedures that have been disseminated by the Bureau of Medicine.

(c) Forensic evidence collected under restricted reporting will be maintained for 10 years, per reference (q), and then destroyed. At least 30 days prior to the expiration of the 10-year storage period, the law enforcement or Military Criminal Investigative Organization (MCIO) representative must notify the appropriate SARC that the storage period is about to expire and confirm with the SARC that the victim has not made a request to convert to unrestricted reporting or made a request for any personal effects. The SARC will make every attempt to contact the victim to notify them of the expiration of the SAFE Kit and confirm the victim's choice of reporting option.

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(d) When a victim elects to change from restricted to unrestricted reporting, the SARC will notify NCIS, ensure the change in reporting is noted on the victim's Victim Reporting Preference Statement (DD Form 2910), and provide the Alpha-Numeric RRCN to the responsible Special Agent who will follow NCIS established protocols.

5. When a victim discloses sexual assault to someone other than the SARC, SAPR VA, Chaplain, VLC, or HCP, the victim will be informed that such disclosure may result in command notification and a full investigation of the allegations.

6. When sexual assault is disclosed to the command or to law enforcement from a source independent of the specified individuals identified above, the command must report the incident to NCIS, who is authorized to initiate an independent investigation of the complaint. Per reference (d), if an investigation of the sexual assault is initiated as a result of information being disclosed to command or law enforcement from a source independent of the restricted reporting option, any covered communications disclosed to the SARC, SAPR VA, Chaplain, VLC, or HCP under restricted reporting must not be disclosed to command or law enforcement until the victim authorizes disclosure in writing or another exception applies.

7. In cases where a service member victim elects restricted reporting, the SARC, SAPR VA, or HCP may not disclose covered communications to command authorities or law enforcement, either within or outside DoD, except as provided in paragraph 10 below.

8. The SARC will report information concerning all sexual assault incidents within 24 hours of the sexual assault report. This report will be made to the victim's CO and the installation CO, for incidents occurring on the installation. This report is for the purposes of public safety and command responsibility and will be absent any information that could reasonably lead to personal identification of the victim or the alleged assailant. This reporting channel affords Commanders better understanding of the true scope of sexual violence within their AOR. Per reference (f), the Commander may use the information to enhance prevention or training measures, or to assess the organization's climate for contributing factors, but may not use this information for investigative purposes or in a manner that is likely to discover, disclose, or reveal the identities being protected. Commands are not required to forward OPREP-3 NAVY BLUE or OPREP-3 NAVY UNIT SITREPS for restricted reports.

9. Per reference (l), confidentiality of medical information will be maintained regardless of whether the victim chooses restricted or unrestricted reporting.

10. When a victim elects restricted reporting, the prohibition on disclosing covered communications will be suspended when:

a. The victim provides written authorization to disclose to command officials or law enforcement.

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b. Disclosure to command officials or law enforcement is necessary to prevent or lessen a serious and imminent threat to the health or safety of the victim or another person.

c. Disclosure to disability retirement boards and officials by a HCP is required for fitness for duty in disability determinations, and is limited to only the information necessary to process disability retirement determinations or determine fitness for duty.

d. Disclosure is required for the supervision of direct victim treatment or services by the SARC, SAPR VA, or HCP.

e. Disclosure is required by federal or state statute or applicable U.S international agreement or is ordered by military or civilian courts of competent jurisdiction. In the latter case, the SARC, responsible SAPR VA, or HCP will consult with the servicing legal office, to determine if an exception applies and they have a duty to obey before they disclose information other than non-identifying information.

11. The HCP may inform commands of any possible adverse duty impact related to a victim's medical condition and prognosis per reference (I). These circumstances do not warrant an exception to confidentiality policy whereby details of sexual assault are considered covered communication and may not be disclosed.

12. Improper disclosure of covered communications, improper release of medical information, or other violations of this policy are prohibited and may result in discipline under the UCMJ or loss of professional credentials, or other adverse personnel or administrative actions.

13. Restricted reporting does not create any actionable rights for the alleged offender or the victim, nor does it constitute a grant of immunity for any actionable conduct by the offender or the victim. Covered communication that has been disclosed may be used in disciplinary proceedings against the offender or victim, even if the communication was improperly disclosed.



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COMMANDER'S CHECKLIST FOR PREVENTION AND RESPONSE TO ALLEGATIONS  
OF SEXUAL ASSAULT

1. Commanding Officers (CO) are responsible for ensuring a command climate that condemns sexual assault; provides victims with sensitive care, resources, and support; reports incidents of sexual assault; and, holds offenders accountable for their actions.
2. The following checklist includes all the essential elements for meeting command Sexual Assault Prevention and Response (SAPR) Program requirements and for ensuring effective command prevention and response to incidents of sexual assault. Following these guidelines ensures commanders address all areas and provide a timely and sensitive response to each incident of sexual assault.

When a Sexual Assault Occurs - Victim

1. Ensure the physical safety and emotional safety of the victim, determine if the alleged offender is still a threat to the victim, and if the victim desires/needs protection.
2. Ensure the victim receives emergency medical treatment if indicated and offer medical care in all other circumstances.
3. Assist with or provide immediate transportation for the victim to the appropriate medical facility.
4. Ensure the victim is advised of the need to preserve evidence (by not bathing, eating, drinking, showering, washing garments, etc.) while awaiting the arrival of Navy Criminal Investigation Services (NCIS).
5. Collect only the necessary information to include the victim's identity, location, and time frame of the incident, name and/or description of the offender(s), taking care not to ask detailed questions or pressure the victim for information about the incident.
6. Activate the on-call VA and request immediate assistance. The VA will ensure the victim understands the medical, investigative, and legal process, and is advised of their victim rights, even if the victim ultimately declines ongoing VA support.
7. Notify NCIS as soon as the victim's immediate safety is assured and if any emergency medical treatment is required or requested.
8. Safeguard the victim from any formal or informal investigative interviews or inquiries, except those conducted by NCIS or civilian law enforcement.
9. Guard the victim's right to confidentiality and privacy by strictly limiting the "need to know" personnel.

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10. Ensure command protocols limit command notification of the incident to those with an official need to know (e.g., CO, Executive Officer, Command Master Chief). The SARC will only notify the victim's CO and Installation CO of a sexual assault.
11. Be sensitive to the needs of the victim's family.
12. Ensure the victim consents in writing regarding the release of information to anyone (including parents, friends, etc.). Only in cases where the victim has suffered life-threatening injuries will the next of kin be notified without prior approval from the victim.
13. Provide the victim a referral to the duty Chaplain if the victim desires pastoral assistance.
14. Seek consultation from VLC and NCIS and determine if the victim desires/needs a Military Protective Order (MPO), particularly if the victim and the accused are assigned to the same command, duty location, or living quarters. DD Form 2873 must be used when a MPO is issued.
15. Strongly consider temporary re-assignment of either the victim or accused when they are assigned to the same command, duty location, or living quarters.
16. Consider both the physical and emotional well-being of the victim in determining the need for temporary reassignment.
17. To the maximum extent possible, the victim's preference should be honored when making reassignment determinations.
18. Determine how to address the victim's collateral misconduct. Absent overriding considerations, consider the victim's misconduct in context and exercise command authority to defer disciplinary actions for the victim's minor misconduct until after the final disposition of the sexual assault case.
19. When practicable, consult with the servicing legal office, NCIS, VLC and notify the SARC or assigned VA prior to taking administrative or disciplinary action affecting the victim.
20. Avoid automatic suspension or revocation of a security and/or personnel reliability program (PRP) clearance, understanding the victim may be satisfactorily treated for their related trauma without compromising their PRP status. Use established national security standards when making final determinations.
21. Ensure ongoing communication and coordination of actions between commands if the alleged offender is assigned to another command.

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When a Sexual Assault Occurs – Unit Considerations

1. Take all necessary action to ensure it does not become general knowledge within the command that a sexual assault has occurred.
2. When information regarding sexual assault becomes known within the ranks, the following actions will be considered:
  - a. Encourage members to be appropriately supportive of each other within the organization, to include both the victim and the alleged offender in the incident.
  - b. Advise those who may have knowledge of the events leading up to or surrounding the incident to fully cooperate with any investigation.
  - c. Ensure proper authorities are available to explain to witnesses, the potential consequences of discussing any details related to the on-going investigation.
  - d. Discourage members from participating in “barracks gossip.” Take action if either the victim or the alleged offender reports they are being subjected to harassment, reprisal, retaliation, ostracism, threats, or other pressure regarding the incident from command members. Incidents of the aforementioned are required to be reported.
  - e. Consider unit refresher training or have an outside expert address the unit regarding preventive measures, as well as some of the emotional or psychological feelings that may manifest itself and affect the command.

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SEXUAL ASSAULT PREVENTION AND RESPONSE (SAPR) COMMAND DUTY  
OFFICER PROCEDURE FOR RESPONDING TO SEXUAL ASSAULT

1. Once a report of sexual assault of an adult victim (18 years of age or older) is received, the following steps and procedures are required:

- a. DO NOT ASK THE VICTIM FOR DETAILS OF THE ASSAULT.
- b. Assess for safety, ask the victim if they are in a safe place; ask for military affiliation and status.
- c. Encourage the victim to seek medical treatment, U.S. Naval Hospital Naples, Italy, emergency room.
- d. Advise the victim not to destroy possible evidence by bathing, douching, changing clothes, cleaning, changing the crime scene, eating, or drinking.
- e. Inform the victim that the on-call Sexual Assault Prevention and Response Victim Advocate (SAPR VA) will be contacted; provide the victim with the SAPR VA telephone number.
- f. Contact the SAPR 24/7 on-call SAPR victim advocate, 335-640-6621.
- g. For all unrestricted sexual assault reports, notify Naval Criminal Investigative Service (NCIS).
- h. Complete a SITREP/OPREP for all unrestricted reports of sexual assault within 60 minutes per reference (i). Contact the Sexual Assault and Response Coordinator (SARC) or the NCIS duty agent for additional information. NEVER CONTACT THE VICTIM.

2. Contact Info:

- a. Sexual Assault Prevention and Response Program  
Fleet and Family Support Center  
SARC: DSN: 629-6537, COMM: +39-081-811-6537  
Duty cell: 334-661-3140
- b. SAPR 24/7 Response Line: +39-335-640-6621  
24/7 DoD Safe Helpline: +1-877-995-5247  
(long distance charges may apply)

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CRIME VICTIM'S BILL OF RIGHTS

1. The right to be treated with fairness and with respect for the victim's dignity and privacy.
2. The right to be reasonably protected from the accused offender.
3. The right to be notified of court proceedings, clemency, and parole hearings related to the offense.
4. The right to be present at all public court proceedings related to the offense, unless the court determines that testimony by the victims would be materially affected if the victim heard other testimony at trial.
5. The right to confer with the attorney for the government in the case.
6. The right to receive available restitution.
7. The right to be provided information about the conviction, sentencing, imprisonment, and release of the offender.
8. The right to be reasonably heard at:
  - a. A public hearing concerning the continuation of any pretrial confinement of the accused.
  - b. A sentencing hearing related to the offense.
  - c. A public Military Department Clemency and Parole Board hearing related to the offense.
9. The right to submit a written statement for the consideration of the Convening Authority prior to taking action on findings and sentence.
10. The right to proceedings free from unreasonable delay.

Enclosure (5)