

Department Specific Procedure

Adult Sexual Violation/Rape Procedure	
Applicable to:	Authorised by: Associate Director of Nursing,
Health New Zealand Te Whatu Ora Whanganui	Hospital Services
	Contact person: Clinical Nurse Manager,
	Emergency Department

This procedure is overarched by Health New Zealand Whanganui's commitment to honouring our obligations under Te Tiriti o Waitangi and the five Tiriti principles: Tino rangatiratanga; Equity; Active protection; Options; and Partnership, as articulated in Te Tiriti o Waitangi Policy. In seeking to fulfil these obligations, the organisation is guided by the values and strategy outlined in He Hāpori Ora - Thriving Communities.

1. Purpose

To ensure patient safety, privacy and dignity and that legal evidence and alleged concerns are assessed and addressed when suspected sexual violation/rape is perpetrated against the consent of a victim.

2. Scope

This procedure applies to all Health New Zealand | Te Whatu Ora Whanganui Emergency Department (ED) employees (permanent, temporary and casual).

3. Procedure

Description

Sexual activity perpetrated against the consent of a victim

Expected outcomes

- To ensure patient safety, privacy and dignity
- Legal evidence and issues are addressed

Process standards

- Triage as per CENNZ and ACEM assessment criteria
- Immediate priority is to determine any physical trauma that requires urgent medical attention
- Nil by mouth (NBM)
- Assign one nurse as sole carer during time in Emergency Department
- Place in side room
- Inform Police "as soon as possible" with patient's permission, follow Police instructions
- Only remove clothing and belongings that are relevant to immediate treatment place in labelled and sealed paper bag, preferably with a witness
- Document clearly verbatim what patient says
- If possible, advise patient not to PU; if they have to, collect same
- Patient should not wash, shower, bathe or douche evidence can be compromised
- Ensure individualised support for patient, with permission from Police (if involved)
- Police may take all of the patient's clothing and samples and possibly the linen from the bed that the patient has used

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• Whilst maintaining sensitivity to the patient as much as possible, for evidential purposes treat the patient as a "crime scene"

Documentation

- The nurse may be the first person this patient tells of the violation. As the nurse may be first to come into contact, document word-for-word. You may be required to testify in court
- Accurate objective and subjective data is essential

Determine if needed for immediate treatment

- Date and time of assault
- Surroundings where it occurred
- Body orifices penetrated/involved
- Use of any foreign objects
- Other sexual acts
- Injuries occurred during assault, eg bite marks
- Activities after assault, such as urination, showering or douching
- Recent gynaecological treatment or surgery
- History of consensual intercourse within last 72 hours
- Clothing removed since assault

Leave any other details of re-living assault to police.

4. Roles and responsibilities

Registered nurse

- Remain impartial to information and document same
- Offer support to be contacted

5. References

- Call Whanganui Police Station requesting Whanganui on-call CIB team
- Sheehy's Emergency Nursing, Principles and Practice

6. Key words

Sexual violation, rape