**National Best Practices for Sexual Assault Kits:**

**A Multidisciplinary Approach**

<https://www.ncjrs.gov/pdffiles1/nij/250384.pdf>

**Summary of Recommendations**

The SAFER Working Group developed 35 recommendations through a consensus process. Although the working group acknowledges that every jurisdiction is different, the intent of the following recommendations is to positively impact sexual assault responses and the experiences of victims and to ultimately result in safer communities.

**Chapter 1: Multidisciplinary Approach**

1. A collaborative multidisciplinary approach should be implemented for sexual assault cases.
2. Sexual assault responders should use a victim-centered and trauma-informed approach when engaging with victims of sexual assault.
3. Agencies should collaborate and involve victim advocates early in the process to create a more victim-centered approach to the criminal justice process.
4. The multidisciplinary approach should seek out and include voices from underserved or vulnerable populations in the community’s response to sexual assault cases.

**Chapter 2: The Medical-Forensic Exam and Sexual Assault Evidence Collection**

1. Establish minimum standards for a national sexual assault kit (SAK); until that time, states and territories should create a standardized SAK for sexual assault cases that addresses the minimum criteria in the National Adults/ Adolescents Protocol.
2. The medical-forensic exam should be performed by a health care professional specifically trained in the collection of evidence relating to sexual assault cases such as a sexual assault nurse examiner or other appropriately trained medical professional. Guided by the victim history, sexual assault samples should be collected from any victim seeking care as soon as possible and up to five (5) days or longer post-assault. Regardless of the time frame, reimbursement should be provided for the medical-forensic exam.
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4. Examiners should concentrate the collection of evidentiary samples by using no more than two swabs per collection area so as not to dilute the biological sample.
5. Sample collection should be an option for all sexual assault victims who present for a medical-forensic exam, including those who choose not to report (unreported) or report anonymously.
6. Suspect sample collection should ideally be completed by a medical-forensic examiner or appropriately trained individual.
7. Due to increased sensitivity in DNA technologies, masks and gloves should be used by all medical-forensic care providers and others in the collection and packaging of evidence, especially during the collection of intimate samples.
8. Policies for medical-forensic record retention should be created in accordance with statutes of limitations and other criminal justice needs rather than with traditional parameters for medical record keeping, storage, retention, and destruction.

**Chapter 3: Transparency and Accountability of Law Enforcement for SAKs**

1. Law enforcement agencies and laboratories should partner to use one evidence tracking system.
2. The federal government should develop an Electronic Evidence Exchange Standard for the data standards associated with physical forensic evidence.
3. SAKs should be received by the local law enforcement agency from the hospital or clinic as soon as possible, ideally, no later than three (3) business days from the collection of the kit, or as specified by statute.
4. Law enforcement agencies should submit the SAK to the laboratory for analysis as soon as possible, ideally, no later than seven (7) business days from the collection of the SAK, or as specified by statute.
5. Law enforcement or laboratories should be responsible for the long-term storage of all SAKs, unless applicable law provides otherwise.
6. A comprehensive inventory should be conducted to determine the number, status, location, and individual descriptive information (e.g., unique kit identifier, date collected) for all SAKs.
7. Law enforcement agencies should perform an annual audit verifying that all SAKs in the property room are present and in their specified location.

**Chapter 4: Investigative Considerations**

1. All SAKs that the victim has consented to reporting to law enforcement should be submitted to the laboratory for DNA analysis.
2. Law enforcement agencies should establish a system of accountability to ensure the timely follow-up on CODIS hits.
3. All law enforcement personnel involved in sexual assault investigations should receive training in the neurobiology of trauma and specialized skills for interviewing sexual assault victims.
4. Law enforcement agencies should implement electronic records management systems that incorporate investigative workflows to improve case investigations and communication.

**Chapter 5: Processing Sexual Assault Kits in the Laboratory**

1. With the goal of generating a CODIS-eligible DNA profile, if a laboratory is unable to obtain an autosomal CODIS-eligible DNA profile, the laboratory should evaluate the case to determine if any other DNA-typing results could be used for investigative purposes.
2. Forensic laboratories should have an evidence submission policy/protocol that includes prioritization of evidentiary items.
3. Laboratories should consider the volume of sexual assault cases and use business process improvement tools to review their input/output, identify where bottlenecks occur, and determine if a high-throughput approach to processing will achieve efficiencies.
4. Laboratories should consider changing the order of processing the evidence by going to *Direct to DNA* and then, only if needed, proceed to serology.
5. Laboratories should consider incorporating robotics and/or automation at each step of the DNA process for the most efficient high-throughput approach.
6. Laboratories should consider the use of standardized reporting templates, a paperless system, and specialized software to assist in the interpretation of DNA mixtures, to streamline interpretation and reporting of DNA results.

**Chapter 6: Post-Analysis Communication and Policy Considerations**

1. Jurisdictions should have a victim notification protocol for informing victims of the status of their sexual assault cases, including cases where SAKs are analyzed after many years.

1. Jurisdictions that do not have evidence retention laws should adopt biological evidence retention policies/protocols that are victim-centered and preserve evidence from uncharged or unsolved reported cases for 50 years or the length of the statute of limitations, whichever is greater.
2. Unreported SAKs should be retained for at least the statute of limitations or a maximum of 20 years.
3. States that have not already done so should consider eliminating the statute of limitations for sexual assaults.
4. Jurisdictions should develop a communication strategy to increase transparency and accountability to stakeholders within their communities regarding the response to sexual violence.
5. Mandatory training for those responding to sexual assault should be incorporated into every agency’s strategic plan.