



generations of care

FIRST NATIONAL SEXUAL ASSAULT TREATMENT UNIT (SATU) ANNUAL CLINICAL REPORT

Annual Clinical Report for Year Ending: 2009 Date published: 19th April 2010

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Introduction

The Sexual Assault Review Committee produced a national review of Sexual Assault Services in Ireland in 2006.[1] This document made a number of recommendations for better service provision and these have now been implemented. In line with the recommendations, two new SATUs have opened over the past year, in Mullingar (February 2009) and Galway (August 2009). These new units mean that there is a more appropriate geographical availability of services, improving accessibility for patients throughout the Irish Republic.

Another key recommendation of the report was the introduction of a pilot programme in forensic nursing in relation to sexual assault. 8 nurses/midwifes graduated from the RCSI in March 2009, and following accreditation by the National Council for the Professional Development of Nursing and Midwifery (NCNM) were appointed as Clinical Nurse/Midwife Specialists (CN/MSs) in Sexual Assault Forensic Examination. These CN/MSs are currently working in the six SATUs around the country. Their presence has progressed the service delivery and care very significantly. As well as being in a position to provide a timely response to patients at a time of crisis, the SATUs have also extended the breadth and depth of their services. SATUs are now in a position to offer care to men and women who may not want to report an incident to An Garda Siochana and are also focussing on health promotion aspects of care.

Additionally, SATUs have begun to closely monitor service provision and are focussing on collation of local and national figures. Each SATU records similar data on each attendance and prospectively enters it onto a password protected Access 2003 database. This database has enabled the SATUs to prepare an Annual Clinical Report for the year 2009 and further developments will facilitate data review over consecutive years to identify emerging trends and possible targets for intervention strategies.

I am delighted to provide you with copies of all reports, as well as an Executive Summary of National Statistics. In presenting these reports I must acknowledge all SATU staff in each of the 6 units, and also the 8 CN/MSs who have worked very hard in finalising the reports. I would also like to sincerely thank both Anne McHugh and Valerie Jackson for their significant contributions and ongoing support.

Dr Maeve Eogan Medical Director of National SATU Services April 19th 2010.

[1]. O'Shea A. Sexual Assault Treatment Services: A National Review. National Steering Committee on Violence against Women. 2006.

Operational definitions for the purpose of this report:

Time-Frames

The following definitions have been used within the 2009 report. Consensus on other time frames (e.g. historic cases etc) is currently been sought and these should be clarified in the next edition of the National Guidelines.

Recent incident: Where the incident happened ≤ 7 days **Acute cases:** Where the incident happened ≤ 72 hours

Support Worker

A rape crisis centre volunteer or staff person trained and available to provide advocacy and support to a sexual violence victim/survivor in a Sexual Incident Treatment Unit.

Alleged Perpetrator

Relationship with Alleged Perpetrator (now that these relationships have been strictly defined, it would be hoped that data accrual with regard to relationships will be more accurate in future reports)

Relationship with Alleged Perpetrator

Stranger: someone who the person did not know

Intimate Partner: a husband/wife, boyfriend/girlfriend or lover

Ex-intimate Partner: an ex-husband/wife, ex-boyfriend/girlfriend or ex-lover

Multiple assailants: Two or more assailants

Abbreviations

ADON: Assistant Director of Nursing

CN/MS (SAFE): Clinical Nurse/Midwife Specialist (Sexual Assault Forensic Examination)

ED: Emergency Department

HIV: Human Immunodeficiency Virus

PCC: Post coital contraception
PEP: Post exposure prophylaxis

RCC: Rape Crisis Centre

SATU: Sexual Assault Treatment Unit **STI:** Sexually Transmitted Infections

CN/MM: Clinical Nurse/Midwife Manager

Executive Summary of National SATU Clinical Reports for 2009

Attendance re: Area

- There were 529 attendances at the 6 SATUs in the Republic of Ireland in 2009.
- In 514 (97%) cases the incident took place within the Republic of Ireland.

Time of Day the Incident Occurred

• 318 (73%) cases occurred between the hours of 21.00 – 08.59.

Type of Alleged Sexual Crime, Assailant, Relationship to Assailant

- 464 (87%) patients reported recent sexual assaults (within 7 days); the incident occurred between 7 days and 1 month in 41 (7.7%) cases; 14 cases (2.6%) occurred > 1 month prior to attendance; 7 (1.3%) were long term abuse; 3 (0.6%) women disclosed forced prostitution
- 465 (88%) cases involved a single assailant; in 51 (9.8%) cases multiple assailants were involved. In 15 (2.2%) cases the number of assailants involved was unknown.
- In 207 (39%) cases the patients reported that the alleged assailant was a stranger / unknown to them.

Gender, Age Profile, Referral Source

- 500 (94.5%) patients were women and 29 (5.5%) were men.
- The mean age of patients was 24, the youngest was 13, the eldest 80 years.
- 453 (85.6%) cases were referred to the SATU by An Garda Siochána.

Patients Reporting the incident to An Garda Siochána / Interval from Incident till SATU

 468 (88%) patients reported the incident to An Garda Siochána, the majority (90%) attended the SATU within 72 hours of the incident.

Alcohol and Drug Use

- 270 (51%) patients had consumed ≥ 4 units of alcohol in the 12 hours prior to the incident.
- 41 (7.7%) patients disclosed taking illegal drugs.
- 18 (3.4%) patients were concerned that drugs had been used to facilitate sexual assault.

Patient awareness of whether sexual assault occurred

• 59 (11%) patients were unsure if a sexual assault had occurred.

Emergency Post-coital Contraception (PCC)

- 76.5% of female patients were seen within 72 hours of the incident.
- 75% were given emergency PCC.

Sexually Transmitted Infection (STI) Prophylaxis and STI Screening

- 3 SATUs offer follow-up STI screening on site, but only 236 (51.7%) patients returned for first screening appointment.
- These follow-up rates are part of the rationale for offering STI prophylaxis and Hepatitis B vaccination at time of SATU attendance.
- 36% of those screened had abnormal STI test results, with Chlamydia being the most prevalent infection identified.

CORK SEXUAL ASSAULT TREATMENT UNIT South Infirmary - Victoria University Hospital Old Blackrock Rd., Cork.

ANNUAL REPORT FOR YEAR ENDING: 2009

Author: Ms. Finola Tobin Clinical Nurse Specialist (Sexual Assault Forensic Examiner) Date published: April 2010

CORK SEXUAL ASSAULT TREATMENT UNIT ANNUAL REPORT 2009.

Finola Tobin CNS (Sexual Assault Forensic Examiner)

THE SERVICE

The unit opened in October 2001 and provides a comprehensive and co-ordinated forensic and medical aftercare service to both males and females of 14 years and upwards, who have experienced rape or sexual assault. All clients are seen regardless of whether they are reporting or not.

On the 19th of October 2009, we lifted the time restriction of seeing clients within 7 days of an incident occurring and from that date to the end of the year, we saw nine non-acute cases.

We offer a screening service to all clients for Sexually Transmitted Infections two weeks after the assault and I carry out that screen.

SATU is a free and confidential service and can be accessed via the Gardai, General Practitioner, Sexual Violence Centre, Emergency Department or self-referral.

CLIENTS WHO ATTENDED SATU IN 2009

Female Clients: 86

Male Clients: 5

Total: 91 (reporting – 69, non-reporting – 22)

Return Clients: 69

Total: 160

REFERRAL OF NEW CLIENTS TO S.A.T.U.

Gardai	64	70%
Self Referral / Parental	17	19%
A&E Dept / Hospitals	7	8%
G.Ps / Consultant	2	2%
Southdoc	1	1%

LOCATION OF THE ASSAULTS

Cork City	36	40%
Cork County	23	25%
Kerry	14	16%
Abroad	5	6%
Limerick City	3	3%
Dublin	3	3%
Clare	2	2%
Limerick County	1	1%
Kilkenny	1	1%
Tipperary	1	1%
Wexford	1	1%
Galway	1	1%

PERPETRATORS OF THE ASSAULTS

Stranger	31	34%
Acquaintance	25	28%
Not Known	16	18%
Friend	9	10%
Ex-Boyfriend	3	3%
Brother	2	2%
Husband	2	2%
Ex-Partner	1	1%
Partner	1	1%
Boyfriend	1	1%

MARITAL STATUS

SINGLE	SEPARATED	CO-HAB	MARRIED	DIVORCED
72	7	5	4	3
79%	8%	6%	4%	3%

EMPLOYMENT STATUS

Employed	29	32%
Unemployed	26	29%
Third Level Students	18	20%
Schoolgirls	10	11%
Schoolboys	2	2%
Pensioners	2	2%
Mothers At Home	2	2%
Housewives	1	1%
Special Needs	1	1%

OTHER STATISTICS

Had Forensics Taken	69	76%
Had Alcohol Consumed	68	75%
Had Drugs Consumed	4	4%
Had P.E.P. For H.I.V.	2	2%
Crisis Support	67	74%
Emergency Contraception Given	38	42%
Social Worker Informed	13	14%
Required Medical Intervention	12	13%
Suspected Spiking Of Drink	6	7%
Intra-Familial Assault	3	3%

CLIENTS (MINORS) BETWEEN 14 - 18 YRS

17	18%

BREAKDOWN OF MINORS: 14 – 18 YRS

14 years	4 years 15 years		17 years	18 years
2	7	1	2	5
2%	8%	1%	2%	6%

CLIENTS BETWEEN 18 – 24 YRS

40	44%
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CLIENTS SCREENED FOR SEXUALLY TRANSMITTED INFECTIONS

TOTAL SCREENED	40	44%
Chlamydia	7	17%
Non-Specific Infections	6	15%
Ano-Genital Warts	2	5%
Hepatitis C	1	2%



DONEGAL SEXUAL ASSAULT TREATMENT UNIT Letterkenny General Hospital, Letterkenny, Co. Donegal.

ANNUAL REPORT FOR YEAR ENDING: 2009

Author: Ms. Jane Casserley Clinical Nurse Specialist (Sexual Assault Forensic Examination) Date published: April 2010

Executive Summary Donegal SATU 2009

Attendance re: Area

- There were 8 attendances at the Donegal SATU, an increase of 3 attendances from 2008.
- In all 8 cases, the incident took place within the Republic of Ireland.

Attendance re: Month, Notable Date or Event, Day and Time of Day

- May and June were the busiest months with 4 (50%) cases presenting in these months.
- Thursday and Friday were the busiest days with 4 (50%) patients presenting on those days.
- 6 (75%) occurred in the night time hours: between 2100 and 0859 hours.

Type of Alleged Sexual Crime, Assailant, Relationship to Assailant

- All 8 patients reported recent sexual assaults.
- All cases reported a single assailant.
- 1 (12.5%) patient reported the assailant was a stranger / unknown them.

Gender, Age Profile, Referral Source

- 5 (62.5%) patients were female, 3 (37.5%) were male.
- The age mean was 18.25 years, the youngest was 14 years, the eldest was 26 years (the minimum age criteria for the SATU is 14 years).
- All 8 patients were referred to the SATU by An Garda Siochána.

Patients Reporting to An Garda Siochána / Time Frame from Incident till SATU

• All 8 patients attended the SATU in ≤ 7 days timeframe.

Support Worker in Attendance

 There was no support worker from the RCC in attendance in 2009. However, since January 2010 we have a support worker rota established.

Physical Trauma

- 3 (37.5%) patients had physical trauma,
- 1 (12.5%) patient attended the ED with minor trauma.

Alcohol and Drug Use

- 5 (62.5%) patients reported having consumed ≥ 4 units of alcohol in the previous 12 hours
- 1 (12.5%) patients reported having taken illegal drugs.
- 1 (12.5%) patients were concerned that drugs had been used to facilitate sexual assault.

Post-coital Contraception (PCC)

• 4 female patients were seen within 72 hours of the incident, of these 2 (50%) were given PCC.

Sexually Transmitted Infection Prophylaxis and (STI) Screening

- All patients were given an appointment or encouraged to attend a clinic for STI screening.
- No patients received Chlamydia prophylaxis or PEP for HIV and no patients were commenced on Hepatitis B immunisation programme. However, upon successful completion and qualification of the CNS's (SAFE) on the Nurse prescribing programme, this facility should be on offer in 2010.

1. The Donegal SATU, Letterkenny General Hospital

The SATU Team consists of:

- Medical Director Dr C. King.
- Service Manager Ms. Evelyn Smith.
- CNS (SAFE) Ms. Jane Casserley & Ms. Sandra Keeney.
- Assisting Nurses Ms. Sarah Meagher, Ms. Marie Brogan, Ms. Breid Harkin, Ms. Orla Doherty & Ms. Breid Williams.
- Rape Crisis Centre Volunteers Ms. Margaret O'Donnell, Ms. Leona Martin, Ms. Angela Martin & Ms Marife O'hAodha.

2. Number of Attendances

- In 2009, there were 8 attendances at the SATU.
- This showed an increase of 3 attendances from 2008.

Referred to other SATUs.

3 patients had to be referred to other SATUs due to the following:

- 2 patients transferred due to lack of appropriate facilities.
- 1 patient as no Forensic Clinical Examiner was on call.

3. Country Where the Incident Took Place

In all 8 cases the Incident took place within the Republic of Ireland.

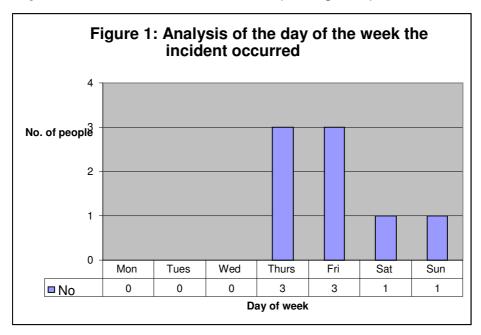
4. County Where the Incident Took Place

All 8 cases the Incident was reported to have taken place in County Donegal.

5. Month of Attendance (See table 1)

Table 1: Analysis of Month by Attendances												
	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec
No	0	0	0	0	2	2	0	1	2	0	0	1
%	0	0	0	0	25	25	0	12.5	25	0	0	12.5

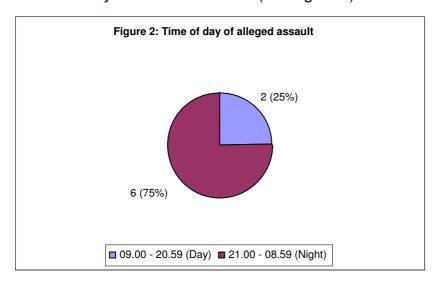
6. Day of the Week Incident Occurred (See figure 1)



7. Notable Day or Event

1 case (12.5%) occurred on a notable day.

8. Time of Day Incident Occurred (See figure 2)



9. Location where the Incident Occurred (See table 2)

Table 2: Analysis of the location of the Incident				
Location	No	%		
Other indoors	3	37.5		
Other outdoors	2	25		
Home	1	12.5		
Assailants home	1	12.5		
Car	1	12.5		
Total	8	100		

10. Type of Alleged Sexual Crime

All 8 reported recent sexual assaults.

11. Assailant/s

11.1 Number of Assailants

All 8 patients reported a single assailant.

11.2 Relationship between the Patient and Alleged Assailant (See table 3)

Table 3: Analysis of relationship between the patient and the alleged assailant					
Relationship No %					
Recent Acquaintance	3	37.5			
Friend	2	25			
Acquaintance	1	12.5			
Stranger	1	12.5			
Family Member	1	12.5			
Total	8	100			

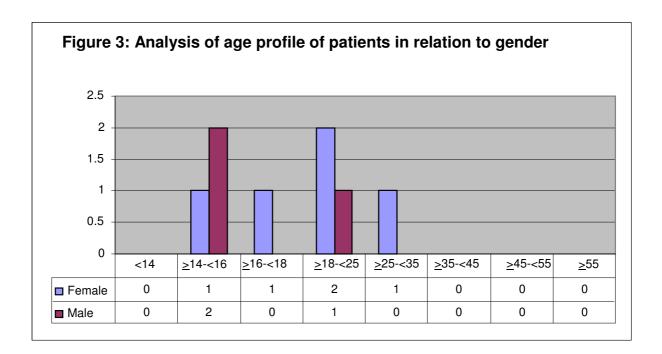
12. Demographics

12.1 Gender

Of the 8 patients, there were 5 (62.5%) females and 3 (37.5%) males.

12.2 Age Profile (See table 4 and figure 3)

Table 4: The mean, mode and median age and the minimum and maximum				
ages of patients attending the SATU				
Mean	Mode	Median	Minimum	Maximum
18.25	15	16.5	14	26



12.3 Occupation

- 4 (50%) were students.
- 2 (25%) were in employment.
- 2 (25%) were unemployed.

12.4 Marital Status

All 8 patients were single.

12.5 Source of Referral

All 8 patients were referred by An Garda Siochána.

12.6 Ethnicity

All 8 patients who attended were Irish.

13. Support Worker in Attendance

No patients had a Support Worker at the initial SATU attendance in 2009. However, since January 2010 Rape Crisis Centre Volunteers now have an on call rota and are attending when the SATU patients present.

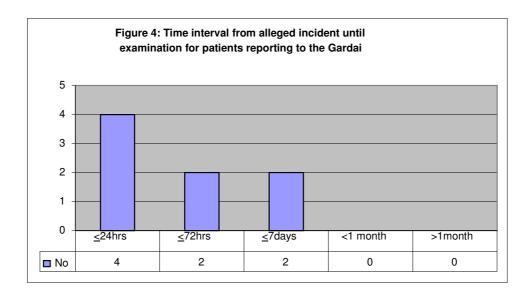
14. Type of Attendance: Reporting / Non-reporting

Of the 8 patients that attended the SATU all reported the incident to An Garda Siochána and had a forensic clinical examination carried out.

15. Patients Reporting to An Garda Siochána:

15.1 Time Interval from incident to attendance in SATU

- All 8 patients were seen within ≤ 7days (See figure 4).
- 4 (50%) were seen within 24 hours.
- A further 2 (25%) patients were seen within < 72 hours.
- The other 2 (25%) patients were seen within the ≤ 7days timeframe.



16. Patients Awareness of Whether a Sexual Assault had occurred

- 6 (75%) felt that a sexual assault had occurred.
- 2 (25%) were unsure if a sexual assault had occurred.

17. Physical Trauma

3 (37.5%) patients attending the SATU had physical trauma.

- 1 (12.5%) patient attended the Emergency Department with minor trauma.
- No patient had major trauma.

18. Alcohol and Drug Use

18.1 Alcohol

5 (62.5%) patients disclosed having consumed alcohol in the previous 12 hours prior attending the SATU, of these

• The 5 (62.5%) patients had consumed ≥ 4 units of alcohol

18.2 Drugs

4 (50%) patients disclosed having taken drugs, of these

- 3 (37.5%) had taken their prescribed medication.
- 1 (12.5%) patient disclosed having taken illegal drugs.

1 (12.5 %) patient was concerned that drugs had been used to facilitate sexual assault.

18.3 Both Alcohol and Drugs

1 (12.5%) patient, both alcohol and drugs were a factor.

19. Post-coital Contraception (PCC)

4 (80%) female patients were seen within 72 hours of the incident, of these

- 2 (50%) were given PCC.
- The remaining 2 (50%) patients did not receive PCC for due to no penile penetration having taken place.

20. Sexually Transmitted Infection (STI) Prophylaxis and Screening

20.1 Follow up Appointments for Screening

 All 8 patients were offered screening for STIs in external hospitals i.e. Altnagelvin in Derry and Sligo General Hospital (See table 12)

20.2 STI Prophylaxis

No prophylactic antibiotic cover was administered in 2009. However, upon successful completion and qualification of the nurse prescribing course, the CNS's (SAFE) will be prescribing these drugs in 2010.

21. SATU Developments, Activities, Opportunities and Challenges

21.1 Developments in 2009

- Moved from the old "Care Unit" (SATU) premises to the Gatelodge Building on the grounds of Letterkenny General Hospital.
- Commencement of both CNS's on the nurse prescribing course.
- Development of medication protocols, to allow for the CNS (SAFE) to work professionally within the framework of the medication protocols providing a holistic service to the patient.
- The following documentation was developed:
 - Clinical Forensic Examiners record sheet: to be used to record details of a
 referral when a phone call is received re: a case. This can then be used in the
 future for audit purposes i.e. to see the time interval from when a call is
 received to when it actually starts.
 - SATU Log book- this provides an overall record of attendances at the SATU and also acts as a quick reference for details of a case.
 - Emergency Department Log book- this is to be used by all Emergency Dept. Staff who receive a telephone call (from any source) regarding a patient disclosing a sexual assault, or any enquiries about options or treatment following a sexual assault. (A "Scenarios" page was also included with this to offer further explanation.)
 - Algorithms/ Referral pathways developed and distributed for use in the ED,
 GP practices, Social work department and the Gardai station.

21.2 Educational and Training Events

- Study day for all disciplines provided by the RCC on how to deal with the disclosure
 of a rape or sexual assault.
- Regular meetings with the Assisting Nurses to provide updates regarding their role in caring for a patient of rape or sexual assault.
- Allocation of student nurses to our unit as part of their specialist nurse placement.
- Policy, Procedure and Guideline development Study Day.
- Briefing session- Children First Guidelines.
- Clinical Institute Withdrawal Assessment (CIWA) training.
- Q-pulse training.
- CPR Training.

21.3 Publications and Presentations

- Involvement in Cross- Border development of the Antrim Sexual Assault Response Centre (SARC).
- Update to "Support Services" leaflet which each patient receives upon discharge from the SATU.
- Development of "SATU services" leaflet, which explains what the SATU offers patients and what is involved in a Forensic Clinical Examination.
- The following Guidelines were developed and ratified by the Hospital Guidelines, Protocols and Procedures Committee:
 - Guideline for the development of medication protocols for use in the SATU.
 - o Guidelines on the collection of clothing and sanitary ware in the SATU.
 - Guideline on consultation trail.
 - o Guideline for dealing with a non-reporting patient.
 - Guideline awaiting circulation: DNA decontamination and deactivation within the SATU.
- Publication of article regarding the Letterkenny SATU in May edition of the RCNI (Rape Crisis Network Ireland) newsletter.
- Article entitled "The Past, Present & Future of Donegal's Sexual Assault Treatment Services" was published to HSE notice board.

21.6 Challenges in 2009

- Availability of suitable premises.
- 24 hour/ 365 day Sexual Assault Forensic Examiner cover for the SATU Roster.
- Support Nurses: Not always available due to previous work commitments.
- RCC support workers: Not available in 2009.

21.5 Opportunities in 2010

The development of a multi-interdisciplinary SATU Liaison committee; which would include a representative from the Rape Crisis Centre, the Gardai, Medical Director, Line Manager, Sexual Assault Forensic Examiners, and the assisting Nurses.

Research a more effective assisting nurse rota and look at the possibility of recruiting nurses and midwives for same.

Relocation to a more suitable dedicated premise within the NowDoc building.

The advantages of this premise in relation to the existing premise (Gatelodge) are:

- The presence of other healthcare workers and security staff which would aid to a safe environment for both patients and staff.
- It is more easily accessible for disabled patients.
- The presence of General Practitioners if any complications arise.
- Availability of a driver and transport to the ED if required.
- SATU staff would have access to these premises to perform examinations 24 hours a day/ 7 days a week.
- As it would be a dedicated premise DNA Decontamination and deactivation can be maintained.
- The presence of shower facilities.
- Correct storage off all stock required for a sexual assault forensic examination.
- In a position to offer patients of the SATU a return visit for general follow up.
- Possibility of development of an STI screening service for SATU patients.
- Working within an environment where patients who do not wish to report to An Gardai may present, therefore allowing more efficient access for them to our service.
- More cost effective than the refurbishment of the other proposed premise (Ballyraine).

Acknowledgements

I would like to acknowledge the hard work inputted by Anne McHugh (Rotunda, Dublin) in the designing of this annual report and to everyone else involved.

Valerie Jackson-IT Department of the Rotunda for the development of the SATU database.



GALWAY SEXUAL ASSAULT TREATMENT UNIT Hazelwood House, Parkmore Rd., Ballybrit, Galway

ANNUAL REPORT FOR YEAR ENDING: 2009

Authors: Ms. Mary Helly, Manager, SATU Ms. Eleanor Comer, Clinical Nurse Specialist (Sexual Assault Forensic Examination) Date published: April 2010

Executive Summary Galway SATU 2009

Attendance re: Galway, Mayo and Roscommon.

- There were 14 attendances at the SATU, Galway.
- In all cases the incident took place within the Republic of Ireland

Attendance re: Month, Notable Date or Event, Day and Time of Day

- September was the busiest month with 5 (35.7%) cases presenting.
- Tuesday 8th September was the busiest day with 2 (14.2%) patients presenting on that day.
- 1 (7.1%) case occurred on a notable date or event Christmas.
- 10 (71.4%) cases occurred between the hours of 21.00-08.59.

Type of Alleged Sexual Crime, Assailant, Relationship to Assailant

- 12 (85.7%) cases were recent sexual assaults; there were no cases involving long term abuse or forced prostitution.
- 11 (78.5%) cases involved a single assailant; in 1 (7.1%) case multiple assailants were involved; 1 (7.1%) patient was unsure of the number of assailants and 1 unknown.
- In 6 (42.8%) cases the alleged assailant was a stranger / unknown to the patient.

Gender, Age Profile, Referral Source

- All 14 (100%) patients were female.
- The age mean was 21.25, the youngest was 15, the eldest 34 years (the minimum age criteria is 14 years).
- All 14 cases were referred by An Garda Siochána.

Patients Reporting to An Garda Siochána / Time Frame from Incident till SATU

- 100 % of patients reported the incident to An Garda Siochána.
- 12 (85.7%) alleged assaults took place within the previous 7days, of these, 3(21.4%) were within 72 hours, 7(50%) were within 24 hours.
- 2 (14.2%) alleged assaults had occurred greater than 7 days and less than 1 month prior to attending the SATU.

Support Worker in Attendance

• In all 14 (100%) cases a Support Worker from the RCC was in attendance.

Physical Trauma

• 4 (28.5%) patients had physical trauma; 1 (7.1%) attended the ED with minor trauma.

Alcohol and Drug Use

- 7(50%) patients had consumed ≥ 4 units of alcohol in the 12 hours prior to the alleged assault.
- 5 (35.7%) patients had taken prescribed medication, 2 (14.2%) patients had taken illegal drugs.
- 2 (14.2%) patients had taken both prescribed drugs and illegal drugs.
- 6 (42.8%) patients were concerned that drugs had been used to facilitate sexual assault.
- 2 (14.2%) were unsure if a sexual assault had occurred.

Post-coital Contraception (PCC)

- 3 (21.4%) female patients were seen within 72 hours of the incident.
- 4 (28.5%) were given PCC in Galway SATU.

Sexually Transmitted Infection Prophylaxis and (STI) Screening

• 100% of patients were given Information leaflets and advice re follow up screening appointments at GUM Clinic at University Hospital, Galway or clinic of choice.

1. The SATU, Galway.

The SATU Galway opened in August 2009.

The SATU Team consists of:

- 1 Clinical Director
- 3 Forensic examiners (includes Clinical Director)
- 1 CNS/SAFE
- 1 Manager
- 8 Mentoring Doctors
- 19 Nurses

2. Number of Attendances

In 2009, there were 14 attendances at the SATU.

3. Country Where the Incident Took Place

All 14 (100%) Incidents took place within the Republic of Ireland.

4. County Where the Incident Took Place

12/14 cases took place in county Galway (See table 1)

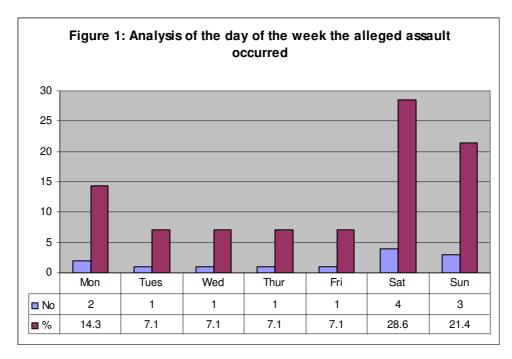
Table 1: Analysis of the county/s where Incident took place				
County	No	%		
Galway	12	85.7		
Мауо	1	7.1		
Sligo	1	7.1		
Total	14	100		

5. Month of Attendance (See table 2)

Tab	Table 2: Analysis of Month by Attendances*											
	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec
No		><	><		><	><	>	2	5	3	2	2
%		><	\nearrow	>	><	\nearrow	\geq	14.3	35.7	21.4	14.3	14.3

^{*} The SATU Galway opened in August 2009 and so no data is available prior to this date

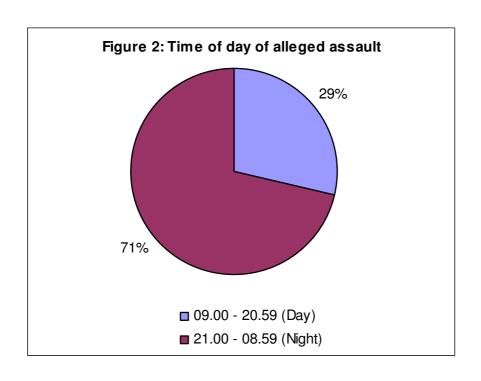
6. Day of the Week Incident Occurred (See figure 1)



7. Notable Day or Event

- 7 (50%) alleged assaults occurred at the weekend.
- 1 (7.1%) case occurred on a notable day.

8. Time of Day Incident Occurred (See figure 2)



9. Location where the Incident Occurred (See table 3)

Table 3: Analysis of the location of the Incident				
Location	No	%		
Home	4	28.6		
Assailants home	3	21.4		
Not recorded	1	7.1		
Field / Park	1	7.1		
Other indoors	5	35.7		
Total	14	100		

10. Type of Alleged Sexual Crime

- 12 (85.7%) cases were recent sexual assaults i.e. occurred in the previous 7 days.
- 2 cases occurred > 7 days and < 1 month prior to attending the SATU.

11. Assailant/s

11.1 Number of Assailants: single or multiple assailants

- 11(78.5%) cases involved a single assailant.
- 1(7.1%) case involved multiple assailants.
- In 1(7.1%) case the number of assailants was unknown.

11.2 Relationship between the Patient and Alleged Assailant (See table 5)

Table 4: Analysis of relationship between the patient and			
the alleged assailant			
Relationship	No	%	
Friend	1	7.1	
Acquaintance	3	21.4	
Stranger	5	35.7	
Family Member	1	7.1	
Ex-intimate Partner	1	7.1	
Unknown	1	7.1	
Not Recorded	2	14.3	
Total	14	100	

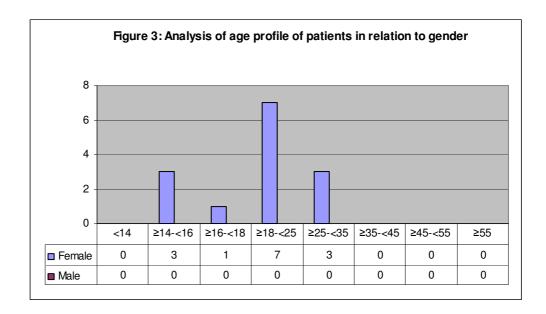
12. Demographics

12.1 Gender

All 14 patients attending the SATU in 2009 were female.

12.2 Age Profile (See table 5 and figure 3)

	mean, mode s of patients at		•	minimum and	
Mean	Mean Mode Median Minimum Maximum				
21.25	18	18	15	34	



12.3 Occupation (n = 14)

- 8 (57.1%) were students.
- 2 (14.2%) were in employment.
- 3 (21.4%) were unemployed.
- 1 (7.1%) unknown.

12.4 Marital Status (See table 6)

Table 6: Analysis of marital status ($n = 14$)				
Marital Status	No	%		
Single	12	85.7		
Co-habiting	1	7.1		
Not recorded	1	7.1		
Total	14	100		

12.5 Source of Referral

All 14 cases were referred by An Garda Siochána.

12.6 Ethnicity (See table 7)

Table 7: Analysis of ethnicity of patients ($n = 14$)						
Ethnicity No %						
White	13	92.8				
Roma	1	7.1				
Total	14	100				

13. Support Worker in Attendance

14 (100%) patients had a Support Worker at the initial SATU attendance.

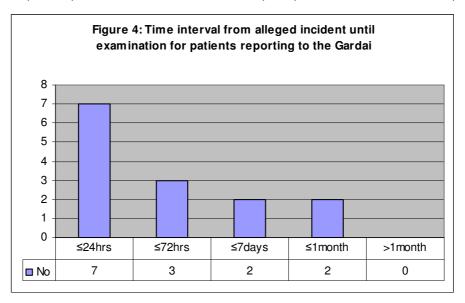
14. Type of Attendance: Reporting / Non-reporting

Of the 14 patients that attended the SATU:

- All 14 (100%) reported the incident to An Garda Siochána and 11(87.5%) had a forensic clinical examination carried out.
- 11(78.5%) had a health examination.
- 3 (21.4%) had no examination.

15. Patients Reporting to An Garda Siochána:

- 12 (85.7%) cases occurred within the previous 7days.
- 3 (21.4%) were within 72 hours and 7 (50%) were within 24 hours. (See figure 4).



16. Patients Awareness of Whether a Sexual Assault had occurred

- 12 (85.7) felt that a sexual assault had occurred.
- 2 (14.2%) were unsure if a sexual assault had occurred.

17. Physical Trauma

- 4 (28.5%) patients attending the SATU had physical trauma.
- 1 (7.1%) attended the Emergency Department with minor trauma.

18. Alcohol and Drug Use

18.1 Alcohol

- 11(78.5%) patients had consumed alcohol in the previous 12 hours prior to the alleged assault, of these
 - \circ 7 (50%) patients had consumed \geq 4 units of alcohol (See table 8).
 - 4 (28.5%) cases the units of alcohol were not recorded.

Table 8: Analysis of the mean, median and mode: relevant to the amount of alcohol consumed in the previous 12 hours, prior to the alleged assault					
Mean Median Mode					
9.7 9 0					

18.2 Drugs

- 6 (42.8%) patients had taken drugs, of these
 - 5 (35.7%) were prescribed medication.
 - 2 (14.2%) were illegal drugs.
 - o 1 (7.1%) patient had taken both prescribed medication and illegal drugs.
- 6 (42.8%) patients were concerned that drugs had been used to facilitate sexual assault.

18.3 Both Alcohol and Drugs

In 2 (14.2%) alleged assaults both alcohol and drugs were a factor.

19. Post-coital Contraception (PCC)

• 10 (71.4%) female patients were seen within 72 hours of the incident, of these

- o 4 (40%) were given PCC.
- The remaining 6 (60%) did not receive PCC for various reasons (See table 9).

Table 9: Reasons female patients seen with receive PCC in the SATU (n = 6)	hin 72 hou	ırs did not
Reason	N	(%)
Already using contraception	2	33.3
Pregnant	1	16.7
No penile penetration	2	33.3
Other	1	16.7
Total	6	100

20. Sexually Transmitted Infection (STI) Prophylaxis and Screening

20.1 STI Prophylaxis

- No patients received Chlamydia prophylaxis or HIV post exposure prophylaxis.
- No patients commenced Hepatitis B immunisation.

20.2 Follow up Appointments for Screening

All patients were given information leaflets and referred to local STI Clinic.

20.3 Outcome of the STI Screening Carried Out by the SATU

STI screening is not currently carried out in Galway SATU.

21. SATU Developments, Activities, Opportunities and Challenges

21.1 Developments in 2009

The Unit was opened on the 24th August, 2009 with the appointment of a Clinical Director, a Clinical Nurse Specialist in forensic medicine and a Manager. It has been assigned to the Women's and Children's Directorate, Galway University Hospitals. There is a roster of both medical and nursing staff on call for the Unit on a 24/7 basis. The unit is currently based in a temporary facility in Parkmore Rd., Galway. Referral to the service is currently through the Gardai.

21.2 Multi-Interdisciplinary SATU Liaison Meetings

The SATU Liaison group consisting of the Rape Crisis Centre, Garda Liaison Officer, Clinical Director, Sexual Assault Forensic Examiners, Nurses and Administration Support Staff met twice throughout the year. Minutes of all the meetings and attendance were compiled.

Meetings: 26th February, 2009 and 2nd April, 2009.

21.3 Educational and Training Events;

- Talk on 12th February, 2009: Talk on SATU at Sexual Health Programme, Centre for Nursing and Midwifery Education, GUH given by CNS.
- SATU Information Day: 21st March, 2009 for all doctors and nurses who were interested in working in the Unit given by Clinical Forensic Examiners, CNS. Gardai and Rape Crisis Support Coordinator.
- Talk on the 25th March, 2009 to Rape Crisis Centre Volunteers by Clinical Nurse
 Specialist re Clinical Forensic Examination in SATU.
- Talk on the 6th May, 2009: Information session for nurses who were shortlisted for the on-call roster by CNS.
- Training Day: 16th May, 2009 for doctors and nurses who were shortlisted for the roster given by Multidisciplinary Facilitators including Forensic Examiner, CNS/SAFE, Forensic Scientist, Garda Liaison Officer and Rape Crisis Support Worker Coordinator.
- Training Information Day for Gardai: 19th June, 2009 Galway, Mayo and Roscommon Divisions given by Multidisciplinary Facilitators Clinical Forensic Examiner, Gardai, Rape Crisis Support, Forensic Scientist and CNS/SAFE.
- 6 Training sessions in SATU for Assisting Nurses and Mentoring Doctors in August, 2009 given by CNS/SAFE.
- Orientation of RCC support workers in August and September, 2009.
- 6 Training sessions in SATU for Assisting Nurses and Mentoring Doctors in September,
 2009 given by CNS/SAFE.
- 1 Training session in SATU for Assisting Nurses in October, 2009 given by CNS/SAFE.
- 4th November, 2009 talk to Rape Crisis Centre Volunteers given by CNS/SAFE.

21.4 Opportunities in 2009

Study Day in Rotunda Hospital on 9th October, 2009 attended by CNS and Mentoring
 Doctor proving an opportunity to meet other SATU members and updating knowledge on current issues in the management of rape/sexual assault.

- SSSTDI Conference on 16th October, 2009 attended by CNS.
- Galway Rape Crisis Centre Conference on 27th November, 2009 attended by CNS &
 Manager providing opportunity to network with other disciplines in the Western Region.
- Rape Crisis Network of Ireland Conference on the 7th December, 2009 attended by CNS for book launch on Rape & Justice in Ireland.

21.6 Challenges in 2009

Setting up a Unit off site in particular accessibility to services -

- Stores
- Laundry
- Waste
- Cleaning
- I.T.
- Post
- Pharmacy

Acknowledgements

Support from staff in the five other Sexual Assault Treatment Units.



SEXUAL ASSAULT TREATMENT UNIT Midland Regional Hospital, Mullingar. Co. Westmeath.

ANNUAL REPORT FOR YEAR ENDING: 2009

Date published: April 2010

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Acknowledgements

We wish to thank and acknowledge all the hard work and effort by everyone involved with the development of Midland region Sexual Assault Treatment Unit (SATU), especially Dr. Gannon, Medical Director, Hospital management, all the Forensic Examiners, assisting nurses, support workers and staff of the Tullamore Rape Crisis Centre.

Background to this First Annual Report

The development of the Midland region Sexual Assault Treatment Unit (SATU) followed the recommendations of the National Review of Sexual Assault Treatment Services in Ireland (O'Shea, 2006). This review stated 'to ensure a geographical spread of SATUs, two additional services be developed, namely in Galway city and an appropriate location in the Midland region. This was followed in December 2006, by an announcement by the Minister for Health and Children, Mary Harney T.D., regarding the provision of funding for the development of the two additional SATUs.

Subsequent to this a SATU Implementation Steering Group was established in the Midland region in June 2007. This Steering Group was chaired by the Local Health Office Manager Longford/Westmeath and included representatives from the Gardai, Rape Crisis Centre and the HSE. Ms. Mary O'Neill, Project Manager, Sexual Health, HSE was a key member of the SATU Implementation Steering Group and also represented the Midland region SATU, on the National SATU Steering Group.

The Implementation Steering Group developed a business proposal for the Midland region SATU. The business proposal was submitted to the National Implementation Group in Autumn 2007. Following this the Midland region SATU was developed at Midland Regional Hospital Mullingar, with the location being determined by best practice guidelines and input of experts in this area.

The Midland region SATU opened on the 2nd of February 2009 and provides services for the counties of Longford, Westmeath, Laois and Offaly as well as adjoining areas. It operates a twenty four hour service, seven days a week. The staff includes a Medical Director, full time CNS (S.A.F.E.), a part time CNM 2, a part-time Project Manager and a Clerical Officer Grade 4. In addition five doctors and eleven nurses provide an on-call/out of hours service

Executive Summary Midland Regional Hospital, Mullingar SATU 2009

Attendance

 There were 51 attendances with 50 attendees (one person attended twice) at the Midland region SATU in 2009.

Attendance re: Month

 May- August inclusive were the busiest months with 15 (30%) cases presenting during those months.

Time of Day of the Incident

• 21 (42%) of the incidents occurred between the night time hours of 20.00 and 08.00hrs with the largest number 29 (58%) occurring between the day time hours of 08.01 and 19.59 hrs.

Forensic Clinical Examinations / Recent Incidents / Non- Reporting

- 44 (88%) patients had a forensic clinical examination
- 6 (14%) of the patients did not report the incident to the Gardai.
- 43 (86%) of cases were recent, (had occurred within 7 days).
 - Of these: 36 (72%) were seen within 72 hours of the incident.

Number of Assailants and Relationship to Assailant

- 37 (74%) cases a single assailant was reported.
- 20 (40%) the alleged assailant was a recent acquaintance.

Gender, Age Profile

- 46 (92%) patients were female, 4 (8%) male.
- 18 (36%) patients were aged between 26 and 35 years of age (The largest number in any age group)
- 11 (22%) patients were < 18 years of age (NB. The minimum age criteria: 14 years).

Alcohol and Drug Use

- 28 (56%) patients had consumed > 4 units of alcohol in the previous 12 hours.
- 4 (8%) patients reported having used both illicit drugs and alcohol.

Post-coital Contraception (PCC)

 25 female patients were seen within 72 hours of the incident, 11 (44%) of these patients were given PCC the remaining 14 (56%) did not have PCC for various reasons.

Sexually Transmitted Infections

- All patients were offered an STI follow-up appointment, of these:
 - 19 (38%) returned to the SATU for the first screening appointment, with 16 (32%) being given an appointment for other STI clinics.

Overview of the SATU Attendances for the Year 2009

There were 51 attendances with 50 attendees at the Midland region SATU in 2009.

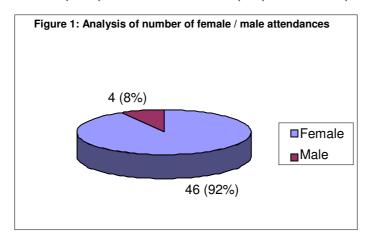
(one patient attended the SATU twice). At the first visit these patients are offered a clinical or forensic examination, psychological care, post coital emergency contraceptive and a STI screen approximately four weeks following the initial visit.

- 44 (88%) patients had a forensic clinical examination performed.
- 6 (12%) patients had a clinical only examination performed.
- 43 (86%) patients the incident had occurred within last 7 days.
 - o Of these: 36 (72%) were seen within 72 hours of the incident.

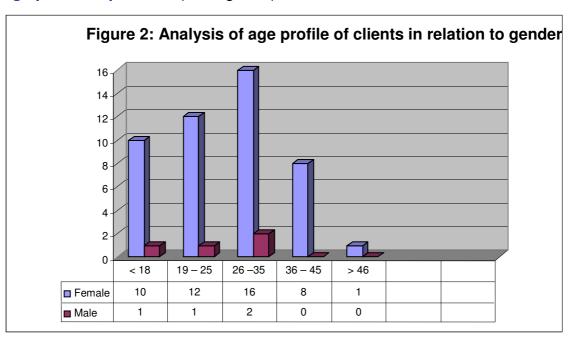
Gender breakdown

Of the 50 attendees:

• 46 (92%) were female and 4 (8%) were male.(See figure 1)



Age profile of patients, (See figure 2)



- 18 (36%) patients were aged between 26 and 35 years of age
 - o This was the largest number in any age group.
- 11 (22%) patients were <18 years of age.

Alcohol and Drug Use

Alcohol

- 21(42%) patients reported having not consumed alcohol.
- 29 (58%) patients reported having consumed more than 4 units of alcohol.
 - o 24 of these patients gave a history of consuming more than 10 units of alcohol.
 - 5 (10%) patients had loss of memory loss in that they were unsure if a sexual assault had
 occurred.

Drugs

• 4 (8%) patients reported having used both illicit drugs and alcohol.

Psychiatric Disorders

• In 11 (22%) patients a psychiatric disorder (other than an addiction) was reported

Time of Day of the Incident

21 (42%) cases the reported time of the incident was during the night time hours 20.00 and 08.00 hours, with the larger number 29 (58%) occurring during day time hours 08.01 – 19.59 hours.

Month Incident Occurred

- 8 (16%) incident occurred in September
- 15 (30%) occurred in May-August inclusive (See table 1)

Table	Table 1: Analysis of attendance by month (Opened 2 nd Feb 2009)											
	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec
No.	-	5	7	6	3	2	4	6	8	3	6	1
%	-	10%	14%	12%	6%	4%	8%	12%	16%	6%	12%	2%

Location where the Incident Occurred

- 14 (28%) the patient's reported it had occurred in their home.
- 10 (20%) the patient's reported it had occurred in the assailant's home.
- 26 (52%) occurred neither the patients nor the assailant's home

Number of Assailants

Single Assailant

- 35 (70%) a single assailant was reported to be involved.
 - o 6 (12%) the reported assailant was a stranger.
 - o 20(40%) the reported assailant was a recent acquaintance
 - o 4(8%) the reported assailant was a long term acquaintance
 - o 5 (10%) the reported assailant was a long term partner.

Multiple Assailants

- 3 (6%) multiple assailants were reported to have been involved.
- 12(24%) this information was not recorded

Post-coital Contraception (PCC)

Of the 46 female patients:

- 25 (54%) female patients were seen within 72 hours of the assault.
 - Of these 25 patients, 11 (44%) were given PCC.
 - The other 14 (56%) female patients did not receive PCC for various reasons.
 (See table 1)

Table 2: Reasons women who were seen within 72					
hours did not receive PCC in the SATU (n=14)				
	N	%			
Already using effective contraception	4	29%			
Treatment refused	4	29%			
Received PCC prior to attending Unit	3	21%			
Post-hysterectomy or post-menopausal	3	21%			
Total	14	100%			

Screening for Sexually Transmitted Disease

All patients were offered screening for sexually transmitted disease.

- 19 (38%) patients attended the SATU for a follow-up screening appointment.
- 16 (32%) attended another service for follow-up screening.
- 15 (30%) declined a follow-up appointment.

Roster cover for Sexual Assault Forensic Examiner and Assisting Nurses

Forensic Clinical Examiners:

- 8 Doctors and 1 CNS (S.A.F.E) were available when the SATU opened.
 - o Currently 5 Doctors and 1 CNS (S.A.F.E) are available.

This reduction in the number of available Doctors has led to weekend cover being provided by 4 of these Doctors only, which is not adequate.

- 12 Assisting Nurses were available.
 - Currently 11 Assisting Nurses are available.

The SATU Liaison Multi-Interdisciplinary Group

Group Members

The SATU Liaison Group consists of the Tullamore Rape Crisis Centre (RCC), Garda Liaison Officers from Laois/Offaly and Westmeath Scenes of Crime Officers, Medical Director, Nursing Administration, Sexual Assault Forensic Examiners, Clinical Nurse Manager 2, Project Manager, Hospital Manager and Administration Support Staff.

The remit of SATU Liaison Group is to:

- Promote effective linkage, interagency collaboration and utilisation of existing resources, personnel and knowledge within the region.
- Foster partnership working within and between the statutory and non- statutory service providers in the region.
- Collaborate to ensure that the provision and development of services is in line with national developments.
- Be a forum for consultation and communication.

Meetings

The SATU Liaison Group met once in December 2009 with representatives from the HSE, An Garda Siochana and Tullamore RCC present, minutes were compiled. At the meeting the Gardai were informed of the newly devised report template used by forensic examiners nationally which would avoid necessity for "statement" by forensic examiners. The use of early evidence kits was highlighted, and to be promoted by the Gardai and they will consider

producing a document for examiners to aid them in obtaining vital forensic details during the interview with a patient. The group agreed to meet quarterly with the next meeting arranged for spring 2010.

Educational and Training Events

SATU staff attended a number of in-house training sessions at the beginning of the year. The first National study day for frontline staff working within the SATU services, which was organised by and held in The Rotunda Hospital, Dublin in October 2009, and this was also attended by SATU staff.

Initiatives in 2009:

Policies and procedures were developed, based on national and international best practice guidelines, which are tailor made to meet the needs of individual users.

- Utilised the links and communication network developed with other established services both nationally and internationally, i.e. UKAFN and other SATUs nationally.
- Promoted the SATU, at Mullingar Regional Hospital through education and awareness raising sessions with members of the health care professions, community Groups and organisations including, An Garda Siochana.

Training provided to the following			
Tullamore Rape Crisis Centre	Shannonbank Training & Education		
Athlone Rape Crisis Centre	Co. Longford youth Service		
Community Policing, Longford	NYPD- Navan		
Abbeyleix Garda Station	Laois Youth Service		
Kells Garda Station	A.I.T. – Student services office		
Longford Garda Station	A.I.T. – Student health centre		
Mullingar Garda Station	Social workers Longford/wmeath		
Portlaoise Garda Station	Teach Failte- Mullingar		
Tullamore Garda Station	Meath refuge- Navan		
Westmeath PHN sector meeting	Esker House- Refuge		
Longford PHN sector meeting	Family resource centre- Portlaoise		
Midland Association of Practice nurses	Longford Women's Link (DVS)		
Primary Health Care (LTM)	Westmeath Support Service Against Domestic		

Westmeath Traveller Project Violence Tullamore Traveller Movement Laois Support Service Against Domestic **Longford Traveller Movement** Violence **Longford Community Resources** Offaly Domestic Violence Support Service Community Development Westmeath R.A.P.I.D. -Co-Ordinator & Development worker (Revitalising Areas by Planning, Community Mothers Westmeath Open Door Centre -Mullingar Investment and Development) Health Promotion Unit Tullamore Route to Employment Health Promotion Unit Longford

Other Developments in 2009

The initial service was expanded to offer:

- Examinations to post pubescent 14 year olds.
- Availability of services to patients who did not wish to report the incident to the Gardai on 24 hours a day basis.
- Availability of STI screening post assault in the SATU.
- Support workers from the Rape Crisis Centre in Tullamore became a part of the on- call team in June and have been a welcome addition.
- The SATU liaison committee was formed and held its first meeting.

Challenges in 2009

Limitations on service due to the temporary location of the SATU within the hospital, the SATU operates its service from the urodynamics room adjacent to the early pregnancy unit (EPU). This prevents full service during office hours, three days every week, Monday, Wednesday and Fridays the EPU clinics run from 08.00-16.30, every Thursday evening from 18.00-20.00 Antenatal classes are held in the EPU, plus an additional Thursday a month for Urodynamics clinic 14.00-17.00.

The designated space is used as an office, storage room, and clinical room for STI screens and for forensic clinical examinations. The toilet and shower facilities are not adjacent to the examination room and the location is not discrete within the hospital.

Staffing

Due to the embargo on recruitment it has been difficult to recruit additional staff for the SATU and on call cover at weekends is being provided by four forensic examiners only.

Daytime cover was needed when the Clinical Nurse Specialist (Sexual Assault Forensic Examination) was on leave and this was provided by the on call examiners in addition to their other commitments.

CNM II was redeployed to the maternity ward November and December, resulting in difficulties of providing cover to assist with cases during the day, and limiting availability of appointments for those returning for STI screening to one and half hours per week.

Clerical Officer (half time) post, took up her post in November 2009 even though the service was in operation since February.

In Conclusion

The SATU opened in February 2009 and to date we have seen 50 patients for forensic, clinical and STI examinations. The temporary location within the hospital has led to a limited service, however the new permanent location for SATU has been identified within the hospital, unfortunately there is no fixed date for the move as yet, but this move will alleviate some of the challenges we still face. Staff will continue to promote and develop the SATU service to ensure the best care possible is delivered.



generations of care

SEXUAL ASSAULT TREATMENT UNIT (SATU) The Rotunda Hospital, Parnell Square, Dublin 1.

ANNUAL REPORT FOR YEAR ENDING: 2009

Dr Maeve Eogan and SATU Staff Date published: April 2010



Executive Summary The Rotunda Hospital 2009

Attendance re: Area

- There were 315 attendances at the SATU, a decrease of 4 (1.3%) from 2008.
- In 301 (95.6%) cases the incident took place within the Republic of Ireland.

Attendance re: Month, Notable Date or Event, Day and Time of Day

- August was the busiest month with 33 (10.5%) cases presenting.
- Sunday was the busiest day with 75 (23.8%) patients presenting on that day.
- 254 (83%) cases the incident occurred between the hours of 21.00 08.59.

Type of Alleged Sexual Crime, Assailant, Relationship to Assailant

- 269 (85.4%) patients reported recent sexual assaults; the incident occurred between 7days and 1 month in 23 (7.3%) cases; 12 cases (3.8%) occurred > 1 month prior to attendance; 7 (2.2%) were long term abuse; 2 (0.6%) women disclosed forced prostitution.
- 273 (86.7%) cases involved a single assailant; in 31 (9.8%) cases multiple assailants were involved.
- In 137 (43%) cases the patients reported that the assailant was a stranger / unknown to them.

Gender, Age Profile, Referral Source

- 300 (95.2%) patients were female, 15 (4.8%) male.
- The mean age of patients was 24; the youngest was 13, the eldest 57 years.
- 279 (88.6%) cases were referred by An Garda Siochána, 31(9.8%) were self-referred and 2 (0.6%) were referred by a GP.

Patients Reporting the incident to An Garda Siochána / Time Frame from Incident till SATU

- 282 (89.5%) patients reported the incident to An Garda Siochána.
- 263 (83.4%) the incident took place within the previous 7days, of these 243 (92.4%) were within 72 hours and 190 (72.2%) were within 24 hours.

Physical Trauma

• 15 (4.7%) attended the ED with minor trauma.

Alcohol and Drug Use

- 126 (55.3%) patients reported having consumed \geq 4 units of alcohol in the 12 hours prior to the incident.
- 20 (6.3%) patients had taken their prescribed medication, 27 (8.6%) patients disclosed taking illegal drugs.
- 5 (1.6%) patients were concerned that drugs had been used to facilitate sexual assault.

Patient awareness of whether sexual assault occurred

• 46 (14.6%) patients were unsure if a sexual assault had occurred.

Post-coital Contraception (PCC)

- 236 (75%) female patients were seen within 72 hours of the incident.
- 163 (69%) were given PCC.

Sexually Transmitted Infection Prophylaxis and STI Screening

- 74 (23.5%) patients received Chlamydia prophylaxis, 76 (24%) patients commenced a Hepatitis B immunisation programme, 16 (5%) received PEP for HIV.
- 260 (82.5%) patients were given an appointment at the SATU, of these 161 (62%) returned for first screening appointment.
- 58 (35%) of those screened had abnormal STI test results (incl. 2 screened elsewhere).

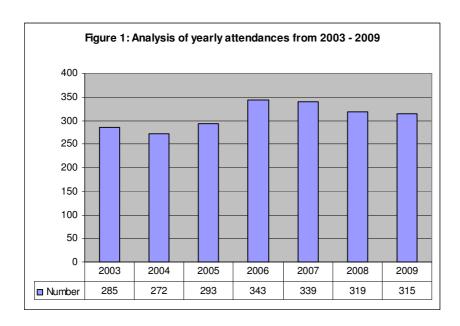
The SATU, The Rotunda Hospital

The SATU Team consists of:

- 2 Consultants in Obstetrics and Gynaecology, one of whom is Medical Director of the SATU.
- 2 Clinical Midwife Managers (1WTE).
- 2 Clinical Nurse/Midwife specialists.
- 5 Forensic Medical Examiners.
- On-call rota of Assisting Nurses.
- Administrative support (1WTE).

1. Number of Attendances

- In 2009, there were 315 attendances at the SATU.
- This showed a decrease of 4 (1.3%) from 2008 (See figure 1).



2. Country Where the Incident Took Place

- 301 (95.6%) cases took place within the Republic of Ireland.
- 14 (4.4%) cases took place outside Ireland. (See table 1).

Table 1: Analysis of the countries outside the Republic of Ireland where the alleged incident took place					
Country	No	%			
Spain	4	28.6			
Turkey	2	14.3			
United States	1	7.1			
United Kingdom	1	7.1			
South Africa	1	7.1			
Romania	1	7.1			
Portugal	1	7.1			
Philippines	1	7.1			
Italy	1	7.1			
France	1	7.1			
Total	14	100			

3. County Where the Incident Took Place

• Of the 301 cases where the alleged incident took place in the Republic of Ireland, 221 (73.4%) incidents took place in County Dublin (See table 2)

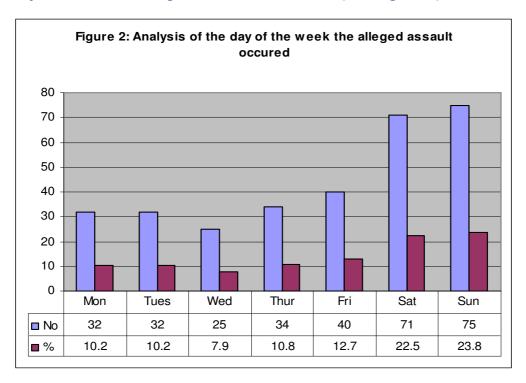
Table 2: Analysis of the county/s	where Incide	nt took
place		
County	No	%
Dublin	221	73.4
Wicklow	20	6.6
Louth	18	6.0
Kildare	14	4.7
Meath	7	2.3
Donegal	3	1.0
Galway	3	1.0
Cavan	2	0.7
Monaghan	2	0.7
Westmeath	2	0.7
Carlow	1	0.3
Clare	1	0.3
Cork	1	0.3
Down	1	0.3
Kerry	1	0.3
Laois	1	0.3
Longford	1	0.3
Sligo	1	0.3
Tipperary	1	0.3
Total	301	100

4. Month of Attendance

• 33 (10.5%) patients presented during August, making it the busiest month in 2009 (See table 3).

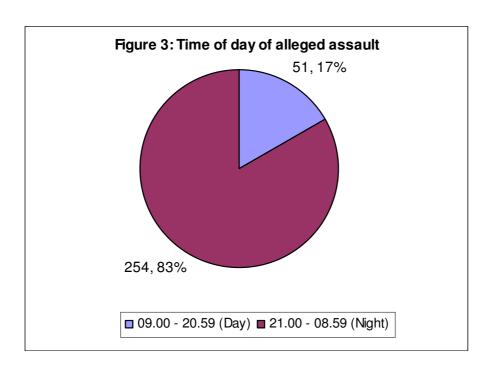
Table 3: Analysis of Month by Attendances												
	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec
No	31	26	21	22	29	29	32	33	21	28	17	26
%	9.8	8.3	6.7	7.0	9.2	9.2	10.2	10.5	6.7	8.9	5.4	8.3

5. Day of the Week Alleged Incident Occurred (See figure 2)



6. Time of Day Incident Occurred

• The majority (254, 83%) of incidents occurred during the hours of 21.00 to 08.59 (See figure 3).



7. Location where the Incident Occurred (See table 4)

Table 4: Analysis of the location of the Incident					
Location	No	%			
Other-Indoors	84	26.7			
Home	67	21.3			
Other-Outdoors	64	20.3			
Assailant's Home	61	19.4			
Car	17	5.4			
Field-Park	15	4.8			
N/A	5	1.6			
Taxi	2	0.6			
Total	315	100			

8. Type of Alleged Sexual Crime

Of the 315 patients

- 269 (85.4%) patients disclosed recent sexual assaults (incident happened < 7 days).
- 23 (7.3%) incidents occurred >7days but ≤1 month prior to attendance at the SATU.
- 12 (3.8%) cases occurred > 1 month prior to attendance.
- 7 (2.2%) disclosed long term abuse.
- 2 (0.6%) disclosed forced prostitution.
- In 2 (0.6%) cases the details were not recorded.

9. Assailant/s

9.1 Number of Assailants

- 273 (86.7%) patients reported a single assailant.
- 31 (9.8%) patients reported multiple assailants.
- In 11 (3.5%) cases the number of assailants was unknown.

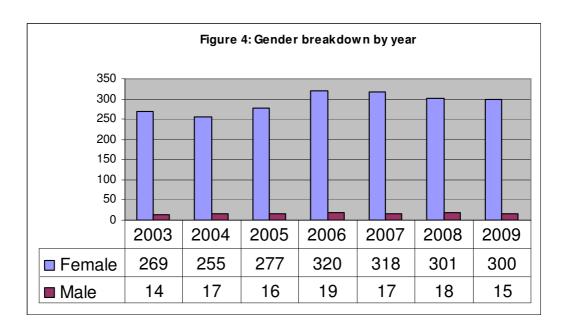
9.2 Relationship between the Patient and Alleged Assailant (See table 5)

Table 5: Analysis of relationship between the					
patient and the alleged assa	ailant				
Relationship	No	%			
Stranger	137	43			
Acquaintance	74	23			
Friend	61	19			
Intimate Partner	20	6.3			
Unknown	15	4.8			
Family Member 7 2.2					
Other	1	0.3			
Total	315	100			

10. Demographics

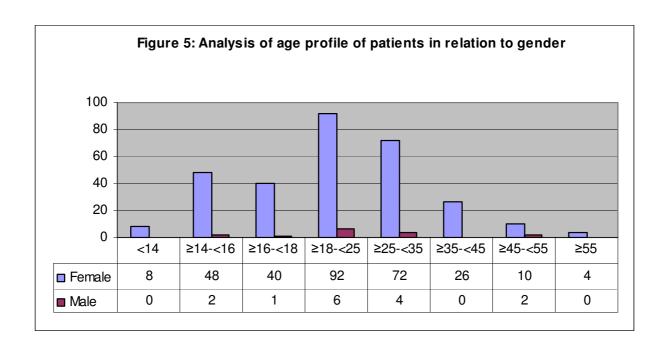
10.1 Gender

- Of the 315 patients, there were 300 (95.2%) females and 15 (4.8%) males.
- This trend is similar to that observed in previous years (See figure 4).



10.2 Age Profile (See table 6 and figure 5)

Table 6: The mean, mode and median age and the minimum and						
maximum ages of patients attending the SATU						
Mean	Mode	Median	Minimum	Maximum		
24	15	21	13	57		



10.3 Occupation

- 135 (42.9%) patients were students.
- 75 (23.8%) patients were in employment.
- 84 (26.7%) patients were unemployed.

10.4 Marital Status (See table 7)

Table 7: Analysis of marital status					
Marital Status	No	%			
Single	244	77.5			
Not recorded	28	8.9			
Separated	14	4.4			
Cohabiting	13	4.1			
Married	12	3.8			
Divorced	3	1.0			
Total	315	100			

10.5 Source of Referral (See table 8)

Table 8: Analysis of source of referral					
Referral Source	No	%			
Gardai	279	88.6			
Self	31	9.8			
GP	2	0.6			
Not recorded	2	0.6			
Other	1	0.3			
Total	315	100			

10.6 Ethnicity (See table 9)

Table 9: Analysis of ethnicity of patients					
Ethnicity	No	%			
White	299	95			
Black or Black Irish	9	2.9			
Asian or Asian Irish	5	1.6			
Not recorded	1	0.3			
Roma	1	0.3			
Total	315	100			

11. Type of Attendance: Reporting / Non-reporting

In 2009 we extended our service to offer care for men and women who did not wish to report an incident to An Garda Siochana.

Of the 315 patients that attended the SATU:

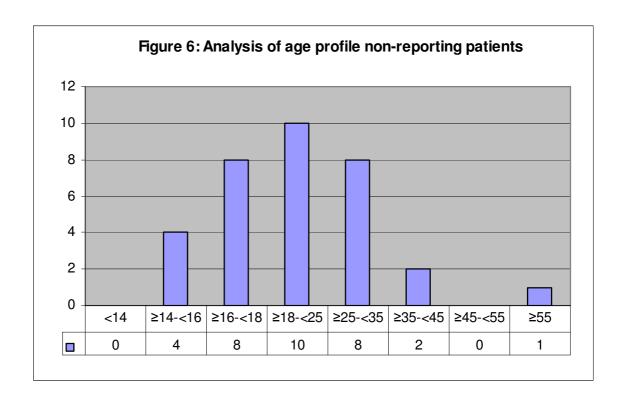
- 282 (89.5%) reported the incident to An Garda Siochána; of these 264 (93.4%) had forensic samples taken.
- 137/282 (48.6%) reporting and 27/33 (81.8%) non-reporting patients had an STI screen.

11.1 Summary Characteristics of non-reporting patients

Of the 33 (10.5%) non-reporting patients in 2009:

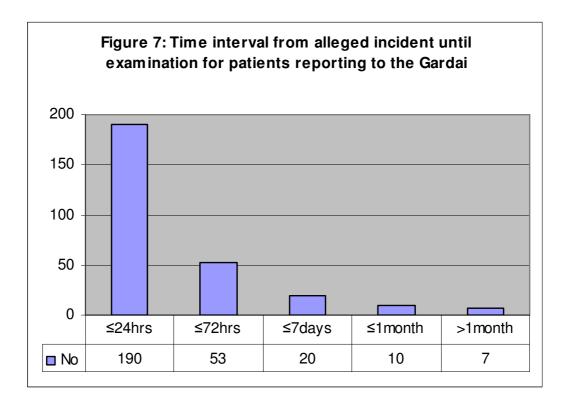
- All were female with an average age of 23.5 yrs (max = 55; min = 15). See figure
 HSE Social Work referral was made for all patients under the age of 18 years in line with Children First Guidelines.
- 32/33 were White, 1/33 was Asian or Asian Irish.
- 18 (54.5%) were students, 7 (21.2%) unemployed, 7 (21.2%) employed and 1 not recorded.

- 28 (84.8%) were single, 2 (6.1%) were married and the remainder were cohabiting (n=1), separated (n=1) and not recorded (n=1).
- 10 (30.3%) disclosed that the assault occurred within 7 days of attending the SATU (including 2 ≤24hrs and 6 ≤72hrs), 14 (42.4%) occurred between 7 days and 1 month and 7 (21.2%) occurred > 1 month previously.
- 22 (66.7%) incidents occurred in the Republic of Ireland; 11 (33.3%) occurred abroad namely in Spain (n=4), Turkey (n=1), France (n=1), United States (n=1), Philippines (n=1), Italy (n=1) and Portugal (n=1).
- 25 (75.8%) patients were sure that a sexual assault had occurred.
- In 27 (81.8%) cases there was a single assailant; In 3 cases (9.1%) 2 assailants were involved. The number of assailants was unknown in the remaining 3 cases.
- In 15 (45.5%) patients the assailant was a stranger, in 9 (27.3%) patients the alleged perpetrator was a friend, in 5 cases an acquaintance of the patient was involved. Details were unknown in the remaining 4 cases.
- 23 (69.7%) of the non-reporting patients had consumed alcohol in the 12 hrs prior to the alleged assault. The mean number of units consumed was 8.7 (min=1, max=15 and mode=10).
- 8 (24.2%) patients received PCC.
- The most common reason for not receiving PCC was duration between the assault and attendance at the SATU (n=21). Other reasons included: No penile penetration (n=1), Menopause (n=1) and not recorded (n=1).
- There were 9 (33%) abnormal results in the 27 patients who had STI screens in this cohort: 4 Chlamydia, 4 Candida and 2 Bacterial Vaginosis.



12. Patients Reporting to An Garda Siochána:

- 264 (83.8%) patients reported the incident to An Garda Siochána.
- 263 (83.4%) patients reported that the incident took place ≤ 7days, of these
 - o 243 (92.4%) were within < 72 hours of their attendance at SATU,
 - o 190 (72.2%) were within 24 hours of their attendance at SATU (See figure 7).



13. Patients Awareness of Whether a Sexual Assault had occurred

- 269 (85.4%) felt that a sexual assault had occurred.
- 46 (14.6%) were unsure if a sexual assault had occurred.

14. Physical Trauma

• 15 attended the Emergency Department with minor trauma.

15. Alcohol and Drug Use

15.1 Alcohol

• 228 (72.4%) patients had consumed alcohol in the 12 hours prior to the assault. (See table 10),

of these

o 126 (55.3%) patients had consumed \geq 4 units of alcohol

- o 20 (8.7%) patients had consumed at least 15 units of alcohol
- o In 68 (29.8%) cases the units of alcohol consumed by the patient were unknown

Table 10: Analysis of the mean, median and mode: relevant				
to the amount of alcohol consumed in the 12 hours, prior to				
the alleged assault	the alleged assault (n=228)			
Mean Median Mode				
8.2	8	6		

15.2 Drugs

- 48 (15.2%) patients had taken drugs, of these
 - o 1(2%) had taken over the counter medication
 - o 20 (41.7%) were on prescribed medication
 - o 27 (56.3%) disclosed having taken illegal drugs
- Of all 315 patients seen in 2009, 5 (1.6%) were concerned that drugs had been used to facilitate sexual assault.

15.3 Both Alcohol and Drugs

• 42 (13.3%) patients disclosed taking both alcohol and drugs.

16. Post-coital Contraception (PCC)

- 236 (75%) female patients were seen within 72 hours of the incident, of these
 - o 163 (69%) were given PCC
 - o The remainder 73 (31%) did not receive PCC for various reasons (See table 11)

Table 11: Reasons female patients seen within 72 hours did not receive PCC in the SATU ($n = 73$)				
Reason	N	(%)		
No penile penetration	28	38		
Contraception	23	32		
Hysterectomy/Menopause	11	15		
Had PCC	5	6.8		
Menstruating	3	4.1		
Other	1	1.4		
Pregnancy	1	1.4		
Refused	1	1.4		
Total	73	100		

17. Sexually Transmitted Infection (STI) Prophylaxis and Screening

From 7th September 2009 all SATU attendees were offered on-site prophylaxis against Chlamydia and immunisation against Hepatitis B. Post-exposure prophylaxis for HIV was also offered if required.

17.1 STI Prophylaxis

- 74 (23.5%) patients received Chlamydia prophylaxis.
- 16 (5%) patients received post exposure prophylaxis treatment for HIV.
- 76 (24%) patients commenced a Hepatitis B immunisation schedule, of these
 - 4 (30.8%) have completed the course at the SATU to date (data extracted Jan 2010).

17.2 Follow up Appointments for Screening

• All 315 patients were offered screening for STIs. (See table 11).

Table 12: Analysis of follow up screening for STIs						
	N (%)	Kept	Kept	Kept		
		1 st App	Арр	3 rd App		
		(%)	(%)	(%)		
Given SATU appt. for follow up screening	260	161	85*	10*		
Given SATO appt. for follow up screening	(82.5)	(62%)	(32.6%)	(3.8%)		
Attended another service for follow up	20 (6.4)		I	I		
Not recorded	30 (9.5)					
Refused a follow up appointment	4 (1.3)					
Appointment not given	1 (0.3)					
Total	315 (100)					

^{*} These figures represent appointments kept at the time of this report, many 2nd and 3rd appointment dates have yet to occur.

17.3 Outcome of the STI Screening Carried Out by the SATU (n = 164: 161 at the SATU; 3 elsewhere)

• 58 (35%) had abnormal results (See table 13).

Table 13: Abnormal STI screening results ($n = 58$, some patients had more than one positive result)					
Abnormal results	N	(%)			
Chlamydia	16	27.6			
Chlamydia + Bacterial Vaginosis	9	15.5			
Candida	25	43.1			
Bacterial Vaginosis	30	51.7			
Hepatitis B ± C Positive	0	0			
Syphilis	0	0			
Gonorrhoea	1	1.7			
HIV	0	0			

 Of the 16 (27.6%) positive results for Chlamydia, 1 (6%) had received prophylactic treatment.

18. SATU Developments, Activities, Opportunities and Challenges

18.1 Developments in 2009

18.1.1 The SATU database

The SATU database is a password protected Access 2003 database that was designed to prospectively record key data on each case seen at the SATU. Each record is identifiable in the database by chart number only, ensuring the anonymity of all patients. In addition, access is restricted to certain members of the SATU team only to ensure the confidentiality and integrity of the data.

It is envisaged that this database will assist greatly in the writing of reports, papers and presentations, as data can be extracted with ease using many of the pre-designed queries or queries can be designed ad-hoc based on user requirements. The database will also facilitate reviewing the data over consecutive years to identify emerging trends and possible targets for intervention strategies. Performance targets such as time (and any delays) between attendance and examination can also be monitored.

The database was rolled out nationally in January 2010, with 2009 data being inputted retrospectively.

The considerable inputs of Anne McHugh, Valerie Jackson and Rita O'Connor in getting the SATU database up and running must be acknowledged.

18.1.2 Modifications to Clinical Record

Significant modifications to the Patient Clinical Record were made in 2009, with a view to including all fields to be completed in the database in the patient chart. Although the chart was developed and tested in 2009, it was not formally introduced in the SATU until January 2010.

The new chart aims to collect all required information and permissions/consents, it also reflects recent changes in practice, including STI prophylaxis. This chart has been developed in conjunction with staff from the other SATUs and ultimately a version of the chart will be used in all units nationally.

18.1.3 SATU Website

An SATU section on the Rotunda Hospital website (www.rotunda.ie) went live in 2009. This provides information for patients and practitioners on the SATU and its services. Advice on care available to men and women who may not wish to report an incident to An Garda Siochana is also offered. Links to other relevant websites are also available. The website also provides information for doctors and nurses/midwives on SATU education programmes and affiliated courses.

18.2 Interdisciplinary SATU Liaison Meetings

The SATU Liaison group (which includes Dublin Rape Crisis Centre, Garda Liaison Officer, Medical Director, Sexual Assault Forensic Examiners, Nurses and Administration Support Staff) met quarterly during the year.

These meetings are a valuable opportunity to discuss relevant issues pertaining to SATU facilities and care and ensure that all staff from the various agencies are appraised of changes and developments as they arise.

Minutes of each meeting are taken and attendance is recorded.

18.3 Educational and Training Events

A study day entitled 'Current Issues in Management of Rape and Sexual Assault' was held at the Rotunda in October 2009. This multidisciplinary conference was attended by staff from all 6 SATUs around the country, and also by staff from other hospitals and affiliated agencies. The study day focussed on recent changes in SATU service provision, including the health promotion aspects of the service. There was also a presentation on data collection, encompassing discussion on the National

Documentation and Database. A very useful workshop on written and oral evidence was also included.

18.4 Publications and Presentations

SATU staff were invited to give a number of presentations in 2009. These included:

1. Mary Holohan

Rape and Health Consequences. RCOG Forensic Gynaecology Course May 2009

2. Maeve Eogan

Recent Advances in Forensic Gynaecology. Institute of Obstetricians and Gynaecologists, September 2009.

Recent Advances in SATU services. Department of Obstetrics and Gynaecology, University College Hospital, Galway. September 2009.

3. Moira Dolan (CMM)

Role of the Assisting Nurse in SATU. IFPA March and September 2009

4. Aideen Walsh (CNS SAFE)

Care of victims of sexual violence in the Emergency Department. Postgraduate
Diploma in Paediatric Nursing. UCD-OLCHC & TCUH. March 2009. and
Postgraduate Diploma in Emergency Nursing, Trinity College / AMNCH. March 2009.
Care of victims of sexual assault in SATU, Rotunda Hospital. Support Workers,
Dublin Rape Crisis Centre. March 2009.

Care of victims of sexual assault. Society for the Study of Sexually Transmitted Diseases in Ireland. March 2009 and the Campus Nurses, DIT. July 2009.

Sexual Assault Forensic Examination. BSc. DCU. March 2009.

Role of the Clinical Nurse Specialist (SAFE). Clover Hill Prison Nurses, July and September 2009

Role of the Clinical Nurse Specialist (SAFE). Bachelor in Midwifery Studies, TCD, September 2009

SATU Data Collection, A Progress Update. Rotunda Hospital, October 2009

Care of Victims of Sexual Assault. Centre of Education, Store Street Garda Station,

October-November 2009.

5. Deirdra Richardson (CMS SAFE)

Deirdra has developed a Sexual Assault Risk Reduction programme, which she has begun to deliver in schools around the Dublin area. The teaching session includes the

meaning of sexual assault, sexual awareness, sexual limits and bodily respect, roleplay and assertiveness. She has also given presentations to Dublin Fire Brigade and Store Street Garda Station on responding to Rape and Sexual Assault.

6. Anne McHugh:

Did Sherlock Holmes have a Nursing Background? The Nurse & Forensics Irish Association of Advanced Nurse Practitioners. May 2009.

Rape/Sexual Assault: Developing Comprehensive Care. National Council for Professional Development of Nursing & Midwifery (NCNM) and Staff from the HSE West. May 2009

Sexual Assault from Care Delivery to the Legal Bench: Striving for Excellence. NCNM, National Conference. Nov. 2009

Congratulations to Dr Gouri Columb on completion of the Postgraduate Diploma in Sexual Assault Forensic Examination at UCD.

18.5 Opportunities in 2010

- It is aimed that 2010 will see full implementation of the modified patient record, and that both this and the database will be used in all 6 units around the country.
- Further developments of the health promotion aspects of the service are also anticipated – including provision of brief intervention programmes regarding alcohol use and ensuring full implementation of the STI prophylaxis programme.
- It is hoped that the continued availability of SATU services for both reporting and nonreporting patients will enable men and women to promptly seek the care they require so that potential long-term health effects of a sexual assault are minimised.
- It is anticipated that a second Higher Diploma in Nursing (Sexual Assault Forensic Examination) will take place at the RCSI in 2010. Training a second cohort of nurses/midwives will ensure that the significant developments in SATU services that have taken place over the past year will be sustained and that further developments will continue.
- Aideen Walsh (CNS SAFE) and Deirdra Richardson (CMS SAFE) will complete the RCSI Nurse Prescribing programme in 2010. This will equip them with knowledge and skills required to prescribe a range of necessary drugs (eg PCC, analgesia, relevant antibiotics) for patients within the SATU.

Acknowledgements

I would like to acknowledge the assistance of all SATU staff during my first year as medical director. In particular I would like to thank Mary Holohan for her continued advice and support.

This report highlights the significant amount of work done by a very committed team, and their availability to provide holistic care to patients at a time of crisis is acknowledged. The commitment of staff to service development is also very much appreciated; there is a consistent aim to progress the breadth and depth of care the SATU offers, and staff are constantly alert to ways we can improve patient care. That commitment to development and change is very much acknowledged.

I'm sure I speak for all staff in thanking our administrative duo, Rita O'Connor and Eileen Tunney for all their hard work over the past year.





SEXUAL ASSAULT TREATMENT UNIT Waterford Regional Hospital. Waterford.

ANNUAL REPORT FOR YEAR ENDING: 2009

Authors: Ms. Sinead Boyle
Clinical Nurse Specialist (Sexual Assault Forensic Examination)
Ms. Agnes Cooney Lee, Clinical Nurse Manager 2
Date published: April 2010

Executive Summary Waterford Regional Hospital SATU 2009

Attendance re: Area

- There were 51 attendances at the SATU, a decrease of 5.5% from 2008.
- In 50 (98%) of the cases it was reported that the incident took place within the Republic of Ireland.

Attendance re: Month

- September was the busiest month with 8 (15.5%) cases presenting.
- December had the least number of cases with just 1 case presenting.

Type of Alleged Sexual Crime, Assailant, Relationship to Assailant

- 51 (100%) patients reported recent sexual assaults; 1 (1.96%) person reported forced prostitution.
- 50 (98.04%) patients reported a single assailant; 1 (2%) case reported multiple assailants.
- 16 (31.37%) cases it was reported the assailant was a stranger / unknown to the patient.

Gender, Age Profile, Referral Source

- 49 (96%) patients were female, 2 (4%) were male.
- The age mean was 26.8 years, the youngest was 14 years, the eldest 64 years (the minimum age criteria for attendance at the SATU is 14 years).
- 46 (90.2%) patients were referred by An Garda Siochána, 3 (5.88%) self referred, 2 (3.92%) were referred by a Social worker.

Patients Reporting to An Garda Siochána / Time Frame from Incident till SATU

- 51 (100%) patients reported the incident to An Garda Siochána.
- 51 (100%) \leq 7days, of these,
 - 46 (90%) were within < 72 hours since the incident, with 33 (64.77%) within 24 hours.

Support Worker in Attendance

 A support Worker from the RCC was in attendance for 47 (92%) people who attended the SATU.

Alcohol and Drug Use

- 37 (72.5%) patients reported having consumed ≥ 4 units of alcohol in the previous 12 hours.
- 3 (5.88%) patients had taken illegal drugs.
- 4 (7.8%) patients were unsure if a sexual assault had occurred.

Post-coital Contraception (PCC)

• 37 (82.2%) of the 45 female patients seen within 72 hours of the incident, were given PCC.

1. The SATU, Waterford Regional Hospital

The SATU Team consists of:

• Medical Director: Dr. John Bermingham

• CNS (SAFE): Ms. Sinead Boyle

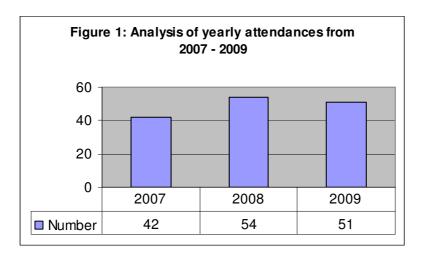
• A/ Clinical Nurse Manager: (0.5 post) Ms. Agnes Cooney Lee

• On-call Doctors: 14 (13 GPs and 1 Consultant Obstetrician /Gynaeacologist)

• Support Nurses: 16

2. Number of Attendances

- In 2009, there were 51 attendances at the SATU.
- This showed a *decrease* of 3 (5.5%) from 2009 (See figure 1).



3. Country Where the Incident Took Place

- 50 (98%) of the cases the incident was reported as occurring within the Republic of Ireland.
- 1 (2%) case was reported to have taken place in Great Britain.

4. County Where the Incident Took Place

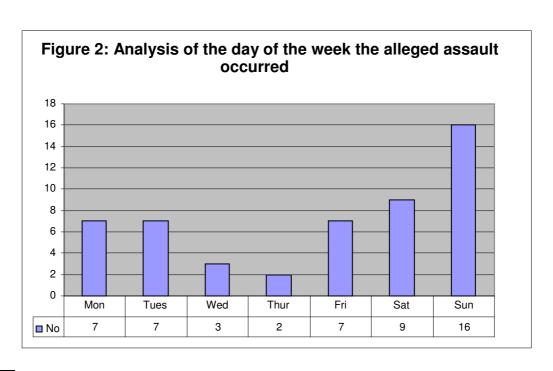
• The 50, where the incident was reported as occurring within the Republic of Ireland the referrals were from various counties (See table 1).

Table 1: Analysis of the counties where the incident was reported to have taken place County No %					
		, ,			
Waterford	14	28%			
Wexford	10	20%			
Tipperary	9	18%			
Carlow	4	8%			
Kilkenny	12	24%			
Limerick	1	2%			
Total	50	100%			

5. Month of Attendance (See table 2)

Tab	Table 2: Analysis of Month by Attendances											
	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec
No	4	2	7	5	2	6	3	5	8	4	4	1
%	8%	4%	13.5%	9.8%	4%	11.6%	5.8%	9.8%	15.6%	8%	8%	1.9%

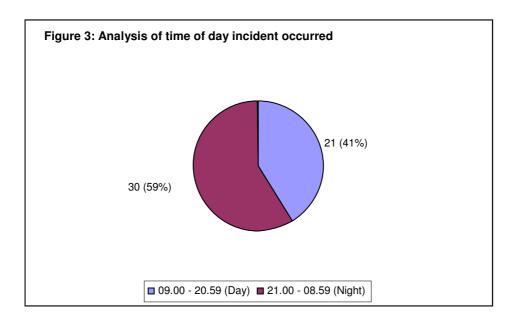
6. Day of the Week Incident Occurred (See figure 2)



7. Time of Day Incident Occurred (See figure 3)

Day time recorded as: 09.00hrs-20.00hrs.

Night time hours recorded as: 20.00-09.00hrs.



8. Location where the Incident Occurred (See table 3)

Table 3: Analysis of the location of the Incident					
Location	No	%			
Home	17	33.33%			
Assailants home	7	13.73%			
Car	2	3.92%			
Street	3	5.88%			
Field / Park	4	7.84%			
Other indoors	9	17.65%			
Other outdoors	9	17.65%			
Total	51	100%			

9. Type of Alleged Sexual Crime

- 50 (98%) patients reported recent sexual assaults.
- 1 (2%) patient disclosed forced prostitution.

10. 1 Assailant/s

- 50 (98%) patients reported a single assailant
- 1 (2%) case, reported multiple assailants

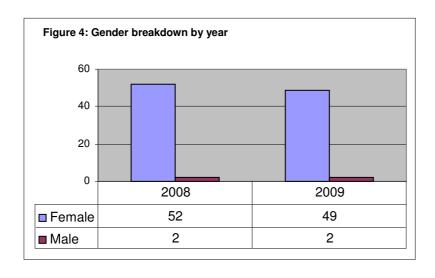
10.2 Relationship between the Patient and Alleged Assailant (See table 4)

Table 5: Analysis of the relationship between the patient and the alleged assailant				
Relationship	No	%		
Friend	7	13.7%		
Acquaintance	13	25.5%		
Stranger	16	31.2%		
Family Member	4	7.8%		
Intimate Partner	6	11.8%		
Ex-intimate Partner	4	7.9%		
Other	1	1.9%		
Total	51	100%		

11. Demographics

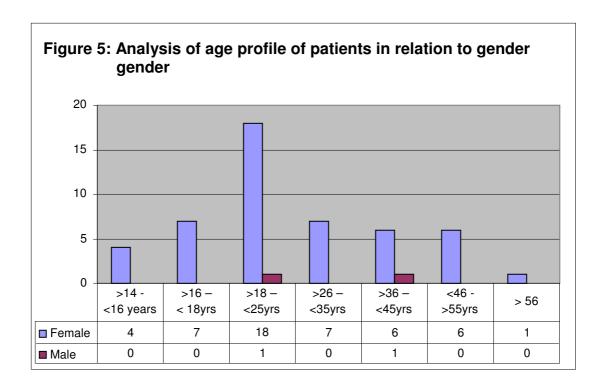
11.1 Gender

- Of the 51 patients 49 (96 %) were females and 2 (4%) were male.
- Gender Trends (See figure 4)



11.2 Age Profile (See table 6 and figure 5)

Table 6: The mean, mode and median age and the minimum and maximum ages of patients attending the SATU					
Mean	Mode	Median	Minimum	Maximum	
26.82	21	21	14	64	



11.3 Occupation

- 14 (27.45%) were students
- 16 (31.37%) were in employment
- 21 (41.17%) were unemployed

11.4 Source of Referral (See table 7)

Table 7: Analysis of source of referral					
Referral Source	No	%			
Garda Siochana	46	90.20 %			
Self	3	5.88 %			
Doctor/Hospital	1	1.96%			
Other/Social Worker	1	1.96 %			
Total	51	100%			

11.5 Ethnicity (See table 8)

Table 8: Analysis of ethnicity of patients						
Ethnicity No %						
White	50	98,03				
Other 1 1,96						
Total	51	100%				

12. Support Worker in Attendance

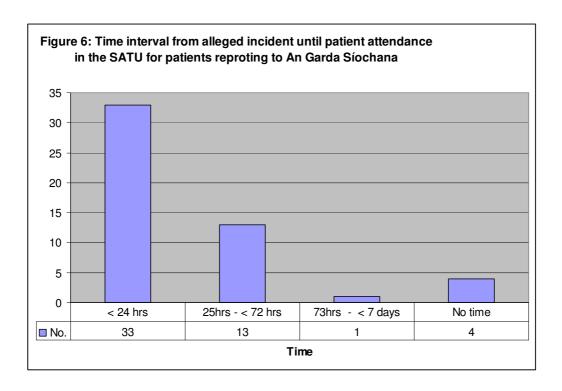
• 47 (92.15 %) patients had a Support Worker at the initial SATU attendance.

13. Type of Attendance: Reporting / Non-reporting

 All 51 (100%) patients reported the incident to An Garda Siochána and had a forensic clinical examination carried out.

14. Time Interval from incident to attendance in SATU

- In 46 (90.2%) cases, the time interval from the incident till the patients attendance in SATU, was within 72 hours.
- In 33 (64.7%) cases, the time interval from the incident till the patients attendance in SATU, was within 24 hours (See figure 6).



15. Patients Awareness of Whether or Not a Sexual Assault had Occurred

- 47 (92.15%) felt that a sexual assault had occurred.
- 4 (9.0%) were unsure if a sexual assault had occurred.

16. Alcohol and Drug Use

16.1 Alcohol

- 37 (72.54%) had consumed alcohol in the previous 12 hours prior to attending the SATU.
- All 37 (72.54%) reported having consumed ≥ 4 units of alcohol.

16.2 Drugs

• 3 (5.88%) patients reported having taken illegal drugs.

17. Post-coital Contraception (PCC)

- 45 (88.23%) female patients were seen within 72 hours of the incident, of these 37 (82.22%) were given PCC.
- The remaining 8 (17.78%) female patients did not receive PCC for various reasons.

18 . SATU Developments, Activities, Opportunities and Challenges

18.1 Developments in 2009:

- Commencement of CNS (SAFE) (full time) in SATU.
- Extension of the SATU premises completed.
- Raised profile of the SATU through liaising with victim support agencies and written communication provided.
- SATU now represented on the local area network of services (LAN) and Regional Advisory Committee on Domestic, Sexual and Gender Based Violence by Sinead Boyle, CNS (SAFE).
- Representation of WRH SATU on National SATU Steering Group.

18.2 Multi-Interdisciplinary SATU Liaison Meetings:

The SATU Advisory Group consisting of a representative from Waterford Rape and Sexual Abuse Centre, Local Garda Liaison Officer, ADON, Community Paediatrician, CNS (SATU), CNM2 (SATU), GP representative and Primary Care Manager met on four occasions in 2009. Minutes of all the meetings and attendance were compiled.

18.3 Educational and Training Events:

- On going education sessions were provided to An Garda Siochana as part of in service training for the jurisdiction by Sinead Boyle, CNS (SAFE).
- Ongoing education sessions and training provided to the on-call nurses for SATU were provided on two occasions by Sinead Boyle CNS (SAFE).
- An in service training day was provided by medical/nursing and legal representatives for the on-call Forensic Clinical Examiners in the SATU.
- Two of the on-call Doctors have completed the Certificate in Forensic Medicine and one has commenced the Higher Diploma in Forensic Medicine.

18.4 Publications and Presentations:

- 2009 Annual report now complete.
- The National Guidelines on Referral and Forensic Clinical Examination in Ireland are currently being updated, WRH SATU took part in the evaluation of the current document and will form part of the critical readers of this document.

