

Orange County Rape Crisis Center Sexual Assault Response Guidelines

Approved by Board of Directors on January 22, 2008

I. INTRODUCTION

The mission of the Orange County Rape Crisis Center is to stop sexual violence and its impact through support, education, and advocacy. The Center envisions a just and equitable world free of sexual violence and all other forms of oppression. The Orange County Rape Crisis Center is committed to collaborating as a SART member agency to improve response to survivors of sexual assault throughout Orange County.

The Orange County Rape Crisis Center, hereafter referred to as Rape Crisis, will provide unconditional support, information, and advocacy to survivors of sexual assault and their non-offending family members, friends, and significant others. Rape Crisis will also provide assistance and support to other professionals responding to sexual violence survivors. For both survivors and professionals, it is best that Rape Crisis be involved in the response as soon as possible.

Rape Crisis advocates who provide 24-hour crisis and response services to the community are called Companions. Rape Crisis has a 24-hour crisis and response line (1-866-WE LISTEN toll free, or 967-7273 locally) that is answered by staff or volunteer Companions who have completed 63 hours of training. Companions can provide information, support, and crisis intervention over the telephone and/or in person. Companions also provide accompaniment to medical services and/or to report to law enforcement, as well as accompaniment to court. Rape Crisis also offers support groups, referrals to long-term counseling/therapy, community education and professional training.

Accessing the Orange County Rape Crisis Center

- Sexual violence survivors, or professionals who are working with them, may access the crisis line 24 hours a day and receive an immediate response from our on-call Companion volunteers. . During 9 a.m. – 5 p.m. the crisis line is answered at our offices by either staff or volunteers.
- After normal business hours (Monday-Friday, 9am-5pm), the crisis and response line is forwarded to a bi-lingual (English/Spanish) answering service which can immediately page the on-call Companion. When a survivor requests accompaniment or face-to-face contact of any kind that is off-site, two Companions always respond.
- If the person accessing the 24-hour crisis line is a Spanish-speaking individual, every attempt will be made to have a Spanish-speaking Companion immediately respond. The client may have to give her/his phone number to have a Spanish-speaking Companion call back within 20 minutes. If no Spanish-speaking

Companion can be reached, or if the caller speaks a language other than Spanish, the AT&T Language Line will be utilized.

- A Companion is also accessible to people who are deaf and hard of hearing via a TTY machine (919-338-0746), which is answered during business hours Monday through Friday, 9 a.m.-5 p.m. After hours, people who are deaf or hard of hearing can access the 24-hour crisis line by using NC Relay Service (711).

II. POLICIES AND PROCEDURES

Rape Crisis Companions

1. When the survivor's first contact in the immediate aftermath of an assault is to a Rape Crisis Companion, the Companion will assist the survivor in assessing her/his safety and in developing a plan of action. The Companion will provide the survivor with appropriate information regarding Rape Crisis services, medical treatment (including pregnancy and STI prevention), the Sexual Assault Evidence Collection Kit, the possibility of obtaining a Civil No Contact Order for Stalking or Nonconsensual Sexual Conduct, options for reporting to Law Enforcement, the Rape Victim's Assistance Program and the Crime Victim's Compensation Fund.
2. The Companion will provide services to the survivor in a manner that facilitates the survivor to feel supported, believed, and empowered. The Companion should never interact with a survivor in a negative manner, nor should the Companion allow her/his personal thoughts, feelings, or beliefs to influence the way in which s/he provides services to the survivor.
3. The Companion will assist the survivor in evaluating her/his medical and legal options and in developing a plan of action, including, when applicable, contacting other SART members for information and assistance.
4. If the survivor decides to have a medical examination and physical evidence collected, the Companion will ask the survivor to call the OCRCC crisis line once they arrive at the UNC Hospital Emergency Department. If the survivor wishes, the Companion will also contact the Emergency Department ahead of time to inform the Emergency Department to page the on-call SANE nurse. The client's name will be kept confidential at this time.

The Companion will also help the survivor identify transportation. OCRCC can provide a client with a taxi to the Emergency Department if it is necessary or if Law Enforcement transport is not an option. If a gun or knife was used in the assault, the Emergency Department will automatically contact Law Enforcement to report.

The Companion will inform the survivor that Law Enforcement will be contacted upon her/his request. The Companion will give the survivor information about her/his right to make a full or blind report or not speak to Law Enforcement at this time. The Companion will also give the survivor information about how the different

reporting options will affect her/his ability to access Rape Victim's Assistance Funds and/or Crime Victim's Compensation Funds.

5. If the survivor is under the age of 18, the Companion will give her/him information about her/his rights to seek medical care and report to Law Enforcement. If the survivor is a minor, a parent or guardian must give consent for medical treatment. However, a minor can give effective consent for the prevention, diagnoses, and treatment of STIs, pregnancy, and emotional disturbance without the consent of a parent or guardian. A minor can also give effective consent to have a Sexual Assault Evidence Kit collected. A minor cannot make a blind report to Law Enforcement without the consent of her/his parent or guardian because of the responsibility of Law Enforcement to report crimes against minors to the parents and/or guardians of the minor. Minors are able to make a full report to Law Enforcement, who will notify the parents/guardians of the assault.
6. The Companion will caution the survivor not to wash, bathe, brush her/his teeth, urinate, douche, change clothes, gargle, clean up, or touch anything from which evidence may be collected. The Companion will explain that doing so may destroy evidence. Also, the survivor will be warned by the Companion that her/his clothes will likely be taken as evidence and will encourage the survivor to bring a change of clothes to the hospital. In the event that the survivor has already changed clothes since the assault, the Companion will advise the survivor to place each article of clothing, especially underwear, into separate paper bags and bring them with her/him to the hospital. Rape Crisis provides survivors with extra underwear and clothing in the Emergency Department if the survivor's clothes are taken as evidence and s/he was not able to bring a change of clothing to the Emergency Department. The SANE nurses have access to this clothing and will provide it to the survivor.
7. Sexual assault examinations should not be used to determine whether or not sexual activity has occurred, as with a parent seeking to determine whether a teenage daughter has been sexually active. Furthermore, the presence or absence of physical injury should not be used to rule out the fact that an assault occurred; rather it is one factor to be considered.
8. Upon arrival at the Emergency Department, the Companion will check in with medical personnel and will work with the medical personnel to facilitate a quick and discreet check-in procedure. The Companion will advocate for the survivor to be able to wait in the Family Conference Room if it is available until the SANE nurse is available to meet with the survivor.
9. Companions will advocate with medical providers, law enforcement officials, members of the District Attorneys Office, etc on behalf of survivors when necessary. Companions should always do so in a professional manner, and may contact Rape Crisis Staff for assistance.

10. Although it is the District Attorney's responsibility to explain prosecution procedures to the survivor, the Companion will have a general understanding of the criminal justice system and will be prepared to help the survivor understand the process and what to expect in court. A Companion will never give legal advice to a survivor. The Companion can also act as a liaison between the District Attorney and the survivor and will accompany the survivor to meetings with the District Attorney as well as to the trial.
11. If the survivor needs an emergency shelter placement, the Companion will contact the volunteer on-call for the Family Violence Prevention Center (FVPC). FVPC will follow their guidelines regarding emergency shelter placement.
12. If the survivor requests information regarding pregnancy termination and/or accompaniment to pregnancy termination services, a Companion will be available to provide these services.
13. Secondary survivors are friends, family members and partners of a sexual violence survivor. They also have been victimized by the assault and will go through a healing process that can be similar to the primary survivor. The responsibility of the Companion supporting the secondary survivor is to her/him, not the primary survivor, so the Companion will concentrate on the concerns of the secondary survivor.
14. Rape Crisis will work with undocumented immigrants and provide the same services we provide to all other clients.
15. Rape Crisis Companions who speak Spanish or other languages will not interpret between clients and medical personnel, law enforcement, or in legal and court settings. This is in order to protect the client's case as well as Companions.
16. North Carolina Rape Crisis Center workers, including Rape Crisis Companions, have legally protected client relationships. In 2001, North Carolina established a qualified testimonial privilege for communications with Rape Crisis Centers and Domestic Violence Programs. See attached NC General Statute 8-53.12.

Rape Crisis Companions and Law Enforcement

17. With the survivor's permission, or at her/his request, Companions will meet with a survivor at the Law Enforcement agency to support the survivor while s/he is making a report, giving an interview, reviewing a photo line up, creating a composite sketch, etc. Companions will also note any concerns that arise during the interview. It may, at times, be appropriate for the Companion to speak on behalf of the survivor, but it is never appropriate for the Companion to speak for the survivor. Survivors or Law Enforcement can contact a Companion to support the survivor by calling the 24-hour crisis and response line (1-866-WE LISTEN toll free or 967-7273 locally).

18. Companions will only go to the scene of the crime to support a survivor if the following conditions are met: a) Law Enforcement officials are present at the scene and have declared it safe and secure; b) there is NO potential for additional violence AND; c) a Rape Crisis Staff member is aware and approves of the Companion's presence on scene.
19. In the event that Law Enforcement is unable to file charges, e.g. the incident did not meet the elements of a crime, Rape Crisis is always available to provide crisis intervention and follow-up assistance to survivors of all types of sexual violence and can respond on-site if desired.
20. If the survivor does report the assault to law enforcement, it is up to her/him how much or how little information to give law enforcement about the assailant and the assault. The survivor may prefer to make what is called a "blind" report to protect her/his anonymity. A blind report notifies the police that a crime has occurred, but the survivor does not have to give her/his name to the police. In this way, the police get all the other important information about the assault and the assailant, and the survivor's identity is not disclosed. This information is to be used by the police as a way to track criminal activity, but will not start an investigation or lead to an arrest.
21. If a survivor is reluctant to report a rape or sexual assault to law enforcement, the Companion will ensure that the survivor understands that filing a blind report allows her/him to keep options open. If the survivor initially gives a blind report of the assault, the Companion will remind the survivor that s/he can at any time later add her/his name and any other information to the report, especially if s/he later decides to prosecute. Companions can also make blind reports on behalf of victims, but it is always preferable if survivors make the reports themselves with the support of her/his Companions.
22. The Companion will ensure that the survivor understands that in order to receive Rape Victims Assistance money, s/he must make at least a blind report to police.
23. *A note about UNC Department of Public Safety Reporting Policy:* Companions should inform people who have experienced sexual violence on UNC campus and are interested in reporting that they should consult the police about their reporting options. If UNC Public Safety knows of a sexual assault that has occurred on campus and the assailant is unknown or might be a threat to a wide range of people, they have a duty to investigate and warn the campus community. This may mean that information about or pictures of the assailant may need to be distributed even if the survivor is uncomfortable with this. Companions will not promise survivors the same blind reporting options that might be available in other jurisdictions.

Rape Crisis Companions and the Hospital Emergency Department

24. When the survivor presents at the Emergency Department with the purpose of having evidence collected and receiving medical attention, the triage nurse will offer to contact Rape Crisis to accompany the survivor. Companions will be contacted by the triage nurse with the written permission of the survivor. Before the start of the evidentiary exam, the SANE Nurse will verify whether the survivor would like a support person (e.g. a Companion) contacted to be present during the exam.
25. Upon arrival at the Emergency Department, the Companions will discreetly check-in with the UNC Hospital Police to receive volunteer ID badges and parking passes. The Companions will then check with medical personnel to determine the location of the survivor. If the survivor is meeting with medical personnel or Law Enforcement, the Companion will ensure that the survivor is aware that the Companion is present and wait for an appropriate time to connect with the survivor.
26. The Companion will introduce him or herself to the survivor and clarify that the survivor is comfortable with the Companion remaining present.
27. If the survivor is not interested in receiving services at that time, the Companion should offer to contact the survivor at a later time to check-in with her/him. If the survivor would not like the Companion to check-in, the Companion should give the survivor a Rape Crisis card and encourage her/him to call at anytime in the future (even months or years from now).
28. If the survivor would like support, the primary Companion will remain with the survivor. The Companion will inform the survivor that s/he does not have to discuss any information about the assault that she does not feel comfortable sharing. The Companion will explain her/his role as being available to meet the survivor's needs as the survivor determines them. The Companion will explain the steps of the evidence collection exam and determine whether or not the survivor would like accompaniment during the exam. When a female survivor is receiving an evidentiary exam at the hospital, a female Companion will always be available to support her, even when a male Companion is on-call.
29. The Companion will ask the survivor if there are any secondary survivors waiting for her/him and request her/his verbal permission to provide them with services. The Companion should clarify that the secondary survivors are aware that the assault occurred and that the primary survivor has given permission for the Companion to have contact with them before identifying themselves as Rape Crisis. In the event that the primary survivor declines Rape Crisis Services at the hospital, the secondary survivors may access Rape Crisis Services independently.
30. If the survivor prefers, the Companion will remain outside during the exam. During this time, the Companion will use this opportunity to provide support to secondary survivors (with the permission of the survivor), arrange for food and/or drink for the survivor, or to develop rapport with Law Enforcement officials who are also waiting.

Companions are unable to share details of the case with Law Enforcement or to answer specific questions because of confidentiality.

31. After the exam is complete, the Companion will assist the client in getting food, drink, clothing and/or other personal needs. The Companion should make sure that it is okay for the survivor to eat or drink anything before giving her/him food or drink. The Companion will collaborate with hospital staff and other resources to assist the survivor with any immediate needs for shelter, transportation, or other services.
32. Before the survivor is discharged from the hospital, the Companion will provide her/him with information on the Rape Victim's Assistance Funds and/or the Crime Victim's Compensation Funds and how to access these programs. The Companion will offer to assist the survivor in filling out the paperwork. The Companion will also assist the survivor in determining where Emergency Department bills can be sent and other information regarding payment.
33. Medical personnel will have provided information to the survivor on any prescriptions or follow-up medications and screening for HIV and STIs. The Companion should encourage the survivor to finish all prescribed medications and to follow-up with HIV and STI testing. Medical personnel provide survivors with a pamphlet that gives the survivor information on where s/he can be tested and how to access those services.
34. Law Enforcement may want to conduct an in-depth interview immediately following the exam. If the survivor prefers, the Companion will be present for support during the interview. If the survivor doesn't feel ready to be interviewed at the present time, the Companion will assist the survivor in exploring other options and will offer Rape Crisis Services for support at the arranged interview time.
35. The Companion will remain with the survivor until s/he leaves the Emergency Department. Before the survivor leaves, the Companion will offer to schedule a follow-up appointment to check-in with the survivor. The appointment may be scheduled for over the phone, in-person at a Rape Crisis Center office, or another public place (i.e.: Law Enforcement agency).
36. If the survivor is a student at UNC-CH, all of the above protocol are the same, with the exception of the following: a) Students are referred by Companions to UNC Student Health Services during their hours of operation (8am-5pm Monday through Friday during academic sessions) by SANE nurses in the Women's Health; b) Companions should encourage the survivor to receive all of her/his medical follow-up (prescriptions, STI testing/treatment) at the Student Health Services; c) Exams and treatment related to sexual assault is free to students at Student Health Services, paid for by student fees (except for HIV prophylaxis treatment, which is only available at UNC Hospitals Infectious Diseases Clinic); d) Survivors seen at the UNC Hospital Emergency Department can have their exam and treatment related to sexual violence paid for by student fees. The hospital will send the itemized bill directly to Student

Health Services for payment. The student security fund pays for medical care and treatment. If the survivor requests HIV Prophylaxis, s/he must file with their insurance and the security fund will then cover the balance that the insurance company does not pay. They have not paid for the HIV Prophylaxis without insurance filing due to limited available funds

III. COUNSELING SERVICES

1. Rape Crisis provides a 24-hour crisis and response line which provides crisis counseling, support, information, and referrals. The number for the crisis and response line is toll free 1-866-WE LISTEN or locally (919)967-7273. Companions provide callers with crisis counseling, empower callers to assess their needs and options, and provide callers with support, information, and advocacy.
2. Short-term individual therapy is provided by a licensed clinical social worker and social work interns. Anyone interested in the service can call the 24-hour crisis line and set up an appointment for an intake assessment. During this intake assessment options will be discussed for follow-up care including therapy in Rape Crisis's short-term therapy program or a referral to the community for long-term therapy.
3. The Orange County Rape Crisis Center offers various support groups to primary and secondary survivors of sexual violence. Groups are free and confidential. The support group program can be accessed through the 24-hour crisis line.
4. Because the healing process can take months and even years, Rape Crisis is dedicated to addressing survivors' long-term counseling needs. The Associate Director maintains a thorough therapy referral database and provides survivors with appropriate referrals to local clinicians.

IV. CONFIDENTIALITY

Rape Crisis Confidentiality Policy

1. Staff and volunteers learn intimate details of our clients' lives. We must protect the confidentiality of this information, no matter what the content or form of communication may be.

When faced with inquiries from clients, professionals, or the general public, we may neither confirm nor deny that the Center is working with a particular case.

2. During their association with the Center, staff and volunteers should be cautious in discussing the details of any local sexual violence case, even if the information we have comes from some source outside the Center (i.e. media reports, etc.). Others may assume this information came from the Center, and it could appear that the Center is not adequately protecting client confidentiality.

Staff and volunteers are free to discuss the general issues, such as the myths and facts surrounding sexual violence. They may also discuss media coverage of cases that originate outside Orange County and the immediate area.

3. Staff and volunteers should take all reasonable precautions to protect confidentiality of written materials that pertain to a case. This includes phone messages, case notes, contact sheets, etc. Within the Center, all casework is kept in locked files.
4. Prior to communicating with other agencies or programs on a client's behalf, Rape Crisis staff and Companions should ask the client to identify what information may be released. Clients may choose for you to disclose all, part, or none of the circumstances surrounding the violence. Staff and volunteers working with representatives of other community agencies are expected to use discretion at all times and maintain confidentiality.
5. There are several instances in which NC law takes precedence over the Center's policy of complete confidentiality (see reporting requirements in Section VII).
6. Any breach of confidentiality by staff or volunteers is grounds for dismissal from the Center.

VI. DOCUMENTATION

Rape Crisis Guidelines for Documentation

1. All Rape Crisis Staff and Companions are required to complete contact sheets every time they speak with a client or speak with someone else on the client's behalf (i.e., detective on case, DA's office staff, Health Department, etc.).
2. The functions of case documentation are:
 - (a.) to evaluate the appropriateness and effectiveness of the Center's services as provided by the Companion,
 - (b.) to provide a history to refer to after an interval of no contact,
 - (c.) to provide continuity of service if a different Companion begins working with the client, and
 - (d.) to identify any inappropriate or inadequate behaviors or policies of other community agencies or their staff.
 - (e.) to collect nonidentifying data in order to provide statistical information to funders and the community.

The purpose for documentation is NOT to diagnose our clients, to build a legal case, or to ventilate our opinions about the people involved in a case.

VII. RAPE CRISIS REPORTING REQUIREMENTS

Rape Crisis Policy on Mandatory Reporting

To the Department of Social Services:

1. NC law requires that all cases of suspected child abuse or neglect by a caregiver as defined by NC G.S. 7B-101 be reported within 24-hours to the Department of Social Services. Rape Crisis Staff and Companions should inform their clients of the reporting requirement and encourage them to report the abuse to DSS themselves. Rape Crisis may also offer support by being with the client during the reporting process.
2. NC law requires that “any person having a reasonable cause to believe that a disabled adult is in need of protective services shall report such information.” Rape Crisis Staff and volunteers should inform their clients of the reporting requirement and encourage them to report the abuse to DSS themselves. Rape Crisis may also offer support by being with the client during the reporting process.

To Law Enforcement Agencies:

1. NC law requires that when a weapon is used in an assault, the Director must report the incident to the appropriate law enforcement agency, even if the victim chooses not to report. No names or identifying information will be provided, only that the assault occurred and what weapon was used.
2. The role of the volunteer is to offer information on the types of reports the victim may choose to file. Volunteers should not try to influence the client's decision but should help the client assess the pro's and con's of each option.
 - a. The client may file a formal report.
 - b. The client may file a blind report.
 - c. The volunteer may file a blind report on behalf of the client, with the client's permission.

Rape Crisis may also need to break confidentiality in cases where a client may be a harm to their self or others. Rape Crisis will follow the Center’s protocol for these cases.

IX. RAPE CRISIS SAFETY POLICIES

Rape Crisis Security Guidelines

1. All staff and volunteers are to receive information about safety precautions they may take to reduce the risk of sexual violence in their own lives.
2. Companions should protect their own privacy by not releasing their last names, addresses, or phone numbers to clients or to law enforcement, medical, or other helping professionals (sometimes it may be appropriate to leave a first name and phone number with professionals, for example in a telephone message).
3. Staff and volunteers may not work for the Center while under the influence of drugs or alcohol.

While we recognize the use of drugs and alcohol may make it less inhibiting to ask for help, we also recognize that substance abuse may also prevent a client from effectively working on her/his issues. If a Companion feels that contact with the client is unproductive due to substance abuse, or if the client becomes abusive towards the volunteer, the volunteer should:

- encourage the client to call back when s/he is sober, or
 - offer to call the client back at a later time,
 - and then terminate the contact.
4. Rape Crisis Staff and Companions should decline to meet a client in person if doing so would place the Staff or Companion at any risk of physical danger. Staff and Companions should be particularly cautious if agreeing to meet a client:
 - who is involved in a case of domestic violence,
 - who has a history of violent behavior,
 - or who might otherwise place the Staff or Companion at risk of violence, either unintentionally or deliberately.
 5. Rape Crisis Companions and staff may not go to the scene of an assault unless they are accompanied by a law enforcement official and have been given clearance to go to the scene by a supervisor.
 6. Meetings with clients should take place in a public place, not in a home or any isolated setting.
 7. Rape Crisis Staff and Companions should not transport clients in their cars. If a client is in need of transportation, explore all options for transportation with the client (i.e. public transportation, a taxi, friends, family, the police). If a client has NO OTHER safe options for transportation, Rape Crisis can provide her/him with a taxi at no charge.
 8. Volunteers are strongly encouraged to tell another person (not necessarily another volunteer) in addition to their back-up volunteer where they are going and when they expect to return anytime they are working or attending meetings for the Center.

V. COMMUNITY COLLABORATION

1. In addition to providing services to survivors of sexual violence, Rape Crisis will provide support and assistance to medical personnel, Law Enforcement officials, mental health practitioners, and other professionals who work with survivors of sexual violence.
2. Rape Crisis will provide professional trainings to meet the particular needs of any organization or agency. Specifically, Rape Crisis will seek to provide training to medical professionals, Law Enforcement officials, magistrates, judges, and other court personnel.

3. Rape Crisis will pursue and facilitate the development and sustainability of the Orange County Sexual Assault Response Team and will maintain and/or seek participation from medical professionals, Law Enforcement officials, magistrates, judges, and other court personnel.

VI. GUIDELINES FOR DOMESTIC VIOLENCE AGENCIES RESPONDING TO SEXUAL VIOLENCE

Rape Crisis recognizes that often times, sexual violence is a tool used by perpetrators of domestic violence. If a survivor of domestic violence has an already established relationship with the Family Violence Prevention Center of Orange County(FVPC), s/he may prefer that an FVPC advocate support her/him around the issues of the sexual violence experienced.

Also, oftentimes, the public (including survivors and those needing the services of Rape Crisis) groups domestic violence and sexual violence agencies together. This could lead a survivor of sexual violence to contact the Family Violence Prevention Center of Orange County(FVPC).

Initial Response to a Survivor of Sexual Violence

1. At any time, if the FVPC Advocate determines that it would be helpful, a Rape Crisis Companion can be contacted to assist the FVPC Advocate or to support the survivor.
2. Screen survivors of domestic violence for sexual violence experience during the intake process.
3. Refer survivors of sexual violence to UNC Hospitals Emergency Department for medical treatment and collection of evidence. Offer to accompany client to the hospital for this purpose.
4. Encourage the survivor not to bathe, brush her/his teeth, urinate, change clothes, etc. Explain the importance of preserving evidence until it can be collected.
5. Explain the criminal prosecution process and review reporting options with survivor. Explain that reporting to Law Enforcement enables the survivor to receive financial assistance through the Crime Victims Compensation Fund and the Rape Victims Assistance Program.
6. Provide the survivor with a referral to Rape Crisis for sexual violence counseling, information, support, and advocacy.

Community Collaboration

1. Designate one FVPC staff member to be the representative to participate in the SART.
2. Provide SART members with information and training on domestic violence and the intersection with sexual violence.

3. Provide SART members with information on legislation regarding domestic violence.
4. Review recommendations made by the Orange County SART Sexual Violence Response Guidelines and educate other FVPC staff and volunteers about those recommendations and how to best serve sexual violence survivors.

NC General Statute 8-53.12

§ 8-53.12. Communications with agents of rape crisis centers and domestic violence programs privileged.

- (a) Definitions. – The following definitions apply in this section:
- (1) Agent. – An employee or agent of a center who has completed a minimum of 20 hours of training as required by the center, or a volunteer, under the direct supervision of a center supervisor, who has completed a minimum of 20 hours of training as required by the center.
 - (2) Center. – A domestic violence program or rape crisis center.
 - (3) Domestic violence program. – A nonprofit organization or program whose primary purpose is to provide services to domestic violence victims.
 - (4) Domestic violence victim. – Any person alleging domestic violence as defined by G.S. 50B-1, who consults an agent of a domestic violence program for the purpose of obtaining, for himself or herself, advice, counseling, or other services concerning mental, emotional, or physical injuries suffered as a result of the domestic violence. The term shall also include those persons who have a significant relationship with a victim of domestic violence and who have sought, for themselves, advice, counseling, or other services concerning a mental, physical, or emotional condition caused or reasonably believed to be caused by the domestic violence against the victim.
 - (5) Rape crisis center. – Any publicly or privately funded agency, institution, organization, or facility that offers counseling and other services to victims of sexual assault and their families.
 - (6) Services. – Includes, but is not limited to, crisis hotlines; safe homes and shelters; assessment and intake; children of violence services; individual counseling; support in medical, administrative, and judicial systems; transportation, relocation, and crisis intervention. The term does not include investigation of physical or sexual assault of children under the age of 16.
 - (7) Sexual assault. – Any alleged violation of G.S. 14-27.2, 14-27.3, 14-27.4, 14-27.5, 14-27.7, 14-27.7A, or 14-202.1, whether or not a civil or criminal action arises as a result of the alleged violation.
 - (8) Sexual assault victim. – Any person alleging sexual assault, who consults an agent of a rape crisis center for the purpose of obtaining, for themselves, advice, counseling, or other services concerning mental, physical, or emotional injuries suffered as a result of sexual assault. The term shall also include those persons who have a significant relationship with a victim of sexual assault and who have sought, for themselves, advice, counseling, or other services concerning a mental, physical, or emotional condition caused or reasonably believed to be caused by sexual assault of a victim.
 - (9) Victim. – A sexual assault victim or a domestic violence victim.

(b) Privileged Communications. – No agent of a center shall be required to disclose any information which the agent acquired during the provision of services to a victim and which information was necessary to enable the agent to render the services; provided, however, that this subsection shall not apply where the victim waives the privilege conferred. Any resident or presiding judge in the district in which the action is pending shall compel disclosure, either at the trial or prior thereto, if the court finds, by a preponderance of the evidence, a good faith, specific and reasonable basis for believing that (i) the records or testimony sought contain information that is relevant and material to factual issues to be determined in a civil proceeding, or is relevant, material, and exculpatory upon the issue of guilt, degree of guilt, or sentencing in a criminal proceeding for the offense charged or any lesser included offense, (ii) the evidence is not sought merely for character impeachment purposes, and (iii) the evidence sought is not merely cumulative of other evidence or information available or already obtained by the party seeking the disclosure or the party's counsel. If the case is in district court, the judge shall be a district court judge, and if the case is in superior court, the judge shall be a superior court judge.

Before requiring production of records, the court must find that the party seeking disclosure has made a sufficient showing that the records are likely to contain information subject to disclosure under this subsection. If the court finds a sufficient showing has been made, the court shall order that the records be produced for the court under seal, shall examine the records in camera, and may allow disclosure of those portions of the records which the court finds contain information subject to disclosure under this subsection. After all appeals in the action have been exhausted, any records received by the court under seal shall be returned to the center, unless otherwise ordered by the court. The privilege afforded under this subsection terminates upon the death of the victim.

(c) Duty in Case of Abuse or Neglect. – Nothing in this section shall be construed to relieve any person of any duty pertaining to abuse or neglect of a child or disabled adult as required by law. (2001-277, s. 1.)