



**NATIONAL SEXUAL ASSAULT TREATMENT UNIT (SATU)  
ANNUAL KEY SERVICE ACTIVITY REPORT**

**Annual Report for Year Ending: December 2017**

**Date Published: May 2018**

Collated by Dr Maeve Eogan  
Medical Director,  
National SATU Services,  
Rotunda Hospital,  
Parnell Square,  
Dublin 1.  
Tel: 018171736  
Email: [meogan@rotunda.ie](mailto:meogan@rotunda.ie)

## Contents

<b>Introduction</b>	<b>3</b>
<b>Operational Definitions and Abbreviations</b>	<b>6</b>
<b>Numbers attending each SATU (2017)</b>	<b>7</b>
<b>Executive Summary</b>	<b>8</b>
<b>Updates from Individual SATUs</b>	<b>10</b>
<b>Appendix 1 – CASATS service activity</b>	<b>16</b>
<b>Appendix 2 – update from Midwest SATU (Limerick)</b>	<b>17</b>

## Introduction

The six Sexual Assault Treatment Units (SATUs) in Ireland provide clinical, forensic and supportive care for those who have experienced sexual violence. These units are located in Dublin, Cork, Waterford, Mullingar, Galway and Letterkenny, and together, in 2017, these units provided care for 865 men and women who disclosed rape or sexual assault. An additional 24 people were cared for in the out-of-hours service at University Hospital Limerick, which has a slightly different structure and is funded through a different stream.

For the third consecutive year, the numbers of patients attending the SATUs has increased, from 685 in 2015 to 712 in 2016 and to 865 in 2017. It is important not to over interpret small changes year on year, but it is vital that we continue to collate these figures in order to identify trends and adapt our services appropriately to ensure that they remain responsive to patients' needs.

This year's interagency study day for those involved in SATU care provision took place in Farmleigh, Phoenix Park, and we acknowledge the Office of the Taoiseach for allowing us complimentary access to this lovely facility. This was the 9<sup>th</sup> annual study day, and it continues to provide us with an excellent opportunity to remain updated on developments in all aspects of the interagency service. While we received financial support to run this study day from the Manuela Riedo Foundation for many years, this is no longer available. We continue to lobby the HSE and all agencies involved in service provision to provide a defined training budget annually to ensure sustained provision of interagency training.

We received excellent feedback on the content of the programme, particularly with regard to the compelling testimony given by Dominique Meehan on the SATU experience through a survivor's eyes. We commend her ongoing strength. It was also really valuable to hear from all the other speakers. The talk on 'Your Wellbeing Matters' by Jenny Bulbulia was relevant to staff from all agencies – the concept, and reality, of vicarious trauma cannot be forgotten.

2017 was the first full year following launch of the option of secure storage of forensic evidence for people who are uncertain as to whether or not they wish to report an incident to An Garda Síochána. 79 patients chose this option in 2017, some of whom went on to report the incident to An Garda Síochána. This is therefore highlighting that offering this option provides opportunities to increase reporting of sexual crime, which can only be a benefit.

The Citizens Assembly and the Joint Oireachtas Committee on the 8<sup>th</sup> Amendment also took place in 2017. We know from opinion polls, and numerous 'behaviour and attitudes surveys' that a majority of people living in Ireland feel that women who are pregnant as a result of sexual violence should be able to access safe and legal termination of pregnancy, if that is their choice. The SATU services have provided facts to inform this discussion, and we welcome the upcoming referendum on this question.

We continue to produce 'The SAFE Way' – an e-newsletter for those involved in delivering the SATU service. This includes features on a variety of SATU developments and events, as well as relevant articles, links and reviews. It provides the SATU services and partner agencies with a forum for disseminating information and remaining updated.

We had hoped that 2017 would provide another Higher Diploma in Nursing (Sexual Assault Forensic Examination), but unfortunately that has been deferred until September 2018. We have had significant attrition from our CNS cohort, and we continue to advocate for increased investment in our services to encourage retention of staff and to drive provision of a sustainable service. We welcome Sarah O'Connor who has joined the service as Project Manager for the Higher Diploma in Nursing. Sarah is a fantastic addition to the SATU services, she brings forensic nursing experience from the UK with her – enhancing and informing our community of practitioners with experience from another jurisdiction, which can only be a benefit. We wish her all the very best in her new role.

We are also delighted to congratulate Debbie Marshall, who became a Registered Advanced Nurse Practitioner in SATU and Sexual Health, working at the Midland Regional Hospital, Mullingar. Such developments in the service are really positive, and we look forward to more widespread availability of the RANP model in SATU services in the coming years. Working in a SATU is never an 'easy option', and I thank each and every member of each SATU team who provide high quality care at a time of immense crisis.

In recent years, SATUs have closely monitored service provision and focussed on collation of local and national key service activity. As well as demonstrating activity levels this also facilitates data review to identify emerging trends. In 2016, we undertook a large project, in conjunction with the HSE Office of the Chief Information Officer, to develop and launch a secure, web-based database and reporting system for all six SATUs. This 'went live' in January 2017, and this report is the first national one generated from this database. We greatly acknowledge the massive input of both Connie McGilloway and Anne McHugh in the leadership they demonstrated in developing, launching and overseeing this initiative.

In presenting these summary statistics of key service activity, I acknowledge all staff in each of the SATUs, particularly the Clinical Nurse/Midwife Specialists, forensic examiners and other team members who ensure collation and inputting of relevant data into the database to ensure accurate presentation of service activities and key performance indicators. Outline data from CASATS (Child and Adolescent Service in Galway) is also included, and I acknowledge both Joanne Nelson and Claire Mahon for preparation of these. Feedback on this new, streamlined report is welcomed, and further information on metrics from specific units can be obtained directly from the individual SATUs.

I would like to thank a number of key personnel within the Health Service Executive, including Patrick Glackin from Nursing and Midwifery Planning and Development, and Gerry O'Dwyer from the South / South West Hospital Group. Their commitment to SATU services despite innumerable other demands on their time and resources is greatly appreciated.

We also thank all our collaborators and colleagues in the hospitals and health care environments in which we are based. When compared with emergency departments and labour wards, we see a small number of patients, so our value in the hierarchy of service provision is not evident to all. In many ways our absence would be noted more than our presence, and I acknowledge the support we receive from Masters, Clinical Directors, Directors of Midwifery/Nursing and hospital & network managers who advocate for us despite frequent, competing and important demands on their valuable resources.

Finally I acknowledge the men and women who attend SATUs around the country. I can safely say that a SATU is not a place anyone ever wants or expects to be, and we never cease to be amazed by the strength that our patients display, despite the enormity of the antecedent event. We really value the online and paper feedback that our patients provide; this allows us to critically appraise our service through the lens of a service user and underpins continuous quality improvement.



Dr Maeve Eogan  
Medical Director of National SATU Services  
meogan@rotunda.ie

## Operational definitions for the purpose of this report:

<b>Time Frames</b>
<b>Recent incident:</b> Where the incident happened $\leq 7$ days <b>Acute cases:</b> Where the incident happened $\leq 72$ hours
<b>Support Worker</b>
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 Assault Treatment Unit.
<b>Alleged Perpetrator</b>
<b>Relationship with Alleged Perpetrator</b> <b>Stranger:</b> someone who the person did not know <b>Intimate Partner:</b> a husband/wife, boyfriend/girlfriend or lover <b>Ex-intimate Partner:</b> an ex-husband/wife, ex-boyfriend/girlfriend or ex-lover <b>Multiple assailants:</b> Two or more assailants
<b>Abbreviations</b>
<b>CN/MS (SAFE):</b> Clinical Nurse/Midwife Specialist (Sexual Assault Forensic Examination) <b>ED:</b> Emergency Department <b>HIV:</b> Human Immunodeficiency Virus <b>EC:</b> Emergency contraception <b>PEP:</b> Post exposure prophylaxis <b>RCC:</b> Rape Crisis Centre <b>SATU:</b> Sexual Assault Treatment Unit <b>STI:</b> Sexually Transmitted Infections <b>CN/MM:</b> Clinical Nurse/Midwife Manager

<b>Attendances in each SATU 2017</b>	
Dublin (Rotunda Hospital)	327 (38%)
Mullingar (Midlands Regional Hospital, Mullingar)	174 (20%)
Galway (Hazelwood House, Parkmore Rd)	85 (10%) – not inclusive of those who attended CASATS
Letterkenny ((NoWDOC Premises, Oldtown)	73 (8%)
Cork (South Infirmary Victoria University Hospital)	140 (16%)
Waterford (University Hospital Galway)	66 (8%)
Total	865

## Key Service Activity 2017

### Attendance

- There were 865 attendances at the six SATUs in the Republic of Ireland in 2017, an increase of 153 cases nationally from 2016 (when 712 patients attended).
- 793 (92%) incidents occurred in 28 counties of Ireland.
- 665 patients (78%) met with a psychological support worker at the time of their SATU attendance.

### Time of Day the Incident Occurred

- 697 (81%) incidents occurred between the hours of 20.00 – 07.59, and 254 (29%) attendances happened between those hours - underpinning the need for a round the clock service.
- 84% of patients (440 of 526 cases where this metric was recorded) were seen in SATU within 3 hours of a request for a Forensic Clinical Examination.

### Type of Alleged Sexual Crime

- 76% of patients reported recent sexual assaults (within 7 days).
- 789 (91%) cases involved a single assailant.
- In 433 (50%) cases, the assailant was a stranger or recent acquaintance while in 110 (13%) cases, the incident was perpetrated by an intimate partner, ex-intimate partner or family member.
- 152 (18%) patients were unsure if a sexual assault had occurred.

### Gender, Age Profile, Referral Source

- 798 (92%) patients were women, and 66 (8%) were men. The mean age of patients was 26 years, with the age of people attending ranging from less than 14 to over 70 years.
- 77% of attendees self-identified their nationality as 'Irish', with 586 (68%) having been born in Ireland. An interpreter was required for 2% of patients.
- 545 (63%) cases were referred to SATU by An Garda Síochána.

### Patients Reporting the Incident to An Garda Síochána / Interval between Incident and SATU

- 580 (68%) patients reported the incident to An Garda Síochána, and 307 of these (53%) attended SATU within 24 hours of the incident.
- 79 (9%) patients opted to securely store their forensic evidence in SATU to give them an option to report the incident and have this forensic evidence released, over the following 12 months.



### **Alcohol and Drug Use**

- When recorded, 370 (43%) patients had consumed more than 6 standard drinks in the 12 hours prior to the incident. 258 (30%) had not had any alcohol.
- 99 (11%) patients were concerned that drugs had been used to facilitate sexual assault.

### **Pregnancy and Sexually Transmitted Infection (STI) Prophylaxis**

- 336 women presented within 120 hours of the incident, and 334 (99%) of these appropriately received emergency contraception.
- All units now offer Chlamydia prophylaxis, Hepatitis B vaccination and risk assessment for HIV postexposure prophylaxis (PEPSE) at time of SATU attendance. 540 patients (62%) received Chlamydia prophylaxis, 502 (53%) commenced a Hepatitis B immunisation programme and 68 (8%) patients started postexposure prophylaxis for HIV.

### **STI Screening**

- 620 patients (72%) either had a STI screen at their first attendance or were offered an appointment for STI follow up.
- 312 (75% of those given a follow-up appointment) attended for follow-up STI screening.

## **Updates from each unit (2017)**

### **Dublin (Maeve Eogan, Medical Director)**

2017 has been a difficult year for the Rotunda SATU. Two of our clinical nurse/midwife specialists (SAFE), Aideen Walsh and Catherine Hallahan headed off for pastures new – leaving us with a significant service gap. While we are delighted that Aideen remains involved in the service, in her new role as Paediatric Forensic Medical Unit Co-ordinator, in Our Lady's Hospital Crumlin, we certainly miss the day to day presence of these committed team members. We are grateful to the Executive Management Team of the Rotunda who have granted permission to train three replacement nurses in the upcoming postgraduate programme commencing September 2018.

Recruitment of forensic medical examiners is difficult. Traditionally these examiners came from a primary care background, but the increasing demands on General Practitioners mean that many of them cannot undertake additional work outside their practices. We are, however, delighted to have recruited Dr Nicola Cochrane, with her wealth of relevant experience, to join the team and look forward to her ongoing contribution. I acknowledge the commitment of all our forensic examiners, this year and every year. Our staffing shortage has meant that people are going above and beyond in terms of on-call commitment, and this is greatly appreciated.

We sincerely acknowledge the on-call support being provided by the SATU at Midland Regional Hospital Mullingar – for days (and nights) where our staffing is insufficient to offer a round the clock service. It is always upsetting when patients have to travel further than we would wish to access SATU care, and we anticipate that our improved staffing levels in the coming year will make that a less frequent event.

Despite these staffing issues, the team have continued to provide education and training in many areas. This has included the well-established Transition Year programme, run by Deirdra Richardson, but also a range of interagency education collaborations with Dublin Rape Crisis, An Garda Síochána and the STI Foundation.

### **Waterford (Sinead Boyle, CNS)**

The SATU at University Hospital Waterford saw a 21% increase in attendances when compared to 2016. Unfortunately there is still an unfilled CNS post, and two GP forensic

examiners have retired with another taking leave from the on-call roster. However, in 2017 one new GP forensic examiner joined the team and a second has commenced training.

The SATU Advisory Group (Rape Crisis Centre Manager, Garda Liaison Officer, Clinical Nurse Specialist (SATU), Clinical Nurse Manager II (SATU), Director Of Midwifery (Maternity and Paediatric services), Community Paediatrician and a GP representative) held valuable meetings during 2017. The CNS is also a member of the regional social inclusion group and of the regional LGBTI steering group. In addition, the CNS (SAFE) from Waterford SATU participated in the national conference, quarterly peer review meetings and national documentation meetings. She completed a two part motivational counselling course. She also attended a Women's Aid training course, "Best Practice Responses to Women Experiencing Domestic Violence", and completed training on the provision of care for clients presenting in Ireland as asylum seekers or refugees who may have been subjected to sexual violence. The Waterford SATU provided education sessions to fourth year intern nursing students.

I wish to acknowledge all the hard work and effort by everyone involved with the provision of services at the Sexual Assault Treatment Unit (SATU) UHW including Dr Bermingham (Medical Director), Nursing Management, all the Forensic Examiners, Assisting Nurses and Support Workers from the Waterford Rape and Sexual Abuse Centre. I wish to thank colleagues in the Infectious Disease departments of Cork University Hospital and The Mater Misericordiae University Hospital Dublin who are continuously flexible and compassionate when providing care to the clients we refer. I would also like to thank the staff at SATU South Infirmary Cork for providing on-call cover for us on two occasions in 2017.

### **Mullingar (Debbie Marshall RANP and Nessa Gill, CNS)**

2017 was our busiest year to date. Patient referrals were received from 19 counties with 30 (18%) cases from Dublin and 26 (16%) cases from Westmeath. Patient referrals from Dublin represent the ongoing support SATU Mullingar provided to the Rotunda SATU. Throughout the year, the SATU team of Forensic Clinical Examiners (FCE) dropped from seven to five practitioners with a similar pattern seen amongst the Support Nurses (six to five). Of note, Mary O'Neill (Project Manager, Sexual Health Midland Region) who practised as a SATU support nurse on call from 2009, retired in November 2017. Mary was instrumental in advocating for the SATU service in the early days and gave invaluable support, leadership and advice over the years.

Despite the reduced staff numbers, SATU Mullingar for the most part maintained a 24-7 rota with attendance to regular peer review locally and nationally. Membership of the National SATU Guidelines Group, National SATU Documentation Group, active engagement with members of the Inter Disciplinary team, co editorship of the National SAFEWAY magazine and an ongoing awareness and teaching programme were prioritised. Poster and oral presentations took place at the International Conference of Integrated Care, ENRICH2 Nursing Conference, Research Conference at RHM, 3rd Mental Health Nursing Conference and Nursing & Midwifery Conference at Tullamore which showcased elements of SATU practice development and demonstrated the patient centred, holistic and time responsive care the SATU service provides at RHM. Additionally, Debbie Marshall was accredited in the Nursing and Midwifery Board of Ireland as a Registered Advanced Nurse Practitioner (Sexual Assault Forensic Examination & Sexual Health) in May 2017. This innovative post is the first of its kind in Ireland and recognises the scope of nurses working as Forensic Examiners in the speciality of Sexual Assault Forensic Examination in Ireland.

Challenges for the year ahead include maintaining staffing levels against the backdrop of increasing patient numbers, ongoing support to other SATU units and the requirement to maintain SATU quality initiatives including nationally agreed key performance indicators. Recruitment of additional FCEs to SATU Mullingar is an immediate challenge which needs addressing to maintain staff numbers. Securing an additional CNS post to commence the Higher Diploma in Sexual Assault Forensic Examination in Sept 2018 is essential for succession planning of the service. The need to relocate the Sexual Health Clinic also remains a priority.

#### **Donegal (Connie Mc Gilloway, CNS and Bridin Bell, CNS)**

The Donegal SATU is currently staffed by 2 CNS(SAFE). 73 people attended in 2017, which is an increase from previous years. Furthermore it formally became a 24-hour-service in 2017 and 12 (16%) patients presented between 20:00-08:00hrs.

In addition, attendances at scheduled follow-up appointments remained high throughout the year with only 4 (7%) patients not returning for their first follow-up appointment. Multi-agency collaboration, education programmes and training sessions were on-going throughout the year.

The Donegal SATU Education Programme focuses on prevention and reduction of sexual violence, recognising, referring and responding to persons affected by sexual violence. Furthermore, education programmes focus on improving an understanding and appreciation

of the particular dynamics and sensitivities involved in responding to sexual violence, so that individualised, timely, person-centred services are offered.

In addition, as part of a pilot programme the Donegal SATU was invited by An Garda Síochána to partner the development of an Internet initiative focusing on the increasing problem of non-consensual sharing of intimate images among minors. In collaboration with the Department of Education and Skills, An Garda Síochána and the Law and Humanities Department, LYIT, this programme was targeted at Post-primary 1st year students and rolled out as a pilot in the autumn of 2017. Further developments and expansion of this programme is planned for 2018.

Furthermore, the Donegal SATU in collaboration with the Donegal County Council and the Donegal Local Development Committee developed a Multi-agency App named “We Can Help.” This project highlighted the collaborative working within the Donegal SATU and statutory and non-statutory agencies throughout the northwest.

This has shown incredible commitment and hard work from the two CNS FCEs working in the Donegal SATU. However, this level of work and commitment in the long-term is untenable with only two CNS FCEs, particularly as the service demands continue to increase. Therefore, the lack of approval by Saolta for the position of a third CNS to partake in the PgDip in Sexual Assault Forensic Examination in 2017 and the lack of approval for the development of the CNS post to an ANP position has created concerns in relation to strategic planning, vision and ensuring a sustainable service for the people of the northwest. Furthermore, in 2010 the Donegal SATU moved its operation from the Letterkenny University Hospital Campus to the NoWDOC premises on a temporary basis; however, the service continues to operate from this facility awaiting approval, relocation and the confirmed identification of a new Unit. We wish to acknowledge all the hard work and effort by everyone who contributed with provision of services at the Donegal SATU.

### **Cork (Finola Tobin CNS and Margo Noonan CNS)**

The Cork SATU is currently staffed by 2 CNS (SAFE), 4 on call forensic medical doctors and 7 on call support nurses. The commitment and dedication of this team ensures that the unit can provide 24/7 access to patients requiring our service. The Unit saw 140 new patients in 2017, an increase of 33 patients from 2016. It was noted that the increased education and awareness programmes provided by the CNS(s) throughout 2017 contributed to this increase.

The CNS(s) in SATU also participated in the TUSLA commissioned Needs Analysis Project reviewing services for victims of Domestic Sexual and Gender based violence in the Cork region. The CNSs also ran an “Orange Day in the hospital to increase awareness of DSGBE but also to inform staff and visitors of the services available locally. This was a highly successful day and we would like to acknowledge the support of management and our colleagues in the SIVUH.

Throughout the year the unit was represented at local and national conferences and study days with Margo presenting at the Action Aid Against FGM conference in University College Cork and also at the ENRICH conference in Beaumont Hospital. The unit is represented by the CNS(s) at the National Guidelines Group, The National SATU Documentation Group, Peer Review, The National SATU study day, local SATU multidisciplinary meetings and Garda liaison meetings. Finola and Margo developed protocols for accessing SATU services for An Garda Síochána in the Cork and Kerry regions.

We wish to thank and acknowledge all the hard work, effort and commitment by everyone involved with the provision of services at the Cork Sexual Assault Treatment Unit (SATU), including Dr John Coulter, Medical Director, Nursing Management, all the Forensic Examiners, Assisting Nurses, Ancillary staff, Mary Crilly and Support Workers from the Cork Sexual Violence Centre and Clerical Support. In addition we would like to thank and acknowledge our colleagues in the Garda Protective Services Unit based in Anglesea Street for all the support and collaboration throughout the year.

### **Galway (Andrea Holmes, Medical Director SATU and Joanne Nelson, Medical Director CASATS)**

The Galway SATU is the only unit with facilities, medical, nursing and administrative expertise to respond to all survivors of sexual crime, regardless of their age – this is a service model which would optimally be expanded to other SATUs. The governance of CASATS (Child and Adolescent Sexual Assault Treatment Services) joined Adult SATU services under the umbrella of Acute Hospital Services (Saolta University Health Care Group) in April 2017.

In August 2017, an additional number of assisting nurses were recruited and trained which has greatly enhanced covering the 24 hour on-call roster. With the help of Community Gardaí, stickers advertising SATU services were distributed on bathroom doors at bars and

venues throughout the region. Feedback from the general public on this initiative has been very positive. Galway Forensic Physician and Nurse Examiners gave presentations, undertook clinical audits and facilitated training and professional examinations with a variety of colleagues and allied professionals. Efforts continued to move our services from the current location into temporary premises on a Saolta hospital site. Adult SATU and CASAT services will be included in plans for a permanent, hospital-based premises in the future.

The Galway unit looks forward to training two new CNSs (SAFE) on the next course, commencing September 2018 and until then acknowledges the input of existing staff to ensure sufficient daytime and on-call cover for the service. The service expresses sincere gratitude to Drs Aideen Henry and Therese O'Reilly, Forensic Examiners since the unit opened, who have left to pursue other activities, in which we wish them well. We also thank Ms Ann Marie McGarry who fulfilled the role of daytime staff nurse in SATU throughout 2017. As always, the Clinical Directors of Galway SATU and CASATS would like to pay tribute to the entire team here; clinicians, nurses, cleaning staff, support services and our Manager, Ms Maeve Geraghty for their ongoing commitment, professionalism and support of patients and colleagues.

In view of the co-location of child/adolescent and adult services in the Galway Unit, an executive summary of the report of CASATS is appended below.

## Appendix 1 : CASATS Galway Executive Summary 2017

### Attendance at Galway CASATS

- There were 100 requests for SATU services in 2017 with 98 attendances
- 12 (12.2%) patients were seen out of hours (between 17.00-08.00 or over the weekend)

### Type of Alleged Sexual Crime, Assailant, Relationship to Assailant

- In 8 (8%) cases multiple assailants were alleged to have been involved.
- In 14 (14.2%) cases the alleged perpetrator/s were under 13 years
- In 13 (13.2%) cases the alleged perpetrator/s were between 13-17 years
- In 31 (31.6%) cases an adult assailant was suspected of instigating sexual abuse.
- 31 (31.6%) cases involved adult male assailants, of whom 11 (35.5%) were the child's biological father.
- One case involved an adult female assailant.
- One case involved an adult male and an adult female assailant

### Gender, Age Profile, Referral Source

- 62 (63%) patients were female, 36 (37%) male
- The age mean was 5.7 years (range 1-17 years)
- 58 (59%) were referred by An Garda Síochána, 33 (33%) were referred by social workers, 4 (4%) were referred by a Hospital Consultant and 3 (3%) were referred by a GP

### Time Frame from Incident until Examination

- 19 (19.3%) patients presented within  $\leq 7$  days of alleged assault. Five (26%) of those 19 had forensic sampling undertaken.
- Of the 19 patients presenting within  $\leq 7$  days of assault, 9 (9%) were within  $\leq 72$  hours with 3 (3%) of these patients presenting within 24 hours
- 2 (2%) patients presented between 7-28 days after most recent alleged sexual contact
- In 36 (36.7%) patients the allegation was of historical abuse i.e.  $>1$  month
- An exact time frame was not specified in 41 (42%) cases

### Support Worker in Attendance

- 81 (82.6%) patients had a CARI Child and Family Accompaniment Volunteer present

### Sexually Transmitted Infection Prophylaxis and (STI) Screening

- 96 (98%) patients had an STI screen
- 16 (16%) patients commenced a Hepatitis B vaccination schedule
- 2 (2%) of patients received emergency contraception
- HIV PEPSE was not required by any CASATS patients in 2017

### Child Assailants (defined as $<13$ years at time of alleged assault)

- 14 (14.2%) cases involved child assailants
- One female child assailant was reported and one case involved 2 child assailants

### Teenage Assailants (defined as 13-17 years at time of alleged assault)

- 13 (13.2%) cases involved teenage assailants
- All teenage assailants were male



- 2 (3%) cases involved more than one teenage assailant
- One case involved both a child and teenage assailant

**Adult Assailants (defined as  $\geq 18$  years at time of alleged assault)** In 31 (31.6%) cases adult males were suspected of instigating sexual abuse of whom 11 (35.5%) were the child's biological father. One case involved an adult male and an adult female assailant

- In 41 (42%) cases the details of the assailant were unknown.  
In these cases there may not have been a definitive allegation of child sexual abuse, however, examination was deemed appropriate due to other factors e.g. disclosure made by a sibling, inappropriate sexualised behaviour etc.

## **Appendix 2: Midwest Forensic Medical Examination Service (Angela Frawley, Business Manager, Primary Care Services)**

The Mid West Forensic Medical Examination Service (FME) was established in 2006. This service is open to both male and female aged 14 years and upward who have experienced rape or sexual assault and are referred by An Garda Síochána. This is an Out of Hours Service Monday to Friday 6pm to 8am and 24 hours over weekends and Public Holidays, with on call commitment being provided by six Forensic Clinical Examiners (General Practitioners) through Shannondoc. The service is delivered from a clinical room at University Hospital Limerick and provided care for 24 people in 2017 (two men and 22 women) an increase from 17 in 2016, with an age range of 14 to 82 years. Limerick Rape Crisis Network volunteers attended approximately 55% of these examinations in 2017.