

RACINE COUNTY SART CASE REVIEW

❖ Case Information
❖ Date of reporting/ service: _____
File Number: _____
Case Review Date: _____
Police Jurisdiction: _____
Victim: _____ Victim D.O.B. _____
Suspect: _____ Suspect D.O.B. _____
Relationship between Victim and Suspect
<input type="checkbox"/> Family member: _____ <input type="checkbox"/> Spouse/Partner: _____
<input type="checkbox"/> Friend/ Acquaintance: _____ <input type="checkbox"/> Stranger <input type="checkbox"/> Other: _____
Officer/ Investigator: _____
SANE: _____
Advocate: _____
Prosecutor: _____

1. **Officer Notification:** a. Dispatch: Yes No Unknown
b. In person contact with victim: Yes No Unknown
c. Was suspect arrested: Yes No

2. **How many officers responded?** _____
- a. Line Officer Yes No
b. Detective/Investigator Yes No
c. Forensic/Evidence Tech Yes No
Comments: _____

3. **Was an Advocate called?** Yes No Not Applicable Unknown
Did the Advocate respond? Yes No Unknown
Comments: _____

4. **Was HSD called?** Yes No Not Applicable Unknown
Did HSD respond? Yes No Unknown
Comments: _____

4. Was a SANE completed? Yes No Not Applicable Unknown

Comments: _____

5. Was CAC examination completed? Yes No Not Applicable Unknown

Was a CAC interview completed? Yes No Not Applicable Unknown

Comments: _____

6. Prosecution:

a. Was the case accepted for prosecution? Yes No Unknown

b. Was the response prompt? Yes No Unknown

Comments: _____

c. Was there Victim/ Witness notification? Yes No Unknown

d. Was there Victim/Witness and or DA contact throughout the proceedings?
 Yes No Unknown

e. Was there a trial? Yes No
Result of case? _____

7. Was the multi-jurisdictional protocol followed as far as practicably possible and appropriate?

Yes No Unknown

a. Law enforcement? Yes No

i. Follow up suggestion to the law enforcement necessary? Yes No
If yes please identify issue(s): _____

b. **Ab. Advocate?** Yes No
i. **Follow up suggestion to Advocate necessary?** Yes No
If yes please identify issue(s): _____

c. **SANE?** Yes No Not Applicable
i. **Follow up suggestion to SANE necessary?** Yes No
If yes please identify issue(s): _____

d. **Prosecution?** Yes No Not Applicable
i. **Follow up suggestion to Prosecution necessary?** Yes No
If yes please identify issue(s): _____

e. **HSD if applicable?** Yes No Not Applicable
i. **Follow up suggestion to HSD necessary?** Yes No
If yes please identify issue(s): _____

f. **CAC if applicable?** Yes No Not Applicable
i. **Follow up suggestion to CAC necessary?** Yes No
If yes please identify issue(s): _____

Attach any additional paperwork if necessary for any of the follow up suggestions above.

13. **Was the victim given a Crime Victim Compensation Application?**
 Yes No Not Applicable Unknown

14. Was victim cooperative with the investigation and prosecution?

Yes No Unknown

15. Does it appear that the victim's needs were adequately met?

Yes No Unknown

If no, what could have been done to better meet the victim's needs? _____

16. Does it appear that all law enforcement, investigative and prosecutorial needs were adequately met? Yes No Unknown

Comments: _____

17. Does it appear that all SANE/CAC needs were adequately met?

Yes No Not Applicable Unknown

Comments: _____

Additional Comments:

Updated 7/9/2008

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