

Victim's Bill of Rights

The Crime Victims' Bill of Rights was established to afford certain basic rights just as the accused are afforded certain basic rights. Upon initial contact with a victim, all law enforcement and court personnel shall make available to the victim the following information:

- Possibility of pretrial release of the accused, the victim's rights and role in the stages of the criminal justice process;
- The availability of victim compensation for eligible victims of violent crime (must sustain a physical injury);
- The availability of community-based victim service programs (these programs are located in prosecutor offices and a list of these programs may be obtained from these offices)

Under the Crime Victims' Bill of Rights, law enforcement must advise the caretaker of a child victim of physical or sexual abuse of the following:

The caretaker is entitled to receive notification of the arrest and release from custody of the accused, as well as information about any subsequent court proceeding, by submitting a current mailing address and landline telephone number to the respective officials involved at critical stages of the criminal justice process:

1. Investigating law enforcement agency (police department or sheriff's office)
2. Prosecutor (district attorney or solicitor general)



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3. Custodial authority (sheriff, county correctional facility as directed by the prosecutor, Department of Corrections, Georgia Department of Juvenile Justice, or any other law enforcement agency having custody of the accused)
4. State Board of Pardons and Paroles
5. Attorney General (death penalty cases only)

Law enforcement should also notify victims of the following resources:

- *Georgia Crime Victims Compensation Program*, which may offer financial assistance to those physically injured during a crime. (Call 1-800-547-0060 for information about eligibility requirements and application procedures)
- Community-based victim services programs, which may be available to support the victim and family. (Contact *Helpline Georgia* at 1-800-338-6745 or the local prosecutor's office)

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**Child Abuse Investigative Support Center**

3121 Panthersville Road  
Decatur, GA 30034  
(404) 270-8194 / (404) 270-8183 FAX

**Georgia Bureau Of Investigation**

Medical Examiner's Office (MEO)  
(404) 270-8210

**Child Fatality Review Division—Office of the Child Advocate**

(404) 656-4200 / (404) 656-5200 FAX  
gacfrstaff@dhr.state.ga.us

**GA Criminal Justice Coordinating Council**

Crime Victims Compensation Program  
104 Marietta Street, NW—Suite 440 — Atlanta, GA  
(404) 657-1956

## Child Injury/Death Interview and Investigative Support Guide

**Child Maltreatment** can be physical or sexual abuse, neglect, or emotional maltreatment. Most victims are very young, usually less than five years old.

### SIDS (Sudden Infant Death Syndrome)

The sudden death of an infant that remains unexplained AFTER a full and complete autopsy, a thorough and complete death scene investigation, and a review of the child's prenatal and postnatal medical history. SIDS often occurs during sleep.

### SUID (Sudden Unexplained Infant Death)

A death of an infant that appears to be SIDS, but there are other circumstances present that could have contributed to the death (e.g. evidence of neglect or unsafe sleep environment). SUID often, but not always, occurs during sleep.

# ≡ What to Look for During an Investigation of Child Maltreatment or SIDS/SUID

## Law Enforcement must respond; call if necessary

### Scene Investigation

- \*Request re-enactments, use a doll if possible
- \*Determine precise location of victim when placed down and when discovered
- \*Note bedding materials, firmness of bed, and size and weight of blankets
- \*Document with still and video photography, if possible
- \*Determine the time the child was last seen alive
- \*Request information about smoking, alcohol and drug/medication use
  - During pregnancy
  - In the home or location of care
  - By any caretakers
- \*Note condition of the residence or relevant location
  - Unsanitary conditions
  - Odors, toxins, or pets
  - Room v. outdoor temperature
  - Heating/Cooling source
  - Food supply (adequacy and sufficiency)
  - Medications found at scene
  - Victim's medications (send to the medical examiner)
- \*For deaths in cribs
  - Note condition of the crib
  - Other objects located in crib (toys, bumpers, pillows, etc.)
- \*For deaths in adult beds
  - Determine number of people sleeping in bed (with ages)
  - Determine condition of all individuals in bed (alcohol, drugs, other meds, illness)

- \*For deaths in other locations (couch, chair, etc.)
  - Document the details of the furniture with photographs and measurements in addition to positions of the bodies involved

### **PHOTOS should be taken of the scene, immediate sleeping environment and the re-enactment, and forwarded to the M.E.**

### Body Examination

- \*Victim moved from original location
- \*Injuries (patterned injuries – check scene for potential implements)
- \*Check ears and inside the mouth
- \*Discuss oral injuries with EMS if victim was intubated
- \*Injuries consistent with history
- \*Rigor Mortis/Lividity patterns
- \*Appearance, cleanliness of body
- \*Clothing appropriate/clean

### **Red Flags:**

- \*Patterned injuries
- \*Injuries on non-mobile children
- \*Injuries inconsistent with history given
- \*Delay in seeking assistance
- \*Prior child deaths in family
- \*History of abuse or neglect in family
- \*History of stress or uncontrolled anger
- \*Poor social support for family
- \*Caregivers with unrealistic expectations of child development/behavior
- \*Other children in family have emotional or health problems

## If caretaker is willing to re-enact, always allow and document (video if possible)

### Information from Caretakers

#### Establish Timeline

- \*Onset of symptoms
- \*Where child was before injury/sickness and who the child was with during that time
- \*Child's apparent health and activity prior to symptoms
- \*Child's sleep activity prior to injury/illness
- \*Precise location of child's body at the time of discovery
- \*Caretaker's action upon noticing injury/sickness

#### Develop Information about Child/Family/ Other Caregivers

#### The Child (Also for other children present in home)

- \*Child's medical/mental health history and consent for records
- \*Names and contact information for any therapists, doctors or specialists in contact with the child
- \*Child's school and attendance
- \*Child's general personality, development and functioning
- \*Prior abuse

#### The Adults (Other household members as well as caretakers)

- \*Work schedules
- \*Domestic violence/substance abuse/criminal and mental health history of adults present
- \*Methods of discipline employed
- \*Caretaker's marital history
- \*Family difficulties, anxiety or stress