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GUIDANCE ON
INVESTIGATING
CHILD ABUSE AND
SAFEGUARDING
CHILDREN
Second Edition

2009
Produced on behalf of the Association of Chief Police Officers
by the National Policing Improvement Agency
This guidance contains information to assist policing in the United Kingdom.

It is marked as NOT PROTECTIVELY MARKED under the Government Protective Marking Scheme.
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Protecting and safeguarding our children is one of the most important roles of the Police Service. It is in the way in which the Police Service protects and responds to the most vulnerable in society that we and the other agencies are to be judged. Children are people who have the same rights as adults to the protection offered by the criminal law and the services of the police. The priorities of the Police Service in responding to child abuse and neglect are to:

- Protect the lives of children and ensure that in the policing of child abuse the welfare of all children is paramount;
- Investigate all reports of child abuse and neglect and protect the rights of child victims of crime;
- Establish the investigation of child abuse and safeguarding of children as a mainstream policing activity;
- Take effective action against offenders so that they can be held accountable, through the criminal justice system, while safeguarding the welfare of the child;
- Adopt a proactive multi-agency approach to preventing and reducing child abuse and neglect and safeguarding children.

The legal obligations that underpin the above priorities include the duties within the United Nations Convention on the Rights of the Child (UNCRC) and the Human Rights Act 1998 (HRA) (which incorporates the European Convention on Human Rights (ECHR) into UK law) to protect life and to protect individuals from torture, inhuman or degrading treatment or punishment. Other key legislation includes the Children Act 1989 and the Children Act 2004. Both the HRA and other legislation, such as the Race Relations Act 1976 (as amended), place a clear responsibility on public authorities to fulfil these obligations without discriminating on a range of grounds including race, disability, religion or belief, sexual orientation, gender and age. Inquiries into child deaths and homicides such as Laming, H. (2003) The Victoria Climbie Inquiry Report and HC 330 (2009) The Protection of Children in England: A Progress Report, demonstrate the necessity for all victims of child abuse to receive the appropriate quality of service according to their individual needs. All allegations should be properly investigated and offenders held accountable through the criminal justice system, without discrimination.

Chief officers should actively demonstrate their leadership in this area by establishing, implementing and overseeing policies which ensure that the police response to child abuse, neglect and the safeguarding of children fully supports and achieves these priorities. This requires all police staff to be confident in identifying child abuse, confident in responding appropriately and for subsequent criminal investigations to be undertaken by specialist investigators. In achieving these priorities and fulfilling these obligations, it is essential to work in partnership with both criminal justice agencies and other statutory and voluntary sector services. The HC 653 (2004) The Bichard Inquiry Report established the importance of managing intelligence, information and information systems relating to child abuse, and the appropriate sharing of information and intelligence.

The term child abuse relates to the age of the victim at the time of the alleged offence (under 18 years) and not to their age at the time of reporting it. This guidance may also be useful when considering investigative options in relation to offences concerning other vulnerable persons in a complex setting (e.g., residential or nursing home for elderly people or people with learning disabilities).

The purpose of this guidance is to provide the Police Service with clear information about investigating child abuse and neglect and safeguarding children. The focus is on the investigation of child abuse. Broader issues relating to safeguarding children are covered in a range of other documents, e.g., *HM Government (2006) Working Together to Safeguard Children: A guide to inter-agency working to safeguard and promote the welfare of children* (hereafter referred to as *Working Together*). Management issues are summarised at the end of each section. The guidance is structured to follow the pattern of reporting, responding to and investigating child abuse. It also contains specific advice about the role of the Child Abuse Investigation Unit (CAIU) officers and their supervisors.

In all aspects of this guidance the key principle is the welfare of the child. This requires a consistent quality of investigation and police response – regardless of the environment in which the abuse occurs (e.g., family, institution or online) and the context or crime type (by prostituting or trafficking a child). For details of minimum standards relating to the protection of vulnerable people, see *ACPO (2007) Protective Services Minimum Standards*.


For chief officers, the following strategic issues emerge from the guidance:

- Implementing a comprehensive force policy that incorporates this guidance and which works alongside associated policies, such as those relating to the investigation of domestic abuse (see *ACPO (2008) Guidance on Investigating Domestic Abuse*) and rape (see *ACPO/CPS (2009) Guidance on Investigating and Prosecuting Rape*);
- Ensuring the contribution of the force to strategic multi-agency partnerships which focus on safeguarding children;
- Ensuring that child abuse is investigated to the same standard as any other form of serious crime and that adequate resources are allocated to this high-risk area of police business;
- Developing information systems in accordance with *ACPO (2006) Guidance on the Management of Police Information* and other national guidance and systems for the police and other agencies;
• Focusing on police responsibility for the investigation of child abuse and, in particular, its law enforcement role in the multi-agency response;
• Ensuring that the training needs of staff are met through the use of the NPIA Specialist Child Abuse Investigator’s Development Programme and other relevant national and local police and multi-agency training initiatives, such as those provided by the Child Exploitation and Online Protection (CEOP) Centre;
• Ensuring that the welfare needs of staff in this specialist area of work are considered and appropriately accounted for;
• Ensuring the effective supervision of all aspects of policing child abuse.

ACPO is committed to contributing to *HM Government (2009) The protection of children in England: action plan*, which is the government’s response to *HC 330 (2009) The Protection of Children in England: A Progress Report*. This guidance forms part of that contribution. As recognised by Lord Laming, it is only the consistent implementation of guidance such as this that keeps children and young people safe.
PART ONE – INVESTIGATING CHILD ABUSE
Section 1
MANAGING THE POLICE RESPONSE TO INVESTIGATING CHILD ABUSE

This section summarises key definitions relating to child abuse and safeguarding children. It explains and outlines the duty on the police to safeguard children, and links in with other associated investigations. It also outlines the ways in which concerns about children come to the attention of the police, and provides guidance for the management and supervision of these often complex investigations. This section is relevant for all police officers and police staff who may receive a report of an incident involving a child, or who deal with situations which may indicate concerns about a child, and all police managers and those involved in developing policy on police responses to child abuse and safeguarding children.

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1.1 DUTY TO SAFEGUARD CHILDREN

The focus of this guidance is on the investigation of child abuse in the context of broader duties on the police relating to safeguarding children. This section summarises issues relating to safeguarding children that are dealt with in detail in other documents, eg, *Working Together*.

The Every Child Matters framework, supported by the Children Act 2004, establishes the principle that all children deserve the opportunity to achieve their full potential. This is set out in five outcomes that are essential to children and young people’s wellbeing:

- Stay safe;
- Be healthy;
- Enjoy and achieve;
- Make a positive contribution;
- Achieve economic wellbeing.

For more details of the Every Child Matters framework, see [http://www.dcsf.gov.uk/everychildmatters/](http://www.dcsf.gov.uk/everychildmatters/)

Safeguarding and promoting the welfare of children involves protecting them from abuse and neglect, preventing impairment of their health and development, and ensuring that they grow up in circumstances consistent with the provision of safe and effective care, enabling them to have optimum life chances and enter adulthood successfully. Child protection is a part of safeguarding and promoting welfare and refers to activity undertaken to protect specific children who are suffering or at risk of suffering significant harm.

The police and a number of other agencies have a duty under section 11 of the Children Act 2004 to ensure that their functions are discharged with regard to the need to safeguard and promote the welfare of children. For further information on this duty, see *HM Government (2007) Statutory guidance on making arrangements to safeguard and promote the welfare of children under section 11 of the Children Act 2004*. Criminal investigations relating to child abuse are the responsibility of the police. Under the Children Act 1989, the local authority is responsible for assessments of children in need (under section 17 of the Act) and enquiries relating to children who are suffering or likely to suffer significant harm (under section 47). In most cases there will be links between the role of the police and children’s services, including children’s social care, but one of the key aspects of the multi-agency duty to safeguard children is that the two roles are distinct and separate.

The Human Rights Act 1998 places positive obligations on police officers to take reasonable action, within their powers, to safeguard the rights of children. These include the right to life (Article 2, ECHR), the right not to be subjected to torture or inhuman or degrading treatment (Article 3, ECHR) and the right to respect for private and family life (Article 8, ECHR). Failure to exercise police powers relating to protecting children, investigation and/or arrest may leave a victim at risk from further offences and expose the police force to the possibility of legal challenge. The UK has undertaken to protect the fundamental human rights of children by signing a number of international instruments. These include the United Nations (UN) Convention on the Rights of the Child (ratified by the UK Government in 1991) and the Council of Europe Convention on Action against Trafficking in Human Beings and its optional protocols. The UN Convention on the Rights of the Child is based on the premise that children (which includes all people below the age of 18 years for the purposes of the Convention) are born with fundamental freedoms and the inherent rights of all human beings.
Every child has a right to equal access to services which provide them with protection, irrespective of their ethnic background, religion, culture or class and each child should be treated as an individual with particular needs. Myths, stereotypes and assumptions about particular cultures and fear of being accused of racism or other prejudice should not divert officers from noting and acting upon signs of child neglect or ill-treatment. No cultural or religious heritage takes precedence over standards of childcare embodied in law.

The requirement for action in child abuse cases creates obligations at every stage of the police response. These obligations extend from taking reports of concern for children throughout the whole process of investigation, and include the multi-agency process for safeguarding them. A thorough investigation should be completed in all cases where concern for a child is reported. Officers should also ensure that their actions and decision making (including cases where actions are considered unnecessary or disproportionate) are recorded in detail. Like all criminal investigations, one relating to child abuse is a search for the truth and officers should focus efforts, from the outset of a child abuse investigation, on gathering evidence that does not rely entirely on the victim’s statement.

### 1.2 KEY DEFINITIONS

For further information on definitions relating to safeguarding children and child abuse, see *Working Together* and *HM Government (2006) What to do if you’re worried a child is being abused.*

In this section a number of terms relating to child abuse and neglect are defined.

#### 1.2.1 A CHILD

A child is defined by section 105 of the Children Act 1989, as any person under the age of 18 years. Under some legislation the age is lower. For example, the offence of cruelty contrary to section 1 of the Children and Young Persons Act 1933 applies when the victim is a child under 16 years. Unless relevant legislation indicates otherwise, reference in this guidance to a child refers to someone who is under the age of 18. The term child is used here to include children and young people.

#### 1.2.2 CHILD ABUSE

As described in **1.1 Duty To Safeguard Children** the police, along with other agencies, have a broad responsibility to safeguard children. This includes the responsibility for all police staff to respond to any concern for a child, including making referrals as appropriate (see **1.9 Managing Information about Child Abuse**). Concern about child abuse is one aspect of safeguarding children. In this guidance the term child abuse includes behaviour relating to physical, sexual or emotional abuse, or neglect, of a child. It does not include straightforward property offences where the child is a victim, for example, theft of a mobile phone. Due to the police role in the criminal justice system, in general, the term child abuse is used to describe criminal offences which constitute such abuse. However, this guidance does acknowledge that the police also have an important role relating to concerns for children which do not involve criminal offences. That role will generally include active involvement in strategic partnerships relating to safeguarding children, and action at an operational level which includes referring any concerns to other agencies for action and for information (see **3.1.3 External Referrals from the Police to other Agencies**).
It is concerns about criminal offences relating to child abuse which come from police staff, from other agencies or from members of the public which should be the focus of CAIUs. CAIUs may also have a role in the assessment and management of risk to children which does not necessarily amount to an offence, or suspicion of an offence (see 1.6 Child Abuse Investigation Units and 1.9 Managing Information about Child Abuse).

Somebody may abuse or neglect a child by inflicting harm or by failing to act to prevent harm. Children may be abused in a family or in an institutional or community setting. This can include violent and sexual offences and those of grooming or harassing children (eg, by making contact on the internet). Child abuse can also include offences relating to trafficking and sexually exploiting children. In most manifestations of child abuse the perpetrator is likely to be a family member or someone known to the child. In some cases children may not understand that they are being abused. The complex dynamics of abuse mean that some individuals develop an attachment to the person harming them, which can make identifying abuse more difficult and result in the victim minimising and denying the abuse. This guidance does not include detailed information about the effects of child abuse. Further information about this can be found in the NPIA Specialist Child Abuse Investigator’s Development Programme (see also 1.8 Training and Development).

Where there is a risk that a child is suffering or is likely to suffer significant harm, or is a ‘child in need’, it is the responsibility of the police to take whatever action is appropriate and to refer details about the child to children’s social care (see Working Together, and 3.1.3 External Referrals from the Police to other Agencies). In all aspects of the police response to concern for a child, including where there are suspicions of child abuse (eg, as part of a criminal investigation), the key principle is the welfare and best interests of the child – regardless of the environment in which the abuse occurs (eg, family, institution or online) and the context or crime type (by prostituting or trafficking a child).

### 1.2.3 PHYSICAL ABUSE

Physical abuse may involve hitting, shaking, throwing, poisoning, burning or scalding, drowning, suffocating, or otherwise causing physical harm to a child. Physical harm may also be caused when a parent or carer fabricates or induces illness, or deliberately causes ill health to a child in their care (see 1.4.11 Fabricated or Induced Illness).

### 1.2.4 EMOTIONAL ABUSE

Emotional abuse is the persistent emotional ill-treatment of a child which causes severe and persistent adverse effects on the child’s emotional development. It may involve conveying to a child that they are worthless or unloved, inadequate or valued only in so far as they meet the needs of another person. It may, as in some cases of domestic abuse, involve causing children to feel frightened or in danger and includes the exploitation or corruption of children. Age or developmentally inappropriate expectations may also be imposed on children. Some level of emotional abuse is involved in all types of ill-treatment of children, although emotional abuse may occur alone.

### 1.2.5 SEXUAL ABUSE

Sexual abuse involves forcing or enticing a child or young person to take part in sexual activities, whether or not the child is aware of what is happening. It may also involve physical contact including penetrative or non-penetrative acts. It may include non-contact activities, such as involving children in looking at child abuse or watching sexual activities, encouraging children to behave in sexually inappropriate ways and offences relating to downloading child abuse images.
1.2.6 NEGLECT

Section 1 of the Children and Young Persons Act 1933 outlines the offence of 'cruelty to persons under sixteen', which incorporates neglect. According to section 1, if anyone who is 16 years or over wilfully assaults, ill treats, neglects, abandons or exposes a child in a manner likely to cause unnecessary suffering or injury to health they will be guilty of an offence. Injury to health includes any injury to or loss of sight, hearing, limb or organ of the body and any mental derangement.

The definition of neglect is outlined in section 2(a) of the Act. The offence is committed if a parent, guardian or other person legally liable to maintain a child has failed to provide adequate food, clothing, medical aid or lodging or has failed to take such steps as to procure these items. The neglect must be deemed to be of a manner likely to cause injury to the child's mental or physical health.

For an offence under section 1 to be committed, there must be evidence that it was 'wilful'. There is no statutory definition, but the term has been interpreted by the courts. In R v G [2004] 1 AC 1034 it was said that wilful misconduct means deliberately doing something that is wrong, knowing it to be wrong or with reckless indifference as to whether it is wrong or not. Although there is no definable threshold for when a minor neglectful act becomes a criminal offence, each single incident must be examined in the context of other acts or omissions and the possibility of a criminal offence should be considered. There will be occasions when the issue is one of poor parenting and/or the carer’s lack of knowledge, rather than a deliberate and wilful act.

The decision to record wilful neglect as a crime should be made in the light of all available evidence and other information. If on the balance of probabilities it is more likely than not that the incident is the result of a criminal act, then a crime should be recorded in accordance with Home Office (2009) National Crime Recording Standard. Where the report is not initially recorded as a crime (because it does not meet the national crime recording standards (NCRS) criteria for recording), an incident report should be recorded in accordance with national guidance. Where a prosecution does not result from the investigation, any records and other relevant information should be retained in accordance with ACPO (2006) Guidance on the Management of Police Information since these may assist any future investigation and provide evidence to support any future prosecution.

1.2.7 SIGNIFICANT HARM

The Children Act 1989 introduced the concept of significant harm in order to assess the need for compulsory intervention in family life in the best interests of children. Under section 47 of the Act, the local authority has a duty to make enquiries, or cause enquiries to be made, where it has reasonable cause to suspect that a child is suffering or is likely to suffer significant harm. The enquiries should enable the local authority to decide whether they should take action to safeguard the child and promote the child’s welfare.
There are no absolute legally or medically defined criteria on which to rely when judging what constitutes significant harm, although *Working Together* contains more detailed guidance about establishing significant harm. Sometimes a single, traumatic event may constitute significant harm, eg, a violent assault, suffocation or poisoning. More often, however, there is a compilation of events which, together, constitute significant harm, but alone may appear unimportant. Some children live in family and social circumstances where their health and development are neglected. For these children, it is the corrosiveness of long-term emotional, physical or sexual abuse that causes impairment to the extent of constituting significant harm. Section 120 of the Adoption and Children Act 2002 amends section 31 of the Children Act 1989 to include the following in the definition of harm: ‘impairment suffered from seeing or hearing the ill-treatment of another’, eg, witnessing domestic abuse. Although section 31 relates specifically to court orders, for the sake of consistency, the extended definition should be applied throughout the Children Act 1989, including the definition of harm. For information about risk factors in child abuse cases, see 1.3.1 *Established Risk Factors*. For further information about domestic abuse, see 1.4.10 *Domestic Abuse and Domestic Homicide*.

### 1.2.8 CHILD IN NEED

Where significant harm or the likelihood of it is not apparent, the local authority may still have a duty under section 17 of the Children Act 1989 to safeguard and promote the welfare of children within their area who are in need, by providing a range and level of services. If a police officer suspects that a child is in need, appropriate action should be taken and details of that child sent, as an internal referral, to the CAIU (see 1.9.4 *Internal Referral to the Child Abuse Investigation Unit*). The child should also be referred to children’s social care to ensure that action is taken to safeguard the child (see *Working Together* and 3.1.3 *External Referrals from the Police to other Agencies*). Early intervention and support for a child in need can help avert escalation to the point where a family is in crisis.

### 1.3 IDENTIFYING, ASSESSING AND MANAGING RISK

Whenever the police have concern for a child, and at every stage of their involvement with that child, decisions will be made which involve identifying, assessing and managing risk. For information about identifying, assessing and managing risk in the context of domestic abuse, see *ACPO (2008) Guidance on Investigating Domestic Abuse*, Domestic Abuse, Stalking and Harassment and Honour-Based Violence (DASH) 2009 Checklist, and associated national guidance. For information about managing risk and the use of particular tools in identifying and assessing risk when managing sexual and violent offenders, see *ACPO (2007) Guidance on Protecting the Public: Managing Sexual Offenders and Violent Offenders* and *Ministry of Justice (2009) MAPPA Guidance, Version 3.0*.

#### 1.3.1 ESTABLISHED RISK FACTORS

The following factors should be considered when determining whether a child is the victim of abuse or whether they are at risk of harm. They apply to the circumstances of the child and the behaviour and circumstances of the suspect. It is not an exhaustive list and the factors are not listed in order of priority. One factor alone based on an officer’s professional judgement may be enough to alert an officer to a case that requires urgent action by the police and other agencies (see *Working Together* and 2 *Initial Police Response to Concern for a Child*). Information about all the factors listed below is key to safeguarding children. It is often when information from a number of sources, eg, the police and other agencies, is put together that a full picture of a situation is obtained. All relevant agencies should be informed when a child is subject to a child protection plan and act accordingly.
Circumstances of the child

1 Physical injury

This includes injuries to a child such as bruises, broken limbs, burns and visible marks, particularly if the injuries are not compatible with any explanation offered (e.g., bruises on a pre-mobile child). Relevant information includes whether such injuries have been repeated, the cause of the injury and whether a weapon was used.

2 Repeated presentation at hospital with unknown illnesses

Any suspicion or allegation of fabricated or induced illness arising from or necessitating admission to hospital must be investigated (see 1.4.11 Fabricated or Induced Illness). Officers should take into account repeated use of healthcare services and single uses of different medical services.

3 Young age

Pre-verbal children and pre-mobile children are especially vulnerable to abuse, as are children who are not yet old enough to attend school or pre-school groups.

4 Disability

Children with disabilities may be more vulnerable to abuse for a number of reasons, e.g., they may receive intimate personal care, have a higher dependency on carers, have fewer outside contacts and be less able to complain about abuse due to communication difficulties. Where a child’s disability results in their having experienced little external social interaction, there is potential that the child may not realise that what they have experienced is wrong. Where necessary, officers should seek advice from children’s social care, which is required to have information on every disabled child in their area.

5 Self-harm or threats or attempts to commit suicide

Some children who self-harm or attempt suicide do so as a response to abuse. Self-harm or threats or attempts to commit suicide by a child should be regarded as a possible indication of abuse, both of the child involved and of siblings or other children under the same care.

6 Evidence of sexual activity

This includes inappropriate sexualised behaviour, teenage pregnancy or accessing contraception or abortion, sexually transmitted disease (see 1.4.20 Rape, Sexual Activity and Pregnancy of a Child) or involvement in sexual exploitation and abuse through prostitution or the sex industry (see 1.4.23 Sexual Exploitation of Children).
7 Social isolation and particular vulnerability

Certain groups of children with whom the police have contact are considered particularly vulnerable, and their circumstances may raise safeguarding or child protection issues. These include children with learning difficulties and/or other disabilities, those using health services, children in local authority or foster care, those leaving this care when they reach adulthood, missing children (see 1.4.18 Missing Children or Families), young carers and those in the family justice system. Children may also be vulnerable when they are living in secure settings such as a children’s home, a secure training centre or prison. Research suggests that children who are in families that are socially isolated and who do not have access to community resources are at a higher risk of abuse. Other issues that may indicate particular vulnerability include a lack of basic amenities such as heating, lighting, indoor sanitation, water, cooking facilities and overcrowded accommodation. Asylum-seeking children, those who are victims and witnesses to crime and those who offend, are also vulnerable.

Behaviour and circumstances of the suspect

1 History of violent or sexual offending by the suspect

A child living with a parent or carer or other adult who has a history of violent or sexual offending, whether convicted or not, is at higher risk of suffering harm. There is a link between those convicted of sexual activity with, or rape of, a child and convictions for other serious sexual offences, particularly when the child was under the age of 13 years at the time of the rape (see 1.4.20 Rape, Sexual Activity and Pregnancy of a Child). Sexual offending can also include non-contact activities such as those relating to the downloading of child abuse images (see 1.4.2 Indecent Images of Children). For further information about sexual and violent offenders, see ACPO (2007) Guidance on Protecting the Public: Managing Sexual Offenders and Violent Offenders and Ministry of Justice (2009) MAPPA Guidance, Version 3.0 (see also 1.4.17 Managing Sexual Offenders and Violent Offenders).

2 Child abuse by the suspect

This includes any history of contact with children’s social care which relate to allegations of offending against the suspect and when there are children connected to the suspect who are, or have been, the subject of a child protection plan, or in contact with children’s social care.

3 Domestic abuse by the suspect

In those households where domestic abuse takes place, there is a risk of harm to children through direct abuse, and by witnessing the abuse of others. Officers should not rely on the presence of another person to protect a child, and should consider whether that person has the capacity or ability to protect. For further information see 1.4.10 Domestic Abuse and Domestic Homicide.

4 Abuse of animals by the suspect

Research has established links between child abuse and abuse of household pets. Any suspicion of animal abuse should prompt further enquiries into the welfare of children who frequent premises in the control or occupation of the perpetrator (see 1.4.4 Animal Abuse).
5  Grooming by the suspect

Abusers often prime and control their victims through a process known as grooming, which can occur over a short period or a number of years. This process has the purpose of securing the cooperation of the victim and the parent or carer. It is also carried out in order to reduce the risk of discovery or disclosure by creating an atmosphere of normality and acceptance, and/or fear. Victims are sometimes groomed to introduce further victims to the process of grooming and abuse. Evidence of grooming may be suggested by the suspect contacting children through various channels, including youth groups, familial ties, social networking websites and those associated with children’s interests. A suspect may also target single parents with children, eg, through dating websites.

A wide range of organisations such as churches, sporting bodies and charities have experienced problems with such individuals in the past. Most now have robust policies in place to vet members and protect children. However, experience has shown that those who commit sexual offences against children will attempt to infiltrate any environments in which they can gain ready access to the young and vulnerable.


6  Failure to provide medical care for a child

Failure to provide medical care for a child when it is required can indicate wilful neglect (see 1.2.6 Neglect). Removing a child from medical treatment and failure to keep appointments with healthcare professionals may also indicate a risk of harm to the child.

7  Threats or attempts to commit suicide or to self-harm

Self-harm or the threatened or attempted suicide of a parent or carer should prompt further investigation into the welfare of any children in the person’s care. Close attention should be paid to child contact arrangements where parents are separated, particularly where there is a history of self-harm or threats or attempts to commit suicide by a perpetrator of domestic abuse. A suicidal suspect with a history of perpetrating domestic abuse or child abuse should also be considered as potentially homicidal and a risk to their former or current partner and children. For further information see 1.4.10 Domestic Abuse and Domestic Homicide.

8  Misuse of illegal or prescription drugs and/or alcohol

Alcohol or drugs misuse may affect the ability to care for a child and impact directly on the health of an unborn child. There is also a risk of harm to young children from accessible alcohol, drugs or drugs paraphernalia. Some children may require particular care such as medication or tube feeding, which if wrongly provided or forgotten by someone influenced by alcohol or drugs could be fatal.

9  History of mental ill health

If a parent or carer has a history of mental ill health this does not in itself indicate any heightened risk, but when considered with other factors may do so. The impact on risk to the child will depend on the type and severity of the parent or carer’s condition. For further information see ACPO (forthcoming) Guidance on Police Responses to People with Mental Ill Health and/or Learning Disabilities.
10. Failure to take responsibility for previous abuse

A failure to accept responsibility for abuse of a child or to acknowledge that there are problems, particularly in the face of strong evidence, may heighten the impact of other risk factors.

11. Access to children

Whenever suspects have access to children, whether due to their personal circumstances, profession or hobbies, this should be recorded and considered as a factor in decisions relating to those suspects (and any actual or potential victims).

There are complex interrelationships between these risk factors. For example, some offenders target vulnerable children, so previous abuse can make some children more susceptible to further abuse, eg, by being groomed by an offender using the internet (see 1.4.14 Grooming) and/or being the victims of offences relating to trafficking (see 1.4.8 Child Trafficking). Risk factors applying to other parents or carers may be relevant in some cases, eg, where one parent or carer is a victim of domestic abuse (see 1.4.10 Domestic Abuse and Domestic Homicide). Decisions relating to protecting a child may also be affected by a parent or carer’s non-cooperation with agencies focused on safeguarding children, or signs of threats or manipulation by them.

1.3.2 ASSESSING AND MANAGING RISK

It is essential that the circumstances of the child suspected of being abused, and the suspect are considered in any decision-making process relating to risk (see 1.3.1 Established Risk Factors). Where a suspect is someone who presents a particular risk (eg, a Multi-Agency Public Protection Arrangements (MAPPA) offender or potentially dangerous person (PDP)) and they are linked to a child about whom there is concern (eg, they are subject to a child protection plan), this should be regarded as a particularly high-risk situation. For definitions of a MAPPA or PDP offender, see ACPO (2007) Guidance on Protecting the Public: Managing Sexual Offenders and Violent Offenders and Ministry of Justice (2009) MAPPA Guidance, Version 3.0.

Individual police officers, and sometimes the police in general, may not be in a position to recognise the significance of a particular risk factor. It is for this reason that information about risk should be recorded and managed so that it can be seen in its context and decisions made and action taken accordingly (see 1.9 Managing Information about Child Abuse).

Forces need to agree systems internally and multi-agency protocols (eg, with children’s services including children’s social care) to ensure that concerns for children are prioritised and actioned appropriately by each agency. Such systems assist in managing the capacity of all agencies. However, the police do not decide on the appropriate action for another agency to take or vice versa. An important aspect of effective multi-agency working is that while some aspects involve joint decisions, others require separate decisions which enable agencies to challenge each other when necessary. As far as the police are concerned, systems for managing information about concerns for children and the role of frontline supervisors are key to ensuring that cases are prioritised for action and the capacity to deal with cases is managed.
The management of risk relating to child abuse and the safeguarding of children is a multi-agency responsibility which will usually involve a number of different responses including criminal investigation, when appropriate (see Working Together). In some cases action through the criminal justice system may not be possible, eg, because there is insufficient evidence or the Crown Prosecution Service (CPS) decides that a prosecution is not in the public interest. Where there is risk of abuse continuing, there are various civil powers available to the police to manage the offender or PDP. For more details of Sexual Offences Prevention Orders (SOPOs) and Risk of Sexual Harm Orders (RSHOs), see ACPO (2007) Guidance on Protecting the Public: Managing Sexual Offenders and Violent Offenders.

1.4 CHILD ABUSE AND ASSOCIATED INVESTIGATIONS

Concerns for a child may arise from circumstances not explicitly reported as child abuse and from reports relating to other matters (see 1.9 Managing Information about Child Abuse).

In the following types of investigation (listed in alphabetical order) there are likely to be potential child abuse issues. They should be fully investigated to ensure the welfare of the child. An internal referral should be sent to the CAIU and, where appropriate, an external referral made to children’s social care. For more information see 2.17 Internal Referral to the Child Abuse Investigation Unit and External Referrals to other Agencies and 3.1.3 External Referrals from the Police to other Agencies.

1.4.1 ABANDONED BABIES OR CHILDREN

Where a child or baby is found abandoned, the focus of the investigation should be on locating the parent or carer and the investigation of potential criminal offences. Such cases are often complex in terms of the state of mind of the parent or carer. Any media strategy should include consideration of this and focus on the wellbeing of the baby or child and the parent or carer without drawing attention to any potential criminal offences involved. See also 4.15 Media Strategy.

Where a baby or child’s parent or carer is not identified, the results of the investigation may be important to such children in the future in terms of understanding their background or circumstances, or finding their parents when they are adults. Officers involved in the investigation should consider making contact details available should a child wish to get in touch with officers in the future. A police investigation in these circumstances may be a child’s only link with the past. Decisions about maintaining records of such investigations should take this into account and be made in consultation with children’s social care (see 1.9 Managing Information about Child Abuse).
1.4.2 INDECENT IMAGES OF CHILDREN

Under the Protection of Children Act 1978 (as amended by the Criminal Justice and Public Order Act 1994 and the Sexual Offences Act 2003), there are a number of offences which are associated with indecent images of children.

These offences are:

(a) to **take**, or **permit to be taken or to make**, any indecent photograph or pseudo-photograph of a child (meaning in this Act a person under the age of 18 years); or

(b) to **distribute** or **show** such indecent photographs or pseudo-photographs; or

(c) to **have in his possession** such indecent photographs or pseudo-photographs, with a view to their being distributed or shown by himself or others; or

(d) to **publish or cause to be published** any advertisement likely to be understood as conveying that the advertiser distributes or shows such indecent photographs or pseudo-photographs or intends to do so.

Causing an indecent photograph of a child to exist on a computer screen is considered to be ‘making an indecent photograph of a child’.

A person who either downloads images on to disc or who prints them off is making them. The Act is not only concerned with the original creation of images, but also their proliferation. Photographs or pseudo-photographs found on the Internet may have originated from outside the United Kingdom; to download or print within the jurisdiction is to create new material which hitherto may not have existed therein.

*R v Bowden* [2000] 2All ER 418.

**An indecent photograph**

The Act defines an indecent photograph broadly without defining the term ‘indecent’, as ‘an indecent film, a copy of an indecent photograph or film, and an indecent photograph comprised in a film.’ The Act defines copy to include negatives and a computer disc or any form of electronic means that can be converted into a photograph, and defines ‘film’ as ‘any form of video recording’.

**An indecent pseudo-photograph**

The Act defines a ‘pseudo-photograph’ as an image, whether made by computer graphics or otherwise, which appears to be a photograph, and defines an ‘indecent pseudo-photograph’ broadly without defining the term ‘indecent’, as a copy of an indecent pseudo-photograph, including data stored on a computer disc or by any other form of electronic means that can be converted into a pseudo-photograph.

**Interpretation of the terms ‘indecency’ and ‘child’**

Neither term is strictly defined in any of the three relevant Acts of Parliament. Both are strictly matters of fact and should be decided by a jury.
Indecency

*R v Stamford* [1972] 2 All ER 427 states that:

Whether or not a photograph or pseudo-photograph is indecent is a question of fact, and as a question of fact it is something for a jury or magistrate to decide. The jury should apply the standard of decency which ordinary right-thinking members of the public would set – the ‘recognised standards of propriety’.

Each indecent image of a child should be judged on its own without context to other images or the motivation of the photographer.

In *R v Graham-Kerr* (1988) WLR 1098, the accused had taken photographs of a young boy at a nudist meeting at a public swimming baths. The Court of Appeal held that the motivation of the photographer had no influence on the decency or otherwise of the photographs taken; a photograph is an indecent photograph of a child if it is indecent, and if it shows a child.

Child

There have been many occasions when requests have been made to the CEOP Centre’s Victim Identification Team asking them to provide details of suitably qualified paediatricians in order to provide expert testimony regarding ages of children.

When considering this course of action, attention should be paid to the case of *R v Land* (1997) CA (Crim Div) (Judge LJ, Poole J, Judge Rant QC) 10/10/97 which states:

A jury is as well placed as an expert (e.g. a paediatrician) to assess any argument addressed to the question whether the prosecution had established that the person depicted in a photograph was a child, and in any event expert evidence would be inadmissible: expert evidence is admitted only to assist the court with information which was outside the normal experience and knowledge of the judge or jury.

Sentencing Advisory Panel Guidelines

The Sentencing Advisory Panel Guidelines were brought about following the ruling in *R v Oliver* [2002] EWCA Crim 2766, et al. They divide images into categories for sentencing purposes and are loosely based on the Copine Scale, which was an image categorisation scale devised by Cork University’s Copine Project when assessing quantities and types of abusive material available on the internet.

The levels of indecency are as follows:

<table>
<thead>
<tr>
<th>Level</th>
<th>Definition</th>
</tr>
</thead>
<tbody>
<tr>
<td>Level 1</td>
<td>Images depicting erotic posing with no sexual activity</td>
</tr>
<tr>
<td>Level 2</td>
<td>Sexual activity between children or solo masturbation by a child</td>
</tr>
<tr>
<td>Level 3</td>
<td>Non-penetrative sexual activity between adults and children</td>
</tr>
<tr>
<td>Level 4</td>
<td>Penetrative sexual activity between children and adults</td>
</tr>
<tr>
<td>Level 5</td>
<td>Sadism or bestiality</td>
</tr>
</tbody>
</table>
Note: Categorisation of Level 1 images can be problematic. As such, it is recommended that images are sorted into those which would contravene the test of age and indecency before any further categorisation takes place. (For example, some images may be deemed to be erotic posing, may not pass the jury test of being indecent.)

Victim identification

Investigations relating to abusive or indecent images of children also provide the opportunity to identify, locate and safeguard victims and hold to account offenders who appear in the images, and/or potential victims within the perpetrators’ network of relationships.

Every effort should be made to attempt to identify the victims of abuse whose images are distributed via the internet or by other means.

Local force computer forensic departments have built up ‘hash value’ data sets which can be quickly used to grade bulk quantity seizures and ascertain which images may not have been seen before. These ‘new’ images may be more significant from a victim identification perspective and should be visually inspected to establish any links to the person from whom they have been seized or the presence of any clues which may enable the victim within the images to be traced. It is important to note that such clues to trace real victims may appear in non-indecency images within the seized material. The Victim Identification Team at CEOP Centre can be consulted and asked to check the ChildBase images database to establish if such material has been seized previously.

Large quantities of images should not be dip-sampled or top-skimmed when counting and categorising is taking place. If these methods are used it is extremely likely that victims of child abuse will be missed. Should their use be necessary to reduce forensic backlogs or for purposes of expediency in individual cases, then those images that have not been properly analysed should be forwarded to the Victim Identification Team at the CEOP Centre, for further analysis.

In some cases, an image may not be intrinsically indecent but may be unusual in the context of the person in possession of it (e.g., a collection of photographs of children for a particular reason). This kind of information may be relevant to the management of sexual or violent offenders and PDPs and decisions relating to, for example, an application for a SOPO or RSHO. For more information see ACPO (2007) Guidance on Protecting the Public: Managing Sexual Offenders and Violent Offenders.

1.4.3 Allegations Against People Who Work with Children

Where allegations of child abuse have been made against a professional which suggest a child is suffering or is likely to suffer, significant harm and/or suggest that a person is unsuitable to work with children, these should be investigated in accordance with Appendix 5 of Working Together and related guidance including ACPO (2007) Guidance on Implementing Appendix 5 of the Government’s Working Together to Safeguard Children Paper, which describes in detail the role of the Local Authority Designated Officer (LADO).
1.4.4 ANIMAL ABUSE

Where animal abuse has occurred in a household, there is an increased likelihood that other abuse has taken place and that children are at risk of harm. Animal abuse may also be used by the perpetrator to prevent victims of abuse from reporting to the police or other agencies. In cases where a child perpetrates cruelty to animals, this usually indicates that the child has suffered abuse and/or may be at risk of perpetrating abuse in the future (see also 1.4.19 Offending by Children). For further information see NSPCC (2005) Understanding the links: child abuse, animal abuse and domestic violence: Information for professionals at http://www.nspcc.org.uk/inform

1.4.5 BULLYING IN SCHOOLS

Both victims and child perpetrators of bullying in school raise issues about safeguarding children. All schools should have policies for dealing with bullying to resolve the matter without recourse to the criminal justice system. This does not preclude a criminal investigation where criminal offences occur. In such cases investigating officers should consult police schools liaison officers, where they exist, and make contact with the school to establish whether there have been previous allegations against the alleged perpetrator. Early intervention in cases of suspected bullying in schools is essential. Restorative justice approaches in some instances may help to reduce bullying and victimisation in school. For further information see http://www.yjb.gov.uk/en-gb/practitioners/WorkingwithVictims/RestorativeJustice/RJinSchools.htm

1.4.6 CHILD ABDUCTION (INCLUDING PARENTAL ABDUCTION)

Under the Child Abduction Act 1984 it is an offence for a person connected with a child under the age of 16 years to take or send that child out of the UK without appropriate consent. Under the Act, it is also an offence for a person not connected with the child, without lawful authority or reasonable excuse, to take or detain a child under the age of 16 years, so as to remove or keep that child from lawful control. This guidance does not include information about abduction and kidnap (see ACPO (2008) Practice Advice on the Management of Kidnap and Extortion Incidents [Restricted]).

A complaint relating to parental abduction may be reported directly to the police or through a solicitor. Police should take immediate action with an ‘all ports’ alert where there is a real and imminent danger of abduction within the next twenty-four hours. There does not need to be any type of court order in place for the police to take this action in order to prevent abduction. For further information see Metropolitan Police Service (2005) Child Abduction: A Practical Guide for Police Officers, which sets out the law and procedures for dealing with allegations of parental abduction and action to be taken to prevent the removal of a child from the UK. For further information on immediate police action, see 2.14.5 Initial Response to Suspected Parental Abduction. See also ACPO (2009) Guidance for Using the Schengen Information System II in Cases of Parental Abduction of Children.

Child Rescue Alert has now been adopted by the majority of forces in England and Wales. Further details are available from the Missing Persons Bureau at the National Policing Improvement Agency (NPIA) (see http://www.npia.police.uk/en/10239.htm).

Reunite is the leading UK charity that specialises in helping parents whose children have been abducted and taken abroad (see http://www.reunite.org/).
1.4.7 CHILD HOMICIDES

Child homicides should be investigated in accordance with ACPO (2006) Murder Investigation Manual (see also 1.4.24 Sudden Unexpected Death in Childhood and 1.4.16 Honour-Based Violence and other Illegitimate Justifications for Abuse). The investigation of homicide is specialised and, within that sphere, the investigation of childhood deaths has its own unique characteristics. Forces should have local policies in place with an appointed designated lead senior investigating officer (SIO). Where there are CAIU staff trained to the appropriate standard, the CAIU should either investigate child homicides, perhaps jointly with the major crime team, or, at the least, their advice should be sought by the SIO, who ideally should have CAIU experience (see 1.6 Child Abuse Investigation Units).

Investigating officers should make use of the specialist knowledge and contacts with other agencies that the CAIU has and, where appropriate, specialist domestic abuse officers and coordinators (see 1.4.10 Domestic Abuse and Domestic Homicide). Investigators should also seek information from partner agencies to establish whether there have been previously recorded concerns about children. Working Together, Chapter 7 describes the multi-agency meetings that need to take place in order to facilitate this information exchange. This will include interviewing relevant healthcare staff, eg, health visitors. A key role for the police in the initial response, which should take place within twenty-four hours, and in subsequent strategy meetings, is to consider the welfare and safety of surviving siblings.

Section 5 of the Domestic Violence, Crime and Victims Act 2004 relates to the offence of causing or allowing the death of a child or vulnerable adult. The offence is limited to where the victim has died of an unlawful act, so it will not apply where the death was an accident. The offence only applies to members of the household who had frequent contact with the victim, and could, therefore, be reasonably expected to be aware of any risk to the victim, and to have a duty to protect the victim from harm. The household member must have failed to take ‘reasonable steps’ to protect the victim. What will constitute reasonable steps will depend on the circumstances of the person and their relationship to the victim. The victim must also have been at significant risk of serious physical harm. The risk is likely to be demonstrated by a history of neglect or violence towards the vulnerable person, or towards others in the household. Only those aged 16 years or over may be guilty of the offence, unless they are the mother or father of the victim. The offence is relevant when there is evidence that two or more carers may be responsible for the death of a child, but there is insufficient evidence to identify the direct perpetrator, ie, which of the two is responsible. Evidence should be collected in order to prosecute the offender(s) for the direct offence (eg, of murder or manslaughter) but, where this is not possible, the results of the investigation could be useful for a prosecution under Section 5. For further information, see Home Office Circular 9/2005 The Domestic Violence, Crime and Victims Act 2004, the new offence of causing or allowing the death of a child or vulnerable adult.

In addition to murder, manslaughter and the offence of causing or allowing the death of a child, there are several other specific child homicide-related offences. These are child destruction, procuring an abortion or miscarriage, abandoning a child and endangering their life, concealing a birth and neglect (eg, suffocation due to overlying a child when intoxicated).

The Centralised Analytical Team Collating Homicide Expertise and Management (CATCHEM) database is held by the NPIA. It holds data on offenders and offences relating to child homicide and long-term missing children, and provides a support system for investigating officers.
1.4.8 CHILD TRAFFICKING

Child trafficking is the practice of transporting children into, out of or within the UK for the purposes of exploitation. Offences relating to trafficking for sexual exploitation are detailed in the Sexual Offences Act 2003 (sections 57, 58 and 59). Trafficking for other forms of exploitation is an offence under section 4 of the Asylum and Immigration (Treatment of Claimants, etc) Act 2004. See also 1.4.23 Sexual Exploitation of Children.

Children are trafficked to, within and outside of the UK for various forms of exploitation. These include:

- Labour exploitation (construction, restaurants);
- Domestic servitude;
- Criminal practices (cannabis cultivation, petty street crime, illegal street trade);
- Sexual exploitation (brothel-based, closed community, for child abuse images);
- Application for residence abroad or in the UK;
- Benefit fraud;
- Illegal adoption;
- Forced marriages.


Children are often abused and exploited in multiple ways. Children trafficked to the UK come from many countries around the world. The best known profiles are of children from the UK, China, Afghanistan, Romania, Vietnam and Nigeria. The CEOP Child Trafficking Unit has up-to-date information on trends. Child trafficking offences are committed at varying levels of organisation, from informal familial offending to highly sophisticated organised crime. Depending on local arrangements, CAIU officers may investigate in the first instance to ensure that victims receive a specialist response.

Children come to be trafficked in various ways, eg, abduction, coercion, by the promise of jobs or education or the involvement of families and friends. The Palermo Protocol to prevent, suppress and punish trafficking in persons, especially women and children, supplementing the United Nations Convention against Transnational Organised Crime (2000) establishes children as a special case. Any child transported for exploitative reasons is a trafficked victim, whether or not they have been forced or deceived. This is partly because it is not considered possible for children to give informed consent. Even when a child understands what has happened, they may still appear to submit willingly to what they believe to be the desire of their parents or accompanying adults. These children must also be protected.

Child trafficking and exploitation is often accompanied by various types of control such as violence, the threat of violence, sexual abuse, alcohol and drug abuse, emotional abuse, manipulation through skewed or unacceptable cultural practices and imprisonment to suppress victims’ resistance and to ensure their compliance. Officers should, therefore, be alert to the possibility that victims may not fully cooperate with an investigation, for fear of reprisals. Offenders may also attempt to abduct or coerce the child while the investigation is ongoing and while the child is being cared for by the local authority. Exploited children often show loyalty to those who have trafficked or exploited them, and this may be due to their perception that they are being helped rather than exploited. They may also fear the persons trafficking them.
Children are sometimes forced into committing criminal acts on behalf of their trafficker. Examples encountered include forced cannabis cultivation, organised street crime and begging. Coercion should always be considered when dealing with these children, and advice sought from children’s social care. Where it is found that the child committed the given offence as a direct result of trafficking, a charge should only be made in exceptional circumstances. For further guidance, see CPS (2009) Guidance on Human Trafficking And Smuggling, available at http://www.cps.gov.uk/legal/h_to_k/human_trafficking_and_smuggling/

In some cases consideration needs to be given to those adults who present themselves as children and who claim to be adults. They do this in order to avoid engagement with agencies where there is no proof of their identity or age. There are two main issues relating to safeguarding children in respect of individuals who are, or who appear to be, in the country illegally or as asylum seekers:

- Those who claim to be children and are requesting support from children’s social care;
- Those who present themselves as adults for services such as housing, or to avoid social care involvement.

Multi-agency protocols should address the issues that arise from such situations (eg, those who go missing and then remain on police systems as high risk and vulnerable and who are difficult to identify and locate). These protocols include methods of establishing the age of individuals.

If the victim states that they are a child, they should be viewed as such until their age can be verified by identification or an independent age assessment carried out by the local authority. It is the age and exploitative nature of the work, rather than the child’s immigration status, that ensures exploiters minimise the child’s exposure to members of the public. Exploitation often occurs in private residences or isolated communities (where children are usually deprived access to both education and healthcare). Safeguarding procedures for recovered, missing children believed to be the victims of trafficking should be invoked, as these children are at high risk of going missing again (see 1.4.18 Missing Children or Families).

All children who may have been trafficked should be referred to children’s social care for assessment for onward referral to the competent authority as part of the national referral mechanism for the identification of victims of trafficking. The United Kingdom Human Trafficking Centre (UKHTC) at http://www.ukhtc.org can be contacted for more information. All identified cases of child trafficking should be sent to the UKHTC as a matter of course as this is the central repository on all human trafficking cases. The UKHTC and the UK Border Agency act as the competent authorities within the national referral mechanism for the identification of victims of trafficking. Alongside CEOP, the UKHTC acts as a conduit for frontline intelligence which is used to assess the current picture of trafficking across the UK. This intelligence can be used to develop policy and assist frontline practitioners in identifying and combating this abuse.

There are many indicators which may help to identify if a child is a victim of trafficking. The General Awareness module of the NPIA Human Trafficking learning programme includes a section on identifying victims of trafficking, including children. The National Society for the Prevention of Cruelty to Children (NSPCC) Child Trafficking Advice and Information Line has been set up to help frontline professionals identify children being exploited. This service is available from 09.30 to 16.30, Monday to Friday, see http://www.nspcc.org.uk/
1.4.9 COMPLEX CHILD ABUSE

Complex, organised or multiple abuse occurs as part of a network of abuse across a family or community, within residential homes or schools and within ‘on or off-line’ networked groups of sexual offenders (sometimes referred to as paedophile rings). Such abuse is often reported a long time after the offending took place (see 1.4.15 Historical Child Abuse). Complex abuse is defined in Working Together and Home Office and Department of Health (2002) Guidance on Complex Child Abuse Investigations: Inter-Agency Issues, as:

Abuse involving one or more abuser and a number of related or non-related abused children or young people. The abusers concerned may be acting in concert to abuse children, sometimes acting in isolation, or may be using an institutional framework or position of authority to recruit children for abuse.

This guidance does not give a prescriptive definition of ‘complex’ and the use of the term is on a case-by-case basis depending on the facts and local force procedures. The term may be used to describe a case which includes factors such as the:

- Number of suspects involved;
- Number of actual or potential victims;
- Particular vulnerability of any victims involved (eg, children with learning disabilities or living away from home, or vulnerable adults in a care home);
- Environment, eg, institution, establishment, club, group, internet based;
- Number of scenes or locations;
- Setting for the offences is an institution;
- Length of time between the offences and the report (sometimes referred to as allegations of historical abuse);
- Alleged offending occurred over a long period of time.

Children living away from home, including foster care, residential care, private fostering, health settings, residential schools, prisons, young offender institutions and secure units may be particularly vulnerable to child abuse (see 1.3.1 Established Risk Factors). For further information see Working Together. For detailed information about investigating complex child abuse, see Part Two – Investigating Complex Child Abuse.

The investigation of complex child abuse is time consuming and requires specialist skills from both police and children’s social care. It may also require the assistance of the NSPCC Independent Enquiry and Assessment Service (IEAS), particularly in cases where allegations relate to members of staff from children’s social care or foster carers. For further information see Home Office and Department of Health (2002) Guidance on Complex Child Abuse Investigations: Inter-Agency Issues.

The Historical Institutional Child Abuse Database is administered by the Serious Crime Analysis Section (SCAS) at the NPIA. Suspect information is not proactively collated for inclusion on the dataset, but police forces can submit names of suspects for searching. This name is then searched across the database to see if the suspect has been highlighted to the unit by investigations elsewhere. If so, both police forces are contacted and encouraged to liaise to share information or intelligence on that person. If the suspect has not been the subject of an inquiry in the past, then that person’s details are entered onto the database to be included in future searches. Individuals entered onto the database have to be under investigation but not necessarily charged or convicted of a crime. The database only retains details of people who have been subject to an inquiry; it does not contain information about suspected offences or details of alleged victims. For further details contact scas.enquiries@npia.pnn.police.uk
**1.4.10 DOMESTIC ABUSE AND DOMESTIC HOMICIDE**

ACPO uses the generic term domestic abuse, but the shared ACPO, CPS and government definition relates to domestic violence as:

Any incident of threatening behaviour, violence or abuse (psychological, physical, sexual, financial or emotional) between adults, aged 18 and over, who are or have been intimate partners or family members, regardless of gender and sexuality. (Family members are defined as mother, father, son, daughter, brother, sister and grandparents, whether directly related, in-laws or step-family.)

The term domestic abuse is used in this guidance, and incorporates the definition of domestic violence.

*ACPO (2008) Guidance on Investigating Domestic Abuse* provides details of actions to follow if officers suspect domestic abuse against an adult victim. See also the DASH 2009 Checklist and related guidance.

Research suggests that there are significant links between child abuse and domestic abuse. Where one type of abuse exists the other is also likely to be present. Children who witness domestic abuse are exposed to harm and may also be the victims of direct abuse (see **1.2.7 Significant Harm** for details of the definition of harm). Perpetrators of domestic abuse may also pose a risk of harm to children. Links between domestic abuse and child abuse should be considered wherever either type of abuse is suspected. This will assist officers in identifying and managing information, carrying out an effective investigation and ensuring an appropriate police and multi-agency response. For example, if there is concern for a child who lives in the same household as a perpetrator of domestic abuse, this information should be recorded and acted upon. Also, particular safety issues are likely to apply to a child who is living in refuge accommodation because of the domestic abuse of their parent or carer.

Failure to identify and fully investigate domestic abuse can result in failure to protect the safety of both child and adult victims. Officers should be vigilant to indicators of child abuse that may come to police attention through domestic abuse investigations. When investigating domestic abuse cases, officers should also be alert to concerns for children, including evidence of direct abuse or neglect and psychological harm suffered by a child who witnesses abuse (eg, the offence of cruelty under section 1 of the Children and Young Persons Act 1933). If an adult victim of domestic abuse is pregnant, then there may be safeguarding issues in relation to the unborn child. If a child is normally resident at an address where there is suspected domestic abuse, or a victim of domestic abuse is pregnant, officers will need to make an internal referral to the CAIU (see **1.9.4 Internal Referral to the Child Abuse Investigation Unit**). Following an assessment of risk of harm, a referral and information sharing with other agencies should be considered, eg, children’s social care or health services such as the midwifery or health visiting service. Referrals to children’s social care and other agencies should be made in accordance with local policy (see **3.1.3 External Referrals from the Police to other Agencies**).
The ACPO definition of domestic abuse applies to cases where victims and perpetrators are over the age of 18 years. There may be cases where a victim who is under 18 years is being subjected to abuse by a partner or former partner who is also under 18 or over 18 years. Such a case falls within this guidance, which defines a child as a person under the age of 18 years (see 1.2.1 A Child). There may, however, be cases where it will be appropriate to apply the principles of ACPO (2008) Guidance on Investigating Domestic Abuse, in addition to those in this guidance. The same may apply when, for example, a victim is being abused by a family member as an adult (within the definition of domestic violence) and is also an adult survivor of child abuse (eg, a woman being subjected to sexual abuse by her father that began in childhood). Dependent on local arrangements, police forces should provide advice on which internal department should lead in investigating such cases. Working practices should reflect the needs of the victim and of the investigation to ensure an appropriate police response on a case-by-case basis. Forces should also have systems in place which ensure that there is a holistic, whole-family approach to the investigation and corresponding police and multi-agency action.

1.4.11 FABRICATED OR INDUCED ILLNESS

The phenomenon of parents and carers inflicting harm on children in their care by fabricating or inducing illness, and subsequently bringing this to the attention of medical practitioners for unnecessary examination and treatment is well documented. There are examples of such harm being inflicted on the child while the child is under medical supervision, including interference with intravenous lines, suffocation and deliberate poisoning. For more information about fabricated or induced illness, see Department of Health (2008) Safeguarding Children in Whom Illness is Fabricated or Induced, supplementary guidance to Working Together and All Wales CP Procedures Review Group (2004) All Wales ACPC Protocol: Safeguarding Children in Whom Illness is Fabricated or Induced.

In rare cases police investigations have used visually recorded covert surveillance. The safety and health of the child (both long-term and short-term) is the overriding factor in planning and implementing covert surveillance. In such circumstances the decision to use covert techniques should be taken at a strategy discussion, and the police should take full responsibility for carrying out covert surveillance operations (see 4.8.3 Covert Methods).

1.4.12 FEMALE GENITIAL MUTILATION

Female genital mutilation (FGM) refers to the removal of part or all of the female genitalia for cultural or other non-therapeutic reasons. This is extremely painful and has serious consequences for physical, sexual and mental health. It can also result in death. FGM is reported to be practised in twenty-eight African countries and in parts of the Middle and Far East. Typically, it is performed on girls aged between 4 and 13 years, but can be performed on newborn infants or on young women prior to marriage or pregnancy. It is not a religious practice and leaders of all major religions have condemned the practice as unnecessary and harmful.

Any such procedure on a woman or girl in the UK is unlawful under the Female Genital Mutilation Act 2003. It is also an offence under the Act for UK nationals or permanent UK residents to carry out FGM abroad, or to aid, abet, counsel or procure the carrying out of FGM abroad, even in countries where the practice is legal. The Act excludes surgical operations that are necessary for a girl’s physical or mental health, and operations carried out in connection with childbirth. In assessing a girl’s mental health, no account is taken of any belief that the operation is needed as a matter of custom or ritual.
Offences of FGM should be investigated in accordance with *Working Together* and this guidance. FGM can differ from other forms of child abuse. For example, despite the severe health consequences, parents and others who commit FGM against a child may genuinely believe that it is in the child’s best interest to conform to their prevailing custom. They may believe it makes the child socially acceptable and may not intend it as an act of abuse. Female siblings of any child found to be mutilated may have also been mutilated or may be at risk of FGM.

FGM is usually practised in the country of origin of the child’s family. Suspicions may arise in a number of ways that a child is being prepared for FGM to take place abroad. These include knowing that the family belongs to a community in which FGM is practised and that they are making preparations for the child to take a holiday, arranging vaccinations or planning absence from school. The child may also talk about a ‘special procedure’ taking place.

Indicators that FGM may have already occurred include prolonged absence from school with a noticeable behaviour change on return, long periods away from classes or other normal activities, and possibly experiencing difficulty in urinating or having other bladder or menstrual problems. Midwives and obstetricians may become aware that FGM has been practised on an older woman and this may prompt concerns for children in the same family.

Where a child appears to be in immediate danger of mutilation and parents or carers cannot satisfactorily guarantee that they will not proceed with it, officers should consider the use of police protection powers (see 2.12 Police Protection). If there is sufficient time, a strategy discussion should take place during which the use of either an emergency protection order (EPO) or prohibited steps order is considered (see 3.5.4 Emergency Protection Order and 3.5.6 Prohibited Steps Order). In either case, a strategy meeting should be used to consider the coordination of a criminal investigation (see 3.2 Strategy Discussions and Meetings).

If a child has already undergone FGM, a strategy discussion should be held to assess the implications for the child and the coordination of the criminal investigation. Arrangements, including medical and therapeutic assessments, should be made to safeguard the child. Particular attention should be paid to the potential risk to other female children in the same family.

It is likely that communities in which FGM is practised reside throughout England and Wales. All police forces should ensure that arrangements for information sharing about FGM are included in the Local Safeguarding Children Board (LSCB) procedures. Officers should not be reluctant to investigate alleged offences of FGM for fear of being accused of racism. For further information see *Home Office Circular (10/2004) The Female Genital Mutilation Act 2003*. 
1.4.13 FORCED MARRIAGE

A forced marriage is a marriage conducted without the full and free consent of both parties. It should not be confused with an arranged marriage, which has the consent of both parties. Children (female and male) can be subjected to forced marriages both in the UK and abroad. In forced marriages, family members, community members or spouses may perpetrate abuse, either by forcing the victim into the marriage or by abusing them after the marriage. The abuse may be committed by any family member (male or female) and may or may not include the other party to the forced marriage. The Forced Marriage (Civil Protection) Act 2007 allows the High Court or county courts to protect a person from being forced into a marriage, or from any attempt to force a person into marriage, or to protect a person who has been forced into a marriage by making a forced marriage protection order. Orders are usually applied for by local authorities. An order can have a power of arrest attached to it and a breach is classed as a contempt of court, which can carry two years’ imprisonment. The identity of those subject to the order does not need to be specified in the order.

The Forced Marriage Unit is part of the Foreign and Commonwealth Office and develops government policy on forced marriage, coordinates outreach projects and provides support and information to those at risk. Officers investigating forced marriages should not engage in community mediation and should identify suitable local advocacy groups to support victims. They should also consider whether any siblings of the child of primary concern are also at risk. For further information see Home Office, Foreign and Commonwealth Office and ACPO (2005) Dealing with Cases of Forced Marriage: Guidance for Police Officers, Second Edition (which is currently under review) and HM Government (2008) The Right to Choose: Multi-agency statutory guidance for dealing with forced marriage. See also 1.4.16 Honour-Based Violence and other Illegitimate Justifications for Abuse.

1.4.14 GROOMING

Grooming is the process of reducing the resistance of a child, or their parents or carers, to abuse. This may be achieved through increasing a child’s or parent’s or carer’s fear of what might happen should they report the abuse, as well as inducing them to believe that the abuse is acceptable. Grooming may take place through personal contact with the child or the parent or carer, or through other means of communication such as the internet. Grooming is a key element in crimes relating to trafficking of children (see 1.4.8 Child Trafficking). Victims of child trafficking may behave as if they are complicit because they have been groomed by the trafficker to believe that they are being smuggled into a country for a better life or are in some way ‘choosing’ a particular way of living. This can make it more difficult to identify them as victims of child abuse and to provide them with the appropriate services. Section 15 of the Sexual Offences Act 2003 has introduced a specific criminal offence of meeting or travelling to meet a child following sexual grooming with the intention of committing a relevant sexual offence. See also 1.3.1 Established Risk Factors.
1.4.15 HISTORICAL CHILD ABUSE

Allegations of child abuse are often made by adults and children a long time after the abuse has occurred, particularly when the abuser is known to them or is a member of their family. There are many reasons for an allegation not being made at the time, including fear of reprisals, the degree of grooming and control by the abuser (see 1.4.14 Grooming), shame or fear that the allegation may not be believed, or not understanding that something is abuse. The allegation may be triggered by the person becoming aware that the abuser is being investigated for a similar matter, or suspecting that the abuse is continuing against other children. There is no specific period of time which indicates that an allegation relates to historical child abuse. Where a report is made a long time after an offence has occurred, however, officers should consider all investigative possibilities including those which may have developed due to advances in forensic science. Where the victim is an adult who was abused as a child, elements of this guidance will be relevant to both that victim and others who may still be children.

Officers investigating historic child abuse allegations, which are complex because of the number of victims, offenders, or other factors, whether in an institutional, family or community setting, should consult Part Two – Investigating Complex Child Abuse. This includes information to ensure that approaches to potential witnesses or victims are properly managed. See also 1.4.20 Rape, Sexual Activity and Pregnancy of a Child and 1.4.9 Complex Child Abuse.

1.4.16 HONOUR-BASED VIOLENCE AND OTHER ILLEGITIMATE JUSTIFICATIONS FOR ABUSE

Illegitimate justifications for violence and abuse, including murder, are sometimes referred to as ‘honour-based violence’ (HBV). There have also been examples of child abuse linked to belief in spirit possession or witchcraft or other spiritual or religious belief (see HM Government (2007) Safeguarding Children from Abuse Linked to a Belief in Spirit Possession). This guidance is based on the premise that no cultural or religious heritage takes precedence over the standards of childcare embodied in law, and no religious or cultural belief ever justifies the abuse of children.

Although the term HBV is commonly used, it is recognised here that there is no honour in, and no legal defence for, honour-based violence. To associate the word ‘honour’ with such offending behaviour is demeaning to the criminal justice system and the cultures and religions which are sometimes misrepresented to serve the interests of individuals. An understanding of the context of the crimes where there may be such illegitimate justifications for abuse will, however, assist in identifying lines of enquiry and managing the investigation.

HBV can be described as a collection of practices (some criminal and some not) which are used to control behaviour within families to protect perceived cultural and religious beliefs and/or honour. Abuse may occur when perpetrators perceive that a relative has shamed the family and/or community by breaking a perceived honour code. HBV can be distinguished from other forms of violence as it is often committed with some degree of approval and/or collusion from family and/or community members. Examples of HBV may include controlling sexual activity, domestic abuse, child abuse, rape, kidnapping, false imprisonment, FGM (see 1.4.12 Female Genital Mutilation), threats to kill and fear of or actual forced marriage (see 1.4.13 Forced Marriage) or homicide (see 1.4.7 Child Homicides).

### 1.4.17 MANAGING SEXUAL OFFENDERS AND VIOLENT OFFENDERS

Investigations that take place as part of the management of sexual offenders and violent offenders can relate to child abuse. MAPPA offenders and PDPs can have an offending background which includes child abuse. Such abuse can also be uncovered during the management of offenders who have no record of such offending behaviour. For example, evidence of potential or actual child abuse could be uncovered during a home visit to a Registered Sexual Offender (RSO) who has established an intimate relationship with an individual with children. In all such cases, child abuse should be investigated using this guidance. Information should be recorded and stored on appropriate police systems including the IMPACT Nominal Index (INI) and the Violent Offender and Sex Offender Register (VISOR) database.

In some cases, child abuse offenders who are not managed within MAPPA or as PDPs will need to be included within force systems which manage such individuals. For further information see [ACPO (2007) Guidance on Protecting the Public: Managing Sexual Offenders and Violent Offenders and Ministry of Justice (2009) MAPPA Guidance, Version 3.0.](#)

Section 13 of *Ministry of Justice (2009) MAPPA Guidance, Version 3.0* underlines the duty on the individual agencies working within MAPPA to safeguard and promote the welfare of offenders under 18 years, at the same time as managing the risks they present. It requires engagement by youth offending teams (YOTs) and children’s services in all relevant MAPPA meetings, and in any consideration of disclosure of information about young offenders.

### 1.4.18 MISSING CHILDREN OR FAMILIES

Child abuse may be indicated when a child is reported as missing or when a family or child misses significant appointments, eg, with healthcare professionals, and is suspected of having moved out of the local area without notice. Children who go missing may be at risk while they are missing and may have run away to escape abuse. Before missing children are returned, enquiries should first be made to discover the reasons for their disappearance. These enquiries can result in further concerns about the child and reveal incidents of abuse. Information obtained during missing persons investigations, eg, where a child or children are regularly found at the same address or with the same person, may indicate a need for further investigation. Occurrences of missing children will often require a referral to children’s social care (see [3.1.3 External Referrals from the Police to other Agencies](#)).

### 1.4.19 OFFENDING BY CHILDREN

When children are reported to be abusing others, offending in other ways, or involved in substance abuse, this should be recognised as a possible indicator that they are or have been a victim of child abuse. For further information see *Working Together*. Local force policies in respect of notifying relevant agencies of youth offending should be followed. Sexual offending by children, even if relatively minor, eg, exposure, may escalate to more serious sexual offending. This should be referred to children’s social care so that issues can be dealt with at an early stage (see 3 Police Responses and Multi-Agency Working to Safeguard Children).

Any concerns for the welfare of a child should be notified to the CAIU for consideration of a referral to children’s social care. Where the YOT is involved with a particular child, they will complete a risk assessment which includes information on welfare and any issues resulting in an external referral, eg, to children’s social care. Forces should ensure that local processes exist to update intelligence systems.


### 1.4.20 RAPE, SEXUAL ACTIVITY AND PREGNANCY OF A CHILD

Information about the investigation of rape is provided in ACPO/CPS (2009) *Guidance on Investigating and Prosecuting Rape*. It includes information about services for children provided by Sexual Assault Referral Centres (SARCs) and Independent Sexual Violence Advisors (ISVAs). For example, some SARCs deal with adults and others may have child interview facilities and general services aimed at the needs of children, depending on local arrangements. In addition to general witness and victim support services, there are specialist services for victims of sexual violence and abuse. For example, The Survivor’s Trust is the umbrella agency for a number of such services which offer a range of support and therapeutic services for victims, including ISVAs. For further information see http://www.thesurvivorstrust.org

Sometimes sexual abuse committed against a child (often by a family member or carer) will be reported when the victim is an adult, and this will result in an investigation of abuse. (See 1.4.15 Historical Child Abuse and 1.4.9 Complex Child Abuse.)

Allegations of sexual activity with a child, including situations when the child claims to be consenting, should be considered as potential child abuse. The pregnancy of a child under 16 years of age could provide evidence in a criminal investigation. Under the Sexual Offences Act 2003, in addition to specific offences relating to rape and sexual activity with a child, it is an offence under section 2 of the Child Abduction Act 1984 for a person acting without lawful authority or reasonable excuse to take a child under the age of 16 years from the possession of his or her parent or guardian.
In some cases the effects of the abuse may mean that the child does not realise that they are being abused, resulting in the minimising and denying of the abuse; they may also claim that they are consenting to it. Any police investigation should consider such issues, including when interviewing the victim and the suspect. Where the police are investigating a case where a child claims to be consenting to sex, a discussion should take place between the police and children’s social care to ensure that all relevant information is shared and an informed decision is made about any risk of harm and how to proceed in the best interests of the child. For example, in cases in which it is clear that a child over 13 years old is engaged in consensual sexual activity with another child of a similar age, this may include determining the level to which the police need to become involved. A child’s right to a private life and the claim by the child to be consenting to sex do not affect the duties on agencies to consider the possibility that a child may be suffering harm, and to take appropriate action to protect the child and any other children at risk of harm. In order to assess whether a child having sexual activity under age is likely to be at risk of significant harm, checks will usually need to be made with the police (eg, relating to any information about the offending history of the suspect). Local police and multi-agency protocols should contain arrangements for contact with the police in such cases, whatever or not a full criminal inquiry is later considered necessary.

Officers should consider that there is a correlation between those convicted of unlawful sexual activity with a child, or rape of a child and convictions for other serious sexual offences, particularly when the child was under the age of 13 years at the time of the unlawful sexual activity or rape. See also 1.4.19 Offending by Children.

1.4.21 STALKING AND HARASSMENT

Offences relating to stalking and harassment are known to affect children. For further details of such investigations, see ACPO (2009) Practice Advice on Investigating Stalking and Harassment. See also 1.4.14 Grooming.

1.4.22 TRAVELLING SEXUAL OFFENDERS

Some sexual offenders travel abroad to abuse children. In some cases, abusers take children with them, prearrange access to children or travel to locations where they will have ready access to children who are abused by sexual exploitation. Particular countries are attractive destinations for abusers because of a low age of consent to sex, tolerance of sex with children, inadequate legislation, poorly resourced law enforcement and an established sex industry that includes the exploitation of children. Other factors influencing travel to specific destinations include choosing countries where poverty leaves children vulnerable to exploitation or where children are less physically developed for their age and appear to be younger. Foreign nationals, not restricted by British monitoring, may also travel to the UK for the purpose of sexually abusing children.

Under section 114 of the Sexual Offences Act 2003, the police may apply for a Foreign Travel Order (FTO) to prevent qualifying offenders (eg those dealt with by the courts in respect of certain sexual offences against a child under 16 years, either in this country or abroad) from travelling abroad where and so far as it is necessary to protect a child or children from serious sexual harm outside the UK. The police may apply for an FTO at the same time as applying for a SOPO, or separately.

For further information about those who travel to commit sexual offences against children, see http://www.ceop.police.uk See also 1.4.23 Sexual Exploitation of Children.
1.4.23 SEXUAL EXPLOITATION OF CHILDREN

Child sexual exploitation is defined in HM Government (2009) Safeguarding Children and Young People from Sexual Exploitation as follows:

Sexual exploitation of children and young people under 18 involves exploitative situations, contexts and relationships where young people (or a third person or persons) receive ‘something’ (e.g. food, accommodation, drugs, alcohol, cigarettes, affection, gifts, money) as a result of them performing, and/or another or others performing on them, sexual activities. Child sexual exploitation can occur through the use of technology without the child’s immediate recognition; for example being persuaded to post sexual images on the Internet/mobile phones without immediate payment or gain. In all cases, those exploiting the child/young person have power over them by virtue of their age, gender, intellect, physical strength and/or economic or other resources. Violence, coercion and intimidation are common, involvement in exploitative relationships being characterised in the main by the child or young person’s limited availability of choice resulting from their social/economic and/or emotional vulnerability.

Children engaged in prostitution and other forms of sexual exploitation are victims of abuse. The principal law enforcement effort should be against abusers and those who coerce children into prostitution and other forms of sexual exploitation. Officers should recognise situations in which children are being sexually exploited or are at risk of sexual exploitation. Such situations may become apparent to officers carrying out unrelated investigations or executing search warrants for other matters, for example, drugs. Children abused by prostitution or who are sexually exploited are usually hidden from public view. Where such a child is discovered through other police operations, measures must be taken to protect the child. An internal referral should be made to the CAIU (see 1.9.4 Internal Referral to the Child Abuse Investigation Unit), and every effort should be made to preserve evidence which could lead to a prosecution for offences linked to abusing children. Such a child should usually be treated as a child who may be suffering or is likely to suffer significant harm. Officers should also consider the possibility that children may have been trafficked in order to sexually exploit them (see 1.4.8 Child Trafficking). Such cases should be dealt with according to the principles and processes set out in Working Together and Department of Health, Home Office, Department for Education and Employment and National Assembly for Wales (2000) Safeguarding Children Involved in Prostitution: Supplementary Guidance to Working Together to Safeguard Children and Department of Health (2001) National Plan for Safeguarding Children from Commercial Sexual Exploitation.

1.4.24 SUDDEN UNEXPECTED DEATH IN CHILDHOOD

There are national multi-agency guidelines for the investigation of the unexpected death of all people under 18 years of age in Royal College of Pathologists and the Royal College of Paediatrics and Child Health (2004) Sudden unexpected death in infancy: A multi-agency protocol for care and investigation and National Public Health Service for Wales (2006) Sudden Unexpected Deaths in Infants and Children (SUDI) Best practice multi-agency protocol for care and investigation in Wales. Some forces will have different local arrangements depending on the age of the children involved in a particular situation.
In this context, an unexpected death is defined as the death of a child which was not anticipated as a significant possibility twenty-four hours before the death, or where there was a similarly unexpected collapse leading to, or precipitating, the events which led to the death. The guidelines have introduced the concept of a Child Death Rapid Response Team, multi-agency information-sharing meetings, standard post-mortem procedures and a Child Death Review Process. The police response is of crucial importance at every stage of the process. Some forces have created a cadre of CAIU SIOs on a call-out rota, which enables them to act as the initial investigating officer for all cases of sudden unexpected death in childhood (SUDC).

All SUDC should be investigated in accordance with ACPO (2006) Guidelines on Infant Death Investigation (supplement to ACPO (2006) Murder Investigation Manual), Working Together and relevant local multi-agency protocols. Police action should balance consideration for the bereaved family with the need to thoroughly investigate a potential crime. Where there are no obvious suspicious circumstances, it is likely that a child discovered apparently dead at home will be transported by ambulance to an emergency care department before the police have been informed. As soon as a report of a childhood death is received, the police should deploy a senior detective, ideally from the CAIU, to the location where the body is currently situated and ensure control at the apparent death scene. Where possible, deployment should be carried out in a discreet and sensitive manner using unmarked vehicles.

Early findings of Child Death Overview Panels indicate that the main causes of childhood death, depending on the area, are knife crime, teenage suicides and road traffic collisions. Avoidable (preventable) causes of infant death include pre-birth maternal smoking and following birth, paternal smoking, overheating and co-sleeping with infants, in particular on a sofa (which is made worse when the carer has had alcohol or drugs). See also 1.4.7 Child Homicides and 1.11.7 Multi-Agency Prevention and Education Initiatives.

### 1.5 ALL STAFF RESPONSIBILITY

All staff are responsible for safeguarding and protecting children as part of the Police Service duties described in 1.1 Duty To Safeguard Children. Forces should ensure that all staff are clear about the chain of accountability and responsibility for safeguarding and protecting children, from the first response to the most senior level of the force. Where reference is made in this guidance to police officers, it is acknowledged that in some forces this will include police staff. For example, since the Police Reform Act 2002 and the introduction of Workforce Modernisation, there are a significant number of police staff involved in the investigative process. Therefore, the issue for forces is not whether an individual is a police officer or not, but whether they have the appropriate qualifications, competencies and skills. See also 1.6 Child Abuse Investigation Units.

#### 1.5.1 ACPO LEAD FOR SAFEGUARDING CHILDREN

Each force should appoint a named chief officer lead for safeguarding children issues. This critical role includes forming a strategic partnership with children’s services and other local partnership agencies to contribute to safeguarding children (see 1.1 Duty To Safeguard Children). This officer should report to the chief constable and take responsibility for leadership in the force on safeguarding children issues. The role also includes highlighting, supporting and championing the work of CAIUs (see 1.6 Child Abuse Investigation Units) and being involved in individual management reviews (see 3.6.6 Individual Management Reviews and Associated Plans).
1.5.2 RESPONSE AND NEIGHBOURHOOD POLICING TEAMS

Response and neighbourhood policing teams play a key role in safeguarding children (see 1.1 Duty To Safeguard Children) and identifying those children who are in need or at risk of significant harm (see also 1.11.4 Common Assessment Framework). These teams should be kept informed about details of child abuse and safeguarding children issues in their particular geographic area, as applicable to their roles. This is particularly important when neighbourhood policing teams can assist in the risk management of individual offenders (e.g., through the enforcement of civil orders or by conducting unannounced curfew checks or police watch activities). Team members can be key sources of information about concerns for children that are provided by, or obtained from, the community.

The information they provide can assist in the continual risk identification process and in the longer-term risk-management processes. Response and neighbourhood policing teams can also use community information to identify child abuse offenders and those who present a current and significant risk to others. Any risk identification and assessment information acquired by team members should be dealt with according to ACPO (2006) Guidance on the Management of Police Information. Some child abuse-related issues might require the preparation of a neighbourhood problem-solving plan, for example, if particular communities are identified as under-reporting child abuse. Neighbourhood policing teams should work with the CAIU to assist with information gathering and enforcement issues, as appropriate to their role profiles, e.g., police officers linked to schools or children’s homes.

For more information about neighbourhood policing, see ACPO (2006) Practice Advice on Professionalising the Business of Neighbourhood Policing.

1.5.3 SPECIALIST INVESTIGATIONS AND DEPARTMENTS

One of the key elements of an effective police response to child abuse is an holistic whole-family approach to the investigation and related police and multi-agency action. For this reason, forces should have systems to ensure that the necessary connections are made between those in a force who specialise in investigations relating to child abuse, and those indirectly linked to such investigations, such as specialist units and officers dealing with domestic abuse, sexual offences, trafficking and hi-tech crime and those issues described in 1.4 Child Abuse and Associated Investigations. As described in 1.2.2 Child Abuse, the key principle in all investigations, is the welfare of the child – regardless of the environment in which the abuse occurs (e.g., family, institution or online) and context or crime type (by prostituting or trafficking a child). In most cases of child abuse this will, by necessity, involve specialist child abuse investigators. Some forces have brought together the functions of investigating child abuse, domestic abuse, vulnerable adult abuse and sexual offences and the management of violent and sexual offenders within one unit as they have found it particularly beneficial. For further information on related issues, see ACPO (2007) Guidance on Protecting the Public: Managing Sexual Offenders and Violent Offenders.
1.6 CHILD ABUSE INVESTIGATION UNITS

The term Child Abuse Investigation Unit (CAIU) refers to the variety of groupings of police officers whose primary function is the investigation of child abuse. Other terms include child protection investigation unit, child protection team, child protection unit or child abuse investigation team. Police forces have a variety of structures and terms of reference for their CAIUs, and some have units that deal with a wider scope of work than child abuse (eg, domestic abuse and wider public protection issues such as the management of sexual offenders and violent offenders). Deciding on the most suitable term to use for such a unit is at the discretion of police forces. To avoid undermining the status of a child abuse investigation within the Police Service, and to avoid confusion, the name of such groupings should reflect that they are police officers and staff investigating serious crime.

The CAIU should be fully integrated into the structure of the police force and should not be disadvantaged as regards staff, accommodation, equipment or resources. Particular attention should be paid within the CAIU to managing stress relating to the workload and the complex nature of the work (see 1.7.2 Staff Welfare and Support). The responsibilities of CAIU managers and supervisors, including their accountability for the CAIU, should be clearly documented in policy and role descriptions (see 1.6.3 Leadership, Management and Supervision in a Child Abuse Investigation Unit). The terms of reference of the CAIU should be published and made available to all staff. The work of CAIUs should be highlighted, supported and championed by the chief officer lead (see 1.5.1 ACPO Lead for Safeguarding Children).

1.6.1 INVESTIGATION OF CRIMES RELATING TO CHILD ABUSE

Paragraph 2.99 of Working Together states that child abuse investigators will ‘normally take primary responsibility for investigating child abuse cases’. As a minimum, this will include criminal investigations relating to child abuse where the suspect is in a position of trust or responsibility in relation to the child. This could include a parent, carer, family member, babysitter or youth worker. The offence must also raise child protection issues such as the child’s developmental needs, parenting issues and family and environmental factors, and will require the involvement of children’s social care. This also includes those investigations where the ambiguity of the circumstances may undermine a child-focused approach, eg, child trafficking or sexual exploitation where the suspect claims that the child is in some way consenting to, or complicit in, the offence (see 1.4.8 Child Trafficking and 1.4.23 Sexual Exploitation of Children). The investigative role of the CAIU is important in such cases because its specialist investigators are in the best position to advise on, and contribute to, multi-agency working where there is a multi-agency dimension to the investigation (eg, involvement of children’s social care). It is their specialist skills which will enable the safeguarding of the welfare of the child. This is the primary principle of any investigation and is described in 1.2.2 Child Abuse.

1.6.2 OTHER SPECIALIST INVESTIGATIONS

In certain cases the role of the CAIU should be to give advice and, if appropriate, direction about the substantive investigation and any safeguarding issues relating to siblings or other children affected by the investigation. This role may also include specialist advice to other agencies who investigate child abuse such as children’s social care and the NSPCC.
The wider role of the CAIU should be to promote the work of child abuse investigations both within and outside the Police Service. CAIU officers and staff should advise those responsible for investigating child homicides and SUDC or, if there are sufficient appropriately trained officers, take full responsibility for such investigations either exclusively or in conjunction with the force major crime team (see 1.4.24 Sudden Unexpected Death in Childhood). Where the CAIU does not lead the investigation, a suitable member of the CAIU should be nominated to assist the SIO, to liaise with children’s social care and to deal with any other safeguarding children issues relating to the family.

Depending on local arrangements, the CAIU should also provide advice, or have a more direct role in the following investigations:

- Homicide of an adult in the context of domestic abuse (see 1.4.10 Domestic Abuse and Domestic Homicide);
- Domestic abuse cases involving children as direct or indirect victims of the abuse, or relating to a household where children are normally resident (see 1.4.10 Domestic Abuse and Domestic Homicide);
- Missing persons enquiries involving children (see 1.4.18 Missing Children or Families);
- Child trafficking cases (see 1.4.8 Child Trafficking);
- Cases involving abusive images of children (see 1.4.2 Indecent Images of Children);
- Investigations of crime committed by a child where welfare concerns arise about that child (1.4.19 Offending by Children);
- Professional standards department investigations relating to police suspected of committing offences relating to child abuse or domestic abuse where there are children in the family (see 1.12 Police Suspected of Child Abuse);
- Any other situation referred to in 1.4 Child Abuse and Associated Investigations.

Forces will have different local arrangements for the investigation of certain crime types, eg, human trafficking (see 1.4.8 Child Trafficking) and offences involving the internet (see 1.4.2 Indecent Images of Children). When child abuse is an aspect of any investigation, CAIUs will be a central point of reference. Whether the CAIU is leading the investigation, contributing to it or acting in an advisory capacity will depend on local arrangements. Whatever the approach of a particular force, there needs to be consideration of the skill set, staff training and the resources available for the CAIU to enable it to carry out its role effectively.

1.6.3 LEADERSHIP, MANAGEMENT AND SUPERVISION IN A CHILD ABUSE INVESTIGATION UNIT

Leadership is key to the effectiveness of a CAIU, including that by the individual(s) responsible for the unit as a whole and those undertaking direct supervision of CAIU officers. This will include taking a proactive approach to the issues outlined in 1.7.2 Staff Welfare and Support. Leadership will also include ensuring that the profile of the CAIU’s work is such that it attracts the most highly skilled investigators and is seen as a key element of a career in criminal investigation. Arrangements for supervision and management in a CAIU will depend on local arrangements.
The role of the CAIU supervisor can include both substantive responsibilities relating to the investigation of child abuse and safeguarding children, and staff management. This demanding role can be shared between several supervisors as appropriate. It is essential that the supervisor’s own workload does not detract from his or her supervisory functions. It should, therefore, be routinely monitored by the supervisor’s manager. CAIU supervisors should ensure that they take an active role in ensuring that a thorough investigation is carried out. They should be routinely involved in reviewing the progress of all aspects of child abuse investigations, including the identification of risk factors (see 1.3.1 Established Risk Factors). For example, supervisors should sample files of evidence to assess their quality and ensure that lines of enquiry that do not centre on the victim’s evidence are pursued. Supervisory reviews of completed investigations should be signed off before they are filed. The results of any reviews may be relevant to the officer’s personal development record, according to force policy.

Further details about supervision and management roles in multi-agency working by the CAIU is in 3 Police Responses and Multi-Agency Working To Safeguard Children. Examples of multi-agency working by those with supervision and management roles in the CAIU include:

- Supervising the process of managing referrals to and from other agencies (see 1.9.5 Assessment of External and Internal Referrals, Reports and Intelligence);
- Representing the police on LSCB subgroups, where appropriate (see 1.11.1 Local Safeguarding Children Boards);
- Advising on and participating in serious case reviews (see 3.6 Serious Case Reviews and Individual Management Reviews);
- Participating in the MAPPA process as appropriate (see 1.4.17 Managing Sexual Offenders and Violent Offenders and 4.12.4 MAPPA and Managing Potentially Dangerous Persons).

1.7 GENERAL STAFFING ISSUES

There are a number of general staffing issues which are key to an effective police response to investigating child abuse. For issues relating to complex child abuse investigations, see 5.4 Staffing Issues.

1.7.1 STAFF SELECTION AND VETTING

Those involved in the selection process for staff who specialise in child abuse investigation should take into account the information in 1.8 Training and Development.

All police staff should be subject to vetting levels in accordance with national arrangements. They should be adequate to safeguard children and appropriate to their role. Staff working in the CAIU should be subject to management vetting, and consideration should be given to psychological pre-employment screening. These processes should be described in any advertisements for posts. Vetting should include enquiries into the following, which could raise issues relating to suitability to carry out a role in child abuse investigation:

- Any complaints or professional standards investigations (see 1.12 Police Suspected of Child Abuse);
- Any occupational health issues;
- Existing civil orders relating to the applicant including any child contact restrictions related to suspected child abuse;
- Records held of children who are the subject of a child protection plan and who are related to the applicant.
The NSPCC IEAS can undertake independent risk assessments of individuals following allegations of child abuse which have been investigated but have not led to criminal charge or conviction. For further information, see http://www.nspcc.org.uk

1.7.2 STAFF WELFARE AND SUPPORT

The ethos in police forces towards the investigation of child abuse should reflect the central role of debriefing, supervision and support for people working in traumatic circumstances. In order to fulfil the duty of care to employees and the requirements of health and safety legislation, those with supervision and management responsibilities in the CAIU should be concerned with the balance of work within the team, the welfare of individuals and the quality of their work. For example, adequate opportunities should be given for officers to discuss concerns about cases which may affect their welfare. These opportunities can be provided by formal debriefings, meetings with the supervisor or through external supervision such as coaching development and pastoral support, according to local force policy. Supervisors should closely monitor the workload of child abuse investigators. Consideration needs to be given to implementing mandatory and/or voluntary counselling and/or welfare support for all staff working in this field. Experience indicates that a mandatory system provides staff with a more accessible opportunity for support that, for various reasons, they may not wish to be seen to seek out.

The disturbing nature of investigating child abuse (including offences relating to images of children) can be an emotional experience for staff. As a result some individuals may not wish to work on such investigations, or a particular investigation. In these circumstances staff should consult a supervisor who should take action. If a supervisor is approached by a member of staff who requests that he or she should not be involved in such an investigation, the member of staff should not be required to undertake the investigation except in the most urgent circumstances. Such requests may be made at the outset of the investigation or during it. A record should be made of any request to be removed from the case, any reasons given and of the action taken by the supervisor. Supervisors and investigators carrying out investigations should remain sensitive to the impact of evidence and details of the case on their colleagues, including police officers and staff.

All those involved in the investigation of child abuse should be aware of, and where appropriate make use of, the welfare services provided by their force. This includes staff not directly involved in the investigation but who may come into contact with potentially disturbing aspects of the evidence, eg, transcribers. Supervisors should discuss any emerging difficulties encountered by their staff and provide advice regarding welfare services available within their force. They should also actively monitor those who undertake such investigations and offer support accordingly.

Certain investigations, such as those involving child abuse images, are sometimes viewed as requiring a particularly proactive approach to staff welfare and support due to the extensive and repeated exposure to disturbing images. Many of the staff involved in such investigations who do not deal directly with images are, however, as vulnerable as those that do. Force policies should be in place to ensure regular reviews of the individuals and posts involved in child abuse investigations.
1.8 TRAINING AND DEVELOPMENT

All police officers and staff should receive training and development in aspects of investigating child abuse and safeguarding children that is appropriate to their role. For example, all those involved in responding to concerns for children need to be sufficiently trained to have the confidence to challenge (from a police and law enforcement perspective) the views of other professionals, including doctors and children’s social care staff (see 3.1 External Referrals, Multi-Agency Communication and Decision Making and Criminal Investigations). Staff need to be given sufficient time to carry out training, eg, allocated periods to complete distance learning. Details about training and development for multi-agency work can be found in Working Together, Chapter 4.

1.8.1 TRAINING AND DEVELOPMENT FOR THOSE PROVIDING THE FIRST RESPONSE

The NPIA Initial Police Learning and Development Programme (IPLDP) contains an element relating to safeguarding children that is appropriate for those providing a first response, including call takers, to concerns for children. This element equips first responders to deal with the aspects of safeguarding that they are likely to encounter. It comprises the following key modules:

- Introduction to safeguarding;
- Initial response and fast-track actions;
- Multi-agency working;
- Call takers.

In addition to the IPLDP, supervisors of those providing the first response should ensure that all staff are aware of local systems and processes relating to safeguarding children. This should include basic information about preserving computer-based evidence, and accessing advice on hi-tech crime (see 2.14.1 Initial Response Where Electronic Evidence or a Computer Is Involved) and details of systems available to support staff involved in the investigation of child abuse (see 1.7.2 Staff Welfare and Support).

1.8.2 TRAINING AND DEVELOPMENT FOR CHILD ABUSE INVESTIGATION UNIT OFFICERS

Forces should work towards a situation in which specialist investigators to CAIUs are recruited solely from experienced investigators or are required to qualify on successful application to the role. Child abuse investigations are categorised as serious and complex. CAIU staff should, therefore, receive training that is commensurate with the investigations they undertake. They should be competent at the three National Occupational Standards (NOS) described within Level 2 of the Professionalising Investigations Programme (PIP) as well as at the specific NOS for responding to allegations or suspicions of child abuse.

The NPIA Specialist Child Abuse Investigator’s Development Programme (SCAIDP) is a developmental route that supports achievement of competence as described above and comprises the following key features:
• A requirement to complete the NPIA Initial Crime Investigator’s Development Programme (ICIDP);
• Specialist knowledge and training in the investigation of child abuse;
• Workplace assessment and registration in accordance with the criteria set out in PIP;
• A requirement to undertake multi-agency training provided by the LSCB and training with children’s social care colleagues in the investigation of those cases that require a joint response (as described in Working Together).

Any force that develops its own training programme for CAIU officers needs to demonstrate that such training meets the standards and learning outcomes as described within the SCAIDP and takes account of Working Together.

Staff required to interview children in order to gather evidence should be appropriately trained in accordance with Office for Criminal Justice Reform (2007) Achieving Best Evidence in Criminal Proceedings: Guidance on Interviewing Victims and Witnesses, and Using Special Measures (referred to in this guidance as Achieving Best Evidence) and the NPIA Specialist Child Witness Interviewing Modules.

The recruitment, selection and training policies for specialists should be reviewed to ensure that staff who are not already competent at PIP Level 2 are provided with the opportunity to achieve this through additional training (the ICIDP) and assessment while in post. Staff involved in investigations relating to child abuse images should have access to the appropriate training, in particular that provided by CEOP.

1.8.3 TRAINING FOR SUPERVISORS AND SENIOR INVESTIGATORS

The NPIA is currently developing a further module for SCAIDP focusing on the supervision of child abuse cases by CAIU supervisors and managers. These staff should also have undertaken multi-agency training provided by the local LSCB so that they understand the roles of other agencies and work effectively together. In particular, joint training with children’s social care staff should ensure that the impact of investigations on the child is minimised by the cooperation of both organisations.

Where CAIU detective inspectors are required to take a lead role in the investigation of SUDC (see 1.4.24 Sudden Unexpected Death in Childhood), they should be competent as an SIO at level 3 of PIP. Additionally, a bespoke training programme is being developed by the NPIA for SIOs who investigate childhood death and for the Basic Command Unit (BCU) senior detectives who manage the initial response in such cases.

1.9 MANAGING INFORMATION ABOUT CHILD ABUSE

Suspected or actual child abuse can come to police attention from a number of sources. These include victims, witnesses, health services, housing providers, children’s social care or education professionals, anonymous reporters or police officers identifying concerns about children through routine contact with the public. These reports will usually refer to ongoing concerns for children and, occasionally, there will be emergency calls reporting a violent incident in progress.
Child abuse can involve patterns of behaviour and an accumulation of individual minor abuses that can constitute significant harm. An officer may be presented with an apparently minor issue which does not in itself cause concern but which is actually part of a pattern of abuse. It is also possible that concerns about children that appear to be unconnected are actually part of a pattern of abuse by either the same offender or different but connected offenders. Concerns about one child may also lead to concerns about another child or children with whom the suspect has contact. Identifying such patterns depends on careful, accurate and coordinated record keeping by the police and other agencies. It also requires officers to be vigilant to potential child abuse in all areas of their work.

When the police receive a referral from another agency, it should be recorded and subjected to a consistent decision-making and risk-assessment process. Arrangements should exist whereby all information and intelligence about children at risk is collated centrally within a police force and cross-referenced to other appropriate information and intelligence, including that relating to:

- Sexual and violent offences;
- Domestic abuse;
- Young offenders;
- Missing persons;
- The management of sexual and violent offenders (see 1.4 Child Abuse and Associated Investigations).

Forces will have different approaches to managing information about child abuse, eg, BCU or borough-based assessment and referral or a central referral unit. The role of the CAIU may depend on whether a central referral unit exists or not. Forces will also use different terminology to classify information depending on local arrangements. This subsection of the guidance describes the meaning of the terms report, and internal and external referral as used in this guidance.

Other agencies may have information technology (IT)-based information, referral and tracking systems to assist in the analysis of information regarding child abuse. Police IT systems should have the capability to record information from partner agencies, with details of decisions made and subsequent action taken, thereby facilitating an audit process. If a particular concern for a child indicates that a crime has been committed, according to Home Office (2009) National Crime Recording Standard, supervisors should ensure that the incident is investigated and a crime report is completed. Incidents not identified as a crime should be recorded in accordance with national and local guidance and retained in police records should there be any future concerns for a child, criminal investigations or requests for information by other agencies. All information should be managed in accordance with ACPO (2006) Guidance on the Management of Police Information. For further information about referrals from other agencies, see 3.1.1 External Referrals to the Police and Criminal Investigations. See also 2.2 Information Required in an Initial Report of Child Abuse.
1.9.1 USE OF THE TERM REFERRAL

The term ‘referral’ is taken from *Working Together, Chapter 5*. In particular, paragraph 5.16 of that document explains the circumstances in which a referral should take place. Passing information between agencies is a referral if:

Someone believes a child may be suffering or at risk of suffering significant harm.

One of the key issues in safeguarding children is that agencies often need to share information between them which does not always involve issues relating to significant harm. For example, early intervention can assist in stopping a general concern about a child escalating to a concern about significant harm. In some cases an apparent low-level concern can later be found to have related to a child who was suffering significant harm. It is in the interests of children that concerns about them are shared between agencies so that information can be brought together and a full picture built of the child’s circumstances, thereby enabling an appropriate multi-agency response. The challenge for police forces and their partners is to develop local systems which distinguish effectively between the cases requiring urgent action and those that are routine. One way is to develop a local system for prioritising referrals. This could distinguish between:

- Referrals within the meaning of *Working Together* that need immediate and urgent attention (eg, where the police exercise powers of police protection);
- Other referrals within the meaning of *Working Together*;
- Referrals including information which is relevant to safeguarding a child but which on its own does not meet the *Working Together* description of a referral.

This allows agencies to prioritise actions while not pre-empting the decisions of other agencies about what should be done in response to a particular concern for a child. This is a multi-agency response to the inevitable limits on the capacity of all agencies and the need to focus resources on children who are at risk of significant harm. It also provides management information on issues of performance, capacity and resources.

Although passing information between police units, police forces or police agencies is not strictly within the definition of a referral as described in *Working Together*, this guidance takes the position that the use of terminology should be as straightforward and simple as possible. What is important is that all information of relevance is passed to the appropriate part of the police force that can assess and then manage it, and that information is passed from the police to relevant partners for them to action as appropriate. Therefore, in this edition of the guidance, the differentiation between referrals and notifications has been removed. Using two separate words may add confusion for some frontline practitioners. To distinguish between types of communication within a police force and referrals between agencies, this guidance uses the term ‘internal referral’ to describe the former and ‘external referral’ for the latter. In the case of external referrals there will be external referrals to the police and external referrals from the police to other agencies.
1.9.2 EXTERNAL REFERRAL TO THE POLICE FROM ANOTHER AGENCY

As explained in 1.9.1 Use of the Term Referral, in this guidance the term external referral is used to describe a situation where one agency refers concerns for a child to another agency with an expectation that action is required and that the action will be reviewed. The police can make referrals to other agencies such as health or children’s social care services (see 3.1.3 External Referrals from the Police to other Agencies). The police may become aware of child abuse cases through contact made by a representative from another agency (eg, children’s social care, education or health sector, or the NSPCC). This information may be received as a documented or verbal referral, or arise where another agency is providing information as part of the child protection process, such as a strategy discussion or child protection conference. Paragraph 5.17 of Working Together states that whenever children’s social care (or the NSPCC if relevant) encounters or has a case referred to it which constitutes, or may constitute, a criminal offence against a child, ‘they should always discuss the case with the police at the earliest opportunity’, to enable both agencies to consider how to proceed in the best interests of the child. In the case of other agencies in that situation, according to Working Together, ‘they must always consider sharing that information’, in order to protect the child or other children from the risk of significant harm. If a decision is taken not to share the information, the reasons for this must be recorded. For further information see 3 Police Responses and Multi-Agency Working To Safeguard Children.

When the police receive a referral from another agency, it should be recorded and subjected to a consistent decision-making and risk-assessment process according to local protocols. For example, in some cases the police may be given information about concern for a child that does not amount to a suspicion of a criminal offence and local systems should be developed to ensure that this kind of referral is distinguishable from one where a criminal offence is suspected. As stated in 1.3.1 Established Risk Factors, however, it is not for the police to decide the appropriate action for another agency to take where there is concern for a child or vice versa. An important aspect of effective multi-agency working is that while some aspects involve joint decisions, others require separate decisions, and this enables agencies to challenge each other when necessary (see 3.1.1 External Referrals to the Police and Criminal Investigations).

The term external referral can also be used to describe a situation where a CAIU in another force is notified by a police force or police agency (eg, CEOP) of concern for a child connected to their police force area (see 3.1.1 External Referrals to the Police and Criminal Investigations and 3.1.3 External Referrals from the Police to other Agencies).

1.9.3 REPORT TO THE POLICE OF CONCERN FOR A CHILD FROM AN INDIVIDUAL

In this guidance the term ‘report’ is used to describe a situation where an individual, rather than an agency, informs the police of concern for a child. Any officer or member of police staff taking details of concern for a child from an individual should establish the immediate safety of the alleged victim(s) and seek the information outlined in 2.2 Information Required in an Initial Report of Child Abuse.
1.9.4 INTERNAL REFERRAL TO THE CHILD ABUSE INVESTIGATION UNIT

In this guidance the term internal referral is used to describe a situation where an individual or unit within a police force informs the CAIU of concern for a child. Any information about concern for a child should be sent as an internal referral to the CAIU, entered into force intelligence systems and actioned appropriately. For more information about internal referrals, see 1.9.5 Assessment of External and Internal Referrals, Reports and Intelligence and 2.17 Internal Referral to the Child Abuse Investigation Unit and External Referrals to other Agencies.

1.9.5 ASSESSMENT OF EXTERNAL AND INTERNAL REFERRALS, REPORTS AND INTELLIGENCE

All information and intelligence relating to child abuse, including that from other agencies, should be held centrally within a police force in a central referral unit, or equivalent arrangement. The process of managing, recording and assessing referrals and other information relating to child abuse should be actively supervised (eg, by a frontline supervisor of sergeant rank). This process should be audited by an officer of inspector rank or above. This should ensure the risk assessment of incoming internal and external referrals, reports and internal intelligence indicating concerns for children. Such an arrangement has the advantage of ensuring consistency in decision making and of providing resources to cope with demand. This risk-assessment process should prioritise the attention of other agencies by referring them to internal and external referrals, reports and other relevant intelligence. All information held by the police about significant adults should be risk assessed in terms of the impact it may have on the victim or any other child. The information may, in isolation, not primarily focus on a particular child, but if considered with other facts it may have an impact on the welfare of the child. This process of risk assessment should link with processes in the force relating to the management of sexual and violent offenders and PDPs (see ACPO (2007) Guidance on Protecting the Public: Managing Sexual Offenders and Violent Offenders and Ministry of Justice (2009) MAPPA Guidance, Version 3.0).

When any referral is received, the supervisor should ensure that information and intelligence checks have been conducted in respect of all individuals relevant to the referral, in accordance with 1.9.6 Information and Intelligence Checks.

The CAIU supervisor should ensure that information received by way of an internal or external referral and any other relevant information is reviewed, recorded on the local CAIU or central referral unit database or index system and cross-referenced with the files of other family members. The CAIU supervisor should make an assessment as to whether this information should be referred to partner agencies; see 3.1.3 External Referrals from the Police to other Agencies. Where a referral to the CAIU is not subject to any further police or multi-agency action, this information and the reasoning for decisions should be recorded and filed in a searchable format (see ACPO (2006) Guidance on the Management of Police Information). Any subsequent referrals would alert the CAIU to review previous referrals and consider referral of the combined information to other agencies. In some circumstances the supervisor will need to make checks with other police force areas or other agencies.
1.9.6 INFORMATION AND INTELLIGENCE CHECKS

Information and intelligence checks are key to safeguarding children and carrying out an effective investigation. These checks should apply to all individuals in a family or those involved in the described circumstances. Information gathered from these checks should be recorded. Violent or sexual offences committed against victims of any age by a child abuse suspect will be relevant in addition to any other offences that may influence an assessment of risk. Information relating to the circumstances of each offence will assist in determining the extent of risk presented.

Depending on the circumstances and what is proportionate to the situation, checks should include the following databases or systems:

- Integrated Children’s System (ICS), ContactPoint and any local systems for accessing information about children who are the subject of child protection plans;
- Police National Computer (PNC);
- ViSOR;
- INI;
- CAIU database (or equivalent recording concerns for children);
- All local databases;
- Missing Persons Index;
- Young Offenders Index;
- Force intelligence systems;
- Force control room records for any related incidents occurring within a specified area and at relevant addresses;
- Crimes and other incidents recorded in respect of relevant addresses and individuals;
- The CEOP Child Exploitation Tracking System (CETS) search relating to identified email addresses, user names and associated relevant information;
- Childbase.

Forces should ensure that there is appropriate access to these systems outside office hours.

In some cases open-source information may be useful to an investigation. This can include press articles, official records relating to births, deaths and marriages, and internet sources such as social networking sites (e.g., when developing family trees and identifying possible suspects.

1.9.7 USE OF THE NATIONAL INTELLIGENCE MODEL

Information about child abuse can come from many different sources. This information is usually managed by the CAIU. CAIU staff should be alert to the intelligence opportunities such as those available through police sources, information from the public and from other agencies. Analysis of such information by the CAIU in consultation with intelligence officers and analysts can be converted into intelligence which, through the application of the National Intelligence Model (NIM) and the strategic assessment process, can result in the use of tactics which will reduce or remove any threats. Analysis should also be used to decide how to resource child abuse investigations and contribute towards the risk-assessment process. This is of particular importance when assessing the risks posed by MAPPA offenders, PDPs and groups of linked offenders. Intelligence relating to alleged child abuse should be applied using NIM through levels 1, 2 and 3 to provide information for strategic and tactical assessment. Consideration should be given to the benefits of dedicated analytical support for the CAIU.
Analysis should include making decisions about strategies for the prevention of abuse, and methods of enforcement. It can also determine gaps in knowledge, which can be reported as intelligence requirements and communicated to staff so that they may search for information when engaged in daily duties (e.g., attending incidents and visiting schools). A target profile can also be used to identify particular individuals and groups who are suspected or identified as a threat to children. Intelligence, when used properly, should enable resources to be targeted at identified offenders (both individuals and linked groups) and locations, e.g., a school or children’s home, to prevent child abuse or drive effective investigations of child abuse.

In consultation with intelligence officers and analysts, information and intelligence should be examined regularly to identify patterns and concentrations of behaviour. Any recent or new information or intelligence should lead to further assessment. This assessment may require that a particular child abuse issue is included in daily briefings, or that a particular suspect or group of suspects are made the subject of target profiling.

Intelligence relating to child abuse should be captured, assessed, retained and managed in accordance with relevant local and national guidance including ACPO (2006) Guidance on the Management of Police Information. Failure to record and use such intelligence could significantly reduce the effectiveness of the police response and endanger children.

Police forces should use intelligence and information relating to child abuse to:

- Identify and safeguard children at risk of harm;
- Identify risk factors associated with victims and suspects;
- Identify and target persistent offender and groups of offenders;
- Indicate further information on local and national computer systems;
- Make links with other investigations relating to child abuse, including domestic abuse and missing persons;
- Monitor the accuracy of child abuse intelligence data;
- Disseminate to police personnel;
- Produce statistical information;
- Make referrals to partner agencies.

1.9.8 FEEDBACK TO AGENCIES AND INDIVIDUALS WHO REPORT OR REFER CONCERNS ABOUT CHILDREN

Forces should have in place systems to ensure that those who identify concerns for children (see 1.9.2 External Referral to the Police from another Agency and 1.9.3 Report to the Police of Concern for a Child from an Individual) are given feedback on the action taken, as far as possible, and when they have requested or agreed to it. Members of the public should be given reassurance that they have done the right thing. Feedback may also be relevant in the case of internal referrals made from someone within a police force (see 1.9.4 Internal Referral to the Child Abuse Investigation Unit) and external referrals made from other agencies, another police force or police agency such as CEOP (see 1.9.2 External Referral to the Police from another Agency).
1.10 CRITICAL INCIDENTS AND COMMUNITY IMPACT ASSESSMENTS

The use of force policies relating to critical incidents and community impact assessments can be relevant in some cases relating to the investigation of child abuse and can be used to promote confidence in the police.

1.10.1 CRITICAL INCIDENTS

Where cases of child abuse meet the definition of a critical incident, local force policies and ACPO (2007) Practice Advice on Critical Incident Management should be followed. The definition of a critical incident is:

Any incident where the effectiveness of the police response is likely to have a significant impact on the confidence of the victim, their family and/or community.

In some cases the establishment of a strategic Gold Group may be necessary to deal with the wider community issues involved, see 6.1 Gold Group (Overarching Policy Group).

1.10.2 COMMUNITY IMPACT ASSESSMENTS

Officers investigating child abuse and responding to concerns for children should be aware of the possibility that the issue may be perceived as relating to a particular community and/or that it may impact adversely on that community. Officers should follow local policy regarding community impact assessments. The early completion of an assessment can assist the police in responding to wider community concerns and can facilitate the gathering of local information and intelligence.

Community impact assessments will be helpful in preparing the equality impact assessments that are required under the diversity legislation when considering important decisions. The force diversity adviser(s) should be informed of the community impact assessments and the reason why they are being prepared.

1.11 POLICE ROLE IN MULTI-AGENCY ARRANGEMENTS FOR SAFEGUARDING CHILDREN

The framework for multi-agency responses to concerns for children is explained in detail in Working Together. This subsection focuses on the management of the police role in those arrangements. Children’s social care is the partner agency which the police have most direct contact with in relation to concerns for children and investigations of child abuse. Other agencies are, however, key to effective multi-agency working to safeguard and protect children. They include health professionals (such as general practitioners (GPs), health visitors, midwives and emergency care staff), school staff and those working in the voluntary sector (eg, providers of services for victims of domestic abuse and their children).

More recent developments include the creation of children’s trusts, which bring together all services for children and young people in an area. They are underpinned by the Children Act 2004 duty to cooperate, to focus on improving outcomes for all children and young people. In HC 330 (2009) The Protection of Children in England: A Progress Report one recommendation is that Children’s Trusts take appropriate action to ensure that all core group meetings, reviews and casework decisions include the police.
1.1.1 LOCAL SAFEGUARDING CHILDREN BOARDS

The responsibilities and functions of Local Safeguarding Children Boards (LSCBs) are set out in Working Together. They have a statutory basis which entails accountability for all members as representatives of particular agencies. Local multi-agency policy on child protection matters is the responsibility of the LSCB. Each agency within a locality having responsibility for the health, welfare and protection of children should be represented at senior level on the LSCB. The LSCB is accountable to and funded by each agency that makes up its membership, and usually has an independent or rotating chair. This body is a strategic group and delegates from all agencies, including the police, should be of sufficient seniority to commit resources of their agency to a particular policy or course of action. Delegates from all agencies should also be sufficiently senior to contribute to the development of strategy. For these reasons, officers of at least the rank of superintendent would normally hold an appropriate level of authority to represent the police at an LSCB. Such authority can be delegated, provided that this does not compromise the level of commitment and support to the LSCB. Similarly, it is essential that there is continuity of representation at the LSCB.

Each LSCB is responsible for having in place a number of local protocols, including the following:

- Local arrangements for responding to situations where enquiries under section 47 of the Children Act 1989 by children’s social care take place alongside associated police criminal investigations;
- The respective roles, responsibilities and working arrangements of each agency (see 3.1.1 External Referrals to the Police and Criminal Investigations);
- Quick and straightforward means of resolving professional differences of view in a specific case, eg, whether a child protection conference should be convened;
- Details of local child protection conference procedures, eg, quorums or complaints processes.

The LSCB may devolve some of its tasks, such as monitoring working practices, training and policy, to subgroups to which experienced staff from relevant agencies may be appointed. CAIU supervisors should participate on such groups where appropriate. Participation may also be necessary by those in police forces specialising in other types of investigations, such as that relating to domestic abuse.

Monitoring and evaluation play an important role in ensuring that targets are met in the work of the LSCB. For targets to be monitored, clear performance criteria need to be set. Once these criteria are agreed, performance can be evaluated against the shared targets. The LSCB can also play an important role in facilitating service level agreements (SLAs) and institutional audits. (For more information see 1.13 Monitoring, Evaluating and Learning Lessons.)
1.11.2 OTHER RELEVANT MULTI-AGENCY ARRANGEMENTS

Issues relating to safeguarding children and investigating child abuse should be prioritised through all local multi-agency working arrangements. Examples include the following:

- Local Criminal Justice Boards (LCJBs);
- Domestic abuse forums and Multi-Agency Risk Assessment Conferences (MARACs) (see ACPO (2008) Guidance on Investigating Domestic Abuse);
- MAPPA (see Ministry of Justice (2009) MAPPA Guidance, Version 3.0);
- Drug and Alcohol Action Teams (DAATs).

Such arrangements can improve service delivered to individual children and contribute to investigations and the management of risk. They can also be used to monitor responses to child abuse within agencies.

1.11.3 MULTI-AGENCY INFORMATION SYSTEMS

Forces should ensure that local arrangements are in place which make maximum use of the local and national systems available for managing information, to enable effective decision making and action (eg, Police National Database (PND), ContactPoint, ICS). This should be in accordance with ACPO (2006) Guidance on the Management of Police Information. See also 1.9 Managing Information about Child Abuse.

1.11.4 COMMON ASSESSMENT FRAMEWORK

The Common Assessment Framework (CAF) is a standardised approach to conducting an assessment of a child’s additional needs and deciding how those needs should be met. It is generally used by agencies and promotes more effective, earlier identification of additional needs. It provides a simple process for an holistic assessment of a child’s needs and strengths, taking account of the effect on their development of the role of parents, carers and environmental factors. It involves a pre-assessment process and a full assessment. For further information see http://www.dcsf.gov.uk/everychildmatters/deliveringservices/caf/

Forces should ensure that staff are informed about the arrangements for the operation of the CAF at the local level, eg, the agencies who are trained to carry out the CAF and whether the format is paper or electronic. How much involvement the police have in completing the CAF will differ according to local circumstances. In the majority of cases the police will only be expected to complete the CAF Pre-Assessment checklist. The form should then be passed on to relevant partner agencies for a full assessment, in accordance with local arrangements. There will be rare cases where there is no partner agency involved or where it might be appropriate for a member of police staff to complete the full CAF form, particularly if the role is specialist in terms of responding to children (eg, a CAIU officer or police representative on the YOT). The full CAF should only be completed by staff who are appropriately trained at the local authority level. For details about the information to be included in internal and external referrals, see 2.17 Internal Referral to the Child Abuse Investigation Unit and External Referrals to other Agencies.
1.11.5 SERVICE LEVEL AGREEMENTS AND MULTI-AGENCY PROTOCOLS

Service level agreement (SLA) is sometimes used interchangeably with the terms multi-agency protocols and contracts. In multi-agency working, SLAs can be negotiated agreements or exchanges in terms of the type and quality of service that each agency should expect from the other. They can be used to refer to agreements by voluntary sector agencies to provide a service in return for funding from statutory agencies, or between statutory agencies for the provision of a service in return for a service. SLAs and agency compliance with them should be monitored regularly, and targets (including timescales) should be assessed and amended according to performance. The LSCB can play a crucial role in this process.

1.11.6 AGENCY OR INSTITUTIONAL AUDITS

Agency or institutional audits can be used to evaluate the services provided by each agency and to examine barriers that victims may experience with one particular service or a multi-agency service. Local arrangements should exist for the LSCB to coordinate the audit process. Participating agencies should:

- Set clear terms of reference for the audit;
- Agree how the process should be carried out;
- Consult practitioners working within participating agencies;
- Consult service users and non-users.

The police should take part in multi-agency audits and encourage the audit teams to examine referrals between agencies in order to monitor practice.

1.11.7 MULTI-AGENCY PREVENTION AND EDUCATION INITIATIVES

Forces, including the CAIU, should engage in multi-agency initiatives which are developed to prevent child abuse and protect children. These include the following:

- Public education initiatives about preventing and reporting child abuse (including those which include outreach to communities where child abuse is under-reported);
- Initiatives which provide children with skills to increase their safety and encourage the reporting of abuse (eg, projects in schools and the CEOP education programme that facilitates online reporting and access to helplines and information);
- Education for parents and children about the dangers of the internet and safe use of technology (eg, education and parents’ programmes provided by CEOP and designed for delivery by teachers, police officers and other child protection specialists);
- Advice and education for parents about preventing SUDC by promoting safe sleeping arrangements relating to co-sleeping, sleeping on sofas, and when using drugs or alcohol;
- Local services that support adults abused in childhood.

When the police are involved in prevention and education initiatives, this may lead to reports of abuse which require investigation. Preparations should be made with other agencies to deal with this. Consideration should also be given to the way in which children, parents and carers can be involved in the design and delivery of initiatives.
1.12 POLICE SUSPECTED OF CHILD ABUSE

The CAIU should provide advice to the police force professional standards department when an internal investigation relates to allegations of child abuse by a police officer. This should also include any allegations of domestic abuse which may involve children. Reference should be made to ACPO (2004) Policy on Police Officers who Commit Domestic Violence-Related Criminal Offences and any related force policies which deal with police officers and staff suspected of child abuse or domestic abuse. For example, a communications system should exist whereby police officers notify their force of any domestic or child abuse-related civil injunctions and/or orders made under the Children Act 1989 which deny contact or only permit contact under supervision, or a Prohibited Steps Order and any breaches of such orders. (See also 1.7.1 Staff Selection and Vetting and 1.4.3 Allegations against People Who Work with Children.)

A child abused by a member of the Police Service may be reluctant to make disclosures to a police officer. In such circumstances the NSPCC Independent Inquiry and Assessment Service can provide support to the investigation, particularly in relation to conducting interviews with the child.

1.13 MONITORING, EVALUATING AND LEARNING LESSONS

Effective management of performance in child abuse investigation relies on comprehensive multi-agency performance measurement processes. These require mechanisms to fully and accurately identify, record, link and analyse information relating to concerns for children and child abuse. This enables the identification of lessons learnt about good and poor performance and practice. It also assists in identifying gaps in service provision and provides a structure for ownership and accountability. The recognition and sharing of good practice and performance, and the mechanisms to improve poor performance all fall within the performance management framework.

Performance in connection with both child abuse investigations by specialists and other police staff should be an integral part of the overall performance management regime. Managers should be identified to take responsibility for performance of investigations into child abuse, which should be monitored and reviewed at force and divisional levels. To enable the monitoring of performance in this area, forces should be able to distinguish between crimes committed against children and offences against adults. Joint performance indicators should be developed through the LSCB to focus on LSCB outcomes rather than simply quantitative information (see 1.11.1 Local Safeguarding Children Boards).

A performance regime should be developed in forces to address internal activity, outputs and outcomes from the police perspective. There should be both quantitative and qualitative indicators, which focus on outcomes for children. The ultimate measure of strategic performance should always be the quality of service that a child is receiving in terms of increased safety as a result of police and/or multi-agency intervention (otherwise known as ‘safeguarding interventions’).
Examples of information which facilitates monitoring, evaluation and learning lessons about the police contribution to safeguarding interventions and child abuse investigation include:

**Activity**

- Reports of concern for a child;
- Internal referrals of concern for a child to the CAIU;
- Referrals (both internal and external) and reports resulting in referrals to other agencies, such as children’s social care (including repeat referrals);
- Referrals received from agencies (with breakdowns according to agency);
- Police investigations resulting from internal or external referrals, including criminal investigations, multi-agency enquiries and referrals allocated to an officer for further enquiries;
- Strategy discussions involving the police;
- Number and percentage of initial child protection conferences attended and pre-conference reports provided and the same data for review conferences;
- Use of police protection powers;
- Time spent by children in police protection before release to children’s social services or a carer;
- Arrests for offences relating to child abuse across the force and relating directly to the work of the CAIU (see [1.2.2 Child Abuse](#));
- Policy compliance data.

**Output**

- Detections;
- Case file samples and monitoring;
- Case tracking and attrition (which requires shared understanding with the CPS about which are cases of child abuse);
- Joint performance monitoring (with the CPS).

**Outcome**

- Criminal court results;
- Overall crime and detection rate for child abuse (which again requires a clear understanding of cases which are child abuse);
- Repeat victimisation in relation to criminal offences relating to child abuse;
- Child homicide statistics;
- Child abuse crime statistics and detections;
- Court orders, eg, EPOs;
- Feedback from other agencies involved in safeguarding children.

Forces should ensure that issues relating to child abuse are included in their policing plans and strategies. Analysis of Policing and Community Safety (APACS) is the national performance management framework for policing. For further details of APACS, see [http://police.homeoffice.gov.uk/performance-and-measurement/assess-policing-community-safety/](http://police.homeoffice.gov.uk/performance-and-measurement/assess-policing-community-safety/)

(See also [3.6 Serious Case Reviews and Individual Management Reviews](#).)
MANAGEMENT ISSUES

- Ensuring compliance with the obligations of the Human Rights Act 1998 and diversity legislation, and delivering the commitments of the Policing Pledge to children.
- Auditing all connected policing policies to ensure the incorporation of issues relating to investigating child abuse.
- Ensuring that the CAIU is sufficiently staffed and resourced and there are effective arrangements to monitor and control the workloads of CAIU staff so that individual workloads are not so excessive as to prevent the thorough investigation of crimes against children and hinder the performance of staff.
- Ensuring that the workloads of supervisors and their substantive investigation and safeguarding children responsibilities do not impede their ability to supervise.
- Ensuring that CAIU officers and supervisors are sufficiently trained to enable them to carry out their role.
- Ensuring that welfare and counselling support for staff is accessible and that staff are encouraged to seek support.
- Developing systems to ensure that all concerns for the welfare of children and safeguarding issues are notified to the CAIU.
- Identifying working links between staff who conduct child abuse investigations and related roles such as investigating domestic abuse, sexual offences and managing sexual and violent offenders and PDPs.
- Developing systems which ensure that referrals (both internal and external) and reports of concern for children are recorded centrally, subjected to a consistent decision-making and risk-assessment process and supervised by a senior officer.
- Developing efficient processes for the risk assessment of internal and external referrals and other information about concerns for children.
- Linking internal police IT systems with information systems held by other agencies in accordance with ACPO (2006) Guidance on the Management of Police Information to ensure the appropriate availability of information to investigate child abuse, including making connections between child abuse and other related issues such as domestic abuse.
- Publishing clear terms of reference for the CAIU and making them available to all staff.
- Ensuring that child protection and safeguarding concerns are addressed where police officers are alleged perpetrators of child abuse or domestic abuse.
- Clarifying roles and responsibilities of other agencies, ensuring effective working relationships, timeliness of information sharing and resolving disputes between professionals.
Section 2
INITIAL POLICE
RESPONSE TO CONCERN
FOR A CHILD

This section provides guidance on the initial police response to concern for a child. It also outlines the information that should be recorded by report takers and considerations regarding the deployment of police officers to child abuse incidents. It is relevant to staff working in police communication rooms, front desk staff in police stations, members of neighbourhood policing teams, first response officers and supervisors. Section 4 Further Investigation and other Police Action may also be relevant.

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2.1 SAFETY ISSUES

The safeguarding and protection of children is the duty of the police (see 1.1 Duty To Safeguard Children). Concerns for the safety of officers attending an incident should not preclude deployment to assure the protection of a child. The call taker must prioritise the safety of the caller, victim and any other potential victims, and give safety or other advice as required. They should:

- Keep the caller on the line (any background noise from an emergency call or other recorded calls to communications centres could be used as evidence and allow monitoring of the incident);
- If the suspect has left the scene, advise the caller to lock and secure their premises and return to the telephone (where relevant, a full description of the suspect should be taken and circulated to officers in the area);
- Where the caller is a child, only ask sufficient questions to gain essential information for the deployment of officers.


2.2 INFORMATION REQUIRED IN AN INITIAL REPORT OF CHILD ABUSE

An investigation begins with the receipt of a report of child abuse. Officers and police staff should establish as much detail as possible to support a thorough investigation. A victim or witness making a report of child abuse may not identify it as such. This requires that officers and police staff ask relevant questions that clearly identify reports as child abuse. When an emergency call relates to an incident in which the suspect has left the scene, a description should be circulated and every effort made to locate the suspect. Full details of the incident and all parties involved should be recorded and flagged on the incident log in line with local policy.

Checklist 1 provides details of the information which should be gathered when taking a report of concern for a child. Initial questioning should determine what has happened, including where and when. This will enable the safety of individuals to be considered, decisions to be made about the order in which information is gathered and the best way of obtaining information sensitively while providing reassurance and an appropriate response. In some cases not all the information in Checklist 1 will be necessary at the stage of initial contact. Some information, such as the full details of those involved, can be obtained by the officer attending and some detail is better obtained face-to-face than by phone. Issues relating to safety and risk should be the priority at all times in order to ensure the correct decision about deployment.
Checklist 1: Information Gathering

Report takers should obtain, record and disseminate as appropriate the following information, prioritising it in accordance with the circumstances:

- Location of the incident;
- Location of the suspect and victim (and any other children in the same household, eg, siblings);
- Whether anyone is injured, nature and severity of injuries and whether medical assistance is required;
- Whether any weapons have been used;
- Whether any weapons are available to the suspect;
- Location and identity of the person making the report and the capacity in which they are doing so, eg, neighbour or family member;
- Nature of the incident or concern;
- Identity and details of the victim and any other children including names (correctly spelled), sex, dates of birth, home addresses, telephone numbers and whether they are safe;
- Identity of other parties involved including the suspect, their names (correctly spelled), sex, dates of birth, home addresses, telephone numbers;
- Whether communication or language issues exist and whether officers will require an interpreter in a particular language, or an intermediary;
- Whether any person present appears drunk or has taken drugs;
- Whether there are any particular requirements, for example, relating to disability;
- Description of the suspect;
- Whether any court orders apply;
- ‘First account’ or what the caller says has occurred (recording it verbatim);
- Details of the children’s school and GP, if known;
- Whether there is any history of involvement of children’s social care;
- Details of the demeanour of the caller, victim, suspect and others present, and background noise (including shouting and words spoken);
- Details of attempts made to trace anonymous callers, eg, telephone tracing;
- Whether the child or suspect has a computer;
- The internet service provider (ISP), email address and user names.

Details of electronic communications do not only relate to online investigations as they can provide critical evidence for other investigations. Such information also ensures that activity in other areas of offending can be quickly checked and cross-referenced via CETS, which is held by CEOP.

When an individual wishes to remain anonymous, report takers should attempt to establish the capacity in which they are calling (eg, neighbour, acquaintance or health professional), and ask the reason why they wish to remain anonymous and record this. Report takers should encourage the caller to call back with any further information and, where possible, should offer a single point of contact within the CAIU. Where appropriate, attempts should be made to trace anonymous reporters, using telephone tracing or other methods facilitated by the Regulation of Investigatory Powers Act 2000 (RIPA), Part 1, Chapter 2. For further information see ACPO (forthcoming) ACPO Minimum Standards and Industry Voluntary Code of Practice for Dealing with Malicious and Nuisance Communications: Procedures and Safeguards for Police and Communication Service Providers.
2.3 PRESERVATION OF EVIDENCE IN EMERGENCY CALLS

As soon as the call taker has established that the victim is safe, they should give the caller basic advice on how to preserve the crime scene until the police arrive. This should include not doing any of the following:

- Moving anything (and not allowing others to do so);
- Cleaning up or tidying the house;
- Washing or taking a shower;
- Changing clothing;
- Allowing children, relatives, neighbours or animals to enter areas where the reported incident took place;
- Tampering with any computers, phones or photographic equipment.

2.4 RESOURCE DEPLOYMENT

Decisions relating to deployment should take into account ACPO (forthcoming) National Contact Management Standards and local arrangements. When despatching officers to an incident where child abuse is suspected, the call taker or control room staff should ensure that sufficient information is made available to those attending.

Checklist 2: Deployment

Having despatched officers to the scene, call takers should:

- Ensure that an ambulance is en route, if required;
- Ensure that support (backup) is available for the officer attending the incident if necessary;
- Inform the caller that officers have been despatched;
- Make checks of IT and/or paper-based systems for previous reported incidents, especially those involving children, eg, PNC, bail conditions, civil injunctions, court orders relating to child contact, CAIU database (see also 1.9.6 Information and Intelligence Checks);
- Make checks of the ICS, in accordance with local protocols and, if necessary, by direct contact with the relevant children’s social care department, including ascertaining whether any child involved or resident at the address is the subject of a child protection plan;
- Inform the officer(s) of the following:
  - whether those children present or others who normally reside at the address are the subject of a child protection plan
  - any relevant history of domestic abuse or child abuse (eg, injunctions or child contact restrictions)
  - a description of the suspect, where necessary
  - that supervisors are aware of the incident in accordance with local policy
  - other factors that may affect the police response such as potential communication difficulties arising from language or disability;
- Inform the caller when officers have arrived at the scene so that they can be safely admitted to the premises;
- Ensure officers consider the possibility of communication or photographic-related devices or digital storage equipment containing direct or indirect information, intelligence or evidence to support the investigation;
- Establish any remaining information from Checklist 1.
2.4.1 DEPLOYMENT AND REPORTS OF SUDDEN UNEXPECTED DEATH IN CHILDHOOD

Where a report of a Sudden Unexpected Death in Childhood (SUDC) is received, the call taker should be mindful of the effect their responses may have on a bereaved parent or carer. Call takers should undertake the following actions in addition to those outlined in Checklist 2 and follow their force multi-agency protocol for the rapid response to the sudden unexpected death of a child:

- Request urgent medical assistance;
- Arrange for a detective officer of at least inspector rank (preferably CAIU trained) to attend the scene to take charge of the investigation, in accordance with local policy;
- If a detective officer of at least inspector rank is not immediately available, despatch officers to the scene, taking into account the impact of this on a bereaved family and sending non-uniformed officers in an unmarked police car, where possible.

For further information see 1.4.24 Sudden Unexpected Death in Childhood and 2.14.4 Initial Response to Sudden Unexpected Death in Childhood.

2.5 ANY INCIDENT THAT PROMPTS CONCERN FOR A CHILD

Officers attending any incident should be prepared to identify issues that affect the safety and welfare of children. This is especially relevant when dealing with incidents where violence has occurred, e.g., domestic abuse, but may also apply in less obvious circumstances such as reports of anti-social behaviour, drug, alcohol or substance abuse or neighbour nuisance. The consideration of the welfare of children is also particularly important when dealing with incidents in places where children may reasonably be found, such as residential areas, recreation grounds and school premises. Officers should consider whether the incident is one in a series of related incidents, not all of which may have been previously reported.

In all incidents on private premises, officers should look for indicators that children may normally be resident in the household. Obvious examples may be the presence of:

- Toys, games, bicycles or other play equipment;
- DVDs or CDs intended for children;
- Children’s clothing, nappies, wipes, towels or bibs;
- High chairs or foodstuffs intended for children;
- Car seats, pushchairs or playpens.

Officers should be aware of, and able to, identify children who may have been harmed physically or emotionally, or are at risk of harm or in need, even when they are dealing with matters that appear to be unrelated to child abuse.

2.6 POWERS OF ENTRY

Whenever concern has been expressed about a child, officers should take steps to see the child with the intention of establishing the child’s welfare. This should be with the consent of the parent or carer where possible. Officers may be confronted with circumstances where it will be necessary to enter premises in order to ensure the protection of a child, for example, where a parent or carer refuses permission to see the child and there is concern for the child.
The powers listed below provide a legal background against which powers of entry could be exercised. If an offence is reasonably suspected or there is a reasonable suspicion of harm to a child, an officer will usually be acting legally in obtaining entry. It may be that refusal to allow entry by a parent or carer arouses suspicion that a child has been harmed and indicates an intention to conceal that harm. The appropriate exercise of powers of entry in order to protect children and respond to suspicions of child abuse should not breach the Human Rights Act 1998. Officers should record in their pocket notebook their reasons for taking action, eg, explaining why they considered the exercise of powers of entry to be legal, necessary and proportionate.

Potential powers of entry include:

- Under section 17(1)(b) of the Police and Criminal Evidence Act (PACE) 1984, a constable may enter and search any premises for the purpose of arresting a person for an indictable offence.

- Under section 17(1)(e) of PACE, a constable may also enter and search premises for the purpose of saving life or limb or preventing serious damage to property. In the exercise of police protection powers if entry to premises is refused, this section may give adequate powers (see 2.12 Police Protection).

- Under Common Law a constable has the power to enter premises to prevent or deal with a Breach of the Peace (which is preserved under section 17(6) PACE).

- Under section 48 of the Children Act 1989, a warrant may be obtained to search for children who may be in need of emergency protection (see 2.12 Police Protection).

A record of all searches should be made in accordance with PACE and PACE Codes of Practice.

2.7 ESTABLISHING THE WELFARE OF THE CHILD

The welfare of the child is the priority in all investigations. This requires an immediate assessment of the need for first aid or other medical assistance such as an ambulance. In order to fulfil duties to protect children, officers should establish the welfare of any child present. Officers making decisions about a child need to listen to them and take the child’s views into account. Attention should be paid to what the child says and does not say, how they look and how they behave.

2.7.1 SEEING AND SPEAKING TO THE CHILD

Where there is concern for a child, every effort must be made to see and speak to the child and to establish that he or she is unharmed and not at future risk of harm. This should also apply to any other children present or who normally reside at the premises. A record should be made of the content of the conversation, the timing, setting and people present.
Officers need to communicate with children in a way that is appropriate to their age, understanding and communication preference. Conversations with children must be conducted in a way that minimises distress to them and maximises the likelihood that they will provide accurate and complete information. Officers should avoid leading and suggestive questions but should not allow themselves to be deterred from speaking to a child by concerns over compromising any formal investigative interview in the future (see 4.7.1 Interviews of Children and Special Measures).

There is no legal requirement for a parent or other adult to be present, or to give consent for an officer to talk to a child in order to establish the child’s welfare. In cases where the officer suspects that an adult present has had some involvement in abuse, a request should be made to speak to the child separately. Achieving Best Evidence recognises that the investigating team may need to interview a suspected child victim without the knowledge of the parent or carer in certain situations. Relevant circumstances include the possibility that a child would be threatened or otherwise coerced into silence; a strong likelihood that important evidence would be destroyed; or that the child in question did not wish the parent to be involved at that stage, and is competent to take that decision.

Officers should consider whether an adult’s refusal to allow access to speak to a child on their own is suspicious. In cases where entry to premises, or any part, is refused, officers should consider 2.6 Powers of Entry. If an adult refuses access to speak to a child, a record should be made of the officer’s request and the adult’s response, and appropriate and swift action taken in consultation with the CAIU and children’s social care. Where it becomes clear that one of the parents or carers had no involvement in the suspected abuse, it is good practice to seek that parent’s cooperation.

For practical and evidence-related purposes, and to provide reassurance to the child, it may be helpful for the officer and child to have an adult supporter present while the officer establishes the child’s welfare. Where this is an option, the officer should be satisfied that the presence of the supporter will not adversely delay speaking to the child, and will not inhibit the child from speaking freely owing to the adult’s possible involvement in any offences, or the adult’s close association with a potential suspect.

If concerns about a child exist and a parent or carer refuses to cooperate with police enquiries, this should not prevent further enquiries taking place to establish the child’s welfare.

The possibility of a future prosecution must not prevent an officer from basic communication with the child or children in order to determine their welfare and to demonstrate kindness and reassurance. Care needs to be taken, however, to ensure that speaking to the child is confined to establishing the child’s safety, asking for the minimum amount of information and using open questions to enable the child to give a brief account of anything that has occurred (eg, identifying any offences, suspect(s), scene and any information to preserve evidence). As soon as the welfare of the child has been established or the officer has determined that the child is at risk of harm or has been harmed, the conversation should be brought to a close so that it does not constitute an interview. If a child is in the middle of disclosing abuse or telling their story, however, they should not be interrupted and the officer should not ask any questions. In some cases this will be important evidence. If an interview is conducted, this should be in accordance with the principles of Achieving Best Evidence. See also 4.7.1 Interviews of Children and Special Measures.
2.7.2 OBSERVING AND RECORDING THE CHILD’S CONDITION

Officers should use observation to determine the physical and emotional condition of the child. The nature of the observation and child’s condition should be recorded for the purposes of any future investigation, child protection proceedings or for other reasons relating to a child’s welfare.

Checklist 3: Recording the Child’s Condition

Officers should record the following:

• Child’s name, sex and date of birth;
• Name of the person(s) with parental responsibility and primary carer(s);
• Who was present when the child was spoken to;
• What the child said, written down verbatim;
• Any questions asked of the child and the child’s responses;
• Description of the child’s physical appearance including injuries, clothing and state of cleanliness, with photographs if appropriate (taking into consideration the fact that photographic equipment may have been used to capture the abuse, and the sight of similar equipment might upset and distress the child or witness);
• Any action the officer took to observe the child’s physical condition (noting, when appropriate, that the examination prevented full observation of the child’s body so that injury subsequently discovered but not accounted for in the officer’s record can be explained);
• Description of the child’s demeanour (eg, visible signs of distress such as shaking or crying);
• Description of the child’s surroundings, including the condition of the home (see also Checklist 11).

2.7.3 SAFEGUARDING THE CHILD’S WELFARE

Where an officer has assessed that a child has been harmed or is at risk of harm (see 1.3 Identifying, Assessing and Managing Risk), they should decide how to place the child out of danger. In some cases it may be sufficient to secure a child’s immediate safety by a parent or carer taking action to remove an alleged perpetrator, or by the alleged perpetrator agreeing to leave the home. Where necessary, officers should use powers of arrest (see 2.11 Arrest Strategy) and police protection powers (see 2.12 Police Protection). Where there is a risk to the life of a child or a likelihood of serious immediate harm, the police should act quickly to secure the immediate safety of the child.

There is no power to remove a child or to enforce other arrangements where the child is not considered to be at risk of significant harm. There may be occasions where a child, although not at risk of such harm, is nevertheless considered to be in need, eg, where the parent or carer is taken ill or is under arrest and the child has nobody with legal responsibility to care for them. In such circumstances the child should be consulted if possible and children’s social care should be involved (see 3 Police Responses and Multi-Agency Working To Safeguard Children).
According to section 46 of the Children Act 1989, in circumstances where the police have initiated action to safeguard a child, it is the responsibility of the police to inform the local authority and to give details of where the child is being accommodated. The police also have an important role to play in providing sufficient information to assist in the decision of where the child is to be housed. Where the use of temporary alternative arrangements to parental or other lawful care is considered, any temporary carers and any residents at their address should be seen, their identity verified and details of residence in other police force areas obtained. Further checks should be made in line with 3.4.4 Sharing Information in Cases of Urgency.

In all cases, an internal referral stating that the child has come to police notice should be sent as soon as practicable to the local CAIU in accordance with local procedures so that an external referral may be made. See 1.9.4 Internal Referral to the Child Abuse Investigation Unit.

### 2.8 USE OF INTERPRETERS AND INTERMEDIARIES

Where English is not the first language, officers should not use family members, in particular children, to interpret unless as a last resort. If they are used this should only be to establish facts that might secure the immediate safety of all parties. Where a member of the family or member of the public interprets at the scene, their details should be recorded. In preference to using a child or family member, officers should consider using a telephone interpreting service. The use of such a service should be limited to preliminary enquiries. Similar considerations apply when communicating with children who have a disability that makes communication difficult. For further information on the use of interpreters, see Criminal Justice Reform (2007) National Agreement on Arrangements for the use of Interpreters, Translators and Language Service Professionals in Investigations and Proceedings within the Criminal Justice System, as revised 2007 at [http://frontline.cjsonline.gov.uk/guidance/race-confidence-and-justice/](http://frontline.cjsonline.gov.uk/guidance/race-confidence-and-justice/)

Police officers should not dismiss the possibility of interviewing a child on the grounds that they are too young or disabled. The use of an intermediary can be considered for any child but particular consideration should be given when the child is young or disabled. An intermediary with expertise in this area should be asked to conduct an assessment, with a view to determining whether an interview should take place, and if so, provide advice on the best methods. For further information about the use of intermediaries, see Achieving Best Evidence.

Specialist advice on interviewing and the use of interpreters and intermediaries can be obtained from the NPIA Specialist Operations Centre, which also holds a copy of the Register of Intermediaries.

### 2.9 OTHER ACTIONS ON ARRIVAL AT THE SCENE

Having established the welfare of the child, officers should complete a full initial investigation and preserve any evidence.
INITIAL POLICE RESPONSE TO CONCERN FOR A CHILD

Checklist 4: Other Actions on Arrival at the Scene

To facilitate an initial investigation and to preserve any evidence, officers should:

- Confirm the identity of the suspect (if they are no longer at the scene circulate a full description via the radio system);
- Establish who is or was at the scene;
- Request intelligence checks on the suspect and household, including PNC, INI, ViSOR, ICS, warrants, bail conditions and civil orders, if not already done (see also 1.9.6 Information and Intelligence Checks);
- Make accurate records of everything said by all parties, including any significant statements made by the suspect;
- Record the demeanour of the child, suspect and any other witnesses;
- Consider using a camera to record evidence or arranging for a crime scene investigator (CSI) to do so (taking into consideration the fact that photographic equipment may have been used to capture the abuse, and the sight of similar equipment might upset and distress the child or witness);
- Obtain an overview of what has occurred, taking account of the established risk factors associated with child abuse (see 1.3.1 Established Risk Factors);
- Consider using communication or photographic-related devices or digital storage equipment containing direct or indirect information, intelligence or evidence to support the investigation;
- Consider the value of house-to-house enquiries and the seizure of closed-circuit television (CCTV) evidence (see 4.8.2 House-to-House Enquiries, CCTV and Enquiries with other Potential Witnesses).

2.10 PARENTAL RESPONSIBILITY

Officers conducting an investigation should consider the legal status of those responsible for a child, to ensure that the child is protected from harm. Parental responsibility under section 3 of the Children Act 1989 means all rights, duties, powers, responsibilities and authority which by law parents have in relation to their child and his or her property. Parental responsibility is held by the child’s natural mother and the following:

- The natural father if married to the natural mother at the time of the birth, or if the natural father subsequently marries the mother;
- The natural father if he has a written agreement with the mother;
- A person having parental responsibility through a court order;
- An unmarried father if he acts with the mother to have his name recorded on the child’s birth registration certificate (only in the case of births registered after 1 December 2003).

Parental responsibility may also be affected if the child is looked after by the local authority or if any court orders are in force that affect parental responsibility, eg. court orders relating to child contact (see 3.5 Court Orders Relating to Specific Children). Police protection does not give the police parental responsibility (see 2.12 Police Protection).

The consent of the child should be established prior to any interview taking place. In some cases the parent’s consent is also desirable, although not essential to enable the interview to take place (see 4.7.1 Interviews of Children and Special Measures). The relevant medical professional is responsible for establishing consent for a medical examination, see 4.4 Forensic Medical Examinations.
2.11 ARREST STRATEGY

Under PACE officers have the power to arrest for any offence, but must demonstrate that they have reasonable grounds for believing that the arrest is necessary for one of the reasons listed in section 24 (5) PACE.

The following considerations should be taken into account when planning the arrest of a suspect:

- Current location or address of the suspect, for example, whether the suspect has access to the victim;
- Suspect’s occupation, for example, whether the suspect has access to children;
- Suspect’s contact with other children and especially any continuing risks that this may present;
- Preservation of evidence (a particular consideration is preserving evidence which may be electronically stored, for example, on mobile phones or computers);
- Timing and location of the arrest, ensuring that action is proportionate to the need to protect children and to safeguard the rights of the suspect, particularly with regard to their home, work and family life;
- Consulting other agencies, such as children’s social care, to ensure that the arrest safeguards the welfare of the victim and other children.

Where an arrest is made, the victim or the parent or carer should be asked for details of how they may be contacted in the event of the suspect being released from custody. They should also be asked to provide information which could assist the custody officer in decisions relating to bail conditions, eg, details of the child’s school, childcare providers or leisure facilities.

2.12 POLICE PROTECTION


The same website has access to the leaflet designed for children – Home Office and NSPCC (2005) Why are the Police Protecting Me?

Police protection is an emergency power which enables any police officer to protect a child who is believed to be at risk of significant harm (see 1.2.7 Significant Harm). Section 46 of the Children Act 1989 empowers an officer to remove a child to suitable accommodation or prevent the removal of a child from a hospital or other place in which that child is being accommodated. When these powers are exercised, the child is considered to be in police protection. Police protection does not give the police parental responsibility and does not, for example, give the police the ability to consent on behalf of the child to a forensic medical examination. No child may be kept in police protection for more than seventy-two hours.

Before exercising police powers of protection, wherever possible an officer should seek advice from the CAIU. Where it is not possible for an officer to seek advice from the CAIU before exercising police powers of protection, the CAIU should be informed as soon as possible after those powers have been exercised.
Decisions relating to police protection are the responsibility of the police, but where possible, decision making should include discussions with children’s social care or any other agencies as appropriate, eg, medical staff. Where the police need to act immediately to protect a child, a strategy discussion should take place as soon as possible after such action to plan the next steps (see 3.2 Strategy Discussions and Meetings). A referral to children’s social care must be made concerning a child who has been taken into police protection (see 3.1.3 External Referrals from the Police to other Agencies).

Police protection powers should be used only when necessary for reasons relating to the immediate safety of the child. Wherever possible the decision to remove a child from a parent or carer should be made by a court. For example, an application for an EPO could be used in preference to the exercise of police protection powers. Such an order can include an ‘exclusion requirement’, which specifies certain people who should be excluded from living where the child is resident. (For further details see 3.5.4 Emergency Protection Order.)

When considering the necessity for emergency action, officers should consider whether action is required to safeguard other children in the same household of an alleged perpetrator or elsewhere. The nature of the abuse should be a key determining factor, eg, if it is known that a child is at imminent risk of significant harm then immediate action ought to be taken.

Where a person with parental responsibility is suspected of abusing a child who has subsequently been taken into police protection, a risk assessment should be made to consider the child’s safety before the person is informed that the child is in police protection. For example, officers may consider not disclosing the location of the child. While there should not be an unreasonable delay in informing the person with parental responsibility, the welfare of the child is paramount and such action may be justified by the need to prevent coercion or contamination of the interview or other evidence.

### 2.12.1 SUITABLE ACCOMMODATION

Suitable accommodation usually means local authority accommodation, a registered children’s home or foster care, but not a police station. It also includes ensuring that a child remains in hospital. A child should only be brought to the police station in exceptional circumstances, such as a lack of immediately available local authority accommodation. This should be for a short period only and a child should not be taken to the cell block. If it is necessary for a child under police protection to stay with relatives or other appropriate carers, they and any residents at their address should be seen, their identity verified and details of residence in any other police force areas obtained. Checks should be made of the proposed carers and residents at their address in accordance with 3.4.4 Sharing Information in Cases of Urgency.

Police forces should have contingency arrangements for children brought to police stations so that a suitable, physically safe and comfortable room is identified at every police premises where children could be taken. The room should have access to suitable play materials, food, drink, toilet, washroom and nappy-changing facilities. Police forces, in collaboration with the local authority, should consider the employment of an on-call childminder so that any children brought to police premises are looked after by a suitably qualified person.
2.12.2 ROLES OF THE INITIATING OFFICER AND THE DESIGNATED OFFICER

In accordance with *Home Office Circular (17/2008) The duties and powers of the police under the Children Act 1989*, the initiating officer is the officer who first takes the child into police protection and undertakes the initial enquiries.

The initiating officer should:

- See the child in order to assess his or her individual circumstances;
- Communicate with the child and keep him or her informed, taking into account the child’s wishes as part of the decision-making process and whenever possible acting on them;
- Explain to the child who they are, what their role is, what they have done and propose to do, what is going to happen next, and who else is involved in looking at the case and supporting the child;
- Refer to *Achieving Best Evidence* if it becomes necessary to interview the child as a possible victim of crime, but not be inhibited from basic communication with the child;
- Make an internal referral to the CAIU (see 1.9.4 Internal Referral to the Child Abuse Investigation Unit);
- Inform the local authority, within whose area the child was found, of the action taken and proposed in respect of the child, and the reasons for taking it;
- Inform the local authority, within whose area the child is ordinarily resident, of the place the child is being accommodated;
- Inform the child’s parents, anyone with parental responsibility for the child, and any other person with whom the child was living immediately prior to being taken into police protection, of the steps taken with respect to the child, the reasons for taking them and any further steps that may be taken;
- Complete a police protection form.

The designated officer is the officer of at least inspector rank who is responsible for enquiring into cases in which the police take children into their protection.

The designated officer should:

- Visit the child where he or she is staying to check the child’s immediate welfare and consider the suitability of that environment (or at least ensure that the instigating officer has actually seen and assessed the child in person);
- Regularly review the grounds for police protection to determine whether the power should remain in force;
- Complete a police protection form;
- Provide an internal referral to the CAIU if not already provided by the initiating officer (see 1.9.4 Internal Referral to the Child Abuse Investigation Unit);
- Keep a record of any handover to another designated officer, for example, on shift changes.
2.12.3 RELEASING THE CHILD FROM POLICE PROTECTION

Under section 46(5) of the Children Act 1989, once the designated officer has completed their enquiries, they must release the child from police protection. The designated officer may consider it necessary to continue police protection, even where the child has been accommodated, if they consider there is still reasonable cause to believe that the child will be likely to suffer significant harm if released.

A child should only be discharged from police protection if:

- They are considered by the designated officer to be no longer at risk; or
- An EPO has been made (see 3.5.4 Emergency Protection Order); or
- They have been provided with accommodation by the local authority under section 20 of the Children Act 1989 and are no longer considered to be at risk of significant harm.

Any decision to release a child from police protection should only occur following discussion with the relevant personnel in children’s social care. This decision should be recorded.

2.12.4 USE OF REASONABLE FORCE

Under the Children Act 1989 the police have the power to use reasonable force in appropriate circumstances to take a child into police protection or to keep them there. Police powers under section 46 of the Act cannot be exercised unless and until a child is found. A constable does not have the right to enter and search premises to remove a child without a warrant. However, in practical terms, a constable is likely to find a child in an emergency situation where other powers are being exercised for entry to dwellings, for example, under section 17 of PACE, to arrest someone for an indictable offence or a breach of the peace, or to save life or limb. An officer may use reasonable force in the execution of his or her duty. Reasonable force has been defined in case law as ‘such force as is reasonable in the circumstances’. The use of reasonable force is further supported by the decision of the divisional court in the case of R v Commissioner of Police, for the Metropolis [2006].

2.13 PRESERVATION OF PHYSICAL EVIDENCE AND SCENE PROTECTION

Evidence gathering is a key role of the police in the response to concerns for children. Such evidence is important for the criminal investigation and for any process relating to the protecting and safeguarding of children. Scientific corroboration in investigations of child abuse could be a primary source of evidence accepted by a court (see also 4.4 Forensic Medical Examinations). In a case of suspected sexual offences, officers should attempt to safeguard evidence prior to a forensic medical examination by following the guidance in ACPO/CPS (2009) Guidance on Investigating and Prosecuting Rape.

Protection of the scene of crime should be a consideration in all cases, including those where there is a time lapse between the report and the alleged offence.
2.14 CONSIDERATIONS IN PARTICULAR TYPES OF INVESTIGATION

Some investigations require particular considerations by an officer providing an initial response. In all cases robust evidence gathering at an early stage is key to an effective criminal investigation and, importantly, can assist other agencies in their decision making, e.g., children’s social care.

2.14.1 INITIAL RESPONSE WHERE ELECTRONIC EVIDENCE OR A COMPUTER IS INVOLVED

In cases where the use of a computer is involved in the allegations (e.g., child abuse images or grooming), or is discovered in the possession of a suspect who may have used it as part of their offending, it should be treated as a crime scene. For example, in sexual abuse allegations, officers should consider the possibility that computers have been used as part of the offending, including involvement in grooming, contact with other offenders and the use of child abuse images, see 1.4.2 Indecent Images of Children.
Specialist advice should be sought without delay to preserve any evidence that may be available. It should also be sought with regard to handling, storage and submission considerations. While awaiting such advice, officers should ensure that plugs attached to computers are immediately removed from the electrical socket because erasing software could be working in the background. Any other equipment capable of storing an image should be seized, eg, mobile telephones, digital cameras, thumb drives and other storage devices. Officers should also ensure that the computer is not touched by the suspect or any person associated with the suspect. Wherever possible, the location of exhibits should be photographed in situ. This is because descriptions of locations are not always clear and sometimes important items are not seized at the time. Officers should make use of any local and national systems to support the investigation of crimes involving electronic evidence and computers, eg, CEOP, in relation to child abuse images.

In cases which involve disturbing images of children and the commission of offences against them, investigators have a duty of care to protect the child from further harm, and to demonstrate sensitivity towards the child at all stages of the investigation. This includes the controlling and handling of any indecent images. It will be important to consider the impact of taking photographs of a child victim and the impact that the process might have in such cases.

Reports relating to child abuse images may be received from members of the public either by telephone, email or in person. Where these reports are accompanied by digital or printed copies of images, these should be seized. In all cases a detailed statement should be obtained. It will assist those who carry out further investigation if the following information is included in the statement:

- Identity of any other material witnesses;
- Name of the ISP or mobile telephone service provider through which images were received, or any delay in reporting the incident to the police (this will assist investigators to determine if the person reporting has committed any offence in relation to the image).

Seized images should be placed in a sealed envelope to prevent accidental viewing and stored in a secure location. Thereafter, access to the material should be recorded. If investigators are unsure how to package and store computer disks, mobile telephones, electronic organisers or other seized items containing the digital image, they should seek advice from the Hi-Tech Crime Unit (HTCU) or a supervisor. The computer or other device that received the images may contain additional evidence that can only be recovered through specialist digital examination and this should be arranged with the local HTCU. In such cases, officers must remain conscious of the fact that these cases are child abuse investigations and that the support from HTCU is limited to the technical process. This does not replace the need for a specialist in child abuse investigation and a child-focused approach to the offender’s access to children, and appropriate risk assessment (see 1.6 Child Abuse Investigation Units and 2.17 Internal Referral to the Child Abuse Investigation Unit and External Referrals to other Agencies.)
Officers undertaking day-to-day policing activities such as searching offenders or premises on unrelated matters may discover evidence of possession, collection or distribution of indecent images of children. Relevant material could include printed pictures from a computer, handwritten notes referring to children’s ages, internet chat room names, magazines relating to children and legal and academic material concerning paedophilia. There may also be indications of an interest in children which may not seem in keeping with the suspect’s circumstances, for example, a single person with no child relatives who keeps a playroom for no apparent reason. Investigators should be aware of devices, in addition to disks, that have been developed to store digital media. These devices include watches, pen drives (storage devices which can look like key fobs), wireless storage to remote devices such as printers, personal data assistants or certain mobile telephones.

If officers are unsure about handling these devices and the images are suspected to be stored on a computer or other storage device, they should seek advice on methods of seizure from the HTCU. In other circumstances the images or digital media upon which they are stored should be seized and packaged in a sealed envelope and stored in a secure location. For further information see ACPO (2007) Good Practice Guide for Computer-Based Electronic Evidence, Version 4.0.

2.14.2 INITIAL RESPONSE IF DRUG- OR SALT-INDUCED POISONING IS SUSPECTED

Where the investigating officer suspects that salt- or drug-induced poisoning is the cause of apparent illness, this should be brought to the attention of an examining physician. A request should be made for appropriate blood, hair and urine samples to be obtained for forensic analysis and hospital use. Some toxins are present in body fluids for only a limited time following administration. The investigating officer should, therefore, identify and seize any material that contains body fluids from the child, such as traces of blood, vomit, urine or faeces. Feeding bottles and other equipment associated with feeding the child should also be seized for examination and, where available, samples of any leftover food. Advice should be obtained from a CSI as to the correct storage, packaging and submission of any items seized. (See also 4.4 Forensic Medical Examinations.)

2.14.3 INITIAL RESPONSE TO HONOUR-BASED VIOLENCE

Reports of crimes associated with HBV or other illegitimate justifications for abuse (see 1.4.16 Honour-Based Violence and other Illegitimate Justifications for Abuse) should alert officers to additional risk factors which can be present and are associated with incidents and crimes. For information on these risk factors, see ACPO (2008) Honour Based Violence Strategy and DASH 2009 Checklist and related guidance.

In HBV cases officers should consider that:

- When the victim reports HBV this might increase risk and imminence of harm to the victim, and might act as a barrier to the victim seeking further help;
- Other family members, such as siblings, might also be subject to HBV;
- Threats might extend beyond the immediate family to the wider community;
- Family members might seek to locate and pressurise the victim;
- Family members might seek to remove or abduct the victim;
- Threats might extend to other family members or the partner of the victim;
- Attempts might be made to leave the country with the victim;
- There might be other patterns of offending which are not linked to HBV;
- There might be a history of abuse or HBV with other partners or family members.
2.14.4 INITIAL RESPONSE TO SUDDEN UNEXPECTED DEATH IN CHILDHOOD

For further information about the investigation of SUDC, see ACPO (2006) Guidelines on Infant Death Investigation (supplement to ACPO (2006) Murder Investigation Manual). Where possible, the first officer responding should be a detective officer of at least inspector rank (preferably CAIU trained). When this is not immediately possible, the first response officer should arrange for such an officer to attend the scene to take charge of the investigation.

The local multi-agency protocol for the rapid response to SUDC should be followed. In most cases the child will have been removed to an emergency care department by the Ambulance Service, in which case the investigating officer should go to the location where the body is and liaise with the lead clinician, usually a designated SUDC paediatrician. A number of areas do comply with Working Together by employing senior medical practitioners to carry out this task.

Officers should maintain a sympathetic approach to the bereaved family, regardless of the cause of the child’s death. Officers should take into account the fact that the bereaved parents or carers are likely to be in a state of shock and possibly confused. For the purposes of any future investigation, officers should note the response to the child’s death, eg, remoteness, indifference to the death or disposal of articles. Where possible, investigators should obtain an initial account from carers separately.

For further information see 1.4.24 Sudden Unexpected Death in Childhood and 4.3.2 Lines of Enquiry in Cases of Sudden Unexpected Death in Childhood.

Checklist 6: Immediate Actions in Cases of Sudden Unexpected Death in Childhood Where the Child Remains at the Scene of Death

The first response officer (who should be a detective inspector) should undertake the following tasks:

• Request urgent medical assistance, if not already done;
• Ensure the child is taken to the local hospital emergency care department;
• Follow the local multi-agency protocol on the rapid response to SUDC;
• Ensure that checks are made internally and with multi-agency partners;
• Arrange for a detective officer of at least inspector rank, to attend the scene to take charge of the investigation if the first response officer is not of that rank;
• Record information about emergency services that have attended the scene and details of any conversations that took place;
• Record details of the child’s condition, eg, position, any vomit, blood from the nose or mouth, colour, tone, consciousness, any signs of movement or breathing;
• Record the surrounding circumstances of the discovery of the child, eg, who was present when the child was found, how the child was found and who alerted the emergency services;
• Record the condition of the child’s surroundings (eg, using visual recording and/or photographs);
• Record the response of the parent or carer, ideally by interviewing them both separately, if more than one person is involved;
• Explain to the parent or carer that the police need to take actions to determine the cause of the child’s death, such as asking particular questions and possibly examining items from the house;
• Inform the force SIO;
• Commence a policy file.
Checklist 7: Immediate Actions in Cases of Sudden Unexpected Death in Childhood When the Child Has Been Taken to Hospital

The first response officer (who should be a detective inspector) should undertake the following tasks:

- Attend the hospital where the deceased has been taken.
- Deploy a detective sergeant to the location where the child was discovered (this may be the home address) in order to carry out discreet initial assessment.
- Attend the secondary location personally as soon as possible.
- Ensure the scene of death is identified and preserved for potential forensic assessment by a CSI, including photographs and visual recording.
- Notify the Coroner’s Office.
- Consider calling out a CAIU family liaison officer.
- Make a referral to the Foundation for the Study of Infant Death.
- Request blood samples from carers for alcohol or drug examination (eg, where there is any suggestion of overlying or neglect).
- Liaise with the duty paediatrician or the designated SUDC doctor or nurse to ensure appropriate emergency department samples are taken at this stage.
- Ensure that a full skeletal survey by a paediatric radiologist is carried out and that results are available for the pathologist.
- Ensure CT and MRI scans are also carried out by a paediatric radiologist.
- Obtain the history of the hours leading up to the death from family members, in conjunction with the paediatrician.
- Arrange, as soon as possible and in conjunction with a CSI, for a death scene visit with a paediatrician or other designated health professional within the first twenty-four hours to assist interpretation and assessment.
- Ensure that a post-mortem examination takes place, ideally within forty-eight hours, by either a paediatric pathologist or a pathologist with paediatric experience. If there are any suspicions that a crime may have occurred, a special post-mortem must be conducted by a Home Office forensic paediatric pathologist or a Home Office forensic pathologist jointly with a paediatric pathologist. If necessary the coroner should be asked if the body can be taken to a facility where this can be carried out.
- Commence a policy file.
- Contact CAIU and instigate checks on the child and family members, including multi-agency checks.

In any cases that are suspicious, major crime procedures should be implemented in accordance with ACPO (2006) Murder Investigation Manual.
2.14.5 INITIAL RESPONSE TO SUSPECTED PARENTAL ABDUCTION

The first officer taking a report of suspected parental abduction should establish whether abduction has occurred or if there is a real and imminent danger of abduction. Where abduction has occurred or there is a real and imminent danger of abduction, officers should comply with local policy. Where a real and imminent danger of abduction is not present, officers should comply with local procedures to ensure that an accurate record of the incident is made and stored for future reference. An internal referral should be made to the CAIU from where intelligence should be disseminated to the police force in which the child ordinarily resides (see 2.17 Internal Referral to the Child Abuse Investigation Unit and External Referrals to other Agencies). For further information see Metropolitan Police Service (2005) Child Abduction: A Practical Guide for Police Officers and 1.4.6 Child Abduction (Including Parental Abduction).

Checklist 8: Immediate Actions in Cases of Suspected Parental Abduction

The first response officer should undertake the following tasks, as appropriate:

- Establish whether the child is still with the complainant or when the child was last seen;
- Establish why the complainant believes that the child may have been abducted, eg, a history of abduction or threats or attempts by the potential abductor;
- Obtain full details of the potential abductor including name, address, date of birth, employment status and employer, description with a photograph if available, car description and registration number;
- Obtain details of the potential abductor’s connections abroad, for example, has the person ever been or intended to be temporarily or permanently domiciled abroad, ties to the UK and any other country;
- Establish the current marital status of the complainant and the potential abductor and whether any court proceedings are pending;
- Establish the details of any child contact arrangements including disputes, court orders and arrangements for supervised and unsupervised contact;
- Obtain any records of the family and potential abductor held by the police or other agencies;
- Establish whether there are any financial, family, medical or legal reasons for the potential abductor to leave the UK;
- Record details of any other sources from which the potential abductor’s intentions may be learnt;
- Establish whether the child has his or her own passport and where the passport is;
- Obtain a full description of the child, including name, age, date of birth, sex, nationality, appearance and clothing, a photograph if available, and the mother’s maiden name;
- Ascertain the likely mode of transport, port and date or time of travel if known;
- Comply with local procedures to ensure immediate circulation for the purpose of an all ports warning;
- Make immediate contact with the police force responsible for the port of embarkation with a view to recovering the child and arresting the suspect;
- Obtain a written statement from the complainant;
- If there are any grounds to believe that the allegation may be malicious or frivolous this should be recorded.
2.15 RISK IDENTIFICATION

Officers attending incidents where children are present should identify any risk factors in order to determine the actions required to safeguard the children (see 1.3.1 Established Risk Factors). Details of these risk factors should be included in the officer’s internal referral to the CAIU (see 2.17 Internal Referral to the Child Abuse Investigation Unit and External Referrals to other Agencies). All information available should be recorded, together with any decisions made relating to the safety of the child. There is no scientific formula for the identification of risk of harm and assessment of the safety of a child. Officers should consider all the circumstances when making decisions and carrying out an investigation. Officers should seek advice from the CAIU but should be confident to take action when they have identified urgent concerns for a child’s safety (for example, see 2.12 Police Protection).

2.15.1 ACTION IN URGENT OR SERIOUS CASES

All allegations of child abuse are potentially serious, but cases should be identified as particularly urgent or serious when an allegation involves:

- Serious physical injury (the judgement as to what is serious should include consideration of the child’s age and any mental or physical impairment);
- Near death of a child due to physical abuse;
- A child rendered unconscious through physical abuse;
- Serious sexual offence (the judgement as to what is serious should include consideration of the child’s age and any mental or physical impairment);
- Serious or chronic neglect (the judgement as to what is serious should include consideration of the child’s age and any disability);
- A suspect who has unsupervised access to children (eg, through family, work or personal life) and poses a continuing risk.

Any officer identifying an urgent or serious case should inform their supervisor of the details without delay. As in any other case of concern for a child, the officer should send an internal referral to the CAIU. Urgent action taken prior to the internal referral to the CAIU or external referral to children’s social care should be relayed to the CAIU and children’s social care both verbally and in writing at the earliest opportunity. This should include a full account of any action taken and the reasons for it. Officers providing a first response should include details of their actions at the scene in their internal referral to the CAIU. (For further information see 2.17 Internal Referral to the Child Abuse Investigation Unit and External Referrals to other Agencies and 1.9.4 Internal Referral to the Child Abuse Investigation Unit.)

2.16 SINGLE POINT OF CONTACT

Apart from in exceptional circumstances responsibility for a child abuse investigation should, where possible, rest with a named officer. This person should remain as the investigating officer in the case and the single point of contact for the child and family throughout the case. The single point of contact and any changes should be recorded and explained to the child, children’s social care and other affected individuals as soon as possible. For example, the point of contact may change when a CAIU investigator takes over responsibility for the case from the first response officer (see 1.6 Child Abuse Investigation Units).
2.17 INTERNAL REFERRAL TO THE CHILD ABUSE INVESTIGATION UNIT AND EXTERNAL REFERRALS TO OTHER AGENCIES

In this guidance the term internal referral is used to describe a situation where an individual or unit within a police force informs the CAIU of concern for a child. Officers should refer all cases which cause concern about a child to the CAIU or central referral unit depending on local arrangements. The referral should be in writing and should follow local policy in terms of the system for referrals and information required. In some forces this might be linked to multi-agency systems such as the Common Assessment Framework (CAF) (see 1.11.4 Common Assessment Framework). The information provided by the police can be important for the completion of the CAF in relation to the child’s development, their family and their environment.

Checklist 9: Information for an Internal Referral to the Child Abuse Investigation Unit

The following information should be considered, as a minimum, for inclusion in an internal referral to the CAIU:

- Name and rank of the officer making the referral and their contact details;
- Name and sex of the child (and any previous names);
- Date of birth of the child;
- Current address and previous addresses of the child;
- All parents’/carers’ names, dates of birth and addresses, and details of any cohabitees and adults in the household (eg, those who have unsupervised access to the child such as a babysitter, parent’s partner);
- Name, date of birth and address of any other person with parental responsibility;
- Details of other children in the family or household including name, sex and date of birth, eg, siblings;
- Name, date of birth and address of any suspect;
- Nature of concern, how and why it has arisen, whether any particular needs are apparent and any supervisor’s involvement in the circumstances leading to the referral;
- Date and time of the referral.

The following information should also be included wherever possible:

- Identified risk factors (see 1.3.1 Established Risk Factors);
- Copies of relevant pocket notebook entries;
- Name and contact details of the child’s GP and, if applicable, health visitor and school;
- Details of actions taken by police or other agencies (if known) and the reason for them;
- Results of checks, including the ICS, PNC, VISOR, INI, local databases, domestic abuse records including Youth Offenders Index, Missing Persons Index, force intelligence systems, force control room records, for any crimes and other incidents recorded in respect of relevant addresses and individuals including the child, suspect and any individuals in the family or those involved in the described circumstances (see also 1.9.6 Information and Intelligence Checks);
- Any special needs;
- Religion, ethnicity and spoken language.
When an external referral is made to children’s social care or other agency, information contained within the internal referral should be included (see 3.1.3 External Referrals from the Police to other Agencies). The information within a referral must be accurate, factual, relevant, necessary and proportionate for the purpose for which it is passed.

Where officers have concerns about a child which are likely to lead to a referral to children’s social care or another agency (e.g., health visitor or midwife), they should discuss those concerns with the child and the family as appropriate to the circumstances, and explain what action the police will need to take in terms of referring concerns to other agencies.

Note: According to paragraph 5.16 of Working Together this should only be done where it will not increase the risk of harm to the child, e.g., if it is suspected that a child may be coerced into silence or that important evidence may be lost, this discussion should not take place. Officers should promote a positive but realistic image of children’s social care and other agencies to encourage and enable people to access the help and advice they need. They should explain the role of children’s social care and the referral process to the child and his or her parent or carer.

2.18 CROSS-BORDER AND INTERNATIONAL INVESTIGATIONS

Practical considerations arise where the victim resides in a different policing area from that in which the offence(s) was committed. Subject to the overriding principle that the welfare of the child is paramount, chief officers are responsible for the investigation of offences committed within their area.

Working arrangements in cross-border investigations need to be agreed between forces on a case-by-case basis. Decisions should be made based on the requirements of the victim in the first instance and then the subsequent requirements of the investigation and capability of forces involved.

At an early stage, agreement should be reached between those forces involved as to the following:

- Identity of the owning police force, i.e., the force assuming responsibility for managing any investigation;
- Extent of assistance that may be provided by the remaining forces concerned;
- Any joint strategy for the investigation;
- Consistent interview strategy which takes account of the differing mediums for recording interviews that exist within forces.

In some cases consideration will need to be given to whether section 72 of the Sexual Offences Act 2003 will enable a prosecution in the UK for offences committed abroad. Where suspects are living or working abroad, contact should be made with the CEOP Overseas Tracker Team and the Serious Organised Crime Agency (SOCA) or INTERPOL. For further information about managing such offenders, see ACPO (2007) Guidance on Protecting the Public: Managing Sexual Offenders and Violent Offenders.

UK Central Authority for the Exchange of Criminal Records

The UK Central Authority for the Exchange of Criminal Records (UKCA-ECR) was established under a 2005 European Union (EU) Council Framework Agreement designed to facilitate the exchange of information throughout the EU. The UKCA-ECR receives notifications of convictions of UK nationals in other EU Member States, translates this information and enters it on the PNC. It also notifies relevant EU Member States of any convictions of EU nationals in the UK.
The UKCA-ECR process requests received from other EU Member States for criminal records of UK nationals. In doing this, the UKCA-ECR has been required to build a translation bureau to deal with the interpretation of conviction notifications in the respective languages.

The UKCA-ECR is able to make requests to the EU for information about individuals who are subject to criminal proceedings in the UK; this includes defendants, suspects, victims and witnesses of crime. This work is vital as it can reveal a hidden picture of criminality.

The UKCA-ECR provides all other EU Member States with a central point of contact within the UK. This ensures a simple, standard and timely approach to both outgoing and incoming exchanges and queries. The process also ensures that Scottish forces and the Police Service of Northern Ireland (PSNI) receive all relevant information as soon as it is available.

For further information telephone 01489 569 805/807 or consult UK-ECR (2008) Obtaining Criminal Record Histories from European Union Member States.

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**MANAGEMENT ISSUES**

- Providing police officers and staff with training and information to ensure that they ask relevant questions at the reporting stage and during the initial investigation to enable them to identify concerns about children’s welfare and risk factors in child abuse cases, and take appropriate action.
- Monitoring the accuracy of call grading according to local policy.
- Monitoring child abuse incidents to ensure that they are flagged correctly at call-handling stage (including developing policies that indicate how frequently supervisors should monitor child abuse-related calls to ensure that adequate resources are deployed and that callers are dealt with appropriately).
- Establishing systems for monitoring practice and supervision in the first response to concerns about children, including the use of police protection powers and linked into LSCB processes for multi-agency responses to concerns for children.
- Monitoring the initial response to concerns for children to ensure effective investigations at an early stage.
- Ensuring that relevant information and intelligence is available to all staff.
- Measuring responses against checklists in this guidance.
Section 3
POLICE RESPONSES AND MULTI-AGENCY WORKING TO SAFEGUARD CHILDREN

This section provides information about the framework for multi-agency working as it relates to police responses to investigating child abuse and safeguarding children. It is particularly relevant to CAIU supervisors and officers. It will also be useful for domestic abuse officers and for officers involved in managing MAPPA offenders and PDPs.

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3.1 EXTERNAL REFERRALS, MULTI-AGENCY COMMUNICATION AND DECISION MAKING AND CRIMINAL INVESTIGATIONS

The majority of concerns about children emerge through routine contact with families by a range of agencies. Initially, the potential for abuse or harm to the child may not be apparent. For the police, routine contact can include dealing with child offenders, missing children and domestic abuse. In health settings, concern may arise when treating an injury originally presented as accidental. In an educational setting, concern may arise following a disclosure of abuse by a child to a teacher. HC 330 (2009) The Protection of Children in England: A Progress Report recommends that all police, probation, adult mental health and adult drugs and alcohol services should have well-understood referral processes which prioritise the protection and wellbeing of children and should include automatic referral where domestic abuse or drug or alcohol abuse may put a child at risk of abuse or neglect.

Information from internal and external referrals, telephone conversations with other agencies, strategy discussions, joint visits, planning for interviews and contact with victims are sources of intelligence and information besides being part of any investigation. Officers should record all information in child abuse investigations accurately and in writing. They should also record the timing and context of all exchanges of information with and from other agencies. For further information about information sharing, see 3.4 Multi-Agency Information Sharing, Intelligence Gathering and Decision Making.

3.1.1 EXTERNAL REFERRALS TO THE POLICE AND CRIMINAL INVESTIGATIONS

For a summary of the guidance in Working Together relating to referrals to the police when a criminal offence is suspected, see 1.9.2 External Referral to the Police from another Agency. Discussions between the police and children’s social care enable them to share any relevant information that they each hold and to consider how to proceed in the best interests of the child. Where it is decided that it is in the best interests of the child to proceed with a full criminal investigation, the investigation is the full responsibility of the police. There will, however, be less serious cases where, after discussion, it is agreed that the best interests of the child are served by an assessment led by children’s social care without a full criminal investigation. This does not relieve the police from their duty to investigate crime, and in every case there will be a requirement for an initial investigation (eg, see 1.9.6 Information and Intelligence Checks). The welfare of the child should in all cases take priority. Where any doubt exists as to the seriousness of the case, the police should take responsibility from the outset for any criminal investigation necessary to determine whether the case should be dealt with solely by children’s social care assessment or whether it also requires further criminal investigation. This is because in many cases it is difficult to determine how serious or otherwise the allegations are, or to assess whether any other children have been victims of, or are at risk of harm from, the same offender until an initial investigation has taken place. Where a joint decision is made that a case should result in assessment led by children’s social care and there should be no further criminal investigation, this decision should be documented and the decision reviewed as appropriate.
Criminal investigations relating to child abuse are the responsibility of the police. The local authority is responsible for enquiries relating to children who are suffering or likely to suffer significant harm, and assessments of children in need under the Children Act 1989. These are separate but interconnected processes. Decisions and actions in one process will often affect those in the other process. Communication and coordinated action between agencies is essential. For example, during some investigations, the police (and the CPS) may need to request follow-up strategy discussions to ensure the protection of the child and the progress of both the criminal prosecution and child protection processes. When investigating child abuse, officers should have the confidence and be prepared to question the views, actions and the decision making of doctors and professionals in other agencies. Where the outcome of decisions is not supported by a police officer, the advice of a supervisor should be sought and records made of any action taken.

3.1.2 CHILDREN’S SOCIAL CARE ENQUIRIES AND CRIMINAL INVESTIGATIONS BY THE POLICE

*Working Together* specifies that the LSCB should have a local protocol detailing how enquiries relating to children suffering or likely to suffer significant harm (under section 47 of the Children Act 1989) and associated criminal investigations should be conducted, and the circumstances in which joint enquiries are necessary and/or appropriate.

Whenever a joint investigation by the police and children’s social care into possible injury or harm to a child is required, an officer of at least the rank of sergeant should be involved at the referral stage and in any further strategy discussion. In addition, an officer of at least the rank of inspector should have an active overview of the investigation to ensure that they are fully informed of, satisfied with and accountable for the way that the investigation is planned and conducted.

Joint Visits

The purpose of a joint visit between the police and children’s social care is to see the child and establish the child’s welfare. Joint visits should be planned and the police and children’s social care representatives should have defined roles. These types of visits are a useful investigative tool and can greatly assist the risk-assessment process. Such visits are appropriate in the following circumstances:

- If it is suspected that the child is a victim of crime;
- Whenever there is little or no information on which to assess whether the child is at risk of harm;
- To assess a child’s cognitive development and ability to provide an account during a visually recorded interview.

For further information see 4.7.1 Interviews of Children and Special Measures.

CAIU investigators should work closely with children’s social care and other agencies by sharing relevant information relating to children’s safety or welfare. For further information see 1.9 Managing Information about Child Abuse.
3.1.3 EXTERNAL REFERRALS FROM THE POLICE TO OTHER AGENCIES

For information about referrals to the police see 1.9.2 External Referral to the Police from another Agency and 3.1.1 External Referrals to the Police and Criminal Investigations. This subsection focuses on referrals from the police to children’s social care and other agencies. The contact which all police officers have with members of the public provide them with opportunities to identify concerns about children and trigger the appropriate multi-agency response to ensure their protection. All police officers have a duty to identify, and refer to children’s social care, children and families who may require access to the wide range of services and support which are available to prevent problems from developing into abuse. The focus here is on referrals to children’s social care, but the information should apply when a referral is made to another agency, eg, GP, health visitor or school.

Experience has shown that attempting to apply the criteria of the Children Act 1989 section 47 (see 1.2.7 Significant Harm) or section 17 (see 1.2.8 Child in Need) at an early stage can sometimes prevent or delay necessary safeguarding, and hamper information sharing. It is often the case that at the point of referral a single agency is not sure about the degree of potential harm to the child. Good communication between agencies at this stage is key to safeguarding the child.

All concerns about children who are suffering or likely to suffer significant harm, and concerns about children who are in need should be passed to the appropriate children’s social care duty team without delay, both verbally and in writing. The process of managing, recording and assessing referrals and other information relating to child abuse should be supervised and audited. For further information see 1.9 Managing Information about Child Abuse.

The referral should contain all the information required by local systems and should include, wherever possible, that in Checklist 9.

The information contained within a referral to children’s social care should support the assessment of the needs of the child. A referral of concern for a child has no threshold and is a subjective assessment intended to raise awareness of the need for a closer inspection of the wider circumstances of the child by another agency. The multi-agency context in which children are safeguarded requires that agencies exchange information about concerns for children. A referral is the earliest point at which information about a concern is communicated to children’s social care and begins the process of deciding whether action will be taken and by whom. The police should refer to children’s social care details of any child that is suffering or may be at risk of suffering significant harm, and details of any child in need who may benefit from services offered by children’s social care.

Any referral by the police to children’s social care should be made as soon as is practicable, by telephone in the first instance. A record should be made of the time, date, content of the communication and to whom it was made. The referral should be followed up in writing within forty-eight hours. In addition to legislation, officers should comply with relevant national and local guidance and protocols for the exchange of information between agencies, including any safeguards relating to confidential handling of personal information.
3.2 STRATEGY DISCUSSIONS AND MEETINGS

A strategy discussion between the police, children’s social care and other agencies, when relevant, should be held if there is reasonable cause to suggest that a child is suffering or likely to suffer significant harm, or is a child in need. The purpose of the strategy discussion is to agree whether to initiate enquiries under section 47 of the Children Act 1989, and whether to commence a core assessment and assist in the coordination of the criminal investigation and children’s social care action. The initial assessment is the lead responsibility of children’s social care and is conducted using *Department of Health (2000) Framework for the Assessment of Children in Need and their Families*. For further details see *Working Together* and *HM Government (2006) What to do if you’re worried a child is being abused*.

Strategy discussions should provide information for individual agencies to make decisions. However, the decision about conducting criminal investigations is the responsibility of the police (see *3.1.1 External Referrals to the Police and Criminal Investigations*). Similarly, children’s social care is responsible for decisions about actions which are within their power. This division of power and responsibility is a key element of the system to protect children.

The strategy discussion should be viewed as a process rather than a single meeting or discussion. It may be necessary to reconvene the discussion several times to review progress and evaluate outcomes. During a strategy discussion, information should be shared between agencies and a plan formulated to:

- Share other available information.
- Decide whether a core assessment under section 47 of the Children Act 1989 should be initiated or continued if it has already begun.
- Initiate a section 47 enquiry, where it is decided that there are grounds, including decisions about
  - how the core assessment under section 47 will be carried out
  - what further information is required about the child and family and how it should be obtained and recorded
  - who will carry out what actions, by when and for what purpose.
- Agree the action that is required immediately and in the short-term to safeguard the child and/or provide interim services and support. Where a child is in hospital, this should include how to secure the safe discharge of the child.
- Agree the conduct and timing of any criminal investigation.
- Determine what information about the strategy discussion will be shared with the family, unless such information sharing may place a child at risk of harm or jeopardise a criminal investigation.
- Determine if legal action is required.
- Coordinate a multi-agency media strategy, if relevant, (see *4.15 Media Strategy*).
During the strategy discussion, police officers should discuss the basis of any criminal investigation and any relevant processes that other agencies might need to know about, including the timing and methods of evidence gathering. For example, an officer should identify any actions by agencies which may jeopardise the criminal investigation, such as sharing particular information with a suspected offender. In some criminal investigations it may also be useful to involve other agencies in planning an interview with a child. For further information see *Achieving Best Evidence* and *4.7.1 Interviews of Children and Special Measures*. In a criminal investigation, an interview with the child should not be unnecessarily delayed solely for the purposes of a strategy discussion, unless it is in the best interests of the child. There may be exceptional circumstances where information about covert tactics may need to be shared with other agencies (see *4.8.3 Covert Methods*).

Not all strategy discussions require a face-to-face meeting. A telephone call or series of calls may suffice initially. However, in some types of abuse or neglect a meeting is likely to be the most productive way of discussing the child’s welfare and planning future action. Every effort should be made to ensure that key professionals take part in the strategy discussion process. For example, to enable particular medical staff to attend, it may be useful to hold a meeting at a hospital or primary care surgery. The CAIU should be represented by a supervisor, who should agree to the timing and location of the discussion and be prepared to make representations to ensure attendance by key partners.

All strategy discussions (including related telephone conversations) should have detailed minutes, which include a clear and auditable process, to ensure that all participants are aware of any risks, actions agreed for managing risks and decisions made. A record of the discussion (sometimes referred to as the strategy discussion record) should be circulated to those present. All those involved should be clear about the responsibility for taking and circulating the minutes along with timescales for these actions to be completed. Each force should have a local policy to respond to situations where there are disagreements between agencies. The policy should include clear instructions about escalation and associated timeframes.

### 3.3 Child Protection Conferences

Any strategy discussion may recommend proceeding to a child protection conference. A child protection conference should be convened if there are concerns about a child and he or she is judged to be at continuing risk of significant harm. Local arrangements for police attendance at child protection conferences will differ, eg, some forces have specific roles for those contributing information to conferences. All forces should ensure that officers and staff attending conferences are appropriately skilled and trained to provide adequate information, make appropriate decisions and, if necessary, challenge the information and decisions of other agencies.
3.3.1 INITIAL CHILD PROTECTION CONFERENCE

Following section 47 enquiries, the initial child protection conference brings together family members, the child, where appropriate, and those agencies most involved with the child and family. The purpose of the initial child protection conference is to:

- Bring together and analyse in a multi-agency setting the information that has been obtained about the child’s health, development and functioning, and the parents’ or carers’ capacity to ensure the child’s safety and promote the child’s health and development;
- Make judgements about whether a child is at continuing risk of significant harm, and whether a child protection plan should be put in place;
- Decide what future action is needed to safeguard the child and promote his or her welfare, to describe how that action will be implemented and with what intended outcomes.

Where a criminal investigation has been undertaken or is ongoing, CAIU staff should attend all initial conferences. They should inform the CAIU supervisor that the conference is taking place and apprise them of the outcomes. In those exceptional circumstances where an officer is unable to attend, the CAIU supervisor should be informed of the reason for non-attendance. This should be documented and a report of police actions, progress of the investigation and other relevant information sent to the chair of the conference, in accordance with LSCB procedures.

Children’s social care should coordinate a core group which will develop a child protection plan. The wider conference has a key role in identifying the issues that need to be addressed in the core group.

The timing of an initial child protection conference will depend on the urgency of the case and on the time needed to obtain relevant information about the child and family. According to Working Together, a conference should, however, be held within fifteen working days of the date of the strategy discussion (or the last one, if more than one is held).

Involving the child and family members

The involvement of family members should be planned carefully. It may not always be possible to involve all family members at all times in the conference, eg, if one parent is the alleged abuser, if there is a high level of conflict between family members or if there is a history of domestic abuse. Adults and any children who wish to make representations to the conference may not wish to speak in front of one another. There may be exceptional circumstances where it is necessary to exclude one or more family members from the whole or part of a conference.

The conference is primarily about the child and, although the presence of the family is normally welcome, those agencies represented should be able to share information in a safe and non-threatening environment. LSCB procedures should set out criteria for excluding a parent or carer, including the evidence required to exclude them.
A representative of the police who has information to share at a conference where a suspect may be present should contact the conference chair prior to the conference and request that the information exchange be confidential within the meeting. The chair can exclude a suspect who is involved in any aspect of the conference for this part of the proceedings. If this is not possible, the officer should submit the information in writing to the chair and it should be recorded that the information could not be shared with all agencies at the conference.

The decision to exclude a parent or carer from the child protection conference rests with the chair of the conference, acting within LSCB procedures. If the parents are excluded or are unable or unwilling to attend a child protection conference, they should be given the opportunity to communicate their views to the conference by another means.

**Information for the conference**

Children’s social care should provide a written report which summarises the information obtained in the course of the initial assessment and section 47 enquiries. This report should be guided by the process set out in *Department of Health (2000) Framework for the Assessment of Children in Need and their Families*. It is unlikely that a core assessment will have been completed in time for the conference, such assessments are expected to require thirty-five working days for completion, see *Working Together*.

Other agency representatives attending the conference should bring details of their involvement with the child and family. This includes information concerning their knowledge of the child’s health and development, and the capacity of the parents or carers to safeguard the child and promote the child’s health and development. Contributors, including the police, should provide a written report in advance which should be made available to those attending.

All those providing information should take care to distinguish between fact, observation, allegation and opinion. Those representing the police should ensure that all databases are searched again immediately prior to the conference in order to update the conference with any new information, eg, details of recent police visits to the family (see 1.9.6 *Information and Intelligence Checks*).

**Actions and decisions for the conference**

The conference should consider whether a child should be subject to a child protection plan and, if not, whether any other help is needed to promote his or her health and development.

It is the responsibility of the conference to consider and make recommendations on how agencies and the family should work together to ensure that the child will be safeguarded from harm in the future. This should enable agencies and the family to understand exactly what is expected of them and what they can expect of others.

The conference should agree a date for the first child protection review conference and under what circumstances it might be necessary to convene the conference before that date.
3.3.2 CHILD PROTECTION REVIEW CONFERENCE

According to Working Together, the first child protection review conference should be held within three months of the initial child protection conference. Further reviews should be held at intervals of not more than six months for as long as the child is the subject of a child protection plan. This is to ensure that momentum is maintained in the process of safeguarding the registered child. The police should be represented at all review conferences at which the decision may be taken that a child is no longer in need of a child protection plan. The purpose of the child protection review conference is to discuss the safety, health and development of the child against criteria set out in the child protection plan. The review requires as much preparation, commitment and management as the initial child protection conference.

Every review must consider whether the child continues to be at risk of significant harm and needs to be safeguarded by the creation of a formal child protection plan.

The police should check all databases immediately prior to a review conference, and a written report should be prepared and supplied to the conference chair. This report should update the conference about any new information and should include views relating to the need for a continued child protection plan for the child. If in exceptional circumstances the police are unable to attend the meeting, they should submit a report to update the conference about any changes of circumstances or new information that has come to light in the interim period. In criminal cases all documents which are records of meetings or discussions should be retained as unused material pending potential disclosure.

3.3.3 RISK ASSESSMENTS FOR CONFERENCES AND MEETINGS

Prior to attending any conference (whether an initial or review), PNC and other database checks should have been completed (see also 1.9.6 Information and Intelligence Checks). These checks may reveal that the parent or carer who is attending the conference is wanted, is a suspect or is on bail. If the parent or carer is wanted then an arrest strategy should be considered (see 2.11 Arrest Strategy). The parent or carer may be suspected of offences that relate to the matter for which the conference has been called, but has not yet been arrested or interviewed by the police. Where the suspect may impart evidence when discussing issues at the conference, the officer should give a caution and record the comments made. See overleaf Meeting a suspect while on bail for further information.

Where a criminal investigation is ongoing, the police representative at the conference should request that information with regard to the investigation is confidential. The chair of the conference should then manage the information exchange by excluding the parents from that part of the conference. If this is not complied with the officer may not be able to fully share all of the information available. A written record of police information should be handed to the chair. The overriding consideration is the welfare of the child, and any activity must be carried out with minimum disruption to the conduct of the conference.
Meeting a suspect while on bail

Interviews or meetings between an officer and a suspect known to be on bail or a suspect who is the subject of criminal proceedings under consideration may only take place in accordance with force policy. The attendance at a child protection conference of a suspect who is on bail should be raised with the chair prior to the conference. A child protection conference is not an interview and the discussion that takes place is for the benefit of the child’s welfare. Information sharing also takes place within the overarching principles of the Every Child Matters framework (see 1.1 Duty To Safeguard Children) and the Crime and Disorder Act 1998.

Officers attending such a conference should consider their responsibilities as police officers. If a suspect makes any admission of a criminal offence during the conference, considerations should be given to the ongoing criminal investigation and the requirement for suspects to be cautioned and their comments recorded. Local CPS advice should be sought where necessary.

3.4 MULTI-AGENCY INFORMATION SHARING, INTELLIGENCE GATHERING AND DECISION MAKING

Safeguarding children requires agencies and others to share information. It is often only when information from a number of sources is shared and is then put together that it becomes clear that a child is at risk of harm or is suffering harm. Organisational boundaries and concerns about sharing information must never put the safety of a child at risk. Working Together and HM Government (2006) What to do if you’re worried a child is being abused summarise the relevant legislation and the principles behind information sharing between agencies.

Detailed practical guidance on information sharing is provided in HM Government (2008) Information Sharing: Guidance for practitioners and managers, which also has linked to it HM Government (2008) Information Sharing: Pocket Guide. All staff should be familiar with the seven golden rules of information sharing, which include the legal requirement for sharing to be necessary, proportionate, relevant, accurate, timely and secure. Forces should set out their policy on information sharing and make that accessible to those with whom the police have contact. Decisions about information sharing should be made on a case-by-case basis. Forces should draw up local protocols to address any professional disagreements about information sharing and other matters within timeframes that facilitate child protection and include clear instructions about escalation.

In addition to local police and multi-agency protocols, any disclosure of personal information to others should have regard to Common Law and legislation including the Data Protection Act 1998 and the Human Rights Act 1998. In child protection there may be an obligation to share information, even if the information relates to doubts and suspicions. For example, although Article 8 of the ECHR safeguards the right to respect for private and family life, there are qualifications, as set out in Article 8(2). Articles 2 and 3 create positive obligations to protect children and others at risk of harm (see 1.1 Duty To Safeguard Children). The positive obligations to protect a person’s human rights mean that a failure to share appropriate information which could prevent harm can lead to a breach of the Human Rights Act 1998, as can an unjustified disclosure. For further information see ACPO (2006) Guidance on the Management of Police Information.
Much of the information held by the Police Service and health services concerning individuals will be regarded as sensitive personal information under the DPA 1998. *HM Government (2008) Information Sharing: Guidance for practitioners and managers* contains detailed information about the main justifications for sharing sensitive personal information. These include: to protect the vital interests of an individual or others where consent cannot be given, for medical purposes or the administration of justice. Information about situations when information should be shared with individuals about a suspect or an offender (eg, when children may be at risk) are dealt with in *Ministry of Justice (2009) MAPPA Guidance, Version 3.0* and related national guidance.

For information about covert methods and issues relating to information sharing, see 4.8.3 Covert Methods.

### 3.4.1 Obtaining Information for a Criminal Investigation

At various stages of a police investigation, information may be requested from other agencies. The police need to be proactive and persistent in seeking out the information from other agencies which will enable them to carry out thorough and effective criminal investigations. It is also important that partner agencies provide information to enable the police to do this. Enquiries with other agencies should take place in accordance with *Working Together, ACPO (2006) Guidance on the Management of Police Information* and any other national and local multi-agency protocols and SLAs. Applications for access to records held on a child or family by children’s social care should be made in accordance with local protocols. Any request for information should be sufficiently detailed to allow children’s social care or another agency to determine whether disclosure of the information is necessary and in the best interests of the child, and is relevant and proportionate to the matter under investigation. Checks of records relating to children who are subject to child protection plans, and checks of databases held by other areas where a child has lived should be made in accordance with local protocols. For information relating to complex child abuse investigations, see 6.6 File Examinations and Retention.

### 3.4.2 Sharing Information in the Child Protection Process

Relevant information should be shared with other agencies if the purpose is to protect a child. The assessment of what is relevant is subjective and varies according to circumstances. Police officers may need to share information obtained during an investigation during strategy discussions, child protection conferences and at other points in the child protection process so that decisions can be made about the child’s welfare. In many cases it is only when information from a range of sources is put together that a child can be seen to be in need or at risk of harm. Depending on local arrangements (eg, whether there is a central referral unit) one of the functions of the CAIU supervisor is to prioritise and assess the police information provided to partner agencies (see 1.9 Managing Information about Child Abuse). Any relevant information should be shared to enable child welfare concerns to be addressed. If a criminal prosecution is pending, the CPS should be consulted about any proposed disclosure of information such as witness statements and other evidence.
3.4.3 SHARING INFORMATION RELATING TO PEOPLE WORKING WITH CHILDREN

An employment discipline hearing may run concurrently with a criminal investigation and information held by the police may be requested to ensure the future protection of children. Where it is proposed to supply copies of any statements made by non-police witnesses during the course of an investigation, the prior written consent of the maker of the statement must be obtained (or a person with parental responsibility in the case of children). The CPS should be consulted if a prosecution is pending.

For details about the Independent Safeguarding Authority (ISA), which has been created to help prevent unsuitable people from working with children and vulnerable adults, see http://www.isa-gov.org.uk

3.4.4 SHARING INFORMATION IN CASES OF URGENCY

The police are responsible for carrying out information checks in emergencies, eg, when a child needs to be placed with carers who have not been previously checked. When such an occasion arises either during or outside working hours, information which is relevant to safeguarding children should be shared. A failure to disclose relevant information to colleagues in other agencies may put children at risk of harm.

If enquirers need further, non-urgent information, they must apply through the appropriate channels with the Criminal Records Bureau (CRB). Forces should have systems in place for responding to requests for information falling outside the remit of the CRB, where a concern for a child exists.

If it is necessary for a child under police protection (see 2.12 Police Protection) to stay with relatives or other carers, the relatives’ or carers’ identity should be verified, details of residence in any other police force areas obtained and basic checks made of the proposed carers and all residents at their address. The same checks may also be requested of the police by children’s social care in respect of temporary carers. These checks should include PNC, INI, ICS (in respect of any other children in the care of the proposed carer), local intelligence systems and ViSOR (see 1.9.6 Information and Intelligence Checks). Similar checks should be conducted within every force area where the proposed carer has resided. Forces where the proposed carer has lived should respond to requests from other forces. Any other adult living in the residence should also be checked. Such checks should be made even when the alternative carer is one nominated by the usual parent or carer.

A record should be made for future reference and auditing processes, and should include the following information:

- Details of those making the request, the circumstances in which it was made and the reason the information is needed;
- Details of all sources checked against (see 1.9.6 Information and Intelligence Checks);
- Results of all checks;
- Details of the information disclosed;
- Details of how the provisions of the HRA and related legislation were complied with.
All police forces should have systems in place to meet these obligations. Children’s social care should also make checks of proposed carers and residents against records held by the local authority in any areas that they have resided. The purpose of such a check is to establish the individual’s suitability to have substantial, unsupervised access to the child. Information provided should be relevant, necessary and proportionate to the enquiry.

The police force should consider agreeing a protocol with children’s social care, to determine the use and scope in cases of urgency. The protocol should include the following issues:

- Circumstances in which checks will be made;
- Arrangements for identity and address verification, by whom, and how this should be undertaken;
- Need to obtain details of all previous addresses occupied by the proposed carer and who will obtain these details;
- Extent of checks by the police in the host and other relevant forces;
- Extent of children’s social care checks in the host and other relevant children’s social care areas;
- Verification of the proposed residence as suitable for the child(ren) and who will undertake this;
- How information will be shared prior to any decision being taken on the suitability of the carer;
- Details of action to be taken should any inconsistency or concern arise as a result of checks.

### 3.4.5 SHARING INFORMATION IN FAMILY PROCEEDINGS

Evidence gathered within a criminal investigation should also be considered as evidence which is appropriate for family proceedings. This allows the court to make informed assessments of risk. If there are current or pending criminal proceedings, the CPS should be involved in any decision to pass information on to the Family Court, as this might have implications for the criminal case. This requires that police forces maintain information-sharing protocols and structures for sharing information with the Children and Family Court Advisory Support Service (CAFCASS). Protocols for use within and outside of the Metropolitan area can be found at [http://www.dca.gov.uk/family/famfr7.htm](http://www.dca.gov.uk/family/famfr7.htm). Further guidance can be found in *ACPO/CAFCASS CYMRU and CAFCASS (forthcoming)*.

*Law Society (2007) Related Family and Criminal Proceedings – A Good Practice Guide* provides route maps for criminal, public and private law family proceedings and Family Law Act 1996 proceedings, together with information-sharing protocols. The purpose of the Guide is to assist criminal lawyers who are unfamiliar with the family justice system and vice versa to understand what it is their colleagues are required to do and to help them work together in concurrent proceedings, with a view to better outcomes for children.

Information might be sought by agencies involved in family proceedings in relation to the victim, suspect, children and other previous partners or family members. The police may be requested to assist when a finding of fact is needed in a child contact or other hearing. In these circumstances officers should:
• Inform and consult the CPS as appropriate;
• Inform parents or carers and victims of child abuse that records of incidents (including recordings of emergency calls or other calls to the police, interviews, withdrawal statements, photographs and forensic medical reports) may provide evidence in civil proceedings even where suspects are not charged or prosecuted with a criminal offence;
• Provide police reports detailing incidents that have come to police attention, particularly information relating to any children normally resident at the address and any observations made by officers responsible for the first response;
• Provide first accounts made by the officer attending the incident, including that officer’s view of the seriousness and the effect of the incident on the victim and any other children.

In relation to documents that have not been filed with the Family Court, the sample protocol between the CPS, police and local authorities in Appendix 2 of Law Society (2007) Related Family and Criminal Proceedings: A Good Practice Guide makes provisions for applications by the police or CPS for access to the local authorities’ files. Documents filed in family proceedings, however, are confidential and may only be disclosed to certain persons in accordance with the Family Proceedings Rules 1991 (FPR), or with the court’s permission. Rule 11.5 of the FPR allows for a party in family proceedings to give to a police officer the text or summary of whole or part of a judgment given in the proceedings. The reason for passing on this information must be for the purposes of a criminal investigation. Similarly, a party or a person lawfully in receipt of information may give a member of the CPS the same information in order for the CPS to discharge its functions under any enactment.

In addition to judgments, there may also be information contained in Family Court case papers that would be relevant to the criminal case such as: previous consistent or inconsistent statements of witnesses or defendants, evidence of similar incidents, material for bad character applications and medical reports. Disclosure and use of such documents is restricted.

The investigation and prosecution of offences against a child will usually form part of the protection of children. It is, therefore, permissible to disclose to an officer acting in a child protection function (eg, CAIU officers), documents relating to proceedings in addition to information contained within them. The officer or professional person receiving the communication is not, however, entitled to make use of the documents (as opposed to the information contained within them) without the permission of the Family Court. CPS (2008) Safeguarding Children: Guidance on Children as Victims and Witnesses provides further information on this issue.

Where copies of orders and judgments have not been acquired during an investigation, the CPS can consider whether they need to make an application to the judge in the proceedings for leave to obtain and use any other documents or information. In practical terms, this is likely to involve the police liaising with the local authority in the first instance. Where the application is unopposed, there is scope for it to be considered as a paper application, thus avoiding the time and costs of a court hearing. In care cases, the police often ask the local authority to make an application on their behalf. The local authority can seek a directions hearing at which it can provide the court with all relevant information.
In many cases, however, it will be preferable for the police to make their own application as they will know what is wanted and why it is relevant to the prosecution’s purposes. Additionally, the local authority is not a branch of the police and it is not helpful in the family proceedings for the respondent parents to perceive them as such.

Protection against self-incrimination

Section 98(1) of the Children Act 1989 provides that in proceedings under part IV or V of the Act (e.g., care, supervision, EPOs) no person should be excused from giving evidence on any matter or answering any question put to him or her in the course of giving evidence, on the grounds that doing so might incriminate the person or the person’s spouse or civil partner of an offence. Section 98(2) provides that a statement or admission made in such proceedings shall not be admissible in evidence against the person making it, or the person’s spouse or civil partner, in proceedings for offences other than perjury. According to Re D and M (Disclosure: Private Law) [2002] EWHC 2820 (fam), section 98(2) does not apply to admissions made in Private Law Proceedings. The protection offered by section 98 (2) is just one of the factors to be considered by the Family Court when deciding whether to permit disclosure of documents to the police or prosecution.

The prohibition in section 98(2) refers to court proceedings and does not extend to a police investigation. The police may, therefore, put matters to a suspect in an interview under caution. If accepted, the admissions then become admissible in the criminal proceedings in the usual way – subject to the usual provisions of sections 76 and 78 PACE.

Disclosure of criminal material to the Family Courts

The police and CPS often receive requests from parties in family proceedings (particularly care cases) for disclosure of material generated during the police investigation. Neither blanket approval nor blanket denial would be appropriate responses. The merits and risks of disclosure should be considered in respect of each item. Where criminal proceedings have already started, the decision should be made by prosecutors, in consultation with the police. Where criminal proceedings have not yet started, the police will usually consult the CPS in any event. An ACPO Police/Family Disclosure Protocol in Appendix 2 of Law Society (2007) Related Family and Criminal Proceedings: A Good Practice Guide sets out mechanisms for the appropriate disclosure of police information in family proceedings courts, to assist the courts in the determination of any factual or welfare issue within the family proceedings.

Prosecutors have a duty to protect the integrity of the prosecution process and to ensure, as far as they are able, that a fair trial takes place. There is a risk that a fair trial may be prejudiced by disclosure to parties in Family Court proceedings of material such as statements, exhibits or police records generated during the police investigation, in relation to cases where criminal proceedings have not yet concluded, or the decision to start them has not yet been made.
Local authorities and children’s guardians have a duty to investigate a child’s background and to provide the court with all relevant information. Material generated by a police investigation is likely to contain relevant information. CPS policy is that prosecutors should try to provide assistance to local authorities and children’s guardians seeking to discharge their statutory responsibilities. Prosecutors make decisions of this kind taking into account a number of considerations, including the nature and degree of risk of prejudice to a fair trial in disclosing particular items. Where possible, the CPS will reach agreement with the local authority or parties’ solicitors as to the extent and timing of any disclosure. This should help to avoid a court hearing. If agreement cannot be reached, the applicant party should be informed in writing, with reasons, why no or only partial disclosure can take place. The letter is likely to be placed before the Family Court judge and, therefore, all reasons should be fully articulated.

Joint case management direction hearings

Joint case management direction hearings may be considered useful where there are concurrent criminal and family proceedings and issues arise as to disclosure of information or mutually convenient timetabling.

3.5 COURT ORDERS RELATING TO SPECIFIC CHILDREN

Children’s social care and others are empowered to obtain a number of court orders to support the safeguarding of children. This subsection describes court orders available relating to specific children. ACPO (2007) Guidance on Protecting the Public: Managing Sexual Offenders and Violent Offenders describes orders available which relate to specific suspects or offenders. Police officers should understand the meaning of each order for the purposes of engaging in multi-agency work. They may also be required to enforce a particular order.

3.5.1 CARE ORDER

A local authority or other authorised body (but not the police) may apply for a care order, which places the child in the care of the local authority. When court proceedings to decide upon a care order are adjourned, the court may make an interim care order. This specifies the period for which it is in force but may not last longer than eight weeks. The court may make an exclusion requirement and may attach a power for the police to arrest any person suspected of being in breach of it. Officers should check the terms and timescale of any power of arrest.

3.5.2 CONTACT ORDER

This order requires the person with whom the child lives or is to live, to allow the child to visit or to stay with the person named in the order, or otherwise allow for that person and the child to have contact with each other. Normally such orders expire when the child reaches the age of 16 years.
3.5.3 CHILD ASSESSMENT ORDER

The local authority and other authorised person (but not the police) may apply for a child assessment order. This directs any person who is in a position to produce the child to comply with the directions in the order. This ensures that an assessment of the state of the child’s health and development or the way in which he or she has been treated takes place, in order to determine whether the child is suffering or is likely to suffer significant harm. Children who are of sufficient understanding to make an informed decision are entitled to refuse to undergo any assessment.

3.5.4 EMERGENCY PROTECTION ORDER

Under section 44(4) of the Children Act 1989, an emergency protection order (EPO) authorises the removal of a child to accommodation provided by, or on behalf of, the applicant, and the prevention of the child’s removal from any hospital or other place. The applicant has parental responsibility for the child for the duration of the order. The order has effect for a maximum of eight days (or for a shorter period if the court requires). Anyone, including police officers, may apply for an EPO; an application should be made in preference to using police protection powers wherever possible (see 2.12 Police Protection). Before the court grants the application, it must be satisfied that there is reasonable cause to believe that the child is likely to suffer significant harm if not removed to accommodation provided by the applicant, or if the child does not remain in the place where he or she is being accommodated. Under section 44(1)(b) of the Children Act 1989, an EPO may also be made following an application by the local authority if enquiries under section 47 of the Children Act 1989 are being frustrated by access to the child being unreasonably refused to a person authorised to seek access, and the applicant has reasonable cause to believe that access is needed as a matter of urgency. This also applies following an application by an authorised person making enquiries with respect to the child’s welfare. Where a police officer considers making such an application, it should be made following consultation with children’s social care.

3.5.5 EXCLUSION ORDER OR EXCLUSION REQUIREMENT

The care order and EPO may, subject to conditions, specify certain people who should be excluded from living where the child is resident. This is known as an exclusion order or exclusion requirement. The court may attach a power for the police to arrest anyone suspected to be in breach of an exclusion requirement.

3.5.6 PROHIBITED STEPS ORDER

This order prohibits certain steps being taken without the consent of the court. These steps could ordinarily be taken by a parent in meeting parental responsibilities to the child. The order applies to any person, not just the parents. Normally such orders expire when the child reaches the age of 16 years. Such orders are useful in preventing offences such as planned FGM by a parent or carer (see 1.4.12 Female Genital Mutilation).
3.5.7 RECOVERY ORDER

This order authorises the recovery of a child in a range of circumstances, including where a child is in police protection (see 2.12 Police Protection). Section 50 of the Children Act 1989 states that: where it appears to the court that there is reason to believe that a child has been unlawfully taken away or kept away from the responsible person, has run away or is staying away from that person or is missing, the court may make a recovery order. This operates as a direction to any person who is in a position to do so to produce the child on request to any authorised person and authorises the removal of the child by any authorised person. It requires any person who has information as to the child’s whereabouts to disclose that information, if asked to do so, to a police officer or an officer of the court. It also authorises a police officer to enter any premises specified in the order and search for the child, using reasonable force if necessary. The court may make a recovery order on the application of any person who has parental responsibility for the child under a care order or EPO, or, where the child is in police protection, the designated officer.

3.5.8 RESIDENCE ORDER

The court may make an order which determines the place of residence of a child and with whom the child is to live. Such orders usually expire when the child becomes 16 years old.

3.5.9 SPECIFIC ISSUE ORDER

This order gives directions for determining a specific question which has arisen or which may arise in connection with any aspect of parental responsibility for a child. In effect, the order attempts to reduce the number of occasions when the court needs to be referred to by anticipating and setting out the means by which a particular question may be answered. These orders usually expire when the child becomes 16 years old. They are also useful in preventing offences such as planned FGM by a parent or carer (see 1.4.12 Female Genital Mutilation).

3.5.10 SUPERVISION ORDER

A local authority or other authorised person (but not the police) may apply for a supervision order, which places the child under the supervision of a local authority. Where court proceedings to decide upon such an order are adjourned, the court may make an interim supervision order which will specify the period for which it is in force.

3.5.11 UNDERTAKINGS

Where the court has power to make an exclusion requirement to an EPO, it may accept an undertaking from the relevant person. There is no power of arrest in respect of any breach of the undertaking, but it can be enforced as if it were an order of the court.
3.6 SERIOUS CASE REVIEWS AND INDIVIDUAL MANAGEMENT REVIEWS

This guidance is supplementary to that in Working Together, which provides guidance on the setting up, timing, conduct and management of serious case reviews (SCRs). Other national guidance relating to review processes will be relevant in some cases, eg, when a child is involved in a domestic homicide review or a review covered by Ministry of Justice (2009) MAPPA Guidance, Version 3.0.

3.6.1 SERIOUS CASE REVIEWS

ACPO Leads, Serious Case Review Panel (SCRP) representatives and authors of Individual Management Reviews (IMRs) are expected to familiarise themselves with this guidance before discharge of any SCR roles. The circumstances when an SCR should be held are set out in detail in Working Together. It is most common for the SCR to be commissioned when a child dies and abuse or neglect is known or suspected to be a factor in the death.

3.6.2 PARALLEL PROCEEDINGS

Working Together provides guidance on the timing of SCRs in cases where criminal proceedings are also being contemplated. In practice, the SCR may take place during multiple parallel proceedings, such as care proceedings in the Family Court, an inquest and a criminal investigation. Ensuring that the statutory functions of the SCR, in terms of learning the lessons, are carried out in such circumstances requires careful consideration and timing. The involvement of the SIO is essential in order that his or her representations are factored into the terms of reference of the SCR, so that the potential for conflict arising in different proceedings can be recognised and minimised. If a criminal investigation is being undertaken, the issue of disclosure to other parallel proceedings should be taken in consultation with the CPS reviewing lawyer. As in all contexts, the best interests of any child are a central consideration and the identification of urgent safeguarding issues cannot be deferred as a consequence of any other matters.

3.6.3 SERIOUS CASE REVIEW REPRESENTATION

Each force should have a nominated SCR representative (normally a detective chief inspector or detective superintendent from the CAIU or similar) who will sit on the LSCB SCRP. This representative should have experience of safeguarding children and be familiar with this guidance and:

- Working Together, particularly Chapter 8;
- LSCB procedures;
- Ofsted grade descriptors;
The SCR representative should contribute to developing the terms of reference and ensure that appropriate consideration is given to the management of parallel proceedings (see 3.6.2 Parallel Proceedings). This officer has a dual responsibility. They will participate in the SCRP as a panel member and ensure that the police IMR meet the necessary standards. The representative should ensure that they do not appear to deny, minimise or excuse shortcomings identified by the IMR. Their overarching responsibility is to identify lessons that can be learned to improve practice.

The SCR representative should support the IMR author in their task, taking care not to compromise independence or exert improper influence. It is the responsibility of this representative to ensure that any urgent safeguarding lessons are promptly implemented. Such lessons may become known prior to the commencement of the IMR or may emerge during the writing of the IMR. In either case this representative must ensure that the police force promptly implements any measures necessary to improve safeguarding practice.

### 3.6.4 INDIVIDUAL MANAGEMENT REVIEW AUTHORS

The Ofsted grade descriptors are clear that some element of independence is preferred for IMR authors. This independence is not further defined. Some forces use dedicated IMR authors and so address the issue of independence since the author is outside of the line management of those parties whose practice is being examined and commented upon. In some instances, particularly high profile cases where evidence of independence is essential, forces may choose to appoint an independent IMR author (eg, a self-employed consultant) or seek assistance from another force area.

In all instances the IMR author needs to demonstrate some training in the IMR author role and must be familiar with the documents detailed in (3.6.3 Serious Case Review Representation). While the standard of police IMRs is generally good, feedback from Ofsted has suggested that, typically, police IMRs are less successful at:

- Getting underneath the analysis – if, for example, staffing resilience was an issue, why was that the case, and what was done to address it?
- Taking a ‘child centred’ perspective – how did the service look from the child’s perspective?
- Addressing racial, cultural and linguistic dimensions.

IMR authors should be supported in their role. This may require dedicated time to conduct their interviews with key staff and complete their report. It may also require the provision of additional support, eg, a researcher or analyst to complete the chronology, or dedicated administrative support for the writing of the IMR. They should also be provided with an example of an IMR which has been graded as good or outstanding by Ofsted and has been anonymised. The original IMR author and the SCRP chair also need to consent to its use.

### 3.6.5 POLICE DISCIPLINE

IMRs are not misconduct investigations. *HC 330 (2009) The Protection of Children in England: A Progress Report* is clear that in order to identify the learning points, SCRs should be conducted in a spirit of openness and honesty. Despite this, it is unavoidable that, on occasions, the IMR will identify shortcomings in practice that may amount to breaches of the Police (Conduct) Regulations 2008. Where such a breach is identified, liaison with the professional standards department (PSD) will ensure that the matter is properly recorded and dealt with in accordance with local and national arrangements. IMRs should continue to be seen as distinct from a misconduct investigation so that the identification of the lessons learned is not compromised by association with the Conduct Regulations.
3.6.6 INDIVIDUAL MANAGEMENT REVIEWS AND ASSOCIATED PLANS

IMRs should adhere to the outline format documented in *Working Together*, Chapter 8. They should also be submitted in accordance with any timescales set by the SCRP.

It is the responsibility of the ACPO lead for safeguarding children to receive, read and sign off the IMR (see 1.5.1 ACPO Lead for Safeguarding Children). At this stage the ACPO lead should review the IMR against the Ofsted grade descriptors and signal agreement with the IMR recommendations. This process will promote leadership and accountability at the most senior level, as advocated in *HC 330 (2009) The Protection of Children in England: A Progress Report*.

3.6.7 SERIOUS CASE REVIEW ACTION PLANS

At the conclusion of the SCRP the force will need to address the recommendations contained within the IMR and any additional recommendations in the Overview Report. It is essential that a formal process is adopted to provide a robust audit trail capable of demonstrating that the recommendations have been accepted and implemented. On the rare occasions when they have not been accepted, a supporting rationale should be included. In order to demonstrate that the force concerned is a learning organisation these recommendations should be embedded in systems, procedures and training, to avoid any further recurrence.

**MANAGEMENT ISSUES**

- Establishing effective multi-agency partnerships at strategic and operational levels which focus on safeguarding and protecting children.
- Establishing systems for the joint monitoring by the police and children’s social care of external referrals, the information provided and the timeliness of referrals.
- Agreeing protocols between the police and other agencies for sharing information relating to concerns for children and the investigation of child abuse.
- Through the LSCB, police participation in joint monitoring of attendance at child protection conferences and reviews.
- Implementing any recommendations for the police arising from SCRs and IMRs.
Section 4
FURTHER INVESTIGATION AND OTHER POLICE ACTION

This section provides guidance for officers carrying out child abuse investigations, including CSIs, arresting officers, investigating officers, custody officers and CAIU staff. It should be read in conjunction with Working Together and ACPO (2005) Practice Advice on Core Investigative Doctrine. In cases of complex child abuse, this should be read in conjunction with Part 2 Investigating Complex Child Abuse. Other ACPO guidance on investigating particular categories of crime may also be relevant, eg, domestic abuse (see ACPO (2008) Guidance on Investigating Domestic Abuse), rape (see ACPO/CPS (2009) Guidance on Investigating and Prosecuting Rape) and stalking and harassment (see ACPO (2009) Practice Advice on Investigating Stalking and Harassment).

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4.1 POLICE RESPONSIBILITY FOR CRIMINAL INVESTIGATION

When an allegation of child abuse comes to the attention of the police, the initial response should always be to investigate (see 2 Initial Police Response to Concern for a Child). Where a decision has been made by the police and children’s social care, in a strategy discussion, that it is in the best interests of the child to carry out a full criminal investigation, the police are responsible for carrying out that investigation (see 3.1.1 External Referrals to the Police and Criminal Investigations and 3.2 Strategy Discussions and Meetings). Children’s social care has lead responsibility for the welfare of the child under the Children Act 1989. There may be less serious cases where, after discussion, it is agreed that the best interests of the child are served by an assessment led by children’s social care, and the police decide not to proceed with a further criminal investigation (see 3.1 External Referrals, Multi-Agency Communication and Decision Making and Criminal Investigations).

Police officers are responsible for conducting the criminal investigation elements in a case of suspected injury or harm to a child, and will be held to account for the quality of that investigation. Robust evidence gathering is key to any investigation and should include information from partner agencies (see 3.4 Multi-Agency Information Sharing, Intelligence Gathering and Decision Making).

It may be appropriate for a social worker to accompany a police officer during some stages of the criminal investigation, such as an evidential interview. In some cases it may also be appropriate for them to conduct the interview. The investigation, however, remains the exclusive responsibility of the police. The decision as to whether to conduct a joint interview and/or joint visit should be determined on the basis of what is in the best interests of the child (see 3.1.2 Children’s Social Care Enquiries and Criminal Investigations by the Police). Enquiries should be undertaken in such a way as to minimise distress to the child and to ensure that families are treated sympathetically and with respect. Distress can be minimised by such measures as limiting the number of occasions that the child has to relate an account of what has happened to him or her, or by reducing the frequency of agency visits to the child’s home.

Investigating officers should consult local LSCB protocols about the conduct of enquiries on children suffering or likely to suffer significant harm (under section 47 of the Children Act 1989) and associated criminal investigations, and the circumstances in which joint enquiries are necessary and/or appropriate (see 1.11.1 Local Safeguarding Children Boards).

Crimes should be recorded in line with Home Office (2009) National Crime Recording Standard. In cases of serious crime against children, supervisors should, from the outset, take an active role in ensuring that a thorough criminal investigation is carried out.
4.2 MANAGING THE INVESTIGATION

A child abuse investigation should be managed and supervised in accordance with national guidance, including ACPO (2005) Practice Advice on Core Investigative Doctrine and 1.6.3 Leadership, Management and Supervision in a Child Abuse Investigation Unit. For an investigation to be effective, it will require the development of the following, as applicable, in accordance with national and local protocols:

- Policy file;
- Disclosure plan;
- Search plan;
- Surveillance plan;
- Victim care plan;
- Witness management plan;
- Forensic management plan;
- Evidence recovery (including digital) strategy;
- Suspect management plan (see also 2.11 Arrest Strategy).

The management of the investigation should be consistent with any plan agreed at the strategy discussion. In cases of crimes against children, supervisory officers should, from the outset, take an active role in ensuring that a thorough investigation is carried out (see 1.6.3 Leadership, Management and Supervision in a Child Abuse Investigation Unit).

4.3 LINES OF ENQUIRY

When concern about the welfare of a child has been expressed, investigating officers should explore the background and history to ascertain whether there is a pattern of abuse against one child or several children, or whether evidence suggests a single incident against one child. Investigations should relate not only to the child about whom concern has been expressed but any other children in the family. Information obtained should be used in any multi-agency child protection responses and any police action, including producing prosecution files. Investigating officers have an obligation to record any material that may be relevant to the investigation. Officers should consider the lines of enquiry in the following checklists, from the outset, and develop them further against gaps in the evidence and use them to prove or disprove critical factors in the case. In all cases, consideration should be given to 1.9.6 Information and Intelligence Checks.

Checklist 10: General Lines of Enquiry

Officers should follow these potential lines of enquiry, as appropriate:

- Suspect identity checks including names used and previous addresses;
- History of previous reports;
- ICS;
- Police intelligence systems;
- Records relating to the child or the suspect held by children’s social care and other agencies;
- Child contact arrangements and disputes, including any court orders;
- Involvement of children’s social care with the family;
- History of the family, e.g., information relating to children who have left home;
- Any circumstances in which a child has lived away from home;
- Structure of the family, including step-family relationships, previous and current partners of the parents or carers, any other children related to the suspect;
Checklist 10: General Lines of Enquiry (continued)

- Details of individuals who have significant contact with the child, particularly unsupervised contact (e.g. babysitter, parent or carer’s partner, lodger);
- History of domestic abuse;
- Existence of civil injunctions or other legal proceedings (e.g. divorce);
- Medical information that may constitute evidence, such as failure to attend medical appointments or developmental checks, or repeated presentation of children with unexplained injuries, obtainable from GPs, health visitors, midwives, hospital emergency care department, dentist and hospital records (including photographs taken);
- Child developmental issues including emotional and behavioural difficulties;
- Evidence of sexual activity by a child including use of contraception, abortion, pregnancy, sexually transmitted diseases, abuse through prostitution or sexual exploitation;
- Evidence of grooming by a suspect including contact with children through working with or applying for jobs with children, paying children for casual work, frequenting places where children congregate, contacting a child through using a mobile phone, internet chat rooms and taking photographs of children;
- Evidence of travel by the suspect for the purposes of abusing children;
- Evidence of the suspect’s access to computers at work and home and use of the internet to abuse children;
- Evidence of previous conduct by a suspect which could provide similar fact evidence;
- Evidence of abuse of animals by the suspect (eg, from the Royal Society for the Prevention of Cruelty to Animals (RSPCA));
- Parenting style including neglect, failure to seek medical care, physical chastisement and verbal, psychological and emotional abuse;
- Evidence of alcohol or substance misuse, or mental ill health of the parent or carer;
- Records by any agency or police force of requests for information by the suspect, eg, PNC records or requests under the Data Protection Act 1998 or the Freedom of Information Act 2000;
- Significant events in a family including accidents, illness, death of a family member;
- Poor presentation and self-care skills within the family;
- Family’s social integration and access to community resources including social support of relatives, neighbours and friends, and more formal networks such as the support of particular agencies;
- Evidence held by other agencies such as healthcare professionals, children’s social care, Probation Service, Prison Service, housing services and youth workers;
- School records including teachers’ notes and any matters coming to the attention of the school nurse, school health service or education welfare officer;
- Any circumstances in which an extra-familial suspect has gained the confidence of the child and/or parents or carers (this may include electronic communications);
- Friends and associates in whom the victim may have confided or who may have witnessed an offence or significant event, or who themselves may have been groomed or subjected to abuse by the same suspect;
- Witnesses to uncharacteristic behaviour by the victim which is linked to abuse such as withdrawal, violence or explicit sexual behaviour;
- Potential witnesses to abuse including neighbours, friends or family.
4.3.1 Lines of Enquiry in Cases of Neglect

In many cases of neglect it may be initially unclear whether any offence has been committed. A search of relevant premises, medical examinations and interviews with suspects, children and witnesses should all be considered to determine the circumstances in which a child is cared for and whether any neglect was wilful (see 1.2.6 Neglect).

Where there are two carers, the possibility of arresting both should be considered. This allows scrutiny of each interview without intervening collusion. If it is not possible to prove which carer was responsible for the neglect, consideration should be given to the possibility that any carers were acting together, for example, where one may have inflicted harm and the other failed to prevent it or failed to seek medical assistance.

Checklist 11: Lines of Enquiry in Cases of Neglect

Officers should follow these potential lines of enquiry, as appropriate, in addition to those in Checklist 10.

• A house search should focus on evidence of the following:
  – hazards such as bare electric wires, unguarded heating appliances, broken windows, damaged or unguarded stairs, needles, broken toilets, animal or human faeces, all of which may render lodging inadequate
  – hazards in the garden or nearby
  – kitchens revealing inadequate or unhygienic provision for food, water, cleaning cloths or household cleaning
  – bathrooms revealing inadequate or unhygienic provision for sewage and cleaning
  – medication or poisons which are accessible to children
  – bedrooms revealing inadequate or unhygienic sleeping arrangements
  – concealed food, locks on the outside of doors, inappropriate electrical appliances and quality of heating
  – weapons or implements that may match marks found on children
  – inadequate storage or inappropriate accessibility of medicines, dangerous drugs, drugs paraphernalia, pornography or sex aids
  – general observations of the home circumstances, dependent on the particular age and needs of the child or children in question, including inadequate play materials or toys;
• Reactions of children when spoken to and the interaction between children and parents or carers;
• Financial means of the suspect, which may assist in proving that neglect was wilful and as potential rebuttal evidence should finance be advanced as part of the defence or in mitigation;
• Medical examination and expert evidence as to the health, condition, physical and mental development of the child, eg, dental examination to prove the condition of a child’s teeth and oral hygiene;
• Statements from neighbours, school teachers and staff from other agencies, which may demonstrate the persistence of neglect such as inadequate clothing, hunger and falling asleep at school;
• Any appeals made by the child to a carer for respite or treatment and their responses to the child;
• Position and relationship of the carer to the child, including their respective ages;
• Whether the carers have been responsible for other children and their experience of caring for children, eg, feeding, nappy changing, sleeping habits and behaviour;
4.3.2 LINES OF ENQUIRY IN CASES OF SUDDEN UNEXPECTED DEATH IN CHILDHOOD

Investigating officers should consider interviewing the carers separately to avoid the possibility of each contaminating the other’s version of events. Where officers are not from the CAIU, they will need to involve the unit at an early stage of the investigation, particularly if there are siblings or other children in the family who may be at risk or may be a useful source of information. In accordance with local policy, the investigating officer should consider briefing an experienced family liaison officer (FLO) and arranging for them to attend the scene. For further information about the investigation of SUDC, see 1.4.24 Sudden Unexpected Death in Childhood, ACPO (2006) Guidelines on Infant Death Investigation (supplement to ACPO (2006) Murder Investigation Manual) and Working Together.
Checklist 12: Lines of Enquiry in Cases of Sudden Unexpected Death in Childhood

The relevant lines of enquiry will depend upon the age of the child, but the minimum information collected during the early stages of the investigation should include details of the following in addition to those in Checklist 10.

- Person(s) who saw the child last and the time;
- Any action taken prior to the arrival of the emergency services and who contacted the emergency services;
- Child’s last feed, including time, food given and by whom, eg, whether a child was breast or bottle fed;
- Who put the child to bed and where they were sleeping, eg, in the same room or bed as the parent or carer or in a cot, the sleeping position of the child;
- Who found the child and who else was in the house at the time;
- Child’s condition when found, eg, their colouring, breathing, level of consciousness;
- Temperature of the room where the child was found and details of clothing or wrapping on the child, eg, whether bedding was tucked in, whether an electric blanket was used, how the room and house were heated;
- Whether an infant intercom was in place;
- Who was with the child in the twenty-four hours before the death;
- Child’s behaviour and health seventy-two hours prior to death;
- Whether parents, carers or other members of the house smoke and whether there are any restrictions on smoking in the house;
- Whether there are signs of alcohol or drug use;
- Details of any previous child deaths or acute life-threatening events in that or the extended family;
- History of child abuse;
- Details of parents’ or carers’ previous relationships where they have had children and significant events in the lives of the children;
- Details of the child’s birth, such as method of delivery, whether they were born prematurely and the birth weight, details of any special treatment required for the child and whether the child was discharged from hospital with their mother;
- Details of the child’s health (and that of any other siblings) since birth, eg, whether they have seen a doctor or been admitted to a hospital or clinic or received medical checks, including dates of appointments, history of injections and any details of unsuitable feeding;
- Details of advice received by parents from healthcare professionals with regard to prevention of SUDC;
- Contents of the child health record detailing medical checks, examinations and development which is given to every parent and is also known as the Red Book;
- Details of family members such as siblings and foster children, including history of illness and standards of care given by the parents;
- Any records of the family on PNC, INI, force intelligence systems, crime recording systems, command and control records, domestic abuse logs and ICS (see 1.9.6 Information and Intelligence Checks);
- Any records of the children, parents or carers held by children’s social care or other agency.
4.3.3 LINES OF ENQUIRY IN CASES INVOLVING CHILD ABUSE IMAGES

In some cases, an investigation concerning child abuse images will begin with the allocation of an intelligence package generated by CEOP or the force HTCU, which can provide further advice for such investigations. The level of detail in each package will vary but is likely to include the following information, if available and relevant:

- Suspect’s personal details, such as name, date of birth, address, marital status, parental status, employment status;
- Summary of the circumstances of his or her discovery;
- Summary of the suspect’s online behaviour leading to the suspicion of a criminal offence;
- IP address and ISP;
- Screen names and nicknames attributed to the suspect;
- Payment provider, credit card, online payment provider, bank details;
- Times and dates of specific incidents;
- Contact details of the officer initiating the intelligence package.

In addition to the intelligence relevant to the offence and the suspect, the package may contain a risk assessment. This can include an assessment of the suspect’s likelihood of having committed, or the individual’s potential to commit, a contact offence, eg, direct abuse of a child. An example could be someone who has regular, unsupervised contact with a child. A high-risk example such as this, or where a child can be identified, should be subject to urgent action and not be allocated as a routine enquiry. In some cases an intelligence package will have been generated but not be accompanied by a risk assessment because the relevant information is not available. For example, CEOP will generally not have access to the kind of information on local force systems that enables a risk assessment to be made (eg, whether or not a child is present at the suspect’s address). Local force systems should be in place to ensure that risk assessments take place in relation to suspects. Officers should assess new information generated by the investigation to ascertain if it indicates that the child, the suspect or the location can be identified. Some cases may require reference to Part Two – Investigating Complex Child Abuse.

Intelligence packages allocated for investigations are likely to identify individuals who have accessed child abuse images over the internet, eg, using peer-to-peer technology which connects computers to each other. The initial evidence recovery stage of the investigation is intended to secure evidence of possession of such images, and to identify, locate and safeguard any of the identifiable victims. It will also assist in disclosing the role played by suspects in the production, possession and distribution of indecent images of children. In most cases this will involve a search of the premises associated with the suspect to recover the computer used to download the images, and any storage media on which images may be stored (see 4.6 Search Strategy).

In many cases the intelligence will provide reasonable grounds to justify the arrest of suspects for an identified offence. Although the full extent of their involvement in offences connected to indecent images of children may not be known at this stage, the opportunity to make an arrest should be taken where it is legally justifiable (see 2.11 Arrest Strategy). This will enable an early interview to take place, under caution, to gather information that may assist the investigation. It will also assist the enquiry to establish the degree of risk that a suspect poses to children.
Investigators should note the suspect’s lifestyle, hobbies or interests as these may provide an indication of passwords or phrases used by the suspect, thereby enabling access to the images on the suspect’s computer. Examples could include names of pets, relatives or significant locations, memorable dates or words associated with hobbies or pastimes. Written notes or Post-it tabs around the suspect’s property may provide additional indications of passwords or pass phrases. Investigators should make appropriate notes on potential passwords or phrases but should not attempt to access computers or storage devices unless appropriately trained.

Where police forces are confronted with a number of intelligence packages to be investigated, or if there is likely to be a delay in actioning a package for any reason, a risk assessment of the likelihood of the suspect having access to children should be carried out. Where it is thought likely that a suspect has access to children, the intelligence package should be actioned immediately and assistance sought from the CAIU. A supervisor should oversee the risk-assessment process and use this to prioritise tasking. The risk assessment should record the rationale for a particular decision, or the decision on where to place the case within the priority listing. Where a risk assessment indicates a high risk, which cannot be resourced, the matter should be referred immediately to a senior officer for consideration.

4.4 FORENSIC MEDICAL EXAMINATIONS

In cases which require a forensic medical examination of a child, local and national guidance on such processes should be followed, including that in ACPO/CPS (2009) Guidance on Investigating and Prosecuting Rape and CPS (2009) Child Abuse – Guidance on Prosecuting Cases. This subsection includes information specific to issues relating to child victims.

Officers should ensure that they use all evidential opportunities presented by forensic medical examinations, and that these opportunities are used to resolve as many issues in the investigation as possible. When investigating child abuse, officers should be prepared to question the views of doctors and professionals in other agencies. For example, they might ask why marks, injuries or behaviour could be caused by, or attributed to, something other than neglect or abuse. One of the key aspects of effective multi-agency working is for agencies and professionals to challenge one another.

While forensic medical examinations will have most relevance in children presenting with an immediate or recent assault (described as acute), a strategy discussion should take place with the medical examiner and children’s social care for the majority of children who disclose assault, and all those who disclose historic sexual assault (see 3.2 Strategy Discussions and Meetings). Late examinations may offer important forensic and clinical information as well as the opportunity to start the therapeutic process (see 4.14.1 Pre-Trial Therapy for Child Witnesses).

4.4.1 CONSENT FOR THE FORENSIC MEDICAL EXAMINATION

Consent must be obtained for examination, forensic sampling and photographic documentation; failure to obtain consent may constitute assault. A forensic medical examination may only be carried out with the consent of the child, if the child has the capacity to give consent, or with consent from the parent, carer or person with parental responsibility. Parental consent is assumed to be a proxy for the best interests of the child. However, if the parents are not acting in the child’s best interests, this may need the intervention of the court.
Below the age of 16 years, a child can give consent if they have ‘sufficient understanding and intelligence to enable him or her to understand fully what is proposed’ (Lord Fraser, *Gillick v West Norfolk and Wisbech AHA*, [1986] 1 AC 112). In deciding whether a child is able to consent the question is whether they can understand the nature, purpose and possible consequences of the examination. This includes consideration of whether they can:

- Understand the information relevant to the decision;
- Retain that information;
- Use and weigh up the information as part of the process of making the decision;
- Communicate their decision whether by talking, using sign language or any other means.

In deciding whether a child has the capacity to consent, all information needs to be considered. This decision will depend more on the child’s ability to understand and weigh up options, than on age.

If there is no one with parental responsibility available or the parent or carer refuses consent then the local authority may apply for an EPO (which gives parental responsibility to the local authority) and child assessment order. For further information about court orders, see *Working Together* and 3.5 Court Orders Relating to Specific Children.

In any case in which a forensic medical examination is carried out under a court order, the officer arranging the examination should ask to see a copy of the order before the examination. The order can contain details regarding the place and time of an examination, the person(s) who will be present, the person(s) who will conduct the examination, and the person(s) or authorities to whom the results should be given.

It is the forensic physician (or medical care professional) who should be satisfied that consent has been obtained. Officers should, however, consider the issue of consent to examination at an early stage of an investigation, particularly where the parent or carer is a suspect. In such circumstances a contingency plan for parental non-consent should be agreed with children’s social care; this will require a prior order. Separate consent is required for the examination and photographic documentation.

The investigating officer should ensure that a timed record is maintained of all decisions and procedures undertaken in securing consent for the examination of a child. This should be included as part of a formal record of the examination.

### 4.4.2 ROLE OF THE EXAMINING DOCTOR

Guidance in *Royal College of Paediatrics and Child Health and the Faculty of Forensic and Legal Medicine (2007) Guidelines on Paediatric Forensic Examinations in Relation to Possible Child Sexual Abuse* states that for the purposes of examinations in relation to alleged child sexual abuse, a child is one under the age of 16 years. Those aged 16 to 18 years can be routinely examined without the involvement of a paediatrician. For young people aged 16 years and over who have complex disabilities and learning difficulties, however, a discussion with the paediatrician is helpful.
In cases of sexual abuse, the examination of a child under 16 years should be conducted by a paediatrician trained in forensic skills or, failing this, by a paediatrician accompanied by a forensic physician. When a child is admitted to hospital with a suspected non-accidental injury, any member of the paediatric staff may carry out the examination to ensure immediate treatment. There should be early consultation with the police in order to avoid delay in the collection of evidence. A trained paediatrician will also be able to advise on the management of post-coital contraception and the screening and diagnosis of sexually transmitted disease and other infections to which the child may be at risk as a result of the assault.

In cases of physical assault or neglect of a child, it is good practice to have a medical examination conducted by a paediatrician. There may be rare occasions, however, where such an examination could be conducted by a forensic physician alone, for example, where the injury amounts to a welt, cut, bruise or other uncomplicated trauma, especially where the victim is over 16 years of age. This is a matter of judgement in the particular circumstances of a case. Such judgement should include the wider and continuing responsibilities of paediatricians that may arise in respect of the child’s welfare. Any decision should not be influenced by the availability or non-availability of particular expertise, and every effort should be made to ensure that examinations are conducted by a physician qualified in the required field.

The initial assessment or examination of a child may indicate that further examination by a specialist is necessary, for example, an orthopaedic specialist if bones are broken. The requirement for specific paediatric expertise should be considered when planning an examination.

### 4.4.3 Timing of the Forensic Medical Examination

Forensic medical examinations should be undertaken at the earliest opportunity and the child should be accompanied by an officer from the CAIU where possible. The timing of an examination should be determined by the circumstances of a particular case. The welfare of the child may dictate the need for medical treatment without delay. In these circumstances the procedures to gather and preserve evidence may be carried out at the same time. Timing may also be affected by the deterioration of potential evidence such as body fluids or by healing processes. It should be noted that it is possible for body fluids such as semen to be recovered up to seven days after an assault and this may also prompt the need for an early examination if the abuse is disclosed near to this time limit. For further information see ACPO/CPS (2009) Guidance on Investigating and Prosecuting Rape.

Consideration should be given to the most favourable circumstances in which to conduct an examination in terms of the child’s needs and the effective use of resources. An examination conducted while the child is affected by drugs or alcohol, is tired or otherwise unsettled may not provide the most useful outcomes in terms of forensic recovery or satisfactory disclosure of information. Similarly, the ideal conditions in which the forensic physician or paediatrician may be able to conduct an examination are likely to be during normal working hours.

The investigating officer should discuss with the forensic physician or paediatrician whether it might be more appropriate to conduct a victim interview prior to the forensic medical examination. The advantage of such a procedure is that it may suggest additional opportunities for evidence collection and avoid the need for a further examination to check on any disclosures made during the interview. Carrying out the interview first should prevent the child having to repeat the disclosure to the examining doctor. This in turn assists the doctor in assessing the medical needs of the child, and providing information about what evidence may need to be collected in terms of forensic samples. Any such decision should be balanced with the potential risks of the loss or cross-contamination of forensic material.
When it is decided that the examination should take place before the interview, the examining physician or paediatrician will need to speak to the child so that the required samples can be collected and the scope of the examination determined. Sometimes this will mean that a child talks about the offence. Officers should refrain from inhibiting such conversation on the grounds that it might damage the integrity of any later interview with the child. Such an approach could inhibit the child and not be in his or her best interests. It could also prevent the forensic medical examination being conducted thoroughly. The benefit of successful recovery of forensic evidence relating to the offender, such as DNA, is likely to outweigh any potential claim that a subsequent evidential interview was compromised by a conversation between doctor and patient during the examination. It is in the interests of the child to ensure, if possible, that further examinations are not necessary. The conversation should be recorded by the examining physician or paediatrician in his or her witness statement.

Cases of abuse where the victim does not require urgent medical attention allow for a medical examination to be carefully planned. The purpose of any forensic medical examination in such cases is to assess the medical needs of the child and record any evidence relevant to the case. This may include examining scar tissue and other traumas which can be interpreted to support an allegation of assault, indecency or neglect. It may be possible for photographs to be taken at the same time as a forensic medical examination.

4.4.4 PLANNING AND RECORDING THE FORENSIC MEDICAL EXAMINATION

Planning the forensic medical examination should form part of the initial strategy discussion, and it may be appropriate for children’s social care to help with the arrangements since this may assist in their assessment of the needs of the child. The investigating officer should meet the paediatrician or forensic physician prior to an examination to discuss the purpose of the examination. As the forensic medical examination is part of the criminal investigation, the investigating officer or an officer acting in support of the investigating officer should remain present or near to the place where it is being undertaken.

To assist in the examination and avoid causing distress to the victim by requiring him or her to repeat information already given, the investigating officer should provide the forensic physician with the account that the victim has given to the police. All of the information provided to the forensic physician should be recorded for future reference.

Information gathered during a forensic medical examination should be considered when making welfare arrangements for the child. Whenever a forensic medical examination is conducted, the following information should be documented by the investigating officer:

- Location of the medical examination and who was present;
- Location where any samples for analysis have been stored and the reference numbers;
- Outcomes of any strategy discussion prior to or arising from the forensic medical examination;
- If and where any sensitive or other images have been recorded;
- Notes made by the paediatrician or forensic physician (possibly recorded as sensitive material in prosecution files).

The forensic physician or paediatrician should provide a written statement after any forensic medical examination, which outlines the findings of the examination (eg, using body maps) and expresses their opinion. Contemporaneous notes of any spontaneous comments by the child concerning the circumstances leading to the examination should be made available to the CPS. Where it is considered that such notes should be treated as sensitive material, reasons should be included in the prosecution file.
In cases where bite marks may be relevant, advice should be sought from a forensic odontologist regarding the interpretation and appropriate photography of such marks.

4.5 PHYSICAL EVIDENCE

4.5.1 FORENSIC SCIENCE

In most incidents of child abuse it is likely that, at some point, legitimate access to the victim or their home has been gained by a suspect. The suspect may also be living with, or has lived with, the victim as a parent or carer, relative or visitor. This presents different issues from those where the suspect is unidentified or has no legitimate access to the scene. In cases where the suspect has had legitimate access, it will not usually be sufficient to identify the suspect as being present at the scene from forensic evidence. The forensic investigation should consider the sequence of events as explained by each party, looking at the scene in that context. This means testing whether the information from the scene corroborates the sequence of events supplied by the suspect as well as the victims and witnesses. This principle may also apply to scenes of previous incidents.

Areas of significant evidence which could assist the investigator and the CSI to interpret the scene include:

(a) **Blood pattern distribution**

Although the presence of blood at the scene may provide corroboration of physical assault, pattern and distribution analysis can often establish the possible pattern of events. For example, finding marks attributable to blood-soaked hair coming into contact with fixtures and fittings may corroborate stated incident details. Similarly, the size of a small blood droplet may assist in establishing the height at which a victim was bleeding, thereby assisting in the restructuring of events. Where cleaning has taken place, stained tissues, cloths, contaminated taps, plugs and other materials may provide further evidence of assault and evidence of the suspect’s state of mind.

(b) **Fingerprints**

While finger or palm marks cannot be aged, the location of recovered material may assist in establishing the suspect’s actions at the scene. The situation of marks may assist compilation of incident details, particularly if located in uncommon areas and positions. The CSI should record the exact situation and position of ridge detail. The position and context of these marks could be critical to the corroboration of a victim’s account. Officers should discuss the likely areas of search with the CSI.

(c) **Clothing and bedding**

Tears and damage to clothing may assist in the corroboration of accounts. Fibre transference between the victim and suspect may be pertinent, and the seizure of clothing bearing evidence of assault or attack may also assist enquiries. Blood distribution on clothing may further assist in clarifying the pattern of events. Clothing damaged or contaminated during an assault may be discarded or put aside for cleaning purposes. A search of items such as clothes baskets, washing baskets and other areas where clothes can be hidden may prove useful. Bedding, including mattresses, may also be a useful source of evidence. Seminal fluid can remain for months or years provided the item has been kept dry and not washed.
(d) **Footwear impressions**

Shoe marks are sometimes recoverable from personal effects and the victim’s body. Suspects’ footwear may contain debris resulting from the assault of the victim. Bruises should be subjected to careful study as it is not uncommon to recover impressions from shoes or other articles in patterned bruising.

(e) **Medication and feeding materials**

A child’s medication and feeding materials, including bottles, may be a useful source of evidence, particularly in a case of suspected fabricated and induced illness.

(f) **DNA**

Even when the presence and identity of the suspect is not in dispute, the presence of a suspect’s DNA at the scene may prove significant when subject to interpretation. For example, DNA samples recovered ‘on top’ of a crime scene or otherwise linked to the crime data can be interpreted as providing evidence of presence at the scene which does not precede the event in question. DNA may also be linked with items associated with the specific incident. For example, a bottle used in an assault may identify the drinker(s). Similarly, a recently deposited cigarette stub used to burn a victim may identify the smoker. This type of information may help to establish some factual element to conflicting circumstantial accounts. Wherever possible, articles should be submitted to the forensic laboratory for examination, but it can be more cost effective to request a CSI to attend the scene, particularly if it is a large area.

(g) **Signs of a disturbance or neglect**

Disturbance or damage to the scene could verify a sequence of events or negate an account. Neglect can also be inferred from a description of the scene, which could assist the CSI in identifying evidence.

(h) **Injuries**

The victim is a crime scene and should be dealt with in that way. Injuries may be less apparent in cases of long-term neglect, and officers should be alert to the possibility of injuries indicating a pattern of abuse over a long period of time. Any interpretation of injuries should come directly from the forensic physician or paediatrician carrying out the medical examination and should be recorded with photographs and scale. (See also 4.4 *Forensic Medical Examinations*.)

(i) **Weapons**

These may not conform to usual descriptions and may be ordinary domestic items. The configuration of marks, abrasions and bruises may offer comparison with items associated with the assault. Debris from household or other items used as weapons may remain in wounds, thereby providing a physical fit to damaged articles at the crime scene or potential physical evidence, eg, paint or metal. The National Injuries Database can provide specialist advice in appropriate cases. For further details contact the NPIA Specialist Operations Centre.

(j) **Jewellery**

Items worn by the victim when the abuse took place, such as ear studs or wristwatches, have potential for offender DNA recovery and should not be overlooked during the forensic examination of the victim.
Considerations in cases of sudden unexpected death in childhood

Prior to the decision to treat the scene of a SUDC as a crime scene, where no loss of or contamination of potential evidence is likely to result, the investigating officer and a paediatrician or other suitable health professional should visit the scene within twenty-four hours. Any decisions made, and the grounds for them, should be the subject of a timed record. This is particularly relevant to those cases where there are no grounds to suspect an unnatural cause of death, but the cause is uncertain. ACPO (2006) Guidelines on Infant Death Investigation (supplement to ACPO (2006) Murder Investigation Manual) should be used in all SUDCs, but if there are grounds to suspect an unnatural or suspicious death, this should prompt a full investigation in accordance with ACPO (2006) Murder Investigation Manual. (See also 1.4.24 Sudden Unexpected Death in Childhood.)

Investigators should consider arranging for the seizure of bedding, mattresses and clothing if these are reasonably considered to be potential sources of forensic value. The position and amount of bedding will be important considerations during the joint death scene interpretation. Unless there are good reasons to the contrary they should not be disturbed until the joint visit has taken place. The child’s nappy and clothing should not be removed and arrangements should be made for them to be examined by the pathologist, as appropriate. Other items which may be of forensic value include the child’s used bottles, cups, food, any medication which has been administered and other medication in the house.

Investigators should consider the psychological and emotional effect of such actions on the bereaved parents or carers and explain that the examination of items may help to discover the cause of the child’s death. Items should be returned as soon as possible after the coroner’s verdict or the conclusion of the investigation, trial or appeal process. Before any items are returned, the parents should be asked if they actually want them back. If articles have been kept for a while, police should ensure that they are presentable and that any official labels or wrappings are removed before return. The articles should be returned in an appropriate container, for example, a personal effects box.

4.5.2 PHOTOGRAPHIC AND VISUALLY RECORDED EVIDENCE

Photographic and visually recorded evidence should be gathered wherever possible in child abuse investigations. Expert photography can be of great value to the investigation and in court proceedings. Photographs can also be used in suspect interviews. For example, in neglect cases, visually recorded evidence can provide a record of inadequate food, clothing or home conditions and this can be used throughout the child protection process and in a prosecution. They are also valuable in the decision making of other professionals in the multi-agency child protection process, particularly if a criminal prosecution or conviction has not been possible. Advice relating to issues such as the use of alternate light source techniques can be obtained by contacting the NPIA Specialist Operations Centre.

Still images can be matched to visual recordings of the more general scene. Whenever hospital images recorded for internal damage prognosis (X-rays) have been taken, officers should consider their value as a potential source of evidence. Officers should be aware that photographic evidence identifying individuals, including that attached to case files, is subject to the Data Protection Act 1998 and should only be shared with other agencies when necessary and in accordance with the law and local information-sharing protocols.
Use of X-ray and similar techniques

Identifying fractures and bone injuries in infants and babies is particularly difficult. It is not always possible for medical staff to give clear and unambiguous answers. It is particularly difficult, for example, to detect recent fractures to the ribs. The use of X-ray and similar techniques should form part of the investigation strategy. A paediatric radiologist should carry out any interpretation of children’s X-rays and provide a written statement of their opinion in the case. In any case where the consequences are likely to result in the removal of a child from a parent or carer, or an arrest, a consultant paediatric radiologist at a specialist centre should be asked to interpret the X-rays. For further information see Royal College of Paediatrics and Child Health/Royal College of Radiologists (2008) Standards for Radiological Investigations of Suspected Non-accidental Injury and ACPO (2004) Radiology in Child Abuse Investigations: A Good Practice Guide for Investigating Officers.

The consent of the victim (if the child has the capacity to give consent) or the parent, carer or person with parental responsibility should be obtained before any photographs are taken. This should be recorded on pre-prepared forms in an officer’s pocket book or in a victim’s statement. Investigating officers should ensure that victims are able to decide on the location that they would like the photographs to be taken, if a choice is available. The victim and parent or carer should be informed that photographic evidence obtained could be used as evidence in any subsequent child protection, criminal or civil proceedings, eg, relating to child contact.
Checklist 13: Use of Photographic Evidence

Officers using photographic evidence techniques should:

- Be aware that photographing a child may cause distress to them, particularly in cases where photographing and visual recording has been part of the abuse. The reaction of the child to being photographed may itself form part of the evidence and should be recorded as appropriate.
- Ensure that a suitably trained forensic physician or paediatrician documents and records injuries (see 4.4 Forensic Medical Examinations), rather than relying exclusively on photographic evidence.
- Photograph all injuries at a ninety-degree angle with a rigid scale and accompanied by body maps – bite mark injuries should be photographed as soon as possible.
- Photograph or visually record all damage and disruption at the scene (including signs of neglect, damaged clothing and toys) and any other details that will assist in corroborating the victim or witness accounts, or proving the offence(s).
- Use CSI photographs whenever possible in child abuse cases, irrespective of whether Polaroid or digital photographs have been taken.
- Consider using specialist, alternative light techniques, eg, ultraviolet, which can be used to show non-visible historic bruising.
- Record visual footage of crime scenes when appropriate;
- Make arrangements for the victim to be rephotographed at a later stage when injuries may be more apparent.
- Take particular care when photographing darker skin tones as bruising can be more difficult to see.
- Use alternative light sourcing if the injuries are not apparent in white light eg, ultraviolet, infrared).
- Use photographs proactively to assist in the investigative interview.
- Provide custody officers with photographs to assist them with decision making, particularly in respect of police bail.
- Attach any photographs to the file of evidence for the CPS and present original images as referenced exhibits.


Checklist 14: Visually Recorded Evidence Gathering

Officers using visually recorded evidence should:

- Make arrangements for the scene to be filmed as soon as possible with the minimum of disturbance;
- Use a trained evidence gatherer;
- Leave each room in situ and film in accordance with a predetermined route;
- Clearly identify and film particular hazards;
- Provide adequate lighting;
- Provide a verbal factual commentary to assist the court, without expressing any opinion;
- Refer to visual recordings in statements made by the filming officer and ensure that they are exhibited.
4.5.3 USING RECORDINGS OF EMERGENCY AND OTHER CALLS TO THE POLICE

Verbatim recording of emergency and other calls to the police including first accounts can provide a useful source of evidence to support the prosecution of child abuse cases and to build a subsequent chronology. Recordings can be used in suspect interviews and to assist in briefing forensic medical examiners (FMEs). Investigating officers should examine recordings to identify the following:

- Identity of callers, if they have remained anonymous;
- Demeanour of callers;
- Background noise, including unsolicited comments from witnesses, suspects and victims;
- Any first account of the incident as provided by a witness or victim.

The initial part of any emergency call will have been received by the telephone subscriber’s operating company (eg, British Telecom), so it is important to obtain any audio recording of the words spoken during that process.

Officers should follow local guidelines for the storage and retention of recordings of emergency and other calls and they should be included as part of the prosecution file sent to the CPS, where relevant (see 4.13 Preparing Information for the Crown Prosecution Service). Legislation such as PACE directs how such evidence must be presented to be admissible in the judicial process. Police forces should ensure that any guidance given to call takers on operating procedures in child abuse cases is also made available to the judicial process.

4.6 SEARCH STRATEGY

Search strategies should be planned in accordance with local and national guidance including ACPO (2005) Practice Advice on Core Investigative Doctrine. This will be relevant during all investigations including those involving child abuse images. Searches can identify electronic sources of evidence and more general items of interest as part of the investigation, eg, children’s toys, sex toys, drugs such as VIAGRA. It is likely that suspects in such investigations may take steps to conceal their activities from others living or working in the same premises. They may also adopt strategies to conceal material in the event of a police search. Investigators undertaking searches should be aware of the various media on which images can be saved and the ways in which storage media may be concealed. One example could be a compact disc containing indecent images of children disguised as a music compact disc within a collection. There is also the possibility that a concealed computer with a wireless connection to the internet may be used to distribute or access images.

Searches for evidence should, therefore, be meticulously planned and carried out in conjunction with members of the HTCU, who will know the technical opportunities used to conceal such material. The HTCU also have intelligence on concealment methods adopted by suspects in other cases. If there is a suggestion that the suspect may have used concealment methods, the deployment of police search adviser (PoSA) trained officers should be considered at this stage. Those who download child abuse images from the internet may also possess such images on DVD or in printed format. Search strategies should, therefore, include such material.
Where images are subsequently recovered from seized material, investigators from CEOP, or, in some cases, the force HTCU will try to establish the identity of victims, offenders and locations shown in them. They will be assisted in this if the interiors of all premises searched have been visually recorded or photographed during the search, and any photographs found of children which are not abusive (eg, school photographs) have been copied. A digital photograph taken of the original in situ will be adequate for this purpose.

Encryption software allows incriminating text and images to be encoded. Encoded images or text cannot be recovered during the digital examination phase without the passwords. Investigators are advised to obtain passwords or pass phrases at an early stage from anyone who may have knowledge of them. Where a suspect cannot or will not provide the required password or pass phrase, investigators may be able to use key words based on the suspect’s lifestyle, hobbies or interests to access incriminating images and text. Passwords or pass phrases may also be recorded in other locations associated with the suspect. Examples could include passwords used at their place of work or recorded in traditional or electronic diaries. Digital examination of an encrypted file(s) may include the use of specialist examiners to obtain the password or pass phrase. Without this information, accessing encrypted files is difficult to achieve, if not impossible. CEOP’s victim identification suite and Childbase database can help to identify victims.

4.7 VICTIM AND WITNESS EVIDENCE

For information about the initial police response to the victims of child abuse, see 2 Initial Police Response to Concern for a Child. The Office for Criminal Justice Reform (2005) The Code of Practice for Victims of Crime describes the additional or enhanced services that can be provided to victims of crime who are vulnerable or intimidated (using definitions from the Youth Justice and Criminal Evidence Act 1999). Such victims include children. For example, under the scheme relating to direct communication with victims, the CPS will offer a meeting to parents or carers (and the child, if appropriate) to explain if a decision is made to discontinue or downgrade a charge in a child abuse case.

The police must take all reasonable steps to identify vulnerable or intimidated victims. Where such a victim is likely to be called as a witness in criminal proceedings and may be eligible for special measures, the police must explain the provisions included within special measures to the victim, and must record any views that the victim expresses about applying for them. See Office for Criminal Justice Reform (2005) The Code of Practice for Victims of Crime, CJS (2006) Working with Intimidated Witnesses: A manual for police and practitioners responsible for identifying and supporting intimidated witnesses and CPS (2009) Child Abuse – Guidance on Prosecuting Cases.

4.7.1 INTERVIEWS OF CHILDREN AND SPECIAL MEASURES

All those involved in interviewing child victims should be trained in the application of Achieving Best Evidence and, if possible, trained in communicating with children. In some cases professionals from other agencies such as children’s social care may be involved in the interview process (eg, if this is in the best interests of the child). This guidance does not repeat the information in Achieving Best Evidence, which covers the issues relating to the planning and conduct of the interview including working with interpreters and intermediaries. Other useful information is provided in documents such as National Autistic Society (2008) Autism: a guide for criminal justice professionals. Local interview coordinators should be considered. Advice about any aspect of interviewing witnesses and victims is provided by the NPIA Specialist Operations Centre. See also 2.8 Use of Interpreters and Intermediaries.
It is the responsibility of the investigating officer to decide whether the circumstances of the case require an early special measures discussion with the CPS. The special measures provisions will need to be explained to the child and the parent or carer. Officers should ensure that they do not give children guarantees or raise their expectations as they may not get the special measure that they request. Guidance on early special measures discussions is provided in Office for Criminal Justice Reform (2009) Early special measures discussions between the police and the Crown Prosecution Service: Practice Guidance.

An interview with a child should take place after a strategy discussion with children’s social care (see 3.2 Strategy Discussions and Meetings). The interview should not, however, be delayed solely for the purposes of a strategy discussion if it is not in the best interests of the child.

Where a core assessment has taken place using Department of Health (2000) Framework for the Assessment of Children in Need and their Families, this will provide considerable information about the child and the parent or carer. The interviewing team may, therefore, have access to detailed information about the child which can be used when planning and conducting the interview. This information can also assist an intermediary where one is used.

Officers should ensure that information gained from the victim and witness interviews is included in any risk assessment and safety planning processes. Before conducting the victim interview, the interviewing officer should make sure that it will meet the required standards as set out in legislation and ACPO (2009) National Investigative Interviewing Strategy. Officers should also ensure that any confidential details, such as the address of a place of safety, are not disclosed in a recorded interview. If they are, the CPS should be informed of this so that the recording can be edited if necessary.

Consent to an interview

Children should be informed of, consulted and involved in any matter affecting them, according to their age and understanding (see 4.4.1 Consent for the Forensic Medical Examination). Where possible, the child’s parent or carer should be involved in the decision to interview a child. Exceptionally, a child may need to be interviewed without the knowledge of their parents or carers. Relevant circumstances include the possibility that a child would be threatened or coerced into silence or where there is a strong likelihood that important evidence would be destroyed. Children can request that a parent not be involved if they have the capacity to make that decision, although officers should not give guarantees that a parent will not be made aware of the allegation. The response to a child’s request depends on a number of factors including the child’s age, mental and emotional maturity, intelligence and comprehension. Attempts to gain consent or decisions not to seek consent from the parent or carer should be recorded.

Special measures

Under section 16 of the Youth Justice and Criminal Evidence Act (YJCEA) 1999, special measures apply to any child under 17 years. The provisions of the YJCEA are likely to change when the Coroners and Justice Bill is enacted and implemented. This will affect the primary rule under section 21 and increase the age of a child, in the definition of a child, to under 18 years of age.
Visually recorded interviews can be used as part of the evidence in criminal proceedings, and if used as evidence-in-chief they can spare the need for the child to go through all the evidence again. They can also be used in child protection processes and any subsequent civil or family proceedings or in disciplinary proceedings against adult carers in institutional settings. For details about the conduct and supervision of visually recorded interviews, see Achieving Best Evidence.

Officers should consider any consent issues that may arise when interviewing and, where appropriate, make contingency plans with children’s social care (see 3 Police Responses and Multi-Agency Working To Safeguard Children). Irrespective of the medium used, the degree of preparation and planning for the interview must be of the same standard. Decisions concerning the interviewing process should be made with reference to early special measures discussions with the CPS. Where an officer has made the decision not to record a child’s evidence, the reasons for that decision should be explained to the CPS prosecutor so that an explanation can be given to the court. For further information see CPS (2008) Special Measures available at http://www.cps.gov.uk/legal/s_to_u/special_measures/

4.7.2 IDENTIFICATION PROCEDURES AND FACIAL COMPOSITION WITH CHILD VICTIMS

Where a child is required to identify a suspect or collaborate with police artists or facial composite operators, that process should be visually recorded as part of the evidence. It may also be useful to include facial composite operators in the planning process for the victim interview. For more detailed guidance on identification procedures with vulnerable witnesses, see Achieving Best Evidence.

4.7.3 VICTIM PERSONAL STATEMENTS

Details of the Victim Personal Statement Scheme can be found in Home Office Circular (35/2001) Victim Personal Statements. When the impact of child abuse is produced to the court, it can have a significant effect on the sentencing powers of the court. A child abuse investigation may include a victim personal statement from a child victim or parent or carer. It may be necessary to take a statement from the victim and parent or carer in order to establish a full picture of the impact of the abuse. A victim personal statement should be given in the same format as the original statement, ie, where the evidential statement is visually recorded, the victim personal statement should also be visually recorded.

The victim personal statement should contain details of the impact of abuse on the child including physical, emotional and psychological effects, and also financial, lifestyle and living arrangements. The victim, parent or carer should be able to express his or her concerns regarding bail or the fear of intimidation by or on behalf of the defendant. They should also be given the opportunity to state whether they want information, for example, about the progress of the case.

The statement may include hearsay and other evidence in order to inform the court as fully as possible about the impact of the abuse. The opinions of the victim or the victim’s parent or carer as to the level of sentence are not relevant. In any visually recorded interview with a child, consideration should be given in the planning stage to including a section for the victim personal statement, as outlined in Achieving Best Evidence.
4.7.4 WITHDRAWAL AND RETRACTION STATEMENTS

An officer from the CAIU will need to take any withdrawal statement from a child victim; this should be carried out using the same means as the original statement. If a withdrawal statement is taken with care, it may still be used, together with the original statement, as evidence in current or future criminal proceedings or the child protection process. It may also be used within the Family Court system, eg, in a child contact dispute.

Where there is suspicion that a child is being pressured or coerced to make a withdrawal statement, efforts must be made to speak to the child separately from the person(s) suspected of coercion. Coercion to withdraw a statement can be grounds to remove a child to a place of safety (see 2.12 Police Protection). In such cases officers should also consider investigating relevant connected offences, such as intimidating a witness or harassment. More detailed information about the possible content of withdrawal or retraction statements is contained in ACPO (2008) Guidance on Investigating Domestic Abuse.

Reasons for the withdrawal of a statement, such as fears of making a court appearance or intimidation by the suspect, should be discussed with the CPS so that the options available to protect vulnerable witnesses, including special measures, can be explored.

Withdrawal statements should be forwarded to the CPS and accompanied by a report from the officer taking the statement. The report should detail the officer’s observations about the reasons for the victim’s withdrawal of their statement and their views about whether the case should proceed nonetheless.

4.8 OTHER EVIDENCE

Evidence can be held about actual abuse and/or its impact on a child by a number of specialist police departments, multi-agency teams or officers including those referred to in 1.5 All Staff Responsibility.

4.8.1 DEBRIEFING THE FIRST OFFICER AT THE SCENE

The first officer at the scene is a witness and the investigating officer should, where the case warrants it, take a statement from the officer. Supervisors should ensure that the welfare of these officers is fully considered during the debriefing whenever the nature of the investigation is likely to be distressing (see 1.7.2 Staff Welfare and Support).

Debriefing should cover the officer’s initial appraisal of:

- The victim’s injuries and reactions, and those of any other children in the house;
- Their observations of the scene;
- Identification of risk factors relating to the victim, suspect or others (see 1.3.1 Established Risk Factors);
- Unsolicited comments made by the suspect;
- Any first description of the incident as provided by a witness or victim;
- Significant statements made by the suspect;
- Actions taken by the officer at the scene and afterwards, and reasons for that action, eg, any exercise of police protection powers or referral to children’s social care or any other agency.

The above issues, where relevant, should be included in the officer’s evidence and presented in their statement.
4.8.2 HOUSE-TO-HOUSE ENQUIRIES, CCTV AND ENQUIRIES WITH OTHER POTENTIAL WITNESSES

The possibility of house-to-house enquiries, the use of CCTV and enquiries with potential witnesses should be identified early in the investigation. Examples include family members, neighbours, shopkeepers, visitors and friends. Where other witnesses are children, see 4.7.1 Interviews of Children and Special Measures. See also ACPO (2006) Practice Advice on House-to-House Enquiries.

House-to-house enquiries may also be appropriate when obtaining general evidence relating to a particular case. Careful questioning may result in information about things said by the child, avoidance behaviour by the child, observations about things heard and seen, and the behaviour of the suspect towards the child. Although some of the evidence may be inadmissible, sometimes it has the capacity to rebut the suspect’s account and can assist the investigation by confirming suspicions. Such evidence may also be important in child protection proceedings and family or civil proceedings, including child contact disputes or applications for civil injunctions. It can also be used to help frame civil orders and bail conditions correctly (see 3.5 Court Orders Relating to Specific Children).

In a child abuse investigation house-to-house enquiries may require slightly different planning, as the defined area for the operation may only include the immediate neighbours of the victim. Alternatively, it may include residents close to schools, parks or other places where related incidents have, or may have, occurred.

Officers should consider the following points:

- Whether the sensitive nature of the enquiry requires particular questioning techniques to establish what the neighbour saw or heard, without disclosing the exact nature of the alleged offence or incident;
- Whether it is appropriate to use a standard questionnaire to elicit information;
- Whether questionnaires should use open-ended questions to allow interviewees to describe previous incidents and provide further evidence;
- Whether the questions asked should be constructed to relate to general issues about the family and/or other children who may be at risk through contact with the suspect, eg, parenting style and use of discipline.

4.8.3 COVERT METHODS

In child abuse investigations all investigative methods should be considered, including those which are covert. (For one example, see 1.4.11 Fabricated or Induced Illness.) Another example of when covert methods might be considered is where there is an allegation of rape of a child under the age of 13 years and it is not possible to prevent contact between the victim and suspect, and it is suspected that the abuse is continuing. Covert surveillance may be used to prove that a child is visiting or being visited by the suspect in cases where this is denied. The priority should always be the protection of a child from abuse. While monitoring the activity recorded by covert methods, such as surveillance, officers should recognise the importance of a child protection strategy that ensures effective intervention measures to prevent harm to the child.
Officers considering the use of covert methods in child abuse cases should seek advice from the appropriate force covert operations advisers or department (or local equivalent). Advice on authorisation to deploy covert technical equipment or other covert resources should be sought from the force Central Authorisations’ Bureau (CAB), BCU Gatekeeper or Covert Operations Management Unit (COMU). Obtaining authorisations under RIPA should be sought where the use of a particular technique will result in interference with a person’s rights under Article 8 of the ECHR (respect for private and family life). Advice can also be obtained from the NPIA Specialist Operations Centre. Investigating officers must ensure that appropriate authorisation is considered, particularly when they are aware that victims or witnesses, including any organisation that uses CCTV, are collecting evidence of a suspect’s conduct.

Intelligence originating from police-registered covert human intelligence sources (CHIS) or other sensitive or covert sources cannot usually be shared with other agencies. If this information is relevant for the protection of the child, the authority of a senior officer must be sought before disclosure, in accordance with force procedures.


4.9 INFORMATION AND SERVICES FROM OTHER AGENCIES

Records held by other agencies, particularly children’s social care or the NSPCC, may reveal previous reports or incidents, evidence of the existence of abuse or evidence of the impact of the abuse that will assist the investigation. This can include information from professionals from agencies involved before or after the investigation. Enquiries with other agencies should take place in accordance with ACPO (2006) Guidance on the Management of Police Information and Working Together and any other national and local multi-agency protocols and SLAs. (See also 3.4 Multi-Agency Information Sharing, Intelligence Gathering and Decision Making.)

Any child abuse investigation should include enquiries with the local authority where the child lives and also where the child lived previously. Investigators should also consider making enquiries about other children with whom the suspect has had contact. Enquiries should include any other names used by the child or family. Officers should consult relevant local protocols, where appropriate.

Officers should note that partner agencies may, on occasion, be better placed to obtain evidence from victims. It is, however, the police who are responsible for criminal investigations relating to child abuse (see 4.1 Police Responsibility for Criminal Investigation).

Officers should obtain full information about a victim’s child care providers, schools and any youth services with which they may have had contact. Where possible, contact should be made with the individual who leads on child protection matters in a particular establishment. Relevant information may also be obtained from other police officers such as those based in schools.
The following agencies and service providers can also provide information and services:

- Armed services;
- CEOP;
- CAFCASS;
- ChildLine;
- Connexions;
- Health sector, including health trusts and strategic health authorities, emergency care staff, ambulance service staff, child and adolescent mental health services, dental practitioners, GPs, genito-urinary medicine service staff, health visitors, midwives, obstetric and gynaecological staff, occupational therapists, paediatric staff, physiotherapists, pregnancy advisory services, school nurses, sexual health services, speech and language therapists and any other healthcare professionals with whom the child has had contact;
- Housing providers;
- Local authorities, particularly children’s social care and education services;
- NSPCC;
- Ofsted;
- Prison Service;
- Probation Service;
- Schools;
- Specialist providers of advice and support to victims of child abuse and sexual violence, including adult survivors and others affected by such abuse, including parents and carers (see 1.4.20 Rape, Sexual Activity and Pregnancy of a Child);
- Sure Start and children’s centres;
- Victim Support (VS) and the Witness Service (see 4.14.2 Supporting a Child and Preparing Them for Court);
- Voluntary sector providers of services for children including child contact centres, outreach and child advocacy services (eg, services affiliated to Women’s Aid Federation England or Refuge);
- Voluntary sector providers of services for adult survivors of abuse;
- Youth services;
- Any other agency involved in the LSCB.

Important information may also be provided from agencies involved in multi-agency arrangements such as MAPPA and YOTs.

### 4.10 SUSPECT INTERVIEWS

Supervisors should ensure that all officers conducting suspect interviews are appropriately trained in accordance with ACPO (2009) National Investigative Interviewing Strategy and comply fully with PACE. Depending on the seriousness or complexity of the alleged offence(s), supervisors should consider appointing a trained interview coordinator to assist in the investigation. See also CPS (2009) Child Abuse – Guidance on Prosecuting Cases.

Information from the suspect interview should be used in police bail decision making. It should also assist the CPS and the courts to determine the appropriate method of protecting children deemed to be at risk of harm, and in assessing and managing risk (see 1.3 Identifying, Assessing and Managing Risk).
As with any suspect interview, officers should interview in accordance with the principles of investigative interviewing and the PEACE model. Officers should also understand the legal requirements and points to prove, or defences to an offence, which are key elements in achieving interview aims and objectives. In child abuse cases, in addition to obtaining a first account from a child abuse suspect, the following areas should be considered when planning lines of questioning:

- Circumstances leading up to the alleged offence;
- Motive(s) when committing the alleged offence;
- Bad character of the suspect;
- General relationships with children and child contact arrangements, if applicable (e.g., using an address where there are children or vulnerable adults);
- Relationship with other family members, family structure and functioning;
- Any circumstances in which children of the family have lived away from home;
- Contact with external support agencies;
- Parenting style, where applicable;
- Self-care and care of other family members, where applicable;
- Issues relating to grooming, such as membership of children’s organisations and fostering of interests in children’s websites;
- Any drug or alcohol misuse issues.

Specialist support and advice can be obtained from the NPIA Specialist Operations Centre and CEOP’s Behavioural Analysis Unit (BAU).

4.10.1 INTERVIEWS IN CONNECTION WITH CHILD ABUSE IMAGES AND RELATED OFFENCES

In such cases early consultation with CEOP’s BAU and cross-referencing captured identification data with their CETs database should be considered. When interviews relate to child abuse images, investigators from the HTCU and CAIU should, where possible, form part of the interview team. This will enable any technical issues to be dealt with as they arise during the interview, and may reduce the number of interviews required. The lead interviewing officer should be ‘advanced interview trained’, as described in ACPO (2009) National Investigative Interviewing Strategy. Interviewing a suspect prior to the digital examination of seized storage media provides an opportunity to establish specific information such as the ownership of the computer and who has access to it. Investigators need to establish who was operating the computer at the time that the images in question were downloaded, the suspect’s access to other computers, storage devices or networks, use of wireless networks, type of virus protection or firewall used and the length of time this security protection has been in place. Interviewers should request passwords from suspects to assist in the examination of the material. Under Part 3 of RIPA, suspects can be required to disclose encryption keys or passwords if there is no alternative or other reasonable method of gaining access to a computer which has been lawfully acquired by the police. Anyone not handing over the password could be subject to a two-year prison sentence, or in cases involving national security a prison sentence of up to five years.
Interviewers should also ensure that the following matters are covered in the interview:

- Length of time a suspect has owned or possessed the computer, when anyone last used it and whether there has ever been any suggestion of a virus or fraud or similar and what was done about it.

- Who has access to the machine (including their contact details), when and why another person has used the machine.

- Method used to download images.

- Suspect’s level of experience in using the internet.

- How the suspect stores images. This may assist in establishing whether the suspect intended to store images away from the computer or to distribute the images to others on disc. The meticulous cataloguing and recording of images may also assist in establishing intent.

- Name of the ISP. This is required to enable further enquiries with the ISP and to obtain evidence from their servers.

- How the suspect connects to the internet, for example, via television or telephone lines. This allows investigators to explore the connection between the suspect and the indecent images via the method of internet connection.

- The suspect’s email addresses. It may be necessary to apply to the ISP to suspend the suspect’s email account(s) so that potential evidence is not lost.

- The type of activity the suspect normally undertakes on the internet. A comparison can then be made with their stated use of the internet and the computer’s record of their actual use. This may confirm or deny the suspect’s account.

- Passwords used for operating systems and files, name(s) of encryption programme(s) used, and password or pass phrases used in encryption programmes.

It is important that the information above is collected as soon as possible and preferably on the date of seizure. There is usually a long gap between seizure and detailed forensic results and sometimes the arrested person will say that they do not remember particular information if these questions are asked later in the criminal justice process, eg, during the trial.

### 4.11 CHARGING AND PRE-CHARGE ADVICE

Police officers will take account of *CPS (2007) The Director’s Guidance on Charging, Third Edition* when deciding whether to refer a case to the CPS for pre-charge advice. That guidance applies to those cases that the Director of Public Prosecutions is required to take over in accordance with section 3 of the Prosecution of Offences Act 1985. Officers should note that all child abuse cases will fall within the pre-charge advice scheme, even when a guilty plea is likely. Pre-charge advice and charging decisions should be sought in accordance with local systems, eg, for the use of CPS Direct. See also *CPS (2009) Child Abuse – Guidance on Prosecuting Cases.*
4.12 REMAND, POLICE BAIL AND RELEASE OF SUSPECTS

When a decision has been made to release a suspect with or without charge, consideration should be given to the risks posed by the suspect to the victim and risks posed by others to the suspect. The risk posed by the suspect is particularly relevant when the suspect is a member of the victim’s household, a relative, friend or associate with routine access, or there are circumstances in which they have access to other children (eg, through their profession or hobbies). Consideration should be given to the involvement of other agencies in the risk-management process. For further details see 1.4.17 Managing Sexual Offenders and Violent Offenders and 4.12.4 MAPPA and Managing Potentially Dangerous Persons.


4.12.1 REMAND AND POLICE BAIL

Where a suspect is charged with an offence concerning child abuse, consideration should be given to asking the CPS to apply for a remand in custody.

Prior to a decision to allow bail, if appropriate, victims and their parents or carers and children’s social care should be consulted, where possible. All efforts should be made to impose effective bail conditions that protect victims, children and witnesses from further intimidation and abuse. In this context, ‘children’ includes other children who may be placed at risk of harm.

If there is insufficient evidence to charge a suspect, consideration should be given to releasing the suspect under section 47 (3) of PACE to enable further enquiries to be completed. This will allow time for other witnesses to come forward and for a more detailed investigation to be undertaken. The Criminal Justice Act 2003 allows for bail conditions to be imposed where a suspect is bailed to return to a police station while pre-charge advice is being sought from the CPS.

Custody officers should consider including the following restrictions when imposing police bail conditions so that children and other witnesses are given maximum protection:

- Not contacting the victim either directly or indirectly;
- Not going within a certain distance of the victim’s home or school;
- Not going within a specified distance of any school or other places that the victim, the victim’s siblings or other children frequent, such as shopping areas, leisure and social facilities, homes of childminders, family or friends;
- To live at a specified address, which is not that of the victim or any other household containing children;
- To report to a named police station on specific days of the week at specific times;
- To obey curfew as applied and to require suspects to present themselves to a police officer during the period of the curfew (eg, relating to school opening times);
- Not to use the internet or to refrain from visiting particular sites or engaging in communications via instant messenger.

Any conditions imposed should be justifiable and capable of being policed for compliance. The reasons for the conditions will need to be recorded, in accordance with local policy.
4.12.2 KEEPING THE VICTIM AND PARENT OR CARER INFORMED

Once a decision on bail has been made and before the suspect has actually been released, the investigating officer should contact the victim and parent or carer. The victim and parent or carer should be updated throughout the investigation and during the pre-trial period in accordance with *Office for Criminal Justice Reform (2005) The Code of Practice for Victims of Crime* and the Policing Pledge. In particular, they should be informed of any decision to charge and/or bail the suspect, including details of any bail conditions. A description of the conditions that have been placed on the suspect should be given to the victim and carer along with what action should be taken if the conditions are breached. Once a decision has been made to bail a suspect, the suspect’s release should not be delayed by difficulties in contacting the victim or their representative.

4.12.3 INFORMING THE SUSPECT OF NO FURTHER ACTION

Where it is decided that no further action (NFA) will be taken against a suspect, the person should be advised of that outcome in accordance with force policy. In particular, suspects should be advised to retain and preserve any documents or other evidence that supports their defence. This is necessary as the investigation could be resumed, for example, if any fresh evidence comes to light, or new or historic allegations are made which are relevant to the original investigation.

4.12.4 MAPPA AND MANAGING POTENTIALLY DANGEROUS PERSONS

Any investigation of child abuse must consider the continuing risk of significant harm posed to a specific child or children by a suspect. It may not be possible in the course of that investigation to satisfactorily resolve all such concerns. This is particularly relevant where a conviction cannot be obtained. Where an investigation is concluded and concerns exist about risks presented by a suspect, they must be referred to systems for managing MAPPA offenders and PDPs. For further information see 1.4.17 Managing Sexual Offenders and Violent Offenders, ACPO (2007) Guidance on Protecting the Public: Managing Sexual Offenders and Violent Offenders and Ministry of Justice (2009) MAPPA Guidance, Version 3.0.

CAIU staff will need to be familiar with local arrangements for bringing concerns about children to the attention of the appropriate force unit. Where continuing concerns exist about the risks posed by a suspect, the officer in the case or the key social worker should ascertain whether the suspect has any convictions for sexual or violent offences that would bring the person within the remit of MAPPA. Where such convictions do exist, the matter should be brought to the attention of the CAIU supervisor with a view to making formal referral of the offender to MAPPA. When such a referral is made, as a minimum, it must be supported by a summary of the recent investigation and the continuing concerns. Depending on the level and nature of risk posed by the offender, the officer in the case or key social worker may be invited to subsequent risk management meetings. Where the CAIU supervisor does not consider the matter is suitable for referral to MAPPA, a record should be made of the reasons why.

Where concerns exist but it is ascertained that the suspect does not fall within MAPPA, the matter must be brought to the attention of the CAIU supervisor to determine what action is appropriate. Such suspects may fall within the definition of a PDP. The statutory duties of the police, children’s social care and other agencies to prevent further serious harm and to protect children allow action to be taken to reduce the harm posed by PDPs.
4.13 PREPARING INFORMATION FOR THE CROWN PROSECUTION SERVICE

In order that the crown prosecutor can make an informed decision about a particular case, the police need to provide as much information as possible. This also assists in the successful prosecution of a case and can be used in the protection of the victim, and any other potential victims, when applying for a remand in custody and when informing the court regarding a sentencing decision. See also CPS (2009) Child Abuse – Guidance on Prosecuting Cases.

This information will not be readily available in some circumstances, but it should be passed to the CPS as soon as possible. The CPS must be updated of any change in circumstances.

Checklist 15: File Preparation

The CPS requires the following information:

- All relevant victim statements (including withdrawal statements, medical statements and transcripts of victim interviews, victim personal statements and any statement made on behalf of the victim);
- All relevant witness statements (including neighbours and other children);
- Case exhibits (including photographic evidence);
- Audio or visual recordings of victim, witness and defendant interviews;
- Any photographic, or CCTV evidence;
- Relevant police records, for example, pocket notebook entries, risk assessments recorded on forms, incident logs, custody records and recordings of 999 calls;
- Crime reports and intelligence relating to previous allegations including those against other victims, which may indicate potential similar fact evidence or be relevant for a bad character evidence application;
- Any past, current or proposed civil or family proceedings;
- Any previous convictions;
- Details of the victim’s injuries (medical, photographic and written);
- Description of the scene with any photographic evidence or relevant statements, including those from the first officer at the scene;
- Whether the defendant used a weapon;
- Whether the defendant made any threats before or has made any since the attack;
- Whether the defendant planned the offence;
- Details of any other children having regular contact with the defendant;
- Details of any suspected grooming activity by the defendant;
- Chances of the defendant offending again;
- Measures taken to protect the victim from the defendant, such as exercise of police protection powers;
- Whether the defendant, victim or witness requires an interpreter or intermediary;
- Names of any interpreters or intermediaries used during police interviews;
- Any requests by the defendant, victim or witness for an interpreter of the same sex or of a particular ethnic group, political orientation or affiliation;
- Views of the officer, parent or carer and child (where appropriate) regarding appropriate special measures;
- Whether there is a need for an early special measures meeting with the CPS in addition to an early special measures discussion;
- Any witness needs in connection with going to court (eg, special measures or an intermediary) and, where applicable, information to support a special measures application;
When the CPS has the appropriate information available it enables the court to make a range of orders including Foreign Travel Orders, SOPOs and RSHOs. For details about these orders and how to apply for them, see ACPO (2007) Guidance on Protecting the Public: Managing Sexual Offenders and Violent Offenders.

4.14 PREPARING FOR A CHILD TO GIVE EVIDENCE AT COURT

4.14.1 Pre-Trial Therapy for Child Witnesses

It is a fundamental aspect of CPS policy that the best interests of the child are paramount when deciding whether, when and in what form therapeutic help is given. This is reflected in the multi-agency guidance Home Office, CPS and Department of Health (2001) Provision of Therapy for Child Witnesses Prior to a Criminal Trial: Practice Guidance.

Concern has been expressed that witnesses, and in particular child witnesses, have been denied therapy pending the outcome of a criminal trial for fear that their evidence could be tainted and the prosecution lost. A child must not be prevented from having therapy before a criminal trial if this would be in the best interests of the child, even if this leads to the prosecution being halted.

Whether a child should receive therapy before the criminal trial is not a decision for the police or the CPS. Such decisions can only be taken by all of the professionals from the agencies responsible for the welfare of the child, in consultation with the child’s carers and the child themselves, if the child is of sufficient age and understanding.
Both childcare professionals and police investigators have a mutual interest in ensuring that child witnesses who receive therapy prior to a criminal trial are regarded as witnesses who are able to give reliable testimony. The following matters are relevant:

- The wish expressed by many child victims to see their abuser convicted and punished;
- The wider public interest in ensuring that abusers are brought to justice to prevent further abuse;
- The entitlement of all accused persons to a fair trial.

While some forms of therapy may undermine the evidence given by the witness, this will not automatically be the case. The CPS will advise on the likely impact on the evidence of the child receiving therapy. Officers should refer to any locally agreed protocols and ensure that the CPS is fully informed of any pre-trial therapy provided or intended to be provided to a child.

4.14.2 SUPPORTING A CHILD AND PREPARING THEM FOR COURT

Probation Services Victim Services supports victims after an offender has received a custodial sentence of twelve months or more. In addition to the general support available to all witnesses and victims, specialist support and advice services are available for victims and survivors of child abuse and sexual violence, and non-abusing parents or carers (see 1.4.20 Rape, Sexual Activity and Pregnancy of a Child). The Survivors Trust (see http://www.thesurvivorstrust.org) is an umbrella agency for a number of sexual violence and abuse support services in the UK. They offer a range of support including ISVAs and therapeutic services for victims. There are also specific services aimed at children, such as the NSPCC Child Witness project. Achieving Best Evidence, Appendix F sets out national standards for preparation of young witnesses.

Witness Care Units

Witness Care Units (WCUs) are staffed by Witness Care Officers (WCOs) who act as the single point of contact for victims and witnesses. They provide information on the progress of cases and support tailored to the needs of the individual. This requires investigating officers to provide an assessment of the witness’s needs, eg, childcare, transport and other practical issues. This assessment is usually made at the same time as any statement or interview.

In some serious and sensitive cases, for example, those involving sexual offences, domestic abuse and cases involving a death, it is usually more appropriate for a specialist police officer (eg, a domestic abuse officer or CAIU officer) to remain as the single point of contact for the victim and, possibly, other witnesses. Local protocols between the CPS and the police should exist which set out the roles and responsibilities of the police and the WCOs in these cases.

Victim Support and the Witness Service

Victim Support (VS) and the Witness Service should be engaged, independently of the investigation, to prepare a child to give evidence at court. Some areas have a specialist Young Witness Service.
NSPCC (2003) *The Young Witness Pack* should be made available to children and their parents or carers to assist in preparing children for court. This pack contains the following booklets:

- **Let’s Get Ready for Court** – for children aged 5 to 9 years;
- **Tell Me More about Court** – for children and young people aged 10 to 15 years;
- **Inside a Courtroom** – a card model of a courtroom with slot-in characters for use with younger witnesses;
- **Going to Court** – information and advice for crown court witnesses aged 13 to 17 years;
- **Young Witnesses at the Magistrates’ Court and the Youth Court** – for 9 to 17 year olds;
- **Screens in Court** – an information sheet for 9 to 17 year olds.

These booklets should be used interactively between the child and an adult who is not involved in the case but who has been trained to prepare and support young witnesses and is able to explain the legal framework. Ideally, VS and the Witness Service should undertake this work. They should be familiar with the basic rules of evidence and the dangers of inadvertently contaminating or otherwise discrediting the child’s evidence.

The NSPCC and ChildLine have also produced a DVD entitled *Giving Evidence – What’s it Really Like?* This is designed for children and young people aged between 10 and 17 years to view in the presence of a suitably trained adult. The CPS has produced two booklets: *Millie the Witness* (for children aged 5 to 9 years) and *Jerome: A Witness in Court* (for children aged 10 to 14 years). These are designed to be used interactively between the child and an adult.

Information for parents and carers of young witnesses is provided in *Office for Criminal Justice Reform (2008) Your Child is a Witness.*

Child victims and witnesses can benefit from visiting the court prior to the date of the trial so that they are familiar with the court and court processes and any fears they may have can be allayed. This is particularly useful where the child is to give evidence from a different room, via a live link. Officers should organise this with the Witness Service.

Where the child’s statement has been visually recorded, officers are also responsible for ensuring that the child witness is given an opportunity to refresh his or her memory before court proceedings. Ideally, this should be during the week before the trial, rather than on the day of the trial, so that the witness does not have to watch the recording twice in one day.

### 4.15 MEDIA STRATEGY

At the investigation stage, the investigating officer should be aware of the potential dangers of uncontrolled or inappropriate media reporting on future criminal proceedings, and the potential for comment leading to contempt of court from both the victim and their family and the accused and their family. Some cases that have attracted media attention have led the defence to suggest that the defendant is unable to have a fair trial because of the level and nature of media reporting. There are many legal restrictions governing what might be said to the media during the course of criminal and/or care proceedings, and there may be injunctions in force. The CPS can provide advice on these issues. See also *CPS (2005) Publicity and the Criminal Justice System: Protocol for working together: Chief Police Officers, Chief Crown Prosecutors and the Media,* at [http://www.cps.gov.uk/Publications/agencies/mediaprotocol.html](http://www.cps.gov.uk/Publications/agencies/mediaprotocol.html) which sets out what evidential material will be given to the media at which stage.
Whenever it is apparent that a particular case has attracted the interest of the media, advice should be sought from the force press office, or local equivalent, and a media strategy agreed. The strategy should involve participation from all other agencies concerned in the investigation, particularly children’s social care. It should ensure that agreed, consistent statements are issued by designated spokespersons and that staff in each agency have a clear line of referral. Victims and their families should be protected from the potential trauma that may be associated with media interest. Press releases must avoid identifying victims so that they may be shielded from media attention.

When officers respond to questions posed by the media, they should be guided by the following principles:

- The welfare of the child, including the protection of the child’s identity and that of any other children;
- Avoidance of further harm to children;
- Consideration for the child victim(s) and their families;
- Respect for the professional status of each agency involved;
- Need for the content to be informed and informative;
- Lawfulness;
- Potential for harm to future criminal proceedings;
- Need for the media to receive consistent messages from all agencies involved, including the message that abuse of children is taken seriously;
- Details of the support provided to victims who come forward;
- Consideration for the alleged offender(s) and their families.

MANAGEMENT ISSUES

- Ensuring that child abuse investigations focus on all sources of evidence in addition to the victim’s statement.
- Ensuring officers conduct early assessments to determine whether victims require special measures.
- Through the LSCB, developing guidance for all agencies in dealing with child witnesses so that the integrity of their evidence is preserved and the welfare of the child is not compromised.
- Providing training for officers undertaking child abuse investigations to equip them with the knowledge and confidence to question the views of other professionals, including doctors.
- Through the LSCB, supporting the training of sufficient medical practitioners and paediatricians to meet the recommendations of *Royal College of Paediatrics and Child Health and the Faculty of Forensic and Legal Medicine (2007) Guidelines on Paediatric Forensic Examinations in Relation to Possible Child Sexual Abuse.*
- Providing information and equipment to other agencies to improve the collection of evidence.
- Ensuring the existence of appropriate information-sharing protocols with local agencies. This is in reference to a protocol between the CPS, police and local authorities in the Exchange of Information in the Investigation and Prosecution of Child Abuse Cases see [http://www.cps.gov.uk/Publications/docs/protocol%20letter.pdf](http://www.cps.gov.uk/Publications/docs/protocol%20letter.pdf)
- Supervising investigative interviewing.
- Ensuring that specialist behavioural analysis and interviewing support has been considered.
- Ensuring that risks presented by released suspects are effectively managed.
- Supervising the custody process.
- Identifying risk prior to making decisions relating to police bail.
- Developing local systems to ensure that the victim and parent or carer are kept informed of issues concerning the investigation, and that any child protection processes are provided with appropriate support through the criminal justice process.
- Developing a generic media handling strategy or protocol with other agencies, particularly children’s social care.
PART TWO –
INVESTIGATING
COMPLEX CHILD ABUSE
Section 5
MANAGING A COMPLEX CHILD ABUSE INVESTIGATION

This section summarises the issues that the SIO should consider during the initial stages of managing a complex child abuse investigation. See also 1.4.9 Complex Child Abuse.

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5.1 MANAGEMENT OF THE INITIAL INVESTIGATION

It is not always obvious when the original complaint is made that a single allegation may become part of a complex child abuse investigation. All officers should consider this when providing the first response to child abuse allegations and responding operationally, so as to minimise any adverse impact on any potential future complex enquiry. The timing, coordination and extent of any arrests, potential victim or witness approaches, research enquiries (including with multi-agency partners) and evidential searches could, if not properly considered, have a detrimental affect on gathering evidence and, subsequently, on any prosecution (eg, by alerting suspects).

Having considered consulting multi-agency partners and identified the potential for an investigation, the SIO should scope the size and complexity of the enquiry and examine the options available to them. The need to assess the short, medium, and long-term impact of such an enquiry, and its potential to grow, is essential at this stage of the process. The SIO should also take into account the confidentiality of the information under investigation and the possibility of any compromise in relation to the seizure of documents and exhibits at a later stage. The initial exchange of information should, where possible, be on a confidential ‘need-to-know’ basis only. Equally, the possible future involvement of other police forces or partner agencies should be considered, as the nature of these types of offences means that they have the propensity to cross police and agency jurisdictional boundaries (see 2.18 Cross-Border and International Investigations).

The SIO should explain why a particular investigation is considered to be complex. This should be based on the factors discussed in this document and recorded at the beginning of the police file (see 5.2 Scoping the Potential Scale and Nature of the Investigation).

In any complex investigation, early consideration should be given to using the Home Office Large Major Enquiry System (HOLMES) and to establish a Major Incident Room (MIR) as outlined in ACPO/ACPO (2005) Guidance on Major Incident Room Standardised Administrative Procedures (MIRSAP).

5.2 SCOPING THE POTENTIAL SCALE AND NATURE OF THE INVESTIGATION

In scoping the potential scale and nature of the investigation, the SIO should consider the following issues:

- Number of potential allegations currently highlighted.
- Seriousness and type of allegations.
- Potential for the investigation to transcend divisional and police force boundaries and even international jurisdictions.
- Number and type of scenes or locations identified (eg, homes, premises or institutions referred to).
- Number and identities of potential victims (and any special needs).
- Number and identities of potential witnesses (and any special needs).
- Time parameters of concern including dates of alleged offences and length of time between the offences and the report (sometimes referred to as allegations of historical abuse, see 1.4.15 Historical Child Abuse).
- Number and identities of potential suspects.
- Potential for the number of victims, witnesses, locations, scenes or suspects to increase.
- Dynamic risk assessment of suspect’s current access to children (see 1.3 Identifying, Assessing and Managing Risk).
- Dynamic risk assessment regarding vulnerability of any potential victims or witnesses (see 1.3 Identifying, Assessing and Managing Risk).
- Securing and retaining documents (eg, from children’s social care, institutions).
- Potential for media interest and its impact on the investigation (see 4.15 Media Strategy).
- Whether a community impact assessment is required (see 1.10.2 Community Impact Assessments) and/or consultation with an independent advisory group. This could be, for example, because of the impact of information about the offence and/or offender(s) becoming available to the public or where the investigation is linked to a particular faith group, see 1.4.16 Honour-Based Violence and other Illegitimate Justifications for Abuse).
- Whether the critical incident policy should be invoked, see 1.10.1 Critical Incidents and ACPO (2007) Practice Advice on Critical Incident Management.
- Potential for parallel care and/or family proceedings and disclosure that may be sought by parties in those proceedings (see 3.4.5 Sharing Information in Family Proceedings).
- Provision or funding of a multi-agency support strategy for victims and/or witnesses.
- Possible links to other investigations.
- Potential use of analysts to present the information, eg, association, timeline chronology.

At this initial stage it may be beneficial to consult SIOs who have undertaken these types of investigation to ascertain their views on approaches to take and lessons learned from successful and unsuccessful prosecutions. A comprehensive list of SIOs and the details of suspects relating to previous cases of institutionalised abuse of children is maintained by the NPIA in the Historical Child Abuse Database (HICAD) (see 1.4.9 Complex Child Abuse). The NPIA also holds a database of SIOs with experience of a range of major crime investigations. These include complex child abuse enquiries such as historical institutional abuse or cases of criminal sexual offender networks using the internet or other organisations, eg, football clubs and associations for children and young people. If the investigation relates to child abuse images and the internet to facilitate the offending, contact should be made with CEOP (see 1.4.2 Indecent Images of Children). The CEOP Specialist Operations and Behavioural Analysis Units can assist with the interviewing and risk assessment of suspects. The SIO should also liaise, at an early stage and at an appropriate level, with the CPS to ascertain their views on the scope of any proposed investigation so as to focus operational resources appropriately.
5.3 MAJOR INVESTIGATIONS AND TERMS OF REFERENCE

Having identified the potential scale and nature of the investigation, the SIO should establish whether there are reasonable grounds to justify a major enquiry and whether there is sufficient information to require the use of HOLMES. In the majority of instances a business case will need to be made for approval by chief officers. This should highlight the purpose of the enquiry, the resources required and the proposed terms of reference on which to focus the investigation. The terms of reference will need to be framed in such a way as to enable them to be dynamic but also flexible and able to evolve with the enquiry. Difficulties arise where the terms of reference are too vague, consequently diluting the focus of the investigation and the allocation of often limited resources.

The terms of reference and focus of any investigation should be set out in the SIO’s policy file at an early stage. It may assist to include in the rationale for the terms of reference that, under the ECHR, children and adults have a right not to suffer any inhuman or degrading treatment (Article 3) and also have a right to respect for family life (Article 8). Suspects have a right to a fair trial (Article 6). The terms of reference should state, therefore, that the investigation will be a ‘search for the truth’ with the victim and those suspected of offences being entitled to an effective investigation. The terms of reference may also include details of the following:

- Involvement of other agencies in the investigation;
- Use of HOLMES;
- Setting time parameters for the offences covered by the investigation, including use of a timeline;
- Geographical area;
- Impact on other forces and any arrangements for joint working with other forces;
- Identifying phases of the investigation (eg, research, identifying groups of potential suspects and groups of potential victims and witnesses, including relevant times and locations);
- The setting up of a Gold Group, see 6.1 Gold Group (Overarching Policy Group);
- Early nomination of a dedicated CPS reviewing lawyer;
- Reassurance and support to those not necessarily directly affected by allegations, such as parents or carers;
- Specific details of decisions as to which alleged offences are or are not to be investigated along with the rationale for them, eg, not to investigate minor physical or emotional abuse but will investigate sexual abuse. These decisions need to be recorded.


5.4 STAFFING ISSUES

Managing staffing issues is a key initial consideration in planning investigations of complex child abuse, and includes the selection, welfare and training of staff. The issues discussed in 5.4.1 Selection to 5.4.3 Training are also equally relevant and applicable to multi-agency partners. See also 1.7 General Staffing Issues.
5.4.1 SELECTION

The success of an investigation relies heavily on the commitment and quality of the staff involved, both in the frontline investigative teams and the support roles that are established as part of an MIR. Staff selection is of paramount importance to ensure that there is an appropriate mix and breadth of skills and abilities readily available. These types of enquiries have multiple victims and suspects so the HOLMES MIR and enquiry teams need to be adequately resourced and **ACPO/ACPOS (2005) Guidance on Major Incident Room Standardised Administrative Procedures (MIRSAP)** must be adhered to. The commitment of ACPO is essential. The following factors should be considered when selecting staff:

- The SIO should be accredited at PIP Level 3;
- Their investigative skills and abilities (eg, the need for a tactical interview adviser to advise on suspect and witness interview strategies, staff experienced or trained in interviewing suspected sexual offenders);
- They have knowledge and training relating to PEACE, suspect interviewing and investigative interviewing;
- They have received training relating to Achieving Best Evidence;
- They have undertaken training relating to the investigation of sexual offences (see **ACPO/CPS (2009) Guidance on Investigating and Prosecuting Rape**);
- Tenure (if applicable);
- Welfare audit of potential staff (eg, any particular vulnerability of individuals) (see also 5.4.2 Welfare);
- Their previous experience in child abuse investigations;
- Other equality and diversity issues (eg, if victims have expressed a preference to be interviewed by an officer of a particular sex);
- Roles of partner agencies in the investigation and whether they have powers under the Children Act 1989.

These considerations should support efforts to raise the profile and quality of staff associated with such important and complex enquiries.

5.4.2 WELFARE

The welfare of all staff involved in complex and long-standing enquiries should be a priority for SIOs when establishing the investigation team. Force systems and procedures should include compulsory counselling and ad hoc team briefings. Whichever approach is adopted, consideration should be given to the following:

- The duty of care to staff involved in the investigation;
- Linkage with force occupational health provision (eg, psychological support interviews);
- Exit strategy for staff.

For further information see **1.7.2 Staff Welfare and Support**.
5.4.3 TRAINING

Complex child abuse enquiries can differ considerably from the normal major investigations undertaken by forces. In some cases defence barristers will seek an explanation of specific and focused training associated with enquiries of this nature.

In a number of enquiries, shortfalls in skills and experience have been addressed by introducing or offering dedicated in-house training from expert practitioners in the field of child abuse investigations. The provision of training days is a common feature of most enquiries, addressing identified needs and forging greater understanding of multi-agency partnerships.

In developing a training package for such an investigation, the SIO may wish to consider some of the following issues for all staff involved, including multi-agency staff in appropriate areas:

- Induction training;
- Dedicated training days;
- Multi-agency training;
- Specialist training, eg, family witness liaison (and particular issues where the suspect is in the family) and investigative interviewing to a developmental level;
- Training in accordance with Achieving Best Evidence.

CEOP provides training which may be relevant in particular enquiries. These include courses on using the Sexual Offences Act 2003 to protect children from harm, strategies for investigating serious sexual crimes against children and interviewing child sexual offenders. Details are available at http://www.ceop.police.uk

5.5 POTENTIAL FOR CIVIL LITIGATION

Once a case has been through the Criminal Judicial process, the demands placed on the enquiry after this, through civil litigation can be potentially more acute. The investigation team should include a dedicated point of contact for enquiries relating to civil litigation.

5.6 EXIT STRATEGY

As the enquiry evolves, the SIO should, at an appropriate juncture, consider the development of an exit strategy. This should be in consultation with the CPS. The diverse nature of this type of investigation means that there is limited opportunity to recommend a generic approach. However, the following should be considered:

- An exit strategy is joint agency managed;
- There is a gradual scale down of operations;
- Management of future allegations;
- The approach to pending court cases;
- Document storage;
- Civil litigation (see 5.5 Potential for Civil Litigation);
- Management of the media (see 4.15 Media Strategy);
- Ongoing welfare of the witnesses (see 4.14 Preparing for a Child To Give Evidence at Court).
Complex child abuse requires time-consuming, resource intensive and costly investigation. The competing demands placed upon chief officers will require regular assessments to be made to justify continuing the enquiry. The introduction of an exit strategy at the earliest opportunity will, therefore, facilitate this scrutiny.

The success of a child abuse investigation should be measured in a number of ways. These include:

- The number of children protected;
- The number of incidents where abuse has been stopped;
- The number of perpetrators arrested, charged and convicted;
- The number of people barred from working in a position of trust with children;
- The success of family and civil proceedings in preventing perpetrators having access to children, as well as providing compensation to the victims of abuse.

See also 1.13 Monitoring, Evaluating and Learning Lessons and 3.6 Serious Case Reviews and Individual Management Reviews.

5.7 REVIEWS

Periodically, the SIO may wish to consider a major crime review. ACPO/ACPOS (2005) Guidance on Major Incident Room Standardised Administrative Procedures (MIRSAP) details how such reviews should be undertaken. However, in some investigations the depth and time constraints of the review process may be unrealistic. There is clearly a need to develop a reviewing process which accommodates the ethos of a MIRSAP major crime review but recognises the intricacies of enquiries of this nature. Any review process should be independent and multi-agency. On a number of occasions, consideration has been given to the requirement for a serious case review in consultation with the host force Gold Group as suggested in Working Together, Chapter 8. In some cases it may be necessary to consider whether a serious case review is required. This should be undertaken in consultation with the Gold Group (see 3.6 Serious Case Reviews and Individual Management Reviews).
Section 6

COMPLEX CHILD ABUSE: INVESTIGATIVE STRUCTURE AND MULTI-AGENCY WORKING

This section includes details of the investigative management structure which can assist in the management of investigations into complex child abuse. It also describes a number of potential roles in the investigation process that children’s social care and the CPS can undertake. For general information about multi-agency working in the context of investigating child abuse, see 3 Police Responses and Multi-Agency Working To Safeguard Children and Working Together.

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6.1 GOLD GROUP (OVERARCHING POLICY GROUP)

The function of this group is to set policy and strategy and secure the funding and resourcing necessary for the investigation. This group can include senior staff from some or all of the following agencies (depending on their respective involvement):

- Police (chief officer) (chair);
- Senior investigating officer;
- Local authority (chief executive);
- Children’s services and children’s social care (director level);
- Health (director level);
- CPS (unit head);
- Non-government organisations, eg, Barnardos, NSPCC;
- Legal (police and local authority solicitor);
- Media and public relations (all agencies);
- LSCB (chair or senior member of board);
- MAPPA agencies as appropriate (eg, probation).

If there is the possibility of any national consequences arising from the investigation, consideration should be given to whether national agencies should be involved in the Gold group, eg, ACPO, CEOP, CPS Policy, Her Majesty’s Inspectorate of Constabulary (HMIC), NPIA, SOCA or INTERPOL.

The frequency of meetings for a group of this nature will depend on the individual circumstances of the case but may range between bi-monthly and six monthly. During the evolution of the investigation, membership of this group may vary to include other agencies on a case-dependent basis. Detailed minutes of the meetings, the actions raised and the results of previous actions raised should be recorded and retained.

6.2 SILVER GROUP (OPERATIONAL GROUP)

The function of this group is to implement the policies and strategies of the Gold group and give a practitioner focus and perspective to the investigation. The group comprises multi-agency representatives of equivalent rank to:

- Detective superintendent;
- SIO or deputy SIO;
- Lead social worker;
- Local authority designated officer (LADO) (see 1.4.3 Allegations against People Who Work with Children);
- HOLMES manager;
- CPS reviewing lawyer.

The frequency of meetings will vary but will be more frequent than the Gold group. As with the Gold group, membership of this group will vary and additional representatives will attend on a case-dependent basis. Detailed minutes of these meetings, the actions raised and the results of previous actions raised should be recorded and retained.

6.3 INTERNAL BRIEFINGS

Regular internal briefings and operational team meetings should be documented. Actions can then be generated from the minutes. These minutes and any briefing documents or notes should be retained, recorded on HOLMES and accessible to the team.
6.4 MULTI-AGENCY WORKING

A clear understanding of the expectation and capability of each partner is essential to the development of a joint-working relationship. Establishing protocols is fundamental to creating a positive working environment and demonstrating a commitment to support the often diverse perspectives of the agencies involved. Examples of such protocols are available from http://www.ceop.police.uk/publications/acpoguidancespecimendocs.asp

The involvement of the respective agencies and the resources they contribute will vary with each enquiry. In some instances it will merely involve the establishment of information-sharing protocols. The roles and functions need to be clearly identified and developed in order to establish a common understanding between the main partner agencies. If staff from these agencies are part of the investigation team, they should be included in briefings and meetings whenever appropriate (see 6.3 Internal Briefings). The early establishment of such protocols or working agreements will aid cooperation and strengthen the investigation process.

6.5 INITIAL RISK ASSESSMENT

Establishing any current risk to children or other vulnerable persons who may be linked to the proposed investigation should be a priority. Consideration should also be given to the impact that the investigation may have on the suspect, who may face suspension from employment, media coverage and a criminal prosecution. Care should be taken to ensure that, wherever possible, steps are taken to reduce the adverse impact that an investigation of this nature could have on the suspect’s family. The use of unmarked police vehicles, referring suspects’ families to support agencies and measured media releases are practical considerations that should not have a detrimental impact on the effectiveness of the enquiry. The overriding principle in any investigation or other police action is the welfare of the child. Consideration should, therefore, be given to the balance between the rights of the victim and the public and those of the suspect. Where appropriate, any decision must be documented.

Various approaches to risk assessment are used nationally. The following factors should be considered when the risk relates to a complex child abuse investigation (in addition to those factors listed in 1.3.1 Established Risk Factors).

- Whether the suspect is still in contact with victim the and/or witnesses;
- Whether the victim and/or witnesses have or may attempt to identify or trace the suspect(s);
- Whether the suspect is operating within the care services and/or is involved with other child-focused organisations;
- The suspect’s points of contact with children through work or domestic situations;
- The requirement for early action due to the risk of harm to others by the suspect;
- The possibility or likelihood of self-harm or suicide by the suspect, victim or witnesses, and consideration of related force procedures, eg custody or bail.

To establish this information, checks will need to be made of all available intelligence sources and the information systems of the police and other agencies (eg, see 1.9.6 Information and Intelligence Checks). These factors may indicate a need to establish early information exchange with other agencies or organisations such as the suspect’s employer (possibly prior to the provision of a statement). Consideration should also be given to consulting the CEOP BAU for advice on the risk assessment of child sexual offenders.
Securing and preserving evidence early on is of paramount importance in any investigation, and especially so in complex child abuse cases. Evidence may be available from children’s social care, education and health files, and administrative documents for institutions. For example, logbooks, punishment books, absconders books, medical records and associated documents are key items for consideration. For details on the disclosure of information see:

- Criminal Procedure and Investigations Act 1996 (CPIA) and the Code of Practice under section 23 of the 1996 Act;
- Children Act 2004;

See also 3.4 Multi-Agency Information Sharing, Intelligence Gathering and Decision Making.

Three options have been adopted in previous enquiries in relation to complex child abuse cases where children’s social care held files on victims and witnesses. These are described in 6.6.1 Option 1: Police Retention of Files, 6.6.2 Option 2: Children’s Social Care Retention of Files and 6.6.3 Option 3: Children’s Social Care ‘Embassy System’ Collocated in Police Premises. The choice of option should be based on an assessment of the benefits and disadvantages of each in the context of the particular enquiry and the established joint-agency working relationships. Whichever option is chosen, those viewing the files should have sufficient information to ascertain material which may be relevant. Access to details of allegations from a complainant’s statements reduces the possibility of key information being overlooked because its relevance was not apparent.

It is important that the existence and extent of third-party material is identified at as early a stage in the investigation as possible. The CPS should be involved in considering third-party material issues at the pre-charge stage wherever possible.

The subsections below deal with children’s social care in particular, but other agencies may have information which is relevant to an investigation. Counselling, for example, is dealt with later in (8.7 Counselling and Therapy). Counsellors are third parties and seeking information from them will normally be a reasonable line of enquiry. The subject’s consent will usually be required to obtain such information.

**6.6.1 OPTION 1: POLICE RETENTION OF FILES**

This is where the police view files (either alone or in conjunction with trained social care services personnel) and either retain the files or copy the relevant areas.
In both instances the files will be subject to full disclosure, and the issue of retention and storage will need to be agreed between the police and children’s social care (including consideration of **ACPO (2006) Guidance on the Management of Police Information** and related national guidance). However, only the joint viewing will provide specialised insight into the procedures of the care institution and instances of deviation. The desire of many SIOs to be in possession of all material and information is addressed in this option as it allows regular review and research of the retained and secured files. Consideration of the potential logistical implications of pursuing this option, particularly if the enquiry expands substantially, is a key element in any decision to adopt this approach.

6.6.2 OPTION 2: CHILDREN’S SOCIAL CARE RETENTION OF FILES

In this option, children’s social care view the files, provide the relevant information to the enquiry team and retain the files. In these circumstances only the areas highlighted by children’s social care staff are subject to disclosure by the police, but other material in the files may subsequently be subject to disclosure as third-party material. The storage and retention of files remains solely the responsibility of children’s social care. This option places considerable trust and responsibility on the children’s social care members of the investigation, encouraging closer working practices and promoting a joint investigative training approach. Children’s social care need to be clear that the reason for them reviewing the files is to identify potential witnesses and seek corroboration including third-party reports and medical information. This process may identify additional offences. In many operations, comprehensive questionnaires have been devised for completion by children’s social care liaison officers. For a specimen questionnaire see [http://www.ceop.police.uk/publications/acpoguidancespecimendocs.asp](http://www.ceop.police.uk/publications/acpoguidancespecimendocs.asp)

6.6.3 OPTION 3: CHILDREN’S SOCIAL CARE ‘EMBASSY SYSTEM’ COLLOCATED IN POLICE PREMISES

Here children’s social care retain control of files and review files as in option 2, but dedicated children’s social care staff allocated to the enquiry have their own office or area (‘embassy’) within the MIR. The files there can be securely stored and are accessible via children’s social care staff.

Any of the options identified can be used. Police forces and local authorities should be encouraged to agree a protocol to identify the preferred option for handling material. For details of a national template protocol between ACPO, the CPS, the Local Government Association and the Home Office, see [http://www.cps.gov.uk/Publications/agencies/protocolletter.html](http://www.cps.gov.uk/Publications/agencies/protocolletter.html)

Whenever the police are given access to the information, that information must be revealed to the CPS in accordance with the CPIA. An assessment will need to be made in respect of each element of the information as to whether it is to be regarded as sensitive. Material is not sensitive just because it is held by children’s social care or a third party, and investigators must consider whether the material involved is sensitive in accordance with **CPS (2005) Disclosure Manual**, Chapter 8.

Where children’s social care maintain control of the information, the CPS and the defence may request information from them and they may be summoned to produce documents at court.
6.7 JOINT INVESTIGATION

In all instances the police retain the lead role in criminal investigations of this nature (see 4.1 Police Responsibility for Criminal Investigation). If, however, individual circumstances warrant it, children’s social care can be engaged, using appropriately trained staff, as part of the interview teams. The development of a joint investigation capability is in line with Working Together, which supports efforts to achieve a fully integrated approach. In some enquiries NSPCC child protection officers or other independent practitioners with experience have been used, with the agreement of children’s social care, to fulfil the role of children’s social care staff where there are numerous victims involving several areas. Instead of each area providing resources individually for the enquiry, the NSPCC staff or other independent practitioners are a less resource-intensive solution with the additional benefits of continuity and consistency of approach. If, as has been the case in some historical institutional abuse enquiries, the victims initiate civil action for compensation against children’s social care or local authorities, there is the added advantage of these staff being independent and perhaps not negatively viewed by the aggrieved parties. If this option is taken up, there will, of necessity, be a documented agreement between the NSPCC or other independent practitioners and respective children’s social care outlining the roles and responsibilities. For further information see NSPCC (2008) Services for Children and Young People: Practice Guidance, section 6.

6.8 CROWN PROSECUTION SERVICE

The CPS role in charging means that prosecutors work closely with the police from the earliest stages of an investigation, influencing how cases will be progressed. There is a facility for the CPS to carry out pre-trial witness interviews prior to making a charging decision. See CPS (2008) Pre-Trial Witness Interviews: Guidance for Prosecutors.

An effective and professional investigation is essential to the success of any prosecution. Most investigations will require a protocol to be developed with the CPS. The core function of such a protocol is to outline and explain the following:

- Prosecution policy;
- NFA policy;
- Designated CPS solicitor or counsel;
- Participation in tiers of management;
- The provision of advice about the legal or evidential implications of issues arising during the investigation.

The involvement of CPS lawyers on Gold and Silver groups is normally determined on a case-by-case basis, see 6.1 Gold Group (Overarching Policy Group) and 6.2 Silver Group (Operational Group).
Section 7
COMPLEX CHILD ABUSE: FURTHER INVESTIGATIVE DEVELOPMENT AND EVIDENCE GATHERING

This section includes details of the further development of the investigative process and evidence gathering in a complex child abuse investigation. It should be read in conjunction with Section 4 Further Investigation and other Police Action and ACPO (2005) Practice Advice on Core Investigative Doctrine.

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7.1 POTENTIAL WITNESS IDENTIFICATION

Some complex abuse investigations involve organisations, groups, homes and institutions that have long since ceased to exist. Identifying potential witnesses and offenders can be difficult because of a lack of accessible information from records and files from the relevant period.

At an early stage of the enquiry, the SIO should clearly establish the method of identification and approach to potential witnesses. The term ‘trawling’ has occasionally been used by the media and others to imply a police bias and an unprofessional approach to identifying additional victims or witnesses to historical allegations of abuse in an institutional setting. An evidence, or intelligence-led, approach should avoid any suggestion of trawling for victims or witnesses in an illogical, illegal or unprofessional manner. The rationale and methods adopted in relation to witness or victim identification should be clearly documented in the SIO’s policy file. A witness/victim approach protocol should be used and understood by all those working on the enquiry.

Processes have been developed in previous enquiries to locate and identify potential witnesses. These processes, which should be carefully considered in light of the specific circumstances of each case and appropriateness for an investigation, are set out and briefly described in the subsections below. All of these approaches are extensions of any intelligence or evidence-led means of identifying witnesses, where potential witnesses are contacted because they may have relevant information based on the following:

- Specifically mentioned or described by another witness or intelligence source;
- From the circumstances, including location, relationship, time period and environment;
- From other information (e.g., phone records, files).

7.1.1 USING THE MEDIA TO CONTACT VICTIMS AND WITNESSES

The media can provide a valuable source of police contact with the public and has many advantages. For example, it reaches a wide target audience in a short time. There are also potential disadvantages, e.g., media investigative interference, alerting suspects, introducing adverse time constraints, unhelpful journalistic bias, subsequent negative impact on the admissibility of evidence. A media strategy should, therefore, be drawn up and documented (see 4.15 Media Strategy). This may need to be formulated and approved in conjunction with all multi-agency partners to ensure a consistent message. The police, who have primacy for any criminal investigation, can be the initial point of contact and the lead in any subsequent media contact (in conjunction with the press offices in partner agencies).

The SIO needs to be mindful of confidentiality and be sure that, prior to a media presentation, any evidence in the form of institutional records or individual files has been secured and preserved. Consideration may also be given to the targeting of individual media releases to specific audiences or geographical areas. Experience has shown that any media release identifying the existence of this type of investigation stimulates a significant increase in the number of reports and referrals to the enquiry. The SIO should, therefore, consider providing additional resources after such a release. This factor also applies after a trial is concluded. A helpline may facilitate the exchange of information (see 7.1.2 Telephone Response Lines).
**7.1.2 TELEPHONE RESPONSE LINES**

This option is an additional method of contact for potential witnesses, particularly if there has been media interest or an appeal for information. The SIO should ensure that when initial contact comes from members of the public, those staff receiving the calls adopt a documented systematic and consistent approach. Telephone response lines could, for example, be covered by police, children’s social care or a suitable support agency, depending on the target audience and their respective needs and wishes, eg, callers may need support or counselling, rather than to report a crime. Consideration should be given to using Crimestoppers for those who provide information but want to remain anonymous (see [http://www.crimestoppers-uk.org/](http://www.crimestoppers-uk.org/)).

Careful consideration should be given to the questions asked by the enquiry team and the information that they divulge to callers. If a media appeal is being considered where witnesses may telephone a given number, children’s social care and a suitable support agency should be contacted to ascertain if they are willing to provide a telephone answering service during the same period for those who may be reluctant to speak to the police, but are able or need to speak to these other parties.

**7.1.3 DIP SAMPLING**

This is an investigative option. It has been used in previous enquiries to assist in the scoping process in the search for witnesses who may be able to corroborate a victim’s account or provide information in support of a suspect. Concerns regarding the use of this method should be allayed by introducing safeguards. These include recording the rationale for approaches in the SIO’s policy file, having a clear witness/victim approach protocol, accurately recording conversations with potential witnesses and victims (electronically recorded at the earliest practical stage) and consulting the CPS (with regards to the use of these methods).

Dip sampling has been used in previous enquiries where there have been a vast number of possible witnesses to the conduct of a person over a number of years. The sheer number of persons would tie up finite police and children’s social care resources for an inordinate length of time if they were all to be seen personally. One example would be of a schoolteacher in relation to whom there are allegations of abuse by former pupils who suggest the abuse has gone on for many years. Rather than interview every pupil of the teacher over the last twenty years, a decision would be made to approach and/or interview ten per cent or fifty of the total number of pupils in the first instance, from across the spectrum of years and ages to ascertain the initial indications. Then, depending on these results, a decision could be made, on an incremental or staged basis, to approach and interview further pupils or make no further enquiries within that line of enquiry. The approaches may be focused on specific groups, eg, age, time period, or randomly. This approach, if adopted with the necessary safeguards, could support comments made by the suspect as well as a victim, and supports the police duty to pursue all reasonable lines of enquiry in the search for the truth. The results of dip sampling are one of the factors the CPS would take into consideration when making a decision regarding any prosecution.
If it is not practical to see everyone personally, dip sampling of large numbers using carefully worded letters may be an option. Consideration should be given to using a profile of potential victims (e.g., age, sex, circumstances) when determining the section of the sample on which to focus. Although, ideally, personal visits would usually be the preferred option, this may not always be practical or proportionate. Any rationale for a preferred method should be documented for future reference in the SIO’s policy file. A negative aspect of dip sampling is that witnesses, victims or other suspects may be missed. However, with limited resources, these are aspects that would be considered in the risk assessment when explaining the response in relation to proportionality, legality, necessity and accountability in accordance with the HRA.

### 7.1.4 WITNESS NETWORKING

In instances where records and registers are not available from which to identify potential witnesses, there may be a requirement to resort to ‘witness networking’ to identify potential and actual witnesses. The use of photographs, obtained from whatever source and from the period under investigation, is an integral part of this process. The SIO may wish to consider this option when accessing local authority archives. In general, photographs should not be shown to the witness until completion of the initial statement of complaint. Although the enquiry team might ask witnesses about the whereabouts of other potential witnesses, they should discourage them from speaking to other witnesses on behalf of the police.

### 7.1.5 USE OF WEBSITES, EMAILS AND SOCIAL NETWORKING SITES

Creating a website and email address provides an alternative way for potential witnesses to make contact. Relevant information can also be sought from social-networking websites and other open-source options (see 1.9.6 Information and Intelligence Checks). If enquiries are to be non-attributable to the police, there need to be appropriate safeguards in place to prevent compromising the police investigation.

### 7.2 WITNESS/VICTIM APPROACH AND PROTOCOL

*Achieving Best Evidence* (paragraphs 2.29, 3.17, 3.18, 4.16, 4.17 in particular) provides general guidance on the initial contact with victims and witnesses. This will form the basis for the approach with the option for specific operations to have a bespoke, documented victim-approach protocol. It is essential that a witness/victim approach protocol is designed for each specific enquiry, that it is documented and accepted by the SIO in their policy file, and adopted and understood by all those working on the investigation. A specimen protocol is at [http://www.ceop.gov.uk/publications/specimen.asp](http://www.ceop.gov.uk/publications/specimen.asp). This subsection should be read in conjunction with 7.1 Potential Witness Identification.

The protocol should be written with consideration for the most appropriate method of contact for the respective witnesses featured in the enquiry, see 7.2.1 Letter Drop (to be read in conjunction with 7.1.3 Dip Sampling), 7.2.2 Cold Call, 7.1.2 Telephone Response Lines and 7.2.3 Contact by the Force Where the Victim Lives. A method should only be adopted if it is appropriate and after other partners including the CPS have been consulted. Each enquiry will have unique aspects that may require a bespoke protocol.
The initial contact between investigating officers and the potential witness in such enquiries is of fundamental importance. It is at this stage that the rapport between the witness and investigator is established. Of primary concern to the SIO during this phase of the enquiry is the correct identification and subsequent contact with potential witnesses, many of whom may not have disclosed the abuse to those closest to them. The style of this first contact differs from enquiry to enquiry. Irrespective of the method of contact adopted, the management of the expectation of potential witnesses should be an important consideration. Every effort should be made to provide an honest appraisal of the likely consequence of making a report and the potential timescale of the enquiry. The method of contact used will depend on the nature of the enquiry. Any approach to potential victims or witnesses should include contact details for access to support, including local specialist services, ISVAs and national helplines (see 1.4.20 Rape, Sexual Activity and Pregnancy of a Child). For further information about such services, see http://www.thesurvivorstrust.org

7.2.1 LETTER DROP

This should be read in conjunction with 7.1.3 Dip Sampling. This method of contact is a highly cost-effective approach to tracing potential witnesses of abuse. A large number of potential witnesses can be contacted in a relatively short period of time.

Some objections have been raised and these should be considered if choosing this approach. There are a number of issues that the SIO may wish to consider:

- Whether contact with the intended recipient is guaranteed;
- Potential for breach of confidentiality;
- Likely statistical percentage of response;
- Impersonal nature of contact;
- Potential welfare of the witness;
- Presumed literacy competence of the recipient;
- Honesty of response;
- Limited information in the letter sufficient to identify and initiate contact – supporting the fact that this is intelligence and evidence-led;
- Significant self-harm as a result;
- Suitable safeguards in relation to risks of adopting this process, eg, by providing contact details for support services.

If a letter is sent, the date, address and method of delivery should be recorded and a copy of each individual letter retained.

7.2.2 COLD CALL

Cold call contact is perceived to remove many of the negative factors associated with the letter drop method. This approach is expensive and resource intensive. However, it is a victim-focused approach and, ideally, the best method to use. The SIO should consider carrying out a risk assessment of the potential witness because of their vulnerability and officer safety issues, see 7.3 Further Risk Assessment.

The use of a victim/witness approach protocol will ensure a consistent approach but within certain parameters so that it can be adapted on a case-by-case basis to suit the individual circumstances. If the initial visit is a joint one by a police officer and a social care worker, this would enable the initial investigative and support functions to be initiated immediately.
7.2.3 CONTACT BY THE FORCE WHERE THE VICTIM LIVES

In general, this method of contacting potential witnesses will not be sufficient to ensure a consistent and intelligence and victim-led approach.

7.3 FURTHER RISK ASSESSMENT

As child sexual offenders tend to have a lifelong predilection for this type of offending, it is essential to research their career history and general background. This has to be balanced against the impact that such an action may have on the suspect’s personal life. These enquiries carry risks that need to be planned for, assessed and documented.

This type of investigation sometimes involves vulnerable witnesses, and the SIO should consider the likely opportunity for the defence to discredit a number of complainants in any trial process. There may also be difficulties in securing the attendance at court of such witnesses. The SIO should recognise the unique nature of the investigation when a length of time has elapsed since the alleged offences occurred, and the potential vulnerable nature of the victim(s). Careful consideration should be given to ensuring the integrity of their evidence, and a risk assessment should be made of the issues confronting the SIO.

The following points have been raised in past cases and should be included, as appropriate, in the risk-assessment process:

- The character, credibility and vulnerability of the accused (including any previous allegations);
- Relationship between the complainant and the accused, where the latter has acted in loco parentis;
- Exactly how the first account came to light and any subsequent accounts that affect credibility;
- The character, credibility, vulnerability and motivation of the complainant;
- Any previous allegations;
- Relationship between the complainant and the accused (eg, previous grievances);
- The motivation of a third party having influence over a complainant;
- Character and credibility of complainants, which may require careful consideration of records in the hands of third parties, for example, children’s social care.

In the case of multiple complainants consideration should be given to whether:

- There has been collusion in their accounts and if so when (and the possible reason for this);
- The complaints were solicited from different complainants by the same party;
- There are similarities between the complaints;
- There is any evidence which undermines corroboration.

If victims or witnesses have discussed the circumstances under investigation (either inadvertently or otherwise) the full details of this should be documented as soon as the police become aware of it, and disclosed as appropriate.
7.3.1 IMPACT ON OTHERS ASSOCIATED WITH WITNESSES, VICTIMS AND SUSPECTS

The impact on others associated with witnesses, victims and suspects should be a consideration in all investigations. For example, where victims have been identified and are part of a club or association, parents of other children may become concerned and contact the police. An approach to this issue should be agreed with other agencies, including the CPS and the club or association itself, to ensure that concerns are allayed without compromising the investigation, eg, via a letter or other communication (see the specimen letter at http://www.ceop.gov.uk/publications/specimen.asp

There are support groups that provide counselling and advice to those who have been affected by allegations of abuse involving persons close to them, such as family members, relatives and associates of witnesses, victims and suspects. Some specialist sexual violence and abuse support services may also be available locally, offering support for victims and others, including siblings and non-abusing parents or carers. Details of these support groups should be made available to those who may need them. Children’s social care also has a role in taking account of any impact on the victims and others.

For further information see http://www.thesurvivorstrust.org

7.3.2 OTHER INTERESTED PARTIES AND GROUPS

The SIO should be aware that there are a number of groups that may have an interest in investigations of this kind (either from the perspective of the victim or suspect). In some circumstances the concerns of such groups may need to be addressed without compromising the investigation (eg, any legal constraints may need to be considered relating to the timing and content of any communications).

7.4 FORENSIC STRATEGY

The ability to recover and examine DNA samples after the passage of considerable time may provide additional and valuable corroboration of complaints. Even though the alleged offences happened some time ago, there is no reason to routinely exclude medical or other forensic examinations of persons or potential scenes. The starting point should be to consider all options from the outset and then only discount them after careful consideration. The rationale for doing so should be documented in the forensic strategy. For further information see ACPO/CPS (2009) Guidance on Investigating and Prosecuting Rape. (See also 4.4 Forensic Medical Examinations.)

7.5 SUSPECT STRATEGY

Any suspect strategy should consider three time parameters in relation to what the suspect(s):

1. Were doing at the time of historical offence(s);
2. Are doing now;
3. Were doing in the intervening period.

It may be useful to consider the investigation as having reactive and proactive elements. The reactive element will look at the specific allegations in the first time parameter listed above, while the proactive element will consider the second and third time parameters (ie, what is the suspect currently doing and what did they do during the intervening period).
Such an investigative approach will help in producing a risk assessment regarding any current risk posed by the suspect (see 7.3 Further Risk Assessment).

The offences being investigated are, invariably, serious, indictable offences, committed against some of the most vulnerable members of society. The SIO should consider all proactive policing methods in their investigations.

The following aspects may also be appropriate:

- Reference to the VISOR database, see NPIA (2008) VISOR Standards;
- Use of RSHOs, SOPOs and Foreign Travel Orders, see ACPO (2007) Guidance on Protecting the Public: Managing Sexual Offenders and Violent Offenders.

7.5.1 ARREST STRATEGY IN COMPLEX CHILD ABUSE INVESTIGATIONS

The timing of the arrest and charging of offenders must take into consideration the opportunity to obtain all relevant information from files and potential witnesses. Invariably, a number of unrelated suspects will feature in the investigation. Some of these suspects will be active in childcare services, and the SIO will be under pressure to prioritise the response to these individuals. The SIO may find it beneficial to develop a prioritisation list, and a decision-making matrix may assist this process. The most commonly found issues for consideration in the development of such matrices are:

- Continued risk to children;
- Work in childcare services;
- Suspension from duty;
- Nature of the allegation;
- Number of complaints;
- Time lapse since the report or referral relating to the allegation;
- Age of the offender and state of health;
- Access to children via the family or other means;
- Community impact assessment (see 1.10.2 Community Impact Assessments);
- Personal circumstances of the suspect.

If an arrest is made, it may be useful to consider whether interviews with family members should be carried out while the suspect is in detention. For further information about risk, see 7.3 Further Risk Assessment.

7.5.2 SEARCH OF SUSPECT(S) PREMISES

Sexual offenders usually continue to offend over several decades. They maintain records of their abuse in photographs, drawings, images, audio and visual recordings and writings, including diaries, computer files and emails. At the time of the suspect’s arrest, searches for memorabilia, trophies and IT equipment may need to be made. These searches may include the suspect’s current or previous premises, including any locations where the abuse may have taken place.
A search may uncover information, intelligence, evidence and corroboration in relation to all areas. Consideration should be given to seizing computers and related media and photographing premises for subsequent comparison with images or descriptions given by witnesses. Plans of premises and old images or photographs showing, for example, layout, wallpaper patterns and views from windows may also assist in corroborating accounts. Distinctive items of clothing, jewellery, spectacles, or items of furniture may or may not also provide additional verification of accounts by witnesses or persons of interest. In addition to search powers under section 32 and section 18 of PACE, there are powers available to search for evidence on the authority of a warrant issued under section 8 of PACE. Indecent images of children under the age of 18 years can also be searched for on the authority of a warrant issued under section 4 POCA. Information about seizing computers and related items can be found in ACPO (2007) Good Practice Guide for Computer-Based Electronic Evidence, Version 4.0.

7.5.3 CHARGING

General procedures apply to charging, but there may be particular complexities when cases are historical. For information about the transitional period between the Sexual Offences Act 2003 and previous legislation, and general information about charging in such cases, see ACPO/CPS (2009) Guidance on Investigating and Prosecuting Rape.

7.5.4 NO FURTHER ACTION POLICY

The SIO should speak to the CPS prosecutor at an early stage to discuss and agree a no further action (NFA) policy, recognising that there might still be a need for a risk assessment even if there is a decision to NFA a case. For example, see ACPO (2007) Guidance on Protecting the Public: Managing Sexual Offenders and Violent Offenders.

7.5.5 DISCIPLINARY PROCEEDINGS RELATING TO THE SUSPECT

The decision to instigate disciplinary proceedings in relation to suspects featured in the enquiry is a matter for the relevant employer, and the SIO should remain independent from such decisions. Generally there should be no release of documentation to other interested parties until criminal proceedings are concluded as this could subsequently undermine the judicial process. See also 3.4.3 Sharing Information Relating to People Working with Children.

Discipline procedures may have an adverse effect on the criminal investigation by, for example, resulting in abuse of process, alerting suspects and restricting future options. The instigation of such procedures, therefore, requires consultation between the CPS, the police, children’s social care and, where appropriate, any other parties concerned. A protocol for the release of information to third parties should be developed at an early stage of the investigation. Such an agreement will deter subsequent requests for early disclosure outside the established criteria.

It may assist if victims and witnesses sign a declaration on their MG11 giving informed consent to allow it to be used in other proceedings, thereby avoiding the requirement for further authorisations or problems with disclosure.

Where a prosecution has been concluded or has been discontinued, issues relating to disclosure of information should be dealt with in consultation with the force solicitor, to avoid allegations of defamation. Disclosure of evidence that is relevant, factual, necessary and free from the opinion of the investigating officer will support the principle of objectivity in these cases.
7.5.6 SUSPECTS LIVING OR WORKING OVERSEAS

In some cases consideration will need to be given to whether section 72 of the Sexual Offences Act 2003 will enable a prosecution in the UK for offences committed abroad. Where suspects are living or working abroad, contact should be made with the CEOP Overseas Tracker Team and SOCA or INTERPOL. For further information about managing such offenders, see ACPO (2007) Guidance on Protecting the Public: Managing Sexual Offenders and Violent Offenders.
Section 8
VICTIMS AND WITNESSES IN COMPLEX CHILD ABUSE INVESTIGATIONS


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8.1 SPECIAL MEASURES

Many witnesses and victims in these investigations will fall within the definition of a vulnerable or intimidated witness and may be eligible for special measures (see Achieving Best Evidence). The SIO should have an early special measures discussion with the CPS prosecutor or reviewing lawyer (see Office for Criminal Justice Reform (2009) Early special measures discussions between the police and the Crown Prosecution Service: Practice Guidance). Consideration should also be given to the appointment of an intermediary as outlined in CPS (2005) Intermediary Procedural Guidance Manual. See also 4.7.1 Interviews of Children and Special Measures.

8.2 VICTIM AND WITNESS RISK ASSESSMENT

In addition to those points detailed in 1.3 Identifying, Assessing and Managing Risk, 6.5 Initial Risk Assessment and 7.3 Further Risk Assessment, key areas to be considered in any victim and witness risk assessment include:

- Immunity from prosecution for a victim and/or offender, eg, in cases where a young victim went on to abuse others or to assist their offender to abuse others;
- Identification of, and approach to, victims and witnesses (see 7.1 Potential Witness Identification);
- Any issues relating to collusion, coaching, corroboration, credibility, motivation and compensation.

8.3 VICTIM OR WITNESS IDENTIFICATION: FURTHER ISSUES

A number of options for potential witness identification were outlined in 7.1 Potential Witness Identification. This subsection sets out the general principles for witness or victim identification that provide the overall rationale for the approaches taken.


There is a duty under the Code for an investigator to pursue all reasonable lines of enquiry, whether these point towards or away from a suspect. What is reasonable will depend upon the circumstances of a particular case.

In order to avoid associations with the term trawling and the criticisms and misconceptions associated with it, SIOs should adopt a NIM and evidence-based approach to ensure that all reasonable lines of enquiry are pursued. The SIO should outline the following in their decision log:

- Parameters of date and time for witnesses to an incident(s);
- Intelligence-led aspects of the enquiry, eg, information (records, images, documents, source material) to suggest that a person was or may have been present at a relevant time within the specified or set parameters;
- A suspect, victim or other witness states they were or may have been present at a relevant time within the date and time parameters set;
• The physical construction of a scene or its geographical proximity to a potential witness means that there is a possibility they may have useful information in relation to a relevant time within the specified and set parameters;
• That the information gained from the above enquiries within the specified parameters may assist the defence as much as it assists the prosecution, ie, there has been a search for the truth and all ‘reasonable lines of enquiry’ have been pursued.

8.4 VICTIM AND WITNESS CARE AND SUPPORT IN COMPLEX CHILD ABUSE INVESTIGATIONS

The management of witnesses has two distinct and separate phases:

• The first phase deals with the issue of witness welfare;
• The second phase of witness management is directly linked to their attendance at court.

The vulnerability of a number of these witnesses means that the process of their attendance at court needs to be managed carefully. WCOs can provide support, or similar local services may be available, such as the NSPCC child witness project.

The SIO should discuss the arrangements with the CPS to ensure that witnesses attend court on specific days, and that their attendance will not be prolonged. Although it is a costly practice, it can be useful for members of the enquiry team to collect the witness personally and accompany them to court. Care should be taken at this stage with regard to the integrity of the evidence that the witness gives. Whoever is tasked with the conveyance of witnesses should have had no previous contact with them.

An important consideration is support for victims who have disclosed abuse. Depending on the circumstances, appropriate support may be provided or sourced through children’s social care or another agency such as the NSPCC. The need for welfare and support for the witness to continue throughout the court process is of primary importance. The attendance of personnel from children’s social care and other relevant agencies at court to facilitate any identified welfare needs is necessary. Witness welfare beyond the court process is also an important issue.

The CPS will be able to advise where there is the possibility of linking cases (relating to offenders and offences) in order to reduce the number of court appearances. The SIO should consider the implications for a witness who gives evidence against more than one offender. Where it is not possible to link or join cases and there is a requirement for the witness to give evidence on more than one occasion, consideration should be given at an early stage to obtaining more than one signed original copy of a witness’s statement. This will alleviate the problem of retrieval of original documents from the crown court following earlier conviction or acquittal.

This is a key area and one where the deployment of a FLO or dedicated witness liaison officer should be considered. If a FLO is used, this should be in an investigative role driven by clear investigative objectives set by the SIO (see NPIA (2008) Family Liaison Officer Guidance).
Most investigations benefit from maintaining witness contact up to and through the judicial process. This approach enables the enquiry team to keep track of potential witnesses and facilitates court warnings. Police personnel may be involved in this process, but witness liaison can be undertaken by multi-agency partners, and this has been well received by the courts. There are a number of ways of achieving this:

- Civilian employees used for witness liaison;
- Use of an independent agency, e.g., the NSPCC;
- Contact function undertaken by children’s social care;
- Use of WCU's and WCOs.

When the police make contact with witnesses, they should identify any apparent or potential welfare issues. Consideration should be given to force policies relating to the prevention of self-harm and suicide. (See also 4.14.2 Supporting a Child and Preparing Them for Court.)

8.5 MAINTENANCE OF VICTIM/WITNESS CONTACT LOGS

In relation to contact with a victim or witness, a dedicated log for that specific person should be maintained throughout the enquiry. This log could be a FLO log or a dedicated witness/victim liaison log. It has a similar format to the FLO log, in which all contact with the victim or witness is recorded in appropriate detail. The entries, which will be signed, dated and supervised, can be in duplicate, with one copy retained in the log and the second copy being registered within the MIR. These logs will provide a valuable chronological record of all contact with the witness or victim that provides a level of integrity regarding witness contact, and also a single point of reference if required by the liaison officer during court proceedings.

8.6 SIGNIFICANT WITNESS AND INTERVIEWING PROCEDURES

It is essential that officers comply with Achieving Best Evidence in relation to initial contact with vulnerable, intimidated and significant witnesses, including reluctant and hostile witnesses (in particular see paragraphs 2.29, 3.17, 3.18, 4.16 and 4.17).

A number of issues have been identified when obtaining witness accounts in previous investigations. At an early stage the SIO should set parameters for which matters are to be discussed or not when officers are obtaining the statement. For example, criminal injuries compensation should not be discussed as there have been examples of the defence challenging complaints as being purely motivated by a desire for compensation.

The complex nature of the allegations being made necessitates a number of visits to the witness. In accordance with the CPIA, the disclosure of notes made during these visits is of paramount importance. There has been criticism during the judicial process regarding the integrity of loose-leaf disclosure notes. To overcome this problem a number of investigations have prepared bound booklets for recording notes taken during the interview process.

The historical nature of many complex child abuse investigations requires corroborative evidence. The SIO may wish to consider giving advice to officers regarding identifying whether the witnesses have any such evidence in their possession. Examples include photographs of the individual, suspect or others at the relevant time, diary, letters or any other useful material. The SIO should consider the introduction of such evidence at the suspect interview stage. Material such as photographs may also be relevant to others involved in the investigation, including witnesses, victims and suspects.
As it may be necessary to make many visits to the complainant, it could take several weeks to complete the statement. This process needs to be carefully managed to avoid criticism of undue delay at trial.

### 8.7 COUNSELLING AND THERAPY

The guidance set out in the following documents may be useful where a witness is receiving therapy prior to trial: *Home Office, Department of Health and CPS (2007) Provision of Therapy for Vulnerable or Intimidated Adult Witnesses Prior to a Criminal Trial – Practice Guidance* and *Home Office, Department of Health and CPS (2001) Provision of Therapy for Child Witnesses Prior to a Criminal Trial*.

The best interests of the vulnerable or intimidated witness are paramount when deciding whether, when and in what form therapeutic help is given before trial. It is important that the police and CPS are aware if therapy is being proposed, undertaken or has been undertaken.

It is a common misapprehension that the CPS will not prosecute a case in which a child or adult has received pre-trial therapy. In fact, it is the nature of the therapy that is the issue, not that it has been received; many forms of therapy will have no adverse impact on the criminal case.

Whether a witness should have therapy before the criminal trial is not a decision for the police or the CPS. Those involved in the prosecution have no authority to prevent any witness from receiving therapy. It is for the witness and their carers, in conjunction with the professional agencies providing support, to decide whether or not to undertake therapy.

The nature of the therapy should be discussed with the CPS so that consideration can be given to whether it is likely to impact on the criminal case. Certain therapeutic approaches present problems so far as evidential reliability is concerned. These would include hypnotherapy, psychodrama, regression techniques and unstructured groups.

Delaying therapy, pending the outcome of a criminal trial, for fear that the witness evidence could be considered tainted and the prosecution lost, conflicts with the need to ensure that child and vulnerable adult victims are able to receive, as soon as possible, immediate and effective treatment to assist their recovery. In the context of this potential conflict the following matters are relevant:

- Many victims express the wish to see their abuser convicted and punished;
- There is a wider public interest in ensuring that abusers are brought to justice to prevent further abuse;
- All accused persons are entitled to a fair trial.

It follows, therefore, that care professionals and forensic investigators have a mutual interest in ensuring that, wherever possible, witnesses who receive therapy prior to a criminal trial are regarded as able to give a reliable testimony.

Once the statement or visually recorded interview is complete, it should be possible for appropriate counselling and therapy to take place. Therapy is not usually encouraged before this stage because of the risk that at court it might be considered to have affected or tainted the witness’s evidence, thereby jeopardising the prosecution. If, however, therapy is already underway, a decision on how to proceed may best be made after discussion at a multi-disciplinary meeting, which includes the therapist.
If therapy is a priority but it is possible that it will prejudice the criminal proceedings, a decision will need to be made on whether to abandon the proceedings in the interests of the witness’s wellbeing. In this instance it is essential that information regarding therapy is communicated to the prosecutor. In some cases it will be preferable to delay therapy for the witnesses until after the criminal case has been heard, to avoid undoing the benefits of the treatment.

**8.8 CRIMINAL INJURIES COMPENSATION**

With due regard to the implications of civil litigation, consideration may need to be given to the requirements of Criminal Injuries Compensation Authority (CICA) claims. The longevity of this type of investigation means that time limits for making claims may expire. It is, therefore, advisable to develop a protocol with the CICA to address this and other issues.

**8.9 SUPPORT ORGANISATIONS**

There are a number of such organisations with various points of focus, eg, victim, offender, victims and offender, families of victims and offenders. WCU managers have access to a directory of local voluntary support agencies.

**8.10 CHILD VICTIMS – CARE PROCEEDINGS (LOOKED AFTER CHILDREN)**

This topic should be considered in line with current guidance on witnesses who are looked after by the local authority or subject to care proceedings. For further information see 3 Police Responses and Multi-Agency Working To Safeguard Children.

**8.11 ALLEGATIONS OF ‘FALSE COMPLAINTS’**

Some lobby or pressure groups campaigning against perceived miscarriages of justice for people currently under investigation, or convicted offenders, can be active in the media and in speaking to other interested audiences.

Although relatively rare, where an investigation identifies a false allegation, consideration should be given to supporting a prosecution for attempting to pervert the course of justice. It is essential in all cases that everything proportional and practical is undertaken to test the validity of statements, to corroborate accounts and to establish a picture that is as accurate as possible.
# APPENDIX 1

## ABBREVIATIONS AND ACRONYMS

<table>
<thead>
<tr>
<th>Abbreviation</th>
<th>Full Form</th>
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<tbody>
<tr>
<td>ACPO</td>
<td>Association of Chief Police Officers</td>
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<td>APACS</td>
<td>Analysis of Policing and Community Safety</td>
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<td>BAU</td>
<td>Behavioural Analysis Unit</td>
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<tr>
<td>BCU</td>
<td>Basic Command Unit</td>
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<tr>
<td>CAB</td>
<td>Central Authorisations’ Bureau</td>
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<tr>
<td>CAF</td>
<td>Common Assessment Framework</td>
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<tr>
<td>CAFCASS</td>
<td>Children and Family Court Advisory and Support Service</td>
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<td>CAIU</td>
<td>Child Abuse Investigation Unit</td>
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<tr>
<td>CATCHEM</td>
<td>Centralised Analytical Team Collating Homicide Expertise and Management</td>
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<td>CCTV</td>
<td>Closed-Circuit Television</td>
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<tr>
<td>CEP</td>
<td>Child Exploitation and Online Protection Centre</td>
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<tr>
<td>CETS</td>
<td>Child Exploitation Tracking System</td>
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<tr>
<td>CHIS</td>
<td>Covert Human Intelligence Source</td>
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<tr>
<td>CJCA</td>
<td>Criminal Injuries Compensation Authority</td>
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<td>COMU</td>
<td>Covert Operations Management Unit</td>
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<tr>
<td>CPIA</td>
<td>Criminal Procedure and Investigations Act 1996</td>
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<td>CPS</td>
<td>Crown Prosecution Service</td>
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<td>CRB</td>
<td>Criminal Records Bureau</td>
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<tr>
<td>CSI</td>
<td>Crime Scene Investigator</td>
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<tr>
<td>DAAT</td>
<td>Drug and Alcohol Action Team</td>
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<tr>
<td>DASH</td>
<td>Domestic Abuse, Stalking and Harassment and Honour-Based Violence</td>
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<tr>
<td>DCSF</td>
<td>Department for Children, Schools and Family</td>
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<tr>
<td>DNA</td>
<td>Deoxyribonucleic Acid</td>
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<tr>
<td>ECHR</td>
<td>European Convention on Human Rights</td>
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<td>EPO</td>
<td>Emergency Protection Order</td>
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<td>EU</td>
<td>European Union</td>
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<td>FGM</td>
<td>Female Genital Mutilation</td>
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<td>FLO</td>
<td>Family Liaison Officer</td>
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<td>FME</td>
<td>Forensic Medical Examiner</td>
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<td>FPR</td>
<td>Family Proceedings Rules</td>
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<td>GP</td>
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<td>HICAD</td>
<td>Historical Child Abuse Database</td>
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<tr>
<td>HBV</td>
<td>Honour-Based Violence</td>
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<tr>
<td>HMIC</td>
<td>Her Majesty’s Inspectorate of Constabulary</td>
</tr>
<tr>
<td>Abbreviation</td>
<td>Meaning</td>
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<td>--------------</td>
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<tr>
<td>HOLMES</td>
<td>Home Office Large Major Enquiry System</td>
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<tr>
<td>HRA</td>
<td>Human Rights Act 1998</td>
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<tr>
<td>HTCU</td>
<td>Hi-Tech Crime Unit</td>
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<tr>
<td>ICS</td>
<td>Integrated Children’s System</td>
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<tr>
<td>ICIDP</td>
<td>Initial Crime Investigator’s Development Programme</td>
</tr>
<tr>
<td>IEAS</td>
<td>Independent Enquiry and Assessment Service</td>
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<tr>
<td>IMR</td>
<td>Individual Management Reviews</td>
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<td>INI</td>
<td>Impact Nominal Index</td>
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<td>IPLDP</td>
<td>Initial Police Learning and Development Programme</td>
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<tr>
<td>ISA</td>
<td>Independent Safeguarding Authority</td>
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<tr>
<td>ISP</td>
<td>Internet Service Provider</td>
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<tr>
<td>ISVA</td>
<td>Independent Sexual Violence Advisor</td>
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<tr>
<td>IT</td>
<td>Information Technology</td>
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<tr>
<td>LADO</td>
<td>Local Authority Designated Officer</td>
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<tr>
<td>LCJB</td>
<td>Local Criminal Justice Board</td>
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<td>LSCB</td>
<td>Local Safeguarding Children Board</td>
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<tr>
<td>MAPPA</td>
<td>Multi-Agency Public Protection Arrangements</td>
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<td>MARAC</td>
<td>Multi-Agency Risk Assessment Conference</td>
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<td>MIR</td>
<td>Major Incident Room</td>
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<td>MIRASAP</td>
<td>Major Incident Room Standardised Administrative Procedures</td>
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<td>NCRS</td>
<td>National Crime Recording Standards</td>
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<td>NFA</td>
<td>No Further Action</td>
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<td>NIM</td>
<td>National Intelligence Model</td>
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<td>NOS</td>
<td>National Occupational Standards</td>
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<td>NPIA</td>
<td>National Policing Improvement Agency</td>
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<td>National Society for the Prevention of Cruelty to Children</td>
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<tr>
<td>PACE</td>
<td>Police and Criminal Evidence Act 1984</td>
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<tr>
<td>PDP</td>
<td>Potentially Dangerous Person</td>
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<td>PEACE</td>
<td>Police Interview Training Model mnemonic</td>
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<td>PIP</td>
<td>Professionalising Investigation Programme</td>
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<td>PNC</td>
<td>Police National Computer</td>
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<td>PND</td>
<td>Police National Database</td>
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<td>POCA</td>
<td>Proceeds of Crime Act 2002</td>
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<td>PSD</td>
<td>Professional Standards Department</td>
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<td>Police Service of Northern Ireland</td>
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<td>RSHO</td>
<td>Risk of Sexual Harm Order</td>
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<td>RSO</td>
<td>Registered Sexual Offender</td>
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<td>RSPCA</td>
<td>The Royal Society for the Prevention of Cruelty to Animals</td>
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<tr>
<td>SARC</td>
<td>Sexual Assault Referral Centre</td>
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<td>SCADIP</td>
<td>Specialist Child Abuse Investigator’s Development Programme</td>
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<td>SCAS</td>
<td>Serious Crime Analysis Section</td>
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<tr>
<td>SCR</td>
<td>Serious Case Review</td>
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<td>SCRIP</td>
<td>Serious Case Review Panel</td>
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<td>SIO</td>
<td>Senior Investigating Officer</td>
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<td>SLA</td>
<td>Service Level Agreement</td>
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<td>SOCA</td>
<td>Serious Organised Crime Agency</td>
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<td>Sexual Offences Prevention Order</td>
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<tr>
<td>SU DC</td>
<td>Sudden Unexpected Death in Childhood</td>
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<tr>
<td>UK</td>
<td>United Kingdom</td>
</tr>
<tr>
<td>UKCA-ECR</td>
<td>UK Central Authority for the Exchange of Criminal Records</td>
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</table>
UKHTC.......... United Kingdom Human Trafficking Centre
UN ............. United Nations
UNCRC ......... United Nations Convention on the Rights of the Child
VS .............. Victim Support
VISOR .......... Violent Offender and Sex Offender Register
WCO ............ Witness Care Officer
WCU ............ Witness Care Unit
YJCEA .......... Youth Justice and Criminal Evidence Act 1999
YOT ............ Youth Offending Team
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