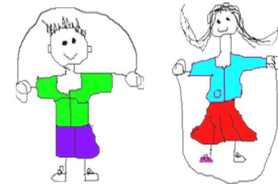




*Working Together  
to Safeguard Children*



Bedfordshire Local Safeguarding Children Board

# **Protocols for Joint working between Police and Children's Service Social Care for undertaking Section 47 enquiries**

**Authors:**

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## **Introduction**

1. The joint working practices and shared responsibilities of both the Police and Children's Services Social Care are essential to safeguarding children who have suffered or are likely to suffer significant harm.
2. At the initial stages of an enquiry the sharing of information, the quality of the communication, shared decision making and willingness to jointly respond, are essential in deciding how child protection enquiries should be conducted and, in particular, the circumstances in which joint enquiries are appropriate.
3. Child protection enquiries by the Police and Children's Services Social Care should be child focused, as well as addressing the parallel priorities of both agencies:
  - Children's Services Social Care's primary focus is the assessment of children in need under the Children Act 1989 and enquiries relating to children who are suffering or likely to suffer significant harm.
  - The primary focus for the Police is to investigate criminal offences relating to child abuse.
4. Both aspects of the enquiry are equally important to protect the child/ren from potential and/or further harm.
5. This protocol contains guidance for Children's Services Social Care in Bedfordshire and Bedfordshire Police in deciding how section 47 enquiries and associated police investigations should be conducted. In particular it explores the circumstances in which section 47 enquiries under the Children Act 1989 and linked criminal investigations are necessary and / or appropriate, and sets out procedures in a number of other specific areas where Children's Services Social Care and the Police have specific roles and responsibilities in relation to safeguarding children.
6. It is appreciated that it is not possible for guidance to cover all eventualities. The over-riding principle must be the safe-guarding of children and compliance with the law and good practice guidance. It is essential that the key personnel in each agency, maintain a frequent dialogue and agree any departure from this guidance, which is necessary in relation to individual children. Any such departure must be endorsed and documented by a manager or someone with delegated responsibility in each agency.

Copies of the LSCB Safeguarding procedures are available on the Local Safeguarding Children's Board website.

### ***Responding to child welfare concerns where there is or may be an alleged crime***

7. Whenever Children's Services Social Care have a case referred to them which constitutes, or may constitute, a criminal offence against a child, they should always discuss the case with the police at the earliest opportunity in order to protect the child or other children from the risk of suffering significant harm.
8. In dealing with alleged offences involving a child victim, the police should normally work in partnership with Children's Services Social Care and/or other agencies. Whilst the responsibility to instigate a criminal investigation rests with the police, they should consider the views expressed by other agencies. There will be less serious cases where, after discussion, it is agreed that the best interests of the child are served by a children's services led intervention rather than a full police investigation.

### ***Actions following a referral where a child/young person is suspected to be suffering or likely to be suffering significant harm***

9. When Children's Services Social Care receive a referral that indicates that there is risk to the life of a child or a likelihood of serious immediate harm they must initiate a strategy discussion with the Police Child Protection Team immediately to discuss planned emergency action, or as soon as possible afterwards if an agency has had to take immediate protective action.
10. In other cases where a child is suspected to be suffering, or likely to suffer significant harm, Children's Services Social Care must contact the Police on the same working day to share information about the concerns and/or allegations in order to reach an agreement in relation to whether a strategy meeting is necessary.
11. Equally, the Police must refer by telephone any child/ren that they believe to be at risk of harm to Children's Services Social Care within similar timescales, followed by a multi-agency referral form.
12. On receipt of a referral both agencies must reach an agreement in relation to whether a full strategy discussion/ meeting is necessary. When this is the case a date for a strategy meeting/discussion should be agreed to take place within 24 hours, unless there is an indication of serious risk to a child/young person, evidence that penetrative sex has taken place or the concerns are complex such as organised abuse, in which case the strategy meeting should occur within the same day.

### ***Strategy Discussion/Meeting***

13. Whenever there is reasonable cause to suspect that a child is suffering, or is likely to suffer significant harm, there should be a strategy discussion/ meeting involving Children's Services Social Care and the Police, and other bodies as appropriate (for example, children's centre/school and health), and a representative of the referring agency.

14. The strategy discussion/ meeting should be convened by Children's Services Social Care. Those participating should be sufficiently equipped and able therefore, to contribute to the discussion of available information and to make decisions on behalf of their agencies.
15. A strategy discussion may take place at a meeting or by other means (for example, by telephone).
16. In complex types of maltreatment a meeting is likely to be the most effective way of discussing the child's welfare and planning future action.
17. If the child is a hospital patient (in- or out-patient) or receiving services from a child development team, the medical consultant responsible for the child's health care should be involved, as should the senior ward nurse if the child is an in-patient. Where a medical examination may be necessary or has taken place a senior doctor from those providing services should also be involved and provide if appropriate a report within 24 hours depending on the severity of the harm.
18. A strategy discussion/meeting may take place following a referral, or at any other time (for example, if concerns about significant harm emerge in respect of child receiving support under s17 Children Act 1989).

The discussion should be used to:

- share available information;
- agree the conduct and timing of any criminal investigation;
- decide whether a core assessment under s47 of the Children Act 1989 (s47 enquiries) should be initiated, or continued if it has already begun or if the intervention will proceed as a section 17.
- plan how the s47 enquiry should be undertaken (if one is to be initiated), including the need for medical treatment, and who will carry out what actions, by when and for what purpose;
- agree what action is required immediately to safeguard and promote the welfare of the child, and/or provide interim services and support. If the child is in hospital, decisions should also be made about how to secure the safe discharge of the child;
- determine what information from the strategy discussion will be shared with the family, unless such information sharing may place a child at increased risk of significant harm or jeopardise police investigations into any alleged offence(s); and
- determine if legal action is required.
- agree who should be interviewed, by whom, for what purpose, and when. The way in which interviews are conducted can play a significant part in minimising any distress caused to children, and increasing the likelihood of maintaining constructive working relationships with families. When a criminal offence may have been committed against a child, the timing and handling of interviews with

victims, their families and witnesses, can have important implications for the collection and preservation of evidence.

- agree, in particular, how the child's wishes and feelings will be ascertained so that they can be taken into account when making decisions under s47 of the Children Act 1989;
  - in the light of the race and ethnicity of the child and family, consider how this should be taken into account, and establishing whether an interpreter will be required; and
  - consider the needs of other children who may be affected, for example, siblings and other children, such as those living in the same establishment, in contact with alleged abusers.
  - agree a date by which the outcome of any enquiries/investigations and agreed actions will be reviewed.
  - co-ordinate a media strategy, if relevant.
19. More than one strategy discussion/meeting may be necessary. This is likely to be where the child's circumstances are very complex and a number of discussions are required to consider whether and, if so, when to initiate s47 enquiries, as well as how best to undertake them.
20. Where section 47 enquiries have been initiated the outcome of these enquiries should be shared at a subsequent strategy discussion or meeting and consideration should be given as to whether a child protection conference should be convened.

### ***Recording Strategy Discussions/Meetings***

21. Any information shared, all decisions reached, and the basis for those decisions should be clearly recorded by the chair of the strategy discussion and agreed by all attendees at the meeting.
22. A Team Manager or someone with delegated responsibility should ensure that the agreed decisions and actions from the strategy discussion / meeting are recorded, signed and circulated to those who participated in the discussion/ attended the meeting and any other relevant professionals and agencies within one working day of the discussion/meeting.
23. When Police and other professionals receive the copy of this record, they should check the content and any inaccuracies should be reported immediately so that amendments can be made or matters resolved between the relevant managers.

### ***Chairing the Strategy meeting***

24. The strategy meeting should be chaired by an experienced professional from the Police or Children's Services Social Care of Team Manager, Deputy Team Manager, or Detective Sergeant Level or above.

**Criteria for joint and single agency enquiries:**

**Deciding the threshold for initiating section 47 enquiries**

25. The criteria is set out in the Children in Need Procedures and Section 47(1) of the Children Act 1989 (*a copy is attached at Appendix A*)
26. If at any point during the assessments it becomes apparent there are concerns around the welfare of a child/young person a strategy meeting should be convened.

**Single agency enquiry – Children’s Service Social Care:**

27. Children’s Services Social Care will conduct a single agency enquiry under the following circumstances:
  - Purely emotional abuse without any apparent physical indicators
  - Minor neglect
  - Indirect suspicion of sexual abuse
  - Sexualised behaviour of a child

**Single agency enquiry - Police:**

28. The Police will conduct a single agency enquiry under the following circumstances:
  - An adult who experienced abuse as a child.
  - Stranger abuse – The alleged offender is not known to the child.
29. Stranger abuse is the case where the child victim does not know the alleged offender. In such cases within Bedfordshire, the divisional Criminal Investigation Department will take the lead in investigating the crime. Those cases of stranger abuse where a number of children are involved, the police lead the investigation. Children’s Services Social Care are not involved with the enquiry or joint interviews, except the strategy meeting.
30. Police should call on family members in the first instance.
31. If at any point during the Police enquiry information comes to their attention which places other children/young people at risk, a referral should be made to the appropriate Children’s Service Social Care team and a Strategy Discussion/Meeting initiated.

**Circumstances when a joint enquiry is likely to be necessary are:**

- allegations/reasonable suspicions that sexual abuse of a child has been committed by a person known to a child;
- allegations/reasonable suspicions of physical injury of a child by a person known to the child.

- allegations/reasonable suspicions of cruelty or neglect which may be actionable under Section 1 of the Children and Young Persons Act 1933. (This section of the Children and Young Persons Act 1933 includes offences of assaulting, ill treating or abandoning the child, or causes or procures or exposes the child to any of these so that the child suffers unnecessarily or his/her health is damaged).
  - allegations/reasonable suspicions which involve unusual circumstances e.g. organised or institutional abuse or concerns about Fabricated or Induced Illness (FII) or internet abuse.
  - When a person who is believed to pose a risk and/or potential risk to a child/young person is known to be living in a household or having contact with a child/young person
32. Additionally, there may be other circumstances where a joint enquiry is necessary, outside of the criteria above e.g. where it is evident that input from the Police will enable Children's Services Social Care to protect and secure the best outcome for the child.

### ***Actions following the strategy discussion /meeting***

33. All actions and decisions taken at the strategy meeting should be kept under constant review by the team manager and in cases where the concerns are serious the Head of Service and/or Assistant Director Children in Need. The outcome of any enquiries and/or investigations and agreed actions must be reviewed by the date agreed at the strategy discussion/meeting
34. Significant harm to children gives rise to both child welfare concerns and law enforcement concerns, and s47 enquiries may run concurrently with police investigations concerning possible associated crime(s).
35. The police have a duty to carry out thorough and professional investigations into allegations of crime, and the obtaining of clear strong evidence is in the best interests of a child, since it makes it less likely that a child victim will have to give evidence in criminal court. Enquiries may, therefore, give rise to information that is relevant to decisions that will be taken by both LA children's social care and the police. The findings from the assessment and/or police investigation should be used to inform plans about future support and help to the child and family. They may also contribute to legal proceedings, whether criminal, civil or both.

### ***Section 47 Enquiries***

36. Where a child is suspected to be suffering, or likely to suffer, significant harm, Children's Services are required by s47 of the Children Act 1989 to make enquiries, to enable them to decide whether it should take any action to safeguard and promote the welfare of the child.

37. A section 47 enquiry can be initiated from a referral, during an Initial Assessment, a Core Assessment or at any other time in an open case when the threshold has been met (*see Appendix A for the criteria*).
38. A core assessment is the means by which a s47 enquiry is carried out. It should be led by a qualified and experienced social worker and will determine whether action is required to safeguard and promote the welfare of the child or children who are the subjects of the enquiries.
39. Those making enquiries about a child should always be alert to the potential needs and safety of any siblings, or other children in the household of the child in question. In addition, enquiries may also need to cover children in other households, with whom an alleged offender may have had contact.
40. At the same time, the police will have to (where relevant) establish the facts about any offence that may have been committed against a child, and to collect evidence.

### ***Outcome of Section 47 enquiries***

41. At any time the concerns about a child are substantiated, and the child is judged to be at continuing risk of significant harm, a child protection conference should be convened by Children's Services Social Care. The recommendation to convene a child protection conference will normally be taken at a strategy discussion/meeting and the request for a conference, endorsed by the team manager, should be made to the Conference and Review Service for a decision.
42. The strategy discussion/meeting where the decision to initiate section 47 enquiries was taken should be identified and recorded as the last strategy discussion/ meeting and a child protection conference should take place within 15 working days of this discussion/ meeting
43. Where the concerns about a child are substantiated but the child is not judged to be at continuing risk of significant harm, the decision to complete a core assessment and continue to offer services under a child in need plan (s 17) or take no further action should be recorded and endorsed by a team manager (Children's Service Social Care).

### ***Joint visits with Police and Children's Services:***

44. Prior to any joint interview, whether to be ABE recorded or not, the investigating officers (police and social worker) must plan how the interview will be conducted. Account should be taken of guidance contained in "Achieving Best Evidence in Criminal Proceedings: Guidance for Vulnerable or Intimidated Witnesses Including Children". (Chapter 2, 2.47 – 2.49)
45. Factors detailed in this guidance include:
  - Child's age
  - Child's race, culture, ethnicity and first language
  - Child's gender and sexuality
  - Any physical and/or mental needs
  - Child's cognitive abilities (e.g. memory, attention)

- Child's linguistic abilities.
46. A written record of the plan (ABE 1 Appendix D) will be produced and signed by both parties to achieve the best evidence and a copy of this form should be retained by both the Police Officer and Social Worker.
  47. The Social Worker and/or Police Officer should consult with the parents to ascertain the facts of the situation, unless to do so would jeopardise the child/young person safety. It should also be explained the process of a 47 enquiry (giving them appropriate leaflets).
  48. Consideration should be given for parents where English is not the first language and interpreters provided if necessary. Children Services and the Police should identify which agency should access interpreting facilities. Consideration should be given around race, culture, religion, disability, health, gender and sexuality of the parents.
  49. Both the Police and Social Services should attend the initial visit with the child/young person. The purpose is to actually see the child/young person and establish their welfare.
  50. All children in the household should be spoken to during the enquiry and this should be taken into account in the planning stage.

### **Consent**

51. Permission to interview a child, whether ABE - recorded or not, will normally be sought from a person with parental responsibility for the child.
52. If it is considered necessary to talk to the child/young person without contact with a parent then see paragraphs 5.64 to 5.67 of 'Working Together to Safeguard Children' (2006) and Achieving Best Evidence (2002). This should be in exceptional circumstances only and the reasons clearly recorded.
53. Occasions when the investigating team need to interview a child without the knowledge of the parent or carer. would include:
  - the possibility that a child might be threatened or otherwise coerced into silence
  - a strong likelihood that evidence might be destroyed
  - the child does not wish the parent to be involved at that stage, and is competent to make such a decision.
54. Proceeding with the interview without parental knowledge will need to be carefully managed and advice should form the head of service and endorsed by the Assistant director Children in Need, both of whom may recommend that legal advice is sought.
55. The decision about when to inform the parent or carer will have a bearing

on the conduct of police investigations. The strategy discussion should therefore decide how and when parents/carers will be informed and their subsequent level of participation.

56. The ABE interview should only take place with the child's consent.
57. Prior to ABE the child/young person should be given enough information to assist with his/her decision making.
58. If a child is too young to give consent, this should then be obtained from a parent. Exceptionally, a child may need to be interviewed without the knowledge of their parent(s) or carers. Consideration should be given to providing an advocate for the child support prior to and after the interview process.
59. Interviewers are responsible for ensuring that, as far as possible, the child is freely participating in the interview, and not merely complying with a request from adult authority figures.

### ***Achieving Best Evidence Interviews***

60. Achieving Best Evidence is a shared responsibility, and both the Social Worker and the Police Officer should actively participate in the child/young people's interviews.
61. In accordance with *Achieving Best Evidence in Criminal Proceedings*, a formal interview with a child should only take place following an inter-agency strategy meeting (refer paragraphs 13 -24 above)
62. Those who are undertaking the ABE interview must meet prior to the interview and agree an interview plan. A record of the plan should be made using Form ABE 1 (Appendix D) and signed by both parties. A copy of this form should be retained by both the Police Officer and Social Worker. (Refer paragraphs 44-50 above)

### ***Recording***

63. When a joint interview is ABE-recorded at the police interview suite this will provide the main record. However in addition a brief written record of all interviews should also be completed on Form ABE 2. (Appendix D) This record should include
  - A record of the content of the interview
  - the conclusions arising from the interview and
  - the outcome and actions agreed by the Police Officer and Social Worker
64. A copy of Form ABE2 signed by the social worker and the police officer will be completed as soon as possible following the interview and no later than 2 working days and a copy retained on both Police and Children's Services files.

65. For all other joint interviews Form ABE2 should be completed and signed and copies retained by the police officer and the social worker for their records.

### ***Consideration of a medical in the strategy meeting***

66. The purpose of the medical examination must be identified in the strategy meeting – i.e. secure forensic evidence, or obtain medical documentation.
67. Consider who would be the best person to explain to the child what the medical examination entails and discuss with the child to obtain their consent.
68. A child/young person should always give consent except in very serious cases of abuse in young infants.
69. If child/young person can not give consent then an adult with parental responsibility must except in cases where very serious abuse or fatality in young infants (cross reference: Medical Examination).
70. Wherever possible ( and appropriate) the family member of the child's choice should accompany him/her for the medical.

### ***Conclusion***

71. The above criteria for the joint or single agency response cannot be prescriptive or exhaustive and judgement will need to be exercised in individual circumstances.
72. A flexible approach is required. Concerns about significant harm may cause a Children's Services Social Care single agency enquiry to commence, but this may then need to change to a joint agency response because the initial enquiries find that the parent or child/young person wants this, or there are additional factors which identify the need for this, and/or it is apparent further enquiries need to be made about a potential criminal offence.
73. Similarly, the Police may initially respond on their own to a situation and it may then become clear that there are unresolved child protection or welfare issues, in which case the Police Officer involved should ensure that the issues are communicated to the relevant Children's Service Social Care staff.
74. If, following discussion between the Police and Children's Services, disagreement remains over any matter such as the necessity for a joint investigation or a contentious decision by either party, the matter should be referred to the Detective Inspector, Police Child Protection Investigation Unit and the head of service for Intake and Assessment, the Head of Service Children with Disabilities and/or the relevant Assistant Director Children in Need or Vulnerable Children.  
Services

## ***Protocol for dealing with allegations of possession of indecent images***

75. Allegations of possession of indecent images of children do not feature per se within *Working Together 2006*. It is however very likely that what maybe initially reported as possession of indecent images could, with due investigation, become more serious concerns of contact sexual abuse against children.
76. This type of abuse could range from sexual abuse as part of the spiral of sexual abuse against children to offences involving perpetrators filming children for sexual purposes either for themselves or for wider distribution to others.
77. It must be recognised that a link exists between people who collect or look at abusive images of children and hands-on contact abuse. All agencies, therefore, have a clear responsibility to identify children that might be at risk from such offenders and to utilise the procedures within *Working Together 2006* to ensure their safety.
78. It is essential that an early assessment is made of the risks posed to any children who have contact with the suspect.

### ***Procedure for dealing with allegations of possession of indecent images***

79. Allegations of possession of indecent images of children come from a number of channels.
80. The main sources for referrals:-
  - a. POLIT (Paedophile On Line Investigation Team – Central referral unit based in London) following information they have received often from police forces around the world that there are suspects living within the county boundary.
  - b. Locally based intelligence such as a partner disclosing images they have found on a partner's computer or an employer discovering images on a computer used by an employee. In addition there are a small number discovered where the computer has been taken into a computer shop for repair and the images have been discovered during checks of the system.
81. In nearly all cases it is unknown at the time of referral whether or not the suspect has children within their own/extended family or has access to children in any capacity either through their employment or recreational activities.
82. In all cases the principles of 'Working Together' will be adhered to and early contact will be made with Children's Services to establish if there are children connected with the suspect.
83. Completion of an Internet Abuse Family Information Request form – will be faxed to the appropriate Children's Services Office within 24 hours of the information coming to light. This will contain all the relevant details that are

known at that time. Children's Services will check their systems along with associate agencies as appropriate such as Health and Education. The result of this system search will be sent back to OLIT within 24 hours with either a positive or negative result.

84. As soon as it is established that there are children either in the suspect's home or whom the suspect has contact to it, then a strategy meeting should be called to determine if the children are considered to be at risk from the suspect or others.
85. Due regard needs to be given to the necessity of an immediate intervention but this should be balanced with the need to seize computer equipment for forensic analysis. The welfare of the child however remains paramount and a decision by the strategy meeting for an immediate intervention to talk to the children to assess the risk of significant harm will determine the timescale for Police action.
86. Regard needs to be given to combine both the arrest and subsequent interviewing of any children if appropriate so that evidence is preserved whenever possible. This evidence, usually in the form of computer data, will be evidential, if positive, in both criminal proceedings and the family court should matters progress that far.
87. In virtually all cases the suspect will be arrested and questioned regarding the allegations. They will also be asked about their access to computers and more particularly, asked about their involvement with any children regardless of capacity. Such connections can be hard to make during the search/arrest progress.
88. If at any time in the process it becomes known that the suspect has an involvement with children then an appropriate assessment will be made to decide if the case now requires a strategy meeting to be held. This could be in the Children's Service area in which the suspect resides or another Local Authority area.
89. The clear aim of any investigation is to identify any children who may have suffered significant harm and together with Children's Services undertake Section 47 enquiries if appropriate.
90. The following procedure will be adopted when Police/SSD execute warrants and the target person has access to Children's Services Social care:
  1. Convene a Strategy meeting.
  2. Execute search/arrest warrant.
  3. Carry out Section 47 Interviews with children.
  4. Reconvene Strategy meeting.
  5. Convene a Child Protection Conference in order to fully share multi-agency information and formulate a Child Protection Plan

### ***Protocol for dealing with domestic violence referrals from Police to Children's services where children are involved***

91. The purpose of this Protocol is to set out the procedure and timescales for referral of Domestic Violence Cases where children are involved from Bedfordshire Police to Bedfordshire Children's Services. It also sets out the process for informing Health Visitors about referred cases. It is important that the timescale within which referrals should be made are kept to in order to ensure the safety and protection of children and their non-abusing parent. This protocol has been developed in order to improve the process of referrals from the Police to Children's services.

***Procedure for dealing with domestic violence referrals from Police to Children's services where children are involved***

***Police Procedure:***

92. Police Officers should make themselves aware of the presence and identity of any child at the scene of domestic violence incident and record their details including the child's name, date of birth, and school attended where applicable. The welfare of the child is paramount and if an officer has obvious concern in respect of child protection issues, then police powers under the Children Act must be considered.
93. Where there are child protection issues, the officer on the case must complete a form 745 before going off duty and this must be emailed to both the Child Protection Team and the Domestic Violence Unit.
94. In all other cases of domestic violence recorded either as a crime or non-crime incident, where children are present or they reside at the address, a form 745 will be completed by the attending officer and should be referred to the Divisional Domestic Violence Unit.
95. In all such cases the Domestic Violence Unit Officers will refer the family to Children's Services. Children's Services will inform other agencies as required and when necessary.
96. The DVU will research incidents on a daily basis and forward a completed 'Daily Domestic update form' to the Intake & Assessment duty team by e-mail. The form will give details of the victim, showing names, addresses, dates of birth, PNC warning markers, crime reference number, offender details, if it's a repeat victim or location, details of children and also the DV risk assessment level of High, Medium or Low. It will also indicate if the police intend to send a full referral where they have additional information. \*
97. All DV incidents should be referred using the update sheet on a daily basis, except for weekends where it may be up to 3 days.
98. The Children Services department will use the daily sheet to research their systems and take action where necessary. \*Where the Intake & Assessment request more information, or the police have additional information, a full referral will be completed within 48 hours and will be recorded on a multi-agency referral form (*Appendix B attached*).

99. A full referral will include details of all members of the family, names, address, dates of birth, ethnicity, whether the children were present and where the incident took place. The report will give a précis of police involvement, to include details of crimes, arrests, relevant convictions, PNC checks and any DVU involvement.
100. Any serious cases over the weekend or out of hours should be referred to the Emergency Duty Team and the Child protection Team.

**Action by Children's Services:**

101. The duty manager will read the daily log and make a note of what action is required in respect of each incident on the log sheet. Swift will be checked by the Duty Manager to ascertain if the family are known to Children Services Social Care.
102. Depending on the seriousness of the incident or in the case of a repeat incident, then the relevant agencies will be contacted to share information and risk to inform the decision making process about progression to a Strategy Meeting, Child in Need Meeting, Initial / Core Assessment and/or a reconvened core group in respect of an open case.
103. Where further information is required social services will contact the police and will review the specific incident together by telephone. During this consultation the duty desk and DVU officer will decide if a full referral is required. The police will then complete a multi-agency referral form with a summary of police involvement within 48 hours.

**Protocol for managing persons who pose a risk to children**

104. The term 'Schedule One Offender' is often used to describe someone who has been convicted of an offence against children as listed under Schedule One of the Children and Young Person's Act 1933. This does not mean however that the person is a future risk of harm to children and would not necessarily mean that there was any statutory requirement in relation to child protection issues.
105. The term of 'Schedule One Offender' is no longer used therefore and has been replaced by the term 'Risk to Children'
106. Guidance is available through the Home Office Circular 16/2005 (*attached at Appendix B*) which explains how those who present a risk of harm to children may be identified. This guidance should be used by practitioners to carefully determine whether there is a continued risk of harm to children.
107. Agencies have a responsibility to monitor and manage the risk of harm to children once an individual has been sentenced and identified as presenting a risk of harm, liaising with each other where appropriate. Equally prisons will take on responsibility to notify agencies prior to the offender being released, if sentenced to custody.

**Procedure for People who are a Risk to Children**

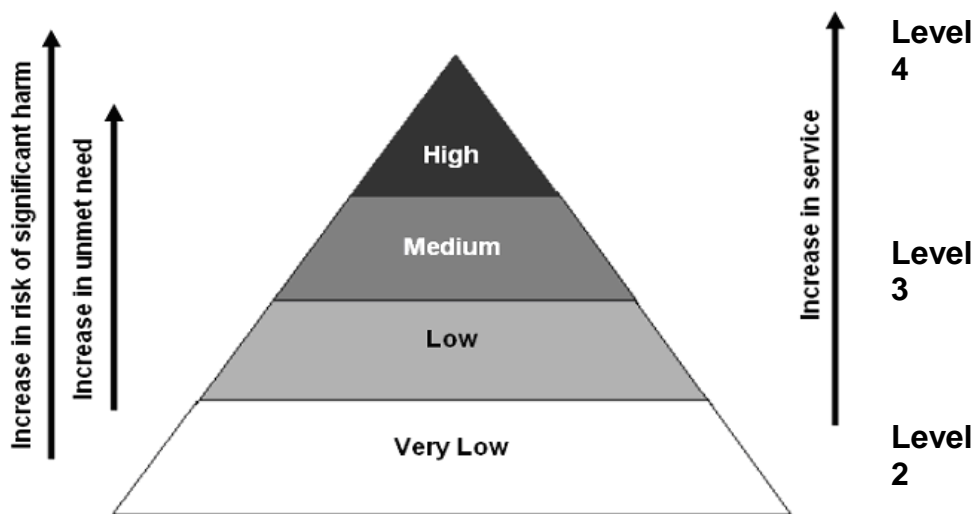
108. If a person who poses a risk to children moves into a family where there are children, a strategy discussion must always be called to establish the offender's history and possible risks using the Home Office circular guidance 16/2005 (*Appendix B*). This may not necessarily result in a joint S47 enquiry. Police and Children's Services will work together to ensure the safety of the child/ren who may be vulnerable.

**Appendix A**

### ***Bedfordshire's Thresholds for Intervention***

In Bedfordshire we have adopted four levels of priority based on Hardiker et al levels of intervention described in *Policies and Practices in preventative childcare* 1991 Avebury/Gower.

#### **Pyramid of Need**



#### **'Very Low':**

- Children from families where there are difficulties that can be more appropriately addressed by universal services.
- Children whose health and development is not being adversely affected.

#### **'Low'**

- Children from families where carer(s) are experiencing difficulties which **may** affect the child's health or development.
- Children whose health and development **may** be affected.
- Children that fall within the definition of 'In Need'.
- Children and families where there is a **risk of deterioration** and the child's health or development **may** be affected in the near future.

#### **'Medium':**

- Children whose health and development **is or may be** impaired.

**'High':**

- Children **experiencing significant harm** or where there is a **likelihood of significant harm**. Children at risk of removal from home.

# Bedfordshire Children and Young Peoples Strategic Partnership

## Every Child Matters

Change For Children

### Common Assessment Framework and Multi Agency Referral Form

Notes for use: If you are completing form electronically, text boxes will expand to fit your text  
Where check boxes appear, insert an 'X' in those that apply.

#### Identifying details

Record details of unborn baby, infant, child or young person being assessed. If unborn, state name as 'unborn baby' and mother's name, e.g. unborn baby of Ann Smith.

Name		AKA <sup>1</sup> /previous names	
Male <input type="checkbox"/>	Female <input type="checkbox"/>	Unknown <input type="checkbox"/>	Date of birth or EDD <sup>2</sup>
Address			Contact tel. no.
			Unique ref. no.
Postcode			Religion
Other members of household			Has a CAF form already been completed on any biological / step sibling, if so what date / name:

#### Ethnicity

White British	<input type="checkbox"/>	Caribbean	<input type="checkbox"/>	Indian	<input type="checkbox"/>	White & Black Caribbean	<input type="checkbox"/>	Chinese	<input type="checkbox"/>
White Irish	<input type="checkbox"/>	African	<input type="checkbox"/>	Pakistani	<input type="checkbox"/>	White & Black African	<input type="checkbox"/>	Any other ethnic group*	<input type="checkbox"/>
Any other White background*	<input type="checkbox"/>	Any other Black background*	<input type="checkbox"/>	Bangladeshi	<input type="checkbox"/>	White & Asian	<input type="checkbox"/>	Not given	<input type="checkbox"/>
				Any other Asian	<input type="checkbox"/>	Any other mixed	<input type="checkbox"/>		

	background*		background*											
<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 30%;">*If other, please specify</td> <td style="width: 20%;"></td> <td style="width: 10%;"></td> <td style="width: 20%;">Immigration status</td> <td style="width: 20%;"></td> </tr> <tr> <td>Child's first language</td> <td></td> <td></td> <td>Parent's first language</td> <td></td> </tr> </table>					*If other, please specify			Immigration status		Child's first language			Parent's first language	
*If other, please specify			Immigration status											
Child's first language			Parent's first language											
Does the child have a disability?		Yes <input type="checkbox"/>	No <input type="checkbox"/>											
If 'yes' give details														
Is an interpreter or signer required?		Yes <input type="checkbox"/>	No <input type="checkbox"/>	Has this been arranged? Yes <input type="checkbox"/> No <input type="checkbox"/>										
Details of any special requirements (for child and/or their parent)														
1 'Also known as'														
2 Expected date of delivery														
<b>Assessment information</b>														
People involved in assessment														
What has led to this unborn baby, infant, child or young person being assessed?														
<b>Details of parents/carers</b>														
Name		Contact tel. no.												
Relationship to unborn baby, infant, child or young person														
Address		Parental responsibility?												
		Yes <input type="checkbox"/>	No <input type="checkbox"/>											
Name		Contact tel. no.												
Relationship to unborn baby, infant, child or young person														

Address			Parental responsibility?
---------	--	--	--------------------------

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**Current family and home situation – does other household members need to be separate?**

(e.g. family structure including siblings, other significant adults etc; who lives with the child and who does not live with the child)

--

--

**Details of person(s) undertaking assessment**

Name			Contact tel. no.
------	--	--	------------------

Address		Role	
		Organisation	

--	--	--

Email address of assessor:		
----------------------------	--	--

Lead Agency:		
--------------	--	--

Name of lead professional (where applicable)	
--	--

Lead professional's and Lead Agency	
-------------------------------------	--

contact numbers		
-----------------	--	--

**Services working with this infant, child or young person**

<b>Universal</b>	GP	<input type="checkbox"/>	Details		Tel.	
	Early years or education/training provision	<input type="checkbox"/>	Details		Tel.	
	Service		Details		Tel.	
<b>Other services</b>	Service		Details		Tel.	
	Service		Details		Tel.	
	Service		Details		Tel.	
	Service		Details		Tel.	
	Service		Details		Tel.	

**CAF assessment summary: strengths and needs**

Consider each of the elements to the extent they are appropriate in the circumstances. You do not need to comment on every element. Wherever possible, base comments on evidence, not just opinion, and indicate what your evidence is. However, if there are any major differences of view, these should be recorded too.

**1. Development of unborn baby, infant, child or young person**

## **Health**

### **General health**

Conditions and impairments; access to and use of dentist, GP, optician; immunisations, developmental checks, hospital admissions, accidents, health advice and information

### **Physical development**

Nourishment; activity; relaxation; vision and hearing; fine motor skills (drawing etc.); gross motor skills (mobility, playing games and sport etc.)

### **Speech, language and communication**

Preferred communication, language, conversation, expression, questioning; games; stories and songs; listening; responding; understanding

### **Emotional and social development**

Feeling special; early attachments; risking/actual self-harm; phobias; psychological difficulties; coping with stress; motivation, positive attitudes; confidence; relationships with peers; feeling isolated and solitary; fears; often unhappy

### **Behavioural development**

Lifestyle, self-control, reckless or impulsive activity; behaviour with peers; substance misuse; anti-social behaviour; sexual behaviour; offending; violence and aggression; restless and overactive; easily distracted, attention span/concentration

## **1. Development of unborn baby, infant, child or young person (continued)**

### **Identity, self-esteem, self-image and social presentation**

Perceptions of self; knowledge of personal/family history; sense of belonging; experiences of discrimination due to race, religion, age, gender, sexuality and disability

**Family and social relationships**

Building stable relationships with family, peers and wider community; helping others; friendships; levels of association for negative relationships

**Self-care skills and independence**

Becoming independent; boundaries, rules, asking for help, decision-making; changes to body; washing, dressing, feeding; positive separation from family

**Learning**

**Understanding, reasoning and problem solving**

Organising, making connections; being creative, exploring, experimenting; imaginative play and interaction

**Participation in learning, education and employment**

Access and engagement; attendance, participation; adult support; access to appropriate resources

**Progress and achievement in learning**

Progress in basic and key skills; available opportunities; support with disruption to education; level of adult interest

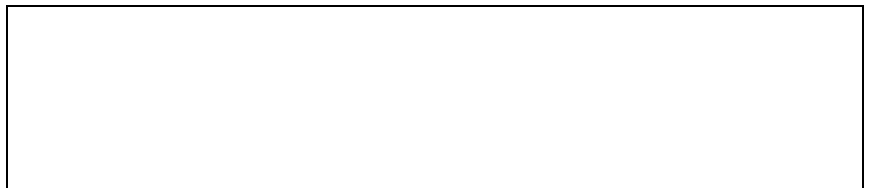
**Aspirations**

Ambition; pupil's confidence and view of progress; motivation, perseverance

**2. Parents and carers**

**Basic care, ensuring safety and protection**

Provision of food, drink, warmth, shelter, appropriate clothing; personal, dental hygiene; engagement with services; safe and healthy environment



**Emotional warmth and stability**

Stable, affectionate, stimulating family environment; praise and encouragement; secure attachments; frequency of house, school, employment moves

**Guidance, boundaries and stimulation**

Encouraging self-control; modelling positive behaviour; effective and appropriate discipline; avoiding over-protection; support for positive activities

**3. Family and environmental**

**Family history, functioning and well-being**

Illness, bereavement, violence, parental substance misuse, criminality, anti-social behaviour; culture, size and composition of household; absent parents, relationship breakdown; physical disability and mental health; abusive behaviour

**Wider family**

Formal and informal support networks from extended family and others; wider caring and employment roles and responsibilities

**Housing, employment and financial considerations**

Water/heating/sanitation facilities, sleeping arrangements; reason for homelessness; work and shifts; employment; income/benefits; effects of hardship

**Social and community elements and resources, including education**

Day care; places of worship; transport; shops; leisure facilities; crime, unemployment, anti-social behaviour in area; peer groups, social networks and relationships

**Conclusions, solutions and actions**

*Now the assessment is completed you need to record conclusions, solutions and actions. Work with the baby, child or young person and/or parent or carer, and take account of their ideas, solutions and goals.*

**What are your conclusions?** *(For example strengths, no additional needs, additional needs, complex needs, risk of harm to self or others)*

**What needs to change?** *(For example what outcomes, solutions and goals do the child/young person, parent/carer and you want to achieve)*

**Action plan** *(in order of priority)*

**Who will do this?**

**By when?**

**Agreed review date**

**How will you know when things have improved?**

**Child or young person's comment on the assessment and actions identified**

**Parent or carer's comment on the assessment and actions identified**

**Consent for information storage and information sharing**

I understand the information that is recorded on this form and that it will be stored and used for the purpose of providing services to:

- Me
- This infant, child or young person for whom I am a parent
- This infant, child or young person for whom I am a carer

I have had the reasons for information sharing explained to me and I understand those reasons

I agree to the sharing of information, as agreed, between the services listed below      Yes       No

*(Practitioner to detail what information may be seen by which agencies)*

*All information to be shared with agencies below*

Signed  Name  Date

Young person:

Carer:

**Assessor's signature**

Signed  Name  Date

**Exceptional circumstances: significant harm to infant, child or young person**

If at any time during the course of this assessment you feel that an infant, child or young person has been harmed or abused or is at risk of harm or abuse, you must follow your local safeguarding children board (LSCB) procedures as set out in the booklet

*What To Do If You Are Worried A Child Is Being Abused* (Department of Health, 2003).

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[www.ecm.gov.uk/caf](http://www.ecm.gov.uk/caf)

## Home Office Circular 16 / 2005 Guidance On Offences Against Children

From: CRIME REDUCTION & COMMUNITY SAFETY GROUP, Violent Crime Section  
FOR MORE INFORMATION CONTACT:

David Ireland 020 7273 2985, Matthew Laxton 020 7035 0495

Email: [Matthew.Laxton2@homeoffice.gsi.gov.uk](mailto:Matthew.Laxton2@homeoffice.gsi.gov.uk)

THIS CIRCULAR IS ADDRESSED TO:

Chief Police Officers in England and Wales Chief Probation Officers Prison Governors  
Directors of Social Services All agencies and departments involved in the protection of  
children

COPIES ARE BEING SENT TO:

Broad Subject: Justice

Sub Category: Criminal Justice Legislation

### **Guidance on Offences Against Children**

#### **Background**

1. Schedule One to the Children and Young Persons Act 1933 provides a list of offences amended by subsequent legislation. The offences range from murder and child abuse to any offence causing bodily injury to a child.
2. Currently a conviction for one of the offences in Schedule One does not trigger any statutory requirement in relation to child protection issues. The list of offences in Schedule One is relevant to matters such as mode of charging, depositions from children and determination of age. However, in practice, conviction for a Schedule One offence triggers further assessments of risk and Schedule One is considered to be a useful tool to help the probation service, the prison service, local authority social services and the police to focus on those individuals who may pose a risk to children. There are a number of problems with Schedule One, including a lack of consistency in its use and anomalies in the offences it covers.

#### **The Review**

3. During 2004, a review of Schedule One and associated procedures was undertaken. A Multi-Agency Working Group was convened to examine existing agency procedures, and to consider whether a more effective method of identifying those who might pose a known risk to children is necessary.
4. This review is continuing. However, it is becoming clear that the term 'Schedule One Offender', which is used by a variety of agencies, is ill defined and, to a certain extent, unhelpful since it defines people by their offending history rather than the ongoing risks they pose. It is with this in mind that the term should be replaced with "a person identified as presenting a risk, or potential risk, to children". Obviously offending history is an important factor in such assessments but it is not the only one. We are aware that various child protection legislation has been enacted since the 1933 Act and this has created a confused picture. Many practitioners are unsure of which offences are included in Schedule One,

and whether there are other offences, not included in Schedule One, which may indicate that a person poses a risk to children.

5. To provide some clarity on this matter, it has therefore been decided to issue a consolidated list of offences, which all agencies can use to identify “a person identified as presenting a risk, or potential risk, to children”. This list, which is attached, identifies the major offences against children currently on the statute.
  6. Agencies, which come into contact, or are working, with an individual who has been convicted or cautioned for an offence against a child may use the list as part of their usual policies and procedures.
  7. Please note, however, the following important points:
  8. The list attached to this circular carries with it no statutory requirements. It is simply a list of the major offences that might be committed against children. Schedule One to the Children and Young Persons Act has not actually been repealed or amended. The Review will give further consideration to the necessity of this.
  9. When using the list attached to this circular practitioners need to exercise their professional judgement in all instances. It should be remembered that:
    - i) This is not an exhaustive list. There are also other types of offences where a child may be the intended victim but where the primary offence is not a child specific offence (e.g. telecommunications offences, harassment etc.).
    - ii) New offences may be created by new legislation.
    - iii) Some offences may only indicate a risk to children in certain circumstances.
    - iv) Not all convicted or cautioned individuals will necessarily pose a continued risk to children.
    - v) There will also be cases where a person without a conviction or caution may pose a risk to children. For example, a finding of fact in a civil court that an individual poses a risk to a child; an individual may be subject to a Risk of Sexual Harm Order; or there may be other non-offence related information that an offender presents a risk to children.
- This is not a new directive. There are no changes to existing inter-agency procedures and child protection procedures, which should be followed as before.
  - The prison service will continue to notify the police, probation and social services prior to the release of an identified offender. The present process will remain unchanged.
  - The list includes both current and repealed offences. This is due to the fact that many offenders will have been convicted prior to the introduction of new legislation, such as the Sexual Offences Act 2003.

**ALPHABETICAL LIST OF OFFENCES AGAINST CHILDREN**

<b>Offences</b>	<b>Act</b>	<b>Section</b>
Abduction of a woman by force or for the sake of her property (repealed by 2003 Act)	Sexual Offences Act 1956	Section 9
Abduction of Child in Care/ Police Protection .. take away/induce away/assist to run away/ keep away	Children Act 1989	Section 49
Abduction of defective from parent or guardian (repealed by 2003 Act)	Sexual Offences Act 1956	Section 21
Abduction of unmarried girl under 16 from parent or guardian (repealed by 2003 Act)	Sexual Offences Act 1956	Section 20
Abduction of unmarried girl under 18 from parent or guardian (repealed by 2003 Act)	Sexual Offences Act 1956	Section 19
Abuse of position of trust: causing a child to watch a sexual act	Sexual Offences Act 2003	Section 19
Abuse of position of trust: causing or inciting a child to engage in sexual activity	Sexual Offences Act 2003	Section 17
Abuse of position of trust: sexual activity in the presence of a child	Sexual Offences Act 2003	Section 18
Abuse of position of trust: sexual activity with a child	Sexual Offences Act 2003	Section 16
Abuse of Trust (Repealed by 2003 Act)	Sexual Offences (Amendment ) Act 2000	Section 3
Administering a subject with intent	Sexual Offences Act 2003	Section 61
Administering drugs to obtain or facilitate intercourse of a girl under 18 (repealed by 2003 Act)	Sexual Offences Act 1956	Section 4
Administering Poison or wounding with intent to murder a child under 18	Offence Against the Person Act 1861	Section 11
Admission of Children under 14 to a Bar – Licensee to allow/ Cause/procure child to be in bar/ attempt to cause/procure	The Licensing Act 1964	Section 168
Aiding, abetting, counselling or procuring the suicide of a person under 18	Suicide Act 1961	Section 2
Allowing a child or young person under 16 to be in a brothel	Children and Young Persons Act 1933	Section 3
Allowing children under 16 to take part in performances endangering life or limb	Children and Young Persons Act 1933	Section 23
Applying for/ knowingly offer position to Disqualified person	Criminal Justice and Court Services Act 2000	Sec 35 (1) & (2)
Arranging or facilitating child prostitution or pornography	Sexual Offences Act 2003	Section 50
Arranging or facilitating commission of a child sex offence	Sexual Offences Act 2003	Section 14
Assault by penetration	Sexual Offences Act 2003	Section 2
Assault occasioning actual bodily harm	Offence Against the Person Act 1861	Section 47
Assault of a child under 13 by penetration	Sexual Offences Act 2003	Section 6
Assault with intent to commit buggery with a person under 18 (repealed by 2003 Act)	Sexual Offences Act 1956	Section 16
Attempt in relation to offences under section 2,5,6,7,10,11,12,22 and 23	Sexual Offences Act 1956	*****

<b>Offences</b>	<b>Act</b>	<b>Section</b>
Attempt, conspiracy, incitement, aiding and abetting, counselling or procuring in relation to any of the offences from Sexual Offences Act 2003.	Sexual Offences Act 2003	*****
Buggery (attempt or commit) where the victim is under 18 (repealed by 2003 Act)	Sexual Offences Act 1956	Section 12
Burglary (entering a building or part of building with intent to rape a child)	Theft Act 1968	Section 9
Care workers: causing a person with a mental disorder to watch a sexual act (where the victim is under 18)	Sexual Offences Act 2003	Section 41
Care workers: causing or inciting sexual activity (where the victim is under 18)	Sexual Offences Act 2003	Section 39
Care workers: sexual activity in the presence of a person with a mental disorder (where the victim is under 18)	Sexual Offences Act 2003	Section 40
Care workers: sexual activity with a person with a mental disorder (where the victim is under 18)	Sexual Offences Act 2003	Section 38
Causing a child to watch a sexual act	Sexual Offences Act 2003	Section 12
Causing a person to engage in sexual activity without consent.	Sexual Offences Act 2003	Section 4
Causing a person with a mental disorder to engage in or agree to engage in sexual activity by inducement, threat or deception (where the victim is under 18)	Sexual Offences Act 2003	Section 35
Causing a person with a mental disorder to watch a sexual act by inducement, threat or deception	Sexual Offences Act 2003	Section 37
Causing a person, with a mental disorder impeding choice, to watch a sexual act (where the victim is under 18)	Sexual Offences Act 2003	Section 33
Causing or allowing persons under 16 to be used for begging	Children and Young Persons Act 1933	Section 4
Causing or encouraging prostitution of defective (repealed by 2003 Act)	Sexual Offences Act 1956	Section 29
Causing or encouraging prostitution of, or intercourse with, or indecent assault on, girl under 16 (repealed by 2003 Act)	Sexual Offences Act 1956	Section 28
Causing or inciting a child to engage in sexual activity	Sexual Offences Act 2003	Section 10
Causing or inciting a child under 13 to engage in sexual activity	Sexual Offences Act 2003	Section 8
Causing or inciting a person, with a mental disorder impeding choice, to engage in sexual activity (where the victim is under 18)	Sexual Offences Act 2003	Section 31
Causing or inciting child prostitution or pornography	Sexual Offences Act 2003	Section 48
Causing or inciting prostitution for gain	Sexual Offences Act 2003	Section 52
Causing prostitution of a girl under 16 (repealed by 2003 Act)	Sexual Offences Act 1956	Section 22

<b>Offences</b>	<b>Act</b>	<b>Section</b>
Causing/allowing persons under 16 to be begging	Children and Young Persons Act 1933	Section 4
Child destruction	Infant Life (Preservation) Act 1861	Section 1
Child sex offences committed by a children or young persons	Sexual Offences Act 2003	Section 13
Child Stealing or receiving a stolen child	Offence Against the Person Act 1861	Section 56
Committing an offence with intent to commit a sexual offence (if intended offence is against a child)	Sexual Offences Act 2003	Section 62
Common law assault or battery	Common law	
Conspiring or soliciting to commit murder	Offence Against the Person Act 1861	Section 4
Controlling a child prostitute or a child involved in pornography	Sexual Offences Act 2003	Section 49
Controlling prostitution for gain	Sexual Offences Act 2003	Section 53
Cruelty to a person under sixteen	Children and Young Persons Act 1933	Section 1
Detention of a girl under 18 in a brothel or other premises (repealed by 2003 Act)	Sexual Offences Act 1956	Section 24
Drunk in Charge of a child under 7 yrs	Licensing Act 1902	Section 2
Engaging in sexual activity in the presence of a child	Sexual Offences Act 2003	Section 11
Engaging in sexual activity in the presence of a person with a mental disorder impeding choice (where the victim is under 18)	Sexual Offences Act 2003	Section 32
Engaging in sexual activity in the presence, procured by inducement, threat or deception, of a person with a mental disorder (where the victim is under 18)	Sexual Offences Act 2003	Section 36
Exposing a child under 7 to risk of burning.	Children and Young Persons Act 1933	Section 11
Exposing a child, whereby life is endangered	Offence Against the Person Act 1861	Section 27
Exposure	Sexual Offences Act 2003	Section 66
False imprisonment	Common law	
Give/ Cause to be given Intoxicating Liquor to a child under 5 yrs	Children and Young Persons Act 1933	Section 5
Importation of goods including indecent photographs of persons under 16	Customs and Excise Management Act 1979	Section 17
Incest by a man where the victim is under 18 (repealed by 2003 Act)	Sexual Offences Act 1956	Section 10
Incest by a woman where the victim is under 18 (repealed by 2003 Act)	Sexual Offences Act 1956	Section 11
Inciting a child family member to engage in sexual activity	Sexual Offences Act 2003	Section 26
Inciting girl under 16 to have incestuous sexual intercourse (repealed by the 2003 Act)	Criminal Law Act 1977	Section 54
Indecency between men where one or both parties are under 18 (repealed by 2003 Act)	Sexual Offences Act 1956	Section 13
Indecent assault on a female under 18 (repealed by 2003 Act)	Sexual Offences Act 1956	Section 14

<b>Offences</b>	<b>Act</b>	<b>Section</b>
Indecent assault on a male under 18 (repealed by 2003 Act)	Sexual Offences Act 1956	Section 15
Indecent conduct towards young child (repealed by the 2003 Act)	Indecency with Children Act 1860	Section 1(1)
Indecent exposure (repealed by 2003 Act)	Town Police Clauses Act 1847	Section 28
Indecent photographs of children	Protection of Children Act 1978	Section 1
Inducement, threat or deception to procure sexual activity with a person with a mental disorder	Sexual Offences Act 2003	Section 34
Infanticide	Infanticide Act 1938	Section 1
Intercourse with a girl between 13 and 16 (repealed by 2003 Act)	Sexual Offences Act 1956	Section 6
Intercourse with a girl under 13 (repealed by 2003 Act)	Sexual Offences Act 1956	Section 5
Intercourse with a woman who has a mental disorder (repealed by 2003 Act)	Sexual Offences Act 1956	Section 7
Kidnapping	Common law	
Living on earnings of male prostitution	Sexual Offences Act 1967	Section 5
Making a threat to kill a child	Offence Against the Person Act 1861	Section 16
Maliciously administering poison so as to endanger life or inflict grievous bodily harm on a child under 18	Offence Against the Person Act 1861	Section 23
Man living on earnings of a prostitute (repealed by 2003 Act)	Sexual Offences Act 1956	Section 30
Manslaughter of a child or young person under 18	Offence Against the Person Act 1861	Section 5
Meeting a child following sexual grooming etc.	Sexual Offences Act 2003	Section 15
Murder of a child under 18	Offence Against the Person Act 1861	Section 1
Murder or manslaughter of a child or young person	Common law	
Offence of abduction of a child by parent	Child Abduction Act 1984	Section 1
Paying for the sexual services of a child	Sexual Offences Act 2003	Section 47
Permits defective to use premises for intercourse (repealed by 2003 Act)	Sexual Offences Act 1956	Section 27
Permitting a girl between 13 and 16 to use premises for intercourse (repealed by 2003 Act)	Sexual Offences Act 1956	Section 26
Permitting a girl under 18 to use premises for intercourse (repealed by 2003 Act)	Sexual Offences Act 1956	Section 25
Possession of indecent photographs of children	Criminal Justice Act 1988	Section 160
Procurator of girl under 18 (repealed by 2003 Act)	Sexual Offences Act 1956	Section 23
Procurement of a defective (repealed by 2003 Act)	Sexual Offences Act 1956	Section 9
Procurement of a girl under 18 by false pretences (repealed by 2003 Act)	Sexual Offences Act 1956	Section 3

Procurement of a girl under 18 by threats (repealed by 2003 Act)	Sexual Offences Act 1956	Section 2
<b>Offences</b>	<b>Act</b>	<b>Section</b>
Procuring others to commit homosexual acts (Repealed by 2003 Act)	Sexual Offences Act 1967	Section 4
Rape	Sexual Offences Act 2003	Section 1
Rape of a child under 13	Sexual Offences Act 2003	Section 5
Rape of a child under 18 (repealed by 2003 Act)	Sexual Offences Act 1956	Section 1
Recovery of missing or unlawfully held children	Children Act 1989	Section 50
Sexual Activity with a Child	Sexual Offences Act 2003	Section 9
Sexual activity with a child family member	Sexual Offences Act 2003	Section 25
Sexual activity with a person with a mental disorder impeding choice (where the victim is under 18)	Sexual Offences Act 2003	Section 30
Sexual assault	Sexual Offences Act 2003	Section 3
Sexual assault of a child under 13	Sexual Offences Act 2003	Section 7
Sexual Intercourse with patients (where the victim is under 18)	Mental Health Act 1959	Section 128
Supplying or offering to supply a Class A drug to a child	Misuse of Drugs Act 1971	Section 4
Trafficking into the UK for sexual exploitation	Sexual Offences Act 2003	Section 57
Trafficking out of the UK for sexual exploitation	Sexual Offences Act 2003	Section 59
Trafficking within the UK for sexual exploitation	Sexual Offences Act 2003	Section 58
Trespass with intent to commit a sexual offence (if intended offence is against a child)	Sexual Offences Act 2003	Section 63
Voyeurism	Sexual Offences Act 2003	Section 67
Woman exercising control over a prostitute.	Sexual Offences Act 1956	Section 31
Wounding and causing grievous bodily harm	Offence Against the Person Act 1861	Sections 18 and 19
<b>Please note that if an offence is listed above it's inclusion here is due to the fact that the victim was under 18 years of age.</b>		
List compiled 2004 – Home Office		



**BEDFORDSHIRE POLICE**

**AND BEDFORDSHIRE CHILDRENS'S SERVICES SOCIAL CARE**

**PLANNING FOR VULNERABLE WITNESS FORM**

Name of  
Witness:

Date of discussion /meeting

Persons Present at planning discussion / meeting

**Consideration of Vulnerable Witness for Interview.**

Checklist of factors: Consider all that are relevant, and indicate by ticking appropriate box that factor has been taken into account comment as necessary overleaf.

Witness's age:

Witness's race, culture, ethnicity and first language:

Witness's religion:

Witness's gender and sexuality:

Any physical and/or mental health needs:

Any specialist health and/or mental health needs:

Witness's cognitive abilities (e.g. memory, attention span):

Witness's linguistic abilities (e.g. how well do they understand spoken language and how well do they use it?):

Witness's current emotional state and range of behaviours:

Witness's family members/carers and nature of relationships:

Witnesses overall sexual education, knowledge and experiences:

Any significant stresses recently experienced by the child and/or family (e.g. bereavement, sickness, domestic violence, divorce, job loss, etc):

Bathing, toileting and bedtime routines:

Sleeping arrangements:

Requirement for support during ABE interview:

Proposed Lead Interviewer: name:

Signature:

Co-interviewer: Name:

Signature:

**PLANNING FOR VULNERABLE WITNESS FORM**

Name of Witness:  
(Continuation sheet)

Proposed Lead Interviewer: name:

Signature:

Co-interviewer: Name:

Signature:

Appendix D ABE2

BEDFORDSHIRE POLICE  
AND BEDFORDSHIRE CHILDREN'S SERVICES SOCIAL CARE

**CONTACT WITH VULNERABLE WITNESS FORM**

**This form is required to be completed on each occasion where there is contact by Police and/or Children Services Social Care with a vulnerable witness subject of an investigation.**

Witness's  
Name:

D.o.B.:

Meeting Place:  
(Do not show home address, 'home' will suffice)

Date:

Time start

Time End

Purpose of  
Visit:

Persons present, job title, relationship with  
witness:

Nature of  
Concerns:

---

Focus of discussion with witness and record in verbatim of anything said by the witness in relation to the allegation by the witness or in the presence of the witness.

Lead Interviewer: name:

Signature:

Co-interviewer: Name:

Signature: