

NHS Board Meeting
24 February 2021

Lanarkshire NHS Board
Kirklands
Fallside Road
Bothwell
G71 8BB
Telephone: 01698 855500
www.nhslanarkshire.scot.nhs.uk



SUBJECT: SEXUAL ASSAULT AND RAPE SERVICES

1. PURPOSE

This paper is coming to the Board:

For approval	<input type="checkbox"/>	For endorsement	<input type="checkbox"/>	To note	<input checked="" type="checkbox"/>
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2. ROUTE TO THE BOARD

The paper has been:

Prepared	<input type="checkbox"/>	Reviewed	<input checked="" type="checkbox"/>	Endorsed	<input type="checkbox"/>
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By the Forensic Medical Examination Group.

3. SUMMARY OF KEY ISSUES

3.1 Background

NHS Boards have been working with a National Taskforce to improve forensic medical and health care services for victims of sexual crime. With time limited government funding, NHS Boards have been preparing and developing services to meet the National Healthcare Improvement Scotland Standards for Forensic Medical Examination, published in 2017. From April 2021 NHS Boards will continue funding the developed services to expected standards.

In addition, the Forensic Medical Services (Victims of Sexual Offences) (Scotland) Bill – which will place **direct, statutory** functions on NHS Boards to provide these services to victims, [including those who have chosen not to report the crime to the police, or are undecided, but wish to undergo an examination and access healthcare support] – will come into law later in 2021.

NHS Lanarkshire is an established member of a West of Scotland Regional Sexual Assault & Rape Service. Options appraisal processes have been conducted and an agreed Hub & Spoke Model of service agreed. The funding requirements have been communicated to and agreed by Board Chief Executives for the delivery of services from 1st April 2021.

This report builds on the update provided to the Board in October 2020, focuses on local progress, and confirms the name chosen for the new facility.

3.2 Existing Service Model

At the time of this report, the current service model is still operating (where NHS Lanarkshire has a Service Level Agreement with the regional Sexual Assault Referral Centre (SARC) known as Archway, operated by Glasgow City H&SCP for Forensic Medical Examination (FME) and throughcare. Lanarkshire has local support mechanisms for those who cannot or have not utilised the Archway SARC e.g. children, historical assault, personal choice, availability of service, etc.

We have service contingency with appropriately trained paediatricians supporting children, Sexual Health Services (consultant led), Gender Based Violence and arrangements / relationships with third sector organisations, namely Rape Crisis; Women's Aid; and Say Women. A designated medical examination suite within University Hospital Wishaw has long been available but little used, and was generally considered as unfit for purpose due to its location in a busy outpatient area.

Over recent years, there has been a slow and steady shift, through patient choice, for victims to return to NHS Lanarkshire for all through care. NHS Lanarkshire has naturally, been integral to the development of the new regional model of service.

3.3 NHS Lanarkshire Sexual Assault Referral Centre

The physical refurbishment of the chosen site at Netherton House, near University Hospital Wishaw has been completed. The facility will be ready for use when the Regional model is scheduled to be implemented (March / April 2021).

NHS Lanarkshire has been central to the development of Standard Operating Procedures and Pathways, and joint work with members of the Regional Clinical Sub Group has taken place in February 2021 to "walk-through" the procedural aspects of how service will be delivered, to ensure that as far as is practicable, the location and arrangement of equipment etc. is uniform across the regional suites to ensure ease of use for peripatetic practitioners.

Additionally, NHS Lanarkshire has had central involvement in the ongoing development work in IT, Laboratory, National Database and laterally, newly proposed security requirements for the suite, which the Regional Group is endorsing. NHS Lanarkshire will be ready to deliver on current needs as well as anticipated additional needs that the new legislation may generate such as an increase in self-referral of patients for Forensic Examination without the requirement to inform or involve Police or Criminal Justice services if they choose not to.

It should also be noted by the Board that following consultation with patients with lived experience and further discussion through the Programme Board, a proposal for the naming of the Suite was presented at Corporate Management Team (CMT) in January 2021. Approval was required for the name and importantly for the process to legitimately deviate from normal facilities naming protocol due to the sensitive nature of the work that will be conducted within the unit. CMT approved the naming of the suite and the Lanarkshire FME facility will now be known as **The Dunnock Suite**.

3.4 Finance

The previous paper on this topic (October 2020) highlighted the financial resources allocated to the West of Scotland Boards to enable service development across a three-year period. The SG allocation letters to Directors of Finance stated that services developed with this funding, must be maintained by the Health Board beyond the life time of the ring-fenced allocation. This position remains unchanged.

West of Scotland Boards are now moving towards realising the service delivery model agreed in line with the HIS Standards, as facilities in Lanarkshire and Ayrshire and Arran are in a position to be fully functional; and Glasgow is moving to tender for the facilities in William Street. The service though is not in a position to utilise the new facilities as there is a requirement for further recruitment to provide the full regional 24-hour service and the peripatetic service. GG&C hosts the regional service and to date have appointed staff in an aim to stabilise, though not fully cover, the current service delivery model over 24 hours with ad hoc medical sessional payments and medical locum spend continuing. Further recruitment in nursing has been successfully conducted. Medical staffing recruitment was partially successful, and it is planned that this will be completed in the early months of 2021.

3.5 Next Steps

There will be a legal requirement to deliver a fully funded WoS Sexual Assault Service in accordance with the HIS standards by April 2021. In delivering this service, ensuring full utilisation of facilities and acknowledging the capital spend to-date, an agreed ongoing financial funding model is required to support the current required appointment of staff and future costs of ongoing service delivery. Chief Executives are aware of the challenges herein, especially financial.

West of Scotland Boards must take steps to identify the £920,258 recurrently required from 1st April 2021 from within their local budgets (noting that there would be slippage from 2019-20 that could be carried over and used to support the enhanced service over the start of 2021-22). The allocation model to be used will be a percentage contribution to the overall costs in line with the percentage activity for each respective Board area based on a three-year rolling average.

4. STRATEGIC CONTEXT

This paper links to the following:

Corporate objectives	<input checked="" type="checkbox"/>	AOP	<input checked="" type="checkbox"/>	Government policy	<input checked="" type="checkbox"/>
Government directive	<input checked="" type="checkbox"/>	Statutory requirement	<input type="checkbox"/>	Achieving Excellence/ local policy	<input type="checkbox"/>
Urgent operational issue	<input type="checkbox"/>	Other	<input type="checkbox"/>		

5. CONTRIBUTION TO QUALITY

This paper aligns to the following elements of safety and quality improvement:

Three Quality Ambitions:

Safe	<input checked="" type="checkbox"/>	Effective	<input checked="" type="checkbox"/>	Person Centred	<input checked="" type="checkbox"/>
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Six Quality Outcomes:

Everyone has the best start in life and is able to live longer healthier lives; (Effective)	<input checked="" type="checkbox"/>
People are able to live well at home or in the community; (Person Centred)	<input checked="" type="checkbox"/>
Everyone has a positive experience of healthcare; (Person Centred)	<input checked="" type="checkbox"/>
Staff feel supported and engaged; (Effective)	<input checked="" type="checkbox"/>
Healthcare is safe for every person, every time; (Safe)	<input checked="" type="checkbox"/>
Best use is made of available resources. (Effective)	<input checked="" type="checkbox"/>

6. MEASURES FOR IMPROVEMENT

Healthcare Improvement Scotland set out 5 key standards for Healthcare and Forensic Medical Services for people who have experiences rape, sexual assault or child sex abuse, with progress reported via Scottish Government. Work is ongoing around the creation of a national performance framework.

7. FINANCIAL IMPLICATIONS

The West of Scotland Health and Social Care Delivery Plan Board agreed that the future regional model should be seven days per week and the financial implications are highlighted at section 3.5 above. Boards are responsible for the financial cost of the service from April 2021.

8. RISK ASSESSMENT/MANAGEMENT IMPLICATIONS

The developments around forensic services sit on the North Partnership register, but consideration should be given to visibility on the corporate register due to the potential financial risks posed due to national funding ending in March 2021.

9. FIT WITH BEST VALUE CRITERIA

This paper aligns to the following best value criteria:

Vision and leadership	<input checked="" type="checkbox"/>	Effective partnerships	<input checked="" type="checkbox"/>	Governance and accountability	<input checked="" type="checkbox"/>
Use of resources	<input checked="" type="checkbox"/>	Performance Management	<input checked="" type="checkbox"/>	Equality	<input checked="" type="checkbox"/>
Sustainability Management	<input checked="" type="checkbox"/>				

10. EQUALITY AND DIVERSITY IMPACT ASSESSMENT

The regional model will be subject to a full Equality and Diversity Impact Assessment.

11. CONSULTATION AND ENGAGEMENT

Three engagement events were held, including victims of rape and sexual assault, as part of the national process for developing the new model.

Detailed consultation on the aforementioned legislation was conducted across NHS Lanarkshire and the other NHS Boards.

12. ACTIONS FOR THE BOARD

The Board is asked to:

Approve	<input type="checkbox"/>	Endorse	<input type="checkbox"/>	Identify further actions	<input type="checkbox"/>
Note	<input checked="" type="checkbox"/>	Accept the risk identified	<input type="checkbox"/>	Ask for a further report	<input type="checkbox"/>

The Board is asked to:

- Note the progress made in developing the new regional model and working towards the five HIS standards;
- Note the progress made in creating the local Forensic Examination facility;
- Note the name of the new facility; and
- Note the potential financial risks associated with the new regional model.

13. FURTHER INFORMATION

For further information about any aspect of this paper, please contact:

Ross McGuffie, Chief Officer, North Health and Social Care Partnership
01698 858 143

Appendix 1: NHS Board Performance Report against the HIS Standards regarding Healthcare and Forensic Medical Services for People who have experienced Rape, Sexual Assault or Child Sexual Abuse: Children, Young People and Adults.

NHS Board: NHS Lanarkshire

Reporting Period: October 2020 – January 2021 inclusive.

Report Prepared By: Jim Duffy

Taskforce Stocktake Report on progress related to the development of services for victims of Rape & Sexual Assault.

1. Current status against HIS standards.

Until the Regional Service Model is operational, Lanarkshire patients continue to receive Forensic Medical Examination at the Archway facility in Glasgow. Much throughcare and aftercare is however already being delivered by NHS Lanarkshire for its own resident patients. Monthly reports continue to show the activity and it should be noted that the prolonged COVID impact has seen reductions in the numbers of referrals (and therefore examinations) being carried out. NHS Lanarkshire remains integral to the development of Regional model and the required Standard Operating Procedures and Pathways. These have been further developed and will be in situ when the new regional model becomes operational in March / April 2021.

2. Development of local Facility

The refurbishment of the facility is complete.

3. Performance against H.I.S. standards

See below. There is still little change in the delivery at this point. This will occur when the regional model becomes operational.

Standard 1: Leadership and governance

Standard statement - Each NHS board demonstrates the leadership and commitment required for a co-ordinated response to meet the needs of people who have experienced rape, sexual assault or child sexual abuse, including immediate clinical needs assessment, forensic examinations and aftercare.

Criteria	What	When	Who	Current Status	Evidence
1.1	Each NHS board has co-ordinated pathways of care in place for children, young people and adults which, at	Current to UWH	Ross McGuffie CO North IJB	AMBER	Child services currently provided by Wishaw Paediatrics. The Lanarkshire Facility is now complete. Discussions are still

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Criteria	What	When	Who	Current Status	Evidence
	<p>a minimum, include:</p> <ul style="list-style-type: none"> a) access to responsive, person-centred and trauma-informed care and support services, independent advocacy, trauma care and safety planning b) immediate clinical needs assessment, c) Immediate and follow-up healthcare, including sexual health and psychosocial wellbeing support. 	<p>Paeds</p> <p>Adults – current to Archway</p>			<p>ongoing regionally to consider the best model for Children and Young people, with particular reference to how they maintain competence/expertise in terms of how many cases they have.</p> <p>Adult services continue to be provided through Archway currently. Regional model has progressed and the readiness of our FME facility will dovetail with the commencement of the new model in March / April 2021.</p> <p>Improved local service provision for children was expected to come on stream by the end of December 2019, but the delays in delivering the facilities have pushed this back. Position for adults as part of the regional model is expected to commence in March / April 2021 (no specific date yet agreed) but this currently under discussion due to a number of challenges and therefore, status is AMBER.</p> <p>Follow on/throughcare is being delivered as before.</p> <p>Discussions have taken place with appropriate senior personnel on the ongoing support required for any individual who may require it, following trauma or historical abuse/assault. It is recognised in Lanarkshire that such individuals will be provided with access to support services at the appropriate time, when they are ready to engage, with no need for new referral.</p>
1.2	<p>Each NHS board has a care pathway for adults which supports:</p> <ul style="list-style-type: none"> a) easy access and self-presentation to healthcare, and b) Forensic medical examinations, subject to appropriate and agreed national collection and retention policies for storage of forensic medical samples. 	<p>Current via Archway</p>	Archway	Green	<p>Current arrangement remains with Archway with pathways and protocols being developed for services to Lanarkshire when Regional Model is functional.</p> <p>Self-presentation out of hours not currently available as FME staff not contracted to conduct these examinations.</p> <p>There continues to be access locally to healthcare via sexual health clinics, GP and other universal routes.</p>

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Criteria	What	When	Who	Current Status	Evidence
1.3	Each NHS board identifies the specific needs of different groups of people who have experienced rape, sexual assault or child sexual abuse and ensures there are policies, procedures and guidelines on how these will be met and monitored.	December 2020 for all groups but Adult provision by Archway until then	Ross McGuffie Children's Services NHSL Archway	AMBER	<p>Monthly activity/performance reports. Third Sector activity outlines. NHSL GBV Services outline, ASSIST activity outline.</p> <p>Needs of male victims are less readily supported by current systems, given low numbers, by third sector service providers.</p> <p>Policies, procedures and guidelines on forthcoming regional arrangements are being completed by the regional working group</p>
1.4	<p>For the co-ordination of healthcare and forensic medical services, each NHS board can demonstrate:</p> <ul style="list-style-type: none"> a) provision of responsive and person-centred services and facilities, including those for children and young people b) development and implementation of relevant policies, procedures, standards and guidance in keeping with the principles of trauma-informed services c) adoption of consistent documentation and data collection and IT infrastructure d) a multi-professional and multi-agency approach, including collaboration between NHS boards 	Mar/Apr 2021 Adult provision by Archway until then with local arrangements for children as before	Ross McGuffie Children's Services NHSL Archway	AMBER	<ul style="list-style-type: none"> a) Archway statement of provision. NHSL Sexual health service model. NHSL GBV services service model. Third sector service models b) SOPs for all cases to be used across region, being developed. c) Monthly reports now routinely sent by regional service manager d) Regular meetings taking place regionally and locally with a full range of stakeholders.

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Criteria	What	When	Who	Current Status	Evidence
	<p>e) Sharing of appropriate information, following consent (where applicable) from the individual, between agencies and teams in line with relevant legislation, principles, policies and procedures.</p> <p>f) Collection, monitoring, and review of data, and action taken as a result.</p> <p>g) ongoing quality improvement (including offering people the opportunity to feedback on their experience)</p> <p>h) Robust clinical governance mechanisms with an executive lead and a clinical lead appointed.</p>				<p>e) Still to be further developed – Caldicott arrangements in place, GDPR applies</p> <p>f) Reports now available</p> <p>g) evaluations via RCS</p> <p>h) leads identified, not yet taken ownership from Archway</p>

Standard 2: Person-centred and trauma-informed care

Standard statement - Each NHS board ensures that people who have experienced rape, sexual assault or child sexual abuse receive person-centred and trauma-informed care.

Criteria	What	When	Who	Current Status	Evidence
2.1	Each NHS board ensures that it develops responsive and age-appropriate services to meet the needs of all people who have experienced rape, sexual assault or child sexual abuse.	Ongoing	Ross	AMBER	Current Archway SLA in place for adults but work ongoing to plan for move to new Regional Model. Paediatric process in place at UHW with new facility completed and expected to be operational in Mar/Apr 2021
2.2	There is a person-centred and trauma-informed response to people who have experienced rape, sexual assault or child sexual abuse that is timely sensitive, respectful, age-appropriate and recognises the person's needs and choices.	Ongoing	All	Green	Ongoing
2.3	A person's views and preferences are sought, documented and shared with the multi-professional and multi-agency team as required, and actioned. Any information shared is subject to appropriate consents being obtained and in line with relevant legislation and professional confidentiality guidance (see Criterion 1.4e).	Ongoing	All	Green	ongoing
2.4	If the person is unable to make their own decisions at any time: a) their preferences will still be sought, and taken into account, where possible, and b) The views of those who know their wishes (taking into account the identity of the suspect), such as a parent, guardian, carer, independent advocate, formal or informal representative, are sought and taken into account.	Ongoing	All	Green	Ongoing

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Criteria	What	When	Who	Current Status	Evidence
2.5	People (and where appropriate their representative) are fully informed, involved in and supported through all stages of their care, including when there are any delays or limitations to the process	Ongoing	All	Green	Archway information resources. National Rape and Sexual Assault guidebook Third sector information materials NHSL sexual health website
2.6	Individualised support needs are assessed, documented and actioned as appropriate.	Ongoing	Archway clinical staff and Paeds	Green	Current arrangements. To be factored into Lanarkshire arrangements as they come on stream.
2.7	People are provided with support and information, in a format appropriate to their needs, about: <ul style="list-style-type: none"> a) support services, independent advocacy, trauma care and mental health services, including safety planning b) immediate clinical needs c) immediate and follow-up healthcare, including sexual health d) the forensic examination and related consent issues, and e) the criminal justice system, where appropriate 	Ongoing	Archway and local services	Green	Leaflets available. National guide book available.
2.8	Support is provided to enable people to access: <ul style="list-style-type: none"> a) immediate and follow-up healthcare b) trauma care, including evidence-based psychological therapies 	Current	All	Green	All services available locally.

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Criteria	What	When	Who	Current Status	Evidence
	<ul style="list-style-type: none"> c) mental health services, including safety planning d) sexual health services e) support services, and f) Independent advocacy. 				
2.9	<p>All adults who refer themselves to services can access:</p> <ul style="list-style-type: none"> a) health and support services (see pathways of care detailed in Criterion 1.1), irrespective of whether or not they have reported to the police, and b) Forensic examinations to ensure that forensic evidence is not lost due to delay caused by uncertainty about whether to report. 	Current	Universal Services and Archway contact	Green	Archway statistics advise No of self-referrals for Lanarkshire. NHSL will comply with all requirements of legislation when passed.
2.10	People have the opportunity to request the sex of the forensic examiner who will be involved in their care. Children and young people are given the opportunity to request the gender of their paediatrician.	Current – except out of hours	Archway and FME staff (on behalf of NHSL)	RED	Sex of examiner offered where possible within hours, but outwith hours FME options limited.
2.11	<p>The timing of the forensic medical examination:</p> <ul style="list-style-type: none"> a) is person-centred and trauma-informed, and b) Follows discussions with the person, the forensic examiner and others as appropriate, for example a paediatrician if the person is under 16 years of age. 	Current	Archway and Paeds clinical staff	Green	Discussions take place with victim to ensure compliance
2.12	For young people and adults, the forensic examination is undertaken within three hours of request.	Variable – better during daytime	Archway and FME, and Paeds clinical	AMBER	Archway figures, and paediatric returns on timescales

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Criteria	What	When	Who	Current Status	Evidence
	<p>Exceptions to this timeframe may be necessary:</p> <ul style="list-style-type: none"> to reflect a person’s choice or decision about the timing of the forensic examination, and In remote and island communities where significant travel is involved. <p>In either of these situations, the forensic examiner provides the person and the police with an indication of when the examination will take place, and the reasons for this are recorded and shared appropriately.</p>	hours	staff		
2.13	A suitably trained, impartial chaperone is offered for all forensic examinations where there is a sole clinician present.	Current	Archway cover and Paeds clinical and the CYP FME	Green	In place
2.14	When a translator or appropriate adult is required, the person’s preferences are sought, including the gender of translator, and these are recorded, shared and actioned as appropriate or reasons documented if this is not possible.	Current	All	Green	Standard Equality Policy and Procedure

Standard 3: Facilities for forensic examinations

Standard statement: Each NHS board ensures that the facilities and equipment for forensic examinations are appropriate, safe and effectively managed.

Criteria	What	When	Who	Current Status	Evidence
3.1	<p>All forensic examinations take place in facilities that are:</p> <ul style="list-style-type: none"> a) located in health or designated multi-agency settings with health and social care facilities, and b) Accessible, suitable and responsive to the needs of all people who use the service. 	Current	NHSL arrangements for Paediatrics at UHW, or young people and adults at Archway	Amber	Archway (on behalf of NHSL) and Paeds arrangements in place, with local facility plans nearing completion as regional model is implemented.
3.2	All facilities and equipment used for forensic medical examinations comply with relevant national standards, specifications and guidelines.	Current	Archway and Paeds	Green	Evidence available from Archway (on behalf of NHSL).
3.3	National sampling kits and any other relevant equipment provided, including colposcopes, are available, monitored, maintained, and up to date and comply with national specifications.	Current	Archway and Paeds	Green	All in place
3.4	The forensic examination will be undertaken:	Current	Archway and Paeds	Green	Separate and individualised arrangements per case. These principles also underpin the new facility design and

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Criteria	What	When	Who	Current Status	Evidence
	<p>a) where there is no risk that the person who has experienced rape, sexual assault or child sexual abuse will come into contact with the suspect</p> <p>b) in a separate setting and by a different forensic examiner from that used for the examination of the suspect, and</p> <p>c) If this is not possible, the actions taken to mitigate risks and reduce contamination of forensic evidence are identified, recorded and shared.</p>				SOP's

Standard 4: Educational, training and clinical requirements

Standard statement - Each NHS board ensures that staff have the knowledge, skills and competency to deliver healthcare and forensic medical services for people who have experienced rape, sexual assault or child sexual abuse.

Criteria	What	When	Who	Current Status	Evidence
4.1	<p>Each NHS board ensures that all staff providing healthcare services and forensic examinations for people who have experienced rape, sexual assault or child sexual abuse have undertaken accredited training proportionate and appropriate to their roles and responsibilities.</p> <p>Training includes, but is not limited to:</p> <ul style="list-style-type: none"> a) person-centred and trauma-informed care, to understand the impact of trauma and how to respond with sensitivity and compassion to people who have experienced rape, sexual assault or child sexual abuse b) communication skills appropriate to the individual needs and age range of people who use services c) equality and diversity informed practice d) child and adult protection issues, as appropriate e) immediate clinical needs assessment, treatment and management f) appropriate and timely referral for immediate and longer term follow-up care g) legislative requirements, including adult and child protection h) standardised data collection i) report writing, court skills and the legal process, 			Green	Training records evidence all requirements

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Criteria	What	When	Who	Current Status	Evidence
	and j) Forensic capture.				
4.2	Joint Paediatric Forensic (JPF) examinations involving child sexual abuse cases include both a competently trained paediatrician and forensic examiner who can carry out timely examinations with a colposcope or equivalent, including photo-documentation.	Current	Paeds	Green	All in place
4.3	Staff are supported to maintain high levels of skill and expertise through: a) clinical supervision b) peer review in keeping with national professional standards c) appraisals, and d) Continuous professional development.	Current	Paeds and Archway	Green	Archway report FME report NHSL staff systems
4.4	Staff wellbeing is supported through ongoing personal and peer support.	Current	Paeds and Archway	Green	Archway report FME report GBV Partnerships locally

Standard 5: Consistent documentation and data collection

Standard statement - Each NHS board ensures that forensic examinations of people who have experienced rape, sexual assault or child sexual abuse are recorded using consistent documentation and data collection.

Criteria	What	When	Who	Current Status	Evidence
5.1	Consistent documentation and data collection for forensic reporting, as agreed by the relevant regional and national networks, are used.	Current document avail waiting new national pathway	Archway	Green	Archway data management.
5.2	<p>Informed consent for the forensic examination is:</p> <ul style="list-style-type: none"> a) obtained for each element of the examination, either from the person or their representative (taking into account the identity of the suspect) b) documented using standardised consent forms, and c) In line with data protection regulations. 	Archway documentation	Archway	Green	Archway data management (on behalf of NHSL)

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Criteria	What	When	Who	Current Status	Evidence
5.3	<p>Following each forensic examination, relevant standardised documentation is:</p> <ul style="list-style-type: none"> a) completed by the forensic examiner (and paediatrician for children and young people) to inform investigators, court practitioners and jurors, and b) Shared and stored appropriately. 	Archway documentation	Archway	Green	Archway data management.