



Your guide to vulnerability

Advice for daily decision making



DEFINITION OF VULNERABILITY

We have adopted The College of Policing definition of vulnerability:

“A person is vulnerable if as a result of their situation or circumstances, they are unable to take care or protect themselves, or others, from harm or exploitation.”

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FOREWORD

PROTECTING VULNERABLE CHILDREN AND ADULTS IS OUR TOP PRIORITY.

All vulnerable adults and children deserve to live in a safe environment, cared for and protected from harm.

This handy guide is here to help. Use it every day, for guidance, clarification of the law and operational advice on how to deal with all manner of situations.

Each section is colour-coded so you can quickly and easily access the topic you need whether that is dealing with child sexual exploitation or forced marriage.

As you go about your daily duties be alert to the signs of vulnerability and know what to look for. As police officers you are often the eyes and ears of the community and come across vulnerable adults and children who may be neglected or abused.

People, young and old can be vulnerable for a number of different reasons. If you spot someone in need of help, it is vital that they are referred to the appropriate agency who can give them the help and support they need.

To protect vulnerable people well, we must undertake all our duties to the highest standard. Talk to people, listen to them and understand their fears and concerns.

But do you always know who is truly vulnerable and what to do for them?

Ask yourself:

- **Would I identify a vulnerable adult or child at risk?**
- **If I am concerned, do I know what to do?**
- **Do I know who to go to for specialist advice?**
- **Am I professionally curious enough to really try and understand the nature of this person's needs?**

Our reputation stands and falls by our ability to protect the most vulnerable people in our communities. Get it right and we not only help that person at risk of harm there and then but we also help to build trust with the wider community.

Demonstrating our professionalism has never been more important and this means having a clear understanding of vulnerability.

I know your job isn't easy and you have to make instant judgments many times a day. I really hope this booklet will give you greater confidence to do so.

Thank you for all that you do to protect lives and enhance the reputation of Humberside Police.

**Lee Freeman
Chief Constable**



CHILD ABUSE

A Child is anyone under the age of 18. ALL children are afforded the protection of the law and it is the Children Act 1989 which provides the legislative framework to achieve this. Guidance for Safeguarding and Child Protection procedures are available on the PVPU website accessed via the Intranet.

WHAT TO DO IF YOU ARE CONCERNED ABOUT A CHILD OR YOUNG PERSON?

The Children Act 1989 sets out the thresholds for intervention and officers need to have a basic understanding of when to make a referral to Children's Social Care.

SECTION 17 CHILDREN ACT 1989 - CHILD IN NEED OF SUPPORT.

A child may be in need of support if without it, the child may come to harm. This threshold enables

Children's Social Care and other agencies to provide support and intervention to prevent this harm occurring. It is relatively low level and Social Care will aim to work with the family and provide this support to parents/carers who may not have the skills or ability to look after their children alone. Children's Social Care require consent from the parent/carer to work with the family if it is deemed that a child is in need of support. Therefore if it is practical, you should inform the parent/carer that you are making a referral and gain their written consent.

SECTION 47 CHILDREN ACT 1989 - CHILD IN NEED OF PROTECTION.

This threshold is met if a child is suffering or likely to suffer SIGNIFICANT harm. Once this threshold is met it places a duty on the Local Authority in whose

area a child resides, to make enquiries into the circumstances. Often this will lead to a statutory intervention such as a child protection plan or formal court proceedings to look at removal. The duty on the Local Authority will often lead to an assessment of risk being completed and this will inform the required mitigating activity. This is a significant level of harm and as such will often be the most serious offending or neglect towards a child. Children's Social Care will always work to try and keep children within their homes and with their families. They practise family based social work and will put support and interventions in place. This may take the form of a formal child protection plan (formerly known as the child protection register) which is a multi-agency plan designed specifically for that child and to address the specific concerns and risks that they face.

There are times when the circumstances are so serious

that to leave the child within the home will be detrimental to their safety or development. In these exceptional cases the Local Authority may either get agreement to accommodate the child away from parents/carers with their consent or they may apply to the family court for an emergency protection order or interim care order where they are given parental responsibility and the child is placed out of the home. **Removal of children is always a last resort and other options should be considered first.**

WHEN SHOULD I USE MY POWER OF POLICE PROTECTION?

The power to take the child into police protection is provided under section 46 of the Children Act 1989. This is an **emergency power** which enables any **police officer** to protect a child who is reasonably believed to be at risk of significant harm. A Police officer **cannot delegate** these responsibilities to Police Staff, a Social Worker,

CHILD ABUSE

medical staff in a hospital, or staff in a place where the child is accommodated.

The power of police protection should only be invoked if the child has suffered significant harm or is likely to suffer significant harm. The need to remove a child from their parent or carer must be a last resort as the impact on them is significant. If there is an option to remove the risk, such as a perpetrator, then this should always be considered first. If removal is necessary then this power can be invoked and the **Duty Inspector** MUST be informed.

The Duty Inspector will act as “**designated officer**” and has responsibility to oversee the welfare and accommodation of the child. There is a requirement on the officer taking the child into police protection to inform the designated officer and Children’s Social Care.

Both the designated officer and Children’s Social care must be provided with the

information which has led to the police action. This should include any relevant previous history held on police systems. The child’s wishes should be taken into account and the child informed of what is going to happen next and who is involved.

A child may only be kept in police protection for a **MAXIMUM** of 72 hours.

WHAT ELSE DO I NEED TO DO?

- Inform the child’s parents/ anyone with parental responsibility unless it is deemed a risk to the child.
- Inform the Dedicated Decision Maker within the relevant Multi Agency Safeguarding Hub (MASH) and submit a Safeguarding form.
- Inform the local authority within whose area the child was found, and if relevant the local authority within whose area the child is ordinarily resident via the Dedicated Decision Maker within the MASH.
- Complete a Police Protection Record in detail, commence the narrative on

the form and ensure that the form is signed by the designated officer.

- Obtain a reference number from the PNC Bureau and record this on the form.
- Submit a copy of the completed form to the PVPU.
- The designated officer retains the paperwork for completion of logs and is responsible for regularly reviewing the grounds for police protection to determine whether it should still remain in place and ensuring that enquiries are being carried out expeditiously by social care and police.
- Police checks on the person accommodating the child must be completed to ensure that we are not placing the child with a person who poses a risk.
- The signed form should include the details of the person(s) accommodating the child whilst in police protection and any specific direction regarding access or excluded persons. A copy is to be provided to the person accommodating the child.
- The Designated officer should document the reason

why the Police Protection has ceased/lapsed and what safeguarding measures are in place. The finalised record is then forwarded to PVP.

WHAT IS SIGNIFICANT HARM?

Significant harm is where a child has suffered or is likely to suffer:

- Physical abuse
- Sexual abuse
- Emotional abuse or
- Neglect

The legislation does not define the line between 'harm' and 'significant harm'. You should give 'significant' its ordinary meaning (i.e. considerable, noteworthy or important).

CHILDREN AND DOMESTIC ABUSE (SPEAK TO THE CHILD)

You MUST ensure you have seen the children and speak to them if they are available as they will always have information to help you understand what is going on.

Children present at domestic abuse incidents need to be assessed to see if they

CHILD ABUSE

are potentially in need of support or a child in need of protection as per the thresholds Section 17 Children Act 1989 – Child in need of support and Section 47 Children Act 1989 – Child in need of protection. If the risk they face meets either threshold then a referral to Children's Social Care must be made.

THE UNBORN CHILD

After 28 weeks of pregnancy an unborn child is considered a child in its own right. The risk posed to an unborn baby can be significant if the mother is putting the baby at risk due to her own activity such as drug taking or the baby is at risk indirectly due to behaviour shown towards the mother such as physical assaults. Child protection procedures require referrals to be made if an unborn is at risk and Children's Social Care will adopt similar assessments and plans as with other children. Officers need to be mindful of this at any incident involving an unborn baby.

SPEAKING TO THE CHILD

Where there is concern for a child, every effort must be made to see and speak to them and any other children present or who normally reside at the premises, to establish that they are unharmed and not at future risk of harm. Officers should do this at the point of initial contact.

Officers need to communicate with children in a way that is appropriate to their age, understanding their preferred method of communication. Officers should avoid questions that are leading and suggestive, but should not allow themselves to be deterred from speaking to a child by concerns over compromising a formal investigative interview in the future. Officers should make a record of the content of the conversation, the timing, setting and people present and **never stop a child who is in free flow.**

WHAT TO DO IF YOU ARE DEALING WITH A VICTIM OR WITNESS WHO IS UNDER 10 YEARS OF AGE?

Section 16 of the Youth & Criminal Justice Criminal Evidence Act 1999, automatically recognises **Child Witnesses as eligible for Special Measures** as they are deemed vulnerable by age. Despite the use of Special Measures, the Judicial Process is still too slow to afford children the earliest opportunity to provide their best evidence.

A protocol now exists between National Society for the Prevention of Cruelty to Children (NSPCC), Crown Prosecution Service (CPS) and HM Courts & Tribunal service to **expedite cases** involving witnesses who are **under 10 years of age**.

The protocol only applies to cases which are:

1. Charged on or after 1st April 2015.
2. Where a witness is under the age of 10 at time the incident is reported to Police, and;

3. They have provided an evidential statement/ Achieving Best Evidence (ABE) interview either in support of prosecution or defence.

This is not exclusive to NCRS Offences, eg may include certain driving offences.

Investigators are to consider early CPS consultation in cases involving under 10s and there is always a requirement for any Rape cases to be considered for early CPS advice.

INTERMEDIARIES

Intermediaries are one of the special measures available for victims or witnesses under the Youth Justice and Criminal Evidence Act 1999. They are communication specialists whose role is to facilitate communication between the witness and the court.

The Criminal Practice Directions 2015 states, 'For children aged 11 years and under in particular, there should be a presumption that an intermediary

CHILD ABUSE

assessment is appropriate.’
Where an intermediary assessment is not considered necessary the rationale should be recorded on the investigation record and the MG6.’

HOW TO MAKE A REFERRAL

In the Humberside Policing area there are 4 local authorities; Hull; East Riding; North Lincolnshire and North East Lincolnshire Children’s Social Care. Within each of these areas there is a Multi-Agency Safeguarding Hub (MASH) with a Police Dedicated Decision Maker (DDM) forming part of the team.

The office hours of the MASH are Monday to Friday 8am-4pm. Contact out of hours should be made via the Duty DS within the Core PVPU if urgent.

If you have concerns for a child, the information must be submitted on a Safeguarding form to one of the SPOC emails

- SPOC Public Protection East Riding
- SPOC Public Protection
- Hull SPOC Public Protection
- Grimsby SPOC Public Protection
- Scunthorpe

If the referral requires urgent action please contact the DDM within the MASH or Core PVPU.

CHILD SEXUAL EXPLOITATION

Child sexual exploitation is a form of child sexual abuse. It occurs where an individual or group takes advantage of an imbalance of power to coerce, manipulate or deceive a child or young person under the age of 18 into sexual activity (a) in exchange for something the victim needs or wants, and/or (b) for the financial advantage or increased status of the perpetrator or facilitator. The victim may have been sexually exploited even if the sexual activity appears consensual. Child sexual exploitation does not always involve physical contact; it can also occur through the use of technology.

There is further information available on the PVPU website accessed via the Intranet under 'Commands'.

Consider:

- The risk of CSE when dealing with vulnerable children

Signs:

- Missing, drugs, alcohol, gifts
- Know what to look for

Engage:

- take time to engage with the child

WHAT KEY SIGNS SHOULD I LOOK OUT FOR?

Often children and young people who are victims of sexual exploitation do not recognise that they are being abused. There are a number of warning signs that can indicate a child may be being groomed for sexual exploitation and behaviours that can indicate that a child is being sexually exploited. To assist you in remembering and assessing these signs and behaviours we have created the mnemonic '**SAFEGUARD**'.

CHILD SEXUAL EXPLOITATION

Sexual health and Behaviour

Evidence of sexually transmitted infections, pregnancy and termination; inappropriate sexualised behaviour

Absent from school or repeatedly running away

Evidence of truancy or periods of being missing from home or care

Familial abuse and/or problems at home

Familial sexual abuse, physical abuse, emotional abuse, neglect, as well as risk of forced marriage or honour-based abuse; domestic abuse; substance misuse; parental mental health concerns; parental criminality; experience of homelessness; living in a care home or temporary accommodation

Emotional and physical Condition

Thoughts of, or attempted suicide or self-harming; low self-esteem or self-confidence; problems relating to sexual orientation; learning difficulties or poor mental health; unexplained injuries or changes in physical appearance

Gangs, older age groups and involvement in crime

Direct involvement with gang members or living in a gang afflicted community; involvement with older individuals or lacking friends from the same age group; contact with other individuals who are sexually exploited

Use of technology and sexual bullying

Evidence of 'sexting', sexualised communication on-line or problematic use of the internet and social networking sites

Alcohol and drug misuse

Problematic substance use

Receipt of unexplained gifts or money

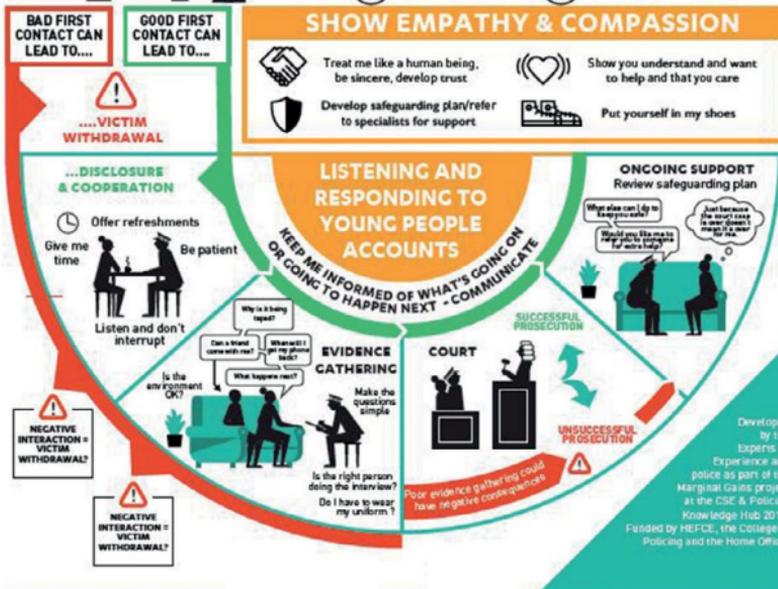
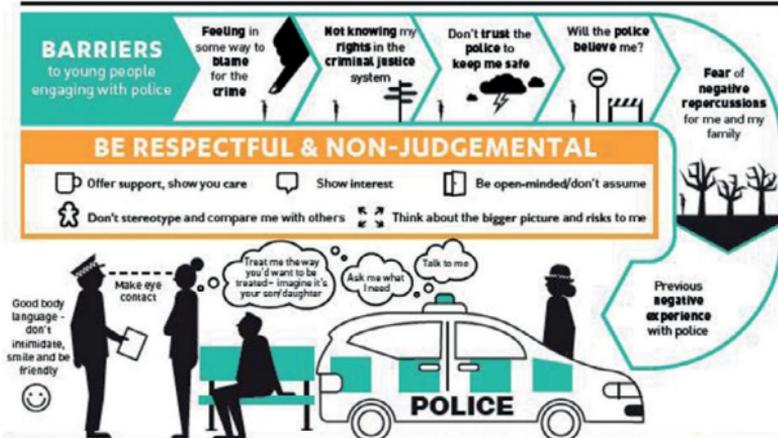
Unexplained finances, including phone credit, clothes and money

Distrust of authority figures

Resistance to communicating with parents, carers, teachers, social services

'MARGINAL GAINS' Small steps to improve how police engage with young people

WHAT YOUNG PEOPLE HAVE SAID



CHILD SEXUAL EXPLOITATION

WHAT SHOULD I DO IF I AM CONCERNED ABOUT A CHILD?

- Submit a safeguarding form to the relevant SPOC email (refer to guidance within the section on Child Abuse).
- Are they safe now? Consider your safeguarding options
- Take time to speak to the child, ask questions about their circumstances. (Children are 'Vulnerable' not 'Streetwise')
- Think of securing and preserving any evidence even if an allegation is not immediately made
- Remember to treat the victim as a victim, even if they do not think that they are one.

Remember your responsibilities mentioned in:

SECTION 1. CHILD ABUSE

- Section 17 Children act 1989 - Child In need of support
- Section 47 Children act 1989 - Child in need of protection

If the matter is urgent call the DDM within the MASH, or the Duty DS within PVPU.

Completing the form must NOT delay immediate action.

FEMALE GENITAL MUTILATION

WHAT IS FGM?

Female genital mutilation (FGM), also known as female circumcision or female genital cutting is defined by the World Health Organisation (WHO) as:

“The partial or total removal of the female genitalia for cultural or other non-therapeutic reasons.”

FGM is illegal in the UK under the Female Genital Mutilation Act 2003 (FGM Act). It has no known health benefits and is known to be harmful to women and girls. It may also constitute an assault occasioning actual or grievous bodily harm. It is primarily, though not exclusively, carried out on minors (from new-born) and is, therefore, child abuse. Adult safeguarding issues may also arise where there is re-infibulation (where a woman is reclosed) after childbirth or pressure for

later FGM to take place in connection with marriage.

FGM of minors is a violation of the rights of the child. In relation to both adults and children, the practice violates the rights to health, security and physical integrity of the person and the right to be free from torture and cruel, inhuman or degrading treatment. It can also result in death, in contravention of the right to life. The practice is therefore contrary to a range of international human rights provisions.

With increased immigration, the practice has spread to Europe, North America and Australia. **It is happening in the UK and Humberside.**

WHAT ARE FGM INDICATORS? (ABOUT TO HAPPEN)

- Female Elder is around
- Professional may hear of reference to FGM
- The girl confides in someone

FEMALE GENITAL MUTILATION

of a “Special Procedure” or “To become a woman”

- Child out of the country for a prolonged period:
- Taken at the start/before school holidays

WHAT ARE FGM INDICATORS? (HAS HAPPENED)

- Female confides in a professional
- Prolonged / repeated absences
- Difficulty walking / Sitting
- Frequent urinary problems
- Reluctant to undergo examinations
- Broken or dislocated limbs

WHAT ARE THE CRIMINAL OFFENCES?

The Female Genital Mutilation Act 2003 came into effect in 2004 replacing a 1985 act.

It makes it:-

- Illegal to practise FGM in the UK
- Illegal to take girls who are British Nationals or permanent residents of the UK abroad for FGM whether or not it is lawful in that country:
- Illegal to aid, abet, counsel

or procure the carrying out of FGM abroad:

- Has a penalty of up to 14 years imprisonment and/or a fine.

The Female Genital Mutilation Act 2003 has been amended by the Serious Crime Act 2015 and now covers:-

1. Anonymity of victims - Section 4a FGM Act 2003:
2. Offence of failing to protect a girl from risk of FGM - Section 3A.

If a genital mutilation offence is committed against a girl under the age of 16, each person who is responsible for the girl at the relevant time is guilty of an offence:-

1. Where the person has parental responsibility for the girl and has frequent contact with her.
2. Where the person is aged 18 or over, and has assumed (and not relinquished) responsibility for caring for the girl in the manner of a parent.

WHAT CAN BE DONE TO PROTECT A GIRL FROM FGM? FGM Protection Orders -

Section 5A FGM Act 2003

The court in England and Wales may make an Order (an FGM Protection Order) for the purposes of:

1. Protecting a girl against the commission of a genital mutilation offence, or
2. Protecting a girl against whom any such offence has been committed

DUTY TO NOTIFY POLICE

Regulated professions (i.e. healthcare, teacher, social worker) must make a notification if they discover that FGM appears to have been carried out on a girl under 18. Either:

1. Where the girl informs the person that an act of FGM has been carried out on her
2. Where the person observes physical signs on the girl appearing to show that an act of FGM has been carried out on her, and the person has no reason to believe that the act was, or was part of a surgical operation within section 1(2)(a) or (b).

WHAT ARE MY IMMEDIATE RESPONSIBILITIES?

FGM on a person U18 is child

abuse.

Contact the PVP DI or Duty DI immediately

Any case must be referred to PVP. Where the victim is a juvenile, PVP will take responsibility for the safeguarding and investigation of such cases as soon as possible.

Officers should bear in mind they may only have one chance to intervene and should aim to establish and ensure the following during the first contact:

- If you believe that a child could be at immediate risk of significant harm consider the use of Police Protection Powers (Section 46 of the Children Act 1989);
- Does the adult have mental capacity to make a decision regarding FGM? If the person is a vulnerable adult complete the Adult Safeguarding form and submit to the relevant SPOC email
- As a priority, establish the safety of the complainant;
- Consider the risk to the girl or young women, or other siblings and relatives, who may be at risk of, or have

FEMALE GENITAL MUTILATION

undergone, FGM. Identify any other family or community members who may be at risk following their contact;

- Gather Intelligence including Police National Database (PND), consider checks with UK Border agency (UKBA) and ascertain if they have been out the Country recently;
- Restrict the log;
- Reassure complainant about confidentiality;
- Establish the current whereabouts of the complainant and whether they are able to speak in a safe and secure environment;
- If the services of an interpreter are required always consider language line and do not use family or community members;
- Recognise and record their wishes;
- Consider any available opportunities to secure forensic evidence;
- Establish methods of continued 'safe contact' i.e. numbers or consider a password to ensure safe contact;
- If there is a risk that a child will be taken abroad or in the case of an adult forced

to travel abroad, consider volunteer fingerprints, photograph and DNA samples (use volunteer DNA forms);

Remember your responsibilities mentioned in:

THE SECTION ON CHILD ABUSE

- Section 17 Children act 1989
- Child In need of support
- Section 47 Children act 1989
- Child in need of protection

If the matter is urgent call the DDM within the MASH, or the Duty DS within PVPU.

The form completion must NOT delay immediate action

Remember your responsibilities mentioned in:

THE SECTION ON ADULTS AT RISK OF HARM AND ABUSE

Complete a **Safeguarding Adult** form and email to Adult Social Care where the victim lives. (Details on the form) Completing the form must Not delay immediate action.

WHO ELSE CAN HELP?

Forward

Tel no: 020 8960 4000

www.forward.org.uk

MISSING PERSONS

WHAT IS MISSING?

“Anyone whose whereabouts cannot be established will be considered as missing until located, and their well-being or otherwise confirmed.

All reports of missing people sit within a continuum of risk from ‘no apparent risk (absent)’ through to high-risk cases that require immediate, intensive action.”

WHAT ARE YOUR CONSIDERATIONS?

Every missing person case is different and should be assessed according to the circumstances of that specific case.

In all cases of children going missing, there should be consideration to communicating with specialist departments such as the Missing Persons Co-ordinators, the Specialist CSE Investigation Team and PVP, who may have prior knowledge or specialist

advice/assistance to offer.

People rarely go missing without a genuine reason, especially if they go missing on more than one occasion.

- The vast majority of missing persons are vulnerable and we must ensure the following key elements are considered
- Protect those at risk of harm
- Minimise stress and ensure high quality of service is provided to the families and carers of missing persons
- Always request and check compact for warning markers
- Always check Police Intelligence systems and consider PND checks for any relevant information;
- Humberside Police will not disclose without permission the whereabouts of any adult reported missing if they are;
 - Aged 18 or over
 - Have capacity
 - Not authorizing the disclosure of their whereabouts.
- On the basis of all of

MISSING PERSONS

the information available make the appropriate risk assessment as this will help to inform the police response

WHAT ARE THE RISK CATEGORIES?

No apparent risk (absent)

There is no apparent risk of harm to either the subject or the public.

Actions to locate the subject and/or gather further information should be agreed with the informant and a latest review time set to reassess the risk.

Low risk

The risk of harm to the subject or the public is assessed as possible but minimal.

Proportionate enquiries should be carried out to ensure that the individual has not come to harm.

Medium risk

The risk of harm to the subject or the public is assessed as likely but not serious.

This category requires an active and measured response by the police and other agencies in order to trace the missing person and support the person reporting.

High risk

The risk of serious harm to the subject or the public is assessed as very likely.

This category almost always requires the immediate deployment of police resources – action may be delayed in exceptional circumstances, such as searching water or forested areas during hours of darkness. A member of the senior management team must be involved in the examination of initial lines of enquiry and approval of appropriate staffing levels. Such cases should lead to the appointment of an investigating officer (IO) and possibly an SIO, and a police search adviser (PoISA).

There should be a press/media strategy and/or close contact with outside agencies. Family support should be put in place where appropriate. The MPB should be notified of the case without undue delay. Children's services must also be notified immediately if the person is under 18.

Risk of serious harm has been defined as (Home Office 2002 and OASys 2006):

'A risk which is life threatening and/or traumatic, and from which recovery, whether physical or psychological, can be expected to be difficult or impossible.'

Where the risk cannot be accurately assessed without active investigation, appropriate lines of enquiry should be set to gather the required information to inform the risk assessment.

ACTIONS TO BE CONSIDERED

- Search premises where person has gone missing from, including outhouses, sheds etc.
- Obtain details and circumstances of the disappearance;
- Identify any immediate risk;
- Arrange for the missing person investigation to be documented;
- This can be manually on a COMPACT;
- Identify any immediate enquires to be carried out;
- Obtain a photograph or arrange a digital photograph to be uploaded to the Compact

record;

- Inform the Hub and the Duty Inspector Community Patrol;
- Any HIGH risk missing persons will be referred to Force Pacesetter and all other current missing persons, including children, will be referred to local Pacesetter' for review;
- Check Compact as often this will have been pre populated with key information in relation to previous incidents
- Check for warning markers, previous risk assessments and found locations.

WHAT DO I DO WHEN A MISSING PERSON IS FOUND?

When a missing person is located a safe and well check will be conducted as soon as possible after their return and in any case within 24 hours. The interviewing officer must consider:

- If they are the victim of a crime including sexual abuse, domestic abuse, forced marriage, gangs, radicalisation, or honour based abuse;
- If they are suffering from mental ill health or other psychological trauma
- If the missing person is a child, establish whether the child is at risk from sexual

MISSING PERSONS

- exploitation or has had contact with persons posing a risk to children;
- Why the person went missing;
 - If they are likely to go missing again;
 - Details of movements during time missing;
 - Details of where they were found;
 - Referral to other agencies especially Child Social Care if under 18 years old or Adult Social Care over 18;
 - If a Child Abduction Notice (CAN) is being considered please refer to the PVP website on the Force Intranet. Record this information on COMPACT at the earliest opportunity and in any case within 1 hour
 - Safe and well interviews must be completed without exception.
 - If the person is high risk a COMPACT PIR must be completed documenting the missing and found circumstances.
 - Notify the press team.

WHO ELSE CAN HELP?

Contact the Missing Person Coordinator (MPC). Remember your responsibilities mentioned in:

THE SECTION ON CHILD ABUSE

- Section 17 Children act 1989
- Child In need of support
- Section 47 Children act 1989
- Child in need of protection

If the matter is urgent call the DDM within the MASH, or the Duty DS within PVPU.

The form completion must NOT delay immediate action

Remember your responsibilities mentioned in:

THE SECTION FOR ADULTS AT RISK OF HARM AND ABUSE

Complete a Safeguarding Adult form and sent to one of the SPOC emails – SPOC Public Protection East Riding, SPOC Public Protection Hull, SPOC Public Protection Grimsby or SPOC Public Protection Scunthorpe - for the area in which the victim lives. The forms are available on the PVPU website on the Humberside Police Intranet.

If the matter is urgent contact the police Dedicated Decision Maker (DDM) within the Multi-Agency Safeguarding Hub (MASH). Completing the form must Not delay immediate action.

RAPE AND SERIOUS SEXUAL OFFENCES

IMMEDIATE RESPONSIBILITIES?

The most important steps that are taken in any investigation are often those taken by the first attending officers when you are deployed to a report of rape and serious sexual crime.

When attending such an incident you should:

- Make the victim feel safe and start the investigation.
- Obtain the initial disclosure/information from the incident log.
- Ensure you use an Early Evidence Kit (EEK)
- Inform the Duty DI or the Duty PVP DI as soon as possible
- Obtain initial account and record verbatim (Sexual Offence Initial Investigator Trained (SOIIT) log book).
- Provide your duty statement and describe the victim's demeanour.

At the scene you will be faced by the conflicting

demands of meeting the needs of the victim and taking steps to preserve evidence. Your main concern is to ensure that urgent medical and welfare requirements of the victim are addressed.

FAST TRACK ACTIONS AND CONSIDERATIONS

Each case will present different priorities. You will need to make an early assessment of the incident to determine the action to take.

INITIAL CONSIDERATIONS

- Preservation of Life
- Identify and preserve scene(s)
- Secure and gather evidence
- Identify Victim(s)
- Identify Suspect(s)

Victims Identify, support and sensitively preserve evidence

Scenes Identify, preserve, assess and commence log

RAPE AND SERIOUS SEXUAL OFFENCES

Suspects identify, arrest and preserve

Witnesses identify, support and sensitively preserve evidence

Log Decisions and rationale, circumstances, resources and conditions

Family/community
Identify, inform, primary support (needs, concerns, expectations, sensitivity)

Physical evidence
Preservation (CCTV, public transport escape routes, ambulances, hospitals)

Intelligence Identify, prioritise, maximise, exploit, consider, community and open source

Prevent contamination
Victims, scenes, witnesses, suspects

Lines of responsibility
Identify, inform, brief, coordinate and review

THE FIRST ACCOUNT FROM THE VICTIM

The first account may

contain important information and may be admissible in court as hearsay evidence of the truth of the account to show consistency or inconsistency. Your record of the account should be as accurate as possible.

Please **DO NOT** complete an **MG11** with a victim of rape unless directed to do so as this then prohibits the victim's evidence being captured in the form of an Achieving Best Evidence (ABE) interview. This can have a negative impact on the investigation and more importantly on the victim.

A first account from a victim of rape and serious sexual crime should be recorded accurately in the victim's own words.

Make use of **5WH** open questions (**what, when, where, who, why** and **how**).

Taking a first account from the victim should be limited to asking about these issues:

- Need for medical assistance

- Identity, location and description of suspect (if known)
- Time of the offence in order to prioritise actions
- Location of the crime scene(s)
- Exact nature of the offence(s) to identify forensic opportunities for using Early Evidence Kits (EEKs) and informing the forensic medical examiner
- Actions since the offence took place which may affect forensic opportunities, eg washing, drinking
- Identity and contact details of any other person(s) informed of the offence by the victim
- Identity and existence of any witnesses to the offence or to events immediately prior to the offence

PRESERVING FORENSIC EVIDENCE

Victims of rape or serious or sexual crime may give little information about the nature of the offence(s) which can make it difficult for you to assess which parts of the EEK to use and advise the victim.

Alternatively, the victim may ask you for advice because they want to wash, change clothes, use the toilet etc.

- Establish some basic information about the offence(s) without asking leading questions.
- Give them an estimate of how long it will be before the forensic medical examination takes place
- If in doubt, use all modules of the EEK
- Give advice which balances the victim's needs and wishes with the requirement to preserve evidential opportunities
- If the suspect is identified consider an early arrest especially if there are still forensic opportunities or scenes to be preserved.
- Consider the use of a dry cell in custody

PROTECTING THE CRIME SCENE

Identify, secure and protect all scenes, including the victim, location(s) and suspect (if known/present).

RAPE AND SERIOUS SEXUAL OFFENCES

Consider:

- Any access and exit routes used by the victim and suspect(s) including victim release sites;
- Any possible hiding places, dumping sites and vehicles used for transporting the victim or leaving the scene;
- Avoiding cross-contamination of evidence. If the suspect is known/present or a further scene(s) is identified, a different officer will be deployed to deal with this.
- All adult victims of recent rape and serious sexual offences (7 days) should be taken to the Sexual Assault Referral Centre

SEXUAL ASSAULT REFERRAL CENTRE

The CASA Suite, Sexual Assault Referral Centre (SARC) offers a range of support services to anyone aged 16 or over, living within the Humberside area, who has experienced sexual abuse or sexual violence, either recently or in the past. Clients can refer themselves without having to involve the Police, it is not necessary for a report to have been

made in order to access the services of the SARC. They can also, with a client's permission, take initial referrals from other professionals such as, but not limited to GP's, A&E Depts. and Sexual Health Clinics.

They also work alongside Humberside Police to support any clients who have chosen to report to the Police.

CASA Suite

Address: 810a Hessle Road, Hull, HU4 6RD

Telephone: 01482 305038

Website: www.casasuite.org.uk

WHO ELSE CAN HELP?

Remember victims of rape and serious sexual offences are vulnerable and may need referring to the following:

Victim Support

www.victimsupport.org.uk

Rape Crisis

Tel: 01482 529990

www.rapecrisis.org.uk

PROSTITUTION

It is not illegal to be a prostitute but there are offences associated with prostitution that are illegal.

Involvement in prostitution is behaviour based on survival and often results from a lack of choices. The majority of women become involved in prostitution as a result of child abuse, physical or sexual violence, poverty, homelessness, drug dependency, mental health problems, trafficking, grooming, coercion / domestic abuse.

Sex workers should always be treated with dignity and respect.

WHAT IS THE LAW RELATING TO PROSTITUTION?

It is illegal;

- For a person (whether male or female) to persistently loiter or solicit in a street or public place for the purposes of offering services as a

prostitute.

- For a potential client (also known as a 'punter') to solicit, or solicit from a motor vehicle (commonly known as 'kerb crawling'), another person for the purpose of obtaining their sexual services as a prostitute in a street or public place.
- To own or run a brothel consisting of any number of prostitutes and/or a madam.
- To supply or offer child prostitution (this is specifically illegal for the person paying where child is defined as below 18).
- To control a prostitute for gain commonly known as 'pimping'.

Conduct is persistent if it takes place on 2 or more occasions in any period of 3 months.

For those individuals convicted of loitering or soliciting for the purpose of prostitution, a new order

PROSTITUTION

is now available to courts as an alternative to a fine. This would require someone convicted of an offence of loitering or soliciting to attend three meetings with a court-appointed supervisor.

CHILD OR YOUNG PERSONS INVOLVED IN PROSTITUTION

Any child or young person who becomes involved in prostitution should be treated as a victim of crime rather than an offender.

DRUGS

There are strong links between street prostitution and the drug markets. The use of crack cocaine amongst prostitutes appears to be increasing. Those involved in street prostitution are targeted by drug dealers.

It is common for prostitutes to purchase drugs for their own use, their clients and their 'pimps'.

HUMAN TRAFFICKING AND CHILD SEXUAL EXPLOITATION

The increase in human

trafficking for sexual exploitation is also fuelling the market for prostitution in the UK, although this is largely confined to off street and residential premises such as brothels, massage parlours, saunas and in residential flats. This is a lucrative business and is often linked with other organised criminal activity such as immigration crime, violence, drug abuse and money laundering. Women may be vulnerable to exploitation because of their immigration status, economic situation or, more often, because they are subjected to abuse, coercion and violence. However, there is evidence now that trafficked women are also working on the street.

VIOLENCE AGAINST WOMEN INVOLVED IN PROSTITUTION

Female prostitutes are often at risk of violent crime in the course of their work which can include both physical and sexual attacks, including rape. Perpetrators of such offences include violent clients or pimps. There

tend to be higher levels of violence committed against street sex workers compared with off-street workers, which often go unreported to the police. Prostitutes themselves often take their clients to out of the way places where they are less likely to be interrupted. Police have a role in their protection against any forms of violence, exploitation and coercion.

DOMESTIC ABUSE

Many prostitutes or sex workers may face abuse from their partners, especially if they are also their pimp. Although these cases may be difficult to identify and prosecute, prosecutors should be alert to this fact and consider whether domestic and sexual violence is being used as a form of control and whether or not charges could be instigated against the perpetrator. The CPS guidance on prosecuting cases of domestic violence gives some assistance on how to proceed in cases involving sex workers.

CPS GUIDELINES STATE

In partnership our objectives must be:

- To encourage prostitutes to find routes out of prostitution and to deter those who create the demand for it;
- To keep prostitutes off the street to prevent annoyance to members of the public;
- To prevent people leading or forcing others into prostitution;
- To penalise those who organise prostitutes and make a living from their earnings;
- When considering a child accused of prostitution, reference should be made to the policy document Safeguarding Children Involved in Prostitution, elsewhere in the Legal Guidance, and the child should generally be treated as a victim of abuse. The focus should be on those who exploit and coerce children.

PROSTITUTION

Remember your responsibilities mentioned in:

THE SECTION ON CHILD ABUSE

- Section 17 Children act 1989 - Child in need of support
- Section 47 Children act 1989 - Child in need of protection

Complete the safeguarding form and email to the relevant MASH SPOC email.

The form completion Must NOT delay immediate action.

THE SECTION ON ADULTS AT RISK OF HARM AND ABUSE

Complete a Safeguarding Adult form and send to one of the SPOC emails – SPOC Public Protection East Riding, SPOC Public Protection Hull, SPOC Public Protection Grimsby or SPOC Public Protection Scunthorpe - for the area in which the victim lives. The forms are available on the PVPU website on the

Humberside Police Intranet.

If the matter is urgent contact the police Dedicated Decision Maker (DDM) within the Multi-Agency Safeguarding Hub (MASH).

The form completion Must NOT delay immediate action

Information within the sections on Domestic Abuse, Human Trafficking and Modern Slavery, Rape and Serious Sexual Offences may also assist.

MANAGEMENT OF SEX OFFENDERS AND OTHER VIOLENT OFFENDERS

WHO GOES ON THE SEX OFFENDER REGISTER?

All registered sex offenders (RSO's) are managed on the ViSOR (Violent and Sex Offender Register) system. The register started in 1997.

Certain offenders convicted or cautioned for a sexual offence against a child or adult will go onto ViSOR (Violent and Sex Offender Register) system. For a complete list refer to Schedule 3 of the Sexual Offences Act 2003 or contact the Management of Sex and Other Violent Offenders Team for advice.

WHAT DOES THE SEX OFFENDER REGISTER ENTAIL?

RSO's must comply with 'Notification Requirements', they have to register at a designated police station and give details of their permanent residence and any other addresses in the

UK where they may reside for 7 nights or more within a 12 month period.

They are also required to provide details of any foreign travel, bank and passport details and most importantly any location where they will be for 12 or more hours where there is a child present within the household.

RSO's have to re-register every year even when there are no changes in their personal circumstances. The PNC wanted/missing page provides the last registered address and the date.

HOW DO I KNOW IF SOMEONE IS A REGISTERED SEX OFFENDER?

PNC records the ViSOR subject on the wanted/missing page. They will also be present on Connect and there will be an overt flag providing basic details. The RSO will have an allocated

monitoring officer from the MOSOVO team.

WHAT IS A SHPO? Sexual Harm Prevention Order

These are orders which can be applied for which place restrictions on the registered sex offenders. These are designed to prevent further offending.

These are applied for on conviction, or civil applications can be made at a later date if concerning behaviour is displayed. Once granted all restrictions are recorded on PNC.

A civil SHPO can be applied for even without a previous sexual offence (list schedule 5 SOA 2003), if granted this will put them on the sex offender register.

WHAT IS A SRO? Sexual Risk Order

A Sexual Risk Order is applied for through the civil court for any person posing a sexual risk of harm who has no previous qualifying offences. This again puts restrictions in place to

prevent offending.

For any advice or further information on SHPO /SRO please contact MOSOVO. If a breach occurs the RSO can be arrested.

WHAT SHOULD I DO IF I HAVE CONTACT WITH A RSO?

If you have any contact with an RSO please submit a police information report (PIR), even if the information seems irrelevant. All Intelligence on RSO's helps MOSOVO to monitor and manage their risk, ensure they are not in breach of their SHPO and assess the risk if they are in company with any other person.

WHO MONITORS RSO'S? MOSOVO monitor RSO's.

- They conduct unannounced visits at the RSO's home address/work premises or any other place to risk assess. Risk management plans are created and actions identified and carried out to reduce risk of reoffending.
- They work closely with Probation and Social Care amongst other organisations

and agencies.

- They also apply for civil orders and test compliance.
- They investigate all breaches of Registration and Orders.

CSODS

Any person can attend a police station and make an application under this process. This is in place to provide members of the public the right to ask if a person poses a risk of harm to a child they have contact with. It does not need to be their own child they are concerned about.

HOW CAN MOSOVO ASSIST ME?

The MOSOVO (Management of sexual offenders and violent offenders) teams hold vast amounts of information on ViSOR, and monitoring officers have in depth and personal knowledge of the offenders which may assist your enquiry.

If you are Investigating a sexual offence with suspect unknown, they have a search facility on ViSOR and can identify RSO's which may be

of interest. Please contact MOSOVO with any MO/ description/location.

If there is someone who is displaying concerning sexual behaviour or Interest in children, contact MOSOVO who can review the information and identify whether a Civil Order application is justified. Notify the MOSOVO team where a person is charged with a qualifying sexual offence and due to appear at court. Specialist advice may be given.

WHAT IS A 'POTENTIALLY DANGEROUS PERSON' (PDP)?

A person who is not eligible for management under the Multi-Agency Public Protection Arrangements (MAPPA) process but whose behaviour gives reasonable grounds for believing that there is a present likelihood of them committing an offence or offences that will cause serious harm.

WHAT IS 'PRESENT LIKELIHOOD'?

There is imminent risk of serious harm. The potential event is more likely than not to happen imminently and the impact would be serious.

WHAT IS 'SERIOUS HARM'?

Life-threatening or traumatic, and from which recovery, whether physical or psychological, can be expected to be difficult or impossible.

WHAT DO I DO IF I BELIEVE SOMEONE IS A PDP?

Anyone believing they have a person that fits the PDP definition must in the first instance develop a more comprehensive intelligence assessment.

Where the individual fits the criteria of a PDP, officers must complete 'PDP Referral form' completed in liaison with the local Dangerous Offender Management Team if necessary. The completed referral form is then forwarded to the Dangerous Offender Management Team Detective Inspector.

WHO ELSE CAN HELP?

Further advice can be obtained from the Child Exploitation and Online Protection Centre website (ceop.gov.uk).

DOMESTIC ABUSE

WHAT IS DOMESTIC ABUSE?

Any incident or pattern of incidents of controlling, coercive or threatening behaviour, violence or abuse between those aged 16 or over who are, or have been, intimate partners or family members regardless of gender or sexuality.

TYPES OF ABUSE:

Psychological, physical, sexual, financial, and emotional

Family members will be defined as mother, father, son, daughter, brother, sister, and grandparents whether directly related, in-laws or step family. They do not necessarily have to be related by blood and officers should consider the way they live as a family unit.

WHAT IS COERCION AND CONTROL?

Coercion is an act or a pattern of acts of assault, threats, humiliation and

intimidation or other abuse that is used to harm, punish, or frighten their victim. The effects can be cumulative rather than just incident specific.

Control is a range of acts designed to make a person subordinate and/or dependent by isolating them from sources of support, exploiting their resources and capacities for personal gain, depriving them of the means needed for independence, resistance and escape and regulating their everyday behaviour.

THE LEGISLATION

Section 76 of the Serious Crime Act 2015

As from 29th December 2015 Coercive and controlling behaviour in an intimate or family relationship became a criminal offence.

Person (A) commits an offence if:

DOMESTIC ABUSE

- (A) repeatedly or continuously engages in behaviour towards another person (B) that is controlling or coercive,
- At the time of the behaviour, (A) and (B) are personally connected,
- The behaviour has a serious effect on (B), and
- (A) knows or ought to know that the behaviour will have a serious effect on (B).

'PERSONALLY CONNECTED'

The perpetrator and victim are personally connected when the incident took place;

- They are in an intimate personal relationship (living together or not).
- They are family members living together
- They were previously in an intimate relationship

'SERIOUS EFFECT'

- If A's behaviour causes B to fear, on at least 2 occasions, that violence will be used against B, or
 - It causes B serious alarm or distress which has a substantial adverse effect on B's usual day-to-day activities
- Evidence prior to 29th December 2015 is relevant

of coercive or controlling behaviour and can be used as evidence, but the behaviour will need to have continued beyond the start date for there to be an offence. The Coercive Control offence is not relevant to children under 16yrs, as this is covered by Child Cruelty related offences.

WHAT ARE THE RISK LEVELS?

STANDARD - Current evidence does NOT indicate likelihood of causing serious harm.

MEDIUM - There are identifiable indicators of risk of SERIOUS HARM. Offender has potential to cause SERIOUS HARM but this is unlikely unless there is a change in circumstances such as: Pregnancy; the breakup of relationship; or financial problems.

HIGH - There are identifiable indicators of risk of SERIOUS HARM.

Risk is Dynamic. It could happen at any time and impact would be serious.

WHAT IS SERIOUS HARM?

"A risk which is life-

threatening and/or traumatic and from which recovery, whether physical or psychological, can be expected to be difficult or impossible.”

HOW DO I ASSESS THE RISK?

- When asking the DASH questions take time to get a full understanding of the history and risks by talking to the victim and listening to what they have to say and record the **DASH** (Domestic abuse, stalking, harassment) risk assessment
- Complete the Domestic Abuse form (913) for all domestic abuse incidents – remember to include all children directly linked to the victim or perpetrator (whether they are at the address or not)
- The Hub should provide you with Intelligence regarding the couple and the children in the household. This information informs your decision making as an assessment of the incident.
- Risk is dynamic and safeguarding should be revisited with the victim on a periodic basis, e.g.

- Victim continues to receive contact, threats or harassment from the suspect
- Police establish contact with the suspect and notify them they are wanted (This may trigger an adverse response by the suspect towards the victim)
- Suspect is arrested and released with or without charge.
- Suspect is arrested and bailed, or is on long term bail, or is released from bail.

WHAT ARE MY RESPONSIBILITIES REGARDING SAFEGUARDING?

You are responsible for the immediate safeguarding measures for **standard, medium** and **high** risk victims. **high** risk victims will receive further scrutiny and enhanced safeguarding measures at the DA unit.

You are solely responsible for the safeguarding measures for standard risk. The importance of safeguarding victims and children cannot be overstated. Safety planning provides re-assurance and increases victim's awareness

DOMESTIC ABUSE

of specified risks associated with domestic abuse.

From the most basic advice (use of the 999 system for example) to the most detailed plans, these are all safeguarding measures that we use, every day.

The below list is not exhaustive, but will give you a clear menu of tactical options to consider. Make sure you record what you have done on the 913.

- Discuss an escape plan. Consider escape routes, whether to go to a lockable room, the position of the room i.e. front of premises to attract attention, a room with least amount of risk i.e. The kitchen has weapons, or a room with an additional phone i.e. Landline or spare mobile.
- Give advice regarding cyber-stalking and harassment. More information can be found online.
- Consider a mental health referral if you have concerns about anyone's mental health.
- Consider refuge or emergency accommodation

provided by the council.

- It is advisable for the victim to have a mobile phone and also a safe contact number (friend, neighbour or relative if necessary). Advise the victim to keep their mobile charged and close to them as possible.
- Discuss home and personal security. Consider changing or adding locks, ensure smoke alarms are working, and whether additional lighting is advisable. Advise the victim to vary their daily routine including routes to and from home, school, or work.
- Consider the wider support in place – tell family, friends, work, and neighbours what is happening and consider a 'Code word' in case the victim is in need of assistance. This may not be the case for victims of honour based abuse as these may be the same people that the victim is at risk from.
- DVPN must be considered at the early stages of a perpetrator having been arrested and booked into custody – important to note that the consent of the victim is NOT required

- Consider Claire's Law – where there is concern an individual may be at risk of harm from a person with whom they are in an intimate relationship with - an application can be made by emailing the DA unit.

WHAT ARE MY RESPONSIBILITIES REGARDING THE CHILDREN? Police have a statutory power to share information in order to promote the safety of children.

- You must see the children themselves and listen to what they have to say (Are they really in bed asleep? - check this!)
- If not all children are present, there must be a follow-up visit to check wellbeing.

If not you, who else can do this? Make sure it is done.

Remember your responsibilities mentioned in:
THE SECTION ON CHILD ABUSE

- Section 17 Children act 1989
- Child in need of support
- Section 47 Children act 1989 - Child in need of

protection

If a 913 is completed there is no requirement for a Child Safeguarding form.

Completing the form must Not delay immediate action. It is important to record the details of the children in the household and if present check on their welfare. Remember '**the voice of a child**'.

We are participating in a National scheme called Operation ENCOMPASS. This involves the DA unit sending information to a child's school when a DA incident has occurred. This will happen within 24 hours to ensure the school are monitoring the welfare of the child and act appropriately towards their behaviour.

WHAT ARE MY RESPONSIBILITIES FOR THE INVESTIGATION?

- Obtain a full Victim MG11 detailing the offence and Domestic Abuse History.
- Obtain Consent for Medical Evidence.
- Request and include

DOMESTIC ABUSE

reasoning for a Restraining Order.

- Do not use terminology such as 'uncooperative' or 'hostile'. The victim may be reluctant for many reasons. This should heighten your concern and in fact, on some occasions, prove to be a High risk factor. The use of coercion and control may be the basis for a reluctant victim.
- A negative statement should be in an MG11 format and not a pocket note book.

DOMESTIC ABUSE INVESTIGATION BASIC CHECK LIST

Have you collected all the available evidence? Build an evidence led case that does not rely solely on the victim's support.

- Obtain first accounts from other witnesses, including first disclosure witnesses.
- Protect the scene, including the victim, suspect and other witnesses.
- Consider the wider scene which includes house-to-house enquiries, and CCTV scoping. These **MUST** be considered and included on

the Investigation Log.

- Obtain and listen to the 999 tape of the call in to police
- Body worn video, where available, should be utilized to capture victim accounts, suspect arrest and the scene.
- Photographs of scene and any injuries, clothing, bedding, weapons, signs of disturbance, and footwear
- Recover any possible weapons
- Consider Crime Scene Investigations (CSI) for DNA, fingerprints, blood, hair and other samples which may be at the scene
- Record of any admissions made
- Medical evidence or consent of not available at the time.
- Other statements or ABE interview with children, family, friends, neighbours, visitors, and support services.
- Consider special measures that can be used to facilitate the gathering and giving of evidence by vulnerable and intimidated witnesses such as screens, live link, evidence given in private, removal of wigs and gowns by judges, video-recorded interview, examination of the witness through an intermediary, and

aids to communication.

- All attending officers should complete an MG11 detailing their involvement and actions. Include what the victim said, record the demeanour of all parties present and a description of scene.
- Passive data, Communications data, and financial data. E.g. data mining foot prints, social media and other electronic evidence, messages, diaries, spyware technology, apps, bank records, CCTV. Check all devices for incoming and outgoing data, Wi-Fi, and cell site data, (N.B. communications data can be collected retrospectively from the service provider.)
- VPS which can be updated throughout proceedings.
- Whereabouts of the child during the incident and throughout the history of abuse
- SUSPECT – Arrest, significant statement, access the need for forensic capture, seize clothing and seize mobile phone.

HOW DO I PROVE A SERIOUS EFFECT ON DAY-TO-DAY

ACTIVITIES IF THERE IS COERCIVE OR CONTROLLING BEHAVIOUR?

- Victim Personal Statement (VPS) which can be updated throughout proceedings may become evidence in chief.
- Medical statement including medical professionals' observations when in the company of the victim and perpetrator.
- Statements from friends and family
- Officer's observation
- Presence of panic alarm, TECSOS phone or other emergency alarm
- Changing routes to and from, starting times for work or education etc.
- Asking others to meet children from school
- Civil Orders in place
- Recent alcohol or substance misuse by victim
- Victims general sense of fear
- Bank records to show financial control
- Diary kept by the victim
- Evidence of isolation
- Local enquiries, neighbours, regular deliveries, postal, window cleaner, etc.
- Records of interaction with support services

HONOUR BASED ABUSE

WHAT IS HONOUR BASED ABUSE?

The terms “honour crime” or “honour-based abuse” or “izzat” embrace a variety of crimes of violence mainly but not exclusively against women, including assault, imprisonment and murder, where the person is being punished by their family or their community. They are being punished for actually, or allegedly, undermining what the family or community believes to be the correct code of behaviour. In transgressing this correct code of behaviour, the person shows that they have not been properly controlled to conform and this is to the “shame” or “dishonour” of the family.

WHAT ARE THE INDICATORS OF HONOUR BASED ABUSE?

- Unreasonable restrictions of freedom
- Monitored by siblings,

cousins, family and the wider community.

- Hiding mobile phones, social media, having secret friends
- No aspirations post 16, self-harming
- Running away from home, truancy, absence and persistent absence
- Request for extended leave
- Failure to return from visits to country of origin
- Reports of threats to kill, emotional blackmail extreme victim risk perceptions
- Victims often feel they only have the following choices: Submit, leave, or die

TRIGGERS OF HONOUR BASED ABUSE

- Resisting forced marriage
- Wanting a divorce
- Choosing own partner
- Becoming too “westernised”
- Having sex before marriage/ getting pregnant outside of marriage
- Owning a mobile phone/

learning to drive/smoking/
drinking

- Perceived inappropriate dress
 - wearing makeup, refusing to wear headscarf
- Making own decisions
- Wanting to continue an education
- Being lesbian gay bisexual and transgender

WHAT ARE MY IMMEDIATE RESPONSIBILITIES?

Inform the Duty PVP DI or Duty DI. These are complex, high risk cases and are treated as a crime in action.

ONE CHANCE RULE

Officers should bear in mind they may only have one chance to intervene and should aim to establish and ensure the following during the first contact:

- If you believe that a child could be at immediate risk of significant harm consider the use of Police Protection Powers (Section 46 of the Children Act 1989);
- Make an immediate referral to Children's Social Care.
- If the victim is an adult, do they have the mental capacity to make a decision

regarding Honour Based Abuse?

- As a priority, establish the immediate safety of the complainant; offer and assist in arrangements for a safe place to stay, (consider refuge);
- Consider the risk to the girl or young women, or other siblings and relatives. Identify any other family or community members who may be at risk following their contact;
- Gather Intelligence including PND, consider checks with UKBA and ascertain if they have been out the Country recently;
- Restrict the log;
- Reassure complainant about confidentiality;
- Establish the current whereabouts of the complainant and whether they are able to speak in a safe and secure environment;
- If the services of an interpreter are required always use language line and do not use family or community members;
- Recognise and record their wishes;
- Identify any offences or potential offences

HONOUR BASED ABUSE

- Consider any available opportunities to secure forensic evidence;
- Establish methods of continued 'safe contact' i.e. safe mobile numbers or at their place of work; consider a password to ensure safe contact;
- Consider volunteer fingerprints, photograph and DNA samples (use volunteer DNA forms);

Remember your responsibilities mentioned in:

THE SECTION ON CHILD ABUSE

- Section 17 Children act 1989 - Child in need of support
- Section 47 Children act 1989 - Child in need of protection

WHO ELSE CAN HELP?

IKWRO

Tel number 0207 920 6460

www.ikwro.org.uk

FORCED MARRIAGE

WHAT IS FORCED MARRIAGE?

A forced marriage is a marriage in which one or both parties do not consent to the marriage but are coerced into it. Duress can include physical, psychological, financial, sexual and emotional pressure.

In the cases of some vulnerable adults who lack the capacity to consent, coercion is not required for a marriage to be forced.

WHAT IS A FORCED MARRIAGE PROTECTION ORDER?

A Forced Marriage Protection Order (FMPO) can be obtained for the purpose of protecting a person being forced into a marriage or from any attempt to be forced into a marriage or a person who has been forced into a marriage.

- A FMPO can include restrictions/requirements naming several people and can relate to conduct either within or outside the UK
- Copies of FMPO's will be kept within CRU and also recorded on PNC.
- Contact the Force Solicitor, as they deal with the FMPO applications.
- Only certain courts are involved.
- An application for an FMPO can be done alongside a criminal prosecution.
- In certain cases other orders can be considered (Police Protection Order, Injunction, Protection from Harassment, Domestic Violence Protection Notice (DVPN), etc.)

WHAT IS AN ARRANGED MARRIAGE?

An arranged marriage is a type of marital union where the bride and groom are selected by their families rather than by each other.

FORCED MARRIAGE

This is NOT the same as forced marriage. This is perfectly legal and both parties fully consent to the marriage. An arranged marriage is not illegal.

WHAT ARE THE MOTIVES BEHIND FORCED MARRIAGE?

- Controlling unwanted sexuality (including perceived promiscuity, or being lesbian, gay, bisexual or transgender) - particularly the behaviour and sexuality of women.
- Controlling unwanted behaviour, for example, alcohol and drug use, wearing make-up or behaving in, what is perceived to be, a “westernised manner”.
- Preventing “unsuitable” relationships, e.g. outside the ethnic, cultural, religious or caste group.
- Protecting “family honour” or “izzat”.
- Responding to peer group or family pressure.
- Attempting to strengthen family links.
- Achieving financial gain.
- Ensuring land, property and wealth remain within the family.
- Protecting perceived cultural ideals.
- Protecting perceived religious

ideals which are misguided.

- Ensuring care for a child or vulnerable adult when parents or existing carers are unable to fulfil that role.
- Assisting claims for UK residence and citizenship.
- Long-standing family commitments.

WHAT ARE THE RISKS OF FORCED MARRIAGE?

The risks facing victims of forced marriage, their siblings and other family members will include the possibility of “honour-based” abuse, murder, kidnap, rape, held against will, threats to kill and being abducted overseas.

REMEMBER THE ONE CHANCE RULE.

- Recognise the danger of involving the family and the community in cases of forced marriage.
- Never approach or involve families if forced marriage is suspected.
- It is important that agencies do not initiate, encourage or facilitate family counselling, mediation, arbitration or reconciliation. There have been cases of individuals being murdered by their families

during mediation. Mediation can also place the individual at risk of further emotional and physical abuse.

- Allowing a victim to have unsupervised contact with their family is normally extremely risky. Families may use the opportunity to subject the victim to extreme physical or mental duress or take them overseas regardless of any protective measures that may be in place.
- Always consider whether a communication specialist is needed if a young person is deaf, visually impaired or has a communication impairment.
- Ensure that young people and adults with support needs have access to others outside the family to whom they can turn for help.
- Family group conferences are not appropriate in cases of forced marriage because it will often place the child or young person at greater risk of harm.
- Understand that under no circumstances is it sufficient to protect a child or young person by removing the alleged perpetrator from

the household (as in the significant majority of cases the extended family and wider community are also involved).

- Recognise that placing the child or young person with a family member or member of the same community may place them at risk of significant harm from other family members or individuals acting on the family's behalf.
- Understand the difference between breaking confidence (involving an adult with support needs family without consent) and sharing information with other professionals to prevent an adult with support needs being at risk of significant harm.

WHAT ARE MY IMMEDIATE RESPONSIBILITIES?

Inform the Duty PVP DI or Duty DI as soon as possible.

ONE CHANCE RULE

Officers should bear in mind they may only have one chance to intervene and should aim to establish and ensure the following during the first contact:

FORCED MARRIAGE

- If you believe that a child could be at immediate risk of significant harm consider the use of Police Protection Powers (Section 46 of the Children Act 1989);
- As a priority, establish the immediate safety of the complainant; offer and assist in arrangements for a safe place to stay, (consider refuge);
- Consider the risk to the girl or young women, or other siblings and relatives. Identify any other family or community members who may be at risk following their contact;
- Gather Intelligence including PND, consider checks with UKBA and ascertain if they have been out the country recently;
- Restrict the log;
- Reassure complainant about confidentiality;
- Establish the current whereabouts of the complainant and whether they are able to speak in a safe and secure environment;
- If the services of an interpreter are required always use language line and do not use family or community members;
- Recognise and record their wishes;
- Consider any available opportunities to secure forensic evidence;
- Establish methods of continued 'safe contact' i.e. safe mobile numbers or at their place of work; consider a password to ensure safe contact;
- Consider volunteer fingerprints, photograph and DNA samples (use volunteer DNA forms);

WHO ELSE CAN HELP?

The Forced Marriage Unit

Telephone: 0207 008 0151

Out of hours: 020 7008 1500

(ask for the Global Response Centre)

Email: fmfu@fco.gov.uk

STALKING AND HARASSMENT

WHAT IS STALKING?

Stalking is a type of harassment used to describe a long term pattern of persistent and repeated following or contact, or attempts to contact, a particular victim, or other intrusions into the privacy of the victim.

“Stalking is murder in slow motion”

Paladin which is the National Stalking Advocacy Service defines stalking as - A pattern of unwanted, fixated and obsessive behaviour which is intrusive and causes fear of violence or serious alarm or distress’

The Protection of Freedoms Act 2012 inserted section 2A into the Protection from Harassment Act 1997 and created the offence of stalking.

Section 2A(3) of the Protection from Harassment

Act 1997 gives examples of acts or omissions which are associated with stalking.

These are:

- (a) following a person,
- (b) contacting, or attempting to contact, a person by any means,
- (c) publishing any statement or other material
 - (i) relating or purporting to relate to a person, or
 - (ii) purporting to originate from a person,
- (d) monitoring the use by a person of the internet, email or any other form of electronic communication,
- (e) loitering in any place (whether public or private),
- (f) interfering with any property in the possession of a person,
- (g) watching or spying on a person.

If these acts are taken in isolation they might appear to be harmless, but when carried out repeatedly they

STALKING AND HARASSMENT

may amount to stalking. The behaviours listed above are those which are most commonly associated with stalking cases.

The list is not exhaustive and it is important to remember that the changes to the law still mean that stalking can consist of any type of behaviour experienced by the victim on two or more occasions. The offender must know or ought to know that the course of conduct amounts to harassment of the other person in order to commit the offence.

WHAT IS HARASSMENT?

Harassment is not specifically defined within the Protection from Harassment Act 1997, but it can include repeated attempts to impose unwanted communications and contacts upon a victim in a manner that could be expected to cause alarm, distress or fear in any reasonable person.

WHAT ARE MY RESPONSIBILITIES?

- Where stalking and harassment occurs within

a domestic abuse context, officers will complete a 913 form. The DASH questions on Pronto relating to stalking and harassment lead to an additional set of questions specific to stalking and harassment.

- Where the stalking and harassment is motivated by hostility or prejudice officers must record and deal with this as a Hate crime or incident.

WHAT ARE THE RISKS?

- Domestic abuse stalkers are amongst the most dangerous of all stalkers. There is a high risk of serious harm and murder.

- A prior intimate relationship is the most powerful predictor of violence in stalking cases.

- Behaviours include coercive control and jealous surveillance, not just physical violence - psychological impact.

- If the victim feels they are being stalked ask them to clearly describe what is happening - not just tick 'yes'. Need CONTEXT and DETAIL.

- Remember to ask the additional questions

- Is the victim very frightened?
- Is there a previous domestic abuse and harassment history?
- Does the abuser vandalise or destroy property?
- Does the abuser turn up unannounced more than three times a week?
- Does the abuser follow the victim or loiter near the victim?
- Has the abuser made threats of physical or sexual violence?
- Has the abuser harassed any third party since the harassment began? (i.e. family, children, friends, neighbours, colleagues)
- Has the abuser acted violently to anyone else during the stalking incident?
- Has the abuser engaged others to help (wittingly or unwittingly)?
- Is the abuser misusing/abusing alcohol/drugs?
- Is there a history of previous violence in past? (Psychological or physical. Intelligence or reported).

WHAT IS CYBER-STALKING AND HARASSMENT?

Harassment using the Internet or through misuse of digital communication is

referred to as 'cyber-stalking'. It can include the use of social media sites, chat rooms and other forums facilitated by technology. The suspect may even be in a different country and may use technology to hide their true identity.

The Internet may be used for a range of purposes relating to harassment, including:

- Locating personal information about a victim;
- Communicating with the victim;
- As a means of surveillance of the victim;
- Identity theft such as subscribing the victim to services or purchasing goods and services in their name;
- Damaging the victim's reputation;
- Electronic sabotage such as spamming or sending viruses which may also be covered by computer misuse act offences.
- Tricking other internet users into harassing or threatening the victim.
- Using GPS based applications to establish the current location of the victim. Stalkers who stalk offline will

STALKING AND HARASSMENT

usually assist their activities with some form of technology as a tool, e.g. mobile phones, social networks computers or geo-location tracking. A trigger for cyber stalking usually occurs when there has been a breakdown or change in an offline relationship.

Pure cyber-stalking still inflicts the same amount of psychological damage with many victims suffering from Post-Traumatic Stress disorder (PTSD).

WHERE DO I GO FOR ADVICE?

Officers are encouraged to seek advice from the following departments when dealing with an offence of 'cyber-stalking':

- Digital Forensic Unit (CFU)
- Digital Media Investigator (DMI)
- PVPU
- Cyber Investigation Team (Bridge View)
- Covert Authorities Bureau.
- Cybercrime website.

WHAT ADVICE CAN I GIVE TO A VICTIM OF CYBER-STALKING AND HARASSMENT?

• **Passwords:** Try and secure any online data or social

media accounts with different passwords. Change them regularly and do not share them and avoid writing them down. Try and avoid obvious passwords like 'password' or the names of children and pets. The latest recommendation is three random phrases.

- **Digital footprints:** Complete a 'Google' search and assess what online information exists about you. Remove as much content as possible.
- **Safe Computer:** Use a safe computer and immediately change all of your passwords and PINs online accounts. Start with your key accounts.
- **Online accounts:** Delete online accounts unless they contain evidence especially if they have large amounts of information and photos about you. Decide if you want to set up new ones and limit who you communicate with. Think about what you share with others and whether it will put you at risk. Use a fake name and a fake photo.
- **Apps:** Delete all apps that tell you where you are. Maps, photos, find my phone etc. you can reinstall these later if you want. When installing

the apps pay attention to what they can do. If the app asks for administrator access say no.

- **Blocking:** Block perpetrator and associates
- **Privacy settings:** Review all the privacy settings in your online accounts. Make sure you have the highest settings the account offers.
- Public forums:** Avoid public forums where the perpetrator can easily see your postings.
- **Family and friends:** Educate your friends and family who you share with.
- **Spyware:** Clean your phone and your computer to remove any software or spyware that may have been installed
- **Geolocation:** Use GPS facilities with care and restrict location data especially when taking photos which contain metadata and will reveal where you were when the photograph was taken. Get your car examined for GPS trackers. Does your child's toy contain a tracking device?
- **Email:** Use a new email account. Create multiple accounts so that if one gets compromised you still have another account.

- **Preserve evidence:** take screen shots of all communications, download social media profiles, preserve email headers and IP addresses used by the offender (google will tell you how to do this) Do not delete accounts as the evidence will be lost. Ask the service provider to suspend the account. Report abuse to the site administrator.

WHO ELSE CAN HELP? Paladin National Stalking Advocacy

Email: info@paladinservice.co.uk

Secure Email: info@paladinservice.co.uk.cjasm.net
(Please note that you can only use this account if sending from a secure email account.)
Telephone: 0207 840 8960
Our unique team of accredited Independent Stalking Advocacy Caseworkers (ISACs) ensure that high risk victims of stalking are supported and that a coordinated community response is developed locally to keep victims and their children safe.

HUMAN TRAFFICKING AND MODERN DAY SLAVERY

Modern slavery is the universal term used to describe acts which encompasses human trafficking, slavery, servitude & forced or compulsory labour.

Modern Slavery Act (2015)

- Contains two offences, of 'slavery, servitude and forced or compulsory labour' and 'human Trafficking'

Trafficking in persons shall mean the recruitment, transportation, transfer, harbouring or receipt of persons, by means of threat or use of force or other forms of coercion, of abduction, of fraud, of deception, of the abuse of power or of a position of vulnerability or of the giving or receiving of payments or benefits to achieve the consent of a person having control over another person, for the purposes of exploitation.

Forced or compulsory labour is defined as all work or services which is exacted from any person under the menace of any penalty and for which the said person has not offered himself voluntarily. Slavery and servitude are more serious forms of forced or compulsory labour.

COMMON TYPES OF EXPLOITATION

- **Sexual exploitation** – The use of another person in non-consensual sex.
- **Child sexual exploitation** – Young people (or a third party) receive 'something' as a result of them performing, and/or another or others performing on them, sexual activities.
- **Forced Labour** – Where work is performed under the threat of violence or other penalties, for little or no pay.
- **Domestic servitude** – Victims are forced to carry out housework and domestic

chores in private households with little or no pay, restricted movement, very limited or no free time.

- **Financial exploitation** – Illegal or improper use of an individual's funds, property, or assets by another person
- **Illegal adoption** – children are bought or kidnapped to be sold to prospective parents
- **Criminal exploitation** – Often controlled and maltreated, victims are forced into crimes such as cannabis cultivation or pick pocketing against their will.

WHERE DOES MODERN SLAVERY TAKE PLACE?

Modern slavery can occur in a wide range of common settings and will include but is not limited to the following;

Car washes, brothels, private homes, farms, traveller sites, nail bars, restaurant and kitchens, cannabis farms, ships, care homes, factories, hotels, shops, offices, street begging, etc.

GENERAL INDICATORS THAT SOMEONE MAY BE A VICTIM OF MODERN SLAVERY

- Distrustful of authorities
- Expression of fear or anxiety
- Signs of psychological trauma
- Acts as if instructed by another
- Injuries apparently a result of assault or controlling measures
- Evidence of control over movement, either as an individual or as a group
- Found in or connected to a type of location likely to be used for exploitation
- Restriction of movement and confinement to the workplace or to a limited area
- Passport or documents held by someone else
- Limited social contact and contact with family
- Unable, or reluctant to give details of accommodation or details such as work address
- Perception of being bonded by debt
- Money is deducted from salary for food or accommodation
- Threat of being handed over to authorities

HUMAN TRAFFICKING AND MODERN DAY SLAVERY

- Threats against the individual or their family members
- Being placed in a dependency situation
- No or limited access to bathroom or hygiene facilities or medical care

Engaging with victims

You may be the first person an individual has made contact with outside of their modern slavery situation. It is important you progress sensitively, safely, and only proceed with assistance on the basis of consent (unless a child).

Wherever possible cases should be referred to the police, children's services (for child victims), and the National Referral Mechanism. Safeguarding the victim should be the first priority.

DO'S AND DON'TS

- **Do** ensure safety of the potential victim and yourself first
- **Do** find ways to talk to potential victim alone
- **Do** ask potential victim if they feel safe to speak openly

- **Do** make certain potential victim has full information to make informed decisions
- **Do** know when to break confidentiality (child protection).
- **Do not** try to rescue a victim yourself
- **Do not** inquire about trafficking-related circumstances in front of others
- **Do not** ask anyone accompanying individual to assist with interpreting or to be present during an interview
- **Do not** make promises you can't keep.

NATIONAL REFERRAL MECHANISM FLOWCHART

The National Referral Mechanism (NRM) is a framework for identifying victims of human trafficking or modern slavery and ensuring they receive the appropriate support. Adults must consent to a referral however there is no consent required for children. Police Protection may need to be considered.

PHASE 1: NRM referral from First Responder to UKHTC.



PHASE 2: Reasonable Grounds Decision

The NRM team has 5 working days from receipt of the referral to decide whether there are reasonable grounds to believe the individual is a potential victim (PV). The threshold is “from the information available so far, I believe but cannot prove” that the individual is a PV.



Yes - The PV is accepted in the NRM and gains access to specialist tailored support delivered by the Salvation Army (e.g. access to relevant legal advice, accommodation, protection, practical help etc.) for at least 45 days while their case is considered in full.

NO - Accommodation and support is only provided by the Salvation Army if the PV is destitute.



PHASE 3: Conclusive Grounds decision

During the 45 day reflection and recovery period, the Competent Authority gathers further information relating to the referral to make a conclusive decision on whether the referred person is a victim. The threshold is “it is more likely than not that the individual is a victim.



HUMAN TRAFFICKING AND MODERN DAY SLAVERY



Yes - If the PV is conclusively identified as a victim of trafficking or modern slavery, what happens next depends on their wishes (e.g. possible discretionary leave to remain in the U.K, support to return to home country, etc.).

DUTY TO NOTIFY

From 1 November 2015, specified public authorities have a duty to notify the Home Office of any individual encountered in England and Wales who they believe is a suspected victim of slavery or human trafficking. The Duty to Notify is intended to gather better data about modern slavery in England and Wales.

The 'duty to notify' provision is set out in the Modern Slavery Act 2015, and applies to all Police forces and local authorities in England and Wales, the Gangmasters Labour Abuse Authority and the National Crime Agency.

Home Office staff within UK Visas and Immigration, Border Force and Immigration Enforcement are also required, as a matter of

No - If at any stage the referred person is confirmed not to be a victim of trafficking or modern slavery then dependent on the circumstances they may be referred to the appropriate law enforcement agency.

Home Office policy, to comply with the duty to notify. A duty to notify must be considered where the PV is not engaging and as a consequence a referral to the NRM has not been made.

Access to both the National Referral Mechanism and Duty to Notify Forms can be accessed via www.modernslavery.co.uk

CRIME RECORDING

A crime must be recorded if;

- The circumstances of the victim's report amount to a crime; and
- There is no credible evidence to the contrary immediately available

The victim's belief that they have been exploited will usually be sufficient to justify the recording of a crime.

**USEFUL CONTACTS AND
FURTHER INFORMATION**

www.modernslavery.co.uk

www.humberslave.com

www.nationalcrimeagency.gov.uk

www.modernslaveryhelpline.org

The Salvation Army 24-hour
Confidential Referral Helpline
on 0300 3038151

ADULTS AT RISK OF HARM AND ABUSE

The Care Act 2014 came into effect in April 2015 and reformed the way the adult social care system works in England.

The legislation includes the protection of any person aged 18 or above whom:

- Has needs for care and support (regardless of the level of need and whether or not the local authority is meeting any of those needs)
- Is experiencing, or is at risk of abuse or neglect, and
- As a result of those needs, is unable to protect themselves against the abuse, neglect or the risk of it.

(Care Act 2014)

The purpose of adult safeguarding is to prevent harm and reduce the risk of abuse or neglect to adults with care and support needs. Now local authorities (including the Police) must

promote wellbeing when carrying out any of their care and support functions in respect of a person, and that person should be enabled to participate as fully as possible in decisions at every stage in their care.

WHAT IS WELLBEING?

- Personal dignity including respect;
- Physical and mental health and emotional wellbeing;
- Protection from abuse and neglect;
- Control by the individual over day-to-day life (including care and support provided and the way it is provided);
- Participation in work, education, training or recreation;
- Social and economic wellbeing;
- Domestic, family and personal relationships;
- Suitability of living accommodation.

WHAT IS ABUSE?

Physical abuse; domestic abuse; psychological; financial or material; sexual abuse; neglect or acts of omission; discrimination; institutional abuse; modern slavery and self-neglect.

WHAT DO I DO IF I IDENTIFY AN ADULT WHO IS AT RISK?

Ask yourself:

- Does the person have care and support needs which are impacting on their wellbeing?
- Is the person at risk of harm from abuse or self-neglect?
- Is there an indication of a criminal offence?

Where the adult is at high risk of immediate serious harm or death, you must immediately consider how to reduce this risk whilst having regard for the wishes and capacity of the adult.

WHAT IS SELF-NEGLECT?

Self-neglect covers a wide range of behaviour and includes neglecting to care for one's personal hygiene, health or surroundings, and behaviour such as hoarding. All members of staff dealing

with adults at risk should be aware of their duty of care when dealing with cases of self-neglect, even when the individual has mental capacity.

Any failure in the duty of care that results in harm could lead to a claim of negligence and consequent damages.

HOW DO I MAKE A REFERRAL?

Where there are safeguarding concerns and/or criminal offences complete a Safeguarding Adult form and sent to one of the SPOC emails – SPOC Public Protection East Riding, SPOC Public Protection Hull, SPOC Public Protection Grimsby or SPOC Public Protection Scunthorpe - for the area in which the victim lives. The forms are available on the PVPU website on the Humberside Police Intranet.

If the matter is urgent contact the police Dedicated Decision Maker (DDM) within the Multi-Agency Safeguarding Hub (MASH).

ADULTS AT RISK OF HARM AND ABUSE

The office hours of the MASH are Monday to Friday 8am-4pm. Contact out of hours should be via the Duty DS within the Core PVPU if urgent.

Completion of the form **MUST NOT** delay immediate action.

Please refer to the section on Mental Health for further information on the Mental Capacity Act 2005.

WHAT IS A POWER OF ATTORNEY?

Adults can appoint people to make decisions on their behalf if they become unable to do this under a Lasting Power of Attorney. This can be for;

- Finances or
- Welfare decisions or Both
- The Court of Protection may also appoint a Deputy to make decisions on their behalf. The Court of Protection can revoke a Power Of Attorney (POA).
- Office of Public Guardian can confirm if POA is in place and registered.

WHAT IS A REGISTERED INTERMEDIARY?

The Ministry of Justice (2015) Code of Practice for Victims of Crime defines registered intermediaries as specialists who help vulnerable witnesses with an assessed communication difficulty to give their best evidence in court. They can also assist victims when they are being interviewed to help them communicate their evidence to the police. The intermediary is approved by the court and can help to explain the questions and answers so far as necessary to help the witness but without changing the substance of the evidence.

This means that:

- All vulnerable witnesses as defined by the Youth Justice and Criminal Evidence Act 1999 section 16 are eligible for the assistance of a registered intermediary.
- The services of a registered intermediary should always be considered when a vulnerable victim/witness is interviewed.

Where an intermediary assessment is not considered necessary the rationale should be recorded on the **MG6**.

Police should be alert to any potential need for an intermediary to assist with communication with the witness and, where such a need is identified, ensure the engagement of a registered intermediary as early as possible in the investigation and prior to the witness being interviewed.

HATE INCIDENTS

A Hate incident is defined as any incident, that may or may not constitute a criminal offence, which is perceived by the victim, or any other person, to be motivated by hostility or prejudice, based on a personal characteristic.

Hate Incidents can feel like crimes to those who suffer them and often escalate to crimes or tension in a community.

Hate crimes are any crimes that are targeted at a person because of hostility or prejudice towards a person's:

1. Disability
2. Race or ethnicity
3. Religion or belief
4. Sexual orientation
5. Transgender identity

This can be committed against a person or property. A victim does not have to be a member of the group

at which the hostility is targeted. In fact, anyone could be a victim of a hate crime.

REMEMBER

It may be a criminal offence for any person, having acquired protected information in an official capacity, including the police, to disclose to any person that a person is transgender. The only exceptions, in relation to the police, will be with the permission of the individual or preventing or investigating crime (Gender Recognition Act 2004). All persons must be treated in accordance with the gender in which they present or they identify with.

WHAT IS HOSTILITY?

Ill will, ill feeling, spite, contempt, prejudice, unfriendliness, antagonism, resentment, dislike.

WHO CAN PERCEIVE AN INCIDENT AS HATE?

- The victim or any other person (Police officers or staff)

WHAT ARE MY RESPONSIBILITIES?

- Seek to identify the unique needs of the victim including any areas of vulnerability, and endeavour to meet those needs;
- Act in an appropriate and professional manner, providing support and reassurance where necessary;
- Afford the victim the necessary degree of privacy and treat any information given by the victim in the strictest confidence particularly where the report relates to sexual orientation or gender identity. Information should never be disclosed to any other party without the express permission of the victim;
- Be aware hate incidents have the potential to escalate into a critical incident.
- Respond within the specified timescales, or if unable to do so update the informant;

- Assess the need for any immediate safety measures;
- Effect arrests, where offenders are identified and it is immediately practicable;
- All crimes and non-crime incidents should be recorded on Connect
- Show the Community Cohesion Officer for the geographical area as an interested Party on Connect

WHAT DO THE COMMUNITY COHESION OFFICERS DO?

- Have an overview of hate incidents and diverse and emerging communities in the geographical area they are responsible for.
- Weekly conference call to prioritise and manage workload with Community Cohesion team and supervision.
- Victim contact, if repeat victims identified through monthly hate crime meeting
- Tactical advice and guidance and to other Police teams
- Information exchange and partnership working with Authorities, Charities and Voluntary Groups
- Give advice and guidance to voluntary groups and

HATE INCIDENTS

schools around domestic extremism and community cohesion.

WHO ELSE CAN HELP?

Further information may be obtained from the Humberside Police Force Intranet or the following useful web links

College of Policing Hate Crime Guidance (2014) -

<http://www.college.police.uk/Hate-Crime-Operational-Guidance.pdf>

Victim Support - Hate Crime

<https://www.victimsupport.org.uk/crime-info/types-crime/hate-crime>

True Vision, a nationwide reporting mechanism about Hate Crime

www.report-it.org.uk/home

MENTAL HEALTH

Early police recognition of the possible mental health problems, learning disabilities or suicidal intent of people they come into contact with is crucial to ensuring an appropriate and effective response. This is true whether the matter requires a criminal justice response, a social or healthcare response or a combined response. This section of guidance examines the process of identifying and assessing the vulnerability of an individual who has come to police attention.

Useful information may be available or sought from:

- The subject (the individual may be the best source of relevant information concerning their health, medical needs, and established support network – see The individual as an information source)
- The person who reported the incident
- Any medical professionals on scene (or associated with the individual)
- Next of kin, family, friends and known associates – see Information from parents, carers, family and associates
- Local street triage/ community or mental health nurse/crisis services for the area
- The local mental health trust unit /GP/relevant local clinic (if known)
- NHS medical record database (RIO) via approved mental health professional (AMHP)/community nurse/ mental health unit/hospital
- Children and adult social care services
- Appropriate adult services
- Liaison and diversion unit
- Police information systems
- The police should consider how their presence, attitude and demeanour may influence a person's reaction when approaching a member of public for any reason. This reaction will have an impact on

MENTAL HEALTH

subsequent risks to officers, suspects and the public.

Communication techniques may need to be adjusted when dealing with people experiencing mental health problems or who have learning disabilities. In particular, police officers and staff should be aware that difficulty with communication is a defining feature of having a learning disability.

Help in facilitating communication may sometimes be necessary. Officers and staff can seek assistance from:

- Parents, family and carers
- A registered intermediary (for a victim or witness)
- An appropriate adult (for a suspect)
- A mental health professional, learning disability nurse or other relevant professional
- Someone who knows the person well
- A specialist adviser (as in a hostage or firearms situation)
- A specialist voluntary agency.

Officers should, however, be mindful of not excluding the subject from conversation or decision making in favour of a

carer, intermediary or advocate unless their needs demonstrate that this requirement exists.

Effective communication can increase the availability of information from the individual (concerning their illness or disability and the rationale for their behaviour) and improve risk management by enabling informed decision making. This is valuable information if an individual intends to self-harm or take their own life, or if there are immediate safety concerns for the public.

THE VULNERABILITY ASSESSMENT FRAMEWORK

The Vulnerability Assessment Framework (VAF) was originally developed by Dr Karen Wright and Ivan McGlen at the University of Central Lancashire and may be used and integrated into the NDM at the stage of gathering information and intelligence.

The VAF is a simple tool to prompt identifying vulnerability in all circumstances where the police have contact with victims, suspects and witnesses. It enables officers to build a more detailed record of

the circumstances and information that led them to identify someone as vulnerable and in need of assistance, arrest or referral.

Officers trained in using this tool are expected to recognise signs of vulnerability. They should record and relay this information effectively using each letter (ABCDE – see the bullet list below) and related elements as a cue or framework for their report. Officers can provide this report to medical staff (ambulance crew, hospital medics and mental health nurses) verbally or in writing via a formally recorded risk assessment or statement.

The ABCDE system is as follows:

- **Appearance and atmosphere:** what you see first, including physical problems such as bleeding.
- **Behaviour:** what individuals are doing, and if this is appropriate behaviour given the situation.
- **Communication:** what

individuals say and how they say it.

- **Danger:** whether individuals are in danger and whether their actions put other people in danger.
- **Environment:** where they are situated, whether anyone else is there and what impact the wider circumstances may have on the individual's health and safety.

Information concerning the individual's vulnerability at the point of arrest or detention under section 136MHA 1983 may prove valuable for medical diagnoses and risk management. Where possible, officers should convey this information to ambulance staff, healthcare professionals and/or police custody staff without delay.

BEHAVIOUR

Assessing an individual's level of illness, disability and vulnerability is complex because of the multiple factors underlying a person's behaviour and the way these

MENTAL HEALTH

may interrelate. A person may be vulnerable for a wide range of social, emotional, behavioural and cognitive reasons.

Some behaviour may appear to indicate that a person has mental ill health or learning disabilities but could actually be the result of:

- Physical illness (e.g., diabetes, epilepsy, urinary tract infection, encephalitis or sickle cell disease)
- Physical injury (e.g., head injury)
- Physical disability (e.g., deafness or the effects of a stroke)
- Drug or alcohol misuse
- Frustration due to not being listened to.

Given that many types of mental ill health are not permanent, an individual's vulnerability may also vary according to their condition on a particular occasion.

Some people may be unaware that they have mental ill health or a learning disability. For this reason, where the police suspect that the person is

displaying signs indicating that extra support is required, they should use sensitivity and discretion in all their interactions.

Indicators of general concern
Practitioner experience suggests that the following list of things may be perceived as indicators of general concern. This list is not exhaustive and may simply be used as a general guide. These indicators may alert officers and staff to the possibility that the person is either experiencing mental ill health, learning disabilities, or is otherwise vulnerable:

APPEARANCE AND BEHAVIOURAL INDICATORS

- Irrational conversation or behaviour
- Inappropriate or bizarre behaviour
- Talking about seeing things or hearing voices which cannot be seen or heard by others
- Removing clothing for no apparent reason
- Confusion and disorientation
- Paranoid beliefs or delusions

- Delf-neglect
- Hopelessness
- Impulsiveness
- Obsessional thoughts or compulsive behaviour.

ASPECTS OF COMMUNICATION

- Inappropriate responses to questioning
- Apparent suggestibility
- Poor understanding of simple questions
- Confused responses to questions
- Speech difficulties (e.g., poor enunciation, slurring words or difficulty with pronunciation)
- Difficulty reading or writing
- Unclear concepts of times and places
- Problems remembering personal details or events
- Poor ability to cope with interruptions
- Poor handwriting that is difficult for others to read
- Difficulty with filling out forms
- Inability to take down correct information or follow instructions correctly
- Talking continuously, or slowly and ponderously
- Repeating themselves.

SECTION 136 MHA - POWER TO DETAIN A PERSON IN A PUBLIC PLACE

Under S136 MHA 1983, if a constable finds a person who appears to be suffering from a mental disorder in a place to which the public has access, and that person is in immediate need of care or control, the officer can, in their best interests or for the protection of others, remove that person to a place of safety.

When considering whether it is necessary and appropriate to detain a person using S136, police officers should use the National Decision Model to guide their approach.

The decision to use section 136 MHA is a police decision, and should be based on all available information and intelligence, risk and threat assessment. It should also be based on a strategic approach that requires officers to always consider de-escalation and act in the least restrictive way to protect the safety and welfare of the individual, public and professionals

MENTAL HEALTH

concerned. Officers should seek advice and guidance from health and social care professionals.

RECOGNISING MENTAL VULNERABILITY IN CHILDREN AND YOUNG PEOPLE

Mental health problems affect young people as well as the adult population. In children and adolescents, however, mental health conditions often emerge in ways that are less easily defined.

For example, this can be through:

- Behavioural problems
- Emotional difficulties
- Substance misuse
- Self-harm.

(Youth Justice Board 2016)
Mental health professionals may also be reluctant or unable to provide a clear diagnosis, as the adolescent brain is still evolving.

Police officers must be able to identify when mental illness may be an underlying cause of a young person's behaviour. This ensures that

young people can access effective referral pathways for assessment, treatment and support.

CHILDREN AND THE USE OF SECTION 136 OF THE MENTAL HEALTH ACT 1983

When responding to incidents involving children who are experiencing mental health problems or distress, the overriding consideration should always be the welfare of the child, ensuring protection from harm and access to assessment where appropriate.

Children of any age may be detained using S136 MHA 1983. A person under 18 years of age may be taken into police protection using S46 Children's Act 1989.

Where officers have the option to use both statutes, police protection under the Children Act 1989 may be used, as this is more likely to ensure that the child is not unnecessarily institutionalised or stigmatised by the process. Police Protection provides additional flexibility and

does not require a police officer to make judgement as to whether a child is likely to be suffering from a mental disorder and 'in need of care and control'. Police protection may be used if a police officer 'has reasonable cause to believe that a child would otherwise be likely to suffer significant harm'.

There is no restriction on using Police Protection in a home or place to which the public do not have access, so police officers may use it to move a disturbed child who is at home, in the interests of their health and safety. Following a child being taken into police protection officers are able to request that the child has access to all necessary assessments (including, if required, an assessment for detention under S2 or S3 of the MHA 1983, or a social care assessment).

THE MENTAL CAPACITY ACT (2005)

The five statutory principles are:

1. A person must be assumed to have capacity unless it is

established that they lack capacity.

2. A person is not to be treated as unable to make a decision unless all practicable steps to help him to do so have been taken without success.

3. A person is not to be treated as unable to make a decision merely because he makes an unwise decision.

4. An act done, or decision made, under this Act for or on behalf of a person who lacks capacity must be done, or made, in his/her best interests.

5. Before the act is done, or the decision is made, regard must be had to whether the purpose for which it is needed can be as effectively achieved in a way that is less restrictive of the person's rights and freedom of action.

The Mental Capacity Act 2005 provides the legal framework for acting and making decisions on behalf of individuals who are over 16 years of age and who lack the mental capacity to make particular decisions for themselves. Everyone working with and/or caring

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for an adult who may lack capacity to make specific decisions must comply with this Act when making decisions or acting for that person, when the person lacks the capacity to make a particular decision for themselves. The same rules apply whether the decisions are life-changing events or everyday matters.

One of the most important terms in this act is 'a person who lacks capacity'.

Whenever the term 'a person who lacks capacity' is used, it means a person who lacks capacity to make a particular decision or take a particular action for themselves at the time the decision or action needs to be taken. Where an individual lacks capacity to make a specific decision at a particular time, the MCA provides a legal framework for others to act and make that decision on their behalf, in their best interests, including where the decision is about care and/or treatment.

A person lacks capacity

in relation to a matter if, at the material time, the person is unable to make a decision for themselves in relation to the matter because of an impairment of, or a disturbance in the functioning of, the mind or brain.

Staff attending at incidents where they believe the MCA applies must adhere to the practical guide below.

PRACTICAL GUIDE TO ASSESSING CAPACITY

This mnemonic summarises the factors that **must** be satisfied of, before they can consider acting in someone's best interests.

The ID a CURE framework -

- Impairment OR
- Disturbance of the mind or brain.

And can the person -

- Understand information given to them about the decision to be made
- Retain that information long enough to be able to make the decision
- Use or weigh up that information as part of the

decision-making process

- Communicate their decision.

If ID and CURE indicates that the person lacks capacity, then the officer must do the least restrictive thing. In some circumstances (for example, those that are life-threatening) police intervention (that includes restraint and use of force) will be justified when it is the least restrictive option in the best interests of someone who lacks capacity.

WHEN IS POLICE INTERVENTION APPROPRIATE?

The MCA is most likely to be necessary in emergency situations when officers are faced with someone lacking mental capacity, whose life may be at risk or who may suffer harm if action is not taken.

For example:

- People attempting and threatening suicide
- Victims of serious assaults
- Casualties of major incidents
- Individuals with serious

injuries who decline medical aid. In non-emergency situations (such as a pre-planned mental health assessment) other powers and tactical approaches may be more appropriate. If there is a chance that the subject may regain capacity to make a particular decision, and the matter is not urgent, then the decision should be delayed until later.

In emergency circumstances (such as those that are life-threatening) police intervention will be justified when it is the least restrictive option in the best interests of someone who lacks capacity. The MCA Code of Practice provides that:

'In emergencies, it will almost always be in the person's best interests to give urgent treatment without delay'.

HOW IS IT APPLIED?

When officers have attended a mental health crisis incident on private premises and considered the MCA's relevance to keep someone safe from harm but have concluded that

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no justification exists to remove someone from where they were found for urgent treatment, they should consider using MHA 1983.

When the incident has occurred in someone's own home or a private place, then police powers under section 136 MHA 1983 cannot be used. Section 5 and section 6 MCA do not confer on police officers any authority to remove people to hospital or other places of safety for the purposes of mental health assessment.

In such situations, officers should consider contacting the duty AMHP who may then consider arranging a statutory assessment under MHA 1983. Such an assessment will involve a doctor (approved under section 12 MHA 1983) and, if need be, removal to a place of safety using a warrant under section 135(1) MHA 1983.

SUICIDAL INTENT AND MENTAL HEALTH

Where a person who is threatening suicide appears to know exactly what they

are doing and why, others may be reluctant to conclude they lack capacity – basing this judgement on principle 3 of the MCA (i.e., a person is not to be treated as unable to make a decision merely because he makes an unwise decision).

It is not the decision to take their own life that necessarily shows lack of mental capacity, however, but rather their inability to consider or fully think through alternative options such as counselling, medical assistance or help from statutory or voluntary agencies (weighing that information as part of the process of making the decision – section 3(c) MCA).

Determining whether someone has capacity is not a scientific or medical assessment, but should be a properly considered decision. Whether or not someone can take a decision for themselves is determined by the approach set out in section 3 MCA.

A police officer may undertake proportionate acts to safeguard someone's best interests (section 4(9) MCA) in accordance with the principles of the Act (section 1 MCA). Officers will then be protected by a defence against any legal liabilities ordinarily arising from that act, under section 5 MCA, as long as they acted in the best interests of someone whom they reasonably believed lacked capacity. If this involves restraining a person, it must be done in accordance with section 6 MCA.

RESTRAINT AND THE MENTAL CAPACITY ACT

Reasonable force may be used to protect and control someone who does not have the mental capacity to take action to protect themselves. The officer must reasonably believe that it is necessary to use restraint or other force in order to prevent the subject being harmed or harming themselves.

The degree of force used must be proportionate to:

- The likelihood of that

person suffering harm, and

- The seriousness of that harm.

Recording decisions about mental capacity

Having assessed someone as not having mental capacity to make the decision in question, and taking action in their best interests, officers should supply a rationale for their decisions.

The record should include:

- The information used to decide the person lacked capacity, including questions asked and the person's replies
- What options were considered (including each one's potential benefits and harms, and whether each one was lawful, necessary and proportionate)
- Any other factors taken into account (e.g. powers and policies)
- The action that was taken
- The effect of the action taken.

Further information may be found on the Humberside Police Intranet under Communities.

ACRONYM LIST

MASH - Multi Agency Safeguarding Hub

DASH - Domestic abuse, stalking, harassment

MOSOVO - Management of sexual offenders and violent offenders

NSPCC - National Society for the Prevention of Cruelty to Children

CPS - Crown Prosecution Service

CSE - Child Sexual Exploitation

FGM - Female Genital Mutilation

ABE - Achieving Best Evidence

EEK - Early Evidence Kits

ViSOR - Violent and Sex Offender Register

CSODS - Child Sexual Offender Disclosure Scheme

MAPPA - Multi-Agency Public Protection Arrangements

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