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North Yorkshire Police became aware that child A (15yrs) had gone missing from her foster placement. Publicity was released in the media to try and locate her.

2

Child A was found safe and well after a coordinated approach by North Yorkshire Police and North Yorkshire County Council's Children Social Care. She was found in another area of the country. A 28 year old man was charged with 'Modern Day Slavery' offences relating to the case.

3

A referral was made to the Child Sexual Assault Assessment Centre (CSAAC) at York Hospital for a 'Forensic Paediatric Assault Medical' due to concerns that child A may have been a victim of sexual exploitation whilst she was missing. An appointment was made for the same afternoon at the CSAAC and the young person was brought to the appointment by the duty Social Worker and a social work student. Interpretation was via a telephone interpretation service. Two different male interpreters had to be used due to availability before and after child A's examination.

4

There was some confusion about why child A was to attend the hospital. There are significant differences between sexual health screening and treatment, and a forensic medical examination. Child A subsequently did not give her consent to a forensic medical or an examination for the purposes of documenting sexual assault. She was clear that she did not want information to be shared with the North Yorkshire Police.

5

It was identified that child A was symptomatic for a possible sexually transmitted infection for which she was requesting treatment. She did permit some basic sexually transmitted infection screening, but the CSAAC does not have access to rapid testing. A referral was made to the GUM clinic for further assessment and treatment although there was some delay in accessing this.

6

Learning points:

Clarity – young people need to have absolute clarity about why they are going to the CSAAC and workers need to be clear on the differences between forensic examinations and sexual health assessments.

Language – consideration should be given to the need for appropriate interpreters, either in person or via telephone links.

Consent – for young people who are Looked After, consent can be given by the local authority (noting that a medical examination will not proceed unless the young person also agrees to this).

7

Resources

- Differences between a Sexual Health (GUM) clinic medical assessment and a CSAAC medical assessment
- Pathway for hospital staff to follow when a child or young person discloses sexual assault or sexual assault is suspected
- Child Sexual Assault Assessment Services (CSAAS) Children and Young People Care Pathway – Acute Only
- North Yorkshire Police Partnership Modern Slavery Toolkit