



POSITION STATEMENT

on the management of requests by police for intimate samples for sexually transmitted infections (STI) from detainees in police custody

May 2019

The Faculty of Forensic and Legal Medicine (FFLM) has been advised that urgent requests for intimate samples for sexually transmitted infections (STIs) under the Police and Criminal Evidence Act 1984 (PACE) have been made.

This is not appropriate, as the management of patients suspected of having an STI requires the expertise of a healthcare professional who has the relevant knowledge and skills to perform a full clinical assessment, take the relevant samples, and arrange the appropriate follow-up.¹

The presence (or absence) of a sexually transmitted infection (STI) may be relevant in the investigation of a crime on rare occasions; examples of this might be:

- Alleged reckless transmission of an infection e.g. human immune-deficiency virus (HIV)²
- The presence of an STI in a child which may support an allegation of sexual assault¹
- The acquisition of an STI following an alleged rape, where the complainant/complainer has never had sexual intercourse before, or not in the orifice where the infection has been found.¹

When such STI samples are taken, they must be transported and managed throughout with chain of evidence (CoE) procedures.³ Specialised laboratories may need to be used, where suitably trained practitioners can interpret the findings, such that, in liaison with sexual health/genito-urinary clinicians, appropriate interpretation, reporting, and provision of evidence is possible.

STI samples are clinical samples, usually taken for screening or diagnostic purposes. Healthcare professionals (HCPs) working within the police custody environment are not usually trained to take such samples, and most importantly they are not a position to be able to follow up or interpret the results. For example, they would not usually:

- know which sample(s) to take
- be able to comment on the significance of the presence or absence of an STI
- be able to offer treatment, partner notification, (PN or contact tracing), if an infection was found.

HCPs are not able to assist the investigation, nor manage the individual's care, as well as the public health aspects, if an STI is found.

Therefore, if HCPs working in the custody environment are asked to take such samples from a detainee, they should decline to do so, but should assist police with the advice outlined below.

Where, during a criminal investigation, the presence of an STI is, or may be relevant, the investigating officer must liaise with a Consultant in Sexual Health/Genito-Urinary Medicine (SH/GUM) to determine the most appropriate way of dealing with the issue and the suspect(s). Effectively, this would be a type of 'strategy discussion' and ideally should take place before arrest. If a suspect is arrested and then requests are made, it may be that arrangements cannot be made within the legislative time limits for detention.



As already acknowledged, such situations are likely to be infrequent, therefore it is recommended that each constabulary liaises with their local SH/GUM clinic to develop an agreed procedure to deal with such circumstances. As a result, the appropriate advice regarding which tests should be taken and how to manage them can be given. Such an agreed procedure would also address consent and confidentiality issues and be subject to regular review and update.

Further reading

The Crown Prosecution Service (CPS) have published guidance on *Intentional or Reckless transmission of Sexually Transmitted Infection*.

The Crown Office and Procurator Fiscal Service (COPFS) has published guidance on the *Intentional or reckless sexual transmission of, or exposure to, infection*.

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References

1. British Association of Sexual Health and HIV (BASHH)
Standards for the management of sexually transmitted infections (STIs) 2019
2. British HIV Association (BHIVA)
HIV transmission, the Law and the work of the Clinical Team 2013
3. Royal College of Pathologists (RCPATH) and the Institute of Biomedical Science (IBMS)
Guidance on the handling of medico-legal samples and preserving the chain of evidence 2017