



## Recommendations for Introductory Training Courses in Paediatric Sexual Offence Medicine (PSOM)

Oct 2022 Review date Oct 2025 - check [www.fflm.ac.uk](http://www.fflm.ac.uk) for latest update

The medico-legal guidelines and recommendations published by the Faculty are for general information only. Appropriate specific advice should be sought from your medical defence organisation or professional association. The Faculty has one or more senior representatives of the MDOs on its Board, but for the avoidance of doubt, endorsement of the medico-legal guidelines or recommendations published by the Faculty has not been sought from any of the medical defence organisations.

The Faculty of Forensic & Legal Medicine (FFLM) *Quality Standards* recommend that all Health Care Professionals (HCPs) must undergo an initial accredited training course before commencing unsupervised clinical work.

### Applying for FFLM CPD course approval

Details of how to apply for approval can be found via the link: [www.fflm.ac.uk/cpd-accreditation](http://www.fflm.ac.uk/cpd-accreditation)

The criteria for approval are:

1. The primary purpose of the event must be education. Any commercial sponsorship or interests of the programme planner, presenters or facilitators must be declared on the application form and must not influence the structure or content of the event.
2. The learning objectives must be relevant to the core competencies expected of the members of the FFLM, or those practising in fields represented by the FFLM, and must fit the needs of the target audience.
3. The learning objectives must be specifically defined.
4. The teaching methods used will achieve the stated learning objectives.
5. Sufficient information (in the form of a Curriculum Vitae or equivalent) has been provided to demonstrate that the presenters or facilitators have the expertise to deliver the learning objectives using the methods chosen.
6. There must be a procedure in place for evaluation of the event.
7. The evaluation record for previous events organised by the same provider is satisfactory, or reasons for unsatisfactory ratings have been addressed.
8. Certificates of attendance must be issued, in addition the provider agrees to supply to the participant or the FFLM, on request, confirmation of participation any time up to two years after the event has taken place.

### Pre-reading

It is recommended course participants undertake pre-reading from the suggested list:

- *Physical signs of child sexual abuse – evidence-based review* (also known as the 'purple book')
  - Chapter 3 – Genital signs of sexual abuse in girls
  - Chapter 5 – Anal signs of child sexual abuse
  - Chapter 6 – Genital signs of sexual abuse in boys
  - Chapter 11 – Good practice
- *Centre of expertise on child sexual abuse - CSA Centre*
  - *The scale and nature of CSA*
  - *A scoping review - Child Sexual Abuse*
- *Faculty of Forensic & Legal Medicine*
  - Recommendations for the Collection of Forensic Specimens from Complainants and Suspects
  - Recommendations for the Collection of Forensic Specimens from Complainants and Suspects - the evidence
  - Guide to establishing urgency of sexual offence examination
  - Recommended Equipment for Obtaining Forensic Samples from Complainants and Suspects
  - Labelling Forensic Samples
  - Recommendations - Consent from patients who may have been seriously assaulted
  - FFLM Guidance for best practice for the management of intimate images which may become evidence in court
- *Service Specification for the clinical evaluation of children and young people who may have been sexually abused, September 2015*
- *Female genital mutilation: resource pack - GOV.UK*
- *Forensic Science Regulator Guidance Sexual assault referral centres and custodial facilities: DNA anti-contamination*
- *Forensic Science Regulator Guidance Sexual assault examination: requirements for forensic science related evidence*



## Introductory Training Course syllabus

The course must cover the following modules but not necessarily in the following order.

An introductory course in PSOM should be a minimum of 20 hours, which may include an element of mandatory pre-course reading, e-learning, and/or pre-recorded sessions.

Practitioners enter PSOM practice from a variety of disciplines; the amount of time and emphasis given to each module or element will depend on the target group attending; for example, a course aimed at experienced Paediatricians would expect a high level of pre-existing safeguarding knowledge, and therefore module 5 may be covered in pre-course material or set as an entry pre-requisite. Course leaders must ensure all delegates achieve the knowledge and skills level of all modules; if a course is open to a general delegate pool, all modules must be covered within the course.

### Module 1 - SARC Working

Introduction, course outline

Consent (including parental responsibility, Gillick Competence, and Mental Capacity), confidentiality, and ethics

Role of the Children's Independent Sexual Violence Adviser (ChISVA), Young Persons ISVA (YPISVA), ISVA and Crisis Worker (CW)

Documentation and Information Governance (IG) in PSOM including handling of sensitive images

Prevalence and presentations/recognition of Child Sexual Abuse (CSA) across the age range, including non-allegation concerns

Triage and timing of examinations

History-taking and trauma-informed care

Examination techniques, pre- and post-puberty

### Module 2 - Anatomical Findings

Normal genito-anal anatomy, including pubertal changes and normal variants

Female genital signs and evidence-base

Male genital signs and evidence-base

Anal signs and evidence-base

Findings which may mimic sexual abuse/differential diagnosis

### Module 3 - Trace Evidence

Forensic science principles

Sampling sites, techniques, and guidance

Labelling, documenting, and handling of exhibits including chain-of-evidence

Anticontamination measures – current guidance

### Module 4 - Medical Care

Screening for Sexually Transmitted Infection (STIs) (pre- and post-puberty)

Overview of recognition and treatment of STIs

Evidence-base for STIs in CSA

Post-Exposure Prophylaxis (Hepatitis B and Human Immunodeficiency Virus)

Emergency contraception types and timings

Mental Health Risk Assessment, counselling, and emotional support

Recognising vulnerabilities, developmental delay, and special educational needs

Substance use including alcohol

### Module 5 - Safeguarding

The Working Together 2018 framework for Child Safeguarding (including section 47 processes, section 17 processes, and Early Help)

Role of the Multi-Agency Safeguarding Hub (MASH)

Strategy meeting and strategy discussion

Poly-victimisation and neglect as a risk factor for sexual abuse

Child sexual and criminal exploitation including county lines and gangs

Female Genital Mutilation (FGM)

The Rapid Review, Safeguarding Practice Review, and Child Death Overview processes

### Module 6 - Reports, Courts and Professional Standards

Report writing for Child Protection, Family Court and Criminal Court

The Court system

Courtroom skills

Peer Review and Clinical Supervision

Course debrief and consideration of future training



## Further Reading

- IICSA Independent Inquiry  
*Children in the care of the Nottinghamshire Councils Investigation Report July 2019*
- Adams, Farst and Kellogg (2018)  
*Interpretation of medical findings in suspected child sexual abuse: an update for 2018*  
Journal of Pediatric and Adolescent Gynecology
- Faculty of Forensic & Legal Medicine  
[www.flm.ac.uk/resources/publications](http://www.flm.ac.uk/resources/publications)
- Children's HIV Association Guidance  
*Post-Exposure Prophylaxis (PEP) Guidelines for children and adolescents exposed to blood-borne viruses*
- The Royal Society – Forensic DNA analysis  
*Forensic DNA analysis: a primer for courts*  
([royalsociety.org](http://royalsociety.org))
- BMJ Journals  
*Opening doors: Suggested practice for medical professionals for when a child might be close to telling about abuse*
- Centre of Expertise on Child Sexual Abuse  
*Key messages from research on children and young people who display harmful sexual behaviour*
- Centre of Expertise on Child Sexual Abuse  
*Communicating with Children Guide*
- Faculty of Forensic & Legal Medicine 2022  
*The Code of Practice on Expert Evidence*
- Faculty of Sexual and Reproductive Health  
*FSRH Clinical Guideline: Emergency Contraception (March 2017, amended December 2020)*
- British Association for Sexual Health and HIV  
*UK National Guidelines on the Management of Adult and Adolescent Complainants of Sexual Assault 2011*