

Faculty of Forensic & Legal Medicine

A Day in the Life of a Full-Time Embedded Sexual Offence Examiner by Samantha Fenoulhet

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After over 20 years' experience as a midwife, I was offered an opportunity to train as a sexual offence examiner in 2017 and embarked on a new rewarding and fascinating full time career within forensic healthcare.

I passed my FFLM Licentiate (SOM) Parts 1 and 2 in 2021-2022 and work mainly in West Mercia and Gloucestershire Sexual Assault Referral Centres (SARCs), although over the years I have seen clients in a number of other SARCs around the country.

A typical day in my working life starts at 06:00 when my on call shift begins. I check my phone and emails to see if there is a case pending and the rota to see if there are any new Sexual Offence Examiners (SOEs) shadowing me and the crisis worker cover.

I then get ready for my day with my usual home brewed latte, enthusiastic attention from my cats and checking that my daughters are up and ready to leave the house!

Occasionally I have an admin and training day planned which may include delivering clinical supervision to other SOEs, delivering new staff inductions, mentoring new SOEs, interviewing new staff, receiving training or peer review myself, meeting with the Forensic Capability Network regarding the forensic accreditation process, writing police statements and performing audits or peer reviews of case notes or statements my colleagues have written. I occasionally deliver training to Emergency Department senior registrars and consultants around the SARC process and non-fatal strangulation referral pathways as well as liaising with other partner agencies.

Quite often a call comes in from police officers before I leave home, wishing to arrange a forensic medical examination for a client that morning, I triage the circumstances of the case and the condition and capacity of the client to proceed, offer any initial medical advice and arrange a time for police to bring the client to SARC. I request the attendance of the crisis worker and any shadowing SOE and make my way to the SARC.

I arrive at the SARC, meet with my colleagues and prepare to welcome the client. I take a full handover from the police officer, or crisis worker in the case of self-referral clients, and complete consent and medical paperwork with the client. I prepare my samples, perform the forensic medical examination and offer any medication indicated and follow up referrals the client would like or are indicated and hand over the samples and feedback to the police.

Depending on the complexities of the case, this can take many hours and I always use a victim focussed approach with clients and am totally guided by their needs and choices.

While the examination suite is being cleaned I change out of my Personal Protective Equipment (PPE), complete my notes, have a much needed cold drink and some food and then reflect with my colleagues about the case and check in with them that they are feeling ok and that we have done everything we could have to support each other and the client.

Sometimes there is a second case pending and the process begins again, but every case and every client is different and therefore my approach will be tailored to them and it always feels fresh.

Eventually it's home time and the same attentive cats and slightly more tired daughters greet me for dinner, baths and TV before we end another interesting and fulfilling, or sometimes stressful day.

It's a privilege to work within sexual offence medicine and to continuously develop my knowledge, experience and practice and to support my colleagues to do the same.