NHS SCOTLAND EAST REGION

Criteria for Undertaking Joint Paediatric Forensic Medical Examination (JPFE)* in Child Sexual Abuse Cases

1. In all cases where a clear disclosure of penetrative genital and / or anal penile penetration has been made whether acute or historical.
2. In all cases where a clear disclosure of recent digital genital and / or anal penetration has been made.
3. In cases where direct contact abuse is alleged or disclosed where it is not clear whether digital or penile penetration has occurred eg. In very young children who may find it difficult to describe what has happened.
4. In cases involving young children where it is unclear whether statements made amount to a disclosure of CSA but there are other signs that abuse may have occurred eg. Vulval and / or anal signs or symptoms, sexualised behaviour or language, or where the child is known to have been in the company of a known perpetrator of sexual abuse or assault.

Criteria for Specialist Paediatric Examination (SpE) **

1. In all cases where a clear disclosure of historical digital genital and / or anal abuse has been made where a joint examination is not thought to be justified.
2. In cases involving young children where statements made by the child to close family or education staff suggest CSA may have occurred but there is no other supportive evidence.
3. In cases involving young children where there are vulval or anal symptoms and signs (including warts) and where CSA is one of a number of differential diagnoses.

* JPFE is undertaken jointly by a specialist paediatrician and forensic physician with appropriate skills and competencies in the clinical evaluation of child sexual abuse cases

** SPE is undertaken by a specialist paediatrician with appropriate skills and competencies in the clinical evaluation of child sexual abuse cases

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