



Home Office

Rt Hon Chris Philp MP
Minister of State for Crime,
Policing and Fire

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Ms Jennie Smith
President
The UK Association of Forensic Nurses and Paramedics

By email: contact@ukafn.org

DECS Reference: MIN/0552151/23

12 May 2023

Dear Ms Smith,

Thank you for your letter of 24 March to the Home Secretary regarding the Hansard entry of 18 March 2009, col 1164W. I am responding as the Minister of State for Crime, Policing and Fire and I am sorry for the delay in replying to your letter.

Firstly, I would like to thank your organisation for its work in providing guidance on areas such as forensic sampling.

The Hansard record of 18 March 2009 clearly shows that, at the time, the Faculty of Forensic and Legal Medicine (FFLM) were tasked to issue guidance on qualifications and not to set standards. Given this, we are unable to answer the remaining parts of your question on how this decision was reached and the methodology, and how it is reviewed, as the FFLM do not set standards. The Hansard report is a record of what was said in Parliament and is neither primary nor secondary legislation.

Following the decision made in 2015 that the commissioning of police custody healthcare should remain with the police, the former Home Secretary, Rt Hon Theresa May MP, jointly with the former Secretary of State for Health, Rt Hon Jeremy Hunt MP, wrote to NHS England (NHSE) & NHS Improvement (NHSI) asking that they continue to provide national support and oversight to healthcare being delivered in police custody suites. In support of this Ministerial request, NHSE & NHSI have, and continue to support national policing. They still offer specialist support to the National Police Chiefs' Council (NPCC) custodial healthcare portfolio, which includes the authoring and maintaining of the Police custodial healthcare service specification. The NPCC custody lead has recently reconfirmed that they are content with the NHSE health and justice team to continue to provide advisory support and develop and review the service specification for this area.

Interpretation of the published record is not an area we are able to comment on. I can advise that the record is clear as it is written in terms of guidance rather than standards and Hansard records may be corrected only if what was said at the time was factually inaccurate.

I am aware that police custody healthcare provision has modernised considerably since 2009 and acknowledge that, as you correctly highlight in your letter, that the majority of clinical work in custody suites is undertaken by either forensic nurses or paramedics. NHSE's health and justice team are cognisant of this and consult widely to seek specialist

healthcare views from the representative bodies of the professions that you refer to and others. We would urge all the bodies consulted with to work together in order for a joined up collaborative approach.

On your question on Sexual Assault Referral Centres (SARC), there is no specific mention of them within the Hansard record, and I recognise this record appears to cover both areas.

The Forensic Science Regulator sets the standards for the forensic examination of sexual offence complainants. This is covered in sections 52 and 102 of the [Forensic Science Regulator Code of Practice](#). This is a statutory code which has been approved by the Home Secretary and Parliament and comes into force on 2 October 2023 to allow time for forensic units to comply with the provisions in the code.

In 2013, NHS England took on the lead commissioning role for SARCs together with Police and Crime Commissioners (PCCs). As the lead commissioner for SARCs, NHSE has developed strategic partnerships with the Home Office, local PCCs and the Ministry of Justice to help address issues and improve services for the victims and survivors of sexual assault and abuse. Officials in the Home Office continue to work closely with their colleagues in the Department for Health and Social Care on these policy areas.

In closing I would like to reference that as noted in 2009:

“Responsibility for the recruitment of healthcare professionals is a matter for individual chief police officers, and it is for each police force to make a decision on an individual basis against this guidance.”

Police forces remain operationally independent, and it is for them to decide what to commission for their custody healthcare provision, and what of that guidance to implement, including the levels of training.

Thank you for bringing these concerns to our attention.

Yours sincerely,

A handwritten signature in black ink, appearing to read 'Chris Philp', written in a cursive style.

Rt Hon Chris Philp MP