



The Scottish Parliament
Pàrlamaid na h-Alba

Alison Wales,
Policy Officer,
NSPCC

Via email only

Health and Sport Committee
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21 May 2020

Dear Alison,

Health and Sport Committee consideration of the Forensic Medical Services (Victims of Sexual Offences) (Scotland) Bill

On the 20 May 2020, the Committee heard evidence from Chloe Riddell, Policy Manager at Children 1st in relation to the Forensic Medical Services (Victims of Sexual Offences) (Scotland) Bill.

Following the session, the Committee are keen to hear NSPCC's views on the issues highlighted and topics discussed during the session.

The following resources are now available:

- [The Official Report](#)
- [Broadcast recording of the session](#)

In Annexe A, we enclose below a list of questions that we put to Ms Riddell during the session. We are particularly interested to hear your views on the evidence presented in relation to these questions, to ascertain if there are areas of agreement or disagreement and if you have any additional evidence to add.

On behalf of the Committee, I request a response by Wednesday 3 June 2020 and I look forward to hearing from you.

Yours sincerely

Lewis Macdonald
Convener, Health and Sport Committee

Annexe A

List of questions from the Health and Sport Committee meeting on 20 May 2020

Please note, you do not need to reply to each question unless you have additional evidence to add to Ms Riddell's evidence from the session.

Integrated services for children following rape and sexual abuse

1. What are your views on the general principles of the Bill in relation to children and young people?
2. Would you would like to see any additional provisions in the Bill and if so what they should cover?

Barnahus

3. Do you consider that the provisions in the Bill support the Barnahus approach? Is the Bill Barnahus ready?
4. What changes could be made to ensure that there aren't any unintended consequences in relation to the development of a Barnahus approach?
5. Would you prefer children to be included in this Bill or addressed in separate legislation?

Self-referral

6. Do you consider that the provisions in the Bill to restrict self-referral of forensic medical examinations to young people over the age of 16 are appropriate?
7. Should the age at which self-referral services are available be lowered or raised and why?
8. Is there a possibility that the promotion of self-referral for those aged over 16 may unintentionally act as a barrier to younger victims?
9. Would there be any situations when self-referral for people under the age of 16 would be appropriate? There may be the situation where a young person would not want to involve the police but may wish to self-refer so that any evidence could be used in the future.

Child protection and age of the child

10. Are the provisions in the Bill, or should they be, in line with child protection guidance?
11. If the expectation is that a self-referral by a 16 or 17-year-old may initiate child protection processes, why should the self-referral provision not extend to people under 16 years old?
12. Are there specific issues that relate to looked after children, over the age of 16, in accessing self-referral services?

Children with additional needs

13. Are there specific issues that relate to children with children and young people with disabilities or additional needs, that should be considered as part of the Bill?

Children and young people alleged to have perpetrated sexual assault and abuse

14. Do you consider that the provisions in the Bill should be extended to cover alleged child perpetrators of sexual assault and rape?

Data protection

15. Are there specific data protection issues that need to be addressed in relation to children and young people?
16. Should information from forensic medical examinations be linked/ be part of an individual's healthcare record?