

Victim care management process for victims of fraud

A streamlined approach to managing large numbers of fraud victims subject to investigation. The process has updated administrative functions when adhering to the victim code of practice and utilising a scoring system to assess vulnerability.

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Key details

Stage of practice	Untested
Purpose	Prevention
Topic	Fraud Criminal justice Productivity
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Region	London
Partners	Police
Stage of implementation	The practice is implemented.
Start date	July 2022

Key details

Scale of initiative	National
Target group	Adults Victims

Aim

The aims are to:

- improve the service provided to victims of fraud
- improve efficiency in the administrative process of managing large numbers of victims
- improve the efficiency of updating victims and providing advice
- identify and monitor any change in the victims' risk

Intended outcome

- to improve the standard of service given to victims of fraud
- to ensure that victim code of practice and safeguarding priorities are met
- to increase the number of victims officers and staff can reach in a resource and time saving manner

Description

The victim care process was created in the absence of a formalised procedure when dealing with victims of fraud. The force found that victims of fraud were treated differently in comparison victims of other serious offences. There were inconsistencies in ensuring the Victim's Code of Practice (VCOP) and safeguarding priorities were met.

The core part of the process is two-fold:

- Victim contact management – victim data such as name, address, email address, financial losses and any other key information is held on a standalone spreadsheet in mail merge format. This allows personalised letters/emails to be sent to multiple victims at once, saving time and resource.

This process can be used to update victims on the progress of investigations, as well as disseminating investigative questionnaires, and any other information victims may require as part of their journey.

- Vulnerability – the team’s vulnerability process involves an assessment. An initial form is completed by the victim to establish the current state of their physical and mental health, as well as their repeat victim status. The returned assessment is then put through an automatic scoring system to measure the victim’s status and to demonstrate a priority need.

The scoring system has three outcomes:

- high – a call for service is raised depending on the risk area. Follow up phone calls are made by the Victim Care team until the risk has reduced, and relevant referrals are made
- medium – the victim is signposted/referred to services relevant to the area of risk
- low – the victim care team manage the risk area to ensure it remains low

Overall impact

- improved resource capacity to accept more victims of fraud into the force’s service
- the updated process has allowed the team to explore victim vulnerability in more depth and implement relevant safeguarding needs
- staff members have reported having a clearer outlook on the current risk attributed to over 5,560 victims

Learning

The force faced initial challenges around the ease of use and additional administrative functions. However, to streamline this process it was transferred onto Microsoft Excel. This means that each investigation is managed in one place and officers in the team are aware of who is graded across each risk category.

Humberside Police, Yorkshire and the Humber Regional Organised Crime Unit (YHROCU) and the National Crime Agency have been briefed on this approach to better equip them in victim of fraud management. The process has been adopted internally and in external forces to improve their service to victims of fraud.

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