

## **FGM Safeguarding Pathway**

Presentation prompts clinician to suspect/consider FGM e.g. repeated UTI, vaginal infections, urinary incontinence, dyspareunia, dysmenorrhea etc. Also consider difficulty getting pregnant, presenting for travel health advice or patient disclosure (e.g., young girl from community known to practice FGM discloses she will soon undergo 'coming of age' ceremony).

INTRODUCTORY QUESTIONS: Do you, your partner or your parents come from a community where cutting or circumcision is practised? (It may be appropriate to use other terms or phrases) No - no further action required Yes Do you believe patient has been cut? No - but family history Yes Patient is under 18 or Patient is over 18 Patient is under 18 vulnerable adult Does she have any female children or If you suspect she may siblings at risk of FGM? Ring 101 to report basic details of be at risk of FGM: And/or do you consider her to be a the case to police under vulnerable adult? Use the safeguarding risk Mandatory Reporting Duty. assessment guidance to Complete safeguarding risk assessment Police will initiate a multi-agency help decide what action and use guidance to decide whether a safeguarding response. to take: social care referral is required. If child is at imminent risk of harm, initiate urgent FOR ALL PATIENTS who have HAD FGM safeguarding response. 1. Read code FGM status Consider if a child social Complete FGM Enhanced dataset noting all relevant codes. care referral is needed, following your local 3. Consider need to refer patient to FGM service to confirm FGM is present, processes. FGM type and/or for deinfibulation. a) If long term pain, consider referral to uro-gynae specialist clinic. b) If mental health problems, consider referral to counselling/other. c) If under 18 refer all for a paediatric appointment and physical examination, following your local processes.

Can you identify other female siblings or relatives at risk of FGM?

- Complete risk assessment if possible OR
- Share information with multi-agency partners to initiate safeguarding response.

## **Contact details**

Local safeguarding lead:

Local FGM lead/clinic:

**NSPCC FGM Helpline:** 0800 028 3550

Detailed FGM risk and safeguarding guidance for professionals from the Department of Health is available <u>online</u>

## FOR ALL PATIENTS:

- Clearly document all discussion and actions with patient/family in patient's medical record.
- 2. Explain FGM is illegal in the UK.
- 3. Discuss the adverse health consequences of FGM.
- 4. Share safeguarding information with Health Visitor, School Nurse, Practice Nurse.

If a girl appears to have been recently cut or you believe she is at imminent risk, act immediately – this may include phoning 999.

**REMEMBER:** Mandatory reporting is only one part of safeguarding against FGM and other abuse. *Always ask your local safeguarding lead if in doubt.*