

FGM Pathways - Mandatory Reporting and Safeguarding

Duty to report under the Serious Crime Act 2015 for regulated professionals



A girl under 18 has confirmed to you that she has undergone FGM or you have observed physical signs on a girl appearing to show that an act of FGM has been carried out and you have no reason to believe that the act was, or was part of, a surgical operation. You do not need to be 100% certain and are not required to 'verify' that FGM has occurred:

- ▶ Call 101 and report by the close of the next working day. You will be connected to the Metropolitan Police Service, to whom you would need to make a report. Explain that you are making a report under your FGM mandatory reporting duty
- ▶ ALSO refer to MASH (Multi-Agency Safeguarding Hub) / Children's Social Care by calling (020) 8871 6622
- ▶ Refer to your organisation / agency's existing procedures and follow additional steps required
- ▶ In line with safeguarding best practice, contact the girl and/or her parents to explain the report, why it is being made and what it means. Wherever possible, discuss in advance of/in parallel to the report being made. Do not discuss if you feel the report will pose a risk to the child or anyone else, or of the family fleeing the country
- ▶ Making a report can only be delayed in exceptional circumstances (e.g. if doing so may put a child at immediate risk of harm). In any circumstance, a report must be made within 30 days. Always record your decision. For more information download the Home Office Mandatory Reporting of FGM: Procedural Information guide which is available on www.gov.uk



Regulated Professionals

- Health and social care professionals regulated by a body which is overseen by the Professional Standards Authority for Health and Social Care (with the exception of the Pharmaceutical Society of Northern Ireland). This includes those regulated by the:
 - General Chiropractic Council
 - General Dental Council
 - General Medical Council
 - General Optical Council
 - General Osteopathic Council
 - General Pharmaceutical Council
 - Health and Care Professions Council (whose role includes the regulation of social workers in England)
 - Nursing and Midwifery Council
- Teachers - this includes qualified teachers or persons who are employed or engaged to carry out teaching work in schools and other institutions, and, in Wales, education practitioners regulated by the Education Workforce Council.
- Social care workers in Wales

Unregulated Professionals / Concerned Individual

- Speak to your safeguarding lead or call MASH (020) 8871 6622

Followed by

Assessment and Intervention (MASH):

- Measures to protect girl / others identified as 'at risk' (social care)
- Possible criminal investigation (police lead)
- Health & wellbeing requirements of girl / others including how care is delivered (health lead)

RECORD AND REVIEW - APPLIES TO ALL

Ensure that you:

- Accurately record all interventions noting date, full name and role of person making the recording, and sign
- Consult with your safeguarding lead

For free, impartial and confidential advice call the 24 hour NSPCC Helpline on 0808 028 3550

MASH / Children's Social Care
Wandsworth Council, Town Hall SW18 2PU
mash@wandsworth.gov.uk | 020 8871 6622

Neighbouring Safeguarding Boards (for non-Wandsworth residents)

Croydon:	020 8726 6464	Richmond	020 8831 6323
Kingston:	020 8831 6323	If the borough you are looking for is not listed here, please visit the website of the relevant authority	
Lambeth:	020 7926 3344		
Merton:	020 8545 4226		

If you suspect that a child is at risk of FGM:

- Sensitively and informally ask the child/family/parents/carer (as appropriate) questions such as:

- If they are going on holiday:
Where are they going and who with? (Is it somewhere FGM is potentially practiced?)
How long they plan to go for? Is there a celebration planned?
- Do they know what FGM is and the health consequences of undergoing FGM?
- Are they aware that FGM is illegal in the UK even if performed abroad?
(If they are unaware of this you must advise them of the law on, the health consequences of and the support services available for FGM)

Note: A female relative could be coming from abroad to perform FGM on a girl or many girls at the same time. Ask the child/family/parents/carer (as appropriate) what the purpose of a visit by someone abroad is.



Mandatory Duty or Safeguarding Duty?

The mandatory duty to report FGM does not apply to 'at risk cases'. It is limited to 'known cases'. For 'at risk' and suspected cases, follow your Safeguarding Duty

If you suspect that a child has undergone FGM:

- Pick up cues from the child then sensitively ask the child/family/parents/carer (as appropriate) questions such as:
 - Your family is from a country where girls are 'circumcised' or 'cut' - do you think you have gone through this?
 - Has anything been done to you? Did you have a 'special ceremony' whilst you were on holiday - what was this for?
 - Did any of your children undergo an FGM-related procedure while away?
 - Do you know the health consequences of undergoing an FGM-related procedure for your child?
 - Do you want some support for your child to deal with the consequences of having had FGM?
- These questions and advice are guidance and each case should be dealt with sensitively and considered individually
- Consult with your safeguarding lead and liaise with the child's health visitor and GP
Always offer help for the child to minimise the consequences of FGM and encourage uptake of services
Reiterate to parents that you do need to report this.



The mandatory duty to report FGM applies to known cases of FGM (i.e. visibly identified/ disclosed). This does not mean that you must be 100% certain that FGM has been carried out or that a clinical diagnosis must have already taken place. You are not required to 'verify' that FGM has occurred for the duty to apply and a report to be made. If a girl needs to be referred for a clinical diagnosis, the Multi-Agency response will agree this

Signs to look out for if you think that an infant or child may have undergone FGM

- Pick up cues from the child then sensitively ask the child/family/parents/carer (as appropriate) questions such as:
 - Difficulty in sitting/crawling/walking (as age appropriate)
 - Behaviour changes in child and possibly in the adult
 - Reluctance of child to participate in physical activities
 - Taking longer to use the toilet (as age appropriate)

Healthcare professionals: (i.e. Sexual Health, Mental Health, Maternity, A&E, GP Practices, Nurses, etc...)

- Ensure you familiarise yourself with procedures, such as (but not limited to):
 - Accurately recording FGM in clinical records including the type of FGM (if known) and clinical history
 - Flagging an at risk child (i.e. RiO, EMIS, RaTE, K2, etc...)
 - Offering an interpreter
 - Speaking to the patient alone
 - Offering FGM advice (health implications / information about legal status of FGM)
 - Being vigilant to any health issue (e.g. recurrent urinary tract infections) that might suggest FGM
 - Offering FGM advice to families requesting foreign travel vaccinations
 - Consulting your safeguarding lead and following safeguarding procedures if you have concerns
 - Discussing the possibility of de-infibulation (being opened) to women and girls who have had FGM through referral to the Opal Clinic in Wandsworth or another clinic in a neighbouring borough
 - Examining women and girls who attend the GUM clinic for symptomatic sexual health screening for FGM

Think about other girls who may be at risk (such as siblings, cousins, etc...)

Think about and act on any immediate risk of harm to the girl or any other girl (call 999)

Inform the parents of any action you take (unless you think this poses a risk to a girl or anybody else)

Seek advice and consult with your safeguarding lead (if you don't know who it is, ask your line manager)

Contact the NSPCC Helpline on 0808 028 3550 for advice or Wandsworth MASH on 020 8871 6622