FEMALE GENITAL MUTILATION PATHWAY (0-18 YEARS)

STEP 1 – Identification - Professional concerned child under 18 years of age may have undergone or is at risk of FGM or notification of movement into area

Where there is a risk to life or likelihood of serious immediate harm professionals should report the case immediately to the police, including dialling 999 as appropriate.

If the following criteria are met mandatory reporting duty applies and professional should continue to Step 2:

1. If a Child/young person informs professional they have had FGM

OR

2. Professional **observes** a physical sign appearing to show FGM has been carried out

If the following criteria are met mandatory reporting duty does not apply and professional should jump to Step 3:

1. Parent/ Guardian discloses girl has had FGM

OR

2. Professional suspects FGM has been carried out

OR

2. You consider girl may be at risk of FGM. Health professionals refer to DoH FGM safeguarding assessment guidance

STEP 2 - Professional who initially identified FGM is required by law to make a report to the police.

Recommended route is via 101.

You will have to provide; Girl's name, date of birth and address, your contact details and contact detail of your Safeguarding Lead

Record all decisions/actions

Be prepared for police officer to call you back

Best Practice is to report before close of play next working day

Update local Safeguarding Lead for your service

If an immediate response is required for identified girl or another child or children – Police and / or Social Care take immediate action as appropriate. If immediate response not required continue to Step 3.

STEP 3 - Refer to the Bridge Partnership (Link)

Tel: 0161 603 4500 / Email: worriedaboutachild@salford.gov.uk

Continue to Step 4

STEP 4 - Refer to Guardian Project (consent to be considered dependent on level of risk/ safeguarding)

Question - Is the child an open case to Salford? If yes continue to Step 5. If no jump to Step 9.

STEP 5 - Child is an open case to Salford

- Bridge notify allocated Social Worker
- Continue to Step 6

STEP 6 - Convene a professionals meeting to include police, social care & health as a minimum.

- Consult with Guardian Project if not already done by referrer.
- Threshold of intervention to be determined by multi-agency group.
- If the threshold is met for strategy meeting jump to Step 8.
- If the threshold is <u>not</u> met for strategy meeting continue to Step 7.

STEP 7 - Threshold not met for strategy meeting

- Consider or update existing CAFAS –Amend plan to reflect any work identified in professionals meeting
- End of pathway for this case.

STEP 8 - Threshold is met for strategy meeting

- Practice Manager (CP,CIN, LAC) convene and chair strategy meeting to include police, social care & health as a minimum.
- If recommendation Section 47- CAFAS to be <u>completed</u> jump to Step 13.
- If recommendation S47 CAFAS not required jump to Step 12.
- If medical exam required consult SARC pathway. Refer SARC

STEP 9 - Child not an open case to Salford

- Case to be discussed in Bridge multi-agency meeting to include police, social care & health as a minimum. Consult with Guardian Project if not already done by referrer. Threshold of intervention to be determined by multi-agency group.
- If the threshold is met for strategy meeting jump to Step 11.
- If the threshold is not met for strategy meeting continue to Step 10.

STEP 10 - Threshold not met for strategy meeting

Level 2 intervention by identified lead professional or Early Help. Plan to be agreed.

OR

- No Further action/ universal services.
- End of pathway for this case

STEP 11 - Threshold is met for strategy meeting

- Duty and Assessment Practice Manager convenes and Chairs strategy meeting to include police, social care & health as a minimum
- If recommendation Section 47- CAFAS to be <u>completed</u> jump to Step 13.
- If recommendation S47 CAFAS not required continue to Step 12.
- If medical exam required consult SARC pathway. Refer SARC

STEP 12 - Recommendation that S47 CAFAS not required

- Level 3 S17 CAFASS by Children's Social Care.
- End of pathway for this case

STEP 13 - S47 - CAFAS to be completed

Health Professionals lead on assessment of health needs of child

- General health assessment: Physical / mental health
- Ensure liaison takes place with other health professionals involved and FGM is documented clearly in records of mother and all female siblings. Treat any identified health needs
- · Assess additional safeguarding concerns and document/ act appropriately

Social Care and Police

- Consider FGM Protection Order
- Consider if care plan or other safeguarding response required for siblings/ other female family members
- Consider community/third sector eg Guardian Project/NESTAC /Afruca/FORWARD
- Consider criminal investigation

Continue to Step 14

STEP 14

If conclusion of section 47 suggests significant concerns for child's welfare book ICC with SSQAU within 15 working days

If the child is subject to a Young Persons Plan, Supervision Order, Child Protection (CP) plan or looked after, the independent chair should be informed of the safeguarding concerns as soon as possible to ensure independent oversight and support to inform multi agency decision making.

Abbreviations

ICC: Initial Case Conference

SW: Social Worker

SSQAU: Salford Safeguarding Quality Assurance Unit

SARC: Sexual Assault Referral Centre

CP: Child Protection CIN: Child in Need LAC: Looked After Child