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Guidance

How to report female genital mutilation: guidance for health professionals

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Your duty to report female genital mutilation

Female genital mutilation (FGM) is child abuse and illegal. It may sometimes be referred to by other terms for example 'sunna', 'cut', or other names.

Regulated health or social care professionals must report cases of FGM to the police if:

- a girl under 18 tells them they've had FGM
- they see physical signs that a girl has had FGM

This applies to registered professionals in NHS and private healthcare settings, during the course of their work.

How to report FGM

If you are concerned that a child may have had FGM or be at risk of it, and they tell you that they have FGM or you observe physical signs that appear to show FGM, the mandatory reporting duty applies and you must call 101 (the police non-emergency number) to make a report.

You must:

- report the case as soon as possible (at latest before the end of the next working day)
- record all decisions and actions
- be prepared for a police officer to call you back
- inform your local safeguarding lead of the case

You will have to provide:

- the girl's name, date of birth and her address
- your contact details
- the contact details of your safeguarding lead

Do not carry out a genital examination unless this is already part of your role. A formal diagnosis will be sought as part of the subsequent multi-agency response.

Wherever possible, explain to the girl and/or her family that you're making a report and what that means. Do not discuss it if you think that making a report could lead to a risk of serious harm to anybody. Contact your local safeguarding lead for advice in these cases.

Complying with the duty does not breach data protection rules or other confidentiality requirements.

If it looks like a girl has recently been cut or is at imminent risk, act immediately – this may include calling 999. Remember, Mandatory Reporting is only one part of safeguarding against FGM and other abuse. Always ask your local safeguarding lead if in doubt.

If you are not sure whether FGM has been carried out

If you are not certain that FGM has been carried out, you should still make a report. A formal diagnosis will be sought as part of the subsequent multi-agency response.

You may need to make a social care referral.

If a social care referral isn't required, you should follow your local safeguarding procedures, sharing information about the potential risk and your actions with your colleagues across health (GP, school nurse and health visitor as a minimum). You should also discuss next steps with your local safeguarding lead.

If a parent says a girl has had FGM

In these cases you should follow local safeguarding procedures and refer to children's social care.

If a girl has had a genital piercing, a genital tattoo or non-medically indicated genital surgery

You should make a report.

If you're concerned about someone over 18

In these cases you should follow local safeguarding procedures. You should also signpost the woman to services that offer support and advice. You may also have to carry out a safeguarding risk assessment for any other children in the family who may be at risk or have had FGM.

What happens after you make a police report

The police and social care will take immediate action, if required.

In all cases, there will be a multi-agency safeguarding meeting in line with local safeguarding arrangements. This will include police, social care and health, as a minimum.

Next steps:

A paediatric health professional will lead on the assessment on the child's health needs. The health professional may consider:

- referral for genital examination using colposcope to the designated service in your area
- a general health assessment (physical and mental health)
- treatment and/or referral for any identified health needs (including those not related to FGM)
- an assessment of additional safeguarding concerns for example for other children in the family

Social care professionals and police will develop an appropriate response to the case – this is called the 'pathway'

In developing the pathway, social care professionals and police will consider: * use of FGM protection orders * a care plan or other safeguarding response * whether a safeguarding response is needed for anybody else related to the case, including other family members * referral to community or third sector organisations * the need for a criminal investigation

If you do not notice signs of FGM in a patient who is later found to have had FGM

Some types of FGM are very difficult to notice. If an allegation of failure to report FGM is made, the regulators will take all relevant circumstances into account, including your experience and what could reasonably have been expected of you.