

CSA MA Care Pathway Knowsley SCP & Children's SARC (Rainbow) at Alder Hey (AH)

Multi-agency

Clinicians

Disclosure / Suspicion of Sexual Abuse Referral to MASH +/- or Police +/- or Social Services
Also applies to LAC & children already on a Plan
 Includes: allegation of sexual abuse by a child or carer, sexual abuse of a child has been witnessed
 Or agency **reasonably suspects** abuse has occurred

MASH Strategy Discussion (SD) re Joint Investigation
 Consider referral to ISVA for child + parent / carer for support (independent of SD/SM outcome)
Must include consideration of the risk of same abuse of siblings of the index case

Has there been obvious penile /digital penetration?:
 Oral, Vaginal or Anal or ejaculation on the body surface or **sexual injury**?
Injuries may be minor and not known to child but forensically significant

YES

NO

ACUTE CASE
 Opportunity for:
DNA recovery¹ & documentation of injury
Injuries may be minor and not known to child but forensically significant
Emergency health needs,
Access to psychologist

STRATEGY MEETING: Considerations (Not an Exhaustive List)

- Is there relevant child or familial History?
- Is there any other supporting information surrounding the allegation?
- Is there a disclosure or medical / circumstantial information that supports the allegation which would benefit from **discussion with the Paediatric SARC (Rainbow)** +/- forensic physician
- Is there any other consideration + benefits which would support the requirement for a forensic medical / child abuse examination?
- Are there any urgent health needs or concerns regards timing of the examination?
- **Consider forensic opportunities: (DNA +/- injuries)¹ FSSC Guidance updated 6mthly**

Clinical / forensic advice to assist SD¹
 Rainbow +/- forensic physician
 +/- Unity / Duty DI
 Timing of Assessment: use national guidance^{2,3,4}
² pathway for booking CSA assessment at Rainbow
^{3, 4}: FFLM Guidance for Pre1 & Post2 Pubertal child

MA decision made regarding requirement for SARC in consultation with Doctor / relevant health representative

YES

Is A Forensic Medical Examination Required?

NO

YES

Record rationale, advise Rainbow & Inform referrer of decision

Contact Rainbow for appointment 0152 252 5609 (out of hours 0151 228 4811) follow CSA booking pathway²

Note: Rainbow: All children < 16, LD <18, CSE < 18, LAC < 18. Children >16 with capacity & adults are seen at adult SARC

Professional(s) attend RAINBOW APPOINTMENT with child and family

Paediatric nurse greets **child / family** and provides outline of Rainbow procedures, listens and reassures child and family

Note: Ideally professionals arrive 30 minutes before child+ family

Clinician(s) take briefing from professionals present

Professionals to supply written first account / initial concerns
MASH / social worker to provide genogram
Plan for forensic strategy / clinical needs agreed between professionals

CONSENT sufficient for the purpose of a forensic examination for assessment taken by clinician(s) from person with PR (copy to parent / person with PR)

Parent with PR to be available for clinician(s) to take consent and provide medical history for child

Child focused holistic assessment/ examination with additional consent +/- assent of child

Acute cases:

Management of immediate health needs, emergency contraception, prophylaxis for infections e.g. Hepatitis B, HIV, risk of self-harm and acute mental health issues

Non acute cases:

Pregnancy testing, screening for sexual infections, prophylaxis for Hepatitis B, screening for mental health issues

Note: Non-medical professionals may not be present during history taking

Only in exceptional circumstances will be present during the clinical examination.

Collection of evidence:

Forensic sampling (DNA)
Clinical and photo documentation of significant general, anogenital findings / injuries⁵

This will be fully explained by clinician during taking of consent and should not be explained by non-medical professionals

Medical findings and care plan fed back to child and family

Option for shower and change of clothing

Forensic samples handed to police with summary of findings

Treatment at Rainbow or referral to specialist teams

Mental health/well-being Referrals <2/7:
• Rainbow SARC psychologist
• ISVA (RASA/RASASC)

Child / family leave Rainbow

Acute case: Follow up appointment at Rainbow 2-3 weeks: STI screening +/- pregnancy test, mental health

Opportunity for clinical case supervision and forensic peer review

Strategy discussion with professionals present:

Review of safety plan, review of actions required by agencies for ongoing investigation / MA / single agency

Initial paediatric opinion / interim report
Provided to investigating professionals

<2/52 Full report shared with social worker, police.

Redacted information will be shared with GP. Other professionals on a "need to know basis".

Full safeguarding report < 2 weeks,
shared after consultant OA

Follow up STRATEGY MEETING recommended