



Fact sheet 09: Procedure for reporting FGM concerns to social services or the police

There has been confusion around when health professionals should refer girls and women with FGM to other agencies.

Children:

FGM is child abuse. If any child (under-18s) or vulnerable adult in your care has symptoms or signs of FGM, or if you have good reason to suspect they are at risk of FGM having considered their family history or other relevant factors, they must be referred using standard existing safeguarding procedures, as with all other instances of child abuse.

This is initially often to the local Children's Services or the Multi-Agency Safeguarding Hub, though local arrangements may be in place. Additionally, when a patient is identified as being at risk of FGM, this information must be shared with the GP and health visitor as part of safeguarding actions (See section 47 of the 1989 Children Act).

Adults:

There is no requirement for automatic referral of adult women with FGM to adult social services or the police. Healthcare professionals should be aware that a disclosure may be the first time that a woman has discussed her FGM with anyone. Referral to the police must not be introduced as an automatic response when identifying adult women with FGM, and each case must continue to be individually assessed.

In case of a vulnerable adult with symptoms or signs of FGM or there is good reason to suspect they are at Risk of FGM being carried out, it is important to consider at the outset the persons capacity to give their consent to have information shared about them or for any intervention to be made. The wishes of a vulnerable adult with the mental capacity MUST be respected and information, advice or support offered. If however, there is concern that the adult may lack the mental capacity to make such decisions, then a safeguarding adult's referral should be made to: Adult Services on 0300 555 1386

The healthcare professional should seek to support women by offering referral to community groups for support, clinical intervention or other services as appropriate, for example through an NHS FGM clinic. The wishes of the woman must be respected at all times. If she is pregnant, the welfare of her unborn child or others in her extended family must also be considered at this point as they are potentially at risk and action must be taken accordingly.

In both of the scenarios above, please follow the revised HMG FGM multiagency guidelines.