

FGM Scrutiny in a Day

Female Genital Mutilation – a collaborative approach

Presenters

April Bald - Head of Service Assessment , Intervention & MASH ,
Children's Social Care

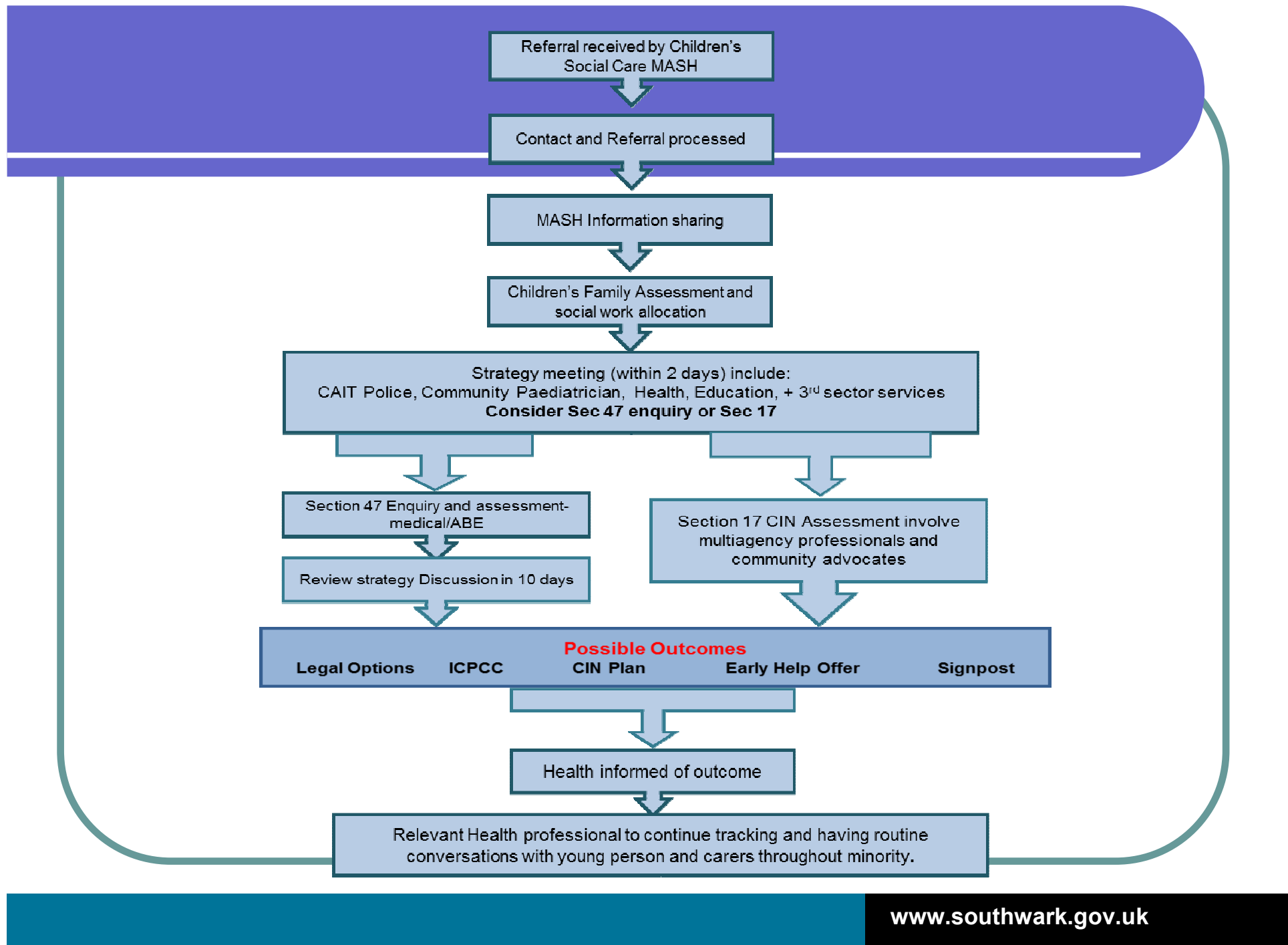
Angela Craggs - Detective Inspector Police Child Abuse
Investigation team

Clarisser Cupid - Designated Nurse for Safeguarding NHS
Southwark CCG

16 September 2015

Children Social Care

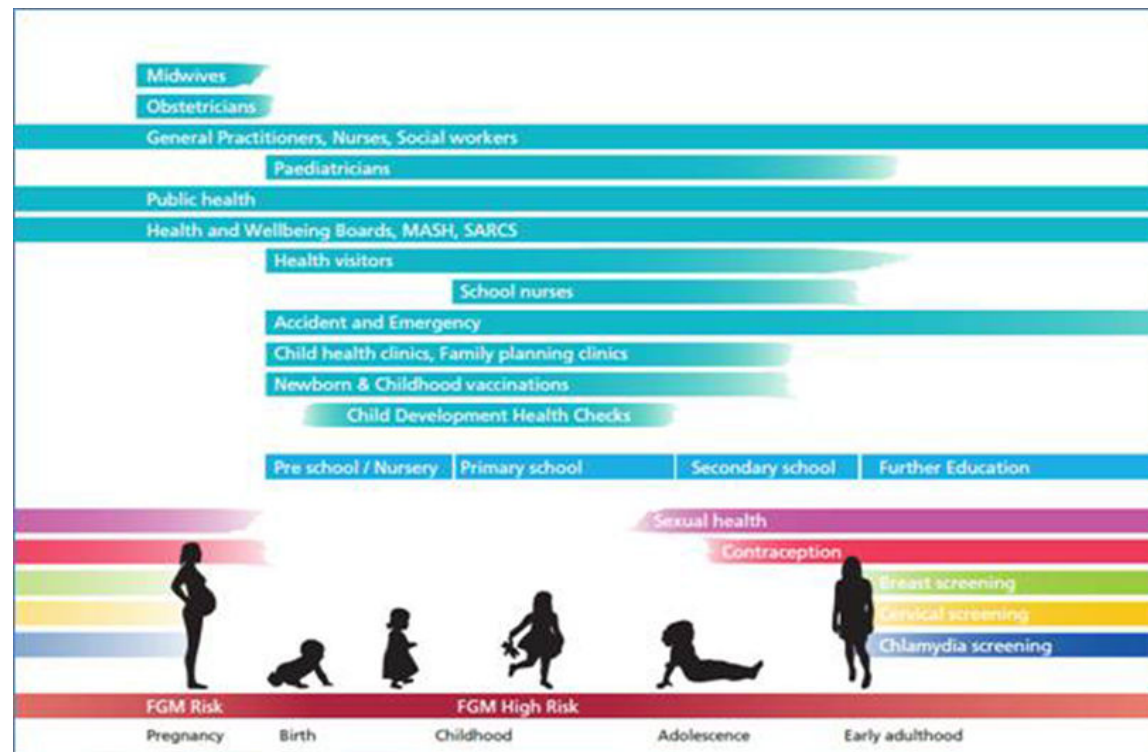
- Working Together to Safeguard Children – A guide to interagency working to safeguard and promote the welfare of children March 2015
- Supplementary Guidance = Multi Agency Practice Guidelines
- Role to prevent FGM and support those affected by the practice
- Southwark's MASH



Case examples

- 17 year old Sierra-Leonean presented at Sexual health clinic – had unprotected sex with older man – She had had FGM aged 10 whilst back home .
- Adult sister (Sierra-Leone) who had FGM called – concerned about 10 yr sibling.
- GP referral – mother (Somalia) concerned about her daughter who had FGM aged 7 back home whilst living with her father and his wife
- Police – friend of pregnant Polish woman expecting a girl – Nigerian partner wanted her to have FGM
- Immigration at Heathrow – Child travelling with mother who had paraphernalia in bag indicating possible cutting instruments

Tracking through child's minority



Police action upon receipt of an allegation of FGM

A child who has undergone FGM

or

A Child at Risk of FGM

and

If at immediate risk of significant harm consider Police protection

- MERLIN entry
- CRIMINT entry – QQ SC&O5
- CRIS Report – Flag PG
- Referral to Children's Social Care
- Risk assessment
- Inform Inspector
- Consider Critical Incident

Police Investigation

- ABE Interview child/children and any female siblings if applicable. Consider significant witnesses.
- Medical Examination
- Assistance via intermediaries or Community/Voluntary organisations
- Investigative Strategy – identify established excisors and any intelligence opportunities
- Second Strategy meeting and continual liaison with other Agencies
- Consider Cultural and Community Resources Unit (CCRU) Contact details found on intranet
- Interpreters
- Liaise with local Crime Scene Management
- Consider assistance from international agencies and other agencies (i.e. Foreign Commonwealth Office, International Social Services, Borders and Immigration agency)
- Early consultation between the police and CPS
- Counselling & support to any girl who has undergone FGM

The Law

- Prohibition of Female Circumcision Act 1985
Penalty – 5 years imprisonment
- Female Genital Mutilation Act 2003
Penalty – 14 years imprisonment

FGM Act 2003

- Offence to commit FGM [S1]
- Offence to assist a girl to commit FGM on herself [S2]
- Offence for someone in the UK to arrange or assist FGM outside of UK even if carried out by a person who isn't a UK national or resident [S3]
- NO AGE LIMIT - 'Girl = woman'
- Defence = If it is a surgical operation
- necessary for physical / mental health
- Mental health does not include belief that FGM is required as a matter of custom or ritual
- Consent is not a defence

New measures since May 2015

- Extension of extra-territorial liability to "habitual" UK residents
- Lifelong victim anonymity
- Parents and guardians liability for failing to protect a child from FGM
- Serious Crime Act 2015
- Civil Protection Orders for FGM
- Mandatory reporting for relevant professionals

**There have been NO
convictions under FGM
legislation
in the UK...**

MPS Response

- Project Azure
- Dedicated SPOCS on each CAIT team
- Flow Chart with NHS England
- Tri Borough LSCB training
- Training for Police/UKBF/Health/Education
- Operation Limelight
- FGM Conference
- NSPCC Helpline
- Protocol with CPS



Requirements from Health

- 1st April 2014 the first FGM Prevalence Dataset was published
- All clinical staff MUST record in patient healthcare records when it is identified that a patient has had FGM
- All Acute NHS Trusts (Foundation and Non-Foundation) must provide monthly returns of FGM prevalence

Further Development

- FGM Enhanced Dataset builds on the previous dataset and contains more data items such as:-
 - Patient identifiable information
 - Demographic data
- Extended to include mental health trusts and GP practices

FGM Work through SSCB Health Subgroup

- FGM Steering Group started in June 2015 with partner agencies
- Development of terms of reference, work plan and a local guidance document supported by recent government legislation
- Specialist expertise advisor
- Audit plans

Public Health

- Public Health tasked with looking at the prevalence of FGM within Southwark.
- A crude estimate of those affected by FGM using estimates of the 2014 population of 15-49 year olds is 2055 girls.
- Further research is needed to establish a truer picture including the FGM type.

Joint Working Across Health

- Kings College Hospital Foundation Trust
- Guys and St Thomas' Hospital and Community Foundation Trust
- South London and Maudsley Mental Health Trust
- Pathway within the acute
- Notification to GPs and HVs

Engagement from Agencies/ Services

- **SSCB** (Southwark Safeguarding Children's Board)
- **Social Care**
- **Police**
- **Education**
- **Public Health**
- **Voluntary Services**
- **VAWG** (Violence Against Women and Girls)
- **Community Safety Partnership**
- **Adult Safeguarding** (Future work planned)

Going Forward

- Listen to the voices of victims and survivors of FGM to inform practice and Strategy
- Detailed data collection and analysis to inform practice and commissioning
- Consider innovative ways for the commissioning of services, e.g. mental health
- Work together to create and encourage community awareness
- Train and develop champions to support the work in schools and the community (male and females).
- Strong partnerships and referral pathways with Local support organisations

Going forward (2)

- Training of all frontline practitioners including Primary Care – ensuring a workforce confident in undertaking thorough risk assessments and robust monitoring of children at risk throughout their minority
- Raise awareness in schools to encourage critical thinking and empowerment of young people .
- Increased use of Orders to protect and increased focus on the offenders
- Promote the ethos that FGM is a safeguarding issue and therefore should be treated as such