Presentation prompts clinician to suspect/consider FGM e.g. repeated UTI, vaginal infections, urinary incontinence, dyspareunia, dysmenorrhea etc. Also consider difficulty getting pregnant, presenting for travel health advice or patient disclosure (e.g., young girl from community known to practice FGM discloses she will soon undergo ‘coming of age’ ceremony).

INTRODUCTORY QUESTIONS: Do you, your partner or your parents come from a community where cutting or circumcision is practised? (It may be appropriate to use other terms or phrases)

No – no further action required

Yes

Do you believe patient has been cut?

No – but family history

Yes

Patient is under 18 or vulnerable adult

If you suspect she may be at risk of FGM:

Use the safeguarding risk assessment guidance to help decide what action to take:

- If child is at imminent risk of harm, initiate urgent safeguarding response.
- Consider if a child social care referral is needed, following your local processes.

Patient is under 18

Ring 101 to report basic details of the case to police under Mandatory Reporting Duty. Police will initiate a multi-agency safeguarding response.

Does she have any female children or siblings at risk of FGM? And/or do you consider her to be a vulnerable adult? Complete safeguarding risk assessment and use guidance to decide whether a social care referral is required.

Patient is over 18

FOR ALL PATIENTS who have HAD FGM

1. Read code FGM status
2. Complete FGM Enhanced dataset noting all relevant codes.
3. Consider need to refer patient to FGM service to confirm FGM is present, FGM type and/or for deinfibulation.
   a) If long term pain, consider referral to uro-gynae specialist clinic.
   b) If mental health problems, consider referral to counselling/other.
   c) If under 18 refer all for a paediatric appointment and physical examination, following your local processes.

Can you identify other female siblings or relatives at risk of FGM?

- Complete risk assessment if possible OR
- Share information with multi-agency partners to initiate safeguarding response.

Contact details

Local safeguarding lead:
Local FGM lead clinic:
NSPCC FGM Helpline: 0800 028 3550
Detailed FGM risk and safeguarding guidance for professionals from the Department of Health is available online

FOR ALL PATIENTS:

1. Clearly document all discussion and actions with patient/family in patient’s medical record.
2. Explain FGM is illegal in the UK.
3. Discuss the adverse health consequences of FGM.
4. Share safeguarding information with Health Visitor, School Nurse, Practice Nurse.

If a girl appears to have been recently cut or you believe she is at imminent risk, act immediately – this may include phoning 999.

REMEMBER: Mandatory reporting is only one part of safeguarding against FGM and other abuse.

Always ask your local safeguarding lead if in doubt.