

Child Sexual Abuse Medical Assessments

In cases where it is reported or believed that a child has experienced sexual abuse, the initial response from all practitioners should be to listen carefully to what the child says and to observe the child's behaviour and circumstances. Practitioners must:

- Clarify the concerns
- Offer reassurance about how the child will be kept safe
- Explain what action will be taken and within what timeframe.

The child must not be pressed for information, led or cross-examined or given false assurances of absolute confidentiality, as this could prejudice police investigations, especially in cases of sexual abuse.

In all cases, regardless of whether the abuse is recent or non-recent, consideration must always be given to whether or not the child requires a sexual abuse medical assessment. If the decision is that the medical assessment is not required, the rationale for this decision must be clearly documented. Expert professional advice regarding whether a medical assessment is indicated, can be obtained from the commissioned paediatric Child Sexual Assault Assessment Centre (CSAAS)/ Sexual Assault Referral Centre (SARC) provider, Mountain Healthcare: 0330 223 1154

'Recent': Abuse which has occurred between 0 and 13 days ago

'Non-recent': Abuse which has occurred 14 or more days ago

Child Sexual Abuse Medical Assessments

All CSA medicals are child centered and CSAAS/SARC staff will always follow the child's lead by listening to the child's verbal and nonverbal cues in order for them to remain comfortable and settled throughout their appointment. The CSAAS/SARC is welcoming, and child focused with work ongoing to further the aesthetics of the environment.

SARC Appointment:

Patient is brought to SARC with an adult who holds Parental Responsibility.
Social Worker or Police Officer must also attend SARC appointment.
All patients will be seen by a Forensic Nurse Examiner (FNE) and a Paediatric Crisis Worker.

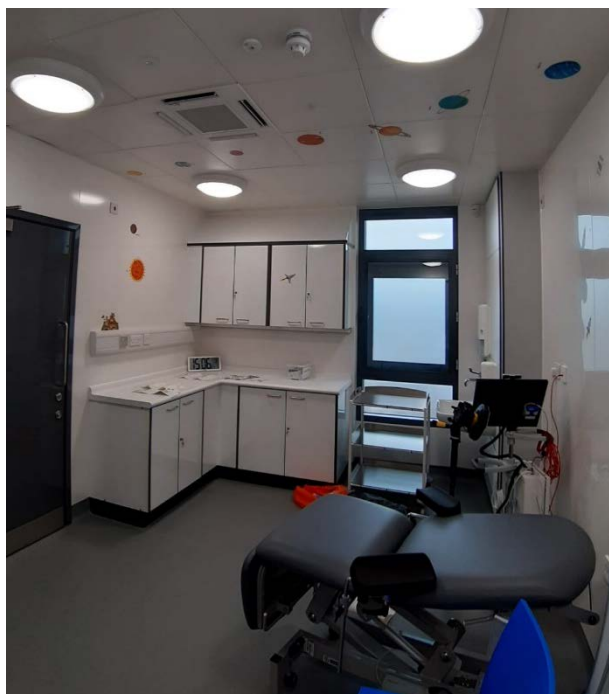
Within the appointment:

- Holistic assessment of the patient will be undertaken.
 - Patient will be examined for injuries.
 - Forensic samples taken if required.
- Referrals made into external statutory organisations, healthcare, and support services.

Following a SARC Appointment:

Every patient and/or family will receive a holistic follow up two weeks post SARC appointment.
Patient is referred into GU for baseline and follow up STI screening.

Each case is reviewed by our paediatric team.
Statements are written with appropriate peer review.



Requesting a Child Sexual Abuse Medical Assessment

Requests for a Child Sexual Abuse Medical Assessment can only be made by North Yorkshire Police or City of York Council Children's Social Care/North Yorkshire County Council Children and Families Service. **Regardless of who makes the request there must be discussion between the allocated social worker and police officer leading the case to agree the arrangements for the assessments including who will liaise with Mountain Health.**

Child Sexual Abuse Medical Assessments can be requested as an action arising from a strategy meeting or prior to the strategy with the intention of informing the discussions during the meeting. CSAAS/SARC will be invited to strategy meetings wherever possible to ensure expert views are considered when determining next steps. **A Child Sexual Abuse Medical Assessment should not be requested in order to determine if a strategy meeting is required.**

It should be noted that there are different arrangements for children and young people 0-12 years, and children and young people aged 13- 18 years; and for recent and non-recent abuse.

- 1. Children & Young People Aged 0-12 years, Acute Pathway (0-13 days)**
- 2. Children & Young People Aged 13 - 18 years, Acute Pathway (0-13 days)**
- 3. Children & Young People Aged 0-15 years, Non-Acute Pathway (14+ days)**
- 4. Young people aged 16 – 18 years, Non-Acute Pathway,** (Outside of forensic timescales. Young people aged between 16-18 years will usually be seen within the adult service and professionals are encouraged to ring Mountain Healthcare for advice around forensic timescales to establish if a young person follows the acute or non-acute pathway)

Cases where children may also require assessment of physical injuries in addition to child sexual abuse assessment

In cases where children also require assessment of their physical injuries, consideration should be given to prioritising this, particularly where the injuries are severe or require immediate attention and treatment. (*reference CP Medical Assessment procedures*). Discussions should take place between police/CFS, the on-call paediatrician and Mountain Healthcare, to agree:

- Timing of the assessments
- Location and coordination of the assessments (NB it may be possible for Mountain Healthcare to conduct off-site appointments if the child is unable to attend the paediatric CSAAS/SARC and/or to avoid the need for multiple assessments)

Further information can be found at: <http://www.hazlehurstcentre.org/>



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Pathway NEW.pdf