

## Section 1: Child/Young Adult (under 18 years old)

This is to help when considering whether a child is AT RISK of FGM, or whether there are other children in the family for whom a risk assessment may be required.

Indicator	Yes	No	Don't Know	Details
<b>CONSIDER RISK</b>				
Child's mother has undergone FGM				
Other female family members have had FGM				
Parents come from a community known to practice FGM				
A Family Elder such as Grandmother is very influential within the family and is/will be involved in the care of the girl				
Mother/family have limited contact with people outside of her family				
Parents have poor access to information about FGM and do not know about the harmful effects of FGM or UK law				
Parents say that they or a relative will be taking the girl abroad for a prolonged period – this may not only be to a country with high prevalence but this would more likely lead to a concern				
Girl has spoken about a long holiday to her country of origin/another country where the practice is prevalent				
Girls has attended a travel clinic or equivalent for vaccinations/anti-malarials				
FGM is referred to in conversation by the child, family or close friends of the child (see Glossary for traditional and local terms) the context of the discussion will be important				
Sections missing from the Red book. Consider if the child has received immunisations, do they attend clinic etc (Early Years Setting)				
Girl withdrawn from Sex Education /FGM lessons – School Nurse should have conversation with child				
Girl presents symptoms that could be related to FGM – continue with questions in Section 2				
Family not engaging with professionals (health, school or other)				
Any other safeguarding alert already associated with the Always check whether family are already known to Social Care				

### Action:

[Ask more questions](#) – if one indicator leads to a potential area of concern, continue the discussion in this area.

[Consider risk](#) – if one or more indicators are identified, you need to consider what action to take. If unsure whether the level of risk requires referral at this point, discuss with your named/designated safeguarding lead.

[Significant or Immediate risk](#) – if you identify one or more serious or immediate risk, it he other risks are by your judgement, sufficient to be considered serious; you should look to refer to Social Services/CAIT team/Police/MASH, in accordance with your local safeguarding procedures.

**[If the risk of harm is imminent, emergency measure may be required and any action taken must reflect the required urgency.](#)**

### In all cases:

- Share information of any identified risk with the patient's GP
- Document in notes.
- Discuss the health complications of FGM and law in the UK.

Indicator	Yes	No	Don't Know	Details
<b>SIGNICANT OR IMMEDIATE RISK</b>				
A child or sibling asks for help				
A parent or family member expresses concern that FGM may be carried out on a child				
Girl has confided in another that she is to have a 'special procedure' or to attend a 'special occasion'. Girl has talked about going away 'to become a women' or 'to become like my mum and sister'				
Girl has a sister or other female child relative who has already undergone FGM				
Family/child are already known to social services – if know, and you have identified FGM within a family, you must share this information with Social Services				

**Please remember; any child under 18 who are undergone FGM should be referred to Social Services**

**Action:**

**Ask more questions** – if one indicator leads to a potential area of concern, continue the discussion in this area.

**Consider risk** – if one or more indicators are identified, you need to consider what action to take. If unsure whether the level of risk requires referral at this point, discuss with your named/designated safeguarding lead.

**Significant or Immediate risk** – if you identify one or more serious or immediate risk, it he other risks are by your judgement, sufficient to be considered serious; you should look to refer to Social Services/CAIT team/Police/MASH, in accordance with your local safeguarding procedures.

**If the risk of harm is imminent, emergency measure may be required and any action taken must reflect the required urgency.**

**In all cases:**

- Share information of any identified risk with the patient's GP
- Document in notes.
- Discuss the health complications of FGM and law in the UK.

## Section 2: Child/Young Adult (under 18 years old)

Initial/Ongoing Assessment

This is to help when considering whether a child HAS HAD FGM.

Date \_\_\_\_\_

Completed by: \_\_\_\_\_

Indicator	Yes	No	Don't Know	Details
<b>CONSIDER RISK</b>				
Girl is reluctant to undergo any medical examination				
Girl has difficulty walking, sitting or standing or looks uncomfortable				
Girl finds it hard to sit still for long periods of time, which was not a problem previously				
Girl presents with frequent urine, menstrual or stomach problems and/or unpleasant body odours				
Increased emotional and psychological needs eg withdrawal, depression, crying, or significant change in behaviour. Behaviours include confrontation with peers and impulsivity				
Girl avoiding physical exercise or requiring to be excused from PE lessons without a GP's letter				
Girl has spoken about having been on a long holiday to her country of origin/another country where the practice is prevalent				
Girl spends a long time in the bathroom/toilet/long periods of time away from the classroom				
Girl talks about/demonstrates pain or discomfort between her legs and lower abdomen				

<b>SIGNIFICANT OR IMMEDIATE RISK</b>				
Girl asks for help				
Girl confides in a professional that FGM has taken place				
Mother/family member discloses that female child has had FGM				
Family/child are already known to Social Services – if known, and you have identified FGM within a family, you must share this information with Social Services				

**Please remember; any child under 18 who are undergone FGM should be referred to Social Services**

### Action:

**Ask more questions** – if one indicator leads to a potential area of concern, continue the discussion in this area.

**Consider risk** – if one or more indicators are identified, you need to consider what action to take. If unsure whether the level of risk requires referral at this point, discuss with your named/designated safeguarding lead.

**Significant or Immediate risk** – if you identify one or more serious or immediate risk, if the other risks are by your judgement, sufficient to be considered serious; you should look to refer to Social Services/CAIT team/Police/MASH, in accordance with your local safeguarding procedures.

**If the risk of harm is imminent, emergency measure may be required and any action taken must reflect the required urgency.**

### In all cases:

- Share information of any identified risk with the patient's GP
- Document in notes.
- Discuss the health complications of FGM and law in the UK.