

**DOCUMENT CONTROL PAGE**

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<b>Application:</b>	Royal Manchester Children's Hospital, Wythenshawe Hospital and North Manchester General Hospital – areas where child protection medicals are completed. Manchester and Trafford community child protection medical clinics.

<b>Originated / Modified By:</b>	Dr Clare Wilkins
<b>Designation:</b>	Named Doctor for Safeguarding Children, MFT
<b>Ratified by:</b>	Safeguarding quality and learning group (approved 18 <sup>th</sup> December 2024) RMCH safeguarding Committee (approved 22 <sup>nd</sup> November 2024) RMCH Policies and Guidelines Group
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<b>Responsibility of:</b>	Dr Clare Wilkins

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## 1 Introduction

### Child Protection Medical Advice and Assessment

Child Protection medical assessments are completed by paediatricians when there are child protection concerns related to physical abuse and neglect. If the Child Protection Medical is requested by Children's Social Care and is part of a S47 investigation this may be referred to as a 'S47 Medical'. The different teams within MFT who provide medical advice and child protection medical assessments have slightly different remits. It is important that services requesting a child protection medical assessment know which team to contact and how to contact them.

## 2 Purpose

The purpose of this document is to describe which team within MFT that services should contact to request a child protection medical assessment and how they can contact that team.

## 3 **GUIDELINE - Child Protection Medical Assessments at MFT - guidance on how to arrange.**

### Procedure to arrange a child protection medical assessment

#### 3.1 Community Paediatric Medical Teams:

- For planned S47 medical (with social worker) for children over 18 months of age.

**For Manchester children over 18 months old (and under 18 years of age) whom Manchester Children's Social Care are requesting a S47 child protection medical assessment**

#### **Manchester Local Care Organisation (MLCO) Community Paediatric Service**

Coral Suite, Moss Side Health Centre

Referral line: 0161 232 4220

Non-urgent queries: 0161 232 4551

Referrals are accepted 08:30 to 16:30 Monday to Friday (not bank holidays)

**For Trafford children over 18 months old (and under 18 years of age) whom Trafford Children's Social Care are requesting a S47 child protection medical**

#### **Trafford Community Paediatric Medical Team (TLCO)**

Children's Resource Centre, Trafford General Hospital

Referral line: 0161 9123368

Duty consultant on call (contact via referral line)

Referrals are accepted 9am-5pm Monday – Friday (not bank holidays)

### 3.2 Acute Hospital Paediatric Medical Teams - Royal Manchester Children's Hospital (RMCH), Wythenshawe Hospital, North Manchester General Hospital (NMGH) secondary paediatrics:

- a) For planned S47 Medicals (with Social Worker) for children under 18 months of age\* who live in that locality
- b) For urgent S47 medicals (with Social Worker) for children over 18 months of age (and under 18 years of age) which cannot be completed by the community paediatric team, or the child needs urgent medical care
- c) When a child has presented to the acute hospital and a clinician has concerns that the injury or condition may have been caused by maltreatment (non-accidental injury)
- d) When a Health Visitor or GP sees a bruise in a non-mobile baby – to refer for urgent paediatric assessment (and an urgent referral to CSC).

Contact the **general paediatric consultant\*\* or paediatric registrar** on call via switchboard at the hospital **local** to the child's address or if they are already in the hospital, contact the general paediatric consultant or paediatric registrar on call at that site.

*(\*\*08.30-16.30 Monday – Friday the 'hot week' consultant is on call, with separate on call rota after 16.30 and at weekends and bank holidays)*

#### Acute Paediatric teams (secondary paediatrics):

##### **For CENTRAL Manchester children:**

##### **Royal Manchester Children's Hospital (Oxford Road Campus)**

Switchboard – 0161 276 1234

Ask for General Paediatric registrar/consultant on call

Available 24 hours a day, 7 days a week

##### **For SOUTH Manchester and Trafford children:**

##### **Wythenshawe Hospital**

Switchboard – 0161 9987070

Ask for General Paediatric registrar/consultant on call

Available 24 hours a day, 7 days a week

##### **For NORTH Manchester children:**

##### **North Manchester General Hospital**

Switchboard – 0161 795 4567

Ask for General Paediatric registrar/consultant on call

Available 24 hours a day, 7 days a week

Referrals from Children's Social Care for S47 Medical (group a and b above):

The duty on call General Paediatric Registrar or Consultant at the acute hospital will triage referrals requiring emergency treatment or assessment at an acute hospital (or assessment cannot wait until the next available community child protection medical slot) and in those cases where the child is of an age of less than 18 months.

This referral process is the same within and outside working hours.

There are circumstances when the Child Protection Medical Assessment can be deferred to the next community clinic, avoiding an out of hours attendance at hospital.

These are:

- a) The child is in a place of safety
- b) The child does not need urgent medical treatment.
- c) There are no injuries which require immediate documentation and imaging.
- d) The Paediatric Consultant and Social Worker agree that the Child Protection Medical Assessment can be deferred to the next available community child protection clinic.

All referrals will be discussed with the duty on call General Paediatric Consultant, referrals can **ONLY** be accepted by a registrar or consultant, **NOT** a nurse or SHO.

Minimum information required when accepting referral for acute paediatrics.

- I. Is the child resident in the hospital's local area? If not, redirect the referrer to the child's local hospital.
- II. Establish the nature of the problem and establish timescale of response required and what information is known to date.
- III. Has a strategy meeting already been held and have decisions already been taken re place of safety? If so, consider whether next day attendance at the Coral Suite or Trafford community service would be more appropriate for the child and offer this to the referrer.
- IV. Ensure that consent for assessment has been obtained or will be available from parent with parental responsibility at time of assessment. If the parent is in police custody this may need to be obtained verbally.
- V. Check whether an interpreter is required and if so, ensure that a face to face interpreter is secured for the assessment. NEVER use a family member to interpret.
- VI. A referral should only be accepted direct from a GP or health visitor (for bruising in a non-mobile baby) if they are able to give an assurance that they have made an urgent referral to Children's Social Care (this is to avoid difficulties if the family do not attend when the GP refers).

### 3.3 Royal Manchester Children's Hospital has an additional specialist child protection service, tertiary safeguarding service:

#### Referrals to the tertiary team from within RMCH include:

- a) Injuries suspected to be due to abuse (inflicted or negligent) that are severe enough to require PICU admission.
- b) Severe or complex thermal injuries.
- c) Intracranial injuries.
- d) Suspected Factitious or Induced illness / injury (FII).
- e) Recurrent bony injuries.
- f) Cases where there is a difference of opinion between consultants regarding possibility of NAI.
- g) Support sought in working with other child protection agencies e.g. social services, police.
- h) Allegations of injury to a child whilst in hospital

#### Service (tertiary paediatrics)

Switchboard – 0161 276 1234

Ask specifically for tertiary safeguarding consultant on-call.

Available 9am-5pm Monday – Friday (not bank holidays), at other times ask for the general paediatric consultant on call.

### 3.4 Referrals from community services for investigations as part of a child protection investigation

#### Manchester Community service (at the Coral Suite) – arranging CP medical investigations at Royal Manchester Childrens Hospital

- Children seen at the Coral Suite may need to attend RMCH for medical illustration and haematological investigations. The paediatrician undertaking the child protection medical examination will arrange this by contacting the general paediatric SHO on call for admissions at RMCH and arrangements will be made for the child to attend PED for appropriate blood tests. A proforma outlining the investigations required will be brought with the patient.

#### Salford Community Team (at Pendleton Gateway) – arranging CP medical investigations at Royal Manchester Children's Hospital

- Salford Community Paediatricians operate a child protection clinic at the main children's outpatient clinic at Pendleton Gateway 1-5pm Monday to Friday (excluding Bank Holidays). Most children and young people 0-18 years referred by social care for a child protection medical assessment are seen in that clinic; very occasionally a child presents directly to the Panda ED department.

- Salford Community Paediatrician's undertake blood tests and clinical photography on site but do not have access to skeletal surveys or ophthalmology; CT head is only available for children presenting as clinically unwell at the Panda unit. There are no inpatient Paediatric beds in Salford.
- There is an arrangement for Salford consultants (including nurse consultants at Panda) to request such investigations as an outpatient from RMCH unless inpatient care is needed clinically.

To request such an investigation:

1. The Salford consultant calls the RMCH tertiary safeguarding consultant – via switch or mobile.
2. After discussion, the referral form (and consent if available at that point) are emailed to MFT consultant.
3. The RMCH and Salford consultants establish when the investigations are likely to take place, who receives the results in the Salford service, contact details, including of SW - should be on the referral form.
4. The RMCH consultant establishes where and when the child should be presented at RMCH, if starved and if so from when.
5. The child should be accompanied by a Salford social worker with the consent form, if not already sent. The RMCH consultant or member of the medical team consents for sedation.
6. The RMCH consultant contacts the Salford consultant with the ophthalmology results.
7. Occasionally the investigation findings necessitate further clinical assessment at the time, in this circumstance the RMCH consultant is called on to kindly undertake that.
8. The Salford consultant informs the social worker of the result (including ophthalmology) and completes the safeguarding report.
9. Rarely a child has been kept as an inpatient whilst social care makes alternative arrangements for a place of safety.
10. It is generally the responsibility of the referring consultant to inform social care and the family, though at times the RMCH consultant has done this, particularly if further investigations are indicated shortly afterwards.
11. Occasionally clinical and safeguarding responsibility is taken over by the RMCH consultant because of investigation findings.

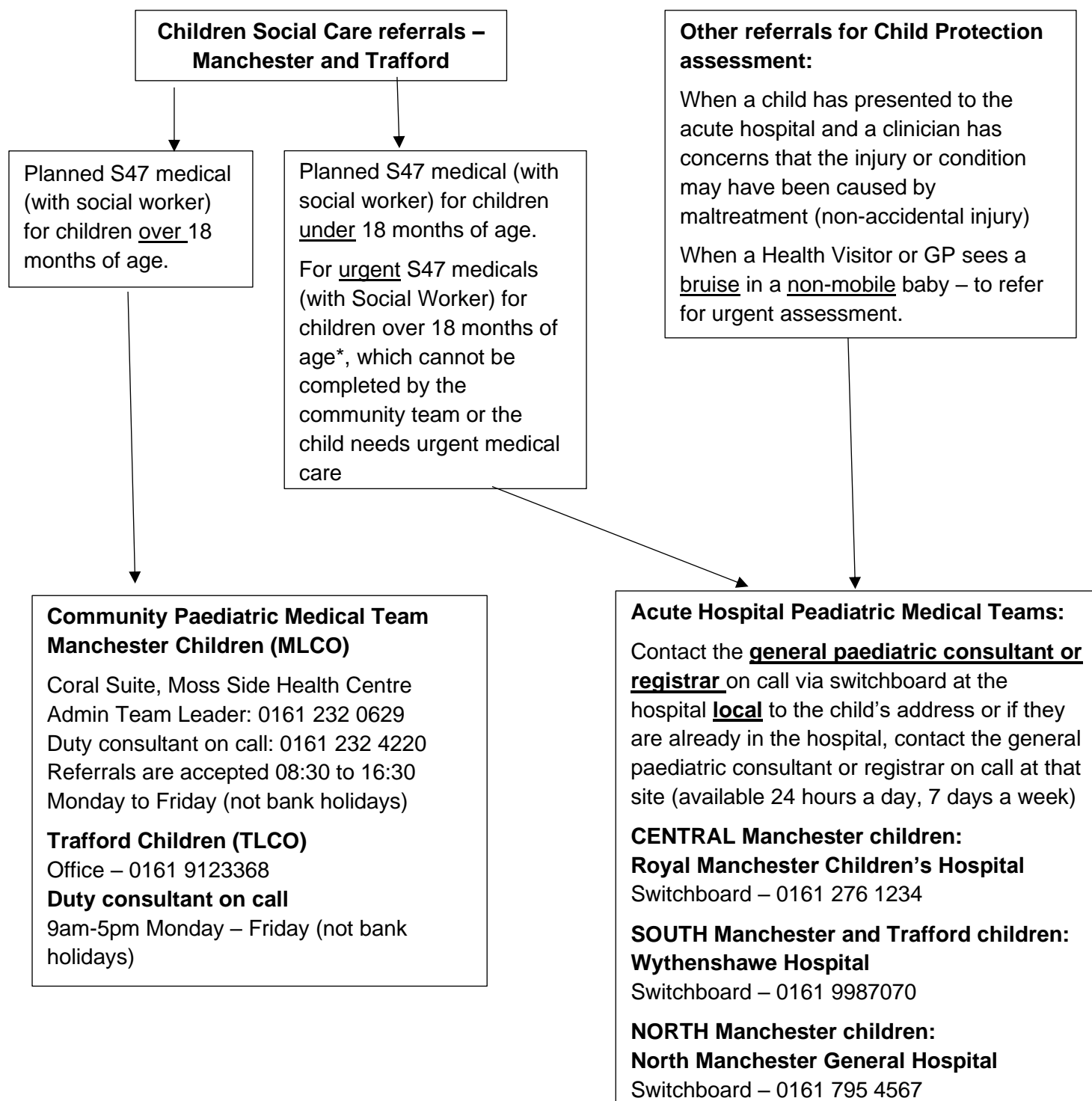
Salford Community paediatrics secretaries CP telephone 0161 2060253 – Mon -Fri 9am - 5pm.

Pendleton Gateway nurse's office 0161 2061536

Panda unit 0161 2060601 / 02

Named Doctor in Salford is Adila Afzal ([adila.afzal@nca.nhs.uk](mailto:adila.afzal@nca.nhs.uk))

**SUMMARY** – Flow sheet on who to contact to arrange Child Protection Medical assessments.



\*There are circumstances when the Child Protection Medical Assessment can be deferred to the next community clinic, avoiding an out of hours attendance at hospital.

These are:

- The child is in a place of safety.
- The child does not need urgent medical treatment.
- There are no injuries which require immediate documentation and imaging.
- The Paediatric Consultant and Social Worker agree that the Child Protection Medical Assessment can be deferred to the next available community child protection clinic.



## 4 Roles and Responsibilities

**The Board of Directors:** It is the overall responsibility of the Board of Directors to ensure that the requirements set out in this guideline are fulfilled. It will discharge this responsibility through the work of the Safeguarding Quality and Learning subgroup and RMCH & MCS Safeguarding Group.

**The Group Chief Nurse** - is the Executive Director for safeguarding in MFT and has responsibility for directing the implementation of this guideline.

**Clinical Directors:** It is the responsibility of Clinical Directors or areas treating paediatric patients to ensure medical staff are aware of and adhere to this guideline.

**Medical Staff and Advanced Nurse Practitioners (ANP):** All medical staff and ANPs who care for children are responsible for ensuring they are familiar with this guideline and manage children accordingly.

**Authors:** The authors are responsible sharing this guideline with Manchester and Trafford Local authority and for review of this guideline.

## 5 Equality Impact Assessment

Not relevant		Relevant	
This guideline relates to <u>all children under 18 years</u> of age where a child protection medical assessment is requested. It is a guideline written to give services that refer children for a child protection medical assessment at MFT information about which service to refer to and how to contact that service.		No needed	
EqlA registration Number: 2024-25			

## 6 Consultation, Approval and Ratification Process

Reviewed by Named Doctors at MFT

Reviewed by Named Nurses at MFT

Reviewed by representatives of Manchester and Trafford Local Care Organisations

Approved at RMCH Safeguarding Committee

Approved at Safeguarding Quality and Learning Group

## 7 Dissemination and Implementation

Dissemination

- Guideline to be put on MFT Trust intranet
- Guideline to be shared with Manchester and Trafford Local Authority
- To share with administration and paediatric staff who take referrals for child protection medical assessments.

## Implementation

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- This guideline is to inform services who may be requesting a child protection medical assessment who to contact and how to contact them.
- The guideline will be shared with the relevant services.
- The Named Nurses and Named doctors will monitor if there any difficulties in accessing the appropriate service.

## 8 References and Bibliography

None

## 9 Associated Trust Documents

Safeguarding Children and Young People Policy, version 6, March 2023

## 10 Appendices

None