

Arrangements for child protection medicals for North Midlands ,North and South Staffordshire social Care - March 2024

University Hospitals of North Midlands NHS Trust

Arrangements for child protection medicals

The University Hospitals of North Midlands (UHNM) provides a service for cases requiring a physical abuse medical examination. Medicals by the specialists within the child protection team will only be conducted within the hours Monday to Friday 9.00am to 5.00pm (excluding Bank Holidays).

The child protection team

The child protection consultants are on call Monday-Friday 9am -5pm and will also be available for telephone advice only between 10am and 11am at weekends and bank holidays.

For non-urgent cases, the paediatrician on call should be contacted by children's social care services or the police via the child protection administrator on 01782 679802 within office hours, Monday to Friday 9.00am to 5.00pm. The medical will generally be conducted in one of the weekday afternoon clinics, usually within 24 hours of referral to the RSUH.

The social worker may be asked to call back at 9.00am the following working day to arrange a medical if it cannot be conducted on the day of the original referral/ conversation.

We encourage this route were possible for all child protection medicals as an opinion will be given by the team of doctors with the most experience in child protection

If advice is required as to whether presenting symptoms could be medical rather than NAI or it is considered that a child protection medical is required out of hours (after 5pm and at weekends and Bank Holidays) social workers and police officers should first contact the 1st on call for child protection (Paediatric on call Registrar), via the hospital switchboard on 01782 715444. Child protection medicals will only be undertaken out of hours if the child requires urgent medical assessment and treatment as the priority need and will be undertaken by a doctor with less experience than the child protection team. This method of contact must not be used to book non urgent medicals. (See above).

The child protection consultants continue to encourage cases where there is diagnostic doubt to be discussed with them during their on call hours.

The emergency department

Children who have injuries that require urgent medical attention should still attend the emergency department (ED) to receive treatment. Those who require on- going medical treatment may need to be admitted.

Children who are well and brought up to the ED just for a child protection medical out of hours will not be seen and will be discharged to be appropriately safeguarded in the community until a child protection medical is arranged with the child protection consultants.

The children's assessment unit

Out of hours non mobile children with unexplained injuries that social care think might need medical treatment can be referred to CAU for assessment. If they need urgent medical treatment they will be admitted and any relevant investigations such as full skeletal survey, CT scan and ophthalmology examination will be arranged.

Where there is no medical need for admission, the child will be discharged with appropriate safeguarding arrangements in place via social care and the police. If required a child protection medical can be undertaken the following working day. Skeletal survey, CT head and eye examinations can be organised as a day case

Please remember any trained doctor can undertake a top to toe examination of a child to rule out additional injuries and children seen in ED/CAU with unexplained injuries do not necessarily need a separate "child protection medical" if there has been clear documentation of the injuries as needed by the police/social care for evidential purposes

The SARC (sexual abuse service) remains as is administered by WMPSAS.

Arrangements for Child Protection Medicals for Queen's Hospital Burton (South Staffordshire)

Examination of children referred by social services to Community Paediatrics during normal working hours (9am to 5pm) Monday to Friday

All CP medical in the community from 9-5 pm on weekdays are to be completed by Community Paediatricians on CP rota irrespective of the child's age. If a referral is received by Community Paediatricians in late afternoon i.e. after 4 pm then a strategy discussion should take place with social worker and police to decide if it is urgent. Community Paediatrician should contact the on call Paediatric consultant at QHB and refer the case with details of any strategy discussion and why an urgent CP medical is required. Once agreed social worker should bring the child at a convenient time and place in the hospital. Otherwise, the child will need the CP medical arranged for the following day in the community. This will be discussed in the strategy meeting. If investigations are required following a CP medical in community, then Community Paediatrician should speak to the Paediatric consultant for them to be arranged. The responsibility of investigations to be chased lies with the Community paediatrician as some of the blood test results can take few weeks to be reported.

Paediatric consultant is available on Service week mobile on weekdays from 9-5pm – 07551153192

Children presenting to Emergency department at the Queens Hospital Burton-QHB or Minor Injuries units-MIU (Sir Robert Peel hospital and Samuel Johnson hospital) or Paediatric assessment unit -PAU

All Children presenting to Emergency department with any unexplained injuries where safeguarding concerns are raised a referral should be made to children's social care and child should be referred to paediatric registrar or paediatric consultant. Child should be assessed on PAU between 9am-9pm and after 9 pm will need admission to the ward 1. Following the referral, a strategy meeting should take place with Children's social care and if s47 is met then Child protection medical should be conducted by Paediatric middle grade doctor or Consultant.

All Children presenting to MIU with unexplained injuries where a safeguarding concern is raised a referral should be made to children's social care. Emergency nurse practitioners should then discuss the case with the paediatric registrar or paediatric consultant at QHB. A child should not wait in MIU for long period of time so should be accepted on PAU for a review if medically stable. If the child is unwell and needs medical treatment may be transferred to ED and in this case both ED and Paediatric staff should be informed. Following a strategy meeting if CP medical is agreed to be urgent then it should be conducted by the hospital paediatricians. If the CP medical is not urgent and social care identifies a safe place for the child, then it can be arranged in the community the following day.

CPME should take place in a side room on Paediatric ward or a room on Paediatric assessment unit.

All sexual abuse referrals should be made to SARC (CYPSARS-child and young person sexual assault referral unit: 03302230099)

Out of hours after 5pm on Weekdays, Weekend and Bank holidays

There is no out of hours Community Paediatric service.

Social worker should contact the On Call Paediatric Consultant via switch board on 01283 566333 for any urgent child protection medicals.

Guidance notes for South Staffordshire & Shropshire FT (MPFT) paediatricians on the Child Protection rota

Examination of children referred during normal working hours (9am to 5pm) from Monday to Friday(excluding bank holidays)

The Trust and the doctors on the rota are contracted to provide cover from 9 am to 5 pm. In practice the Trust will aim to see and complete all examinations within this time period as far as is possible. If an examination has been commenced before 5 pm it will be completed by MPFT Paediatricians.

Telephone number for the referral: 01543 441423

This is the general number for all calls to both the East and West community paediatric teams. A message is recorded daily stating the name and contact number of the Clinician on call for child protection. The social worker would then contact the doctor directly.

On the occasions where calls are received late in the afternoon (typically after 4 pm) then as part of the strategic discussion with the Social Care or Police, MPFT Paediatricians should establish how urgently the child needs to be examined. The following factors will help in determining this:

- The age of the child
- The mobility of the child
- The site and possible severity of injury
- Need for treatment, urgent investigations or observations
- The likelihood of signs disappearing

Please also see appendix A attached for further details.

If the consensus is that the child **does not** need an urgent examination, then the SW or Police should be informed to arrange it the next day. On all week days except Friday this would be with one of the MPFT paediatricians.

If the outcome of the strategy discussion is that the child **does** need to be examined the same evening, then, the MPFT paediatrician will 'phone and talk to the hospital consultant on call at the hospital covering the child's residential address (contact details overleaf) and inform him/her of:

- all the background details.
- the fact that a strategy discussion has taken place and a decision made to complete the examination on the same day.
- the fact that the child can't be brought to us by 4:30pm.

The social worker should be informed that they need to phone the paediatric consultant on call to arrange a convenient time and place for the child to be brought.

If the consultant does not accept the decision, please contact either the named doctor of the Trust (MPFT) or the Hospital concerned.

Process for arranging investigations/observations following an examination.

For children presenting with an injury or bruise, the College guidance recommends a number of possible investigations. These may include skeletal survey, clotting studies, brain imaging (CT scan), etc, particularly for non-mobile children.

If it's the MPFT Paediatrician's opinion, that the child needs investigations or observation in hospital, a discussion should take place with the Social worker regarding the most convenient hospital for this to take place.

The MPFT Paediatrician has responsibility for contacting the agreed hospital to request investigation/observation and inform him/her:

- of the investigations which need to be carried out
- to forward the results when available.
- that the MPFT paediatrician will complete the report and all paper work related to the examination.

- **Burton Hospitals NHS Foundation Trust – 01283 566333**
- **Royal Stoke University Hospital - 01782 715444**
- **Royal Wolverhampton Hospital – 01902 307 999**
- **Good Hope Hospital – 0121 4242000**

The social worker should be informed that they need to arrange for the child to be taken to hospital as directed by the MPFT Paediatrician. The social worker will provide the acute hospital with medical records / assessments, as directed by the MPFT Paediatrician.

If a child needs a place of safety, the social worker/police will arrange this.