

7 The following YouTube video can be helpful to share with older children, teenagers and parents/carers before coming along for an assessment:

<https://www.youtube.com/watch?v=8dmg7ylQV4>

Useful numbers:

Forensic Network – via RVI switchboard
0191 2336161

Northumberland Paediatrician on call
0191 2932521

6 A report will be provided, which will include an opinion about the findings on physical examination. A normal examination is a neutral finding and **DOES NOT** exclude sexual abuse. Sexual abuse can occur without leaving physical signs. A normal examination **DOES NOT** mean no concern. All cases where there are concerns about sexual abuse require thorough multi-agency assessment.

1 A health assessment should be considered in **all** cases where there are concerns a child has been sexually abused. If the last episode of abuse was within 7 days the assessment is referred to as 'acute' or 'forensic'.

If the last episode of sexual abuse is more than 7 days ago, this is referred to as 'historical' or, sometimes, a 'welfare' assessment.

All assessments take place at the Children and Young People's Unit, Great North Children's Hospital, Newcastle

2 The nature of the allegation should not be used to decide whether an assessment is 'forensic' or not – this should be based on timing of the last episode of abuse. In medical terms, 'forensic' refers to the timeframe in which swabs for DNA may be relevant. This is within 7 days of the last episode of abuse.

**CHILD SEXUAL
ABUSE
HEALTH
ASSESSMENTS**

5 The process for a health assessment is broadly the same, whether acute or historical. This involves taking a health history and, in all cases, the offer of a physical examination, including an intimate examination of the ano-genital area. In acute cases, DNA swabs may be taken. Other physical and emotional health needs will be considered, including risk of pregnancy, STI screening and referrals for support. Consent from a person with parental responsibility is required.

In cases where the last episode of suspected abuse is more than 7 days ago, the Northumberland Paediatric Consultant of the Week for Child Protection should be contacted for advice. Information will be passed to Dr Jones or Dr Redfearn who will call the referrer back to discuss the case and arrange the medical if indicated.

3 Children may not always talk about everything that has happened to them. Even if there is not a clear allegation of 'penetration', an opportunity to address early health needs, gather evidence from examination and DNA swabs will be lost if acute cases are not referred appropriately.

To access further seven minute guides, please use this [link](http://www.northumberland.gov.uk/Children/Safeguarding.aspx)



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