

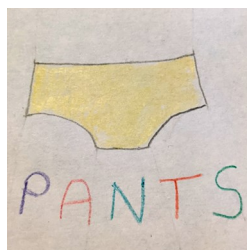
Going for a genital examination

Parents please read through this summary with your child



Why am I being seen today?

Someone is worried that you might have been hurt in the genital area. Or you might have soreness or an infection there. They have asked for you to be seen by a children's doctor.



What does genital examination mean?

Your genitals are between your legs, under your pants. Doctors sometimes need to look there and at your bottom to check that you are okay.

When doctors check your body to make sure you are okay this is called an examination.



Remember:

- Everyone is there just to help you.
- You can ask any questions you like.
- You can ask to bring an adult you trust with you.
- You can bring your favourite game, toy or book.
- You can ask to speak to the doctor on your own.
- The examination **doesn't** hurt. You can say no or stop at any time.
- It's normal to feel a bit nervous, but we are there to listen to you and to help keep you safe.



Before the doctor sees you:

You can choose an adult you trust to be in the room with you when you are checked over.

Someone will let you and your parent or carer know where to come and why they want you to see a doctor.



Who will I see?

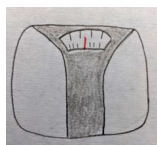
When you and your parent or carer come to the hospital, there will be a children's doctor and a children's nurse. There might be other adults there as well, such as a social worker. They will tell you who everyone is.

Not everyone will stay in the room when the doctor checks you over.



What will happen at the examination?

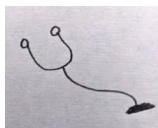
Before the doctor starts to examine you they will explain what will happen. They will ask for your parent's or carer's written permission, and yours if you are old enough. This is called consent.



The doctor will ask you and your parent or carer about your health.

The nurse or the doctor will weigh you and measure your height.

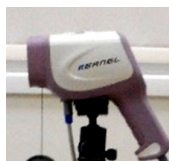
The doctors and nurse will check your body over. You can choose who else you want to be in the room with you when they do this, like a family member or an adult you trust.



The doctor will listen to your heart and feel your tummy. They will look at your skin and in your ears and mouth.



The doctors will ask you to lie on a couch. You will have a sheet or blanket to cover you. The doctors and nurse will use a special camera to help look at your genital area and your bottom. They will show you how the camera works before they use it. It does not touch you.



Sometimes the doctors use soft cotton buds that they touch lightly on your skin. They do not go inside your body. The doctors will show one to you before they start the examination.



What happens next?



The doctor will explain to you and your parent and carer what they think at the end of the examination. Sometimes more tests will be needed. If they are, the doctor will explain them to you.

The social worker and doctor will talk to you and to your parent or carer to find out what everyone thinks. They will explain what will happen next.

More information for parents and carers: What happens when your child needs a genital examination because of possible sexual abuse?

Why is this examination needed?

This genital examination is needed because there are concerns that your child could possibly have been sexually abused, and an assessment is needed to see if they have any injuries, or if they might have a sexually transmitted infection. If you have other children who may be at risk, they may be seen as well. This may be together or separately.

Remember...

We understand that it is upsetting to have concerns raised about your child's safety and wellbeing and we know that child protection investigations can make people anxious. It is important that:

- You understand what is happening.
- Your child's views are listened to.
- You and your child are given any help or support you need.

Let us know how best to communicate with you and your child, including if an interpreter is needed. Make sure you ask any questions you have, as we are here to help.

What do I need to bring ?

The medical assessment can take more than two hours. If you can, please bring:

- Any medication your child is taking.
- Any communication aids you or your child use (including hearing aids)
- Items you would usually take with you when out with your child e.g. spare nappies
- A snack or a drink for you and your child if needed
- Your child's favourite toys or books.
- Any paper or electronic health records you have (e.g. your child's red/blue book)
- A list of any questions or concerns you may have.

Who will be at the medical?

The assessment will take place in a clinic or on the children's ward at your local hospital, or in a specialist centre ('Treetops' near to Queen Alexandra Hospital in Portsmouth or The Shores next to the Bournemouth Police Station). There may be other adults there when you arrive at the appointment, such as social workers or police officers. When it comes to the examination, a children's doctor (paediatrician) who has been specially trained for this work will be there. There will usually be a second doctor and a specialist nurse as well. They will agree with you and your child who else will be there (such as a family member or trusted adult) for maximum comfort for your child.

Who needs to give consent for the medical?

The doctor will explain the reason for the medical assessment. They will take written consent from someone who has parental responsibility and/or from your child, depending on your child's age and level of understanding. The doctor will explain how information from the assessment will be shared. Reports are kept as part of a child's health record. They are also sent to those who need them. This can include health professionals, social workers, and sometimes the police or courts.

If your consent is not given and the doctors, social workers or police feel an examination would be in your child's best interests, they may need to discuss this further with you.

What will happen at the medical?

The doctors will take time to talk to you about your child's health and development. They may also ask to speak to your child on their own. Then your child will be offered a medical examination, including a top-to-toe skin examination.

Examination of the genital area and your child's bottom is carried out **just by looking**. Internal examinations are rarely performed (these would be only in older teenagers and would be fully discussed, agreed and consented with them beforehand). Soft cotton buds are sometimes touched lightly on the outside of your child's skin (they are not inserted inside the body). These may be used to take forensic DNA samples or to check for sexually transmitted infections.

A specialist magnifying video-camera (colposcope) is used to assist with the examination. It does not touch your child's body. It makes the examination quicker because it shows the area clearly and the examination is recorded so that it can later be reviewed to look for any injuries. Recordings are stored on DVDs. They are coded (without using your child's name) and kept securely, separately to your child's health record.

Everything will be taken at your child's pace. The doctors will stop if your child asks them to, or they can pause the examination if your child wants to take a break.

Sometimes children and young people don't want an examination but it might still be helpful for them to meet the specialist doctors to talk to them about possible sexually transmitted infections or risk of pregnancy and about how they feel.

What happens next?

The doctor will tell you what they think at the end of the examination and answer any questions you and your child may have. They will explain whether any further investigations or treatment are needed. The doctor and social worker will talk to you and your child about what will happen next.

The doctor is expected to review and consider the opinions of other doctors in a process called Peer Review. Peer Review is a confidential discussion with other specialist paediatricians. Your child's examination findings may be discussed at Peer Review. You and your social worker will be informed of any changes to the original opinion or plan after a Peer Review discussion.



Useful numbers

A MASH (Multi-Agency Safeguarding Hub) bringing together services from social care, police and health:

MASH for children living in Hampshire : 0300 555 1384, out of hours: 0300 555 1373

MASH for children living in Isle of Wight: 0300 300 0117, out of hours: 0300 555 1373

MASH for children living in Portsmouth City 0845 671 0271, out of hours: 0300 555 1373

MASH for children living in Southampton City: 02380 833336, out of hours: 02380 23344

ChAD (Children's Advice and Duty Service) for children living in Dorset: Professionals number 01305 228558 (including out of hours), Families and members of the public number 01305 228866

BCP First Response Hub for children living in Bournemouth, Christchurch and Poole: 01202 123334, out of hours: 01202 738256

Childline: 0800 1111 www.childline.org.uk/

NSPCC: 0808 800 5000 www.nspcc.org.uk/keeping-children-safe/

If you want to make a complaint, please ask any member of staff for a 'PALS' leaflet.