Neglect medicals at GWH

What a neglect medical is, when to request one and what it will tell you.

1 When to request one

- Where there is evidence or concern of a severe level of neglect.
- Always consider one where there is a joint agency investigation.
- Particularly where you are seeking legal advice to place a child away from their carers.

2 What it is for

- To identify the child's health needs, including unmet ones.
- To reduce the physical and psychological consequences of neglect.
- To document clinical findings, including any injuries, for the investigation.

3 What it is not

- A health visitor, school nurse or GP check is not a neglect medical.
- That check (growth, development, general health) is a useful first step.
- Send us what it found and we will advise whether a formal medical is needed.

4 Who does it, and where

- The Designated or Named Doctor for Children's Safeguarding
- Medicals take place at Great Western Hospital.
- GWH covers postcodes SN1 to SN9 and SN25.
- SN10 and above sits with HCRG or the RUH in Bath, other than SN25.

5 How long it takes

- We aim to complete neglect medicals within 10 working days.
- It can be longer where consultant availability is limited.
- If a child needs to be seen urgently, please say so and we will try to prioritise

What the medical can and cannot do

A neglect medical documents the child's health, growth and development, and what neglect appears to have done to them. It is not a test that comes back positive or negative. A normal examination does not disprove neglect, and the paediatrician's opinion is one strand of evidence alongside yours.

Requesting a neglect medical: what we need from you

The more of this you can give us up front, the better the assessment and the report will be.

How to request one

- **Raise it at strategy discussion** Thinking neglect medical? You must invite the GWH Safeguarding Team via gwh.safeguardingchildrenteam@nhs.net to the strategy discussion so the need and timing can be agreed with health. If it is after 1pm, a consultant paediatrician can usually attend.
- **Answer the three questions** Why a medical is needed and what it will add for this child; when it should happen; who will do it and where. We cannot proceed without these.
- **Confirm consent** Tell us who is consenting and on what basis. For a section 47 medical, consent must be confirmed before the appointment, not on the day.

Send this with the request

- A chronology, and what has changed to bring this to a medical now.
- Growth records, the red book, and any school or nursery concerns.
- Which agencies are involved and whether police are investigating.
- Names and dates of birth of siblings, and whether they also need seeing.

On the day

- For a section 47 medical, the allocated social worker must accompany the child.
- The paediatrician will take a full history, examine the child head to toe and record findings on a body map and proforma.
- The child will be given the chance to speak on their own where they are old enough.
- Photographs may be taken of anything visible, with written consent.
- Siblings may not be seen the same day. That is decided case by case against ward pressures.
- A competent child's refusal will be respected unless a court has ordered otherwise.

What you get back, and what to do if we disagree

A verbal opinion from the paediatrician at the time of the medical.

A brief written summary within 24 hours, then the full report within 5 working days.

If we do not agree a medical is needed, ask for the Named or Designated Doctor, then use the partnership escalation process.