Child Sexual Abuse (CSA)

Guideline for paediatric forensic medical examinations after disclosure of/concerns for sexual abuse

- Forensic referrals (urgent discussion with forensic medical examiner, examination requires Garda presence)
- cases should be referred as soon as possible and ideally should be seen for forensic exam on the same day
- For Pre pubertal children, up to 3 days and for post-pubertal up to 7 days - for forensic sampling depending on the allegation (see forensic sampling Timeframes below).

• Acute referrals

- Outside of forensic window for forensic examination, presenting within
 34 days of alleged incident
- Non Acute Referrals
- Greater than 34 days since alleged incident

ALL children who have made a disclosure of sexual abuse or for whom sexual abuse is strongly suspected should be referred to TUSLA

- If child is aged 14yrs or over the referral should be made to SATU which is based in the South Infirmary: <u>021 4926297</u> (Out of hours: <u>021</u> <u>4926100</u>). SATU provides 24hr/ 7days a week service
- For children under 14yrs of age the family centre provide paediatric medical examinations 9am -5pm, Monday to Friday (Excluding Bank Holiday or Public Holiday). Phone Clinical Nurse Manager Mobile <u>087</u> <u>2837117</u>
- For urgent referrals (between 7-34 days) and child is <14yrs, can be referred to family centre that day or next working day if presenting Monday- Friday (consider medical considerations as outlined below).

- Over Weekends & Bank Holidays consult with on call Paediatric Forensic Examiner, Galway (see below)
- If urgent safety needs contact the Gardaí / Tusla Emergency Social Work Services
- If the child attends the CED at CUH, a senior clinician should contact An Garda Siochana and the Paediatric Forensic Medical Services, Galway via <u>091 524222</u>. Urgent health needs and safeguarding take priority

Forensic sampling timeframes: (these samples will be taken by the forensic examiner)

Forensic window is based on the allegation/disclosure:

- Vaginal intercourse (even if condom purported to have been used)
 - post pubertal: within 7 days (168 hours)
 - Prepubertal: 3 days [72 hours]
- Digital/object penetration within 48 hours
- Contact (touch) with outside areas (skin) within 48 hours
- Anal intercourse (even if condom purported to have been used) within 3 days (72 hours).
- Oral penetration: swab/rinse recovery of semen if within 2 days
- Blood for Toxicology (up to 48hrs)
- Urine for Toxicology up to 5 days
- N.B. any samples taken for evidence must be maintained by An Garda Siochana to maintain chain of evidence. If suspected drug facilitated sexual assault, urine samples to be taken by Gardai also for testing in FSI.

Reference: https://fflm.ac.uk/wp-content/uploads/2024/07/Recommendations-for-thecollection-of-forensic-specimens-from-complainants-and-suspects-Jul24.pdf

Preservation of Forensic Evidence

- Garda can do early evidence kit for non-intimate samples (mouth swabs, urine)
- Retain clothing including nappies, bedsheets etc.
- Advise not to wash, to avoid wiping after toileting

Medical considerations

- Detailed check for injuries
- Emergency contraception up to 120 hrs after assault
- Hepatitis B exposure** (if required Vaccine is available in CUH pharmacy)
- Hep B Immunoglobulin considered up to 1 week post exposure
- HIV Post Exposure Prophylaxis can be commenced up to 72 hrs post exposure (HIV PEP stocked in CUH pharmacy, ADON can access out of hours)
- Prophylaxis for STI Not routinely given in children and adolescents
- Healing injuries may be present for up to 34 days after a sexual assault dictating urgent examination ideally within one working day even if child presenting outside the immediate timeframe for forensic sampling.

**Hep B vaccination introduced into routine immunisation schedule in October 2008

Referral information

- Referrer's name, address, occupation and contact number
- Child's name and date of birth
- Details of the report including timeframe, any immediate medical needs which may need intervention, and immediate child safety concerns;

- Confirmation of consent for examination i.e. parent or legal guardian available for consent or if child in care of TUSLA (Full Care Order), consent must be obtained from Principle Social Worker.
- Specific needs child/family may have e.g. does not speak English and will need an interpreter.
- Name, address and telephone number of Garda involved in case
- Name and telephone number for person who will be transporting child to the Forensic Medical Examination