**Multi-agency Perplexing Presentations/over-medicalisation & FII cases Guidance**

Alerting signs

Concerns about medically unexplained symptoms/over-medicalisation (see definition below)

MASH Nurse to refer to school nurse and inform the GP and relevant Named practitioners

Illness Induction

Immediate serious risk to child’s health

Clear deception

Significant Harm

Case discussed in a multi-disciplinary health meeting; consider safeguarding advice from Named Doctor/ Named Nurse(s)

Possible outcomes:

* FII
* Neglect/emotional abuse
* Health led management

Health-led management

Refer to Children’s Social Care

Parents not to be informed

**FII**

Child referred to Children Social Care– follow Pan Sussex procedures on FII/perplexing presentations:

Named Doctor & lead clinician/paediatrician MUST be involved in strategy meetings (timescales to be delayed where appropriate; timing of **strategy meeting[s]/ case conference to be arranged to ensure paediatricians can attend).**

Family NOT to be informed until agreed by all agencies

Designated professionals to be informed

inform

**HEALTH:** Lead clinician/paediatrician arranges health/medical follow-up/plan

Family to be informed if agreed by all agencies

Ascertain child’s current state of health and daily functioning

**Neglect/Emotional abuse:**

Refer to Children’s Social Care. Strategy meetings MUST include the lead clinician/paediatrician & include GP/GP information, education, hospital/child development centre + involve the relevant Named Doctor

Family can be informed if agreed by all agencies

Collate all the current health service involvement

At any point a referral to Children’s social care may be needed

Verifying all reported diagnoses

Explore parents’ views, fears, beliefs, wishes

Parents do not support plan

Refer to Children’s Social care as medical neglect and emotional abuse ). *Parents to be informed of referral*

Explore child’s views, fears, beliefs, wishes

+/- Family support via Early Help

Explore siblings’ health and family functioning

Obtain consensus from all professionals involved on:

* The child’s current state of health
* Areas of continuing uncertainties
* Harm to child
* Rehabilitation plan offered to parents

Rehabilitation proceeding

* FII – refer to Pan-Sussex procedures
* Perplexing cases/over-medicalisation/perplexing presentations
* Pre-MASH multi-professional meeting may be convened by Health to scope concerns and plan for intervention.
* If concerns remain, the concerned professional MUST contact the MASH/FDFFs and submit concerns for multi-agency review. MASH must not notify parents of contact unless agreed by all partners. MASH Manager to record clear rationale as to the reason why those with PR for the child are not to be informed i.e. risk of further harm.
* All agencies need to record the reasons as to why parents and carers have not been informed of the level of concern, which should only happen in cases where a child is assessed to be a risk as a result. MASH/FDFFs Manager to note that seeking relevant permissions and informing parents and carers is to be reviewed on a regular basis by Manager, lead paediatrician and Named Doctor/Nurse, alongside partner agencies.
* Is there a risk of harm 🡺 Strategy meeting to be convened and timescales to ensure the lead paediatrician and at least a Named or Designated Doctor/Nurse can attend.
* For cases that are perplexing i) it is essential to have reached an agreement (health decision or via the strategy discussion) **prior to parents/carers being notified of the concerns.** ii) a decision must be made regarding who (and when) is best placed to have this conversation with parents/carers.
* Should concerns be raised regarding immediate risk to a child (usually true FII), in the course of making enquiries, an urgent strategy discussion must take place with a clinician/paediatrician (can include a Named or Designated Health professional) and action taken to make the child safe in accordance with each agencies role and responsibility. Social Care, in this scenario, must seek legal advice at the earliest opportunity.
* For FII and perplexing cases opportunities for multi-agency sharing of information, collaboration, planning and challenge should take place on a regular basis via review strategy meetings The schedule for which should be set discussed at the initial strategy meeting and should then be reviewed at every subsequent meeting.