

Bruising/injuries in Children who are Not Independently Mobile (NIM) Guidance (updated September 2020)

This guidance provides professionals with a knowledge base and strategy for the assessment, management and referral of children who are **Not Independently Mobile** (NIM) who present with BRUISING or otherwise UNEXPLAINED MARKS.

This guidance applies to professionals. For example; health professionals, police officers, probation officers, mental health workers, substance misuse workers, social workers, early year's workers, disability and learning needs professionals. This guidance should be considered in conjunction with the Pan Sussex Procedures online; http://sussexchildprotection.procedures.org.uk

Bruising is the commonest presenting feature of physical abuse in children. Recent serious case reviews and individual child protection cases both nationally and locally have indicated that professionals have sometimes underestimated or ignored the highly predictive value, for child abuse, of the presence of bruising in children who are **Not Independently Mobile** (those not yet crawling, cruising or walking independently). As a result, there have been a number of cases where bruised children have suffered significant abuse that might have been prevented if action had been taken at an earlier stage.

Children under one are particularly vulnerable and most at risk of homicide and disability as a result of child maltreatment.

There may also be other concerning injuries that are unexplained such as burns, subconjunctival haemorrhages/other eye injuries, frenulum and oral injuries.

NICE guideline **When to Suspect Child Maltreatment** (Clinical Guideline 89, 2009) states that bruising in any child **Not Independently Mobile** should prompt suspicion of maltreatment.

There is a substantial research base on the significance of bruising in children. http://www.core-info.cardiff.ac.uk/reviews/bruising

A bruise should not be interpreted in isolation and must always be assessed in the context of medical and social history including repeat presentations with similar concerns, developmental stage and appropriate explanation given. A full clinical examination and relevant investigations must be undertaken, following local and national guidance.

It is recognised that a percentage of bruising in children <u>Not Independently Mobile</u> will have an innocent explanation (including medical causes such as birth marks and Blue Spots). Nevertheless because of the difficulty in excluding non-accidental injury, professionals should refer to CAP where a social worker will arrange for the child to be examined by a paediatrician. A strategy discussion will also be held with representation from West Sussex Children's Social Care, Police and a Paediatrician to inform further enquiry and action.

Referrals are made via the Multi-Agency Safeguarding Hub (MASH) on 01403 229900

Out of hours number: 0330 222 6664

Verbal referrals must be followed up in writing within 24 hours and sent to the secure email address at MASH@westsussex.gov.uk

A body map can be completed to annotate site, size, colour characteristics pattern and number of bruises and or unexplained marks (see appendix 2)

In particular professionals should explain at an early stage why in cases of bruising in <u>Not</u> <u>Independently Mobile</u> children, additional concern, questioning and examination are required. The decision to refer to West Sussex Children's Social Care should be explained to parents or carers frankly and honestly. <u>It is important to note that the explanation/discussion</u> with the parents should only occur if this does not increase the risk to the child; in accordance with safeguarding children procedures and working together 2013.

See appendix 1 for explanatory leaflet which may be provided: -

'My Non-Independently Mobile Child has a Bruise/unexplained skin mark'

Following referral professionals should follow the Pan Sussex Procedures; http://sussexchildprotection.procedures.org.uk

Multi Agency Bruising/injuries in Children who are Not Independently Mobile (NIM)

<u>Guidance (Includes Disabled older children who are Not Independently</u> <u>Mobile)</u>

Practitioner observes bruise or unexplained skin mark, burn, oral or eye injury (e.g. unexplained sub-conjunctival haemorrhages) SUSPECT child maltreatment

A seriously ill or injured child should be referred immediately to a hospital with an emergency department.

