



One Minute Guide

Bruising and Injuries in Infants who are not Independently Mobile



The 'Protocol for the management of actual or suspected bruising or other injury in infants who are not independently mobile' tells staff what to do when they identify a bruise or other injury in a young baby, especially a baby who is not yet rolling or crawling.

Why is it important?

Bruising and other injuries in young babies who are not independently mobile are unusual and can be associated with hidden injuries and with later abusive head trauma. National and local serious case reviews have identified the need for heightened concern about injuries in babies who are not independently mobile. It is important that any suspected injury is fully assessed even if the parents feel they are able to give a reason for it.

How do we do it?

All young babies with bruising or injury should be fully assessed and referred immediately to Children's Services. However if the child seems seriously injured then emergency treatment should be sought at an emergency department.

Staff will give parents a copy of the 'Bruising in young babies – Information for parents and carers' leaflet¹. Children's Services will make background checks and arrange a paediatric assessment as soon as possible (within a maximum of 4 hours). After the paediatric assessment a strategy discussion takes place between the social worker, police and paediatrician and the outcome is explained to the parents.

Frequently asked questions.

- Why are Children's Services involved from the outset? Bruising or injuries on any pre mobile child should be fully investigated and take into consideration the child's medical and social history, motor skills and the explanation provided by parent or carer. Children's Services are key to providing background social history.
- What if parents refuse consent? Obviously it is best for families to work in partnership with professionals involved on a consensual and open manner. However, if consent is refused, professionals will be expected to continue with steps of the protocol under child protection arrangements. Advice can be sought from direct line managers in terms of how this should be progressed.
- What if the parents provide a reasonable explanation? Whilst the explanation may seem plausible multi-disciplinary assessment is almost always required. Exceptions to this are rare e.g. a witnessed road traffic accident. The individual making the referral should share their professional view with the paediatrician and social worker.
- What if the child is disabled, aged over 6 months but is not mobile? This will require professionals to make a judgement regarding the need for referral. Advice can be sought from line managers and your safeguarding leads. Remember this protocol is about safeguarding the most vulnerable children against physical abuse.

For more information:

See the protocol for the management of actual or suspected bruising or other injury in infants who are not independently mobile' [HIPS Safeguarding Children Procedures](https://hipsprocedures.org.uk/assets/clients/7/CS50259%20WHCCG%20Bruising%20Protocol%20Leaflet_01.pdf) website

¹ [http://hipsprocedures.org.uk/assets/clients/7/CS50259%20WHCCG%20Bruising%20Protocol%20Leaflet_01.pdf](https://hipsprocedures.org.uk/assets/clients/7/CS50259%20WHCCG%20Bruising%20Protocol%20Leaflet_01.pdf)