

## 01. Purpose of this Briefing

This briefing considers learning from local children's cases involving confirmed / suspected non-accidental injury of children, particularly Pre-Mobile Babies and Non-Independently Mobile Children.

## 07. Resources to support practice

["Bruising, Marks, or Injury of Concern in Pre-Mobile Babies and Non-Independently Mobile Children" procedure](#)

["Information Sharing" procedure](#)

Building Confidence in Practice Resources – Professional Curiosity for [Practitioners](#) and [Supervisors / Managers](#)

[ICON resources](#)

["The Myth of Invisible Men': Safeguarding children under 1 from non-accidental injury caused by male carers" \(Child Safeguarding Practice Review Panel\)](#)

## 06. Reviewing Practice

- Remember bruises/marks/injuries may be an indicator of child abuse regardless of whether there is an explanation about how they occurred. When accidents and injuries are reported, practitioners should not only consider neglect through lack of supervision, but also the possibility of physical harm.
- Bruises/marks/injuries must never be interpreted in isolation and must always be assessed in the context of medical and social history, developmental stage and explanation given. There must be a full clinical examination / relevant investigation.
- Use professional curiosity and be prepared to "think the unthinkable".
- Work openly and honestly with the parents/carers. Inform them that you are required to contact Children's Social Care to share the information you have obtained, and a decision will be made about what next steps should be taken.
- Always share and triangulate information about the bruise/mark/injury with lead practitioners who are currently working with the family, regardless of parental explanation. Document all information sharing in the child's records.

## 02. Background

It is nationally recognised that the younger the child the greater the risk that bruising, marks or injuries are non-accidental and the greater the potential risk.



## 03. Children where risk of non-accidental injury is increased

**Pre-Mobile Baby:** a baby who is not yet rolling, crawling, bottom shuffling, pulling to stand, cruising or walking independently. This includes all babies under the age of six months and most infants aged 0-1 years.

**Non-Independently Mobile Child:** older children who are not independently mobile by reason of a disability. Children with a disability who are in a wheelchair can be viewed as independently mobile and there could be a consistent plausible explanation for accidental bruising, marks, or injury. However, disabled children may have a higher incidence of abuse whether or not they are mobile.

## 04. Potential indicators of non-accidental injury

- Parent/carer delay in seeking medical advice
- Bruise/mark/injury found incidentally during another contact or appointment
- Inadequate or unlikely explanation for bruise/mark/injury
- Explanation is inconsistent with the child's development stage or explanation is inconsistent over time or confused
- Repeated episodes of presenting with bruises/marks/injuries

## 05. Role of practitioners

It is the responsibility of the practitioner first observing the bruise/mark/injury to conduct an assessment in line with the multi-agency procedure and [notify/refer as appropriate to Children's Social Care](#). If the practitioner does not feel competent to undertake the assessment, they should seek advice from senior colleagues, agency safeguarding leads and/or Children's Social Care. If practitioners are not satisfied with the assessment outcome and parental response and the bruise/mark/injury, no matter how small, continues to raise suspicion and concern, an immediate contact with Children's Social Care is required to discuss the information recorded and to determine if further action is required. This should include agreement on feedback to the family/carers.