

Management of Bruises, Bites and Suspicious or Unexplained Marks on Children

Presentation

Bruising which suggests the possibility of Non Accidental Injury include:

- bruising in babies (in arms).
- bruising in children who are not independently mobile (including disabled)
- bruises that are seen away from bony prominences
- bruises around mouth & cheeks, back, abdomen, upper arms, buttocks & ear lobes.
- multiple bruises in clusters
- multiple bruises of uniform shape
- bruises that carry an imprint – of an implement or cord
- bruises with *petechiae* (dots of blood under the skin) around them

Making an 'Assessment'

A mark/bruise/bite should never be interpreted in isolation and must always be assessed in the context of the child's medical and social history, developmental stage and explanation given. Where there is concern that it may be suspicious professionals are advised not to make their own assessment but to seek a child protection medical via Children's Social Care

Pre-mobile babies/immobile children

It is recommended that in all cases of bruising/suspicious marks in pre-mobile infants/immobile children and all those under six months you:

- advise carers of your concerns (you can show this flowchart to explain the actions that you must take)

Then Refer to Children's Social Care

(research has shown a small bruise on a pre mobile baby can be a sign of abuse)

Be alert to single precursor bruises on the face.

It is recommended that in all cases of bruising in pre-cruising infants that you:

- advise carers of your concerns
- refer to Children's Social care

Mobile children

(Be alert to multiple or large facial bruising)

Does history fit the bruising? -YES

Record assessment (as per box above) If no concerns emerge, take no further action. If Neglect issues - Use Graded Care Profile and refer.

Does history fit the bruising? - NO

- advise parent/carer of your concern and refer to Children's Social Care
- if parent/carer is not present do not contact but refer to Children's Social Care and ascertain the action plan.

Contact your safeguarding lead if in doubt but do not delay if you are unable to make immediate contact

Referral to Childrens Social Care Rapid Intervention & Assessment Team - 01582 547653 Out of Hours - 0300 3008123

- clearly state your concerns
- give your contact details and Parent/Carer contact telephone numbers.
- check plan of action by reflecting back

The expectation is that Social Worker will arrange a child protection medical with Paediatrician.

Bruising in non-mobile children requires urgent assessment, as it can lead to more serious injury and in some instances results in child death.

In light of research, guidance & learning from serious case review an unexplained bruise/mark/bite must be assessed by a paediatrician. **Do not refer to a GP.**

Advise your Safeguarding lead of your actions.

Follow up referral in writing and email to: initialassessment@luton.gov.uk.cjism.net

Document all information in your agency records/system with body maps.

Social worker will liaise with the parent/carer to ensure an urgent child protection medical is undertaken.