

**Q: All of this is very upsetting. I feel as though I am being accused of hurting my child. Why do I have to be put through this?**

A: We know this can be very upsetting, but the only way of picking up serious causes of bruising is to investigate every case where it occurs. However, you can be reassured that you will be treated with courtesy and sensitivity, and your explanations will be listened to and discussed with you. You will also be kept informed at all times, so that you know what is going on and why. You can ask questions at any time and will be given the opportunity to discuss your concerns fully at every stage.

If your baby is admitted to the John Radcliffe or Horton hospitals you will receive support from a member of the hospital safeguarding team. The hospital safeguarding team can be contacted for support on 01865 223196.



[oscb@oxfordshire.gov.uk](mailto:oscb@oxfordshire.gov.uk)  
[www.oscb.org.uk](http://www.oscb.org.uk)



## WHAT'S GOING ON?

Information for parents and carers about bruising to pre-mobile babies and children

You have been given this leaflet because someone who supports you or your child has come across a bruise on your baby or child, who is pre-mobile, or not yet independently mobile. Pre-mobile children are those who are not yet crawling, cruising or walking independently, or are older children who are not mobile because of a disability.

Any professional who comes across bruising in a child who is not independently mobile, or is pre-mobile is required to refer the child to a specialist child doctor (Paediatrician), and to Children's Social Care, who will work with the Paediatrician to decide what further steps, if any, need to be taken.

This leaflet explains why these referrals are necessary.

**Q: Why is bruising in immobile children such a concern?**

A: It is rare for children who are not able to move around by themselves to have a bruise. Day to day activities such as feeding, nappy changing and normal handling do not cause bruising. Even where babies fall or get knocked it is unusual for them to bruise (unlike children who are crawling or walking who may get bruises), so the minority of bruises in pre-mobile children are due to accidents. A bruise can be a sign of a health condition, a blood disease or an infection. This means it is important that a Paediatrician looks at your child and discusses with you why there might be a bruise. Very occasionally, bruising may be due to deliberate injury. Even where there is an apparent simple explanation, it is important to rule out these more serious conditions. It also sometimes takes an expert to tell the difference between a bruise and certain type of birthmark.

**Q: I understand the reason for seeing a child specialist but why do I need to be referred to Children's Social Care?**

A: Although rare, bruising is occasionally caused by deliberate injury. It is important that where this occurs, it is picked up as soon as possible, in order to support the family and protect the child and any siblings. Referral to Children's Social Care is not an accusation of wrongdoing, but a way of looking for causes of bruising in the same way that the doctor looks for illness.

**Q: What will happen next?**

A: Either a health professional, or a member of Children's Social Care, will contact you to talk to you about your child and what will happen next. Arrangements will be made to have an appointment as soon as possible, and preferably straight away, with a Paediatrician. The Paediatrician will talk to you about your child, examine your child fully and decide whether or not to do further investigations such as blood tests or x-rays and decide whether your child needs any further treatment. It may be necessary to admit your child to hospital in order to complete this assessment. The Paediatrician will then talk to Children's Social Care.

**Q: What will Children's Social Care and the health specialist do?**

A: Children's Social Care and the health professionals will check whether you have received services from them in the past, ask for information from your GP and your Health Visitor and will make arrangements to speak to you either by phone or in person. This may be at the same time as your attendance with the Paediatrician or at a separate appointment and they may want to visit you at home. They will then discuss their findings with the Paediatrician who examined your child to decide together whether any further action needs to be taken or any treatment given.

