

7-Minute Briefing

Updated multi-agency 'Injury to Non-Mobile Child' Protocol

1. Background

The Injury to Non-Mobile Child (INMC) Protocol has been updated. The protocol applies to all staff within the Dumfries & Galloway multi-agency partnership including Police, Health, Social Work (SW), Housing, Education and Third Sector.

For the full updated INMC protocol please follow this [link](#): Health staff can also find the protocol on Beacon.

The INMC parent/carer leaflet has also been updated and is found in Appendix 3 of the protocol.

There is additional guidance in Appendix 4 for Emergency Department (ED) staff to follow when children under the age of 1 year present to the ED with an injury.

7. Contact details and staff support

Consultant Paediatrician: Tel DGRI –01387-246246 and ask switchboard for the on call Consultant Paediatrician, available 24/7

SW Single Access Point (SAP): Monday-Friday 9-5pm, Tel: 030 33 33 3001 and Out of Hours, Tel: 01387 273660.

Seek guidance from your own agency's CP lead as required but do not unduly delay referring. Update records and single and multi-agency (MA) chronologies.

Consider multi-agency INMC training (see MA training calendar [Here](#)).

6. Birth marks

If there is any query as to whether a mark is a birth mark, practitioners should follow the birth mark pathway found in Appendix 1 of the INMC protocol.

5. Information sharing and interim safety

Following any Forensic Medical Examination the **Consultant Paediatrician/Forensic Medical Examiner should provide Social Work and Police with an initial written summary** to confirm the initial findings and to reduce the risk of misinterpretation between professionals.

Any interim safety plan should remain in place until essential medical tests and investigations are complete

2. Definition of non-mobile:

Babies who are not yet crawling, bottom shuffling, pulling to stand, cruising or walking independently are deemed to be non-mobile. Babies who can roll are also classed as non-mobile.

This protocol also applies to non-mobile children of any age with impaired or reduced mobility due to disability or illness.

3. Why it matters

Findings from Learning Reviews across the UK have shown that when babies and/or non-mobile children have died or been seriously injured due to non accidental injury there was sometimes a history of seemingly minor injuries and/or marks occasionally with multiple presentations to practitioners with what appeared to be plausible, minor injuries.

A small bruise or mark may be the only outward sign of more significant internal injuries.

It is therefore vital that the INMC protocol is followed on every occasion when a mark or injury is seen and that all babies and non-mobile children are reviewed promptly by an appropriate medical professional. An Interagency Referral Discussion must be held.

Any practitioner who becomes aware of an INMC should adhere to the INMC protocol (Appendix 1).

- If you are concerned that a child has been seriously harmed, **call 999**
- The "Best Evidence Safeguarding Tool" (Appendix 2) can help inform assessment
- Contact the on-call Consultant Paediatrician at Dumfries and Galloway Infirmary (DGRI) to discuss arrangements for a medical review
- Submit a child protection referral to SW Telephone SW by calling the Single Access Point (SAP) and follow up with a written Request for Assistance Form, adhering to local child protection processes
- **SW and the referrer must consider immediate safety e.g. the need for any chaperone during travel to hospital, mode of travel to hospital and the safety of siblings.**
- Parents/carers should be given the updated INMC leaflet
- Out with working hours, SW will coordinate a MA meeting to agree an interim safety plan