



Learning & Improvement Briefing 7

No Cruising – No Bruising!

Babies don't bruise, break or bleed

June 2015

In response to the recent publication of a [Serious Case Review carried out by Telford & Wrekin Safeguarding Children's Board \(Child B\)](#), SSCB have issued this Learning & Improvement briefing to remind practitioner's to be alert to the vulnerabilities of non-mobile infants and how to respond appropriately to physical injuries on a baby.

Bruising, or what is believed to be bruising, in any pre mobile (not independently mobile) baby/child should prompt an immediate referral to Children's Social Care. There is substantial and well-founded research based on the significance of bruising in children

Pre-mobile baby - A baby who is not yet crawling, bottom shuffling, pulling to stand, cruising or walking independently. This includes all babies under the age of 12 months.

Bruising - Bruises are bluish or purple-coloured patches that appear on the skin when tiny blood vessels, called capillaries, break or burst underneath. The blood from the capillaries leaks into the soft tissue under the skin, causing the discoloration and overtime this fades. It is almost impossible for a non-medical practitioner to age a bruise.

Bruising is the commonest presenting feature of physical abuse in children.

- Bruising is strongly related to mobility.
- Bruising in a baby who is not yet crawling, and therefore has no independent mobility, is very unusual.
- Only one in five infants who are starting to walk by holding on to the furniture has bruises.
- Most children who are able to walk independently have bruises.
- Bruises usually happen when children fall over or bump into objects in their way.
- Bruising in any child 'not independently mobile' should prompt suspicion of maltreatment.
- Non accidental head injury or fractures can occur without bruises.

It is recognised that a small percentage of bruising in pre-mobile babies will have an innocent explanation (including medical causes). Nevertheless, because of the difficulty in excluding non-accidental injury, think about

- The child's age and developmental stages.
- The explanation of the bruise may be inconsistent, vague or not compatible with the injury or there may be no explanation at all.
- There may be a delay in seeking medical help or no help at all.
- Older children who are not independently mobile by reason of a disability.

Remember - A bruise in a pre-mobile child should never be interpreted in isolation and should always be assessed in the context of medical and social history, developmental stage, explanation given and referred for a medical examination.



Response

The presence of any bruising in pre-mobile babies of any size, in any site, should initiate a referral to Children's Social Care so that a detailed examination, enquiry into its explanation, origin, characteristics and history will then take place.

You must:

- Document the explanation of the bruise.
- Log all injuries on a body map.
- Be open and honest with the parents about your concerns unless you are concerned that the child may be at further risk.
- Advise the parents of the need to make a referral to Children's Social Care with a view to an examination by a paediatrician.
- Record all discussions, decisions and actions and confirm referral in writing to Children's Social Care within 48 hrs.
- Refer any child that is found to be seriously ill or injured, or in need of urgent treatment or further investigation, should be referred immediately to hospital.

For further information, please access the on-line child protection procedures:

[http://westmerciaconsortium.proceduresonline.com/pdfs/bruising_pr_assess_health_practit.pdf#search="non-mobile babies"](http://westmerciaconsortium.proceduresonline.com/pdfs/bruising_pr_assess_health_practit.pdf#search=)