

### OPERATIONAL PLAN STANDARD 13 – CHILD PROTECTION Supporting Documentation S13.5 Safeguarding Children: Non Independently Mobile Children

Safeguarding children is always at the foremost of everything we do at Kaleidoscope Nursery. In addition to the safeguarding practices that have been embedded into our practice, we are also committed to raising the profile of Non Independently Mobile children. This policy explains the need for vigilance and seeks to answer the questions surrounding this area.

Staff must be vigilant for NIM children within the Ladybirds Room. NIM children are those that are not yet crawling, cruising or walking independently. Older children in the Dragonflies or either of the Pre-School who are not mobile because of a disability also fall under the bracket of being a NIM child. Staff must refer any bruising to any NIM children immediately to the management. The Kaleidoscope Management Team are then required to refer the child to a paediatrician and to the Children's Services Department who will work together to decide what further steps, if any, will need to be taken.

It is the role of the Management Team to handle this referral and explain to parents and carers of referred children, what is happening and why. It should be remembered by all concerned that bruising to NIM children may be a medical condition or deliberate intent. Either is a concern, which is why we will make an immediate referral.

## Q: Why is bruising in NIM children such a concern?

**A:** It is difficult to cause bruising in NIM children with day-to-day activities such as feeding, nappy changing and normal handling. Even where babies fall or get knocked it is unusual for them to bruise (unlike children who are crawling or walking who often get bruises). However, there are also some important causes of bruising which may seriously affect the child's health. The child may bruise easily, for example, due to a blood disease or an infection. 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 types of birthmark.

# Q: Why do NIM children with a bruise need to see a specialist children's doctor (paediatrician)?

**A:** It is rare for children who are not able to move around by themselves to have a bruise. A bruise can be a sign of an underlying health condition, a blood disease or an infection. This means it is important that health advisors ask a specialist children's doctor to look at the child and to discuss with their parent/guardian why they think the bruise might be there.

# Q: It seems self explanatory for a child who presents with bruising to see a paediatrician but why do they need to be referred to the Children's Services Department?

**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 to protect the child. Referral to the Children's Services Department is not an accusation of wrongdoing, but is a way of looking for the causes of bruising in the same way that the doctor looks for illnesses. Even where the bruising is due to falls and knocks, families may benefit from advice on accident prevention and home safety.

#### EVERY CHILD MATTERS



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## Q: What will the doctor do?

**A:** The paediatrician will make arrangements for the family to have an appointment with a child health specialist as soon as possible, and preferably straight away. This may mean attending their nearest hospital or community health clinic. The paediatrician will talk to the family about their child, examine their child fully and decide whether or not to do further investigations such as blood tests or x-rays. After this the paediatrician will explain to the family what they think has caused the bruising. They will also discuss this with the Children's Services Department.

### **Cross-Reference to Other Policies:**

In order to complete our commitment to Safeguarding, this policy runs alongside the policies and procedures, as set out below:

S1.1
S1.2
S1.3
S1.15
S13.1
S13.4
S13.6