

01 Background

Through review of cases of children under 18 months who sustained serious injuries that requires hospital assessment it has been identified that the arrangements for supervision of parents in a hospital setting was not always clear or consistent.

Whilst it is always preferable for a child to have a parent or carer with them in hospital this must be considered alongside the possibility that the presenting injury was caused by the parent or carer and leaving them to care for that child may put them at risk of further harm or emotional trauma.

Safeguarding Concerns

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On initial presentation of a child who has sustained an injury a definitive diagnosis of the cause of the injuries may take some time to establish due to investigations required. Part of a differential diagnosis may be the injuries are Non-Accidental (NAI) and until established otherwise the child requires protection. In some cases the exact cause remains unclear even after investigations are complete.

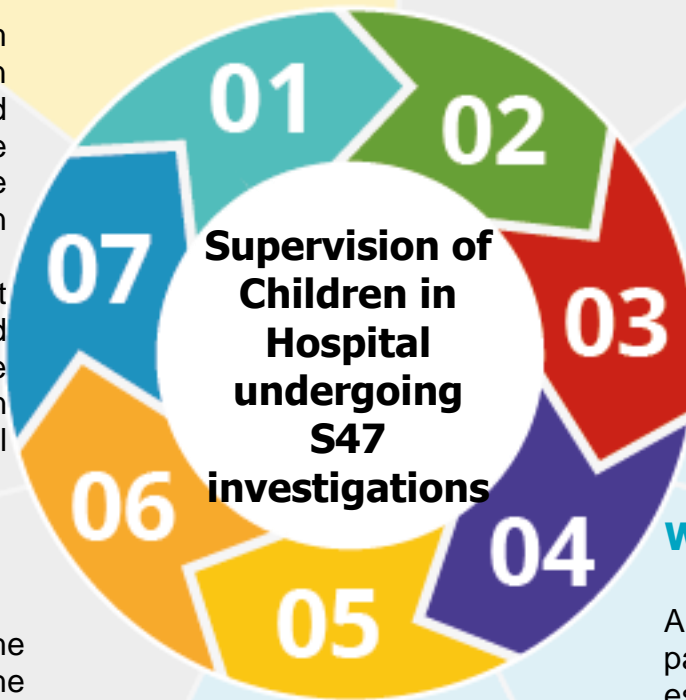
07 Implementing Change

As part of the Oldham Safeguarding Children Partnership learning and improvement will undertake a review to check the learning has been embedded

If concerns are raised that this process is not followed please refer to the escalation and resolution policy for professional challenge.

Management 03

On referral to Children's Social Care that there are concerns of NAI a Strategy meeting must be convened to establish if there is a likely child protection concern and ensure interim safeguarding measures are put in place to protect the child and any siblings from further harm.



Recommendations

- Review the findings of the briefing and ensure the discussions are included in
- All agencies work to Working Together to Safeguard Children (2018).
- Strategy meetings to be held on day of admission NOT after all tests completed.
- A further strategy meeting can be arranged following completion of tests and investigations.

Who cares for the child if remaining in hospital?

Arrangement for supervision of parent/carer contact must be established if they are identified as potentially harming the child.

- Who is going to meet the care needs of the child whilst in hospital if carers can only have supervised contact?
- What care does the child need?
- Can another family member/friend excluded from the investigation do that?

All children are cared for by medical, nursing and other hospital staff whether a parent is present or not.

The Strategy Meeting

Key focus and part of the action plan must include:

- Sharing of information
- Identify Interim safeguarding measures to protect the child from any likely perpetrator and prevent risk of further harm
- Alternative carer or appropriate supervisor for parent while child is in hospital

This must be agreed in the strategy meeting

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