

Case Summary

- Five year old child attended an Urgent Care Centre (UCC) setting with a head injury/facial injury. Mother stated that the injuries occurred as a result of 'fun fighting'. Child's presentation led to a request for a medical opinion; mother declined to stay, became aggressive and left the department against medical advice.
- Professionals were concerned regarding mother's behaviour and the child's health needs and contacted Children's Services. Information was shared that there was no history of child protection concerns and no role for Children's Services.
- UCC professional continued to be concerned and requested mother to bring the child to hospital for review. A taxi was sent in the evening to take them both to the Emergency Department (ED) at a local hospital. Update provided after the incident to the Safeguarding Children Nurse who escalated concerns to Children's Social Care.
- The child's mother advised professionals in ED that the child had fallen down three stairs at home whilst chasing their sibling.
- It was noted the child appeared to be looking down and was very withdrawn and had multiple cuts and bruises that were not consistent with the presenting complaint and history of injury. The nurse escalated her concerns and contacted the UCC professional who shared their concerns about the injuries. The child was seen by a doctor who was concerned about the explanation provided by mother and a referral was submitted to EDT and escalated to a Paediatric Consultant.
- EDT agreed to investigate the wider family relationships. Information shared that mothers' partner had recently admitted to drug use and mental ill health. EDT liaised with Police and consulted with the Doctor and the child was discharged home to his mother's care.
- Professionals were advised a welfare visit would be completed that evening and the medical plan would be that the child was to return to the hospital the next day for further investigations.
- A home visit was completed by EDT that night. The child was reported to be asleep and was not seen by professionals during the visit.
- The medical team were concerned about the changing explanations and injuries and concluded that a NAI could not be ruled out and the decision to discharge was not a multi-agency decision and escalated concerns the next day to the safeguarding children team
- Child attended hospital the following day for further investigations and a strategy discussion was subsequently held, and the child was placed outside the care of their mother.

Areas of Good Practice

- Recognition by UCC of the concerns and the need to refer.
- Recognition by nursing staff and the medical team of the concerns and need to escalate.

What are the issues?

- Communication impacted on decision making and adherence with the child protection procedures.
- Non-adherence with safeguarding children policies both internal and across the partnership.
- Ineffective challenge and escalation.

What have we learnt?

- The impact of ineffective Information sharing re safeguarding children and when agencies are working together
- The need to ensure effective multi-agency decision making when discharging vulnerable children from hospital.
- The need to keep the child in focus is crucial when working together.
- The impact of ineffective challenge and escalation by agencies across the partnership

What will help us to do things differently?

Tools & Practice

- [Child Protection Procedures](#)
- [Threshold Guidance](#)
- [Signs of Safety](#)
- [Harm Matrix](#)
- [Managing Professional Differences](#)

7-minute briefings

- [7-minute-briefing-Harm-Matrix.](#)
- [7-minute-briefing Strategy-Meetings.](#)
- [Information Sharing](#)

How will we know the impact?

- Our staff tell us that they feel confident in understanding the processes
- Our staff tell us that they receive advice and support
- Our staff tell us that they feel able to challenge in their own agencies and in the partnership
- Our staff tell us that they feel confident in using the tools provided
- Our staff tell us that they feel confident in sharing their views
- Our staff tell us that they feel that their views are responded to in order to effect change for children and their families