NON-MOBILE BABY POLICY

1. POLICY STATEMENT

This policy aims to safeguard non-mobile babies and other children with limited mobility (e.g. due to a disability) by implementing clear procedures for responding to any observed bruising or injuries. It follows guidance arising from Serious Case Reviews, which confirm that **accidental bruising in non-mobile infants is rare** and therefore must be treated as a potential safeguarding concern until proven otherwise.

At The Orchard Nursery, we are committed to following robust procedures to ensure the safety and wellbeing of all children and to comply with the requirements of our Local Safeguarding Children Partnership (LSCP) and Children's First Response.

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2. DEFINITIONS

- **Mobile child**: A baby or child who is crawling, pulling to stand, cruising along furniture, toddling, or walking.
- **Non-mobile child**: A baby or child who cannot yet crawl, pull to stand, or walk. *For the purpose of this policy, babies who can roll are still considered non-mobile.*

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3. RATIONALE AND CONTEXT

Research and national guidance highlight the following findings:

- **Bruising in non-mobile infants is very rare** — occurring in fewer than 1% of cases.
- **Accidental bruising** occurs in approximately 17% of babies who are "cruising".
- **Non-accidental injuries (NAIs)** such as fractures, burns, or head trauma may present with seemingly minor bruises first.
- **Abusive Head Trauma (AHT)** — formerly known as "Shaken Baby Syndrome" — is a leading cause of death and disability in infants, with a high fatality and long-term disability rate.
- **Infants under 1 year** are statistically more at risk of being killed by another person (usually a carer) than any other child age group in England and Wales.
- Any bleeding from the **nose or mouth (oronasal bleeding)** in a non-mobile infant requires urgent investigation.

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4. SAFEGUARDING PRINCIPLES

- All **unexplained injuries** in non-mobile infants must be treated with the highest level of concern and **reported immediately**.
- We follow the guidance and referral process laid out by our **LSCP and Children's First Response Team**.

- We understand the importance of **multi-agency information sharing** to make informed decisions regarding a child's welfare.

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5. PROCEDURE

A. IF A CHILD ARRIVES AT NURSERY WITH A VISIBLE MARK, BRUISE OR INJURY:

1. A **Pre-existing Injury Form** must be completed.
2. The injury and any explanation provided by the parent/carer must be **clearly documented**, with body diagrams used where appropriate. A clear description of the injury, size, colour shape must be made on the form.
3. The form must be signed and dated by:
    - The staff member recording the injury
    - The parent/carer
4. The form must be stored securely in the child's file, and added to CPOMS.

Note: For non-mobile babies, any bruising or unexplained mark will be treated as a safeguarding concern. **A referral to MASH** may be required in line with local guidance.

B. IF AN INJURY OCCURS WHILE THE CHILD IS IN NURSERY CARE:

1. Complete an **Incident or Accident Report Form** immediately after the event.
2. Record the following:
    - Child's full name and date of birth
    - Date and time of incident
    - Names of all witnesses
    - A detailed description of what occurred
    - Type and location of injury, size, colour and shape.
    - First aid administered
    - Whether parents were advised to seek further medical help (mandatory for head injuries)
    - Whether a referral was made to another agency
    - Signature of the staff member completing the report
    - Signature of the parent/carer on collection
3. Inform the **Designated Safeguarding Lead (DSL)** or Manager immediately.
4. Follow safeguarding protocols, including **making a referral to MASH** if concerns persist.

C. ONGOING CONCERNS OR RECURRENT INJURIES:

- In cases where **recurrent minor injuries** are being caused by another child (e.g. a toddler being overly rough), a **review of risk assessments** must be carried out.

- Steps should be taken to manage group dynamics, staff deployment, and supervision.
- Parents must be informed and reassured of the actions being taken.

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6. RELATED POLICIES

- Safeguarding & Child Protection Policy
- Accident & Incident Reporting Procedure
- Positive Behaviour Management Policy
- Risk Assessment Policy

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7. KEY SAFEGUARDING MESSAGE

Non-mobile babies cannot cause injuries to themselves. Any bruising or mark on a non-mobile baby must be treated as a potential safeguarding concern.

Signed on behalf of the nursery.....Emma Middleton.....Date:… August 2026