

Amendment to process following presentation of non-mobile baby with injuries to GP

This process is to be followed in conjunction with [Bradford, Calderdale, Kirklees and Wakefield Safeguarding Children Partnerships Assessment of non-mobile babies with injuries, including bruises, burns and scalds](#)

Current West Yorkshire protocol for assessment of non-mobile babies with injuries including bruises, burns and scalds, is that Children's Social Care Multi Agency Screening Team (MAST) is first point of contact. However, an amendment to the process has been agreed by Calderdale MAST, CHFT and WY NHS ICB Calderdale Cares Partnership in order to prevent delay in arrangement for the presenting baby to access acute medical assessment and care.

Non-mobile baby presents to GP Practice with suspected non-accidental injury (NAI)



GP / Practitioner contacts **Consultant** Paediatrician on call at CHFT via telephone 01422 357171 (ask for Paediatric Consultant on call) to share concerns and arrange for urgent medical assessment to be undertaken.

Consultant Paediatrician on call to advise GP where baby should be taken to for urgent medical assessment by paediatrician. (i.e Paediatric Assessment Unit or Emergency Department if requires stabilisation).



GP / Practitioner informs accompanying parent / care giver / significant other that due to nature of injuries, referral to children's social care required – consent requested for referral, however, consent to be over-ridden if not obtained.

GP / Practitioner contacts Calderdale Multi Agency Screening Team (MAST) via telephone (01422 39336) to make a verbal referral regarding concerns and inform that arrangements have been made for urgent medical assessment of baby. Wherever possible a member of Children's Social Care staff should attend the examination.

GP / Practitioner and MAST agree interim safety plan in respect of ensuring baby transported to hospital for medical assessment mitigating any risk of further harm.

NB If GP / Practitioner is concerned that level of risk to child will increase by informing parent / care giver / significant other of referral to MAST, they should discuss this with Children's Social Care at the time of referral, before speaking with the parent, in order to obtain advice.



GP / Practitioner to document within health records that a referral to Paediatrician and MAST has been made due to concern regarding potential non-accidental injury.

GP's using SystmOne electronic records must document this clearly on the Safeguarding Node.
GP's using EMIS electronic records must document this clearly in the relevant area on the safeguarding template.

GP / Practitioner to follow up verbal referral to MAST with a written referral within 24 hours



Continue to follow process as outlined in [Bradford, Calderdale, Kirklees and Wakefield Safeguarding Children Partnerships Assessment of non-mobile babies with injuries, including bruises, burns and scalds](#)