



Non-Accidental Injury (NAI)

Summary

This should be read in conjunction with local hospital specific guidelines. It is aimed to give a broad view of safeguarding issues facing the trauma network. It is aimed to give an idea of staff roles and responsibilities regarding safeguarding children. All Health professionals working with children should ensure that safeguarding and promoting their welfare forms part of the integral part of practice.

Introduction

It is important when dealing with any child to have an awareness of non-accidental injury. There can be clues in the history; an unexplained delay in presentation, injury incompatible with history or a change in the story over time for example.

Occasionally the appearance of the child can be cause for concern or the child may disclose physical abuse if given the opportunity.

Guidelines

The network has agreed basic principles to be applied in these cases.

- The welfare of the child is paramount at all times
- Effective co-operation between agencies and professionals
- Sensitivity between agencies and professionals and carers
- Information sharing in the best interests of the patient
- Taking the opinions and the voice of the child into consideration

Safeguarding is defined as :

- Protecting children from maltreatment
- Preventing impairment of the child's health and development
- Ensure children grow up in a safe and effective environment in order for them to develop optimally

A child is defined by the Children's Act (1989, 2004) as anyone who has not reached their 18th birthday and includes the unborn.

Categories of Abuse

Abuse may be physical (hitting, shaking, throwing, poisoning, burning, scalding), Emotional, Sexual or Neglect.

Responsibilities across the Network

All healthcare professionals have a responsibility to be alert for safeguarding related issues.

The Network Clinical Director is responsible for ensuring that the network has raised awareness of safeguarding and that all Network partners have a Safeguarding policy in place for Children.

Individual Network Hospitals must have a local safeguarding policy specific to them and their region.

The pre-hospital services must have a Safeguarding Children Policy.

Concerns about abuse

Any member of staff may raise concerns regarding safeguarding. It will need to be established whether the child is at immediate risk or not. Local policies for progressing these concerns will then be invoked.

During the examination, certain injuries should raise suspicion, rib fractures in an infant, long bone fractures in a non-mobile child, or metaphyseal or epiphyseal injuries, which are often multiple. Sometimes suspicion is only raised following imaging, when old fractures are identified or there is evidence of healing.

Non-accidental injuries must be considered, but it is important to put all the factors together carefully to avoid any unnecessary distress for the family with an inappropriate accusation. However, if there are concerns, it is vital that they are explored, to ensure the well-being and safety of the child that is being treated, and any siblings still at home.