

1. Background and Concerns

A line of sight meeting was held in relation to a young baby who was taken to hospital following a nosebleed which occurred during breast feeding.

Learning identified within the review included infant feeding techniques, the multi-agency response to infants who present with possible bruising and/or injuries, perinatal mental health, professional curiosity, and the role of fathers/partners.

2. Purpose of the Review?

To explore the multi-agency response given to both mother and baby and consider whether this was proportionate, and responsive to their needs, which includes the triangulation of information from safeguarding agencies. There was consideration given to the effectiveness of ensuring their safety and wellbeing and the co-ordination of responses.

3. Key Lines of Enquiry

- Was the multi-agency response proportionate to baby's needs?
- Where there any opportunities for earlier intervention?
- Was information gathering and sharing robust and effective?
- Where mother's needs identified and responded to effectively?



7. Further information – links

- HSCP Bruising and injury to non-mobile babies- available on TriX- [injury-bruising-non-mobile-infants.pdf \(trixonline.co.uk\)](#)
- HSCP escalation and resolution policy- available on TriX- [Escalation and Resolution - Professional Resolutions... \(trixonline.co.uk\)](#)
- Breast feeding information- [Home – Family Hubs \(familyhubshull.org.uk\)](#)
- [Perinatal Mental Health Team \(humber.nhs.uk\)](#)
- HSCP pre-birth pathway policy - [unborn-pre-birth-pathway.pdf \(trixonline.co.uk\)](#)
- [The Myth of Invisible Men \(publishing.service.gov.uk\)](#)
- [Postpartum psychosis - Mind](#)
- Making contact Referrals to EHASH [Contacts and Referrals with Children's Social Care \(proceduresonline.com\)](#)
- National Panel briefing paper (2022) [Bruising in non-mobile infants \(publishing.service.gov.uk\)](#)
- [Training courses – Hull Collaborative Partnership](#)
- [unborn-pre-birth-pathway.pdf \(trixonline.co.uk\)](#)
- [Home – Family Hubs \(familyhubshull.org.uk\)](#)
- 0-19 infant feeding team- 01482 259600 (advice and training)
- [Breastfeeding in the UK - Baby Friendly Initiative \(unicef.org.uk\)](#)
- [Every Mum Matters - Home](#)

6. Next Steps

- This 7-minute guide will be shared across the partnership to compliment discussions, training and learning in relation to the updated HSCP Bruising and Injury to Non-mobile Infants Policy and Guidance.
- Training to support practitioners with key learning points is available through the HSCP Learning offer (detailed above).
- There will be training opportunities across the partnership in relation to post-partum psychosis across and bruising and injuries to non-mobile infants in 2024. The theme for Child Safeguarding Week 2024 is the vulnerability of babies- daily webinars will run throughout the week for partners to join.
- All key safeguarding agencies to share learning across their own organisation.

4. Key Learning

Information Sharing- the review highlighted that multi-agency information gathering from various sources is crucial and must be triangulated across partners to ensure that risks are fully understood and information is shared.

EHASH Referrals- The review highlighted that timely referrals to the Early Help and Safeguarding Hub is crucial. Professionals should follow their internal safeguarding procedures, including liaising with their organisations safeguarding teams. Early identification of support is key for ensuring the safety and wellbeing of children.

Escalation and resolution- It is vital that professionals draw upon varying sources to gather information and not rely on the information provided from one agency. Professionals should utilise the HSCP escalation and resolution policy to constructively challenge decision making.

Bruising and Injury to non-mobile infants - Any non-mobile infant who presents with bruising and or injury (including nosebleeds) should be investigated further at the time. Recommendations from the National Panel briefing paper (2022) states that particular attention should be given to those children who are unable to roll over where bruising and/or injury is observed. In these circumstances a referral should be made to EHASH in order to convene a strategy discussion safeguard the child. Partners should refer to the revised HSCP bruising and injury to non- mobile infants' policy and pathway.

Professional curiosity- Professional curiosity should always be exercised, the review highlighted that additional exploration was required to understand infant feeding techniques used which does not align with best practice guidance.

The role of men/partners- 'the involvement of prospective and new fathers in a child's life is important for maximising the life- long wellbeing and outcomes of the child regardless of whether the father is resident or not' (National Service Framework, 2004). It is important that all agencies fully consider the role of fathers even if the parents are not living together and where possible involve them and gather their views. This is inclusive of partners who may not be the biological parent. This allows for a great understanding of family functioning including the consideration of any strengths and risks.

Post-partum psychosis- All practitioners need to have an understanding about post-partum psychosis in order to ensure an appropriate support is in place for children and families. Training and learning opportunities about post-partum psychosis will be delivered across the partnership.

5. Good Practice

- The EDT worker was professionally curious and queried postpartum psychosis as a possibility which allowed for a coordinated response by all partners.
- When information was shared between agencies the escalation worked well with the inclusion of all agencies.
- Individual agencies have undertaken internal reviews of their own services to promote best practice and outcomes.
- When mother was presented at hospital due to mental health concerns, both mother and baby had an assessment via adults and paediatrics. There was a rapid response in mother having a mental health assessment.
- Children's social care (CSC) quickly identified a placement for baby within their wider family and there were ongoing joint considerations from CSC and the mental health team to ensure the safe reintegration of mother and baby.
- When mother had contacted 111 good advice and reassurance was given to mother by the emergency responder around concerns for the child's health.