

# Best Evidence Safeguarding Tool

University Hospitals Bristol   
NHS Foundation Trust

Do my parents / carers have any risky behaviours which may impact on how they look after me? Does a social worker know me?

NO DON'T YES  
KNOW

Do my parents / carers comfort and cuddle me? Do I respond to them?

NO DON'T YES  
KNOW

Was I being cared for safely when my accident happened?

NO DON'T YES  
KNOW

## ADDRESSOGRAPH LABEL

Name: .....

Date of Birth: .....

Hospital No: .....

Ward / Hospital: .....

Have you fully undressed and examined me? Am I clean and well cared for?

NO DON'T YES  
KNOW

Was I born prematurely, kept in hospital after birth or a low birth weight?

NO DON'T YES  
KNOW

Have you witnessed / confirmed I am developmentally capable of doing what my parents / carers describe?

NO DON'T YES  
KNOW

If I have a fracture, burn or scald have you excluded these specific injury risks?

NO DON'T YES  
KNOW



Do I have any unexplained marks, bruises, petechiae, even if very small?

NO DON'T YES  
KNOW

Is the history of how I hurt myself clear, consistent and plausible?

NO DON'T YES  
KNOW

Did my parents / carers bring me promptly for treatment and give me first aid?

NO DON'T YES  
KNOW

Name.....

Signature.....

Date.....

# Guidance Notes

Please answer all 10 questions by ticking the corresponding box.  
If your infant patient has any red flags are they safe to be discharged without further assessment?  
Amber flags should also be discussed with a senior colleague and Primary Care Team (GP or HV)

## Indicators or Risky Fracture Presentations:

- Any fracture in a non-mobile infant.
- Metaphyseal fractures of any limb bone
- Rib fracture -'high risk'
- Spiral /oblique humeral fractures
- Multiple fractures / different ages

## Other Risky Infant Presentations:

- No /Unclear /Changing history
- No ante-natal care
- Passive, watchful, fearful infant
- Delay in presentation
- Injury "caused by sibling "
- Lack of supervision at time of injury
- Attachment difficulties with premature / difficult babies
- Not comforted by parent when distressed (passivity)
- Previous Social Services contact
- Persistent DNAs
- Previous apparently plausible" attendances

## Indicators of Risky Bruising Presentations:

- Any bruise in a non-mobile infant (can be a precursor to more serious injury or death)  
*Remember skin pigmentation / ethnicity may mask bruising*
- Bruising to the face, head (eye socket) back, abdomen, hip, upper arms, backs of legs, ears, hands or feet
- Multiple or clusters of bruising
- Severe bruising to the scalp, accompanied by swelling around the eyes and no skull fracture may result from 'scalping'

## Indicators of Risky Burn/Scald Presentations:

- Clear 'tide mark' to limbs or demarcation line
- Bilateral lower limb involvement
- Symmetrical pattern / uniform depth
- Burns to dorsum of hands / soles of feet
- Sparing of the skin folds / centre of buttocks
- Associated injuries
- Evidence of neglect

## Parental Risk Factors:

- Domestic violence
- Mental health issues
- Substance misuse
- Learning difficulties
- Social isolation
- Young parents
- Social deprivation / criminality
- Poor parenting experience / LAC

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