Clinical Standard Operating Procedure (SOP)

CHILD DEATH - IMMEDIATE DECISION MAKING AND NOTIFICATIONS FOLLOWING ALL CHILD DEATHS

SETTING	Children's Emergency Department (CED)/Bristol Royal Hospital for Children (BRHC)
FOR STAFF	Senior staff involved in the child death process
PATIENTS	Children who have died in the community (and have been declared as deceased by a medical practitioner) or who have died in the Children's Emergency Department (CED)

This document is to guide CED and BRHC Site Team staff when a child dies (and is declared dead) in the community or who has come into the Children's Emergency Department and is declared dead in the department after resuscitation.

The processes that have to follow after a child has died are mostly similar if the death has occurred in the community or in the hospital.

1. Notification of a death

The process to inform the Child Death Overview Panel (CDOP) about any child death is through an online portal. You do not need a username and will be prompted to fill in the minimum required information for CDOP. This needs to be done within 24 hours of the death.

You can access this portal using this link [redacted]

2. Joint Agency Response

For any child death you must consider whether a Joint Agency Response (JAR) is needed. The link for the proforma is here: [redacted]

This is a multi-agency response which includes the involvement of the on-call health professional, police investigator +/- duty social worker. The JAR should be triggered if a child's death:

- is or could be due to external causes;
- is sudden and there is no immediately apparent cause (including SUDI/C);
- occurs in custody, or where the child was detained under the Mental Health Act;
- where the initial circumstances raise any suspicions that the death may not have been natural; or
- in the case of a stillbirth where no healthcare professional was in attendance.

If a JAR is deemed not necessary for a specific child death this must be clearly documented in the emergency department notes and on the Immediate Response Proforma. The details of which health care professionals have made this decision is very important as when the case is discussed in the Child Death Review Meeting these professionals will need to be present in order to discuss the case. **Calling the police can be done via 101 and asking for the DS for child death.**

3. Immediate Response Proforma

The immediate Response Proforma should be used in all child death cases. The link for the proforma is here: [redacted]

This form aids the completion of the main decisions needed to be made by health care professionals in the hours immediately following the death of a child.
These include:

- how best to support the family;
- whether the death meets the criteria for a JAR;
- whether a Medical Certificate of Cause of Death (MCCD) can be issued, or whether a referral to the coroner is required; and
- whether the death meets the criteria for an NHS serious incident investigation

4. Referral to the coroner

The majority of unanticipated child deaths are referred to the coroner. You can contact the coroner on [redacted] their normal working hours are Monday to Friday between 7am-4pm. If the case needs to be discussed out of these hours the number to call is [redacted] You need to complete the Coroner's Referral Form – the link to the form is here: [redacted] and send it via secure electronic format (using your trust email) to [redacted]

5. Child Death Emergency Department Checklist

The Child Death Emergency Department Checklist should be used by both the nursing and medical team following the death of a child. The checklist includes key health care professionals that need to be informed on the day of the child's death e.g. GP, Health visitor. If the death is out of hours the individuals need to be informed as soon as possible the next day. The link for the form is here: [redacted]

6. Laboratory Investigations

There is clear guidance on the laboratory investigations required after a child death if a Joint Agency Response is triggered. The family should be informed of the investigations that will be carried out but in a coroner's case their consent is not required. Please remember to take Covid-19 samples.

There are a minimum set of investigations highlighted in the document which you can access from here [redacted]

There is also a separate guideline detailing how to take a skin biopsy. This is within the laboratory investigation crib sheet and the link is here: [redacted]

All samples need to be sent to the laboratory with a chain of evidence form. This can be found on Medway under All Proforma's and search for Paediatric Chain of Evidence. The form needs to be filled our on Medway and then printed and sent with the samples to the laboratory.

Medical photography can be obtained in working hours and the forms can be accessed here [redacted]

7. Medical devices

Some children in the community have medical devices such as Baclofen pumps or ICD's. Please ensure these have been interrogated by the teams familiar with them. Documentation of their working order is essential if a child dies. Some devices will also need to be switched off to avoid further distress for the family when the batteries run out.

8. Additional information

Always remember that the bereavement team can offer support to parents/carers whilst you are dealing with the child's body in the Emergency Department. They can be contacted on [redacted] in hours.

If you require more information there are resources available on the DMS and also more information and resources can be found on the Children's Palliative Care and Bereavement Support Team on [redacted]

Consent form link:
[redacted]

Letter to accompany a parent or carer travelling with a deceased child:
[redacted]

Transfer of care form:
[redacted]

REFERENCES	https://www.gov.uk/government/publications/child-death-review-statutory-and-operational-guidance-england
RELATED DOCUMENTS AND PAGES	The Immediate Response Proforma http://nww.avon.nhs.uk/dms/download.aspx?did=17960 The Joint Agency Response http://nww.avon.nhs.uk/dms/download.aspx?did=17955
AUTHORISING BODY	Child Death Governance
QUERIES AND CONTACT	[redacted]