

**Pan Berkshire
Child Death Overview
Panel**

Terms of Reference

Version 1

Updated and agreed by Pan Berkshire CDOP April 2020

Introduction

In 2008, Child Death Overview Panels (CDOPs) were statutorily established in England under the aegis of Local Safeguarding Children Boards (LSCBs) with the responsibility of reviewing the deaths of all children (0 to <18 years) in their resident population.

In October 2018 new guidance from Government titled 'Child Death Review (CDR) Statutory and Operational Guidance' <https://www.gov.uk/government/publications/child-death-review-statutory-and-operational-guidance-england> set out the key features of a good review process when a child dies, combining both statutory requirements and best practice. The Pan Berkshire CDOP assessed current processes against the new Guidance and put a plan in place to embed the necessary changes. Our formal response to the new Guidance was published on the CDOP website: [New CDOP Arrangements – June 2019](#)

Pan Berkshire CDOP is a sub-group of the Berkshire West Safeguarding Partnership (Reading, West Berkshire and Wokingham in collaboration) and the individual Safeguarding Partnerships (or Boards) of Bracknell Forest, Slough and Windsor & Maidenhead. It is made up of representatives from across the county from a range of organisations, including health, social care and police.

Purpose

These are the terms of reference that apply to the Pan Berkshire Child Death Overview Panel (CDOP).

Through a comprehensive and multidisciplinary review of child deaths, the CDOP aims to better understand how and why children in Berkshire die and use the findings to take action to prevent other deaths and improve the health and safety of children within Berkshire.

In carrying out activities to pursue this purpose, the CDOP will meet the functions set out in *Working Together to Safeguard Children (Chapter 5)* in relation to the death of any children who are residents of the borough.

(a) Collecting and analysing information about each death with a view to identifying:

- Any case giving rise to the need for a serious case review.
- Any matters of concern affecting the safety and welfare of children in the area.

- Any wider public health or safety concerns arising from a particular death or from a pattern of deaths.

(b) Establishing procedures for ensuring a coordinated response to an unexpected child death.

Objectives

Notification and data collection

The Pan Berkshire CDOP will seek to do the following:

- Ensure the accurate identification of and uniform, consistent reporting of the cause and manner of every child death.
- Collect and collate an agreed minimum data set of information on all child deaths in the area, and where relevant, seek additional information from professionals and family members.
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The review by the child death review partners at CDOP is intended to be the final, independent scrutiny of a child's death by professionals with no responsibility for the child during their life. The information gathered using all the standardised templates help child death review partners to identify modifiable factors that could be altered to prevent future deaths.

In addition the review should also provide data to the National Child Mortality Database.

- Make recommendations to the Safeguarding Partnerships and/or other relevant bodies promptly so that action can be taken to prevent future such deaths where possible.

Case level

The CDOP will seek to:

- Evaluate specific cases in depth, and identify any issues of concern or lessons to be learnt.
- Where concerns of a criminal or child protection nature are identified, ensure that the police and coroner are aware and to inform them of any specific new information that may influence their inquiries: to notify the Safeguarding Partnership of those concerns and advise the chair on the need for further enquiries under section 47 of the Children Act or of the need for a serious cases review.

Population level, prevention and advocacy

The CDOP will seek to:

- Evaluate data on the deaths of all children normally resident in the local area, thereby identifying lessons to be learnt or issues of concern, with a particular focus on effective inter-agency working to safeguard and promote the welfare of children.
- Identify significant risk factors and trends in individual child deaths and in overall patterns of deaths in the local authority areas, including relevant environmental, social, health and cultural aspects of each death, and any systemic or structural factors affecting children's well being to ensure a thorough consideration of how such deaths might be prevented in the future.
- Identify any public health issues and consider with the Directors of Public Health, and other professional agencies, on how best to address these and their implications for both the provision of services and for training.
- Identify and advocate for needed changes in legislation, policy and practices to promote child health and safety and to prevent child deaths.
- Increase public awareness and advocacy for the issues that affects the health and safety of children.
- Where a suspicion arises that neglect or abuse may have been a factor in the child's death, refer a case back to the Safeguarding Partnership for consideration of whether an SCR is required and understand the reasons why that decision was taken.

Service improvement

The CDOP will seek to:

- Identify areas of improvement in agency responses to child deaths through monitoring the appropriateness of the response of professionals to each unexpected death of a child.
- Agree local procedures for responding to unexpected deaths of children and receive assurance that they are in place and in line with national regulations.
- Provide relevant information to those professionals involved with the child's family so that they, in turn, can convey this information in a sensitive and timely manner to the family, (for example should the family require genetic testing for consanguinity).
- Identify and inform the Safeguarding Partnership on the resources and areas where training may be required to improve an effective inter-agency response to child deaths.

Scope

The Panel will review all child deaths (of any gestation where there are signs of life as decided by a clinician in accordance with the MBRRACE guidelines: <https://timms.le.ac.uk/signs-of-life/guidance.html> up to but not including their 18th birthday) of children normally resident within Berkshire at the time of death (excluding those babies who are stillborn, and planned terminations of pregnancy carried out within the law).

This will include neo-natal deaths, expected and unexpected deaths in infants and in older children. Where a child, normally is resident in another area, dies within the area, that death shall be notified to the CDOP in the child's area of residence. Similarly, when a child normally resident in the area dies outside the local authority area, the CDOP should be notified. In both cases an agreement should be made as to which CDOP (normally that of the child's area of residence) will review the child's death. In both cases, an agreement should be made as to how the two CDOPs will report to each other.

Panel membership

As Working Together 2018 states the Pan Berkshire Child Death Overview Panel will have a permanent core membership drawn from the key organisations represented from each of the

Safeguarding Partnerships. Other members may be co-opted to contribute to the discussion of certain types of death when they occur.

Pan Berkshire specific representation:

- CDOP Chair
- Pan Berkshire CDOP Coordinator

Membership of the Pan Berkshire CDOP includes:

- Strategic Director of Public Health - CDOP Chair
- CDOP Coordinator
- Designated Paediatrician/Designated Health Professional – East and West Berkshire
- Police Representative – East and West Berkshire
- Ambulance Service Representative
- Local Safeguarding Children Board Business Managers – where case relevant
- Children’s Social Care Representative
- Bereavement Organisation Representative
- CCG Representative – East and West
- Berkshire Healthcare NHS Foundation Trust (BHFT) Representative
- Head of Midwifery – East and West Berkshire
- Paediatrician with a special interest in neonatology – East and West Berkshire
- Safeguarding Named Nurse, Frimley Health NHS Foundation Trust
- Hospice Representative
- CCN Representative
- Health Visitor/School Nurse Representative

All agencies must arrange appropriate alternative means of representation for meetings they cannot attend.

For the meeting to be **quorate** there needs to be a representative from each of the core disciplines of the Child Death Overview Panel. This is the minimum representation for any meeting to take place.

The panel meeting will be deemed to be quorate if there is representation from:

- Director of Public Health (Chair) or Deputy Chair
- Designated/Named nurse for safeguarding children, CCG
- Protecting Vulnerable People Thames Valley Police, Berkshire
- Local Authority Safeguarding Manager
- Designated paediatrician for unexpected deaths in childhood

The CDOP Panel is chaired by: Meradin Peachey, Director of Public Health, Berkshire West.

The Deputy Chair is held by: Liz Stead – Head of Safeguarding Children, Berkshire West Clinical Commissioning Groups

The role of each core CDOP member:

The Public Health representatives can:

- Provide the panel with information on epidemiological and health surveillance data.
- Assist the panel in strategies for data collection and analysis.
- Assist the panel in evaluating patterns and trends in relation to child deaths and in learning lessons for preventive work.
- Inform the panel of public health initiatives to support child health.
- Advise the panel on the development and implementation of public health prevention activities and programmes.

The Paediatrician can:

- Provide the panel with information on the health of the child and other family members, including any general health issues, child development, and health services provided to the child or family.
- Help the panel interpret medical information relating to the child's death including offering opinions on medical evidence, provide a medical explanation and interpretation of the circumstances surrounding a child's death.
- Assist with interpreting the autopsy findings and results of medical investigations.
- Advise the panel on medical issues including child injuries and causes of child deaths, medical terminology, concepts and practices.
- Chair joint agency response meetings and provide assistance and support in the joint agency response process.
- Provide feedback and support to medical practitioners involved in individual case management.
- Liaise with other health professionals and agencies, where there are child protection concerns.
- Present cases and concerns to the CDOP.
- Liaise with families, when deemed appropriate.

Police representatives can:

- Provide the panel with information on the status of any criminal investigation.
- Provide the panel with information on the criminal histories of family members and suspects.
- Identify cases that may require a further police investigation
- Provide the panel with expertise on law enforcement practices, including investigations, interviews and evidence collection.
- Help the panel evaluate any issues of public risk arising out of the review of individuals' deaths.
- Liaise with other police departments, and the Crown Prosecution Service.
- Provide feedback to police officers involved in individual case management.

Children's Social Care representatives can:

- Provide the panel with information on any social care involvement with the child and family, including any child protection concerns.
- Help the panel to evaluate issues relating to the family and social environment and circumstances surrounding the death.
- Advise the panel on children's rights and welfare, and on appropriate legislation and guidance relating to children.
- Identify cases that may require a further child protection investigation, or a serious case review.
- Liaise with other local authority services.
- Provide feedback to social workers and other local authority staff involved in individual case management.

The role of the CDOP Chair

The Chair of the CDOP will be responsible for:

- Chairing the CDOP meetings, encouraging all team members to participate appropriately.
- Ensuring that all statutory requirements are met.
- Maintaining a focus on preventative work.
- Ensure that members are clear about their role, and facilitate resolution of inter-agency disputes.
- Ensure that this process operates effectively.
- Ensure that the annual report is completed and disseminated to each Safeguarding Partnership.

The role of the CDOP Coordinator

The CDOP Coordinator is responsible and accountable for the smooth running of all child death review processes:

- Ensure and monitor the effective running of the notification, data collection and storage systems.
- Identify and agree with key personnel of all agencies their engagement and responsibilities within the model.
- Assist the Safeguarding Partnership in ensuring senior management in relevant agencies are aware of their roles and responsibilities in relation to *Working Together to Safeguard Children*, discussing any problems with the chair as they arise.
- Facilitate the establishment of structures to support the CDOP as outlined in *Working Together*.

The CDOP will meet quarterly, throughout the year, drawing on comprehensive information from all agencies about the circumstances of each child death.

Terms of Reference will be reviewed and updated annually by the Child Death Overview Panel members.

Confidentially and information sharing

Information discussed at the CDOP meetings will be anonymised prior to the meeting. However, it is essential that all members adhere to strict guidelines on confidentiality and information sharing. Information is being shared in the public interest for the purposes set out in *Working Together* and is bound by legislation on data protection.

CDOP members will be required to sign a confidentiality agreement before participating in the CDOP. Any ad-hoc or co-opted members and observers will be required to sign the confidentiality agreement. At each meeting of the CDOP, all participants will be required to sign an attendance sheet confirming that they have understood and signed the confidentiality agreement.

Any reports, minutes and recommendation arising from a CDOP meeting will be anonymised (where possible) and steps taken to ensure that no personal information can be identified.

Accountability and reporting arrangements

The Pan Berkshire CDOP is accountable to the Pan Berkshire Independent Chairs' Group and the Safeguarding Partnerships it represents.

The Child Death Overview Panel is responsible for developing its work plan, which should be approved by the Independent Chairs. The Child Death Overview Panel will prepare an annual report for the Safeguarding Partnerships. The report is responsible for publishing relevant, anonymised information.

The Safeguarding Partnerships take responsibility for disseminating the lessons to be learnt to all relevant organisations, ensuring that relevant findings inform the future Safeguarding Partnership Business plan, priorities, and sub-groups, and acting on any recommendation to improve policy, professional practice and inter-agency working to safeguard and promote the welfare of children.

- The Safeguarding Partnership will supply data on child death information as required, e.g. National Clinical Outcome review programme initiative to collate and analyse information about child deaths across England, in order to identify lessons on the prevention of child deaths.
- Each year the Pan Berkshire CDOP Coordinator will provide evidence and a report on the CDOP LSCB statutory return for each fiscal year via eCDOP. The data reporting and analysis on a national level is administered by the National Child Mortality Database.
- A special Neonatal Strategic Group will meet once a year to look specifically for a deep dive for wider learning and will feed back to the Panel.

Conflict Resolution

The CDOP Chair should encourage panel members to form a consensus in their assessment and analysis of child deaths, if necessary by taking up issues outside the panel meeting. However, where a consensus is not agreed, the Chair's decision is final.