



## Audit tool for Child Death Overview Panels

1. **How many child deaths have occurred of children normally resident in your local authority area during the past 6 months?**

\_\_\_\_\_ Not known

2. **How many were notified to your panel?**

\_\_\_\_\_ Not known

3. **How many deaths of children not normally resident in your local authority area have been notified to your panel in the past 6 months?**

\_\_\_\_\_ Not known

**How many of these has your panel been actively involved in reviewing?**

\_\_\_\_\_ Not known

4. **How many times has your panel met during the last 6 months?**

\_\_\_\_\_ Not known

For each meeting of your panel within the past 6 months, please complete the following information.

5. **Which agencies / professionals were represented at the meeting?** (tick all that apply)

Police	<input type="checkbox"/>	Children's Social Care	<input type="checkbox"/>
Hospital paediatrician	<input type="checkbox"/>	Community paediatrician	<input type="checkbox"/>
Nursing	<input type="checkbox"/>	Midwifery	<input type="checkbox"/>
Public health	<input type="checkbox"/>	Primary Care	<input type="checkbox"/>
Education / school	<input type="checkbox"/>	Coroner's office	<input type="checkbox"/>
Bereavement support	<input type="checkbox"/>	Lay member	<input type="checkbox"/>
Not known	<input type="checkbox"/>		

Other (please specify) \_\_\_\_\_

**How many panel members were present?**

\_\_\_\_\_ Not known

6. **How many cases were discussed at the panel meeting?**

\_\_\_\_\_ Not known

**How many cases of each category of death were discussed at the meeting?**

Expected death from natural causes	_____	Homicide	_____
Unexpected death from natural causes	_____	Suicide	_____
SIDS	_____	Cause of death not established	_____
Accident	_____	'Near misses'	_____
Not known	<input type="checkbox"/>		

**How many deaths were discussed in each of these age groups?**

Neonatal deaths (< 4 weeks)	_____	Infant deaths (4 – 52 weeks)	_____
1 – 4 years	_____	5 – 9 years	_____
10 – 14 years	_____	15 – 18 years	_____
Not known	<input type="checkbox"/>		

**How many deaths were considered to be preventable?**

Preventable	_____	Potentially preventable	_____
Not preventable	_____	Inadequate information to make judgement	<input type="checkbox"/>

**7. Were any cases referred on for further investigation? If so, please list how many under each category?**

No deaths referred on	<input type="checkbox"/>	Coroner	_____
Police / CPS	_____	Social Services for s47 enquiry (siblings / other children)	_____
LSCB for Serious Case Review	_____	Not known	<input type="checkbox"/>
Other (please specify)	_____		

**8. Did the panel make recommendations in any of the following areas? (tick all that apply)**

- |  |                          |                                 |                          |
|--|--------------------------|---------------------------------|--------------------------|
| Recommendations specific to the management of an individual case | <input type="checkbox"/> | Community education / awareness | <input type="checkbox"/> |
| Training commissioners / providers                               | <input type="checkbox"/> | National education / awareness  | <input type="checkbox"/> |
| Changing local organisational structures and practices           | <input type="checkbox"/> | Advocacy and health promotion   | <input type="checkbox"/> |
| Changing regional policies or practices                          | <input type="checkbox"/> | Mobilising local communities    | <input type="checkbox"/> |
| Influencing legislation or national policy                       | <input type="checkbox"/> | No recommendations              | <input type="checkbox"/> |
| Not known  | <input type="checkbox"/> |                                 |                          |
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