

CDOP Identifier (Unique identifying number)

Child's age at death

Date of review

Gender



Child Death Overview Panel Review

Analysis Proforma

This proforma is used by the Child Death Overview Panel (CDOP) to:

- o evaluate information about the child's death;*
- o identify lessons to be learnt; and*
- o to inform an understanding of all child deaths at a national level.*

Where prior to the CDOP meeting, a local case discussion is held, the local team may complete a draft Form C to be forwarded to the CDOP to inform their deliberations.

MSCB Child Death Reference No.			
Name		Date of death	/ /
Date of Birth	/ /	Date of review	/ /
Professionals Present			
Apologies			

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Agencies represented at the meeting:

Primary Health Care

Yes No

Paediatrics

Yes No

Hospital Services

Yes No

Mental Health Services

Yes No

Ambulance Services

Yes No

Police

Yes No

Children's Social Care Services

Yes No

Schools

Yes No

Other (Specify)

List of documents available for discussion

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Cause of death as presently understood

Ia

Ib

Ic

II

Or main cause (neonatal deaths):

Case Summary

A few paragraphs at most: a summary of the background and a factual description of events leading up to death. This should be as short as possible.

The CDOP should analyse any relevant environmental, extrinsic, medical or personal factors that may have contributed to the child's death under the following headings.

For each of the four domains below, determine different levels of influence (0-3) for any identified factors:

- 0 - Information not available
- 1 - No factors identified or factors identified but are unlikely to have contributed to the death
- 2 - Factors identified that may have contributed to vulnerability, ill-health or death
- 3 - Factors identified that provide a complete and sufficient explanation for the death

This information should inform the learning of lessons at a local level.

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Domain - Child's needs		
Factors intrinsic to the child Include any known health needs; factors influencing health; development/ educational issues; behavioural issues; social relationships; identity and independence; abuse of drugs or alcohol; note strengths and difficulties		
Please enter relevant information		
Please tick the following boxes if these factors were present or may have contributed to the death		Relevance (0-3)
Condition:		
Acute / Sudden onset illness Specify:	Yes / No / NK <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	
Chronic long term illness		
Asthma	Yes / No / NK <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	
Epilepsy	Yes / No / NK <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	
Diabetes	Yes / No / NK <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	
Other chronic illness Specify:	Yes / No / NK <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	
Disability or impairment		
Learning disabilities Specify:	Yes / No / NK <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	
Motor impairment Specify:	Yes / No / NK <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	
Sensory impairment Specify:	Yes / No / NK <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	
Other disability or impairment Specify:	Yes / No / NK <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	
Emotional / behavioural / mental health condition in the child Specify:	Yes / No / NK <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	
Allergies Specify:	Yes / No / NK <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	
Alcohol/substance misuse by the child Specify:	Yes / No / NK <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	

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Domain - family and environment		
Factors in the family and environment Include family structure and functioning; including parental abuse of drugs or alcohol; wider family relationships; housing; employment and income; social integration and support; community resources; note strengths and difficulties		
Please enter relevant information		
Please tick the following boxes if these factors were present or may have contributed to the death		Relevance (0-3)
Condition:		
Emotional/behavioural/mental health condition in a parent or carer Specify:	Yes / No / NK <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	
Alcohol/substance misuse by a parent/carer Specify	Yes / No / NK <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	
Smoking by the parent/carer in household or during pregnancy Specify:	Yes / No / NK <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	
Housing Specify:	Yes / No / NK <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	
Domestic violence Specify:	Yes / No / NK <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	
Co-sleeping Specify:	Yes / No / NK <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	
Bullying Specify:	Yes / No / NK <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	
Gang/knife crime Specify:	Yes / No / NK <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	
Pets/animal assault Specify:	Yes / No / NK <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	

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Domain - parenting capacity		
Factors in the parenting capacity Include issues around provision of basic care; health care (including antenatal care where relevant); safety; emotional warmth; stimulation; guidance and boundaries; stability; note strengths and difficulties		
Please enter relevant information		
Please tick the following boxes if these factors were present or may have contributed to the death		Relevance (0-3)
Condition:		
Poor parenting/supervision Specify:	Yes / No / NK <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	
Child abuse/neglect Specify:	Yes / No / NK <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	

Domain - service provision		
Factors in relation to service provision Include any identified services (either required or provided); any gaps between child's or family member's needs and service provision; any issues in relation to service provision or uptake		
Please enter relevant information		
Please tick the following boxes if these factors were present or may have contributed to the death		Relevance (0-3)
Condition:		
Access to health care Specify:	Yes / No / NK <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	
Prior medical intervention Specify:	Yes / No / NK <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	
Prior surgical intervention Specify:	Yes / No / NK <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	

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The CDOP should categorise the likely/cause of death using the following schema.

This classification is hierarchical: where more than one category could reasonably be applied, the highest up the list should be marked.

Category	Name & description of category	Tick box below
1	Deliberately inflicted injury, abuse or neglect This includes suffocation, shaking injury, knifing, shooting, poisoning & other means of probable or definite homicide; also deaths from war, terrorism or other mass violence; includes severe neglect leading to death.	<input type="checkbox"/>
2	Suicide or deliberate self-inflicted harm This includes hanging, shooting, self-poisoning with paracetamol, death by self-asphyxia, from solvent inhalation, alcohol or drug abuse, or other form of self-harm. It will usually apply to adolescents rather than younger children.	<input type="checkbox"/>
3	Trauma and other external factors This includes isolated head injury, other or multiple trauma, burn injury, drowning, unintentional self-poisoning in pre-school children, anaphylaxis & other extrinsic factors. Excludes Deliberately inflicted injury, abuse or neglect. (category 1).	<input type="checkbox"/>
4	Malignancy Solid tumours, leukaemias & lymphomas, and malignant proliferative conditions such as histiocytosis, even if the final event leading to death was infection, haemorrhage etc.	<input type="checkbox"/>
5	Acute medical or surgical condition For example, Kawasaki disease, acute nephritis, intestinal volvulus, diabetic ketoacidosis, acute asthma, intussusception, appendicitis; sudden unexpected deaths with epilepsy.	<input type="checkbox"/>
6	Chronic medical condition For example, Crohn's disease, liver disease, immune deficiencies, even if the final event leading to death was infection, haemorrhage etc. Includes cerebral palsy with clear post-perinatal cause.	<input type="checkbox"/>
7	Chromosomal, genetic and congenital anomalies Trisomies, other chromosomal disorders, single gene defects, neurodegenerative disease, cystic fibrosis, and other congenital anomalies including cardiac.	<input type="checkbox"/>
8	Perinatal/neonatal event Death ultimately related to perinatal events, eg sequelae of prematurity, antepartum and intrapartum anoxia, bronchopulmonary dysplasia, post-haemorrhagic hydrocephalus, irrespective of age at death. It includes cerebral palsy without evidence of cause, and includes congenital or early-onset bacterial infection (onset in the first postnatal week).	<input type="checkbox"/>
9	Infection Any primary infection (ie, not a complication of one of the above categories), arising after the first postnatal week, or after discharge of a preterm baby. This would include septicaemia, pneumonia, meningitis, HIV infection etc.	<input type="checkbox"/>
10	Sudden unexpected, unexplained death Where the pathological diagnosis is either 'SIDS' or 'unascertained', at any age. Excludes Sudden Unexpected Death in Epilepsy (category 5).	<input type="checkbox"/>

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The panel should categorise the 'preventability' of the death – tick one box.

Preventable child deaths are defined in paragraphs 7.23 and 7.24 of *Working Together to Safeguard Children*

Modifiable factors identified	The panel have identified one or more factors, in any domain, which may have contributed to the death of the child and which, by means of locally or nationally achievable interventions, could be modified to reduce the risk of future child deaths	<input type="checkbox"/>
No Modifiable factors identified	The panel have not identified any potentially modifiable factors in relation to this death	<input type="checkbox"/>
	Inadequate information upon which to make a judgement. <i>NB this category should be used very rarely indeed.</i>	<input type="checkbox"/>

Issues identified in the review

List the issues identified by the review group. This list may include the absence of certain key persons from the discussion or the lack of key documents.

Learning Points

List the learning points that emerge. These may well overlap with the issues and with recommendations.

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Recommendations

List any recommendations, even if already picked up as learning points or 'issues'

Specific agency

LSCB

Regional

National

Follow up plans for the family, where relevant

Possible Actions

Should this death be referred to another agency or Authority (e.g. Police, Coroner, Health and Safety Executive, Serious Case Review panel) for further investigation or enquiry? If so, please state

- Yes No Already done

If yes please specify;