

Key points for Emergency Department staff (medical and nursing) involved in SUDI

The following list should act as guidance and is in no way exclusive. Local variations may exist for example where there is no paediatric cover. In some remote and rural locations the following may be undertaken by a GP or nurse practitioner.

- Prepare for the arrival of the infant and access SUDI pack (allocate team roles, contact paediatricians +/anaesthetist).
- Resuscitate as appropriate (as per UK Resuscitation Council guidelines).
- **Always** give the parents the opportunity to be present during resuscitation and explain what is happening. If they are not present ensure that they are kept informed of what is happening.
- Inform the family of the infant's death once death has been certified.
- Inform Police Scotland if not already present.
- Find out if arrangements for the care of siblings are required.
- Take full history from the family about events prior to death, including previous medical history using the History and Examination form.
- Explain to the family what will happen next, ie roles of Police Scotland, Procurator Fiscal, and the need for a post mortem by a paediatric pathologist. This may necessitate the transfer of the infant's body to a mortuary in a different town or city. There may also be a delay in issuing death certificate.
- Liaise with Police Scotland in providing them with the opportunity to speak with the parents at an appropriate time.
- Retain nappy and clothing for Police Scotland (bags included in SUDI pack).
- A Moses basket (or a cot suitable for the size of the infant) should be available with a shawl to wrap the infant in.
- Always allow the family to hold the infant (supervised) and take photographs of the child if the family wish.
- Be aware of differing cultural beliefs as suggesting photographing the dead is very offensive to some faiths.
- Explain that you can arrange for the family to see the infant again at the mortuary.
- Offer the parent information leaflet (available from HIS website).
- Offer support organisation contact information (available from <u>HIS website</u>).
- Offer local bereavement leaflets
- If there are no paediatricians onsite, ensure that they are informed the next day (if out of hours) and make sure the parents have the contact number for the NHS board SUDI paediatrician.





- Inform the local area Procurator Fiscal Office (on the next working day if out of hours.
- Inform the GP immediately or next working day if out of hours. Consider telephoning NHS 24 if out of hours and asking them to contact the GP the next day via mailbox number for the practice or by telephoning the named GP for the infant.
- Debrief staff and ensure that they are aware of local staff support services available to them.
- Once the infant's body has left the Emergency Department and staff have provided information to Police Scotland for the Sudden Death report, care and support of the parents is usually provided by the paediatric staff.
- The paediatrician or paediatric pathologist should discuss the final cause of death with the Emergency Department Consultant, once the final post-mortem examination report is available from the Procurator Fiscal involved so that feedback can be given to the resuscitation team.
- The above roles are often shared between Emergency Medicine staff and paediatricians if on site. The SUDI
 paediatrician for the NHS board should assume an overall responsibility to ensure local awareness of this
 guidance.

Local variations on who takes individual responsibility for the actions should not prevent use of the guidance being implemented.

If using hard copy downloads of this resource to be kept in local folders, you may wish to add useful numbers below:

Contact	Name if applicable	Contact details
SUDI paediatrician (or Paediatrician taking the lead role)		
Child Protection Health		
Team		
Procurator Fiscal Local		
area deaths office		
Paediatric Pathology		
Department or		
pathologist's number		
Staff support services		
(Occupational Health, Bereavement Support)		
Dereavement Support)		
Hospital Chaplaincy		