

Appendix 1:

Guidance note for Joint Home/ Scene Visit for SUDI Investigations

“As soon as possible after the infant’s death, the lead health professional (designated paediatrician, specialist nurse or on-call paediatrician) and police investigator, accompanied by the family’s GP or health visitor if possible, should visit the family at home or at the site of the infant’s collapse or death (Sudden unexpected death in infancy & childhood – Multi-agency guidelines for care & investigation, Royal College of Pathologists, Chair Baroness Kennedy, Nov 2016)”.

Timescales – within a maximum of 48 hours (usually the Police will want to complete as soon as possible once the initial circumstances have been established). Flowchart can be found within the above document on page 20 – link at the end of this document.

Actions & Considerations for Lincolnshire based on the Royal College of Pathologists (Kennedy) Guidelines:

Upon the report of a SUDI, communication is key between all partner agencies to understand the circumstances & formulate a strategy on how to investigate why the child has died, providing support to the family, ensuring all safeguarding is addressed & thinking holistically in relation to the event.

The lead Police Investigator (Senior Investigating Officer - SIO) should be in communication with the lead Health Professional & a plan should be agreed for the joint home/ scene visit.

The purpose of the joint home visit is:

- To obtain further, more detailed information about the circumstances & environment in which the infant died
- To provide the family with information & support

The visit should normally take place within daylight hours & the scene left undisturbed (therefore secure).

In an ideal situation the joint visit should be completed together as soon as possible - but this is not always possible, therefore the following has been agreed for Lincolnshire based on the guidelines:

1. Police SIO to contact SUDI Admin Team (Claire Oliver) to provide details of the SUDI & request details of the SUDI Doctor. The SUDI Doctor will contact the Police SIO via telephone to discuss & agree a strategy for the joint visit. The SUDI Admin & Doctor Team work an on-call rota Monday to Friday 9am to 5pm. Contact telephone 01476 464693. Liaison by the Police SIO will also be needed with the duty Paediatric Consultant who will be in A&E dealing with the SUDI.
2. Out of hours, on weekends & bank holidays the lead health care professional will be the Consultant Paediatrician on duty at the hospital. Out of hours the Police SIO will therefore leave a message for the SUDI Admin Team to pick up when they are back to work & will instead go direct to contact the duty Consultant paediatrician to formulate a strategy for the

home/ scene visit. It is recognised that it is very unlikely that the Consultant Paediatrician will be able to do a home visit due to on-call commitments in the hospital.

3. The SUDI Doctor may not always be available straight away to attend the joint home visit but will provide a time that they are available within the 48 hour period. The Police SIO will need to make a decision based on the circumstances to either go ahead with the visit without the Doctor or whether to wait for the Doctor. Generally it will be more beneficial to complete a single agency scene visit with CSI & have contact with the SUDI Doctor at the scene via telephone, if needs be, rather than wait. The rationale for the decision making can be documented.
4. If the Police complete a single agency scene visit, consideration can be given to a joint home visit within the 48 hours timescale when the SUDI Doctor is available. This again will depend on the circumstances. It is unlikely that this will need to take place as communication will take place with the family at the hospital so the need for a 2nd visit will be reduced & most likely not be necessary. The 2nd visit will be an exception rather than the rule.
5. If the SUDI doctor is not available to complete the scene visit straight away the Police can request the attendance of the GP or Health Visitor to attend to assist (it would also be worth considering if an FME could assist if the Police feel a Doctor would be required at the home visit). Again this will depend on availability & the circumstances.
6. The guidelines state that the family should be informed of the visit – its nature & purpose & that the family can also be present & allowance for other persons such as grandparents to be present. Again this will need consideration as part of the decision making. It is likely that the family will be at hospital whilst the home/ scene visit is taking place & through good communication they can be updated & it may not be suitable for them to be present during the examination/ visit.

Overall the Police need to make decisions based on the circumstances, have great communication with partners & decide on the best & most appropriate course of action taking into account the needs of everyone involved. It is important to keep the 'voice of child' at the centre of everything we do but also providing the best support to the family of the child whilst investigating why the child has died.

Further guidance on the joint home visit is via the Royal College of Pathologists Guidelines (Kennedy), Chapter 5, pages 38 to 40 & via the following link:

<https://www.rcpath.org/uploads/assets/874ae50e-c754-4933-995a804e0ef728a4/Sudden-unexpected-death-in-infancy-and-childhood-2e.pdf>

Detective Inspector David McKean, Protecting Vulnerable Persons Team, Lincoln (April 2020)