

DEATH AND SERIOUSLY ILL BABIES

Consultant must be involved immediately in the care of a seriously ill baby

GUIDANCE

Preparation

- If **baby's condition** deteriorates **seriously**, discuss immediately with on-call consultant
- On-call consultant will assess the situation **with nursing and medical team, ensuring thorough documentation**

Discussion with parents

- If **death is inevitable, consultant will discuss** clinical situation, and baby's best interests, with parents
- ensure **baby's** nurse present and document discussion in **hospital** notes
- Most parents will accept **the** situation, particularly **if a senior doctor has been involved at an early stage**, but will be upset and may display denial, guilt or anger
- Ask parents whether they wish a religious or spiritual person to be involved

Second opinion

- In difficult clinical situations, where parents are unable to accept consultant's assessment, **consultant to seek second opinion from a colleague**

Further support

- If parents do not accept second clinical assessment:
 - discuss with medical director or deputy
 - discuss with parents the option of a further opinion from consultant neonatologist from another unit in neonatal network
 - inform communications manager regarding possible press coverage
- Seek advice from your Trust's legal advisers via medico-legal department or on-call manager
- Timescale for events in individual babies may vary from under 24 hr to over 1-2 weeks

Good documentation is essential

Saying goodbye

- Parents may request a blessing or naming ceremony by a religious representative
- Ensure all family **members** are allowed time and privacy with baby
- Provide a keep-sake box **that can** include photos, hand and foot prints, lock of hair, cot card, etc
- if parental ethnicity and religious beliefs allow, offer parents opportunity to wash, dress and prepare baby
- A small toy or other memento may accompany baby to mortuary

DEATH

When a baby dies, there are formalities to be completed, but these should be handled as sensitively as possible to minimise emotional trauma to parents, whose wishes (within reason) should be respected and who should be guided carefully through the necessary procedures

Ensure baby's correct registered name **appears on all documentation**

Formal arrangements

- **Neonatal staff** will offer advice about registration and funeral **arrangements with back-up support from hospital general office/bereavement office**

- In some areas, all deaths must be discussed with the coroner's officer. Check the requirements of your local coroner before issuing death certificate and requesting post-mortem consent
- if you are unable to issue death certificate, report the death to the coroner for a coroner's post-mortem
- If death certificate can be issued:
 - parents make an appointment with Registrar of births and deaths to deliver death certificate, unless coroner's officer recommends otherwise
- Registrar of births and deaths will issue certificate of authority for burial or cremation, which should be given to:
 - hospital general office, if hospital is burying baby
 - funeral director handling burial, if parents are making their own arrangements

Post-mortem

- Request a post-mortem in all babies, as it is parents' right to have this choice
- give parents an information leaflet to assist their choice
- A post-mortem must be requested by a senior paediatrician and a witness must sign the fully completed consent form
- send original form to mortuary with baby, place copies in baby's hospital notes together with copy of death certificate
- death summary must be dictated by senior paediatrician within 24 hr of death
- copy of death summary must be sent to mortuary to accompany any baby having a post-mortem

Baby transfer

- Special arrangements will be made to transport baby to mortuary according to local hospital policy (baby must be refrigerated within 5 hr of death if **post-mortem** required)
- allow parents to accompany baby if they wish
- some may prefer to see their baby on the neonatal unit or chapel of rest
- Parents may take baby's body directly from the neonatal unit, once appropriate documentation has been completed. Where babies are taken will depend upon religious belief of parents or designated funeral director. In all cases strict adherence of local hospital policy must apply

Parent support

- Offer bereavement support information (e.g. Stillbirth and Neonatal Death Society; SANDS) or counsellor
- consultant will offer bereavement counselling at 6-8 weeks, or following final post-mortem result
- arrange an appointment with trained bereavement nurse specialist if available

Communication

- Inform **named** obstetrician **and neonatologist, consultants at** referring hospital (if appropriate), GP, health visitor, **and community midwife** that death has occurred
- Document this in notes or on local checklists
- follow local guidelines for notifying child death and completion of form A and B for death reviews (legal requirement)