Wakefield Safeguarding Children Partnership

SUDIC—Sudden Unexpected Death In Childhood (June 2023)

One Minute Guide

What is SUDIC?

SUDIC stands for Sudden Unexpected Death in Childhood.

Working Together to Safeguarding Children 2018, Chapter 5 defines this as:

"The unexpected death of a child which was not anticipated as a significant possibility 24 hours before the death, or where there was a similarly unexpected collapse leading to or precipitating the events that led to the death".

Following the unexpected death of a child the SUDIC process is instigated by the SUDIC team at Mid Yorkshire Hospitals Trust (MYHT)

What is the SUDIC process?

The SUDIC process is the multi-agency response to unexpected child deaths and forms part of the statutory Child Death Overview Process, which is managed by Wakefield Safeguarding Children Partnership (WSCP) Business Unit alongside MYHT on behalf of Wakefield Council and Wakefield ICB. See Wakefield Child Death Review Arrangements document for full details.

The SUDIC process aims to understand the reasons for the child's death, address the possible needs of other children and family members in the household and also consider any lessons to be learnt to safeguard and promote children's welfare in the future.

The decision of whether a child's death meets the SUDIC criteria is made jointly by the Consultant Paediatrician for SUDIC and Police, and throughout the process the child remains under the jurisdiction of HM Coroner.

Who is the SUDIC team?

The SUDIC team is led by the SUDIC Paediatrician, the Lead Nurse for Child Death, and SUDIC Secretary. They initiate a Joint Agency Response (JAR) meeting when there is a sudden and unexpected death in childhood. The JAR meeting should be held within 72 hours of the child's death wherever possible. See JAR One Minute Guide for further details.

The team work closely with the Accident & Emergency Department, Children's Services, the Police, Coroner's Office, and Yorkshire Ambulance Service.

What happens in each case?

When a child dies unexpectedly, the initial process is started by the on-call Consultant Paediatrician and Acute Children's Team. They initiate an immediate information gathering, sharing and planning discussion between the lead agencies, e.g. health, Police, social care and education. The SUDIC team will be informed about the death as soon as possible.

For all SUDIC's the SUDIC team, along with the Police, will decide whether or not to visit the place where the child died/conduct a home visit. The visit should take place within 72 hours of the death wherever possible.

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What happens in each case, cont…

The information relating to the circumstances of the death and the relevant health or social care history must be included in the report to the Coroner within 28 days of the child dying. Once the final post-mortem report is available a final Child Death Review (CDR) meeting is held. The CDR meeting is a multi-agency meeting where all matters relating to an individual child are discussed by professionals directly involved in the care of that child during their life. The CDR meeting is held usually within 12 weeks of the death but can take longer if the final post-mortem result is not known. The CDR will be convened by the SUDIC Team. A summary from the JAR meeting, if requested, is sent to HM Coroner by the SUDIC Paediatrician ahead of the Inquest. The inquest may take place several months after the death of the child.

Key contact and for more information

The SUDIC Team are based at Mid Yorkshire Hospital Trust and can be contacted on 01924 816166.

Further information is available from the West Yorkshire Consortium online safeguarding procedures.

You can also find more information on the Wakefield Safeguarding Children Partnership website which also provides links to more information such as Wakefield's Child Death Arrangements, helpful One Minute Guides and bereavement support services available for parents/carers and families

One Minute Guide adapted from Leeds Safeguarding Children Partnership with thanks