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1. Latest NCMD report for 2022-2-23 data Eastern Region
2. Cases to Panel in November
3. Safer sleep- Focusing on Co-sleeping.
4. Directory of Services contacts, Apps, websites for bereaved families.

1 View the latest Norfolk & Suffolk CDOP Monitoring Report from NCM for: Q2- 23/24



Norfolk Suffolk
CDOPs - NCMD Moni

2 Norfolk & Waveney CDOP November '23 Summary:

Another case presented recounted the difficulties of a family where the child of primary school age was diagnosed just 4 weeks after initial presentations of symptoms with a Grade IV Glioma which, due to its rapid development was deemed palliative at diagnosis. The mother and her children had moved from abroad, in Feb 2018 leaving the father behind to continue work. The local hospital were involved in the request to the Home Office to seek permission for the father to obtain a visitor's visa in order he could be with his family during his sons' illness and it was discussed at panel how difficult this process for the family had been due to the Home Office's request the diagnosis be confirmed as terminal, despite the initial letter sent confirming the actual diagnosis. The father was eventually granted his visa following further correspondence from the local hospital and spent the final weeks with his son and was able to support his wife and other children.

2 Norfolk & Waveney CDOP November '23 Summary:

Reflection: In both cases mentioned, it is apparent that if more considerate thinking and empathy had been employed by the organisations involved, the families would have been better supported through the most difficult of times. How we push forward to encourage change is going to be key in improving the experience for others and this remains such an important part of the Child Death Review teams and the Child Death Overview Panels work.

2 Norfolk & Waveney CDOP November '23 Summary:

6 cases brought to panel (and closed), including the case of a suicide of an adolescent. This case highlighted many failings by both the young persons the employer (a major international company) and Mental Health Providers, where missed opportunities to provide support and employ empathy surrounding the personality of this person may have resulted in a different outcome. The panel were visibly moved by an emotional statement the mother had asked to be read out at the panel meeting that she had written, and she states "she wanted both hers and her Child's voice finally heard. It was felt in part, the employer had failed the young person by applying adult processes to a vulnerable young person, and this should have been more considered. The panel have agreed to write to this company to ensure changes have been made to the apprenticeship program in relation to HR processes ensuring younger people are more appropriately considered. We will endeavour to update you.

3. Promoting safer sleeping for babies in high-risk groups in England. February 2023- Funded by National Institute for Health & Care Research.

The article in the link explores using theories of behavioural change to support the development of safer sleep interventions, instead of focusing solely on the provision of information. The Out of Routine report concluded that safer sleep interventions that focus solely on the provision of information are unlikely to influence the behaviours of parents in the most deprived areas of England.

The study used the COM-B model of behaviour change to identify modifications to practice that involve delivering safer sleep messages to parents who have a social worker. The COM-B model states that capability, opportunity, and motivation are essential for behaviour change. The study used a variety of mixed methods to carry out the research; 1) an analysis using the COM-B model of two recent systematic reviews to identify the key components, 2) interviews to identify beliefs about safer sleep practices with families who have had recent contact with children's social care; and (3) a workshop with stakeholders to explore how our findings could be used to modify existing best practice.

Findings:

- A range of motivational factors (such as parental sleep deprivation and the desire to bond with the infant) play a key role in influencing decision making about the infant sleep environment.
- Professionals responsible for conversations about infant sleep safety have concerns about providing personalised and tailored support and managing risk in families with a social worker.
- Credible, trusted sources and sound evidence regarding how and why safer sleep messages aim to protect infants are key to the delivery of effective communications about safer sleep with families of infants at increased risk of poor outcomes.
- Social pressures regarding "good parenting" may act as barriers to parents acknowledging and discussing/planning for "out of routine" circumstances.

These findings suggest that change to current practice is needed if the risk of SUDI in this group of families is to be further reduced and the suggested implications for change from the article are:

Regular visits to families to reinforce safer sleeping messages by a professional that has built a trusting relationship with the family and can provide continuity of care. The importance of the professional being trained and competent to have open and honest conversations to identify parents' motivational behaviour in relation to their sleep practices and how those motivational needs can be met alongside safer sleep practices in all environments.

LINK: [promoting safer sleeping for babies in high-risk groups in england - report - february 2023.pdf \(ucl.ac.uk\)](https://www.ucl.ac.uk/developmental-child-death-reviews/reports/promoting-safer-sleeping-for-babies-in-high-risk-groups-in-england-report-february-2023.pdf)



Review of article by:
Amy Edwards- Developmental Child Death
review Nurse

or scan the QR code above

3. Further links to articles relevant to: Safer sleep- Focusing on Co-sleeping

[NCMD Newsletter, December 2023 \(mailchi.mp\)](#)



or use this QR code.

Within this newsletter take a look at the following article:

[Child Mortality in England During the Covid-19 Pandemic \(ncmd.info\)](#)



or use this QR code.

The BMJ Journals Open paper can be viewed at his link:

[Changes in background characteristics and risk factors among SIDS infants in England: cohort comparisons from 1993 to 2020 | BMJ Open](#)



or use this QR code.

(Right click on each link and select open hyperlink from the options listed).

4. Useful Services, Websites and Apps

Urgent Mental Health Support:

NHS Mental Health Crisis Line - 111, option 2 (24 hours a day, 7 days a week)

Emergency Services – 999 (24 hours a day, 7 days a week)

Samaritans - 116 123 (24 hours a day, 7 days a week)

Child Line – 0800 1111 (24 hours a day, 7 days a week)

Papyrus Hope Line – 08000 684 141 (9am-midnight everyday) (up to age 35)

Papyrus text service – 07866039967 (9am-midnight everyday) (up to age 35)

Shout – text shout to 85258 (24 hours a day)

Calm - 0800 58 58 58 (Men/Boys who are struggling and need to talk. Webchat available on website www.thecalmzone.net 5pm till midnight everyday)

Silence of Suicide - helpline 0808 115 1505 (Saturday and Sunday 4pm – 12am, Monday to Friday - 8pm – 12am) <https://sossilenceofsuicide.org/get-help/>

Health Support:

Emergency Services – 999 (24 hours a day, 7 days a week)

NHS Advice Line – 111 (24 hours a day, 7 days a week) <https://111.nhs.uk/>

Non urgent police support – 101

Leeway – 0300 5610 077 (24 hours a day, 7 days a week)

For medical advice, contact your GP surgery to request urgent or routine appointment. This includes referral for mental health and eating disorders support.

Your local pharmacy is a useful resource for non-urgent advice around your health.

Just One Norfolk - <https://www.justonenorfolk.nhs.uk/>

Just One Number – 0300 300 0123

Suffolk Health Visiting/School Nursing:
0345 6007 8866 childrenshealth@suffolk.gov.uk

Emotional Well-being/Mental Health Support that you can self-refer to:

Qwell (18+) - <https://www.qwell.io/>

Kooth (11-25) - <https://www.kooth.com/>
Online mental health wellbeing community.

Norfolk and Waveney Mind - <https://www.norfolkandwaveneymind.org.uk/>
Self-help support.

Side by Side supportive community, join online.
Phone lines open 9am - 3pm, Monday to Friday, excluding bank holidays, 0300 330 5488 option 2.

Norfolk and Suffolk Well-Being Service
<https://www.wellbeingnands.co.uk/norfolk/>

Mancroft Advice Project

<https://www.map.uk.net/>

8am - 4.30pm Monday to Friday.

Support around gender (**Evolve**), drugs, alcohol, housing, money, benefits, education, training, and employment. Offers counselling and drop in.

Great Yarmouth office: 01493 854839

Norwich office: 01603 766994.

The Mix

<https://www.themix.org.uk/>

Support for under 25s.

Group online chats - Sunday to Thursday.

0808 808 4994 free telephone support available 4pm – 11pm, 7 days a week.

The Source

<http://www.thesource.me.uk/>

Information and advice for young people in Suffolk.

Young Minds

<https://www.youngminds.org.uk/>

Parent helpline for children 0808 802 5544

Mental health support.

Norfolk Chat Health (11-19 years old, Monday to Friday

9am-5pm, excluding bank holidays) 07480635060

Suffolk Chat Health (11-19 years old, Monday to Friday

9am-4.30pm, excluding bank holidays) 07507333356

Steam House Cafes

Holistic support for adults experiencing mental health crisis. Day and night. <https://steamhousecafes.co.uk/>

Action for Happiness

<https://actionforhappiness.org/>

4. Useful Services, Websites and Apps

Bereavement Support:

TimeNorfolk

<https://www.timenorfolk.org.uk/>

Provides wellbeing support to anyone in Norfolk and Waveney who experiences mental health challenges due to pregnancy loss at any stage, baby loss or pregnancy choices. Self-referral for support.

NorfolkSands

<https://www.norfolksands.org.uk/>

Support from volunteers who have all been affected by the loss of babies. Support those who have experienced loss through stillbirth or neonatal death. Helpline - 0808 164 3332

LullabyTrust

<https://www.lullabytrust.org.uk/>

Reducing sudden infant death and supporting bereaved families.

CompassionateFriends

<https://www.tcf.org.uk/>

Support for bereaved parents and families, including suicide) 0345 123 2304 (10am-4pm and 7pm – 10pm, daily)

Mencap

<https://www.mencap.org.uk/advice-and-support/wellbeing/dealing-bereavement>

NelsonsJourney

[Nelson's Journey | Child Bereavement Help for Norfolk | \(nelsonsjourney.org.uk\)](http://nelsonsjourney.org.uk)

ChildBereavementUK

<https://www.childbereavementuk.org/>

Winston'sWish

Helpline 08088 020 021 <https://www.winstonswish.org/>

CruseBereavementCare

<https://www.cruse.org.uk/>

Including support when death through drugs, alcohol, and addiction – The Bead Project.

East of England COOP Funerals bereavement support

<https://www.eastofengland.coop/funerals/our-services/bereavement-support>

RosedaleFunerals

<https://www.rosedalefuneralhome.co.uk/bereavement-support/>

Apps:

Stay Alive – suicide prevention app.

Calm Harm – reduction in self-harm and managing emotions.

DistrACT – support around self-harm.

My Possible Self: Mental Health App – to manage fear, anxiety, stress and tackle unhelpful thinking.

Stopp – support around negative behaviours such as drinking, smoking, anxiety, depression.

Elefriends – supportive online mental health community by Mind.

Cove – music to reflect emotions to express how you feel.

Feeling Good – audio tracks to help relax the body and mind and build confidence.

NHS Quit Smoking – help to stop smoking and breathe easier.

5 steps to well-being

1. Connect with other people
2. Be physically active
3. Learn new skills
4. Give to others
5. Pay attention to the present moment (Mindfulness)

www.nhs.uk

For the compilation of this directory with thanks to:
Helen Bradbury- Developmental Child Death review Nurse
Amy Edwards- Developmental Child Death review Nurse