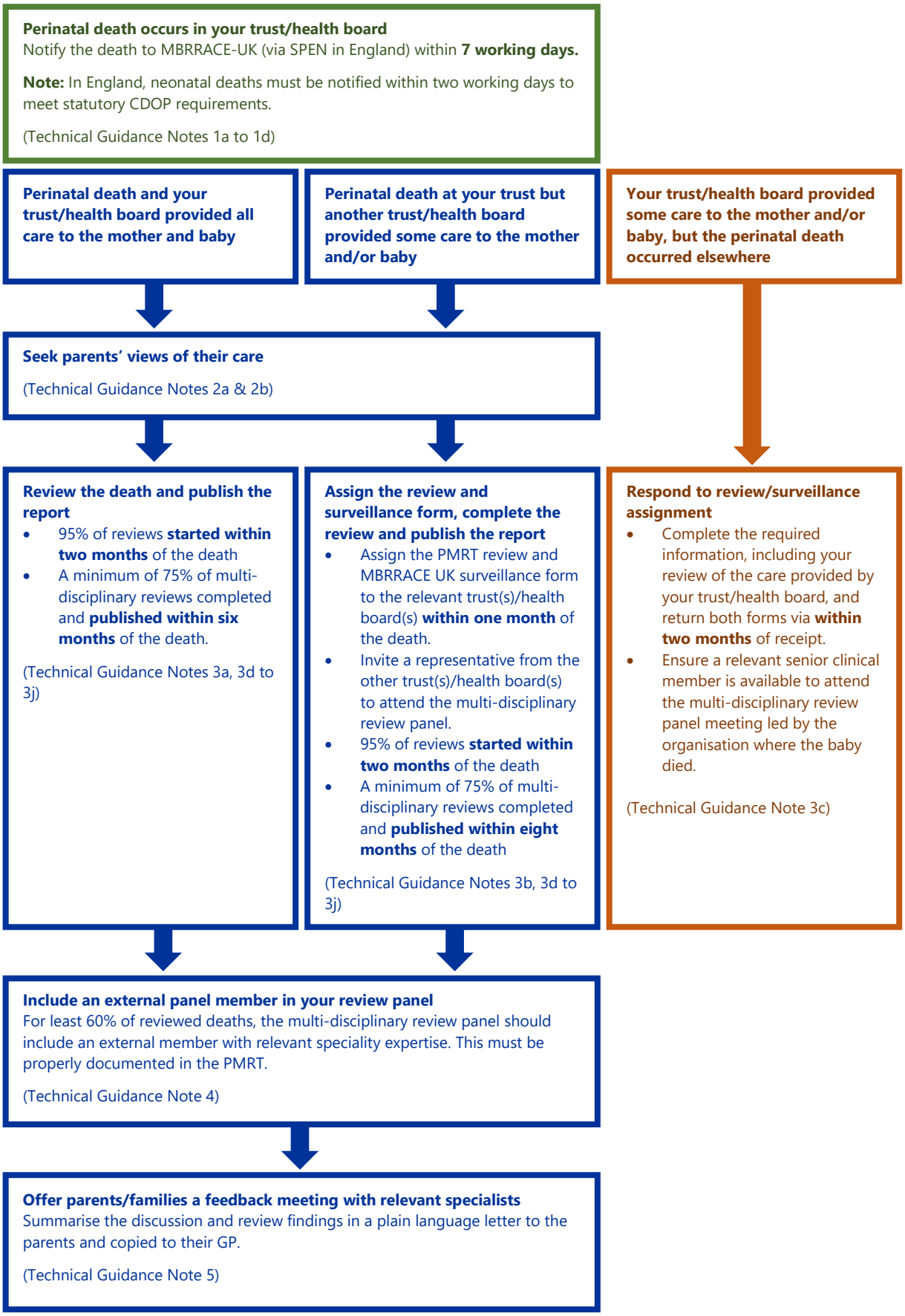
Flowchart


Perinatal death occurs in your trust/health board
Notify the death to MBRRACE-UK (via SPEN in England) within 7 working days.
Note: In England, neonatal deaths must be notified within two working days to meet statutory CDOP requirements.
(Technical Guidance Notes 1a to 1d)
Perinatal death and your trust/health board provided all care to the mother and baby
Perinatal death at your trust but another trust/health board provided some care to the mother and/or baby
Your trust/health board provided some care to the mother and/or baby, but the perinatal death occurred elsewhere
Seek parents' views of their care
(Technical Guidance Notes 2a & 2b)
Review the death and publish the report
95% of reviews started within two months of the death
A minimum of 75% of multi-disciplinary reviews completed and published within six months of the death.
(Technical Guidance Notes 3a, 3d to 3j)
Assign the review and surveillance form, complete the review and publish the report
Assign the PMRT review and MBRRACE UK surveillance form to the relevant trust(s)/health board(s) within one month of the death.
Invite a representative from the other trust(s)/health board(s) to attend the multi-disciplinary review panel.
95% of reviews started within two months of the death
A minimum of 75% of multi-disciplinary reviews completed and published within eight months of the death
(Technical Guidance Notes 3b, 3d to 3j)
Respond to review/surveillance assignment
Complete the required information, including your review of the care provided by your trust/health board, and return both forms via within two months of receipt.
Ensure a relevant senior clinical member is available to attend the multi-disciplinary review panel meeting led by the organisation where the baby died.
(Technical Guidance Note 3c)
Include an external panel member in your review panel
For least 60% of reviewed deaths, the multi-disciplinary review panel should include an external member with relevant speciality expertise. This must be properly documented in the PMRT.
(Technical Guidance Note 4)
Offer parents/families a feedback meeting with relevant specialists
Summarise the discussion and review findings in a plain language letter to the parents and copied to their GP.
(Technical Guidance Note 5)