



WELC CDOP NEL

Waltham Forest, Tower
Hamlets, Newham, City
and Hackney

Joint Agency Response Meeting (JAR) briefing for practitioners



You have been invited to a Joint Agency Response meeting

- ▶ Please read the following information carefully which explains what the meeting is and why you have been invited.
- ▶ Please reach out to your manager to determine if you are the right person to attend this meeting, attendees may hear some very upsetting information related to the circumstances of the child's death and this should be borne in mind when choosing the practitioner to represent your service at the meeting.
- ▶ If the meeting is online, you may wish to turn off your camera if you are feeling upset or if you need to take a break. Please let the Chair know by raising your hand or writing it in the chat if you are taking a break.
- ▶ Please ensure you have access to support following this meeting



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What should you expect to hear

You should expect to hear highly confidential and distressing information on the events surrounding the child's death.

You should expect to hear highly distressing information on the emergency response and family reactions at the time of the death

You should expect to hear highly confidential information on the child's family health and social history.

You should expect to hear highly confidential information regarding the child's lived experience.

What should you expect to share

You should expect to explain your role and involvement in the child's life

You should expect to be asked to give a high level summary of your involvement with the child, their parents and wider family.

You should expect to be asked questions regarding your interactions with the child and their family.

You should expect your job title and input to be shared with the Coroner (if requested)



What is a Joint Agency Response meeting?

A Joint Agency Response meeting is held if a child's death:

- is or could be due to external causes;
- is sudden and there is no immediately apparent cause;
- occurs in custody, or where the child was detained under the Mental Health Act;
- where the initial circumstances raise any suspicions that the death may not have been natural; or
- in the case of a stillbirth where no healthcare professional was in attendance.

Why have you been invited to the JAR meeting?

You have been identified as a key professional in the child's or family life;

You have been working with the family on a professional basis;

You were involved in the emergency response to the child's death;

You have information on the child and family's health, education and social history

You have a professional responsibility to review and investigate the circumstances of the child's death;

You will be expected to provide support to the wider family

You may be the best person to be the key worker for the family



Information shared based on 4 domains

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Domain A: Factors intrinsic to the child.

- Any known conditions including pre-existing medical or congenital conditions.
- Learning disability or developmental impairment.
- Pre-existing mental health condition.
- Drug or alcohol dependency.
- Social relationship or identity issues.
- Educational issues.
- Behavioural issues.
- Vaccination status if relevant to the death.
- For neonates, maternal health and factors relating to the pregnancy.

Domain B: Factors in social environment including family and parenting capacity

- Family structure and functioning including problems in the family,
- Learning difficulty/disability of parents.
- Provision of basic care (safety, emotional warmth, stimulation, guidance and boundaries, stability).
- Concerns about abuse or neglect - present or past referrals,
- Engagement with health services, any history of 'was not brought.'
- History of parental mental health issues - drug or alcohol misuse, domestic violence or abuse, health beliefs, parental health issues.
- Employment and income, poverty or deprivation.
- Social integration and support.
- Nursey, pre-school, or school.
- Consanguinity.
- Are parents care leavers?



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Domain C: Factors in the Physical Environment

List issues relating to the physical environment the child was in at the time of the event leading to death

Include poor quality housing; overcrowding; environmental conditions; home or neighbourhood safety; as well as known hazards contributing to common childhood injuries (e.g. burns, falls, road traffic collisions).

Domain D: Factors in Service Provision

Services provided to the child and the family

Effectiveness of the services

Any gaps/delays in service

Include any incident notifications/further investigations



Roles

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Education

- Summarise history with school
- Academic abilities and achievements
- Attendance
- Parental engagement
- Any issues with learning, bullying, interactions, communication, friendship groups
- Consider
 - Sibling support
 - Friendship group support
 - Other parents support



Health

- Summarise health history
- Review A&E/urgent care contacts
- Immunisations
- Clinic appointments
- Parental engagement
- Check both parents history with GP
- Impact of parental ill health
- Identify other health involvement





Roles

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Police



- Summarise history with police
- Review any recent contact
- Any concerning history of involvement
- Previous referrals to MASH

Social care



- Summarise social care history
- Previous referrals to MASH
- Engagement with social care
- Child in need/child protection plans/looked after children



Bereavement support

Please share at the JAR any contact with the family since the death?

Planned bereavement support or follow up by your service

Key worker

You may be asked to be the key worker.

All bereaved families should be given a single, named point of contact to whom they can turn for information on the child death review process, and who can signpost them to sources of support.

Key Worker Responsibilities –

- be a reliable and readily accessible point of contact for the family after the death;
- help co-ordinate meetings between the family and professionals as required;
- be able to provide information on the child death review process and the course of any investigations pertaining to the child;
- liaise as required with the coroner's officer and police family liaison officer;
- represent the 'voice' of the parents at professional meetings, ensure that their questions are effectively addressed, and to provide feedback to the family afterwards; and
- signpost to expert bereavement support if required.



Support for you

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Please ensure you reach out for support :-

- Speak to your manager post the JAR
- Liaise with your local safeguarding leads

[Additional resources for professionals - supporting yourself and your colleagues | Child Bereavement UK](#)

Child Bereavement UK Helpline for practitioners 0800 02 88840 or/and email helpline@childbereavementuk.org

Your local safeguarding team contact details:-

Your local child death review leads:-

Bella Lowen
bella.lowen@newham.gov.uk

Nicola Needham
Nicola.needham@newham.gov.uk



Next steps

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Please update the CDR hub on actions you have been assigned in the JAR meeting

(cdr-welc.cityhackney@nhs.net)

Please ensure you review and agree the JAR minutes. Note minutes must not to be uploaded locally.

You will be sent an electronic link to complete a reporting form via eCDOP –your user name will be your e-mail address –should be completed within 14 days of receipt and preferably before the JAR is held – don't forget to review your service provision to the family to identify local learning

You will be invited to a Child Death Review meeting after the JAR on completion of all investigations – please ensure you attend with an update on any involvement with the family post the death

Please contact the key worker with any relevant information

Further information :

<https://www.ncmd.info/guidance/>

<https://www.gov.uk/government/publications/child-death-review-statutory-and-operational-guidance-england>

[Supporting bereaved families | Child Bereavement UK](#)

[When a child dies nhs leaflet - Search \(bing.com\)](#)

<https://sudc.org.uk/>