



## Work Outline

# Infant Mortality

## Health and Social Care Overview and Scrutiny Committee

Our key question:	
1. How is O&S adding value through this work?	<p>Infant mortality is defined as the number of infants who die between 28 days and less than one year. Infant mortality is an indicator of the general health of an entire population. Nationally the rate of infant mortality has been declining steadily since the 2001/03 period but this has not been the trend in Birmingham where the infant mortality rate has <b>not</b> been consistently decreasing and where the rate has consistently been above that of England. This scrutiny inquiry will focus on options for improving the advice and support to families at the pre-conception stage, particularly amongst communities with the highest prevalence of infant mortality. The Enquiry aims to add value by acting as a stimulus to possible interventions which could improve the infant mortality rate in Birmingham.</p>
2. What needs to be done?	<p>Key lines of enquiry:</p> <ul style="list-style-type: none"><li>• Establish the existing data on the infant mortality trend in Birmingham and how that compares to the England trend and other core / comparator cities.</li><li>• Explore national policy/guidance and NHS initiatives relevant to this issue.</li><li>• Undertake an in-depth analysis to reveal the multiple causes of infant mortality and the geographical / demographic variations across the city that highlight the extent of this health inequality.</li><li>• Review the data/analysis on the impact of consanguinity locally and of the current service provision in terms of clinical genetics, genetic testing and counselling for families.</li><li>• Liaise with other regions in England such as Bradford, Sheffield and Tower Hamlets, where there is a high prevalence of consanguinity which have implemented an approach to respond to the increased genetic risk associated with consanguineous marriage.</li><li>• Liaise with community leaders and with local councillors to agree how to explore the public/community perspective of consanguinity and service needs with a culturally sensitive approach.</li><li>• Identify possible interventions which could be undertaken, with a focus on pre-conception advice and support, in order to improve the infant mortality rate in Birmingham and underpin the development of a Birmingham Infant Mortality Strategy.</li><li>• Work with University of Birmingham to undertake a piece of research into infant mortality and consanguinity with a culturally sensitive approach and train local people as community researchers</li></ul>



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3. What timescale do we propose to do this in?	Evidence gathering sessions will be held in xxx and xxx 2020, with a view to taking a report to City Council in xxxxxxx.
4. What outcomes are we looking to achieve?	A report with recommendations to the Executive which identifies an approach/interventions to be discussed and agreed with key partners including community/genetics/antenatal services with the aim of reducing infant mortality across the City.
5. Proposed Witnesses	<p>Birmingham City Council: Cabinet Member for Health &amp; Social Care Cabinet Member for Social Inclusion, Community Safety &amp; Equalities Dr Marion Gibbon, Interim Assistant Director of Public Health Birmingham Child Death Overview Board (Birmingham Safeguarding Children's Board) The Birmingham and Solihull United Maternity and Newborn Partnership (BUMP) – Local NHS Acute Trusts who provide maternity care. Public Health England Representatives of relevant faith communities within the City. Community and voluntary sector family health advice and support agencies with the City. Birmingham University re proposed research project into Infant Mortality and consanguinity.</p>