

**Health & Social Care O&S Committee**  
**Infant Mortality**

**Session 1: 8<sup>th</sup> December 2020 – 1420-1700hrs**  
**Via Microsoft Teams**

**Purpose:** The key question and aim of the inquiry is to 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 inquiry aims to add value by acting as a stimulus to possible interventions which could improve the infant mortality rate in Birmingham.

**Meeting type:** Public meeting live-streamed via the internet.

<b>Time</b>	
1420-1425	Welcome & introduction by Chair, Councillor Rob Pocock
	<b>KEY LINE OF ENQUIRY / PRESENTERS</b>
1425-1445	Establish the existing data on the infant mortality trend in Birmingham and how that compares to the England trend and other core/comparator cities.  <b>Marion Gibbon</b> – Assistant Director of Public Health, Birmingham City Council <b>Laura Griffith</b> – Public Health England
1445-1505	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.  <b>Richard Kennedy</b> – Medical Director, Birmingham Local Maternity System <b>Jo Garstang</b> – Designated Doctor for Child Death, Birmingham Community Healthcare NHS Trust
1505-1525	Explore national policy/guidance and NHS initiatives relevant to this issue.  <b>Ernestine Diedrick</b> – Senior Commissioning Manager, Children’s and Maternity Commissioning Team, Birmingham and Solihull CCG  Supported by:- <b>Angela Brady</b> – Deputy Chief Medical Officer, Birmingham and Solihull CCG <b>Helen Jenkinson</b> – Chief Nurse, Birmingham and Solihull CCG <b>Di Rhoden</b> – Associate Director of Nursing – Safeguarding, Birmingham and Solihull CCG <b>Dr Richard Mendelsohn</b> – Chief Medical Officer, Birmingham and Solihull CCG
1525-1545	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.  <b>Julie Vogt</b> – Consultant Clinical Geneticist, Birmingham Women’s and Children’s NHS Foundation Trust

1545-1605	<p>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.</p> <p><b>Professor Sarah Salway</b> – Professor of Public Health, University of Sheffield.</p>
1605-1625	<p>Liaise with community leaders and with local councillors to agree how to explore the public/community perspective and service needs with a culturally sensitive approach.</p> <p><b>Dr Qulsom Fazil</b> – University of Birmingham</p>
1625-1655	<p>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.</p> <p>Research into infant mortality and consanguinity with a culturally sensitive approach and train local people as community researchers.</p> <p><b>Marion Gibbon</b> – Assistant Director of Public Health, Birmingham City Council</p>
1655-1700	<p>Closing Statement from Councillor Rob Pocock</p>