

HEALTH AND WELLBEING BOARD



TO:	Health and Wellbeing Board
FROM:	Linda Clegg, Director of Children's Services Dominic Harrison, Director of Public Health
DATE:	February 2017

SUBJECT: Update on the Sector Led Improvement Review for Infant Mortality and its recommendations

PURPOSE

1. To provide an update on the recent North West Sector Led Improvement Review on Infant Mortality.
2. To provide assurance that the recommendations from the Review are being actioned via the Director of Public Health and/or the Chair of the Local Safeguarding Children's Board (LSCB), as appropriate.

2. RECOMMENDATIONS FOR THE HEALTH & WELLBEING BOARD

1. Note the local arrangements that are in place to reduce infant mortality.
2. Note the local arrangements put in place to respond to the recent North West Sector Led Improvement Review on Infant Mortality
3. Receive an update in 12 months' time on the progress from the North West Sector Led Improvement Review on Infant Mortality recommendations.

3. BACKGROUND

Historically, rates of deaths in the first year of life (infant mortality) have consistently been significantly higher than the regional and national average in Blackburn with Darwen. In 2013, a local review of how best to deliver this priority for children's health and wellbeing took place across Blackburn with Darwen and, East Lancashire (where there are similar outcomes in Pendle and Burnley). From the local intelligence on infant mortality and to align with both commissioner and service provider geographical areas, a Pennine Lancashire approach was agreed to reduce infant mortality. This proposal was supported by the Public Health Directors for Blackburn with Darwen and the East Lancashire Locality, by both East Lancashire and Blackburn with Darwen Clinical Commissioning Groups (CCGs), East Lancashire Hospitals Trust (ELHT), who provide Maternity and Paediatric services and Lancashire Care Foundation Trust (LCFT), who provide Health Visitor Services, both across Pennine Lancashire.

The Pennine Lancashire Infant Mortality Group continues to meet to work together to reduce infant mortality via an agreed Framework for Action, which is underpinned by:

- On-going analysis of infant mortality data and intelligence to inform developments.
- An assets based approach, building on strengths and co-production (where service users, carers, service providers come together to find a solution and co-design the services).
- Consideration and application of evidence based practice and benchmarking e.g. Born in Bradford study.
- Impact of the wider determinants of health on infant mortality and how this can be addressed e.g. education, housing, employment.

The Priorities within the Framework are as follows: Smoking in Pregnancy; Infant Feeding; Safer Sleeping; Social Needs Assessment; Maternal Healthy Weight; Family Genetics; Maternal Mental Health; Awareness raising for wider partners, which were prioritised based on the above principles.

4. RATIONALE

In 2016, GM Public Health Network (GMPHN) alongside partners in Cheshire and Merseyside and Cumbria and Lancashire secured Association of Directors for Public Health (ADPH) funding as part of the regional Sector Led Improvement (SLI) network plan. This presented an exciting opportunity for Local Authorities and partners to participate and collaborate on an inter-disciplinary review across the North West on infant mortality of which 22 of the 23 North West localities took part. A stakeholder project group was established to oversee the development, implementation and evaluation of the review process.

Peer Review Sector-led improvement is based on a culture of collaborative working, sharing good practice, constructive challenge and learning. It is based on the principles of mutual support and assistance, involving a discrete process of self-assessment and peer review. It is sustainable through collective action, peer support and strategic leadership.

The Review focussed on child deaths aged under one year; this age range accounts for around two thirds of all child deaths both locally and nationally. The scope included key modifiable factors such as maternal smoking, co-sleeping, safeguarding consisting of abuse and neglect, drug and alcohol misuse, consanguinity and obesity (plus other factors).

The aim of the review was to:

- i. Adopt an agreed SLI methodology to review action to reduce infant mortality as part of a peer review approach. The process included identifying activity which is in place to reduce deaths for those children aged under one year old, with a particular focus on modifiable factors.
- ii. Taking an appreciative enquiry approach to identify places where actions have resulted in improved outcomes and share the learning.
- iii. Identify key themes and recommendations at LA, sub-regional and North West levels.
- iv. Outcomes of the review to provide potential opportunities for collaborative work programmes which may include commissioning.
- v. Enable sharing of good practice and innovation to aid mutual support and drive improvement in outcomes.
- vi. Identify any gaps in data and intelligence and provide recommendations for Child Death Overview Panels (CDOPs).
- vii. Produce an action plan for Local Area Safeguarding Children and Adult Boards who will be responsible for oversight and implementation.

From the Review, there were 30 recommendations for the Regional level, and 22 recommendations for the Individual Localities. The overall ask was to:

- Consider and agree how the locality recommendations should be translated into local action plans.
- Agree the governance and accountability arrangements to assure implementation of locality recommendations.
- Provide an annual update on implementation progress to the LSCB, Health and Wellbeing Board (HWBB) and local CDOP.

For Blackburn with Darwen, the recommendations for the Individual Localities are to be incorporated into the Pennine Lancashire Framework. The majority of the recommendations are already within the local framework and progress is presented in Appendix 1.

For Blackburn with Darwen, the governance and accountability for Infant Mortality is the Health and Wellbeing Board via the Children's Partnership Board and, the Borough's LSCB.

An update on progress of the Individual Localities will be reported in 12 months to the Pan Lancashire CDOP.

5. KEY ISSUES

A number of actions via recommendations were identified from the Review; of which 22 were identified for Individual Localities. Appendix 1 outlines all of the Individual Locality Recommendations and provides a brief summary of status, and the recommendation for the next steps.

Please refer to Appendix 1 for the summary of actions / recommendations.

6. POLICY IMPLICATIONS

This Review aligns to our local policy and priorities and strengthens the work that is already progressing across the Borough to reduce Infant Mortality.

7. FINANCIAL IMPLICATIONS

There are no financial implications with the outcomes of the Review and its recommendations.

8. LEGAL IMPLICATIONS

There are no legal implications with the outcomes of the Review and its recommendations.

9. RESOURCE IMPLICATIONS

There are no resource implications with the outcomes of the Review and its recommendations.

10. EQUALITY AND HEALTH IMPLICATIONS

There are no equality and health implications with the outcomes of the Review and its recommendations.

11. CONSULTATIONS

There are no further consultations required as the Review took an appreciate enquiry approach and was gathering good practice / consultations within the Review.

VERSION:	Ver 0.4
CONTACT OFFICER:	Helen Lowey, Consultant in Public Health, Blackburn with Darwen Borough Council
DATE:	06 / 02 / 2017
BACKGROUND PAPER:	Appendix 1 Sector Led Improvement (SLI) Infant Mortality: Recommendations for individual localities Sector Led Improvement Review: Infant Mortality

