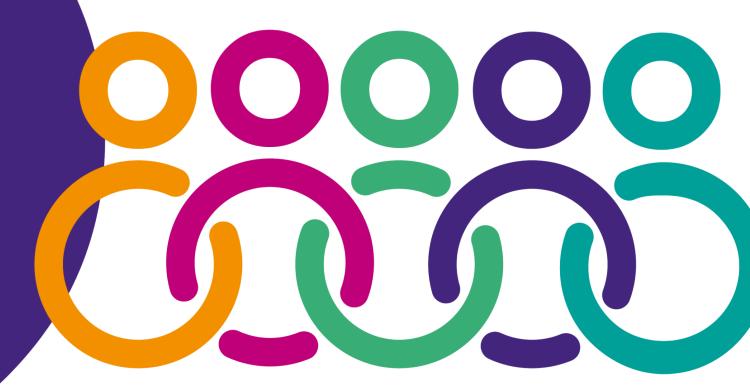
Child Death Overview Panel:

annual report 2021/22 and 2022/23

Sarah Exall Abbie Wild Bradford District and Craven Health and Care Partnership Healthy minds



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The death of a child is a profoundly devastating event which affects parents, siblings, and communities. The Bradford Child Death Overview Panel treats every death reviewed with respect and compassion, and this report is dedicated to all families, friends and loved ones of the children and young people in this report.



Background

Deaths occurring in Bradford 2008/09 to 2022/23

Deaths reviewed by Bradford CDOP 2019/20 to 2022/23

Actions

Recommendations

Discussion



Background







Multi-agency group first established in 2008 by the Bradford Safeguarding Children Board



Systematically reviews all deaths in children and young people from birth up to the age of 18 years in order to understand how and why children die in the district.



Looks for modifiable factors where shared learning could reduce the chances of a recurrence of the circumstances around that death.

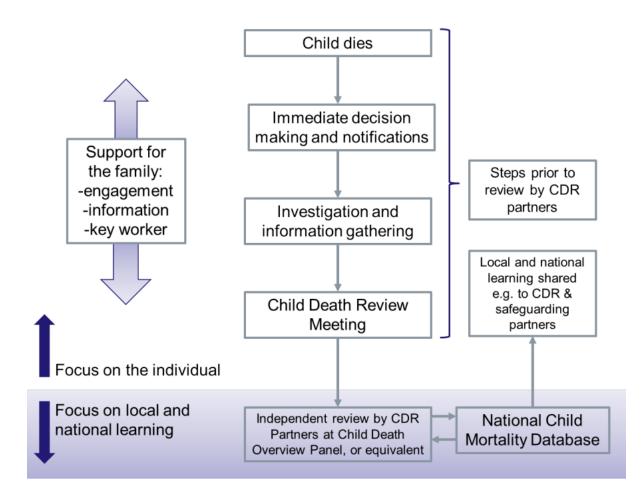


Governance and operation is based on statutory guidance set out in "Working Together to Safeguard Children"



Review process

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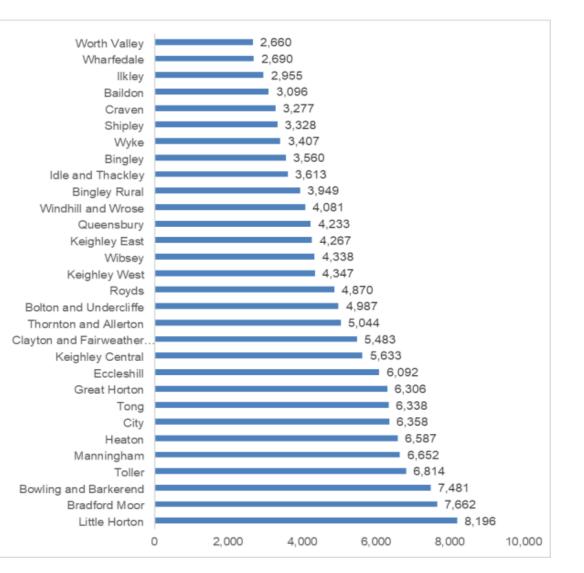
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Child population of Bradford district

Bradford is the seventh largest local authority in England in terms of population size.

Bradford has the 3rd highest number of 0-15 year olds in the country, at 117,100.

In 2021, it was estimated they were 148,291 children and young people in the Bradford district aged between 0–18 years.



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Deaths occurring in Bradford 2008/09 to 2022/23

Number of deaths of children and young people occurring between 2008-09 to 2022-23, in Bradford

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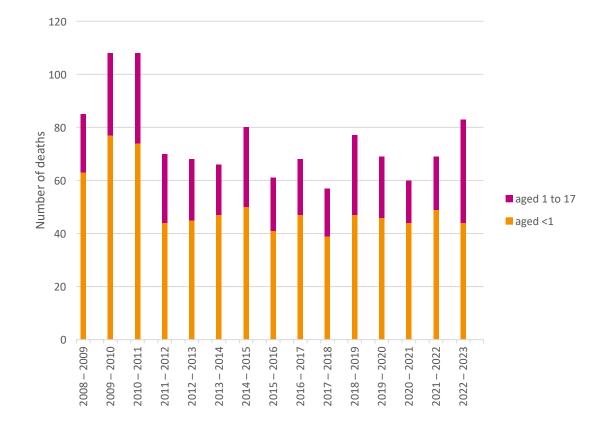
In 2022-23, 84 deaths occurred among children from birth to 18 years of age.

There was a small increase in the number of deaths compared to the previous few years.

Recent paper found that in England:

- Child mortality fell during 2020/21,
- In 2021/22 child mortality returned almost to pre-pandemic levels
- However, following the pandemic, the risk of death for older children, particularly due to trauma, increased above pre-pandemic risk.

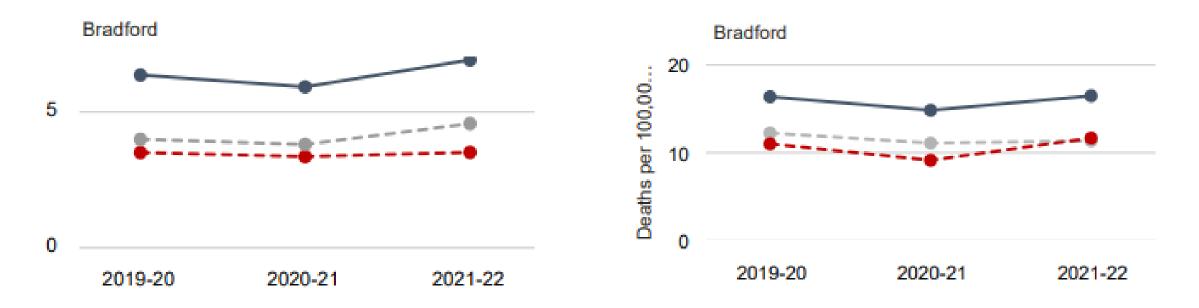
Number of deaths of children and young people occurring between 2008-09 to 2022-23, in Bradford





Rate of infant and child deaths in Bradford compared to the region

Rate of infant (less than 1 year) deaths per 1000 live births in Bradford, Yorkshire and the Humber, and England, 2019/20 to 2021/22 Rate of deaths per 100,000 population of children aged 1-17 years in Bradford, Yorkshire and the Humber, and England, 2019/20 to 2021/22



Deaths per 1,000 live births (CDOP) Deaths per 1,000 live births (all other regions) Deaths per 1,000 live births (your region)

Deaths per 100,000 population (CDOP) Deaths per 100,000 population (your region) Deaths per 100,000 population (all other regions)

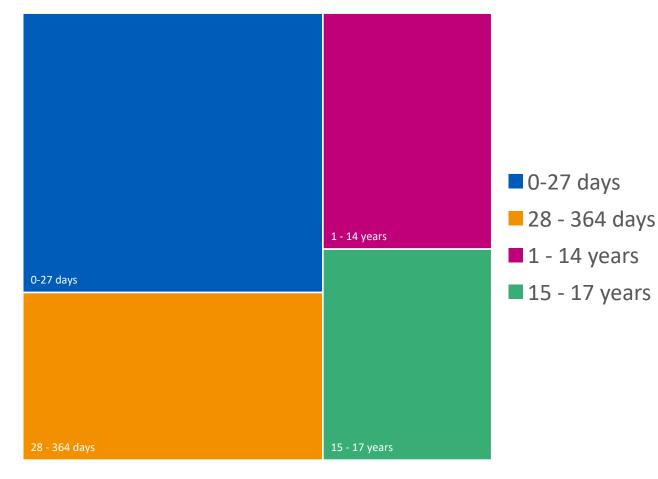


Deaths reviewed by Bradford CDOP 2019/20 to 2022/23



Age, sex and gestational age

Age at death of children reviewed by Bradford CDOP 2022 - 2023



Of children reviewed by CDOP in 2022/2023, 55% were male and 45% were female

The majority (64%) were aged less than 1 year of life

In Bradford, 22.5% of infants (below 1 year of age) who died over the three year period from 2019 to 2022 were born at 23 weeks gestation and below; 38.8% were born between 24-36 weeks; and 38.8% were born at 37 weeks or above.

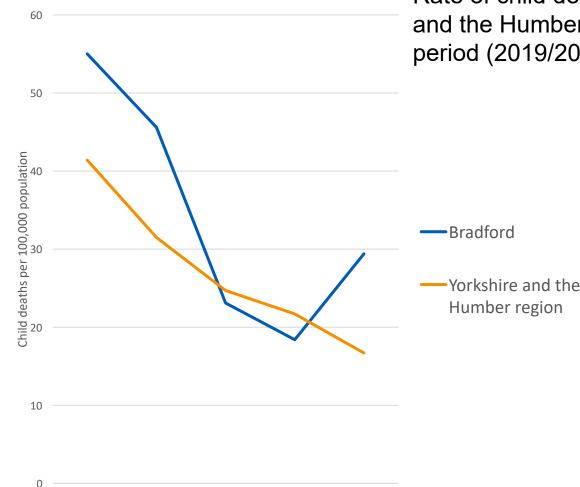
Deprivation

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IMD guintile (1 = most deprived nationally, 5 = least deprived nationally)

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Rate of child deaths per 100,000 population in Bradford and Yorkshire and the Humber by socioeconomic deprivation (IMD quintile), 3 year period (2019/20 to 2021/22)

> Strong correlation nationally between deprivation and the risk of childhood death for most causes of death: a relative 10% increase in risk of death between each decile of increasing deprivation.

> There was no evidence of an association between deprivation and the risk of death by trauma and suicide, or malignancy.

Ethnicity

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Ethnicity	2019-20	2020-21	2021-22	Total
Asian				
Number of deaths	47	37	55	139
Deaths per 1000 live births (your region)	6.5	5.0	7.4	6.3
Deaths per 1,000 live births (all other regions)	5.0	4.0	4.9	4.7
Black				
Number of deaths	9	8	11	28
Deaths per 1000 live births (your region)	5.5	4.9	6.7	5.7
Deaths per 1,000 live births (all other regions)	5.9	5.9	6.6	6.1
Mixed				
Number of deaths	15	7	11	33
Deaths per 1000 live births (your region)	5.5	2.7	4.3	4.2
Deaths per 1,000 live births (all other regions)	3.0	3.2	3.8	3.3
Other	í			7
Number of deaths	i l			10
Deaths per 1000 live births (your region)	i l			2.4
Deaths per 1,000 live births (all other regions)	i l			3.1
White	1			
Number of deaths	118	121	149	388
Deaths per 1000 live births (your region)	2.7	3.0	3.6	3.1
Deaths per 1,000 live births (all other regions)	2.7	2.7	3.0	2.8

Total number/rate of infant (under 1 year) deaths by ethnicity in Yorkshire and the Humber ("your region") compared to "all other regions" in England, 2019/20 to 2021/22 57% of children reviewed in 2022/23 by CDOP were of Asian or Asian British ethnicity, compared to 46% of all children in Bradford District.

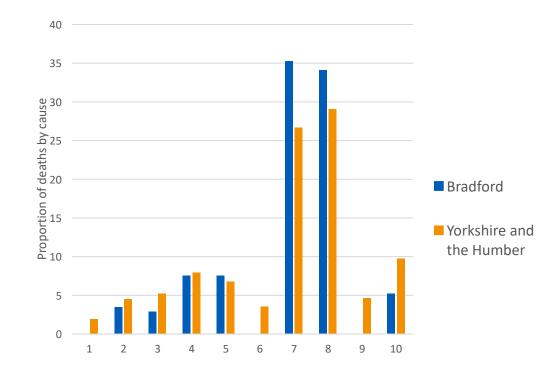
A smaller proportion of children from white backgrounds were seen compared to the proportion of children in the district.

Regional and national data can explore inequalities in death rates by ethnicity in more detail.

Causes of death for deaths reviewed 2019 to 2022

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Proportion of child deaths reviewed between April 2019 and March 2022 from different causes, Bradford and the region (numbers under 5 have been redacted)

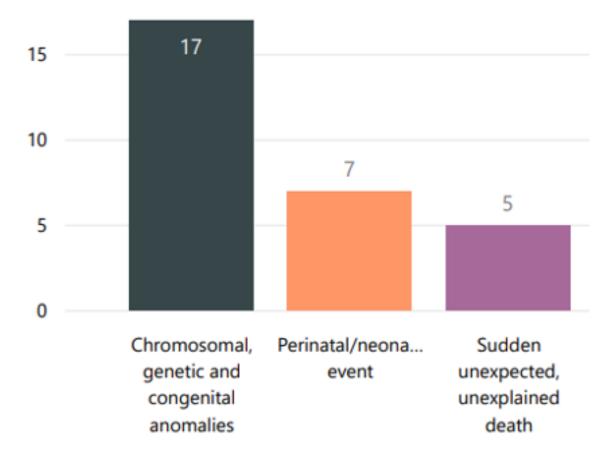
Category 1 = Deliberately inflicted injury, abuse or neglect
Category 2 = Suicide or deliberate self-inflicted harm
Category 3= Trauma and other external factors, including medical/surgical complications/error
Category 4= Malignancy
Category 5 = Acute medical or surgical condition
Category 6 = Chronic medical condition
Category 7 = Chromosomal, genetic and congenital anomalies
Category 8 = Perinatal/neonatal event
Category 9 = Infection

Category 10 = Sudden unexpected, unexplained death

Causes of death for deaths reviewed 2022/23

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Causes of death for children reviewed by CDOP 2022/23 in Bradford (numbers below 5 have been excluded)

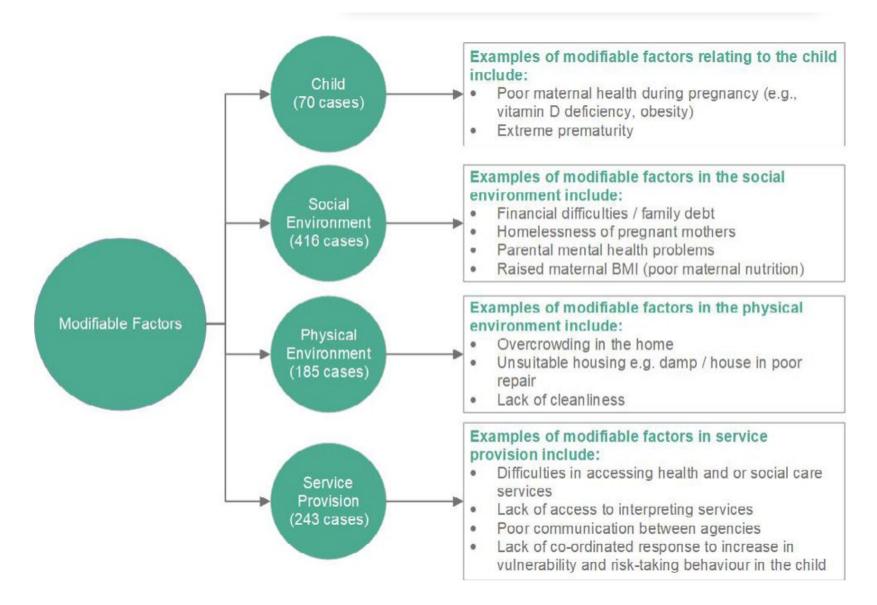


Modifiable factors

Of cases reviewed in 2022/23 by Bradford CDOP, modifiable factors were identified in 31%. This is lower than the England average of 39%.

In Bradford over the last two years, modifiable factors related to the following themes were identified:

- Factors related to co-sleeping and/ or the sleeping environment
- Factors related to the safety of the child's general environment
- Factors related to the control of long-term conditions of the child
- Factors related to maternal health in pregnancy



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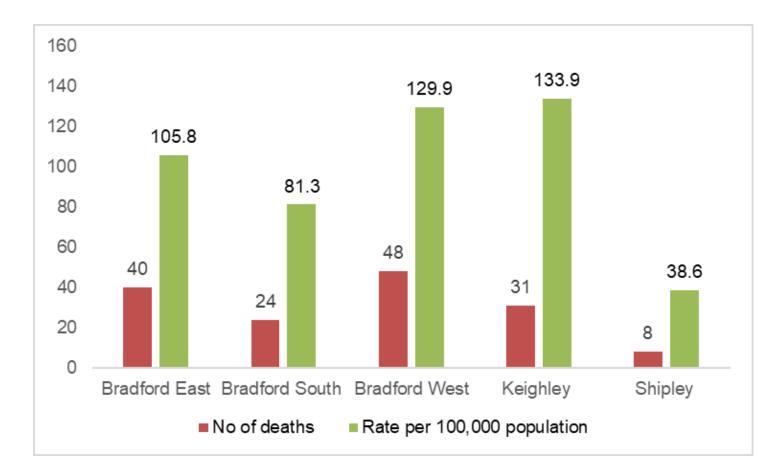
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Numbers and examples of modifiable factors identified by the 2021 NCMD report



Geographical distribution of deaths reviewed by CDOP, 2021/2022 to 2022/2023





Actions



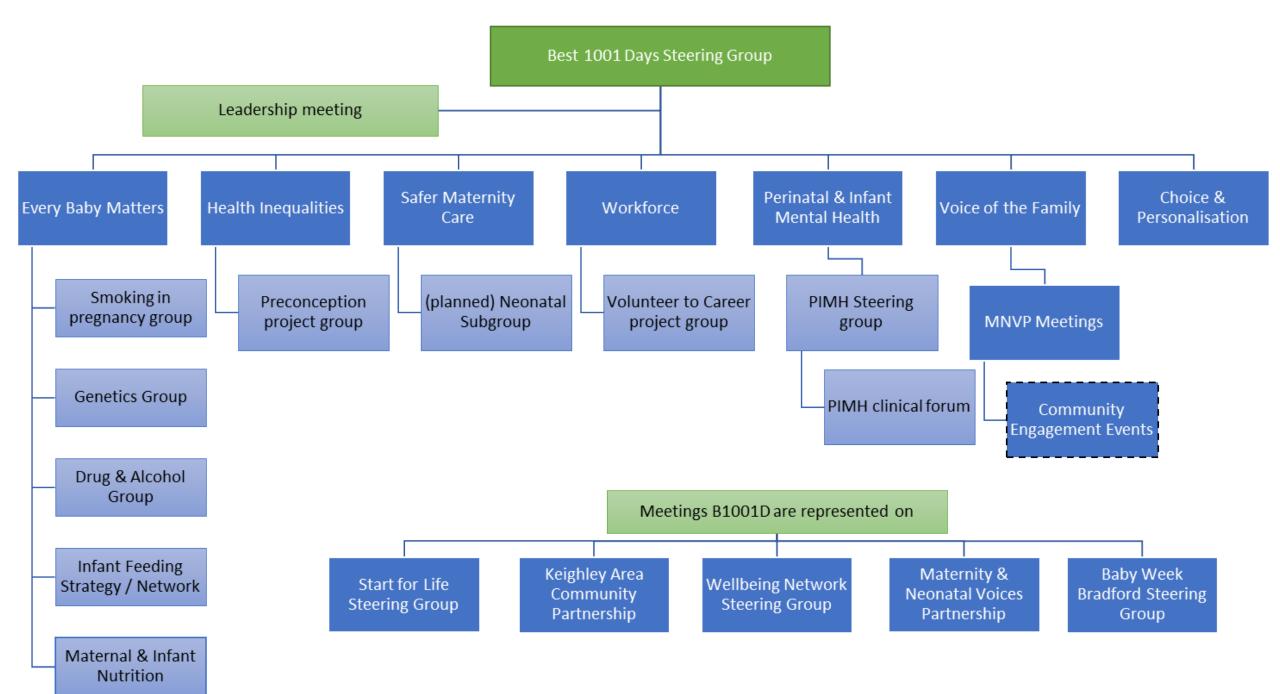
Best 1001 Days: Workstream Overview

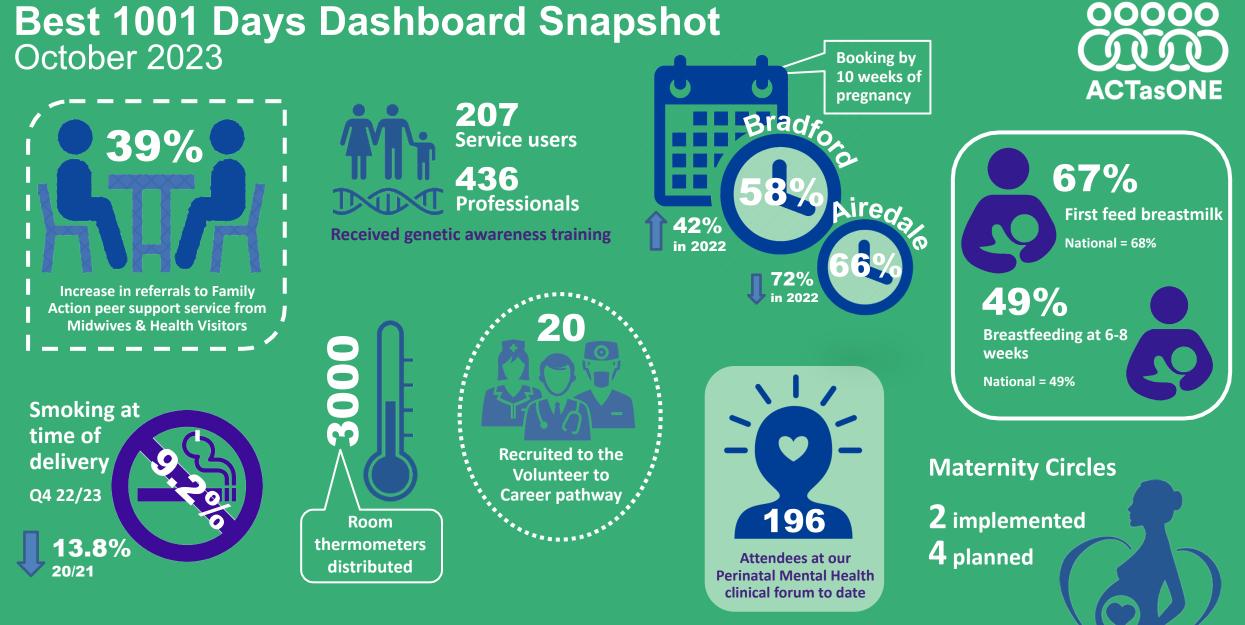


The Best 1001 days programme is pillar 1 of the Healthy Children & Families priority for Bradford District & Craven. We work collaboratively across sectors and organisations, to achieve our vision:

"Working together to improve experiences & outcomes for pregnancy, birth & beyond across Bradford District & Craven"







"Working together to improve experiences & outcomes for pregnancy, birth & beyond across Bradford District & Craven"

Health Inequalities & the 1st 1001 Days



Black, Asian and mixed ethnicity women are up to FOUR TIMES more likely to die in pregnancy



Stillbirth is TWICE as likely in the most deprived areas





73%

Neonatal death is 73% HIGHER in the most deprived areas



Women in the most deprived areas 2.5 times more likely to die than those in the least deprived areas.

Every Baby Matters & Health Inequalities

"To ensure every woman is 'fit for pregnancy' and every baby has the best start to life with a focus on reducing health inequalities."



How Hope 4 U helped a family

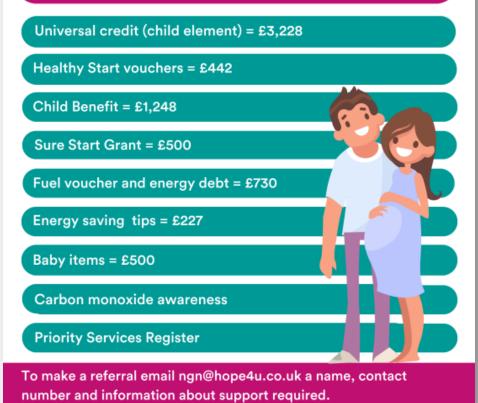
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Bradford District and Craven

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Hope 4 U offers expectant and new parents in Bradford District and Craven financial advice over the phone. Any professional can refer, or families can refer themselves.

Hope 4 U helped this family access financial support to the value of £6,917.50.



Hope 4 U Initiative

- Available to all expectant and new parents across the district
- Telephone support with interpreting if required to enable families to access financial assistance
- To Date approximately 300 families have received support to the value of over £350k



Safe Sleep





- Around 70 health professionals and partners who work with parents and carers of babies aged 0-12 months joined the Every Sleep a Safe Sleep 'train the trainer'
- 3000 Room Thermometers distributed during the winter months along with cost of living booklets
- Safe beds, bedding and safety equipment delivered to over 800 families via Bradford Baby Bank on referral from a healthcare professional
- Safe sleep video created in collaboration with parent education teams, to date has been viewed 697 times







Genetic Awareness

RIC project – Genetics in Communities.

Training workshops ongoing:



• 207 Health Professionals & 436 Members of the community have received training and information to raise genetic literacy to date

NHSE - Culturally Competent Genetic Services Project:

• Genetic project support administrator at Womenzone, Close relative marriage support worker at Bevan and close relative marriage midwife to work across both trusts.

Close links to preconception initiative.





Preconception Initiative





An inclusive Health and Wellbeing Project by Bevan



- Successful bid for funding for LMNS innovation project
- Collaboration with Bevan Healthcare to extend and upscale their Starting Well initiative "1 Key Question" co-produced with vulnerable service users
- Focus on areas of need identified using health inequalities dashboard

Cultural competency

6 Individuals from across place have completed train the trainer:

- VCS
- BTHFT
- Council
- BSB
- Breastfeeding Strategy

These individuals will be able to deliver sessions as soon as they have completed the training. They are provided with a training package and there is the option to individualise the content to suit the cohort receiving the training.



Suicide Prevention Action Group



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Recent activity:

- Development of our surveillance strategy
- Distribution of grants to support suicide prevention
- Suicide prevention campaign via local sports teams
- A new self-harm and suicide prevention group for children and young people has been established at West Yorkshire level, with Bradford public health team a part of the group.
- Training for system partners
- Community mental wellbeing grants

Next steps:

- A "grab bag" style set of guidelines are in development to support schools in the event of a suicide
- Review of current local policy and national guidelines for professionals working with children and young people who have self-harmed
- A children and young people's mental health needs assessment is underway
- A further round of wellbeing grants is being planned for next year with a specific focus on children and young people
- A sleep campaign is being planned for next year aimed at children and young people, families and adults.



Recommendations



Environmental risk factors:

1. Services and planners of services should work together to ensure that families with children have opportunities to access all the financial assistance they are eligible for.

2. Ensure that women have good access to pre-conception health advice. This should not be limited to women seeking medical advice, but should be available to all women, regardless of pregnancy status.

Service provision:



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3. Ensure that children and families in more socioeconomically deprived parts of Bradford have good access to services including maternity, health visiting, school nursing, social care, and education. This may include considerations of timing, location and transport to services, and of the language, both written and spoken, used to communicate messages and information to families.

4. Continue, learn from, and expand on the current work to increase cultural competency of the maternity and children & young people's workforce, with the aim to ensure that children and families from ethnic minority backgrounds have equitable access to culturally competent services.

5. Services and organisations must work to identify needs of children and families, and to refer to appropriate services as needed. Strong partnership working and referral pathways between services will be key to this.

6. CDOP must ensure strong partnerships with the Bradford Children's Trust and with the Safeguarding Partnership, and that the bodies are sighted on the findings and recommendations set out in this report.

Individual risk factors:



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7. Work through schools, colleges and communities to educate children and young people on safety messages should be undertaken. This may include information on swimming safely, road safety, drug and alcohol messaging, and general hazard awareness.

8. Links should be strengthened between the suicide prevention board and the CDOP panel.

9. Continue the work on genetic literacy and culturally competent service provision through the Every Baby Matters steering group.

Individual risk factors continued:



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10. Promote universal messaging for all new parents on safe sleep. This should be consistent across services and professionals to ensure that advice is the same, whoever is delivering it.

11. Provide advice for parents on safety in and outside of the home.

Process:

12. The terms of reference and operation of CDOP should be regularly reviewed to guarantee continual quality improvement of the process, and to ensure that the meeting continues to model best practice.



Discussion

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