

Report to: The Health & Wellbeing Board

Date: 16/10/2020

Report of: The Director of Public Health

CLT Lead: Eleanor Roaf, Director Public Health Trafford

Report Title: Greater Manchester Child Death Overview Panels (CDOP) QES eCDOP Proposal

Report Summary:

Local Health and Wellbeing Boards are accountable for review of child deaths through CDOP processes. This report describes the purpose and benefits of the QES eCDOP system for local CDOPs. Two procurement options are identified one for local CDOPs to procure the system or a GM procurement model. Funding is available for this system through the Public Health CDOP budget.

Recommendations

1. Note the benefits of investing in the eCDOP system to support the tripartite CDOP arrangements locally.
2. To agree that the STT CDOP can progress the most efficient procurement process for the system, whether through a GM wide or a STT approach, at an estimated annual cost of £7300.

Contact Officer:

Name: Helen Gollins, Deputy Director of Public Health, Trafford & Stockport, Tameside and Trafford CDOP chair.

Tel: 07817951555

Email: helen.gollins@trafford.gov.uk

GREATER MANCHESTER CHILD DEATH OVERVIEW PANELS (CDOP) QES eCDOP Proposal

1. Background

In line with Working Together to Safeguard Children (2006), the Child Death Overview Panel (CDOP) became a statutory function from 1st April 2008. Local Safeguarding Children Boards (LSCBs) were tasked with establishing a multi-disciplinary CDOP Subgroup to conduct a review into the death of all children 0-17 years of age, normally resident in their geographical area. Following government recommendations that CDOPs cover a population of at least 500,000, four CDOPs were established across Greater Manchester which were implemented in conjunction with local coronial jurisdictions:

- Manchester CDOP
- Bolton Salford & Wigan CDOP
- Tameside, Trafford & Stockport CDOP
- Bury, Rochdale & Oldham CDOP

2. Child Death Review: Statutory & Operational Guidance (England) 2018

In October 2018, HM Government published the revised Child Death Review: Statutory and Operational Guidance (England) for clinical commissioning groups and local authorities as child death review partners. The guidance sets out the full process that follows the death of a child who is normally resident in England and builds on the statutory requirements set out in Working Together to Safeguard Children (2018). The revised guidance clarifies how individual professionals and organisations across all sectors, involved in the child death review process, contribute to reviews in order to improve the experience of bereaved families and professionals involved in caring for children. The aim of the child death review process is to ensure that information is systematically captured for every death to enable learning and prevent future deaths.

3. National Child Mortality Database (NCMD)

The National Child Mortality Database (NCMD) is a repository of data relating to all children's deaths in England. As of the 1st April 2019, it became a legal requirement that CDOPs across England submit data via the National Child Mortality Database, from all completed Department of Health and Social Care (DHSC) CDOP templates, forms associated with the child death review process and the analysis of information about the deaths reviewed. This includes, but is not limited to, providing all data and information as collated using the national DHSC CDOP templates such as the Notification Form (Form A), the Reporting Form (Form B), additional Supplementary Reporting Forms and the Analysis Form (Form C). CDOP data submitted to the NCMD has supported a number of national reviews including:

- Report on Child Suicide during the COVID-19 Pandemic in England¹
- Out of routine: A review of sudden unexpected death in infancy (SUDI) in families where the children are considered at risk of significant harm²

Whilst the Greater Manchester CDOPs welcomed the introduction of the NCMD, to support and identify local and national learning, this impacted heavily upon CDOP administrative functions and the time taken to manually input all of the requested NCMD data requirements for cases closed whilst maintaining NCMD live records for every child death notification.

4. QES eCDOP

4.1 eCDOP & National Child Mortality Database (NCMD)

The software company QES placed a bid for the national tender and was appointed as technical providers to develop and host the NCMD. QES developed a supporting CDOP case management and reporting system known as eCDOP. The eCDOP system uses the statutory DHSC child death review templates and process from the Working Together guidance to assist CDOPs and ensure

¹ <https://www.hqip.org.uk/resource/national-child-mortality-database-report-on-child-suicide-during-the-covid-19-pandemic-in-england/>

² <https://www.gov.uk/government/publications/safeguarding-children-at-risk-from-sudden-unexpected-infant-death>

compliance. The system is known for improving efficiencies throughout the multi-agency information gathering/sharing process, having proven to significantly reduce CDOP administrative duties and the time taken to process each child death.

The eCDOP system automatically transfers multi-agency data at each relevant stage of the process into the NCMD therefore reducing the duplication of data entry. Over 1000 data entry fields auto-populate directly into the NCMD which significantly reduces double data entry and prevents CDOPs having to do update NCMD records manually. The information is then used to analyse data nationally in order to improve learning and implement strategic improvements in healthcare for children in England, with the overall goal to reduce infant/child mortality.

4.2 eCDOP & Local CDOP Functions: Case Management

eCDOP also supports local CDOP arrangements by providing case management facilities which eliminates the completion of paper based CDOP templates. All child death notifications and agency checks are performed electronically via eCDOP and information is transferred safely and securely. Clinicians and practitioners would no longer be required to complete CDOP templates which are currently exchanged via email, all information and data would be reported via eCDOP, automatically populating the NCMD as a live real time dataset.

Additional eCDOP features, stemming from the child death review guidance changes, have also been incorporated such as the consolidation of multi-agency agency information, the anonymisation of case details prior to presentation at CDOP and the availability to host CDRMs, Joint Agency Response and CDOP meetings using a single system.

4.3 eCDOP Benefits

The eCDOP business case benefits include:

- **CASE PROGRESSION:** eCDOP improves the efficiencies for local CDOPs end to end standardised case management
- **REPORTING:** eCDOP automatically and securely transfers data to the NCMD
- **AUDITING:** Easy access to case information and managing user activity
- **REAL TIME DATA:** Dashboard organisation of cases displaying the number of CDOP cases open, closed, duration and statistical reports
- **CHILD DEATH THEMES:** Identifying trends quickly and allowing CDOPs to take action
- **IT SUPPORT:** No local IT support required for CDOP Managers and partner agencies. QES provide a virtual hub to coordinate information gathering
- **PRODUCT:** Regular updates and releases conducted out of hours with pre-release notes; benefitting from new functionality. eCDOP is constantly adapting to support requests from local CDOPs and the NCMD
- **SUPPORT:** Users have access to the QES Service Desk, with a dedicated Account Manager, training provided via the eLearning Portal and CDOP assistance with transition to eCDOP
- **SECURE AND GDPR COMPLIANT:** No sensitive data is transferred via email, ensuring data is protected and highly secure
- **DATA:** Fully hosted, maintained and supported
- **INCLUSION IN USER GROUP:** Sharing ideas and benefiting from other CDOPs
- **TRIED AND TESTED:** Over 85% of CDOPs across England have purchased eCDOP

5. CDOPs (ENGLAND) USING eCDOP

5.1 Following the implementation of the NCMD, there has been an increase in the number of CDOPs purchasing eCDOP, with 85% of CDOPs across England using the system. 128 local authorities in England are currently using eCDOP including the London LSPs and is recommended by the Healthy London Partnership.

6. COST

6.1 The QES national pricing model for the eCDOP system is based on the number of child death cases closed per year as published by the Department for Education (DfE)³. The most recent DfE published report covers the 2016/17 period with Greater Manchester CDOPs closing a total of 224 cases. QES have agreed to price the proposal based on the average number of deaths reviewed between, the last published DfE 2016/2017 Child Death Report (224 cases closed) and the last published 2018/2019 Greater Manchester CDOPs Annual Report (204 cases closed). This provides a Greater Manchester average of 214 cases closed per year. QES have based the cost calculations on the average of 214 cases closed per year and provided two purchase options:

OPTION 1: Four separate eCDOP systems individually supporting each of the four CDOPs

OPTION 2: One single joint Greater Manchester eCDOP system supporting the 10 local authorities

6.2 Option 1: Four Local eCDOP Systems

Option one is based on the four CDOPs using four separate eCDOP systems. The eCDOP systems would not be linked to each other in any way. The four CDOP Managers would be the site administrators of the individual eCDOP system for their CDOP area only and would not be able to access data from other CDOP areas. For example: The Manchester CDOP Manager could only view Manchester child death cases, data and reports. The total cost per CDOP area is:

CDOP Area	Average Cases Closed	eCDOP Cost
Bury, Rochdale & Oldham CDOP	50.5	£8,141
Stockport, Tameside & Trafford CDOP	43.5	£7,305
Bolton, Salford & Wigan CDOP	64.5	£9,813
Manchester CDOP	55.5	£8,977
Total	214	£34,236

NB: Costings are excluding VAT and are annual.

6.3 Option 2: One Joint Greater Manchester eCDOP System

Option two is based on one single joint eCDOP system supporting the four CDOPs/ten local authorities within Greater Manchester. This would involve all ten Greater Manchester areas using one eCDOP system which will allow for collaborative themed panel meetings, and the option to view reports on an individual CDOP areas, multiple CDOP areas or at a Greater Manchester level which would support the produce of the Greater Manchester CDOP Annual Report. Within this option, there is the functionality to add restrictions to what administrators of the site can see. Multiple CDOP Managers can see information from across the whole of Greater Manchester, or alternatively visibility can be restricted to ensure the CDOP Managers only have sight of case details for their CDOPs geographical area(s). Regardless of the security set up, CDOP Managers will still be able to access both local CDOP and Greater Manchester CDOPs statistical data, reporting and joint themed panel meetings as required.

The cost of one Greater Manchester eCDOP system is: **£28,811**

CDOP Area	eCDOP Cost
Bury, Rochdale & Oldham CDOP	£7,202.75
Stockport, Tameside & Trafford CDOP	£7,202.75
Bolton, Salford & Wigan CDOP	£7,202.75
Manchester CDOP	£7,202.75
Total	£28,811

NB: Costings are excluding VAT and are annual.

³ <https://www.gov.uk/government/collections/statistics-child-death-reviews>

6.4 Local Funding Arrangements

Each of the three Safeguarding Boards affiliated to the STT CDOP contribute to the annual operational costs. The budget supports the CDOP administrator and up until May 2019 the independent chair of the panel. However, the chairship is being provided by Trafford Public Health, this is on a two year rotational basis with the other boroughs. Therefore the funding not being claimed against the chairing role will be redirected to eCDOP.

7. Recommendations

It is recommended that the Health and Wellbeing Board:

- Note the benefits of investing in the eCDOP system to support the tripartite CDOP arrangements locally.
- To agree that the STT CDOP can progress the most efficient procurement process for the system, whether through a GM wide or a STT approach, at an estimated annual cost of £7300.

8. Appendices

Appendix 1: Greater Manchester QES eCDOP Proposal



Greater Manchester
eCDOP QES Proposa

Appendix 2: Working Together to Safeguarding Children (2018)

<https://www.gov.uk/government/publications/working-together-to-safeguard-children--2>

Appendix 3: Child Death Review: Statutory and Operational Guidance (England) (2018)

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

Appendix 4: National Child Mortality Database (NCMD)

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

<https://www.gov.uk/government/publications/child-death-reviews-forms-for-reporting-child-deaths/national-child-mortality-database-transitional-arrangements>

Appendix 5: 2018/2019 Greater Manchester CDOP Annual Report

<https://www.manchestersafeguardingpartnership.co.uk/wp-content/uploads/2019/12/2018-2019-GM-CDOP-Annual-Report-FINAL.pdf>