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Report of: Mick Crofts, Interim Executive Director of Place

Report to: Cllr Mary Lea, Cabinet Member for Culture, Parks and Leisure

Date of Decision: 8th March 2021

Subject: Provision of Digital Autopsy

Is this a Key Decision? If Yes, reason Key Decision:-	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
- Expenditure and/or savings over £500,000	<input checked="" type="checkbox"/>	
- Affects 2 or more Wards	<input checked="" type="checkbox"/>	
Which Cabinet Member Portfolio does this relate to? Culture, Parks and Leisure		
Which Scrutiny and Policy Development Committee does this relate to? Economic and Environmental Wellbeing Scrutiny and Policy Development Committee		
Has an Equality Impact Assessment (EIA) been undertaken?	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
If YES, what EIA reference number has it been given? <i>(Insert reference number)</i> 882		
Does the report contain confidential or exempt information?	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
If YES, give details as to whether the exemption applies to the full report / part of the report and/or appendices and complete below:-		
<i>"The (report/appendix) is not for publication because it contains exempt information under Paragraph (insert relevant paragraph number) of Schedule 12A of the Local Government Act 1972 (as amended)."</i>		

Purpose of Report:

This report seeks approval to enter into a 5 year contract with iGene London for the provision of digital autopsy to support the coronial service at a cost of £185,000 per annum.

Recommendations:**That the individual Cabinet Member:**

1. Approves the direct award of a service contract as outlined in this report, namely the ongoing provision of a digital autopsy service to support the coronial service.
2. Delegates authority to the Executive Director of Place, in consultation with the Director of Financial & Commercial Services and Director of Legal and Compliance to:
 - a. decide the procurement strategy;
 - b. negotiate and agree the terms of the new contract with iGene Digital Autopsy;
 - c. award the new contract to iGene Digital Autopsy;

Background Papers:

(Insert details of any background papers used in the compilation of the report.)

None

Lead Officer to complete:-	
1	I have consulted the relevant departments in respect of any relevant implications indicated on the Statutory and Council Policy Checklist, and comments have been incorporated / additional forms completed / EIA completed, where required.
	Finance: <i>Kerry Darlow</i>
	Legal: <i>David Cutting</i>
	Equalities: <i>Annemarie Johnson</i>
<i>Legal, financial/commercial and equalities implications must be included within the report and the name of the officer consulted must be included above.</i>	
2	EMT member who approved submission: Mick Crofts
3	Cabinet Member consulted: Mary Lea
4	I confirm that all necessary approval has been obtained in respect of the implications indicated on the Statutory and Council Policy Checklist and that the report has been approved for submission to the Decision Maker by the EMT member indicated at 2. In addition, any additional forms have been completed and signed off as required at 1.
	Lead Officer Name: <i>(Insert name)</i> Ian Turner
	Job Title: Service Manager, Medico-legal Centre and Bereavement Services
Date: <i>(Insert date)</i>	

1.	PROPOSAL
	<i>(Explain the proposal, current position and need for change, including any evidence considered, and indicate whether this is something the Council is legally required to do, or whether it is something it is choosing to do)</i>
1.1	Background
1.1.1	Sheffield City Council operates the independent Coroners service out of the Medico-Legal Centre building. The building houses the offices of HM Coroner and his officers, two courtrooms and the public mortuary. Sheffield (in conjunction with Barnsley Hospital and the Sheffield Children's Hospital) operates the coronial service for both Sheffield and Barnsley. Local Authorities (and Police authorities) fund the Coroner's Service in different ways but generally SCC are not unique in how they operate.
1.1.2	Sheffield City Council, (SCC), currently has an agreement with iGene London to provide a Digital Autopsy (scanning) service to conduct digital post-mortem examinations. Scanning helps to identify the cause of death in the majority of cases referred to HM Coroner without the need for an invasive post-mortem examination and reduce the level of post-mortem required in many of the remaining cases.
1.1.3	<p>The original agreement signed in 2014 was a concession on the following basis</p> <ul style="list-style-type: none"> • The Coronial Service offered bereaved families the opportunity to pay for a digital autopsy in place of a traditional post-mortem at a cost of £500 excluding VAT (costs would be reimbursed to families in cases where the digital autopsy is unable to provide an accepted cause of death) • A fee of £100 (inclusive of VAT) is based to SCC from iGene in the case of every successful scan • A fee of £100 (inclusive of VAT) is based to SCC from iGene in the case of every out of jurisdiction scan • iGene pay SCC lease costs for the bungalow (£11,000 per year) • iGene pay SCC service charges for various building / management costs (approximately £4,000 per year) <p>Take up of this service was very low, probably due to the cost per scan.</p>
1.1.4	Since 2017 SCC has been operating a digital by default 'pilot programme' with iGene whereby SCC pays iGene a monthly fee in order that all Sheffield deceased are scanned. This fee has been paid at the same time that charges to iGene for rental of the bungalow annex and the associated service costs have been suspended.

1.1.5	The outcome of the above has meant that in the last 4 years we have gone from a financial model based on a concession agreement with an income generation of £15,000 per annum to a service contract with costs that have increased at each renewal date, from £65,000 in 17/18 to £145,000 in 19/20.
1.1.6	Research of the market for alternative providers of Digital Autopsy has failed to find any alternative companies offering this service. As there is only one supplier in the UK who can provide this service, there is no option to tender for this service and therefore this will involve a direct award of a contract.
1.1.7	Alternative options have been considered by the service and are detailed in section 5 below.
1.2	Proposal
1.2.1	The costs of the service will be: <ul style="list-style-type: none"> • £170,000 per annum payable by SCC to iGene (on a monthly basis paid in arrears) • Removal of the £11,000 rental costs and approximately £4,000 service fees
1.2.2	To provide financial certainty of costs for the service, it is proposed that the contract term will be for 5 years with price increases within that period limited to the rate of inflation at the time.
2.	HOW DOES THIS DECISION CONTRIBUTE ?
	<i>(Explain how this proposal will contribute to the ambitions within the Corporate Plan and what it will mean for people who live, work, learn in or visit the City. For example, does it increase or reduce inequalities and is the decision inclusive?; does it have an impact on climate change?; does it improve the customer experience?; is there an economic impact?)</i>
2.1	Digital Autopsy provides a service that reduces the need for, or level of, further post-mortem examination required. Because cause of death can be established quickly, usually within 48 hours, the deceased body can be released to families more quickly than would normally be the case. This benefits all families but particularly where there is a cultural requirement to bury or cremate the body as soon as possible after death.
3.	HAS THERE BEEN ANY CONSULTATION?
	<i>(Refer to the Consultation Principles and Involvement Guide. Indicate whether the Council is required to consult on the proposal, and provide details of any consultation activities undertaken and their outcomes.)</i>
3.1	Councillor Mary Lea has been consulted on the continuation of digital

	autopsy provision for residents of Sheffield and is supportive that this continues in the future.
3.2	No other consultation is required.
4.	RISK ANALYSIS AND IMPLICATIONS OF THE DECISION
4.1	<u>Equality of Opportunity Implications</u>
4.1.1	<p>An equalities impact assessment has been carried out.</p> <p>Overall this proposal has a positive impact for anyone arranging a burial or cremation. It has a particular positive impact for religions/beliefs where the burial or cremation is required to be arranged as soon after death as possible.</p>
4.2	<u>Financial and Commercial Implications</u>
4.2.1	The net cost to the council will be approximately £185,000 per annum. The total cost over the 5-year term is therefore £975,000.
4.2.2	This cost has been agreed as a service pressure and a cash limit adjustment will be made for the financial year 2021/22 onwards to cover these costs. Therefore, the costs will be covered from within the service's Revenue budget for the duration of the term of the contract.
4.2.3	Scans may also be carried out by the supplier at the Medicolegal centre on behalf of other coronial jurisdictions for which a fee will be payable by the supplier to the Council. It is estimated that this could generate approximately £30,000 - £40,000 income per annum.
4.2.4	<p>The Council has a duty to ensure that all of its procurement is based on value for money principles, achieving the optimum mix of quality and effectiveness for the least outlay.</p> <p>In addition to the above we have a duty to ensure we operate within the overarching Public Contracting Regulations relating to transparency and equality of treatment including the necessary legal and regulatory provisions.</p> <p>Following extensive research in the market, there is no other provider other than iGene that currently operate this service provision. As such it will be necessary to direct award the contract to iGene. The supplier will be required to enter into a formal written legal agreement with the Council.</p>
4.2.5	Sheffield City Council is committed to ensuring a high standard of ethical practice across our supply chain

	<p>The Council expects all internal staff, partners and suppliers to work to these augmented standards which assure we will:</p> <ul style="list-style-type: none"> • Trade with those who comply with an Ethical Code of Conduct • Exclude suppliers committing acts of Grave Misconduct • Improve Social Outcomes for the citizens of Sheffield • Increase the power of procurement and its local economic impact.
4.2.6	<p>Advice on the procurement of the scanning service has been provided throughout. Alternative options have been considered (see section 5) including cessation of the service. The proposal ensures equal provision of digital autopsy and the benefits it brings to the families of the bereaved.</p>
4.3	<u>Legal Implications</u>
4.3.1	<p>Under the Coroners and Justice Act 2009 (CJA) Sheffield City Council is the 'relevant authority' for the coroner's area covering both Barnsley and Sheffield local authority areas. As the relevant authority the city council has a statutory duty to fund the staffing and accommodation to assist in the delivery of coronial services in its area.</p>
4.3.2	<p>The CJA requires that the coroner accurately determines, wherever possible, the identity of deceased persons and their medical cause of death. Coronial investigation ensures that defined deaths are subject to independent and accountable judicial scrutiny and may lead to reports seeking to prevent future avoidable deaths.</p>
4.3.3	<p>Digital autopsy, whilst not a statutory duty itself, is used in Sheffield as part of the process to ascertain cause of death in those cases referred to HM Coroner and undoubtedly supports compliance with their statutory duty to investigate and decide whether an inquest is required following the post mortem examination.</p>
4.3.4	<p>The law requires that regard is given to religious requirements (and other sensitivities) in treatment of the deceased and in providing for procedures to determine cause of death. In this context, bereaved families are increasingly unwilling to accept conventional invasive autopsy as the default mode of examination to determine cause of death. As previously mentioned, cultural sensitives must also be considered to expedite burial where a bereaved family's faith require this.</p>
4.3.5	<p>The Council is empowered to undertake the procurement outlined in this report by virtue of s.111 of the Local Government Act 1972 and s.1 of the Localism Act 2011. The procurement must also be undertaken in accordance with all relevant provisions of the Council's Contracts</p>

	Standing Orders and the applicable Procurement Regulations.
4.4	Other Implications <i>(Refer to the Executive decision making guidance and provide details of all relevant implications, e.g. HR, property, public health).</i>
4.4.1	When the service was initially launched it attracted media attention on both a local and national basis. It is expected it would therefore be reported from a negative perspective if the facility was to close.
4.4.2	The proposal includes the cessation of rent and service charges relating to the lease agreement for the annex area of the centre currently occupied by iGene London.
5.	ALTERNATIVE OPTIONS CONSIDERED <i>(Outline any alternative options which were considered but rejected in the course of developing the proposal.)</i>
5.1	A number of alternative options have been considered and are detailed below.
5.1.1	Option 1: Revert to the original agreement with iGene
	As detailed above, the original agreement was a concession agreement that had the potential to generate a small income. This model proved to be unsustainable. Benefits: <ul style="list-style-type: none"> • Removes all costs from Sheffield City Council • Brings a small amount of income to Sheffield City Council Disbenefits: <ul style="list-style-type: none"> • Transfers the costs of scanning (back) to the bereaved • Impact likely to be most felt by key faith groups (Muslim and Jewish faiths) • iGene are unlikely to continue to provide the service in Sheffield under these terms • Reverting to entirely invasive post-mortems may lead to pathologists being unable to manage the workload. Estimated net annual cost to SCC – Nil
	This option has been discounted as this will disproportionately affect faith communities and it is likely that scanning will continue in Sheffield.
5.1.2	Option 2: End digital Autopsy in Sheffield
	Digital autopsy is not statutory and therefore could Benefits: <ul style="list-style-type: none"> • Removes all costs from Sheffield City Council

	<p>Disbenefits:</p> <ul style="list-style-type: none"> • Removes a valuable service from the residents of Sheffield • Impact likely to be most felt by key faith groups (Muslim and Jewish faiths) • Reverting to entirely invasive post-mortems may lead to pathologists being unable to manage the workload <p>Estimated cost to SCC – Nil</p>
	<p>This option has been discounted as this will disproportionately affect faith communities and it is likely that scanning will continue in Sheffield.</p>
5.1.3	<p>Option 3: Enter in to contract with Bradford Council</p>
	<p>Bradford have set up their own scanning service and may have capacity to sell this service to other areas.</p>
	<p>Benefits:</p> <ul style="list-style-type: none"> • Ensures continuation of a valuable service for the residents of Sheffield <p>Disbenefits:</p> <ul style="list-style-type: none"> • Would require transportation of deceased to Bradford • Likely to introduce an additional delay into the system resulting in a slower release of bodies to families • Cost of service likely to be higher than current costs <p>Cost unknown but estimated to be £270,000 per annum (including transportation costs).</p>
	<p>This option has been discounted due to the higher overall costs and the potential delays in establishing cause of death and therefore to release of bodies</p>
5.1.4	<p>Option 4: SCC operates its own scanning service</p>
	<p>One other council has set up its own scanning service. It would be feasible, given the facilities at the Medico-Legal Centre for SCC to set up a similar system to that in place currently.</p>
	<p>Benefits:</p> <ul style="list-style-type: none"> • Flexibility of service • Potential to sell the service to other jurisdictions. Currently, iGene are scanning bodies for Doncaster (1000 bodies) and aim to bring Rotherham scans (500) to MLC. • More control over the scanning process • Potential to introduce a 'scan on entry' process (which may speed up the scanning process and reduce manual handling) • Ensures continuation of a valuable service for the residents of

	<p style="text-align: center;">Sheffield</p> <p>Disbenefits:</p> <ul style="list-style-type: none"> • Likely gap in service provision • High initial capital costs • High annual running costs • All risks of providing the service borne by Sheffield City Council • Availability of radiologists may be an issue <p>Costs:</p> <p>Capital cost estimated to be around £250,000 for a new scanner plus IT infrastructure for processing the images. Revenue costs for staff and service of the scanner estimated to be £267,000. Potential income generation for providing the service to other jurisdictions could be in the region of £300,000.</p>
	<p>This option has been discounted due to a high level of uncertainty around capital and ongoing revenue costs and the high level of risk involved both around the uncertainty that other jurisdictions will buy into this service and the potential for equipment failure.</p>
6.	REASONS FOR RECOMMENDATIONS
	<p><i>(Explain why this is the preferred option and outline the intended outcomes.)</i></p>
6.1	<p>Continuation of the service for the residents of Sheffield is considered to benefit all residents of the city through both reduced post-mortem examinations and through faster release of bodies to families. Of the alternative options, options 1 and 2 will both, ultimately, result in scanning for Sheffield being either significantly reduced or ended.</p> <p>Option 3 would result in significantly increased costs and involve the transport of bodies to and from Bradford</p> <p>Option 4 has the possibility to reduce costs, however, the risks involved in this option are considered to be too high to pursue this option and there would be a period where scanning could not be carried out while infrastructure is put in place for this to happen.</p>