The Health Visitor Implementation Plan: A Call to Action – two years on.

Healthy Child Programme and our work as an Early Implementer Site (EIS)

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What is our service offer?

**Your community** has a range of services including some Sure Start services and the services families and communities provide for themselves. Health visitors work to develop these and make sure you know about them.

**Universal services** from your health visitor and team provide the Healthy Child Programme to ensure a healthy start for your children and family (for example immunisations, health and development checks), support for parents and access to a range of community services/resources.

**Universal plus** gives you a rapid response from your HV team when you need specific expert help, for example with postnatal depression, a sleepless baby, weaning or answering any concerns about parenting.

**Universal partnership plus** provides ongoing support from your HV team plus a range of local services working together and with you, to deal with more complex issues over a period of time. These include services from Sure Start Children’s Centres, other community services including charities and, where appropriate, the Family Nurse Partnership.
What does it mean for our health colleagues?

- **Universal** – Antenatal home visit between 28 and 36 weeks gestation, primary birth visit, 3 – 4 month review, 1 year and 2 – 2.5 year health and development reviews for all
- **Universal plus** – clear packages of care e.g. maternal mental illness – assessing – supporting through listening visits, reassessing and referring on if no improvement. Using professionally trained expertise
- **Universal partnership plus** – for the most vulnerable families - more intensive programmes such as FNP and Early Start (early intervention programme) / Early Help referrals. HV may take the the lead professional role.
- **Building Community Capacity** - championing wider health and well being – public health - partnership working and improving outcomes for children and families.
- **Safeguarding** – health visitors are specialist practitioners.
Our vision:
- To make a difference by improving health outcomes for local children, families and communities
- To strengthen and improve the quality of delivery of the Healthy Child Programme
- Develop areas of work by introducing new evidence based tools
- Explore integrated ways of working with our colleagues from other disciplines
- Listen to feedback from our service users to redesign service delivery
Growing the Workforce / Professional Mobilisation

- **Growing the workforce:**
  - Recruitment of trained HVs
  - More student HVs in post
  - More lead practice teachers and mentors
  - Nationally there were 9,000 HVs in November 2012

- **Professional mobilisation:**
  - Involvement in innovative service redesign
  - Case study presentations
  - Actions to change unhealthy behaviours and reduce health inequalities
Vision and strategy for nurses, midwives and health visitors

Care is our business

Compassion

Competence

Communication

Courage

Commitment
Please note these figures exclude Bassetlaw Health Visitor fte information, and include Milton Keynes information.
Aligning service delivery:

* Development of integrated teams
* Identifying neighbourhood health need priorities
* Building community capacity and focusing on service transformation
* Working with Midwifery and GP colleagues to promote timely sharing of information e.g. ‘Becoming Parents’ project – introducing antenatal home visit by HV
* Development of care pathways e.g. ‘Two Can Talk’ (universal) and ‘Let’s Get Talking’ (universal plus)
‘Two Can Talk’ –

a project to improve the quality and collaborative delivery of the 2-2.5 year health and development review

* Why was this chosen?

- Low uptake – as few as 42.86% of children being seen in some neighbourhoods
- Lack of standardisation of evidence based assessment tool
- School nurses reporting that children starting school with problems that hadn’t been identified
- Speech and language therapists reporting as many as 1 in 2 children starting school with some degree of speech and language difficulty
- Training needs analysis of workforce showed that only 38.8% of staff had received recent training in developmental assessments.
- Parents reported having little information prior to the appointment and dads rarely able to be involved.
Aims of the project:

- Improve the quality of the assessment using Ages and Stages Questionnaires as the evidence based tool
- Enhance the coverage of the assessments and increase delivery to more than 75% across all 3 localities
- Enhance partnership working and active involvement of parents – before, during and after and promote the use of activity sheets
- Incorporate the 6 ‘C’s of the new nursing strategy – care, compassion, competence, communication, courage and commitment.
- Early identification of children with developmental delay and identify children in need of intervention through a care pathway.
- Promotion of ‘readiness for school and beyond’
An evidence based tool that was developed in California and researched on 14,000 families

- Validated and recommended by the HCP and FNP

- Available for universal use

- Well received by parents as both actively involved in assessing their child prior to appointment

- Increases quality and uptake of the review
Who was involved and how?

- EIS project board formed with speech and language therapy involvement.
- Shadowing site visit to wave 1 site in Stoke on Trent
- Briefing session facilitated by lead practice teacher / health visitor from Warwickshire
- Staff engagement and development sessions and recruitment to task and finish group work stream.
- Benefit realisation workshops – improving IT support and cost savings
- FNP co-ordinator delivered 3 x 2 hour sessions – all 11 HV teams involved in the pilot attended, plus FOWs and children centre colleagues
- Parents were sent the ASQ-3 questionnaires 2 weeks before their appointment – evaluation report available on the HV stand
Current picture and next steps:

- Our latest performance figures across all localities are 74% delivery for the 2-2.5 year review.
- 115 parent evaluation forms were received from all 6 sites involved – with overwhelmingly positive feedback.
- 7 staff have already been trained as ASQ trainers to roll out the programme to all HV teams.
- Commission further partnership work to look at those neighbourhoods where adult literacy levels are adversely impacting on access to services.
Thank You!!!