

Report to:	HEALTH AND WELLBEING BOARD
Relevant Officer:	Dr Arif Rajpura, Director of Public Health
Relevant Cabinet Member:	Councillor Amy Cross, Cabinet Member for Adult Services and Health
Date of Meeting:	18 January 2017

UPDATE ON 0-5 CHILDREN'S PUBLIC HEALTH SERVICES (ENHANCED HEALTH VISITING MODEL) 2017-2018

1.0 Purpose of the report:

1.1 To update the Health and Wellbeing Board on the 0-5 Children's Public Health Services (Enhanced Health Visiting Model) 2017/ 2018.

2.0 Recommendation(s):

2.1 To note the update.

3.0 Reasons for recommendation(s):

3.1 The Board is requested to receive the update for information only

3.2a Is the recommendation contrary to a plan or strategy adopted or approved by the Council? No

3.2b Is the recommendation in accordance with the Council's approved budget? Yes

3.3 Alternative Options

None

4.0 Council Priority:

4.1 The relevant Council Priority is : "Communities: Creating stronger communities and increasing resilience"

5.0 Background Information

5.1 An enhanced Health Visiting service model shown at Appendix 8(a) has been developed for the delivery of Health Visiting services in Blackpool from April 2017. Agreed by the Better Start Executive Partnership in September, this

provides an opportunity to transform the delivery of a key part of the Healthy Child Programme. The model aims to ensure a comprehensive universal offer that enables additional needs to be identified and addressed at an early stage; and interventions provided for families to address current or anticipated issues that will impact on positive outcomes for children. With an enhanced universal offer at its heart the model provides four levels of intensity (Universal, Universal Plus, Universal Partnership plus and Safeguarding). At the universal level the model consists of eight home visits to all families, six within the first year of life plus two additional health reviews, including a school readiness child health review. The enhanced health visiting model was developed from consultation with a wide range of stakeholders as part of the Health Visitor review over the summer led by Public Health in partnership with a Better Start. The model was jointly developed by stakeholders representing the Better Start Partnership.

5.2 **Visits and contacts in the new universal offer**

The core schedule of contacts and visits spans the antenatal to pre-school period, it presents an opportunity for health visitors, children and their parents to build the unique family/ health visitor relationship which is pivotal to providing a gateway to other levels of health visiting provision, to promote, support and safeguard the wellbeing of children. The existing three/ four month visit and the five universal health and development checks in line with the Department of Health's mandate of local authority commissioning remain a core part of the model.

5.3 **New contacts and additional visits include:**

- 1. Universal offer of Baby Steps 10 week antenatal and postnatal programme:** is aimed at preparing expectant and new parents for birth and parenthood, and consists of 10 sessions (six antenatal and three post-natal sessions) up to the baby is 10 weeks old, the overall aim of the programme is to optimise parents' and babies' health and wellbeing and promote protective factors against child maltreatment including sensitive parenting and secure attachment.
- 2. Second New-born visit: Three to Five weeks:** This is a proposed new visit: to allow for continuum of parent/ carer and child assessment and care providing maximum opportunity to intervene early where additional support is required. Early identification and management of perinatal mood disorders.
- 3. Six month Review of Health Plan:** This is not a home visit, but is an opportunity for the Health Visitor review the health plan and review the Whole Family Assessment, and allows for early identification and assessment and identification of child/ family health/ mental health and wellbeing needs and update.
- 4. Home visit Three to Three and a half years: School Readiness:** Proposed new visit will prepare children for entry to school, identify additional health needs

and make arrangements for transfer of care to the School Nurse.

5.4 Family Nurse Partnership and ADAPT

Alongside the new model there will be an intensive offer of support for very vulnerable first time mothers. Family Nurse Partnership (FNP), a home visiting programme delivered under licence in the UK. Family Nurse Partnership nurses work with young first time mums, dads and wider family through pregnancy and the child's first two years to deliver 64, hour long visits. The aim is to build a therapeutic, collaborative relationship to work in partnership with parents to build self-efficacy and resilience. Blackpool is currently working in partnership with the Family Nurse Partnership national unit and Dartington Social Research Unit to review how the Family Nurse Partnership programme can be adapted to better suit delivery locally to achieve improved outcomes in the short term and to review eligibility for the programme for clients with added vulnerability. A total of 125 Family Nurse Partnership places will be commissioned (Including 50 places commissioned by Better Start).

5.5 Next Steps

As this is will be an enhanced model of delivery for Health Visiting in Blackpool, a transition period will be required to enable detailed development and implementation. All partners are engaged and committed to ensuring development and implementation of the clinical model and methods, interventions and activities used within each visit and understand the opportunity to impact on better outcomes for children. A mobilisation plan for the transition to the new model of health visiting will be presented to the January Better Start Executive Board for agreement. A Better Start has commissioned South London and Maudesley NHS Trust (SLAM) to lead on the implementation and transition work for the new Health Visitor model in Blackpool.

5.6 Does the information submitted include any exempt information? No

List of Appendices

Appendix 8(a) - Enhanced Health Visiting Model 2017-18

6.0 Legal considerations:

6.1 None.

7.0 Human Resources considerations:

7.1 None.

8.0 Equalities considerations:

8.1 None.

9.0 Financial considerations:

9.1 The new enhanced model will be funded from the public health grant, costs for the new model have been worked up from detailed analysis of activity and the different levels of intensity and need. The financial assumptions that underpin the model have been agreed by the Better Start Executive Partnership.

10.0 Risk management considerations:

10.1 None.

11.0 Ethical considerations:

11.1 None.

12.0 Internal/ External Consultation undertaken:

12.1 None.

13.0 Background papers:

13.1 None.