


Agenda Item 9

		THE HEALTH SCRUTINY COMMITTEE FOR LINCOLNSHIRE	
Boston Borough Council	East Lindsey District Council	City of Lincoln Council	Lincolnshire County Council
North Kesteven District Council	South Holland District Council	South Kesteven District Council	West Lindsey District Council

Open Report on behalf of Ellen Armistead, Chief Executive of Lincolnshire Community Health Services NHS Trust.

Report to	Health Scrutiny Committee for Lincolnshire
Date:	20 November 2013
Subject:	Health Visiting Service

Summary:
The Health Visiting Service in Lincolnshire is commissioned by NHS England and provided by Lincolnshire Community Services NHS Trust. Representatives of the Trust are attending to provide information on the Health Visiting Service, which is provided to 0-5 year olds. The service is commissioned to deliver the Department of Health 2009 *Healthy Child Programme: Pregnancy and the First Five Years of Life*.

Actions Required:
(1) To consider and comment on the information presented on the Lincolnshire Health Visiting Service.

1. Introduction

The Family and Healthy Lifestyles Directorate of Lincolnshire Community Services NHS Trust (LCHS) is commissioned to deliver a Health Visiting service to families with children aged 0-5 years in Lincolnshire. Currently the service is commissioned by the NHS Commissioning Board (NHS England), but the Government's intention is that the responsibility for commissioning the National Visiting Specification (Healthy Child Programme) will be transferred to Local Government from 2015.

The service aims to provide a high quality, family centred public health service. Through a unified and consistent approach services are planned and delivered which promote the health of children, young people, their families, the school community and the whole community. Health visitors work with other statutory, voluntary and professional group to address inequality and to promote and improve the health and safeguard the wellbeing of young children and their families.

Health Visitors

Health Visitors are qualified nurses or midwives with post-registration experience, and have undertaken further training and education (now at degree level) in child health, health promotion, public health and education. They possess skills in communicating with all parents/carers, enabling them to adapt and change. This includes the ability to help parents to use a range of methods and approaches that promote wellbeing and adaptation and to manage difficulties that arise within the family setting.

The Commissioned Service

Health visiting teams are commissioned to deliver universal and targeted services (based on individual need) including safeguarding children. The service is delivered in accordance with the Department of Health 2009 *Healthy Child Programme: Pregnancy and the First Five Years of Life* via a universal progressive model (below).

The Health Visiting Service - Progressive Universalism: What it means for Families

Your Community has a range of services including some Sure Start services and the services that families and communities provide for themselves. Health Visitors work to develop these services.

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 Health Visiting 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 on-going support from your Health Visiting 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.

The Healthy Child Programme (HCP)

The goals of the HCP (Appendix A) include:

- transition to parenthood and positive parenting;
- strong family relationships and attachment resulting in improved social/emotional wellbeing;
- care which promotes health and safety;
- increased breastfeeding, healthy nutrition and increased physical activity, prevention of communicable diseases readiness for school and improved learning;
- early recognition of growth disorders and risk factors for obesity;
- early detection of deviations from normal physical and neuron-developmental pathways.

Lincolnshire Community Health Services: Service Delivery and Workforce

Health Visiting teams are organised by 'corporate teams' around GP practice populations and aligned with Lincolnshire District Council boundaries. Currently the teams are operationally managed in 4 quadrants (SE, NE, SW, NW), but this is under review. ' Each team comprises Health Visitors, Community Staff Nurses, Nursery Nurses and administrative support. Corporate working ensures that clients and agencies have access to the Health Visitors Monday-Friday 9-5pm which reflects the commissioned service. However, it is widely acknowledged that there is need to review access to universal services during the evening and at weekends and with future commissioners of the service.

Although there may be a number of Health Visitors working with an individual practice population, each GP practice has a named link Health Visitor to ensure vital communication links are maintained. All of the children centres also have a 'designated link' Health Visitor who sits on the Children Centre Advisory Board.

Staffing resources are allocated using the 'Family & Healthy Lifestyles Service workforce tool which determines how much 'resource' (i.e. the range of skill mix and 'time/hours') each team requires to deliver the commissioned core offer to the children and families on the corporate caseload. In addition Health Visitors 'RAG' rate (red, amber, green) each child on their caseload and additional resources are allocated based on the dependency/Intervention level. This process is applied equally across the service to ensure an equitable use of a 'finite' pot of staffing resources. The tool is constantly under review to ensure that allocations reflect the required resource in each team/locality. LCHS also reviews resource allocation when there are any urgent capacity issues across the service to ensure a safe and consistent level of service as possible.

Corporate working has replaced the traditional approach to health visiting caseloads towards a shared responsibility of Health visiting teams to deliver the commissioned core and individual need offer. However, all children have a named Health Visitor who is responsible of delivering the core contacts and delegating/supervising the skill-mix teams who support service delivery. If we apply the 'best practice' caseload

numbers advised by health visiting professional bodies, that is 350 under-fives per whole time equivalent Health Visitor (if carrying sole responsibility for delivering the HCP) LCHS is compliant with the guidelines. In addition, 'dependency rating' all contact with families in terms of the 'time taken' to deliver the required intervention/support, teams with higher numbers of safeguarding cases for example will receive additional resources to support them in managing these.

The National Health Visitor Plan

In 2011 the Department of Health published the *Health Visitor Implementation Plan 2011-2015: a Call to Action* which set out the Government's plan to recruit an additional 4,200 Health Visitors to support transformational change in Health Visiting across England by 2015. In order to support this, the Strategic Health Authority (now the Local Area Team, NHS England) set each organisation an individual trajectory to achieve by 2015.

Health Visitor Numbers

LCHS are required to increase its baseline health visiting numbers by 34 to 134 by 2015. The Trust currently has 105.4 members of staff, with 9 students about to qualify. A further 20 students have been recruited for training commencing September 2013 and January 2014 and robust recruitment and workforce plans are in place to maintain the Trust's baseline establishment. LCHS is on track to achieve its expected increase in Health Visitors by the target date.

Memorandum of Understanding (MOU) Between Lincolnshire Community Health Services NHS Trust (Health Visitors) and Lincolnshire County Council (Children's Centres)

A framework is in place to help promote effective working between Lincolnshire County Council Children's Centres and Health Services. This will enable LCHS to achieve its shared aims and objectives of delivering better outcomes for all children, particularly those living in poverty. A new MOU has been agreed and outlines the process that will permit Health Visitors to share demographic data about families with children under 5 years of age with Lincolnshire Children's Centres. This will enable the Children's Centres to register the families with them and forms part of LCHS's commitment to working together to improve outcomes for all but particularly the most vulnerable children and families.

Future Developments - Family Nurse Partnership

LCHS (Health Visiting) will be commissioned to deliver a Family Nurse Partnership in 2014. The Family Nurse Partnership is an intensive, structured, home visiting programme. It is offered to first time parents under the age of 20. A specialist trained nurse undertakes regular visits from early pregnancy until the child is two years old. The aim is to build therapeutic close and supportive relationship with the family.

The Department of Health state that initial research in England finds that mothers who receive support from Family Nurse Partnership nurses show positive results, including:

- stopping smoking during pregnancy;
- high levels of breastfeeding;
- improved self-esteem; and
- being much more likely to return to education or employment when their children are old enough.

Challenges

In line with the national picture the recruitment of Health Visitors over recent years has been challenging and for LCHS remains so, particularly for the East Lindsey, Boston and South Holland districts. Again, reflecting the national picture LCHS also has a significant number of Health Visitors who will be of retirement age in the next 3-5 years. However, LCHS is optimistic that the increase in training places for health visitors and the Trust's guarantee of a post on qualification together with its 'grow your own' approach and robust training programmes will have a positive impact. Perhaps the Trust's biggest challenge is - along with its commissioners - is in managing the expectations of the public and its key partners during an intense period of service transformation particularly in the current financial climate.

School Nursing Service

The Committee needs to be aware that LCHS is commissioned separately by Lincolnshire County Council to deliver a School Nursing Service for children aged 5-19 years. The School Nursing Service is not covered in detail in this report, as this report focuses on the Health Visiting Service for children aged 0-5 years.

2. Conclusion

The Health Scrutiny Committee is invited to consider and comment on the information presented on the Lincolnshire Health Visiting Service.

3. Consultation

This is not a consultation item.

4. Appendices – These are listed below and attached at the end of the report

Appendix A	Health Visiting and School Nursing Specification – Lincolnshire Community Health Services NHS Trust
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5. Background Papers - None

This report was written by Linda Dennett, Acting Head of Clinical Services & Sexual Health Lead, Family & Healthy Lifestyle Services Business Unit, Lincolnshire Community Health Services, who can be contacted on 01529 220390 or Linda.Dennett@lincs-chs.nhs.uk

Health Visiting and School Nursing Service Specification

The Healthy Child Programme

	Antenatal Contact	New Birth Visit (10 -14 days)	6 week contact	3-4 month contact	8-12 month contact	2 year contact	Targeted 3 to 5 year Contact
Health Visiting Team	Health Visitor	Health Visitor	Health Visitor	Nursery Nurse	Health Visitor	Nursery Nurse	Health Visitor
Contact Setting	Home/ Community	Home	Community Setting	Community	Community	Community	Community
<p>Universal: core offer (green) Universal Plus: additional packages of care following assessment by the Health Visitor (amber) Universal Partnership: intensive and targeted health promotion and surveillance. Partner agencies may work together to provide support & care for families (red)</p>							
Growth		✓	✓	✓	✓	✓	✓
Infant Feeding/nutrition	✓	✓	✓	✓	✓	✓	✓
Development		✓	✓	✓	✓	✓	✓
Parenting	✓	✓	✓	✓	✓	✓	✓
Environment/ Family/ Social network	✓	✓	✓	✓	✓	✓	✓
Maternal Mental Health Assessed	✓	✓	✓	✓	✓		
Book start Distribution					✓	✓	
Accident Prevention/safety	✓	✓	✓	✓	✓	✓	✓
Dental Care				✓	✓	✓	✓
Evidence-based Health Promotion Advice	✓	✓	✓	✓	✓	✓	✓
Immunisations		✓	✓	✓	✓	✓	✓
Smoking/passive	✓	✓	✓	✓	✓	✓	✓
Registration with local Children Centre	✓	✓	✓	✓	✓	✓	✓

Family and Healthy Lifestyles Universal Provision, (2011) Service specifications. (Health Visiting and School Nurse service). LCHS Department of Health (2008). The Child Health Promotion Programme. Pregnancy and the First Five Years of Life. London: DH.