

Committee and Date
Young People's Scrutiny
Committee.

23 March 2016

Item

8.1

Public

Commissioning of Health Visiting Services

Responsible Officer

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1. Summary

October 1st 2015 the commissioning for health visiting transferred from NHS England to Local Authority. The health visiting service in Shropshire is currently provided by Shropshire Community Health Trust. This report provided an update of the service since transition.

2. Recommendations

- a) That the report is noted.
- b) That regular updates on the Health Visiting service be provided to Young People's Scrutiny Committee

REPORT

On 1st October 2015 the commissioning of health visiting services transferred from NHS England to Local Authorities. Shropshire Community Health Trust provide the current service in Shropshire providing services to meet the Healthy Child Programme objectives based on a progressive model dependent upon need (see appendix 1).

The Healthy Child programme identifies the health visitor as the lead for the delivery of the programme from 0-5 years. Currently the health visiting service offer 5 mandated universal contacts. These include:

- Antenatal contact from 28 weeks
- New Birth visit 10-14 days post delivery
- 6-8 weeks
- 12 months
- 2 years

Further contacts are provided where additional support is required/identified.

The service is taking great strides to achieve these core contacts and contract monitoring has shown an increase in the uptake of these.

1. Quality Indicators Indicator	Standard	Performance in Period/ accumulative	Reasons for failure to meet standard and where applicable plans to improve
For Health Visitor contract Number of families support at a Community level	n/a	Data not currently collected	Q – what information is required? Feedback is provided to the Locality Boards quarterly
Activities run at community level	n/a	Data not currently collected	Q – what information is required? Feedback is provided to the Locality Boards quarterly
Number of mothers who received a first face to face antenatal contact with a Health Visitor at 28 weeks or above (new indicator)	Agreed NHSE Target Trajectory of planned delivery was 347 this qtr	503	100% offer in place across Shropshire. Target trajectory was 75% offer and 50% delivery by end of Q3. We have exceeded this and achieved 73% delivery
AN contacts as a percentage	Average 2015-2016 per qtr is 690 births	73%	Figure in red is delivered contacts against average births per quarter this year 2015-2016 100% offer is in place across Shropshire via appointments DNA rate is 27%
Percentage of births that receive a face to face New Birth Visit within 14 days by a Health Visitor	98% and over NHSE target trajectory was 90% delivery at Q3	95% Delivered contacts 684/721 births	98% achieved where mother and infant available within 14 days 2% due to late notification of birth from external providers Target Trajectory was 90% delivery within 14 days at Q3 Target exceeded
Percentage of face-to-face NBVs undertaken after 14 days, by a Health Visitor	Less than 2%	5%	As above
Percentage of children who received a HV 6-8 week assessment	-	91.5%	Target trajectory was 80% at

		Delivered contacts 660/721 births	Q3 Target exceeded
Percentage of children who received a 12 month review by the time they turned 12 months	98% and over	58% (delivered contacts of 356/609 due)	% of children who had their 12 month review within the qtr in which their 1st birthday was. 100% offer via appointment is in place across Shropshire Trajectory was 75% delivery at Q3 Target not delivered DNA rate is 42%
Percentage of children who received a 12 month review by the time they turned 15 months	Less than 2%	3%	We aim to complete all 12 month reviews within the quarter of 1st birthday
Percentage of children who received a 2-2.5 year review	100% Trajectory of planned delivery was 75% at Q3	72% (contacts delivered of 459/641 due)	100% delivery is not achievable 100% offer in place across Shropshire by appointment Trajectory was 75% delivery at Q3 Target achieved DNA rate is 28%
Number of families supported at a Universal plus level (THIS FIGURE IS REPORTED AT % OF CONTACTS PROVIDED TO FAMILIES AT UNIVERSAL PLUS LEVEL)	See accompanying graph	49.2%	Data is not collected on number of families supported on Universal Plus level Average of % of all HV contacts at Universal Plus level
Key themes for support	n/a	Data not currently collected	
Number of families support at an Universal partnership plus level (THIS FIGURE IS REPORTED AT % OF CONTACTS PROVIDED	See accompanying graph		Average of % of all HV contacts at Universal

TO FAMILIES AT UNIVERSAL PARTNERSHIP		Partnership Plus level
PLUS LEVEL)	10.3%	

The implementation of an integrated 2 year review with Early Years settings (see appendix 2) is currently being undertaken to increase uptake of the review but also to provide greater communication and continuity between health and early years to increase early intervention and improve outcomes. The results of the pilot will be available in September 2016. It is planned then to roll out the offer across all early years settings based on pilot feedback and remodelling as required.

3. Risk Assessment and Opportunities Appraisal

(NB this will include the following: Risk Management, Human Rights, Equalities, Community, Environmental consequences and other Consultation)

4. Financial Implications

NA

5. Background

6. Additional Information

A review of commissioning across the 0-19 age range is currently underway, with a view to ensuring comprehensive and effective universal services whilst reducing potential gaps and/or duplication.

List of Background Papers (This MUST be completed for all reports, but does not include items containing exempt or confidential information)

Department of Health, 2009. Healthy Child Programme. Pregnancy and the first 5 years of life.

Cabinet Member (Portfolio Holder) Cllr Karen Calder, Health Portfolio Holder

Local Member

Appendices

- Summary of HCP Offer
 Integrated 2 year review flowchart

Community

A RANGE OF SERVICES THAT ARE AVAILABLE WITHIN TH ELOCAL COMMUNITY TO SUPPORT CHILDREN, YOUNG PEOPLE AND THEIR FAMILIES.

Universal Services

ACCESS TO THE HEALTHY CHILD PROGRAMME THROUGH HEALTH VISITORS, SCHOOL NURSING IN CONJUNCTION WITH GP'S AND OTHER SERVICES. THESE INCLUDE:
HEALTH AND DEVELOPMENT REVIEWS
SCREENING AND PHYSICAL EXAMINATIONS
IMMUNISATIONS
PROMOTION OF HEALTH AND WELL BEING INCLUDING EMOTIONAL HEALTH AND WELL-BEING
PROMOTION OF SENSITIVE PARENTING AND CHILD DEVELOPMENT INVOLVEMENT OF FATHERS
PREPARATION AND SUPPORT WITH TRANSITION TO PARENTHOOD AND FAMILY RELATIONSHIPS
SIGNPOSTING TO INFORMATION AND SERVICES

Universal Plus

RAPID RESPONSE WHEN SPECIFIC EXPERT HELP IS NEEDED PROMOTION AND EXTRA SUPPORT FOR HEALTH AND WELL-BEING SUPPORT WITH BEHAVIOUR CHANGE E.G. SMOKING, DIET, KEEPING SAFE, DENTAL HEALTH, ACCIDENT PREVENTION.
PARENTING SUPPORT PROGRAMMES, INCLUDING ASSESSMENT AND PROMOTION OF PARENT—CHILD INTERACTION PROMOTING CHILD DEVELOPMENT, INCLUDING LANGUAGE ADDITIONAL SUPPORT AND MONITORING FOR CHILDREN WITH HEALTH OR DEVELOPMENT PROBLEMS EARLY HELP ASSESSMENT

Universal Partnership Plus

PROVIDING ON-GOING SUPPORT TO DEAL WITH MORE COMPLEX ISSUES OVER A PERIOD OF TIME INTENSIVE STRUCTURED HOME VISITING REFERRAL FOR SPECIALIST INPUT ACTION TO SAFEGUARD A CHILD OR YOUNG PERSON CONTRIBUTION TO CARE PACKAGE LED BY SPECIALITS SERVICE



Integrated 2 year Pathway

Integrated pathway for children who meet the following criteria:

- 1. Children attending EY settings (initially as a pilot) both via Telford 'Talking Twos'/ 'Shropshire 2 4 U' places and for privately funded places
- 2. Children who attend CC's eg known to groups etc.

