

Agenda item no: 8	
Enclosure no:	

Meeting:	Dudley MBC Scrutiny Committee
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Date:	24 th March 2016
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Title:	Quality Report BCPFT – Health Visiting Update
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Presented by:	Cheryl Newton
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Prepared by:	Cheryl Newton, Vicky Lazaravich, Joy Williams
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Purpose:	Information	<input checked="" type="checkbox"/>	Discussion	<input checked="" type="checkbox"/>	Recommendation	<input type="checkbox"/>	Approval	<input type="checkbox"/>

Linked to risk register:	No	<input checked="" type="checkbox"/>	Yes	<input type="checkbox"/>	Datix No:	<input type="checkbox"/>	H/M/L
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Additional resources required:	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
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This report covers (tick all that apply):

Strategic objectives:	
We will nurture a culture which provides: safe, effective, caring, responsive and well led services.	<input checked="" type="checkbox"/>
We will involve and listen to patients, carers and family's experience to continually improve services we provide.	<input checked="" type="checkbox"/>
We will be a leading provider of specialist mental health, learning disability and children's services, proactively seeking opportunities to develop our services, building partnerships with others, to strengthen and expand the services we provide.	<input checked="" type="checkbox"/>
Attract and retain well-trained, diverse, flexible, empowered and valued workforce.	<input checked="" type="checkbox"/>
Resources will be used effectively, innovatively and in a sustainable manner.	<input checked="" type="checkbox"/>

Evidences compliance to:						
Health & Safety Executive						
Care Quality Commission	Safe	<input checked="" type="checkbox"/>	Caring	<input checked="" type="checkbox"/>	Responsive	<input checked="" type="checkbox"/>
	Effective	<input checked="" type="checkbox"/>	Well Led			<input checked="" type="checkbox"/>

Have impact assessments been completed for this report / strategy?	
Quality Impact Assessment	n/a
Equality Impact Assessment	n/a

Executive Summary

Black Country Partnership NHS Foundation Trust (BCPFT) provides healthcare services for people of all ages across the Metropolitan Boroughs of Dudley, Sandwell, Walsall and the City of Wolverhampton and serves a population of 1.3 million people.

BCPFT provides community healthcare services for children, young people and families within Dudley inclusive of Health Visiting and Family Nurse Partnership (FNP).

Health Visiting and FNP are responsible for leading delivery of the Healthy Child Programme (HCP) referring to wider preschool services for additional support to provide early intervention where necessary in order to support the child and their family to achieve best outcomes for their child's welfare from an emotional, health and social perspective. This also includes referral to Social Care where safeguarding concerns are identified again utilising an early intervention approach.

Health Visitors are identified as key to leading delivery of the HCP with a public nursing background and knowledge they have a registered population of children from pregnancy to five years, they know how the health system works, and bring knowledge and understanding of child and family health and wellbeing, and skills in working with individuals and communities.,

Health Visiting and FNP offer appointments and interventions in a variety of settings inclusive of family homes, children's centres, health centres etc, due to the demographic of the FNP families, visits may also occur at at venues of specific client choice inclusive of cafes, schools etc subject to assessment of suitability to facilitate client confidentiality in order to agenda match with the service user. Both services aim to be as flexible as possible in order to meet child and family needs in offering an accessible service.

The commissioning responsibilities for Health Visiting and FNP transferred from Public Health England to Dudley MBC during October 2015. This report outlines the mandated offer required for Health Visiting and FNP and provides an update in relation to key performance indicators and achievement against these.

Mandated Offer

The national service specification for Health Visiting and FNP (2015/16) requires delivery of the Healthy Child Programme with 5 mandated contacts within the service offer, this consists of following, antenatal contact, 10-14 days new birth visit contact , 6-8 week review, 12 month holistic health, emotional and developmental review, 2-2.5 year holistic health, emotional and developmental review to assess school readiness.

There are 4 levels of health visiting service offer with:

- Community – available to all
- Universal – available to all
- Universal Plus (UP) – families can access timely, expert advice from a health visitor when they need it on specific issues such as postnatal depression.
- Universal Partnership Plus (UPP) – health visitors provide ongoing support, playing a key role in bringing together relevant local services, to help families with continuing complex needs, for example where a child has a long-term condition.

The FNP program is an enhanced intensive safeguarding programme consisting of weekly and alternate weekly contacts and is offered to first time mothers aged 19 years and younger and has been evidenced to provide effective support in relation to safeguarding and school readiness. The FNP programme delivers an antenatal programme and the Healthy Child Programme as listed above until the child reaches their second birthday at which point the child and family are transferred into universal Health Visiting services.

Performance Indicators

Key Performance Indicators (KPI's) against the national health visiting specification in relation to the HCP is robustly monitored, quarterly reports are submitted to the 0-5 programme and FNP boards with detailed exception reporting where there is a reduction in performance against KPI's and licence (FNP). For Health Visiting data is collated manually presently with each Team Leader being responsible for their cluster teams data collection this facilitates local ownership of delivery against the KPI's moving forwards electronic data collection will facilitate a less resource intensive approach to data collation. The table below details achievements against the required KPI's.

Fig 1.KPI's

Quality Requirement	Threshold	Method of measurement	Q1	Q2	Q3
Mothers receiving antenatal visit	50%	Mothers who received a first face-to-face antenatal contact with a health visitor at 28 weeks or above			64.3%
% New birth visits < 14 days	95%		93%	95%	95%
% 6-8 week	95%	Percentage of	96%	97%	97%

Review		children who received a 6-8 week review by the time they were 8 weeks			
Percentage of children who received a 12 month review by 12 months	95%	Total number of children who turned 12 months in the quarter, who received a 12 month review by the age of 12 months	92%	92%	95%
Percentage of children who receive a 2-2.5 year review	95%	Total number of children who turned 2-2.5 years in the quarter, who received a 2-2.5 year, by the age of 2-2.5 years of age.	94%	93%	97%

Registrant to Resident

The requirement to move health visiting caseloads from GP registrant to resident within Dudley (R to R)required significant resource and management, in order to ensure adequate safeguarding and quality assurance.

This process commenced in September 2015 with a total of 730 children being transferred out and 1000 transferred onto caseload, these consisted of the following fig 2.

Fig 2. R to R transfer.

HCP Offer	Number of Children transferred out	Number of Children transferred in
Universal	700	950
Universal Partnership Plus	30	51

The health visiting teams are awaiting a further 100 records to be transferred into caseload, Child Health are supporting the service with this. R to R transfer resulted in a number of children being 'transferred in' to Dudley who had not achieved mandated elements of the HCP particularly 12 month and 2 year review, details were included within exception reports provided for quarterly health visiting board.

Service Delivery

Health visiting services are offered across a variety of settings to include home visiting where appropriate and clinic locations, the venue for contacts will be made in collaboration with parents and carers. Alongside home visiting the service offers access to health visitors at health centres and clinics as detailed below:

Fig 3. Health Visitor Clinics

Locality	Frequency	Place
Brierley Hill	Weekly	Brierley Hill CC
	Monthly	Peters Hill CC
	Alternate weekly	Bromley/Pensnett CC
Dudley North	Weekly	Ladies Walk Centre, Lower Gornal HC, The Greens HC, Coesley CC.
Dudley Central	Weekly	Cross St HC, Central Clinic, Woodside CC, Netherton CC.
	Monthly	Priory CC
Halesowen	Weekly	Tenterfields CC, Olive Hill CC, Halesowen HC
Stourbridge	Weekly	Little Hands CC, Stourbridge CC, Hob Green CC, Butterfly CC
	Alternate weekly	Lion Health Surgery
Quarry Bank	Weekly	Quarry Bank CC
Kingswinford	2 per week	Kingswinford HC
	Weekly	Wordsley HC

Clinics are offered on various days and times across the localities, in addition to this there are two monthly evening clinics offered at Gornal Parent and Child Centre and Little Hands Children's Centre, parents are able to attend any of the clinics offered. The Health Visiting service provides a leaflet with all clinic times and venues detailed

and is available to download via the Health Visiting page on BCPFT's website. FNP is predominately a home visiting service, flexibility to suit the service user is maintained in order to maintain service user engagement.

Service User Feedback

A Health Visitor Facebook page was developed during 2015 to facilitate improved communication with families, regular posts regarding clinic times and health education messages are posted within this page as well as information regarding events such as the FNP Christmas event.

The service also seeks feedback via the 'friends and family' questionnaire, parents/carers are offered the opportunity to complete this at the key HCP contacts, Specialist Nursing and Children's Additional needs services also offer service users the opportunity complete 'Friends and Family Questionnaires' on a regular basis, the responses from all services are collated by BCPFT patient experience team and shared through internal quality, safety and governance groups as well as the respective HV & FNP Boards and CCG led Clinical Quality Review Meetings(CQRM).

The Matron for Children's Services and Service Managers are working in collaboration with 'We love Carers' throughout 2016/17 to establish further mechanisms for feedback regarding all community services provided for children and families within Dudley and also Wolverhampton and Sandwell for Child Adolescent Mental Health services (CAMHs).

The Family Nurse Partnership team regularly receive feedback from service users throughout the delivery of the program and commissioned work during autumn 2015 with 'Changing our Lives' to assemble feedback and produce a report in relation to service users views of the service, the feedback was extremely positive. FNP have also included a service user interview panel as part of the recruitment process for family nurses which proved a positive experience for both the service users and service alike.

Care plans across all children's services are delivered with the 'voice of the child' in mind, the Children's Matron and service leads are continuing to develop mechanisms to evidence and monitor this through regular records auditing. Patient stories from across the Children's portfolio will be presented at Dudley CQRM through 2016/17 further enhancing the opportunity for feedback and demonstration of child focused care plans and 'voice of the child'. The FNP team provide the opportunity for a service user to feedback through attendance at each quarterly board and this has been embraced by the parents.

Following recent attendance at a BCPFT Board meeting an FNP service user has been invited to become a public governor to further enhance service user feedback and opportunity to engage service users in delivery of services.

Transition of services to Local Authority Commissioning



Honesty and
Transparency

Integrity

Empowerment

Compassion &
Kindness

Dignity &
Respect

October 2015 saw the transition of Health Visiting and FNP to local authority commissioning, this transition has been positive due to the developed close working relationship between the services leads from BCPFT and Dudley Local Authority Public Health leads. Initial Q3 reporting suggests the transition has not resulted in any adverse impact upon service delivery with delivery against KPI's remaining positive.

All leads recognise the need and potential benefits for an integrated working model for service delivery and are working in partnership to further establish this through focused working groups, the services delivered through BCPFT will continue to monitor service user feedback during this time in order to identify positive feedback and areas for learning.