

East of England Health Visiting Directory for Innovation 2012





Welcome

Welcome to the second east of England Health Visiting Directory of Innovation.

We've had an exceptional first year of the programme, as demonstrated through our first Directory.

This year we were inundated with examples of best practice throughout our region. This second directory demonstrates our providers' impressive partnership working and innovations ensuring the service we offer our children and families is the best it can possibly be. We are now forging ahead working alongside our colleagues in East Midlands and West Midlands, to continue to build and share best practice.

There is so much more to come in our second year, not least the largest cohort of health visiting students in the Country. The east of England now has five Early Implementer Sites. These sites are driving forward the programme of work both within their own areas and at a national level, and are all exemplars of best practice.

We have a long road ahead of us towards our March 2015 goals. This second directory shows how far we have come as a region and how we are striving to make a difference for our children, young people and families now and in the future.



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2.5 YEAR REVIEW PILOT

Organisation: Hertfordshire Community NHS Trust

Brief Description: Children and their parents are invited to attend for the routine 2.5 review having previously completed an Ages and Stages questionnaire (used by Family nurse Partnership) which asked them to comment on their child's development. Individual appointments are made for the parent/s and child to meet a Nursery Nurse or staff nurse or, where there might have been previous additional concerns, a Health Visitor. The questionnaire facilitates and provides a quality standard framework for the routine assessment, it also makes the review session a valuable opportunity for parents to share their concerns and offers a more comprehensive overview of the child's development. Introducing this standardised approach has promoted the review as a more holistic review that concentrates on the key issues that ensure children are ready to face the challenges of school later on. Feedback from parents has been really positive.

Area of the service vision or family offer this example meets: This meets the universal element of the family offer and has demonstrated an improved effectiveness of service and client satisfaction.

Rationale behind innovation: To standardised practice and use a tool that is evidence based, using the tool and improving the quality of the 2.5 year review has also improved the uptake of this important review.

Outcome of innovation: A patient effectiveness survey completed immediately following the individual appointments showed that parents appreciated the opportunity to consider their child's development prior to the appointment and for many awareness was raised of aspects they had not previously considered. Staff members also valued the quality standard framework which not only facilitated effective discussion but also provide information/evidence for targeted intervention/support and onward referral as appropriate.

For further information, please contact: Cath Slater **Tel:** 07769 927942

ANTE NATAL BREASTFEEDING WORKSHOP

Organisation: Suffolk County Council

Brief Description: This is a service offered to all parents to provide information and promote breastfeeding antenatally. This workshop operates in a coastal town, the index of multiple deprivation suggests this cluster is comfortable to live in, although child poverty is a concern in some areas of the Town. The mothers/parents attending are invited by the midwife, the workshop is run by the Health Visiting Team, and is held in a Children's Centre in the Town. The workshop takes place on the first Friday of every month and runs for two and a half hours. The sessions are interactive using support materials from Unicef, Department of Health and BreastFeeding Network. A DVD used in the session can be lent to parents. At the end of the workshop parents are given the Health Visitors contact number which can be rung for advice and support with breastfeeding. The Health Visitor links with a Children's Centre worker who is a BreastFeeding Network trained peer supporter.

Area of the service vision or family offer this example meets: *'Breastfeeding is an important part of maternal and child health and provides the best start in life for a newborn child, as well as offering many benefits for mothers. As breastfeeding is the best for babies, all public services should ensure that mothers who choose to breastfeed their babies can do so in a supportive environment. With good information and support mothers can be helped to feed their baby.'* Keith Pearson, Chairman, NHS East of England.

Rationale behind innovation: There are health benefits associated with breastfeeding for both mother and infant: • Breastfeeding contributes significantly to improving public health and reducing health inequalities • Exclusive breastfeeding is recommended for the first six months of life • There are economic and environmental benefits to breastfeeding • In the East of England 66% of babies were breastfed at birth compared to 78% for England - the second lowest rate in the country (Bolling et al. 2007) • In the East of England only 17% of babies are still breastfed at six months compared to 25% for England (Bolling et al. 2007) • Breastfeeding benefits the baby even for a few days of breastfeeding. (East of England Breastfeeding Framework). The workshop offers early support for breastfeeding, but also builds early contacts with the Health Visiting team.

Outcome of innovation: The cluster has an average annual breast feeding rate of 53% compared with rates of 48% in other areas of the locality. Evaluations are completed which demonstrate user satisfaction, and some of the responses achieved have been very encouraging i.e. *'feel much happier about breastfeeding'*, *'feeling prepared now'* and *'found the information very useful'*.

For further information, please contact: Claire Healy **Tel:** 01394 458840 or Carolyn LeMay **Tel:** 07947 593793

ASDA COMMUNITY LIFE PROJECT

Organisation: Hertfordshire Community NHS Trust

Brief Description: The Asda retail group have a strong history of commitment to community involvement. The Asda store in Watford has developed the concept of a 'Community Life Project' which has five strands: • Community Life • Working Life • Healthy Life • Green Life • Local Life. Members of the local community, voluntary and statutory agencies were invited to work in partnership with Asda staff to develop the above themes in order to have a positive influence on local families and community. The Health Visiting team have worked with the Asda management team to develop the provision of HV services from the Community rooms in the store.

Area of the service vision or family offer this example meets: This initiative covers all areas of the core offer as all HV activities can be run through this project. • To increase access to the HV service within an area of high vulnerability • To develop the opportunity to work with new partners in order to meet local needs • To explore alternative methods of service provision in order to energise and transform services as a result of an increased workforce.

Rationale behind innovation: The Asda store is located in an area of high vulnerability with a corresponding level of high domestic violence. It was felt that by providing HV services from a 'neutral' venue that it might increase access to families who historically had been difficult to reach.

Outcome of innovation: The Asda management team have now given the HV service a dedicated room for 'Health' within the suite of community rooms and the following services are currently delivered: • Weekly Breast Feeding support group • Baby Massage group • Monthly HV drop-in session on a Saturday morning • Weekly HV drop-in / baby clinic. A fund raising event was held in the store with the support of Asda staff which resulted in enough funds being raised to buy 4 new CONI monitors and also helped to raise awareness of the issue within the community. Other initiatives that are being explored within the Asda project are: • Establishing a Food Bank • Working with Asda volunteers to support vulnerable families with garden refurbishment/ house decoration • Development of 'themed days' to raise awareness of health issues in partnership with Children's Centres and other local agencies • Liaison and communication with other services have been strengthened as Community Police Officers, CVS and other voluntary agencies also have regular drop-in sessions within the Community Suite which has facilitated contact with the HV team.

For further information, please contact: Ann Devlin, Locality Manager (Watford and Three Rivers) **Tel:** 01923 234282
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ONE YEAR CELEBRATION OF FAMILY NURSE PARTNERSHIP (FNP) IN GREAT YARMOUTH AND WAVENEY

Organisation: East Coast Community Healthcare CIC - Family Nurse Partnership

Brief Description: Great Yarmouth and Waveney FNP Programme covers Norfolk and Suffolk; our innovation was to bring our client group together to celebrate their parenting achievements. Additionally for the organisation and the FNP team, this was a chance to celebrate the successful setting up, and integration of the FNP Programme within to Universal Services. Our clients are vulnerable, first time teenage parents, who are often pre-judged and stigmatised in our society. Therefore this was a chance for them to celebrate together the challenges and positive outcomes they had achieved. One challenge, for the FNP team, was to find a suitable venue, provide entertainment (massage, footprint canvas, cracker making) and refreshments and to transport the clients and their families to celebrate their achievements. Approximately 60 families attended the celebration event in Great Yarmouth, many of whom managed to catch a coach, which was provided, to transport clients living in Waveney and Lowestoft. The celebration event was run with close collaborative working with professionals from The Priory Children's Centre, who helped with the successful running of this event. The team were able to secure a visit from the local Waveney MP, members of ECCH and the local Women's Institute.

Area of the service vision or family offer this example meets: Universal Partnership Plus

Rationale behind innovation: The FNP client base is young teenage (from approx 13 years of age up to 19) first time parents to be. This client group face on a daily basis judgements and stigmatisation from their peers, society (in general) and other professional agencies. The FNP team wanted to bring this vulnerable group of clients together to celebrate their achievements that they have accomplished in such a short space of time and to thank them for voluntarily enrolling on this intensive home visiting programme.

Outcome of innovation: The FNP team realised that this was a big ask of their clients as they do not have groups or opportunities where they may have met before. However the event was a massive success. The clients were able to relax in an environment faced with other teenage parents mixed with professionals, for some this must have been a very daunting experience. As the client group would usually remain highly isolated due to the very nature of their situation. The success of this celebration was reported in the ECCH weekly update, and had the full backing of Pamela Agapiou Head of Universal Children's and Families Services.

For further information, please contact: Nicole Hobson, Family Nurse Partnership Supervisor **Tel:** 01493 744403
Emma Langdale, Family Nurse Partnership Administrator **Tel:** 01493 744404

TIME FOR YOU

Organisation: East Coast Community Healthcare

Brief Description: The aim of this group is to offer support for people who have been / or are affected by domestic abuse. Parents will be able to relate to others experiences and have a time to talk openly about these experiences in a safe environment. To enable them to realise that it is actually happening and to recognise the impact it has on their children. To give them the confidence to access other specialised services in the local area. The group runs over 6 weeks and is facilitated by 2 members of staff. The programme includes relaxation, visualisation, group discussions and signposting.

Area of the service vision or family offer this example meets: This group links into ECM outcomes:
• Stay Safe, Be Healthy • EYFS • A Unique Child 1.4 • Positive Relationships 2.2 • Enabling Environments 3.4 • Healthy Child Programme

Rationale behind innovation: Offering specialised needs led, targeted support at local Children's Centres will give parents the confidence and opportunity to access other specialised Domestic Abuse Services groups in the local area should they wish and give them an awareness of what is happening around them. It will increase their confidence in dealing with other group situations parents will also be able to access groups and services running from the Children's Centres.

Outcome of innovation: Each programme is evaluated and influences the next one based on feedback.
• Raise self esteem and self confidence • Reduce the need for children to be deemed as at risk • Encourage parents/carers/ children to access other CC groups services • Improve attachment and bonding with children • Reduce isolation of all involved • Improve emotional well-being of parent • Improve relationships of children and their emotional well being • Improve overall Parenting Capacity • Improve school attendances • Improve missed health appointments of children

For further information, please contact: Mel Dewsnap, Well Family Team, Village Rise Children's Centre, Lowestoft
Tel: 01502 533571 or Melissa Jack, Student Health Visitor, North Lowestoft **Tel:** 01502 502237

BREAST FEEDING WORKSHOPS FOR CHILDREN CENTRE STAFF

Organisation: Hertfordshire Community NHS Trust

Brief Description: After many discussions around how to improve breast feeding services for mothers in the Broxbourne district, it was decided in partnership with children centres that there was a need, to offer more than just a breast feeding clinic (the expertise will still be centrally based there). We started considering what education and facilities was needed. The children centres could offer the facilities and the staff. The programme ran over two evenings consisting of total of 8 hours plus a practice session with me in breast feeding clinic for one month. There was also home work set by myself. The main objective was to sell breast feeding to the staff so that when mothers came to them, they could remain positive to the benefits and give unbiased support and encouragement. This pilot would start in July and end in September. It would consist of 3 evenings and the support clinic and children centre groups would be advertised at this class. Parents will be given impartial advice and support.

Area of the service vision or family offer this example meets: To improve Breast feeding rates beyond 6 weeks. The long term objective is to improve the health of our children and their futures in relation to obesity.

Rationale behind innovation: To improve support services and analyse the results over a 3 month period to see whether offering more support with this target group improves the breast feeding beyond 6 weeks.

Outcome of innovation: So far all staff involved has been trained and are completing their practice log. This is a saving cost of £3000 with regards training. There are more opportunities where using in house expertise could save money.

For further information, please contact: Karen Afford Team Leader Hoddesdon Health Centre, High Street, Hoddesdon, Herts. EN11 8BQ

DEVELOPMENT OF A VOLUNTARY BREASTFEEDING PEER SUPPORT SERVICE THAT IS FATHER INCLUSIVE

Organisation: East Coast Community Healthcare CIC

Brief Description: To offer every mother, father, family access to a breastfeeding 'peer support' service which is available seven days a week, thus complementing the existing professionally led breastfeeding team.

Area of the service vision or family offer this example meets:

- Public Health: Children and Families
- Communication and engagement with partner organisations
- Developing Community Capacity • Leadership and innovation

Rationale behind innovation: To improve local health outcomes by:

- Raising awareness of research based health outcomes for mothers, babies, children and communities
- Improve and increase initiation of breastfeeding and babies receiving breast milk
- Provide a countywide seamless peer support service to include hospital, home and community support to mothers helping them to maintain breastfeeding to the recommended WHO six months and beyond
- To contribute to best practice standard setting as per UNICEF Baby Friendly stage 2 and 3 recommendations
- To meet the service vision of 'The Health Visiting Implementation Plan' via 'Preparation for Birth & Beyond'
- Reducing long term costs to the NHS associated with artificial formula feeding
- To be father inclusive

Outcome of innovation:

1. To maintain and increasing breastfeeding rates at 6-8 weeks and beyond.
2. To contribute to building a robust and future proof sustainable service that will continue to impact on the physical health of the client and the financial economy of the organisation and local community and
3. Provide and share best practice innovations.

For further information, please contact: Pamela Agapiou **Tel:** 01493 337953 or Margaret Holtz **Tel:** 01493 852209

HENRY SESSIONS

Organisation: ECCH

Brief Description: HENRY - Health and Nutrition for the really young. 6 sessions were delivered to 6 families over a 6 week period for 2 hours per week. Jointly facilitated by a nursery nurse from the healthy life team and a nursery nurse from the health visiting team. – joined up working. Creche facilities were provided by the children centre free of charge. All the families were educated and motivated to increase their knowledge of nutrition, diet, portion size, exercise and overall healthy living. The group bonded and found the sessions very informative but relaxed. Easily accessible in the central children's centre, free parking available.

Area of the service vision or family offer this example meets: Reduce childhood obesity and we have local data and evidence demonstrating that over 12.47% children aged 5 are obese and a further 15.11 % are overweight, 0.86% are underweight before they commence school.

Rationale behind innovation: Early intervention will prevent long term health problems and promote a healthy life style from early years for the whole family.

Outcome of innovation: Families knowledge increased greatly, outcomes audited by questionnaires and scores per session and overall. Very positive feedback collected as evidence. • Considerations from two clients - could the sessions be held over 2 full days rather than six sessions due to the commitment and risk of missing a session. Other clients preferred the shorter sessions due to school aged children and use of the crèche. Outcomes for families - • Improved meal times • Children actively involved in making guided choices • Planning daily activities • Improved confidence in preparation of food • Support from other parents on the course. Course was run by 2 band 4 nursery nurses who had the capacity to consistently deliver the course to ensure that the families engaged and were able to access a familiar face at the childrens centre after the course had finished. This good use of skill mix proved to be very cost effective. Also gave an opportunity for the families to become more aware of other courses and support they could access at the centres within the locality.

For further information, please contact: Amanda Kane, Nursery Nurse **Tel:** 01502 532740
Steph Edrich, Europa House, Great Yarmouth. **Tel:** 01493 852207

IMPROVED COMMUNICATION LINKS WITH GP SURGERIES

Organisation: Cambridge and Peterborough NHS Foundation Trust

Brief Description: With the move away from Health Visitors being based in GP surgery offices we needed to ensure that communication between GP's and Health Visitors continued to ensure timely sharing of information. We have ensured that there is clarity for both the Health Visiting Service and GP Practices. The link Health Visitor will:

- Have face to face contact with a named GP within the practice each month (as per contact agreement below)
- Maintain a weekly contact with the surgery (as per below)
- Liaise with and keep practice team up to date with Universal Children's Health Service developments
- Pick up the details of all families with pre-school children that are newly registered with a GP
- Keep the practice informed of any families requiring targeted packages of care including child protection.

The practice will:

- Contact the named Health Visitor when discussion is needed for families and children with complex needs
- Ensure that the Link Health Visitor is kept up to date with General Practice Developments
- Feedback to Health Visitors when they have referred families/children to General Practitioners
- Invite the Health Visitor to Primary Health Care Team meetings.

Area of the service vision or family offer this example meets: This meets the universal element of the family offer.

Rationale behind innovation: To prevent children and families slipping through the net and becoming unknown to Children's Universal Services. To improve communication between primary Care and Universal Children's Services to ensure children and families with complex health and social needs receive a co-ordinated service where key professionals are involved in supporting them to achieve better outcomes.

Outcome of innovation: 1. Joined up approach to service delivery. Improved communication between Primary Care and Universal Health Services. 2. Health engagement with the community, awareness arising in public health such as dental care, nutrition etc. 3. Improved uptake of the healthy child programme within the community. Increased acceptance of health. Embedded knowledge of the communities health needs within Universal Services. 4. Shared responsibility for ensuring children and families have access to appropriate services in a timely manner.

For further information, please contact: Rowena Harvey, Professional Lead for Health Visiting. **Tel:** 01733 466655

MULTIPLE MAGIC TWINS GROUP

Organisation: East Coast Community Healthcare CIC

Brief Description: This is a monthly session for parents of twins and multiple births at Beccles Children's Centre where there have been several sets of twins born recently. Originally started by a parent of twins in collaboration with the Children's Centre Manager. The Children's Centre provides an excellent venue (child/baby friendly and breastfeeding welcome). The Health Visiting team is now supporting the group with health advice and input during all the sessions.

Area of the service vision or family offer this example meets: Specific support for parents of multiple births to help address their particular needs. Building Community Capacity through encouraging active participation in other local groups and activities and peer group support. (Encouraging parents to form their own networks and friendships locally). Enabling service users to be innovative in their own community to access the specific support they need. Ensuring that parents know where to get other help and support from.

Rationale behind innovation: Responding to the needs and requests of service users and partner agencies. Actively encouraging the involvement of parents in the community and meeting their needs. Prevention of rural isolation by introducing parents of twins and multiple births to one another and getting them out of the house and into the community. (Peer group support). Service users, Children's Centre and health working together to satisfy an identified need.

Outcome of innovation: Sessions began a few months ago without direct Health Visitor input but this was requested by the parents and organiser of the group. Parents themselves felt the need to ask for guidance around feeding, parenting etc., within the group and identified the need for health visiting support.

For further information, please contact: Robert Pymont, Health Visitor or Sarah-Jane King, Nursery Nurse
Tel: 01502 719802 or Kim Joyce, Team Leader **Tel:** 01502 719804

PREPARING NEW AND EXPECTANT MOTHERS AND FATHERS FOR THEIR PARENTING ROLE

Organisation: Norfolk Community Health and Care NHS Trust

Brief Description: This project has focused on improving the uptake and quality of Health Visitor antenatal home visits. The scope of the project included all Health Visiting Teams within the organisation and all Health Visitor students undertaking their practice placements within the Health Visitor teams.

Area of the service vision or family offer this example meets: Our vision for the project was that parents would feel better prepared for parenthood, with improved assessment by Health Visitors supporting either intervention if indicated, and improved outcomes for children and families. This project is totally in line with the ambitions in the Health Visitor Implementation Plan - a call to action. It will deliver a key aspect of the universal level of service, and if indicated for families with additional needs, universal plus or partnership plus.

Rationale behind innovation: The rationale for selecting this project is it was felt that the service already had in place a good foundation for this work and areas of good practice to build on. • A small Parent Infant Mental Health Team in place • A standard for Health Visitor antenatal contact is in place but coverage and equality of service needs improvement. Coverage at the start of the project showed that under 50% of antenatal facilities had an antenatal contact from a Health Visitor • All Health Visitors undertake Solihull Foundation training within six months of commencing employment • A multi-agency pre-birth protocol to identify families with additional needs including safeguarding is well established across the health and social care economy • There is evidence of buy-in from midwifery services.

Outcome of innovation: This project is part of a whole system change towards achieving the ambition of early assessment and intervention for families in Norfolk. By building on the foundations already present we have been able to consider this ambitious project. We are delighted with the achievements to date, but will continue to work on developing and improving the programme over the coming months. The next steps are: • Continue to deliver the antenatal promotional interview training • Increase number of antenatal contacts in line with KPI's as service capacity improves • Carry out further parent view questionnaires • Develop a supervision system building on Family Nurse Partnership.

For further information, please contact: Julia Whiting **Email:** julia.whiting@nchc.nhs.uk
or Maria Richardson **Email:** maria.richardson@nchc.nhs.uk

RESTORE COMMUNITY CENTRE DEBDEN

Organisation: Universal Childrens Services SEPT (West)

Brief Description: Restore Community Centre in Debden opened on March 9th, 2012 following consultation with the local community. It was identified that access to healthcare and advice would be greatly welcomed and was lacking. The Centre is run by Restore Community Church and is run wholly by volunteers drawn from the area, including other local churches. Health visiting drop in sessions are being held within the Centre on Friday mornings where people of all ages and backgrounds are welcomed. The aim of the Centre is to provide a friendly place for people to join in activities, access services and information and where people can enjoy a sense of community.

Area of the service vision or family offer this example meets: All levels.

Rationale behind innovation: SEPT have been given the opportunity for joint working within the Centre on Friday mornings when an open clinic is held and where people can access the Health Visitor for advice and support. As a new project progress has been slow, but support has been given to new mothers regarding feeding, diet, together with health concerns such as infant and child skincare. Support has also been given to women experiencing domestic abuse and advice given to people wishing to give up smoking. Any concerns have been forwarded to the relevant agency for continued care and support. Neighbourhood Police have a surgery and visit the Centre on a regular basis. The Centre also offers Bereavement Counselling and family mediation.

Outcome of innovation: Plans for the future will be to deliver postnatal/antenatal care, working together with agencies such as Children's Centres, midwives, Breastfeeding Advisors and Healthy Life Coaches. We also aim to deliver 'The Freedom Course' for women experiencing domestic abuse. Many people just drop in to the Centre and have a cup of tea and play board games. The Centre has met a great deal of needs for the community of Debden and has been able to work alongside other agencies which can only strengthen the links with other organisations and help give a more holistic approach to the community.

For further information, please contact: Judy Hurry **Tel:** 01279 827851

SUPPORTING HEALTH VISITOR STUDENTS THROUGH A MODEL OF ROVING PRACTICE TEACHERS

Organisation: Norfolk Community Health & Care NHS Trust

Brief Description: In order to successfully deliver the Health Visitor implementation plan and support the increasing number of Health Visitor students, a solution for the ratio of students to Community Practice Teachers (CPT's) was needed. Over a period of time East of England providers have begun to move away from the traditional support model of one CPT to one student Health Visitor towards a long-arm mentoring model. In order to manage the significant increase in student numbers from September, 2011, NCH&C discussed their possible options and an experienced CPT suggested a model of 'roving' practice support as a way of meeting this challenge. To enable the 'roving' CPT to manage students effectively, a proportion of existing caseload responsibilities is removed. To enable this to work and to allow the CPT enough time and resource to support students effectively, caseloads need to be reduced accordingly. Health Visitor students are placed with mentors who have undertaken the required mentorship programme.

Area of the service vision or family offer this example meets: All levels.

Rationale behind innovation: In order to successfully deliver the Health Visitor implementation plan and enable good quality of practice education for the increasing number of Health Visitor students, a solution for the ratio of students to CPT's was needed.

Outcome of innovation: This 'roving' model of supervision provides the student with a greater range of practice placement experience within the Health Visiting team given their time is spent both within the placement and the CPT caseload area. The student is able to provide the CPT with feedback and the model is benefitting CPT's by enhancing their own practitioner skills. It is also helping to develop the leadership role of CPT's. Students are able to develop a wealth of experience within different setting as they are placed throughout the organisation, not purely within CPT sites. The 'roving' CPT oversees a programme of in-house study days aligning theory of practice, action learning sets and support groups for mentors. Any placement issues can be addressed quickly, with a change of placement or mentor if required. In addition the model has seen: • Improved overall monitoring of practice throughout the trust • Increased flexibility to support return to practice students. The introduction of this model is currently being evaluated using feedback from students, mentors, CPT's, HEI colleagues, together with information such as attrition and qualification rates. To date, reports from students are extremely positive with low attrition rates.

For further information, please contact: Michelle Holgate, Practice Teacher **Email:** m.holgate@nhs.net



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