



Haverling
LONDON BOROUGH

**Healthy Child Programme
Health Overview and Scrutiny Committee
24th September 2020**

- ❖ Healthy Child Programme (HCP)
 - Health Visiting (HV) - 0-5 years
 - School Nursing (SN) - 5-19 years

- ❖ Delivered in collaboration with GPs, Early Help service, early years providers, schools and education services

- ❖ Evidence-based programme that, delivered in full, improves outcomes across a wide range of areas including maternal mental health, school readiness and childhood obesity.

- ❖ Only universal service provided to pre-school children
- ❖ The 0-5 health reviews are a mandated function of LAs:
 - Antenatal check
 - New Birth Visit
 - 6-8 week check
 - 12 month check
 - 2-2½ year review
- ❖ Inform the support offered to the family by the HV team and shapes the offer to the family from other health, education and social care professionals
- ❖ In previous contract, only NBV, 12 month check and 2-2½ year review were offered universally

- ❖ As children reach school age they transition into care of the SN service
- ❖ Central in linking schools to wider health and wellbeing services and in enhancing the value of Health Education and the Healthy Schools London programme
- ❖ National Child Measurement Programme (NCMP) is a mandated function of LAs
- ❖ The five 5-19 health reviews are not mandated
- ❖ Service review highlighted work around healthcare plans and training, and safeguarding as key demands on staff time

- ❖ Annual value of previous 5-year contract was £2.595m (HV - £2.005m, SN - £590k)
- ❖ Additional funding for 0-5s was agreed in principle ahead of the procurement
- ❖ Procurement exercise carried out between May and August 2019
- ❖ Evaluation panel made up of Commissioning, Public Health, Early Help and Education
- ❖ Followed negotiated procurement route which enabled us to discuss and agree added value that could be delivered through additional funding

- ❖ In November, Cabinet approved award of 5-year contract to NELFT and additional investment in 0-5s element:
 - £289k in year one of the contract
 - £578k in year two of the contract
 - £867k in years three, four and five of the contract
- ❖ Each increment of additional funding links to additional service delivery agreed through the negotiation process
- ❖ New contract commenced on 1st April 2020
- ❖ Mobilisation phase plans in the lead up to this included:
 - Recruitment of additional staff
 - Preparation for additional service delivery
 - Finalising outcomes measures, performance reporting requirements etc.

- ❖ The Covid-19 pandemic has impacted the HCP in the following ways:
 - 40% of HV/SN staff were redeployed into Covid roles
 - National guidance in April advised aspects of the HCP to be stopped, partially stopped and continued
 - Prioritised safeguarding, new birth visits, follow-ups of high risk mothers/ babies/ families, and telephone/ text advice
 - National guidance in June outlined priorities for restoration
 - Some elements remain on hold (e.g. NCMP)
 - Staff returned from redeployment in July

- ❖ Despite significant impacts on the team, the following was delivered:
 - Centralised approach to admin and clinical duty
 - Remote delivery model developed and implemented
 - HV team divided into two: one team delivered NBVs and 6-8 week checks, other focused on safeguarding
 - SNs provided regular telephone calls to vulnerable families and children on healthcare plans
 - Redeployed staff maintained oversight of emails and key cases related to their substantive posts
 - Referrals continued to specialist/ targeted services
 - Daily calls between NELFT and LBH Children's Services

- ❖ The following progress has been made:
 - Recruitment of new staff (commenced in post in July)
 - Each GP practice in the borough now has a named HV
 - The Havering 0-19 Service SPA (telephone and email contact) is fully operational with over 4000 calls received in 6 months
 - Social media presence has also increased
 - Virtual antenatal contacts commenced in partnership midwives – providing streamlined support to families
 - SNs are working with schools in order to shape their service offer in light of changes to the way schools are operating under Covid-19 guidance.
 - SNs delivering virtual sessions with CAMHS colleagues

- ❖ The following priorities have been identified:
 - Backlog of 1 and 2-year checks (completed in August)
 - Revise timescales for full mobilisation
 - Adjust Year 1 targets to account for Covid-19 impacts
 - Increase coverage of antenatal and 6-8 week checks
 - Develop delivery of integrated programmes of support with Early Help
 - Scope extension of service delivery hours
 - Introduce infant feeding and perinatal mental health roles
 - Improve tracking and follow-up of families who don't engage in health reviews

- ❖ National outcome measures
 - High level (e.g. reducing smoking at delivery, increasing breastfeeding prevalence at 6-8 weeks, improving school readiness, reducing under 18 conceptions)
 - HV and SN services contribute to these through their work with other agencies across the system

- ❖ Local outcome measures
 - Based on Public Health England's HCP guidance
 - Focused on High Impact Areas for 0-5s and 5-19s
 - Developed at individual, community and population levels

- ❖ For HV, two key areas in which we expect improvements as a result of increased service capacity are:
 - Coverage of antenatal checks
 - Coverage of 6-8 week checks
- ❖ We are therefore proposing these as the two performance indicators to be reported.
- ❖ For SN, we are proposing an indicator to reflect the joint work being done by school nursing and CAMHS to support children and young people's emotional wellbeing.