### NORTHUMBERLAND COUNTY COUNCIL

### **HEALTH AND WELL-BEING BOARD**

At the meeting of the **Health and Well-being Board** held at Council Chamber, County Hall, Mopreth on Thursday, 8 February 2024 at 10.00 am.

### **PRESENT**

P Ezhilchelvan (Chair) (in the Chair)

### **MEMBERS**

E Anderson A Blair N Bradley A Conway D Jackson V Jones S Kennedy (Substitute) S McCartney B Moulder G O'Neill L Paterson W Pattison E Simpson G Reiter P Standfield G Syers J Watson

#### **OFFICERS**

L M Bennett
G Clough
J Lawler
R Rispin
Senior Democratic Services Officer
Harrogate & District NHS Foundation Trust
Public Health Consultant
Harrogate & District NHS Foundation Trust

### 57 **APOLOGIES FOR ABSENCE**

Apologies for absence were received from G. Binning, H. Snowdon, and Councillor H.G.H. Sanderson.

### 58 **MINUTES**

**RESOLVED** that the minutes of the meeting of the Health and Wellbeing Board held on 11 January 2024, as circulated, be confirmed as a true record and signed by the Chair.

### 59 GROWING HEALTHY 0-19 SERVICE ANNUAL REVIEW

Members received a report and presentation from the Harrogate & District NHS Foundation Trust updating them on the 0-19 Growing Health Service. The reports described the progress to date giving assurance that the team delivered a high quality, responsive and effective service to the children, young people, and families (CYP&F) of Northumberland. The report was presented by Rachel Rispin and Ginelle Clough of the Harrogate & District NHS Foundation Trust.

### Key issues included:-

- Performance Mandated
  - Performance was either static or generally improving. All staff had a
    quality and performance 1-1 monthly. Managers worked to ensure that
    mandated contacts were carried out within timescale.
  - Developing performance panels to aid understanding of performance issues within the localities.
  - All Managers had a thematic lead within the service and were part of a workstream including patient experience, SEND, best start in life, and early intervention.
  - Workforce and recruitment of SCPHNs (Specialist Community Public Health Nurses) had been a significant challenge but the number of vacancies in Northumberland was beginning to fall. Training of these staff was high profile and development from within the organisation was encouraged. Posts and roles were evaluated when they became vacant to see if the organisation could be innovative.
- Service Transformation new roles had been created.
  - Community Anchor objectives including community profiling within Family Hub workstreams and scoping projects and initiatives across Northumberland to promote a community centred, place-based approach in delivery of the Healthy Child Programme and to reduce inequalities. Northumberland Housing Pathway development to improve communications between health and housing to improve home conditions. Collaboration with the Northumberland Fire Service to identify electrical and fire safety risks during home contacts.
  - Project Support Officer transformation and implementation of the digital platform. Developing and expanding social media offer including Facebook and Instagram.
  - Community Triage Nurse The role would provide a timely response to referrals, ensure agreed waiting times were adhered to, and signpost referrals to the most suitable partner.
- Locality Engagement Events had been held and provided valuable feedback on what was working well, what needed to improve and action that staff could take themselves or where they needed support. Task and Finish groups were being developed to take actions forward.

### The following comments were made:-

- It was clear that the service cared about its staff and worked into and across the community. There was a culture shift working alongside families rather than 'doing to' families. The mandated statistics were encouraging. Partnership working was welcomed.
- There needed to be a shift from the view that anything health related must be carried out at a GP surgery, including the work of Health Visitors. This was an important shift of culture. Work was ongoing regarding a move to integrated neighbourhood working and it may be that some aspects of GPs role could be moved into the community and the Family Hub.
- The contract with the Harrogate & District NHS Foundation Trust was a Section 76 partnership and had no specified end point.
- The digital app had been downloaded by 5,290 people but was still in its early stages. This was a universal offer to build resilience in families and

ensure access to the correct information. It was acknowledged that not every area in Northumberland had a community hub, but the service was a home visiting service, and the service would be delivered wherever it was needed.

- Following the Cramlington conversation, a steering group had been set up for the Cramlington/Seaton Valley as feedback indicated that this area felt underserved. It was planned to allow patients to be attended to but also to stay and see what else was available within the Family Hub.
- There was work with rural co-ordinators to better understand the needs of families living in more remote areas.
- Healthwatch was concluding a report on Health Visitors and that would be made available in due course. Healthwatch would work closely with the service to use feedback and look at ways to continue to improve the service.
- Jenelle Clough was very integrated with the community sector and had attended many Thriving Together events. The removal of silos was working, and the breakdown of barriers had been transformational.
- It was noted that there was an outreach worker based at Amble North Primary School.
- The work with the 0-19 service was welcomed by the Northumberland Fire & Rescue Service as it offered the opportunity to target the most vulnerable and those at highest risk in the community.
- Three pillars had been established, public health, safeguarding and emotional health and resilience. Via the Community Triage Nurse, it was important to ensure that young people were signposted to the correct person at the right time and this would help to reduce waiting lists.
- Peter Standfield requested a discussion with the 0-19 service in relation to the Armed Forces.

**IT WAS AGREED** that the presentation and report be noted.

### 60 **FAMILY HUBS**

Members received a verbal update and presentation from Graham Reiter, Director of Children, Young People and Families.

A number of key points were raised in the presentation including:

- There were 11 purpose-built Family Hubs based in the central, southeast, west and north localities and a further seven dedicated outreach points in four fire stations, two military bases and a primary school.
- The Family Hubs were launched in September 2022 and significant progress had been made in a short space of time. Northumberland was one of 14 Local Authorities to be awarded Trailblazer status. Family Hubs were set up to cover the 0-19 age group. The aim was to ensure families with children had early help to overcome a number of difficulties. It involved a multidisciplinary range of services and key partners such as 0-19 service, midwifery, primary mental health, registrars and the community and voluntary sector.
- Commissioning arrangements with Action for Children and Barnardos had ended on a positive note.
- Key principles were access, relationships and connection.
- Locality Integration Events had been crucial in bringing people together and

- sharing knowledge.
- Funding was on a three-year basis primarily focusing on 0-2s but with an expectation that services would be offered up to 19 years.
- Parent Carer Panels had been set up and more work and development were needed to ensure that they were front and centre
- **Prevention and Intervention Pathway** range of group work opportunities such as learning together through play. Where possible the range of opportunities had been developed in consultation with parents. Feedback from users indicated that the service was valued. Services were also available on an individual basis where appropriate. There was also the ability to deliver some groups virtually. There was a key push to engage with fathers as early as possible and virtual groups had allowed this to happen across the county without geographical limitations.
- **Family Help** offered targeted intervention for families at a higher level and worked with a 'whole family' approach.
- Increasing Accessibility by Enhancing the Digital and Virtual Offer it
  was important to recognise the implications of digital poverty and consider
  how to mitigate and support families in the situation.
- Northumberland Family Hub Integration with Health engagement with health partners had been extremely positive over the last 18 months. Key partners sat on the Family Help Partnership Board. Health colleagues were co-located in some Hubs and a range of supports and groups were also available
- The range of services in each locality had been mapped and ensured that there was connectivity which was not available previously.
- Northumberland Family Hub Links with GPs 1,009 children had been referred from GOs in the last 12 months. There had been joint attendance with 0-19 service at Primary Care Network meetings to discuss the Family Hub Offer. There were strong links between Community Development Workers and Social Prescribers. Locality links were being made with specific GP practices.
- The Start for Life Publication had been sent to all GPs, Midwifery and 0-19 service.
- Eyes on the Baby Project This was a multi-agency training evaluation project focusing on Sudden Unexplained Death in Infancy. More than 70 staff had completed the EOTB Strand 1 training and over 100 front line staff had completed Strand 2 training.
- Northumberland Family Panels making sure that the parents and carers were actively involved in the most effective way. This work needed further development but there was a strong basis.
- **External Visits** Northumberland had been one of six Local Authorities to participate in a Thematic Review of Family Hubs. Very positive feedback had been received including:-
  - Passionate, child and family centred staff
  - Partnership working
  - Inclusive Family Hub offer
  - Effective Leadership
  - Positive feedback from parents
- Following a visit from Dame Andrea Leadsom there had been praise for giving children the best start in life, as well as the innovative ways we were ensuring all expecting and new parents had access to the Start for Life

Offer.

A number of comments were made including:-

- Was it now time to start making a difference on issues that we were now
  measuring and creating a specific action plan, rather than having a
  generous offer of everything that was available? The perceived needs of
  people may be different from what the population's need was in terms of
  inequalities and wellbeing in the long term.
- Residents voice was equal to data in the Inequalities Plan. It was important to track what was below the Northumberland level and look to make the offer more bespoke based on what demand looked like.
- How was public sector estate mapped out relating to health and social care, particularly if some services were wishing to expand and the Family Hub had space and vice versa? There may be areas where estate rationalisation could be looked at and money could be diverted back to services rather than buildings. This related to the quality of relationships locality to enable these conversations to go ahead. Other community assets such as schools may also be used.
- The Systems Transformation Board had agreed to set up a task group comprising a number of agencies to think about integrated neighbourhood teams and ways of working.
- The Family Hub was an excellent example of working collaboratively and rather than looking at starting afresh and it was necessary to look at the estates, how things could be resourced. The task group would look closely at integrated neighbourhood working and this should start with what was already in place in the Family Hubs.
- Family Hubs were a national development and there were regional links and meetings with other Family Hub Managers to enable them to learn and share from each other. However, how Family Hubs developed in Northumberland would be different to how they developed elsewhere. It was important for them to develop specifically to fit the particular locality's needs.

**RESOLVED** that the presentation be noted.

### 61 **HEALTH AND WELLBEING BOARD – FORWARD PLAN**

Members noted details of forthcoming agenda items at future meetings.

It was planned to restrict each meeting to three items where possible. A suggestion was made that a report be provided on Safe Havens and this would be scheduled for the meeting in April/May 2024.

### 62 DATE OF NEXT MEETING

The next meeting will be held on Thursday, 14 March 2024, at 10.00 am in County Hall, Morpeth.

CHAIR
DATE



## Growing Healthy 0-19 Service Northumberland.

Rachel Rispin.

Service Manager.

## Page

## Performance- mandated



	Q4 22/23	Q1 23/24	Q2 23/24	Q3 23/24	
Antenatal	86.8	90	93.7	95.4	
NBV	92.3	97.7	98.2	97	
6-8 week	86.7	88	93.6	92.1	
9-12 month	93.6	96	96.5	97.1	
2-2.5 years	90.9	95	94.3	95.6	



- The Community Anchor role has strengthened connections between the 0-19 service, community assets and our partners from all sectors. Objectives of the role include, community profiling within the Family Hub workstreams and scoping various projects and initiatives across Northumberland to promote a community centred, place-based approach in the delivery of the Healthy Child Programme and to reduce inequalities.
- The Northumberland Housing Pathway development Ginelle Clough is leading upon the co-creation of a pathway building on the home environment assessment tool to improve the communication between Health & Housing to improve the home conditions of Northumberland residents. The 0-19 Service are leading on a pilot of this pathway due to complete in March 2024.
- In collaboration with the Northumberland Fire Service, we have developed an enhanced home environment assessment tool, training has been provided to 0-19 staff on identifying electrical and fire safety risks during home contacts. In partnership with the Northumberland Fire & Rescue Service, we have co-created a referral pathway to support families who may require any additional fire safety advice or require any further fire safety risk assessments within their home.



The **Project Support Officer Role** includes responsibility for implementing and transforming the digital platform. The role supports continuous improvement with the digital offer and supports 0-19 Practitioners with training and development. We are developing and expanding our social media offer including Facebook and more recently Instagram.

We have a successful service user feedback process with Feedback Friday. The role also includes integrated working with other partners, sharing digital information and contributing to the Family Hub digital offer.



The role of the **Community Triage Nurse** has been developed with a partnership approach to early intervention. They work into the multi-agency Early Help Hub three days per week. The role supports the flow of referrals across the system, representing the 0-19 Service. The role is pivotal in providing a timely response to referrals, ensuring agreed waiting times are adhered to. They will also signpost referrals to partners demmed most suitable to meet the needs of the service user.



• Growing Healthy 0-19, Midwifery and the Family Hubs held a series of Locality Engagement Events with staff promoting service offer, developing integrated working and future working. The events have provided valuable feedback on what is going well, what needs to improve, the individual actions that staff may be able to take themselves but also what actions staff may need support with. Task and Finish groups are being developed at this time to take actions forward.





# Northumberland Family Hubs Update

January 2024

## Northumberland Family Hubs

### 11 purpose-built Family Hubs:

Central Locality Ashington, Bedlington, Newbiggin South East Locality Blyth Central, Blyth West West Locality Prudhoe, Hexham, Haltwhistle North Locality Berwick, Alnwick, Hadston

### 7 dedicated outreach points:

**Fire Stations** Allendale (West), Wooler (North), Rothbury (North), Bellingham (West)

**Military Base** Albemarle Barracks (West) & RAF Boulmer (North)

**Primary Schools** Amble (North)





## Family Hub Overview

- Started March 2022/Soft launch September 2022: Northumberland one of 75 local authority areas to implement the Family Hub model and one of only 14 local authorities to be awarded Trailblazer status
- Family Hubs as part of integrated family services ensure families with children and young people aged 0-19 receive early help to overcome a range of difficulties and build stronger relationships.
- Effective integration of a range of services and professionals working together as a multi-skilled, multi-disciplinary team, sharing knowledge and expertise, co-locating together wherever possible, co-delivering and creating solutions together
- The key partners and staff involved include the Family Hub / Family Help workforce, the 0-19 Growing Healthy Service (Harrogate & District Foundation Trust), Northumberland Midwifery Services (Northumbria Health Care Trust) Primary Mental Health (Northumbria Health Care Trust), registrars, libraries, education and the voluntary and community sector.





## General update

- Restructure in Early Help and Prevention completed, including ending of commissioning arrangements with Action for Children and Barnardos and TUPE of staff to NCC.
- Key Principles : Access, Relationships, Connection
- Locality Integration Events held -240 staff attended the 8 events across Northumberland
- Current 3 year national funding focuses primarily on 0-2, expectation that a range of services will be offered up to 19 (and 25 for those with Special Educational Needs and Disabilities)
- Feedback and co-production via Parent Carer Panels





## Prevention and Intervention Pathway

- The Prevention and Intervention Pathway: a consistent, science backed / evidence-based offer for families regardless of which Hub they attend.
- Programmes based on the presenting needs of the population
- Extensive co-design with parents: e.g Brilliant Babies and
   Learning Together Through Play (LTTP)
- ଳି• Range of groups offered are valued by parents and
- ⇒ children and young people who use them
  - Staff can deliver these programmes on an individual basis where helpful and appropriate.
  - Some groups can be delivered virtually



<u>Prevention and Intervention Pathway (public facing)</u>





## **Family Help**

- Northumberland's Family Help teams (4 teams, one per locality) are based in Family Hubs, and
  provide an early help service to families identified as being in need of help (level 2) as defined by
  threshold of need.
- Working in a 'whole family' approach, staff undertake Early Help Assessments (EHA) with families
  to agree a clear plan with written actions, outcomes and responsibilities for all family members
  including the adults.
- Plans are reviewed through Team Around The Family (TAF) meetings chaired by a lead professional. Staff work closely with partners including health visiting, midwifery and other health teams, as well as early years and education. Often, a Supporting Families Employment Adviser will also attend to help the family with any financial issues.
- Family Help Workers also deliver the Intervention programmes from the Prevention and Intervention Programmes.
- Developing young people's offer





## Increasing Accessibility by Enhancing the Digital and Virtual Offer

### ARGUING BETTER

Disagreements are a normal part of life, and most couples argue from time to time...

This is a FREE online or in-person package which explores:

- · Where stress comes
- · How stress can affect you
- · How to support and listen to each other in difficult times
- · How to make arguments constructive
- · How to resolve issues



- To extend the reach to all families, there has been significant investment into enhancing the digital offer to families
- The objective is for families to access services in the way that meets their needs
- For those families experiencing digital poverty, all Hubs have a number of tablets available which have all of the resources built in.
- Health partners can distribute the links to patients and other professionals. A poster with QR codes is available.
- Where appropriate, some groups delivered virtually







## Northumberland Family Hub integration with Health

Engagement with health partners has been extremely positive over the last 18 months:

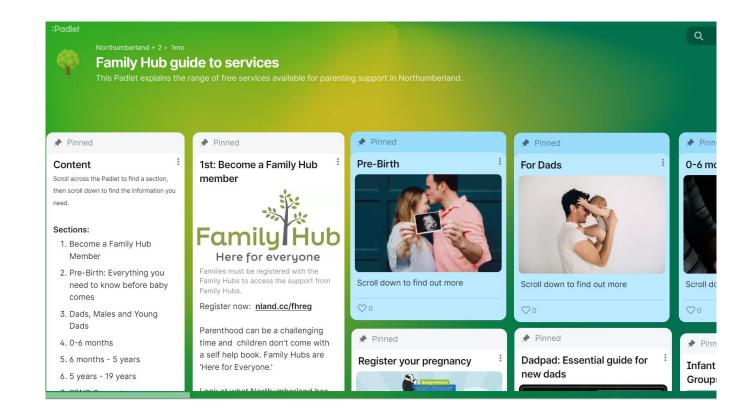
- Key partners sit on the Family Help Partnership Board
- All workstreams supporting the implementation of Family Hub are either chaired by, or attended by multiple health partners and they have been instrumental in developing the delivery plan for Northumberland
- Health visitors, midwifery and Primary Mental Health are co-located in some Hubs and where this is not possible, there are rooms available for clinical staff to use
- We are now co-delivering HENRY Antenatal, Relax Kids and Charge Up and Hubs are used for Infant Feeding Sessions, Baby Weigh Clinics and other delivery





### Northumberland Family Hub integration with Health cont..

- Services for 5-19 mapped across Northumberland – Helping Parents Access Support Services
- Newborn Behaviour Observation Training funded by Family Hubs, all HVs trained as part of the core offer
- Professional network meetings have started in some localities, bringing together health partners and family hub teams
- All services for perinatal mental health and the parent / infant relationships have now been mapped and about to be published



## Northumberland Family Hub Links with GPs

• 1009 children referred from GPs into the Early Help Front Door in the last 12 months

Joint attendance with HDFT to Primary Care Network
 Meetings to talk about the Family Hub Offer

- Strong links between Community
   Development Workers and Social Prescribers
- Locality links being made with specific GP practices this is developing work (see quote)

"In the West we have begun making links with GP Practices to ensure they know of the services we provide and to see how we can work together. At the Bellingham GP Practice this has led to GPs and nurses encouraging new and expecting parents to sign up to Family Hubs in appointments, as well as sending texts out about updates to our service to all parents who are registered at the Practice. We have been invited to the next West GP Time Out session, to deliver a talk about Family Hubs, where we hope to roll out the Bellingham model across the West."





### Promotion of Start for Life Offer

Start for Life Publication sent to all GPs, Midwifery and the 0-19 service also have copies:

















## Eyes on the Baby Project

- Funded by Family Hubs, Public Health and NHCT, Eyes on the Baby is a multi-agency training and evaluation project involving NCC staff and health partners focusing on Sudden Unexplained Death in Infancy (SUDI) to ensure that we can reach vulnerable families with information and support around safe sleep.
- More than 70 colleagues in Birth Registrations, Libraries, Customer Services and Family Hub admin roles completed the EOTB Strand 1 training and attended facilitated Q & A sessions where staff had useful discussions about the training and how it can be implemented in the context of their roles and different interactions with parents and families.
  - More than 100 frontline staff have completed the EOTB Strand 2 training and attended a facilitated Q
     & A session.





### **Background**

In the Best Start for Life: a Vision for the 1,001 Critical Days81, the government's Early Years Healthy Development Review highlighted how services and support offered to families in the critical conception to age two period are often disjointed, making it hard for those who need help to navigate what is available to them. In the worst-case scenarios, babies miss out on the best care because parents and carers are unable to access the support they need, or the support they need is not available. Where services are available, they are not always developed with the needs of families in mind.

The rationale behind this specific project is to promote and support the opportunities for parents and carers to interact and become engaged in building a more informed approach in the delivery of programmes to our local families. Our parent / carer panels will be set up with the aspiration of bringing together parents / carers within our local community to further support the development and co-production of our Family Hubs to improve the universal offer in a positive way to involve our families.

### **Project Aims**

How to recruit a diverse and inclusive parent and carer panel

We often hear from the same voices, so it is important to hear from parents and carers who have different lived experiences and represent your locality.

This chapter provides guidance on how to ensure your parent and carer panel represents the diversity within your local population.

How to use co-design to successfully run your parent and carer panel

When engaging with your diverse parents and carers, it is important to think of their needs and involve them early in the process to be able to effectively work together. This chapter provides guidance on how to engage with parents and carers and wider systems to set up and use a parent and carer panel to co-design services.

How to use the feedback from your parent and carer panel

Once you have successfully run your first panel, it is important to consider how you will use their feedback.

## Northumberland Family Panels

#### Method

Over the last 6 months we have worked to begin to fulfil the aims of this programme, by working with the identified local community groups. During the project we have begun to collect the feedback, views and opinions of our panels through the use of discussions and consultations. Throughout the project to date, we continue to work with 9 parent / carer panels, these include parents and carers from our local community. The panels are supported by our Community Development Workers from The Family Hub Project Team.

The current number of parents / carers taking part in our Family Panels stands at 47 - the panels varied monthly depending on the members joining our individual panels due to the launch and word of mouth of panel members.

During the project the panels meet on a monthly basis during term time for 1 hour on alternative days depending on the requests of the panel members. Our panels are planned and include an agenda of activities in which all of the members are encouraged to take part in the discussions ensuring that we collect feedback across the range of panel members taking part.

The agenda points are selected from requests linked to the activities identified through the current guidance as well as the individual need of our locality Family Hubs. Information and feedback is collected from each panel, which will support the collection of evidence from the following areas;

- Increasing confidence around independent participation for all parties, thereby facilitating social relationships
- Increasing positive behaviours through sharing skills and the creation of safe environments for those involved
- Improving community cohesion and sense of place within our communities and Family Hubs



### **Risks**

#### Safeguarding

As this project works alongside our families it is paramount to us that we have robust safeguarding policies and procedures in place and that we ensure all panel members fully understood and adhere to. This includes ensuring that all our staff have DBS as well as a clear understanding of Northumberland County Council safeguarding pathway.

### What's Going

well

- Established groups regular attendees across all 4 localities
- Panel members have met wider Family Hub staff so they feel involved in our panels
- Website feedback from parents has affected change already and this has been fed back to panel
- Some panel members join virtually when needed – accessible
- Parents give positive feedback as well as areas for development
- Seeing key themes in feedback across localities from our panel members which helps to build a case to affect change - i.e. health visitors, midwives, padlet feedback
- Most parents keen to progress further with champion model



## Areas for further development

- Need to establish robust terms of reference and ground rules. This is to ensure we are ensuring everyone feels listened to and respected by other panel members and have an equal say
- Need to extend reach of panels to recruit wider from seldom heard groups and also new parents to Family Hubs

### Reflection

Emerging interim findings from the project are showing positive benefits to working with our parents and carers, the majority of members taking part, have and continue to provide some excellent feedback, views and opinions on how as Family Hubs we can provide the best outcomes for our families and local communities.

Parents and carers have stated that they are enjoying and benefitting from their interactions with Family Hub staff as well as other parents and carers. These panels will hopefully continue to encourage the sharing and collection of feedback to enable all involved, to improve relationships, increase understanding of the universal offer of our Family Hubs.

## Interim Project Findings

### **External Visits**

### Ofsted/CQC Thematic Review:

Northumberland one of six local authority areas chosen by the DfE to participate in a Thematic Review of Family Hubs nationally. August 2023

### Feedback and findings very positive:

- Staff described as passionate, child and family centred, skilled, flexible to meet need, positive, reflective.
- Partnership working: Effective building from a strong base. They especially noted the work with the midwifery and the importance of birth registration in the hub to capture registrations and support early engagement. Good examples eg DWP being offered.
  - The family hub offer: inclusive in a range of ways.
  - Effective leadership: we know ourselves well and positively model partnership working.
  - All feedback from parents extremely positive

### Dame Andrea Leadsom: Visit

Praise for giving children the best start in life, as well as the innovative ways we are ensuring all
expecting and new parents have access to the Start for Life Offer.