

0-19 Growing Healthy Northumberland

Summary Report January 2023

Report to: Northumberland Health and Wellbeing Board

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Purpose

The purpose of this summary report is to provide an update to the Northumberland Health and Wellbeing Board on the 0-19 Growing Healthy Service, describing progress to date and giving assurance that the team deliver a high quality, responsive and effective service to the children, young people, and families (CYP&F) of Northumberland.

Background

Harrogate and District NHS Foundation Trust (HDFT) has provided 0-19 Health Visiting and School Nursing services in Northumberland from the 1st of October 2021, working in partnership with Northumberland County Council through a Section 75 Partnership Agreement. Our vision is for every child to have the best start in life, and be happy and healthy, through working in partnership with families in Northumberland. We have a strategic commitment to integrated working to optimise the impact of collective resources on health and wellbeing outcomes across Northumberland and reduce inequalities.

The Healthy Families Partnership Board and Design Group

The Healthy Families Partnership Board (HFPB) provides governance for the partnership and was established to achieve the goals of developing and delivering an integrated 0-19 service for Northumberland. The HFPB is chaired by the NCC Executive Director of Public Health and Community Services and includes senior staff from HDFT and NCC public health, children's services and education and skills. The HFPB Design Group is a subgroup of the board and was established to identify appropriate operational developments within the service, manage the implementation of change and provide management oversight to meet the outcomes of the service.

The New 0-19 Service.

Transformation of the workforce to a 0-19 Service model, to develop and deliver the service through skill mix and the introduction of new roles to meet the key priorities of the partnership arrangements and support integration and collaboration with local authority partners, Family Hub model and key stakeholders. Model is based on the restructure changes which are influenced by experience and best practice. The model will evolve and develop, responding to local and national changes and need.

Agile working supports the 5 day working model and hybrid working across all teams and bases, and is supported by the estates strategy. The admin structure will support a Single point of contact.

0-19 Locality Managers – manage colleagues across 0-19, each with a thematic lead area to promote service transformation and quality improvement (Quality and Performance Management, Vulnerability, HCP and Universal, SEND, System1, Digital and Service User Experience).

We have developed 3 pillars to deliver the 5-19 service – Safeguarding, Emotional Health and Resilience and Public Health, with a dedicated Screening Service team to support delivery of National Child Measurement Programme, and each pillar has a lead.

Transition into the New Model.

In preparation for transition the 0-19 senior management team have reviewed local authority wards, Family Hubs locations and the number of service users within geographical areas against the number of Locality Managers. We have now aligned the three Service Managers and Locality Managers proportionately across Northumberland. We have agreed three areas of the North, Central Southeast and Central West. We are recruiting a full-time substantive Locality Manager into the North and a full time 12-month fixed term Locality Manager into the Central Southeast area. This will support capacity, ensuring Thematic leads are driven forward and HDFT's 0-19 Performance management strategy is embedded.

The integrated management team are developing an action plan to safely move into the transition phase of implementing the new model. The action plan will include supporting staff health and wellbeing whilst implementing a Single point of Contact, progressing the estates strategy, establishing clear lines of communication and a robust and safe governance structure across all teams.

0-5 Growing Healthy Service

The 0-19 Healthy Child Programme (HCP) provides an evidence-based universal offer of core contacts, mandated by the Department of Health, leading to early identification of needs and provision of early intervention, enhanced offer and early help through both single agency and wider multi-agency interventions.

The 0-19 HCP in Northumberland is delivered by the 0-19 Healthy Child Team, HDFT. The service is delivered by a skill mixed workforce led by Specialist Community Public Health Nurses (SCPHN), enhanced by clinical leads and thematic roles.

Core contacts are to be delivered at home, with the introduction of the Family Health Needs Assessment and Home Environment Assessment tool at the Antenatal contact. Where there are staffing pressures, Service Managers are developing and leading on local action plans to

meet the needs of the population. Underpinning the process will be HDFT’s Safe Staffing tools including OPEL levels.

Specialist Community Public Health Nurse recruitment continues, we are using both local adverts and the HDFT recruitment events to attract staff to the area. In March 2023 two Health Visitors will come into post from the Northumbria University SCPHN course. In September 2022 six existing staff nurses commenced SCPHN training, after successful completion of the course SCPHN posts will be available within Northumberland. We continue to recruit into staff nurse posts, this strategy will strengthen the specialist workforce whilst providing opportunities within the local area.

In preparation for 2023-24 the education leads are completing a scoping exercise looking at SCPHN recruitment for September 2023 using Northumbria University.

In January 2023 we have eight Public Health Staff nurses joining the service. They will receive a preceptorship that includes a bespoke competency/training offer. This will enable the Service managers to use analysis from the Demand and Capacity tool to support safe delegation to skill mix in line with Safer Staffing policy. The Family Health Practitioners are flexing their target age range from 0-5 to 0-10 years, following appropriate training.

Key Performance Indicator Data: 2021-2022 / 2021-2022 / 2022-2023 / 2022-2023

Contact	Q3	Q4	Q1	Q2
Antenatal	98.5%	99.2%	93%	90.4%
New Birth Visit	92.4%	91.5%	93.8%	95.3%
6-8 Week	94%	90.4%	90.2%	93.7%
12 Month	92.5%	88.3%	93.7%	94.7%
2.5 Year	89.6%	89.4%	91.8%	93.7%

The Infant Feeding Pillar

The Band 7 Infant feeding Co-ordinator is developing/introducing the planned model for infant feeding supporting the 0-5 service delivery in relation to Infant feeding support. The plan includes to continue proactive contacts postnatally, increase the number of breastfeeding support groups across the county and introduce a tiered approach to support, bringing the service in line with UNICEF standards.

The service underwent a UNICEF Baby Friendly Initiative (BFI) Progress Review in September due to changes in Infant Feeding Lead and TUPE transfer to HDFT. We have maintained our GOLD Accreditation status with lots of positive feedback. We have one action identified: Within the staff survey, staff reported that they felt they would not be listened to if they raised ideas/concerns. As a management team we felt that this reflected the general feelings within the 0-19 service going through a continuous period of change over the last 18 months and the changes to the service and not specific to Infant Feeding. Through individual 1-1’s, staff group meetings and consultation events staff were encouraged to express ideas and feedback. There is an action plan that includes a further staff survey.

Infant Feeding data- 2021-2022 / 2021-2022 / 2022-2023 / 2022-2023

Contact	Q3	Q4	Q1	Q2
10-14 Days	77.1%	75.2%	79.8%	80.4%
6-8 Weeks	45.3%	42.3%	38.5%	39.1%

The Public Health Pillar

To identify, assess and/or delegate targeted, short term interventions to children requiring support above universal criteria. We will sign post families and young people to other services for support.

Public Health Pillar Referral Criteria:

- Level 1 continence.
- Risk taking behaviours.
- Sexual health.
- Healthy lifestyles in line with the Family Hub model
- Healthy Relationships in line with the Family Hub Model
- Transition support

Targeted local health promotion in line with the public health calendar School profiles: Identifying 3 priorities for each school – inclusive of digital delivery, or targeted delivery into schools, or signposting within the system.

National Child Measurement Programme (NCMP) -This year we will provide a whole team approach. From June 2023 screening will be offered all year and by the screening team, this will commence with year 6 pupils.

In 2021-2022 Q3 pressures in the 5-19 service highlighted an increase in referrals and safeguarding into the service which was creating a waiting list for children to access care. Waiting times for children have continued to increase since this time and it has been highlighted to partners that there has been a volume of referrals not appropriate for the service around Emotional Mental Health, Neurodiversity and Continence.

The Management team and NCC Public Health team have been working with partners to understand criteria for all services including gaps in provision.

Post covid 19 pandemic the 5-19 team have seen a significant surge in referrals for children experiencing low-level anxiety and low mood.

Referrals are screening and triaged by a Public Health School Nurse (PHSN) within 2 working days. This process provides a timely response to Safeguarding and Emotional Health needs.

The PHSN develops a safety plan ensuring parents/carers are fully informed around any actions to be taken should the child's presentation deteriorate. A letter is also sent out to parents/carers advising that the service is operating a waiting list and how to contact the service if needed. The letter includes a list of resources for parents/carers/child to access such as Kooth, Young Minds and partners.

An action plan is in place to address and reduce the waiting times within the service, this is being led by the Service managers and includes safe delegation to the skill mixed team and the use of NHS Professionals (NHSP).

Referrals - Waiting times 2021-2022 / 2021-2022 / 2022-2023 / 2022-2023/ 2022-2023

Area	Q3	Q4	Q1	Q3	From Q3 2021 to Q3 2022
North	61	123	106	107	117 - 11 weeks – 44 weeks
Central	156	78	117	120	167 - 26 weeks – 57 weeks
South East	166	200	230	256	234 - 20 weeks – 52 weeks
West	43	67	69	102	81 - 8 weeks – 41 weeks

Emotional Health and Resilience Pillar (EHR).

Our focus will be around early intervention and resilience building. We will provide evidence-based interventions to support CYP& F in Northumberland. In partnership with parents and carers we will aim to build resilience and problem solving.

We have secured funding from the NCC Public Health reserve to train eight practitioners in Relax Kids and eight practitioners in Charge Up. Four Family Health practitioners from the 0-19 service and four practitioners from the Family Hubs will be undertaking the Relax Kids training. Four emotional health staff nurses from the 0-19 service and four practitioners from the family hub will be undertaking the Charge Up training. Training is coordinated by the 0-19 service, and we are planning co-delivery with Family Hubs staff. This is a new approach to ensure integrated delivery between services in the form of both virtual and face-to-face contact, and resilience in delivery across Northumberland.

Relax kids is delivered in a group setting and will allow higher numbers of children to be supported within a quicker waiting time. This will have a significant impact upon the current 5-19 waiting lists and on future referrals into the service. Relax Kids have arranged to complete and induction with all staff on 23rd January and the online modules will be completed by 0-19 and family hub staff throughout the week commencing 23rd January 2023. We are aiming for courses to be organised within each locality immediately after completion of the modules to ensure that staff retain their knowledge and confidence in delivering the sessions.

The Service Manager for EHR has been working closely with partner agencies around establishing robust criteria for intervention, review of the Northumberland graduated response and in negotiating support for children and young people with their mental health post diagnosis of autism and/or attention deficit hyperactivity disorder (ADHD). Task and finish groups will continue to meet monthly to ensure progress is maintained and will also include representation from the parent/carer forum. This work will continue to link into the development of the sensory pathway and closer working with education to ensure children and young people with possible neurodiversity have access to the support they require.

We have recently recruited into the Clinical Lead for Emotional Health and Resilience vacancy, and she has commenced in post. There is currently one vacancy for a band 5 emotional health staff nurse. We have a long-term plan to include 4 x Children's Psychological Wellbeing Practitioners (CWPs) into the pillar, which will build upon our parent led support and early intervention for children/young people experiencing low mood and/or anxiety. Due to the CWP academic entry requirements we are currently supporting a number of staff to access other learning to ensure they are able to meet this requirement in the future. Three Training places have been reserved on the Enhanced Evidence Based Practice (EEBP) course, which is due to commence in March 2023 and is funded by Health Education England.

Safeguarding Pillar.

We have appointed into the band 7 Safeguarding clinical lead posts; their role will include supporting face to face complex case management within the priorities of the role. They will be vital in supporting external and internal staff into the new pillar. We are working through recruitment into the Strategy Nurse post, Band 5 Staff nurse and Child lived experience practitioners.

The Safeguarding team have introduced Induction packs/ competency packs for all skill mix staff. Staff moving into the pillar have completed their self-assessment and met with the band 7 Safeguarding Specialists Nurses, completing shadowing opportunities prior to transfer into the pillar. The team have embedded a Signs of Safety training package for all staff on induction into the service.

- Level 3 training compliance 98%
- Safeguarding Supervision Compliance 83%
- Front Door response time and strategy attendance 100%

Innovative Roles.

The Community Anchor, we have developed an action plan to support the development of the role, including integration across the system, scoping the various community projects and initiatives that are in place. This role will work very closely with the NCC public health team. They will participate in community profiling work with the family hub/early help project team and meeting with the 0-19 service managers to understand the strategic vision around future service delivery.

The community anchor will be involved with the development of the family hub model and will link in with the perinatal/parent and infant relationships workstream, 5-19 workstream and parenting workstream. They will spend time with the family hub managers to understand the trailblazer plans and how the 0-19 service can add value. The community anchor will be required to undertake some community asset training alongside colleagues in the local authority, this will also be cascaded across the 0-19 service.

The Community Triage Nurse. The role of the Triage nurse will be to support the flow of referrals across the system, representing the Public Health Pillar. They will work in an integrated way with NCC, being embedded within the NCC Early Help Hub three days a week. The role will be pivotal in providing a timely response to referrals, ensuring agreed waiting times are adhered to. They will also signpost referrals to partners deemed most suitable to meet the needs of children, young people and their families.

Their role within the Public Health Pillar will include having an oversight of demand and capacity to co-ordinate and allocate referrals to the team. Support SEND referrals by engaging partners across the system to meet individual service user needs. The post will include the analysis of impact and outcomes for Children, Young people, and their Families by providing meaningful qualitative data.

The Project Support Officer role. This role includes responsibility for implementing and transforming the digital platform. The role supports the mobilisation in continuous improvement within the digital offer and supporting 0-19 practitioners with training and development.

Across the wider footprint the Project support officer links in with the “Doing it differently group” to support the service digital lead. The role is instrumental in linking with external contractors to further develop the HDFT 0-19 app localising it to their 0-19 area.

The project support officer supports the clinical digital leads to coordinate timely relevant social media posts to service users. The role collates data from platforms in terms of numbers following, liked etc which allows an understanding of the reach of the posts and themes across local areas/teams

Estates

There has been substantial work to design a sustainable estates strategy which meets the needs of the service and residents. Initially, the 0-19 service occupied approximately 50 bases across Northumberland, some in very small teams and some accommodation costs did not represent best value for money. This estates plan provides administrative bases for 0-19 teams across Northumberland using a hub and spoke model. This ensures that staff have appropriate contact with their teams and that maximum resources are invested in providing clinical services for children young people and families.

It is important to note that clinical bases are unchanged.

North Locality Solution

A hub has been identified in the Alnwick area of the North locality with Heads of Terms now agreed and the lease with Solicitors to agree the proposed occupation by HDFT from early 2023.

The spoke elements of the estate are already within the existing demise as detailed below, together with what property will be vacated:

Hub/Spoke	Base	Building Owner
Hub	Alnwick – Linnet court	Northumberland Estates Ltd
Spoke	Amble Health Centre	NHS PS
Spoke	Tweedmouth Clinic	NHS PS

Premises to be vacated for non-clinical Space	Building Owner
Alnwick Medical Group	GP Practice
Widdrington Clinic	Widdrington GP Practice
Broomhill/Hadston Health Centre	NHS PS

Timescales are still being finalised for the North locality moves but anticipated to take place before March 2023.

West Locality Solution

HDFT are in the process of moving into St Matthew's House in the Hexham area of the West locality with heads of Terms agreed and a lease in place. The spoke elements of the estate are already within the existing demise as detailed below, together with what property will be vacated by the end of March 2023:

Hub/Spoke	Base	Building Owner
Hub	St Matthew's House, Hexham	Joyce Developments
Spoke	Ponteland Primary Care Centre, Ponteland	NHS Property Services
Spoke	Oaklands Health Centre, Prudhoe	NHS Property Services
Spoke	Dene Park House, Hexham	NCC

Premises to be vacated for non-clinical Space	Building Owner
Corbridge Medical Group	Costs passed on to Trust from GP via NHS Property Services
Haltwhistle Health Centre	NHS Property Services
Haydon Bridge & Allendale	GP Practice
Hexham Primary Care Centre	NHS Property Services
Prudhoe Medical Group	GP Practice

South East Locality Solution

A hub has been identified in the Cramlington area of the South East locality for the premises at Berry Moor Court. Heads of Terms are being considered by both landlord and HDFT as well as the preparation of a lease. The spoke elements of the estate are already within the existing demise as detailed below, together with what property will be vacated:

Hub/Spoke	Base	Building Owner
Hub	Unit 19 Berry Moor Court	Tantallon Commercial Ltd
Spoke	Eddie Ferguson House	NCC Building

Premises to be vacated for non-clinical Space	Building Owner
Brockwell Medical Group, Cramlington	GP/ NHS PS need to confirm rooms
Ward One Blyth	NHCT
Cramlington Health Centre	NHS PS
Netherfield House	GP

Timescales are to be worked through following further site visits to the proposed hub solution for the South East locality moves, but anticipated to take place in by the end of March 2023.

Central Locality Solution

Agreement has been reached for HDFT to maintain the demise established at Ashington and Bedlington Children's Centre in partnership with NCC.

Hub/Spoke	Base	Building Owner
Hub	Ashington Children's Centre	NCC
Spoke	Bedlington Children's Centre	NCC
Spoke	Lynemouth	GP

All of the below to be vacated dependent on the ongoing conversations with the Central and the South West locality.

Premises to be vacated for non-clinical Space	Building Owner
Morpeth NHS Centre	NHS PS
Newbiggin Health Centre	NHS PS
Wansbeck Hospital	Northumberland Healthcare

Notice is being served for the premises to be vacated in the West locality following the signing of the lease and installation of IT connectivity.

Conversations with the respective landlords for the North and South East Localities are continuing to enable the proposed moves to take place and enable the vacation of the properties no longer required for use by the service.

Key Achievements and Quality Improvements 2021-2023

The Senior management team have agreed their geographical areas, Rachel Rispin (North), Sam Anderson (Central/West) and Louise Shirley (Central/Southeast). Across the management team we have identified Thematic leads that are responsive to emerging needs and in line with the Family Hub model. We will be moving into 0-19 teams aligned to family hubs and geographical areas as part of the transition.

The team have successfully appointed to Clinical lead posts within the Emotional Health and Resilience Pillar, Infant Feeding Pillar, and the Innovative roles in the new model.

On the 7th of March we will move to a single System One 0-19 Northumberland Unit, improving the timeliness of accessing and recording information across the service.

We have two Specialist Community Public Nurses qualifying in March 2023 that have been successfully appointed into the Southeast Teams and six SCPHN students qualifying in September 2023. We continue to be flexible and innovative in our approach to recruitment,

using broad and local advertising mechanisms. Senior managers are representing the service at recruitment events.

The Infant feeding team have maintained their UNICEF Gold accreditation.

The team continue to work with partners to drive service transformation and mitigate service gaps in line with the Family Hub offer.

The 5-19 service have been awarded HDFT Team of the Month in December 2022. Please find an extract from the nomination:

“The 5-19 service have demonstrated incredible resilience and teamwork over the last 6 months, managing not only an increase in referrals to the service but also managing the transformation of the service which has been challenging due to ongoing change management. The team have contributed to decision making, working solution focused and adapting practice to meet the needs of the service during a period of management change, sickness, and vacancies.

Throughout this period the team have demonstrated kindness to one another including taking time to listen to each other and checking in with each other daily”.

Key Challenges and Areas for Development 2023.

We will develop a robust Staff health and wellbeing offer. The management team will role model and embed the KITE (Kindness, Integrity, Teamwork and Equality) values across the workforce. We will engage staff to develop local opportunities to promote staff health and wellbeing. Our aim will be to create a happy, healthy workplace.

Local performance panels will be implemented in a proactive approach to understand specific issues in teams or localities impacting on their capacity and ability to consistently deliver a quality service. Performance Panel will also evidence areas of good practice and celebrate success.

We are working towards the implementation of a Single Point of contact across all the Geographical areas in Northumberland.

The senior management team are undertaking an audit of Wellbeing clinic to analyse uptake, impact and offer consideration around alignment to infant feeding groups to maximise impact and develop specialist infant feeding clinics.

The Enhanced Parenting Pathway (DPP). The lead will develop an EPP action plan to drive service development and implementation. Key actions to include the development of an integrated EPP pathway, workforce training including a training need analysis, reporting systems on outcome measures and Communication/launch to partners.

Family hubs improving integration. The senior management team are promoting a vision that seeks to improve and embrace connections. The 0-19 service will work with partners to maximum collaborative opportunities and share resources to meet the needs of families within the Family Hub offer.

We will continue to work in partnership on integrated pathways including the sensory pathway, Emotional Health and Resilience offer and opportunities for Infant feeding.

We are in the process of replacing Chat Health, the senior management team are working through the decommissioning process whilst in preparation for the launch of our virtual nurse offer, supporting staff with expectations. Developing and embedding an 0-5 duty rota to support the offer.