



0-19 Growing Healthy Northumberland

Annual report.

Report to: Northumberland Health and Wellbeing Board

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Report contents.

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 0-19 Growing Health Service Northumberland.

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 Growing Healthy Team, HDFT. The service is delivered by a skill mixed workforce led by Specialist Community Public Health Nurses (SCPHN), enhanced by clinical champions and thematic lead roles.

The 0-19 Growing Healthy workforce are working in partnership with Family Hubs to ensure maximum collaboration opportunities and shared resources to meet the needs of families.

Significant events for the Growing Healthy Team since 1st February 2023

- The 0-19 team moved into the new service model on the 1/6/23.
- The Family Health Needs assessment and home environment assessment tool have been embedded into the mandated home contacts.
- UNICEF Gold Accreditation has been maintained.
- Health visitors are being trained in the Newborn Observation training and implementation into clinical practice has commenced.

- Eyes on baby training, 0-19 staff are in the process of completing their E learning training prior to implementation.

Progress on recommendations from Summary report January-March 2023.

We will develop a robust Staff health and wellbeing offer. The management team will role model and embed the KITE 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.

The 0-19 Northumberland team have been identified to be part of a pilot a focussed on current levels of work-related stress, identify remedies and implement where possible.

The pilot period is to be 4 months. Benchmarking data pre and post the pilot period will be produced for each team. The post Pilot Evaluation will determine the action plan to be developed to support the systemic management of work-related stress across the Trust.

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.

Performance panels are being implemented in January 2024.

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

We successfully launched the Single point of contact (SPOC) in Northumberland on the 16th of August 2023, communication has been shared with partners.

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 audit was completed, analysed and in response some clinics have been relocated. Infant feeding groups have been aligned to community wellbeing clinics or the family hub offer.

The Enhanced Parenting Pathway (EPP). 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.

We have developed an Enhanced Parenting Pathway task and finish group. This group includes representation across the Northumberland System. We have developed terms of reference and a vision. We are focusing on co-creating a pathway that captures and aligns service offers.

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.

The 0-19 team in partnership with Family Hubs staff have come together to look at ways in which we can collaborate and integrate our efforts to better support the children and families we work with. We have developed integrated workshops, which include activities which create an opportunity for staff to work together, create connections and learn more about each other, each other's roles, and our partner organisations.

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

The leadership team are co-opted onto two task and finish groups, looking at CYP mental health and the multi-agency response for neurodiversity.

We are in the process of decommissioning Chat Health, the senior management team are working through the decommissioning requests 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.

We have successfully launched the Growing Healthy 0-19 Health chat. This is embedded within the 0-19 service, providing a virtual offer from 08:30am until 17:00pm Monday to Friday.

Performance and Quality.

We have started a process of local performance panels in a proactive approach to understand specific issues in teams or localities impacting on their capacity and ability to consistently deliver a high-quality service. We are giving clear messages that Key Performance indicators are monitored to support delivering quality and that all universal families in Northumberland receive an equitable service, and those who need early help or have more complex needs and vulnerabilities receive the service and support they need for us, as a single agency or multi-agency response.

Underpinning continual service improvement is and Quality and Performance Management supervision. Locality Managers are providing monthly 1-1 Performance supervision, developing, challenging, and implementing changes leading to continual service improvement.

We will analyse staff competency and mandatory training requirements to ensure staff possess the appropriate professional knowledge, skills, experience, and qualifications to effectively deliver a high-quality service.

Key Achievements and Quality Improvements January 2023- November 2023.

We have had 16 staff across the Emotional health and resilience pillar and Northumberland family hubs trained in the delivery of Relax Kids and ChargeUp. They have successfully

facilitated 13 of these courses throughout Northumberland and have a further 32 courses set to be delivered before Summer 24. This co-delivery between partners has seen greater communication between the services, all staff reporting a greater understanding of one another's roles, and having the ability to share and promote some of the work that the other service is offering. Staff across both organisations meet regularly to work together to produce and update session plans for ChargeUp and Relax Kids, meaning that the children and young people will benefit from the knowledge and expertise of two groups of professionals coming together with the joint goal of improving their health and wellbeing.

The emotional health and resilience clinical lead attends a weekly interface meeting with partner agencies, such as the Children and Young People's Service (CYPS), Northumberland Primary Mental Health Work (PMHW) Team and the crisis team. This meeting allows services to discuss referrals to determine whether the most appropriate support is being offered, or whether this child, young person or family may have greater benefit in being supported by one of the other services. All professionals within the interface meeting have discussed how this has improved working relationships between services by allowing a greater understanding of one another's criteria, thresholds, and pressures. With this knowledge we are now able to make the right decision more confidently and timely.

The Community Anchor role has strengthened connections between the 0-19 service, community assets and our partners. A resource directory has been developed to identify National, County wide and Locality level resources to support staff to improve outcomes for children, young people, and their families.

The Northumberland Housing Pathway development – the Community anchor is planning workshops to support the co-creation of a pathway building on the home environment assessment tool. Membership includes partners in the local authority housing teams, housing associations, environmental health, citizens advice, and Northumberland Fire & Rescue Service. The vision for the pathway is to be clear, concise, and inclusive of all relevant parties. We will have a shared commitment to responding to the needs of residents to improve home conditions.

Hopes for Healthcare – HDFT is committed to making healthcare accessible to children and young people through embedding 'Hopes for Healthcare'. This provides a set of seven targets devised in collaboration with the Youth Forum to assess the service provided to children & young people by us, in the aim to offer excellence.

The Community Anchor is exploring the seven 'Hopes' to identify areas for service improvement. Collaborating with local young people's forums, to seek the views of young people to evaluate the current offer benchmarked against the 'Hopes' and to co-produce improvements and service development.

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 Fire service, we have co-created a referral pathway to support families who may require any additional fire safety advice or require and further fire safety risk assessments within their home.

All Schools within Northumberland have received a school profile alongside an email explaining the purpose and service offer from the public health pillar. We have received over 30 returned school profiles and plans are in place to support the three identified key priorities. Analysis to date highlights oral health, smoking, and vaping as the emerging needs.

National child Measurement Programme (NCMP) - From September 2023 the delivery model will change, the screeners will complete the programme across the academic year developing a meaningful public health focused intervention. The screeners focus on developing relationships with schools as part of the NCMP process including promoting the completion of the school profiles and identifying health priorities.

The role of the Community Triage Nurse has developed a partnership approach to early intervention. The Community Triage Nurse is embedded within Northumberland County Council's Early Help First Contact. Early help alongside 0-19 are analysing the health needs of children and young people through discussion and access to direct advice, knowledge, and guidance, supporting an efficient referral process. Analysis identifies the role has reduced the time associated with processing onward referrals, improved timeframes for families and provided support to families when signposting to partners.

We have successfully co-created a 2-2.5-year integrated pathway with a launch date for October 2023. This will be a targeted offer that includes an exchange of information with the educational provider, ensuring assessments are triangulated. To strengthen communication, we have ensured all educational providers including childminders have an aligned Health Visitor.

In partnership with Family Hubs and Midwifery we have successfully held a series of events to support and develop Integration. Individual services gave updates of the service models, alongside facilitated group work that captured opportunities to develop different ways of working. Building on this the 0-19 service, alongside the Family Hubs will present an update to the Primary Network meetings.

The recruitment into the safeguarding pillar is complete with all internal 0-19 staff now transitioned across into the pillar. The operational management of the Safeguarding team is now aligned to the 0-19 management team. This allows Named Nurse's and Senior Nurse child protection to focus on their role and responsibility within Safeguarding.

Through the estates strategy we have successfully mobilised bases in the North (Linnet Court) and West (St Matthews House). We continue to work through mobilisation in the central Southeast, exploring opportunities to co-locate 0-19 staff within Family Hubs.

Key Challenges and Areas for Development 2023.

We intend to co-create and develop a school readiness offer, this will build on our Enhanced Parenting Pathway and Integrated 2-21/2-year review. Scoping membership to the task and finish group is under consideration.

The Public Health pillar continues to offer a Tier 1 continence advice in accordance with nationally recognised ERIC (Education and Resources for Improving Childhood Continence) guidelines. All children receive a basic continence assessment at Tier 1 and an onward referral if above the Tier 1 threshold. We are looking to develop a new support pathway for parents, this will include initial ERIC advice and virtual/face to face group sessions. All Public health pillar staff will be undertaking ERIC continence training in September/ October 2023 to support with the new pathway.

On establishing the Public Health pillar, it was apparent the service had accepted a high volume of inappropriate Neurodiversity referrals. An action plan was put into place to support and triage these referrals. This has been a manual task, contacting referrers and families to gain an update on professionals/parents' concerns and signpost with consent onto the most appropriate partner. In Quarter 4 the service had 277 referrals waiting lists, to date we have 23 referrals that are awaiting a Family Health needs assessment. Supporting this piece of work was an additional full time School Nurse fixed for 1 year, commencing in September 2023.

The Enhanced parenting pathway is being co-created with partners; the scoping of individual service offers has been completed and the pathway is in development. The pathway will provide seamless support to those families requiring enhanced support, ensuring they receive the right support at the right time.

The HDFT 0-19 Infant feeding, and Nutrition Strategy is in development, once complete and socialised we are planning to develop a bespoke addendum to reflect the Northumberland Infant feeding and Nutrition landscape.

We have completed our SEND Self-assessment, this has highlighted areas of improvement including the implementation of the NCARD (National Congenital Anomaly and Rare Disease) registration, realigned our Thematic lead in SEND, launched our 0-19 App with a SEND information section, embedded our Single Point of contact for all service users and reviewed our training needs matrix.

Building on our bespoke staff health and wellbeing offer, we are planning an insights training session with the integrated management team. We are co-ordinating time out

sessions for all staff to develop staff charters. These sessions will be facilitated by Mark Fuller HDFT Improvement and transformation manager.

Service user and partner feedback

“Jess is professional, motivated, knowledgeable, and enthusiastic. She is a warm and supportive colleague and a positively infectious member of the team. She brightens up my day, pleasure to work with her” (Partner feedback).

“Since attending ChargeUP I have strategies to use in times of emotional distress this has had a hugely positive impact both at home and at school” (Service user feedback).

“I have recently observed Joanne doing some Relax Kids sessions. Joanne was seen to be very good with taking the lead in the session. Joanne even had a challenging child and parent within the session, and she dealt with this professionally and calmly. She was able to engage the children well, even though some were hesitant or reluctant, and encouraged all the children to participate. The kids who attended seemed to really enjoy the sessions and Joanne had built up a lovely rapport with the children.” (External Student feedback).

Staff have worked to the highest standards within the West of Northumberland. They have all worked immensely hard with HNA. They have all worked to the highest level which has resulted in a dramatic reduction in the routine referrals waiting for allocation (Partner feedback).

“The digital officer has come into a brand-new role for Northumberland 0-19 Service. They have made this role her own and provided invaluable support to everyone across the system” (Partner feedback).

“I found it easier to contact the service with the one telephone number” (Service user feedback).

“I just wanted to email you to let you know what a difference my HV has made since taking over the role for our daughter. My daughter was referred to Paediatrics when she was 2.5/3 years old by a HV following concern regarding her development. Last week she was diagnosed with autism. Since Amy has taken over her case, she has made frequent contact with us & arranged to come & meet my daughter within a few weeks of taking over her case.

She has referred us to physio due to tip toe walking and has just been a really good support. I just wanted this recognised as I know how short, staffed teams are at the minute & I know Amy will likely have a lot of children under her care. I have never felt so supported from a Health Visitor & will be sad in a couple of months when my daughter turns 5 & will be handed over to Education. I feel she is a real asset to the HV team & wanted to pass this on” (Service user feedback).

Parent shared she got lots of support from Health Visitor, Infant Feeding Team staff and that she is grateful for all the support in supporting her in her Breast-Feeding journey. Mother said that without the support of those people, she would have not breast feed for that long. The mum had Telephone and Face to Face support regarding breastfeeding. She is attending Infant Feeding Groups, which gives her confidence (Service user feedback).

“Just a thank you post for all the amazing support the infant feeding team provide! I mentioned that I was struggling with my electric pump and Sarah offered support and dropped me a hand pump to try which worked so much better after my last breastfeeding journey in lockdown it’s amazing to be able to get out and talk to people who understand this time around”.

“Huge praise for my health visitor today and student. They were fantastic I couldn’t ask for a nicer health visitor, please pass this on to their manager they were Amazing” (Service user feedback).

“First of all, can I pass on my thanks to you and your team for all your help to date. I believe that the initial cohort of your staff were trained in April/May this year, since that time we have received 26 referrals from your teams. From the referrals we received, 72% of them were deemed to be medium to very high risk following an assessment by our Safe and Well teams. This is a fantastic statistic, particularly if we compare it to our alternative approach which yielded a return of 19% medium to very high-risk assessment. This means that we are significantly improving the effectiveness of our visits by targeting our resources in the areas where they are needed most on a more consistent and frequent basis. Thanks to you and your team again, this makes a huge difference” (Partner feedback).