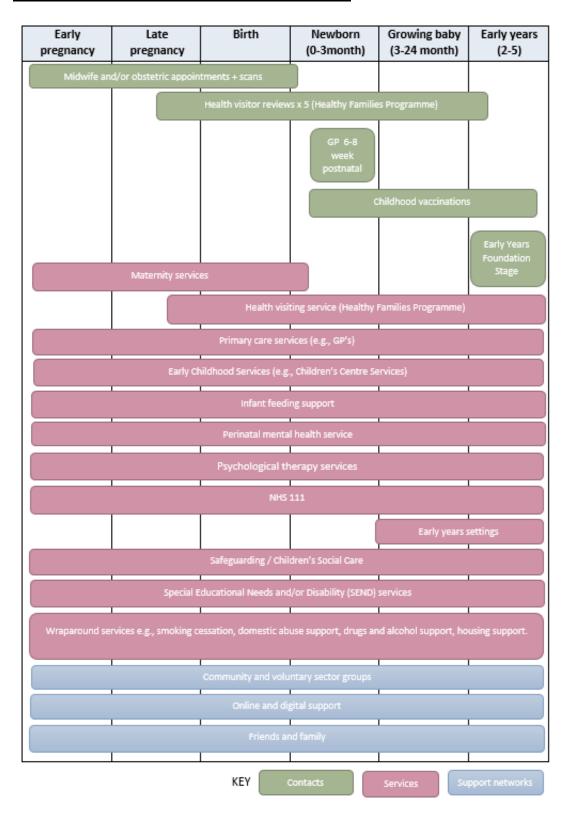
# Appendix One: Data and supporting information, Nottinghamshire Healthy Families Programme

Please find data and supporting information to be read alongside the Nottinghamshire Healthy Families Programme report to Health Scrutiny Committee, March 2023.

## Item One: Best Start 0-5 Early years system map



## Item Two: Interface between maternity services and Healthy Families

## Before birth

- Healthy Family Teams offer an antenatal contact to all women. This is a holistic
  assessment of the expectant mother and father's needs, assessing mental health and
  wellbeing, supporting the transition to parenthood and promoting health. Information
  shared by midwives shapes these visits and helps to prioritise them where required.
- Healthy Family Teams receive regular notifications of pregnancy, pregnancy loss and births from maternity services.
- Where women have potential safeguarding needs or complex social factors information about care is shared between maternity services and Healthy Family Teams throughout the pregnancy.
- Midwifery liaison meetings between Healthy Family teams and maternity services take place to share information about women's support needs and care with a focus on safeguarding and complex social needs. Note: these did not always routinely take place around NUH however are being re-established recently (not yet fully restored, but well on the way). To share detail about women's support needs and care, liaison meetings are the gold standard and electronic information sharing a fail-safe. These electronic information sharing arrangements look slightly different around each maternity Trust.
- In recent years joint working has been better in Mid and North Notts than in the South. There have been a series of changes to maternity IT systems at NUH that have changed the way information is recorded and shared with health visitors. A new IT system was introduced from November 2022 across both NUH and SFH, called BadgerNet. Information sharing should further improve as a result of this system.
- Healthy Family teams work closely with specialist midwives for mental health, drugs and alcohol, teenagers and other complex social factors.
- Primary care safeguarding meetings with GP's extend information sharing about the needs of vulnerable families to primary care services who will then work together with Healthy Family Teams and midwives to support parents and safeguard children.

## After birth

- Role of maternity services: A new-born infant physical examination (NIPE) is carried
  out by the maternity service after birth, usually in hospital but sometimes in the
  community. Initial care and checks post birth are carried out by the maternity service:
  visit at home and then follow up in clinic.
- The care for the majority of women is then handed over to health visiting ahead of the new birth review (10 days), by circa 7 days. This is accompanied by relevant information sharing. Maternity services would not keep any patients on their caseload beyond 28 days of delivery. Please note care may also be transferred to other services (e.g. neonatal / paediatric services) at the Trust's where there are relevant medical needs.
- The 'red book' a child health information record is given out at birth by maternity services and follows the family with information added by health visitors and GP's (e.g. vaccination and immunisation)

- There are shared pathways in place across maternity and health visiting services where required – for example for neonatal jaundice.
- Healthy Family teams support breastfeeding from birth onwards and work closely with midwifery teams on this, who also provide breastfeeding support which varies across each Trust.
- Care and support provided by specialist midwives (e.g. substance use, mental health etc) would usually continue up to 28 days with joint work taking place. Other services, such as substance misuse services and adult mental health services are likely to be involved in supporting these families, as well the Healthy Family Teams.
- Primary care also have a role, seeing all babies for a 6-8 week GP-led review.

Information sharing to support safeguarding is the priority for all involved. There are further opportunities to strengthen the relationship between midwives, Healthy Family Teams, and others to better support the Best Start in life agenda - earlier identification and support.

## Item Three: Workforce

Table 1: Healthy Families Programme workforce, as at December 2022

			Who	le Time Ed	quivalent	(WTE) NH	S Bands	
		7	6	5	4	3	2	Grand Total
E	Ashfield		19.67	5.40	8.53	4.00	1.96	39.56
Te	Bassetlaw		10.64	6.43	6.60	4.00	1.60	29.27
Healthy Family Team	Broxtowe		12.41	3.10	6.15	1.60	2.00	25.26
-ar	Gedling	1.60	13.20	4.40	5.77	2.20	1.33	28.50
<b>1</b> ≥	Mansfield		17.07	4.60	5.67	3.80	2.21	33.35
a <del>I</del>	Newark and Sherwood	0.60	15.60	2.40	6.60	2.20	1.19	28.59
He	Rushcliffe	0.91	11.50	3.55	5.83	2.71	1.44	25.94
	Professional Service Leads	8.80						8.80
roles	Family Nurse Partnership	13.22			0.93			14.15
ide	Continence Team	0.29	2.00			1.80		4.09
Countywide	Advice Line	0.60		3.50	3.60		1.00	8.70
r z	Paediatric Liaison		2.00				0.53	2.53
S	Infant Feeding	2.00						2.00
	SEND Coordinator	0.50						0.50
	<b>Grand Total</b>	28.52	104.09	33.38	49.68	22.31	13.26	251.24

Source: Nottinghamshire Healthcare NHS Foundation Trust

Please note, this table focuses on front-line clinical service delivery and therefore excludes the service's senior management and those working in other roles such as data, performance, contract management, specialist safeguarding, amongst others. This table reflects the current staff in post, and therefore excludes current vacancies.

Table 2: Levels of care (caseload complexity) and caseload numbers in the Nottinghamshire HFP (snapshot in time: October 2022\*)

Levels of care	Caseload data
<b>Universal:</b> every parent and child or young person has access to a HFT. Each family receive a programme of health and development reviews and information and support to provide the best start in life. This includes promoting good health and identifying problems early.	168,801
Universal plus: provides a swift response to families when specific help and support is required. This might be identified through a health check or through the provision of easily accessible HFT services. This could include a time limited evidence-based intervention for a specific issue, managing long-term health issues and additional health needs, reassurance about a health worry, advice about public health concerns such as diet or smoking, or low-level support for emotional and mental health wellbeing.	3,736
Universal partnership plus: ongoing support is provided to families as part of a range of local services working together to deal with more complex problems over a longer period-of-time. This might include partnership working with children's social care, voluntary sector organisations, and specialist NHS services such as child and adolescent mental health services (CAMHs).	1,610 (HFT actively working with) 6,061 (HFT partner in care – no current active HFT intervention)
Safeguarding: safeguarding children and young people is a core role for HFTs who identify and support vulnerable families at increased risk in line with Nottinghamshire Safeguarding Children Partnership's procedures. HFT's work in partnership with key stakeholders to help promote the welfare and safety of children and young people, and they contribute to multi-agency decision-making, assessments, planning and interventions relating to children in need, children at risk of harm and Looked After Children, including carrying out assessment of health need.	3,109
Total	183,317

<sup>\*</sup>caseload data extracted from IT system (SystmOne) on 11.10.22. Please note data reflects a snapshot in time i.e. 'active' families relate specifically to those active on 11.10.22.

# <u>Item Four: Care delivered across the Covid-19 pandemic</u>

National lockdown periods: Lockdown dates affecting face to face contacts

- 23rd March 2020 first national lockdown commences
- 16th April 2020 lockdown extended
- 1st June 2020 phase 1 of re-opening (schools), 15th June (non-essential shops), 23rd June (2m social distancing rule)
- 14th October 2020 Three-Tier restrictions introduced
- 5th November 2020 a second lockdown comes into force which ends 2nd December.
- 6th January 2021 third lockdown commences

#### 29th March 2021 restrictions lifted

Figure 1 below illustrates how the core offer to families of 0-2's from the Nottinghamshire HFP changed across the course of the pandemic as restrictions and guidance eased.

Figure 1: Healthy Families service offer across Covid-19 pandemic

Apr-Jun 2020	Jul-Sep 2020	Oct-Dec 2020	Jan-Mar 2021	April-Jun Jul-Sep Oct-Dec Jan- 2021 2021 2021 20					
Antenatal	reviews via t	elephone.	Targeted antenatal face to face. Universal by telephone.	Targeted and primip antenatal face to face. Universal multip by telephone.					
Birth visits		nin review by the to face.	telephone, 15	Birth	visits face to	face in the ho	ome.		
	c reviews by t		6–8-week reviews blended: majority by telephone, short face to face.	6–8-weel	k reviews face commun		e home or		
	2-2.5-year rev and/or video o		1- and 2-2.5-y blended: by t with face-to-fac community cli	telephone, ce contact in		-year reviews community cli			
		Sa	feguarding famil	ies are a prio	rity				
	PPE, infectior	n prevention n	neasures, and C	ovid-19 check	by telephone	e prior to visits	3		
Wo	rking from ho	me	Some office/bare-introduced		Flexible	e working intr	oduced		

# Tables 3 to 11: Delivery of reviews, by method of delivery

## 2020-21

Please find below details of new birth and 6-8 week reviews for the period 1<sup>st</sup> April 2020 to 31<sup>st</sup> March 2021, in the first year of the pandemic when restrictions were greatest.

Please note blended / telephone refers to a review that was undertaken primarily on the telephone (45 mins), with a short face-to-face contact to review weight, growth and any clinical concerns (15 mins).

Table 3: Birth reviews completed Face to Face/Telephone/Not Seen 2020-2021

Births 2020-2021					Not Seen (cancelle	ed or declined by		
DII (113 2020 2021	Face to Face		Blended / Telephone		parent)		Not Seen (no response by parent)	
Ashfield	723	58.40%	487	39.34%	19	1.53%	9	0.73%
Bassetlaw	531	51.35%	491	47.49%	2	0.19%	10	0.97%
Broxtowe	340	37.12%	573	62.55%	3	0.33%	0	0.00%
Gedling	208	20.53%	791	78.08%	9	0.89%	5	0.49%
Mansfield	574	56.11%	433	42.33%	5	0.49%	11	1.08%
Newark & Sherwood	742	63.15%	427	36.34%	5	0.43%	1	0.09%
Rushcliffe	734	74.29%	228	23.08%	25	2.53%	1	0.10%
County	3852	52.15%	3430	46.43%	68	0.92%	37	0.50%

Table 4: 6-8 week reviews completed Face to Face/Telephone/Not Seen 2020-2021

6 Weeks 2020-2021	Face to	o Face	Blended / 1	Гelephone	Not Seen (cancell	•	Not Seen (no resp	oonse by parent)
Ashfield	807	64.25%	422	33.60%	10	0.80%	17	1.35%
Bassetlaw	559	53.39%	463	44.22%	8	0.76%	17	1.62%
Broxtowe	186	19.68%	726	76.83%	13	1.38%	20	2.12%
Gedling	298	28.30%	738	70.09%	10	0.95%	7	0.66%
Mansfield	482	44.92%	556	51.82%	10	0.93%	25	2.33%
Newark & Sherwood	732	60.90%	449	37.35%	4	0.33%	17	1.41%
Rushcliffe	657	64.54%	338	33.20%	6	0.59%	17	1.67%
County	3721	49.00%	3692	48.62%	61	0.80%	120	1.58%

## 2021-22

Please find below details of new birth, 6-8 week and 1-year reviews for the period 1<sup>st</sup> April 2021 to 31<sup>st</sup> March 2022, in the second year of the pandemic as restrictions eased and services were 'restoring' towards business-as-usual models of delivery.

Please note blended / telephone refers to a review that was undertaken primarily on the telephone (45 mins), with a short face-to-face contact to review weight, growth and any clinical concerns (15 mins).

Table 5: New birth reviews completed Face to Face/Telephone/Not Seen 2021-2022

Births 2021-2022	Face to Face		Blended / Telephone		Not Seen (cancelled or declined by parent)		Not Seen (no response by parent)	
Ashfield	1236	93.21%	88	6.64%	2	0.15%	0	0.00%
Bassetlaw	943	90.50%	92	8.83%	3	0.29%	4	0.38%
Broxtowe	829	86.17%	129	13.41%	1	0.10%	3	0.31%
Gedling	872	86.85%	129	12.85%	1	0.10%	2	0.20%
Mansfield	1005	95.90%	39	3.72%	2	0.19%	2	0.19%
Newark & Sherwood	1074	90.86%	107	9.05%	1	0.08%	0	0.00%
Rushcliffe	988	97.15%	26	2.56%	2	0.20%	1	0.10%
County	6947	91.64%	610	8.05%	12	0.16%	12	0.16%

Table 6: 6-8 week reviews completed Face to Face/Telephone/Not Seen 2021-2022

6 Weeks 2021-2022					Not Seen (cancell	ed or declined by		
0 WEEKS 2021-2022	Face to	o Face	Blended /	Telephone	pare	ent)	Not Seen (no response by parent)	
Ashfield	1295	89.19%	129	8.88%	10	0.69%	18	1.24%
Bassetlaw	1057	89.27%	76	6.42%	18	1.52%	33	2.79%
Broxtowe	854	81.18%	166	15.78%	12	1.14%	20	1.90%
Gedling	1001	89.38%	102	9.11%	6	0.54%	11	0.98%
Mansfield	1027	86.67%	125	10.55%	18	1.52%	15	1.27%
Newark & Sherwood	1173	88.86%	110	8.33%	16	1.21%	21	1.59%
Rushcliffe	1082	93.44%	63	5.44%	4	0.35%	9	0.78%
County	7489	88.41%	771	9.10%	84	0.99%	127	1.50%

Table 7: 8-12 month reviews completed Face to Face/Telephone/Not Seen 2021-2022

12mths 2021-2022					Not Seen (cancell	ed or declined by		
TEIRING EGET EGEE	Face to	o Face	Blended / 7	Telephone	pare	ent)	Not Seen (no response by parent)	
Ashfield	700	56.04%	427	34.19%	57	4.56%	65	5.20%
Bassetlaw	671	61.39%	276	25.25%	45	4.12%	101	9.24%
Broxtowe	556	59.59%	301	32.26%	38	4.07%	38	4.07%
Gedling	754	71.88%	223	21.26%	44	4.19%	28	2.67%
Mansfield	449	42.28%	422	39.74%	81	7.63%	110	10.36%
Newark & Sherwood	858	67.67%	309	24.37%	37	2.92%	64	5.05%
Rushcliffe	603	58.83%	370	36.10%	25	2.44%	27	2.63%
County	4591	59.79%	2328	30.32%	327	4.26%	433	5.64%

## **2022-23** (part-year)

Please find below details of new birth, 6-8 week, 1 year and 2-2.5 year reviews for the period 1st April 2022 to 31st December 2022.

Table 8: New birth reviews completed Face to Face/Telephone/Not Seen 2022-2023

Births 2022-2023					Not Seen (cancelled or declined by			
(Q1, 2, 3 only)	Face to	o Face	Blended / Telephone		pare	ent)	Not Seen (no response by parent)	
Ashfield	935	97.09%	25	2.60%	2	0.21%	1	0.10%
Bassetlaw	773	98.47%	3	0.38%	3	0.38%	6	0.76%
Broxtowe	638	97.70%	10	1.53%	2	0.31%	3	0.46%
Gedling	705	98.05%	11	1.53%	1	0.14%	2	0.28%
Mansfield	774	98.47%	8	1.02%	0	0.00%	4	0.51%
Newark & Sherwood	795	98.15%	12	1.48%	1	0.12%	2	0.25%
Rushcliffe	694	98.30%	9	1.27%	1	0.14%	2	0.28%
County	5314	98.01%	78	1.44%	10	0.18%	20	0.37%

Table 9: 6-8-week reviews completed Face to Face/Telephone/Not Seen 2022-2023

6 Weeks 2022-2023		_			Not Seen (cancell	ed or declined by		
(Q1, 2, 3 only)	Face to	o Face	Blended / <sup>-</sup>	Telephone	pare	ent)	Not Seen (no response by parent)	
Ashfield	964	96.40%	12	1.20%	9	0.90%	15	1.50%
Bassetlaw	737	93.65%	4	0.51%	18	2.29%	28	3.56%
Broxtowe	644	95.13%	6	0.89%	11	1.62%	16	2.36%
Gedling	687	96.62%	13	1.83%	3	0.42%	8	1.13%
Mansfield	736	95.58%	13	1.69%	6	0.78%	15	1.95%
Newark & Sherwood	778	94.76%	19	2.31%	6	0.73%	18	2.19%
Rushcliffe	712	98.61%	7	0.97%	2	0.28%	1	0.14%
County	5258	95.81%	74	1.35%	55	1.00%	101	1.84%

Table 10: 8-12-month reviews completed Face to Face/Telephone/Not Seen 2022-2023

12mths 2022-2023					Not Seen (cancelle	ed or declined by		
(Q1, 2, 3 only)	Face to	Face	Blended / 1	Telephone	pare	ent)	Not Seen (no response by parent)	
Ashfield	964	91.72%	25	2.38%	25	2.38%	37	3.52%
Bassetlaw	742	81.00%	6	0.66%	46	5.02%	122	13.32%
Broxtowe	719	91.36%	11	1.40%	20	2.54%	37	4.70%
Gedling	723	90.04%	11	1.37%	35	4.36%	34	4.23%
Mansfield	713	80.47%	67	7.56%	31	3.50%	75	8.47%
Newark & Sherwood	821	86.24%	39	4.10%	37	3.89%	55	5.78%
Rushcliffe	766	91.30%	9	1.07%	25	2.98%	39	4.65%
County	5448	87.39%	168	2.69%	219	3.51%	399	6.40%

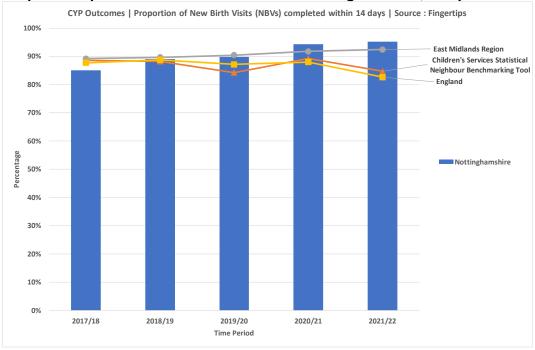
Table 11: 2-2.5-year reviews completed Face to Face/Telephone/Not Seen 2022-2023

2yr 2022-2023					Not Seen (cancell	ed or declined by		
(Q1, 2, 3 only)	Face to	o Face	Blended /	Telephone	pare	ent)	Not Seen (no response by parent)	
Ashfield	728	74.74%	140	14.37%	25	2.57%	81	8.32%
Bassetlaw	599	69.65%	61	7.09%	27	3.14%	173	20.12%
Broxtowe	598	80.27%	84	11.28%	29	3.89%	34	4.56%
Gedling	655	83.44%	16	2.04%	94	11.97%	20	2.55%
Mansfield	583	71.80%	99	12.19%	40	4.93%	90	11.08%
Newark & Sherwood	709	72.79%	153	15.71%	66	6.78%	46	4.72%
Rushcliffe	713	86.85%	25	3.05%	65	7.92%	18	2.19%
County	4585	76.79%	578	9.68%	346	5.79%	462	7.74%

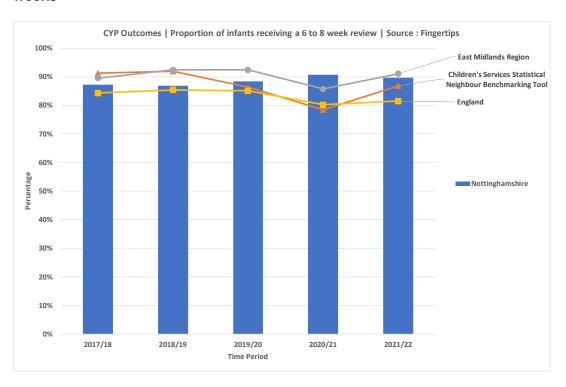
# **Item Five: Current Performance**

Graphs one to four, below, show the performance of the Nottinghamshire HFP compared to the east midlands region, benchmarked neighbours for children's services, and the national average.

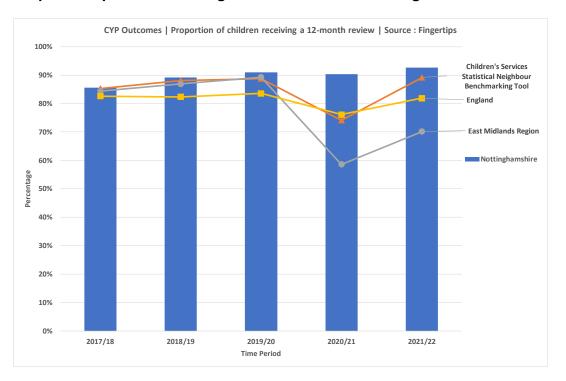
Graph 1: Proportion of new birth reviews in Nottinghamshire, completed within 14 days



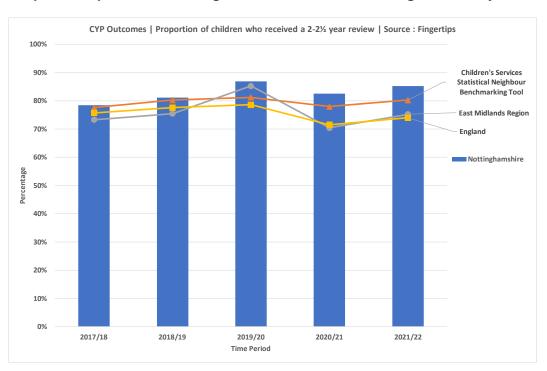
Graph 2: Proportion of Nottinghamshire infants receiving a 6-to-8-week review, by 8 weeks



Graph 3: Proportion of Nottinghamshire children receiving a 12-month review



Graph 4: Proportion of Nottinghamshire children receiving a 2-to-2.5 year review



Prepared March 2023