

Briefing for Nottinghamshire County Council Health Scrutiny Committee**Nottinghamshire Healthy Families Programme****1. Introduction**

“The foundations for virtually every aspect of human development – physical, intellectual and emotional – are laid in early childhood. What happens during these early years (starting in the womb) has lifelong effects on many aspects of health and wellbeing - from obesity, heart disease and mental health, to educational achievement and economic status”

Michael Marmot, 2010, Fair society, Healthy Lives

The ambition to give every child the best start in life is a key local priority. Nottinghamshire County Council’s Strategic Plan (2017-2021) sets out a commitment to ensure families prosper and achieve their potential, and our Health and Wellbeing Strategy (2018-2022) aims to give every child a good start in life. Two recent joint strategic needs assessments: *1001 Days (from conception to age 2)* and *Early Years and School Readiness* highlight how pregnancy and the early years represent a phase of increased vulnerability, yet also offer a short window of significant opportunity to improve outcomes. A new Best Start Strategy, launching in 2021, will lead a multi-agency partnership to provide every child in Nottinghamshire with the best possible start in life, because we know that a good start shapes lifelong health, wellbeing and prosperity.

The Healthy Families Programme, an early intervention and prevention public health service, supports Nottinghamshire families to provide their children with the best start in life.

With the Department of Health’s Healthy Child Programme at the centre of its delivery, the Healthy Families Programme offers every child and family a programme of screening tests, immunisation advice, developmental reviews and information and guidance to support parenting and healthy choices, to ensure that children and families achieve optimum health and wellbeing. The service promotes early intervention, identifying and supporting families in need.

2. Statutory responsibilities and commissioning arrangements

The Health and Social Care Act 2012 requires Local Authorities to ensure that the Healthy Child Programme and National Child Measurement Programme are provided to the local population of children, young people and families. More specifically, five universal health visitor reviews, from late pregnancy to age 2 to 2.5-years, are mandated for delivery.

The commissioning responsibility for health visiting services transferred to the Authority in October 2015 when a procurement process was undertaken to re-commission health visiting, public health school nursing, the Family Nurse Partnership and the National Child Measurement Programme as an integrated service.

The contract for the service known locally as the Healthy Families Programme (HFP) started on 1st April 2017 and is delivered by Nottinghamshire Healthcare NHS Foundation Trust (NHFT). The contract was awarded for an initial three-year period with the option to extend for a further four years. The four-year extension has now been enacted, with the current contract due to end in 2024.

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3. Role of the Healthy Families Programme (HFP)

The HFP brings together care provided by health visitors, school nurses, the Family Nurse Partnership Programme (for first time teenage mums) and the National Childhood Measurement Programme.

The HFP is delivered by 20 local Healthy Family Teams across the county that provide children, young people and families with care from before birth to their late teens. Each family receives a schedule of support including:

- Antenatal contact (in pregnancy)
- New baby review
- 6 to 8-week review
- 1-year health and development review (comprehensive assessment of a child's health, social, emotional, behavioural and language development)
- 2 to 2.5-year health and development review (comprehensive assessment of a child's health, social, emotional, behavioural and language development)
- Health review, information and support for school-age children and young people.

Tiers of provision

There are tiers of service provision based around the levels of needs identified in the Healthy Child Programme including:

- Universal: every parent and child or young person has access to a HFT. Each family receive a programme of health and development checks and information and support to provide the best start in life. This includes promoting good health and identifying problems early.
- 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.
- 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)

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.

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Early years

Healthy Family Team's (HFT) are skilled at identifying maternal health and wellbeing needs, assessing child development, proactively identifying problems, and supporting families and carers to promote readiness for learning and school across a child's early years.

HFT's support children's early development by working with all families to:

- Improve emotional and social wellbeing through strong parent-child attachment, positive parenting and supportive family relationships
- Promote early speech and language development
- Detect and act early to address development delay, abnormalities or health concerns
- Enhance health by eating well and playing actively
- Promote creative and imaginative play
- Detect and act early to reduce the adverse impact of psychosocial issues such as poor parenting, disruptive family relationships, domestic violence, mental health issues and substance misuse

The Family Nurse Partnership Programme is an evidenced-based nurse led prevention and early intervention programme for vulnerable first-time teenage parents and their children. It is delivered as part of the HFP by specially trained Family Nurses who work intensively with young parents throughout pregnancy and until their child is aged 2. Family Nurses are experts in the parent-infant relationship and early child development and work closely with young families to ensure they have the best possible start in life

School-age

School age children and young people can access their HFT for advice and support relating to their physical health and emotional wellbeing. HFT's work closely with schools and usually see children and young people in school settings. HFT's deliver low level interventions for a range of emotional and mental health issues including depression, low mood, self-harm, anxiety, risk-taking behaviour, and anger management, working closely with schools and families.

A health review in early adolescence, traditionally delivered via questionnaire, is moving online using the Health for Teens website to encourage uptake. Nottinghamshire's Health for Kids and Health for Teens websites are also available to support children and young people with their physical health and emotional wellbeing, the websites offer clinically assured interactive content and signpost young people to local services and sources of support.

4. Care delivered across the Covid-19 pandemic

Across the Covid-19 pandemic HFT's have continued to deliver all universal and targeted elements of the service using a blended approach of face to face contacts, telephone and digital platforms to support all children, young people and their families. The service has adapted their model of delivery in response to changing Covid-19 restrictions and embraced new and innovative ways of working. At all stages of the pandemic HFT's have worked hard to ensure that our most vulnerable families have received face to face support, and all new parents have been visited at home.

The HFT offer is further strengthened by telephone and digital support and increasing numbers of families have accessed advice via these platforms. Families are encouraged to contact their local HFT advice line for information, advice and support about their family's health, wellbeing and development. Children, young people, parents and carers can also access advice from

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their HFT through their text messaging services: ChatHealth, for young people ages 11-19 and Parentline, for parents and carers of 0-19's.

5. Contract management and quality assurance

Robust contract management processes are in place to ensure a well performing, high-quality and value-for-money service is available for the population of Nottinghamshire. These processes include:

- A quarterly Contract and Quality Review Meeting (CQRM), including senior leaders from NHFT, public health, and NCC finance officers. Scrutiny is applied to the data within the performance framework and quality schedule, and any plans for improvement are assessed for progress. Senior leads from NHFT are positive contributors to this meeting and readily facilitate service improvement.
- A performance framework, applied to the contract based on evidence of what works to improve outcomes for children, young people and families and underpinned by Public Health England guidance.
- A quality dashboard applied to the contract based on local NHS quality dashboards and NHS England guidance. Information reported includes data relating to relevant CQC inspections, adherence to NICE guidance, service user feedback, safeguarding and workforce data such as sickness/absence, EPDRs, and clinical supervision.
- In addition to the CQRM, a service review meeting is held for each element of the service (HFTs, Family Nurse Partnership Programme, infant feeding support, and the National Childhood Measurement Programme). Following review of the performance schedule, areas for celebration or service improvement are explored with clinical leads within NHT, and areas for exception reporting escalated to CQRM. Public health officers work collaboratively with leads from NHFT to facilitate service improvement.
- Collaborative partnership meetings are held to drive ongoing service transformation and ensure an appropriate, evidence-based model of care is provided. For example, evidence relating to 'Best Start' has recently been incorporated requiring some amendments to the current service model. These meetings are driven by a service transformation plan developed in partnership between officers from NCC and leads from NHFT and frequency varies as required.
- Quality Assurance visits are undertaken, focussing on specific elements of service delivery and form part of the quality assurance process. They provide an opportunity for NHFT and NCC to work collaboratively to enhance the quality of care and service user experience. Visits enable public health officers to identify, promote and share good practice and identify areas of challenge or improvement. Any recommendations will be monitored as action plans at the CQRM. Quality visits have been paused for 2020-21 in light of the Covid-19 pandemic.
- Financial scrutiny applied via an open book accounting agreement with NHFT as part of the CQRM where queries and challenges are formally raised and resolved. This enables NCC to ensure that a best value for money service is offered to residents. The contract value for 2020-21 is £13,759,895.

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Financial envelope

The financial envelope for the Healthy Families Programme reduced over the initial three-years of the contract in line with the reduction in the national public health allocation announced in the Comprehensive Spending Review in November 2015. The pressure of a reducing budget coupled with inflationary cost pressures (the additional sum it costs each year to deliver the same level of service) meant a significant risk of reduced workforce capacity over the length of the contract. To avoid this, NCC and NHFT worked closely to further streamline the delivery model and release capacity, whilst maintaining a high quality, effective service. This enabled the available funds to be re-apportioned across the life of the contract, and as a result, we are well-positioned to sustain an efficient and value for money service to 2024.

		Financial envelope (planned /budgeted)	Revised envelope (actual spend)
Initial contract period	2017-18	14,208,321	12,970,448
	2018-19	13,652,775	13,627,322
	2019-20	13,035,954	13,229,468
Contract extension	2020-21*	13,759,895	
	2021-22*	13,959,895	
	2022-23*	14,159,895	
	2023-24*	14,359,895	

*Please note the figures above are not directly comparable. From 2020-21 these figures include national baseline funding for the NHS pay award which applies to all NHS provided services. The additional funding for the NHS pay award is £305,000 per annum. From 2020-21 onwards this was transacted via the public health allocation from Government, a change from arrangements in previous years. Also included is an additional investment of £200,000 per annum to bolster the activity delivered in the 1001 days from pregnancy to 2.

6. Performance of the Healthy Families Programme

The key performance measure for the HFP is delivery of the health and development reviews for 0-2's. A summary of performance across 2019-20, compared to the England average where this data is available, is included below:

	Q1		Q2		Q3		Q4*	
	Notts	Eng	Notts	Eng	Notts	Eng	Notts	Eng
Percentage of new birth visits completed by 14 days	90%	86.8%	89.6%	87.9%	88.6%	86.5%	91%	N/k
Percentage of new birth visits completed (total)	99.8%	98%	99.8%	97.9%	100%	97.8%	99%	N/k

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Percentage of 6-8 week reviews completed by 8 weeks	88.5%	86.1%	89.4%	84.7%	88.8%	85.1%	87%	N/k
Percentage of 12 month development review completed by 12 months	88.4%	77.8%	87.6%	78.5%	85.3%	78.4%	86%	N/k
Percentage of 12 month development reviews completed (by the time the child turns 15 months)	90%	83%	91.9%	83.8%	90.9%	84.5%	91%	N/k
Percentage of 2-2.5 year reviews completed (by the time the child turns 2 years 6 months)	86.8%	78.3%	84.7%	79%	86%	78.5%	90%	N/k

**National data not yet available*

Across the Covid-19 pandemic, between 1st April and 31st December 2020, HFT's have maintained excellent levels of performance. A total of:

- 5618 new birth visits were completed, representing 98% of all families
- 5573 6-8 week reviews were completed, representing 96% of all families
- 5390 12-month development reviews were completed, representing 91% of all families
- 5149 2-2.5 year reviews were completed, representing 83% of all families

7. Next Steps

In view of the positive performance of the service and to maintain the stability of service provision for families the contract has recently been extended to 31st March 2024.

Senior leads from NCC and NHFT will continue to work collaboratively to drive ongoing service development and transformation, monitor performance and quality, and ensure the care delivered to children, young people and families responds to emerging need and evidence-based practice. The HFP is well-placed to support the delivery of the Best Start Strategy.

8. For further information please contact:

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