



HDFT

Growing Healthy County Durham 0 –19 Service

December 2018





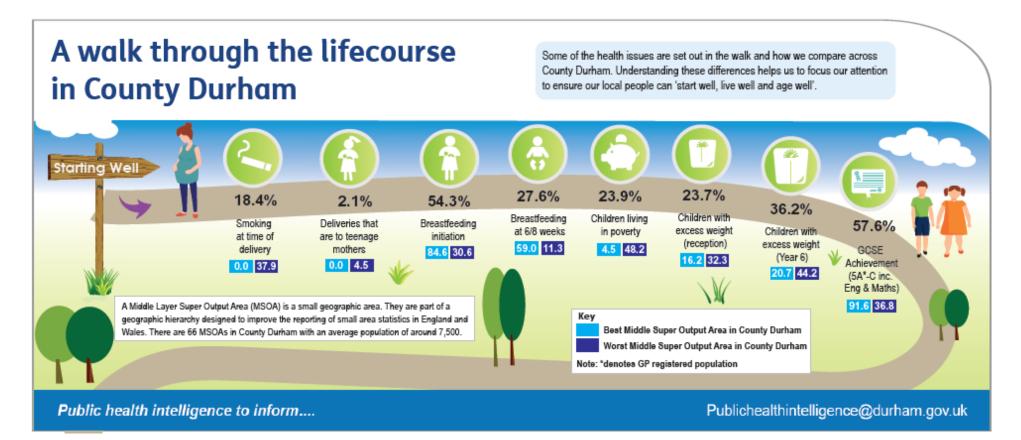


- Current service delivery
- Successes and areas for development and improvement
- Contract extension April 2019 to August 2020
- Ongoing Service Transformation
- Next steps



Starting well

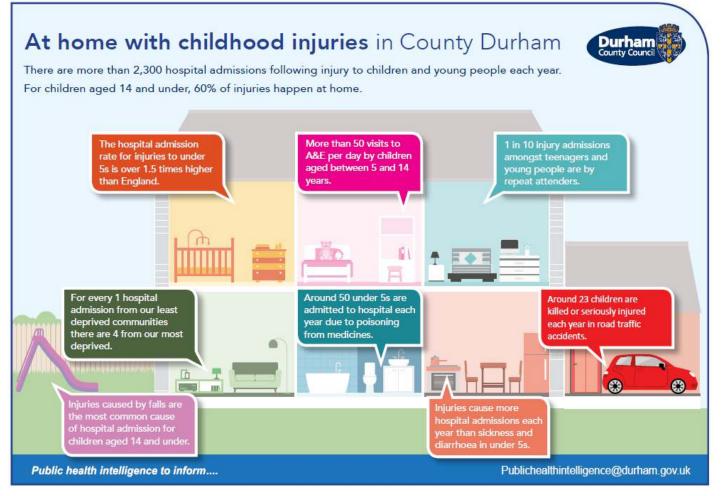








Childhood injuries









• We consistently achieve our 0-5 Healthy Child Programme Department of Health Mandated Contacts through a robust performance management framework.

Contact	Q1 2017/ 18	Q2 2017/ 18	Q3 2017/ 18	Q4 2017/ 18	YTD 2017/ 18	Q1 2018/ 19	Q2 2018/ 19	YTD 2018/ 19	Target	Trend
Antenatal	93.8%	90.9%	94.9%	97.5%	95.5%	96.4%	96.5%	96.5%	95%	↑
New Birth	95.2%	96.2%	97.9%	96.8%	96.6%	96.8%	96.3%	96.5%	95%	↓
6-8 week	93.5%	95.3%	97.6%	96.5%	95.8%	97.8%	96.0%	96.9%	95%	↑
6-12 month	94.9%	97.9%	98.0%	97.9%	97.2%	95.6%	97.3%	96.6%	95%	\
2-2.5 year	94.5%	96.7%	98.6%	97.9%	96.8%	97.9%	96.6%	97.3%	95%	↑







- Nationally and locally Speech, Language and Communication is a key priority due to the significant inequalities in outcomes for children in communication poor households.
- Our 0-19 service, in preparation for the contract extension are piloting a contact at 14 months old, with a focus on Speech and Language.
- Evaluation at end January 2019 to inform full implementation from April 2019.
- Alongside this County Durham have secured Public Health England funded Speech, Language and Communication Needs training for Health Visiting Teams in February 2019.



Breastfeeding in County Durham



Awarded 10th July 2018 to County Durham 0-19 Team

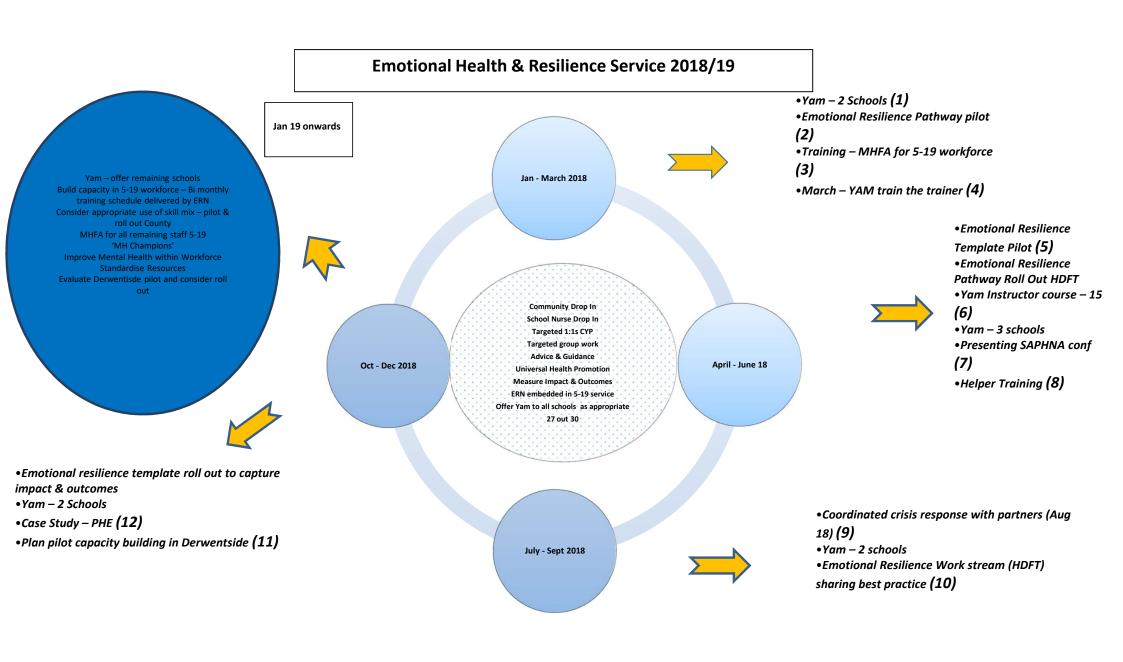




Breastfeeding Call to Action



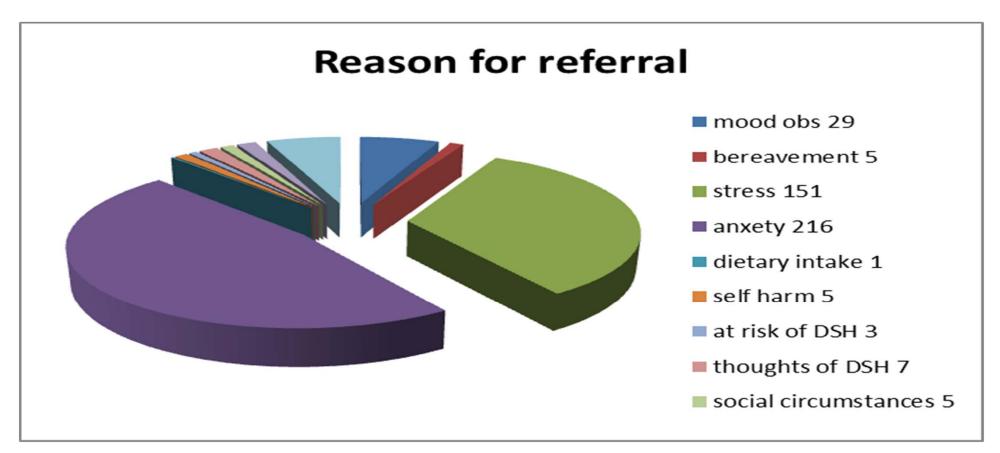
- Call to action across the system to work closely with children's services and to embed breastfeeding friendly communities
- Revised peer support programme to be more inclusive including more volunteer opportunities.
- Skill mixed Infant Feeding team now in place to address the wider social and cultural issues that influence decisions to breastfeed.
- Specialist Support at Freemans Quay and Tongue Tie Clinic at Bishop Auckland Hospital.
- Breastfeeding Champions across all Health Visiting Teams
- Training open to public, not just parents, as friends and family influence feeding choices
- Maintain Unicef Standards and Gold accreditation















Emotional Resilience Nurses.

Our Emotional Health and Resilience Nurses aim to raise awareness of mental health, reduce stigma associated with this and ensure that the right level of support for emotional and mental health issues are accessed in a timely manner.

3 Key Elements of their Work

- 1. Youth Awareness Mental Health (YAM) programme to Year 9 students
- 2. Secondary School Direct Offer- 2 hours a week, classroom based, targeted group work, 1-1, professional advice, parents sessions
- 3. Community Advice and Guidance Clinics for young people, parents, carers, professionals.



Emotional Resilience Nurses



Feedback from Young People in Education Settings Across County Durham.

"I was unsure about the service at first but after just one visit knew it was the right decision to give it a chance."

"I was hesitant to take part in group work initially, but it has been so worthwhile just to realise that other students have the same worries and anxieties that I do."

"and useful support from a professional who is not my teacher and understands young people is great."





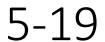
"It's great to have a young female role model I feel comfortable talking to."

"It's nothing like CAMHS and that's a good thing."

"The fact that the service is based in school means that I don't have to worry about buses, missing college or going somewhere I am uncomfortable going."

Feedback from Staff

"Without the Emotional Resilience Nurse, these students would not have been able to access mental health support due to a variety of barriers, and that is the most successful outcome of all."







- Demands on the 5-19 service are high volume and there is ongoing work to achieve a balance of proactive public health work alongside safeguarding children.
- We are working hard to maintain excellent school entry screening coverage of 95% including NCMP. Following 2017 to 2018 screening, 10.1% of children were referred to audiology, 16.9% to optician and orthoptic services.
- School Profiling requires further development in consultation with schools and key partners to support Quality Framework for Schools in County Durham.



Unintentional Injuries



- The Home Environment Assessment Tool (HEAT) is embedded into Health Visiting and School Nursing practice.
- In the past 12 months, 66% of assessments undertaken at 6 to 8 week review have required advice and action planning, examples of actions are advice regarding hanging blind cord, position of cot too near to radiator.
- 2 assessments led to immediate referral to First Contact.
- In 5-19 during the academic year 2017 to 2018, 532 HEAT assessments were undertaken, 306 required an action plan (58%).
- During 2017 and 2018 0-19 HDFT have co-delivered the County Durham Safety Carousel-partnership working to contribute to the Unintentional Injuries Strategy through a home safety session, as falls in the home are a key cause of injuries in children.
- Valuable contact with 5700 Year 5 and Year 6 children- Making Every Contact Count (MECC).







- The Vulnerable Parent Pathway (VPP) is a Health Visitor led pathway in County Durham, which supports families through early identification of need and an enhanced offer of support delivered by the 0-19 service, One Point and key partners including the voluntary and community sector.
- The VPP commenced in February 2017, transitioning at that time from the teenage pregnancy pathway, with key outcome measures at the 2 to 2 ½ year integrated review. Reporting of outcome measures will start from February 2019.
- Over the past 12 months, 218 families have been referred onto the VPP, with slightly higher numbers from the Peterlee and Stanley areas.
- At present there are improvements needed in data collection as although there are VPP templates on Systm One which staff are completing, audit of all contacts and outcomes up to the 2 to 2 ½ year point is manual.



Safeguarding



- Review of 0-19 Safeguarding Model/ Best practice and capacity to deliver is being undertaken at present led by our HDFT Head of Safeguarding in preparation for the contract extension.
- 0-19 HDFT contribution to Multi Agency Public Protection Arrangements (MAPPA) process changed on 1st October 2018- interim process currently in place.
- 0-19 service action plan in place following the Joint Targeted Area Inspection (JTAI) July 2018- training, audit, additional supervision, secondments, aim to increase risk management, challenge and escalation skills.
- Review of School Nurse role within safeguarding to ensure best use of capacityat first Review Child Protection Conferences in 60% of cases there was no active role for the School Nurse (audit March 2018). Formal process in place for withdrawal where appropriate.



0-19 Contract Extension



- Identified local leads for each aspect of development
- Plan on a page model to form presentation
- Additional contact at 14 months
- Breastfeeding and Healthy Weight
- Vulnerable Groups including SEND, Looked After and Youth Offending
- Continence
- Quality Framework for Schools
- Emotional Health
- Digital Offer
- Minor Illness, Unintentional Injuries
- Safeguarding
- Workforce



Children's Services 0-19: One team Model



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Emotional Health

& Resilience

Alvson Harker /

4

Early Help

Jan Fulford

Vulnerable Parent

Pathway

Bev Green /

Jodie Eccles

5

Healthy Weight
Deborah Lowry / Sarah
Massiter

6

5-19 Services

Rachel Wigin

SEND

Elizabeth Maddick

Universal Health

Jane Webster / Lillian Horner

- Healthy Child Programme (HCP) protocol
- HCP pathway/gap analysis
- Caseload mapping
- GP communication standard
- Midwifery comm.
 Standard
- · Staff engagement
- KDP engagement
- NICE Guidance
- 0-19 benchmarking and quality
- Immunisations
- BME

Performance & Quality

Emma Anderson / Annie Beedle

- Performance Management Frameworks (PMF)
- Quality & Impact reporting
- Gap analysis of data collection for PMF
- Performance Management workshops
- Quality assurance
- Inspection Readiness

- Lisa Bevan
- Establish Emotional Resilience Network
- Perinatal/Infant Mental Health training
- Training plan for leads
- Embed role in 0-19 service
- Identify core offer and marketing of service
- Roll-out emotional heath pathways
- Outcome measures

- Joint health needs assessment process
- Best practice tools for intervention
- System based approach
- Further develop 'Early Help' model
- Quality assurance & reporting
- Integrated steering groups
- Engagement with acute & midwifery services
- Well-being charters

- Localise pathway through 'launch' approach
- Partnerships
- Consultation with staff, service users and all partners
- Interface with Early Help and Family Nurses
- Staff training & development
- Performance & supervision model
- Links to Safeguarding
- Midwifery model development

- Identify HW Champions
- Gap analysis of NICE guidelines
- Harmonise policies for all contracts (i.e. infant feeding
- Evidenced based HW advice & support
- Review NCMP for consistency (National guidelines)
- Holistic delivery of healthy lifestyle advice
- Develop UNICEF action plans

- Structure and predicted workforce review
- Identify USP
- Training needs analysis and competencies
- Analysis of safeguarding input/capacity
- Balance of public health roles
- Performance & supervision model
- School engagement & profiling
- Voice of CYP

- GAP analysis against code of practice
- Early identification & evidence based pathways
- Criteria for flagging/link to local authorities
- Integrate best practice across contracts (2yrs)
- Consistent offer for identified children –QA tool
- Staff training for EHCA/EHCP - ensure child's voice is heard

Safeguarding: Liaison & links key partners / Supervision training / Passport & training compliance / Advice & Support / Learning from SCRs

Service User Experience: You said, we did / Questionnaires (patient stories) / Compliment & feedback / Patient voice / Takeover challenge / Voice of the Child / BME

Digital offer: Social media (Facebook/Twitter plus....) / Web-based advice & guidance / Email & SMS contact / Electronic returns

Workforce Development & Training: Training matrix / Care offer / Mandatory & Essential / Review footprint skills & capabilities / Access to Training



Workforce Transformation



- 5-19 skill mix continues to increase capacity for Public Health work while safeguarding children
- Proposed dedicated resource in 5-19 for Looked After Children Health Reviews
- SEND team skill mixed, rotational Staff Nurse posts to be developed to enhance overall workforce skills across mainstream schools.
- Mentally healthy workforce, upskill to deliver on emotional health agenda.
- Future apprenticeships and development posts.



Next Steps



Next 3 months:

- Contract extension plan on a page presentation to Commissioners and 0-19 teams.
- Workforce Training Needs Analysis
- Safeguarding Business Case to Commissioners

Next 6 months:

- Rollout of Virtual Private Networks (VPN) in phase 2
- Vulnerable Parent Pathway 2 to 2 ½ year review outcomes reporting
- Mentally Healthy Workforce Development to deliver.