

8 November 2024

Annual 0-25 Family Health Service Update

Report of Amanda Healy, Director of Public Health

Electoral division(s) affected:

Countywide

Purpose of the Report

- 1 To update Children and Young People's Overview and Scrutiny on the 0-25 Family Health Service workforce and service delivery across County Durham.

Executive summary

- 2 Harrogate and District NHS Foundation Trust (HDFT) is the provider of the 0-25 Family Health Service in County Durham, which delivers the Healthy Child Programme. HDFT is commissioned by Public Health in Durham County Council. A new contract was implemented from 1 September 2020.
- 3 A review of the service was undertaken February to April 2024 to support a recommendation to enact the optional 2-year extension period from 1 April 2025 to 31 March 2027 and to agree changes to the service delivery model, and in turn agree the financial envelope, in which service delivery will take place. The 2 year extension has now been agreed.
- 4 An outcome of the review of service is to internally align Health Visitors back to 0-5 years and School Nurses to 5-19/25 years, acting on feedback from staff and the wider system, including cross boundary partners. As the 0-25 service has a "One Team" approach, this will not be a noticeable change for partners, and at transition to school, no child will move from Health Visitor to School Nurse care while receiving targeted intervention.
- 5 The Transformation Manager has remained a key role in progressing the Family Hub agenda in County Durham.
- 6 There has remained a deficit of Health Visitors due to a national shortage, however following the service review which included review of

staffing establishments, and through HDFTs “grow your own” recruitment strategy, newly qualified Health Visitors have filled the majority of vacant posts in September 2024, and the deficit has now greatly reduced.

- 7 Agile working continues to support universal Healthy Child Programme delivery, partnership working and targeted work, balanced with presence, visibility, and delivery in and through the 15 Family Hubs across County Durham.
- 8 The expansion of the Emotional Health and Resilience Team has facilitated more upstream prevention and earliest intervention work, with an increased offer to primary schools while maintaining a robust offer to secondary schools.
- 9 The five Government mandated Healthy Child Programme contacts are consistently delivered across County Durham with high levels of coverage. There has been a targeted and phased approach towards delivery of the additional five local contacts in the 0-25 contract providing an enhanced offer of support from the HV, and this has been reviewed to inform the contract extension service model.
- 10 The Enhanced Parenting Support Pathway (EPSP) referral criteria has been extended to include referrals up to 10 weeks postnatal, with ongoing system partnership work to refine the pathway and progress work to increase the number of families accessing this support.
- 11 There has been significant progress with the 0-25 Family Health Service digital offer, with additions and improvements to the 0-25 Growing Healthy App, downloads increasing, good use of the health chat function, and accessibility and translation functions added.
- 12 HDFT hosted their first “Great Start in Life” Conference in County Durham on 16 April 2024 showcasing and sharing innovative practice and developments with key partners and stakeholders, to support children and young people to have a great start in life.

Recommendation(s)

- 13 Children’s Overview and Scrutiny Committee are asked to:
 - (a) note the contents of this report and comment accordingly.

Background

- 14 The 0-25 Family Health Service (FHS), which delivers the Healthy Child Programme, contract commenced with Harrogate and District NHS Foundation Trust (HDFT) on 1 September 2020.
- 15 To reflect the local authority's duty to young people that are Special Educational Needs & Disabilities (SEND) and Care Leavers and the direction of the NHS Long Term Plan move towards 0-25 services, the service is referred to as the 0-25 Family Health Service.
- 16 The 0-25 Family Health Service structure has an emphasis on a skill mix workforce, recognising that Health Visitors are a key workforce and are nationally mandated.

Workforce Challenges and Workforce Development

- 17 The service has continued to encounter significant workforce challenges due to the level of Family Health Visitor vacancy in the last 12 months. This is reflective of the national picture of a shortage of trained Specialist Community Public Health Nurses (SCPHN) available to fill those vacancies.
- 18 Following the service review to inform the recommendation to enact the 2 year contract extension from April 2025, there is a revision of staffing establishments to safely and effectively deliver the proposed service model. This is informed by health needs assessment and public health priorities for Best Start in Life (BSIL), areas of increasing inequalities, and the voice of children, young people and parents.
- 19 In September 2024, with the service working towards the revised staffing establishments, most Health Visitor vacancies, and all School Nurse vacancies have been filled.
- 20 The level of Health Visitor vacancies over the past 12 months has led to work with safeguarding and vulnerable families being prioritised with Countywide support from other teams being utilised alongside increasing skill mix to support Healthy Child Programme delivery. Although most vacancies are now filled, there will always be some workforce turnover therefore this prioritisation and wider support approach remains in place.
- 21 The skill mix teams support both the 0-6 and 6-25 SCPHN workforce to deliver both universal and targeted support, including early help, safeguarding and children in care interventions.
- 22 Recruitment to any non-SCPHN roles has not presented any challenge over the past 12 months.

- 23 HDFT successfully recruited to 10.6 WTE Family Hub funded posts, as part of the implementation programme. The future of Family Hub funding beyond March 2025 is unknown at this stage.
- 24 Through HDFT's recruitment and retention strategy "grow your own," 11.8 WTE Newly Qualified Health Visitors SCPHN Students started in September 2024. The next cohort of SCPHN students have started their training in September 2024, nine Health Visitor SCPHN and two School Nurse SCPHN training in Durham, of which three are apprenticeships.
- 25 In addition, all remaining vacancies continue to be advertised nationally, HDFT hold quarterly recruitment events, and offer retire and return opportunities to support staff work/life balance and retain experienced staff in the services. HDFT work closely with NHS Professionals to increase the pool of SCPHN staff to support teams.
- 26 Workforce wellbeing is a key priority for HDFT and Public Health in Durham County Council, with dedicated Health Advocates in teams, listening events, staff charters, Thrive conversations, support and opportunities for new roles and progression, and the Trust recruitment and retention strategy.
- 27 The 0-25 Family Health Service have achieved the Better Health at Work Continuing Excellence Award in October 2024.
- 28 The workforce undertakes a considerable amount of training, including nationally required mandatory and role specific training for NHS staff, role specific training for 0-25 staff, safeguarding training at appropriate levels for role, SEND training, and wider system training to support early help assessment and interventions.
- 29 The Family Hubs and Start for Life developments and implementation programme have provided additional training requirements and opportunities which have been embraced by the teams, including Sleep Action Training, Triple P Baby, and Infant Massage.
- 30 The 0-25 Family Health Service facilitate many pre-registration student nurse placements, midwifery student placements, post registration SCPHN placements, trainee community paediatrician placements, and work experience/shadowing opportunities for external organisations and key partner professionals. There is ongoing preceptorship, safeguarding preceptorship and competency development and sign off for staff in the service.
- 31 Workforce Flu vaccinations for Winter 2024 are starting October 2024 delivered by HDFT Occupational Health Team locally. There is a continued offer of Pertussis and Measles, Mumps, Rubella vaccination

for staff who have regular contact with pregnant women, children and young people, carers, and are public facing.

Universal and Targeted Health Visiting

- 32 Health Visitors provide leadership to the skill mix teams and remain the named caseload holders for children 0-5/6 years.
- 33 An outcome of the review of service is to internally align Health Visitors back to 0-5 years and School Nurses to 5-19/25 years, acting on feedback from staff and the wider system, including cross boundary partners. As the 0-25 service has a “One Team” approach, this will not be a noticeable change for partners, and at transition to school no child will move from Health Visitor to School Nurse care while receiving targeted intervention.
- 34 Some universal and targeted care can be delegated to skill mix, with all antenatal, new birth and 6-8 week contacts, and complex care and safeguarding being undertaken by the Health Visitor.
- 35 Health Visitor activities and work to support parents includes:
 - Universal delivery of the National Healthy Child Programme 5 contacts, either universally or targeted.
 - Family Health Needs Assessment to include parental experiences which may influence parenting capacity or style, referral and support.
 - Safe discussion regarding domestic abuse.
 - Home environment assessment to include assessment of safe sleep area for baby.
 - Breast feeding advice and support, proactive breast-feeding management.
 - Peri- natal and infant mental health support.
 - Smoking status and CO monitoring is carried out. Parents are offered brief intervention advice and support and can be referred to specialist quit smoking advisors.
 - Newborn Behavioural Observation (Brazelton NBO) using the tool to help parents understand the uniqueness of their baby through their behaviour, giving parents confidence regarding their relationship with their baby.

- Top to toe examination, using a tool developed by practitioners in County Durham 0-25 service, an assessment is made of newborn babies to identify any obvious anomalies.
 - ICON for prevention of Abusive Head Trauma, parents are advised about crying babies and the safest way to manage this.
 - Universal plus and Partnership plus intervention alongside multi agency colleagues to provide enhanced advice and support to children and families where additional vulnerabilities have been identified. This includes delivery of the Enhanced Parenting Support Pathway which includes more regular contact in both ante and post-natal period.
- 36 Agile working has continued to support service delivery. Most service delivery contacts with Children Young People and Families (CYP&F) are face to face, however virtual platforms are still utilised where appropriate and beneficial to CYP&F.
- 37 HDFT's Single Point of Contact into the service is well utilised, with access to duty practitioners who can offer advice and signposting or refer to the most appropriate practitioner. Ease of access has been improved through the health chat function on the app.
- 38 0-25 Family Health Service Growing Healthy drop ins and Infant Feeding support groups are established in the Family Hubs and some outreach community venues.

Enhanced Parenting Support Pathway

- 39 In County Durham the Enhanced Parenting Support Pathway (EPSP) provides additional support to the Healthy Child Programme levels of service.
- 40 In line with providing holistic, coordinated packages of support to families in greatest need, the EPSP involves the delivery of integrated support by Health Visitors and the One Point Service (OPS) and other partner organisations where appropriate.
- 41 Parental mental health is consistently the top reason for referral onto the pathway, followed by previous child protection proceedings, then parental domestic abuse.
- 42 The criteria for referral onto the pathway was extended to include the Antenatal and Postnatal period up to 10 weeks to ensure parents with perinatal mental health concerns are identified early and appropriately supported.

- 43 The Process for midwives requesting support for families to access the EPSP has been streamlined so that these can be requested via Bagernet IT system, identifying families earlier to provide seamless support.
- 44 A multi-agency workshop was held in September 2024, involving process mapping to:
 - robustly identify vulnerable families
 - ensure sufficient support and effective communication throughout the pathway
 - improve data collection
 - identify meaningful outcome measures
 - and ensure information sharing processes are robust and effective
 - identify and address any further workforce training needs.

Best Start in Life

Infant Feeding

- 45 Breastfeeding initiation and rates at 10 days and 6-8 weeks have improved by small amounts across 2023-2024, however prevalence rates remain below England and North East Region rates.
- 46 The 0-25 Family Health Service has maintained UNICEF Baby Friendly Full Accreditation. HDFT Family Peer Supporters support the infant feeding groups across County Durham and work with local businesses to promote the Baby Friendly business accreditation scheme.
- 47 Premises audits are completed annually following breastfeeding friendly scheme registration as they are included as part of the service's UNICEF reaccreditation process alongside staff and mothers' audits. Throughout 2023/24, most Family Hubs and library services have undertaken breastfeeding friendly accreditation scheme with plans in place to ensure the remaining venues obtain accreditation.
- 48 In collaboration with a local business, local families, and Durham County Council a short video has been produced highlighting how supporting families to breastfeed normalises breastfeeding, benefits their business, and improves families' experiences of breastfeeding in public. This video is embedded within the breastfeeding friendly scheme presentation and

will be available on the breastfeeding friendly scheme section of the Durham County Council website.

- 49 Businesses who have completed the Breastfeeding Friendly Scheme training are identified on the Durham County Council website, as well as being promoted on social media sites including Facebook and Instagram.
- 50 Several campaigns are supported across the year, a key one being “World Breastfeeding Week” in August 2024. The theme was: “Closing the Gap, Breastfeeding Support for All”. Key activities included a family hub beach party at Seaham, a garden party in Bearpark and a celebration event Locomotion Museum in Shildon.
- 51 Infant feeding support sessions are established in all 15 Family Hubs, and some additional outreach venues.
- 52 There is a pathway in place for assessment of tongue tie from identification by Health Visitor through early latch clinic and the Specialist Nurses through to the acute trust specialist service.
- 53 Early latch clinics have been developed in each locality. These clinics have been developed following a UNICEF best practice example of anticipatory guidance for breastfeeding women in the early days with the goal of preventing more complex problems becoming an issue.
- 54 Specialist breastfeeding support is being expanded. 3 additional staff are currently undertaking the International Board Certified Lactation Consultant (IBCLC) qualification which is the highest regarded professional qualification in breastfeeding knowledge and support. This will develop resource to consistently provide a specialist support service across the three localities.
- 55 The referrals to IBCLC have been providing tailored care for issues such as mastitis, re-lactation and tongue tie assessments.
- 56 The Family Peer Supporters have had an active role in contacting families of under 2s to check entitlement and promote the Household Support voucher scheme, and Healthy Start scheme, supporting the child poverty agenda.

Health Education and Nutrition in the Really Young (HENRY)

- 57 The service has a core HENRY facilitator team; this replaced the original Train the Trainer model which proved to be unsustainable due to staff turnover. Since this change HDFT has maintained a stable and consistent HENRY team and programme offer.
- 58 The programmes offered across County Durham are:

- Preparation for Parenthood 6 weeks
 - Healthy Families Right from the Start (0-5years) 8 weeks
 - Healthy Families Growing Up (6-12 years) 8 weeks
 - Starting Solids Workshop 2 hours
 - Healthy Teethy Workshop 1-2 hours
 - Fussy Eaters Workshop 1-2 hours
- 59 There is a combination of face to face and virtual delivery to increase accessibility for parents, including working parents.
- 60 Engagement and promotion work is ongoing, with an increase in self-referrals in Q1 2024-2025 following promotion through Family Hubs and community events.
- 61 The service plans to work with the Family Hubs Parent/Carer Panel in relation to promotion and delivery of the programmes, to increase parental confidence in engaging and reduce attrition rates for attendance at programmes once referred.

Oral Health

- 62 Oral health annual refresher training was provided by County Durham and Darlington Foundation Trust (CDDFT) Oral Health Promotion Team in 2023-2024 as an update for all 0-6 years HDFT staff.
- 63 HENRY Healthy Teeth workshops for parents are offered following the Starting Solids workshop. There is an increase in engagement in these workshops, with Q1 2024-2025 attendance matching the whole of 2023-2024 attendance.
- 64 Parents receive the key health promoting messages, reporting having a better understanding of the importance of starting to brush baby's teeth as soon as they come through and the effects of sugary drinks and food on children's teeth, including deciduous teeth which many people don't think matter as much.
- 65 The 90-minute workshop provide evidence-based information on the Government guidelines around when to start cleaning children's teeth, types of toothpaste and brushes; when and how to register with a dentist and a link to the NHS site to find a dentist near you that is accepting NHS patients, and how often to visit. Parents receive guidance on how to clean teeth and how to manage toddlers and reluctant older children,

consider which foods and drinks contribute to tooth decay, and discuss healthier swaps for these.

- 66 Public Health funding has been allocated for oral health packs which the 0-25 service will provide to families at the 9-12 month mandated contact over the next 2 years, along with the key health promoting messages. This initiative will start in January 2025.

Speech and Language

- 67 HDFT has worked in collaboration with North Tees and Hartlepool Speech and Language Service to support the early identification of Speech, Language and Communication (SLC) difficulties and improve the quality of referrals from the service.
- 68 HDFT is providing workforce training to embed the post ELIM (Early Language Identification Measure) intervention 'Talking Together' which includes a suite of resources developed by Newcastle University when speech and language delay is identified at the 2-2.5 years development review.
- 69 HDFT is working in partnership with the wider system to develop an integrated Speech, Language and Communication Strategy as part of the Family Hub requirements, using local data and intelligence to identify gaps and assets. As part of this work HDFT was actively involved in the recent Local Government Association Peer Challenge, feedback from this will help inform a system wide action plan and pathway.
- 70 The Parenting Support Family Peer Supporters funded by Family Hubs, provide a focus on equity of access to SLC support, linking with community groups for babies and children in areas with high deprivation, and establishing outreach groups where there are gaps.

Unintentional Injuries

- 71 Dedicated 0-25 service staff are identified as unintentional injury champions across the County, and working with Public Health to review the current offer and undertake forward planning of activities and campaigns based on data intelligence. HDFT practitioners access the Child Accident Prevention Trust training, funded by Public Health.
- 72 A monthly child accident prevention calendar is shared via the Growing Healthy Facebook page by the unintentional injury champions, the reach of these posts is between 2-5 thousand per month. Throughout Child Safety Week 2-8 June 2024 the 0-25 service worked in collaboration with Family Hubs to promote key safety messages through activities, groups, displays and digital platforms.

- 73 The 0-25 team provide a monthly slide set for the Family Hub digital display for child accident prevention, that follows national safety themes and learning from Child Death Overview Panel and Child Safeguarding Practice Reviews.
- 74 Child accident prevention sessions are delivered by the 0-25 service on the County Durham Young Parents Programme, the feedback received from these young parents shows how impactful the key messages are.

Perinatal and Infant Mental Health

- 75 The Specialist Health Visitor and Staff Nurses for Perinatal and Infant Mental Health (PIMH) funded through Family Hubs, deliver direct work to families using various evidence based interventions to provide low level support. These include Neonatal Behavioural Assessment Scale (NBAS) and Video Interactive Guidance (VIG), to increase parent-child attachment and attunement using a strength-based approach. A 6 week psycho-education approach is used to support families at home with unhelpful thoughts/value based living and regulating emotions.
- 76 The Family Peer Supporters for PIMH provide support at home for parents experiencing low mood and feelings of isolation, supporting them to access Nurturing Little Minds a specialised semi structured peer support group which they facilitate through Family Hubs and community venues providing listening support, Infant Massage, crafts and sensory support and wellbeing walks. They also deliver Triple P baby with parents on a one-to-one basis.
- 77 Through a streamlined HDFT PIMH pathway for mild to moderate perinatal mental health, and access to more interventions in addition to the emotional wellbeing visits that Health Visitors undertake, there has been an increase in referrals from Midwives, Health Visitors and GPs, with a total of 228 referrals between January to June 2024.
- 78 Women are being identified for support earlier in the antenatal period. A robust assessment process is in place for all referrals to ensure families receive the most effective and appropriate care. A Practitioner Psychologist is funded through Family Hubs to support the Specialist Health Visitor with triaging referrals and providing case supervision, due to the complexity of some cases.
- 79 The service continues to liaise and work closely with Tees Esk and Wear Valley (TEWV) Specialist Perinatal Mental Health (PMH) Service and Talking Therapies Perinatal team to ensure families receive the right support at the right time.
- 80 HDFT PIMH team has made links with the Neonatal Unit at University Hospital of North Durham with a focus around enhancing Parent-Infant

relationship and are working in partnership with the Gypsy Roma Traveller (GRT) Specialist Nurse.

- 81 The PIMH team deliver a rolling programme of Multi-agency PIMH training to the HDFT 0-25 workforce, Family Hub staff including partners and identified voluntary sector colleagues. The Specialist Health Visitor ensures Health Visitors and Staff Nurses are trained in Emotional Wellbeing Visit Training and are confident to deliver these interventions in practice.
- 82 Practitioners can also request a consultation with the PIMH Specialist Health Visitor for low to moderate cases, and parent/infant relationship support, to help increase workforce knowledge and confidence.
- 83 The Specialist Health Visitor offers one to one reflective supervision discussions with practitioners. Group reflective Practice Sessions for Family Hub practitioners have been organised, these sessions are delivered by multi agency partners including Educational Psychologists, Specialist PMH team in TEWV and Talking Therapies on their speciality topic.
- 84 HDFT facilitate the Family Hub multi agency PIMH working group and actively involved in the development of a County Durham PIMH Strategy.
- 85 An HDFT Case Study has been published on the Local Government Association website: Advancing perinatal and infant mental health care in County Durham, with the focus on low to moderate PIMH support. A small number of local authorities across the country have contacted the service for advice about developing PIMH support and to request information about the model developed by the service.
- 86 HDFT is working in collaboration with Community Midwifery and Family Hubs to deliver a 5-week face to face Antenatal Solihull programme for parents to be in Family Hubs across the County.
- 87 In partnership with the One Point service HDFT annually renew the licence to support all County Durham families accessing the Solihull Programmes online.
- 88 This online access to parenting programmes increases choice for parents and carers, and young people as there are courses for teenagers on teenage brain and emotions.

Tobacco Dependency in Pregnancy

- 89 Alongside Health Visitors and Staff Nurses, Family Health Practitioners have been trained in Carbon Monoxide (CO) monitoring making every contact count in identifying and referring families for support to quit

smoking. Practitioners follow the North-East England Tobacco Dependency in Pregnancy and Postnatal Pathway.

- 90 Due to the significant health risks of smoking during and after pregnancy, Carbon Monoxide (CO) monitoring is delivered as part of the Healthy Child Programme contacts. Staff have been trained by ABL (the Stop Smoking Service Provider in County Durham) this training offer has improved in the last 6 months, ensuring staff can access refresher training.
- 91 HDFT has collaborated with ABL to develop a flyer with a QR code enabling parents, carers and wider family members to access the referral while the practitioner is in a home visit or clinic setting, this has generated an increase in referrals to the Stop Smoking Service. ABL is currently developing business cards for HDFT with the QR code for referrals.
- 92 As some families continue to decline CO monitoring to be undertaken, HDFT is working with Public Health to explore barriers and increase uptake.

Family Hubs

- 93 HDFT 0-25 Family Health Service are a key partner in the implementation and delivery of the Family Hub and Start for Life (SFL) project plan in County Durham. This has strengthened HDFT and the partnership integrated working and shared vision.
- 94 HDFT actively deliver on the four Family Hub SFL funded areas, Parenting, Home Learning Environment, Infant Feeding, and Perinatal Mental Health and Parent Infant Relationships
- 95 HDFT contribute to the Family Hub transformation with the co-location of Health Visiting teams, more recently Bishop Auckland and Horden teams have co- located, staff reporting improved communication and increased opportunities for joined up working.
- 96 The additional posts funded by Family Hubs are providing a conduit between services and partners including the Voluntary and Community Services, promoting Family Hubs, supporting families to access evidence-based programmes, peer support and outreach.
- 97 The team works in collaboration with the Dad's Coordinator, North-East Young Dads and Lads and the Community Connectors who are employed or commissioned through Family Hubs.
- 98 HDFT has engaged with the Family Hub Parent Carer Panel to support with co- design, when developing the Family Peer Supporter roles, developing resources and information letters for families.

- 99 HDFT submitted an abstract following a request from NHS England Maternity and Neonatal Programme. The case study demonstrated the integration of Family Hubs into the local postnatal system through the development of the low to moderate PIMH team creating a seamless multi agency approach. This is to be published in the NHS England Postnatal Systems Guidance Report.
- 100 In collaboration with the Local Authority the service has developed a low level three tier Sleep Action Pathway following funding from Family Hubs to train 15 HDFT and One Point Sleep Advisors and 5 HDFT Sleep Counsellors. The pathway has identified a high level of need for support resulting in a large volume of referrals, with a significant proportion of the referrals being for children with SEND needs, some requiring more specialist sleep support. Discussions are currently taking place with multi-agency colleagues to review this and consider next steps.
- 101 HDFT practitioners support the delivery of the EPEC (Empowering People Empowering Communities) training to Parent Group Leaders alongside One Point colleagues.

Digital

- 102 The 0-25 Family Health Service Growing Healthy App now features a programme called 'Recite Me'. This increases accessibility for clients whose first language is not English, those with dyslexia, and those unable to read or have literacy challenges. The features include:- translation into 120 languages, including 65 text to speech voices, the ability to change the text and background colour and increase font size, and a reading ruler.
- 103 The service has launched a new website dedicated to the Family Health Service which also includes the Recite me programme to improve accessibility.
- 104 The health chat function of the app continues to be used daily by clients to chat with a health professional about any queries or concerns they may have, with responses provided within 24 working hours. Since the launch of health chat there have been 3130 chat interactions.
- 105 The app is regularly updated to ensure that information is up to date and relevant for the user. The app has dedicated areas for supporting dads, infant feeding, sleep etc.
- 106 Downloads of the app continue to increase month on month, currently 22.5% of the 0-5 years population have it downloaded. Staff are promoting at all opportunities.

- 107 Regular push notifications are sent from the app to users around a range of key public health messages and campaigns, for example immunisations, safety recall alerts, safe sleep guidance etc.

School Age Vision Screening

- 108 Vision screening in academic year 2023-2024 for reception children was completed, 4925 children (97% of eligible cohort) were screened. 14% of those screened required referral to orthoptic services.
- 109 HDFT continue to work closely with the Primary Eyecare Service to increase children accessing optician appointments in a timely way following school screening. 0-25 practitioners refer children to this service using a platform called Opera which Primary Eyecare use as their national system. This supports timely referral, offer of appointments and the ability to track individual children through the system following referral.

National Childhood Measurement Programme - Healthy Weight

- 110 The National Child Measurement Programme (NCMP) for academic year 2023 – 2024 was completed on all eligible schools within timescales. 4846 reception children (95%) and 5487 year 6 children (92%) participated in the programme.
- 111 NCMP data nationally shows a decrease in Reception Year Obesity Prevalence from 10.1% in 2021-2022 to 9.2% in 2022–2023. In County Durham, 11.8% of reception age children in 2022–2023 are reported to live with obesity, this is an increase from 2021/22 and is statistically higher than the national rate.
- 112 Year 6 national obesity prevalence has decreased from 23.4% in 2021-2022 to 22.7% in 2022–2023. In County Durham, 25.6% of year 6 children in 2022–2023 are reported to live with obesity, this is a small increase from 2021/22 and is statistically higher than the national rate.
- 113 Nationally and within County Durham the obesity prevalence in boys is higher than girls for both age groups.
- 114 Nationally, underweight prevalence in year 6 children has increased. From 1.5% in 2021/22 to 1.6% in 2022/23 and is the highest recorded rate in NCMP, since 2009/10. Locally there has been minimal changes (1.0% in 2021/22, 1.1% in 2022/23).
- 115 The findings from the NCMP data for 2023-2024 have not been published to date.

- 116 The service continues to revise the NCMP pre and post measurement letters following feedback and has involved the County Durham Parent/Carer Panel in the review of the letters to ensure they are helpful for parents / carers.
- 117 Working with Durham County Council and CDDFT, the 0-25 Family Health Service participated in the MapMe2 research project run by Newcastle University, aimed to support parental knowledge and awareness of child weight status and look at how child weight status changes over time. The results of this study are currently under analysis and findings have not yet been disseminated.

6-19/25 Years Service Delivery

- 118 The 6-25 years School Nursing element of the service continues to undergo a programme of transformation to deliver the current and future service model in the contract extension period, with some disaggregated roles to focus on and support the more vulnerable children and young people, while maintaining a generic service that works with schools and more vulnerable communities.
- 119 There are specific Children in Care Nurses, Safeguarding Strategy Nurses, an Educated Other Than at School (EOTAS) Nurse, Youth Justice Nurses and SEND Nurses.
- 120 The GRT Specialist Nurse Role continues to have excellent relationships with the GRT communities across County Durham, and this role continues to evolve.
- 121 The 6–25 service have introduced a referral process from external partners into the service. This has provided a robust system for managing referrals in a timely manner and improved access to the service for partner agencies and parents. It also facilitates feedback to referrers and signposting to appropriate support and services. In the past 6 months the service has received 359 referrals for support for families, children and young people.
- 122 Data and intelligence from referrals into the service has helped to shape service delivery and identify gaps in service provision which can then be addressed.
- 123 Supporting school curriculums, relationship and sex education (RSE) is delivered using a targeted approach where school, local intelligence or data identifies a need for the 0-25 service to deliver specific sessions, for example linked to areas where there are concerns about child exploitation.

- 124 Working with system partners, the service has identified that teenage conceptions and pregnancy are a key priority area for 6-25 staff interventions.
- 125 Staff are trained to assess and supply Emergency Hormonal Contraception to young people where appropriate. The service continues to trial a package of support for teenage parents including dads, from conception until 28 weeks pregnant, when care will transition over to the Health Visiting service.
- 126 The team offer a school drop in to every secondary school on a fortnightly basis and see young people for a range of health issues including anxiety/emotional well-being, sexual health, weight/healthy eating, continence and hygiene/puberty.
- 127 The team offer health promotion interventions to schools on a targeted basis where there is an identified need, including vaping, sexual health, oral health, and child exploitation.
- 128 The service has launched toileting and bedwetting workshops in Family Hubs across the County to provide Tier 1 continence support to CYP&F.

Emotional Health and Resilience

- 129 The Emotional Health and Resilience Team (EHRT) support CYP referred into the service who require low level, early intervention and prevention short term emotional health and resilience support. The skill mixed team has been expanded over the last 18 months; support is delivered in a variety of methods including 1:1 support, small groupwork, classroom-based lessons, large assembly-based sessions, guided self-help, group psycho education and parent led cognitive behaviour therapy. The interventions are delivered in a variety of settings including schools, homes, Family Hubs and in alternative community settings as appropriate, based on the best location for CYP.
- 130 The expansion increases focus on early years and pre-school children, progressing integrated working with the Local Authority, Education, and Early Years settings. This has facilitated an increase in focussed support for vulnerable groups in communities, and support offered earlier for CYP.
- 131 Referrals into the EHRT have continued to increase over the last 12 months with 1:1 support offered to almost 1800 CYP. The service offered is needs led: areas of service development are a direct response to analysis of the data and gaps identified.
- 132 The primary referrer into the service remains education, however there is an increase in referrals from key partners, parents and CYP themselves.

The primary reason for presentation to the service has been consistently anxiety and or difficulty with emotional regulation.

- 133 The EHRT are key members of a co-ordinated multi agency response offering vital support after a critical incident has occurred in the community. This is delivered in a timely manner to primary and secondary schools, both for staff and CYP&F. This academic year (2023/24) support has been provided for 26 critical incidents in schools, communities and individual families in County Durham, the feedback to this multi-agency response has been very positive.
- 134 From 1 July 23 – 30 June 24, 44 primary schools have accessed the Decider Skills Training (1642 children), this programme has also been delivered 1:1 with identified children where needs have been identified (131 children). Feedback from children, schools and families regarding the programme has been very positive.
- 135 In partnership, the EHRT co-deliver Youth Aware of Mental Health (YAM), Senior Mental Health Leads (SMHL) in School Training and the Fear-Less anxious about school programme.
- 136 The EHRT continue to work alongside key partners on a pilot in the Consett area of the County, the aim is a streamlined multi-agency approach to triaging referrals ensuring CYP&F are picked up at the earliest opportunity by the most appropriate service first time. This approach reduces inappropriate referrals to specialist provision resulting in improved outcomes for CYP&F, less delay for families, less duplication and CYP&F tell their story once.
- 137 The 0-25 Family Health Service is working alongside key partner - Investing in Children to establish charter status, demonstrating commitment to capture the voice of CYP and put the views and needs of children and young people at the centre of service delivery and developments.

Youth Practitioners

- 138 There has been an increase in referrals for Youth Practitioner support from Secondary Education colleagues and from the EOTAS Nurse (Educated Other than at School) who are identifying young people aged 11-19yrs requiring additional support.
- 139 The Youth Practitioner Team was awarded funding from the Project Genesis Trust Discretionary Fund and by the Derwent Valley Area Action Partnership to support the Blackhill Growing Healthy Community Allotment in Consett. This is making a significant difference in renovating the site and providing a sustainable project for the whole community. The

Genesis project trustees enjoyed visiting the site and talking to the young people and look forward to seeing future developments.

- 140 The Youth Practitioner Team facilitated 2 sessions for young people with learning disabilities from Journey Enterprises at the Shildon Allotment Project.
- 141 A Celebration event was held at Willington Allotment in July 2024, attended by Councillor Gunn, representatives from Believe Housing who provided funding to the project and fellow allotment holders. 12 young people who had been referred by Parkside School were presented with their John Muir Awards.
- 142 Fun and Food funding supported a group of 10 young people from Horden to go Ghyll Scrambling in Keswick. The young people identified suffer with mental health issues and low self-confidence, this provided an opportunity to travel out of the area and experience a physically and mentally challenging activity.
- 143 The Youth Practitioner Team was awarded funding from Sport England, to set up a new group in a community venue in the centre of Stanley with a focus on physical activity, the group is well attended by the young people referred from North Durham Academy requiring support with their emotional health and wellbeing.
- 144 The Community Anchor submitted a Health Service Journal Award Nomination for the Youth Practitioner Team "Promoting Social Inclusion Using a Place-Based Approach in County Durham".
- 145 The Team was granted a community award from Believe Housing to ensure the continuation of the EOTAS group in Peterlee. The group has been successful in supporting some young people to access college at Catch 22. Physical and low-level mental health interventions are provided to the CYP who are not currently accessing full time education, approximately 70% of the young people suffer with anxiety and 50% have additional needs.
- 146 Feedback from schools, the young people and families continues to be very positive, around raised self-esteem, confidence and overcoming social isolation.

SEND (Special Educational Needs & Disabilities)

- 147 The HDFT SEND team has continued to work closely with SEND Schools, to offer bespoke group and one to one Health Promotion to CYP in SEND Schools, as well as targeted work in school or home for identified CYP who may be at risk. This includes (but is not limited to) support around healthy eating, smoking and alcohol use, healthy

relationships on a one-to-one targeted basis, and delivered in a way deemed appropriate for that CYP or cohort.

- 148 School Profiles have started to be completed with the county's SEND Schools and provisions, to enable the 0-25 service to ensure the support offered is relevant to the needs of the cohort of CYP.
- 149 The SEND Family Health Visitor role has continued to evolve, not only supporting Early Years settings and providers, but building valuable links with other colleagues in the Local Authority and wider health services, to strengthen partnership working.
- 150 An Early Notification process has been developed between 0-25 service and the Local Authority to ensure timely notification of SEND and additional need into the Local Authority, and earlier referral to Portage.
- 151 There is continued improvement work to ensure robust and relevant information is provided to inform Education and Healthcare Plans (EHCPs) through regular audit, quality assurance, one-to-one support for staff, and training.
- 152 Peer supervision sessions have been established by the SEND Lead and SEND Champions in the service, to offer all staff from the wider 0-25 service support when working with CYP with SEND. These run monthly and have evaluated well.
- 153 The team has delivered a programme of sessions to run in the Family Hubs to address some common health issues faced by parents and carers of children with SEND and additional needs. Initially, this was aimed at children aged 2-6 years, but it became evident that older CYP with SEND would benefit and the age range was extended to 2-11 years. These commenced in November 2023 and have evaluated well from the parents and carers that have attended.

Safeguarding

- 154 The Safeguarding Team provide specialist advice and support through the footprint wide Single Point of Contact for all 0-19/25 Family Health Teams.
- 155 The Specialist Nurses Child Protection (SNCP) provide support to 0-25 FHS staff on case escalation and management oversight. SNCP receive regularly monthly supervision from the Named Nurse for the most complex cases, providing oversight and support.
- 156 The Operational Safeguarding Nurses (also known as Strategy Nurses) undertake the majority of children's safeguarding strategy meetings, this supports the Health Visitors and School Nurses through preventing

movement or delay of their universal and targeted work to attend strategies.

- 157 The specialist and operational safeguarding staffing model has no vacancies or long-term absence at present, providing stability and resilience in the service.
- 158 Intensive work has been completed regarding referrals from the 0-25 FHS into Children's Social Care to improve the process for accurate reporting, quality and obtaining outcomes.
- 159 Safeguarding training and supervision within the team has very high compliance levels. A Level 3 Safeguarding Children training package on Honour Based Abuse has been developed and delivered to staff and has evaluated positively. Safeguarding Supervision is provided to staff within quarterly peer groups and on one-to-one basis for individual cases by the SNCP.
- 160 HDFT has robust learning and best practice workstreams and subgroups which facilitate wider learning and reviews of 0-19/25 practice guidance in response to learning from incidents, complaints, CSPRs, Learning Reviews, Child Death Reviews and DHRs.
- 161 The safeguarding team continue to share information and provide research for MARAC, MAPPA, CEVT, Channel, Sexual Harm meetings and Risk Management meetings. This is in addition to being involved in mapping and disruption planning for Organised Crime Gangs in County Durham.
- 162 The SNCPs support the 0-25 FHS with court reports and court and police statements, and redacted and unredacted health records following subject access and legal requests.
- 163 Domestic Abuse Triage has continued to require a significant staff resource within the MASH due to increasing numbers of referrals, and time to complete the risk assessment. This has been reviewed within the Safeguarding Partnership and measures have been implemented to enable more efficient processes.

Key Challenges and Opportunities

- 164 Data collection and outcomes remain a challenge, monthly record audits and validations evidence that there is under reporting of some activities due to some complexities of record keeping on SystemOne. Understandably staff prioritise clinical contact time and audit of record narratives are reassuring, however data collection is from read coded templates, which are not always fully completed or activity type saved correctly.

- 165 Performance supervision and ongoing training is in place to support good template and activity reporting.
- 166 Increasing breastfeeding rates and reducing smoking rates are a challenge not only for the 0-25 service, but the wider system, therefore progressing this work consistently as an integrated system, utilising insights work, is a key area of challenge and opportunity.
- 167 UNICEF Baby Friendly Initiative (BFI) has recently updated its guidance to the Baby Friendly Initiative Standards and Achieving Sustainability Standards and in addition to this, has developed a joint award for community services where the standards apply to Health Visiting and Early Years Services when working together. This requires further consideration for forward planning for accreditation in County Durham.
- 168 Potential challenge of externally funded/grant funded posts beyond April 2025, specifically the additional Youth Justice Nurse post, and the Family Hub funded posts including the Perinatal and Infant Mental Health Team. Further clarification from central government is anticipated autumn 2024.
- 169 The service review and learning from the workforce challenges since 2020, incorporating calculated skill mix and updated staffing establishments fully tailored to the service model, provides the opportunity to create a more stable 0-25 workforce for Healthy Child Programme delivery.

Future Plans

- 170 The Transformation Manager role is a permanent post in the future 0-25 Family Health Service workforce model.
- 171 The Transformation Manager workplan will incorporate driving the service activity increase breastfeeding rates and reduce smoking rates.
- 172 Plan for joint Unicef Accreditation to further align the systems work to increase breastfeeding rates.
- 173 Evaluate the impact of SCPHN Apprenticeships, to further develop the "Grow Your Own" strategy and succession planning, and increase apprenticeship opportunities within the 0-25 Family Health Service.

Background papers

- None

Other useful documents

- None

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Appendix 1: Implications

Legal Implications

Under the terms of the Health and Social Care Act 2012 local authorities hold the commissioning responsibility for 0-19 Public Health services, including the mandated Health Visitor contacts.

Finance

None.

Consultation

A stakeholder consultation exercise was undertaken as part of the review of the previous County Durham Health Visiting and School Nursing Service to shape the new service specification. Ongoing service user consultation and feedback is embedded into the contract monitoring requirements.

Equality and Diversity / Public Sector Equality Duty

An Equality Impact Assessment was undertaken for the new 0-25 Family Health Service.

Climate Change

Not applicable.

Human Rights

Not applicable.

Crime and Disorder

Not applicable.

Staffing

The provider is responsible for staffing requirements to deliver the service.

Accommodation

Not applicable.

Risk

All risks are monitored by DCC commissioning and mitigating actions considered.

Procurement

No current procurement requirements.