# **WIN HOT TOPIC**



# DELIVERING THE HEALTH VISITOR IMPLEMENTATION PLAN 2011-15: **A CALL TO ACTION**

### DELIVERING A CALL TO ACTION IN THE NORTH WEST

Twelve months have passed since the Health Visitor Implementation Plan 2011 – 15 "A Call to Action", was launched by the Department of Health. Since then, organisations in the North West have experienced significant changes to the way they work, seeing Health Visiting services transferring, PCT clusters forming and addressing population and workforce issues, all whilst maintaining the day job.

# So what has been happening in those twelve months?

Regionally, the decision was taken to replicate the national architecture to support the programme and as a result, the North West have three active work stream groups with representation including colleagues in service, education and the unions; all work streams report directly to the North West Delivering the Commitment Partnership Board.

#### Work streams are:

Growing the Workforce – this work stream focuses on planning and delivering the required workforce growth, taking into account the educational implications of the programme, return to practice, career opportunities and retention. To date the work stream has confirmed the baseline number of health visitors, considered demographic and geographical factors to best reflect local need; and considered a variety of Clinical Practice Teacher (CPT) models, identifying ways to encourage individuals with current health visitor registration (who are no longer working in the field) to access supervised practice and to develop their confidence in delivering the call to action. In growing the future workforce it is important that provider organisations are supported in identifying the risks and opportunities generated by Transferring Community Services (TCS), thus supporting them to mobilise their workforce in the ways identified by the Professional Mobilisation group. Prospect Consultancy were commissioned to undertake a diagnostic exercise across three new health visiting providers to identify how this support is best targeted and delivered.

Aligning Service Delivery – this group was tasked with developing a North West core service specification to support the new model of health visiting regionally. This work was completed through a consultation process and in collaboration with service representatives; and is now in use across the region. The specification was developed as a minimum baseline in supporting delivery of the Healthy Child Programme (HCP) with the clear message that this could be added to, reflecting local need.

The work stream has also developed and commissioned the Life Chances Early Years Discussion Kit. Developed by Our Life and NHS NW, with assistance from Cumbria Partnership NHS Trust, CHAMPS and Liverpool Community Health NHS Trust and the families they support; it is built on everyone having a part to play in improving the life chances of our young children.

The discussion kit has been designed to get people thinking more about what we need to do to get the best future for the children in our community. It can be used in groups of up to ten people or as few as three. It should take between 1-1  $\frac{1}{2}$  hours to use and is for anyone interested in helping to make sure we give the children in our community the future we desire. The discussion kit can be used by a parent or carer interested in thinking about what needs to happen in their own community or neighbourhood. It can be used by anyone in the neighbourhood who wants the best for local children and wants to think through what you could do to make things better. It can also be used by workers wanting to work with community members to develop a plan.

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Professional Mobilisation - this focuses on engaging with the existing workforce to raise and promote the profession from within. In order to start this process, the group undertook a stakeholder analysis exercise establishing any existing relevant networks. This work is constantly under review to ensure that it is as inclusive and current as possible. As part of the engagement of the existing workforce, a regional event took place in January where health visitors came together to contribute to the development of plans to support the programme, including agreeing a strap line, and contributing to promotional films and future planning with thoughts and ideas. Ongoing support is being provided at both local PCT cluster and organisational levels. Plans are also being drawn up with regard to the development of a leadership programme, which is to be aimed at the current health visitor workforce.

## EARLY IMPLEMENTATION SITES(EIS)

The Department of Health asked for expressions of interest from organisations across the country to become an Early Implementation Site (EIS). In the North West, Blackpool PCT, now part of Blackpool, Fylde and Wyre NHS Foundation Trust and Wirral Community NHS Trust were selected for wave one. Pennine Care NHS Foundation Trust (Oldham), Bridgewater Community NHS Trust (Ashton, Leigh and Wigan, Trafford and Warrington Divisions) and Liverpool Community Health NHS Trust have all recently applied and been successful in becoming part of wave 2. In order to share the learning and experiences of the EIS's, we have held learning network events (four to date) at various locations across the North West. These events, each with a specific focus (EIS, Practice Teacher Capacity, Professional Mobilisation, Building Community Capacity), have been aimed at bringing organisations together to share best practice and learn from the experiences of others.

### NORTH WEST PROJECTS

At various points during the last year, the Department of Health requested expressions of interest from across the country, in relation to some specific project work. In the North West, four projects were commissioned; a gap analysis, communities of practice (networks), building community capacity and listening to the voice of the child, family and their health visitor.

- Gap analysis was an exercise which sought to assess each organisation in terms of progress in implementing "A Call to Action: Health Visitor Implementation Plan 2011-2015". Clarity & Partnership Ltd. were commissioned to undertake this work across the North of England (NHS North West, NHS North East and NHS Yorkshire & the Humber), pulling together the outputs from self-assessment questionnaires completed by commissioners and providers of services. The questionnaire was developed focusing on four key areas; commissioning and contract monitoring, communications and user involvement, workforce development and outcomes and risk assessment. The outcomes from this work will soon be made available to PCT Clusters, commissioners and providers.
- **Communities of practice (networks)** are to be developed in all SHAs across the country. In the North of England, the existing sharing and learning networks provide the basis for the Communities of Practice. A review of the existing arrangements confirmed that across the North of England, strong clinical arrangements are in place to support the implementation plan. Many of these networks have been developed with health visitors and provider organisations. However, it has highlighted that the networks across the three SHA's have been established in isolation and that there are greater opportunities to learn and share good practice across the wider footprint. Moving forward, plans are to be developed to ensure that any gaps in network provision are addressed and best practice can be more easily shared across NHS North of England.

**Building community capacity** The Call to Action on Health Visiting has driven a refreshed vision on Health Visiting and the role of the Health Visitor. Although the majority of 2011-12 programme focus has been on developing the common narrative and baseline to workforce growth, NHS North West has been very clear that the ultimate vision was to improve the life chances of the children and families in the communities we serve and to this end the ability to Build Community Capacity is a core part of the North West programme.

Building Community Capacity can take many forms from 1-1 engagement to working with a large number of individuals within a community. The approach to developing community engagement skills, encouraged by the Department of Health, sees Health Visitors through action learning sets/study buddies who undertake a specific project supported by a work based advisor. Whilst these work based 'projects' may take any particular form it is likely that all Building Community Capacity projects will be focused on drawing out and strengthening the skills and knowledge of people to influence the health and wellbeing needs of themselves and others.

NHS North West for 2012-13 therefore will not only be supporting the access to the national building community capacity programme, which can be found here, but also through the provision of resources to procure locally-shaped, non-accredited learning and a work place advisor network.

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### • Listening to the voice of the child, family and their health visitor –

this is a project which has been led by *Inspiration Northwest* (the Service Experience Directorate of NHS NW). The project was commissioned by the DH in November 2011, and completed in March this year. The project involved taking three new, innovative approaches to obtaining the voice of children, families and health visitors. These approaches had 'proof of concept' testing in four trusts in the North West:

- Bridgewater Community NHS Trust
- Pennine Care NHS Foundation Trust
- Lancashire Care NHS Foundation Trust
- East Cheshire NHS Trust

In addition to 'capturing voices' from children, families and health visitors, the project looked for ways to make sure that feedback was not only captured, but used in real time to improve the quality of the health visiting services, demonstrating that the voice had not only been heard but also listened to.

> NHS North West

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#### THE APPROACHES USED WERE:

- SMS and web based feedback captured from families part of Community Services Bury (Part of Pennine Care NHS Foundation Trust) and Bridgewater Community Health NHS Trust (Download <u>'SMS and web based</u> <u>feedback'</u>, pdf file, 683KB)
- Care Cards specially designed to capture feedback from children being used in Children's Psychological Services, Lancashire Care NHS Foundation Trust and Bridgewater Community NHS Trust (Download <u>'Care Cards'</u>, ppt file, 1.17MB)
- Family Echo an innovative technique used to capture feedback from staff across Health Visiting Services used in Lancashire Care NHS Foundation Trust and East Cheshire NHS Trust (Download <u>'Family Echo'</u>, .ppt file, 2.25MB)

An evaluation process took place on each of these methods throughout March, with a celebration event taking place on 25th April, at which the learning and findings were shared. These findings will be made available soon on <u>NHS North West's</u> <u>Health visiting website.</u>

**Case Studies** – Each SHA area was asked by the Department of Health (DH) to produce 8-10 case studies to support the national programme (and for potential inclusion in a national document highlighting the delivery of the Call to Action) by March 2012. A total of 36 case studies were submitted from



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#### Benefits of the programme

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organisations across the NW with a number of additional case studies still in the pipeline! This was a tremendous showing from services from across the region and thanks are due to all that submitted. The content of these will be made available for sharing widely soon.

Health Visitor Monthly – was launched in February. This is an electronic, subscription based newsletter providing information from a regional level, national links and more localised updates on innovative working, giving organisations the opportunity to highlight what has worked well for them. Within the newsletter there is also the opportunity to give recognition to those who are thought by peers to be an inspiration, in the Health Visiting Hero slot. To see the most recent copy <u>click here</u>.

Health Visiting Week – this ran in the North West from March 5th – 9th and saw Department of Health representatives teaming up with both Unite and the Royal College of Nursing in two separate events during the week. In addition, promotional films were made available throughout the week via the SHA website, eWIN and YouTube. A series of events were also undertaken with local organisations in support of professional mobilisation and recruitment.

#### CONTACT FOR FURTHER INFORMATION • NHS NW Health Visiting Team

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