



PIONEERING APPROACH & CONSISTENT PRACTICE

Transformation, design and implementation of the Blackpool Enhanced Health Visiting Pathway

The Blackpool Enhanced Health Visiting Pathway (EHVP) is a universal prevention, health promotion and early intervention programme for all children with eight universal contacts from 28 weeks of pregnancy to 3-3 ½ years.

A key priority for the Blackpool Better Start Partnership was to undertake a transformational redesign of the universal Health Visiting Service this included:

- Reviewing existing visits and including three additional universal contacts.
- Upskilling practitioners in key areas of speech language and communication, parent-infant relationships, mental health, and trauma-informed care.
- Developing a new manualised model of delivery with a stepped approach to early intervention.

The co-design process with practitioners and parents took place between 2016 and 2018. From April 2018 onwards, families were offered the enhanced provision, which was deliverable within the existing funding envelope.

Understanding the Challenge

In 2015 there was a substantial change to the governments commissioning model for Health Visiting in England moving from National Health Service (NHS) England to Public Health England (PHE). The National Lottery Community Fund funding for Blackpool Better Start in the same year provided a unique opportunity for the partnership to review the existing offer and enhance the pathway to meet the needs of Blackpool Families.

Blackpool Health Visiting service has always worked in an environment of high population need, especially in the critical areas of safeguarding, school readiness, speech, language and communication, mental health and parent-infant relationships. Many Blackpool families have experienced adverse childhood experiences, poor mental health and significant intergenerational trauma and needed a Health Visiting Service which was equipped to support with these challenges during the early years of parenthood.

The pathway was developed to capitalise on parental trust and the high levels of engagement from parents with their health visitors to maximise the benefits for families, to ensure that “every Blackpool child is thriving, healthy and ready to learn when they transfer to school.”

Key concerns of the transformation were ensuring buy in from all stakeholders and true partnership working across early years, health, education and social care services and the ability to sustain enhancements within the funding allocated from Public Health England.

What we did

Development began in 2016 with a review of local need and of parental perceptions of current service. A survey of Blackpool families found high levels of appreciation for and trust in their Health Visitors and the wider service, with parents suggesting they would like more contact points.

Reviews were also conducted of other enhanced health visiting models across the UK, including the model of increased contacts in Scotland and Wales which informed the local development.

The Partnership worked together to develop a new logic model with intended outcomes and suggested a more collaborative working model with agenda matching tools, which would give parents a voice for their needs and concerns within each contact. The skill mix of the health visiting offer was also explored, with consideration given to the role of Health Visitors, Staff Nurses and Community Nursery Nurses within the service to ensure all families universally receive good health promotion which addresses individual, family and community needs.

A practice manual to be used by all staff, aligning best and consistent practice across the town was developed in conjunction with the service, with the new service being implemented from 2018.

Key Enhancements

1. The number of Universal contacts increased from 5 to 8 including an integrated development review at 3-3.5 years as school readiness is a key area of concern in Blackpool. All babies born from April 2018 received at least the 8 universal visits with other children receiving any additional contacts appropriate to their age group.
2. All staff are trained in a range of evidence-based child development assessments in addition to mandated Ages & Stages Questionnaires®, Third Edition (ASQ-3®)¹. These include a measure of Speech, Language and Communication, and the Newborn Behavior Observation (Brazelton). These support early identification of and support for children's developmental needs.
3. Additional training in Adverse Childhood Experiences (ACES) questionnaire and Perinatal and Infant Mental Health. A smaller cohort of Health Visitors trained as Institute of Health Visiting Perinatal and Infant Mental Health champions, and some were trained in Neonatal Behavioural Assessment Scale (NBAS), Behavioural Activation for postnatal depression, and Video Interaction Guidance (VIG).
4. All Health Visitors were trained to co-facilitate the evidence-based, universal perinatal education group programme Baby Steps.
5. The development of improved data monitoring and reporting processes through the data warehouse which provides monitoring of population level data across key metrics such as infant feeding, parental health behaviours, and child development.

Transformation of any service is an iterative process and there are inevitable changes to the policy and funding landscape which impact on delivery. One intention of the transformation was to address the high numbers of additional visits the Health Visitors undertook, by providing more contacts to all families supporting the earlier identification of need.

Although the number of children under 5 in Blackpool has remained stable there have been observed increased need in areas such as child development, family support and school readiness. This reduction in additional visits therefore has not been observed, however there are now clear and accessible pathways to other services supporting earlier support for speech language and communication, child development, early help and school readiness. The impact of this being seen in population level positive changes in child health and development outcomes.

¹ Squires, J., & Bricker, D. (2009). *Ages & Stages Questionnaires®, Third Edition (ASQ-3®)*. Paul H. Brookes Publishing Co.



I think the extra visits are a good thing, because as you see someone more, you trust them more. My family isn't here, so having someone to talk to and having someone to help is really reassuring especially with my first baby.

Parent

My experience of delivering the enhanced health visiting model has meant that I am in a unique position to build relationships with families. The model enables us to offer early intervention.

Professional

Outcomes

Enhanced Service

Blackpool is the first town in England to offer eight universal contacts for all pregnant women, babies, and young children through its Enhanced Health Visiting Pathway.

High Engagement

Since 2018 this has been delivered to 30,000 children aged 0-3 and to 7,600 pregnant women.