

# Using iHV resources to develop and strengthen your practice

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## What is the iHV?

The Institute of Health Visiting is a UK wide charity and academic body

Its core purpose is:

To improve outcomes for children and families and reduce health inequalities through strengthened health visiting services

But also

To put HOPE back into the profession, giving it ownership for its own destiny



# How did it all begin?



## 3 Co-founders at our launch





## iHV's Vision for Health Visiting

# A confident and respected profession:

- Conspicuous in delivering public health outcomes for children, families and communities
- With measurable outcomes, in terms of value as well as outputs
- The voice of public health in communities
- Trusted professional by parents (e.g. depressed mothers confident in seeking help from HV)
- With sufficient numbers to deliver good services at all levels



## How does the iHV work?

## Through:

- Strengthening professional leadership
- Ensuring high quality and consistent education and training
- Developing new national quality assurance processes
- Creating a new strengthened research base
- Partnership with many organisations





## **Characteristics of the iHV**

- We are independent of all governments
- Our charitable focus is primarily on improving health outcomes for children and families and reducing health inequalities by strengthening health visiting services
- We take health visitor leadership very seriously already supporting the development of well over 1000 champions and fellows in the profession in England. We are now supporting manager's development as leaders
- We don't work with the commercial sector and will never work with those companies producing milk and other nutritional products
- Our nearest equivalent is a medical royal college
- We have no 'silver spoon' from government or elsewhere we must income generate to survive.
- What the iHV has achieved has been achieved through the passion and commitment of health visitors alone



A snap shot of our activities and resources



## **Revalidation resources**

### iHV publications:

- Professional Briefing Getting Ready for Revalidation (August 2015)
- Route to Revalidation handbook (October 2015, 2<sup>nd</sup> Ed due - August, 2017)
- Lifelong Learning in Health Visiting 3 step guide to personalising your CPD
- National Standards Frameworks for CPD for Health Visitors

## NMC Revalidation publications

Provisional guidance and templates available at:

www.nmc-uk.org

All available at: www.ihv.org.uk



## **UK Voluntary National Curriculum**

- Is the current HV curriculum fit for purpose?
- Did you know that it varies from university to university?
- What should be prioritized for HV education?
- Is the theory/practice balance delivering the skills HVs need?

These are the questions being answered by a UK wide group of educationists and policy makers.

The draft consultation will be completed October 2017



## Peri and Infant Mental Health

- Extensive range of resources
- Extensive training programmes

   HV and multi-professional including new fathers focused training
- Creation of champions/local leaders/specialists in England (Scotland next?)
- Regional forums for perinatal and infant mental health champions – so far we only have funding for England, but would love to have a Scottish one



# Good Practice Points for health visitors & Parent Tips for families

#### Over 150 Good Practice Points & Parent Tips –

#### For example:

- ASQs
- Engaging with Fathers
- Gender dysphoria amongst children and adolescents
- FGM
- Working with domestic slavery
- Managing Reflux
- Umbilical granuloma
- Working with prisoner's families
- Working with Sikh women
- Promoting healthy attachment
- Series on breastfeeding
- Series on safety







## **Professional briefings**

#### Relevant to Scotland:

- 'Getting ready for revalidation'
- 'Serious Case Reviews: messages for health visiting practice'
- 'Information sharing in safeguarding'
- 'Record keeping'
- 'Writing a CV'
- 'Skill Mix'





## **Frameworks**

- National Induction Framework
- National Preceptor Framework
- National Framework for CPD –
   11 topics
- Lifelong Learning in Health Visiting- 3 step guide for CPD to support revalidation
- Resilience framework for employers
- Resilience framework for practitioners
- Career Framework



**Author:** Elaine McInnes with Anne Page, Mary Marsh August 2014



## **Career Framework**

- Combining experience and education:
  - Positive role models signpost potential career roadmaps
  - Diverse possibilities reflect diversity of health visitors
  - Fostering health visiting's next leaders, researchers and pace setters
- Expected medium to longer term outcomes:
  - Motivated workforce
  - Focus on personal development
  - Growth of expertise in the profession





## **Examples of recent publications**

- The Economics of Health Visiting
- Outcomes and Evaluation in Health Visiting: a practical guide
- Good Practice Points on working with forced marriage
- Guidance on working with domestic slavery
- Good practice points on working with trauma

## Working with minority groups: Spotting the signs of an individual in Domestic Slavery (DS)

These Good Practice Points support health visitors working with families and individuals who may be involved with Domestic Slavery (DS). DS is a safeguarding issue and one aspect of human trafficking, therefore appropriate action should be taken.

#### What is Modern Slavery and Domestic Slavery (DS)?

Modern Slavery is an umbrella term for activities that involve one person keeping another person in compelled service (Home Office (2016)).

#### Someone is in slavery if they are:

- Forced to work through mental or physical threat.
- Owned or controlled by an 'employer', usually through mental or physical abuse or the threat of abuse.
- Dehumanised, treated as a commodity or bought and sold as 'property'.
- Physically constrained or have restrictions placed on his/her freedom.

Domestic Slavery refers to the practice of exploiting and exercising undue control over another to coerce them into performing services of a domestic nature in unacceptable conditions (Home Office (2016)).

#### Why DS matters

There are thought to be 10,000-13,000 slaves in the UK today. Evidence shows Nigeria to be the country of origin with the highest number of referrals relating to DS in the UK Nacional Referral Mechanism (NRM) (2017) statistics. DS and all forms of modern slavery are lilegal in the UK under the Modern Slavery Act, which makes it a criminal offence to restrict the freedom of another person and require that person to perform forced or compulsory labour (Modern Slavery Act (2015)).

The Universal Declaration of Human Rights 1948 (p.10. Article 4) states that:

"No one shall be held in slavery or servitude; slavery and the slave trade shall be prohibited in all their forms."

The scale of modern slavery is significant and the impact on the lives of the victims is considerable. Therefore, the UK government is committed to putting a stop to these helicous crimes.

#### How it happens

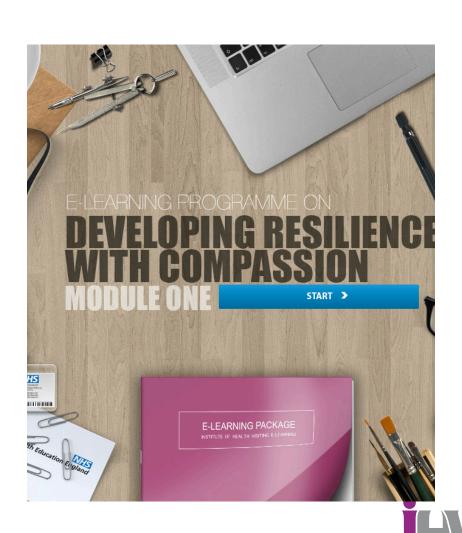
Victims of D5 typically live and work within their employers' household, performing tasks that could include cooking, cleaning and child-care. They may work 10 to 16 hours a day and are often on call outside of that time for little or no pay, in poor conditions and with no, or limited, freedom. https://livmantraffickinghodine.org/mission

In many cultures, it is considered the norm to have a house help' and, unlike trafficking for sexual exploitation for example, forced labour can be unrecognised and accepted (Awareness Against Human Trafficking (HAART) (2015). The practice is often linked to child fostering and the promise of a 'better life in the UK. However, while for some this can be a positive reality, for many their employment is set up with no regard to UK law or basic human rights. Evidence suggests the way some house helps are treated is unacceptable.



## Resilience tools to support staff

- Briefing compassionate resilience
- 10 points for compassionate resilience
- Published literature review on resilience
- Organisational framework
- Practitioner framework
- Good practice points compassionate resilience
- Training face to face and elearning – open access



## **Education and Training**

#### Popular bespoke training with the iHV includes:

- Perinatal Mental Health
- Fathers and perinatal mental health
- Infant Mental Health
- Safeguarding
- Child Safety
- Healthy Weight, Healthy Nutrition
- Sleep Training
- Building a resilient workforce
- Domestic Violence
- Building Community Capacity
- Leadership

On-line webinars, e-learning, films Conferences – see www.ihv.org.uk





## Accreditation

- Significant iHV training materials are all nationally accredited with the Professional Standards Office
- iHV itself accredits other's training and events
- Also health visitor developments. This means putting them through a robust quality assurance process giving them added value and improving professional standards. Accredited products are trusted products.

Do consider putting your developments forward we would love to have some Scottish ones.



## **Films**

- Perinatal Mental Health
- Nutrition
- Child Safety
- Relational Work
- 2 ½ review
- Parents stories
- Successful influencing
- Needs assessment Prof Dame Sarah Cowley
- Student film



## How the iHV supports student health visitors

Listen to student health visitors talk about their membership of the iHV and what it means to them. With thanks to students (Jade Batten, Nicola...

## **iHV** online Forums for Members

#### Professional discussion forums for members:

- 1. Student
- 2. Universal health visiting
- 3. Research

#### These are:

- Online discussion boards people can ask questions, share experiences, and discuss topics with colleagues across the UK
- Private conversations for members of the iHV only
- Forums create social connections and a sense of community, and cultivate subject specific interest groups

**Also:** an **e-Community of Practice** open to all health visitors for sharing best practice – https://ihv.org.uk/for-health-visitors/e-community-of-practice/



## Research department

Research lead Dr Esther Mugweni supported by Samantha Goodliffe

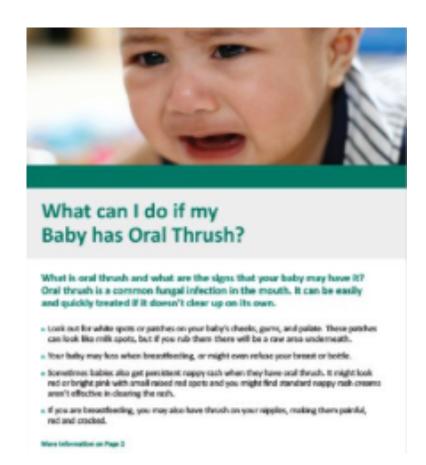
## The department:

- Conducts research and evaluation
- Develops and delivers our research strategy
- Organises research master classes
- Create opportunities to network with others interested in research through national forums
- Helps develop an infrastructure for health visitors to have research careers

## Working with families

The Institute tries to engage families in their work e.g.:

- Mums being interviewed in films
- Telling their story in perinatal mental health training
- In developing Parent Tips
- Running Ready Steady Mums
- Reviewing bids e.g. for planned film about fathers.





## **Ready Steady Mums**

- Getting out, socialising and taking even gentle exercise is good for physical, mental and social wellbeing and long-term health
- RSM programme achieves all this in a fun way
- iHV health visitors encourage local mums to lead a local group
- We provide the support via http://readysteadymums.org

We currently have 62 groups across England but none in Scotland, could yours be the first? Go to the website to find out how simple it is to get one set up.

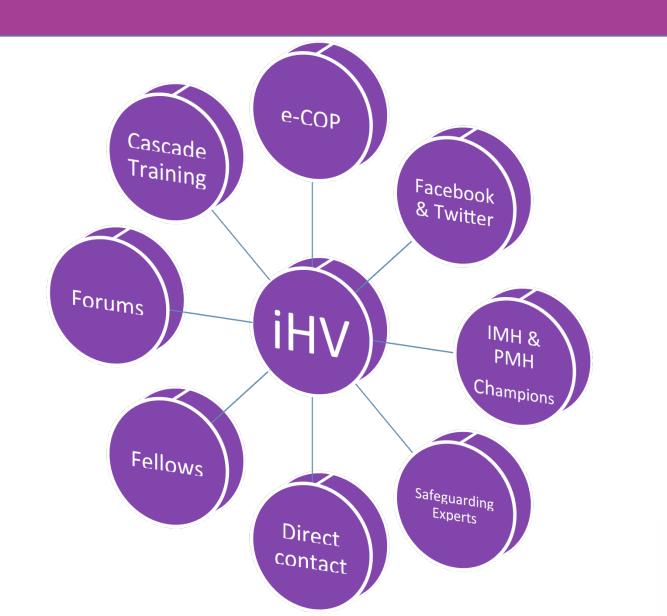




# Staying in touch with the iHV and its work!



## Multiple Points of Accessing the iHV





## **Communication Channels**

- Website (10k visits a month)
- Twitter over 6700 followers
- Facebook over 7000 followers (reaching over 120k a week)
- Voices interesting blogs
- Newsletters
- Forums









## International work

- International membership launched
- Supporting All Party Parliamentary Group for Global Health
- Advisors to UNICEF Geneva supporting the development of health visitor type service in 25 countries in Eastern Europe and Central Asia
- Founder member of the council of the Global Public Health Nursing Network next conference in Nairobi in Spring 2019 start saving we want you there!!

## Membership

None of this work can continue to happen without the support of our health visitor members

Please consider joining us today:

**Associate HV membership**: £6.50 a month (tax deductible)

**Student membership**: £3 a month (tax deductible)

The iHV has achieved a great deal for health visitors in England but we would like our resources to be better used in Scotland too.

Membership is the best way to connect with us and have access to all our resources and our monthly newsletters flagging up new developments in the profession

www.ihv.org.uk



## **Contact details**

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## Thank you





Now its your turn, what can we produce to help you in your work in Scotland, we understand your services and needs will be different?

