

# Workshop 4

## ‘Implementation of the pre-birth to pre-school universal pathway’

- Debbie Balshaw, Lead Nurse – Early Years, NHS Tayside
- Rosemary Robertson, Associate Nurse Director, South Ayrshire Health and Social Care Partnership
- Liz Kearney, Interim Associate Director of Nursing, NHS Lanarkshire

2030  
NURSING

A VISION FOR NURSING  
IN SCOTLAND



NHS  
Tayside



# Implementing the Universal Pathway Across NHS Tayside



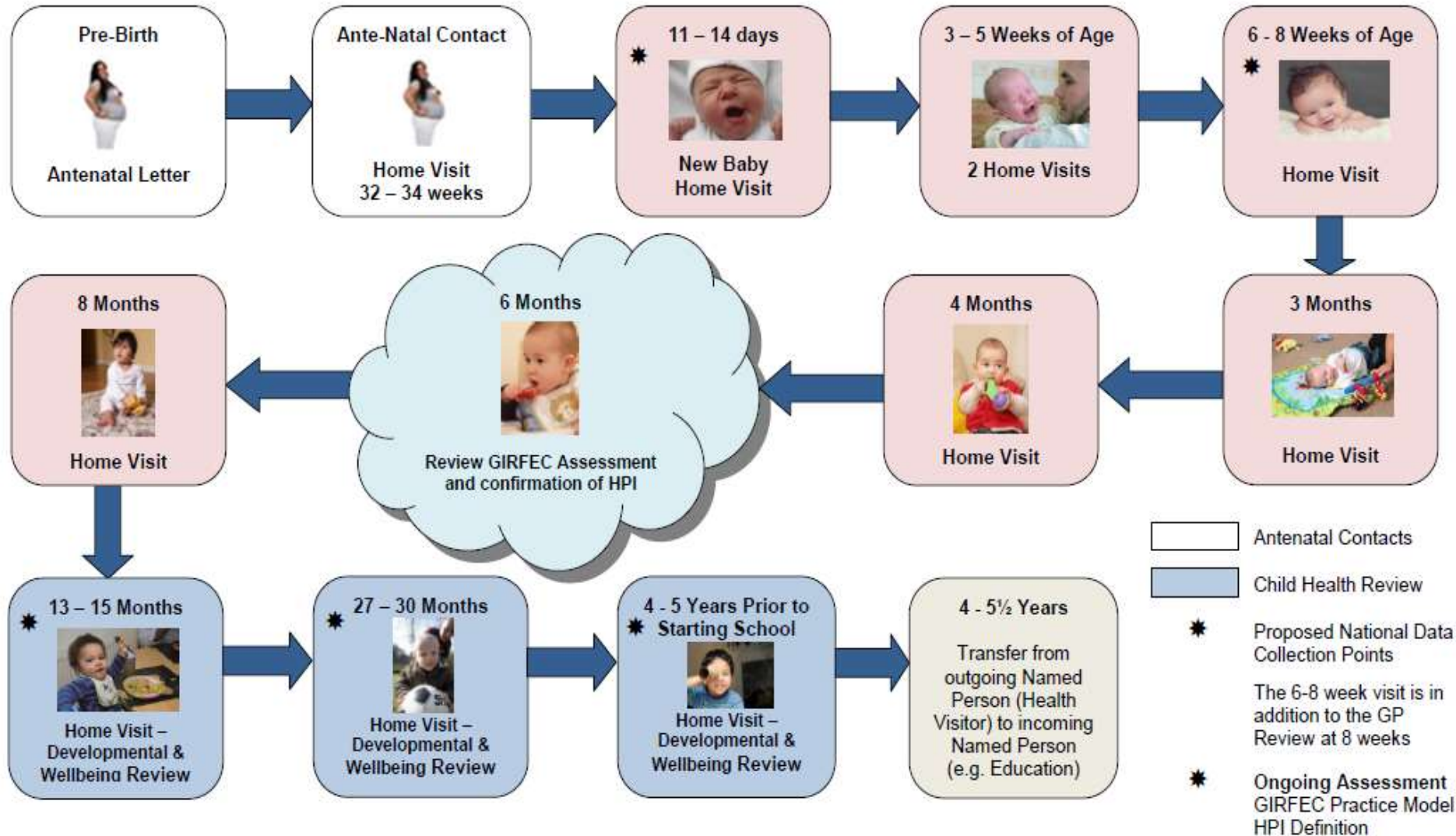
Tuesday 22nd August 2017

Debbie Balshaw  
Lead Nurse Early Years



# HEALTH VISITORS HOME VISITING PATHWAY

## PRE-BIRTH TO PRE-SCHOOL

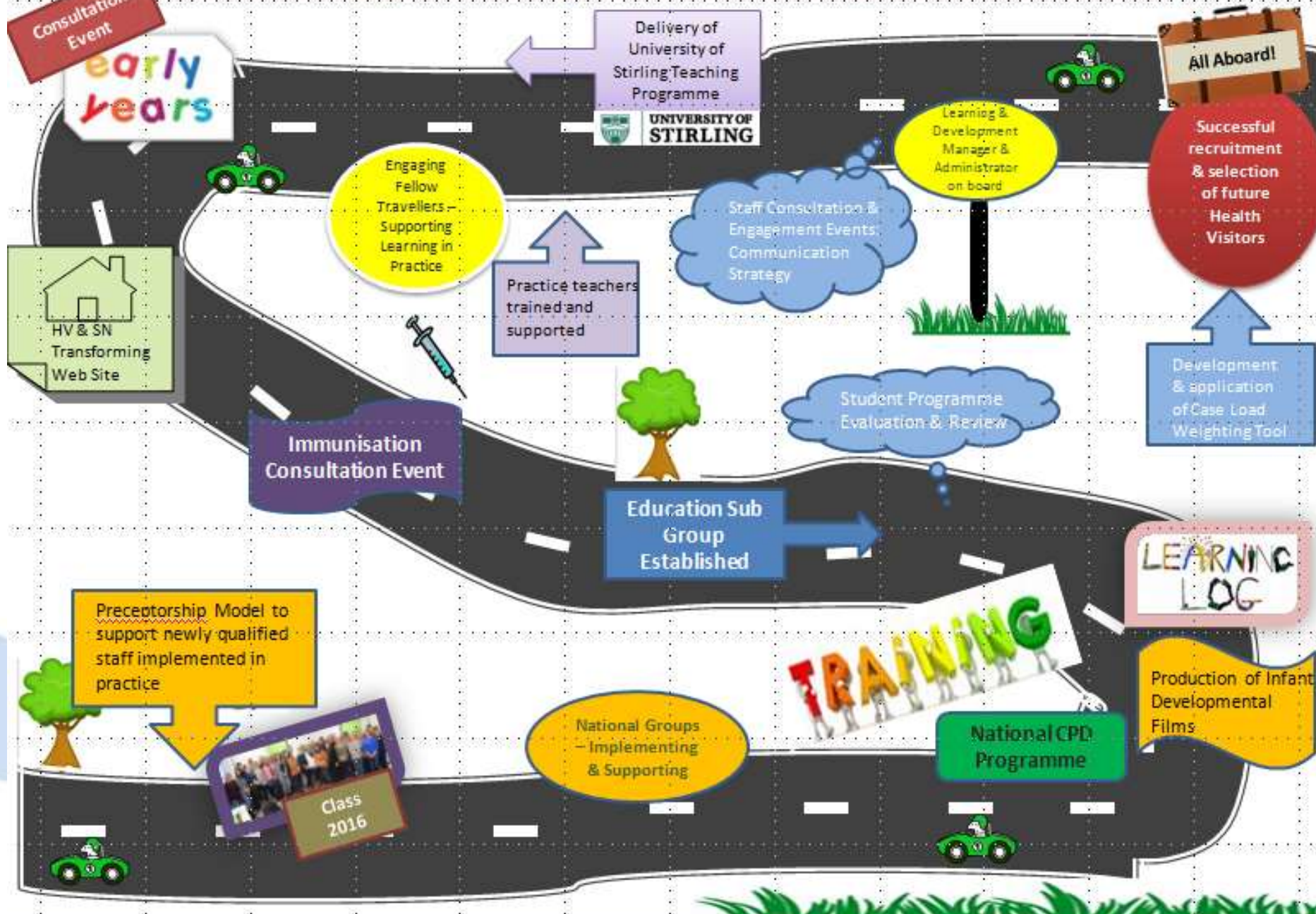


### Health Plan Indicator Definition

An additional HPI indicates that the child (and/or their carer) requires sustained (>3 months) additional input from professional services to help the child attain their health or development potential. Any services may be required such as additional HV support, parenting support, enhanced early learning and childcare, specialist medical input, etc.



# Transforming Health Visiting and School Nursing Journey 2015-2017



# Growing and Developing the new Workforce

Learning from Health Visitors



Class of 2015/16



Class of 2016/17

Trainee  
Health  
Visitors

In house  
CPD  
Programme



Commissioning  
Education  
Community  
Practice Teachers

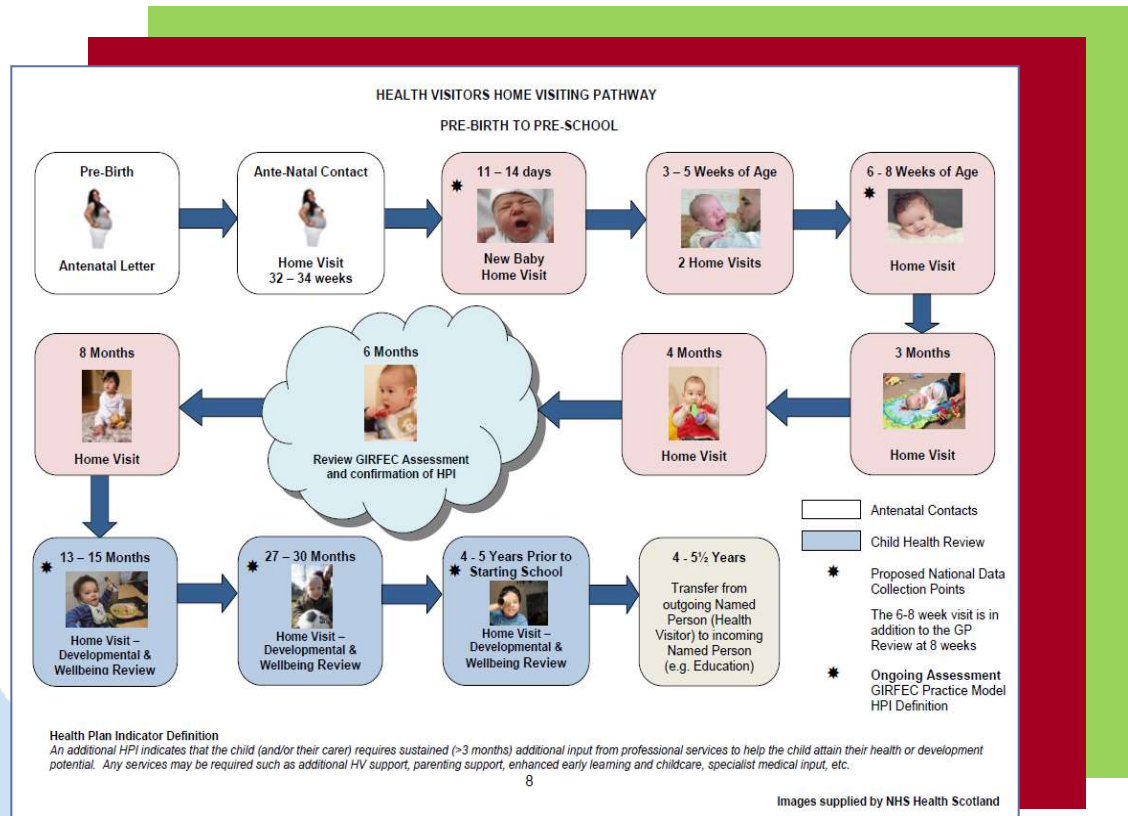
National CPD  
Programme

Leadership,  
Organisation,  
Funding

Learning  
Logs

# Current Position

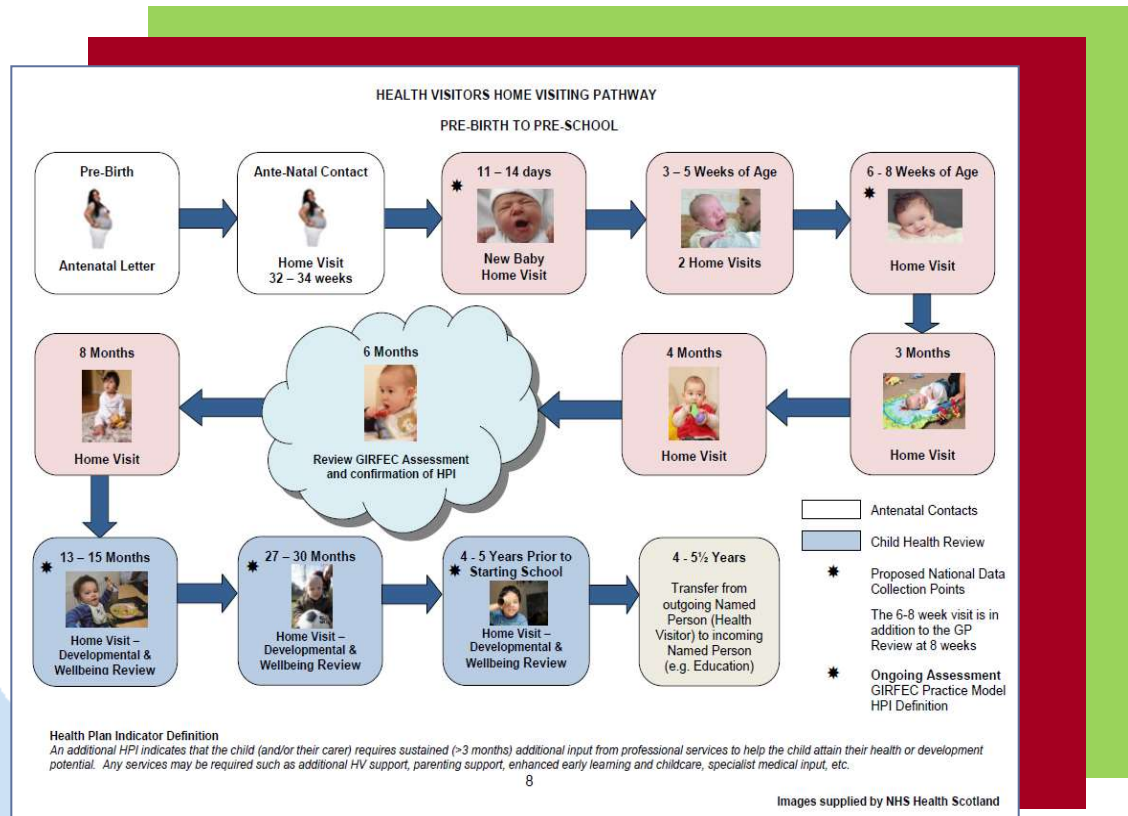
- Full Pathway implementation February 2018
- Commence 13-15 Month Review May 2017
- Commence 4-5 Year Review August 2017





# Current Position

- Full Pathway implementation February 2018
- Commence 13-15 Month Review May 2017
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# CHALLENGE

- Workforce Planning
- Geography – Rural / Travel
- Workforce Profile
  - Newly trained
  - Preceptorship
  - Supervision
- Change of Practice – Clinical vs Home
- Electronic Records – New IT System
- Partnership Working – 3 Local Authorities
- Establishing Immunisation Team
- Ante-Natal Visit
- Resources - Equipment





# Achievements / Lessons

- Maintain momentum and Communications
  - Work together, everyone well informed
  - Health Visiting Development Events
  - Practice Teachers Development Events
  - Support and Supervision
  - Preceptorship
  - Ongoing educational programmes /CPD
- Utilise all Resources – Early Years Workforce
- Integration / Partnership Working
- Improved Staff Morale
- Supportive Learning Environment for HV Students
- Positive Service User Feedback / Experience



# UNICEF UK

## Baby Friendly Initiative

### Reassessment

26<sup>th</sup> & 27<sup>th</sup> April 2017

- 100% of women interviewed reported that staff were kind & considerate at all times
- 97% of women very happy with care

“HV very supportive and got me through those early challenging days”

“Very, very happy with my HV, great service”

“My HV has been really good and supportive. I will miss her as she is not coming again until my baby is 8 months”

unicef 



The Baby Friendly Initiative

## Action Plan/Next Steps

- Workforce Planning – Re-apply Caseload Weighting Tool
- Performance Reporting / Scottish Government
  - Implementation of Pathway
  - Health Visiting Training Status and Sustainability Plans
  - GIRFEC Implementation







# Implementation of the pre-birth to pre-school universal pathway

Rosemary Robertson

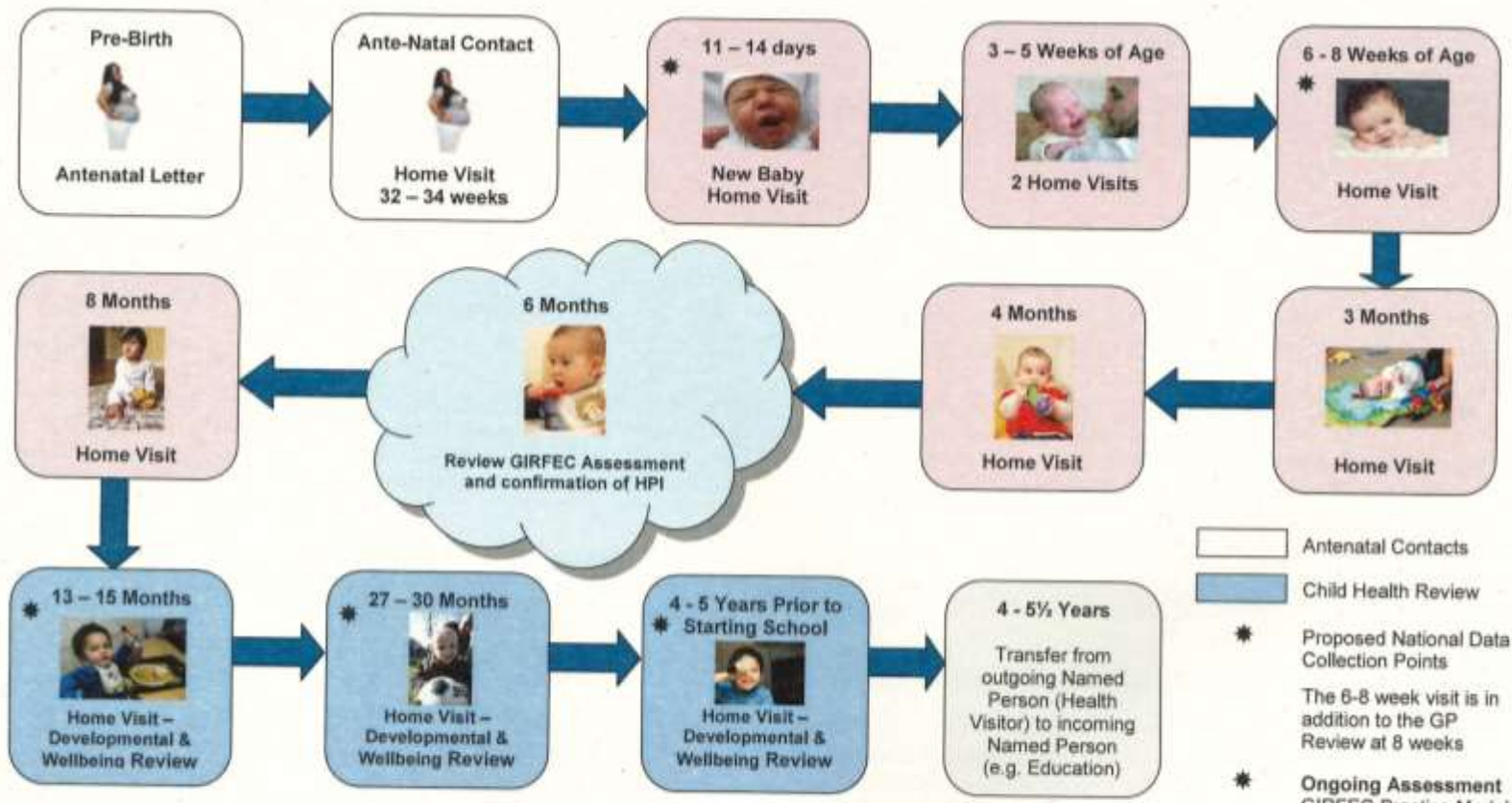
Associate Nurse Director

NHS Ayrshire and Arran

MSc, BSc (Hons), HV, RM, RGN

# Health Visitors Home Visiting Pathway

## Pre-birth to pre-school



### Health Plan Indicator Definition

An additional HPI indicates that the child (and/or their carer) requires sustained (>3 months) additional input from professional services to help the child attain their health or development potential. Any services may be required such as additional HV support, parenting support, enhanced early learning and childcare, specialist medical input, etc.

# Implementation of the pre-birth to pre-school universal pathway



- Where are we?
- Fully a home visiting service
- All antenatal to school age contact is delivered at home
- No clinics
- Established pre birth visit
- Pre school visit not established in all areas and an approach to develop this part of the pathway planned for August 2018

# Implementation of the pre-birth to pre-school universal pathway

## Challenges

- Delivering the Vision
- Workforce
- Declining HV numbers
- Retirement
- Financial Constraints
- Development of Partnerships
- Educational Component for HV at (Masters Level)



# Implementation of the pre-birth to pre-school universal pathway

## Lessons Learned

- Adopting the principles on a pan Ayrshire basis
- Staff Involvement
- Forming an overarching plan for the partnerships
- Flexible workforce
- CPD

# Implementation of the pre-birth to pre-school universal pathway



## Action Plan

- Staff Skill Mix, Imms, Review of work pattern , e.g. Adults
- No well baby clinics
- Education for staff – 4 CPD development sessions UWS
- Home Visiting
- Named Person
- Person Centred Approach
- Focus on Family
- Promote, Support, Safeguard, Relationship

# Implementation of the pre-birth to pre-school universal pathway



Deliver the pathway



Provide a service that supports families and children to reach their full potential



**Health & Social Care**  
North Lanarkshire

# safer healthier independent lives

LIZ KEARNEY, SENIOR NURSE  
HEALTH VISITING LEAD

22<sup>nd</sup> AUGUST 2017

IMPLEMENTATION OF THE UNIVERSAL  
PATHWAY IN NHS LANARKSHIRE



## WHERE WE ARE NOW

- Antenatal March 2019
- 11 - 14 days Full implementation
- 3 - 5 weeks Full implementation
- 6 - 8 weeks Full implementation
- 3 months Based on need
- 4 months Full implementation – predominantly completed by HVs
- 8 months March 2018
- 13 - 15 months Partial implementation, full by 1<sup>st</sup> October 2018. Mixed model clinic and home.
- 27 - 30 months Full implementation
- 4 - 5 years March 2018

## CHALLENGES & BARRIERS TO THE IMPLEMENTATION OF THE UNIVERSAL PATHWAY

- The rate of increase to Health Visiting establishments.
- NHS Lanarkshire required to undertake a service redesign to supplement the Scottish Government allocation of funding to deliver the pathway.
- Many of the student Health Visitors are looking for part-time posts which has impacted on the rate of increase to establishments.
- We have seen a reduced number of applications for the HV course over the past few years.

## LESSONS LEARNED ALONG THE WAY



### PIONEER SITE IN COATBRIDGE

92% of children who have had a 13 – 15 month review including anticipatory guidance are meeting their developmental milestones when they are reviewed at 27 – 30 months, exceeding the stretch aim of 85%.

## HOW DID WE DO IT?

### **Leadership**

Practitioners encouraged to lead: bottom up approach

### **Health Visitors**

Knowledge, expert skills in identifying areas to direct guidance and support (4 principles of Health Visiting)

### **EYC Funding and Support**

### **Improvement Methodology**

6 month rolling skills programme to support HI learning and implementation;  
Opportunities to share learning



## HOW DO WE KNOW THAT OUR RESULTS ARE CONSISTENT AND RELIABLE?

- This project has been funded by the Scottish Government via the Early Years Collaborative (now CYPIC) since July 2014, which is a driver for meeting original SG stretch aims.
- We have carried out all the work using the principles of Improvement Methodology, being supported by an Improvement Advisor.
- For each test of change there has been an associated PDSA cycle, and data collection (approximately 230 tests of change to date)
- Monthly reports have been provided and scrutinised as to the work and improvements with a commitment to further improvement
- All changes made have been made using evaluation feedback from parents, Health Visitors and admin staff.





**“If you think you  
are too small to  
make a difference,  
try sleeping with  
a mosquito”**

*His Holiness the 14<sup>th</sup> Dalai Lama*



