

BRIEFING	TO:	Health and Wellbeing Board
	DATE:	24 th September 2025
	LEAD OFFICER	Lorna Quinn, Public Health Intelligence Principal
	TITLE:	Evaluation of the 3-4-month health visiting check

Background

- 1.1

The purpose of this briefing is to present the initial findings from the implementation of an additional visit within the Healthy Child Programme (HCP).
- 1.2

The public health intelligence team were successful in an application to work with the National Institute for Health and Care Research (NIHR) Public Health Intervention Responsive Studies Teams (PHIRST) based at Nottingham University. The aim was to evaluate the impact of the 3–4-month health visit for child development benefits and the impact on the health care system.
- 1.3

Currently there are 5 health visits which occur for a child and parents, which are set out by the Healthy Child Programme: the antenatal health promoting review, new baby review, 6–8-week review, 1-year review and the 2-2.5 year review. These visits enable a child’s development to be tracked in several different ways including breastfeeding, child’s growth and weight, and immunisation status, along with the identification of any additional needs. However, engagement with our maternal health colleagues and families indicated that there may be too long of a gap between the 6-8 week visit and the 1-year visit, and that it may be of benefit for a 3-4 month visit as a better time to assess the mothers mental wellbeing, along with starting discussions around weaning, physical safety when the baby is mobile along with offering advice to parents between the long gap. This led to the implementation of a 3-4 month check in Rotherham funded by the Family Hubs programme (see figure, 1.4) The model below shows the universal visits in blue, and the additional 3–4-month contact displayed in green.
- 1.4

Universal, Health and wellbeing reviews and contacts for 0-5

Antenatal Health promoting review


New baby review

6 to 8 week review


NEW

1 year review


2/2.5 year review




Breastfeeding, safer sleep.
Smoke free pregnancy,
immunisation status,
maternal & partner mental health



Breastfeeding support,
safer sleep, transition to
parenthood, parent-child
interaction, smoke free
home




Breastfeeding support,
family mental health,
immunisation status, safer
sleep, communication and
interaction




3-4 month contact

Nutrition, weaning,
home safety, safer
sleep, physical
activity, family mental
health, speech,
language,
communication



Immunisation status,
nutrition, safer sleep,
oral health, accident
prevention, physical
activity, speech,
language,
communication



Immunisation status,
physical activity, nutrition,
oral health, accident
prevention, school
readiness, speech,
language, communication

1.5	<p>The evaluation comprises of two components:</p> <ul style="list-style-type: none"> • Qualitative analysis <ul style="list-style-type: none"> – Focus groups and individual interviews with staff and parents. • Quantitative analysis <ul style="list-style-type: none"> – Anonymised data for all babies born from 2021 with breastfeeding and ASQ status.
Key Findings	
2.2	<p>Qualitative data collection comprises of:</p> <ul style="list-style-type: none"> • 2 staff focus groups <ul style="list-style-type: none"> ◦ 1 x nursery nurses and 1 x commissioners • 2 x commissioner interviews • 15 parent interviews (at a mosque) • 2 parent focus group (at Bright Stars)
2.3	<p>General themes were:</p> <ul style="list-style-type: none"> • Visit is positively received and widely supported, especially for new mothers and those who are struggling • Generally positive about the 0-19 service – parents had a high opinion of service, 3-4 month visit supported this • Very positive about support services provided through family hub • Community groups, such as those delivered at a local mosque, provide an important way of delivering information and support
2.4	<p>Quantitative data shows that on average, just under 200 babies and their families received a 3-4 month visit each month. Before adjusting for potential confounders, 3-4 month visit rates are lower for older mothers, those who have already had a child, and those in IMD deciles 5 and 6.</p>
2.5	<p>Children eligible for the universal 3–4-month visit had 41% higher adjusted odds of having problem solving ASQ scores above the close monitoring cut-off zone at the 9-12 month visit when compared to those in the pre-intervention group.</p>
Key Actions and Relevant Timelines	
3.1	<p>The additional 3-4-month check is currently funded until 31st March 2026.</p>
3.2	<p>A detailed report will be published by November describing these findings further.</p>
3.3	<p>Schedule meetings with Public Health Senior Management Team and Family Hubs Operational Group to share the detailed report and to discuss the future commissioning options.</p>
Implications for Health Inequalities	
4.1	<p>The evaluation process included collecting data, conducting focus groups, and analysing findings, with residents with a range of characteristics such as deprivation, age of mother, and ethnicity.</p>

Recommendations	
5.1	To note the findings from the evaluation of the 3-4-month health visit.