

ROTHERHAM BOROUGH COUNCIL – REPORT TO CABINET MEMBER

1.	Meeting	Cabinet Member for Adult Social Care and Health
2.	Date	17 November 2014
3.	Title	Health Visiting and Family Nurse Partnership Development Funds – Section 7a Public Health Services – Proposals for Rotherham Services
4.	Directorate	Public Health

5. Summary

This paper proposes a programme of recurrently funded opportunities for Rotherham to increase the coverage of the Family Nurse Programme and support activity to promote maternal and children’s public health by the Health Visiting Service (NB: This is additional to the current HV/FNP national expansion).

6. Recommendations

- 1. That the recommended initiatives are supported as priorities for development.**
- 2. That the funding proposals are accepted and planning to implement activity is started in partnership with NHS England and The Rotherham Foundation Trust with immediate effect/as per schedule.**
- 3. That the implementation of these initiatives is led by the PH team in partnership with NHS England (South Yorkshire & Bassetlaw) as part of the transformation of HV and FNP services.**
- 4. In deciding to go ahead with this expansion it is essential to ensure there is long term commitment to these services, FNP expansion specifically requires written confirmation that the Local Authority will continue to run the programme and sustain the number of places for a minimum of 3 years post transition. Written confirmation to this effect will be required as part of firming up any expansion proposals**

7. Proposals and detail

NHS England (South Yorkshire & Bassetlaw) have identified some development money, available to address inequalities across the NHS England area. For Rotherham, the proposal is to use this money as detailed below:

7.1 Family Nurse Partnership Coverage:

Increase the capacity of the Family Nurse Partnership team to match that of the area where there is the best capacity and coverage – this would increase capacity so that 24% of first time, teenage pregnant women receive support from the FNP programme. Currently only 21.8% receive support.

7.2 Improve breastfeeding rates in Rotherham:

Baby Friendly Initiative

The HV specification requires services to “achieve and maintain full accreditation of UNICEF Baby Friendly initiative”. This is the evidence based approach to increasing breastfeeding rates. All HV services in SY&B have achieved full Baby Friendly accreditation with the exception of Rotherham. To achieve Baby Friendly status, an Infant Feeding Co-ordinator is required to facilitate the process, plus significant training and other resources such as promotional materials and BFI assessment costs etc. TRFT (the provider) recognise that this work needs to take place, but the existing resource and capacity will create pressure in delivery of the full Child Health Programme and resulting public health outcomes. NHS England is offering a 50% contribution to this development and are seeking a commitment from TRFT to the remaining funding (this could be matched by the HV expansion funding already identified for TRFT). This proposal has been presented to TRFT and they are committed to supporting the match funding as described above, allowing them to maximise skill mix and opportunities for ensuring consistent and sustained support to the achievement of UNICEF BFI.

BF Peer Support

Existing Peer Support (Breast Buddies) is only funded until 31 March 2015. This service is crucial to support Breast Feeding mums and consists of a Peer Support Coordinator and paid part-time Peer Supporters who deliver support directly to women and also train volunteers to support women in the community. There are benefits to this being integrated into and managed by

the Health Visiting Service in the context of BFI. This proposal is supported by TRFT.

7.3 Implement Pregnancy, Birth and Beyond parent education in Rotherham:

DH recommend Pregnancy, Birth & Beyond Parent (PB&B) Education for first time parents. This is currently offered in 2 other areas in South Yorkshire. Development would include co-ordination, training, development of materials, delivery staff and venues across the Borough as part of the integrated Foundation Years Best Start Service. PB&B has been endorsed by the Think Family Steering Group, but there are resource issues preventing progress with the initiative.

8. Finance

Proposal	Cost (£)
Family Nurse Partnership expansion (1.0 wte)	36,630
Baby Friendly Initiative (0.5 wte) and skill mix/materials	24,167
Breastfeeding Peer Support coordination and delivery (wte to be confirmed)	39,628
Pregnancy, Birth & Beyond (0.5 wte plus resources)	23,074
Total	123,499

9. Risks and uncertainties

Due to the national expansion of Health Visitor numbers, Health Visitors are hard to recruit. These proposals rely on successfully recruiting staff, the specialist nature of the staff should help attract applicants to the FNP and Infant Feeding Co-ordinator posts. The Peer Support and Parenting, Birth & Beyond do not necessarily need to be trained Health Visitors so these posts should not be too difficult to fill.

10. Policy and Performance Agenda Implications

Breastfeeding initiation and maintenance at 6-8 weeks are part of the Public Health Outcomes Framework. Rotherham's performance is poor and a Performance Clinic is being held on 5th November 2014. Breastfeeding has numerous health benefits for Baby and Mum, and is recognised as a key priority in ensuring a Best Start in Life in Marmot.

The Family Nurse Partnership programme is an evidence based programme to support first-time teenage parents. It is linked to a range of indicators in PHOF and the CYPS performance framework, including reduction of NEETs.

Pre- and post-natal parenting education supports the Best Start initiative and early intervention/prevention agendas. It helps to ensure engagement with services and the 0-5 Child Health Programme.

11. Background Papers and Consultation

Further details of reference materials available on request.

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