

**DELIVERING THE FULL COMPREHENSIVE UNIVERSAL FAMILY
ASSESSMENT**

Early Start Team Initial Family Health Assessment

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Purpose of Document

This case study focuses on an improvement in service quality, innovation or a new way of working, specifically along one or more of the strands of the health visiting service vision and family offer

**Community
Universal
Universal Plus and
Universal Partnership Plus**

Brief Description of Case Study

This project involved the development of a structured framework for health visitors to use at the point of antenatal contact as part of the Healthy Child Programme (HCP). It demonstrates the unique contribution of the health visitor to the delivery of the HCP. The structured framework is an early intervention tool that assesses a family's needs and puts the health visitor as leader of those interventions. It demonstrates the unique contribution of the health visitor's professional skills and competencies to other members of the Early Start Teams. The principles of delivering this framework will run throughout the delivery of care of every contact a health visitor makes. Identifying the parent – child attachment at this early stage enables appropriate and timely responses that result in the improved social and emotional wellbeing of children and families. Improved initial contact helps to initiate trust and understanding on both parts and is more likely to lead to better outcomes in the health and well-being of those involved.

Achievements

The following are achievements as a result of developing the structured framework for the antenatal contact:

- Review of assessment strategies, identifying where these were working well in Leeds
- Identification of lead professionals that would contribute to a new framework
- Consultation with staff, partner agencies and commissioners to clarify expectations of each contact with service users
- Design of a structured framework for trialling by a team of health visitors over a six to eight week period
- Introduction of structured telephone questionnaires for new parents who had experience of the existing service delivery, to gather patient experience data to be used as a baseline and therefore evaluate the impact of the introduction of the new service vision
- Health visitors provided with training in the principles of motivational interviewing to gauge the effectiveness of this technique with service users, and how this would be beneficial to the delivery of the new framework
- Consultation and explanation of the new service offer to all lead health visitors

- Generating of knowledge and learning from the first phase of the project, increasing capacity and informing the future roll out.
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Challenges

Moving into Early Start Teams has demanded that there is a need to be clear about service need and the level of skill necessary for appropriate service delivery

Leeds has moved to Early Start Teams jointly commissioned by Leeds City Council and Health. Health visitors will have overall accountability for the service a family receives. This means that the initial full comprehensive assessment has to assess quickly the parenting capacity of new parents. It has to work well as a public health promotion tool, include data from a range of services and it needs to clearly capture the level of need for the accurate assessment and implementation of follow on services.

The need for health visitors to be client-centred in their approach

Unless health visitors have chosen to undertake a counselling module or have a particular interest in psychological theories, the interventions have been around a task-orientated process. The health visitor's job was often signposting to other services delivering therapeutic interventions. Now health visitors have the responsibility to deliver high level interventions themselves and therefore have to be able to understand the individual's situation, past experience and give validity to how they function in the context of their world.

Ensuring universal early intervention

Health visitors have been put under immense pressure over the past few years and have had to make service-level decisions based on the requirements of the organisation. Often the early visits, which are essential in building a relationship with the client, have had to be stopped in order to concentrate on safeguarding, delivering other elements of the HCP and on ensuring health targets are met. Although all important, true early intervention starts before the baby is born, and without a full universal assessment, assumptions are made, and we only jump in once a problem has been identified. The process becomes reactive and solutions difficult to solve by someone who does not fully understand the capabilities of the person nor has a true helping relationship in the first place, so trust, empathy and understanding is not there.

How we addressed the challenges

According to research, eighty-three percent of families want support in their own home (Helping New Families 2011) and there is a solid basis of scientific evidence that universal health visiting improves public health outcomes for children.

This project provides health visitors with a tool to use with all clients that informs practice and is part of the universal service delivered to all families regardless of need at home. It initiates a helping relationship by being client-centred, using solution-focussed techniques to help families set their own goals for change. It uses an asset-based approach to bring out the best in everyone and enables health visitors to share ideas, information and concerns in a strengths-based way.

Health visitors strive to prevent problems and difficulties. They understand their value in promoting well-being and reducing health inequalities. Visiting early, when families are wanting the best for their babies and are open to being thoughtful about their life style choices, can make a real difference. Support from skilled workers families can change the outcomes for their children considerably.

Health visitors want to focus on people and this framework helps them to understand what steps they can take with the family to make a difference to the child. Health visitors come into contact with a wide and diverse population and this framework allows for those differences to be appreciated, and to minimise assumptions based on lack of knowledge. It clearly considers the learning needs of the individual so that information is shared in the most appropriate way.

Because it provides consistency in the way questions are asked, the practitioner becomes predictable and families are better able to engage in the process as they know what questions are going to be asked. This enables the practitioner to reflect on the delivery of the framework and identify ways to continuously improve practice.

Having a framework of assessment clearly outlines to the family what is important from a health visitor's perspective and as one client put it "prevents it from becoming an inspection". Health visitors work together with parents, acknowledging their qualities and the responsibilities they now have as new parents. The framework covers all the areas an experienced health visitor would cover, and also allows the less experienced to get a full assessment quickly in the knowledge she has not forgotten anything.

The conversation that is generated is as unique as each family and the skills of the health visitor allow uncovering of the most sensitive issues, which can then be talked about in a supportive and constructive way. This helps the family to plan and manage their difficulties and allows the health visitor to engage others to support the family in the best interest of the child, with the family feeling helped rather than criticised.

Lessons learned

We learned that health visitors wanted to change how they practised, because they realised that some aspects of their professional practice had been lost over time, which they felt were at the heart of health visiting.

Effective service frameworks were there, and just needed to be pulled together and properly documented. Other partner agencies were keen to see practitioners tackling difficult subjects in a positive way, and they were key to some of these families using their services appropriately. Health visitors themselves wanted to change the way they worked. They wanted to feel positive about their role and that they were able to make good judgements based on their breadth of clinical knowledge, and their understanding of the family they were working with. They were soon able to identify that this framework allowed them to share public health messages in a more individualistic way and that clients started to share more about themselves.

Impact

A small poll carried out regarding the service identified that new parents liked the antenatal contact. They liked seeing someone in their own home for an hour. They felt like they received good information and were pleased to have met someone who would support them in the role of being parents. Providing this as a universal service for all parents and not just those regarded as more in need will be a benefit.

Health visitors who are using the new framework say it has given them an added zest for their job. They get to know the individuals they work with so much better, and this helps them to gain a fuller understanding of the individual's situation, and how they have prepared for parenthood. It also helps them to prepare themselves to cope with a newborn baby's needs and how this might change their relationship with their partner. They feel they are sharing health and social information in a way that is more appropriate to the individual, and that this results in the information being better received.

Health visitors have said they are better able to identify those families with the greatest needs and plan their care with them to help reduce any stress or anxiety about coping with their new baby.

Health visitors have also identified the need for a framework for the birth visit and for future family and child contacts which are now being developed.

Benefits

In the longer term, families should feel more supported and listened to. By being understood, and not judged, people have an improved feeling of self-worth and value which translates into the ability to make better decisions about their life. This helps them to understand the impact their own emotional health has on their happiness. All these are improved again if helped by someone they feel confident in and can trust.

Both practitioners and clients have gained a better understanding of their own capabilities. For health visitors, goal setting and frameworks can now become a routine approach used in every contact and will lead to a motivational style of clinical practice.

We have all learned that high quality, supportive frameworks can help to bring out our best efforts at getting the most out of the contact and out of the individual.

Innovations

For Leeds, this project has been built on the learning from delivering other supportive parenting frameworks. This brings together all that learning, partnership working with other agencies and the endorsement from a city wide perspective. It accompanies the wider redevelopment of service provision as a whole, boundary change, co-ordinated service delivery across providers and the learning from wider projects such as the Family Partnership Model and solution focussed therapies.

Personal Narrative Story

To be able to bring together in this document all the experience of working with a framework for practice and having high quality training in a variety of therapeutic approaches has been very rewarding. It could transform the interactive processes between health visitor and client making it a much more meaningful experience for both parties. The ability to reach everyone as part of the universal service offer will be true early intervention and will therefore be able to predict the level of support those families may need, and who would be best placed to deliver it.

Every new baby brings change to a family and to be able to help parents prepare and predict some of those changes is extremely worthwhile.

Giving health visitors a structure ensures that service delivery is not based on how much experience you have or what training you have done. It applies good practice across the board.

The Health Visitors trialling it have said they have never enjoyed doing antenatal visits as much as they do now!