



Department
of Health

‘Having a Baby’ is a
redesigned antenatal and
postnatal parent education
programme for women and
their families

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‘Having a Baby’ is a redesigned antenatal and postnatal parent education programme for women and their families

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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.

Case Study Overview

This project was identified as part of the work to deliver the Early Implementer Site programme for health visiting in Barnsley. It is envisaged that the project will support the development of pathways and processes across the Universal, Universal Plus, Universal Partnership Plus and Community tiers.

Having a Baby is a redesigned antenatal and postnatal parent education programme for women and their families across Barnsley. It involves moving from a centrally based programme of support (in hospital) to a more evidence-based, extended programme that is delivered locally through a multi-agency approach and is tailored to meet the needs of all client groups.

Barnsley is the 43rd most deprived local authority in England out of 354 and is the 4th most deprived in Yorkshire and the Humber out of 21. Over half the population lives in areas that are in the 30% most deprived lower-layer super output areas in the country. Of Barnsley children, 4,300 (10%) live in 10% of the most deprived areas nationally. This impacts negatively on their life chances, putting them at greater risk of poor outcomes.

Evidence indicates that a focus on improving the life chances of poor children is required to tackle both the high risk of the intergenerational impact of the consequences of child poverty . increased ill health, unemployment and criminal activity . and the subsequent public service cost, which is estimated at between £10 billion and £20 billion.

Although integrated working in itself is not unique, Barnsley is fortunate to have strong partnership arrangements and some excellent examples of integrated working that have positively influenced our commitment to improving services and outcomes for children and families in Barnsley. Integrated working is actively promoted between the local authority, health services and voluntary agencies, and this has been underpinned by the development of robust information-sharing protocols and a local Healthy Child Programme pathway. Health needs are identified and locally based interventions are delivered to meet these needs.

Based on local feedback and the emerging evidence and Government drivers around early intervention and effective parenting, health visiting has responded to

the need to redesign antenatal and postnatal parent education provision for women and their families across Barnsley.

Achievements

A pilot programme was initially established to test out the programme and for evaluation. As a result, the programme has been further developed to include the core offer of antenatal education, as below.

Module 1, early pregnancy focuses on how babies develop. It includes brain development and culminates in a marketplace event (a maternity fair or community events) that promotes local services and healthy lifestyle and wellbeing messages to parents and the wider family/community. It is aimed at empowering families to make positive changes for themselves.

Module 2, late pregnancy covers preparing for the new baby, the emotional impact of becoming a parent, labour and life with the new baby.

Module 3, postnatal covers bonding and attachment, understanding your baby, parenting guidance and the support networks that are available.

At the end of Module 3, the attendees are invited to engage in the care pathway/services offered by their local Children's Centre, which include baby massage, baby yoga, breastfeeding groups and nutrition/weaning sessions.

The Having a Baby programme relies on a strengths-based approach in order to enhance and build upon the skills and knowledge already in place, increase parenting capacity and boost self esteem and confidence. As families are engaged at the earliest opportunity, needs will be identified sooner and intervention will be brokered earlier, thereby hopefully preventing a later reliance on more specialist support.

The programme is currently being rolled out across Children's Centres and has already demonstrated improved integrated working and communications between midwifery, health visiting and Children's Centres.



Benefits

The programme is underpinned, evidenced and validated by the Department of Health's Preparation for Birth and Beyond resource (2011) and embeds the learnings and positive outcomes from the local and national Family Nurse Partnership programme:

- child development/neurosciences
- attachment theory
- understanding infants/baby cues
- strengths-focused approach
- focus on early intervention, developing realistic expectations about parenthood and promoting healthy lifestyles from the start.

Reinforcing the above is the 'making every contact count' approach that is currently being implemented locally. All staff across the children's workforce are currently being trained in motivational interviewing. This will support the strengths-based approach and the focus on parents making positive choices and changes in behaviour.

Training has been provided to all staff across all agencies about the programme and the scheme of work. Currently in development and to be implemented is multi-

agency training to ensure that our children's workforce has the skills and knowledge to support early intervention and understand the evidence base that underpins the work they are doing.

Training will encompass awareness in how the brain develops, basic child development, baby cues and understanding babies' non-verbal communication. It will also cover attachment theory, how to recognise poor attachment and strategies to help support positive attachment.

Challenges

Learning from current provision and also consultation with parents has highlighted the need to provide a flexible, responsive service to ensure that fathers/birth partners can attend. Saturday provision or twilight sessions appear to be the most popular times, and this is being accommodated through our localised and co-delivered programmes. This requires some flexibility from health-visiting staff to work occasional weekends or evenings. There is a need for all children's services to consider different working patterns to provide a more accessible service to children and families.

Learning, sharing and sustainability

In terms of learning and sharing, we have used the regional and national Early Implementer Site Programme to help shape and share our project.

There is a strong commitment from both health-visiting and other partners to roll out and sustain the programme. As a result, a delivery plan has been developed for a commissioned service that will provide a Universal provision of HAB across Barnsley. There will also be an opportunity to provide a bespoke service to those families identified as our more vulnerable and targeted groups.

To ensure that it is not a stand-alone programme, it is intended to be part of an early years and beyond programme in partnership with the Children's Centres.

Each organisation is committed to supporting and embedding the programme into current day-to-day practice as well as quality assuring the ongoing delivery through training, updates and support. This will therefore ensure a seamless, standardised quality provision.

Figure 1 below demonstrates our plan for sustainability and moving forward.

A redesigned antenatal and postnatal parent education programme for women and their families: the plan to sustain the change

Current provision

2011

Preparation for birth
(Mon, Tues, Sat, Sun each week, run by MW)

**Caring for your body
in pregnancy**
(Monthly session by
physios)

**Active Birth/top tips
for labour** (BHFNT weekly, monthly at Dearne

Having Twins!
(Twice-yearly programme)

HAB pilot
(One group)

Transition period

2012. 13

Preparation for birth
(Mon, Tues, Sat, Sun each week, run by MW)

**Caring for your baby
in pregnancy**
(Monthly session by physios)

**Active birth/top tips
for labour** (BHFNT weekly, monthly at Dearne Children's C

Having Twins!
(Twice-yearly programme)

HAB
(Universal opt-in)

Having a Baby

Service redesign

2013 onwards

Having a Baby programme

Universal offer, opt in.
Likely to appeal more to first-time mums.
Running one per each wellbeing area.

Community events

Two per year centrally, plus support for local events.
Increase community awareness of
support services and healthy
lifestyle message.

Having a Baby programme

(Targeted groups, e.g teens, substance misusers, twins, etc.)

Bumps to Babies group (not in all centres)

Universal offer – drop-in facility supported by Preparation for Parenthood
(More likely to appeal to second-time parents)

Active Birth sessions

Central and per wellbeing area to support group sessions and programme