



Public Health
England

Protecting and improving the nation's health

Official Statistics

Health Visitor Service Delivery Metrics (Experimental Statistics)

Quarter 2 2018/19 Statistical
Commentary (January 2019)

About Public Health England

Public Health England exists to protect and improve the nation's health and wellbeing, and reduce health inequalities. We do this through world-leading science, knowledge and intelligence, advocacy, partnerships and the delivery of specialist public health services. We are an executive agency of the Department of Health and Social Care, and a distinct delivery organisation with operational autonomy. We provide government, local government, the NHS, Parliament, industry and the public with evidence-based professional, scientific and delivery expertise and support.

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Main findings

This statistical commentary should be considered alongside the Quarter 2 2018/19 Health Visitor Service Delivery Metrics statistical release, which can be found at <https://www.gov.uk/government/statistics/health-visitor-service-delivery-metrics-2018-to-2019>.

Please treat the figures with caution: where totals are presented for England and PHE centres, these are aggregate totals of the areas that submitted information and passed initial validation.

Where no reference to a particular quarter is mentioned it should be assumed that the data refers to the most recent quarter's data.

Indicator	Quarter 1 2018/19	Quarter 2 2018/19	Quarter 3 2018/19	Quarter 4 2018/19	2018/19 annual data
C2: New Birth Visits (NBVs) completed within 14 days %	88.9% (88.7 - 89.0)	89.6% (89.4 - 89.7)			
C3: New Birth Visits (NBVs) completed after 14 days %	9.3% (9.2 - 9.5)	8.7% (8.6 - 8.9)			
C8i: 6-8 week reviews completed %	85.7% (85.6 - 85.9)	85.4% (85.2 - 85.5)			
C4: 12 month reviews completed by the time the child turned 12 months %	77.1% (76.9 - 77.3)	76.8% (76.6 - 77.1)			
C5: 12 month reviews completed by the time the child turned 15 months %	82.1% (81.9 - 82.3)	82.4% (82.2 - 82.6)			
C6i: 2-2½ year reviews completed %	76.6% (76.4 - 76.8)	78.2% (78.0 - 78.4)			
C6ii: 2-2½ year reviews completed using ASQ-3 %	89.8% (89.6 - 89.9)	89.8% (89.6 - 90.0)			

Percentages are based on local authorities that made submissions and passed initial validation. Confidence intervals are shown in brackets.

Background

In October 2015, the responsibility for commissioning children's public health for the 0 to 5 years' population transferred from NHS England to local authorities. To support this transfer, Public Health England established an interim data collection for a number of key performance indicators associated with these services, which it is critical to monitor and report. The strategic reporting solution hosted by NHS Digital, the Community Services Dataset, is collecting relevant data items directly from providers' systems and in time will take on reporting of these indicators.

The health visiting information in this publication has been obtained via the interim reporting system. It was submitted to PHE by local authorities on a voluntary basis. It covers Quarter 2 of 2018/19, which is the fourteenth reporting period. The full data can be found at: <https://www.gov.uk/government/statistics/health-visitor-service-delivery-metrics-2018-to-2019>.

The health visiting service leads on the delivery of the Healthy Child Programme (HCP), which was set up to improve the health and wellbeing of children aged 0-5 years. This is achieved through health and development reviews, health promotion, parenting support and screening and immunisation programmes.

The health visiting service consists of specialist community public health nurses and teams who provide expert information, assessments and interventions for babies, children and families, including first time mothers and fathers with complex needs.

The health visitor service delivery metrics currently cover the antenatal contact, new birth visit, the 6-8 week review, the 12-month review and the 2-2½ year review and report on the following metrics:

- C1: Number of mothers who received a first face-to-face antenatal contact with a health visitor at 28 weeks or above
- C2: Percentage of New Birth Visits (NBVs) completed within 14 days
- C3: Percentage of New Birth Visits (NBVs) completed after 14 days
- C8i: Percentage of 6-8 week reviews completed
- C4: Percentage of 12-month development reviews completed by the time the child turned 12 months
- C5: Percentage of 12-month development reviews completed by the time the child turned 15 months
- C6i: Percentage of 2-2½ year reviews completed
- C6ii: Percentage of 2-2½ year reviews completed using ASQ-3 (Ages and Stages Questionnaire)

These metrics are presented as management information and are reported by local authority, PHE centre and England level.

The decision has been taken to publish this information as 'experimental statistics' on the basis that there has been a significant change to the reporting methods, both in units of collection and the mandatory/voluntary nature.

Data collection method

An interim reporting system is hosted on the Local Government Association (LGA) website to collect the data on health visiting indicators. The reporting window for Quarter 2 data was 19 November to 14 December 2018.

To support local authorities in submitting data, detailed guidance was circulated to explain how analysts and commissioners in local authorities should submit data. This guidance is available at: <https://www.gov.uk/government/publications/childrens-public-health-0-to-5-years-national-reporting>.

A dedicated mailbox, Interimreporting@phe.gov.uk, was also in place to respond to questions and comments.

Once the collection window closes the data received is centrally collated, validated and reported. This process will be repeated quarterly.

Data quality

The following data relates to Quarter 2 2018/19.

A total of 147 reporting local authorities submitted a return for the interim reporting collection for Quarter 2 2018/19. The 3 local authorities that did not submit data are Lambeth, Wakefield, and Windsor and Maidenhead.

Validation rules

A set of validation rules was applied to each health visiting metric.

Validation Stage	Definition
Stage 1	Indicator numerator and denominator are integers, and numerator \leq denominator.
Stage 2 for all indicators other than C6ii	Indicator denominator is within 20% of the resident population of the relevant age (0 years for new baby visits and 6-8 week reviews, 1 year for 12 month reviews, and 2 years for 2½ year reviews). The annual figures are divided by 4 to provide quarterly estimates.
Stage 2 for indicator C6ii	Indicator denominator is within 20% of the numerator for indicator C6i

Each local authority has to pass both stages 1 and 2 in order for its values to be shown.

The values for areas that did not pass stage 1 validation are excluded from their respective PHE centre and the England aggregated calculations.

A comprehensive breakdown of the results following the application of the validation can be found in the publication at: <https://www.gov.uk/government/statistics/health-visitor-service-delivery-metrics-2018-to-2019>.

Summary of Quarter 2 data

Indicator C1: Number of mothers who received a first face-to-face antenatal contact with a health visitor

This is unable to be collected as a percentage due to the difficulties in defining an adequate denominator.

Three local authorities were unable to provide a number for this metric (put 'DK' don't know).

Based on the 144 local authorities that did provide a value (including 1 that reported '0' zero), there were 60,977 antenatal contacts nationally in Quarter 2 2018/19. This compares to 65,369 in Quarter 2 2017/18 (based on the final figures published in October 2018).

Indicators C2 and C3: Percentage of births that received a face-to-face new birth visit (C2: within 14 days and C3: after 14 days)

New birth visits should ideally occur within 14 days, however it is accepted that in some circumstances this is not possible.

The aggregate percentage of new birth visits within 14 days (indicator C2) for England for Quarter 2 is 89.6% (with confidence intervals of 89.4% – 89.7%). This is higher than Quarter 2 2017/18, based on the final figures published in October 2018.

The aggregate percentage of new birth visits after 14 days (indicator C3) for England for Quarter 2 is 8.7% (with confidence intervals of 8.6% – 8.9%). This is lower than Quarter 2 2017/18, based on the final figures published in October 2018.

The aggregate percentage of new birth visits within or after 14 days (indicator C2+C3) for England for Quarter 2 is 98.3% (with confidence intervals of 98.2% – 98.4%).

Values for percentages of new birth visits within 14 days could be published for all PHE centres for Quarter 2 (these were aggregates of 'valid' local authorities in each centre). Values ranged from 83.2% to 93.8%.

Values for percentages of new birth visits after 14 days could be published for all PHE centres. These ranged from 4.9% to 14.6%.

The percentage of babies who received a new birth visit within 14 days could be published for 143 local authorities who passed additional validation. Values ranged from 52.2% to 100%, with the majority (131) reporting between 80% and 100%.

The percentage of babies who received a new birth visit after 14 days could be published for 143 local authorities who passed additional validation. Values ranged from 0% to 42.8%.

Indicator C8i: Percentage of children who received a 6–8 week review by 8 weeks

The aggregate percentage of infants receiving a 6–8 week review for England for Quarter 2 based on 145 local authorities passing initial validation is 85.4% (with confidence intervals of 85.2% – 85.5%). This is higher than Quarter 2 2017/18, based on the final figures published in October 2018.

Values for the percentage of children who received a 6–8 week review by 8 weeks could be published for all PHE centres for Quarter 2 (again these were aggregates of 'valid' local authorities in each centre). These ranged from 71.0% to 91.9%, with all but 1 of the centres achieving over 80%.

Values for the percentage of children who received a 6–8 week review by 8 weeks could be published for 142 local authorities who passed additional validation. Values ranged from 10.5% to 100%, with the majority (111) reporting between 80% and 100%.

Indicator C4: Percentage of children who received a 12-month review by 12 months

The aggregate percentage of children receiving a 12-month review by 12 months of age for England for Quarter 2 based on 145 local authorities passing initial validation is 76.8% (with confidence intervals of 76.6% - 77.1%). This is higher than Quarter 2 2017/18, based on the final figures published in October 2018.

Values for completed reviews within 12 months could be published for all PHE centres for Quarter 2 (again, these were aggregates of 'valid' local authorities in each centre). These ranged from 60.4% to 86.9%, with 6 of the 9 centres achieving over 80%.

Values for the percentage of children who received a 12-month review by 12 months could be published for 143 local authorities who passed additional validation. Values ranged from 16.3% to 98.8%, with the majority (88) reporting between 80% and 100%.

Indicator C5: Percentage of children who received a 12-month review by 15 months

The aggregate percentage of children receiving a 12-month review by 15 months of age for England for Quarter 2 based on 145 local authorities passing initial validation is 82.4% (with confidence intervals of 82.2% - 82.6%). This is lower than Quarter 2 2017/18, based on the final figures published in October 2018.

Values for completed reviews within 15 months could be published for all PHE centres for Quarter 2 (again these were aggregates of 'valid' local authorities in each centre). These ranged from 69.9% to 94.2%, with 7 of the 9 centres achieving over 80%. The percentage of children who received a 12-month review by the age of 15 months could be published for 142 local authorities who passed additional validation. Values ranged from 1.5% to 100%, with the majority (115) reporting between 80% and 100%.

Indicator C6i: Percentage of children who received a 2–2½ year review by 2½ years

The aggregate percentage of children receiving a 2–2½ year review by the age of 2½ for England for Quarter 2 based on 146 local authorities passing initial validation is 78.2% (with confidence intervals of 78.0 – 78.4%). This is higher than Quarter 2 2017/18, based on the final figures published in October 2018.

Values for the percentage of children who received a 2–2½ year review by 2½ years could be published for all PHE centres for Quarter 2 (again these were aggregates of 'valid' local authorities in each centre). These ranged from 68.7% to 90.0%, with only 4 of the 9 centres achieving over 80%.

The percentage of children who received a 2–2½ year review by 2½ years could be published for 138 local authorities who passed additional validation. Values ranged from 25.6% to 100%, with the majority (80) reporting between 80% and 100%.

Indicator C6ii: Percentage of children who received a 2–2½ year review using Ages and Stages Questionnaire (ASQ-3).

The aggregate percentage of children receiving a 2–2½ year review which used ASQ-3 for England for Quarter 2 based on 141 local authorities passing initial validation is 89.8% (with confidence intervals of 89.6% - 90.0%). This is lower than Quarter 2 2017/18, based on the final figures published in October 2018.

Values for completed 2–2½ year reviews using ASQ-3 could be published for 8 PHE centres for Quarter 2 (again these were aggregates of 'valid' local authorities in each

centre). These ranged from 79.4% to 97.6%, with all but 1 of the centres achieving over 80%.

The percentage of children who received a 2–2½ year review using ASQ-3 could be published for 123 local authorities who passed additional validation. Values ranged from 59.0% to 100%, with the majority (110) reporting between 80% and 100%.

Data quality notes

When making a submission, local authorities have the opportunity to enter comments in a free text box to explain any issues with reporting. During the Quarter 2 submission, no comments were received related to health visiting data.