

1. What services are new mothers and newborn children (0-6 months) provided with now?

Health Visiting Team	Action
Ante Natal Service	<p>Universal Service - Information is sent to all pregnant women with details of the Health Visiting Service and contact details for their specific Health Visiting team.</p> <p>Targeted - Health Visiting is a targeted service antenatally. Health Visiting teams work closely with community midwives to share relevant information. This would include information about antenatal clients with complex needs, vulnerable families particularly those with Child Protection concerns. These families would be visited at home; a holistic assessment would be carried out by a named Health Visitor followed by an agreed plan of care. Information regarding local Children Centre shared with family. For teenage parents – information will be shared about local Mum’s 2 Be Group.</p>
Newborn Hearing Screening Programme	All babies in North Yorkshire and York are offered the Newborn Hearing Screen, often on day 1 whilst still in hospital. If they are not seen in hospital they will be sent an outpatient appointment. For further information see www.nhsp.info .
Newborn Blood Spot Programme	All babies in North Yorkshire and York are offered screening for phenylketonuria, congenital hypothyroidism, sick cell disorders, and cystic fibrosis via the blood spot heel sample taken at day 5-8 by community midwives. For more information see: www.newbornscreening-bloodspot.org.uk/ .
Initial Post Natal Visit (10-21 days)	<p>Universal Service – New births identified electronically and followed up by a written handover from Community Midwives giving details of care provided and any concerns. Health Visitor makes contact with family at 10-14 days to arrange a home visit. Commencement of Child and Family Health Assessment process at this visit. All appropriate health promotion information given.</p> <p>Targeted – Babies in the Special Care Unit or with ongoing medical conditions liaison will be in place between the Health Visiting team and the relevant hospitals. A Health Visitor will attend relevant discharge planning meetings. Continuation of the Child and Family Health Assessment process to those clients who were targeted antenatally.</p>
6-8 weeks old Universal	A one to one confidential contact made by a Health Visitor to continue the Child and Family Health Assessment. A formal Maternal Mood Assessment will be completed at this time. Further input to be negotiated and offered according to need.
6-8 week Medical Examination	Carried out by GP for both mother and child
3-4 months	Continuation of the Child and Family Health Assessment by Health Visitor if not completed at 6-8 weeks. If completed at 6-8 weeks and no extra needs identified, future contact may be a member of the Health Visiting Team. If extra needs are identified a plan will be agreed with the family.

0-6 months	All families will be offered universal access to local Well Child Clinics run by the Health Visiting Service and signposted to local Children's Centres. All families will receive the above contacts. All targeted families will receive continuous assessment which will result in a care plan documenting ongoing support. This will include all members of the Health Visiting Team and may necessitate integrated care pathways.
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At any point during this period, babies will be referred to the appropriate service if there are areas of concern.

2. Is the service that is currently provided an area for concern?

Service delivery of the commissioned programme in York is not currently an area for concern. Each service team leader provides a weekly situation report on staffing absence due to vacant posts, sick and annual or other leave together with an assessment of the impact on service provision. Additional resources have been allocated where risks have been identified but this has not been necessary in the York teams.

3. How will this service change under the 0-19 service review?

The 0-19 Review process is still ongoing and should be completed over the next 2-3 months. From this a new Commissioned Service Specification will emerge. At this stage, it is not envisaged that the Service Specification will expect services available to be any less than is currently available.

4. What input do health visitors currently have with mothers and their newborn children (0-6 months)? Does the current system offer a full and effective service to all mothers with children of this age, including those that were classed as 'hard to reach'?

The Commissioned Programme is clear that Specialist Practitioners will be working with hard to reach groups. Please refer to question 1 for a summary of service provision, which is detailed in the Commissioned Programme. The vulnerability checklist is used to identify families requiring additional support. A set of standards for health visiting are being developed across North Yorkshire and York which describe the type of service contact or intervention expected. This will enable the service to be audited against best practice.

5. What facilities are on offer in York, where are they and how often are they used?

The service provides universal access to a comprehensive network of well child clinics and integrated working with local Children's Centre groups. Multi Agency targeted groups are available. Please see attached list Citywide Clinic Information (Annex B refers) which is given to all new parents.

6. How do mothers with newborn children find out about the services on offer? Is there a need for further signposting to the services available?

The Health Visiting Team delivers a pack of information to all new families and transfers into the area. Children's Centres and Family Information Service also offer a wealth of information.

The Red Book is given to new mothers before they leave hospital. The Red Book is a parent held child health record, a national document which forms the main record of a child's health, growth and development. The record is designed for the parent and other people who care for the child for example midwife Health visitor school nurse doctor and any health appointments. The Red Book includes information on the Healthy Child Programme, immunisations, screening and routine reviews, child's 'firsts' and growth charts. The parent may choose to show it to other carers for example child minder, playgroup leader and teacher

GP Practices have regular access to the Link Health Visitor.

7. Can you provide some statistical information i.e. how many people currently access services in York, which are the most popular centres or ways of accessing the services available?

We achieve 100% reach to families with our initial postnatal contact and follow up contacts in early months. Thereafter access to service varies according to assessed level of need and parent choice.

Further information regarding uptake would be available from the Children's Centres.

8. How many care centres in York offer postnatal services (for both mother and children aged 0-6 months)?

Health Visiting Teams and Children's Centres offer postnatal services in a variety of community settings including Community clinics, Children Centres and surgeries. The Maternal Mood Assessment, which takes place at 6-8 weeks, identifies mothers who may require further support or extra services.

There is a specific mother and baby unit at Bootham Park Hospital for women with post natal depression.

9. What are the specifications and baselines for the service?

North Yorkshire and York Community and Mental Health Services Health Visiting Commissioned Service Incorporating Universal and Targeted Services for Children, Young People and Their Families (February 2008).

10. What is the ratio of Health Visitors per head of population/families in York?

This will be included in the 0-19 Review. The current Health Visitor teams across York include 27 whole time equivalent Health Visitors supported by Child Development Workers and Admin support. The two York teams are led by 2 team leaders who are experienced health visitors. The service is managed by 2 Children Service Managers, who job share and are also both from a health visiting background.

11. How many people from outside of the local authority boundary access services in York?

This information is not available.

12. Can you provide comparisons of the service available in York with other Primary Care Trusts?

This would require a specific piece of work, but in respect of Strategic Health Authority wide figures York numbers are at the lower end of the spectrum. The 0-19 Review is looking at this.

13. Can you provide clarity on the alignment of children's Centres and the Health Visitors staffing arrangements in relation to the City boundaries?

Following consultation with partner agencies when changing to a geographical model of working our boundaries were developed as far as possible to be coterminous boundary with the City of York.

Health Visitors in York are mainly based in Children's Centres.

14. What communication channels are in place between Health Visitors and:
a. GPs – HV Link Worker – This has recently been updated to a more robust framework.
b Paediatric care at York Hospitals NHS Foundation Trust
c. Midwives (both antenatal and postnatal)

a, b & c - There is a named Link Health Visitor for each GP Practice and local agreements are in place for regular contact. All Health Visiting clinicians have a mobile phone and numbers are available to all Primary Health Care Team and other Partner Agencies. All office bases have answerphone facilities.

c – There are regular liaison and information sharing meetings between local Health Visiting and Community Midwifery teams. Community Midwives provide a written handover of care postnatally.