

# Scrutiny Children & Young People Sub- Committee Supplementary Agenda



## 6. Update on Antenatal and Health Visiting Visits (Pages 3 - 12)

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## Health Visitors Review 2nd November

Andrew Stenton  
Associate Director of Operations

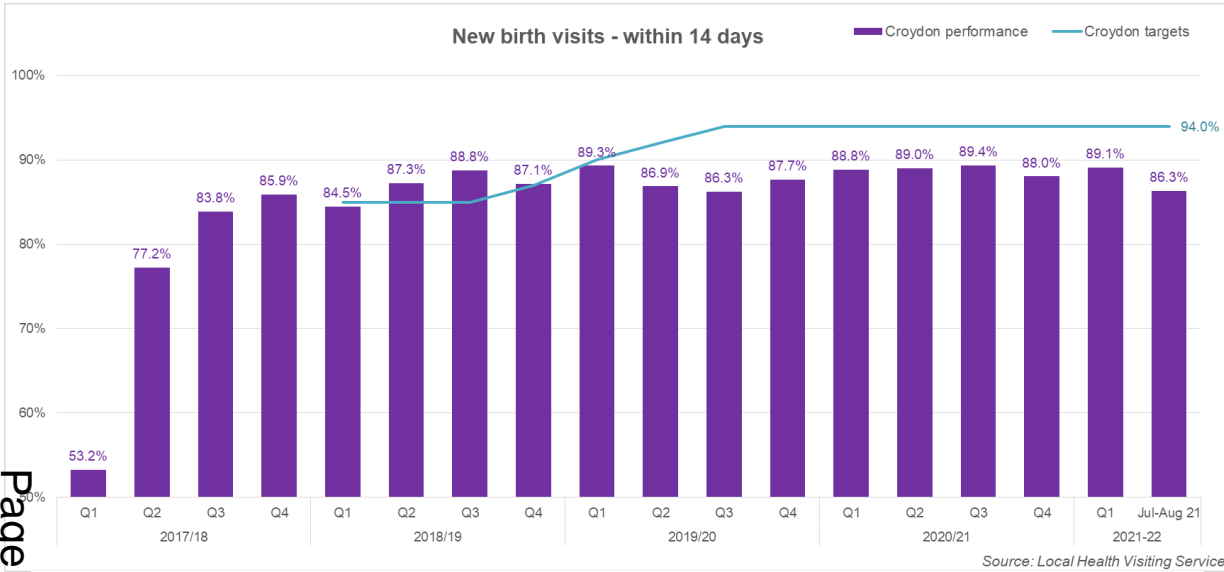


Professional

Compassionate

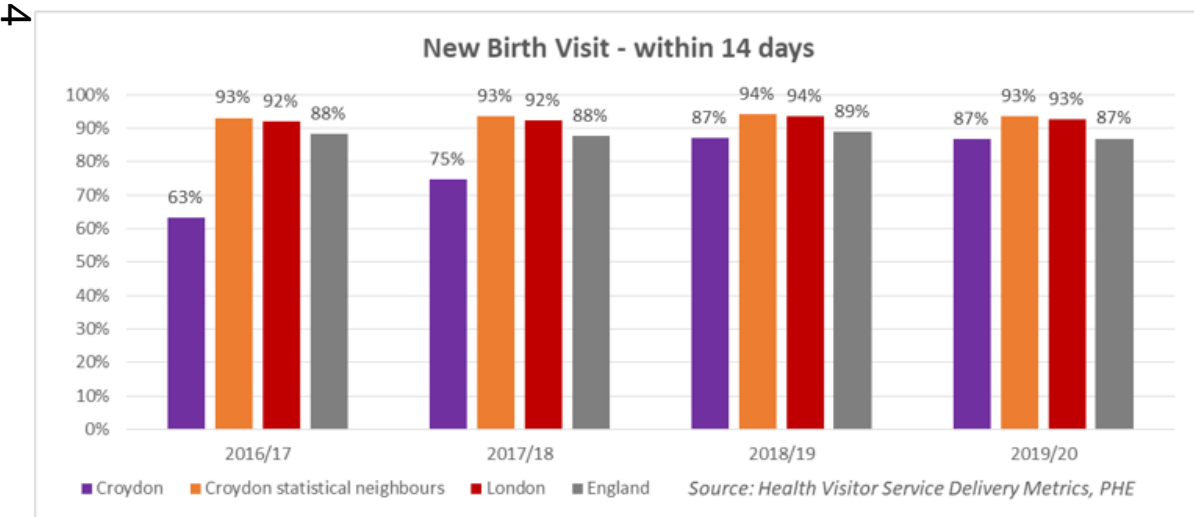
Respectful

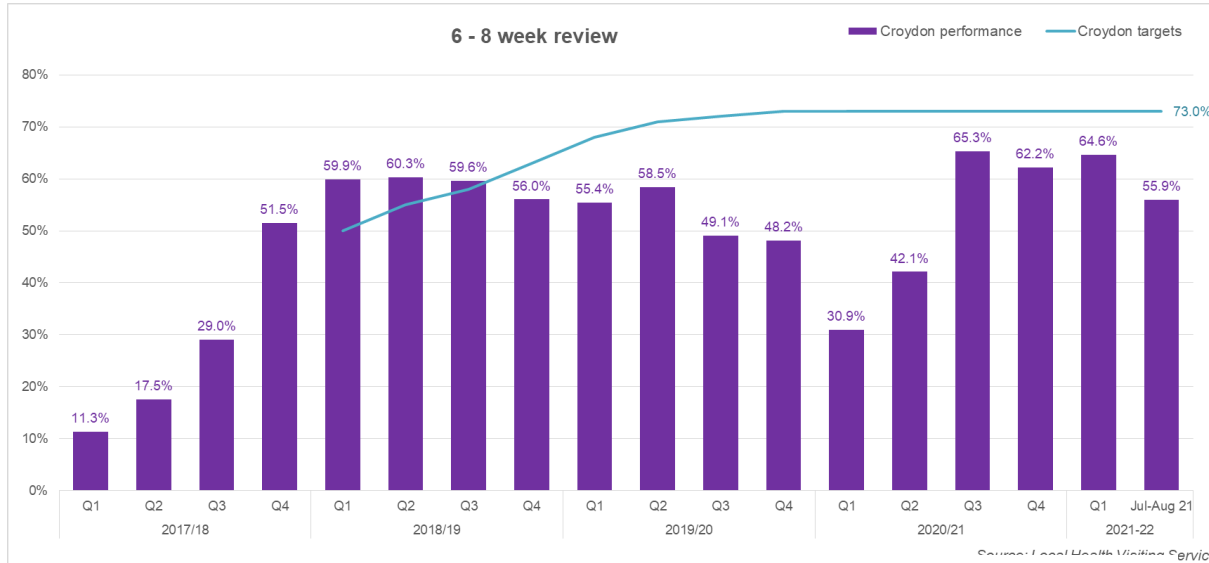
Safe



New Birth Visits have continued throughout COVID as a key safeguarding appointment.

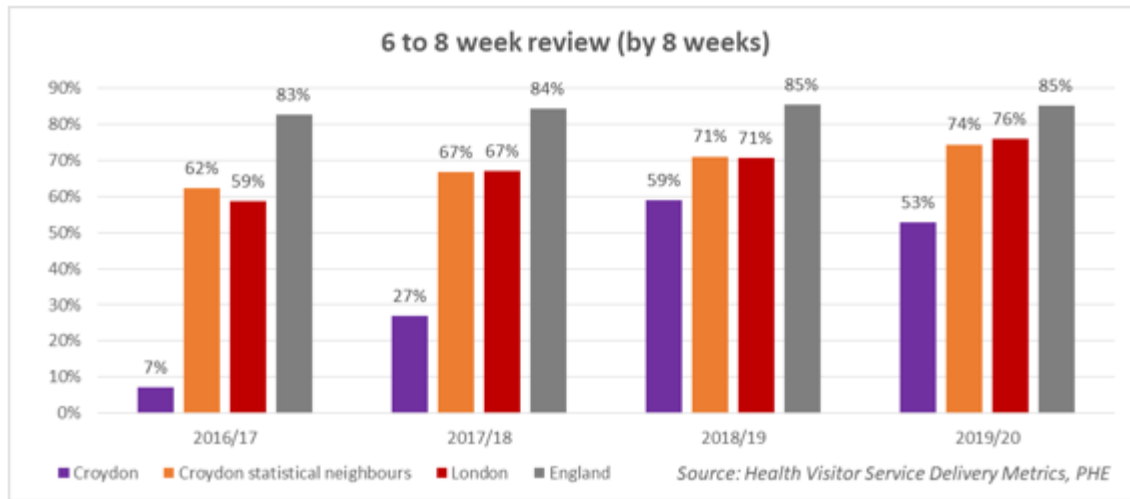
NBVs Q1 2021/22 at 14 days is 89%  
This increases to 95% by 30 days.



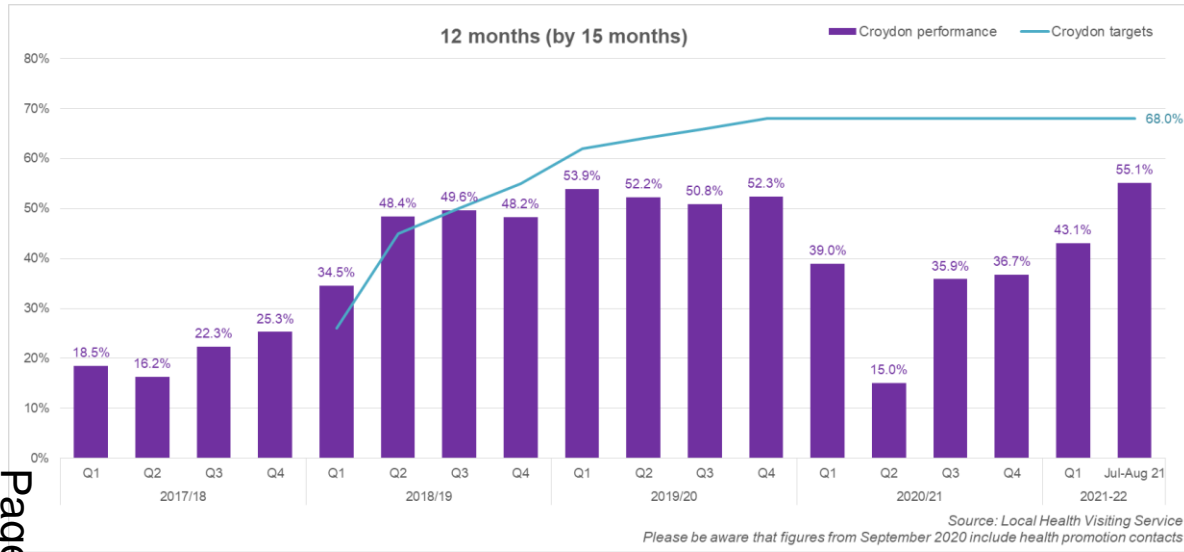


Improvement slowed down in 2019/2020 due to focus to transformation remodelling

National instruction to stop checks due to COVID-19, now nearly back to pre-pandemic target levels.



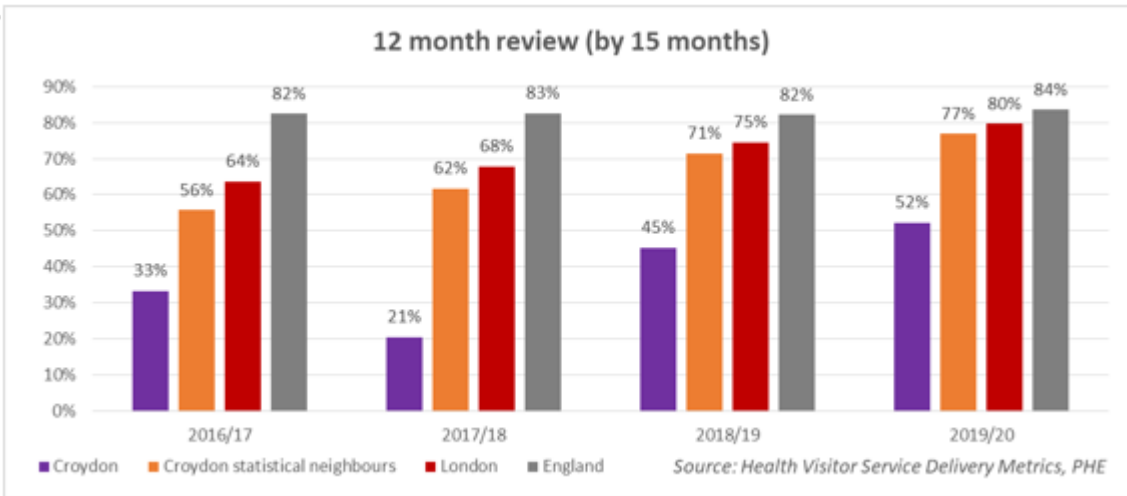
# Data – one year check

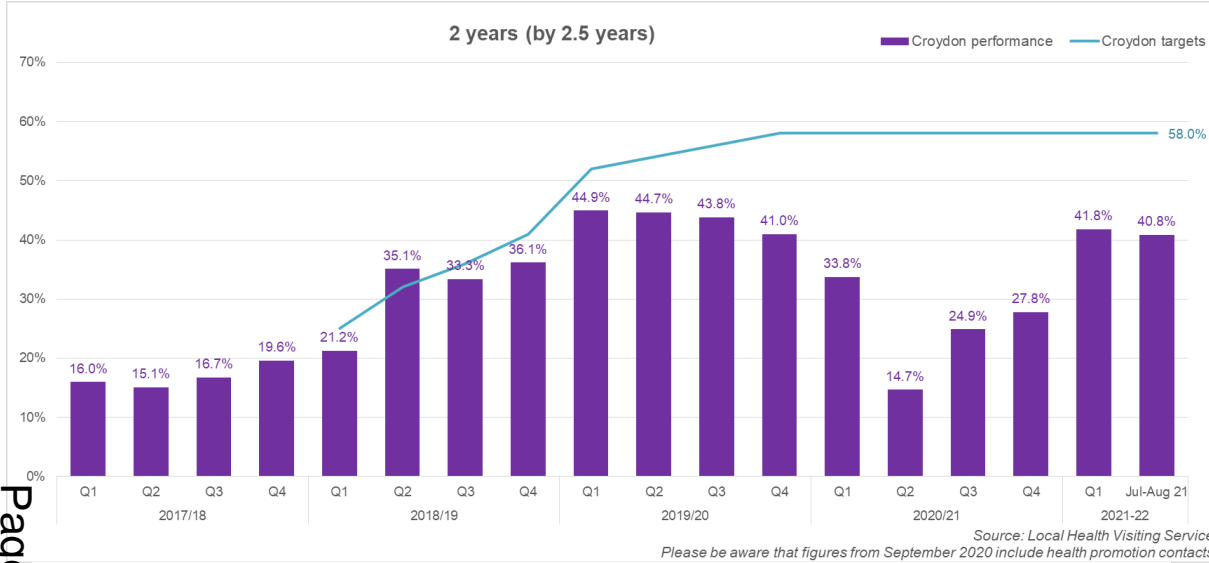


Page 6

National instruction to stop checks due to COVID-19.

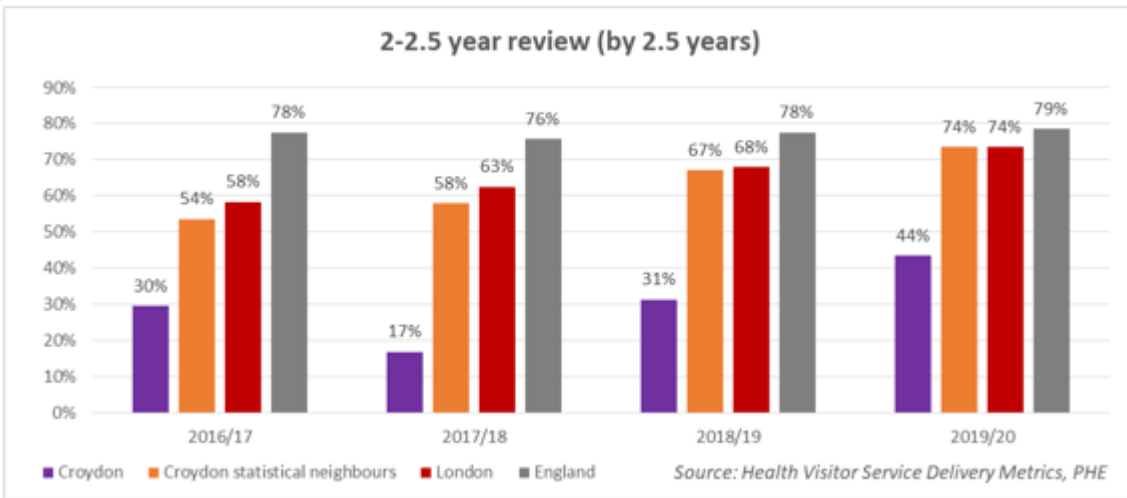
Recovery Plan achieved a step change in Q2 2021/22. This has been sustained and is showing continuing improvement.





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# Current challenges

- Recruitment has been an ongoing challenge, exacerbated by the pandemic – current vacancies for Band 6/7 HVs is 14 wte from an establishment of 49.7wte. Recruitment drives are ongoing, in addition, 4 new student HVs commenced at the end of September 2021.
- The pandemic has led to increased safeguarding risk, which was reported in a range of nationally published documents
- The mandated checks are only one component of the health visiting role. Where the checks identify additional vulnerabilities, the HV service may assess that the family should be placed on the Universal Plus, or Universal Partnership Plus pathways, meaning that additional support and visits will be required over and above the mandated checks. This work is appropriately being prioritised.
- January to December 2020, Croydon’s HVs attended 1174 safeguarding core groups and conferences. This excludes necessary report writing and home visits.
- Venues have been restricted due to periods of closure. Bookable sessions are now in place at Children’s Centres – full use of other venues is also facilitated.



- A Cabinet decision was taken on 12<sup>th</sup> July 2021 to award the PHN contract to CHS for a period of 2 + 1 years
- Performance needs to be seen within the context of historically low funding. The London average funding was estimated to be £190 per capita, the statistical neighbours £164, and Croydon's per capita funding is £146. Croydon had one of the lowest funding levels in London when transferred from the NHS.
- Additional funding was awarded with the new contract of £200k for 2021/22, with a further £350k intended for 2022/23 to bring Croydon's funding of PHN more in line with that of its statistical neighbours
- Targets have been set to take performance to the level of statistical neighbours over the next two years.
- PHE suspended data submissions nationally during the pandemic. This was re-instated in summer 2021. The report is expected in November 2021 showing an update on statistical neighbour data.
- Current caseloads are high. The recent CQC report recommended that the health visiting caseloads be reduced to 500, they are currently over 670.

- Half of PHN team was redeployed to acute services from March 2020 to July 2020
- National suspension of HV mandated checks, barring NBVs and safeguarding work, from March 2020 to July 2021. A blended model of F2F and virtual visits were introduced as part of the recovery plan from August 2021
- Triage for COVID-19 symptoms required prior to all visits. All families eligible for a check receive a call, which also assesses safeguarding risks
- COVID-19 recovery plans implemented, with F2F visits reinstated for all checks, where the family is symptom free.
- Some checks may be delayed where a family has symptoms, impacting on the ability to deliver a check within the required timeframe.
- The service does not count a mandated check as completed, where a F2F visit has not been made, nor if it is outside the expected timeframe.

# Strengthened Governance

- Monthly contract meetings take place to review monthly performance and tackle challenges early on
- Quarterly Senior level contract meetings scheduled so that Directors remain sighted on current issues and can support with overcoming barriers
- Safeguarding lead included at quarterly Director meetings to ensure join up with Safeguarding governance structures and that safeguarding remains a key focus
- Service Development Improvement Plan in place, with clear milestones and a supporting action plan
- Data quality work underway by the service to improve accurate reporting.

# Priorities for 2021 -2022

- Rolling programme of recruitment
- Skill mix review
- Reduction in HV caseload
- Improved coverage levels on 5 key mandatory checks
- Flexible use of budget to increase skill mix for delivery of 1 year and 2 year checks and data quality work
  - Recruitment of Data Analyst for 6 months
  - Recruitment of Project Manager for 6 months
- Development of Standard Operating Procedure (SOP) between Maternity Services and HV, to improve and formalise identification of vulnerable families
  - Joint training programmes
  - Replicating Croydon SOP with other Maternity Services to ensure births in other Hospitals/settings are treated equally