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A Flying Start in life…

An evaluation of Torfaen Flying Start Enhanced Health Visiting

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Flying Start

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What is Flying Start?

Flying Start is an exciting Welsh Government initiative involving the delivery of **enhanced health visiting, parenting, free quality childcare and language and play services to children 0-3yrs** of the most disadvantaged families in distinct geographical areas within each county borough. The ethos is to promote the very best physical, social, emotional and cognitive health and development, including early identification of additional needs, to ensure each child receives a

'flying start in life'

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Health Visiting Skill Mix Team

Multi-Disciplinary Partnership Approach

5 Community Health Nursery Nurses 4.6wte

9 Health Visitors 6.4wte

Psychologist 0.53 wte

Health Administrative Support 1.6wte

CHILD & FAMILY

2 Midwives 0.8wte

Play Therapist 0.2 wte

Speech & Language 0.4 wte

Dietetic Service Input

Community Psychiatric Nurse 0.5 wte

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Service Model

according to assessed need

Health Visitors and Initially Midwives, visit parents of children aged 0 - 4 in Flying Start areas to:

- Engage and build relationships
- Assess child and Family health needs in partnership with parents
- Formulate a child development plan in conjunction with parents
- Deliver key health promotion advice and commence child health promotion programme

Low Priority
Midwife/Health Visitor provides core programme of care and signposts to universal services

Medium Priority
Health Visitor provides additional input and supports access and referral to other services to meet needs: Flying Start Interagency panel may be appropriate.

High Priority
Health visitor maintain additional input, other key worker may be appointed from inter-agency panels. E.g. C.O.T, Social Services core group, Flying Start inter-agency panel

A: Universal Services
A

Antenatal support, education, transition, Scale, Parent and baby groups, Infant massage, Parenting Programmes, Sure Start Groups, Nutritional health promotion advice, Language and Play, Book Start book bags, Parent and Toddler groups, 2 year old childcare places

B: Family and child services
A+ B

Midwife/health visiting and Community Nursery Nurse in the home, Sure Start health group work, Speech and Language, Mental health services

C: Specialist Services:
A+ B+C

Psychology, Substance misuse, Domestic abuse Debt Counselling Mental Health Services, Social Services, Children with complex needs/disabilities, Speech and language, Play Therapist, Portage, Educational Psychology, Dietetic Advice, OT, Physio, Paediatrician

Child reviewed as per core programme (9 months and 2 years

Individual Flying Start Child and Family Development Plan produced in conjunction with parents and other agencies detailing interventions and services to be provided, outcomes to be achieved and who is responsible for outcome

Monthly local Flying Start Inter-agency panel, cases discussed 1-3 monthly dependent on need and individual care/development plan

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Enhanced Health Visiting

- Move from medical to social/community model
- Lower caseloads 1:110
- Enhanced Core Programme
- Commence Antenatal – seamless service
- Assessment of need and Child development
- Public Health emphasis
- Increased skills
- Increased home visiting and group work
- Intensive packages of care
- Health sessions in childcare and nurseries
- Actively engage with all flying start elements

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Methodology

- Client Questionnaire
- Client Focus groups
- Staff Questionnaire
- Staff discussion groups
- Stakeholder survey
- Case studies
- Collation of monitoring data

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Outcomes -Service Delivery

- **Services- Local and accessible**

  "Its on your doorstep"

- **Easy access to Health Visitors**

  "I can phone the Health Visitor at any time and she's there" (client)

  "There was also added value from having accessible professional advice and care for teaching staff. The HV is at school every day. The GP surgery is 1.5 miles from school, so neither parents nor teachers go there to ask for advice." (Stakeholder interview)

Home Visiting

"Really good, baby in hospital for first three months, still visited even though baby wasn't home [Health Visitor]."

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Outcomes – Service Delivery

- Range of staff- multiple problems managed in a holistic and seamless way

"Taking the service to the family and making it accessible through home visits is unique. This gives the Health Visitors time to build up relationships with hard to reach families. Hitherto there was never time for Health Visitors to deal with these families to the level they knew they needed. Being able to refer very quickly to the relevant professional – e.g. psychology, medical, speech and language, dentist etc is very valuable."

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Impact on clients

- Families overwhelmingly positive
- *"You get more information and I feel I am doing a better job and know what I am doing and I'm doing it right"*
- Families felt they had improved their parenting skills

"Family Links Nurturing Parenting Program, "What a fabulous ten weeks, I really enjoyed this and I highly recommend it."

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Impact on clients- Mental Health

- Mothers reported that their post natal (and more long standing) mental health needs were being addressed

  "Fantastic- best thing ever - Post Natal Depression Support, and the Midwife made me feel relaxed and calm."

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Impact on clients- children

- Parents were better able to promote the health and development of their children
- 90% understood the importance of early communication such as talking, listening and singing with their child
- 83% understood that how they react to their child now will have a future impact on the child

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Impact on clients- children

- 77% said they had learned about safety in the home
- 87% felt their child feeds/eats well
- 91% stated their child sleeps well
- 83% thought their child had reached his/her developmental milestones
- 96% said they had been encouraged to seek help if worried about their child

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Impact on clients -relationship

- 86% stated they had a good relationship with their child

"Families have gained more support in their community, to access help as and when needed. They are able to attend positive parenting groups – giving them confidence and supporting the family network. Some families have made new friends from others in the same situations, which provides a good support network." (Health Visitor)

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Delegated, intensive home visiting

- Children's social, emotional and behavioural needs are addressed by intensive home visiting with a delegated individualised, ongoing package of care delivered by CHNN
- Assessed using Parenting Daily Hassles

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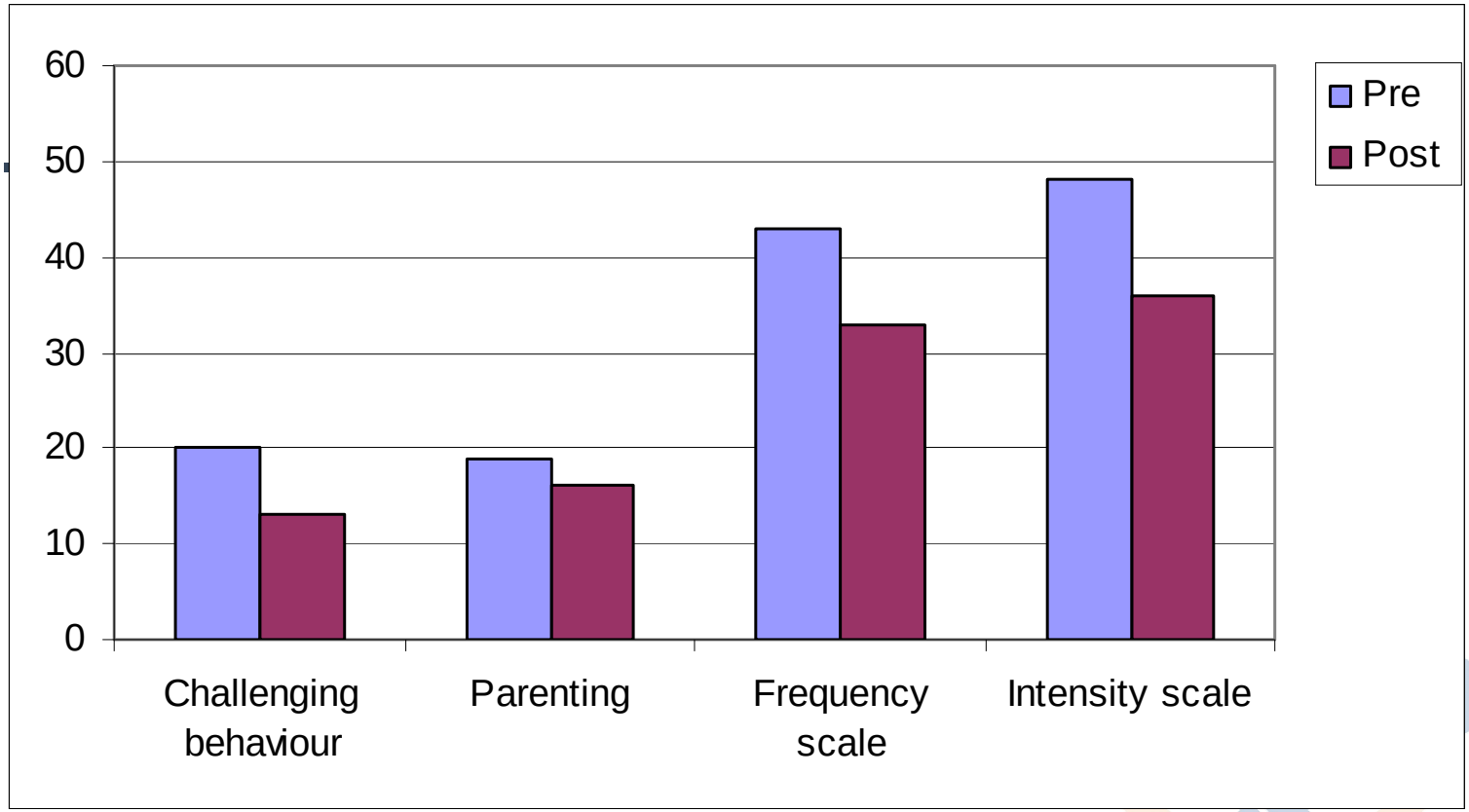
Graph to demonstrate Average Scores of improvement

May 2009-March 2011



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The value of multi-disciplinary approach

- Early identification of needs and improved access to multi-agency services
- *"Another benefit is the amount and quality of information I as Head of the nursery used to get before children came into the nursery. The monthly multi-professional meetings were brilliant. Some families were not in nursery, but were in childcare. I knew their history and background before they arrived. If they needed extra help, I could get these extra services in early as I knew the needs in advance."* (Stakeholder interview)
- Early support for children's language and cognitive development
- Early intervention in social, emotional and behavioural needs
- More accessible services with tailored support

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Challenges for the multi-disciplinary approach

- Effective Networking and good communication
- Vacant posts
- Physical Infrastructure

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What happens next?

- Flying Start should be mainstreamed in Wales
- Health Visiting Review
- Staff comments

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