healthwatch Somerset

Health Visiting Service Report:

Views on early years support

Local health and care shaped by you

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Introduction

Healthwatch Somerset is the county's independent health and care champion. It exists to ensure that people are at the heart of care. A dedicated team of staff and volunteers listen to what people like about local health services, and what could be improved. These views are then shared with the decision-making organisations, so together a real difference can be made.

This report is an example of how views are shared. Healthwatch Somerset has been talking to local people about their experiences and views of the Health Visiting Service in Somerset. This report tells you what people said when we spoke to them about the Service.

Background

The Health Visiting Service was brought into Somerset County Council from Somerset Partnership in April 2019. Alongside this Somerset County Council announced a cut to getset services that offers further support to those young children and their families with additional needs across the county.

Healthwatch Somerset became aware that there is now more pressure on fewer resources to achieve positive outcomes for young families in Somerset. We started discussions with Somerset County Council, who were keen to be involve, about this in July 2018 and worked with them to build this project. Healthwatch Somerset wanted to ensure that the right questions were asked to provide useful information for the Service going forward.

What we did

We created a survey that could be accessed online and completed at engagement events. The survey ran from 4 February to 14 April 2019.

It asked for the views of local people who had a caring responsibility for a child or children under five years of age.

The project was supported by eight volunteers who gave 32 hours of their time to the project.

We attended 23 engagement events with information about the project.

We contacted 10 local voluntary, community and online groups, and had a continuous presence through our website and social media feeds. Our press release was picked up by Burnham-on-Sea.com, Apple FM, Somerset County Council, and Tone FM News.

Who we spoke to

445 people responded to the survey.

95% of the respondents were female whist the remainder stated that they were either male (19 people) or transgender (1 person).

A breakdown of who we spoke to can be seen in Appendix A.

Key findings

- Two thirds of people were satisfied, or extremely satisfied with the level of support they received from the Health Visiting Service.
- Most people would like to access information about the health and development of their child/ children from the Health Visiting Service. This was closely followed by their GP surgery.
- A meaningful number of people reported that key contact points were missed or delayed (10%) and that ongoing communication with families did not meet people's expectations (7%).
- Breastfeeding support was mentioned most frequently as being a helpful source of support offered by the Service.
- People would like to see more drop-in clinics and groups that are both accessible and flexible to meet the needs of families. 21% of people told us that they would like to access information about the health and development of their child at local groups.
- Lack of communication was a big issue for many respondents. They felt that the Health Visiting Service did not keep track of families or keep in touch.

What people told us

Were you satisfied with the level of support you received from the Health Visiting Service?

66% of people were satisfied or very satisfied with the Service. 14% showed some level of dissatisfaction. The remainder had no strong feelings or reported that they had a variable experience.

We then asked people to tell us more about their experience. Experiences were extremely varied, with 242 positive mentions and 217 negative mentions. We grouped similar comments together into themes. Figures 1. and 2. show these themes in more detail.

> "As a first time mum I have sought reassurance several times from the team and every time I have received excellent responses from them."

Positive experiences

Figure 1. shows the positive themes relating to the Health Visiting Service. The number indicates how many comments made up the theme.

> "Very helpful, nice to have someone to support me and also just to have someone to talk to."

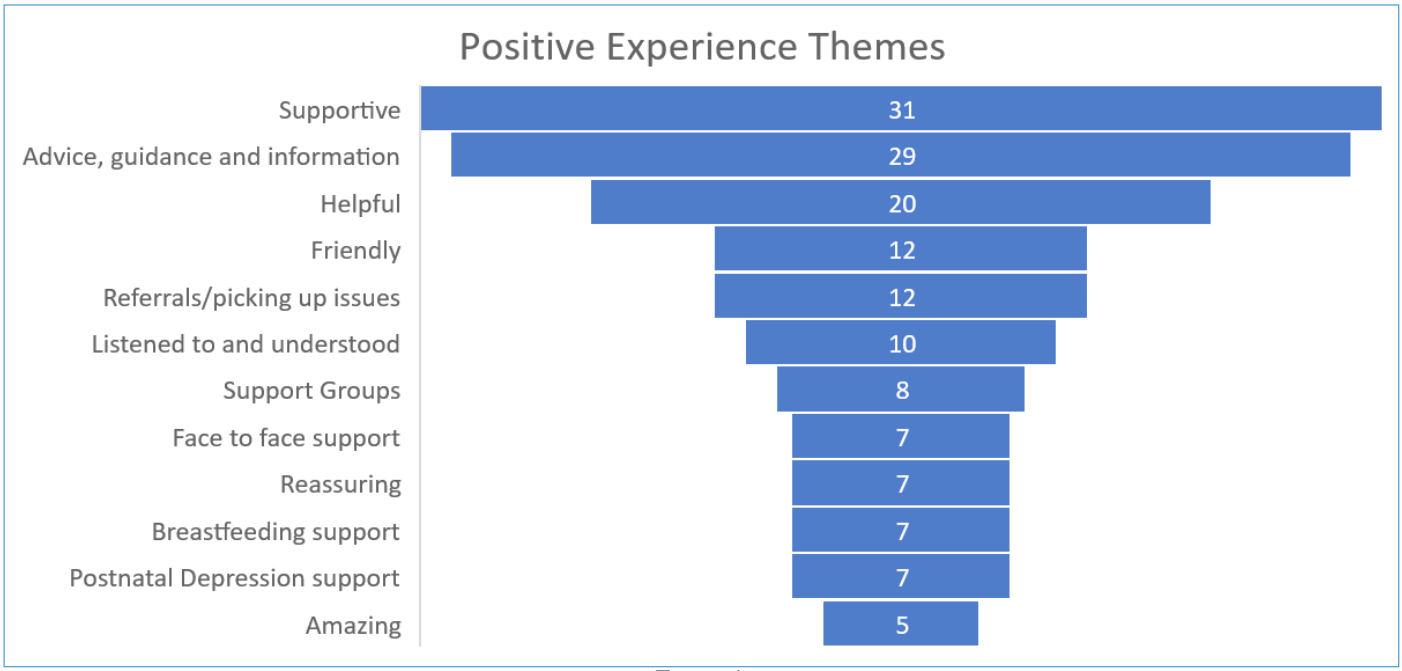

Figure 1.

Negative experiences

Figure 2. shows negative themes relating to the Health Visiting Service. Again, the number shows how many respondents mentioned the theme.

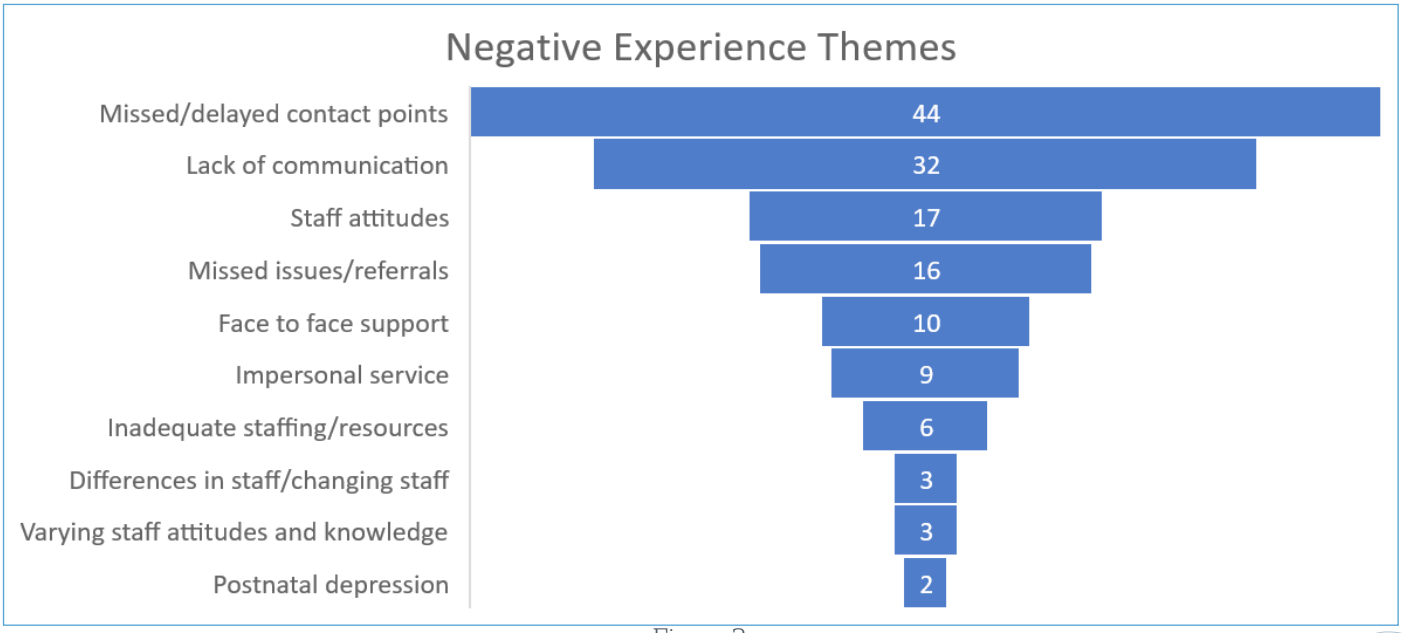

Figure 2.

> "The only time we came into contact otherwise was when I took her to clinic to be weighed. We have to travel 8 miles to clinic which is not really at a convenient time for us and only twice a month. Several times I made the effort to go and it had been cancelled, just with a note on the door."

"Following a prem birth in Bristol I had 2 visits at home, but then the early birth monitoring that was required was only offered at clinics. It was really difficult for me to go out with such a tiny baby, she didn't even fit in the car seat properly. It would have been so much less exhausting and stressful if I could have had a home visit."

What helpful support did you receive from the Health Visiting Service?

Figure 3. shows key words used in response to this question. The larger the word the more popular it was within the survey responses.

Support around breastfeeding the most popular form of support mentioned with 62 comments.

"I had regular visits from my health visitor to my home when my baby wasn't putting on enough weight and I was struggling to breastfeed."

The full summary of comments can be found in Appendix B. at the end of this report.

Figure 3.

Was there anything less helpful offered by the Health Visiting Service?

15 people felt that the lack of communication with the Health Visiting Service was unhelpful.

16 respondents felt that judgemental or patronising comments were not helpful to them, and this was especially true when discussing switching to formula feeding.

"Appointments missed and health visitor does not turn up. They don't call back - have to keep chasing."

"Support seemed to be there for breastfeeding mums more so than bottle. Everyone I know who breastfed had regular visits whereas as I didn't."

> "They are not on top of who needs check-ups and visits. It is well known locally that they don't often do checks at 2 or 3 years old unless you track them down."

13 people commented that the lack of visits after their child's first birthday was very unhelpful. Contact seems to fade after this point, unless parents chased up the Service.

The full summary of comments can be found in Appendix C. at the end of this report.

Tell us if there is anything you feel could improve the Health Visiting Service?

More drop-in clinics and baby groups

34 people mentioned that access to additional free drop-in clinics and baby/toddler groups would improve the Health Visiting Service. More specifically, because many services/groups were overcrowded, people often felt rushed. Specific clinics and groups mentioned were: breastfeeding, antenatal and postnatal, buggy fit, swimming groups, Sure Start, sleeping and eating.

17 respondents also noted that clinics and groups need to be more accessible and flexible to those who are using them. One respondent suggested partnerships with other agencies and volunteer-run community groups would ensure support could be accessed locally and in a timely fashion.

> "Drop-in clinics that last longer than an hour. They only have 1 hour, two times a week which makes it hard to catch if you have other commitments."

> "The 0-6 month group would be useful but I can't go as I would have to take the older child too which isn't allowed."

One respondent even found that they were unable to take their other child to a group, leaving them missing out on the Service.

Improved communication

29 people felt that improving communication would greatly improve the Health Visiting Service. This included the addition of appointment reminders, replying to answer phone messages, available phone support, and notification of changes in named Health Visitor, following up on queries and missed appointments.

> "I wasn't aware that weigh-in days/times had changed and also that the location had changed."

> "When moving to an area surely a child should be followed-up. We had no issues so didn't need the team but many would need them."

Other methods of communication recommended were the use of emails, social media and a mobile app that gave details of FAQs, clinic times (and updates) and contact numbers.

Regular/on time visits and contact points

> "More regular/on time visits - my son's 12-month appointment was done early and I had to chase his 2-year one at 2 years 6 months. This is not good for a child who could be at risk or mums that need help."

23 people felt that they needed more regular visits and for these to be on time. As previously mentioned, contact points after one year were often missed and this had a negative effect on the level of care received by the respondents.

This was especially important for those who were first time parents.

> "Perhaps more support (if required) for first time parents around feeding and generally coping with a new baby. Second time round if all is well, then the current level of visits is probably fine."

More health visitors and funding

18 people believed that more funding for the Health Visiting Service would greatly improve it. This was seen as especially important when helping vulnerable families.

> "They are totally stretched. Especially with getset services being under threat. This early years help intervention is so critical, as more vulnerable families come through the system."

More home visits

18 people felt that the offer of more home visits would improve the Health Visiting Service, especially as this could assist in early intervention for children with health and developmental issues.

> "First couple of weigh-ins for two or more children should be home visits. As it's difficult for mums to organise them all to get them to the centres."

Home visits were also seen as beneficial for those with multiple children, as getting out to clinics would be difficult to arrange.

More home visits were also seen as important for first time parents, who would prefer to be seen in their own home environment.

More breastfeeding support

16 people mentioned that they would like more breastfeeding support and up-to-date, advice and information around tongue tie.

Up-to-date and consistent advice

16 people mentioned that all staff should have the same level of up-to-date and consistent advice, and where needed, be trained in newer approaches.

This was also the case for those with premature babies:

The level of care from region to region was mentioned as being inconsistent, and an area that could be improved.

> "More up-to-date information on premature babies and more liaison between the health visitors and hospital when a premature baby is still under consultant care, as conflicting information is regularly given."

Seeing the same Health Visitor

15 people noted that being able to see the same health visitor would have improved the Service. Reasons for this were mentioned previously and included building trust, rapport and knowledge of an individual child's needs.

The full list of suggested improvements can be found in Appendix D. at the end of this report.

Tell us where you access information about your child's health and development.

The top 5 most popular answers were:

- Health Visiting Services (60%)
- GP surgery staff (57%)
- Friends/family (54%)
- Red Book (48%)
- Facebook (40%)

> "It would be nice if there was enough easily accessible and accurate advice readily available. However, too often I'm left with Google which can be confusing, outdated or inaccurate."

Figure 4. Shows where people currently access information.

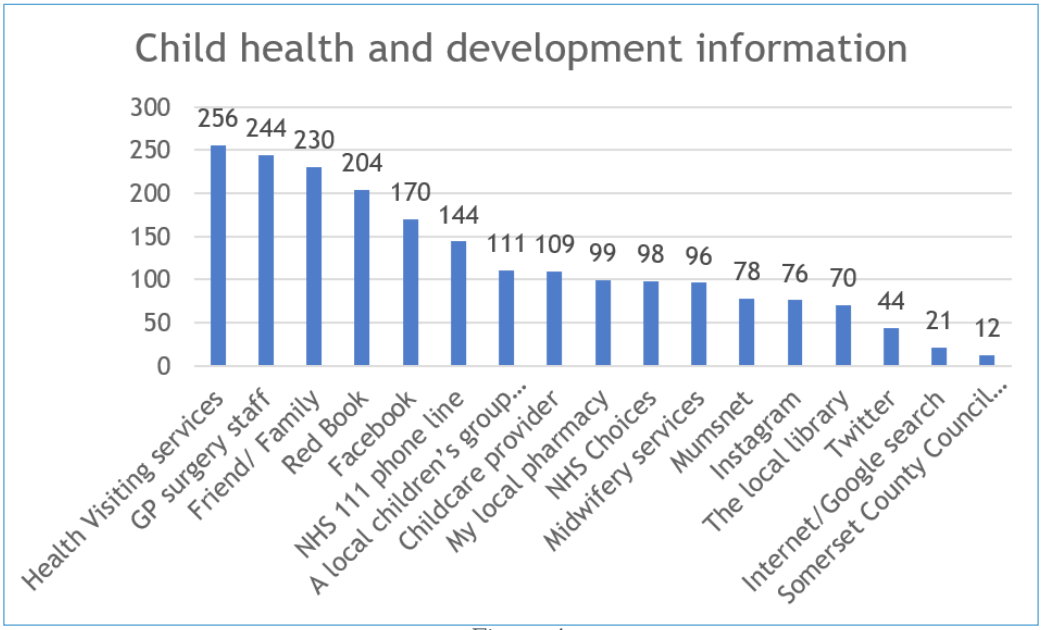

Figure 4.

What information accessed has been most useful to help you with the health and development of your child?

Information provided by the Health Visiting Service and GP surgery was the most commented on Service. Milestone tracking was also seen as beneficial and often reassuring.

The full list of useful information can be seen in Appendix E. at the end of this report.

Was there any information that was not so useful?

People told us that lack of contact from the Health Visiting Service and comments made were unhelpful.

The full list of unhelpful information can be seen in Appendix F. at the end of this report.

Where would you most like to access information about the health and development of your child?

The top 5 places that respondents wished to access information were:

- Health Visiting Services (66%)
- GP surgery staff (54%)
- Friends/family (24%)
- Local childrens groups (23%)
- Red Book (23%)

Figure 5. shows where people would like to access information.

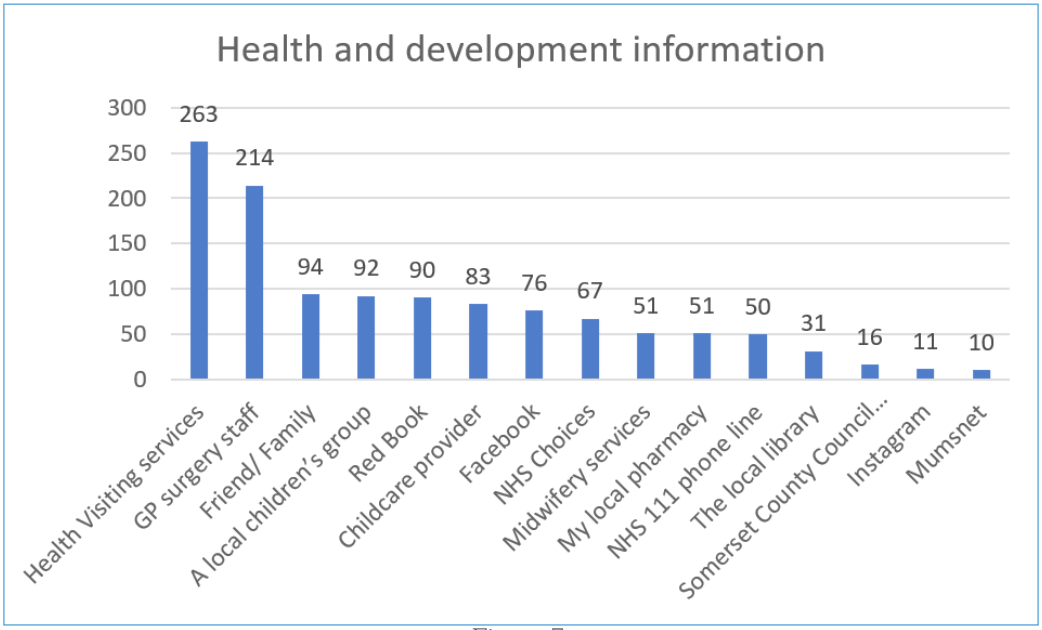

Figure 5.

Is there any further information you would have liked to help you with the health and development of your child?

17 respondents commented that signposting information relating to groups and activities would have helped with the health and development of their child. Respondents also felt that more groups that give information relating to different issues (such as breastfeeding, allergies, speech development etc.) would have been beneficial.

> "Expected milestones (based on ages and stages) rather than Googling and getting multiple versions. Ways to support and encourage their development, who to contact for various concerns."

Nine respondents would have liked more information regarding the expected milestones of their child.

Related to this, two people also commented that those with premature babies should be given separate information regarding milestones as these can be different to other children.

Two people mentioned that they would have liked information before giving birth regarding the exact role that the Health Visitor plays, and when appropriate to contact them.

The full list of further information can be seen in Appendix G. at the end of this report.

Recommendations

This report provides valuable insight into the Health Visiting Service from the point of view of those who use it. This information should be used to improve experiences going forward. Some key considerations for Somerset County Council are:

More drop-in clinics and groups

These were mentioned on many occasions as playing a positive role in the health and development of a child/children, and people want to continue to access information and support from them. Somerset County Council should review current groups, identify improvements and look at any gaps in need that exist that could be met by expanding the remit of current groups or by creating new groups.

Improved communication with families

Many of the negative experiences that people had with the Health Visiting Service related to communication. People either did not like the

way they were communicated with by the Service, or they felt there was too little communication. Somerset County Council should use the detailed information provided by Healthwatch Somerset to improve communication with families especially around delayed or missed contacts.

Strong links with primary care

People told us that they want to access information about the health and development of their children from the Health Visiting Service and their GP surgery. There is an expectation from the public that they are connected and, therefore, there should be strong links between GP surgeries and the Health Visiting Service.

Continuity of care

People valued consistency of information, therefore, Somerset County Council should consider training for health visitors and other professionals within the Service to ensure that they are providing consistent and up-to-date messages and information.

People also valued continuity of care and whilst it is recognised that resource is a factor in lack of continuity, Somerset County Council could look at ways for people to have access to as few different professionals as possible.

Improved feeding support

People talked to us a lot about feeding their baby and additional support they would welcome. The Service should use this information to understand how they can better support families with their choice of feeding.

Specific issues

Moving house, premature births, postnatal depression and tongue tie were things that were mentioned several times as having an impact on the experience of the family with the Health Visiting Service. These experiences should be considered to see whether the processes in place best support the families.

Stakeholders

This report has been shared with Somerset County Council, who gave us this response:

We would like to thank the parents who responded, and the volunteers and staff who conducted this survey on behalf of Healthwatch Somerset. Our aim was to inform service development and so we will now use these findings to address some of the areas identified, within the resources available to us. We are pleased to note that the majority of respondents were satisfied or extremely satisfied with the service they received, but acknowledge there are service delivery areas that we can improve on, some of which we had already identified, however, this report is valuable in assisting with this work.

Next steps

We know that it is important that people know what has happened as a result of them sharing their experiences with us. We are already working with Somerset County Council to use the information to develop services. Our findings will be presented to the Health and Wellbeing Board, the report will be published on our website, and sent to Healthwatch England.

Thank you

Healthwatch Somerset would like to thank everyone who took the time to contribute their views and experience through the engagement activities. Thanks also to our dedicated volunteers who helped to support the engagement activity. Without them we would not have been able to reach the numbers of people that we did.

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Appendices

Appendix A. The people we spoke to

Age Range

The ages of participants can be observed in Figure 6.

90% of respondents were White British. 7% were white other and the remainder Black African, any other Asian background, Chinese, Romany/Gypsy, Pakistani and White and Asian. 1% preferred not to disclose their ethnicity.

Geographical spread

The geographical locations of respondents are shown in Figure 7.

Participants relationship to the child/ children

88% of the respondents were mothers, 5% were fathers, 4% Grandparents, 2% Nanny/ Childminder/Au Pairs. Guardians and Early Years Practitioners also answered the survey.

Number of Children under 5 years

68% of the respondents had one child under 5 years, while 30% had two children, and 2% had three children.

Age of child/children

The ages of the children can be seen in Figure 8.

Use of the Health Visiting Service

We asked "how many times have you had contact from the Health Visiting Service for your child?":

- 29% of children had contact 7 times or more by the Health Visiting Service
- 27% of children had contact 3-4 times
- 23% had contact 1-2 times
- 14% had contact 5-6 times
- 8% responded other

Of those who responded other, many were unsure as to the contact time due to being

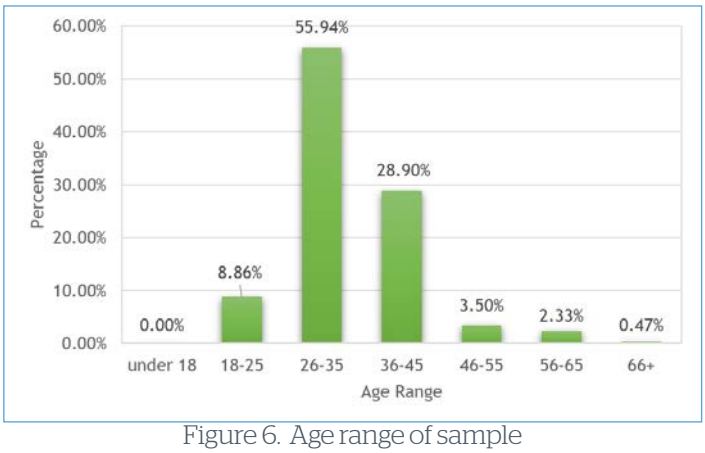

Figure 6. Age range of sample

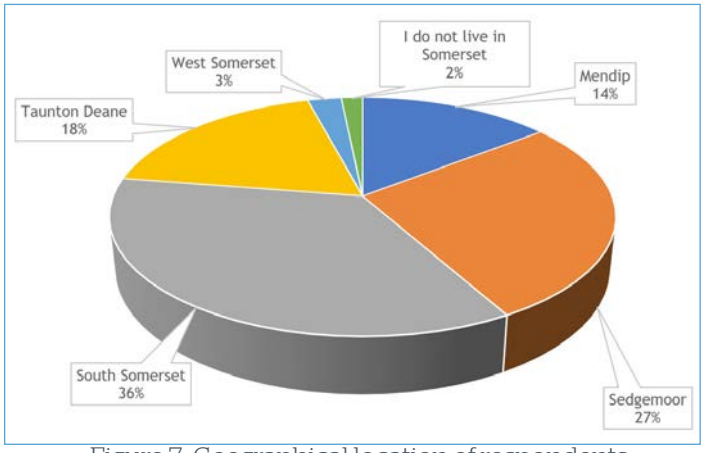

Figure 7. Geographical location of respondents

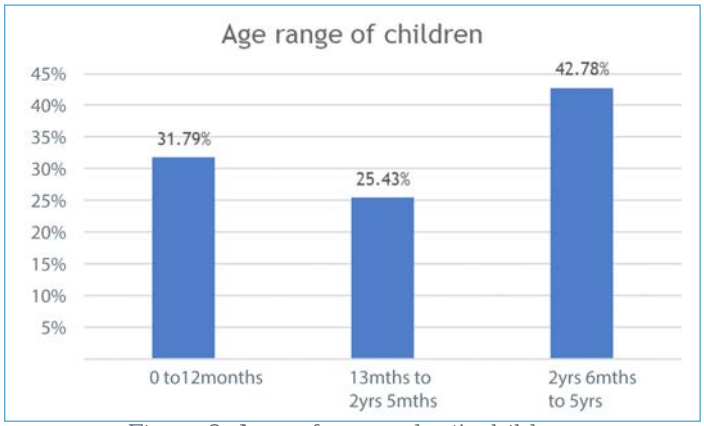

Figure 8. Ages of respondent's children

a grandparent, or other care-giver. There were nine reports that respondents had had no contact time with Health Visitors, and this seemed to have been the case more if recently moved into the Somerset area. A few respondents said that they only saw Health Visitors for weigh-ins and clinics. Many responses noted that they had seen Social Services instead of Health Visitors.

Appendix B. Helpful support comments

Theme	Number of comments
Breastfeeding support and information	62
General advice/signposting	31
Weigh-ins	28
Nothing was helpful	30
Reassurance from HV	21
Referrals from HV	20
Home visits	17
Weaning advice	16
Milestone/development checks and advice	13
Post-natal mental health support	13
Drop-in clinics	12
Just knowing support is there	12
Diet/food advice	11
Sleep advice	9
Support in the early stages	8
Speech advice	5
Phone calls	5
New-born baby checks	5
Information leaflets	5
Emotional support	5
Meetings and support groups	5
Rash/skin advice	4
Severe reflux advice	4
The opportunity to have extra visits	4
Help sorting finances	4
Having a listening ear	4
Tongue Tie clinic	4
Toilet training advice	4
Allergy advice	4
Unrushed support	3
Help from midwife	3
Hearing checks	3
Baby massage	3
Behaviour support	3
Advice about making the house safe	3
Having consistent staff	2
Family	2
Advice on wind	2

Theme (continued...)	Number of comments
Postnatal groups	2
getset team	1
Prenatal visits	1
Frequent visits	1
Red Book	1
Charity support	1
Seeing a specialist	1
Advice for grandparents/childminders/nanny etc.	1
Jaundice advice	1
Encouragement	1
Bereavement support	1
Marital issue support	1
Postnatal depression support	1
Walking support	1
Cradle cap advice	1
Fussing advice	1
Talking sessions	1
Sure Start groups	1
Cookery course	1
Touchpoint group	1
Toddler group (which has since closed)	1

Appendix C. Unhelpful support comments

Theme	Number of comments
Judgmental/patronising comments	16
Lack of contact/no contact information given	15
Lack of visits after 1 year	13
Lack of breastfeeding support	12
Cuts to free services/classes/clinics	11
No continuity of care	9
Unable to get to clinic/groups	7
Overstretched/rushed service	6
Breastfeeding over bottle	6
Inflexible/limited appointments	5
Inaccurate information	5
Inconsistency of HV information/service	5
Not personalised	4
Didn't offer any support	4
Lack of information about food allergies	2
No weaning support groups	2
No feeding advice	2
No follow up or forward planning	1
No tongue tie referrals	1
Not enough sleep training	1
Not enough reassurance	1
Too much emphasis on weight	1
Not enough practical advice/signposting	1
Only interested in baby and not mother	1
No comment	19

Appendix D. Suggested improvements to Service

Suggestion	Number of comments
More drop in classes/baby groups	34
Improved communication	29
Regular and on time visits	23
More Health Visitors/less patients per Health Visitor	18
More home visits	18
More accessible clinics	17
Breastfeeding support	16
Be able to see the same Health Visitor	15
Adequate resources available (funding etc.)	12
Up-to-date and consistent advice	11
More support for first time parents	10
Consistent care for each child	7
Better trained staff	5
HV Service become more integrated with childcare providers	5
More Health Visitors attending baby groups	4
Being non-judgemental about bottle feeding	3
More weaning support	3
More support for premature babies	3
Follow through with actions	2
Add contact option via Social Media	2
Be more caring and non-judgemental in general	2
Make referrals to other health care professionals	2
Mental Health support	2
More training in the signs of post-natal depression	2
First Aid courses	2
Understand individual child's needs	2
Share more resources online	2
Sleep training/referrals	2
More GP appointments	2
More signposting	2
Better variety of sessions	2
Extend service age	1
More visits for SEN Children	1
More support for single parents	1
Re-open Sure Start centre	1
Learn about child before visits	1
More awareness of digital offer	1
Information about car seats	1

Suggestion (continued...)	Number of comments
Milestone guidance	1
Keep confidentiality	1
Involve father	1
Less Health Visitors per group	1

Appendix E. Most useful information accessed

Useful information about child's health & development	Number of comments
Information from Health Visitor	44
General information	30
Information from GP	26
Milestone tracking	23
Information from other parents	23
Information from the internet	22
Information from support groups	22
Information from childcare providers	20
Red Book	17
NHS website	16
Friends	16
Social media	15
NHS 111	11
Information from Midwife	11
Reassurance	10
Family	9
Weigh-in clinics	7
Apps	6
Information from pharmacies	4
Library	2
Books	2
Scientific literature	1
First Aid course	1
Homestart	1
Children's Centre	1
Home visits	1

Appendix F. Unhelpful information

Unhelpful information about child's health & development	Number of comments
Misinformation on the internet (including Facebook and Mumsnet)	12
Opinion not backed by evidence	4
Staff attitudes	4
Health Visitors with differing advice	4
Rigid milestone information	4
Out-of-date information	3
Pressure for baby to gain weight	3
Red Book	3
Pushing breastfeeding	3
2 year check	2
Council website	2
Too many leaflets	2
Friends and family information	2
Discouragement of co-sleeping	2
NHS Choices	1
Lack of app for diagnosing symptoms	1
"Cry it out" method	1
Lack of communication between services	1
Information from GP	1
111 Service	1
Hospital wait	1
No information about oversupply of milk	1
Services being stopped	1
DVD on breastfeeding	1
No information on tongue tie	1

Appendix G. List of requested information

Requested information	Number of comments
Signposting to groups and activities/more local groups	17
Expected milestones	10
Support with breastfeeding	6
Weaning advice	4
Sleep support	3
Hearing and vision screening	3
Formula/milk information	3
More home visits	2
Allergy information	2
Speech development	2
Symptom checker	2
Support for grandparents	2
Clearer information about the role of the Health Visitor	2
Starting school information	1
Autism support	1
Information about starting nursery	1
Information about tongue tie	1
Vaccination information	1
Managing child with a temperature	1
Cleft information	1
Tantrum advice	1
Constipation advice	1
Information on sensory processing	1
More toddler specific information	1
Information about teeth	1
Phone support for quick questions	1
Health visitor app for information and signposting	1
Information for fathers	1
Sibling support	1
First time mum specific help	1
Knowing who my assigned Health Visitor is	1

Why not get involved?

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