

# The National Healthy Childhood Programme Making every contact count

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# What do we need to be healthy?















# Early Years Last a Lifetime



Reduced risk of criminal behaviour; tobacco, alcohol & other drug use; teen pregnancy

Increased capacity to avoid stress – induced conditions



# What we know about children in Ireland

- 25% of population are children-approx 68,000 births per year
- The child population of Ireland increased by 13.4% between 2002 and 2011
- Family profile in Ireland has changed
  - Between 2006 and 2011 there was a 12% increase in the number of families
  - Family size has declined to an average of 1.4 children
  - Almost 20% of private households are lone parent households-the vast majority of lone parents were mothers (87%) and almost 58% were onechild households.
  - 23% of births were to mothers born outside Ireland, compared to 15% in 2004

### **Universal Child Health Programmes**

- The delivery of child health programmes varies from country to country both in term of content and provider.
- The key components of child health programmes internationally are:
  - 1. Screening
  - 2. Child Health Reviews/surveillance
  - 3. Immunisations

# National Healthy Childhood Programme

- The provision of the Irish universal child health services is enshrined in various laws passed between 1907 and 2004, supported by policies and underpinned by strategies
- Service is free to all children
- In Ireland our model is currently based on Best Health for Children/Best Health for Children Revisited 2005
- 2014-2016 BHFC reviewed and updated, framework in draft

## National Healthy Childhood Programme

	Maternity & Infant Scheme		Free GP Care for under-6s		HSE Child Health, Immunisation Screening & Surveillance
	Hospital	GP	Immunisations	GP Under 6s contract	Public Health Nurses(PHNS), Community Medical Doctors(CMDs), Dental
Antenatal	6	6			
0 to 2 years	1 ♣ ♠ ♦	2 (mother & baby)	5		4 (♠)
2 to 5 years				1	3 contacts 1 CHSS preschool 1 school screening 1 school immunisation*
5 to 14 years				1	2 Dental** 1 immunisation (+ 2 HPV for girls)
Total	7	8	5	2	13*

- Neonatal Examination & Hearing Screening
- ▲ Bloodspot Screening can be done in hospital or by PHN

\*GPs in Donegal/Sligo/Leitrin give these imm. \*\*Dental at 2<sup>nd</sup>/4<sup>th</sup>/6<sup>th</sup> class but provision varies between CHOs

♦ BCG

#### Key Components of our National Healthy Childhood Programme

- 1. Health Promotion
- 2. Infant and Maternal Mental Health Assessment and Promotion
- 3. Screening
- 4. Surveillance of Physical health
- 5. Developmental Surveillance
- 6. Growth Monitoring
- 7. Immunisations
- 8. Needs Assessment
- 9. Dental



#### National Healthy Childhood Programme Key Issues

#### Key issues emerging

- 1. Acknowledgement that the wider determinants of health play a significant part in child and adult health
- 2. The benefits of a Child Health Programme based on a model of *progressive universalism* help for all and more for those who need it
- 3. The impact of the antenatal period on the development of the foetus
- 4. The importance of maternal mental health on infant mental health and development
- 5. The pivotal role of the parents in child development
- 6. Early identification of issues can improve the outcome for the child.

### **HSE Implementation Context**

- Key Enablers:
  - The Nurture Programme-Infant Health and Wellbeing
  - Healthy Childhood Policy Priority Programme as outlined in Healthy Ireland







THE NURTURE PROGRAMME Infant Health and Wellbeing

### The Nurture Programme – Infant Health & Wellbeing

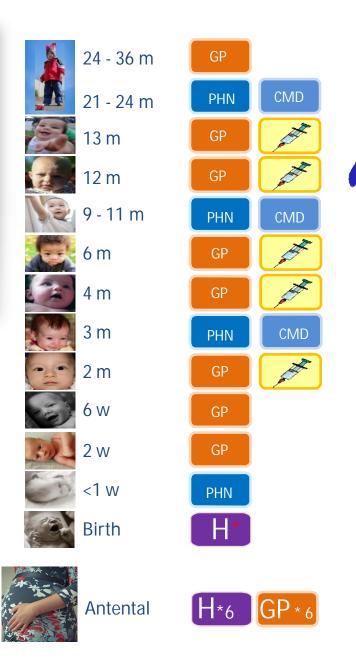
- Three year integrated programme of work (2016-2018) to improve health and wellbeing outcomes for infants and their families.
- Primarily within the HSE's Health and Wellbeing and Primary Care Divisions.
- Aims to support the strategic reform of universal health and wellbeing services for infants and their families.
- Implemented through a grant from Atlantic Philanthropies to the Katharine Howard Foundation (KHF).
- Delivered by the HSE with support from the Centre for Effective Services (CES).
- Atlantic Philanthropies is committed to providing €6.5m to the HSE towards the delivery of an agreed Implementation Plan.
- The HSE has committed to contributing leveraged budget, resources in kind and elements of matched funding to the delivery of the Programme.





Making Every Contact Count

0-3 years





### The Nurture Programme – Infant Health & Wellbeing

- The Programme has six key components;
  - Knowledge and Communications
  - Antenatal to postnatal
  - Health & Wellbeing Promotion and Improvement
  - Infant Mental Health and Supporting Parents
  - Standardised Health Records for Parents and Professionals
  - Training and Resources
- Currently developing a detailed implementation plan, with key deliverables, building on existing good practice.







# Interventions

- Based on the premise that:
  - Parent child relationship cannot happen in isolationparenting requires support:



- parents may be isolated family units are smaller; removed from extended families with little support network.
- We empower parents as the primary educators during the critical early years of a child's development
- Health and wellbeing of parents influences health and wellbeing of child
- Other inter-related contexts (family relationships, community, environments) influence and impact on the child's life
- Interventions will be universal (but the need for targeted interventions will be identified)
- Staff delivering service need appropriate training, support and resources





### Practical things we will see over the next 2 - 3 years

- Development of a new parenting and child health website
- Provision of information and advice to people planning a pregnancy



- Development of a new Healthy Pregnancy book and online content, adding to the existing Caring for your Baby and Child books and website
- Development of standards for antenatal classes and resources to support delivery
- Provision of universal access to the Child Safety Awareness Programme to guard against accidental deaths and unintentional injuries to babies and infants
- Training for practitioners to identify when a parent needs additional support, advice or information and access to effective referral pathways to specialist services when needed
- Promotion of Infant Mental Health, covering topics like bonding with baby, parentchild communications and supporting baby's early learning and development
- Provide additional supports to mothers to breastfeed whenever possible





### Impact of the Nurture Programme

- Enable the transformation of the child health service this is a quality improvement programme
- Improved child health and wellbeing outcomes



- Maximise our communications and interactions with parents
- Every parent will be confident that they are receiving an evidence-based service
- Harness the passion of the clinical teams
  - Many clinical leaders have shown that they are ready for the challenge through their participation on the implementation teams
- Improve staff morale through engagement, training and support
- Embed and sustain the changes using an implementation science approach









*"The foundations for virtually every aspect of human development – physical, intellectual and emotional – are laid in early childhood.* 

What happens during these early years (starting in the womb) has lifelong effects on many aspects of health and well-being – from obesity, heart disease and mental health to educational achievement and economic status."



#### **Further information**

Caring for your Baby books <u>www.hse.ie/caringforyourbaby</u>

Child Safety Awareness Programme: <u>www.hse.ie/childsafety</u>

The Nurture Programme – Infant Health and Wellbeing <u>www.hse.ie/nurtureprogramme</u>

GP under-6 card - GP U6 card <a href="http://www.hse.ie/eng/services/list/1/schemes/mc/gpvc/under6.html">http://www.hse.ie/eng/services/list/1/schemes/mc/gpvc/under6.html</a>

Maternity and Infant scheme <u>http://www.hse.ie/eng/services/list/3/maternity/combinedcare.html</u>

Breastfeeding www.breastfeeding.ie



