
Report To:	Community Health & Care Partnership Sub Committee	Date:	23rd October 2014
Report By:	Brian Moore Corporate Director Inverclyde Community Health & Care Partnership	Report No:	CHCP/48/2014/SMc
Contact Officer:	Sharon McAlees Head of Children's Service & Criminal Justice	Contact No:	01475 715282
Subject:	Family Nurse Partnership (FNP) Programme in Inverclyde		

1.0 PURPOSE

- 1.1 The purpose of this report is to update the Sub-Committee on progress made by Inverclyde CHCP in relation to the introduction of the Family Nurse Partnership (FNP) programme in Inverclyde.
- 1.2 The Sub-Committee is also asked to note the recommendations at Section 3 of the report.

2.0 SUMMARY

- 2.1 The Family Nurse Partnership (FNP) is a preventive, intensive home visiting programme offered to first time young mothers (19 and under) and their families. Young women are enrolled in early pregnancy (between 16 and 28 weeks gestation) and are visited until the baby is two. Family Nurses who deliver the programme come mainly from health visiting and midwifery and they receive additional training at masters level to equip them for their new role.
- 2.2 FNP is the final evidence based programme in a suite of measures being implemented under the early intervention agenda outlined in Getting it Right for Every Child and the Early Years Collaborative.
- 2.3 The overarching goals of the programme are:
 - To improve antenatal and birth outcomes
 - To improve child health and development
 - To improve the economic self-sufficiency of the family
- 2.4 The programme is hosted by Renfrewshire CHP and covers Renfrewshire, East Renfrewshire and Inverclyde.
- 2.5 The FNP Steering Group meets on a bi-monthly basis and reports to the FNP Advisory Board of NHSGG&C. A detailed implementation plan outlining stage actions continues to be reviewed and developed on an ongoing basis by the group.
- 2.6 A formal launch of the FNP programme has been held in the Beacon Arts Centre, Greenock on 25th August 2014.

3.0 RECOMMENDATIONS

- 3.1 Members are asked to note the content of this report and the progress thus far in implementing the FNP in Inverclyde.

**Brian Moore
Corporate Director
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4.0 BACKGROUND

4.1 The Family Nurse Partnership (FNP) has a robust evidence base spanning 30 years including 3 large scale research trials in the USA¹. These have shown consistent short and long term benefits for children and families which include:

- reductions in smoking in pregnancy
- greater intervals between and fewer subsequent births
- fewer accidents
- reduction in child abuse and neglect
- better language development in children
- increases in employment
- greater involvement of fathers

4.2 Each nurse has a maximum caseload of 25 families, and visits each family every 1 or 2 weeks following a manualised programme (minimum of 64 visits over the period outlined). The programme is underpinned by a robust training programme, regular supervision of the nurses and a strength based approach.

4.3 In a Lancet review² FNP was shown as only one of two preventative programmes that have been able to evidence a reduction in child abuse and neglect.

4.4 FNP is currently being rolled out in Scotland, under licence, which is held jointly by the University of Colorado and the Scottish Government and supported by NHS Education Scotland (NES) who ensure alongside the local supervisor that the fidelity of the model is being maintained.

4.5 Evaluations of the Lothian pilot and links to further research are available at the following link:

<http://www.scotland.gov.uk/Topics/People/Young-People/early-years/parenting-early-learning/family-nurse-partnership>

4.6 Staffing: The staff involved in the programme are now in post and include:-

- FNP Supervisor
- 6 FNP Nurses
- Data Manager.
- Child Protection Adviser – Nominated Child Protection Unit adviser.
- Psychologist – Specific psychology sessions are made available to FNP nurses in support of their role.

4.7 Accommodation: The team have a main base within Renfrew Health & Social Work Centre, with hot desk space within East Renfrewshire & Inverclyde (Port Glasgow Health Centre). The FNP team accommodation and associated IT infrastructure is now fully established.

4.8 Training: The FNP Lead and Senior Managers from across the 3 CH(C)P areas have benefited from FNP *Using Our Strengths Training for Managers* delivered by Gail Trotter-FNP Clinical Director and Ali Knights – FNP Education Lead NES.

The FNP Learning Programme for the FNP Supervisor commenced on 26 March 2014. This will be an ongoing schedule for 14 months, provided by the Department of Health in England. This is a Core Model Element of the programme and a high level of commitment is required for this mandatory training.

- 4.9 Stakeholder mapping: A stakeholder mapping and analysis exercise has been undertaken across the 3 CH(C)Ps areas to identify key stakeholders and the level of engagement required for FNP. This is supported by a communication and engagement plan which will be kept under review and amended as required.

Engagement sessions have taken place with GPs, the Inverclyde Child Protection Committee and children's services staff more generally in Inverclyde, to ensure wide understanding of FNP. These sessions were positively received. Information and learning events for stakeholders are ongoing, and form the first stage of our structured and ongoing development plan.

- 4.10 Risk Register: A risk register has been developed in the context of the existing NHSGGC FNP Risk Register. This will be reviewed and updated as required through the local FNP Steering group and NHSGGC FNP Programme Board.

5.0 PROPOSALS

- 5.1 The key next steps in progressing FNP implementation are:

- A comprehensive induction programme and Learning Needs Analysis will be undertaken by all new Family Nurses.
- The team, which has been operational from mid-July 2014, to commence recruiting clients for this cohort.
- Stakeholder Analysis completed and communication and engagement plan initiated.
- Organisational development Plan is in progress.
- Information and learning events to continue

6.0 IMPLICATIONS

Finance

- 6.1 There are no specific financial implications as the programme is funded centrally from NHSGGC.

Financial Implications:

One off Costs

Cost Centre	Budget Heading	Budget Years	Proposed Spend this Report £000	Virement From	Other Comments
N/A					

Annually Recurring Costs/ (Savings)

Cost Centre	Budget Heading	With Effect from	Annual Net Impact £000	Virement From (If Applicable)	Other Comments
N/A					

Legal

- 6.2 Not applicable.

Human Resources

6.3 Not applicable.

Equalities

6.4 A final draft of the EQIA has been completed and submitted. This will be revisited throughout the programme and amended/updated as required.

Repopulation

6.5 Not applicable

7.0 CONSULTATION

7.1 Wide ranging consultations were undertaken with the full range of partner agencies.

8.0 BACKGROUND PAPERS

8.1 These can be found via the link at paragraph 4.5.