

REPORT TO: Health and Wellbeing Board
DATE: 14th January 2015
REPORTING OFFICER: Director of Public Health
PORTFOLIO: Health and Wellbeing
SUBJECT: Family Nurse Partnership
WARDS: Borough wide

1.0 PURPOSE OF THE REPORT

1.1 The purpose of this report is to provide background information for the presentation on the Family Nurse Partnership.

2.0 RECOMMENDATION: That the Board note the contents of the report and presentation

3.0 SUPPORTING INFORMATION

What is Family Nurse Partnership (FNP)?

3.1 FNP is an evidence- based maternal and early years public health programme that provides intensive support to young, first time mothers and their families. Using a psycho-educational approach the programme offers regular home visits delivered by highly trained nurses, from early pregnancy up until the child's second birthday.

3.2 The Family Nurse Partnership is a preventative programme aimed at improving the life chances of the most disadvantaged children and families in society. The main aims of the programme are as follows:

- To improve pregnancy outcomes, so that the baby has the best start in life
- To improve the child's health and development by developing parenting knowledge and skills
- To improve parents' economic self-sufficiency, by helping them to achieve their aspirations (such as employment or returning to education)

3.3 FNP also enables young mothers and fathers to:

- Build positive relationships with their baby and understand their baby's needs
- Make the lifestyle choices that will give their child the best start in life

- Build their self-efficacy (belief and ability to plan and achieve their goals)
 - Build positive relationships with others, modelled by building a positive relationship with the family nurse
- 3.4 Evidence from research on the effectiveness of FNP shows that FNP improves the lives of vulnerable young children and mothers in the short, medium and long term:
- Improved pregnancy outcomes
 - Reduced child abuse and neglect
 - Improved school readiness
 - Reduced youth crime
 - Improved employment for mothers, and fewer subsequent pregnancies with bigger gaps between births

National Context

- 3.4 There is a Government commitment to increase the number of Family Nurse Partnership places available in England at any one time to 16,000 by 2015.
- 3.5 Local Authorities will take on the responsibility for commissioning FNP in 2015. Strategic commitment will be a key priority to ensure the long-term sustainability of the programme.

FNP in Halton

- 3.6 The Family Nurse Partnership has been commissioned by NHS England to provide a service in Halton. Staff have now been recruited and started seeing patients in November 2014. The provider organisation is Bridgewater Community Health Care Trust, who are licensed to deliver the programme.
- 3.7 A Halton Family Nurse Partnership Board has also been established, including representatives from NHS England, CCG, Bridgewater, Public Health and partner organisations.
- 3.8 Commissioning responsibility for FNP will transfer to Halton Borough Council in October 2015.

4.0 POLICY IMPLICATIONS

- 4.1 Halton's Health and Wellbeing Strategy identifies Improved Child Development as one of five key priorities for action. This priority was chosen for a number of reasons including; child development has a significant impact on child health and wellbeing which remains into adult life; Halton has a high percentage of children who do not reach a good level of development by age five and; it is amenable to change through evidence-based interventions.

5.0 OTHER/FINANCIAL IMPLICATIONS

5.1 Funding for FNP (along with the commissioning responsibility) will transfer to Halton Borough Council in October 2015. Assuming that the service operates within agreed budgets, no adverse financial implications are expected.

Independent studies shows that the Family Nurse Partnership programme results in financial benefits to participants, the public purse and wider society.

- Economic benefits increase over time as the children get older but there are indications that **the cost of the programme is recovered by the time the children are aged four** for the highest risk families and certainly by age 12
- A recent updated study by Washington State Institute for Public Policy estimated long-term benefits of almost \$23,000 per participant.

6.0 IMPLICATIONS FOR THE COUNCIL'S PRIORITIES

6.1 Children and Young People in Halton

Early Help and Support is one of the key priorities for the Halton Children and Young People's Plan. As well as supporting this priority the FNP initiative also promotes the overarching priority of "Working Together".

6.2 Employment, Learning and Skills in Halton

One of the key aims of the Family Nurse Partnership is to improve the economic self-sufficiency of parents by helping them to achieve their aspirations. This could include accessing employment opportunities or returning to education following the birth of their child.

6.3 A Healthy Halton

As outlined in 4.1 above, the Family Nurse Partnership contributes directly to addressing Health and Wellbeing priorities.

6.4 A Safer Halton

The Family Nurse Partnership aims to improve life chances and build positive relationships within families which in turn should lead to reductions in youth crime, domestic violence and child abuse/ neglect.

6.5 Halton's Urban Renewal

N/A

7.0 RISK ANALYSIS

A strategic commitment is required from partner agencies if FNP is to succeed locally.

8.0 EQUALITY AND DIVERSITY ISSUES

This is in line with all equality and diversity issues in Halton.

9.0 LIST OF BACKGROUND PAPERS UNDER SECTION 100D OF THE LOCAL GOVERNMENT ACT 1972

There are none within the meaning of the Act.