

Health Visitor Service Delivery Metrics, England

Quarter 2 2013/14 (July to September 2013) to Quarter 3 2014/15 (October to December 2014)

Published 22nd May 2015

Background

The Health Visiting service leads on the delivery of the Healthy Child Programme (HCP), which was set up to improve the health and wellbeing of children aged 0 to 5 years. This is done through health and development reviews, health promotion, parenting support, screening and immunisation programmes¹. The Health Visiting service consist of specialist community public health nurses and teams who provide expert information, assessments and interventions for babies, children and families including first time mothers and fathers and families with complex needs.

From April 2013, NHS England assumed responsibility for the health visiting workforce growth and service transformation via the NHS Mandate and Section 7A agreement². This requires delivery of the new model of health visiting and full coverage of the healthy child programme by 2015 by all health visiting services. Responsibility for commissioning health visiting services will be transferred to Local Authorities from October 2015.

The Health Visitor (HV) service delivery metrics were developed by NHS England in order to provide assurance on service transformation in England in line with the 7A agreement. They cover currently the antenatal check, new born visit, the 12 month assessment and the two to two and a half year assessment and report on the following indicators:

- Number of mothers who received a first face to face antenatal contact with a Health Visitor at 28 weeks or above;
- Percentage of New Birth Visits (NBVs) completed;
- Percentage of 12 month development reviews completed by the time the child turned 12 months;
- Percentage of 12 months development reviews completed by the time the child turned 15 months;
- Percentage of 2-2.5 year reviews completed;
- Percentage of Sure Start Advisory Boards with a HV presence.

These metrics are used as management information and have been collected quarterly at provider level since Quarter 2 2013/14. They are reported here by region and nationally.

¹ For further information, please consult the NHS England webpages on the Health Visiting Programme: <http://www.england.nhs.uk/ourwork/qual-clin-lead/hlth-vistg-prog/>

² For further information, please consult: <https://www.gov.uk/government/publications/public-health-commissioning-in-the-nhs-2015-to-2016>

Key findings

- Coverage across all indicators (the percentage of providers submitting data that passed validation checks) showed an average of 69% in Quarter 2 2013/14 and is around 96% in Quarter 3 2014/15, a small number of issues remain with data coverage and quality.
- Overall, the percentage of children receiving health visiting services has increased from Quarter 2 2013/14 to Quarter 3 2014/15:
 - The percentage of NBVs undertaken within 14 days in England increased from 74% in Quarter 2 2013/14 to 82% in Quarter 3 2014/15.
 - The percentage of children receiving the 12 month development review by the time they turn 15 months has increased from 64% in Quarter 2 2013/14 to 76% in Quarter 3 2014/15.
 - The percentage of children in England who received a 2-2.5 year review by the time they turned 2.5 years increased from 63% in Quarter 2 2013/14 to 69% in Quarter 3 2014/15.
- Notable changes from 2014-15 Q2 to 2014-15 Q3 are:
 - An increase in the number of antenatal visits, with 4930 additional visits reported;
 - An increase in the proportion of New Birth Visits within 14 days from 79% to 82%.
- Overall delivery of the new birth visit remained high at 95% in Q3 2014-15

Findings

Data Quality and Coverage

Coverage for all indicators is measured as the percentage of providers submitting data that passed validation checks – see table 1a for national and regional data for Quarter 3 2014/15. Overall, it has increased over the last four quarters at national level – see table 1b.

Coverage across all indicators showed an average of 69% in Quarter 2 2013/14 and is around 96% in Quarter 3 2014/15, but there are issues remaining with data coverage and quality. Coverage figures over time at regional level can be found in Appendix 1.

Table 1a. Coverage (percentage of providers that passed validation checks), England, Quarter 3 2014/15

Indicators	North	Midlands & East	London	South	England
First antenatal visit at 28 weeks or above	98%	97%	100%	100%	98%
New birth visit within 14 days	100%	100%	95%	100%	99%
New birth visit after 14 days	100%	100%	95%	100%	99%
Development review at 12 months	100%	100%	100%	100%	100%
Development review at 12 months completed by 15 months	98%	100%	89%	79%	93%
Development review at 2-2.5 years	100%	97%	100%	96%	98%
Sure start advisory board with health visitor present ³	93%	89%	47%	82%	82%

Table 1b. Coverage (percentage of providers that passed validation checks), England, Quarter 2 2013/14 to Quarter 3 2014/15

Indicators	2013/14 Q2	2013/14 Q3	2013/14 Q4	2014/15 Q1	2014/15 Q2	2014/15 Q3
First antenatal visit at 28 weeks or above	74%	88%	94%	93%	95%	98%
New birth visit within 14 days	77%	91%	96%	93%	94%	99%
New birth visit after 14 days	74%	90%	96%	91%	93%	99%
Development review at 12 months	73%	87%	95%	94%	97%	100%
Development review at 12 months completed by 15 months	54%	74%	84%	84%	88%	92%
Development review at 2-2.5 years	74%	83%	88%	89%	96%	98%
Sure start advisory board with health visitor present	57%	78%	77%	86%	81%	82%
Average	69%	85%	90%	90%	92%	96%
Standard deviation	9%	6%	7%	4%	6%	6%
Range	54% - 77%	74% - 91%	77% - 96%	84% - 94%	81% - 97%	82% - 100%
Median	74%	87%	94%	91%	94%	98%

³ Providers that submit zero values for numbers of Sure Start Advisory Boards in the period are currently classified as having an invalidated response for this indicator. NHS England is seeking further information that will help to confirm whether it is appropriate to classify zero responses as valid in future. In particular, coverage figures for London region, where almost half of providers submit zero values, should be interpreted with caution.

Coverage is usually lower for the indicator ‘number of 12 month reviews completed by the time the child turned 15 months’. Nonetheless, coverage has increased from 54% in Quarter 2 2013/14 to 92% in Quarter 3 2014/15.

Health Visitors Activity

These metrics measure whether HV visits occurred and as such represent Health Visitor activity. Whilst activity figures are presented for England and the regions (Tables 2a and 2b and appendix 2), where these are based on low coverage, caution should be used in their interpretation. For example, in Q2 2013-14 there was only 54% coverage for the 15 month review touch-point nationally, meaning that the just under half of the providers did not submit a validated return. Whilst 64% of these providers did submit a validated return, there is less certainty that this is representative of all providers than there would be with greater coverage. Coverage figures giving the percentage of providers who have returned data passing the validation checks for each indicator are given in tables 1a and 1b and in appendix 1.

Commentary on each indicator is presented in the following sections. A summary of the National and region level results in Quarter 3 2014/15 is given in table 2a for each indicator. Table 2b provides national level data from Quarter 2 2013/14 to Quarter 3 2014/15 by indicator (see appendix 2 for the regional breakdown).

The regional and Area Team breakdowns of each of these indicators for Quarter 3 2014/15 are provided in the accompanying Health Visitors Service Report Quarter 3 2014/15 xls file

Table 2a – Activity Summary, Regions and England, Quarter 3 2014/15

Indicators	North	Midlands & East	London	South	England
First antenatal visit at 28 weeks or above	19,586	13,616	2,101	14,859	50,162
New birth visit within 14 days	82%	89%	84%	70%	82%
New birth visit after 14 days	16%	9%	9%	22%	14%
Development review at 12 months	81%	78%	42%	64%	69%
Development review at 12 months completed by 15 months	86%	85%	59%	67%	76%
Development review at 2-2.5 years	81%	77%	44%	67%	69%
Sure start advisory board with health visitor present	94%	97%	98%	99%	97%

Table 2b – Health Visitors activity, England, Quarter 2 2013/14 to Quarter 3 2014/15

Indicators	2013/14	2013/14	2013/14	2014/15	2014/15	2014/15
	Q2	Q3	Q4	Q1	Q2	Q3
First antenatal visit at 28 weeks or above	32,541	32,845	36,353	38,804	45,232	50,162
New birth visit within 14 days	74%	74%	73%	75%	79%	82%
New birth visit after 14 days	22%	19%	21%	20%	17%	14%
Development review at 12 months	65%	63%	64%	65%	67%	69%
Development review at 12 months completed by 15 months	64%	70%	73%	76%	77%	76%
Development review at 2-2.5 years	63%	67%	67%	73%	68%	69%
Sure start advisory board with health visitor present	94%	94%	92%	95%	97%	97%

3.1 Number of mothers who received a first face to face antenatal contact with a Health Visitor at 28 weeks or above.

This was collected as a number rather than a percentage because of the difficulty in defining the population of women who should receive this contact in each area in each quarter.

In Quarter 3 2014/15 the reported number of contacts in England was 50,162. Coverage for this indicator has increased significantly from 74% in Quarter 2 2013/14 to 98% in Quarter 3 2014/15, an increase of 24 percentage points.

3.2 Percentage of New Birth Visits (NBVs) completed

The percentage of new birth visits (NBV) undertaken within 14 days and those undertaken after 14 days are collected. Whilst the NBV ideally occurs within 14 days, it is expected that this will not happen in all cases, for example when the baby is kept in hospital longer than 14 days or the family visits relatives in a different location after the birth.

In addition to validation against Office of National Statistics (ONS) population estimates, this indicator was subject to an additional validation check. If the total number of visits (those within 14 days and after 14 days) was greater than the number of births reported for a given provider then the data failed the validation check and was not included in the figures.

The percentage of NBVs undertaken within 14 days in England is reported to be 82% in Quarter 3 2014/15. There has been a 7 percentage point increase of NBVs undertaken within 14 days nationally from 74% in Quarter 2 2013/14 (which is reflected in a decrease in the percentage of NBVs undertaken after 14 days). This increase is accompanied by an improvement in the percentage of providers that passed validation checks from 77% in Quarter 2 2013/14 to 99% in Quarter 3 2014/15.

There is regional variation in Quarter 3 2014/15, with Midlands & East (89%), London (84%) and the North (82%) reporting a higher percentage of infants receiving a visit within 14 days than the South (70%). Coverage (the percentage of providers passing the validation checks) in this period is lowest for London at 95%. All the other regions achieved coverage of 100% (see table 1a).

The percentage of NBVs undertaken after 14 days in England was 14% in Quarter 3 2014/15. This represents returns from 99% of providers. The South (22%) and North (16%) have higher percentages of visits occurring after 14 days than London (10%) and Midlands & East (9%), which is expected given the lower percentage of visits occurring within 14 days in these two regions. There are cases where it is not possible for an NBV to take place within the recommended 14 day period. It is not expected that the two NBV indicators would total 100%, nor that areas would achieve 100% of NBVs under 14 days. NHS England is looking into possible reasons for the regional variation in the two NBV indicators.

3.3 Percentage of 12 month development reviews completed

The percentage of children in England who received a 12 month development review by the time they turned 12 months is reported to be 69% in Quarter 3 2014/15, with returns from 100% of providers.

In Quarter 3 2014/15, the North and Midlands & East reported over three quarters of children received a 12 month development review by the time they turned 12 months (81% and 78% respectively), with coverage of 100%. The South and London report lower figures of around 64% and 42%, respectively, with coverage also at 100%.

The percentage of children receiving this review increased by 4 percentage points between Quarter 2 2013/14(65%) and Quarter 3 2014/15 (69%) Latest figures should be of better quality as coverage has increased over the period from 73% in to 100%.

3.4 Percentage of 12 months development reviews completed by the time the child turned 15 months

This indicator measures the percentage of children in England who received a 12 month review by the time they turned 15 months and adds to the percentage of children who received the 12-month review in the previous Quarter. It is reported to be 76% in Quarter 3 2014/15, with returns from 93% of providers. In Quarter 3 2014/15 the Midlands and East and North report more than 8 in 10 children received a 12 month review by the time they turned 15 months (85% and 86%, respectively), with the South and London reporting lower figures of 67% and 59%, respectively.

The percentage of children receiving this review by the time they turn 15 months has increased from 64% in Quarter 2 2013/14 to 76% in Quarter 3 2014/15, and latest figures should be of better quality as coverage has increased over the period from 54% in Quarter 2 2013/14 to 93% in Quarter 3 2014/15.

3.5 Percentage of 2-2.5 year reviews completed

The percentage of children in England who received a 2-2.5 year review by the time they turned 2.5 years is estimated to be 69% in Quarter 3 2014/15. This represents returns from 98% of providers in this period.

In Quarter 3 2014/15 the North and Midlands and East report higher percentages of 2-2.5 year reviews completed (81% and 77%, respectively), both showing good data coverage (100% and 97%, respectively). The South reports a lower percentage of 2-2.5 year reviews completed at 67% (with good data coverage of 96%). London shows the lowest percentage of 2-2.5 year reviews completed at 44% based on 100% data coverage, which may be partly linked to the transient nature of the population in London

From Quarter 2 2013/14 to Quarter 3 2014/15, there was a 6 percentage point increase in the percentage of children in England who received a 2-2.5 year review by the time they turned 2.5 years, from 63% in Quarter 2 2013/14 to 69% in Quarter 3 2014/15.

3.6 Percentage of Sure Start Advisory Boards with a HV presence

This is calculated as the number of sure start advisory board meetings in the quarter with a health visitor present as a percentage of all meetings.

In England the percentage of sure start advisory boards with a Health Visitor presence is estimated to be 97% in Quarter 3 2014/15, a slight increase from 94% in Quarter 2 2013/14.

This represents returns from 82% of providers in Quarter 3 2014/15, a large increase from 57% in Quarter 2 2013/14.

All regions in Quarter 3 2014/15 reported more than nine out of ten sure start advisory boards had a Health Visitor present. The North reported 94% of sure start advisory boards with a Health Visitor presence with a good coverage of 93%; the South reported 99% but this was based on a lower coverage of 82%. Midlands and East reported 97% with coverage at 89%. London also reported 98% of sure start advisory boards with a Health Visitor presence but with the lowest coverage at 47%.

Further information on how these metrics are produced

Timeframe

These metrics have been collected quarterly since Quarter 2 2013/14.

Geographical Breakdown

These metrics are published by region and at national level.

Providers and population covered

All providers of Health Visiting services are asked to report on these metrics to their NHS England Area Team.

These metrics should be collected by provider area of responsibility. Provider area of responsibility is defined as all those who the provider is responsible for providing health visitor services for. This should be defined on the basis of Clinical Commissioning Groups (CCG) footprints in 2014/15. CCG footprints are the CCG in which the infant is registered to a GP, or if they are not registered, the CCG of residence. All infants should therefore be included.

Indicator specifications

Detailed indicator specifications can be found in appendix 6 of the **National Health Visiting Service Specification 2014/15**: <http://www.england.nhs.uk/wp-content/uploads/2014/04/hv-serv-spec.pdf>

Quality assurance

The data were subject to quality assurance to ensure consistency. This process includes:

- Numerators and denominators: flag where the numerator exceeds the denominator i.e. whether the number of visits completed exceeded the number of infants due a visit.
- A sense check on the number of 12 month checks that are completed by the time the child turns 15 months. This is flagged for investigation if the number completed

at 15 months is lower than the number completed at 12 months and if it appears anomalous (e.g., the number completed at 15 months is lower than the number completed at 12 months in the previous quarter), given that the cohorts of children for these checks will be different.

- Population checks: flag where the number of infants visited in each age group was more than 20% different from the relevant mid-year population estimates. The mid-year population estimates used for each provider are based on the information supplied by Area Teams about the CCG populations covered by each provider.

Indicator	Check
New birth visit within 14 days	Number of infants due a new birth visit is within 20% of the 2012 population estimate of 0 year olds
New birth visit after 14 days	Number of infants due a new birth visit is within 20% of the 2012 population estimate of 0 year olds
Review at 12 months	Number of infants due a 12 month visit is within 20% of the 2012 population estimate of 1 year olds
Review at 15 months	Number of infants due a 12 month visit is within 20% of the 2012 population estimate of 1 year olds
Review at 2-2.5 years	Number of infants due a 2-2.5 year visit is within 20% of the 2012 population estimate of 2 year olds

Data from several providers would potentially fail validation for the indicators ‘review at 12 months’, ‘review at 15 months’ and ‘review at 2-2.5 years’ because the populations are more than 20% greater than expected from CCG population estimates. This is likely to be an issue with the Child Health Information System (CHIS) data, whereby children who move from an area are not removed from the CHIS in a timely way. This is likely to be a greater problem in London than elsewhere because the population is more transient. To account for this, data submitted are checked both against CCG population estimates and previous submissions; and ATs are asked to explain any identified discrepancies.

The quality assurance process highlighted data quality issues that Area Teams and Providers were given the chance to investigate and either explain or resubmit data where anomalies were discovered. Where data failed a validation check and no explanation or correction was provided by the Area Team, these data were excluded from the service metrics reported. Whilst the number of validation checks failed by initially submitted data is improving, there are still a significant number of providers having to resubmit data.

Additional Information

The NHS England Analyst with overall responsibility for this report is:

James Wallis

NHS England Analytical Service,
NHS England, 5E26 Quarry House, Quarry Hill, Leeds, LS2 7UE
Email: england.hvreporting@nhs.net