

Neonatal Families Ambassadors End of Project Report

Surviving to *Thriving*



**“Be the catalyst that takes a surviving
baby to a thriving baby”**

(a parent)

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The Institute is grateful for the support, advice and input of many individuals in the development and delivery of this project, including:

- The Tiny Lives Trust for funding
- Parents and practitioners for their insights
- The individual contribution of steering group members
- The iHV administrative team
- The e-learning designers Onclick and our graphic designer Alan Lowbridge
- The Ambassadors who attended the training programme and their subsequent commitment to roll out the awareness session to their colleagues.



1. EXECUTIVE SUMMARY

- It is well documented that parents/carers of babies who have been born preterm or sick need personalised, consistent and timely advice (NICE, 2017).
- Health visitors are in a unique position to support these families as the only professionals who, as part of the Healthy Child Programme (DH, 2009), offer a series of universal reviews to all families of preschool children.
- Families of newborns, who require admission to neonatal care, require personalised support to meet their specific needs from primary care services including health visitors.
- The Tiny Lives Trust (TL) and iHV together identified a need for specific knowledge and training for health visitors to equip them to support these babies and their families appropriately.
- This project aimed to provide the evidence and knowledge to health visitors, enabling them to work effectively with families and provide tailored family-centred support.
- The TL grant enabled us to address this gap through the development of training and resources via an Ambassadors programme.
- The Ambassadors will disseminate their learning and the resources to the wider health visiting community in the North East.
- Having completed this work, we believe it is important to build on the learning and ensure sustainability of the resources to ensure continuity of the support for neonatal families.
- Consideration should be given to a national rollout of this programme.

2. INTRODUCTION

This report provides a brief account of iHV's delivery of the grant awarded by TL to develop and support the role of health visitors working with families whose babies received neonatal care in the North East of England. The development, delivery and evaluation of the project will be presented and key recommendations for future training and development of the workforce provided.

The project team co-produced an evidence-based training programme and accompanying resources which were delivered to 26 health visitors in the North East. After training, these individuals became Neonatal Family Ambassadors and aimed to cascade the awareness session and resources to their local health visiting teams. The Ambassadors were equipped with tools and resources to work with other key stakeholders to influence their local pathways for neonatal families and ensure that personalised support was offered to all. The wider resources, including an e-learning module available to all health visitors nationally, have been shared through the iHV networks, generating growing interest and engagement.

We hope that these resources and the training will make a positive difference to the care of babies and their families in the community, as one parent from the insight work stated:



The health visitor should be the hub and spoke of my care, taking me and my family from surviving to thriving



It should be acknowledged that these achievements have not been without challenge due to the concurrent COVID-19 pandemic.

3. SCOPING AND INSIGHTS

Users' needs (parents, carers, families and health visitors) were central to the development of the resources. We adopted a co-production approach, ensuring engagement from key stakeholders at each stage by:

- ✓ A baseline survey of North East health visitors' (n=134) current practice, knowledge and confidence in working with neonatal families
- ✓ A survey of parents (n=77) of babies who had been on the Newcastle Neonatal Unit (NNU)
- ✓ A focus group with parents (n=4)
- ✓ Peer review of all resources by practitioners and parents

Key themes from the insight work included:

Communication

Health visitors should:

- Be aware why the baby has been admitted to NNU before contacting parents.
- Contact families before they are discharged home and ideally visit them on the unit before discharge.
- Attend discharge planning meetings.
- Use positive language when talking to parents and about their baby.
- Be central in coordinating families' care and being their advocate.
- Parents need information about the roles of health visitors and any other team members, with clear expectations on frequency of visits and contact details.

Knowledge and Understanding

Health visitors should:

- Have a knowledge and understanding of the journey of the preterm /sick baby and their family, and how this will impact them.
- Have specific knowledge on health, growth and development, support and advice on feeding.
- Be aware and supportive of the emotional wellbeing and impact of having a preterm/sick baby on the mental health of the baby, mother and family.
- Health visitors and parents need to know which professionals are involved in a baby's care and what their role is.

Continuity of care and an individualised approach

Health visitors should:

- Aim to provide continuity of care for these families.
- Individualise their approach to meet each family's needs and develop relationships.
- Coordinate the baby's care with the family through acting as a hub for the family.

For full details of the insight work, please see report entitled "*A co-production project to develop evidence-based training and resources for health visitors to improve support of preterm and sick babies and their families*".

These themes were drawn upon in the design and development of the resources and the training programme including the e-learning.



4. PROGRAMME DEVELOPMENT

From the initial insights and scoping, the project team collated the key themes and messages to design and develop the resources.

Careful consideration was given to the content of the training days with the aim of realising the needs of families who had been through a neonatal unit. Parents from the focus group actively participated in the sessions and shared their lived experiences. Professional evidence-based guidance was included on key topics, highlighted from our scoping as areas where health visitors felt they needed further knowledge.

All resources developed have been quality-assured with an agreed review process, including ethical, peer, steering group and parent reviews.

The imagery for the project was co-produced following engagement with the families and TL with the lotus flower reflecting the journey of each family from surviving to thriving with appropriate and personalised support.

Key topics covered included:

The parent's journey – lived experience	Growth and nutrition
Mental health and neonatal families	Measurement and growth monitoring
Bereavement	Local support and the wider team
Transition to home	Developmental needs

The training resource includes the following:

A Local Neonatal Family Ambassadors Programme

The programme structure:

DATE	SESSION
14th October - 09:00 – 13:00	Attend virtual awareness training session
October – November 2020	Complete online e-learning module (max 1 hour)
16th November - 13:00 – 15:00	Attend virtual consolidation session
November 2020 - March 2021	Cascade 1-hour awareness session to local teams
Ongoing	Be the local Ambassador for Neonatal Families

This report will provide feedback on the evaluation of programme, including the e-learning. Recommendations for future development will be offered.

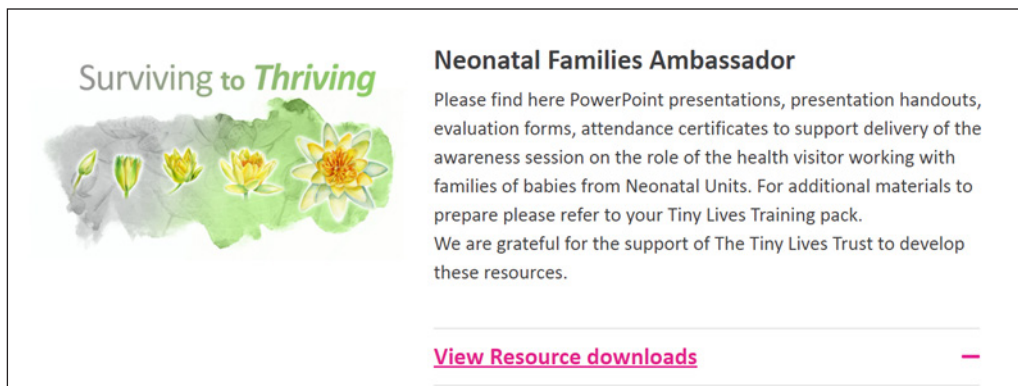
Prior to attendance, the participants were sent:

- Introductory training guide – background to the iHV and the role of the Neonatal Ambassador
- Virtual Training Guidance – how to make the most of virtual training
- A pre-evaluation questionnaire

Post training they were sent:

- A post-training evaluation questionnaire
- A certificate of completing of the training programme
- Access to the wider project resources via a unique login code
- A cascade slideset, lesson plan and cascade evaluation forms

All the resources are available on the iHV Training Resources Hub.

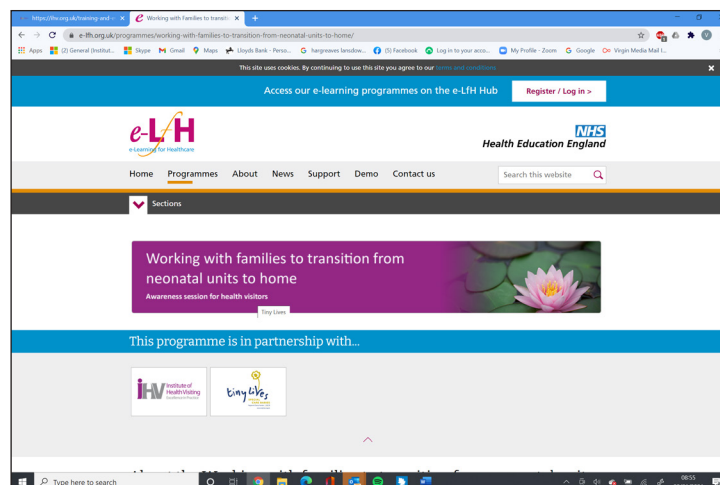


For full details of the evaluation of the training, please see report entitled "*Neonatal Families Ambassadors Training Programme Report*".

5. E-LEARNING

The e-learning module was developed by the iHV project team and reviewed by the steering group. Key elements were supported by expert advisors from within the speciality areas. The resource was then designed and developed by Onclick, an e-learning specialist. The final resource is now available on the Health Education England e-Learning for Healthcare (e-LfH) learning platform and is accessible to healthcare professionals across the UK.

The e-learning covers a range of areas to raise awareness of health visitors of the specific needs and considerations when working with families transitioning from the NNU. The session focuses on aligning the support to the current model of health visiting within England and the mandated contacts.



The e-learning has been positively received with excellent evaluation. More detailed evaluation can be found in the report entitled "*Neonatal Families Ambassadors Training Programme Report*".



6. ONLINE RESOURCES TO SUPPORT PRACTICE

The project team developed a range of online resources to support health visitors' practice. These are accessible and can be downloaded by the Neonatal Families Ambassadors who have completed the training programme. These complement the training programme resources highlighted above.

- **Insight report:** provides a comprehensive summary of the scoping and insight work
- **Resources to support Neonatal families:** an A-Z of quality-assured resources and links to organisations that offer support to families, and national guidance.
- **Good Practice Point (GPP):** provides evidence-based guidance to practitioners in an easy to access format. This focused on: "Supporting the emotional wellbeing of parents when their baby leaves the neonatal unit."
- **Parent Tips (PTs):** provide short summaries of evidence-based advice to parents. We were able to work with a specialist from the Children's Hyperinsulinism Society to produce a Parent Tip on Hypoglycaemia .
- **Glossary of terms:** this resource provides a glossary of commonly used terminology on NNU.
- **Parent voices:** Three parents provided short stories of their experiences. These have been collated as parent voices, each providing important insights to inform practice:
 - » A day in the life of a SCBU mum
 - » Learn to love poem
 - » Rachel's Story
 - » Short presentation films from parents: A series of short films were produced sharing the journey of two parents who were part of the focus group. These provide further insight to support practice.

7. EVALUATION OF THE EFFECTIVENESS OF THE PROGRAMME

The programme of training has been evaluated using pre- and post-training questionnaires. These were based on Kirkpatrick's model (2014) of learning focusing levels, reactions and learning to understand the impact of the new learning. We also gathered informal feedback during the session and from the steering group.

The evaluation was extremely positive:

- 100% reported an increase in their knowledge and confidence in working with neonatal families immediately after completing the programme
- 98% reported that overall the training was good or excellent
- 100% reported that teaching methods were appropriate and interesting

For the e-learning component:

- 100% felt it was relevant to their practice
- 100% felt it increased their confidence with families
- 100% agreed that the design and style of the session supported their learning
- 100% agreed that the session engaged them and participants enjoyed the level of interactivity

For full details of the evaluation of the training, please see report entitled "*Neonatal Families Ambassadors Training Programme Report*".



8. KEY ACHIEVEMENTS

The table below provides a summary of the achievements of the project against the deliverables set out within the original grant application:

DELIVERABLES	ACHIEVEMENT	CHALLENGES
The iHV to contribute as an expert partner in the scoping and development of the resources to support health visitors work more effectively with parents /carers of babies who have accessed the Newcastle Neonatal services.	iHV team coordinated the scoping of the views of practitioners and parents in partnership with TL. This included the design, development and analysis of surveys of health visitors and parents and focus groups. For full details of the insight work, please see report entitled " <i>A co-production project to develop evidence-based training and resources for health visitors to improve support of preterm and sick babies and their families</i> ".	Due to COVID-19, focus groups were held virtually.
For the iHV to develop and deliver a one-day train-the-trainer event to selected health visitors in the North East of England who support parents and carers of babies who have accessed the Newcastle Neonatal services.	A full training programme was developed and delivered to 26 health visitors from the North East. This was delivered virtually over two half days with the e-learning as part of the programme. These Neonatal Families Ambassadors will cascade their training through a train-the-trainer approach.	The original plan was for face-to-face training, this was adapted to a virtual deliver which, whilst positively evaluated, was not as interactive as face-to-face training.
These trainers would be expected to cascade the training to their health visitor teams. This would be supported by access to online materials hosted on a dedicated iHV learning platform.	The trainers (Ambassadors) have all been given user access to a dedicated learning hub on the iHV platform. This includes a slideset and lesson plan for their cascade, alongside wider resources including A-Z of resources and national guidance, Good Practice Point and Parent Tip and parent voices.	The Ambassadors are working on their local cascade, however due to the COVID -19 pandemic this is challenging.
For the iHV to develop a short e-learning resource to complement the one-day training and support sustainably of the training locally.	An e-learning module was fully developed and launched on e-LfH for access by all health visitors nationally. The e-learning has been positively evaluated.	
To evaluate the impact of the training on practitioner knowledge and confidence to support parents and carers.	A full evaluation of the impact of the training programme on the 26 health visitors has been completed. With positive impact on knowledge and confidence. For full details of the evaluation of the training, please see report entitled " <i>Neonatal Families Ambassadors Training Programme Report</i> ".	Need to consider impact on families and the wider community of workers in this area which was outside the scope of this project.
To support the dissemination of the learning from the project using the iHV networks both locally and nationally.	The iHV and TL are working in partnership to promote the project through our networks. The project was highlighted at the iHV annual leadership conference in December 2020. An editorial was published in Infant Journal for neonatal and pediatric healthcare professionals.	Need to consider timing of further publicity in light of the current COVID-19 pandemic.



9. NEXT STEPS AND RECOMMENDATIONS

It is important to consider steps to ensure that the learning and resources developed continue to have an impact on the work and support to families both in the North East and across the UK.

We recommend that the following key areas are considered:

- To consider how the resource is maintained and updated to ensure fidelity and that we maintain a pool of health visitor Neonatal Ambassadors in the North East.
- This evaluation focuses on the immediate delivery. However, it would be beneficial to consider the impact of the training over time and numbers of staff that the awareness session has been cascaded to. This should include the impact on the families receiving support.
- To promote the access to the e-learning through the iHV and TL networks.
- To consider the adaptation of the training to a wider multi-professional audience.
- To consider widening access and development of the training for a national audience.

We thank TL for their support with this work and welcome the opportunity to consider next steps in partnership.

REFERENCES

Department of Health (2009) The Health Child Programme, pregnancy and the first five years <https://www.gov.uk/government/publications/healthy-child-programme-pregnancy-and-the-first-5-years-of-life>

NICE (2017) Developmental follow-up of children and young people born preterm <https://www.nice.org.uk/guidance/ng72>

Kirkpatrick (2014) Model of evaluation of learning <https://www.kirkpatrickpartners.com/>



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