Health Visitor Service Delivery Metrics

2015/16 Quarter 2 and previous quarter(s) refreshed
Statistical Commentary (January 2016 release)

This statistical commentary should be considered alongside the 2015/16 Quarter 2 Health Visitor Service Delivery Metrics data publication, which can be found at www.chimat.org.uk/transfer.

Please treat the figures contained in this report with caution.

Where totals are presented for England and PHE centres, these are aggregate totals of the areas that submitted information and passed initial validation (see the section ‘Validation Rules’ within the publication for further details).

Any reference to previous quarters’ data relates to 'refreshed' figures provided in the latest reporting quarter, as local authorities have the opportunity to re-submit data for previous quarters.

Where no reference to a particular quarter is mentioned it should be assumed that the data refers to the most recent quarter’s data.
## Main findings

<table>
<thead>
<tr>
<th>Indicator</th>
<th>Quarter 1 England value</th>
<th>Quarter 2 England value</th>
<th>Quarter 3 England value</th>
<th>Quarter 4 England value</th>
<th>2015/16 England value</th>
</tr>
</thead>
<tbody>
<tr>
<td>C2: New Birth Visits (NBVs) completed within 14 days %</td>
<td>85.4% (85.2%-85.5%) based on 142 local authorities</td>
<td>86.7% (86.5%-86.9%) based on 139 local authorities</td>
<td>85.4% (85.2%-85.5%) based on 142 local authorities</td>
<td>86.7% (86.5%-86.9%) based on 139 local authorities</td>
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</tr>
<tr>
<td>C3: New Birth Visits (NBVs) completed after 14 days %</td>
<td>12.0% (11.8%-12.1%) based on 142 local authorities</td>
<td>10.5% (10.4%-10.7%) based on 139 local authorities</td>
<td>12.0% (11.8%-12.1%) based on 142 local authorities</td>
<td>10.5% (10.4%-10.7%) based on 139 local authorities</td>
<td>11.8% (11.6%-12.0%) based on 137 local authorities</td>
</tr>
<tr>
<td>C8i: 6-8 week reviews completed %</td>
<td>80.4% (80.1%-80.6%) based on 134 local authorities</td>
<td>81.8% (81.6%-82.0%) based on 134 local authorities</td>
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<td>81.8% (81.6%-82.0%) based on 134 local authorities</td>
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<tr>
<td>C4: 12 month reviews completed by the time the child turned 12 months %</td>
<td>72.6% (72.4%-72.8%) based on 142 local authorities</td>
<td>74.3% (74.1%-74.6%) based on 139 local authorities</td>
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<td>74.3% (74.1%-74.6%) based on 139 local authorities</td>
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</tr>
<tr>
<td>C5: 12 month reviews completed by the time the child turned 15 months %</td>
<td>80.0% (79.8%-80.2%) based on 140 local authorities</td>
<td>81.8% (81.6%-82.0%) based on 137 local authorities</td>
<td>80.0% (79.8%-80.2%) based on 140 local authorities</td>
<td>81.8% (81.6%-82.0%) based on 137 local authorities</td>
<td>81.8% (81.6%-82.0%) based on 137 local authorities</td>
</tr>
<tr>
<td>C6i: 2-2½ year reviews completed %</td>
<td>71.8% (71.6%-72.0%) based on 142 local authorities</td>
<td>74.0% (73.8%-74.2%) based on 139 local authorities</td>
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<td>74.0% (73.8%-74.2%) based on 139 local authorities</td>
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</tr>
<tr>
<td>C6ii: 2-2½ year reviews completed using ASQ-3 %</td>
<td>72.1% (71.9%-72.4%) based on 111 local authorities</td>
<td>77.8% (77.6%-78.0%) based on 115 local authorities</td>
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<td>77.8% (77.6%-78.0%) based on 115 local authorities</td>
<td>77.8% (77.6%-78.0%) based on 115 local authorities</td>
</tr>
</tbody>
</table>
Background

In October 2015 the responsibility for commissioning children’s public health for the 0-5 years population transferred from NHS England to local authorities. There are a number of associated service delivery metrics which it is critical to monitor and report. In the longer term the Health and Social Care Information Centre will collect data on these metrics as part of the Maternity and Children’s Dataset (MCDS).

The MCDS infrastructure will support the flow of standardised information on children’s health from local IT systems to the HSCIC on a monthly basis. The Children and Young People’s Health Services data set infrastructure (which is part of the MCDS) was made available in October and data has just begun to flow, however it is expected to take some time for all providers of children’s and young people’s services to flow complete and accurate data.

Until such time as the MCDS has reached full coverage and maturity, possibly even until 2017, an interim reporting system is required.

The health visiting information within this publication has therefore been obtained via the new interim reporting system to collect health visiting activity at a local authority resident level. Quarter 1 of 2015/16 was the first reporting period and the information contained within this report has been submitted to Public Health England by local authorities on a voluntary basis. The full data publication can be found at www.chimat.org.uk/transfer.

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 0-5 years. This is achieved through health and development reviews, health promotion, parenting support and screening and immunisation programmes.

The health visiting service consists 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 with complex needs.
The health visitor service delivery metrics currently cover the antenatal check, new birth visit, the 6-8 week review, the 12 month assessment and the 2-2½ year assessment and report on the following indicators:

- C1: Number of mothers who received a first face to face antenatal contact with a Health Visitor at 28 weeks or above
- C2: Percentage of New Birth Visits (NBVs) completed within 14 days
- C3: Percentage of New Birth Visits (NBVs) completed after 14 days
- C8i: Percentage of 6-8 week reviews completed
- C4: Percentage of 12 month development reviews completed by the time the child turned 12 months
- C5: Percentage of 12 month development reviews completed by the time the child turned 15 months
- C6i: Percentage of 2-2½ year reviews completed
- C6ii: Percentage of 2-2½ year reviews completed using ASQ-3 (Ages and Stages Questionnaire)

These metrics are presented as management information and are reported by local authority, PHE centre and England level.

Data Collection Method

An interim reporting system is hosted on the Local Government Association (LGA) website to collect the data on health visiting indicators. The reporting window for Quarter 2 data and refreshed Quarter 1 data was 16 November – 11 December 2015.

To support local authorities to submit data, detailed full guidance was published to explain what analysts and commissioners in local authorities needed to do to submit health visiting indicators (this can be found at www.chimat.org.uk/transfer). A dedicated mailbox (interimreporting@phe.gov.uk) is also in place to respond to questions and comments.

Once the collection window closes the data received is centrally collated, validated and reported. This process will be repeated quarterly. Local authorities have the option to revise previous quarters’ data up to the end of the reporting period for Quarter 4 and updated statistics will be published.

Validation rules applied may be subject to change in future quarters.

Data Quality

The following data relates to Quarter 2 and refreshed data for Quarter 1.

Out of 152 local authorities 139 submitted a return for the interim reporting collection for Quarter 2 2015/16 (a response rate of 91.4%).
The 13 that did not make a submission for Quarter 2 were:

<table>
<thead>
<tr>
<th>Local Authority</th>
<th>PHE Centre</th>
</tr>
</thead>
<tbody>
<tr>
<td>Northamptonshire*</td>
<td>East Midlands</td>
</tr>
<tr>
<td>Bedford</td>
<td>East of England</td>
</tr>
<tr>
<td>Central Bedfordshire</td>
<td>East of England</td>
</tr>
<tr>
<td>Barnet</td>
<td>London</td>
</tr>
<tr>
<td>Bexley*</td>
<td>London</td>
</tr>
<tr>
<td>Brent</td>
<td>London</td>
</tr>
<tr>
<td>City of London*</td>
<td>London</td>
</tr>
<tr>
<td>Ealing*</td>
<td>London</td>
</tr>
<tr>
<td>Greenwich*</td>
<td>London</td>
</tr>
<tr>
<td>Harrow</td>
<td>London</td>
</tr>
<tr>
<td>Cornwall</td>
<td>South West</td>
</tr>
<tr>
<td>Isles of Scilly</td>
<td>South West</td>
</tr>
<tr>
<td>North Somerset*</td>
<td>South West</td>
</tr>
</tbody>
</table>

Seven in the list above did make a submission in Quarter 1 but there are six local authorities yet to make any submission to the interim reporting collection (either in Quarter 1 or Quarter 2). These are highlighted above with an asterisk.

**Validation Rules**

Of the 139 local authorities that made a submission for Quarter 2 a set of validation rules was applied to each health visiting metric.

<table>
<thead>
<tr>
<th>Validation stage</th>
<th>Definition</th>
</tr>
</thead>
<tbody>
<tr>
<td>Stage 1</td>
<td>Indicator numerator and denominator are integers, and numerator $\leq$ denominator.</td>
</tr>
<tr>
<td>Stage 2 for all indicators other than C6ii</td>
<td>Indicator denominator is within 20% of the resident population of the relevant age (0 years for new baby visits and 6 - 8 week reviews, 1 year for 12 month reviews, and 2 years for 2½ year reviews). The annual figures are divided by 4 to provide quarterly estimates.</td>
</tr>
<tr>
<td>Stage 2 for indicator C6ii</td>
<td>Indicator denominator is within 20% of the numerator for indicator C6i.</td>
</tr>
</tbody>
</table>

Each local authority has to pass both stages 1 and 2 in order for its values to be shown.
In order to be included in the aggregated totals for each PHE centre and the aggregated England total local authorities only have to pass stage 1 validation. The PHE centres and England have to pass their own validation (based on the aggregate population estimates and values given for the local authorities submitting).

A comprehensive breakdown of the results following the application of the validation can be found in the publication at: www.chimat.org.uk/transfer.

Summary of Quarter 2 data

**Indicator C1: Number of mothers who received a first face-to-face antenatal contact with a health visitor:**
- this is unable to be collected as a percentage due to the difficulties in defining an adequate denominator
- two of the 139 local authorities who made a submission were unable to provide a number for this metric (put ‘DK’ Don’t Know)
- based on the 137 local authorities that did provide a value, there were 60,617 antenatal contacts nationally in Quarter 2 2015/16.
- this compares to 59,730 in Quarter 1 2015/16 (based on refreshed figures)

**Indicators C2 and C3: Percentage of births that received a face-to-face new birth visit**
- C2: within 14 days and
- C3: after 14 days
- new birth visits should ideally occur within 14 days, however it is accepted that in some circumstances this is not possible
- the aggregate percentage of new birth visits within 14 days (indicator C2) for England for Quarter 2 based on 139 local authorities passing initial validation is 86.7% (with confidence intervals of 86.5% – 86.9%) – this compares to 85.4% in Quarter 1 2015/16 (based on refreshed figures)
- the aggregate percentage of new birth visits after 14 days (indicator C3) for England for Quarter 2 based on 139 local authorities passing initial validation is 10.5% (with confidence intervals of 10.4% – 10.7%) – this compares to 12.0% in Quarter 1 2015/16 (based on refreshed figures)
- the aggregate percentage of new birth visits within or after 14 days (indicator C2+C3) for England for Quarter 2 based on 139 local authorities passing initial validation is 97.2% (with confidence intervals of 97.1% – 97.3%) – this compares to 97.3% in Quarter 1 2015/16 (based on refreshed figures)
- values for percentages of new birth visits within 14 days could be published for all PHE centres for Quarter 2 (again these were aggregates of ‘valid’ local authorities in each centre). These ranged from 77.1% to 93.5%, and all but two achieved over 80% – values for percentages of new birth visits after 14 days could be published for all PHE centres. These ranged from 5.3% to 20.2%
• the percentage of babies who received a new birth visit within 14 days could be published for 131 local authorities who passed additional validation – three local authorities reported less than 60% of their children had received a face-to-face new birth visit; 15 between 60% and 80% and 113 reported 80% or above

• twenty nine local authorities reported that less than 5% of their children had received a face-to-face new birth visit after 14 days; 59 reported between 5% and 10%; 24 reported between 10% and 15% and 19 reported 15% or above

Indicator C8i: Percentage of children who received a 6 - 8 week review by eight weeks:
• the aggregate percentage of infants receiving a 6 - 8 week review for England for Quarter 2 based on 134 local authorities passing initial validation is 81.8% (with confidence intervals of 81.6% – 82.0%) – this compares to 80.4% in Quarter 1 2015/16 (based on refreshed figures)

• values for the percentage of children who received a 6 - 8 week review by eight weeks could be published for all PHE centres for Quarter 2 (again these were aggregates of ‘valid’ local authorities in each centre) – these ranged from 53.9% to 90.2%, with all but one of the centres achieving over 80%.

• values for the percentage of children who received a 6 - 8 week review by eight weeks could be published for 130 local authorities who passed additional validation – 11 local authorities reported that less than 40% of their children had received a 6 - 8 week review by eight weeks; 30 reported between 40% and 80%; and 88 reported 80% or above (with three local authorities reporting 100%)

Indicator C4: Percentage of children who received a 12 month review by 12 months:
• the aggregate percentage of children receiving a 12 month review by 12 months of age for England for Quarter 2 based on 139 local authorities passing initial validation is 74.3% (with confidence intervals of 74.1% - 74.6% - this compares to 72.6% in Quarter 1 2015/16 (based on refreshed figures)

• values for completed reviews within 12 months could be published for all PHE centres for Quarter 2 (again these were aggregates of ‘valid’ local authorities in each centre) – these ranged from 43.2% to 86.4%, with six of the nine centres achieving over 80%

• the percentage of children who received a 12 month review by the age of 12 months could be published for 130 local authorities who passed additional validation – 11 local authorities reported that less than 40% of their children had received 12 month reviews by 12 months. 14 reported between 40% and 60%; 32 between 60% and 80% and 73 reported 80% or above

Indicator C5: Percentage of children who received a 12 month review by 15 months:
• the aggregate percentage of children receiving a 12 month review by 15 months of age for England for Quarter 2 based on 137 local authorities passing initial validation is 81.8% (with confidence intervals of 81.6% - 82.0%) – this compares to 80.0% for Quarter 1 2015/16
• values for completed reviews within 15 months could be published for all PHE centres for Quarter 2 (again these were aggregates of ‘valid’ local authorities in each centre) – these ranged from 60.5% to 92.9%, with seven of the nine centres achieving over 80%

• the percentage of children who received a 12 month review by the age of 15 months could be published for 129 local authorities who passed additional validation – four local authorities reported that less than 40% of their children had received 12 month reviews by 15 months; 10 reported between 40% and 60%; 28 between 60% and 80% and 87 reported 80% or above

**Indicator C6i: Percentage of children who received a 2-2½ year review by 2½ years:**

• the aggregate percentage of children receiving a 2-2½ year review by the age of 2½ for England for Q2 based on 139 local authorities passing initial validation is 74.0% (with confidence intervals of 73.8% - 74.2%) – this compares to 71.8% for Quarter 1 2015/16

• values for the percentage of children who received a 2-2½ year review by 2½ years could be published for all PHE centres for Quarter 2 (again these were aggregates of ‘valid’ local authorities in each centre) – these ranged from 44.6% to 88.2%, with six of the nine centres achieving over 80%

• the percentage of children who received a 2-2½ year review by 2½ years could be published for 132 local authorities who passed additional validation – 13 local authorities reported that less than 40% of their children had received 12 month reviews by 12 months; 16 reported between 40% and 60%; 29 between 60% and 80% and 74 reported 80% or above, including 2 with 100%

**Indicator C6ii: Percentage of children who received a 2-2½ year review using Ages and Stages Questionnaire (ASQ-3):**

• the aggregate percentage of children receiving a 2-2½ year review which used ASQ-3 for England based on 115 local authorities passing initial validation is 77.8% (with confidence intervals of 77.6% - 78.0%) – this compares to 72.1% for Quarter 1 2015/16

• values for completed 2-2½ year reviews using ASQ-3 could be published for eight of the nine PHE centres for Quarter 2 (again these were aggregates of ‘valid’ local authorities in each centre) – these ranged from 54.1% to 96.8%, with five achieving over 80%

• the percentage of children who received a 2-2½ year review using ASQ-3 could only be published for 94 local authorities who passed additional validation – one local authority reported 0%; 14 reported a value greater than zero but less than 40%; seven reported between 40% and 80% and 72 reported 80% or above, of which 29 were 100%
Data Quality Notes

From Quarter 2 onwards local authorities were able to submit comments in a free text box with the return to explain any issues with reporting. The following summarises the comments received:

Twenty five local authorities reported they had made an incomplete submission. This may include receiving confirmation of nil returns from neighbouring authorities. (Bath and North East Somerset, Blackburn with Darwen, Bristol, Bury, Cheshire West and Chester, Enfield, Gateshead, Haringey, Hertfordshire, Hounslow, Isle of Wight, Kirklees, Knowsley, Leeds, Leicester, Leicestershire, Milton Keynes, Nottinghamshire, Redcar and Cleveland, Rutland, Salford, South Gloucestershire, Stoke on Trent, Waltham Forest and Wiltshire). The majority of these areas informed that work is being undertaken at a local level to address this for future submissions.

Five local authorities reported that recent migration to a new Child Health Information System had impacted on the short-term reliability of the figures (Bromley, Hammersmith and Fulham, Kensington and Chelsea, West Sussex and Westminster).

Eleven local authorities noted specific difficulties in reporting ASQ data (Hounslow, Knowsley, Merton, Oxfordshire, Salford, Sandwell, Solihull, Southwark, Tower Hamlets, Waltham Forest and Worcestershire). This will be investigated further.

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