

# The National Healthy Childhood Programme



## Newsletter 1: Winter 2016

### Welcome!

Welcome to the first newsletter of the *National Healthy Childhood Programme* in which we outline the ongoing work underway to update and develop child health services in Ireland.

Since starting as HSE Lead for the National Healthy Childhood Programme, I am very impressed by the work being undertaken by child health staff and their great passion for this work. We aim to build on this and support staff in their delivery of services so as to ensure our children get the best start in life.

This twice-yearly newsletter is just one of the means we will use to let you know about the *National Healthy Childhood Programme* and the exciting plans we have for the development of both it and *The Nurture Programme: Infant Health and Wellbeing* over the coming years.

Our future issues will be shorter, providing general updates and highlighting some key developments.

Should you have any questions or comments, please feel free to contact us by email to [healthy.childhood@hse.ie](mailto:healthy.childhood@hse.ie).

I look forward to continuing the work with you all.

*Dr Phil Jennings*

*HSE Lead National Healthy Childhood Programme / Director of Public Health*



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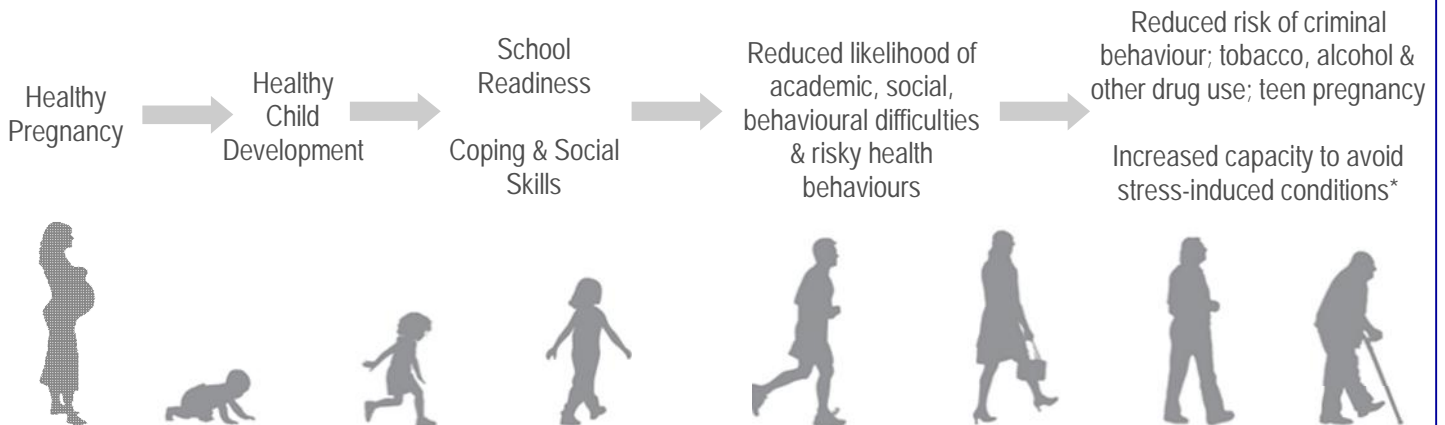
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### Child health in Ireland

Children (under 18 years) account for 25% of the Irish population - we have the youngest population in the EU.

Approximately 68,000 babies are born here every year. The Health Service Executive, through the delivery of the National Healthy Childhood Programme, has a key role in supporting families so these babies can fully realise their potential into adulthood.

From birth to their 14<sup>th</sup> birthday each child will have had at least 22 contacts with the health service as part of the Programme. So, in essence, we have 1.5 million opportunities to "Make Every Contact Count". And making every contact count is important - investment in the early years of life, starting from conception, creates the best outcomes for children, providing the foundations for health over their lifetime. Early intervention and prevention has a positive impact on children's health, social and educational development and offers the best chance of living a happy and fulfilled life.



\* Adapted from *The Link between Early Childhood Education and Health* - Economic Opportunity Institute  
Image - NHS



## Child health services in Ireland

Ireland's child health programme is similar to international child health programme models - covering child health reviews, vaccinations and screening (the timing of contacts differs from country to country). The service is free to all children in Ireland and is enshrined in law. Its universal nature facilitates greater acceptability for families as there is equal access for all children.

The totality of the programme is provided from antenatal stage to the first year in second level school by a number of health services across a range of settings, from homes to hospitals:

1. Hospitals and GPs provide antenatal and post natal care (including two checks for the baby at two and six weeks) as part of the Maternity & Infant Scheme.
2. GPs deliver the primary immunisation programme (up to 13 months) and monitor growth at two and five years as part of the GP Under 6 contract. There is free GP care to all children under the age of six years.
3. Public Health Nurses and Community Doctors deliver child health screening, developmental surveillance, key health messages and support to parents in addition to vaccinations to children from birth to first year in second level school (school vaccinations).
4. The service is currently delivered through the Best Health for Children/Best Health for Children Revisited model.



As the community-based screening and surveillance service is generally the first service to see the baby in the home environment, it plays a critical role in linking with other related child services to ensure the needs of the child and family are met.

## National Healthy Childhood Programme

Since mid-2014, two national groups with multi-disciplinary and cross-sectoral representation have been working to update the programme (see table 2). The updated child health programme is called the National Healthy Childhood Programme. The significant findings, emerging from the baseline work, that have influenced the programme are:

- ◆ Acknowledgement that the wider determinants of health play a significant part in child and adult health.
- ◆ Benefits of a child health programme based on a model of *progressive universalism* – help for all and more help for those who need it.
- ◆ Impact of the antenatal period on the development of the foetus.
- ◆ Importance of maternal mental health and infant mental health and development.
- ◆ Pivotal role of the parents in child development.
- ◆ Early identification of issues can enable early intervention to occur thus improving the outcomes for the child.

The new programme takes account of:

- ◆ The changing policy and strategic context—[Healthy Ireland](#); [Better Outcomes Brighter Futures](#); [National Maternity Strategy](#); [A Healthy Weight for Ireland](#).
- ◆ The notable developments - such as the implementation of the newborn hearing screening programme, the emerging evidence on developmental surveillance and the ever increasing body of evidence highlighting the effectiveness of interventions that both promote health and prevent adverse outcomes - are included in the rationale and content of each contact.
- ◆ The need to update and develop training programmes to underpin the delivery of the model.
- ◆ The requirement to work with all child health service providers to develop and deliver a child health model based on progressive universalism using standardised approaches to assessments.



## Delivering the National Healthy Childhood Programme

The revised programme will be implemented in stages. Quality improvement of the services delivered is core to all the work. A considerable amount of the evidence-review, exploratory and planning activities required to update the current programme have already been completed. We are building on the strengths within the system and seeking to ensure the most effective use of current resources, including minimising duplication, in order to efficiently deliver the programme across care settings. The programme will align with current HSE policies and strategies, including those in respect of staff engagement.

The Nurture Programme-Infant Health & Wellbeing is one of the key enablers of The National Healthy Childhood Programme in respect of the 0-2 year age group. It will update current resources and develop the additional resources required by staff to deliver the relevant components of the National Healthy Childhood Programme at each contact point - Making Every Contact Count.

Table 1: Context for the development and delivery of The National Healthy Childhood Programme

Legislation	Strategy	HSE
<ul style="list-style-type: none"> <li>◆ Birth Notifications of Births Act 1907 &amp; 1915</li> <li>◆ Local Government Act 1925</li> <li>◆ Health Act 1947</li> <li>◆ Health Act 1970</li> <li>◆ Health Act 2004</li> <li>◆ Disability Act 2005</li> <li>◆ Children First Act 2015</li> </ul>	<ul style="list-style-type: none"> <li>◆ <a href="#">Healthy Ireland</a></li> <li>◆ <a href="#">Better Outcomes Brighter Futures</a></li> <li>◆ <a href="#">A Healthy Weight for Ireland</a></li> <li>◆ <a href="#">National Maternity Strategy</a></li> </ul>	<ul style="list-style-type: none"> <li>◆ Framework for the National Healthy Childhood Programme 2016 (in draft)</li> <li>◆ Breastfeeding Action Plan 2016</li> <li>◆ <a href="#">Healthy Ireland Implementation Plan 2015</a> (Healthy Childhood is one of the Policy Priority Programmes)</li> <li>◆ The Nurture Programme: Infant Health and Wellbeing Implementation Plan 2016</li> </ul>

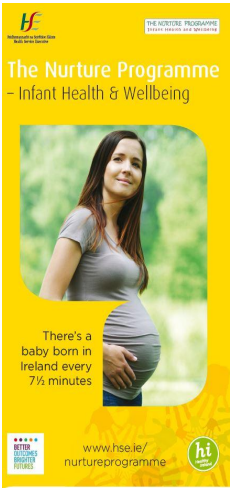
Table 2: Governance and Scope of the National Healthy Childhood Programme

	Child Public Health Group	Healthy Ireland	The Nurture Programme
	<p style="text-align: center;">Child Public Health Group</p> <p style="text-align: center;">↓</p> <p style="text-align: center;">National Child Health Steering Group and Subgroups</p> <ul style="list-style-type: none"> <li>→ Developmental</li> <li>→ Developmental Dysplasia of the Hips</li> <li>→ Enuresis</li> <li>→ Infant Mental Health</li> <li>→ Health Promotion</li> <li>→ Newborn Physical Exam</li> <li>→ Child Health Profiles</li> </ul>	<ul style="list-style-type: none"> <li>→ Key Actions CHOs - HI Implementation Plans</li> <li>→ Key Actions Hospital Groups - HI Implementation Plans</li> <li>→ Policy Priority Programmes:               <ul style="list-style-type: none"> <li>→ Healthy Childhood:                   <ul style="list-style-type: none"> <li>- National Breastfeeding Implementation Group</li> <li>- National Healthy Weight for Children Implementation Group (Healthy Eating Active Living)</li> </ul> </li> </ul> </li> </ul>	<ul style="list-style-type: none"> <li>→ Oversight Group</li> <li>→ National Steering Group</li> <li>→ 6 Implementation Teams:               <ul style="list-style-type: none"> <li>- Training &amp; Resources</li> <li>- Infant Mental Health &amp; Supporting Parents</li> <li>- Health and Wellbeing Promotion &amp; Improvement</li> <li>- Antenatal to Postnatal</li> <li>- Knowledge &amp; Communications</li> <li>- Standardised Health Record for Parents and Professionals</li> </ul> </li> </ul>
Internal Stakeholders	<ul style="list-style-type: none"> <li>~ Integrated Programme for Children</li> <li>~ Paediatrics &amp; Neonatology Clinical Programme</li> <li>~ Acute Hospital Division – Maternity Strategy</li> </ul>	<ul style="list-style-type: none"> <li>~ Health &amp; Wellbeing Division</li> <li>~ Primary Care Division</li> <li>~ Acute Hospital Division</li> <li>~ Social Care Division</li> <li>~ Mental Health Division</li> </ul>	<ul style="list-style-type: none"> <li>~ Health &amp; Wellbeing Division</li> <li>~ Primary Care Division</li> <li>~ Acute Hospital Division</li> <li>~ Social Care Division</li> <li>~ Mental Health Division</li> <li>~ Communication Division</li> </ul>
External Stakeholders	<ul style="list-style-type: none"> <li>~ TUSLA</li> <li>~ Department of Health</li> <li>~ Department Children &amp; Youth Affairs</li> </ul>	<ul style="list-style-type: none"> <li>~ Local Community Development Committees</li> <li>~ Children and Young People Services Committees</li> <li>~ Healthy Cities</li> </ul>	<ul style="list-style-type: none"> <li>~ Prevention and Early Intervention Network</li> <li>~ Area Based Childhood Programme</li> <li>~ TUSLA</li> </ul>
Key Stakeholders	Children and their families		



**THE NURTURE PROGRAMME**  
 Infant Health and Wellbeing

**What is The Nurture Programme - Infant Health and Wellbeing?**



A partnership between the Health Service Executive, Atlantic Philanthropies, Katharine Howard Foundation and Centre for Effective Services, **The Nurture Programme – Infant Health and Wellbeing** was launched on the 23rd May 2016. It is a programme of work which builds on the existing child health programme, strengthening a cohesive, integrated child health and wellbeing service for children aged 0-2 years and their families.

The aim of the programme is to support parents and healthcare professionals in their caring and service provisions to give each baby the best start in life - we want to make every contact count. You can find further background information at [www.hse.ie/nurtureprogramme](http://www.hse.ie/nurtureprogramme)

**What sort of practical things will we see over the next two to three years as part of The Nurture Programme?**

- ◆ Development of a new parenting and child health website, for parents and for healthcare staff. This will be the trusted source for all health and wellbeing information that parents, and health care professionals, need.
- ◆ Provision of information and advice to people planning to get pregnant so that they can give their child the best start in life.
- ◆ Additions to the existing suite of Caring for your Baby and Child books and website, creating a new Healthy Pregnancy book and online content.
- ◆ Development of standards for antenatal education and resources to support their delivery.
- ◆ Provision of universal access to the Child Safety Awareness Programme to guard against accidental deaths and unintentional injuries to babies and infants.
- ◆ Training for practitioners to identify when a parent

needs additional support, advice or information and access to effective referral pathways to specialist services when needed.

- ◆ Promotion of Infant Mental Health, covering topics like bonding with baby, parent-child communications and supporting baby's early learning and development.
- ◆ Support the roll-out of a parent-held child health record.
- ◆ Provide additional supports to mothers to breastfeed whenever possible.

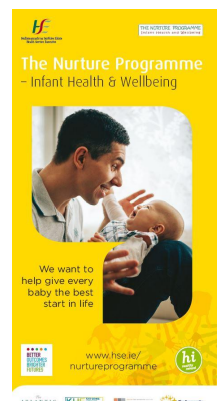
The Programme is being delivered through six interconnected Implementation Teams:

1. Knowledge and Communications
2. Antenatal to Postnatal
3. Health & Wellbeing Promotion and Improvement
4. Infant Mental Health and Supporting Parents
5. Standardised Health Records for Parents and Professionals
6. Training and Resources

Five of these teams have already been set up and early stages of implementation have focused on:

- ◆ Scoping of current services, structures, training, policy and evidence on what works to inform the development of the Programme and build on existing good practice
- ◆ Planning building on current available resources within existing HSE budget which would benefit from additional funding through the Programme
- ◆ Reviewing existing national and international resources and existing training modules
- ◆ Identifying gaps in services and resources and identifying what is required to fill the gaps.

Though the Standardised Health Records for Parents and Professionals team has yet to meet, background work is ongoing in relation to the available database systems currently in use.





## Messages for healthcare workers



### Get your **flu vaccine** – it's a **lifesaver!**



Influenza ("the flu") is more dangerous than the common cold for children, particularly under 4 years of age, and pregnant women. It can result in pneumonia and even death.

You can spread this disease 1 day before developing symptoms, and for 5-7 days after developing symptoms.

Get the flu vaccine - it is the best way to protect yourself, your family and all of the children and families with whom you engage.

The flu vaccine is also recommended for pregnant women - at any stage of pregnancy. Visit [www.immunisation.ie](http://www.immunisation.ie) for more information.

## New Childhood Immunisation Schedule

The changes to the Primary Childhood Immunisation Schedule will mean that children will be protected against more diseases than ever before.



For the latest information on the current and new immunisation schedules please visit [www.immunisation.ie](http://www.immunisation.ie)

## A little advice for the parents and carers you meet

### Car seats - advice for parents and carers

- ◆ Car seats are designed to keep children safe while travelling - children must be restrained in a weight and height appropriate, correctly fitted car seat for every single car journey - no matter how short.
- ◆ If travelling on long journeys take regular breaks, park in a safe place and place your baby on his or her back for a short while. The Royal Society for Prevention of Accidents recommends taking a 15 minute break every two hours.
- ◆ Once you have reached your destination, take baby from the car seat.
- ◆ Car seats, swings, infant seats and similar devices are not recommended for routine sleep in the home:
  - ◆ Sleeping in a sitting position can cause your baby's head to fall forward and make it difficult to breathe.
  - ◆ If your baby falls asleep in a sitting device they should be placed on their back to sleep as soon as is practical.
- ◆ Babies should not be left unsupervised while in a sitting device.
- ◆ Visit [www.hse.ie/childsafety](http://www.hse.ie/childsafety) for further information about child safety in cars.



### Prevent scald injuries - advice for parents and carers

A national study carried out by the Department of Public Health - Midlands found that 233 children (0-17 years) were admitted to hospital as a result of a burn injury in 2014. Some 57% (132) of burns occurred among children under 3 years of age, and 95% of these occurred in the home. Scalds caused most of these burns (74%) and 84% of these were attributed to hot beverages or 'other hot liquids'.

So, take action now, always keep hot drinks out of reach of young children and never make, or drink, a hot drink or soup whilst holding a young child. Adding milk to a hot drink does not make it safe - tea or coffee, even with milk in it, is still hot enough after 15 minutes to seriously scald a young child.

Remember, if a child does get a burn or a scald, your fast action could save their skin. If the burn or scald is above the neck, get immediate medical help from your Emergency Department. If other areas are affected, still plan to seek medical attention for your child, but also apply basic first aid - cool the burned area immediately by running cool water over it for 20 minutes. This will help with pain and can reduce the risk of scarring and need for surgery. Further burns and scalds first aid advice is available at [www.hse.ie/childsafety](http://www.hse.ie/childsafety)



## Know the **ABC** of poison prevention:

The [National Poisons Information Centre \(NPIC\)](http://www.npic.ie) hosted a Poisons Awareness Day on December 8th to raise awareness of the importance of poison prevention and to remind parents and guardians to keep all poisons out of reach and out of sight of children. The NPIC urges us to learn the **ABC** of poison prevention:

**A**lways store medicine and chemicals safely - **B**e prepared! Know what to do - **C**all the Public Poisons Information Line

- ~ Stay calm but act quickly - take the poison away from your child.
- ~ If the poison was eaten, make the child spit it out, run your fingers around their mouth and flick out any remaining pieces.
- ~ Never make your child vomit.
- ~ If a chemical has splashed into the eyes, wash the eyes with tap water for 15 minutes.
- ~ Wash any skin that was in contact with the poison with soap and water.
- ~ Call the Public Poisons Information Line - (01) 809 2166 (each day from 8am - 10pm) - save this number to your phone now. Outside of these hours, contact your GP or hospital. In an emergency call 999 or 112.
- ~ Always take the product container with you to the telephone or to the GP or hospital.




Poison prevention leaflets and key-fobs for parents, guardians and early year providers are available to order free-of-charge from [www.healthpromotion.ie](http://www.healthpromotion.ie). Visit [www.hse.ie/childsafety](http://www.hse.ie/childsafety) for useful poisoning prevention information.




## Contact details

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 [www.hse.ie/nurtureprogramme](http://www.hse.ie/nurtureprogramme)



### Some child health information from [www.hse.ie](http://www.hse.ie)

- ◆ Caring for your Baby books [www.hse.ie/caringforyourbaby](http://www.hse.ie/caringforyourbaby)
- ◆ Child Safety Awareness Programme [www.hse.ie/childsafety](http://www.hse.ie/childsafety)
- ◆ GP under-6 card <http://www.hse.ie/eng/services/list/1/schemes/mc/gpvc/under6.html>
- ◆ Maternity and Infant scheme <http://www.hse.ie/eng/services/list/3/maternity/combinedcare.html>
- ◆ Breastfeeding [www.breastfeeding.ie](http://www.breastfeeding.ie)
- ◆ Immunisation [www.hse.ie/immunisation](http://www.hse.ie/immunisation)
- ◆ Newborn Screening <http://www.hse.ie/eng/health/child/newbornscreening/>
- ◆ Infant & Child Growth <http://www.hse.ie/eng/health/child/growthmonitoring/>

### Best wishes for Christmas and the New Year from the Editorial Team:

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