



**CITY UNIVERSITY
LONDON**

School of Health Sciences



Growing, Nurturing Sustaining the Workforce: Return to Health Visiting Programme

**Rosamund Bryar,
Professor of Community
and Primary Care Nursing**

Growing the HV Workforce

‘In February, the Government made a commitment to increase the health visitor workforce by 50%, provide more training opportunities and deliver a more comprehensive health visiting service to families.’ (NMC/DH letter 2011)



Growing the HV Workforce

'As a qualified health visitor, you already have the skills and experience that can make a big difference to children and families. Our vision for the service plays to the unique position and strengths of the health visitor role. Many in the profession see the new model as building on the core work of health visiting to create a new service that improves public health, promotes wellness and prevents illness. **We would like you to be part of the new workforce.'**

(NMC/DH letter 2011)

Return to HV Practice Programme

City University London 2010 - 11:

- Cohort 1: 18 students, 15 completed majority **off** both nursing and SCPHN (HV) registers; 7 – 27 years out of practice
- Cohort 2: 21 students, majority completed, majority **on** both registers
- Cohort 3: 15 students started 26.9.11
- Total: 51 HVs returning to practice

Return to HV Practice Programme

- Application: www.london.nhs.uk
- Interview: Trust and HEI
- Practice placement: SPT or Experienced practitioner (on Nursing/SCPHN registers)
- 10 study days: Nursing and SCPHN competencies – Health Visitor Return to Practice Framework:
www.dh.gov.uk/en/Publicationsandstatistics/Publications/PublicationsPolicyAndGuidance/DH_129697
- Practice days: minimum 20; maximum 60+
- Bursary

Practice Focused

Years out of Practice	Minimum practice hours required	Equivalent days in practice (7.5 days)
5-10 years	150	20 days
11-20 years	300	40 days
➤ 20 Years	450	60 days

Learning from RTPHVs

- Anxious about coming back: *need for support*
 - Refreshing and updating HV skills: *main focus*
 - Realities of current practice: *need for discussion*
 - HV workforce morale: *expectations of RTPHVs*
- Team approach: *understanding skill mix teams*
- Intensive course: *difficulties of combining with other work*

Learning from RTPHVs

- Wide range of expertise: *of benefit to practice areas*
- Academic workload: *modified for Cohort 2 and again for Cohort 3*
- Need for regular, weekly meetings with SPT/Experienced practitioner
- SPTs/lecturers increased knowledge of RTPHV requirements

Barbara Miller: RTPHV

'I am pleased to say that I have obtained a position working as a health visitor in Enfield. I intend to continue to consolidate my learning and continue to keep up to date with current practice. Eventually, I hope to become a community practice teacher to support the health visiting workforce of the future.' Barbara Miller Cohort 1 RTPHV (Community Practitioner v.84, n.6 p.18)

They have Returned!

- Majority have returned to practice, in London
- Full time, part-time, bank(s)
- Extensive process of decision making to return
- Leadership and teaching resource e.g. fast track to SPTs
- Additional expertise
- Challenging and questioning practice/management