

## **A day in the life of.....a Health Visitor at Church Street Practice**

**8.30** Arrived at the Health Centre. Checked telephone messages and e-mail. An e-mail from a GP requesting that the health visitor refer a child for a hearing test. We liaise with the admin assistant with any clerical work which includes appointments to be arranged or letters to type. The admin assistant also helps with inputting of data on to the computer if needed. Discussed with colleagues a clinical issue regarding a family with parenting difficulties and how to support them.

**9.30** Saw mother with baby for 8 month developmental review at the Health Centre. This review focuses on the development of the baby and allows discussion of any issues and concerns that a parent has. I also discussed safety issues, dental health, family's health and social issues such as housing. This 8 month review of the child is satisfactory and the parent has no other concerns regarding family health and social circumstances.

**10.15** Input data in GP computerised record. This is necessary as we can keep up to date with what has happened with a particular family and child.

**10.30** Home visit to a young mother with 3 week old baby. Reviewed how previous week went. Discussed parental concerns-baby's feeding, crying and sleeping. Discussed issues such as contraception, benefit entitlement and information on local mother and baby groups given.

**11.30** Returned to Health Centre. Data input and checked answer phone messages.

**12.10** A family turned up at the Health Centre requesting to see health visitor. Opportunistic encounters like this allow a parent to discuss a query regarding a child's health or to request an arranged appointment with the health visitor at home or at the Health Centre. This depends on the nature and complexity of the problem they want help with.

**12.30** Lunch

**13.00** Home visit to offer emotional support to a mother with post-natal depression.

**14.15** Home visit to a mother with a 2 week old baby. This is the first visit to the family after handover from midwives. Discussed the health visitor role alongside issues relating to baby's health, safety issues, immunisations and maternal health.

**15.30** Returned to Health Centre. Input data of visits in computer. Checked answer phone messages and e-mail and responded as needed. Telephoned families to arrange appointments for new births, follow-up visits and developmental reviews.

**16.30** End of day.

### **General Duties**

The role of the health visitors is to promote the health of families and children and to tackle social inequalities in vulnerable families working in collaboration with other multidisciplinary agencies, both statutory and voluntary. Health visitors work mainly with families and children under 5 in a variety of settings. They identify where extra support or services for families is needed and enable them to find the services that meet their individual needs. Health visitors also liaise with midwives and see women in their ante-natal period.

The health visitors run a weekly well-baby clinic, Baby Bar for breastfeeding mothers, and groups such as post-natal groups, and a Young Parents group. There are two health visitors assigned to the Church Street Practice and the health visiting team of three practices (Church Street, Newbury Street and Grove Medical Centre) is supported by a nursery nurse and admin assistant.

The health visitors liaise closely with the Primary Health Care team - GPs, practice manager, practice nurses, district nurses, practice counsellor, receptionists, clerical and computer personnel.

At times, health visitors are invited to attend child protection case conferences which are held at the practice or at social services. They are occasionally invited to multi-professional meetings to share information and to work out an action plan to support a family who need intensive support from different professionals. The professionals involved are from social services, the Primary Health Care team, schools and the community adult mental health teams and also liaise with the Primary Child and Adolescent Mental Health Services (PCAMHS), the community mental health services for children and adults. They work and liaise with other statutory agencies such as housing and with community groups such as Children's Centres

Appointments are either at home or at the Health Centre and are not just confined to seeing new babies and developmental reviews but also supporting parents of children with sleep and feeding problems, and behavioural problems. Contact is not always face-to face and can be made by telephone and occasionally emails and letters.

There is no typical day and every day in the week can vary to a certain degree. Not knowing what each day will bring makes the job of the health visitor very interesting, exciting and stimulating.