Day in the life of a health visitor

A health visitor supports parents during the first five years of their child’s life, maximising the opportunity for them to grow up in a healthy, stable environment.

Health visitors work together in small teams covering different areas of the ABM localities. Each team is assigned to one or two GP practices in their area, working with families from just before a child’s birth until they start school.

Joanne Lamb (pictured) is part of the team based at Gorseinon Hospital and works with Talybont and Ty’r Felin GP surgeries:

“I enjoy my job. It is really interesting and diverse; no two days are the same. It really encourages you to build upon your skills as a nurse. I also really enjoy being part of our team. We are very enthusiastic and approachable. These are key qualities to being a health visitor, as you need to be able to build a relationship with parents. It is a privilege to be able to go into parents’ homes and work them and their children.”

The relationship between Joanne and a family starts when a woman is around 32 weeks pregnant, unless their midwife identifies the need for support earlier.

The antenatal visit takes place at home. Joanne talks through any concerns the family may have in the lead up to the birth, and carries out a health assessment on the mum to be. If necessary, Joanne can signpost her to organisations who can meet any additional needs she may have, such as Teen Start for young mums or substance misuse groups. It is also an opportunity for Joanne to hear of any issues from previous pregnancies, such as postnatal depression, in case they occur again.

Joanne said:
“One of the first things we ask mums during the antenatal visit is how their childhood was, as this can have an impact on the kind of parent they will be. We talk about home safety and Sudden Infant Death Syndrome (SIDS) so they are fully aware of how to prepare for their baby’s arrival. We also discuss feeding methods so we can ensure mum is fully prepared and supported for the method she chooses.”

Joanne next sees the family once the baby is born. A home visit takes place 10-14 days after the birth, followed by three more over the next eight weeks. During these visits, Joanne checks the baby’s growth measurements, making sure they are growing as expected and that mum is comfortable feeding. Joanne teaches families basic life support and what to do in the event of a child choking.

It is also an opportunity for parents to discuss with Joanne if they want their child immunised, and if so, give their consent to receive vaccination appointments. These visits also enable Joanne to check how the mum is feeling. She carries out a mental health assessment, looking for signs of post natal depression and domestic violence.

Joanne said:

“Our next home visit takes place when the child is aged between seven and nine months; prior to this they are seen in baby clinics for their immunisations. We check if they are reaching the milestones which you expect to see at that age, such as babbling, getting into a crawling position, and starting to recognise their own name. We make sure they have been registered with a dentist and give their parents a pack with a toothbrush, toothpaste and beaker. We use this visit to discuss changing from a bottle to a beaker and solid foods.

“We also give the parents books to read to their child. Although we encourage them to read to them from birth, we really start to reinforce the message to help develop communication skills. We also talk about possible nursery groups they could join to help with social skills. Parents also benefit from the group as they can meet other mums and dads for advice and support.”

When the child turns two, Joanne asks families to complete a questionnaire which screens their child for autism. If she feels there may be concerns regarding the child’s development, she carries out a complete assessment, and if necessary, refers the family to a paediatrician. Also
during this visit, Joanne discusses any other behavioural concerns or speech and language needs, and gives potty training advice.

On the child’s third birthday Joanne sends a card reminding parents to check for important milestones such as building a tower of blocks, matching colours and eating with a fork and spoon. If the child isn’t achieving the goals or if the parents have concerns, they can call Joanne for a visit.

Joanne said:

“All the work we carry out is part of our Child Health Promotion Programme, which we use as a baseline for the amount of support most parents need. Others may need extra help, and we work with them to help them identify their needs and tailor our programme accordingly. We also encourage parents not to wait until their next appointment to raise a concern; if they need us, we are at the other end of the phone.

“As well as helping parents maintain their child’s wellbeing, we also have a duty to safeguard children. If we feel a child is at risk, we have steps in place to raise our concerns, but it is important that whenever possible we discuss them with the parents first. It is important they understand our concerns in order for them to recognise how they may impact on the child. Working together with families ensures a relationship based on trust.

“We regularly attend case conferences with representatives from a child’s school, social services, and other organisations which may be relevant. Together we discuss what is happening and devise an action plan to ensure the parents receive the support, advice and help they need to improve the care of their children. On a monthly basis we also see children who have been placed on the child protection register or in a foster home.

“As Health visitors we work very closely with other agencies such as GPs, Paediatricians, Speech Therapist, Social Workers and Education to ensure that children have the best possible start to life and that their health and wellbeing is achieved to the best potential. We are a service that parents have direct access to for support at any time in the child’s early years. This is a time when a vast majority of parents have questions and concerns about their child’s development. The knowledge that we are able to pass
onto families to support them during this time gives a great sense of pride and job satisfaction.”