The Healthy Child Programme 0-19 Service Review 2016 Consultation Report



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The Healthy Child Programme 0-19 Service Review Consultation Report

The 2016 Budget Integrated Impact Assessment identified a need to develop an integrated model of public health services for 0-19 years. In the IIA we said we would review current service provision and consult with professionals and with children and parents to obtain their views to inform the detail of the specification.

At the outset our intention was that the service specification would have a clear focus on public health outcomes, including a wider approach to child and parental health, identifying opportunities for further integration to ensure that services are seamless and respond to the needs of families.

The consultation phase of this review ran from 23 May to 17 June 2016, this included:

- a consultation page on Let's Talk with questionnaires for professionals (34), students (226) and parents and carers (226). The project team worked closely with the current provider, colleagues in Education and Communities to promote the consultation through schools, and the Youth Council to promote the consultation with young people.
- 3 workshops for practitioners and professionals (145)
- 1 workshop for parents, carers and professionals (18)
- 1 workshop for students (15)
- Attendance at a staff meeting at Freeman Hospital (100), Newcastle & Gateshead CCG Practice Manager Meetings (24) and the North of Tyne Local Pharmaceutical Committee (4).
- 2 letters received from schools and 1 email received from a parent

Over 650 service users and professionals engaged with us as part of the review, this was conducted face to face and through surveys during May and June 2016. Set out below is the feedback received by Newcastle City Council from these consultation events.

Workshops

The areas discussed during the professional workshops included the strengths of the current service, structure of the service, options for colocation with other providers of 0-19 services and gaps and areas for improvement in service provision.

Current Service

Throughout the consultation it was acknowledged that current service provision is valued by professionals, parent, carers and young people. There was recognition of the difference between resource allocation for health visiting and school nursing. The school nursing service consists of a smaller workforce and this effects capacity, at a time when need for the service is rising.

Structure

It was acknowledged that there are good pathways and relationships between some services, although there is a need for more integration between all services delivering 0-19 services.

Although current delivery of the health visiting service and the school nursing service is geographically based, each service operates on a different footprint, and neither are currently aligned with the locality model of the Community Family Hub. It was felt strongly that delivery of service through the same geographical footprints would improve delivery of services and help to improve networks and understanding of services within the localities.

It was felt that work needs to be done to ensure less time is spent on paperwork, to increase the available time delivering services to families. Suggestions to aid this included improving technology such as provision of mobile devices and consistency in referrals and paperwork.

Co-location

It was felt that the co-location of all 0-19 services would provide many benefits including, closer working relationships and understanding of services and roles, less travel between meetings and improved sharing of information. Accommodation was identified as an obstacle to this proceeding, when considering the best location for Health Visitors it was felt strongly by both GPs and Health Visitors that being co-located with GPs provided many benefits to the delivery of services to the child and the whole family, and that moving away from this model would be detrimental to the quality of service.

It was suggested that co-location with other Early Years services for School Nurses and Health visitors not located in GP surgeries could be considered, to improve integration and relationships.

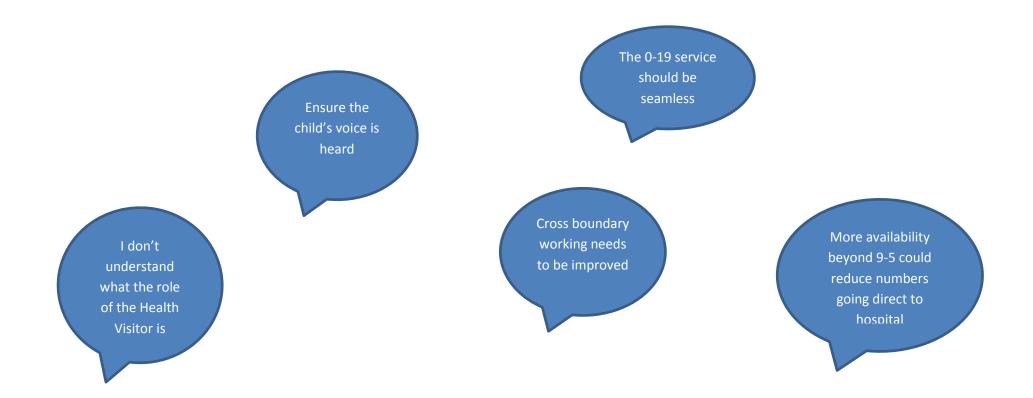
Gaps and are areas for development

Information sharing to improve service delivery, improved pathways to avoid duplication, increased use of technology to improve service delivery such as mobile working, improved networking to have a better understanding of roles, improve relationships and understanding of local services, and review methods of referrals between services to improve consistency were all identified as areas that could improve efficiency and service delivery to young people and their families.

Gaps and areas for development identified by parents and young people

Capacity of the school nurse service to respond to need in light of increasing demand from young people, increased mental health support for young people, need to promote services, increased use of technology such as text messaging, the need to review service availability and accessibility.

Comments received during the consultation included:



Parent & carers survey 226 responded.

Respondents told us they were:

A member of the public	4
A parent or carer	199
Other including, parent to be, grand-parents and health professionals	23
Total	226

199 provided information on gender: 189 female, 10 male.

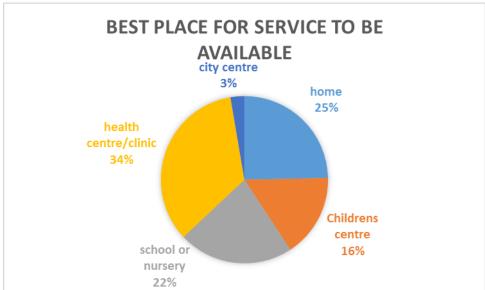
196 gave information on ethnicity: 176 White British, 7 White other, 4 Asian or Asian British, 3 Black or Black British, 3 White Irish, 2 mixed heritage and 1 other.

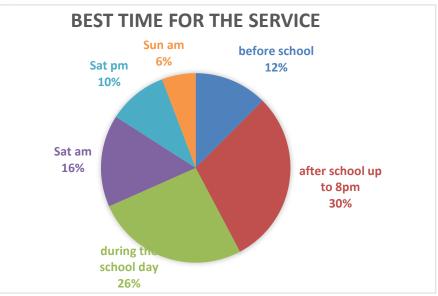
We asked respondents if they were expecting a child/ren and about the numbers and age of children they have.

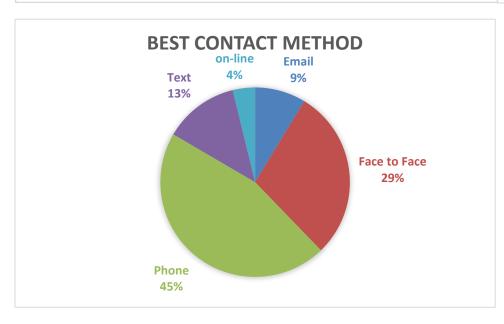
Number of children	Expecting	Age 0-5	Age 6-11	Age 12-19
1	22	108	44	14
2	3	53	10	11
3	1	6	1	3
3+			1	1

Access

We asked about accessing children's public health services, the top 3 preferred options are through a health centre or clinic, at home or at school or nursery. The preferred time was after school up to 8pm, followed by during the school day







Parents and carers first choice for contacting children's public health services is by telephone followed by face to face.

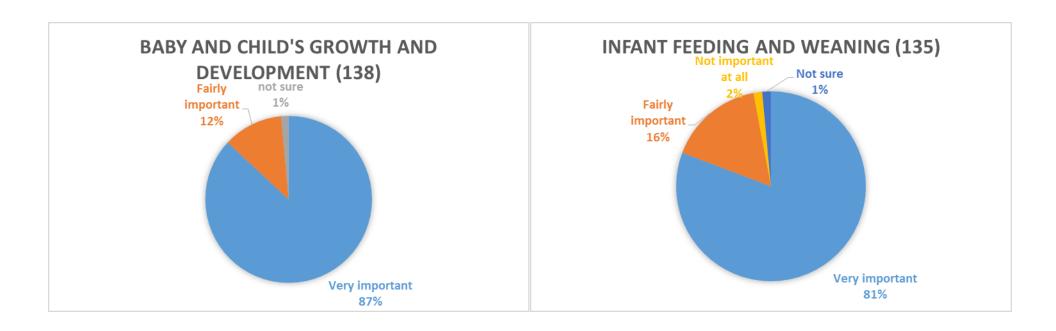
Health Visiting Service

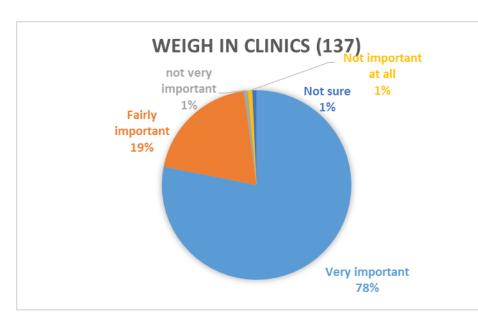
114 respondents had received help or support from the Health Visitor in the last year.

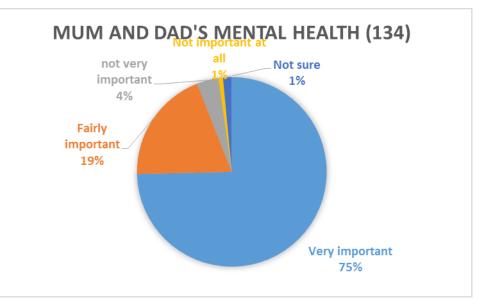
79% (90) said they found it very helpful, 4% (5) helpful, 16%(18) fairly helpful and 1% (1) not helpful. 97% of respondents felt the Health Visiting Service was very or fairly important.

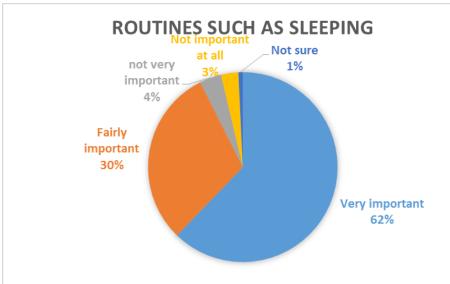
We asked how important it is for the Health Visitor to provide support in specific areas.

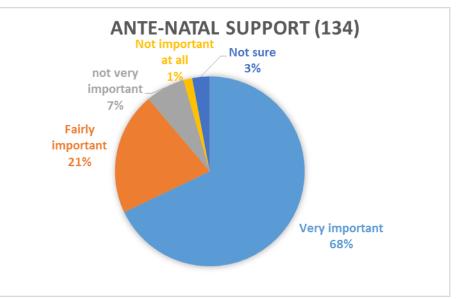
The most important areas are the baby and child's growth and development, feeding and weaning, weigh in clinics and then the parents mental health.

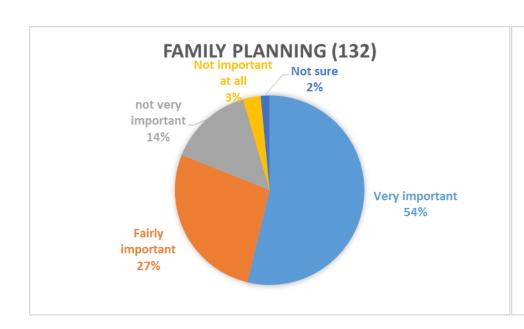


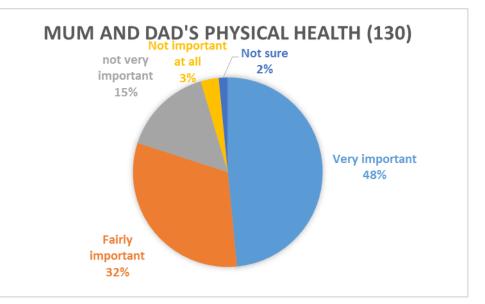


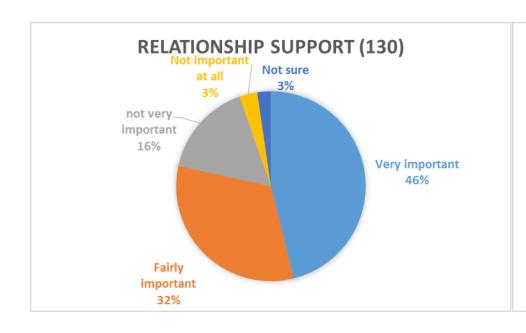


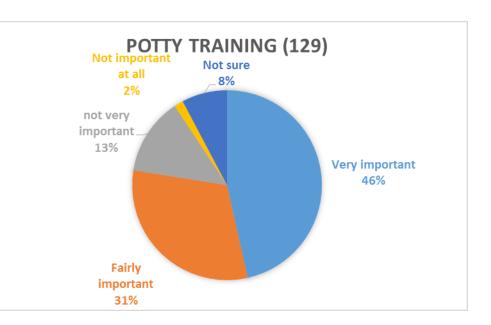












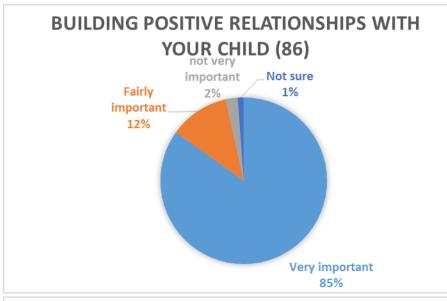
Family Nurse Partnership

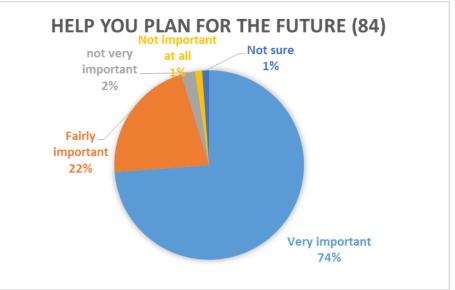
67 respondents had received help and support from a Family Nurse in the last year.

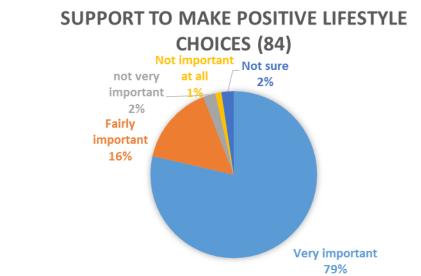
91% (61) found it very helpful, 7% (5) found it helpful and 2% (1) felt it was not helpful. 90% of respondents felt the Family Nurse Partnership was very important, the remaining 10% felt it was fairly important.

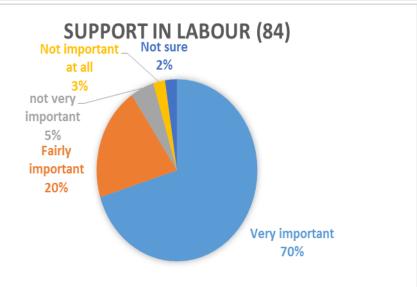
We asked how important it is for the Family Nurse to provide support in specific areas. Improving their child's development and support to have a healthy pregnancy were the most important areas of support.

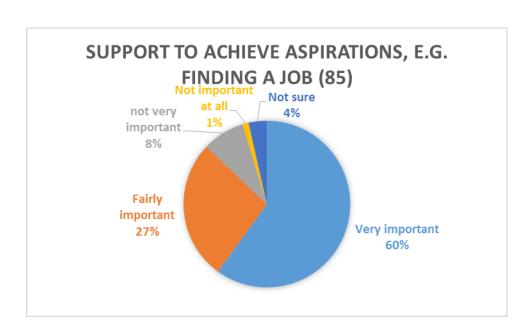












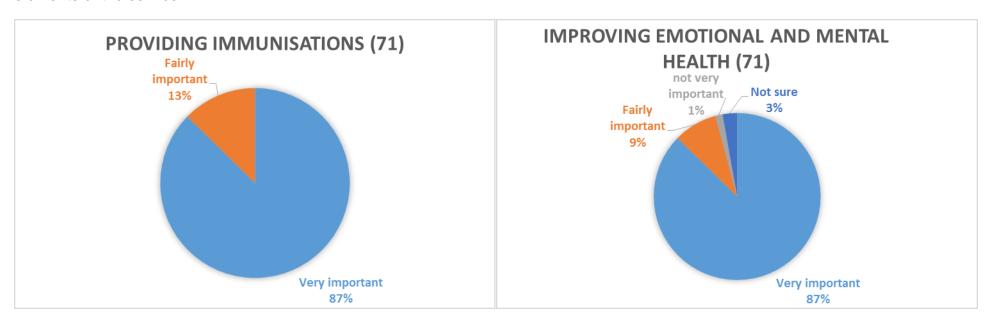
School Nurse

42 respondents knew that they or their child/ren had received help and support from a School Nurse in the last year.

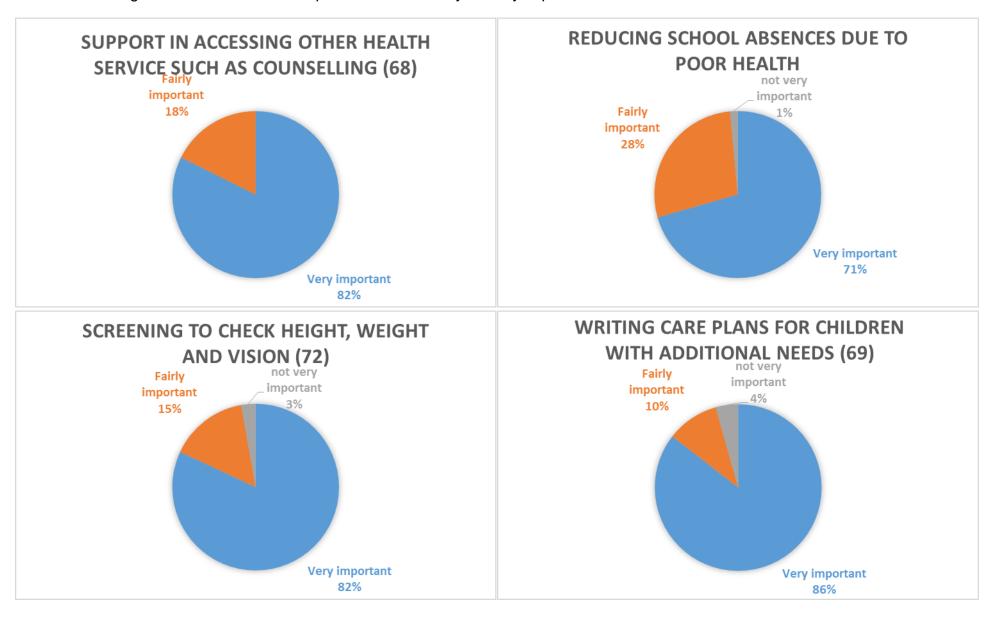
81% (34) felt it was very helpful, and 19 (8) felt it was helpful. 99% of respondents felt the service was very important or fairly important.

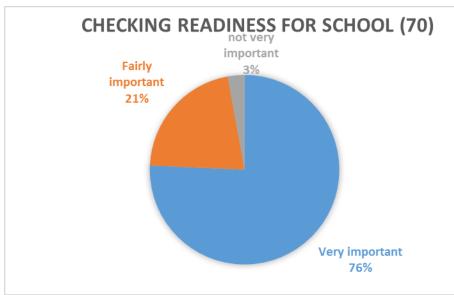
Feedback from children and young people suggests they do not always tell their parents or carers when they receive advice and support from the school nurse through assemblies or one to one sessions

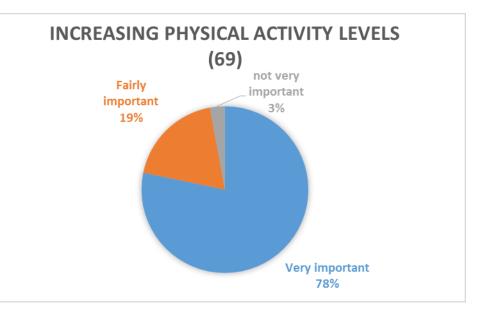
We asked how important parents and carers felt it is for the School Nurse to provide support to children and young people in specific areas. 87% of respondents felt that providing immunisations and improving emotional and mental health of children and young people were very important elements of the service.

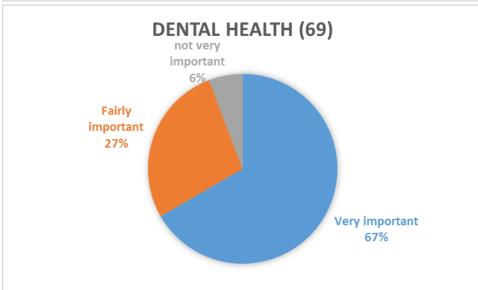


All respondents felt supporting children and young people to access other health services such as counselling was very or fairly important, and 99% felt reducing school absences due to poor health was very or fairly important.









School Nurse - Young people's survey 226 young people responded.

20% said they did not know how to contact the school nurse.

Children and young people in Newcastle told us the five most important health issues they need advice about are:

- 1. Alcohol and drugs misuse
- 2. Sexual health
- 3. Bullying
- 4. Body confidence/puberty
- 5. Mental and emotional health

We asked who they would be more likely to go to for advice if they had a health problem the top choice was the school nurse followed by a friend, a parent or carer and then their GP

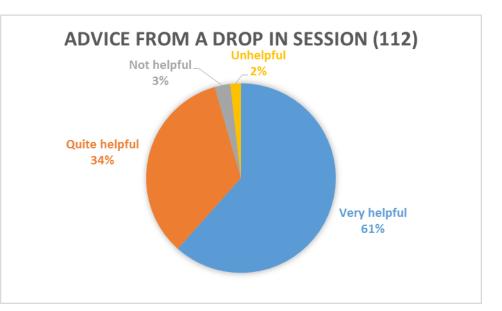
We asked how they would prefer to receive information from the school nurse in future. The preferred methods are in an assembly or class for general information and through an appointment with the nurse for personal information, both options were closely followed by drop in sessions.

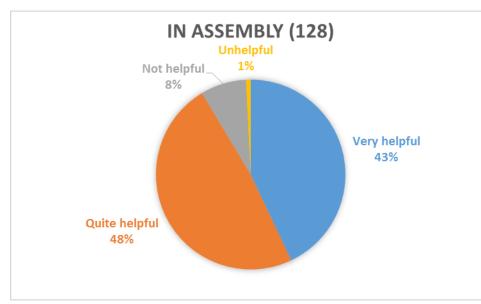
Ranking	General information	Personal information
1	Assembly or class	Appointment
2	Drop in	Drop in
3	Text	Phone
4	Phone	Home visit
5	Email	Email

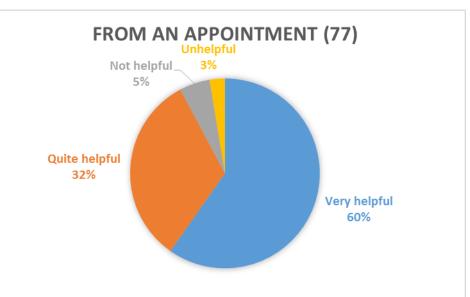
We asked those respondents who had received advice from a school nurse how helpful they had found the advice and support, over 90% of respondents found the advice and support very or quite helpful.

How helpful the advice was by method of delivery.

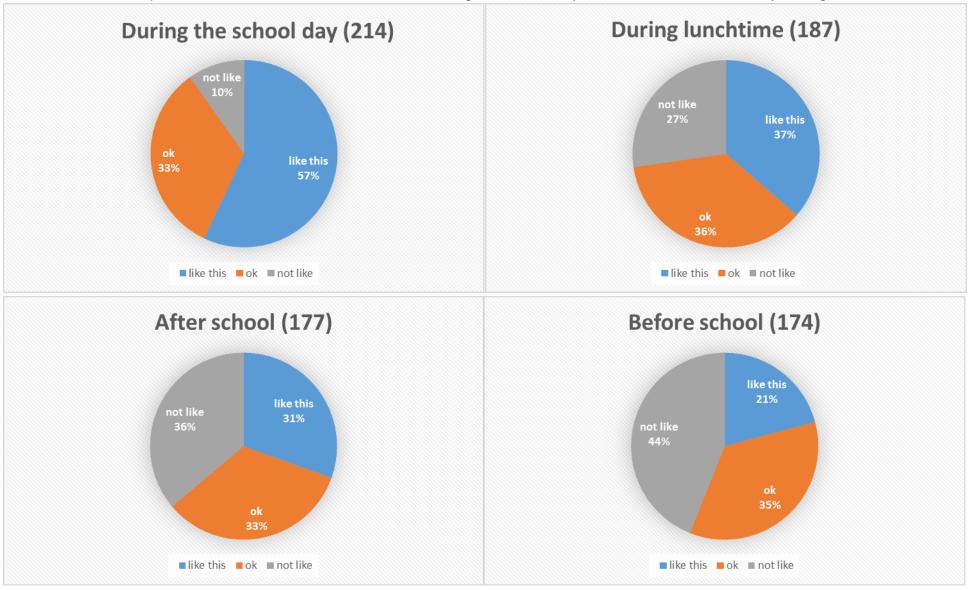






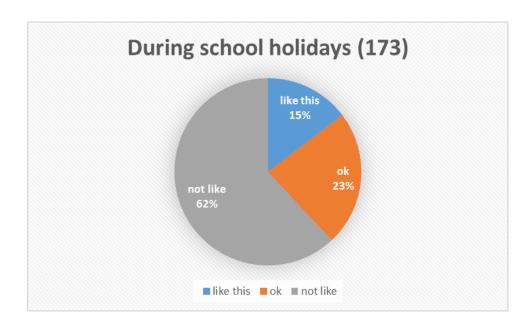


We asked about the preferred time to see the school nurse, during the school day was first choice followed by during lunchtime.



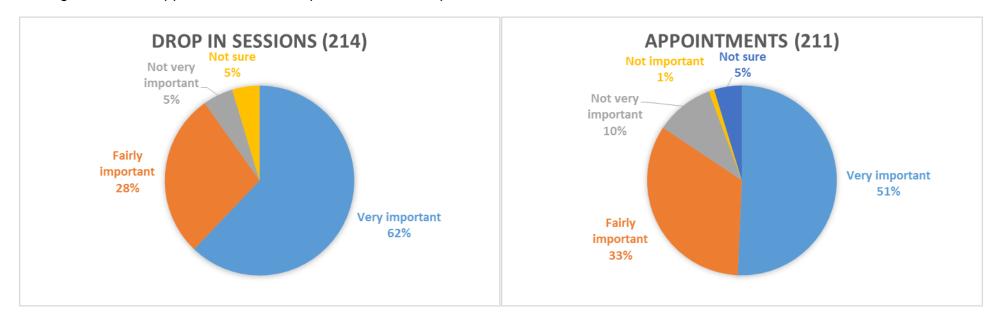
In the survey most respondents (62%) said they would not like to access the school nurse during school holidays.

In the workshop the discussion on access suggested that being able to contact the service for advice during holidays by text, email or phone would be useful.



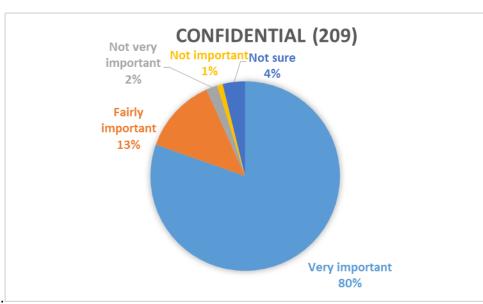
We asked about the importance of different elements of the service.

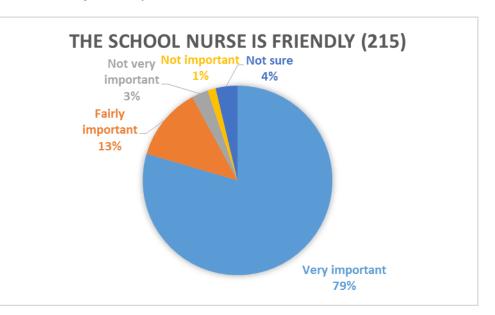
Having a choice of appointments and drop in sessions is important.

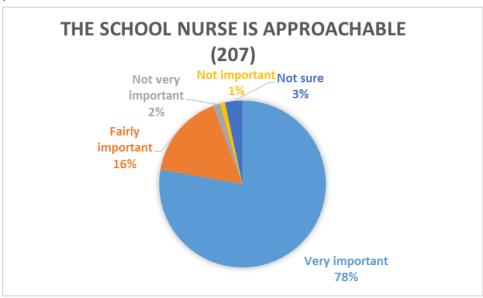




Having a confidential service and a school nurse who is approachable and friendly are important.

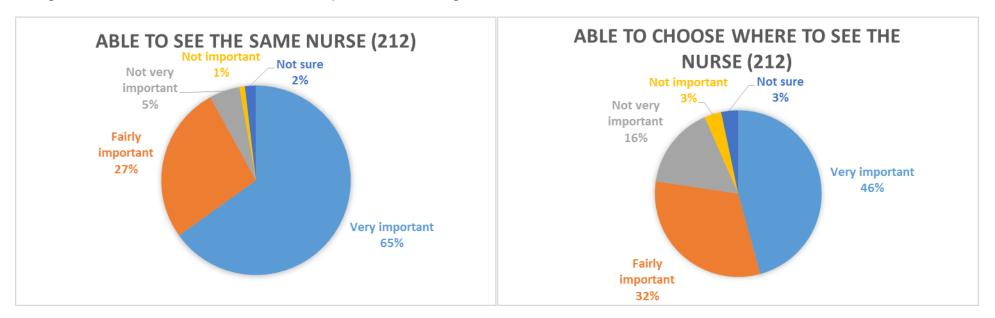








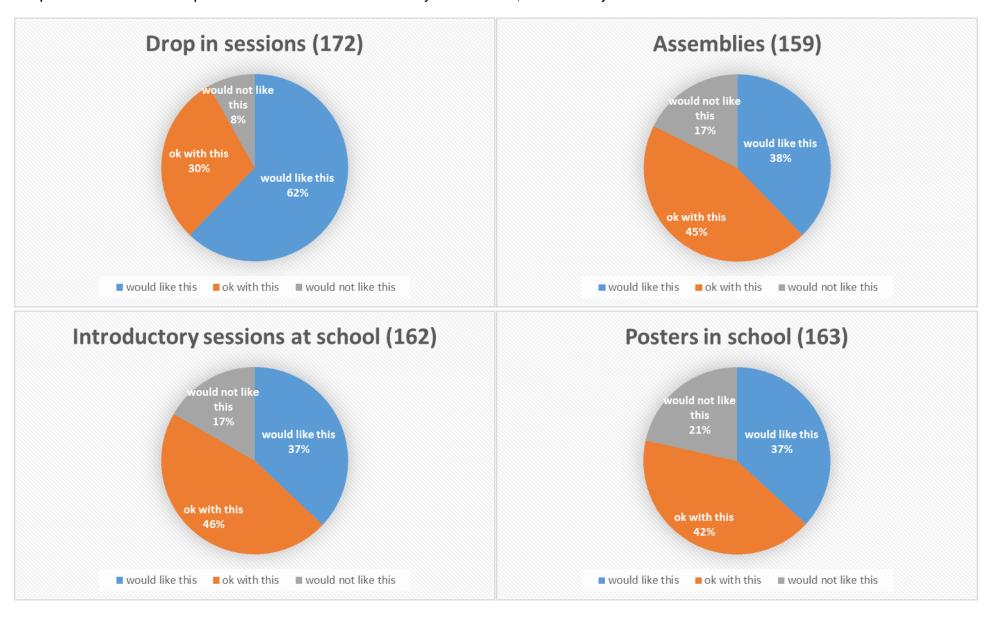
Being able to see the same nurse is more important than being able to choose where to see them.

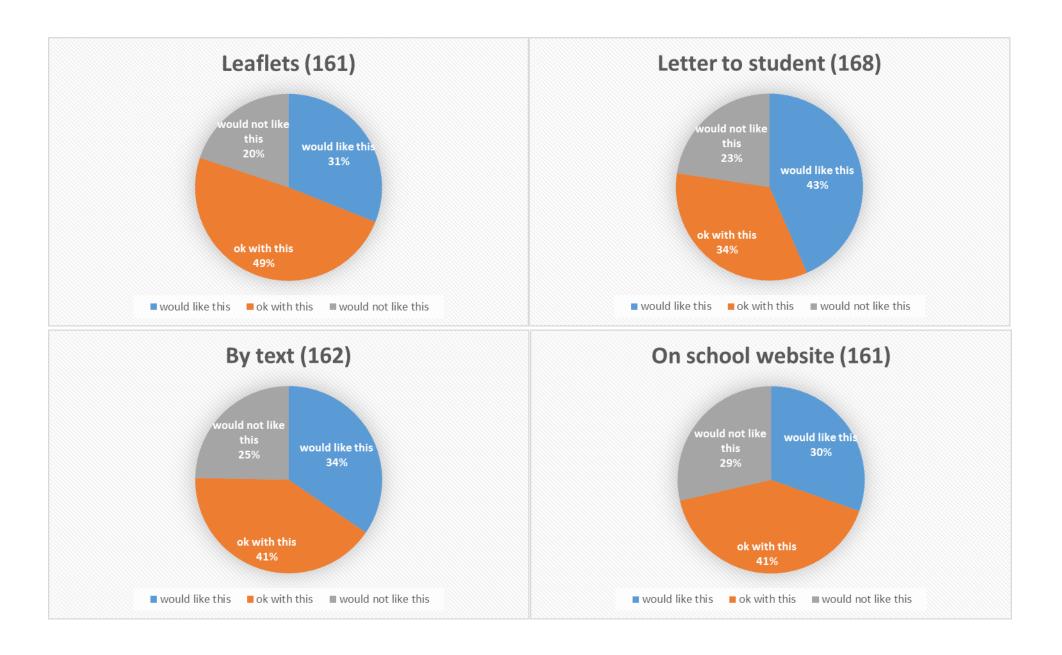


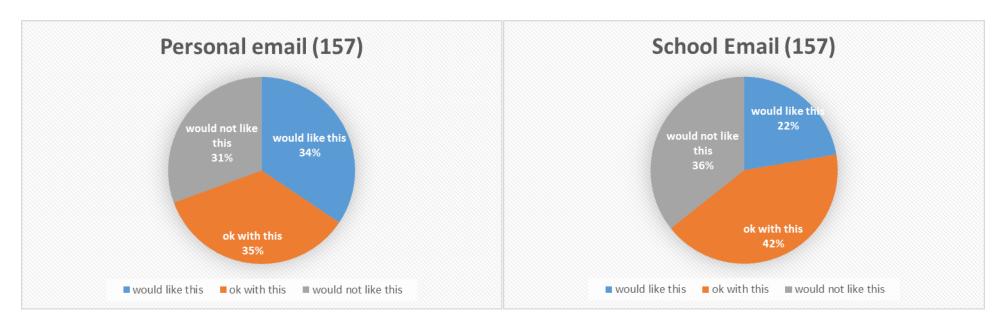
School nurses should be in school more. We should be able to get to know our school nurse they often change. Year 8

We asked young people how they would like to find out about school nurse services in the future.

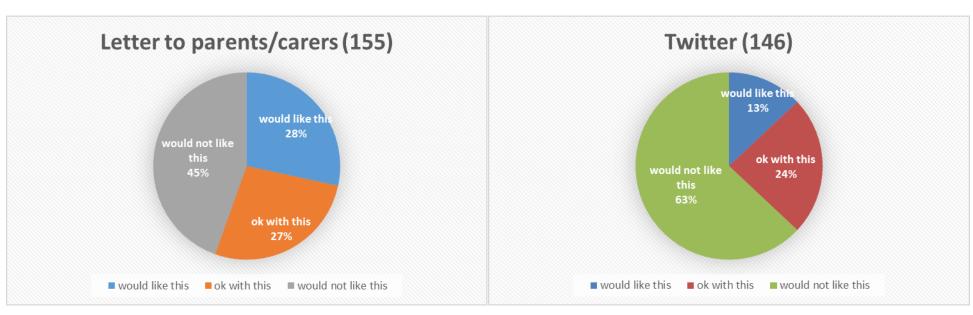
Drop in sessions came top of the list of choices followed by assemblies, introductory sessions at school and text.





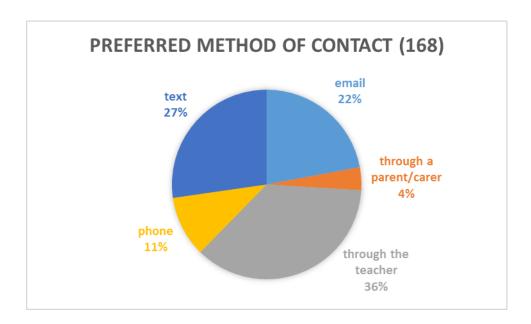


Letters to parents and carers and through Twitter were the least popular choices for receiving information on school nurse services.



We asked how they would like to get in touch with the school nurse in future.

The first choice was through a teacher or member of staff followed by text, the least popular method was through a parent or carer.



Young People survey

226 respondents, 192 gave information on gender, 109 female, 83 male,

193 gave information on ethnicity, 152 White British, 11 White other, 11 Asian or Asian British, 7 Black or Black British, 5 Mixed, 5 other and 2 White Irish.

Current School Year of respondents

Year 7 (13), Year 8 (118), Year 9 (32), Year 10 (43), Year 11 (18), Year 12 (1) and Year 13 (1)

Comments received from young people during consultation on School Nurse Service

depressing or risky thoughts. Year 8

That you will be able to She has to be be happy safe and know friendly so I feel it is important to you have someone to confident with meet personally talk to. Year 9 her. Year 8 and talk in private about problems. Year 10 the advice suits the age groups Seeing the school nurse enabled and faces issues me to be referred to cyps and the Year 8 edict team and without that I wouldn't have received treatment for anorexia. Year 11 I think school nurses seriously need to consider the mental health of young It's someone I feel children more. Some kids have comfortable talking to anxiety or depression and find it very about serious matters hard to talk about it, furthermore and gives out helpful children as young as year 7 can have

information. Year 10

For further information contact Catherine Blenkinsop,

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