

HWW Response to 0 - 19 Prevention Service Redesign

28th January 2016

This is Healthwatch Worcestershire's response to the survey and engagement being carried out as part of the redesign of prevention services for 0-19 year olds, by Worcestershire County Council. The response is based on feedback received through engagement and surveys carried out by HWW and feedback given by our Reference and Engagement Group.

Involvement of children, young people, parents and carers in the redesign process

The survey was carried out over a relatively short time scale - less than six weeks, which included the Christmas period. The redesign of the service is currently in the final stage. Therefore there are concerns about the extent to which the feedback and views gathered through this current survey and engagement can influence the design of the service.

The information about the survey sent to HWW only included an online option for completion and we were only made aware of one parent focus group open to the public. We would welcome further information about the number of people who have completed the surveys, how it has been distributed and feedback from the additional direct engagement work and focus groups described in the feedback from the market engagement webcast on 8th January.

We have received comment from our Reference and Engagement Group that the surveys and information given with them have not made it clear about the elements of services that will be included or potentially cut when the service is re-designed. Concern was also expressed that the new service will not include support for NEET young people.

Young People's Questionnaire

Feedback to HWW from groups working with young people suggest the wording of the questionnaire may be difficult for many young people to understand and complete. It is not clear what age range the survey specifically targets, as the age range options go from 0-19. Parts of the questionnaire will only be relevant to certain age groups and an alternative method of engagement would be needed

with younger children. It may be difficult for children to answer questions about what their parents would like.

School Health Service

HWW's 2015 Young People's GP Survey of over 100 young people suggested that young people find it difficult to make and attend appointments at their Doctors surgery due to school and college attendance. Many said they would like to be able to attend appointments at other locations, such as school. However, young people also told us that they can be put off visiting a school nurse or sessions such as Time4U due to worries about confidentiality or other students making assumptions about the reason they are attending. Some young people also said that they would not bother going to see the school nurse, as they do not think they would be able to help them.

As part of group work with sixth form students for our 2015 Takeover Day event, young people gave us feedback about accessing support for emotional well-being at college. They told us that they may be put off accessing face to face support from those they would come into contact with around the college and may feel that they would be judged or letting people down. They told us that they would be likely to go on line for support and advice, but were aware of potential risks. They felt that it would be helpful to be able to access on line confidential advice.

Feedback from our GP survey suggests that the younger age range (aged 13 - 16) seemed to prefer using text for contact, such as making appointments and giving feedback, whilst 17 - 19 year olds preferred using online methods.

Accessing information about health and well-being

At our Takeover Day event on 20th November 2015, young people told us that although there was information available to them at college, there had been very limited information given to them at school. They thought that schools were too worried about talking about things and they were too young - e.g. alcohol and drugs, but that by waiting until they are at college they are leaving it too late. They felt that it is important to give more detailed information, rather than just being told in a more general way that something is bad for them and not to do it. They thought that schools should be giving them further information and explanations and that people with personal experiences, who they can relate to, would be more effective in getting across key messages.

Although the young people told us that a lot of their peers use social media, they said they would be reluctant to access information if this is then obvious to others. E.g. liking a page on Facebook or joining discussions.

Priorities for information, advice and guidance

Young people at our Takeover Day told us that important health issues for young people are - alcohol, drugs, obesity, teenage pregnancy, smoking and STIs. They felt that alcohol was the most important area for young people to receive information and advice, as drinking is something that is generally socially acceptable and there is a great deal of peer pressure to drink.

They felt that mental health is a key issues and in particular anxiety, as a result of - relationships, home life, exams, bullying, school / college work, pressure to look and act a certain way and social media.

Feedback via our Reference and Engagement Group from groups working with young people suggest that mental health issues such as anxiety and depression in girls and anger management in boys, are becoming issues at a younger age, such as Year 9, and that they feel schools may not be able to manage this.

Parents' Questionnaire

HWW has gathered feedback from 396 individuals as part of work we have been doing with parents and carers of children under 5. Since October 2015 we have had 228 surveys completed on line and spoken to 168 people as part of engagement visits to Children's Centres and community and toddlers groups across the county. Including groups in areas of deprivation and BAME groups. Responses to the parents' survey are therefore based on this feedback.

Health Visitor Visits and Reviews

- **Birth / new born visit and 6-8 week check**

211 parents had babies under 18 months and told us about the care, support and information they received from their Health Visitor at these visits:

- 70% rated this as Good
- 25% rated this as OK
- 5% rated this as Poor

We received many comments saying that their particular Health Visitor had been very good and that they felt reassured by the visit and support. Although we were also given some feedback about visits feeling rushed, feeling as if the visit is an assessment and therefore important not to say the wrong thing and some

comments saying that they felt the Health Visitor was judgemental and therefore would not feel able to phone them for advice.

Whilst most rated information and advice about feeding and weight gain as good or ok, feedback about breast feeding support and sleep patterns was more varied.

- **Review at 9 / 12 months**

92% of parents said they were happy with the outcome of the check. However this seems to be mainly as they were given reassurance that all was ok. We received a number of comments about people not liking the forms that have to be filled in; not receiving any information about the outcome of the check and feeling anxious about their child's development as a result of the check. We also received feedback through our engagement with BAME groups that some did not understand what the check was about or the outcome, but were told that everything was ok.

- **Review at 2 years**

84% of parents said they were happy with the outcome of this check. Again this was mainly due to being given reassurances about their child's development. Many said this felt like a tick box exercise and that they were not given the outcome of the check. Again some criticised the forms used and said that more attention was paid to forms than the child. Although others said that being able to complete the forms in advance meant they were less worried that their child would not respond appropriately on the day.

Breast Feeding Support

The service re design includes breast feeding support service, however the County Council's survey does not have a specific question to gain feedback about this and therefore parents' views on the requirements for this element of the service.

In addition to a varied response to HWW about how good information and advice about breastfeeding support was, access to additional breastfeeding support was the most common thing mentioned when asked what additional information or advice parents would have liked.

Post Natal Depression

Only 48% of those we spoke to said that they felt they were given good information and advice about anxiety and post-natal depression by their Health Visitor. A

number of people told us that they suffered from post-natal depression, but that this was not picked up by their Health Visitor. We also received a number of comments that the questions they were asked around depression and anxiety were not enough to truly assess the situation and it felt like a tick box exercise.

Due to the potential long term impact of women experiencing mental health issues during the perinatal period, for themselves and their child, our findings suggest that this is an important area for the new service to consider.

Who should Health Visitors support?

Through our engagement and survey many parents told us about the difficulties of early days of parenting and the need for support and advice, especially for first time parents. This was something that was generally experienced, suggesting that they would feel that all parents would need a service and support provided by a Health Visitor.

Accessing Health Visitors

We received a number of comments about it being difficult to contact Health Visitors to ask for advice and having fewer opportunities to see a Health Visitor to discuss things once the child becomes a toddler. Especially for working parents who cannot attend sessions at Children's Centres / health centres. Those who were able to attend clinic sessions said that they can sometimes feel pressured or rushed when asking questions if it is busy and there is a queue to see the Health Visitor. Some people said that it would be helpful to have ways such as telephoning, to be able to contact their Health Visitor to ask for advice.

Sources of information, advice and support for parents

Our findings suggest that the most common source of information support and advice in the early stages of parenting is friends, social networks and families. These were rated as being the most helpful.

Although the internet and social media was commonly used as a source of information and advice, people did not rate this as being as good as post-natal support groups or attending Children's Centres. This suggests that although many parents may look on line for information, they value face to face interaction and opportunities to discuss things. Our engagement with BAME groups suggests that use of the internet may not be as common amongst these groups.

When asked which websites they used for information and advice on early parenting, Facebook (63%) and Mums Net (61%) were the most popular, followed by Worcester Mums (41%) and then the NCT (35%).

Only 15% said they used the WCC Early Help website.

Our engagement carried out with parents in more rural areas of Worcestershire suggests that they are less aware of services and activities run by Children's Centres.

This suggests that WCC will need to consider how to ensure that information reaches different groups and communities across the County.

School Health Service

In the limited time available, we have spoken to a small number of parents of younger school age children to gain feedback about School Nurses. Some told us they have not had any contact with their School Nurse and were not made aware of their role. They said that opportunities to see the School Nurse were infrequent and with limited advanced notice, on weekday mornings that may be difficult for many to attend due to work. Another parent told us they were not aware there was a School Nurse for their children's school. Someone who had contacted their School Nurse with a concern about their child told us that they had to wait for some time for a response and that they had been able to offer only limited advice.