healthwatch Norfolk

# Health and wellbeing needs of children, young people and families in Norfolk

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# 1. Executive summary

## 1.1 Engaging with the children and young people

This report captures the work carried out by Healthwatch Norfolk in the period from October 2014 to June 2015. In this period we engaged with over 3,700 children, young people and parents to understand more about their attitudes to health and wellbeing and their experiences of local health and social care services. We worked in partnership with schools, children's centres, youth provision and other voluntary organisations to conduct a range of surveys, focus group-type discussions and other engagement. These activities were all differentiated so they were appropriate for different age groups and as inclusive as possible.

The success of our engagement team in involving this number of individuals should also be placed in the context that our work during this period was conceived of as a "mobilisation" phase of work, in many ways testing out different approaches for reaching children and young people in specific parts of Norfolk. This makes our response rate impressive but also highlights the need for Healthwatch Norfolk to continue to work with children, young people and families to effectively represent their voice.

This is just a beginning. We will build on this work to engage with more children and young people and to understand more about their views and experiences. This will include supporting a new team of young people working as Healthwatch Norfolk volunteers who will engage with and represent their peers.

The challenges that our health and social care services face are well documented, to respond to rising demand when resources can no longer keep pace requires new, innovative and efficient, ways of doing things. Responding to this challenge often means commissioners and providers concentrating on service delivery for older people.

However, young people (0-25) make up a third of Norfolk's population and concerns around trends such as the rise in childhood obesity or the rise in demand for Child and Adolescent Mental Health services (CAMHS) are often cited as "time bombs" for our future care services. We believe that increased engagement of children and young people is essential if statutory services are to better understand their needs and to enable commissioners and providers to design services that are more effective *and* more efficient.

## 1.2 This report

This report describes our engagement findings and makes recommendations for commissioners and providers of services for children, young people and families in Norfolk, as well as national organisations. Crucially, at the end of what we thought of as a mobilisation phase of work, we also make a number of recommendations that we will take forward with partner organisations. This represents an ongoing commitment to give greater prominence to the voice of children and young people and establish Healthwatch Norfolk as a robust and credible champion for their health and wellbeing needs and experiences of services.

A key difference between an *engagement* report like this one and a more traditional research project is that our priority has been to faithfully capture and present the views and experiences of children, young people and their parents in whatever way is appropriate rather than following a pre-defined method. Our approach has evolved even during this relatively short period and we have also allowed our focus to be led by what people have told us.

The views captured here are largely those of children and young people who are "well" and who do not have a particular experience of social care. This reflects the fact that our engagement was largely carried out in partnership with universal settings (schools and children's centres) which

are used by all families in an area. Evidently, within this large sample group there will also be individuals with physical and learning disabilities, long-term conditions, special educational needs (SEN) or whose families have had extensive contact with social services.

By looking at what our sample group told us we have structured our findings into the following five sections:

- Information for children and young people
- Wellbeing of children and young people
- Age appropriate delivery of services
- Variation in service delivery
- Children and young people shaping services

This structure reflects the grouping of comments and concerns which we heard and which inform the recommendations below. Each of these sections is necessarily a summary of what we were told and we could easily make a case that each deserves a dedicated report in its own right. The appendices of the report contain in more detail what we were told through all activities.

We do hope that commissioners and providers of services will study the findings (including the raw data included in the appendices) contained in this report and will work with us and others to continue to ensure that the voices of children, young people and families are central to future decisions regarding services.

### 1.3 Recommendations

The following recommendations are addressed both at the "system" (i.e. statutory commissioners and providers of services for children, young people and their families) and for further work by Healthwatch Norfolk.

NB Recommendations for organisations should be taken to mean all relevant departments/roles within that organisation (e.g. Norfolk County Council (NCC) would include Children's Services, Public Health, etc.).

| **Recommendations for commissioners and providers of services for children and young people:** | ***Who*** |
|---|---|
| Give higher priority to children and young people's health and wellbeing concerns in strategic planning and reporting in the NHS. | HWN/CCGs/ NHS England/ Providers |
| Review provision of information and communication tailored for different age groups including information on service levels/provision (e.g. health visiting). | CCGs/ NHS England/NCC/ Providers |
| Improve communication between professionals and children and young people. | National training bodies/ NHS England/ Healthwatch England |
| Commit to multi-agency working to promote engagement and co-production with children and young people at the centre. | NCC/CCGs/NHS England/Provider organisations |

| **Recommendations for further work by Healthwatch Norfolk:** | ***Who*** |
|---|---|
| Continue with a universal programme of engagement of children and young people to represent all communities and all areas of Norfolk. | HWN and partners |
| Conduct research into children and young people's neuro-developmental needs (e.g. ASD, AADHD) and service provision in Norfolk. | HWN and partners |
| Undertake further targeted engagement work to include groups such as, children and young people with a disability and young carers. | HWN and partners |
| Share the findings and recommendations in this report with the Health and Wellbeing Board and the NCC Joint Strategic Needs Assessment (JSNA) team. | HWN and partners |
| Further targeted engagement work to understand children and young people's mental health needs to complement HWN CAMHS project. | HWN and partners |

# 1. Introduction

## 1.1 Context

Healthwatch Norfolk was created in April 2013 to represent the voice and interest of everyone who lives and works in Norfolk in relation to all publicly funded health and social care in the county. Crucially the remit for Healthwatch Norfolk differs from that of its predecessor organisation, the Local Involvement Network, in that it extends to children's health services *and* social care provision.

Norfolk is often characterised as an elderly and ageing county, yet one third of the population is aged between 0 and 25. Though generally people in this age group use health and social care services much less than older people, they are the group who will inherit the decisions that are being made now about how NHS and social care services are structured, what is commissioned and how and where it is delivered. Additionally, that group of young people includes some of those who draw heavily on the NHS services or for whom health and wellbeing outcomes are among the worst. These include children and young people with a physical or learning disability, children and young people providing substantial levels of care for a family member, looked after children and those who have been adopted.

From its inception Healthwatch Norfolk recognised that working with and on behalf of young people was going to be one of our most important challenges. Historically, organisations like ours have not always been good at connecting the voice of children, young people and families with decision makers. At the same time, NHS services (in particular) have not always been good at involving children and young people throughout the commissioning process to make sure that services properly address their needs and are delivered in the most effective way possible. NHS commissioners themselves are usually quick to acknowledge this is a failing of the past and eager to improve practice in the future, yet are often working inside structures and a culture that characterises children and young people as "hard to reach."

NCC has good consultative structures for young people including the Youth Advisory Boards and involvement of young people when services are being re-commissioned. However, the way that services are structured can mean that this involvement is within service silos and may miss the opportunity to identify innovative and integrated service responses to the health and wellbeing needs of children and young people.

At the time of Healthwatch Norfolk's creation there was a widespread concern that the previous coalition Government's removal of the requirement for top-tier local authorities to have Children's Trust arrangements in place had removed the focus on the benefits of integration, co-ordination or co-location of children's services and that there was a resultant risk to outcomes for children and young people. While educational provision and performance falls outside the remit of Healthwatch Norfolk, the interdependence of health and wellbeing outcomes and educational achievement has long been recognised and is a crucial factor in life outcomes. The principles of service integration in Norfolk are central to planning for the *Better Care Fund* and other joint planning and commissioning activity for older people.

Put simply, there is always more that services can do to support better outcomes for children and young people, to contribute to them going on to lead happy, healthy and fulfilling lives. With the reality of tightened resources not going away any time soon getting services right for children and young people is an opportunity to avoid them needing to access expensive services in later life, there is a practical imperative.

There are, of course, many local and national organisations that work with children, young people and families, that have long championed their views and that often have highly specific expertise and understanding that an organisation like Healthwatch Norfolk could not hope to replicate (nor would we want to duplicate existing good work). We are committed to working in partnership with those organisations, as well as commissioners and providers who face the day-to-day challenge of ensuring the best possible service provision. What Healthwatch Norfolk has the potential to do is be an additional independent voice, with an overview and understanding of the wider health and social care economy, and with the statutory powers that we have to raise concerns locally and nationally.

Healthwatch Norfolk knows that to be a truly effective organisation we have to be credible and evidence-led. The engagement, findings and recommendations captured in this report come at the beginning of a long-term commitment to engage more widely with children and young people and deepen our understanding of their needs and those of their families.

## 1.2 Our engagement with children and young people

During the summer of 2014, Healthwatch Norfolk worked on a strategy to significantly increase the extent to which we engaged with and were able to represent the views of children and young people. We felt that this was the right time to increase our activity to the desired proportion of the overall Healthwatch effort, having established our ways of working and established our credibility with commissioners and providers. In part, the timing of this "ramp up" of our work with children and young people was an acknowledgement that with them, perhaps more than any group, it was essential that we got things right from the beginning, rather than risk alienating them while we were still finding our organisational feet.

However, we had already undertaken the following significant activities which all made a contribution to setting our initial strategy:

- As one of our first priority projects we commissioned the University of East Anglia (UEA) to carry out a study into Tier 4 (in-patient provision) CAMHS. The report captured the experience of service users and made a series of recommendations that Healthwatch Norfolk has taken forward with commissioners and providers. The report was published in February 2014.

- We commissioned Momentum, Mancroft Advisory Project (MAP) and West Norfolk Voluntary and Community Action to undertake a "mapping and gapping" exercise to help us understand how and where the voice of children and young people was being heard and influencing the way in which services were commissioned and developed and where it was not.

- A Healthwatch Norfolk intern undertook a pilot study to help us understand the health needs, concerns and views of children and young people. The result of this pilot work *'Health and wellbeing of children and young people in Norfolk - a first view'* was published in December 2014.

- From the beginning of Healthwatch Norfolk our extensive programme of public engagement has captured the voices of children, young people and families, including those with a specific need such as young carers.

In preparing our initial strategy we also worked with young people, senior leaders in NCC, local NHS organisations and elected representatives to validate our understanding of where our priorities for children and young people should lie.

In October 2014 we brought together stakeholders from across NHS, NCC, representative organisations and providers to share our plans for a mobilisation phase for our children and young people's work, to last approximately six months until the end of April 2015. For this mobilisation phase we identified the following work streams which reflected our understanding of where the greatest health and wellbeing needs were and also, the importance of engaging with the widest possible group of children and young people, and to build awareness of the role of Healthwatch Norfolk.

The four initial priority areas were:

1. Understanding the health and wellbeing needs of looked after children and young people.
2. Understanding the health and wellbeing needs of children, young people and families in disadvantaged communities.
3. Engaging with young people.
4. Engaging with children and families.

These priorities and our plans for the mobilisation phase of our work were also validated and challenged by a steering group which we convened with senior representation from NCC children's services, Public Health, Norfolk Community Health and Care, Family Voice and Momentum.

# 2. This report

This report brings together Healthwatch Norfolk's findings from activity under strands two, three and four of our children and young people's strategy as set out on the previous page. The content of the report reflects a consistent approach to engaging with children and young people and seeking their views on factors that influence their health and wellbeing. The findings below also reflect the particular emphasis on understanding the needs of children, young people and families who live in areas of deprivation.

The findings from our work on strand one of our children and young people's strategy (*Health and wellbeing needs of looked after and adopted children and young people*) are presented in a separate report.

## 2.1 Objectives

The engagement activity that underpins this report had four overarching aims. These were to:

- Widen our understanding of the health and wellbeing priorities and concerns of the largest possible number of children, young people and families.
- Build relationships with partner organisations and to establish the value of working with Healthwatch Norfolk.
- Test our engagement approaches in order to inform a robust and ongoing programme of engagement targeted at children, young people and families.
- Build awareness of Healthwatch Norfolk among children, young people and families.

This report highlights the findings from this work and makes recommendations both for statutory services and Healthwatch Norfolk.

## 2.2 Methodology

Our engagement approach blended activities designed to reach as many children, young people and families as possible and also gave the opportunity for more qualitative discussion of attitudes to health and wellbeing, and experiences of health and social care services.

### 2.2.1 Quantitative approaches

Quantitative approaches which we adopted were:

- A survey aimed at secondary aged children to complete themselves.
- A survey aimed at primary aged children for teachers to complete with children.
- A survey aimed at the parents/families of primary aged children.
- A survey aimed at parents/families of pre-school aged children.

These responses to the questionnaires are shown at appendix B organized into the three target age groups (secondary, primary and pre-school).

We identified early on that it was going to be vital to work with partner organisations in order to reach our target audiences for these surveys. We developed relationships with the following universal settings to maximise our sample group.

Children's Centres:

- Bowthorpe children's centre
- Emneth children's centre

Primary Schools:

- Avenue Junior School, Norwich
- Colman Junior School, Norwich
- Redcastle Family School, Thetford
- Bishops Primary School, Thetford
- Upwell Primary School
- Emneth Primary School

Secondary schools:

- Downham Market Academy
- Thetford Academy
- City of Norwich School

Focus group responses and comments in response to open engagement questions are included at Appendix C, segmented by the age group classifications (secondary, primary and pre-school).

We also worked with colleagues in the YMCA to increase our reach to young people (i.e. secondary school age children) through their Young Health Champions programme which is partially supported by Healthwatch Norfolk. The questionnaire used by the YMCA and a summary report of the work they undertook on our behalf is included at Appendix D.

We also worked with the MoMo theatre, an entertaining education company, who performed there healthy eating show to provide an exciting backdrop for our engagement with the six primary schools mentioned above. Each primary school received a whole school performance followed by further engagement in the classroom. Engagement activities were divided into three age groups with tailored lesson plans and survey questions for each class (see appendix E). The performances with the MoMo theatre and classroom activities also involved Nelson the Healthwatch Elephant (see cover photo). Nelson is a character used on an ongoing basis at engagement events across the county to make Healthwatch Norfolk a more approachable organisation for families with young children.

In total the number of people who responded to our surveys by each target group were:

- Secondary school age young people (2,011)
- Primary school age children (1,592) [from 6 schools, involving MoMo theatre]
- Parents of primary school aged children (62)
- Parents of pre-school aged children (66)

### 2.2.2 Qualitative engagement

To deepen our understanding of our survey results and to further explore attitudes to health and wellbeing and their experience of services, we undertook the following group sessions. These may be loosely described as focus groups although the style of engagement activity varied considerably depending on the age of the participants and the setting where the groups were held.

Appendix C shows comments captured during the focus groups, consolidated and grouped by the three age classifications.

**Focus groups (and participation numbers)**

Secondary school aged young people: *(Total 40)*

- Mile Cross Urban Youth Project (18)
- Thetford Meet Up café (22)

Parents of primary school aged children *(Total 30)*

- Emneth parents evening (30)

Parents of pre-school aged children: *(Total 53)*

- Bowthorpe coffee morning (2)
- Emneth coffee morning/explorers group (12)
- Outwell explorers group (12)
- Upwell parenting group (9)
- Thetford stay and play (8)
- Emneth milky days group (10)

## 2.3 Acknowledgment

We would like to thank all the organisations mentioned above and the individual children, young people and parents who took the time to speak to us or accommodate our work during their busy schedules.

# Our findings

## 3. Information for children, young people and families

Across all strands of engagement and across the three age groups (secondary, primary, pre-school) a concern was raised regarding access to sufficient and appropriate levels of information. This was the case both in respect of information about services that were available and information about expectations of what difference a service would make and what it would entail; for example, helpful information on what is involved in a medical treatment.

> **"…We received a letter to say they have been referred to a hospital and that they would contact us with an appointment, for a hearing test. This letter arrived two weeks ago and we are still waiting. I know two weeks is not very long and I am not complaining, but as a parent I worry about what they will do and the health of my children. In this letter it did not explain what would happen and what they would do, there were no leaflets or anything. As a parent I worry what they will do and how they will actually test their hearing when they are that small."**

Access to information about wider health themes was also identified as being an issue for some young people. This was particularly the case with the young people who we spoke with directly:

> **"There should be more information about sexual health...teachers shouldn't tell us about this stuff and I didn't like learning about it in a mixed class with boys..."**

> **"It would be good if we had more information on HIV."**

> **"Inform people how serious some health issues are."**

> **"Make services confidential and available everywhere, and where everyone knows they are available."**

> **"Introduce the services to the public more."**

For parents of younger children (pre-school and primary school aged) comments often related to specific information about the availability and location of appropriate services or about how to manage a specific condition.

> **"Waiting for new ear moulds seems to take months. It's the lack of communication between services and having to repeat information from one service to another."**

> **"The boys are two and a half years old now and I need to take them to see a dentist but I don't know what is available locally as the GP can't tell me. I often feel like I am not listened too at the GP surgery, particularly as a parent and I refuse to go there now. I don't drive so I can't take them into the city to a dentist and I asked a health visitor but they couldn't tell me either. We don't have a dentist [where I live] so I am limited to where I can take them, but I'm concerned as I know they need to see a dentist. I think a place like this nursery and children's centre could benefit from having links to a dentist or dental hygienist particularly for pre-school children."**

> **"I had to wait two days for my caesarean...I did not receive any information on appropriate exercises I could do or not at home following the birth of my baby...the staff were friendly but more information is required."**

Generally, dissatisfaction with the information available, was a significant factor in our survey responses that rated services as “average”, “not good” or “poor”.

Working on behalf of Healthwatch Norfolk the YMCA asked young people where they would go for health and wellbeing advice. Their proportionate responses are shown below in this word cloud.


**What is good?**

Both young people and parents of younger children most valued information about services, when it was available through universal services such as; schools, GPs and health visitors.

School nurses were identified by some young people as good sources of information, although others said that they would not be likely to go to a school nurse for information.

**What could be better?**

Young people themselves consistently commented that they did not know what services were available and where. This seemed to be a particular concern around those health issues which might be deemed sensitive and where they might be more likely to want access to information independently from their families and/or peers. These aspects of health and wellbeing included:

- Mental Health
- Sexual health
- Substance misuse

Parents of younger children most commonly expressed concerns relating to information about how to access the most appropriate service for their child, closest to where they live.

Overall, concerns about information fall into two categories:

- Information is not always appropriately tailored for different audience groups, particularly for younger people.

- Information is not always appropriately segmented for local communities, making it easy for families to understand what is available near to where they live.

In addition, parents of children who needed to access more specialist or emergency services also expressed frustration at accessing up-to-date and accurate information about where they could go to for help.

> **"I also tried to get in contact with them about my daughter's speech development (or lack of) again to be ignored. Difficult to access doesn't cover it."**

> **"My child cut herself with a piece of glass...we had to wait a long time at the hospital and then they sent us to [*another hospital*] because she was under two years old...clearer information would have saved us the extra trip…"**

## 4. Wellbeing of children and young people

The wellbeing and mental health of children and young people and providing an appropriate service response has been a concern for a number years, both locally and nationally. A significantly increased demand for services in this area means that the system struggles to cope; delays in accessing services, as well as the availability of appropriate services emerged as concerns from our engagement work.


This word cloud captures the factors that secondary school aged young people said most affected their health and wellbeing.

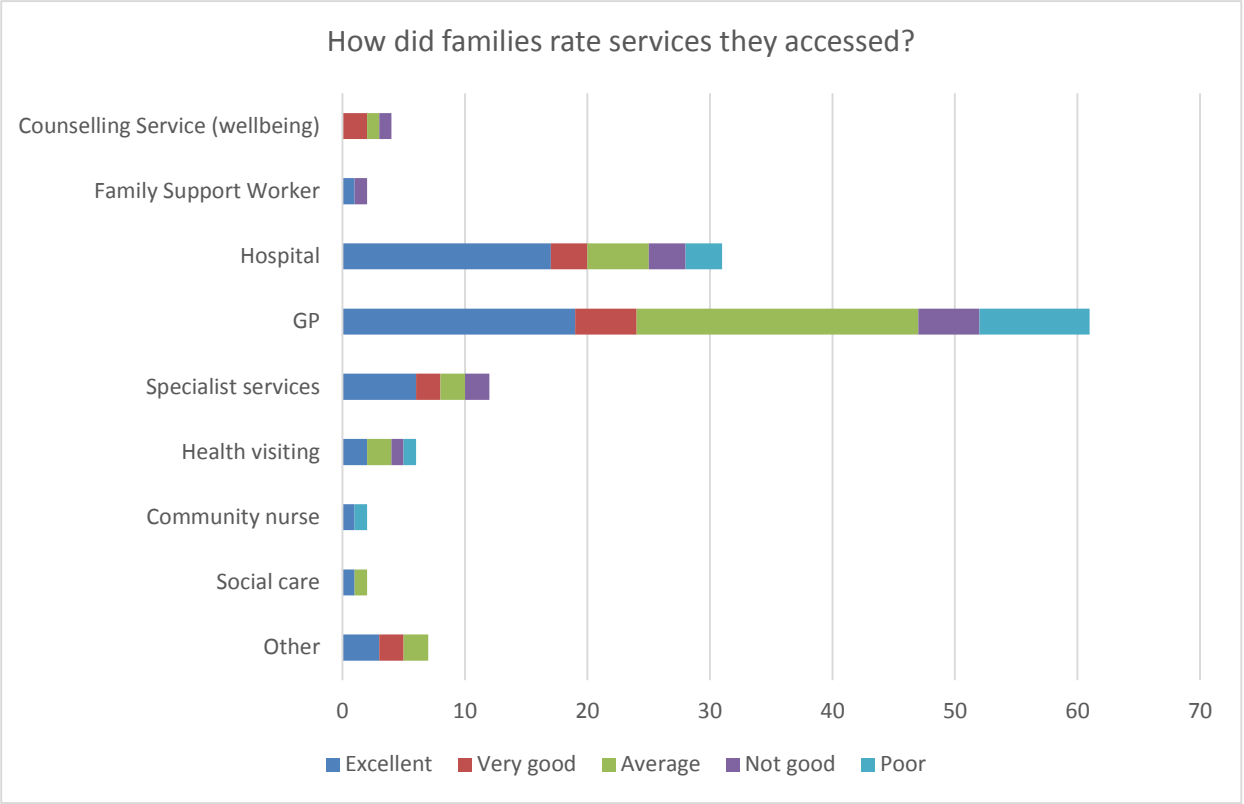
Young people's comments clearly indicated a significant awareness of the mental health issues that they or their peers sometimes faced and the wellbeing/mental health services. Many of their comments reflected the more general pressure for parity of esteem between mental and physical health:

**"I would make sure that teens had help for mental illnesses as much as they have for physical illnesses."**

**"Mental health, stop people feeling low."**

**"Make teen mental health more known to everyone and how important it is."**

**"More focus on battling depression."**




Above; the parents of primary school aged children rated the services they had used.

Comments and concerns relating to younger children's mental health/wellbeing were less prominent during our engagement work but experiences were captured in the survey responses to the rating of counselling (wellbeing) services.

During the focus groups one parent identified a concern about the manner of service delivery:

> **"I was advised to contact the wellbeing service which I did and I had my first consultation on the phone and requested if I could have all future meetings on a one to one basis as I really struggle with the phone and prefer speaking in person."**

Another parents comments related to their own wellbeing and accessing appropriate services:

> **"There is not much for mental health and visits out to people with mental health issues."**

As shown above, many of the comments reflected a lack of information about service provision and/or support. There was little mention made of other, non-statutory, sources of support for children and young people's wellbeing. While in part this reflects the focus of our engagement on people's experiences of "official" services, there may also be an indication that innovative, co-production approaches for mapping community resources (for example the asset based community development project being undertaken by South Norfolk CCG, in summer 2015) should also be explored in relation to children's wellbeing and mental health needs.

A number of comments also reflected that wellbeing services should be more widely available through universal services, particularly schools, to improve the focus on early intervention and/or prevention.

An engagement session capturing young people's views at the Meetup Café in Thetford.

## 5. Age-appropriate delivery of services

From our early pilot work on engagement with children and young people it was clear there were concerns about whether services were appropriately tailored for their needs and preferences. Perhaps the most obvious example given was the mismatch of teenagers being admitted either to children's wards and being in an environment tailored for much younger children, or an adult ward where they might feel similarly out of place.

Young people placed a strong emphasis on the need for appropriate communication from and with professionals. They also felt that the location of services needed to be considered in order to make them more likely to access services or to reduce the stress involved in doing so.

> **"Young staff to talk about sex to young people in clinics."**

> **"We can tell you what we think about services...but adults never listen...if they do listen, they don't do anything about it...I went to the doctors recently...he didn't seem to know what to do and referred me someone else."**

> **"I prefer talking about my problems with the same person...my doctor knows me well...he is brilliant."**

> **"Make services quicker so people can get their support more quickly."**

In some cases problems were created because necessary medical procedures were not explained properly in a way to reassure children or young people:

> **"When I went to hospital they wore masks…it's really scary."**

Parents of younger children generally had a more positive response to services:

> **"The hospital dealt with everything efficiently and explained all aspects of the process very well."**

> **"GP, excellent, helpful and good service."**

While it is difficult to draw detailed conclusions without further work to deepen our understanding of this issue, there was sufficient concern raised through our engagement work to recommend that services give thought to:

- Offering specific additional support to professionals on how to best communicate with young people.
- Reviewing age-specific written materials (including online materials).
- Location of services for young people.

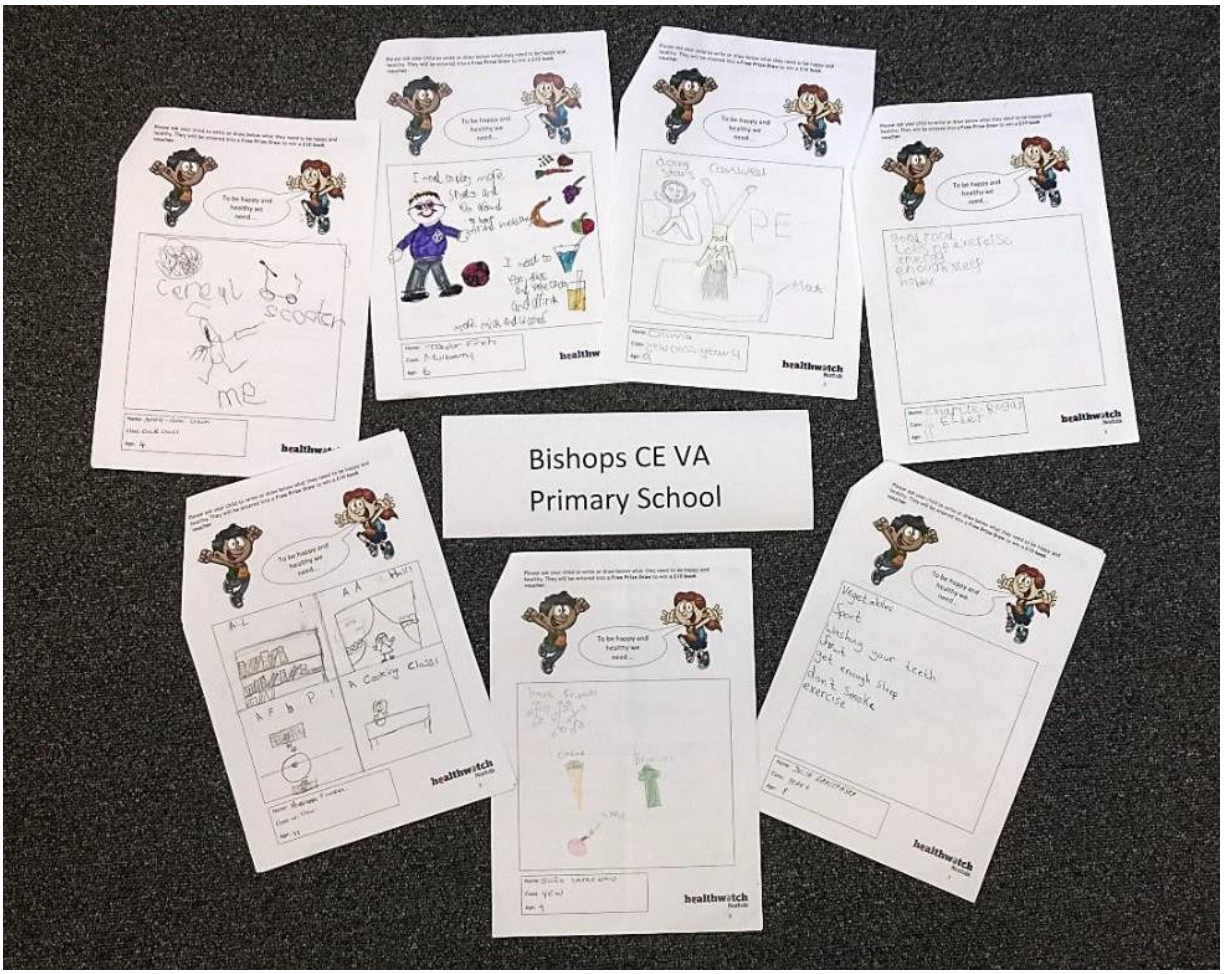
These points are reflected in this report's recommendations.

It was also interesting to note young people's attitudes to social media as a method of delivering health and wellbeing advice or services:

> **"Adults seem to think we do everything on social media. I do tweet what I feel sometimes because I do not have many followers but I would never use Facebook to discuss family or health issues…I would never use Facebook to get support for something I am worried about…even if it is a professional, I would not trust it."**

**"I would not tweet or use Facebook to get support…it should be one-to-one...meeting somewhere like here (community centre café) is better…"**

We adopted different engagement approaches for different ages to encourage participation for all, below demonstrates this with some primary school drawings of what makes children happy and healthy.



# 6. Variation in service delivery

The way that local health services are commissioned and provided in Norfolk (five different CCGs, two different community health providers, three acute hospitals, while social care and public health responsibilities rest with NCC) creates the potential for confusing and frustrating differences in service levels for families in different parts of the county.

While the nature of our engagement was not intended to elicit comparisons between service delivery across Norfolk, we received comments from parents with younger children on services like health visiting and getting a GP appointment, this highlighted different families experiences of universal services:

**"I am very happy with the health visiting service. It has got harder and harder to get an appointment with the GP even if it is for your child. They don't have priority and should. When you do get to see the doctor, they are great."**

**"The health visiting team have not been helpful with the issue of my child's allergies."**

**"I do not trust health visitors because you do not have a rapport with them...I did not receive the two yearly health check...do they still exist?**

**"Several times I rang the health visiting services to be told they'd get back to me but they never did."**

**"GP surgery, too long of a waiting time, always an hour waiting."**

**"The GPs have all been helpful but often they have long waiting times which can be difficult with a baby."**

**"Doctors have long waits for appointments with children. It depends on what doctor you see."**

**"GP, I can always get an appointment although appointment times are not long enough and always running late."**

**"Doctors is brilliant...I can always get an emergency appointment for my child."**

**"Hard to get an appointment with the same GP, if you have an ongoing or chronic illness it is pointless to have to run through everything each time you need to see a *[different]* doctor."**

While the numbers of parents who had children with identified additional needs were too low to draw conclusions and our sample groups did not cover all areas of Norfolk, Healthwatch Norfolk through its continued engagement work needs to be alive to any reported inconsistencies in accessing services for those children with needs including long-term conditions, learning disabilities, developmental delay, emotional needs and neuro-developmental needs (see appendix B.2 and B.4 for the instances of additional needs in our sample group).

While some of the variation here may be explained by different levels of expectation, it signals the need to be conscious of the risks inherent in a large county such as Norfolk, that some areas may be differently served.

Looking at the comments of secondary school-aged young people, potential variations in service provision were highlighted mostly through their comments about what they would like to see more of:

**"More things to do and better support networks like youth groups."**

**"Workers of the services should be present at schools and inform teens of the importance of learning about issues and the help for them."**

**"Specific open centres for young people to go there and talk about their problems."**

**"A place for students to go who are stressed or tired, and need help with school in a relaxing way."**

**"Invest more money in health and wellbeing services."**

Again, further comparative analysis (which falls outside the scope of this report) would be required to show whether comments such as these arise through geographical variation in service levels, general dissatisfaction with the way that services respond to the needs of children and young people or other factors.

# 7. Children and young people shaping services

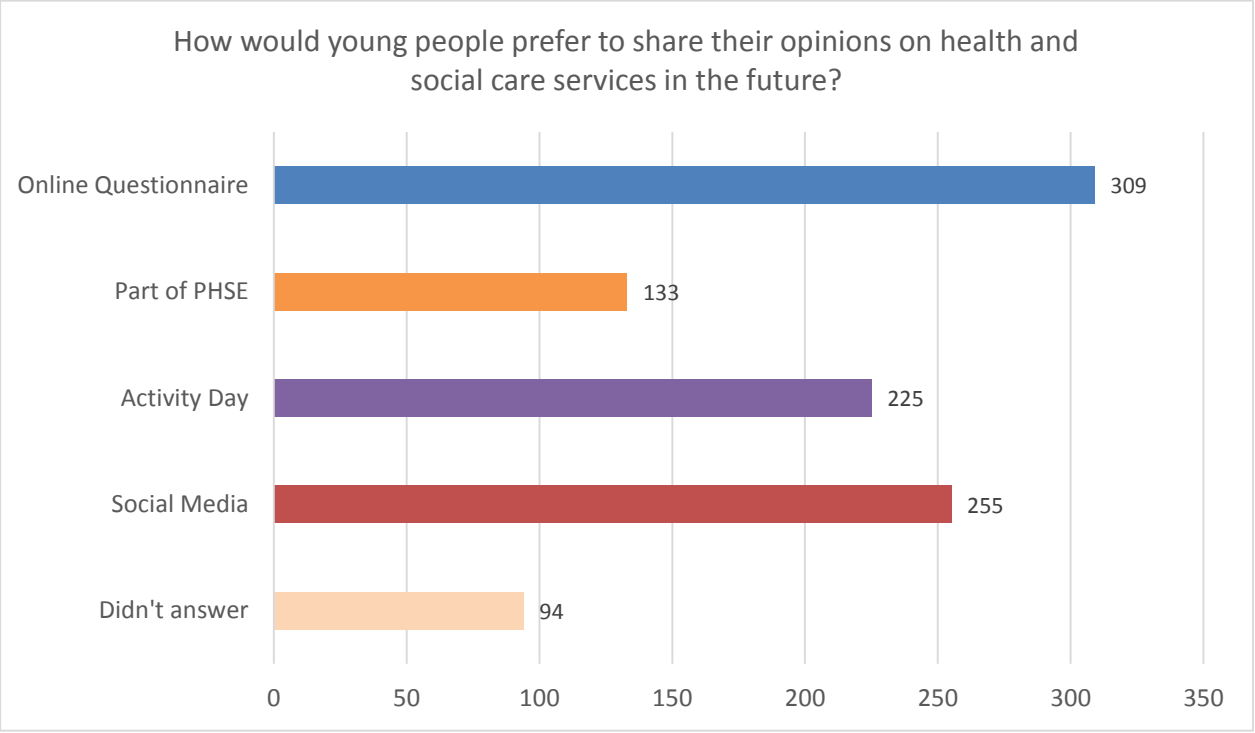
At the core of Healthwatch Norfolk's remit is the objective to increase the degree to which the service user voice is heard through decisions about how and where services are designed and delivered. This reflects the importance in all commissioning activity of a detailed understanding of need but applies also to the implementation and review of services, often referred to as the understand-plan-do-review stages of commissioning.

We firmly believe that increased involvement of children, young people and families in shaping health and social care will mean services that are better at meeting their needs and make more efficient use of the available resources.

Anecdotally, we have heard examples of services for children and young people in Norfolk having been commissioned on the back of very small scale consultations which may have been examples of the "tick-box" approach to consultation. While it falls beyond the remit of this report to critique past commissioning processes, we are committed to promoting more fundamental involvement of children, young people and families in service decisions. In recent years the term "co-production" has come to be used to describe truly collaborative approaches to commissioning and delivering services. We will continue to look at different models of engagement and involvement to see how they affect the success of services in supporting better outcomes for children and young people.

It is worth noting the success of the Healthwatch Norfolk team in engaging so many children and young people in such a short space of time. The flexible approach we took involved meeting children, young people and parents on their territory and on their terms. We also worked hard to engage schools (sometimes described as "difficult to work with" by commissioners) and to identify mutual benefits from the engagement work. We believe that our approach offers insight into what works well which might benefit our partners in the statutory sector.

In their responses to our survey, young people themselves commented on how they wanted to give their opinions about services:



**What is already there and what could be better**

Local government, with its central purpose of democratic accountability, is in a more advanced position when it comes to embedding co-production and placing children and young people's voices within the decision making process. This is seen through structures or initiatives such as:

- Youth parliament,
- Youth advisory boards,
- Young commissioners,
- Involvement of young people in the review of bids and tenders.

Involvement from the health side is a less clear picture. However, it should also be acknowledged that the NHS, in general, is only recently moving to be more publicly accountable for its structures and commissioning and that NHS organisations are not inherently democratic in the same way as local government. We have observed a genuine commitment from NHS commissioners to involve children and young people in decision making, but we have also seen that service boundaries or lack of organisational capacity can sometimes get in the way of effective involvement.

Whatever the successes or shortcomings of current arrangements for involvement, the benefits of doing so effectively are widely acknowledged, and one young person gave a warning about the risks of superficial or partial involvement:

> **"We can tell you what we think about services...but adults never listen...if they do listen, they don't do anything about it."**

Healthwatch Norfolk will continue to make the case for fundamental, cross-organisation/agency involvement and engagement to be central to the way that services for children, young people and families are developed in the future.

## 8. Recommendations and next steps

Our findings during this period of engagement work have allowed us to identify the following recommendations and next steps.

The following recommendations are addressed both at the "system" (ie statutory commissioners and providers of services for children, young people and their families) and for further work by Healthwatch Norfolk.

| **Recommendations for commissioners and providers of services for children and young people:** | ***Who*** |
|---|---|
| Give higher priority to children and young people's health and wellbeing concerns in strategic planning and reporting in the NHS. | HWN/CCGs/ NHS England/ Providers |
| Review provision of information and communication tailored for different age groups including information on service levels/provision (e.g. health visiting). | CCGs/ NHS England/NCC/ Providers |
| Improve communication between professionals and children and young people. | National training bodies/ NHS England/ Healthwatch England |
| Commit to multi-agency working to promote engagement and co-production with children and young people at the centre. | NCC/CCGs/NHS England/Provider organisations |
| | |
| **Recommendations for further work by Healthwatch Norfolk:** | ***Who*** |
| Continue with a universal programme of engagement of children and young people to represent all communities and all areas of Norfolk. | HWN and partners |
| Conduct research into children and young people's neuro-developmental needs (e.g. ASD, AADHD) and service provision in Norfolk. | HWN and partners |
| Undertake further targeted engagement work to include groups such as, children and young people with a disability and young carers. | HWN and partners |
| Share the findings and recommendations in this report with the Health and Wellbeing Board and the NCC Joint Strategic Needs Assessment (JSNA) team. | HWN and partners |
| Further targeted engagement work to understand children and young people's mental health needs to complement HWN CAMHS project. | HWN and partners |

# 9. Appendices

## **Appendix A:** Acknowledgements

The following organisations were central to the engagement work that informs this report.

Children's centres:

- Bowthorpe children's centre
- Emneth children's centre

Primary Schools:

- Avenue Junior school, Norwich
- Colman Junior School, Norwich
- Redcastle Family School, Thetford
- Bishops Primary School, Thetford
- Upwell Primary School
- Emneth Primary School

Secondary schools:

- Downham Market Academy
- Thetford Academy
- City of Norwich School

Other organisations

- YMCA (Young Men's Christian Association)
- Benjamin Foundation
- MAP (Mancroft Advisory Project)
- Family Voice

Plus, to all the members involved in the Healthwatch Norfolk Steering Group for our work related to children and young people.

# **Appendix B** – Surveys used to engage with parents and quantitative analysis

## B.1: Survey used for parents of pre-school aged children

**Your Voice Counts: improving health and social care services in Norfolk**

Dear Parent/Carer,

I am writing to invite you to share your experiences and influence the way health and care services are delivered in the Downham Market area so that outcomes for children and families can be improved. We want to help you shape services that will contribute to your family having happy and healthy lives.

Please contribute to our work by completing the short questionnaire below (anonymity guaranteed) and returning it to….**Children's Centre reception**. The closing date is….If you prefer to complete our survey online, please use the following link: ….

1) Please tick the services below that you or your child have accessed within the last 2 years?

| | | | |
|---|---|---|---|
| Social care | | GP | |
| Community nurse | | Hospital | |
| Health visiting | | Family Support Worker | |
| Specialist services – Physiotherapy/speech therapy | | Counselling services (Health and wellbeing) | |
| Other (Please specify): | | | |

2) For the services that you ticked in question 1 please rate overall (1-5) how satisfied you were with the service? (1=excellent,3=average,5=poor)

| | | | |
|---|---|---|---|
| Social care (adult/child) | | GP | |
| Community nurse | | Hospital | |
| Health visiting | | Family Support Worker | |
| Specialist services – Physiotherapy/speech therapy | | Counselling services (Health and wellbeing) | |
| Other: | | | |

3) Please use the box below to comment on any of the services you have rated – what works well and what doesn't? Are there any services you feel are missing or difficult to access?

| |
|---|
| |

4) Please indicate if the child/children living with you have or have had any additional needs by ticking the relevant boxes below:-

| | |
|---|---|
| Neuro-developmental disorders (ADHD/Autism/Sensory processing disorder) | |
| Emotional needs (behavioural /attachment related behaviours/bereavement) | |
| Developmental delay (fine/gross motor skills/cognitive skills/speech and language | |
| Learning disability (dyslexia, dyspraxia, auditory/visual processing) | |
| Downs syndrome | |
| Long term medical conditions (diabetes/cerebral palsy/dietary) | |
| No additional needs | |
| Other (please specify): | |

5) How well do you feel the needs of your child have been met by health and social care services in Norfolk? Please comment in the box provided below.

**INFORMATION SHARING MORNING**

We would like to find out more about your experiences accessing health and social care services both locally and countywide. If you ***were*** to attend an information sharing morning to tell us more about your personal experiences of health and social care services please tick the venue you would prefer:-

Primary/Infant School/nursery (please specify): ☐ _____

Upwell village hall ☐ _____

Nordelph Village Hall ☐

Thank you for completing the questionnaire. If you wish to be entered into our **Free Prize Draw** for **£50 worth of shopping vouchers** please provide your contact details below. Your details will not be used for anything else.

Name _____

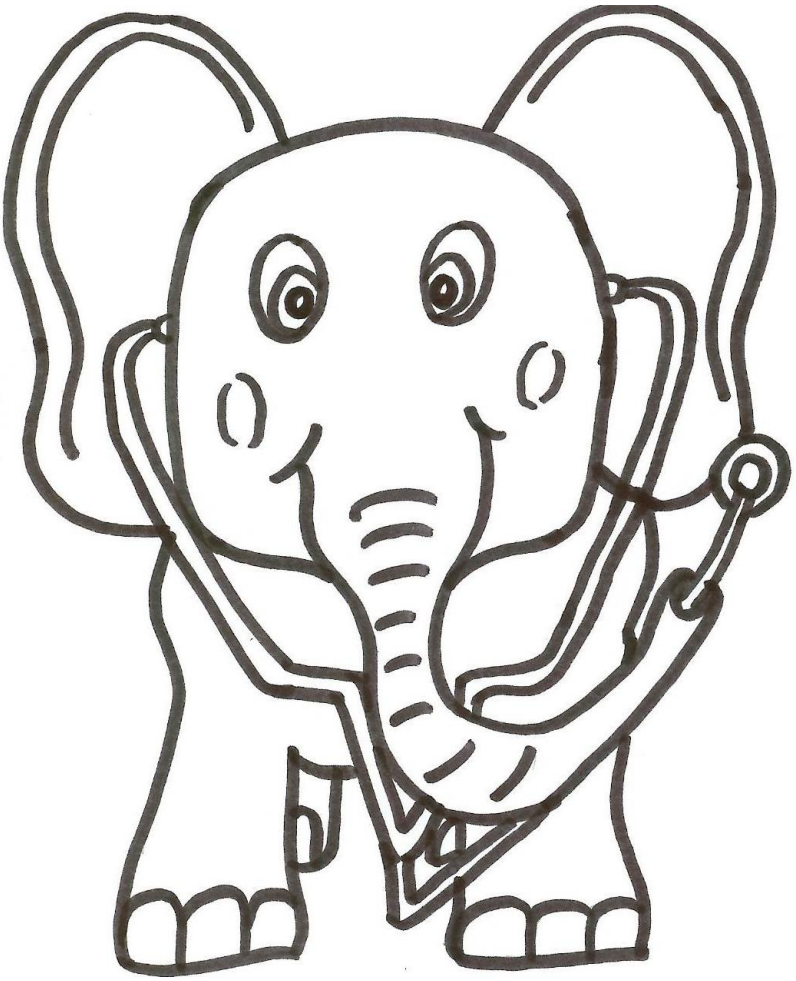
Address _____

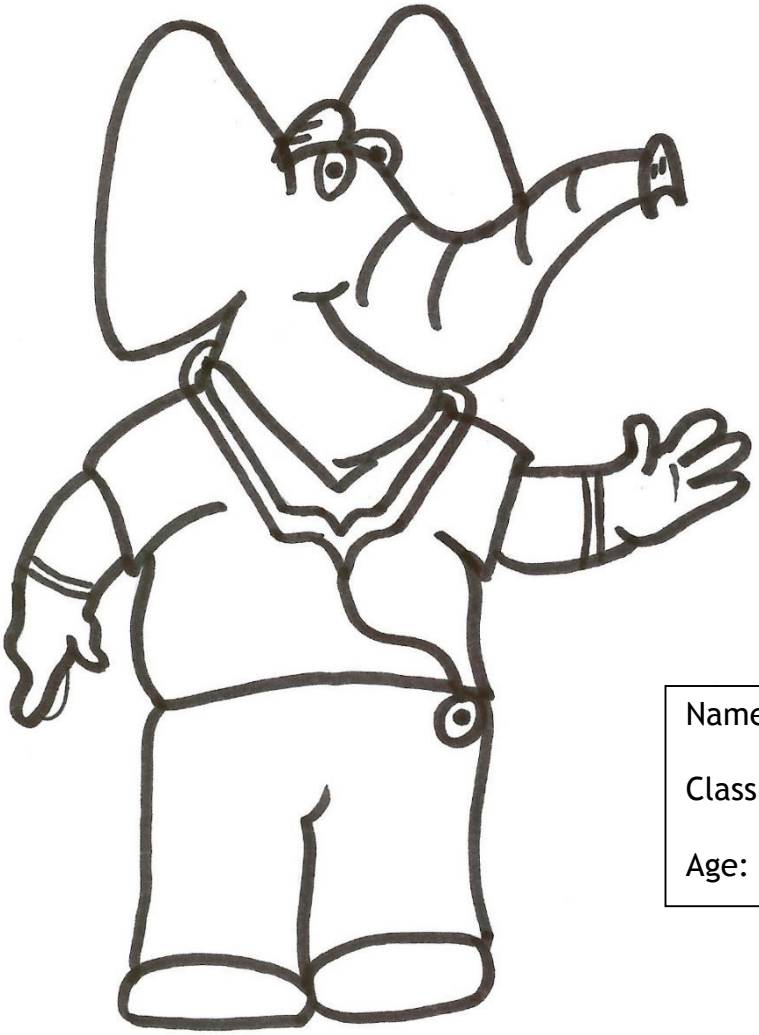
Email address _____

Please tick the box if you are interested in attending an information sharing morning to tell us more.

☐

Please ask your little one to colour in the elephants below. They will be entered into a **Free Prize Draw** to win a soft elephant toy and a reading book.





Name:

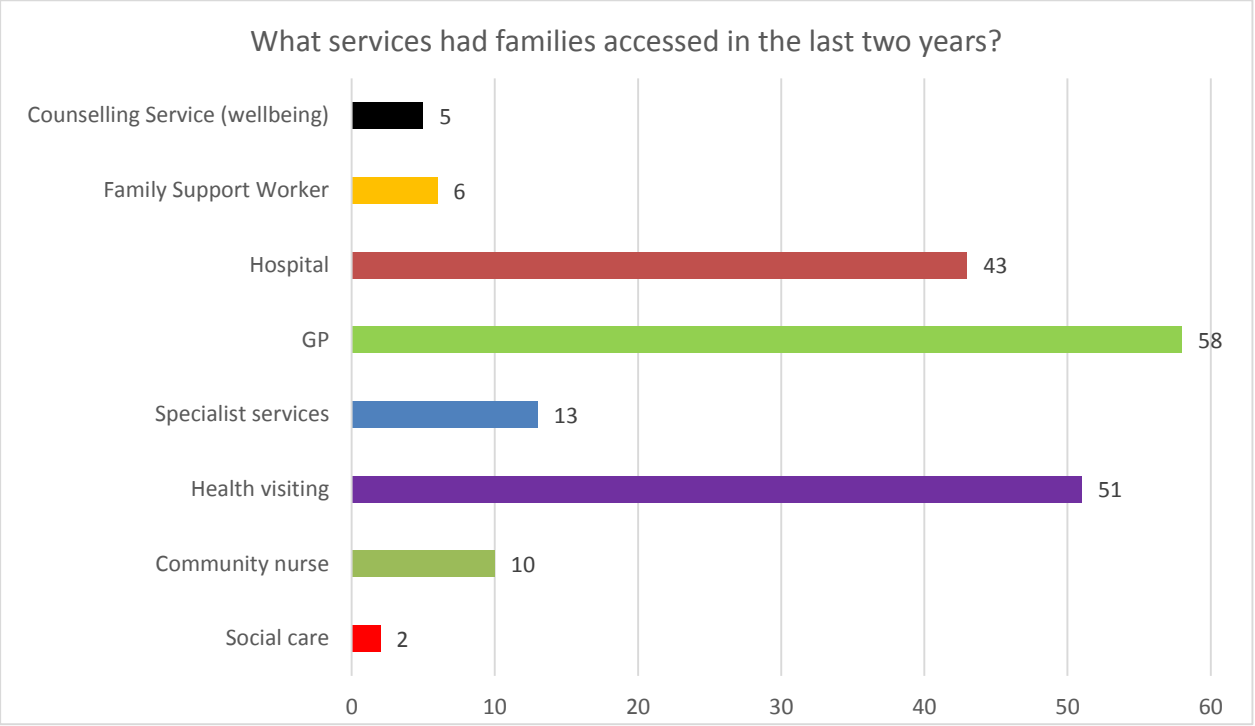
Class:

Age:

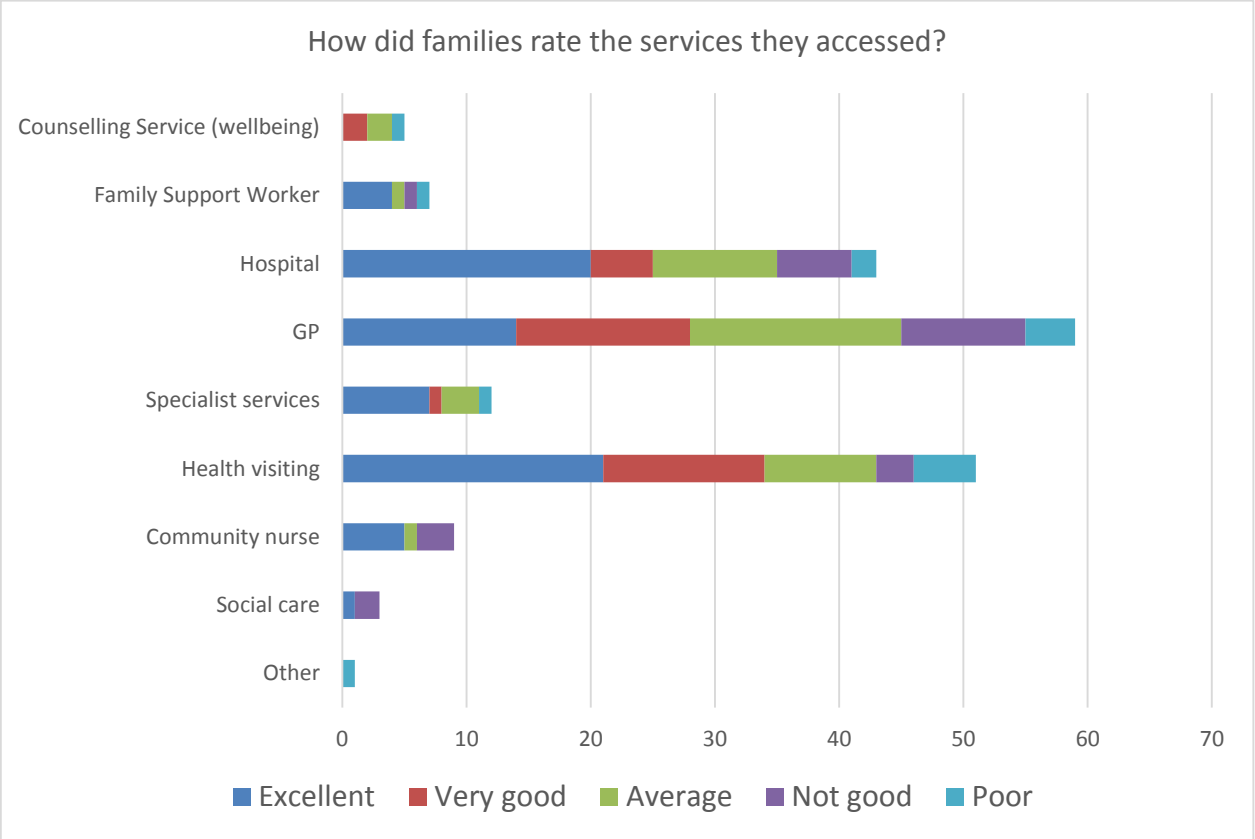
healthwatch Norfolk

## B.2 Quantitative analysis of survey responses from parents of pre-school aged children

Q1: What services have you or your child accessed within the last 2 years?



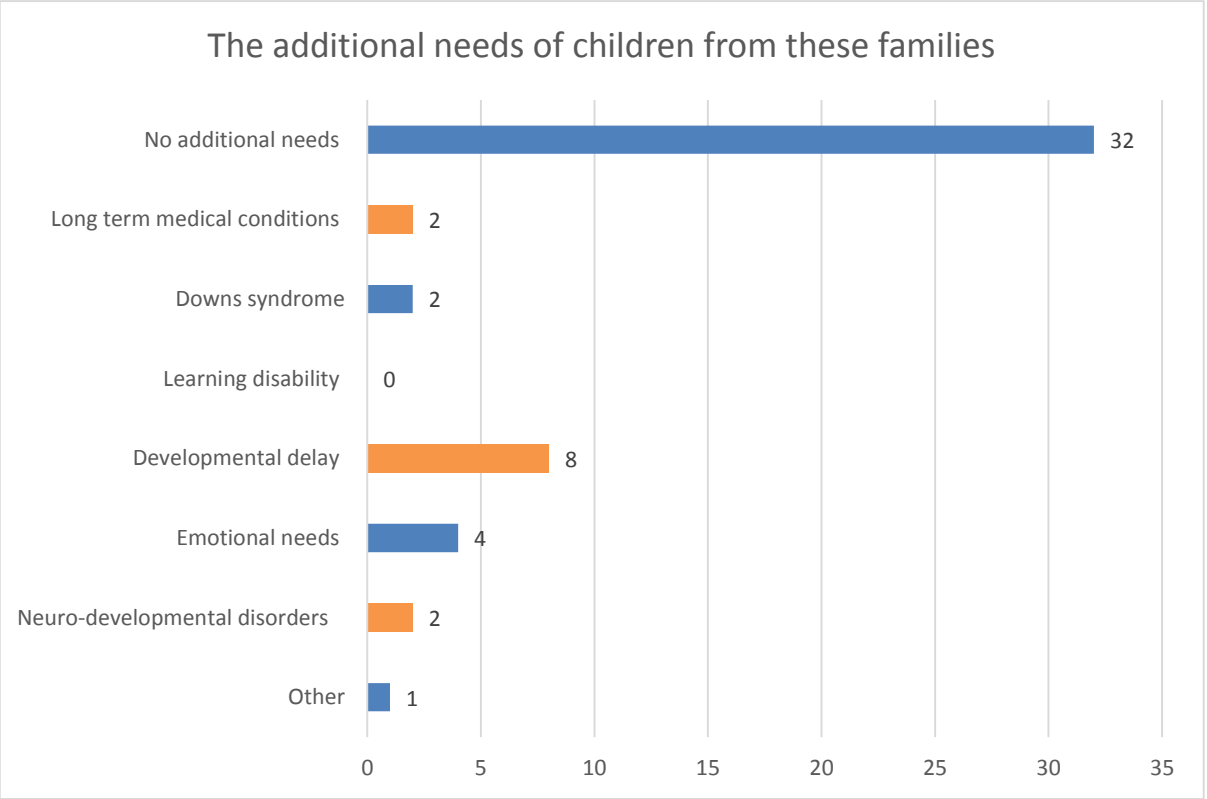

Q2: For the services that you have used, please rate overall (1-5) how satisfied you were with the service? (1= Excellent, 3= Average, 5= Poor)



Q4: Does the child/children living with you have or have had any additional needs?

**Additional needs:**

- Neuro-developmental disorders (ADHD/Autism/Sensory processing disorder)
- Emotional needs (behavioural /attachment related behaviours/bereavement)
- Developmental delay (fine/gross motor skills/cognitive skills/speech and language
- Learning disability (dyslexia, dyspraxia, auditory/visual processing)
- Downs syndrome
- Long term medical conditions (diabetes/cerebral palsy/dietary)
- Other
- No additional needs



## B.3 – Survey used for parents of primary school aged children

**Your Voice Counts: improving health and social care services in Norfolk**

Dear Parent/Carer,

I am writing to invite you to share your experiences and influence the way health and social care services are delivered in Norwich so that outcomes for children and families can be improved. We want to help you shape services that will contribute to your family having happy and healthy lives.

Please contribute to our work by completing the short questionnaire below (anonymity guaranteed) and returning it to**….School reception**. The closing date is….If you prefer to complete our survey online, please use the following link: …..

3) Please tick the services below that you or your child have accessed within the last 2 years?

| | | | |
|---|---|---|---|
| Social care | | GP | |
| Community nurse | | Hospital | |
| Health visiting | | Family Support Worker | |
| Specialist services – Physiotherapy/speech therapy | | Counselling services (Health and wellbeing) | |
| Other: (Please specify) | | | |

4) For the services that you ticked in question 1 please rate overall (1-5) how satisfied you were with the service? (1= excellent, 3= average,5= poor)

| | | | |
|---|---|---|---|
| Social care | | GP | |
| Community nurse | | Hospital | |
| Health visiting | | Family Support Worker | |
| Specialist services – Physiotherapy/speech therapy | | Counselling services (Health and wellbeing) | |
| Other: | | | |

6) Please use the box below to comment on any of the services you have rated – what works well and what doesn't? Are there any services you feel are missing or difficult to access?

| |
|---|
| |

7) Please indicate if the child/children living with you have or have had any additional needs by ticking the relevant boxes below:-

| | |
|---|---|
| Neuro-developmental disorders (ADHD/Autism/Sensory processing disorder) | |
| Emotional needs (behavioural /attachment related behaviours/bereavement) | |
| Developmental delay (fine/gross motor skills/cognitive skills/speech and language | |
| Learning disability (dyslexia, dyspraxia, auditory/visual processing) | |
| Downs syndrome | |
| Long term medical conditions (diabetes/cerebral palsy/dietary) | |
| No additional needs | |
| Other: (please specify) | |

8) How well do you feel the needs of your child have or are being met by services? In your opinion are there any improvements to local services that could be made in order to meet the needs of your **child/children**? Please comment in the box provided below.

**COFFEE MORNING**

We would like to find out more about your experiences accessing health and social care services both locally and countywide. If you ***were*** to attend a coffee morning to tell us more about your personal experiences of health and social care services please tick and specify the venue you would prefer:-

Primary/Infant School/nursery (please specify): ☐ _____

Community centre (please specify): ☐ _____

Children's Centre (please specify): ☐ _____

Thank you for completing the questionnaire. If you wish to be entered into our **Free Prize Draw** for **£50 worth of shopping vouchers** please provide your contact details below. Your details will not be used for anything else.

Name _____

Address _____

Email address _____

Please tick the box if you are interested in attending a coffee morning to tell us more. ☐

Please ask your child to write or draw below what they need to be happy and healthy.
They will be entered into a **Free Prize Draw** to win a **£10 book voucher**.

To be happy and healthy we need….

Name:

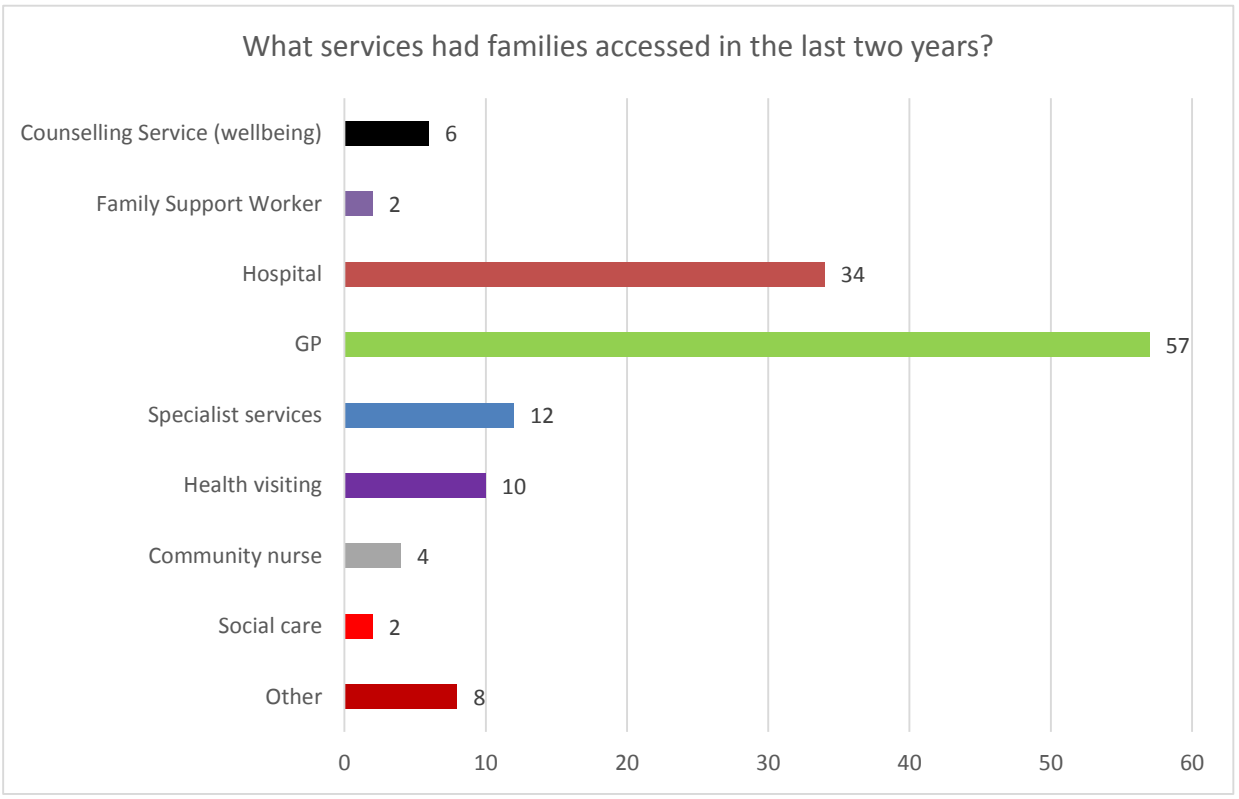
Class:

Age:

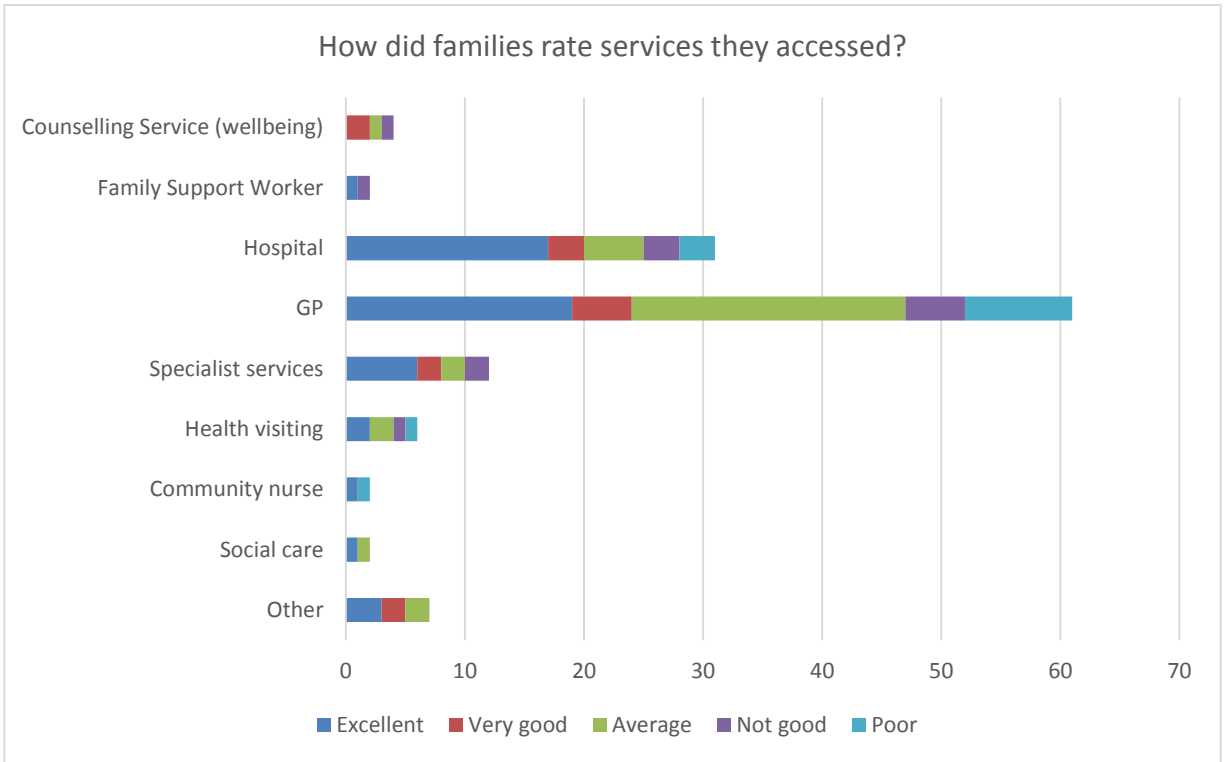
healthwatch Norfolk

# B.4 Quantitative analysis of survey responses from parents of primary school aged children

Q1: What services have you or your child accessed within the last 2 years?



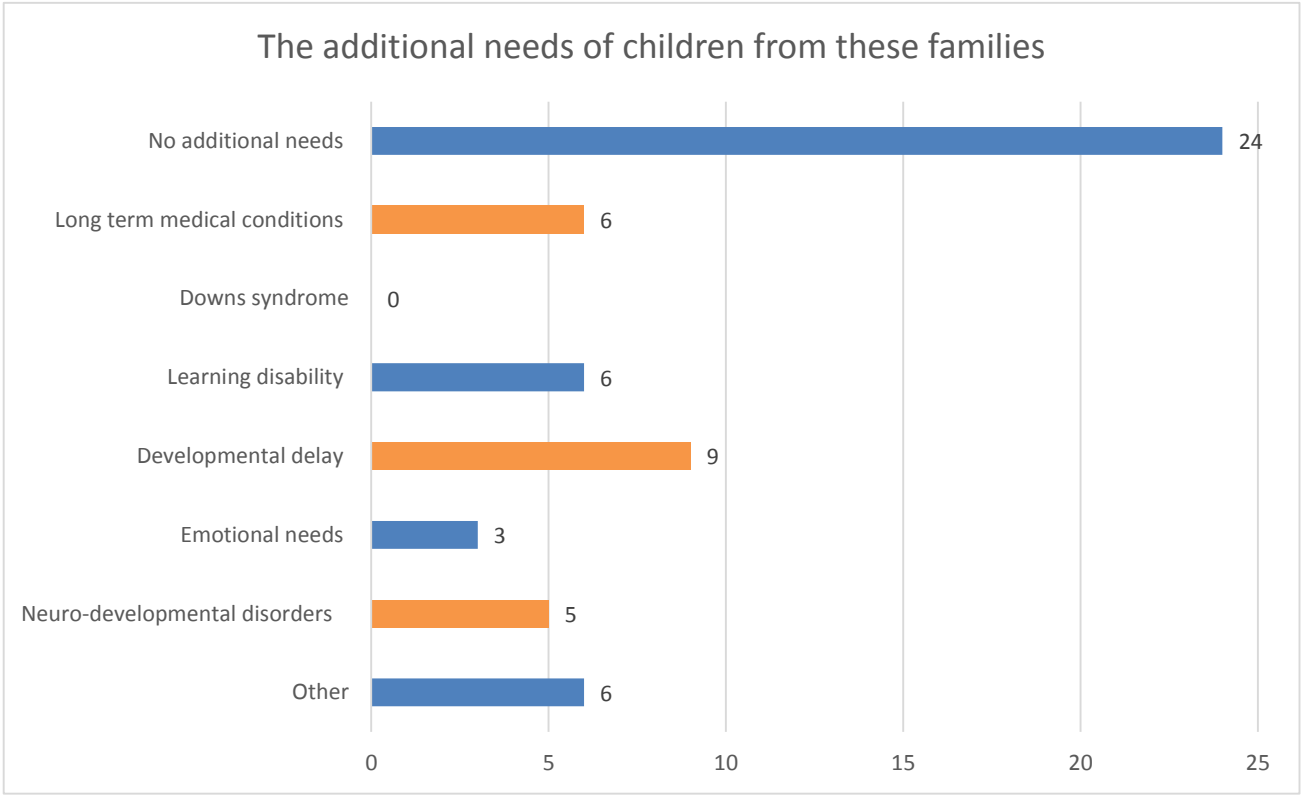

Q2: For the services that you have used, please rate overall (1-5) how satisfied you were with the service? (1= excellent, 3= average, 5= poor)



Q4: Does the child/children living with you have or have had any additional needs?

**Additional needs:**

- Neuro-developmental disorders (ADHD/Autism/Sensory processing disorder)
- Emotional needs (behavioural/attachment related behaviours/bereavement)
- Developmental delay (fine/gross motor skills/cognitive skills/speech and language
- Learning disability (dyslexia, dyspraxia, auditory/visual processing)
- Downs syndrome
- Long term medical conditions (diabetes/cerebral palsy/dietary)
- Other
- No additional needs



# B.5 – Survey used for secondary school aged young people (KS3 & KS4)

**YOUR VOICE MATTERS!**

Healthwatch Norfolk needs your help to improve health and social care services that you might one day need or already use. We would like to find out what you think about **health and social care services** in Norfolk so that we can use your views to improve services for everyone. The more views we gather, the more likely we can have an impact and make changes. The results of this survey will support current and ongoing service improvement plans. Feedback from 250 students across Norfolk has been used to create this survey. Your responses will be anonymised.

**1. Have you been to the doctors in the last 2 years?**

| | |
|---|---|
| | Yes |
| | No |

**2. Please select the name of your surgery below:**

| | |
|---|---|
| Newmarket Road | Downham Market Health Centre |
| Lakenham Surgery | Howdale Surgery |
| Drayton & St Faiths Medical Centre | Watlington Medical Centre |
| Cringleford Surgery | The Hollies Surgery |
| Lawson Road Surgery | Upwell Health Centre |
| Heathgate Surgery | Other |
| Bridge Street Surgery | |

**3. Please rate how good you think the service you received was?**
**(1 = poor and 5 = excellent)**

| | 1 2 3 4 5 |
|---|---|
| Attitude of staff (respectful/friendly) | |
| Communication of staff (did the doctor/nurse explain things in a way you could understand. | |
| Did you feel listened to?) | |
| Waiting time (once at the surgery, did you get seen quickly?) | |
| Diagnosis (did you think the doctor understood the problem and were you satisfied with the outcome?) | |

**4. Have you been to the dentist in the last 2 years?**

| | |
|---|---|
| | Yes |
| | No |

**5. Please select the name of your dentist below:**

| | |
|---|---|
| All Saints Green Dental Practice | Cambridge New Square Dental |
| Treetops Dental Practice | Downham Dental Practice |
| Cathedral Street Dental Practice | Kings Lynn Dental Surgery |
| Denteam Dental Care | Priory Dental Care |
| Cambridge New Square Dental | Townley Dental Care |
| | Other |

**6. Please rate how good you think the service you received was?**
**(1 = poor and 5 = excellent)**

| | 1 2 3 4 5 |
|---|---|
| Attitude of staff (respectful/friendly) | |
| Communication of staff (did the doctor/nurse explain things in a way you could understand. | |
| Did you feel listened to?) | |
| Waiting time (once at the surgery, did you get seen quickly?) | |
| Treatment (were you pleased with the treatment you received?) | |

**7. Have you been to hospital in the last 2 years?**

| | |
|---|---|
| | Yes |
| | No |

**8. Please tick the name of the hospital below and briefly say why you went.**

| |
|---|
| The Queen Elizabeth Hospital Kings Lynn |
| The Norfolk and Norwich Hospital |
| The James Paget Hospital |
| Addenbrooke's Hospital |
| Other |

**9. What did you go to hospital for? (e.g. a broken arm)**

**10. Please rate how good you think the service you received was?**
**(1 = poor and 5 = excellent)**

| | 1 2 3 4 5 |
|---|---|
| Attitude of staff (respectful/friendly) | |
| Communication of staff (did the doctor/nurse explain things in a way you could understand. | |
| Did you feel listened to?) | |
| Waiting time (once at the surgery, did you get seen quickly?) | |
| Diagnosis (did you think the doctor understood the problem and were you satisfied with the outcome?) | |

**11. What do you think are the top 3 things that affect the health and wellbeing of a student who is the same age as you?**

| |
|---|
| 1 |
| 2 |
| 3 |

**12. Where would you rather receive support for your number one top priority above?**

| | |
|---|---|
| Home | Text |
| Twitter | Leisure Centre |
| Community Centre | Facebook |
| Library | Doctors Surgery |
| School | Café |
| | Other |

**13. If you have used one of the services below, please indicate on a scale of 1-5 how effective you thought it was?**
If you have not used one of these services please skip to the next question.

| | 1 2 3 4 5 |
|---|---|
| BEAT | |
| COUNSELLING (In School) | |
| FAITH GROUPS | |
| MAP | |
| YOUNG CARERS | |

**14. Families sometimes need support so children can be happy, achieve and learn. What do you think is the most important thing families need help with?**

**15. Where do you think parents/carers would prefer to get health and wellbeing support from?** *Use the list at the top of the page to help you.*

**Tweet the Prime minister**
**16. If you were Prime Minister what changes would you make to health and wellbeing services available for someone your age?**

**17.Your opinions on health and wellbeing services are not only important today and it is important that young people have a voice with regard to their health and wellbeing. How would you prefer to share your opinions in the future?**

| |
|---|
| SOCIAL MEDIA |
| ACTIVITY DAY |
| PART OF PHSE |
| ONLINE QUESTIONNAIRE |

**18.Please tell us the first half of your postcode:** ***(e.g. PE38)***

**19. Please indicate your year group:**

| | |
|---|---|
| | Yr 10 |
| | Yr 11 |
| | Yr 12 |

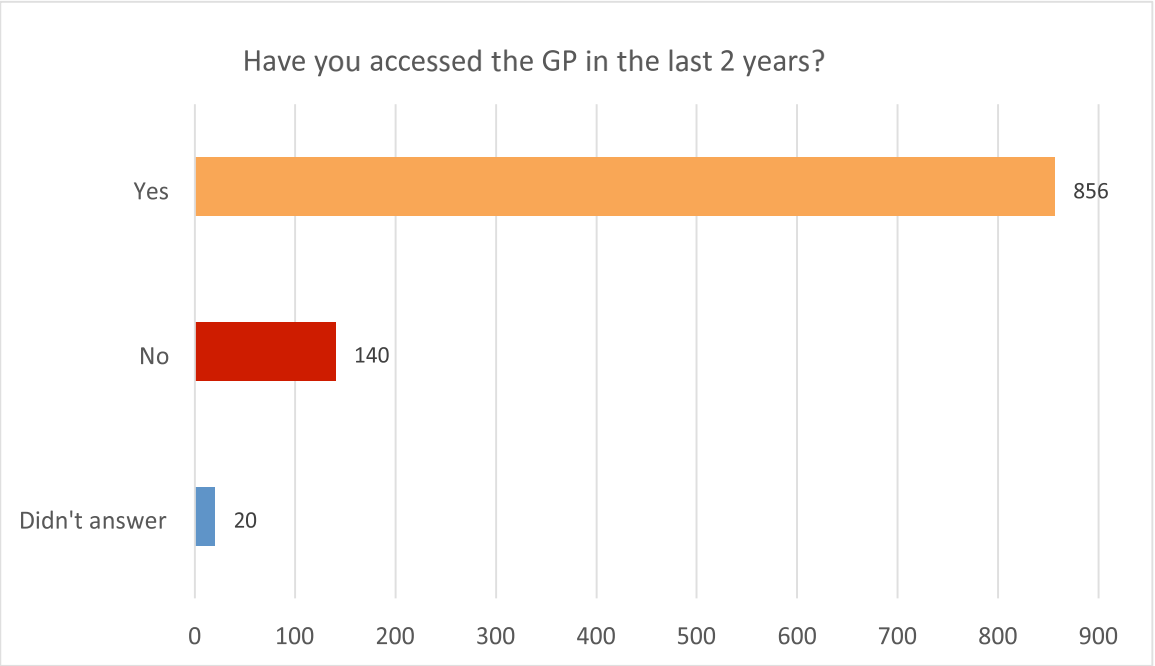
**20. What is your ethnic group?**

Choose one option that best describes your ethnic group or background:
If 'other', please describe:

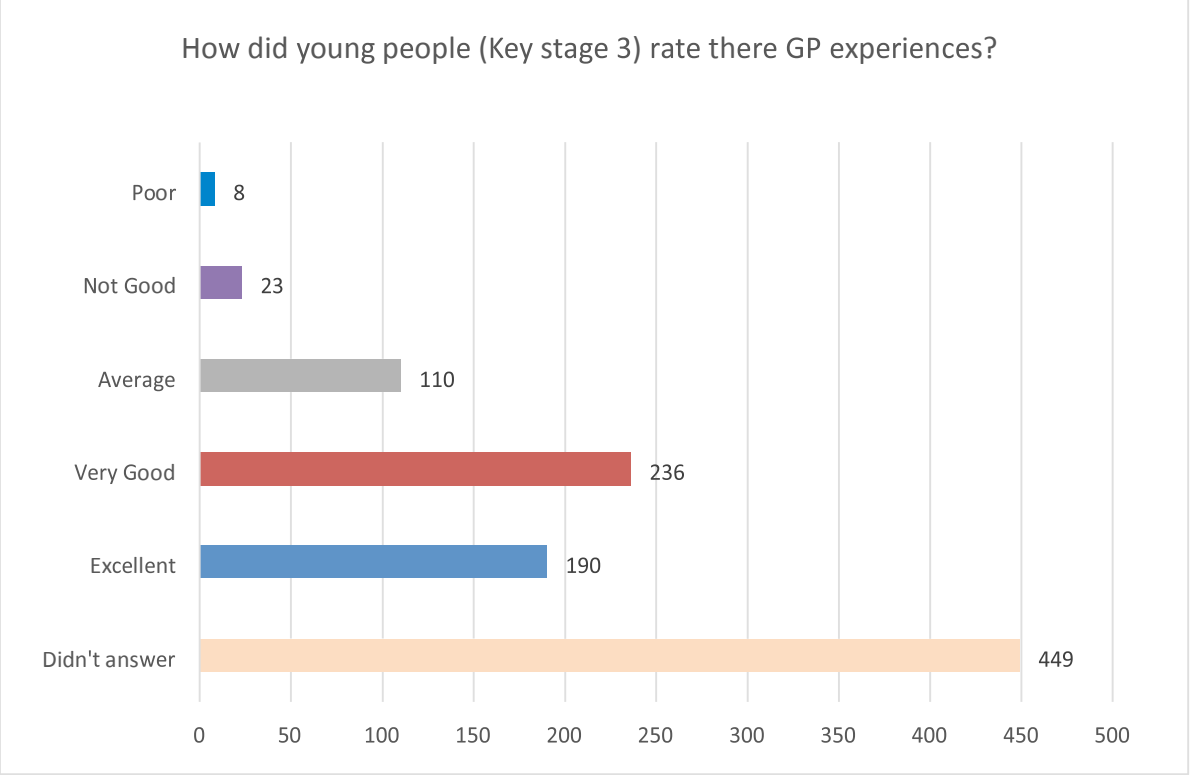
White - **English / Welsh / Scottish / Northern Irish / British**
White - **Irish**
White - **Gypsy or Irish Traveller**
White - **Any other White background** (please describe)
Mixed / Multiple ethnic groups - **White and Black Caribbean**
Mixed / Multiple ethnic groups - **White and Black African**
Mixed / Multiple ethnic groups - **White and Asian**
Mixed / Multiple ethnic groups - **Any other Mixed / Multiple ethnic background** (please describe)
Asian / Asian British - **Indian**
Asian / Asian British - **Pakistani**
Asian / Asian British - **Bangladeshi**
Asian / Asian British - **Chinese**
Asian / Asian British - **Any other Asian Background** (please describe)
Black / African / Caribbean / Black British - **African**
Black / African / Caribbean / Black British - **Caribbean**
Black / African / Caribbean / Black British - **Any other Black / African / Caribbean background** (please describe)
Other ethnic group - **Arab**
Other ethnic group - **Any other ethnic group** (please describe)

# B.6 – Analysis of secondary school aged young people's survey responses (including word cloud analysis of free text responses)

Q1: (KS3 & KS4) Have you been to the doctors in the last 2 years?

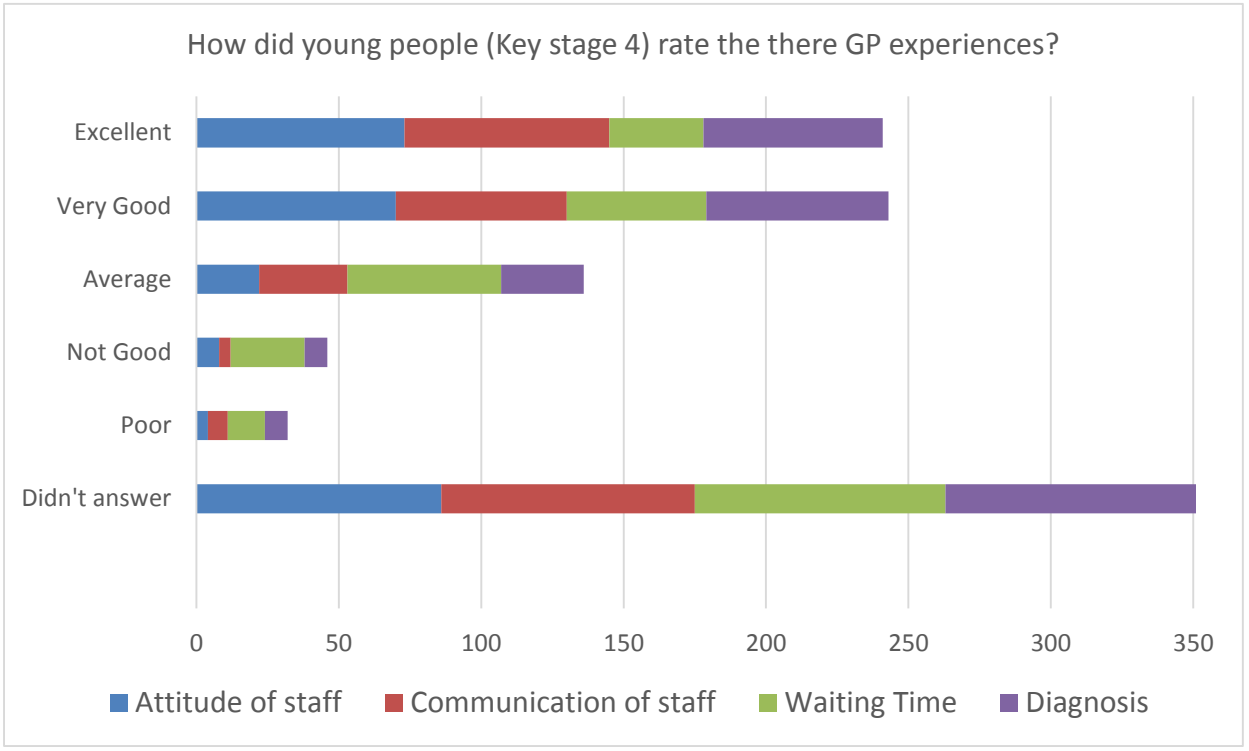



Q3: (KS3) Please rate how good you think the service you received was?
(1= excellent, 3= average, 5= poor)

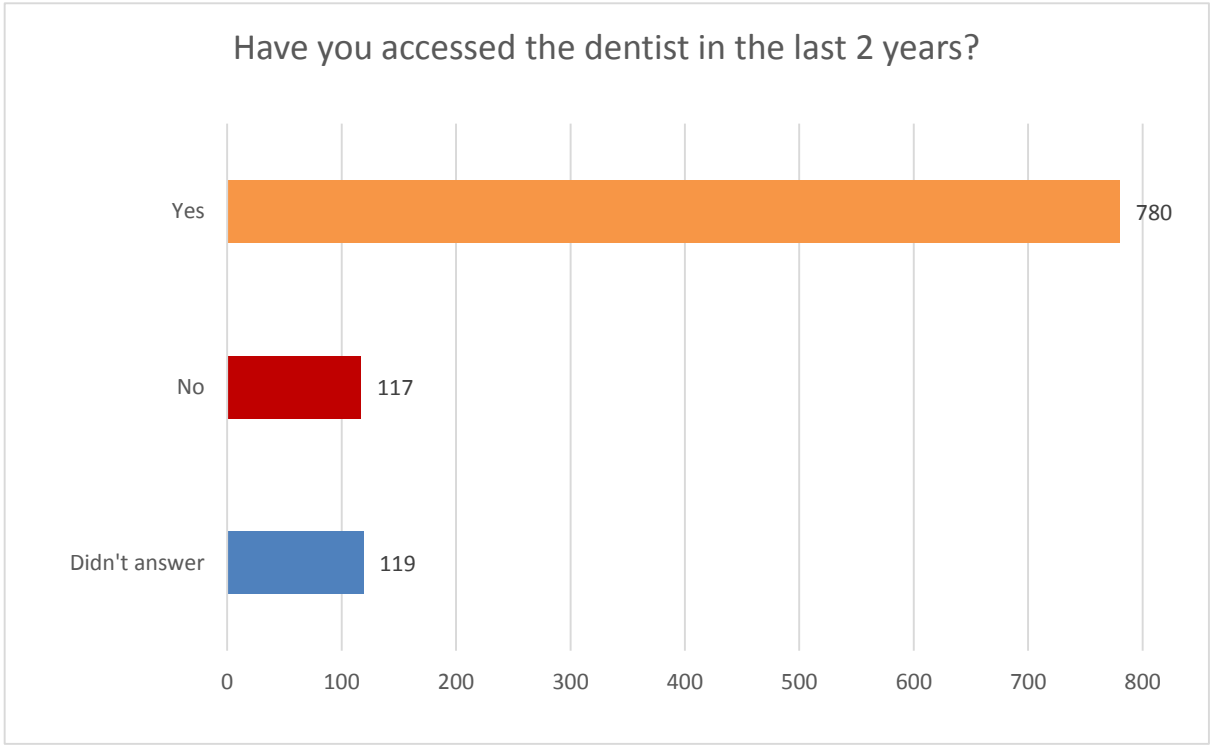


Q3: (KS4) Please rate how good you think the service you received was?
(1= excellent, 3= average, 5= poor)

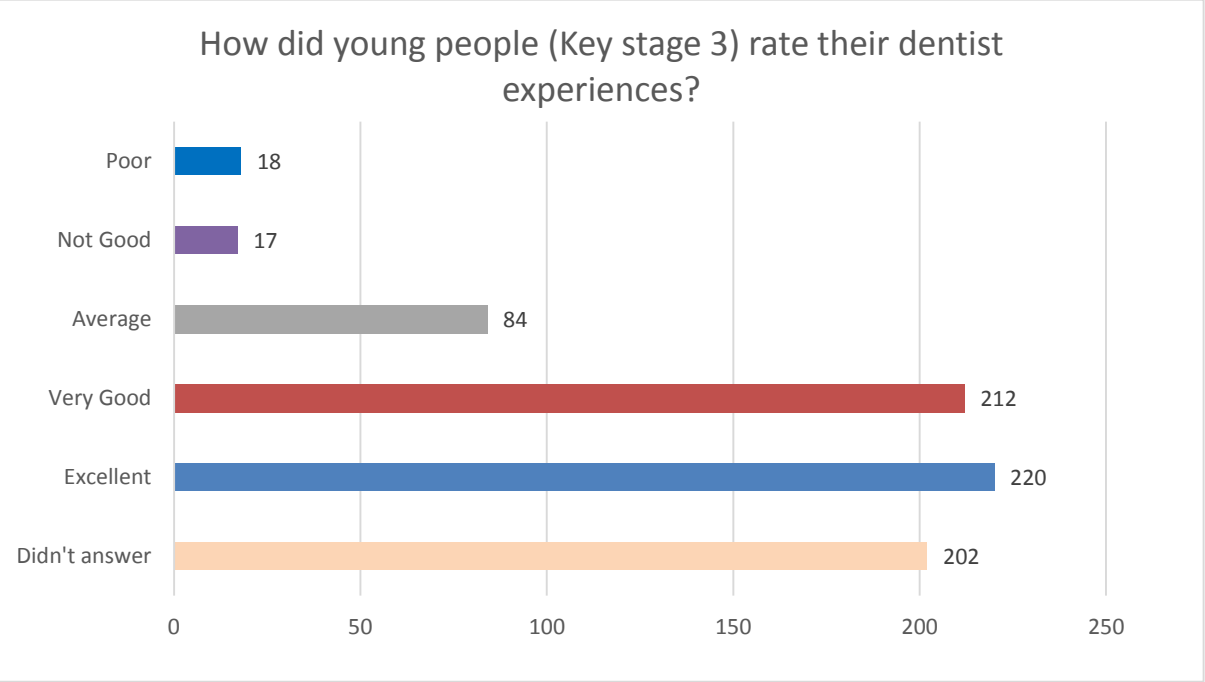
- Attitude of staff (respectful/friendly)
- Communication of staff (did the doctor/nurse explain things in a way you could understand. Did you feel listened to?)
- Waiting time (once at the surgery, did you get seen quickly?)
- Diagnosis (did you think the doctor understood the problem and were you satisfied with the outcome?)




Q4: (KS3 & KS4) Have you been to the dentist in the last 2 years?

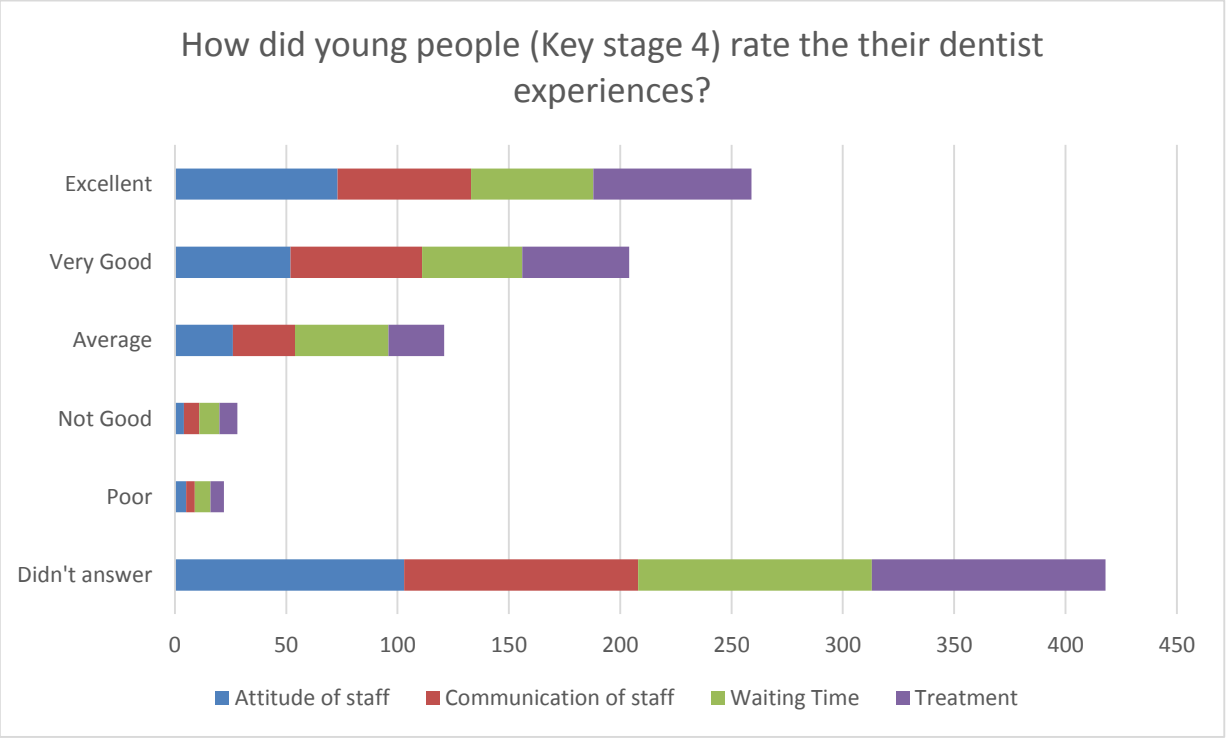


Q6: (KS3) Please rate how good you think the service you received was?
(1= excellent, 3= average, 5= poor)

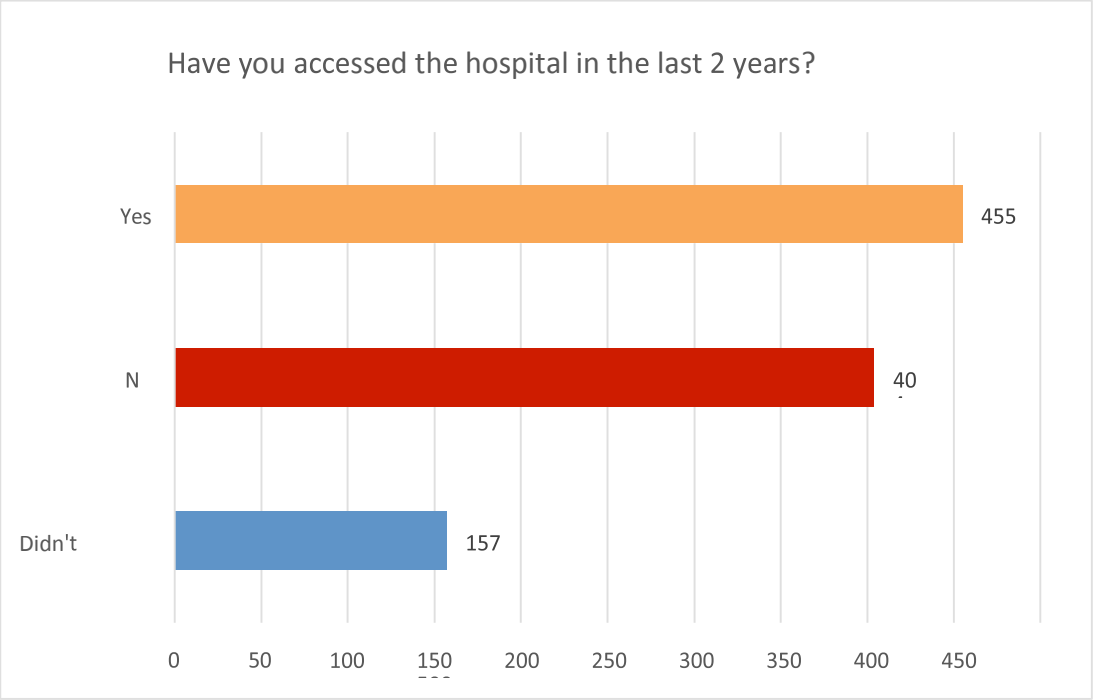



Q6: (KS4) Please rate how good you think the service you received was?
(1= excellent, 3= average, 5= poor)

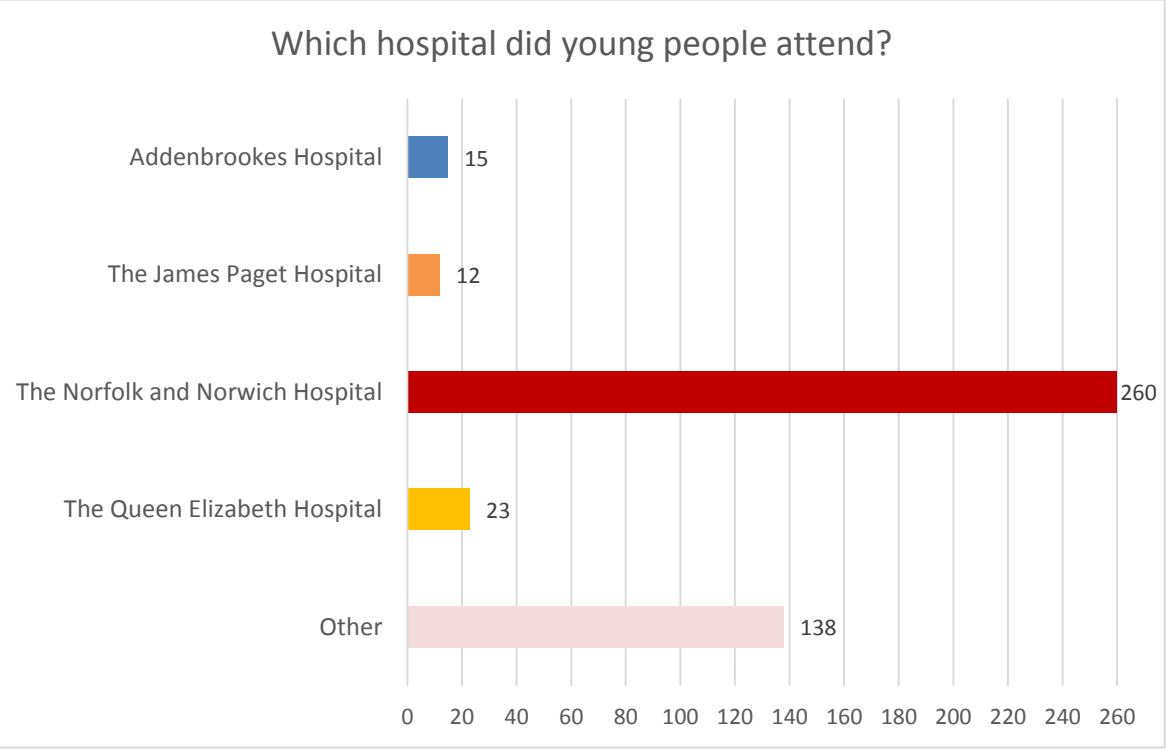
- Attitude of staff (respectful/friendly)
- Communication of staff (did the doctor/nurse explain things in a way you could understand. Did you feel listened to?)
- Waiting time (once at the surgery, did you get seen quickly?)
- Treatment (were you pleased with the treatment you received?)



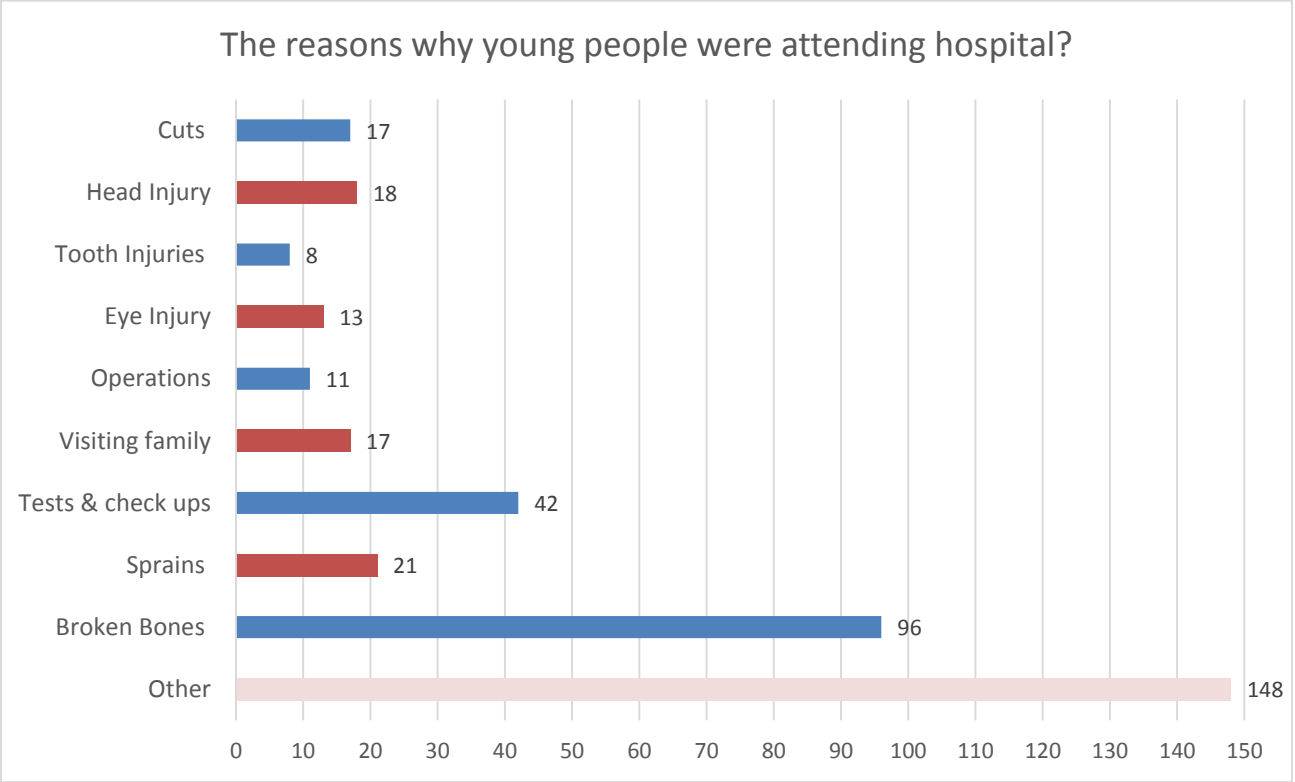
Q7: (KS3 & KS4) Have you been to the hospital in the last 2 years?




Q8: (KS3 & KS4) What hospital did you attend?

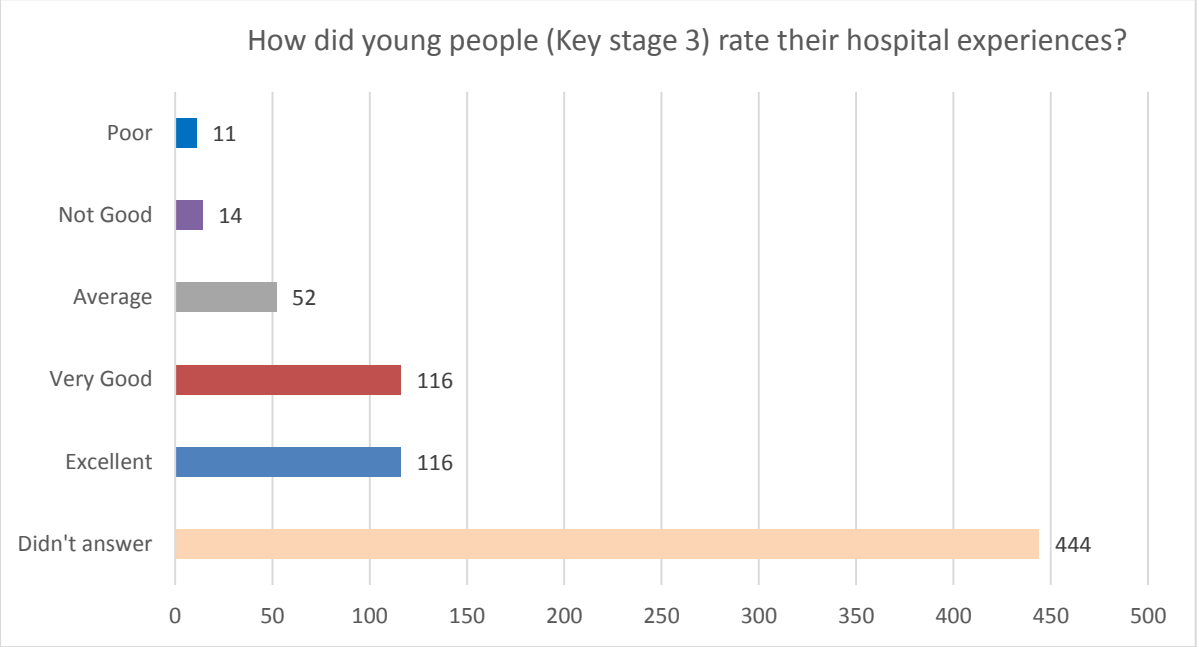


Q9: (KS3 & KS4) What was your reason for going to hospital?



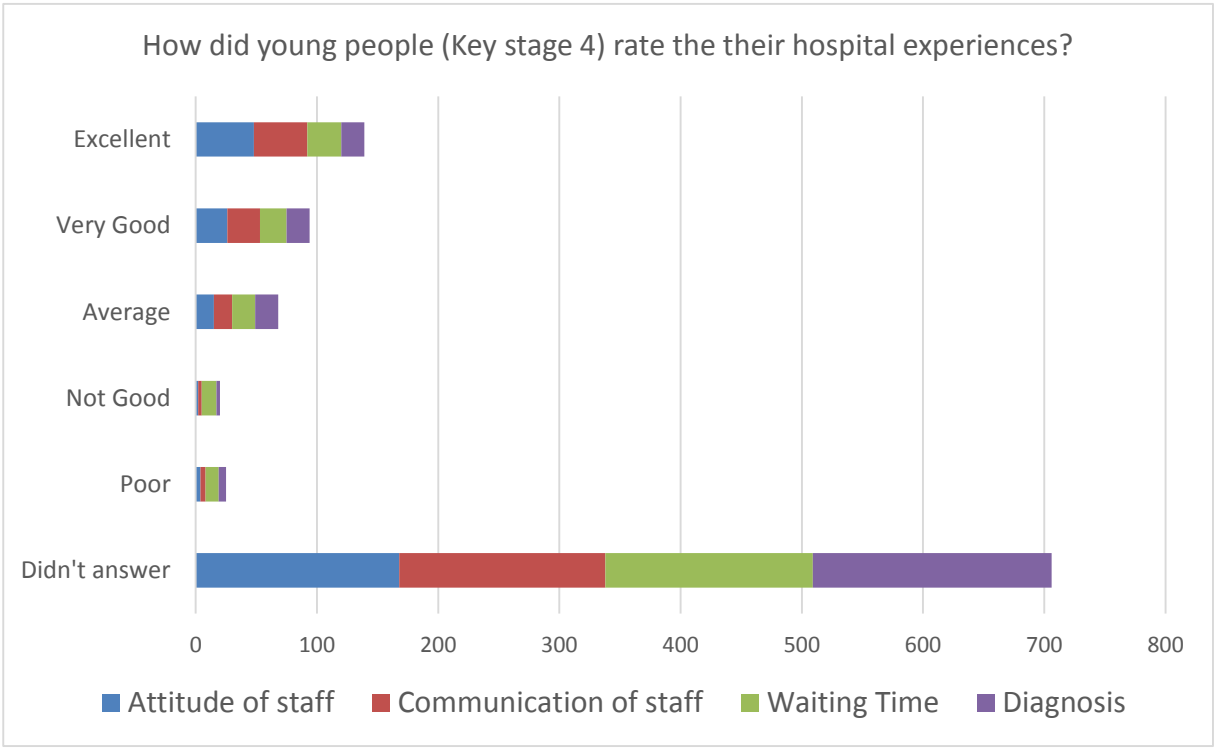

Other responses included references to specific conditions such as asthma and diabetes as well as the following: dislocations, accidents, Infections, ear injuries, muscle injuries and orthotics.

Q10: (KS3) Please rate how good you think the service you received was?
(1= excellent, 3= average, 5= poor)

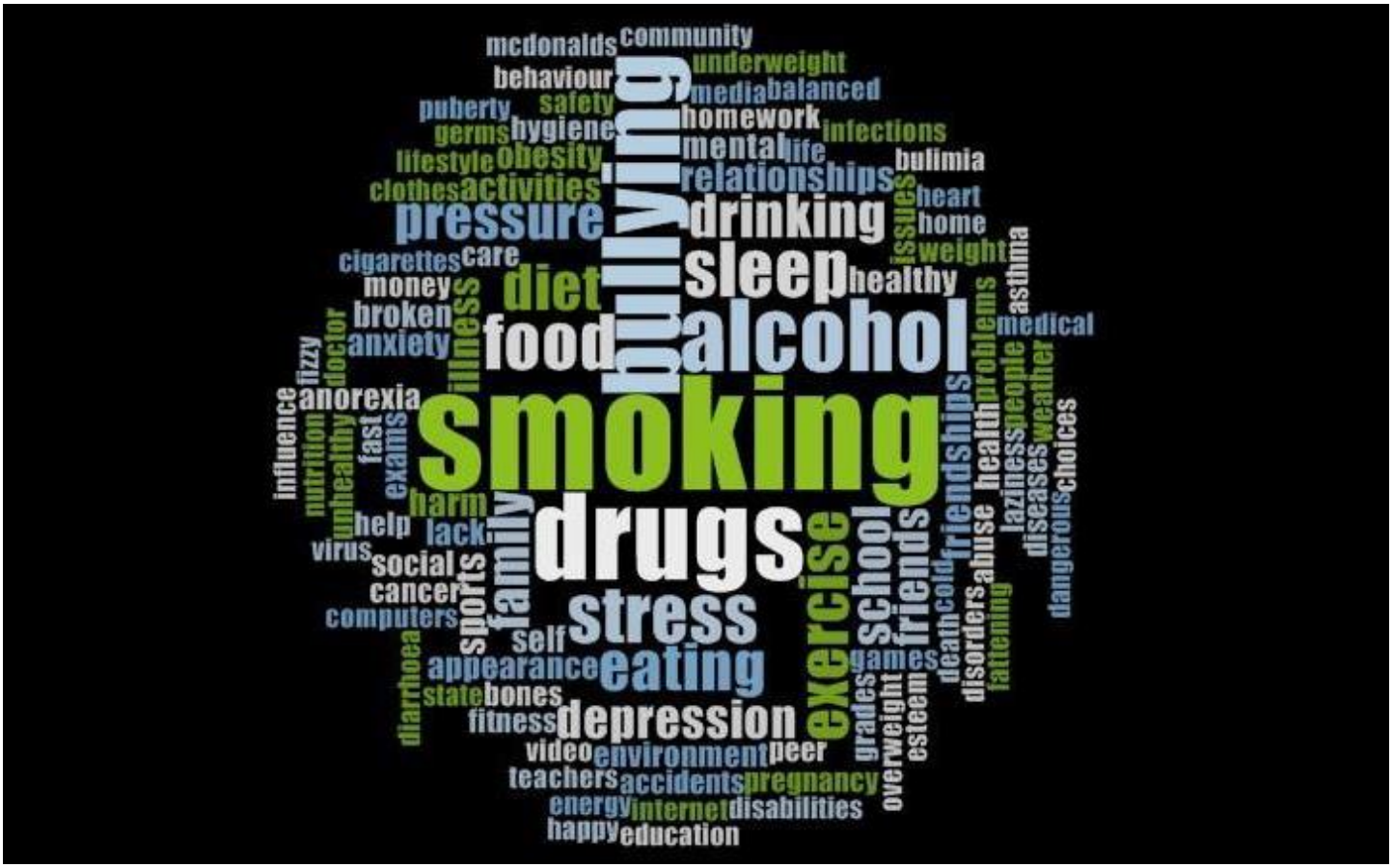



Q10: (KS4) Please rate how good you think the service you received was?
(1= excellent, 3= average, 5= poor)

- Attitude of staff (respectful/friendly)
- Communication of staff (did the doctor/nurse explain things in a way you could understand. Did you feel listened to?)
- Waiting time (once at the surgery, did you get seen quickly?)
- Diagnosis (did you think the doctor understood the problem and were you satisfied with the outcome?)



Q11: (KS3 & KS4) In your opinion, what do you think are the top three things that affect the health and well- being of a student who is the same age as you?

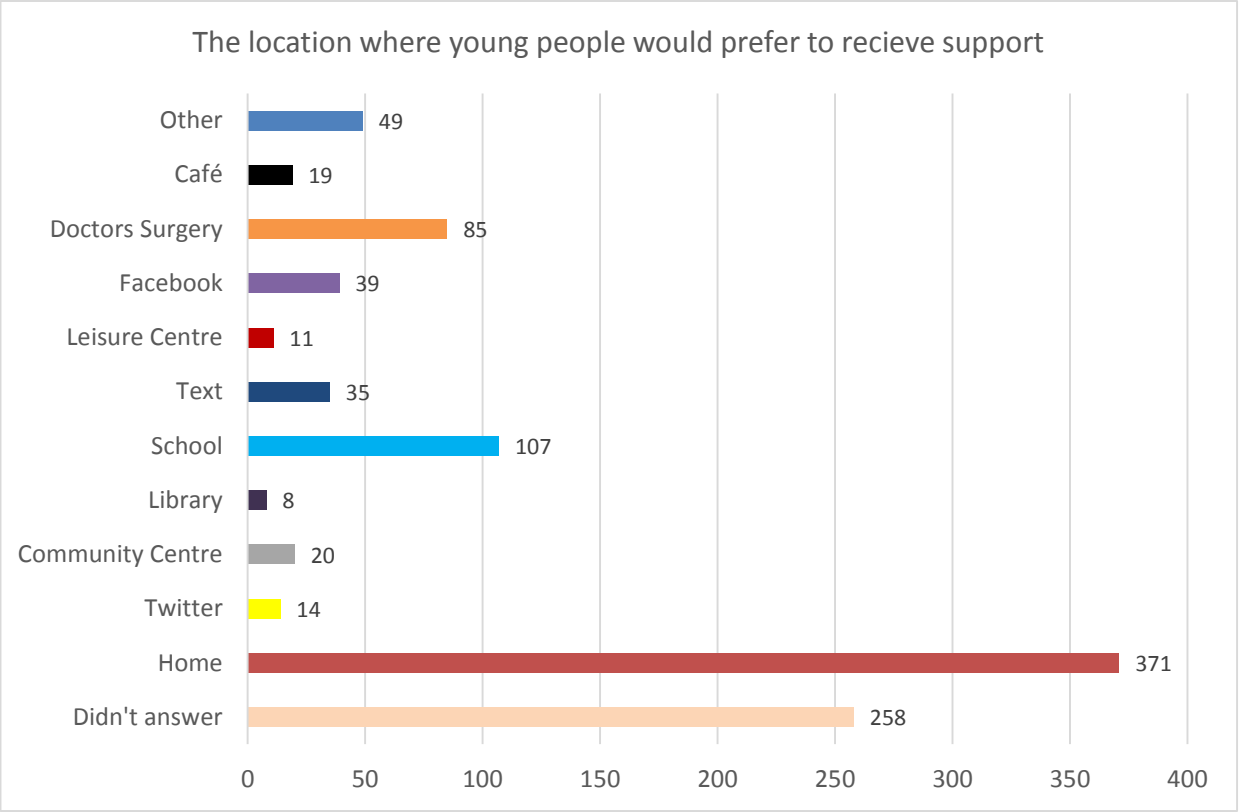



The top three things that affect the health and wellbeing of a student according to young people were ‘smoking’ (220), ‘Drugs’ (158) and ‘Bullying’ (136). Other concerns included diet, exercise, sleep, family, pressure and school.

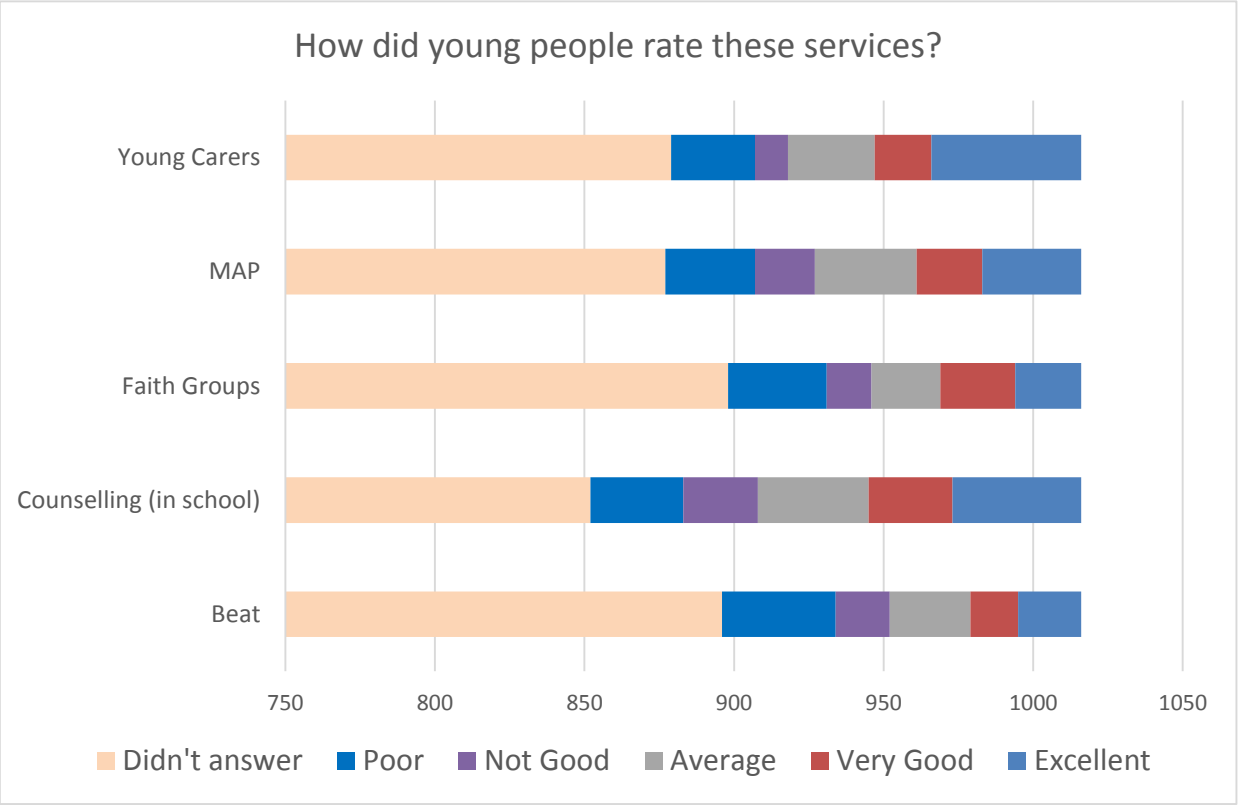
The Top 10 things that affect health and wellbeing of young people according to our sample:

| Responses | Number of young people |
|---|---|
| Smoking | 220 |
| Drugs | 158 |
| Bullying | 136 |
| Alcohol | 120 |
| Stress | 84 |
| Food | 84 |
| Sleep | 82 |
| Exercise | 68 |
| Eating | 66 |
| Diet | 62 |
| Pressure | 53 |
| Family | 53 |
| School | 44 |

Q12: (KS3 & KS4) Where would you rather receive support for your number one top priority above?




Q13: (KS3 & KS4) If you have used one of the services below, please indicate on a scale of 1-5 how effective you thought it was? If you have not used one of these services please skip to the next question.



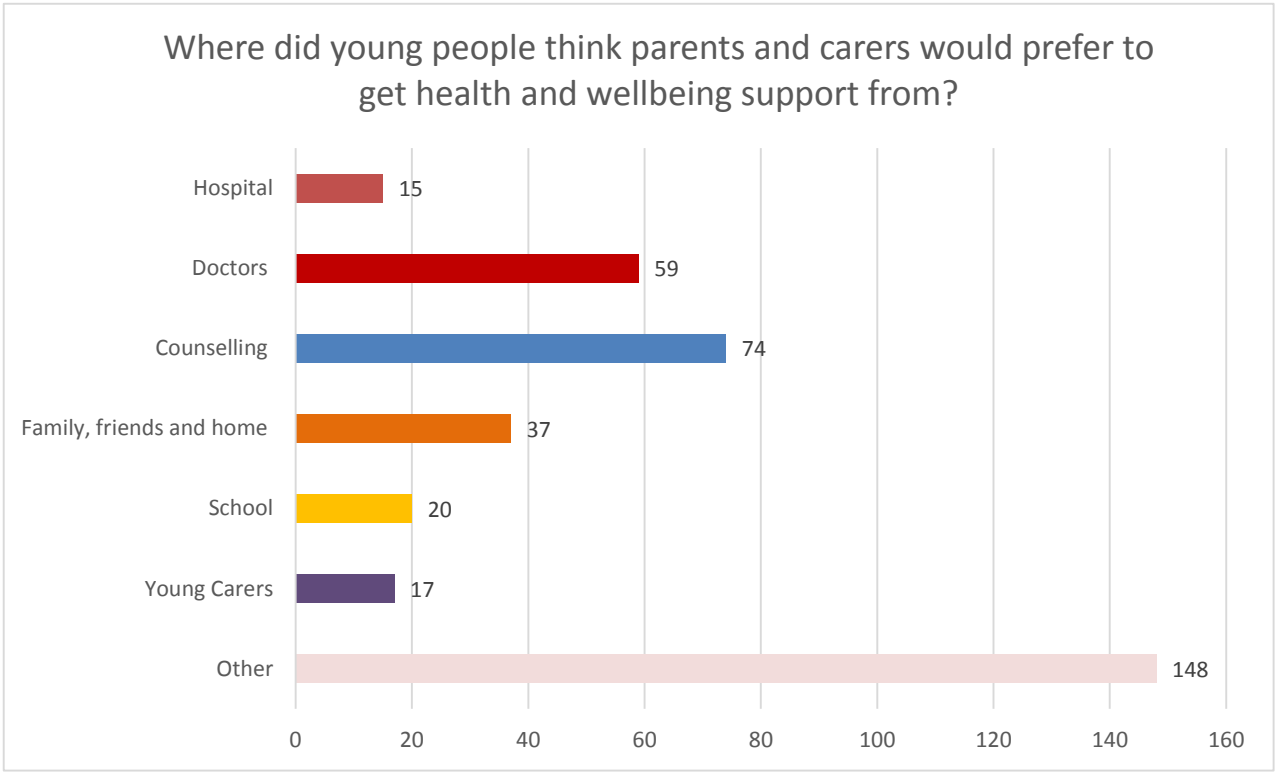
Q14: (KS3) I think the two most important things families need help with are?


The two most important things that young people felt families needed help with are ‘money’ (156), ‘Jobs’ (43).

Q14: (KS4) I think the most important thing families need help with is?

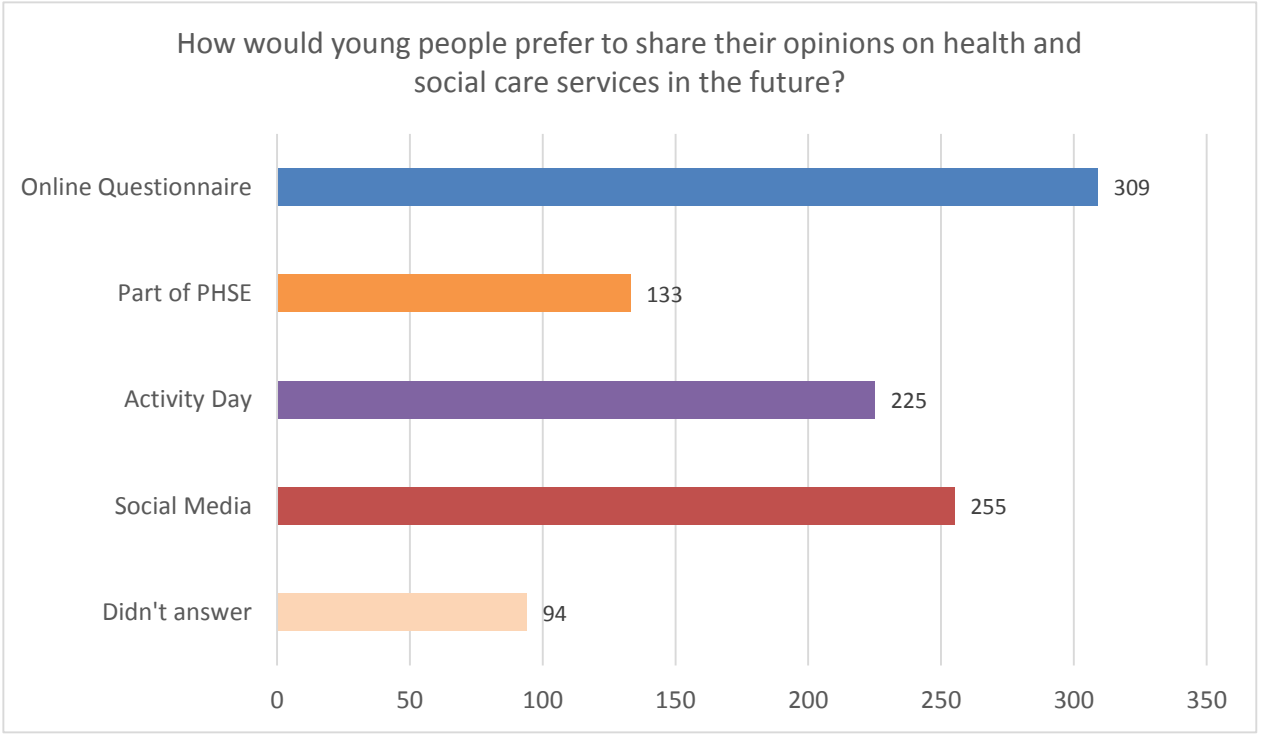

The most important thing that young people felt families needed help with was ‘money’ (32).

Q15: (KS3 & KS4) Where do you think parents/carers would prefer to get health and wellbeing support from?

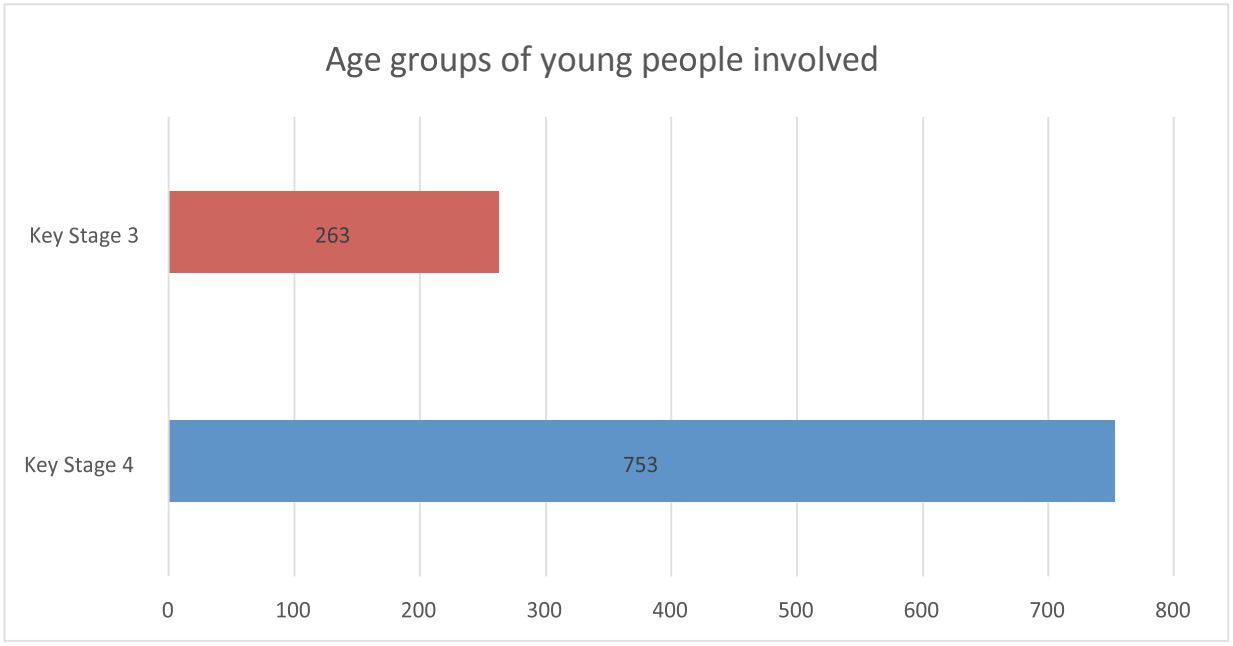



Q17: (KS3 & KS4)

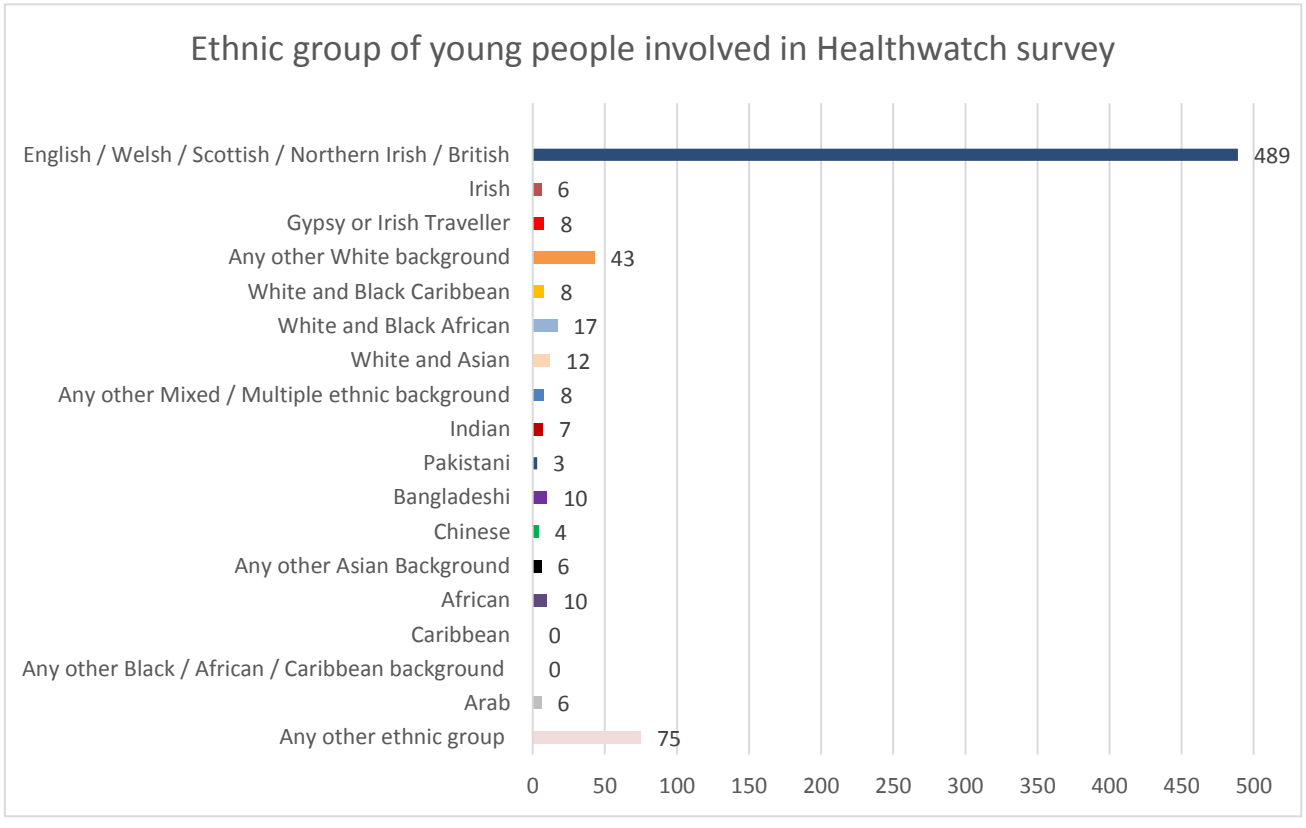
Your opinions on health and well-being services are not only important today and it is important that young people have a voice with regard to their health and wellbeing. How would you prefer to share your opinions in the future?



## Q19: About you – Age group & Key Stage




## Q20: About you – Ethnicity



# **Appendix C:** Engagement responses (survey and focus groups) from young people/parents (by age group).

## **C.1** Comments by parents of pre-school aged children

**Please comment on any of the services you have rated – what works well and what doesn't? Are there any services you feel are missing or difficult to access?**

- "I have not had much communication from the health visitor, always had to contact them for reviews etc."
- "I am not happy with my medical practice. My children were misdiagnosed, the doctor and the receptionist were rude and I had to wait a very long time."
- "The GP is rubbish at, you can't get appointments and the staff are unhelpful."
- "The wellbeing service has been very difficult to access, I have only been offered a telephone conversation when I need one-to-one."
- "The GP has been helpful but we had an issue with medication being prescribed which should have been for older babies."
- "The children's clinic at the hospital fixed his tongue and there were no problems."
- "The postnatal ward was very busy and the beast feeding support was very poor. I found being there was quite traumatic."
- "It is difficult to get through to [the GP] reception to book an appointment sometimes."
- "We needed the purpose or reason to attend early days explained to us properly by the health visitor."
- "My Surestart Centre and health visitors are excellent but the 6-8 week check was late and it ended up being at 11 weeks, but the hospital provided great care for me and my baby."
- "I am very happy with the health visiting service. It has got harder and harder to get an appointment with the GP even if it is for your child. They don't have priority and should. When you do get to see the doctor, they are great."
- "Great maternity care and great post-natal care."
- "The specialist services, speech and language therapy and physio have been appalling for my son who has Downs Syndrome. My son's needs have not been met. I feel he has been neglected by the health services."
- "We are lucky [in my area] to have these services, they have helped my boys medical and developmental needs. It is important that services work together."
- "I do not think [my hospital] is fit for purpose, I have not a bad word to say about the staff but maternity services need improving…it is too small."
- "Speech therapy we accessed has been wonderful."
- "Difficult to access the doctors. I am always referred to the walk in clinic due to a lack of appointments."
- "Difficult to make an appointment for physiotherapy following the birth of my son. Someone was supposed to call me back but they never did."
- "Social services should be more willing to help new parents rather than just saying 'oh well.'"

- "The nurse was friendly and answered any questions I had regarding my son's immunisations."
- "My recent experience for hospital is giving birth to my son. I was left waiting for 10 hours just to be discharged when they told me it would take 4 hours."
- "Very good experience at the baby clinic but sometimes health visitors are late for home visits."
- "There is a high demand for services for older children and family support so we need more of them."
- "Getting a doctor's appointment can be difficult but I have been lucky enough to be seen by the district nurse for my daughter."
- "The family support worker helped me to build my confidence."
- "The health visitor was very helpful and answered all my questions."
- "Shortly after the birth of our first I began experiencing signs of postnatal depression, several times I rang the health visiting services to be told they'd get back to me but they never did. I also tried to get in contact with them about my daughter's speech development (or lack of) again to be ignored. Difficult to access doesn't cover it. They were, however, very helpful when someone finally got back to me about weaning so I can only assume they work well if you manage to get a call back. The GP is equally impossible to get an appointment for anything even remotely urgent so unless you're willing and able to wait several weeks it's useless. They are very good at fobbing you off in the walk in centre though. The physio was excellent, efficient, helpful and always had appointments available."

- "There should be more availability for GP appointments…you are not always able to get an appointment when needed…having online booking is great and it makes the process easier and quicker for working families because you don't have to keep ringing."
- "The maternity suite was excellent, staff were very willing and helpful."
- "Appointments at the hospital could be improved…there have been instances where appointments have been made and we have not been notified."
- "The health visiting team have not been helpful with the issue of my child's allergies."
- "My Health Centre has an average waiting time of an hour which is difficult when you have small children."
- "My 2 year old son has not been seen by a health visitor since he was a couple of weeks old…when I enquired about his yearly and 2 yearly checks I was told the health visitors are oversubscribed."
- "The health visitor didn't seem to know much."
- "There is not much for mental health and visits out to people with mental health issues."
- "There still should be visits to see children on their 18 month check."
- "My son was admitted with viral meningitis to a hospital and the care and treatment he received was excellent…he has continued to have follow up appointments which again have been excellent."
- "The treatment I received when I had my baby was excellent...the staff were very friendly and comforting...always there for advice if I needed any."
- "My GP is excellent and I received a good service at the hospital."

- "No call back from the 111 service as promised. Disappointing!"
- "When little one came out of hospital at 7 weeks old the health visitor was very supportive with advice re: breast feeding."
- "It is very difficult to see the GP when my child really needs to see them as they always seem to be fully booked…babies and toddlers should be able to see a doctor when they need to."
- "My child cut herself with a piece of glass...we had to wait a long time at the hospital and then they sent us to [another hospital] because she was under 2 years old...clearer information would have saved us the extra trip."
- "I have always found the health visitor to be extremely helpful and professional…they always have answers to my questions and are reliable."
- "We have received both one year and two year checks from the health visitor but I have friends in some of the surrounding villages which have not found this to be the case."
- "I find it is very difficult to get an appointment with my doctor…more late appointments are needed for those who work."
- "There are not enough facilities or areas for young/youth to attend after school."
- "My health centre does not have changing facilities which is not very good…I had to change my baby on the toilet floor."
- "The hospital dealt with everything efficiently and explained all aspects of the process very well…however, it is a long way to travel."
- "GP, excellent, helpful and good service."
- "Experience of health visitors has been mixed, overall, the advice they give has been ok but it does depend on who you see."
- "I had to wait 4 hours to be seen [at the hospital] when I was pregnant and had spotting….I had to wait 2 days for my caesarean…I did not receive any information on appropriate exercises I could do or not at home following the birth of my baby...the staff were friendly but more information required!"
- "The best place for advice has been [my local] Children's Centre…it is brilliant for meeting other mums and getting lots of support."

**General comments from parents regarding all health and social care services**

Parent one:

"I had been accessing support through the 'wellbeing service' which proved to be a good services. I have had approximately six to seven sessions now every two weeks and the services seems to be supporting me well."

"The boys are two and a half years old now and I need to take them to see a dentist but I don't know what is available locally as the GP can't tell me. I often feel like I am not listened too at the GP surgery, particularly as a parent and I refuse to go there now, I would rather come here for support [my local children's centre]. I don't drive so I can't take them into the city to a dentist and I asked a health visitor but they couldn't tell me either, because we don't have a dentist [where I live] so I am limited to where I can take them, but I'm concerned as I know they need to see a dentist. I think a place like this nursery and children's centre could benefit from having links to a dentist or dental hygienist particularly for pre-school children, or someone who could come into your home to advise you and look at their teeth."

"I was concerned about their speech and I was able to come down here and talk to staff here to raise my concerns, without this place I would really struggle. The support has been great and I really can't complain. A family support worker came out to assess the children and completed the ages and stages assessment with them at home. This found that they were behind where they should be for their age in there speech. The family support worker then contacted a speech therapist and who now comes and works with the children once a week! This works very well especially as both my children are very nervous and can get quite anxious, they have not been diagnosed with anything other than a language delay."

"The nursery is also great here, its was here where they have raised concerns regarding the boys hearing and so as a result referred them. This has all taken place within the last month and we received a letter to say they have been referred to a hospital and that they would contact us with an appointment, for a hearing test. This letter arrived two weeks ago and we are still waiting. I know two weeks is not very long and I am not complaining, but as a parent I worry about what they will do and the health of my children. In this letter it did not explain what would happen and what they would do, there were no leaflets or anything. As a parent I worry what they will do and how they will actually test their hearing when they are that small. It's also difficult as my boys get very anxious in new surroundings and don't like to be touched and have questions about what will happen."

**Parent Two:**

"I had an ongoing issue with my child and treatment at the hospital. She was referred to the hospital as she has 'rickets' which is a disease developed in children when they have a vitamin D deficiency and affects her bones and legs. As she is a mixed race child in certain months of the year she cannot get enough sunlight and as a result her vitamin D is too low. Her bones are growing quicker than she is and she is only four years old yet has the body of an eight year old! As a result she gets a lot of pain in her legs. She recently had a vitamin D blood test at the hospital and we are awaiting for a letter to be sent to their GP for a Vitamin D prescription of liquid form for one year. It was May when they had the results yet the GP still says they have not received a letter. I am constantly chasing people and it seems no matter who you speak too they just don't do what they say, you always seem to be chasing."

"I was advised to contact the wellbeing service which I did and I had my first consultation on the phone and requested if I could have all future meetings on a one to one basis as I really struggle with the phone and prefer speaking in person. I asked if this would be possible and they agreed yet I am still waiting for any meetings to be arranged it's been weeks now and I have left like five to eight messages and the communication over the phone was very poor."

"The children have a social worker and one thing I do find really frustrating and difficult is they never explain things, I always have questions and they don't provide you with answers. I understand if an allegations been made they have to follow data protection rules regarding who and what has been said. One child is on the protected register yet they can't come off this register until she's well and has her prescription in place so it's all a viscous circle."

"My dentist has been fantastic as a dentist for my children, they have seen both the girls and had there six month check-up and both appointments were very good."

"My local GP is poor at meeting my needs and my wishes are not being met. I asked about sterilization as I have four children and do not want anymore. My GP has refused to consider this as they claimed they no longer encourage this procedure. I have been raped in the past and feel I could fall pregnant again if this were to happen again. I feel like I'm constantly battling and not being listened too. My child has had a psychologists report that suggested a autism assessment was needed yet a doctor at my GP practice has dismissed this so I am still no further forward and trying to push this through, as a parent I feel you should not need to chase people all the time!"

- "I have not really had any issues, the health visitors gave my child's nine month check which turned into the annual check, so they were late with that but they were very happy with her progress. As I can come to this group at the children's centre I wasn't really worried as they are very supportive here and I'm able to ask them and check things. I only had one issue at a weigh in clinic in Upwell, with a health visitor there. Right from the start when I had her she had problems feeding and putting on weight. She was losing a lot of weight and we tried bottle feeding, expressing and breast feeding. We finally seemed to get things on track and she was sleeping right through the night which was great. When I took her to this weigh-in clinic the health visitor said, 'oh she has dipped again' and interrogated me on what and when I was feeding her. She said I must wake the child up at night to feed her. She made me feel like I was neglecting her and under pressure. I checked with the staff here and they reassured me and said they could see she looked happy and content."

- "I find it very frustrating when my child's ill as I find it difficult to get my child an appointment. When we lived in Germany they had a 'Kinder Aust' which was a special children's doctor, which seemed to work really well. We have always had an excellent experience with the health visitors. We often call them instead of the GP now and they always come out to see us. Even when we went to Japan we called the health visitor from there as she came out in a rash, with a high temperature. They said they couldn't be sure as they could not see the child but after a few days she was fine. This is my first child and so often I don't know and it's great to get that reassurance and support."

- "I had to chase my sons two year check with the health visitor and if I hadn't we might have been a lot further down the line with a problem. We had a trainee health visitor and a qualified one and they were both good, but there were problems with my sons hearing. They said he was slightly behind where he should have been and this was very concerning for me. After this appointment I heard nothing from the health visitors no follow up or feedback, even though they said there was a problem! This was very difficult and so in the end I went to my GP to get something done about my child's hearing. Thankfully that placed wheels in motion and it has been found he is deaf in one ear. Had I not have pushed for this, this may have gone untreated."

- "I haven't had my two year check for my son. The appointment was booked and they cancelled the day before it which was in mid-April. I still haven't heard when the new appointment is as of yet. I had an issue with my other child and I insisted to have his check and the health visitor came out as I was concerned with his speech. So in most cases they have been helpful and I have no concerns with this child so I believe I will have an appointment in the near future."

- "Before my child was born we had an issue picked up on the scan, first at the hospital and then we were transferred to [another hospital]. Everything ran smoothly with all that which was great. Then once she was born she had weekly and six monthly checks that again have worked well and I have no complaints."

- “I have never had any problems, with my youngest all her checks have been made with the health visitors, just sometimes it can be difficult if she’s unwell as we don’t have a surgery in [my village].”
- “I have not had any two yearly checks, I have heard nothing from the health visiting service!”
- “I have three children and am currently having behavioural issues with her twins. She first sought help in June 2014 and I have only just received my referral, this should have been picked up sooner. They have been referred to a paediatrician, but she is off/away from work at the moment and everything has stopped. No one seems to know what’s going one or able to answer questions as it seems everything just comes to an end if one person is away. I have been assigned a family worker from [my local children’s centre] who has been fantastic. They now advise that both twins need a CAF but they had one conducted when they first raised concerns in June 2014. But now they say they need one again so they are in the process of trying to get that arranged. It is difficult as I live on a street where half the street is classed as Norfolk and the other half as Cambridge. So it is difficult understanding which services I come under, as I’m classed as living in Norfolk but under Cambridgeshire services.”

- “A mum told us that she had to travel into Wisbech for her daughter's yearly check. She felt this was too far. I wasn't sure what to expect but I didn't learn any new tips for looking after my baby…I felt it was a waste of time for everyone.”
- “We changed from [my surgery] to [another] because we did not like the attitude of the staff or the doctors.”
- “I went into hospital with a severe chest infection. I arrived at 2pm and was finally seen at 11pm only to be told that I needed a course of antibiotics but the hospital did not have any. The hospital offered me a bed for the night but discharged myself and went back to the GP.”
- “I called the 111 service at 8pm because I was very worried about my baby who was passing blood. They called me back at 11pm to say there wasn’t anyone available to come out and told me to see my GP. I understand, but I needed some reassurance, as a first time mum I was very worried.”
- “Should be a health visitors check at the age of 2 years because she hadn't been given the option.”
- “GP surgery, too long waiting time, always an hour waiting. My local surestart centre is Fantastic! But could have more "play" time for young babies.”
- “The GPs have all been helpful but often long waiting times which can be difficult with a baby. Have been asked by the hospital in a letter I received to take a urine sample form my 6 month old. Instructions on how to obtain this would be helpful.”
- “My surestart centre is brilliant they provide so much support and advice and the facilities and groups they offer are great. I didn't feel like the health visitor provided much support or information.”
- “Never really used the health visitors but when I have done they've been helpful. The hospital was brilliant during both pregnancies/labour and never had issues with nurses/doctors.”

- “My surgery is very good, there are emergency appointments and times in the afternoon to take your child if you need it, very good.”

- “I do not trust health visitors because you do not have a rapport with them…I did not receive the 2 yearly health check…do they still exist?”

- “I felt the Health visitor service was patchy…often you see someone different and I had a long time without any support because I was told there wasn't one in the area…they often don't seem to know the answers to your questions. I rang for help for my five year old and they said I couldn't have help because my child was not under five years old. I mentioned I had a two year old and they said in that case, they could now help the five year old.”

- “Health visitors are good but they can't always answer your questions and pass you onto your GP so I go straight to my GP now. It is also worth joining parent/toddler groups because those who have been through the same experiences are very useful to talk to.”

- “I was not contacted about a health visitor and it can feel very isolating.”

- “District Nursing has moved from [my health Centre] to [another] and since then at least 10 service users have said ‘it’s gone downhill since the move’ they have not always got the right equipment, appointments are often late, the flu jabs are not being issued and there are problems with the phone line. One lady did not chase her appointment because the number she rang told her it was incorrect and gave an alternative number which confused the lady and she wasn't able to write it down. When someone is vulnerable, this is not what they need.”

- “At the doctors it’s long wait for appointments with children. It depends on what doctor you see, the doctors are very patronising and I feel they don't take you seriously. When I had my first child I printed all the symptoms off and said to the doctor I think she has reflux. After a long time of saying this it turned out she did have reflux, just not listened to as a parent. I took little one to the dentist and got told I shouldn't bring her, she's 2 and a half years old. My child got hold of an air freshener and put it in her mouth. As it said it had ethanol on it I range NHS 111 who said she would probably be ok, but I could get her checked out. As she was my little one I took her to A&E at 9pm. I was sat waiting with all the others in the waiting room till 2am as they said they wanted to keep an eye on her for 6 hours, yet they told me I could go home if I liked but I wanted to get it checked.”

- “Overall I am happy but I have marked a three (average) as sometimes I find it hard for them to listen to the problems I am having and rather than doing as I have asked they pass me to pillar to post and I am no further forward. When taking my son I have to say they have all been excellent and very reassuring which mums need when your little ones have problems.”

- “ I haven't had my two and a half year check for my youngest yet, but we did get a local children's centre visit us when we moved here straight away. I haven't had any major issues, hospital was good when my son went in with suspected meningitis, from the doctors to the hospital all in 40 minutes. The services in Norfolk are so much better than Cambridge as I had a visit from the local children's centre to say what services were available when I moved here.”

- “Getting past the front door at the doctors, you get too many questions to get an appointment and no appointments available.”

- "Health visitors miss the bigger picture and miss a lot of the big details. They are ok for directing you but not if you have a physical problem. The weight was falling off my child and I had a cracked nipple and only then did they do something about it as I couldn't breast feed the child then. The hospital neglect disabled people sometimes when needing help after an operation."

- "I do find that getting to see my GP is hard, to get that on the same day. I can only ring on that day I need to go to the GP."

- "It depends on if you have something a doctor understands, if not you get pushed from pillar to post."

- "I am very pleased with the service provided by my healthcare provider especially from the nursing staff."

- "I can usually get an appointment within the week."

- "I called for a health visitor 3 times and am still waiting for a two yearly Health Check for my toddler."

- "I found health services etc very useful but I'm not impressed with the local school and said it runs 'like a business' rather than something for the 'children.'"

- "Overall, all services I have received are good but would like to know who to speak to because I feel my child may have ADHD."

- "I felt that my baby had not been diagnosed properly regarding its breathing problems…I was not happy that I was told my baby had asthma and required an inhaler…I thought it was to do with the damp in my house but "I am Polish and my English is limited."

- "I rang the surgery because I had discovered a lump on my breast and had breast cancer previously. The receptionist told her that it was a non-emergency so she couldn't get an appointment any quicker. I made the point that this was unacceptable and managed to get an appointment but felt she had to 'fight' the receptionist to get one."

**How well do you feel the needs of your child have been met by health and social care services in Norfolk?**

- "Not very well. After the initial few weeks, in which they scheduled appointments, every time we rang to ask for help we were told someone would get back to us but they never did. I had to ring up about the two year check-up only to be told they weren't doing them until two years, 8 months but they were hoping to get it down to two and a half. My daughter was struggling with her speech at the time, we've had various other issues we've rung about only to be told someone would be in touch but the call never came. I realise they are understaffed and there are other families that need urgent intervention but personally I feel very let down by the services in Norfolk."

## C.2 Comments by parents of primary school aged children and comments made by primary school aged children.

**General children's comments on health and social care**

- "Going to hospital is scary...it smells funny."
- "I didn't like getting undressed...it was very embarrassing."
- "You can get germs from hospitals and catch diseases and die."
- "What is Ebola? Can only poor people get it?"
- "When I went to hospital they wore masks...it's really scary."
- "I think the doctor is really good.....I think a good doctor is one that does not do a cough on you."

**Please comment on any of the services you have rated- what works well and what doesn't? Are there any services you feel are missing or difficult to access?**

- "Dentistry, has very long waits but the dental check-ups are great."
- "The 'Care at home' team were fantastic as I found it difficult to get things organised/co-ordinated, particularly in advance of weekends."
- "I have had both brilliant and dreadful experiences at the Norfolk and Norwich hospital."
- "I find it difficult to get an appointment with my named GP and often he is booked up two to three weeks in advance, but overall I'm seen within 48 hours if it's important by another GP in the practice. I would like to get acupuncture in a multi-bed setting but it is currently very limited via my GP."
- "My daughter has a hearing loss and it is under the care of the Ear, Nose and throat department at the hospital which is absolutely excellent."
- "GP, I can always get an appointment although appointment times are not long enough and always running late. Hospital, my consultation was very good but the referral got lost originally and the appointment was never made."
- "Urgent children's appointments are hard to come by and sometimes Accident and Emergency is too extensive when all you want is some reassurance."
- "I'm very happy as my child has been able to talk to someone at school who was really helpful in ensuring she had support whilst working with me too."
- "Hard to get an appointment with the same GP-if you have an ongoing or chronic illness it is pointless to have to run through everything each time you need to see a different doctor. I have had no problems with appointments on the odd occasion I have needed one for my children but as an adult it is much trickier! Often I have to take an appointment 2 weeks away as its not urgent but need to be seen [several occasions at the request of the GP]. Hospitals are busy, appointments are routinely pushed back so ie: a six-month follow up as requested by consultant and ends up being 8/9 months."
- "Child speech therapy took a long time to access from the referral point. Long process with little contact. Our GP service is very good."
- "Most GP's are great but there are still some who are condescending and I'm not keen on the one issue per appointment rule. As long as you don't go over your allocated time, what does it matter?"

- "The dietician provided us with a very good service."
- "Receptionist was unhelpful...I did not feel that the doctor took my child's illness seriously. They always give you paracetamol for everything."
- "I think the kids need regular appointments at the doctors but they only go when they are ill. The doctors don't seem to do much...it's like they are afraid to examine or refer to specialists."
- "The doctor we saw for my son's eczema was not very useful."
- "Speech therapy for my eldest was brilliant."
- "My youngest had to wear an eye patch for a year to correct a lazy eye, nothing changed."
- "I am unsure of how my son was assessed for his additional needs...I think it was through the school?"
- "My son had his 2 year check-up late."

- "I am happy at the services and information given to us as parents."
- "Easy to see the doctor and always very helpful."
- "GP clinic works well as long as you can get through on the phone to make an appointment for that day, having a phone system where it calls you back when the phone is free would work a lot better [our former GP surgery did this]. Physiotherapy service itself was good, although I really didn't like the location in open, the room was tiny and you could hear everything the receptionists were chatting about in the waiting room. My seven year old daughter regularly attended the eye clinic at the hospital, since birth until February and was looked after extremely well by optometrists, doctors and receptionists there. However, it was very difficult to get an appointment changed because it is such a busy clinic."
- "I have given the GP a 3 because when I have taken my child for an early appointment the doctors have been running late by thirty minutes. When we visited Accident and Emergency at the hospital the staff were very friendly and helpful. They made my child who gets very worried feel at ease."
- "I have given the GP a 3 because when I have taken my child for an early appointment the doctors have been running late by thirty minutes. When we visited Accident and Emergency at the hospital the staff were very friendly and helpful. They made my child who gets very worried feel at ease."
- "Blood tests, not long to wait. The staff are good with my children although it is quite long to get the results back when you are worried! GP, you are always able to get a same day appointment, but it is very hard to get through as everyone is phoning at 8am. Physiotherapy service the initial triage lady was patronising to my daughter and belittling her pain, yet the subsequent physiotherapist was excellent, very helpful, approachable, clear and organised."
- "Speech therapy sessions have increased and I feel the needs of my daughter are being met and I do not think any improvements need to be made."

- "GP, long time to wait for appointments with an average of two weeks unless it's an emergency. You are told appointments are for certain issues and only available until 4.30pm so it is difficult for working parents. You are no longer able to order repeat prescriptions over the phone and now has to be done on the website for which a password is required or you have to go into the surgery."
- "GP appointments are always available on the day and the hospital was great, I felt they did thorough assessments and I was happy with my treatment and decisions made."
- "Appointment times are not suited around school times when the kids are ill!"
- "The only comment I have is that I am very disappointed with the NHS. Extremely poor for a developed country, the UK deserves better. My experience with it has not been good honestly."
- "Waiting for new ear moulds seems to take months. It's the lack of communication between services and having to repeat information from one service to another."
- "Medical problems are sorted out well but problems to do with learning need to improve!"
- "My medical centre is too busy…an appointment is offered in a week and a half's time, I can't imagine in what situation when you are ill that that is ok...doctors that see you are fine but later appointments must be offered."
- "Our family dentist is 15 miles away, not convenient at all."
- "Counselling service [referred by GP] was excellent but I had to wait for three months and the only counsellor at the GP surgery then retired and was not replaced so I did not finish my treatment."
- "The community midwife service has been cut so that breastfeeding clinics are run without a qualified member of medical staff."
- "Immunisation takes place which is good."
- "Not enough doctors appointments available when our child is ill."
- "Health visitor are not consistently visiting all families."
- "A & E is too far, when accidents happen out of hours."
- "More visual interaction in school and nursery is required to help some children."
- "You have to wait too long to get an appointment with your GP."
- "The specialist paediatrician for dermatology is excellent."
- "Never able to get an appointment with our GP, have mainly given symptoms over the phone."
- "I feel GPs have a ridiculous waiting time and you still can't get through at 8am and all appointments for the day are gone by 8:30am."
- "At a hearing test my child was called a liar by the consultant…perhaps bedside manner needs reviewing."

- "The senco at school is easy to access, very supportive, the GP not so supportive and needed to return visits and additional 'proof' of what I said before referral provided. Speech therapist excellent and quickly realised speech therapy not required following referral by nursery teacher."

- "Satisfied with service provided by GP and the hospital. Service provided by speech & language has been poor recently."

- "Getting appointments at the doctor's surgery unless you are practically dying…the appointment itself is always at always more than 10 minutes late, even up to 40 minutes."

- "Health visitor did not contact me at all after the first check."

- "The GP failed to refer me for an x-ray so I had to make enquiries myself."

- "Doctors in hospitals seem to be more child friendly and more approachable, maybe there should be more child specialists in doctor's surgeries."

- "The health visitor is easily accessible and made a quick referral for speech therapy."

- "Speech therapist was helpful with advice and exercises and improvements were made and we were discharged after second visit."

- "I always find it relatively easy to get an appointment with the GP for my children."

- "Improvement on being able to get an appointment to see a GP would be good…not a 3 week wait by which time the problem has normally gone away."

- "I don't know about all the services…GP service is terrible…some doctors do not understand anything about medicine and don't help the patient."

- "Doctors is brilliant…I can always get an emergency appointment for my child."

- "The hospital was brilliant when my little girl got something stuck in her throat…she had an x-ray straight away…they were fantastic with her."

- "GPs and the hospital have always been very efficient, always able to get an appointment, quick referral to hospital…staff were excellent with the children."

- "It has taken a number of years to seek help for our daughter with dyslexia and possible mild cognitive skills delay. Only recently were we put in touch with the child support team who are helping...we have waited a long time to receive the right help...we have struggled to meet our daughter's learning needs and it would have been helpful to have known more."

- "When we had our baby the health visitor was off sick so we didn't get seen...then I had to call to make another appointment after the 7-9 month review was cancelled. I sat in one morning waiting for the visit and no-one arrived or called and 6 weeks later they still haven't been in touch…very poor and disappointing at a time when I needed support and advise on weaning."

"The intensive care unit at the hospital has fantastic staff…A&E needs more work."

- "GPs need to keep more up to date with conditions and medications."
- "Speech and language service was useless...it made my child's problems worse."
- "I think there needs to be more GP appointments available so people are not forced to use the emergency appointments."
- "My daughter has been waiting since 2014 for one to one counselling...this has not happened yet...if she was not comfortable with talking to her teacher she would have no support at all and she has been promised this time and time again!"
- "My son is dyslexic and the school did not read his paperwork and just classed him as being disruptive!"
- "My health centre is very good…always able to have an appointment when needed."
- "My GPs are very good with the children, Reception staff always try their best to arrange appointments…the pharmacy has been good at offering over the counter options when needed."
- "Doctors' appointments, it would be nice to be allocated a doctor that you see all the time...with regard to prescriptions for my son, it feels like getting blood out of a stone...I cannot fault the N&N hospital, they are great! My child has specific dietary needs and the prescription allowance has been cut to pay for this."

**How well do you feel the needs of your child have been met by health and social care services in Norfolk?**

- "School counsellor is fantastic!"
- "We need one to one lessons with kids who can't speak English."
- "It is early days but I am very happy that they could come to our house to see children."
- "The needs of my child are being met to my satisfaction."
- "Very well particularly impressed with the ENT at the hospital."
- "The school pastoral worker has been very easy to access."
- "I have not had any interaction with social care but health is good."
- "At the moment my son gets to have support for educational needs by health and social care services in Norfolk."
- "Very slowly. Initial assessment we waited approximately 10 weeks. Report took two months to come through with speech exercises to do. We won't be seen again until July when the child is about to start school."

**General comments from parents regarding all health and social care services from engagement at parents evenings.**

- “My daughter had made an allegation and so they sent around a social worker. I felt that this social worker was not very good. All she talked about was me and my background and not the main issue, i.e. the allegation. Her attitude was not great and I felt no better off than before she arrived.”

- “I had a poor experience with my wife at a hospital on a ward. She was ignored on the ward, left unable to reach her buzzer. She was supposed to have oxygen and a nebuliser and they were doing on or the other rather than both as the doctor suggested.”

- “I had a poor experience of health visiting service with my first child. They were really not helpful and that's not what you need when it's your first child and you have less confidence then.”

- "Whilst these families come to me for specifically for swimming lessons in a smaller setting I would say that there is not enough support in general for parents/carers in this area who are dealing with autism on a daily basis.”

- “I had to take my son into a community hospital with a temperature and I was very grateful to be seen by a doctor because I had a toddler and a baby and did not wish to travel to the [acute hospital]. I feel strongly that the extra service the hospital provides for emergencies is vital because it is so local.”

- "My grandson had to wait for nearly twelve hours and he was left unattended for most of this…then the doctors decided to run blood tests and to keep him in overnight which we were not expecting although we understand they needed to be thorough…it would not have been necessary though if we had been seen more quickly when we arrived in the day! I then observed a patient leave who was in the bed next to my grandsons, the nurse sprayed the bed and put a new sheet on whilst it was still really wet…it just didn't seem clean enough...community hospital are spotless and I was very happy with the service they provided.”

- "I had general surgery…a stomach operation and everyone was superb and the ward was very clean.”

- “The hospital staff are excellent....no complaints at all."

- A gentleman told me that he had found it frustrating and upsetting that his wife's cancer had not been identified by a doctor at the hospital (she had been admitted with a severe bleed) and 2 other doctors at his local surgery. *“We knew something was really wrong and we were told 3 times that the bleed was caused by Warfarin (anticoagulant)…we then got a phone call to return to the hospital straight away*. and she was diagnosed with stage 3 ovarian cancer and had to be operated on immediately.”

- “My medical centre is very good. However, I do feel that they need to dig a bit deeper when it is about mental health rather than just prescribe medication. I am on anti-depressants and have not been offered anything else…the consultation is so rushed because they are so busy but you feel like they don't always know how to deal with mental health problems. I don't think this is only a problem for my local doctor's surgery…I think it happens everywhere…if you've only got 10 minutes and you are not seeing your usual doctor it is hard to explain everything and for them to treat the underlying causes...there is not time for this sort of conversation…”

- "I was misdiagnosed over a 6 month period and needed an immediate and risky operation to remove a brain tumour near the pituitary gland. I had told the doctor that I was "leaking milk" and the doctor had told me it was all in my head...that I had tricked my body into thinking it was pregnant because I was trying for a baby..? Following my surgery and other complications I was told that I would not be able to have anymore children. In four months I was pregnant with my son. It's a worry because they were unable to remove all the tumour. My daughter has a 'lazy eye' and the GP did not make a referral at first because they could not see that she had a lazy eye and told me to sit her in front of the TV at home and see if she continues to get headaches? I took a photo of her eye at home and took it into the GP surgery…I shouldn't have needed to have done that! I have not complained about the service I received because I feel there is no point and it will not do any good."

- "At the hospital the staff were friendly and helpful; and the ward was very clean."

- A member of staff is concerned about services to improve outcomes for young people in 2 areas as shown below;

  1) Services are not joined up. He described how confidentiality can in cases enable the parent and the GP to side together to the detriment of the child. He feels there must be a consent form for the GP to ask the parent/carer to allow them to have a discussion about their child with the headteacher. *"I received a letter from a parent telling me we had to provide a very specific diet for the child so they could avoid all e-numbers."* I contacted the GP who reluctantly told me that the parent had told the GP this was the problem…so the GP had not actually diagnosed this but gone along with the parent. *"We are expected to provide the GP with information on our children especially when there is a behavioural concern which we do in order to help the child…It does not work the other way around though...GPs do not talk to us...this causes other problems with regard to referrals for things such as ADHD."*

  In 2 recent cases, the referral was a mess...it went GP-Paediatrician-GP-School-paediatrician...The paediatrician wanted the head teacher to describe what we were doing to cope with challenging behaviours before they would make a diagnosis *"but we are not doing anything special, just offering routine and structure...there needs to be clarity in the school's role and better communication between the medical side and ourselves...a GP does not see the child in the school environment so we should all be working together."*

  2) Relevant services to help children and timely referral procedures (social care). The staff member commented that since the removal of the CAF, it seem harder to access help/support for children...*"the parent support advisor is a vital layer before a child is a "child in need or there is a child protection issue"*. The PSA can identify problems at an earlier stage but we do not have comprehensive information as to who we can contact with regard to professional people. *"We have a domestic violence case where Leeway are helping the mother but who will provide counselling for the child? I have been to three meetings all with different social workers each time and it feels like nothing is being done...extremely frustrating...we are not trained counsellors and it is being left to us."*

- A member of the pastoral team commented that there is not enough support for children and *"it is not easy to access the services they need...."*

- "I have not received the second check up from the health visitor for my baby."

- A member of staff commented that the health visitor had now been moved to Downham Market and they were not sure if there were any available in [my area].

- “I believes my daughter is on the autistic spectrum (there is autism in the family) When I took her daughter to the GP, they warned me that a referral will take longer because it’s a girl and less likely to be autism? The referral was made but I don't understand why the GP mentioned that. Girls can be autistic too!”

## C.3 Comments made by secondary school aged young people (KS3 and KS4)

**Q3. General young people's comments on health and social care**

- "Do we have a school nurse? Who is that?"
- "You really wouldn't go and find the school nurse for a problem...who does that?"
- "There should be someone in the school that is visible to us...to help us with all sorts of things...things we worry about."
- "They should have programmes on the TV for children...the news is boring..."
- "We should have something to read in reception…some leaflets for children that explain hospitals better."
- "Not all GPs respect confidentiality...mine didn't...he rang my mum...that's wrong."
- "There should be more information about sexual health...teachers shouldn't tell us about this stuff and I didn't like learning about it in a mixed class with boys."
- "What works well, is when the doctor is honest with you."
- "I think a good doctor is one that makes you feel better…even if they don't know what is wrong with you exactly."
- "Waiting rooms are not good for children...we need an x-box or something to do...you have to wait ages."
- "I didn't want to stay the night in hospital when I had my heart checked…you have to stay in someone else's bed."
- "The plastic seats are uncomfortable...I would change that...bean bags would be better."
- "Adults seem to think we do everything on social media. I do tweet what I feel sometimes because I do not have many followers but I would never use Facebook to discuss family or health issues…I would never use Facebook to get support for something I am worried about…even if it is a professional I would not trust it."
- "I would not tweet or use Facebook to get support…it should be one-to-one...meeting somewhere like here (community centre café) is better."
- "Going to the doctors surgery as a place is fine but they need to make the waiting room more interesting…stuff for children."
- "I can't remember going to the doctors, I wouldn't…why should I speak to someone I don't know? They don't ring me or write to me...I think you should go to the doctors once every couple of years for a check-up."
- "I am worried about my 13 year old sister...she is naturally very thin [like me]…she went to see the GP because she would like to know how to be a healthy weight…they confirmed she was underweight and sent her away to keep a food diary…they didn't

give her any other advice…she has very low self-esteem...no-one in my family really knows what is going on...I think she should talk to someone who understands...I don't think the doctor really cares."

- "We can tell you what we think about services…but adults never listen…if they do listen, they don't do anything about it...I went to the doctors recently...he didn't seem to know what to do and referred me someone else."
- "Yes, doctors need to look at the whole thing…lifestyle and all that."
- "We like social media…to be social. I would like one-to-one counselling to be more available. Recently one of our friends committed suicide. We are a confident group of people...other young people don't feel happy about themselves...the doctors should look at that."
- "When you get an appointment you have to wait for ages...the waiting area is so boring."
- "I prefer talking about my problems with the same person...my doctor knows me well...he is brilliant."
- "There is not enough sex education in schools...you don't get to know about it all properly. Teaching very young children about sexual health...it might be a good thing in terms of protecting children but not for 'general knowledge'. Why do primary children need to know about that? It's all my little sister talks about...what's that about?"
- "It would be good if we had more information on HIV."

**What makes you happy and healthy?**

1) **Food** – The young people said that the right sort of diet was the most important in being healthy and talked about the importance of eating fruit. They also said that treats (cake and chocolate).

2) **Friends** – The children felt that friends were an important factor in making you happy **"If they are helpful and make you laugh…… Sometimes they make you sad when you fall out with them."**

3) **Meet up Cafe**- Several children said that the Meet Up Café made them happy and described the staff as **"caring, kind and nice."**

4) **Exercise** – jumping, running, trampoline, football, dancing were the most frequently mentioned forms of exercise by younger children.

5) **Sleep** – Children mentioned that they thought more sleep would make them healthier and that they **"probably did not get enough."**

6) **Family -** The children said that families make you happy, although they pointed out that sometimes they argue and that can make you feel sad.

7) **Education** – When prompted about school, the children replied that doing your best at school would make you feel happy and learning new things. They described what personification and synonyms were to give recent examples of what they had learnt.

8) **Environment** – When the children were asked directly if there was a particular place that made them feel happy and healthy, they gave examples of being outside in the fresh air and they thought sunlight was important.

9) **Pets** – A few children said that cuddling/stroking pets make them feel happy.

10) **Money** - One child mentioned that **"money might be important"** but this was not echoed by anyone else.

11) **Warmth** - One child said that it was important to be nice and warm in the winter and a discussion followed about hot chocolate and how nice it is to have **"a warm tummy."**

12) **Technology/Media**- Children mentioned that the TV, computer, mobile phones and iPads made them feel happy but this was not suggested by the girls until after the above were mentioned.

**If you were Prime Minister what changes would you make to health and wellbeing services available for someone your age?**

- "I would make health and wellbeing services more widely available to other people."
- "Have more sex education."
- "Crack down on underage alcohol and drug users and provide support to ensure they won't relapse."
- "Make teen mental health more known to everyone and how important it is."
- "Help available everywhere you go."
- "I would help the people that living in the streets."
- "Some people prefer the same sex doctor."
- "I would make them a quicker service and make them number one priority for more support."
- "I would make the health system have more support within schools and make a stronger bond with schools and the home."
- "Mental Health stop people feeling low."
- "I would make support for them by providing the same service as adults get for children."
- "I would say that every student would have to take part in exercise outside of school at least once a week."
- "To be able to see the doctor or dentist whenever they need to see them and not have to wait for their appointments."
- "To feel safer, more free phone calls for children to help services, not on the bill."

- “I would make them [services] more readily available.”
- “Going to every week night go to youth clubs.”
- “Information, introduce the service to the public more.”
- “Quicker waiting times.”
- “Make the services well known.”
- “Anyone can have checks at any time.”
- “Give people an optional service that people can use for support and advice on their health and wellbeing.”
- “Make them [services] more known so people know where to go for help.”
- “That all children get the best medical help that they need.”
- “Doctor surgeries to be open longer hours during the week and open at weekends.”
- “To be able to pick up prescriptions and go to the doctors by ourselves.”
- “To give us the chance to pick certain medical decisions.”
- “Speed up waiting time in hospitals, A&E etc.”
- “Edit laws in anyway I could, to allow emergency vehicles to reach their destination as fast as possible.”
- “Schools start later.”
- “Make them [services] more local near my area, I don't know where I would find any of these.”
- “Less hours of education so children can have more sleep.”
- “Having more youth clubs or places to go to get teens out of pubs and the streets to get noticed.”
- “I refuse to use any form of social media!”
- “More regular doctors appointments.”
- “More involved with everyone more of the time.”
- “More happiness.”
- “Mental health, make help for drugs and alcohol more accessible.”
- “I would provide more doctors surgeries.”
- “Hospitals available in small towns, more widely spread.”

- “Make services confidential and available everywhere, and where everyone knows they are available.”
- “You have to pass a test in order to have a child, to see if you are a fit parent.”
- “Schools start later and schools finish later.”
- “More support in schools.”
- “Encourage more campaigns to stand out and help teenagers be healthy.”
- “More things to do and better support networks like youth groups.”
- “Workers of the services should be present at schools and inform teens of the importance of learning about issues and the help for them.”
- “Specific open centres for young people to go there and talk about their problems.”
- “I wouldn't change anything because the way they are with us is actually ok.”
- “Mental health more focus on battling depression.”
- “I would change nothing as I have never had a problem.”
- “I wouldn’t change anything because the way they work are ok.”
- “Make new places for children to young adults to go and see about their health and wellbeing.”
- “Make healthier options cheaper.”
- “Make services more widely available.”
- “Make services quicker so people can get their support more quickly.”
- “I would give free gym access to children from the age 14 to 18.”
- “I would give a medical ward directed at teens.”
- “All medicines should be free if you are told to get it in order to get better.”
- “Make it simpler and build hospitals in every town and city.”
- “Free food for the homeless, good education, healthy living.”
- “Change school times, seriously, they are really bad.”
- “Healthier food in our school, no more pizzas and junk food.”
- “Reduce hours for education, all schools should provide counselling for students who need the support and poor families should get more help.”

- “I would make sure that healthier food would be more affordable.”
- “You can make changes but a normal teenager will try to do the things that you don’t want.”
- “Let students have more time to sleep, they need more energy to get through the day, and waking up super early is emotionally draining.”
- “Make more adverts for teens to know more about their health.”
- “Make more NHS services around the UK, as well as employing more practitioners to speed up the services and helping more people in a day.”
- “I would enlist a strict punishment to anyone who smokes under the age of eighteen.”
- “Advertise that teenagers can book appointments and go to the doctors on their own so there is no embarrassment with parents.”
- “Ensure that all children know where to go get help if needed or even wanted.”
- “Less school hours as stressful. Every school have counsellors for students to talk to.”
- “A place for students to go who are stressed or tired, and need help with school in a relaxing way.”
- “Invest more money in health and wellbeing services.”
- “I would make sure that teens had help for mental illness as much as they have for physical illnesses.”
- “I would want to make it easier for appointments at GP surgeries to be made and at least get an appointment within a few days not weeks.”
- “Young staff to talk about sex to young people in clinics.”
- “Make students feel equal and supported.”
- “I would invest more money in surgeries to get more staff so the patients can get served faster.”
- “Everyone has the same care at each household.”
- “Stop people eating so much junk food and go to more healthy things.”
- “Inform people how serious some health issues are.”
- “Stop making cigarettes.”
- “I would make sure people got good doctors and good health because that is important.”
- “Cigarettes should be illegal.”

- “Keep students informed properly. Don't put so much pressure them.”
- “I would offer more professional help on mental illnesses because those are as important as physical illnesses.”
- “More doctors and nurses able to make home visits.”

Appendix D

**D.1** - Survey used by YMCA for work carried out on behalf of Healthwatch Norfolk

YMCA NORFOLK

Do you feel comfortable accessing your local services? ***Yes*** ***No***

***Please give reasons for your answer***

Do you feel all services are easy to access for young people? ***Yes*** ***No***

***Please give reason for your answer***

Have you recently experienced any problems with a healthcare service? Please state the name of the service.

*e.g., difficulty booking appointments or finding a relevant health practice to deal with your needs?*

***Yes*** ***No***

***Please give reason for your answer***

**If you would like to share your experiences of health and wellbeing services in more detail go to: www.healthwatchnorfolk.co.uk**

If you have any questions please do not hesitate to contact:
**Charlie Smith |Young Health Champion Coordinator |Youth Development**
**01603621263 | 07894566615 | charlotte.smith@ymcanorfolk.org**

YMCA enables people to develop their full potential in mind, body and spirit. Inspired by, and faithful to, our Christian values, we create supportive, inclusive and energising communities, where young people can truly belong, contribute and thrive.

SUPPORT & ADVICE | ACCOMMODATION | FAMILY WORK | HEALTH & WELLBEING | TRAINING & EDUCATION

YMCA NORFOLK

Do you feel comfortable accessing your local services? ***Yes*** ***No***

***Please give reasons for your answer***

Do you feel all services are easy to access for young people? ***Yes*** ***No***

***Please give reason for your answer***

Have you recently experienced any problems with a healthcare service? Please state the service name.

*e.g., difficulty booking appointments or finding a relevant health practice to deal with your needs?*

***Yes*** ***No***

***Please give reason for your answer***

**If you would like to share your experiences of health and wellbeing services in more detail go to: www.healthwatchnorfolk.co.uk**

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# D.2 – Summary report from YMCA on work carried out behalf of Healthwatch Norfolk

## Healthwatch Norfolk Final Report

*The aim of this document is to outline the delivery of YMCA Young Health Champions work with young people in Norfolk aged between 15 and 25 years funded by Healthwatch Norfolk.*

### How was the project delivered?

The Young Health Champions project has strong links across Broadland District alongside links also created through work in several schools and youth organisations by YMCA Norfolk. A short young person friendly survey was created to capture views and comments on local health and social care services.

These surveys have been used to promote conversation during various sessions provided both within the community, through the Young Health Champion project and those living within the housing service provided by YMCA Norfolk.

### What are the outcomes and objectives of the project?

One of aims of the project is to promote the work of Healthwatch Norfolk and how it may positively affect those in contact with the Young Health Champion project and YMCA Norfolk. This will aid meaningful engagement and promotion of Healthwatch Norfolk throughout the county whilst obtaining an insight from disadvantaged young people's views and experiences of their local health and social care provision.

Another objective includes undertaking consultation work with young people on health and wellbeing needs in order to ensure young people feel services are more assessable.

### Profile of participants

Participants included young people who came into contact with the Young Health Champion Project and services conducted by YMCA Norfolk.

The participants were asked their age and the start of their postcode in order to obtain the demographics of the participants and to then use this in the future to ascertain any differences in opinions relating to age or location.

Data was gathered from those who live in Norfolk, however a few participants were from Suffolk but attend a Norfolk Sixth Form College. Data gathered from these responses has been entered on Healthwatch Norfolk's system.

### Breakdown of Information

The Young Health Champions delivery has mainly been within the Broadland District due to funding, but has used links created by YMCA Norfolk for access to different areas such as Norwich, Great Yarmouth and Gorleston. Sessions have been delivered in educational centres and youth groups varying from formal and informal delivery methods. These sessions included signposting young people to services they may wish to seek further guidance from. Services discussed include: Norfolk's Living Well, NHS Smoke Free, My Drink Aware Website, Norfolk Wellbeing Service and MIND (See Figure 1).

Delivered sessions included attending City College Norwich (3% of surveys received), Carrowbreck House as part of BCTS (2%), Lunch Club activities at YMCA (10 entries), Notre Dame High School (2%), Freethorpe Guides (1%) and Broadland High Young Health Champion Sign up (1%). Data gathered through a link structure included Princes Drop in (Talent Match), East Norfolk Sixth Form (87%) (See Figure 2).

Figures show that the majority of those who completed the survey, whether through a delivered session or a link, were aged 17 years (41%) and with 27% being 16 years old (See Figure 3). These ages directly correlate to the age bracket worked with at both BCTS and East Norfolk Sixth Form, both establishments where the majority of surveys were completed.

Young people were asked to give the first part of their postcode in order to obtain the area in which related to their opinions and experiences. The data indicates a high number of young people who completed the survey live within NR30, NR31, NR29 and NR13 areas (See Figure 4).

## Impact of Project

Information gathered over the past six months have assisted in obtaining an overview of young people's thoughts and feelings towards the health, wellbeing and social care services available.

When asked 'if you have problems with your health or wellbeing where are you most likely to go to for help and or advice?', the most recorded answer was family/friend which a YMCA Support Worker outlined within the 'other' category. One area of concern was responses stating 'no one' or no answer given. This should be addressed within the organisation the data was gathered from to ensure that all young people present feel accounted and supported.

From further responses, in particular to 'please choose two from the list in relation to what matters most about your health and wellbeing' there was a strong correlation between their answer to this, and those they believed they could talk to when an issue arose. Those who felt that they could discuss matters with their family/friends also stated the importance of having strong relations with family/friends.

When asked how they felt about accessing local services many stated they had no issue in doing so and felt they were aware of all available services within their area. There were a few responses which stated 'what does this mean?' implying they did not understand what a service was, this was also emphasised by them answering they are unaware of all services within their catchment.

Information was gathered in a survey format to ensure efficiency, allowing a greater amount of comments and views to be gathered. Those questionnaires completed as a part of a session took approximately 10 minutes. By doing it during the session it encouraged young people to take an objective and honest view of the questions asked. A prime example of this was during a session for those studying a degree in Public Services or Sport at City College Norwich. The students were informed of the project and its objectives before being given the survey, whilst able to take part in open discussion surrounding their health and wellbeing and the services available to them.

East Norfolk Sixth Form approached their students during their timetabled tutorial period. This gave the opportunity to target all students in a short allotted time ensuring quick data capture.

## Successes of the project

The method adapted for collecting data has proved to be effective allowing the current Young Health Champion Project to obtain data quickly from those they are in contact with. It has also been effective with collecting data from those young people in YMCA residency, also giving them the opportunity to discuss this area further with the worker they completed it with.

To date **1001** surveys have been completed which is an encouraging figure for over a 6 month time period.

Another positive to come from the project is the views are from the young people themselves, all of which are informative and may help with the shaping of future services. One area of agreement amongst several young people was the lack of advertisement in regards to available services and how to access these. There were also comments made in regards to how to access services, especially when they only offer appointments during college period.

Comments made by young people throughout the project:

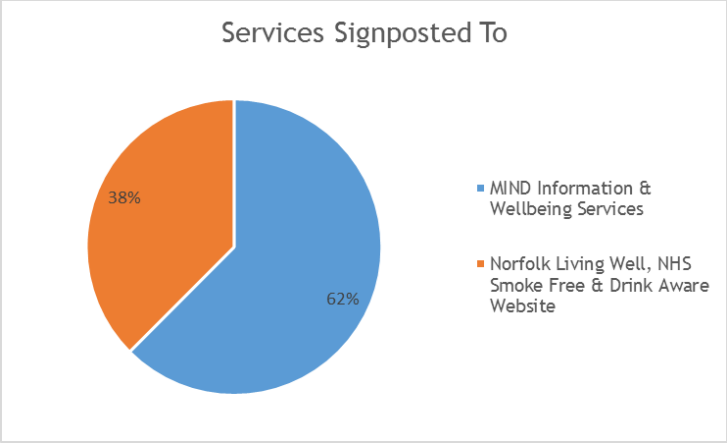
***"'yes, I know it is safe and reliable' 'yes because services are always there and they are confidential' 'yes, I don't require help but if I did id be comfortable to access help' 'yes easy to find' 'no, not aware of many' 'no, no idea what's on offer' 'no live outside main city area' and 'no lack of advertising and knowledge about subject.'"***

## Future Developments of the project

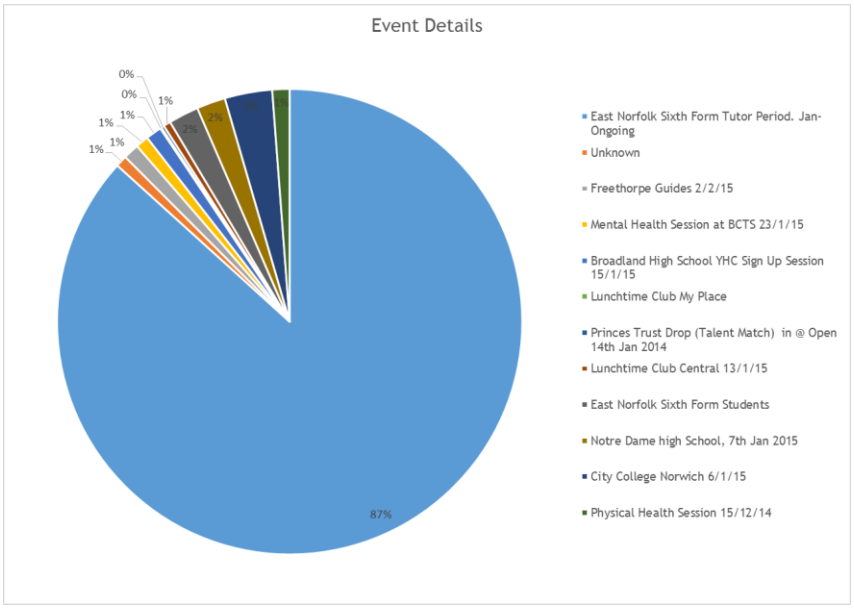
Over the course of the project the majority of feedback has been from one particular Sixth Form. This is due to the link already created and the format in which they could access students' time. Although this is a positive, in the future an aim should be to contact other youth centres and colleges which offer more vocational courses. This would aid with the range of views explored.

In the future the project also aims to reach out further to those young people within YMCA residency including those young people in the Supported Lodgings Scheme and young people that have been in the care system. Emphasis will also be based on other projects based within YMCA Norfolk.

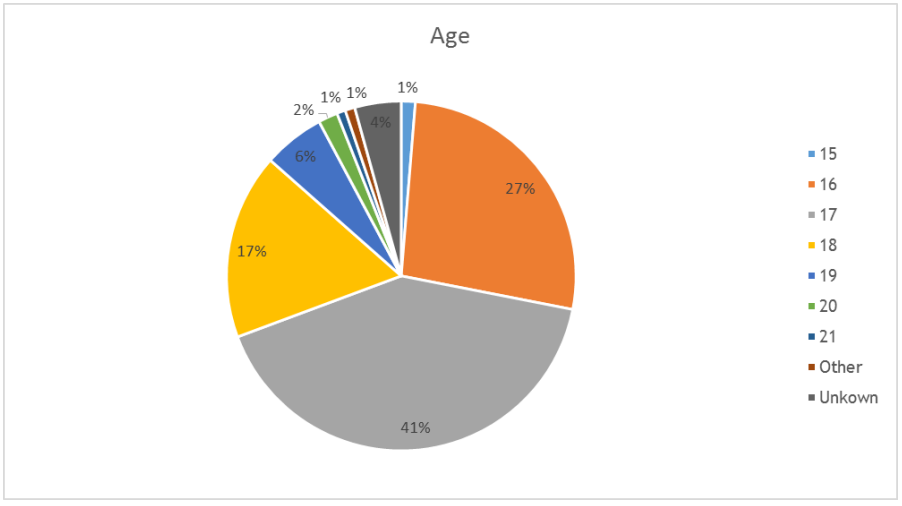
One area of continued disruption is the inputting of data. An issue that has been identified is the amount of time needed, due to each survey needing the question and answer inputted on to the system. This could have been decreased by giving young people a Survey Monkey questionnaire, however the personal aspect of our original method has also given us the ability to see young people completing the questionnaires and thus promoting a high ratio of responses. One method to consider in the future would be to work with both a hard copy survey and one on survey monkey. This would still allow for access within youth groups and reach a wider scope of data through survey monkey. To ensure that data collection is time effective in the future, further development and work with Healthwatch Norfolk will be established.



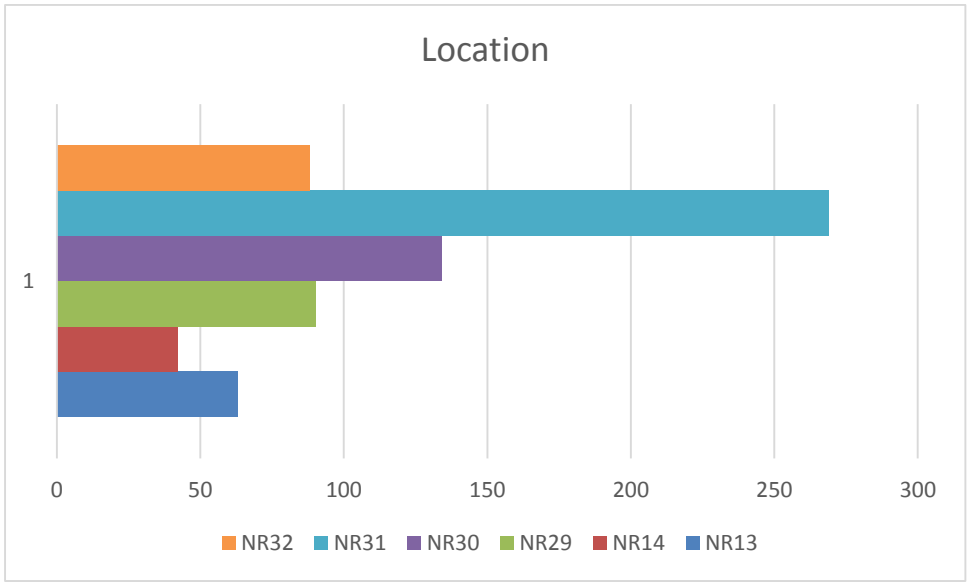

(Figure 1)




(Figure 2)




(Figure 3)




(Figure 4)

## Overall Evaluation

This Healthwatch Project which has been developed as a strand of the Young Health Champions project has been very beneficial in reaching out to young people within Norfolk especially young people who voices may not have been heard. It has allowed interaction with those who participate in youth groups, studying at education centres, sixth form colleges, institutes for higher education but also with a strong focus on young people who live with YMCA in hostel and community housing.

The type of survey has been pleasantly received by all those involved due to the size and type of questions. This has meant many young people have been happy to answer due to the nonintrusive manner and only having a few short questions. One way in which this could be developed however is for a better way for the young people to add further comment or address certain issues that may arise when taking part.

The project has also been a success in spreading the word about Healthwatch Norfolk and the role they have to play within the county. Continued work with young people will only enforce this and may even increase their opportunities in terms of training and other ventures.

The main outcome from the project is the ability to give the young people the chance to voice their opinions over important matters that either affect them directly or indirectly. This also allows them to gain confidence in this area and feel their voice is being heard. In the future the project wishes to gain more in depth coverage of the young people's views, opinions and suggestions through focus groups which are led by the young people themselves especially focusing on disadvantaged young people and those that have been in care. Hopefully, by allowing them to lead conversation and discussion it will also mean the focus is shifted to what they feel is important. The surveys will be adapted to follow with the aims and objectives Healthwatch Norfolk wish to focus on in 2015-2016 and to ensure that data monitoring and collection is easier and time effective.

# Appendix E – Surveys and lesson plans used with younger children.

These lesson plans/ surveys were differentiated into three versions for the following year groups; Reception, year one and year two; years three and four; years five and six.

## E.1 – Survey/lesson plans used for Reception, year one and year two.

Class and teacher name:

Please return all resources and activities completed by the children to reception for collection. If you would like them returned at a later date for display etc. please tick the box below and advise of class and teacher name.

Please return ☐

### Objectives

- To introduce Healthwatch Norfolk to staff.
- To understand the things that make children feel happy and healthy.
- To understand what children think their peers worry about.
- Experiences of visiting primary care services – doctors and dentists.

### Resources/materials

- Topsy and Tim: Go to the doctor – book.
- Master copies – Colouring, health and happy worksheets, crosswords and word search.
- 2 packets of snap cards.
- 30 Stickers.

### Feedback

- What could be improved? What went well? And what went badly? – This can be provided via phone, e-mail, via the resource pack or a meeting, whichever is easiest for yourself.
- If we could be provided with the following numbers that would be most helpful;
  - Total SEN pupils:
  - Total number of pupils:

### Tasks

1. Introduction to the topic – Book
2. Questions –
   - Can anyone been remember visiting a doctor? Hands up

Amount - /

3. Can anyone remember what they went to the doctors for? (3 examples if possible if you could ask the rest of the class if they have gone to the doctors for the same reason, and note the amount and examples below)

Examples provided …

4. Was the doctor nice? Happy? Kind? Smiley? Or grumpy? etc.

Any examples provided by the class…

5. Does anyone know where you would go if you had a toothache...Has anyone been to the dentist?

Amount - /

6. Why do you think children should go to the dentist?

Any examples provided by the class…

7. When you were waiting for the doctor/dentist what did you do? Were there any games to play with or books to read? Etc.

Any examples provided by the class…

8. What do you think makes children happy? (Playing with friends, reading, watching TV/film, lesson at school etc.)

Any examples provided by the class…

9. What do you think children need to be healthy? (Fruit, vegetables, exercise, brushing teeth etc.)

Any examples provided by the class…

10. What do you think children worry about? (School, friends, family etc.)

Any examples provided by the class…

# **E.2** – Survey/lesson plans used for year three and year four engagement.

Class and teacher name:

Please return all resources and activities completed by the children to reception for collection. If you would like them returned at a later date for display etc. please tick the box below and advise of class and teacher name.

Please return ☐

## Objectives

- To introduce Healthwatch Norfolk to staff.
- To understand the things that make children feel happy and healthy.
- To understand what children think their peers worry about.
- Experiences of visiting primary care services – doctors and dentists.

## Resources/materials

- Activity Booklets – 1 per child.
- 2 packets of snap cards.
- Stickers – 1 per child.

## Feedback

- What could be improved? What went well? And what went badly? – This can be provided via phone, e-mail, via the resource pack or a meeting, whichever is easiest for yourself.
- If we could be provided with the following numbers that would be most helpful;
  - Total SEN pupils:
  - Total number of pupils:

## Tasks

1. Introduction to the topic – Word Scramble
   - PLIOHSTA – HOSPITAL
   - RTCODO – DOCTOR
   - SRUEN – NURSE
   - TNEIDTS – DENTIST
   - UOCHG – COUGH
   - KBRNEO RMA – BROKEN ARM
   - TCHOAETOH – TOOTHACHE
   - MUTMY HAEC - TUMMY ACHE
2. Questions –
   - Can anyone been remember visiting a doctor? Hands up

   Amount - /
3. Can anyone remember what they went to the doctors for? (3 examples if possible if you could ask the rest of the class if they have gone to the doctors for the same reason, and note the amount and examples below)

Examples provided …

4. Was the doctor nice? Happy? Kind? Smiley? Or grumpy? etc.

Any examples provided by the class…

5. Does anyone know where you would go if you had a toothache... Has anyone been to the dentist?

Amount - /

6. Why do you think children should go to the dentist?

Any examples provided by the class…

7. When you were waiting for the doctor/dentist what did you do? Were there any games to play with or books to read? etc.

Any examples provided by the class…

8. What do you think makes children happy? (Playing with friends, reading, watching TV/film, lesson at school etc.)

Any examples provided by the class…

9. What do you think children need to be healthy? (Fruit, vegetables, exercise, brushing teeth etc.)

Any examples provided by the class…

10. What do you think children worry about? (School, friends, family etc.)

Any examples provided by the class…

# **E.3** – Survey/lesson plan used for year five and year six engagement.

Class and teacher name:

Please return all resources and activities completed by the children to reception for collection. If you would like them returned at a later date for display etc. please tick the box below and advise of class and teacher name.

Please return ☐

## Objectives

- To introduce Healthwatch Norfolk to staff.
- To understand the things that make children feel happy and healthy.
- To understand what children think their peers worry about.
- Experiences of visiting primary care services – doctors and dentists.

## Resources/materials

- Master copies – Colouring, health and happy worksheets, crosswords and word search.
- Stickers – 1 per child.

## Feedback

- What could be improved? What went well? And what went badly? – This can be provided via phone, e-mail, via the resource pack or a meeting, whichever is easiest for yourself.
- If we could be provided with the following numbers that would be most helpful;
    - Total SEN pupils:
    - Total number of pupils:

## Tasks

5. Introduction to the topic – Word Scramble
    - PLIOHSTA – HOSPITAL
    - RTCODO – DOCTOR
    - SRUEN – NURSE
    - TNEIDTS – DENTIST
    - UOCHG – COUGH
    - KBRNEO RMA – BROKEN ARM
    - TCHOAETOH – TOOTHACHE
    - MUTMY HAEC - TUMMY ACHE
6. Questions –
    - Can anyone been remember visiting a doctor? Hands up

Amount - /

7. Can anyone remember what they went to the doctors for? (3 examples if possible if you could ask the rest of the class if they have gone to the doctors for the same reason, and note the amount and examples below)

Examples provided …

8. Was the doctor nice? Happy? Kind? Smiley? Or grumpy? etc.

Any examples provided by the class…

9. Does anyone know where you would go if you had a toothache... Has anyone been to the dentist?

Amount - /

10. Why do you think children should go to the dentist?

Any examples provided by the class…

11. When you were waiting for the doctor/dentist what did you do? Were there any games to play with or books to read? Etc.

Any examples provided by the class…

12. Please spilt the class into groups and ask them to discuss and write down their ideas on pieces of paper regarding the following questions;

    1. What do you think makes children happy? (Playing with friends, reading, watching TV/film, lesson at school etc.)

    2. What do you think children need to be healthy? (Fruit, vegetables, exercise, brushing teeth etc.)

    3. What do you think children worry about? (School, friends, family etc.)

    4. If you were worried, scared, frightened or upset about something, who would you feel the most happy about speaking to? (This could be friends, teachers, parents, brothers and sisters etc.)

# Glossary of abbreviations used in child health and social care in Norfolk

| Acronym | Explanation |
|---|---|
| AAT | Access & Assessment Team |
| ACN | Acute Commissioning Network |
| ANDP | Additional Needs & Disabilities Partnership |
| AQP | Any Qualified Provider |
| AT | (NHS England) Area Team |
| ATT | Access Through Technology |
| BI | Business Intelligence |
| CAMHS | Child Adolescent Mental Health Services |
| CCN | Community Commissioning Network |
| CCG | Clinical Commissioning Group<br>• N CCG = Norwich CCG<br>• NN CCG = North Norfolk CCG<br>• SN CCG = South Norfolk CCG<br>• WN CCG = West Norfolk CCG |
| CCNT | Children's Community Nursing Team |
| CDC | Council for Disabled Children |
| CDOP | Child Death Overview Panel |
| C&FA | Children & Families Act |
| CFO | Chief Financial Officer |
| CHC | Continuing Health Care |
| CHIS | Child Health Information System |
| CI | Commissioning intentions |
| CIP | Cost Improvement Plan |
| CO | Chief Officer |
| COO | Chief Operating Officer |
| CQC | Care Quality Commission |
| CQ(N) | Contract Query (Notice) |
| CQRM | Clinical Quality Review Meeting |
| CQUIN | Commissioning for Quality and Innovation (payment framework) |
| CSU | Commissioning Support Unit |
| CV | Contract Variation |
| C&YP | Children & Young People |

| | |
|---|---|
| DASH | Disability & Additional Specialist Health Needs |
| DCO | Designated Clinical Officer (or alternatively DMO – Designated Medical Officer) |
| DH | Department of Health |
| DNA | Did Not Attend |
| EACH | East Anglian Children's Hospice |
| ECCH | East Coast Community Health (GY&W Community Provider) |
| ECR | Extra Contractual Referral |
| ECR | Extra Contractual Referral |
| EDT | Emergency Duty Team |
| EHCP | Education Health & Care Plan |
| EKOS | East Kent Outcomes System |
| EOI | Expression of Interest |
| FNP | Family Nurse Partnership |
| FOI | Freedom of Information |
| FV | Family Voice |
| HCP | Healthy Child Programme |
| HOSC | Health Overview & Scrutiny Committee |
| HV | Health Visitor |
| ICES | Integrated Central Equipment Service |
| IFR | Individual Funding Request |
| IG | Information Governance |
| IST | Intensive Support team (CAMHS) |
| ITT | Invitation to tender |
| JEG | Joint Equipment Group |
| JI | Joint Investigation |
| JPUH | James Paget University Hospital (GY&W Acute Provider) |
| KPI | Key Performance Indicator |
| LA | Local Authority |
| LAAC | Looked After & Adopted Children |
| LAC | Looked After Children |
| LES | Local Enhanced Service |
| LO | Local Offer (Children & Families Act) |
| MASH | Multi Agency Safeguarding Hub |

| | |
|---|---|
| MoU | Memorandum of Understanding |
| NANSA | Norfolk & Norwich Scope Association |
| NCC | Norfolk County Council |
| NCH&C | Norfolk Community Health & Care (Community Provider) |
| NHS E | NHS England |
| NICE | National Institute for Health and Care Excellence |
| NICU | Neonatal Intensive Care Unit |
| NNUH | Norfolk & Norwich University Hospital (Acute Provider) |
| NSCB | Norfolk Safeguarding Children's Board |
| NSFT | Norfolk & Suffolk Foundation Trust (Mental Health Provider) |
| OOC/OOA | Out of County / Out of Area |
| PbR | Payment by Results |
| PH | Public Health |
| PID | Project Initiation Document |
| PIMHS | Perinatal Infant Mental Health Service |
| PIN | Procurement Information Notice |
| PQQ | Pre-Qualification Questionnaires |
| QEH | Queen Elizabeth Hospital (Acute Provider) |
| QIPP | Quality Innovation Productivity & Prevention |
| QIR | Quality Issue Report |
| RTT | Referral to Treatment |
| SAM | Single Area Meeting |
| SARC | Sexual Assault Referral Centre |
| SCR | Serious Case Review |
| SDIP | Service Development Improvement Plan |
| SDQ | Strengths & Difficulties Questionnaires |
| SEN | Special Educational Needs |
| SEND | Special Educational Needs & Disabilities |
| SI | Serious Incident (requiring investigation) |
| SLA | Service Level Agreement |
| SLT | Speech & Language Therapy |
| SPOR | Single Point of Referral |
| SPRG | Service Performance Review Group |

| | |
|---|---|
| SUS | Secondary Uses Service |
| TIFG | Technical Information & Finance Group |
| ToPS | Termination of Pregnancy Service |
| ToR | Terms of Reference |
| YAB | Youth Advisory Board |
| YOT | Youth Offending Team |