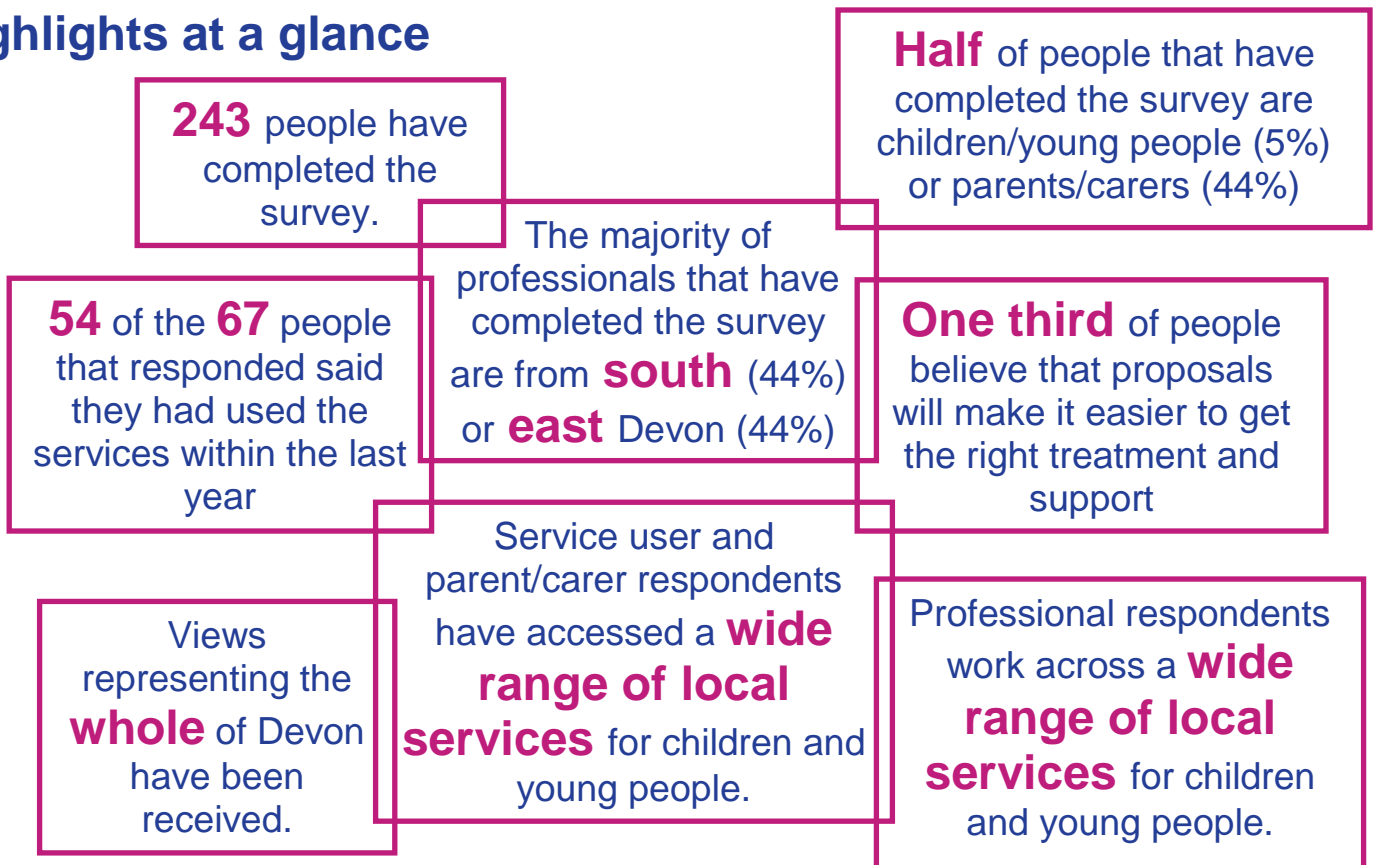


# Community Health and Wellbeing Services for Children and Young People in Devon

**Shaping future services**

**Engagement Feedback Report Version 1  
22 August 2017**

## Highlights at a glance



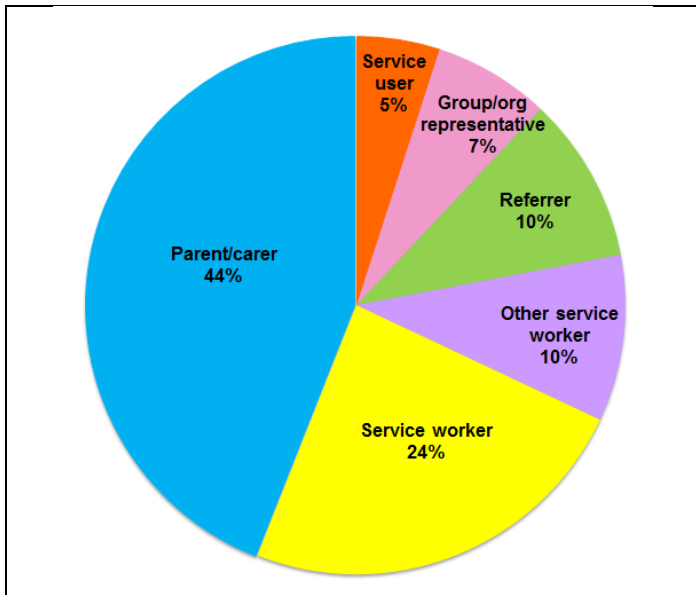
## Top five priorities for making services for children and young people work well

- 1**  
One person who the child/young person/family can contact to talk about their care and what they need
- 2**  
If the child/young person has a long term condition, they don't need to wait for another referral to get help again
- 3**  
Having information about how long the child/young person will need to wait for the service and what they can expect from the service when you get it
- 4**  
While a child/young person is waiting for a service, having information about how they can manage, including what to do if their situation changes
- 5**  
One website, email and phone number where families can get information about help and support, and services they might need

# About the current services

## 1. Who has participated in this survey?

(Total number – 241)



**Service user** A young person aged 25 or under who has experience of using these services

**Parent/carer** A parent/carer of someone aged 25 or under who has used these services

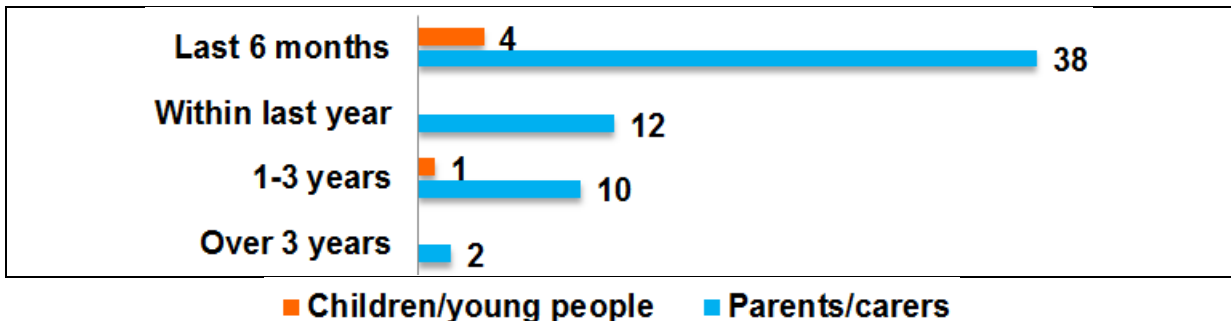
**Service worker** A health, social care or education professional that works in these services

**Referrer** A professional (for example GP or education) that makes referrals into children’s services

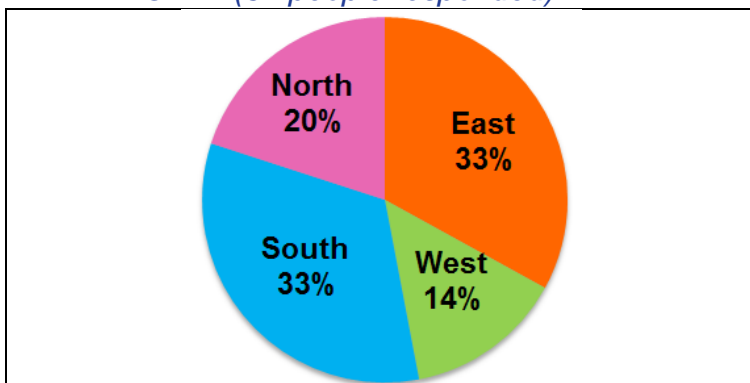
**Other service worker** Other health, social care, education or voluntary sector worker

**Group/org representative** A representative of an organisation or group with an interest in children’s health services provision

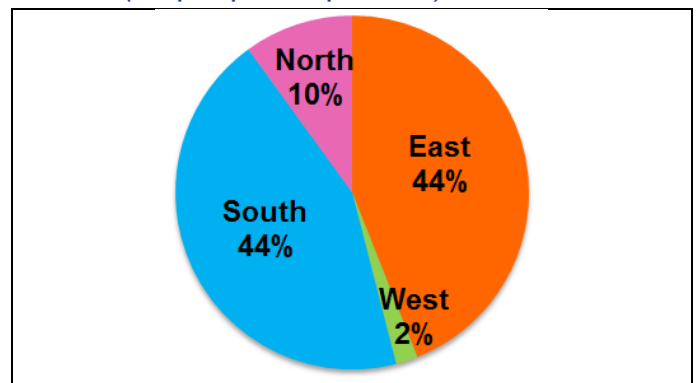
## 2. When did children/young people and parents/carers last have contact with services?



## 3. Which area of Devon are children/young people and parents/carers from? (64 people responded)

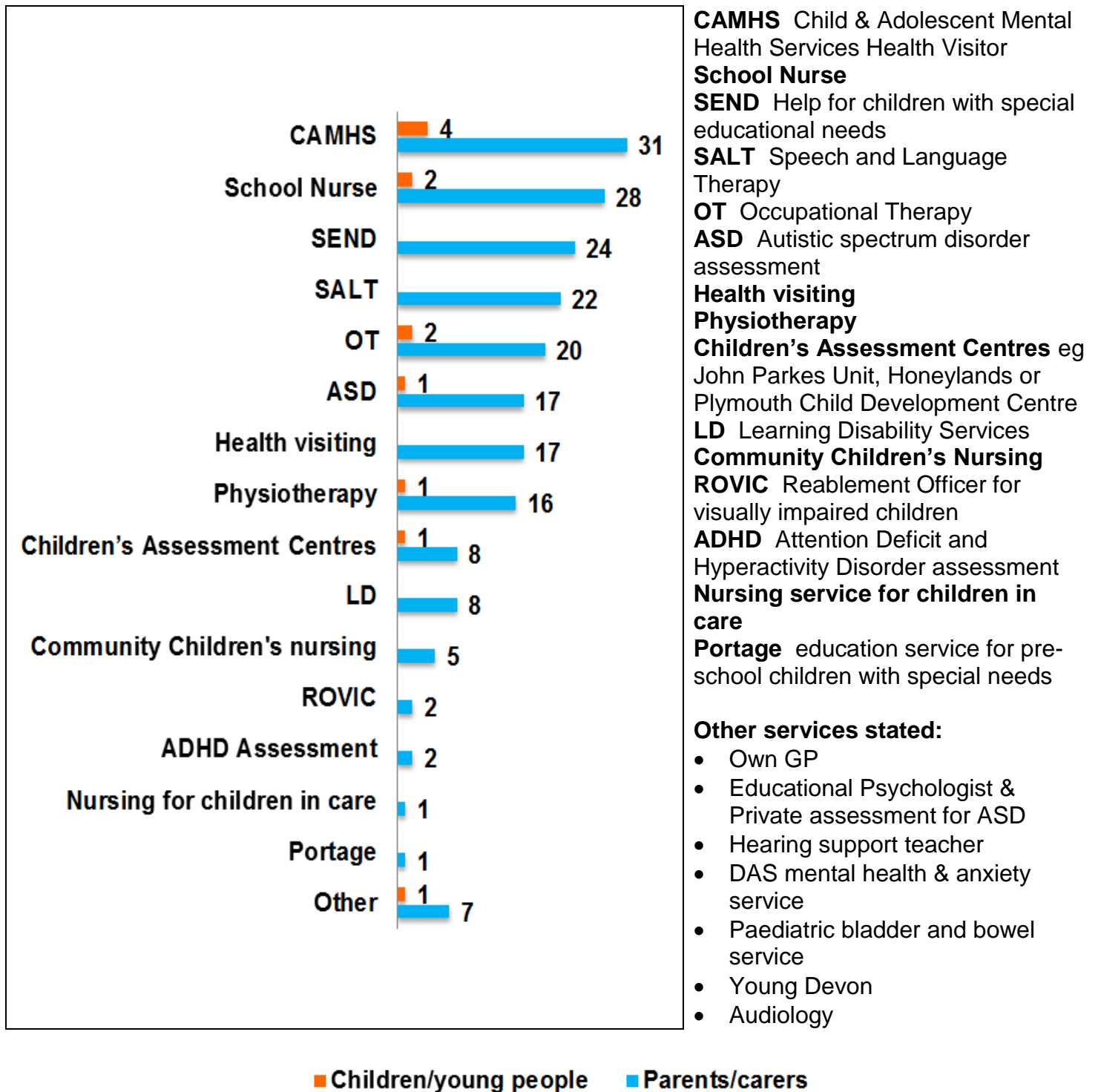


## 4. Which area of Devon are professionals from? (49 people responded)



## 5. Which services have children/young people and parents/carers had contact with in the last 3 years?

(Respondents were asked to select all that apply.)

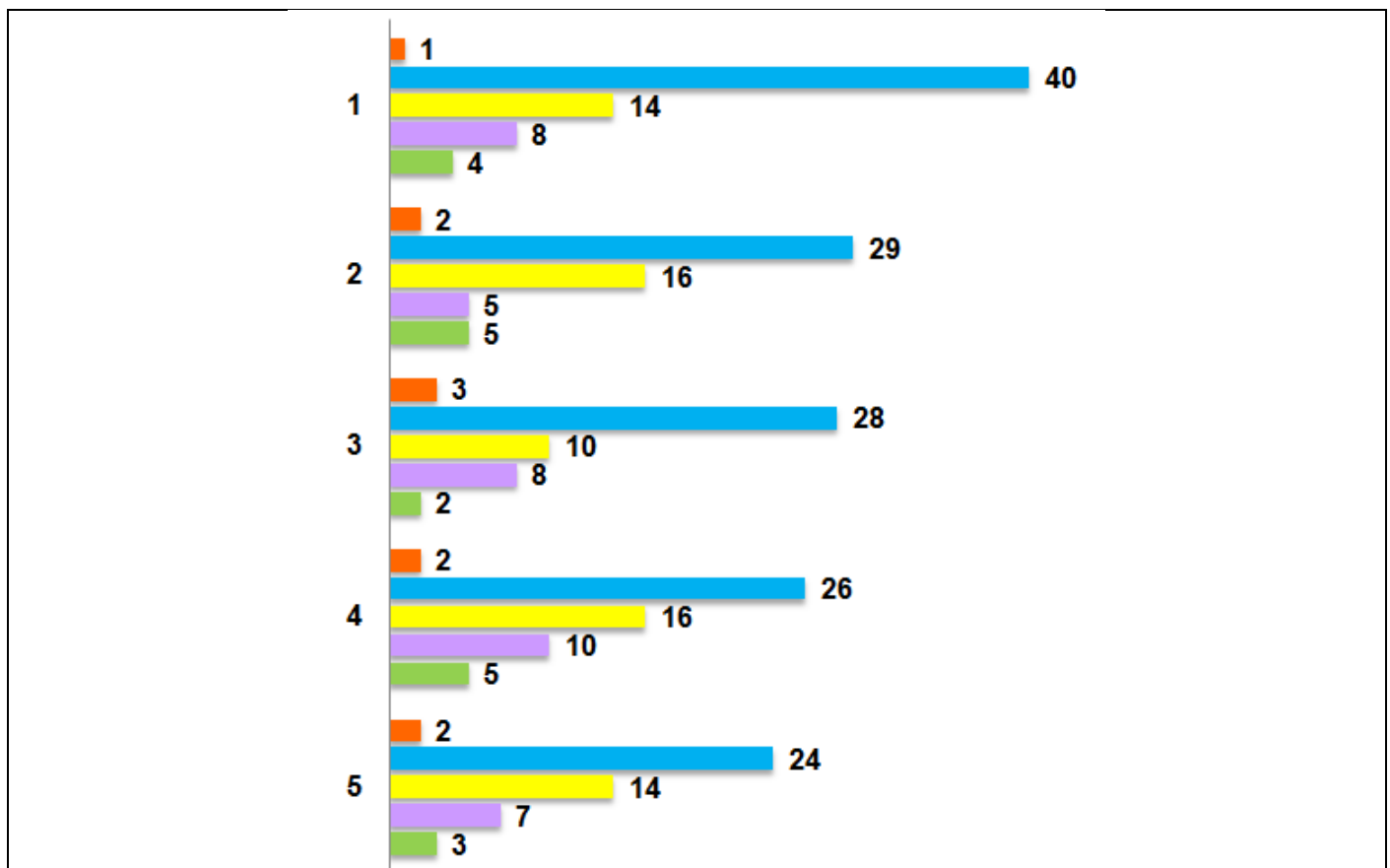


# About the proposed future model of care of services for children and young people

## 6. Prioritising what makes services good

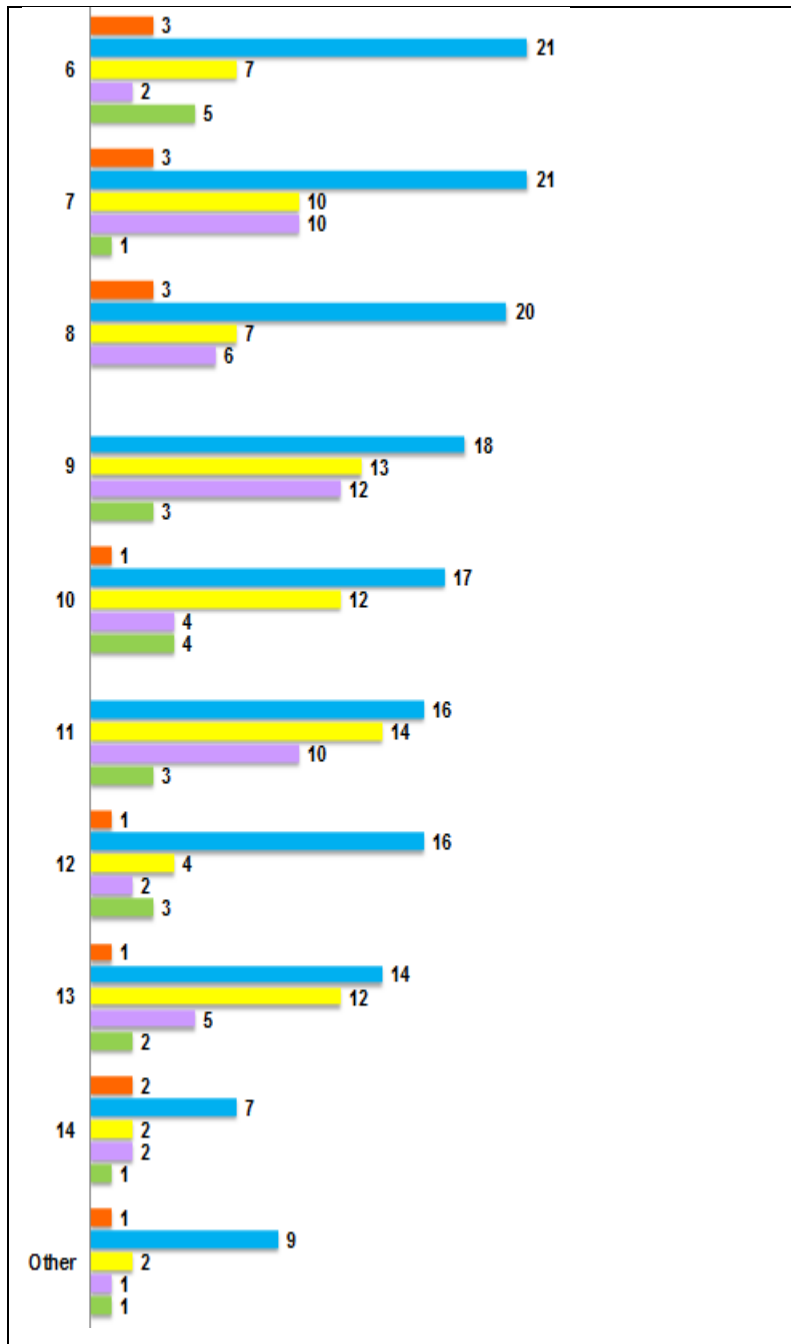
### Top five priorities in order of popularity

1. One person who the child/young person/family can contact to talk about their care and what they need
2. If the child/young person has a long term condition, they don't need to wait for another referral to get help again
3. Having information about how long the child/young person will need to wait for the service and what they can expect from the service when you get it
4. While a child/young person is waiting for a service, having information about how they can manage, including what to do if their situation changes
5. One website, email and phone number where families can get information about help and support, and services they might need



■ Children/young people ■ Parents/carers ■ Worker ■ Worker - other ■ Referrer

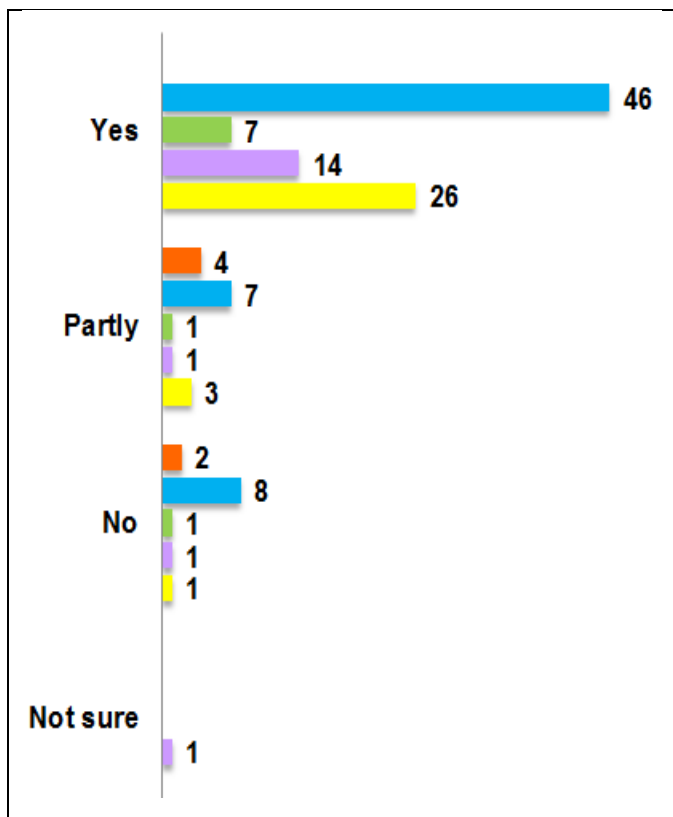
## Remaining priorities



6. If children/young people need services, they can get them near where they live
7. Children/young people/families can get quick advice about their situation without needing an appointment
8. Appointments are at flexible times and places to suit family life
9. Children/young people are involved in setting goals and decisions about their care
10. Children and young people should be prioritised on risk and need
11. Crisis services are available out of hours
12. If the child/young person doesn't have the right 'connection' with the professional, they can change to another
13. Services help children/young people to understand their own health and wellbeing, and be as independent as possible
14. If children/young people need services, they can get them near school

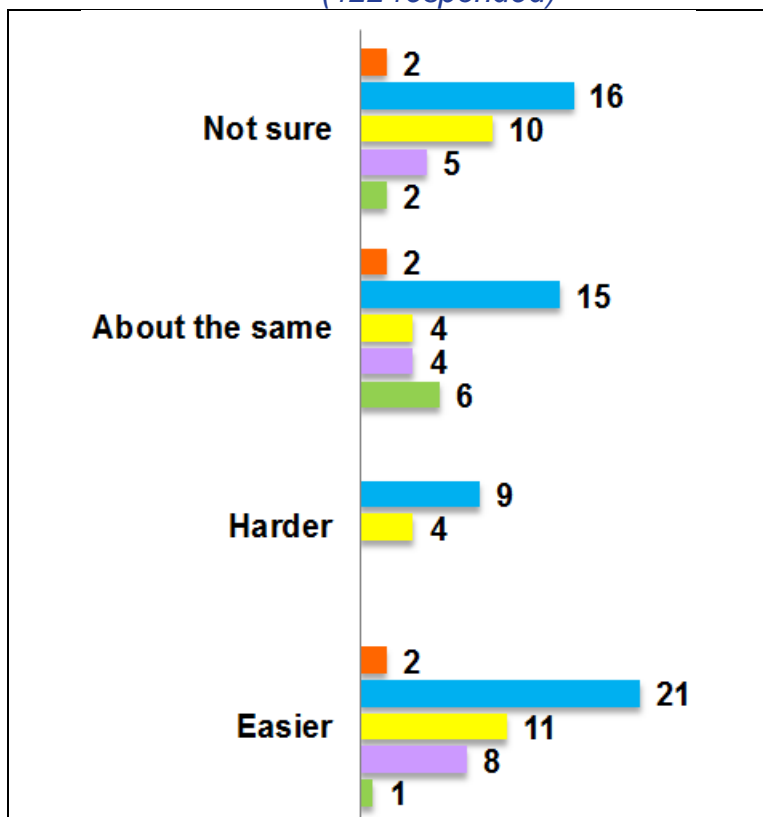
■ Children/young people   
 ■ Parents/carers   
 ■ Worker   
 ■ Worker - other   
 ■ Referrer

**7. Have you read our engagement document that explains our proposals for future services?**



**8. Do you think the proposals will make it easier or harder for you to receive the right support and treatment?**

(122 responded)



■ Children/young people ■ Parents/carers ■ Worker ■ Worker - other ■ Referrer

**Respondents that felt things would be harder gave the additional information below.** (There were no additional responses from Children & young people and Referrers.)

**Parents & carers**

- It all sounds lovely but having been a parent of children with SEND for 11 years in Devon. I have zero confidence in seeing the benefits of any of it.
- Amongst all the gobbledegook I cannot see that anything changes. It still doesn't address the problems we've had - very little and very poor quality help for middle to late teens. My daughter was passed onto adult services as she was 18, but this/ these were totally inappropriate for her and she was left with nothing/ no help. People her age need age specific care and help and not be treated like just another statistic but an individual with very individual needs.
- Because what the document says and what actually happens are not the same thing.
- If a child has a named condition it is easier to point them to the right services. Those without a named condition are pushed from pillar to post across all specialties. There is no emphasis on

creating child centred commissioning frameworks that is evidenced at specialist children's hospitals. Rather than giving a child 15 appointments with 15 specialists, the specialists should conduct multi disciplinary team meetings with an intermediary who can liaise with the parents and child. 'Tell us once' should be adopted. Also asd assessments are still very poor.

- Following assessment and diagnosis have had no support or follow up
- Endless waiting lists, being passed from pillar to post and seeing numerous people
- I worry that services will be lost and I won't see the professional I need to see as another person may be doing that job instead.
- I haven't read it yet but waiting times for ASD assessment and teaching teachers to spot it earlier would help as my daughter wasn't diagnosed until 9
- Money will rule these services but hopefully it will not as many services are being lost because of lack of funding
- We need these services in every school. A known face not a string of strangers that you have to repeat the story over and over again. Local face to face is what we like to see.
- My experience was very good with the response from CAMHs professional and timely. What could be improved is better communication between primary care and other health professionals and school.
- Proposals are great but without services working together, listening to parents, it won't change.
- No clear explanation of how things will get better. It's full of soundbites and no real substance

### Workers in other related services

- The service requires a higher level of resources- there is more pressure being applied to the education sector in order to substitute at least one of the above services and we are not the best trained
- The principles sound good, however I come from a practical point of view re the day to day action of making referrals and this is what I would like to bring up. I feel that there are barriers to accessing the services, which in turn does not help our families and their children.

## How different respondent groups have prioritised their top 5

### Parents & carers

Priority order	Priority number		<i>How many people selected this option</i>
1 <sup>st</sup>	1	One person who the child/young person/family can contact to talk about their care and what they need	40
2 <sup>nd</sup>	2	If the child/young person has a long term condition, they don't need to wait for another referral to get help again	29
3 <sup>rd</sup>	3	Having information about how long you will need to wait for the service and what you can expect from the service when you get it	28
4 <sup>th</sup>	4	While you're waiting for a service, having information about how you can manage, including what to do if your situation changes	26
5 <sup>th</sup>	5	One website, email and phone number to get information about help and support, and services you might need	24



## Children & young people

Priority order	Priority number		<i>How many people selected this option</i>
1 <sup>st</sup>	8	Appointments are at flexible times and places to suit family life	3
2 <sup>nd</sup>	7	We can get quick advice about our situation without needing an appointment	3
3 <sup>rd</sup>	6	If your child needs services, they can get them near where they live	3
4 <sup>th</sup>	3	Having information about how long you will need to wait for the service and what you can expect from the service when you get it	3
5 <sup>th</sup>	2	If my child has got a long term condition, we don't need to wait for another referral to get help again	2

## Workers

Priority order	Priority number		<i>How many people selected this option</i>
1 <sup>st</sup>	2	If my child has got a long term condition, we don't need to wait for another referral to get help again	16
2 <sup>nd</sup>	4	While you're waiting for a service, having information about how you can manage, including what to do if your situation changes	16
3 <sup>rd</sup>	1	One person who the child/young person/family can contact to talk about their care and what they need	14
4 <sup>th</sup>	5	One website, email and phone number to get information about help and support, and services you might need	14
5 <sup>th</sup>	11	Crisis services are available out of hours	16

## Workers - other

Priority order	Priority number		<i>How many people selected this option</i>
1 <sup>st</sup>	9	I am involved in setting goals and decisions about my child's care	12
2 <sup>nd</sup>	4	While you're waiting for a service, having information about how you can manage, including what to do if your situation changes	10
3 <sup>rd</sup>	7	We can get quick advice about our situation without needing an appointment	10
4 <sup>th</sup>	11	Crisis services are available out of hours	10
5 <sup>th</sup>	1	One person who the child/young person/family can contact to talk about their care and what they need	8

## Referrers

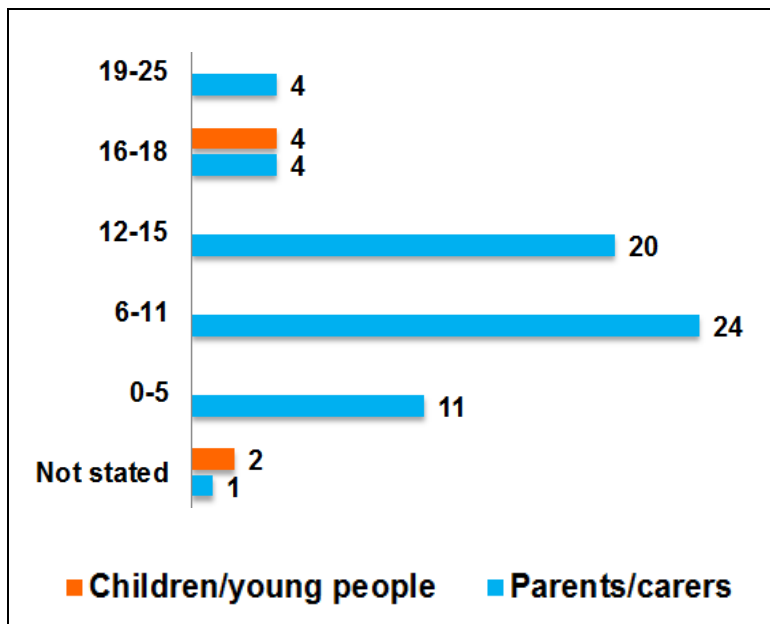
Priority order	Priority number		<i>How many people selected this option</i>
<b>1<sup>st</sup></b>	<b>2</b>	If my child has got a long term condition, we don't need to wait for another referral to get help again	<b>5</b>
<b>2<sup>nd</sup></b>	<b>4</b>	While you're waiting for a service, having information about how you can manage, including what to do if your situation changes	<b>5</b>
<b>3<sup>rd</sup></b>	<b>6</b>	If your child needs services, they can get them near where they live	<b>5</b>
<b>4<sup>th</sup></b>	<b>1</b>	One person who the child/young person/family can contact to talk about their care and what they need	<b>4</b>
<b>5<sup>th</sup></b>	<b>10</b>	Children and young people should be prioritised on risk and need	<b>4</b>

# About the respondents

**Please note:**

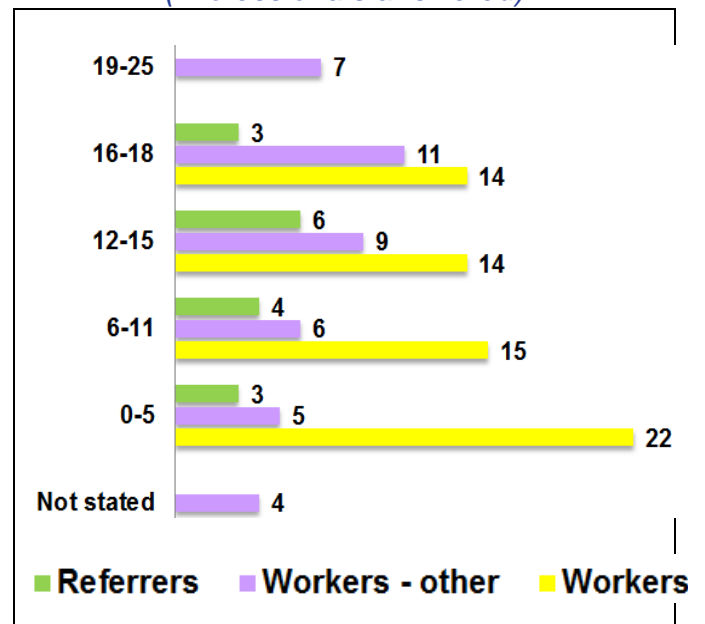
- Unless otherwise indicated, all questions in this section were answered by children/young people and parent/carers only.
- Although the survey requested that these questions were answered from the point of view of the child or young person, some of these questions may have been answered by parents/carers from their own point of view.

## 9. Age of child or young person

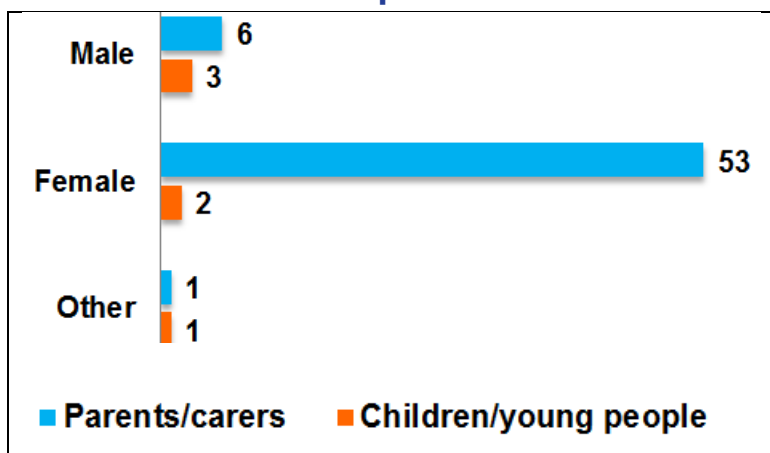


## 10. Age of children and young people receiving services

*(Professionals answered)*



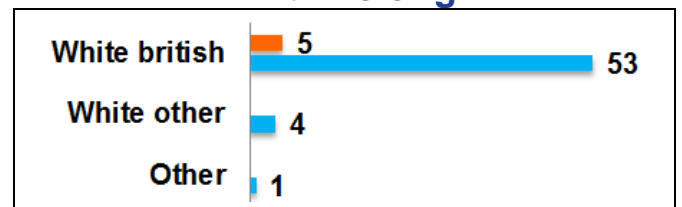
## 11. Gender of child or young person



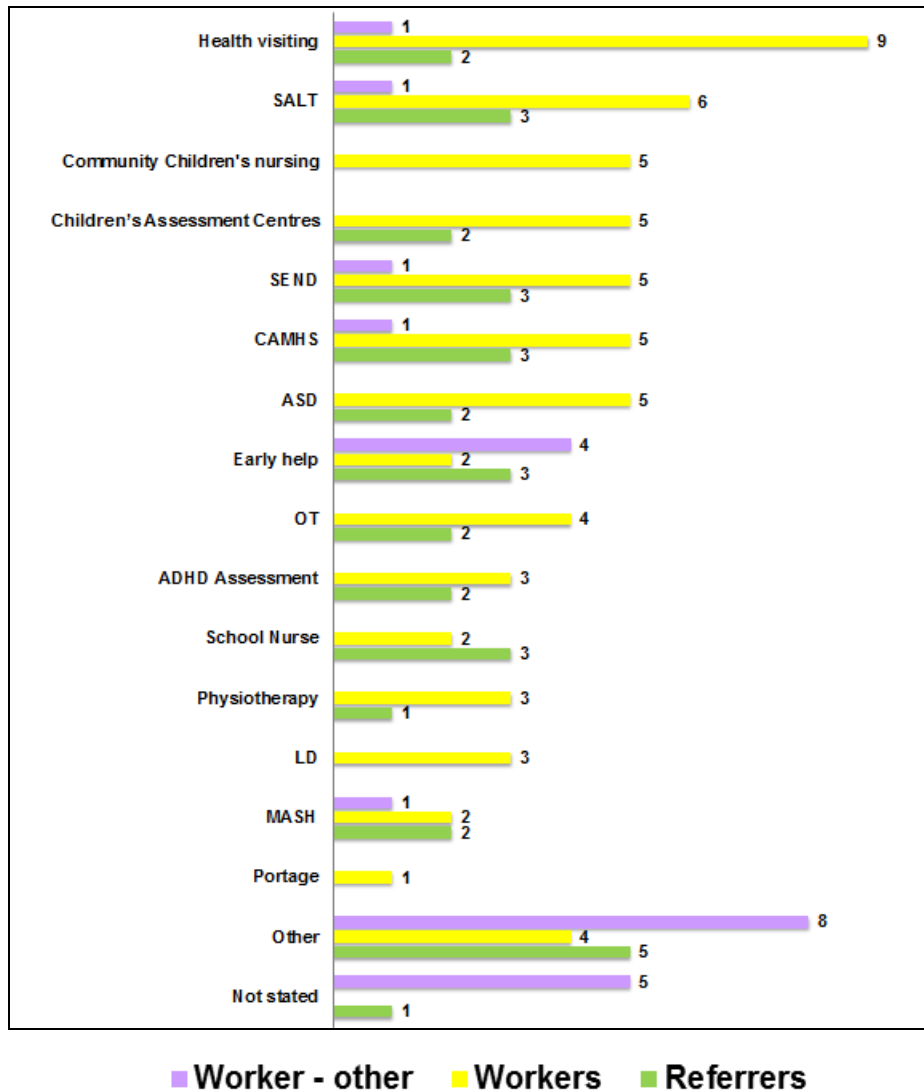
## 10. Does the child or young person have a disability?



## 11. Ethnic origin



## 12. Services areas covered by workers and referrers that completed the survey



## 13. How many referrals into services for children and young people are made on average by referrers who completed the survey?

