



HealthWatch: involving children and young people

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Overview

- About NCB's work on public and patient voice
- What children and young people (CYPs) say about getting involved
- LINKs and CYPs: the current picture
- A vision for HealthWatch from CYPs
- Barriers to involving CYPs



NCB's work on CYP voice in health

- Giving CYPs a voice in health policy development
- Research into the involvement of CYPs in LINKs
- Training to 64 LINKs and 174 PALS
- Involving disabled CYPs in planning and managing their own healthcare (Council for Disabled Children)
- Coordinating children's sector lobbying on the Health and Social Care Bill



What CYPs say about getting involved?

- CYPs feel they should have a say about health services and decisions about their own health
- Disabled CYPs want support to enable them to manage their own care
- CYPs want to be involved in the development of HealthWatch
- They are not always aware of mechanisms for getting involved – such as LINKs and PALS



LINKs and CYPs: the current picture

- Activity tends to be focused on older people, reflecting LINK membership
- Where CYPs are involved:
 - More likely to be *young people* rather than children
 - Mainly targeted consultations and activities (like peer research)
 - Few LINKs created targeted information
 - Few actively involved CYPs in LINK decision-making – but more were attempting to do so
- LINKs officers finding it hard to make the case
- PALS were also struggling to involve CYPs



A vision for HealthWatch from CYPs

- **Communication: using young-person friendly advertising, and staying in touch through social media and schools**
- **Providing a respectful, inclusive environment**
- **Ensuring meetings are accessible: time, format, location, clarity about purpose of meetings**
- **Providing creative and social activities**
- **Ensure children's issues are on the agenda**
- **Offering access to decision-makers**
- **Giving feedback on impact**



Barriers to involving CYPs

1. Limited resources and staff and volunteer capacity and experience
2. Environment not always welcoming or enabling for CYPs
3. Some uncertainty over LINKs' remit – including around child social care
4. LINKs focusing mainly on older people's health issues – self-perpetuating
5. CYPs' approaches to health differ from the 'traditional' LINKs issues
6. Practical barriers – timing, travel etc.
7. Maintaining group stability for CYPs
8. Dependency on certain gatekeepers is a barrier to working with diverse groups
9. Risk of challenges being exacerbated by health reforms and cuts



Group discussion 1: the barriers

- What do you think about the barriers to involving CYPs in LINKs/HealthWatch identified in the previous slide?
- Do they concur with your experience and understanding?
- What would you add/remove/alter?
- Which are the top 3 barriers that will prevent CYP engagement in local HealthWatch?



Group discussion 2: the solutions

- What measures can/should be taken at the national level to address this issue?
- What support do LINKs/LAs need in the transition to HealthWatch to address this barrier or prevent it from arising?
- How can the HealthWatch pilots be used to address this issue?
- What role should HealthWatch England play?
- What contribution can/should the voluntary and community sector make?



NCB resources

- Involving children and young people: resources for LINKs and local Healthwatch
<http://www.ncb.org.uk/vss/links-and-healthwatch>
- Resources from Participation Works, which aims to enable organisations to effectively involve children and young people in the development, delivery and evaluation of services that affect their lives
<http://www.participationworks.org.uk/resources>

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