



Bee Counted

Thematic summary of 2022/ 2023 good practice and recommendations

May 2023

Introduction

Bee Counted is a group of 12 young people from across Greater Manchester (GM) who have taken part in training to inspect health services across the city region.

Doctors, dentists, opticians and other health services must ensure that they are (young person) friendly and meet the guidelines set out in the Greater Manchester Youth Agreement.

The Greater Manchester Youth Agreement was created in 2018 by both professionals and young people. The aim is for young people to feel that health services across GM support their needs.

The young people from Bee Counted used the Greater Manchester Youth Agreement to create a number of questions to ask services during the inspection process.

The questions are split into the following sections:

- Access and Location
- Quality of Care
- Communication
- Staff Training
- Advertising/Marketing
- Specific Support for Young People
- Patient Comfort
- Youth Participation

Each service was sent a self-evaluation questionnaire to complete prior to the inspection. The general RAG rating system was used to self-evaluate the service and was used by young people to rate the service on the same areas.

Scale used:

Rating/Meaning:

1 - Severely Inadequate

2 - Under performing

3 - Satisfactory

4 - Great

5 – Outstanding

N/A The service does not require this/there is no demand for this.

The Greater Manchester Health Charter

The graphic features a dark blue background with a large white speech bubble containing text. On the left, there is a stylized blue silhouette of a person's head and shoulders. In the top left corner, a white box contains the text 'Greater Manchester Health and Social Care Partnership'. The main text is in yellow and white, with a red and white accessibility icon (a person in a wheelchair) on the right. At the bottom, there are icons for a hospital, a clipboard labeled 'PLAN', and a person in a wheelchair. The text 'WHAT YOU CAN EXPECT FROM HEALTH & SOCIAL CARE' is written in red at the bottom.

Greater Manchester Health and Social Care Partnership

GREATER MANCHESTER YOUTH AGREEMENT

WHAT YOU CAN EXPECT FROM HEALTH & SOCIAL CARE

"I knew what services are available to me and how to access them when I need."

"I don't face discrimination based on my illness, physical or mental."

"I can get access, care and support for my health at the right time and right place for me."

"I can have a say in how the services I use are run and can make decisions in my treatment"

"The places and spaces I get support are safe, welcoming. And accessible to me."

All the staff I meet have got the right skills and knowledge to work with me.

"If I have complex situations going on in my life I won't be forgotten or missed."

"The services in my area join up and talk to each other so I don't have to repeat things."

"I know what is happening and whom I am working with and I know what support is available."

"I am respected and everything I need and say has value including my information being confidential."

"I can play an important role in looking after my health and staying well."

All services need to consider how young people with additional needs and their families are supported when upholding the charter

The Greater Manchester Youth Agreement was created in 2018 at the 'Children's Challenge Day'. Through a partnership of health professionals, young people and staff from Youth Focus North West' the task to develop a 'Children's Charter' evolved into the youth agreement. It has a vision to include the priorities and needs of our diverse communities of young people.

The charter forms a framework for the inspections. The inspections look at things such as accessibility, training and access to care.

Bee Counted Questionnaire Questions

ACCESS AND LOCATION

Was it easy to access via public transport or walking?

Was it quick and safe?

Are home visits available for those physically unable to get there?

Is the location accessible for all people - are there any facilities they should implement e.g., for those in wheelchairs?

Are appointment times available outside of school areas?

COMMUNICATION

Is phone/text/email information easily accessible, do they respond helpfully?

Do you know how long you have to wait before they respond to you or send important information?

Is there a way for people without phones or computers to interact with them?

What is this?

Do they share private personal details over text/emails that might be opened during school day?

Do the patients understand exactly what is happening?

Is online access available e.g., online consultations? - Is this information easily accessible as to how to set it up? How long does it take to get e.g., a consultation?

How secure is the data/appointments if online?

Do they have additional support or adaptations in place for SEND patients?

QUALITY OF CARE

Are the staff responsive, attentive and helpful to any questions or support needed?

Do you know how young people feel about how they were treated during their consultation/visit?

Do young people trust your services/is there anything that would make young people not want to attend?

Do staff treat young people in a way in which they are comfortable with regarding what they expect of you? i.e., not treating you like a child but also not expecting the same from you that they would an adult?

STAFF TRAINING

Do staff receive specific training in the following areas?

Mental Health SEND/Disabilities LGBTQ+

Race/Religion

Do staff receive specific training around working with young people?

Do staff who interact with young people but aren't healthcare professionals receive appropriate training?

Do the staff feel like the training is useful?

Do the staff have any ideas on how training could be improved, is there anything they feel like they haven't been taught? Can these ideas be suggested and be seriously considered?

SPECIFIC SUPPORT FOR YOUNG PEOPLE

At what age can young people begin to access the service?

At what age are they able to access this service without parent/guardians knowing?

Do young people have to have their parent/guardian in the room?

Is there support for babies/children? e.g., changing areas, toys in the waiting room etc.

Does the support available for young people vary depending on age, for example do 9-year-olds receive the same support as 16-year-olds? Is there any exclusive support for age ranges?

Is there an easily accessible safe space young people can use?

YOUTH PARTICIPATION

Is there a youth participation group?

What format is feedback given back in?

Do people know how to give feedback?

Is it easy for people to give feedback?

How do they work with young people?

Does this include decision making?

Have they acted on feedback recently?

Is feedback honestly shared to patients?

How involved are young people in the training process of staff if at all?

PATIENT COMFORT

Are the rooms well-maintained? Are there suitable waiting rooms?

Are there breakout rooms/safe space? Is there an area for children to play?

Do timings of appointment consider religious needs such as prayers times?

Is there a choice of where patients can wait e.g., outside?

Service involved during 2022/ 2023 inspections

Ten inspections were completed by the Young Inspectors during 2022/23, three in-person and seven online.

- Royal Manchester Children's Hospital
- Integrated Community Paediatric Service (ICPS)
- Children's Ward and Assessment Unit E5 and F5 at Royal Bolton Hospital
- Bolton Immunisation Team
- WIWO (Walk in Walk Out) paediatric surgical service, Royal Oldham Hospital
- Emergency Community CAMHS Team
- Bury Paediatric Physiotherapy
- Health improvement Team in Salford
- Bury Paediatric Speech and Language Therapy
- Treehouse Children's Unit, Stepping Hill Hospital

Examples of good practice

- Clinic appointments allowing extra time for nervous children and young people.
- Use of QR codes for links to information on websites and social media.
- Developmentally appropriate service provision, not confined by age boundaries.
- Use of newsletters, posters and videos, circulated to schools, to promote services.
- Offer for CYP to be seen in clinics without parents if appropriate, or for some time without the parent/ carer in the room at an appointment.
- Training includes a range of topics that are relevant to working with CYP including awareness courses in Mental Health, LGBTQ+, autism and neurodiversity, and specific training for working with Children and Young People.
- Quiet waiting areas for patients who require this.
- Clinics held out of school hours, in the evenings, on weekends.
- Patient choice for the clinic at which they want to be seen, including virtual options if appropriate.
- Young people involved in interviews when appointing new members of staff.
- A range of feedback opportunities for young people including boards, questionnaires, 'You said, we did'.
- Information about the service available in different formats and languages.
- Children and Young People, Parents and Carers encouraged to bring along toys, comforters etc. particularly where the clinic space is not dedicated to CYP activities.

Recommendations

Each service's report contained recommendations made by the Young Inspectors. Some common themes and sub-themes were identified, and these have been captured below.

Supporting young people-friendly sites and working practices

- Where rooms and spaces that accommodate young people are multi-use, and not specifically for young people, consider the use of mascots and toys that young people can relate to, and that can be packed away when not in use.
- Consider particular provision for Children and Young People with SEND such as sensory rooms and adaptations around communication.
- Consider mandating training that supports working with young people and develops and refreshes the skills required to be empathic towards the needs of young people.
- Specific training modules relating to the needs of a diverse range of young people should be offered to all staff, including administrative and reception. Suggestions are:
 - Diversity- LGBTQ (Suggested Mermaids or the Proud Trust)
 - Mental Wellbeing (Suggested Young Minds)
 - Training specific to the needs of children with Speech, Language and Communication needs.
- Involve young people and ask for their suggestions around training that is useful to deliver to staff.

Improving participation and co-production

- Services should develop a youth participation offer that includes:
 - Establishment of youth participation groups
 - Co-production of service offers and promotional materials for services.
 - Use simple discharge/ feedback surveys following treatment/ access to services e.g., tick-box forms.
 - Reach out into community to broaden participation.
- Consider working with Health Watch/ Youth Watch to help shape services.

Addressing Digital Exclusion

- Ensure alternative means of communication and access e.g., letters for those who are unable to access the internet/ technology.

Provision of information and communicating with young people and families

- Ensure websites are developed for services to enable provision of easy-to-access information about services.
- Enable on-line self-referral.
- Use large media platforms to promote services e.g., Instagram, Twitter, Facebook
- Use social media as a platform to help young people know what a service looks like before they attend.
- Digitise posters and information and ensure the use of QR codes that link back to one site with information about the service, including contact details.
- Implement social media accounts that showcase and promote the work of youth participation groups.

Ensuring accessibility to buildings

- Buildings where clinics are held should be easily accessible by wheelchair with ramps, push-button doors and wider corridors.

- There should be an adequate number of accessible toilets, particularly where clinics are very likely to see children and young people with SEND.