

# Principles for commissioning and delivering better health outcomes and experiences for children and young people so that they are comparable with the best in the world.

Strategic Network for Child Health and Wellbeing in the East of England



## PRINCIPLE 1

### Child and family focussed

We will ensure the voices of children and young people are heard throughout the health care system and their needs drive planning and delivery in collaboration with clinical expertise.



## PRINCIPLE 2

### Health Promotion

We will prioritise investment and resources to improve the health and wellbeing of our children and young people.



## PRINCIPLE 3

### Transformation

We will invite children, young people and families to be active participants in the review and future design of services.



## PRINCIPLE 4

### Settings

We will offer children, young people and their families services in settings where they feel welcome, comfortable and accepted and cause as little disruption to family life as possible.



## PRINCIPLE 5

### Information and communication

We will share the best information and intelligence between professionals and with children, young people and their families to allow the best possible healthcare.



## PRINCIPLE 6

### Evidence based and sustainable

We will commission and deliver services to consistent standards, informed by best practice and available evidence. All children and young people will have equitable access to services to meet their needs.

#### INDICATORS/EVIDENCE THAT WOULD REFLECT ACHIEVEMENT OF THE PRINCIPLE

1. Commissioning of services and decision making is informed by children, young people and families and commissioning plans are shared and understood.
2. Patient held records e.g. 'All About Me' are routinely used to ensure professionals are made aware of needs and are a written record of health issues.
3. Within patient held records there is evidence that children, young people and families are involved in decisions about their care and make informed choices.
4. Services are tailored where possible to an individual or group to ensure joined up packages of care.
5. Services include a measure of patient experience and there is evidence of change in response to patient feedback
7. Staff are trained and can demonstrate competencies in building a therapeutic relationship and communicating sensitive information honestly and with empathy.
8. Young people are encouraged to see a health professional on their own as well as with their parent or carer.
9. Smooth transfer occurs from children's to adults services.
10. The needs of particularly vulnerable or at risk groups are fully considered.

1. Children, young people and families have an understanding of what they need to do to have good health.
2. Promoting good health is coordinated across education, health and social care to ensure a consistent message.
3. Adequate resources are allocated to prevention compared to cure.
4. There is adequate investment in early intervention and prevention, particularly for 0-5 year olds and their families.
5. The Healthy Child Programme 0-19 is fully implemented locally.
6. Health professionals use every opportunity to help children, young people and their families improve their health and wellbeing outcomes, e.g. Making Every Contact Count.
7. The needs of vulnerable and disadvantaged individuals and groups are considered, to reduce health inequalities.

1. Evidence of a critical review of current services, considering reconfiguration, integration and networked care.
2. Commissioners ensure providers have critically appraised and adapted service delivery models to transform care across the health care system.
3. Consideration is given to sustainability, workforce capacity & competency, including using the voluntary and community sector.
4. Services support delivery of the Children and Young People's Outcomes Strategy Report recommendations.
5. Children, young people and families have the opportunity to shape service change and improvement, e.g. through Healthwatch organisations.
6. Clinical leadership for child health is evident in transformation programmes.
7. The physiological and psychological needs of the child and young person are foremost when designing healthcare settings.

1. All staff are welcoming, approachable and helpful.
2. Appointment systems offer choice of dates and times where possible and sufficient time is allowed for communication with both the child or young person and their parent or carer.
3. GP practices are able to offer timely appointments to avoid unnecessary hospital attendance or admission and limit family disruption.
4. Services are provided in the community wherever possible and are only hospital based when absolutely necessary. For example, ensure access to community children's nursing services.
5. Facilities are fully accessible to all and in particular those with disabilities or mobility difficulties.
6. Where specialist services are required these are delivered with local services where appropriate.
7. Leisure areas are provided in waiting rooms suitable for children and young people with a range of ages and interests.

1. Children, young people and families and the professionals working with them know where to go for services and how to arrange a referral.
2. Children, young people and families feel listened to and have meaningful information provided to them in a way that empowers them to make informed choices.
3. Health information provided to children, young people and families is in a format that is easy for them to understand.
4. Patient information is shared appropriately with others involved, including between health care providers, social care and education providers.
5. Information systems and technologies are in place to facilitate the easy and secure sharing of information and communication.
6. Education settings are informed and involved when a child or young person has a health need.
7. Quality information is collected and used to inform planning of services.
8. Where appropriate, staff are trained on data collection and analysis.

1. Children, young people and families will have an understanding of the excellent standards they should expect.
2. Services are commissioned and delivered according to national or locally agreed best practice guidelines and standards.
3. Commissioners and providers can demonstrate that they are monitoring and addressing the quality of services for children and young people.
4. Planning and development of services takes sustainability into account, e.g. numbers of staff required to treat the number of patients.
5. All services have standards of care that are endorsed by providers and commissioners.
6. Joined up packages of care are delivered through multi professional assessment and a multi disciplinary team approach.
7. Healthcare is equally accessible and delivered to the same standard on a 24 hour seven day a week basis.
8. Care is delivered safely and particular emphasis is given to eliminating medication errors.
9. All those working with children and young people have the capacity, skills and knowledge to meet their specific needs - wherever they are in the health system.

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