

HEALTH & WELLBEING OVERVIEW & SCRUTINY COMMITTEE

Agenda Item 75

Brighton & Hove City Council

Subject:	Update on the Talk Health report		
Date of Meeting:	11 June 2013		
Report of:	Monitoring Officer		
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Ward(s) affected:	All		

FOR GENERAL RELEASE

1. SUMMARY AND POLICY CONTEXT:

- 1.1 In September 2012, HWOSC agreed to champion the Talk Health report produced by the Parent Carers' Council and Amaze, a report on the city's health services for children with complex needs.
- 1.2 HWOSC asked the Parent Carers' Council to return with an update so that they could see progress towards the recommendations.

2. RECOMMENDATIONS:

- 2.1 That HWOSC members note progress against the recommendations made in the 'Talk Health' report, and
- 2.2 That members determine whether to champion the report further.

3. RELEVANT BACKGROUND INFORMATION/CHRONOLOGY OF KEY EVENTS:

- 3.1 In September 2012, HWOSC members heard from the Parent Carers' Council and Amaze about their 'Talk Health' report, which gave parent carers' views on health services in Brighton and Hove for children with disabilities, complex needs or long-term conditions.

- 3.2 The report recognised that good work was being carried out in many areas but made a number of recommendations across a variety of work areas; the three headline recommendations were to improve parent participation, to increase resources for services and to improve communication and transparency.
- 3.3 HWOSC members agreed to champion the report and its recommendations, and to table it at all commissioning bodies. HWOSC asked the Parent Carers' Council to return to HWOSC with an update on how recommendations were progressing.
- 3.4 The Parent Carers' Council met senior officers from BSUH, Seaside View, the Clinical Commissioners and the Royal Alexandra Children's Hospital (RACH) to discuss the recommendations. In March 2013, Amaze held a follow up event, inviting RACH, Seaside View, CAMHS (Child & Adolescent Mental Health Services) and the GPs to come back and tell parent carers about changes that had been made. A summary of the developments are included at **Appendix 1**, with a more detailed feedback summary at **Appendix 2**.
- 3.5 The Parent Carers' Council have expressed their gratitude and thanks for HWOSC's championing of the report but feel that there is still work to be done and would like HWOSC's continued support in this regard.
- 3.6 They have detailed the areas and ongoing concerns that still require work (the section in italics below is a direct quote from the Parent Carer's Council) :

Royal Alexandra Children's Hospital

- *The car parking issue is certainly being addressed for families who have a blue badge but many of the families that we deal with do not have a disabled badge in their car. This means that they still have to wait in the long queue and are not able to get priority access to the car park. Their children have similar difficulties in waiting as do children who have the blue badge. We would like to see how all families with a disabled child can be given priority to the car park.*
- *There needs to be more involvement of young people with more complex needs and challenging behaviour in the service development at the RACH.*
- *Children with additional needs do need to be prioritised when attending the hospital. Is there any way that their additional needs could be identified on the computer system so that when the appointments are allocated this can be considered?*
- *Children who spend long periods of time in hospital need support from other agencies such as PRESENS. Will the hospital be able to provide this support for children during their stay?*

Seaside View

- *Children with lower levels of need do not have the relationship with SSV that children with more complex needs have. How can they be supported when their level of need is not always being met?*

Children and Adolescent Mental Health Service

- *Throughout all the engagement work done since the report it has been more difficult to work in partnership with the CAMHS service than the other three*

services. There has been a change of personnel in the delivery of the service and this has not helped the engagement with CAMHS.

- Families who have lower levels of need but still real problems do not get the support from CAMHS they need and have to wait until a crisis happens. The service is not active in its prevention work and still appears to be 'fire fighting'.
- The feedback from the CYPOSC survey has not been made known to parents.
- There still seems to be a disjointed service between the mainstream CAMHS service and the LD CAMHS service. Many families access both and would like to see a more joined up approach.

GPs

- There still needs to be more commitment from GPs to undergo training in the parent journey to understand the challenges that families with a child or young person with additional needs face.
- A greater commitment to prioritise the families of children with any additional need is needed from all GPs.

It would be nice for HWOSC to hold to account all the services to ensure that these unanswered questions are addressed. On a more strategic level we would like HWOSC to champion the inclusion of parents on the Health and Wellbeing Board, the Children's Committee and the new Healthwatch board so that parent carers are not just consulted with but are partners in the future design of services.'

4. COMMUNITY ENGAGEMENT AND CONSULTATION

- 4.1 None for this cover report, although the 'Talk Health' report is based on community engagement and consultation, and consultation has been ongoing to progress the recommendations. Details of their consultation process can be found in the Talk Health report.

5. FINANCIAL & OTHER IMPLICATIONS:

Financial Implications:

- 5.1 None to this cover report.

Legal Implications:

- 5.2 None to this cover report

Equalities Implications:

- 5.3 None to this cover report, but the Talk Health report is aimed at addressing health inequalities for children and young people with complex health needs.

Sustainability Implications:

- 5.4 None to this report.

Crime & Disorder Implications:

5.5 None to this report.

Risk and Opportunity Management Implications:

5.6 None to this report.

Public Health Implications:

5.7 The Talk Health report aims to address issues within the local health economy for parent carers of young people with complex health needs.

Corporate / Citywide Implications:

5.8 None to this report for information.

SUPPORTING DOCUMENTATION

Appendices:

1. Talk Health follow up
2. Talk Health recommendations update, March 2013.