

**IMPROVING COMMUNITY HEALTH SERVICES  
FOR CHILDREN AND YOUNG PEOPLE IN DORSET**

**VIEW SEEKING FEEDBACK  
"BE HEARD / WE HEARD"**

**WE  
HEARD**

**AUGUST 2018**

# WHAT IS IN THIS REPORT?

- INTRODUCTION
- OUR "BE HEARD" APPROACH
- WHO TOOK PART
- "WE HEARD" – YOUR VIEWS
- NEXT STEPS

A graphic consisting of a light blue square with a yellow border, tilted slightly to the right. Inside the square, the words "WE" and "HEARD" are written in large, bold, yellow, sans-serif capital letters, stacked vertically.

# INTRODUCTION

- The NHS in Dorset is reviewing physical community health services for children and young people
- The views of local people including staff, young people who use services and families/carers are key
- This report provides a summary of the views we heard during the 12 weeks of our "Be Heard" view seeking

The 'Be Heard' logo, featuring the words 'BE' and 'HEARD' in large, bold, yellow, sans-serif capital letters. The text is set against a light blue rectangular background with a yellow border, which is tilted slightly to the right.

# OUR APPROACH

- We designed “the look” with young people
- We co-designed the view seeking survey
- We promoted the survey widely through groups, organisations, social media etc.
- Feedback was collated and analysed by the 'Market Research Group' at Bournemouth University

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Improving community health services  
for children and young people in Dorset.

**BE HEARD**

HAVE YOUR SAY BY 18 MAY 2018  
[WWW.DORSETSVISION.NHS.UK/BEHEARD](http://WWW.DORSETSVISION.NHS.UK/BEHEARD)



# THE LOOK!



Improving community health services for children and young people in Dorset.



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WE WANT YOUR VIEWS OF PHYSICAL HEALTH SERVICES IN DORSET.  
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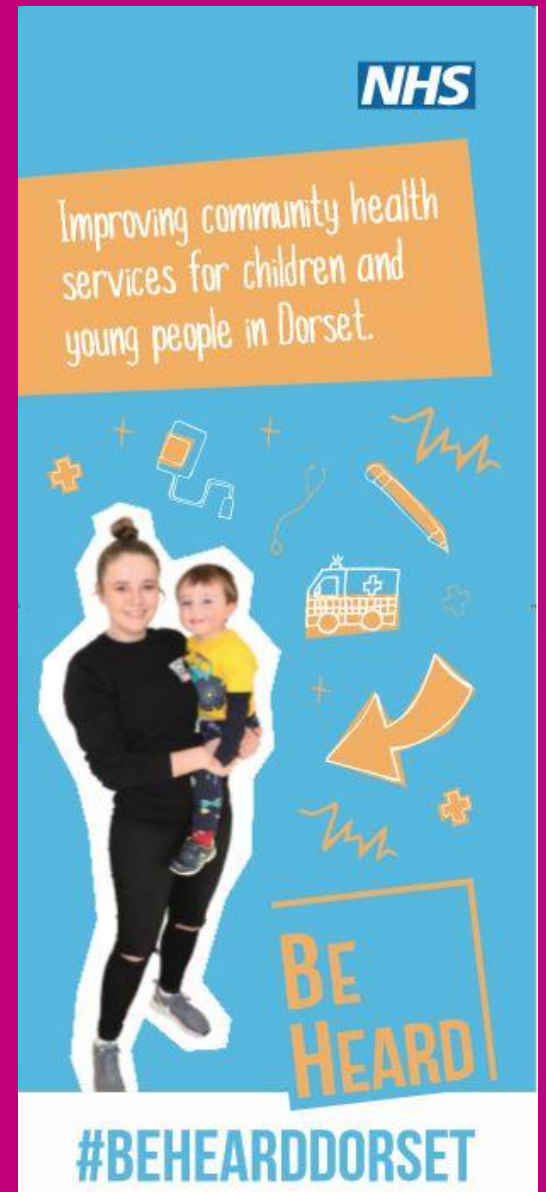


**BE HEARD**

**#BEHEARDDORSET**

# WHO TOOK PART

- 541 surveys were completed by young people aged 16-25 and parents/carers of children and young people aged 0-25
- 42% were aged 16-25 years old and 58% were a parent/carer of child or young person
- There was good representation of varied characteristics across a broad range of demographic groups
- 16 easy read surveys completed
- 35 surveys completed by staff/groups/organisations



# WE HEARD VIEWS ON

- Information and advice on physical healthcare
- Physical Healthcare:
  - at home
  - at school, college or university
  - at a GP/family doctors' surgery
  - in a community hospital
  - elsewhere

A graphic with the words 'WE HEARD' in large, bold, yellow capital letters on a blue background. The graphic is tilted and has a yellow border.

# INFORMATION AND ADVICE

“I find that I get the most helpful information from friends, family and the doctor”  
(Young Person, 15-19, physical disability)

“Improved continuity of information between sources. Reduction in conflicting information.”  
(Parent/ carer, 15-19, other disability)

“More focused advice for young people, a lot of advice is focused around the older generation and makes young people feel out of place in the NHS.”  
(Young person, 15-19, no disability)



# INFORMATION AND ADVICE



- People liked being able to access information from a variety of sources, including NHS staff, online and in schools and colleges and via NHS 111 and some thought the accessibility and quality of information was good
- Many felt how information and advice is given could be better e.g. making it clearer and more targeted to young people and with professionals improving their approach to giving information and advice
- Need more information on certain health aspects such as healthy eating, exercise and weight

# PHYSICAL HEALTHCARE AT HOME

“GP is brilliant, always offers advice as and when needed.”  
(Parent/ carer, 5-9, learning and other disability)

“To help with comfortable supportive seating e.g. p- pods. Equipment needed is endless, and living in carer’s allowance I can’t afford the ridiculous prices of special needs seats, shaker vests, sats monitors etc. so we have to manage without.”  
(Parent/ carer, 5-9, physical, learning and visual disability)

“ I can talk to them (staff) about most problems. I can trust them and they listen to me”  
(Young person, 20-25, physical, learning and visual disability)

# PHYSICAL HEALTHCARE AT HOME

- Some people spoke positively about the behaviour of staff and the accessibility of services in their own homes
- Most comments related to their GP, health visitor and nurses
- However both staff behaviour and accessibility of services also came up as areas that could be improved

# PHYSICAL HEALTHCARE AT SCHOOL, COLLEGE AND UNIVERSITY



“Our most recent Paediatrician has given us a lot of advice and helped with diagnosis. Spent time talking with [Name] to see how he feels.”  
(Parent/ carer, 5-9, learning and other disability)

“I wasn't really aware of the services available at my school”  
(young person, 20-25, no disability)

“Does not have access to medical records within the school, only information from enrolment paperwork which may not be up to date.”  
(Parent/ carer, 10-14, no disability)

# PHYSICAL HEALTHCARE AT SCHOOL, COLLEGE AND UNIVERSITY



- Many people were positive about staff and service availability. Accessibility was reported positively, as was the way schools communicate with children and young people
- Some people thought that having more staff and school nurses would help them to provide a better service
- Some people felt that relationships and communication with students and parents and also between healthcare professionals could be improved
- Some people felt services could be made more accessible



# PHYSICAL HEALTHCARE AT A GP/FAMILY DOCTORS' SURGERY

"I have noticed that our GPs and Nurse Practitioner both talk to my son about his healthcare - while including me as appropriate. I think this is really positive in helping to encourage him to take ownership of his own physical health."  
(Parent/ carer, 15-19, no disability)

"Poor communication between GP and Doctors resulted in our son having to have the same jab twice... There needs to be a central NHS computer system ASAP!"  
(Parent/ carer, 5-9, no disability)

"they speak to you in a way which allows you to feel able to ask questions without fear of judgement, as well as in a way in which you can easily understand what they are saying"  
(Young person, 15-19)

# PHYSICAL HEALTHCARE AT A GP/FAMILY DOCTORS' SURGERY

- People thought the relationships and information at GP/Family Doctors' surgeries was good
- Many felt the attitude of staff towards children and young people was positive and that the quality of care and good accessibility of services was good
- Respondents would like better accessibility to services, for example shorter waiting times and greater appointment availability
- People felt that relationships and communication and the attitude of some staff could be better

# PHYSICAL HEALTHCARE IN A COMMUNITY HOSPITAL

“Convenience of visiting ENT consultant  
close to home.”  
(Parent/ carer, 20-25, no disability)

“More services could be run out of that  
hospital. Increasing parking spaces.”  
(Parent/ carer, 15-19, no disability)

“As community hospitals aren’t widely used by some  
communities, you are able to pop in to get advice/be seen  
without immediately attending A&E. They offer a similar level of  
service much closer to home which reduce stress on both  
yourself and services.”  
(Young Person, 20-25, no disability)

# PHYSICAL HEALTHCARE IN A COMMUNITY HOSPITAL

- People commented that they liked the quality of care they received at community hospitals, that services and facilities were good and also easily accessible
- However, quality of care and accessibility and availability of services was also seen as an area for improvement by some people

# PHYSICAL HEALTHCARE ELSEWHERE

“Lots of helpful information”  
(Young person, other disability)

“There is poor communication between GP surgery and paediatrics at the hospital. Difference of opinions confusing. Blood tests being taken at surgery not going to hospital doctors. Lack of continuity at hospital due to two doctors leaving.”

(Parent/ carer, 10-14, no disability)

“Would be better if services could be available nearer to us, even if it was a visiting consultant who was available say once a month. Travel time to some centres means too many absences from school.”

(Parent/ carer, 10-14, physical and learning disability)

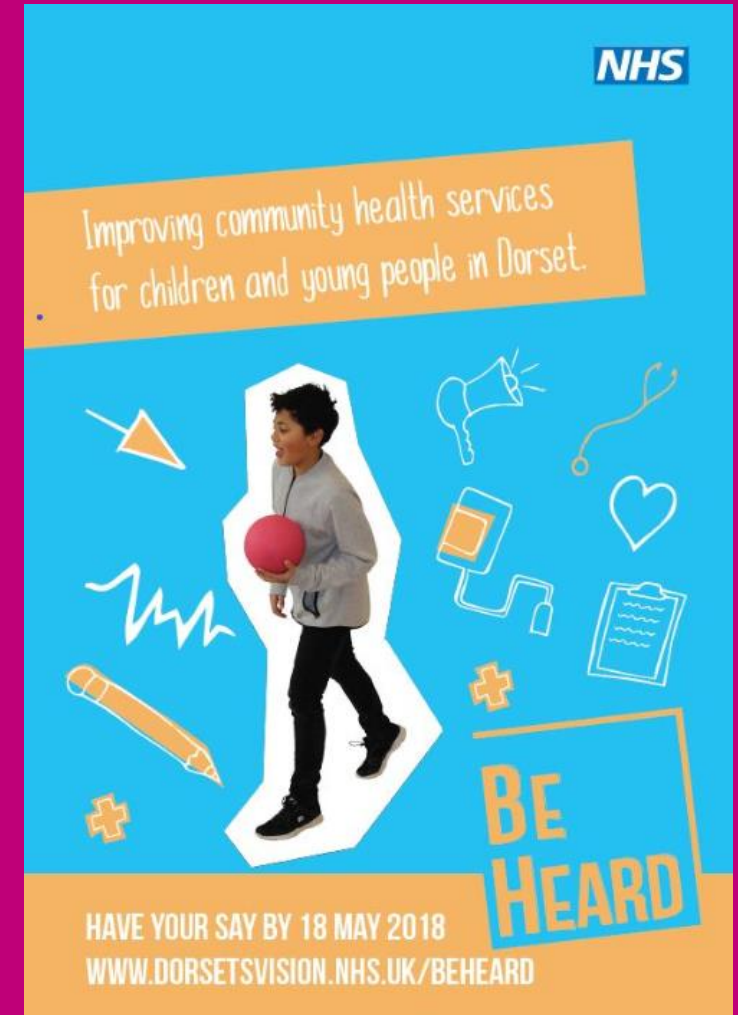


# PHYSICAL HEALTHCARE ELSEWHERE

- Positive comments were received about staff, personalised services, treatment received and accessibility of services
- However, accessibility to services was also identified as an area for improvement by some people
- Other areas for improvement included the infrastructure and resources, for example improving waiting rooms and parking

# NEXT STEPS

- We will share the "Be Heard - We Heard" Reports in August and September 2018
- We will work with young people, the parents/carers of children and young people and health and care staff to consider what "We Heard" and co-design future services
- Co-design events will be held between October 2018 and April 2019



The poster features a central illustration of a young boy in a grey hoodie and black pants, holding a red ball. He is surrounded by various icons: a megaphone, a stethoscope, a heart, a clipboard, a pencil, a plus sign, a smartphone, and a pulse line. The text is arranged in a clean, modern layout with a color palette of blue, orange, and white.

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# STAY INFORMED



[www.dorsetsvision.nhs.uk/beheard/](http://www.dorsetsvision.nhs.uk/beheard/)

The poster features a young girl with blonde hair, wearing a black dress and boots, holding a large red balloon. She is standing on a white, torn-paper-like cutout. To her right are several white line-art icons: a megaphone, a stethoscope, a clipboard with a checklist, a speech bubble, and a jagged pulse line. The background is a solid purple color.

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