Children’s health consultation
Medway community child health services

Medway Council and NHS Medway CCG are planning to re-commission some children’s health services over 2017/18 and we would like your views.

What are we consulting about?

Health visiting and school nursing are the main services which deliver the Healthy Child Programme to all children aged 0 to 19. More details about the different elements of the programme can be seen in this consultation pack. Some health services are only offered to children who need additional help (specialist services), such as speech and language or occupational therapy, or appointments with a paediatrician.

Many of our health services for children were developed by individual teams to meet the needs they themselves identified. Now teams are trying to see many more children, with more complex and sometimes different needs, and this way of developing services doesn’t work as well. It means there may be gaps and duplication in what’s delivered and to whom.

We want to join some of our main children’s health services together, so that they are

- More efficient
- Able to respond better to families individual needs
- More joined up and able to work together
- Able to focus on the difference they can make to children and families and not just on the targets

This offers the opportunity for health service providers to know what is expected of them, and to strive to deliver services in a way that we will know is making a positive difference for children.

We want to hear the views of as many Medway service users and their families as possible to help us get this process right.
Which services are included?

Some services which all children and families use, such as school nursing and health visiting, and some services which only children who need extra help might use, such as children’s therapies and learning disability nursing. This is a more detailed list:

<table>
<thead>
<tr>
<th>Service</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Children’s Outreach and Specialist Team (COaST)</strong></td>
<td>Hospital based team of specialist nurses providing a service to children with life limiting/life threatening/complex conditions in their own homes</td>
</tr>
<tr>
<td><strong>Community Nursing Team for children and young people with learning disabilities</strong></td>
<td>For children and young people who have been diagnosed with moderate/severe or profound and multiple learning disabilities</td>
</tr>
<tr>
<td><strong>Community Paediatrics</strong></td>
<td>Paediatricians providing a specialist child health assessment and diagnostic service; formulation of management plans, provision for patients with complex medical needs and multiple clinician involvement</td>
</tr>
<tr>
<td><strong>Continence services</strong></td>
<td>Includes specialist continence advisor, enuresis clinic and provision of continence products.</td>
</tr>
<tr>
<td><strong>Health Visiting</strong></td>
<td>Lead the delivery of the 0-5 Healthy Child Programme: includes breastfeeding, immunisations, behavioural management, mental health, healthy diet and lifestyle, child development and assessment, parenting.</td>
</tr>
<tr>
<td><strong>Looked After Children's Health Team</strong></td>
<td>Health assessments and follow ups for Looked After Children</td>
</tr>
<tr>
<td><strong>Nutrition and Dietetics</strong></td>
<td>For children who have complex needs in addition to their nutritional needs</td>
</tr>
<tr>
<td><strong>Children’s Occupational Therapy</strong></td>
<td>Part of Medway Community Healthcare (MCH) Children’s Therapy Team, working with children who have difficulties with the practical and social skills necessary for their everyday life</td>
</tr>
<tr>
<td><strong>Children’s Physiotherapy</strong></td>
<td>Part of MCH Children’s Therapy Team. Conditions seen by the team may include orthopaedic and rheumatological issues, acute injuries, neurological conditions</td>
</tr>
<tr>
<td><strong>National Child Measurement Programme</strong></td>
<td>The National Child Measurement Programme (NCMP) measures the height and weight of children in reception class (aged 4 to 5 years) and year 6 (aged 10 to 11 years) to assess overweight and obesity levels in children within primary schools.</td>
</tr>
<tr>
<td><strong>Oral Health Programme</strong></td>
<td>Promoting and raising awareness of better oral health for children and young people through training and development of the children’s workforce</td>
</tr>
<tr>
<td><strong>Podiatry</strong></td>
<td>The MCH children’s podiatry service accepts referrals for any child that has a condition affecting their lower limb.</td>
</tr>
<tr>
<td><strong>School Nursing</strong></td>
<td>Leads the school age component of the Healthy Child Programme: school nurses also conduct a series of developmental checks and health screens, and are a key health lead for child safeguarding.</td>
</tr>
<tr>
<td><strong>Special Needs Nursery</strong></td>
<td>Pre-school sessions and assessment for young children with moderate/severe learning disabilities and additional healthcare needs</td>
</tr>
<tr>
<td><strong>Speech and Language Therapy, children under five</strong></td>
<td>Assessment and support to young children with speech, language, communication or swallowing difficulties</td>
</tr>
<tr>
<td><strong>Speech and Language Therapy, school age children</strong></td>
<td>Assessment and support to school age children with speech, language, communication or swallowing difficulties</td>
</tr>
</tbody>
</table>
What services aren't included?  *(Please note there may be other services that are not included but are not on this list)*

<table>
<thead>
<tr>
<th>Service</th>
<th>Description</th>
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<tbody>
<tr>
<td>Acute (hospital) specialisms</td>
<td>Cardiology, ear, nose &amp; throat, endocrinology, gastroenterology, haematology, immunology, metabolic disorders, nephrology, neurology, respiratory, rheumatology, paediatric surgery, urology</td>
</tr>
<tr>
<td>Allergy clinic</td>
<td>Weekly hospital clinics for both adults and children.</td>
</tr>
<tr>
<td>Blood tests for children</td>
<td>Medway Community Healthcare deliver this service via a drop in or booked appointment</td>
</tr>
<tr>
<td>CAMHS</td>
<td>Child and Adolescent Mental Health Services</td>
</tr>
<tr>
<td>Children’s Emergency Department at Medway Hospital</td>
<td>Dedicated waiting and treatment area for children, open from 8am until midnight daily and staffed by children’s nurses with the support of A&amp;E doctors</td>
</tr>
<tr>
<td>Dolphin Ward, Medway Hospital</td>
<td>Medical, orthopaedic, surgical and ear, nose and throat (ENT) ward</td>
</tr>
<tr>
<td>Foetal Medicine</td>
<td>A consultant-led clinic for all suspected and confirmed foetal abnormalities</td>
</tr>
<tr>
<td>Maternity services</td>
<td>Antenatal and postnatal care for mother and child</td>
</tr>
<tr>
<td>Oliver Fisher Special Care Baby Unit</td>
<td>Care for babies born prematurely or who are sick and need intensive care</td>
</tr>
<tr>
<td>Penguin Assessment Unit</td>
<td>Hospital ward - medical and nursing assessment and care</td>
</tr>
<tr>
<td>Physiotherapy (acute)</td>
<td>Service to inpatients in Medway Maritime Hospital</td>
</tr>
</tbody>
</table>

**FAQs**

1. **Will I have continuity of care and the same professionals working with me and my family?**

   There is the potential for specific care of individual patients and service users to change, as with any proposal for service development. We are expecting that services will be improved in the future and that any new arrangements provide continuity of care in the long term. It is hoped that a future service will have a greater level of integration, keeping patients and service users at the centre of service delivery.

2. **Will I have to access services in different places?**

   One of the reasons for the proposed change is to help deliver the vision of NHS services closer to home, as outlined in the NHS Five Year Forward View of October 2014. This vision for NHS services is to enable more healthcare services to be delivered out of acute hospitals and closer to home, with the aim of providing better care for patients, cutting the number of unplanned bed days in hospitals and reducing net costs. A number of the services that are part of this discussion are already delivered in community settings such as healthy living centres, sure start children's centres, and schools, with some also being delivered in homes. Whilst we cannot say with certainty at this time that patients and service users will not have to access services in different locations, we are hopeful that new arrangements will improve service delivery and accessibility, rather than have a negative impact.
3. Is this a reduction in service?

One of the reasons for the change is to improve service efficiency by reducing duplicated effort, waste, and by improving service communication. This improved efficiency will enable the current level of service to be maintained or enhanced when new services commence.

4. What will happen to information about my child and family?

Should the organisations that are responsible for providing health services to your child and family change, relevant information relating to care will be shared with the new service provider. This will ensure that there are no unnecessary disruptions to the services that you receive.

Should it be necessary to share information with a new organisation, this will be undertaken in accordance with relevant Information Governance legislation, and using secure methods of data transfer.

5. What will the effect on waiting times be?

We expect waiting times to be reduced over time as efficiency is generated by the new service model.

6. Will this stop me having to repeat my story to different professionals?

Improved service integration is at the heart of the proposed change, and it is hoped that future service configuration will enable professionals working in children’s community health services to share information about patients and service users more easily, where it is beneficial for their care. The work relates to community health services only and not wider elements of service provision such as social care and early help services; you will be asked about your preferences for information sharing with wider service areas.

7. What will happen to existing appointments that I have?

From the point at which new contracts for services are appointed, there will be a period of preparation, known as ‘provider mobilisation’. This will enable the existing providers to undertake the appointments that they have planned with you, and will be the period of time in which new arrangements are made for your future care.

8. What is the Child Development Centre and how does this link to this work?

The Child Development Centre is a physical building that is currently being refurbished in Strood. It will provide a venue for some services, and a means by which elements of the integrated service approach that we are wishing to see can be facilitated. We are not consulting separately on the use of the Child Development Centre, but will be drawing out information from this consultation on children’s community health services to inform how best we utilise the new facility to deliver the outcomes that are identified through this process.
Key milestones and core functions currently delivered by the health services we are re-commissioning

**Pre-conception**
- Personal, social, health and economic guidance
- Health visitor or public health advice ahead of further pregnancies
- Conception

**Pregnancy**
- Pregnancy confirmed
- 28 week antenatal health visiting check and antenatal education sessions
- Support to vulnerable families
- Transition to parenthood support
- Breastfeeding advice and guidance
- Access to advice and information via Sure Start Children’s Centres throughout pregnancy
- Access to peer support sessions such as ‘Bump to baby’ groups

**New born to 8 weeks**
- Birth
- New birth health visitor check including breastfeeding support
- Care handed over from the midwife to the health visitor
- Health visitor 14 day visit
- Health visitor 6-8 week visit
- Maternal mood assessment
- Signposting to children’s centres

**KS1: Year 1&2 (infant)**
- National Child Measurement Programme (YrR)
- Proactively follow-up and refer all children identified through National Child Measurement Programme as outside healthy weight range
- School entry health screening assessment (YrR)
- Enuresis support
- Audiology screening
- Supporting schools with pupils who are persistently absent due to minor health conditions

**KS2: Year 3-6 (junior)**
- National Child Measurement Programme (Yr6)
- Proactively follow-up and refer all children identified through National Child Measurement Programme as outside healthy weight range
- Enuresis support
- Personal, social, health and economic (PSHE) education including Relationship and Sex Education (RSE)
- Supporting schools with pupils who are persistently absent due to minor health conditions
- Supporting schools with pupils who have experienced or been a victim of domestic abuse
- Supporting schools around health related transitional needs

**KS3: Year 7-9 (Secondary)**
- Personal, Social, Health and Economic (PSHE) education including Relationship and Sex Education (RSE)
- Supporting schools with pupils who are persistently absent due to minor health conditions
- Supporting schools with pupils who have been admitted to hospital due to self harm
9 weeks to 1 year
- Health visitor 3-4 month follow ups
- Infant feeding support, specifically relating to starting solid foods
- Healthy start vitamin promotion
- 10-12 month developmental check by health visitor
- Weight and measurement check

1-4 years
- Promotion of free education for two-year-olds
- 2 and 2.5 year health visiting check
- Supporting school readiness
- Language development
- Weight and measurement check
- Progress against developmental milestones
- Identification of issues and referral on to other services as required
- Handover from health visitor to school nurse

KS4: Year 10-11 (Secondary) and further education
- Personal, Social, Health and Economic (PSHE) education including Relationship and Sex Education (RSE)
- Supporting schools with pupils who are persistently absent due to minor health conditions
- Supporting schools with pupils who have experienced or been a victim of domestic abuse
- Supporting schools with pupils who have been admitted to hospital due to self harm

Specialist services (all ages)
- Health Services providing early identification, assessment and diagnosis, intervention and support to children and young people who have additional needs such as:
  - Learning disability and global developmental delay
  - Neurodevelopmental conditions such as autism
  - Life limiting and life threatening illnesses such as cancer and cystic fibrosis
  - Disabilities and conditions impacting on health, well being and areas of development such as speech and language and movement
  - Complex health issues

Cross-cutting themes
- Emotional health and wellbeing
- Smoking - prevention and brief intervention/signposting to support services
- Promoting healthy weight, eating and lifestyles
- Accident and injury prevention
- Safeguarding and Early Help
- Physical inactivity and school travel plans
- Health and hygiene
- Promoting uptake of immunisations
- Oral health promotion
Consultation on Medway Community Children's Health Services 2017

Medway Council and NHS Medway Clinical Commissioning Group (CCG) are planning to re-commission some children’s health services during 2017/18 and we would like your views.

1. Are you answering as...?
   - A child or young person up to 25 (Please go onto question 4 next)
   - A parent / carer (Please go onto question 1.b next)
   - A professional working with children and young people in Medway (Please go onto question 1.a next)

1.a Please tick your professional area of work (Please go onto question 3 next)
   - Working for a school or academy
   - Working for a mental health service
   - Working for a children's centre
   - A provider of children's health services
   - A provider of adult's health services
   - A GP
   - Other
   If 'other' please say.

1.b Please indicate the age group of your child/children: (This question to be completed by parents only)

<table>
<thead>
<tr>
<th>Age Group</th>
<th>Child 1</th>
<th>Child 2</th>
<th>Child 3</th>
<th>Child 4</th>
<th>Child 5</th>
<th>N/A</th>
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<tbody>
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<td>0-5 years</td>
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<td>6-10 years</td>
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<td>11-15 years</td>
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<td>16-19 years</td>
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<td>20-25 years</td>
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</table>
2. **Please say if anyone in your family has accessed the following children’s health services within the last 18 months** (This question to be completed by parents only. When finished answering this question please go onto question 4 next)

<table>
<thead>
<tr>
<th>Service</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>Children’s Outreach and Specialist Team (COaST)</td>
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<td>Children’s Audiology services</td>
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<tr>
<td>Community Paediatrics Outpatient services</td>
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<tr>
<td>Continence services</td>
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<tr>
<td>Health Visiting</td>
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<tr>
<td>Looked After Children’s Health Team</td>
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<td>Children’s Occupational Therapy</td>
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<td>Children’s Neurological Physiotherapy</td>
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<td>Children’s Musculoskeletal Physiotherapy</td>
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<tr>
<td>National Child Measurement Programme</td>
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<td>Oral Health Programme</td>
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<td>Podiatry</td>
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<td>School Nursing</td>
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<tr>
<td>Special School Nursing</td>
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<tr>
<td>Woodlands Special Needs Nursery, Rainham</td>
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<tr>
<td>Speech and Language Therapy for children under five</td>
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<tr>
<td>Speech and Language Therapy for school age children</td>
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</tbody>
</table>

3. **Please indicate whether or not you have worked with the following children’s services as a professional within the last 18 months**

<table>
<thead>
<tr>
<th>Service</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>Children’s Outreach and Specialist Team (COaST)</td>
<td></td>
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<td>Woodlands Special Needs Nursery, Rainham</td>
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<td>Speech and Language Therapy for children under five</td>
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<td></td>
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<tr>
<td>Speech and Language Therapy for school age children</td>
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</tbody>
</table>
There is more information about the plans for commissioning children's community health services at: www.medway.gov.uk/childrenshealth

4. Which model of services, from the pictures below, would be your preferred option? Please tick only one.
   None of these options
   
   Possible models for Universal Child Health Services

   Model 1 (Current)
   0-4 Public Health Nursing Team (Health Visiting)
   5-19 Public Health Nursing Team (School Nursing)

   Model 2
   0-7 (Birth to end of Infant School) Public Health Nurse Team
   8-19 (Junior School to College) Public Health Nursing Team

   Model 3
   0-10 (Birth to end of Junior School) Public Health Nursing Team
   11-19 (Transition from junior/primary to college) Public Health Nursing Team

5. Do you understand why we are proposing to change the way we deliver Medway Community Children's Health Services?
   - Yes
   - Partially
   - No
   Please give details of any other suggestions you may have.
   ____________________________________________________________________________________________________________________________________________________________________________________________________________________________________________________________________________
6. In relation to children's community health services, please rank the following in terms of importance (One being the most important, two being the next important etc. and nine being the least important)

<table>
<thead>
<tr>
<th>Importance</th>
<th>1</th>
<th>2</th>
<th>3</th>
<th>4</th>
<th>5</th>
<th>6</th>
<th>7</th>
<th>8</th>
<th>9</th>
</tr>
</thead>
<tbody>
<tr>
<td>Being listened to</td>
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<tr>
<td>Being seen in a timely manner</td>
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<tr>
<td>Not having to repeat my information to every new person I see</td>
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<td>Having confidence in the person seeing my child</td>
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<tr>
<td>Knowing the person I see is aware of my whole family situation</td>
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<td>Seeing someone who does not judge me or my family</td>
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<tr>
<td>Having polite /courteous conversations</td>
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<tr>
<td>Appointments being on time</td>
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<tr>
<td>Seeing a specialist</td>
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7. We are considering options for how services could be provided in the future. From the list below, which methods of service delivery would you prefer, and when would you prefer to use that method? (please tick all that apply)

<table>
<thead>
<tr>
<th>Service Delivery</th>
<th>Morning</th>
<th>Afternoon</th>
<th>Evening</th>
<th>During the week</th>
<th>During the weekend</th>
<th>Not interested</th>
</tr>
</thead>
<tbody>
<tr>
<td>Face-to-Face</td>
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<td>Social Media</td>
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<td>Telephone</td>
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<tr>
<td>Direct emails</td>
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<td>Web Chat/Chat</td>
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<td>rooms</td>
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<tr>
<td>Mobile Apps</td>
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<tr>
<td>On-line Video</td>
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<td>Calls</td>
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<tr>
<td>Drop-in Clinics</td>
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</tbody>
</table>

If there is another method of service delivery that we have not mentioned that you would be interested in, please say what that is and when you would prefer to use it.
8. Where would you prefer to access children health services? (please tick all that apply)

<table>
<thead>
<tr>
<th>Service</th>
<th>Yes</th>
<th>No</th>
<th>Don't know</th>
</tr>
</thead>
<tbody>
<tr>
<td>Healthy Living Centres</td>
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<tr>
<td>Children's Centres</td>
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<td>Schools</td>
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<td>Community Hubs</td>
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<td>GP surgeries</td>
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<td>Hospital</td>
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<tr>
<td>Community Centres</td>
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<td></td>
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<tr>
<td>Somewhere else</td>
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<td></td>
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</tbody>
</table>

If 'somewhere else' please say where

__________________________________________________________________________

9. In your opinion, what do you consider to be the most important in terms of community children's health services being able to work better together? (tick only three)

- Sharing information across teams / services
- Linking with schools
- Linking with GPs
- Joint care planning
- Sharing skills across existing professional boundaries eg Dual Skilled Nurses
- Better use of technology (social media, web chats etc.)
- Improved communication between different services
- One point of contact for all services
- Improved communication between professionals and families
- Flexible appointments (evenings/weekends)
- Something else

If 'something else' please say what

_______________________________________________________________________

_______________________________________________________________________

10. How would you like to share your views about the services you use? (please tick all that apply- this question to be completed by children, young people and parents only)

- Formal meeting
- User Groups
- Social Media Group
- Message Boards
- Coffee mornings
- Conference calls
- Web chats
- Not interested
- Something else

If 'something else' please say what

_______________________________________________________________________

_______________________________________________________________________
11. Which skills or attributes do you consider are the most important for young children that are about to start school? (please tick three)

- Able to communicate well
- Personal independence: for example being able to use the toilet effectively, being clean & dry
- Social skills
- Feeling confident without parent or carer present
- Listening skills
- To be able to take turns
- To be able to notice things and ask questions
- Something else

If 'something else' please say what

We will be focusing future services on enabling children and families to achieve positive outcomes. By outcomes, we mean the impact or difference that is made to a child or family’s life. Please tell us about the specific outcomes that are important to you – the list below has some examples, and there is more space for you to tell us anything else that you would like children’s community health services to help you to achieve

12. Which three things are the most important to you? (This question to be completed by children and young people only)

- I am happy
- I have friends and get on with other people well
- I can play with my friends
- I have the best possible health
- I can manage my health condition effectively
- I am able to be independent
- I am able to take part in home, school and community life
- My carer/family have their needs recognised and are given support to care for me
- I am supported to understand my choices and to set and achieve my goals
- Something else

If 'something else' please say what
13. **Which three things are the most important for your child?** (This question to be completed by parents only)
   - My child is happy
   - My child has friends and gets on with other people well
   - My child can play with their friends
   - My child has the best possible health
   - My child can manage their health condition effectively
   - My child is able to be independent
   - My child is able to take part in home, school and community life
   - My child is supported to understand their choices and to set and achieve their goals
   - Something else
   If 'something else' please say what

14. **Which three things are the most important to your family?** (This question to be completed by parents only)
   - My family understands our child
   - My family is able to look after, take care of and support our child
   - My family is able to cope with our circumstances and enjoy our time together
   - My family is supported to ensure that their rights and the rights of our child are respected
   - My family participates in community services, or is able to if we would like to
   - My family feels supported by other family, friends and neighbours in our local community
   - Something else
   If 'something else' please say what

15. We will be focusing future services on enabling children and families to achieve positive outcomes. By outcomes, we mean the impact or difference that is made to a child or family’s life. **Please tell us about the specific outcomes that are important to you.**

16. Is there anything else you think is important to include when thinking of how Children's Community Health Services should work?
17. We will soon be developing models and priorities for community children’s health services. As we do this, we are keen to involve parents in this process. Is this something that you would be interested in doing?

- Yes
- No
- Don’t know but would like to find out more (when you have finished this survey you will be directed to a web page that has further information on the Children’s Community Health consultation)

Your name: __________________________________________

Your contact number: _________________________________

Your email address: __________________________________

18. Are you? Please tick the appropriate box

- Male
- Female
- I prefer not to say

19. How old are you? (Please tick the appropriate box)

- Under 16
- 16 - 24
- 25 - 34
- 35 - 44
- 45 - 54
- 55 - 64
- 65 to 74
- 75 and over
- I prefer not to say

About you

We collect this information to help us better understand the communities that we serve so that services and policies can be delivered to meet the needs of everybody. Please feel free to leave questions that you do not wish to answer. All of the information gathered in this questionnaire is confidential.
20. **What is your ethnic group?** *(Choose one option that best describes your ethnic group or background):*

- English/Welsh/Scottish/Northern Irish/British
- Irish
- Gypsy or Irish Travellers
- White
- Any other White background
- White and Black Caribbean
- White and Black African
- White and Asian
- Any other Mixed/Multiple ethnic background
- Indian
- Pakistani

If ‘something else’ please say

- Asian
- Chinese
- Bangladeshi
- Any other Asian background
- African
- Caribbean
- Any other Black/African/Caribbean background
- Arab
- Something else
- I prefer not to say

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21. **If you are a parent, does one or more of your children have a long standing health problem or disability?** *(Long standing means anything that has lasted, or expected to last, at least 12 months?)*

- Yes
- No
- Prefer not to say
- N/A

22. **Which part of Medway do you live in?** *(Please tick only one)*

- Chatham
- Gillingham
- Hoo Peninsula
- Rainham
- Rochester
- Strood
- I prefer not to say
- Somewhere else

If ‘Somewhere else’ please say

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Medway Council is committed to compliance with the Data Protection Act 1998, as well as your rights to confidentiality and respect for privacy. The council will ensure that it keeps your personal information accurate and secure to provide you with efficient services.

The Council will only use the information it holds about you for the purpose you provided it. It will also only collect the minimum information necessary to fulfil that purpose. When it no longer has a need to keep information about you, it will be disposed of in a secure manner.

To find out about our health improvement services, find us on: Twitter @ABetterMedway and like us on Facebook @ABetterMedway.

**Thank you for completing this questionnaire**