

Children and Young People's Health Outcomes Strategy – Feedback Form

The Children and Young People's Forum has been set up to inform the development of a Children and Young People's Health Outcomes Strategy. The Strategy will be a plan for action, which will help the different parts of the health system work better together to improve the quality of healthcare services for children and young people.

We want to hear your views and key messages to help us shape the plan of action and make sure we focus on the issues that matter to you. We are holding a number of events around the country to get input from clinicians, children, young people, parents, carers and the general public. We have also created this feedback form, as we are keen to hear from as many individuals as possible.

Please respond to our four questions (should not take longer than 30minutes!), complete your details at the end of the form, and email it to:
childrensoutcomesforum@dh.gsi.gov.uk

Please send your response by **30 April 2012**.

Thank you for your time and support to advise the Children and Young Peoples Forum. You can keep up to date with the developments of the **Children and Young People's Health Outcomes Strategy**, at
<http://healthandcare.dh.gov.uk/category/children/>

Before you begin, please put an **X** before the relevant category:

Patient	Parent/ Carer	Health Service User
Doctor	Nurse	Other (please specify)...x charity
.....		

Region

North West	North East	Yorks&Humber	West Midlands
East Midlands	South West	South East	East of England

National

Could you also provide details of the issue(s) that your comments are in relation to by putting a **X** in front of the relevant topic(s)

- Primary care (GP practices, community health centres, dental practices, community pharmacies...)
- Children with long term conditions
- Children with complex health needs
- Children with poor mental health
- Urgent care for children with acute illness (starts very quickly and lasts for a short time)
- Health promotion and improvement
- Palliative care (life threatening illnesses)
- Children with disabilities
- Looked after children
- Safeguarding children
- Medicines for children

Mother's physical & mental health in pregnancy
Transition to adult life
INJURY PREVENTION

Question 1

In your view, where is the health service falling short for children and young people, what is our weakest link and what can we do to improve things to make sure it makes a real difference to the lives of children and young people?

Since the loss of funding and support for healthy schools at a national level and the move for more schools to become academies there is a risk of breaking the link between public health and schools as a setting for health promotion and health improvement. Individual schools will find it difficult to identify health priorities without specialist support and will not be represented on health and well being boards.

There is a significant social gradient to child injury, and action to prevent injuries can be effective at reducing health inequalities at this age. The report 'Injuries in children aged 0–14 years and inequalities' provides the background to the scale of these inequalities as well as case studies of interventions to address them - http://www.nice.org.uk/niceMedia/pdf/injuries_in_children_inequalities.pdf

Sure Start Centres also have the potential to improve health outcomes for disadvantaged children by identifying those most at risk of poor health outcomes, and directing parents to appropriate services..

Nationally 124 Sure Start Children's Centres have closed despite evidence positive outcomes:

- Children in Sure Start areas are less likely to be overweight
- Children are more likely to experience better physical health
- Families provide a better learning environment at home for their children
- Home environments are less chaotic
- There is greater life satisfaction in families
- Families use less harsh means of discipline
- More families in Sure Start areas progress to having someone in the household in employment by the time the child is 5 years old

<http://ukpolicymatters.thelancet.com/?p=975>

Question 2

With so many different parts of the health system in place, what do they need to focus on and improve to make sure they each work together to deliver the best possible health service for children and young people ?

The health service needs to find new ways to reach schools to deliver health education programmes as part of PSHE education and to deliver health services for children and young people alongside health promotion and improvement programmes. If the health service is to meet the needs of a population which is living longer, prevention of long term conditions such as disability caused by unintentional injury as well as the prevention of heart disease and cancer will be vital.

Question 3

The NHS and Public Health Outcomes Frameworks both propose key areas of focus: making sure everyone lives healthy lives for longer, addressing inequalities, enhancing quality of life for people with long term conditions, helping people recover from ill health or following an injury, ensuring people have a positive experience of care, treating and caring for people in a safe environment and protecting them from harm. (Details of the current outcomes specific to children and young people within these frameworks are at <http://healthandcare.dh.gov.uk/outcomes-frameworks/>)

Are these the right priority areas in relation to children and young people's health outcomes? Is there anything missing.

It's more a matter of emphasis: the priorities should include a clear focus on preventing unintended injury – not just helping people recover from unintended injury. This features in Domain 2 of the Public health outcomes framework but is not reflected clearly in the list of topics identified at the beginning of this questionnaire, or in the question above – and may mean you get fewer responses on this important topic.

Unintended injury is a leading cause of preventable death among children and young people as can be seen from recent data:

Data for 2010-11:

Of the 4,061 child deaths that were reviewed in 2010-11, 225 (6%) related to deaths categorised as “trauma and other external factors” - the category related to accidents.

Importantly, deaths categorised as being due to “trauma and other external factors” had the highest proportion of deaths with modifiable factors (68%). By contrast, deaths due to “malignancy” had the lowest proportion of modifiable factors (4%).

However, of the 800 modifiable deaths, 152 (19%) were due to “trauma and external factors”. “Perinatal/neonatal events” also accounted for 19% of modifiable deaths. The only category of death that accounted for a higher proportion of modifiable deaths was the “sudden unexpected, unexplained” deaths category - 22%.

In addition to identifying categories of death (e.g. “trauma and external factors”), CDOPs also record the “event” that caused the death. For five types of event, more than 50% of deaths were identified as having modifiable factors:

- **Drowning - 29 deaths, of which 72% had modifiable factors**
- **Road traffic accident/collision - 107 deaths, of which 69% had modifiable factors**
- Apparent suicide - 62 deaths, of which 65% had modifiable factors
- Sudden unexpected death in infancy - 353 deaths, of which 54% had modifiable factors
- **Other non-intentional injury/accident/trauma - 89 deaths, of which 52% had modifiable factors.**

Across all categories of death, the 15-17-year-old age group had the greatest proportion of modifiable deaths (38%).

Key health outcomes for children and young people must include...

Fewer deaths and serious injury as a result of accidents or unintended injury.

Question 4

Is there anything else you'd like to tell us?

The CDC has just published a US action plan on child injuries which sets out many of the approaches that they are taking -

[http://www.cdc.gov/safecild/pdf/National Action Plan for Child Injury Prevention.pdf](http://www.cdc.gov/safecild/pdf/National_Action_Plan_for_Child_Injury_Prevention.pdf)

Your Details

Name Dr Jenny McWhirter

Surname

Email: jmcwhirter@rospa.com

Confidentiality of Information:

1. We manage the information you provide in response to these engagement questions in accordance with the Department of Health's Information Charter.
2. Information we receive, including personal information, may be published or disclosed in accordance with the access to information regimes (primarily the Freedom of Information Act 2000 (FOIA), the Data Protection Act 1998 (DPA) and the Environmental Information Regulations 2004).
3. If you want the information that you provide to be treated as confidential, please be aware that, under the FOIA, there is a statutory Code of Practice with which public authorities must comply and which deals, amongst other things, with obligations of confidence. In view of this, it would be helpful if you could explain to us why you regard the information, you have provided as confidential. If we receive a request for disclosure of the information, we will take full account of your explanation, but we cannot give assurance that confidentiality can be maintained in all circumstances. An automatic confidentiality disclaimer generated by your IT system will not, of itself, be regarded as binding on the Department.

4. The Department will process your personal data in accordance with the DPA and, in most circumstances; this will mean that your personal data will not be disclosed to third parties.

On behalf of the Children and Young People's Forum, we would like to thank you for taking the time to complete this feedback form.