Listening, Hearing and Responding

Department of Health Action Plan: Core Principles
For the Involvement of Children and Young People

June 2002
Such Something to Me

My short time here has not been splendid
As I might have guaranteed
My eagerness of speaking the entire truth
And how much pain am having inside
As felt tender dry
Just like weak ashes
In my bedroom I receive
Not sleeping in peace of mind
Kicks kicks sometimes rise
On the door loud
And comfort seems a hard strength to attend
The big garbage insults
Seemed caged away inside of me
And over and over again
It continues a lot more times
Am mad about my drive
Towards turning things
Around in my life
And am mad about lots
More things than others.

Shola

Shola's poem first appeared in *Who Cares?*, the only national magazine for young people living in public care. *Who Cares?* is produced by the charity The *Who Cares?* Trust who also provide a telephone Linkline and other services for those in, and those who have left care. Visit the Trust’s website at www.thewhocarestrust.org.uk
Foreword

I am delighted to publish this action plan and to see the steps being taken by the Department to increase the involvement and participation of children and young people. You will see that we have made a good start and laid some really strong foundations.

This action plan sets out the Department’s vision for children and young people today – our view of the aspirations and ambitions that we want to see for vulnerable children and young people.

Participation is a central theme of the Quality Protects programme and it has laid some core policies for the Department to build on. Linked to this, we want to see better communication with children, young patients and parents in the NHS. Patients must be involved, wherever possible, in decisions about their treatment and care. Our aim is to build on the good practice that already exists as well as driving forward change. This action plan shows how serious we are about listening to the views of children and young people and the steps we are taking to extend this work across the entire Department.

*Learning to Listen – Core Principles for the Involvement of Children and Young People*, published by the Children and Young People’s Unit last year gives lots of examples of the benefits of participation. Actively involving children and young people in this way, will help us develop services which are better designed to meet young people’s needs.

I commend this action plan to you. It offers a platform on which to build – practical information about our activities and guidance for those working with children and young people. We look forward to working with our partners across Government, with health agencies, and children’s organisations in making a difference to the lives and futures of children and young people.

Jacqui Smith  
Minister of State for Health
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Annex A Action Plan: Mapping of Participation Activities in Department of Health 2002/03 27
Ministers across Departments are committed to giving children and young people a real say and real choices about Government policies and services that affect them. The Department of Health is committed to involving children and young people in all aspects of its work. Involving users and carers in decision-making at all levels is a key aim for all health and social care agencies. This action plan represents an important step towards achieving that vision.

The Department’s policies will be built up from the needs of the child and young person. Such participation should lead to positive change in the lives of children and young people. Participation should go beyond consultation and ensure that children and young people initiate action and make decisions in partnership with adults, for example, making decisions about their care and treatment or in day to day decisions about their lives.

The Department is committed to a health service that puts patients at the heart of everything it does. It’s also about a cultural change in the way we think about children and young people. We want all our staff in the health service to recognise that children are not small adults – they do not just need smaller beds and smaller portions of food. The healthcare needs of children are different from those of adults and this must be recognised. For the individual child and young person, it means making sure that information about treatment, care and consent policies are provided in a variety of ways. It also means making sure that patients are given the time and opportunity to ask questions about their treatment and care. A Children’s Taskforce and National Service Framework have been established to improve the lives and health of children and young people.

Making change happen for children in the health service is much more than just the medical care of sick children- very important though that is. Children with illness, particularly those with long-term conditions must be cared for not only in terms of their medical, social and educational needs but also in the light of their own views and decision-making.

As the Commission for Patient and Public Involvement in Health is established, the Department will be making sure that involving children, young people and their parents, carers and families forms an integral part of their programme. Our vision includes improving the patient’s overall experience and we will be looking at the following themes in the first year of this action plan:

• making the overall environment safe, comfortable and friendly;
• better information and choice;
• reducing waiting times;
• creating baseline standards;
• better communication with children, young people and parents;
• parents fully engaged in decisions about their child’s treatment and care.
A summary version of this plan has been published for children and young people. We will publish the summary on Departmental web-sites, so that children and young people have better information about the range of activities taking place in the Department and can find out how to get involved in our work.

The Department will continue to involve children and young people in the development and implementation of the projects set out in this action plan. We will ensure that children and young people are involved in evaluating the delivery of participation opportunities, outcomes and progress against our plans.

Finally, we want to embed participation into the activities of all the agencies and organisations which deliver our policies and services. For example, we want to make sure that the core principles are implemented by all councils, social services departments, regional offices, strategic health authorities, Primary Care Trusts, and all hospitals.
2  Departmental Responsibilities

The overall aim of the Department of Health is to improve the health and well-being of people in England. This means protecting and improving the nation’s health and ensuring that our health and social services are high quality, fast, fair and convenient. This includes care for pregnant women and their unborn babies, children, young adults, working age adults and older people.

Within the NHS, this includes primary, hospital and specialised services for children, including the promotion of their healthy development. In local government, this includes the delivery of personal social services for children and older people. Both the NHS and Social Services have a statutory duty to work together in the interests of patients and specific responsibilities for safeguarding the wellbeing of vulnerable children and young people.

2.1 Agencies and Service Deliverers

The Department of Health has a wide remit and works in partnership with a great variety of agencies and organisations.

A number of organisations have been (and are being) set up to help the modernisation of the health service and social services. These non-departmental bodies (called NDPBs, for short) are accountable to the Secretary of State for Health:

- Commission for Health Improvement (CHI);
- Commission for Patient and Public Involvement In Health (CPPIH);
- Council For the Regulation of Healthcare Professionals (CRHP);
- General Social Care Council (GSCC);
- Health Development Agency (HDA);
- National Care Standards Commission (NCSC);
- National Clinical Assessment Authority (NCAA);
- National Institute for Clinical Excellence (NICE);
- National Institute for Mental Health in England (NIMHE);
- National Patient Safety Agency (NPSA);
- NHS Modernisation Agency;
- Social Care Institute for Excellence (SCIE);
- Commission for Social Care Inspection

The Secretary of State announced in April 2002 that new health and social care inspectorates will be established to carry out current functions currently performed by CHI, NCSC, the health value for money function of the Audit Commission and the Department of Health’s Social Services Inspectorate (SSI).

Primary legislation will be required to establish these bodies and will be introduced as soon as parliamentary time allows.
3  Department Legislation and Policy Contributing to the General Direction of Children’s Participation

The Department’s legislation and policy development programme is contributing to improving children and young people’s participation. There has been increasing evidence for example, that the Quality Protects programme is having a significant effect in improving the lives of children and young people. It has attracted widespread support from local government, the voluntary sector and children and young people themselves.

3.1  Children Leaving Care Act (2000)

October 2001 saw the implementation of the Children Leaving Care Act, giving care leavers legal entitlements to better support as they make the transition to adulthood. The Act was based on active consultation with councils, voluntary organisations and young people themselves. This led first to the consultation paper *Me Survive Out There?* and now to the Act itself. The Act has been very widely supported by councils, voluntary organisations and young people across the country.

3.2  Adoption and Children Bill (2002)

The Adoption and Children Bill represents the most radical overhaul of adoption law for 25 years. It will replace the outdated Adoption Act 1976 and modernise the whole existing legal framework for domestic and intercountry adoption. The Bill will implement the proposals in the White Paper *Adoption: A new Approach*, which requires primary legislation and underpins the Government’s drive to improve the performance of the adoption service and promote greater use of adoption.

Its provisions include measures to put the needs of the child at the centre of the adoption process by aligning adoption law with the Children Act 1989 to make the child’s welfare the paramount consideration in all decisions to do with adoption. The Bill will also introduce a new special guardianship order to provide permanence for children who cannot return to their birth families, but for whom adoption is not the most suitable option.

3.3  National Adoption Standards (2001)

National Adoption Standards for England were published in August 2001, following a consultation exercise. The adoption standards have been written to ensure that children, prospective adopters, birth families and the general public understand what they can expect from the adoption service and so that all parties receive a fair and equal service wherever they live. Many of the standards are already required by primary legislation, regulations or statutory guidance. The remaining standards will become statutory guidance from 1 April 2003. The standards emphasise that the needs and wishes, welfare and safety of the looked after child are at the centre of the adoption process.

As part of the Bill, the Department is making changes to the social services complaints procedures, to ensure complaints made by children and young people are dealt with quickly and with the minimum of bureaucracy.
3.4 Patient and Public Involvement in the Health Service

There are several ways that the Department is promoting citizenship and greater involvement by patients and the public, which includes children, young people and their carers, in the NHS. These are by:

- increasing opportunities for people to influence decisions and to bring about change by equipping them with the skills to be able to do this;
- changing decision making processes;
- improving the complaints process; and
- promoting individuals’ rights and responsibilities in the NHS.

In each hospital, there will be a Patient Advice and Liaison Service (PALS) providing on the spot help and information about independent complaints advocacy (ICAS) where people can get help to pursue formal complaints or resolve concerns informally. Patients’ Forums will be set up to influence the day to day management of health services by the Trust, and will monitor the effectiveness of the PALS and ICAS in their area. The Commission for Patient and Public Involvement in Health, will support and co-ordinate Patients’ Forums through local networks.

3.5 The Commission for Patient and Public Involvement in Health (2003)

Subject to the passage of the NHS Reform and Health Care Professions Bill the Commission for Patient and Public Involvement in Health will be established at the beginning of 2003.

3.6 Children’s National Service Framework

The Children’s NSF is developing new national standards across the NHS and social services for children. Participation of children, young people and their parents underpins the development of the NSF. The Department will be working in partnership with families and communities to make sure children’s needs are recognised and met. The Department is working with the University of York to draw on research evidence about children’s views of health.

Six working groups have been established to develop the standards:

- Children needing acute/hospital services;
- Maternity services for child-bearing women and babies;
- Mental health and psychological well-being of children and young people;
- Children in special circumstances;
- Children with disabilities and long-term medical conditions;
- Healthy children and young people.

Core participation principles have been published by the Children’s TaskForce and can be found on the web-site: [www.doh.gov.uk/childrenstaskforce](http://www.doh.gov.uk/childrenstaskforce)
The Department is committed to eliminating unfair treatment, prejudice and inequalities in all areas of our work. We published a National Service Framework for Older People which rules out discrimination on grounds of age. We are using the same non-discriminatory approach for children (irrespective of their age, race, faith, gender, sexual orientation, disability or social class) through the Children’s Taskforce and this action plan.

As the new Commission for Patient and Public Involvement in Health is set up, we will begin to work with them to ensure that involving children, young people and their parents, carers and families forms an integral part of their programme.
4 What the Department has achieved so far

The Department already has a sound foundation including the work of the Teenage Pregnancy Unit, The National Healthy Schools Programme, Quality Protects Young People’s Reference Group and the Listening and Responding Teams created by the Social Services Inspectorate. As the new Commission for Patient and Public Involvement in Health is set up, we will begin to work with them to ensure that involving children, young people and their parents, carers and families also forms an integral part of their programme.

This section of the plan outlines some examples of work achieved so far and gives case study examples where children and young people are already influencing policy development and delivery of services.

4.1 Paediatric and Congenital Cardiac Services Review

As part of the Review of Children’s Heart services following the Bristol Royal Infirmary report, the Department consulted children, young people and parents about their experiences of heart treatment and care. Visits took place to 14 heart units across the country in September 2001 and November 2001. A conference for parents and children was organised by the Children’s Heart Federation and the Department of Health in September last year.

www.doh.gov.uk/childcardiac

The Children’s Heart Federation
chf@dircon.co.uk
& web-site address
www.childrens-heart-fed.org.uk
4.2 Children’s Taskforce and Children’s National Service Framework (NSF)

- A Children’s Taskforce and National Service Framework were announced in 2000 to improve the lives and health of children and young people. Participation of children and young people underpins the development of the NSF. The department is focusing on addressing inequalities, improving the quality of children’s care and helping children and young people achieve their full potential. Six project teams have been established to develop standards:
  - Children needing care in hospital;
  - Healthy children and young people;
  - Maternity;
  - Children with disabilities and long term conditions;
  - Children in special circumstances;
  - Children’s mental health and psychological well-being.

A National Clinical Director for Children (children’s tsar) was appointed in October 2001 to ensure that high quality and safe services are designed to meet the particular needs of children.

- The Department published in July 2001 Consent- what you have a right to expect. A guide for Children and Young People which can be obtained from the following web-page: http://www.doh.gov.uk/consent/childconsent.htm

www.doh.gov.uk/childrenstaskforce

4.3 Public Health taskforce and reducing inequalities

Tackling health inequalities is a Government priority and they are a key theme in The NHS Plan. Children are a large part of this group.

An Inequalities and Public Health Task Force was established in September 2000 to help tackle these inequalities, both inside and – with partners – outside the NHS. The first-ever national health inequalities targets on life expectancy and infant mortality were announced in February 2001 to direct further efforts in this area. To meet these targets, action will be needed to ensure easier access to NHS services, and to improve health. Further steps will be needed to reduce smoking – particularly among manual groups, improve diet and nutrition and promote physical activity among children and young people.

A consultation exercise, Tackling Health Inequalities was launched in August (2001) asking for advice about the best way to meet the national targets. Two of the six key themes identified work around children and young people to be crucial to this work. An important piece of advice received through the consultation was the need for young people’s participation in policies and programmes that affect their lives.

www.doh.gov.uk/healthinequalities
4.4 Children’s Rights Director

- Listening to children helps protect them from harm and keeps them safe. During 2001, the Department established the post of Children’s Rights Director through the Care Standards Act. The role of this important post is to safeguard vulnerable children living in children’s homes, foster care, boarding schools and in residential family centres. The Children’s Rights Director post ensures that vulnerable children have a powerful voice in all decisions that affect their lives.

www.carestandards.org.uk

4.5 Parent Partnership

- The Department is working with a specialist in parent participation to develop pilot projects with parents and carers. Parents and young people have been fully involved in developing the new standards for children’s heart services following the Kennedy Report.

4.6 Quality Protects

- The Department has seen the continued implementation of the Quality Protects programme across England. Quality Protects is a major five-year, £885m programme. During 2001, we announced an additional £20 million, as part of Quality Protects to give children and young people access to modern information technology. Participation of children and young people is a key objective of the programme;

- In partnership with the National Children’s Bureau, the Department created a national reference group of children and young people to make sure civil servants, inspectors, Ministers and MPs meet and hear from contemporary groups of young people around the country;

- We created a learning ‘network’ of Quality Protects Listening to Children Officers to make sure that best practice is shared and spread across all councils;

- And last year we funded the Who Cares? Trust to develop the Employability Programme to ensure young people who are either in care or who are leaving care have access to job opportunities with their local authority. This programme complements the Teenagers to Work programme which was started by the Quality Protects programme. The whole aim of these programmes is to make sure vulnerable young people achieve the very best in their lives and futures.

www.doh.gov.uk/qualityprotects/index.htm
4.7 Sexual Health and Substance Misuse Cluster – Teenage Pregnancy Strategy – Young People's Involvement and Consultation (YPIC) Project

- The Teenage Pregnancy Unit funded the National Children's Bureau (NCB) to set up and run the Young People In Consultation Project (YPIC) in 2001 and 2002. The project aims to give young people the opportunity to inform the development of policy on teenage pregnancy;

- YPIC project supports children's participation in two ways, a Young People's Forum (YPF) that is ongoing and a series of targeted consultations with groups of young people across England;

- The targeted consultations with young mothers, care leavers, young people from deprived communities, young men from black and minority ethnic groups, young fathers and young people from rural communities were planned and delivered in partnership with national and local teenage pregnancy teams and other interested local partners to ensure that they inform both local and national policy development;

- The Young People's Forum (YPF) consists of 12 young people and runs alongside the targeted consultations.

www.doh.gov.uk/teenagepregnancyunit/index.htm
www.doh.gov.uk/drugs
www.doh.gov.uk/std.htm

4.8 Health and Social Care Awards

- For the second year running, the Department is involving young care leavers in the judging of the Health and Social Care Awards (a national awards ceremony to identify excellence in health and social services practice).

www.doh.gov.uk/healthandsocialcareawards2002

4.9 Listening and Responding Teams – Social Services Inspectorate; The Children’s Society; First Key; Save the Children; Barnardos; and the National Children’s Bureau

- In partnership with The Children's Society, First Key, Save the Children, Barnardos and the National Children's Bureau, the Department created young people's Listening and Responding Teams who were involved in 19 local authority inspections. The teams helped the Social Services Inspectorate find out what local children and young people think about their care and how it could be improved.

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4.10 National Healthy Schools Programme

A Healthy School is one where good health and social behaviour underpin effective learning and academic achievement which in turn promotes long term health gain.

In October 1999 the Departments of Health and Education launched the National Healthy School Standard (NHSS) to provide the opportunity for all schools to receive the support and expertise they needed to become Healthy Schools. The Healthy Schools Programme established a National Healthy School Team in the Health Development Agency, and local health and education partnerships covering every Local Education Authority. All these partnerships have now been accredited as fulfilling the criteria required by the NHSS, and are able to properly support schools working towards achieving the Standard.

A healthy school meets the physical, social, emotional and academic needs of its staff and pupils.

A healthy school is about promoting:

• Good physical health, self confidence and motivation;
• Safety – both physical and emotional;
• Having your best efforts recognised;
• Having all the information you need on health issues i.e nutrition, relationships, sex, smoking, drugs – and taking responsibility for your own choices;
• If there's trouble, someone will help and support you;
• Knowing that what you do counts and that you can really affect other people's lives and health just as they affect yours.

www.wiredforhealth.gov.uk/healthy/healint.html

4.11 Total Respect Training Pack

• The Department commissioned CROA (Children's Rights Officers and Advocates) to publish the Total Respect training pack in August 2000. The pack is designed for all local authority social services staff and councillors.

• Its aims are to increase skills and knowledge to ensure children’s active participation in decisions about their own care, in service development and when making complaints. It is packed with practical exercises and a handbook for every participant.

www.doh.gov.uk/publications/index.html

4.12 Make It Happen

• The Department published guidelines in 2000 (Make It Happen) for all organisations wishing to develop participation practice. In 2001 we published participation principles for all members of the Children's Taskforce and these can be found on the web-site

www.doh.gov.uk/childrenstaskforce. Learning to Listen – Core Principles for the Involvement of Children and Young People will help us embed this work further.

www.doh.gov.uk/publications/index.html
4.13 NHS Estates

In addition to the above examples, a lot of interesting work is being taken forward by NHS Estates. NHS Estates is working closely with the children's NSF to ensure that healthcare building and the environment they create meets the needs and expectations of children and young people. An overarching strategic document to be published in summer 2002, Friendly Healthcare Environments for Children and Young People will outline the core principles for providing this.

This work includes:

- Security
- Safety
- Children and young people friendly food
- Rest and sleep
- Age sensitive environments
- Maintaining the privacy and dignity of children and young people.

www.nhsestates.gov.uk
5 Departmental Arrangements Including New Structures, Capacity Building and Creating Opportunities for Staff Development

The Department is at the forefront of participation work and has not needed to create new staffing structures. A dedicated team of staff including a Participation Co-ordinator, Assistant Co-ordinator and a Young People’s Participation Officer has been in place since November 1999. This team works closely with other parts of the organisation, for example, Public Health, Teenage Pregnancy, Nursing and Patient involvement. The team acts as a central point for advice and guidance for staff across the Department.

The overall co-ordination of participation work is being led jointly by the Director for Children, Older People and Social Care and by the Chief Nursing Officer. The patient and public involvement agenda is integral in taking forward this action plan. A steering group of civil servants, led by the two Directors is being established to steer the further development of participation work across the Department.

An important and early priority is to begin the process of capacity building and to develop the awareness, understanding and familiarity with participation practices for all staff as a foundation for specific activity. We aim to provide two types of support:

- The internal infrastructure to support capacity building and staff development.
- Specialist advice and expertise through contracting with outside organisations

An important priority in the first year of the plan is to develop the awareness of the Learning to Listen principles and practices for all Department of Health staff and to offer advice, guidance and support to them. We will engage specialist advice and expertise by working closely with children’s and parent partnership organisations specialising in both health and social services. We aim to start discussions with the Civil Service college and our Skills Development Unit, to support implementation of this plan.

5.1 Communication with staff groups

This section of the plan explains what the Department has achieved since Learning to Listen was published last year. Learning to Listen was distributed with a covering letter from Denise Platt (Director of Children, Older People and Social Care) across the whole Department in November 2001.

In addition we:

- Distributed Learning to Listen to all Regional Taskforces
- Published an introductory article in the Staff Newsletter Link in November 2001;
- Sent copies of Learning to Listen to the Quality Protects Participation Officers Network, the Health Participation network, the Quality Protects Young People’s Reference Group and to all Directors of Social Services;
5.2 We will decide how best to distribute *Learning to Listen* to NHS staff, our non Departmental bodies, primary health trusts and the new strategic health authorities.

5.3 **Networks and the Sharing of Good Practice**

In addition, the Department has created a number of learning opportunities for practitioners to exchange good practice. The Department runs a Quality Protects Listening to Children network and a Child Health participation network. These events are run in conjunction with local councils, NHS Trusts, health agencies and the children's health organisations.

In addition, the Department funds through the Section 64 grants scheme A National Voice – an organisation managed and staffed by young people. A National Voice (ANV) is a young people's organisation which was established to enable young people currently or previously in care to have an effective voice in consulting and developing policies that will bring about positive change for young people. A National Voice (ANV) is unique in that it is managed and staffed by young people with experience of having been in care. We will continue to work with A National Voice and other organisations about how the Government can improve the way it engages with young people.
6 Partnerships with organisations and groups to maximise participation

The Department works with a large number of organisations who help us maximise the involvement of young people in policy development. In addition, we fund and support a large number of organisations to develop specific participation projects which have a direct impact on the lives of children and young people.

The Department funds through the Section 64 grants scheme:

- Article 12;
- Children’s Rights Alliance for England;
- ChildLine;
- Unicef;
- Children’s Express;
- National Children’s Bureau;
- National Youth Advocacy Service;
- Who Cares? Trust;
- Children’s Legal Centre;
- A National Voice.

Participation is a central theme of the Quality Protects programme and is a priority area for special grant expenditure. Councils are required to develop independent advocacy services and speed up the complaints procedures. The Department works with a number of the children’s advocacy agencies to maximise independent advocacy and children’s rights services for looked after children. As part of this work we are consulting on national advocacy standards and will publish standards in the summer 2002.

Members of the Advocacy Consortium include:

- Voice for the Child in Care;
- National Youth Advocacy Service;
- Barnardos;
- Children’s Rights Alliance for England;
- Children’s Rights Officers and Advocates;
- NSPCC;
- NCH;
- The Children’s Society;
- National Youth Advocacy Service;
Listening, Hearing and Responding

- Children's Legal Centre
- ChildLine;

In order to implement this plan, we will continue to work with and draw on the expertise and skills of the following initiatives and groups:

- UK Youth Parliament;
- Children's Express;
- NCB Young Members;
- ChildLine;
- Who Cares? Trust;
- Unicef- Put it to Your MP Project;
- Y Vote Y Not? – programme on engaging young people in voting;
- Young People's Health Development Network;
- Quality Protects Participation Officers Network;
- All Parliamentary Group for Children and Young People in Care;
- Carnegie Young People’s initiative;
- The Buttle Trust- From Care to University;
- Resources including toolkits, web-sites and good practice databases.
The Department has already begun work in developing guidelines to ensure the safety of young people. It is crucial when working directly with young people that the Department ensures their safety and supports them to encourage positive participation. It is the responsibility of the Department to make sure that young people are not placed at any risk of harm. The Department believes that children and young people should be supported in developing their skills and confidence. Our experience has shown that drafting papers and leaflets in less complex language enables children and young people to contribute more effectively. Staff development is also important in enabling staff to support children and young people’s participation effectively.

During 2000, the Department developed practical guidelines for staff wishing to develop participation practice. *Make it Happen – a report of six participation events, Department of Health, October 2000.* Linked to this publication, the participation team developed practical guidelines and a code of practice for all staff working with young people. This code of practice covers core standards, for example, choice of venues, payment and rewards, safety and confidentiality.

In publishing guidelines for the Teenagers to Work Programme, a checklist was developed for staff in central Government departments and councils. This covered advice in arranging work placements in Government departments or in council offices. The checklist includes the importance of induction, an initial interview with young people prior to their placement, providing an outline for the day, obtaining medical information and emergency contact details etc.

Guidelines were also produced for young people themselves and covered practical information ranging from the suitability of clothing, break times, using computers and the importance of confidentiality issues. For further details see guidance developed for the Teenagers to Work programme.

Further work in this area has recently been expanded by the Who Cares? Trust. *Building Futures for Young People In and Leaving Care – The Employability Programme.* This publication builds on Teenagers to Work and gives useful practical guidelines for the world of work. The materials are supported by a video and a CD Rom.

**Email: mailbox@thewhocarestrust.org.uk**

**Email: esther.austin@doh.gsi.gov.uk** (Teenagers to Work guidelines)
As indicated in the previous section, the Department has begun the development of practical guidelines and ‘ground rules’ for staff working with young people. This was produced at the start of the Quality Protects programme.

From our experience, children and young people need to be clear from the start in policy development about how the information and views they share with those working with them may be used. We have begun work developing a written protocol on confidentiality for staff and young people covering these issues and this will be refined in the light of the standards being drawn up by the CYPU. In addition, we have produced consent forms for the Quality Protects Young Peoples reference group, covering issues such as permission for the use of photographs and travel to venues.

Finally, we will consider, in discussion with the CYPU and other expert organisations:

- What additional guidelines on involving children and young people are required, particularly tailored to the needs of Department staff. This will involve reviewing existing toolkits before deciding whether further practical help is required. In particular we will review what information staff require about child protection issues.

- We will feed back the lessons learnt from consultation events in one part of the organisation to other areas so as to improve the standard of participation work across the Department and its agencies.
Both on the NHS and Social Care side, developments are taking place to survey the satisfaction of service users but more work needs to be done to ensure the specific needs of children and young people are met. The Department is at an early stage of evaluating participation work taking place internally. This will be a priority over the next year. Feedback from some young people’s groups about our activities has been positive. For example, as a result of concerns raised by young people at the Make it Happen consultation events, the Department published advice to all councils about policies for sleepover and overnight stays. As a result of the Teenagers to Work programme, a number of young people in care have been employed for short and long term placements by their corporate parent, the local council. Last year for example, the Department saw over 60 councils taking part in this scheme. In many areas young people have been specifically employed to help establish local reference groups, improve publications and design web-sites.

However, the Department will start developing evaluation methods, learning from the national performance monitoring that is in place for local councils. In view of the Quality Protects programme coming to an end in 2004, the Department will be reviewing all existing performance indicators and seeking to develop for the first time, indicators for children’s participation in individual care planning and their access to independent advocacy services. We will draw on work being done by the Connexions partnerships to ensure the following questions are integrated into evaluation.

- How many young people have been involved?
- What lessons were learned as a result of involving young people?
- What support and training have young people had to enable them to participate effectively?

As a core principle, we will be involving children and young people in evaluating the success of the Department’s activities and will ask them their views on what they learned and what could have been better. We will make sure that evaluation systems ensure staff and young people can identify together what went well and what needs to be improved.

During 2002/3 we will work and learn from the following organisations in developing an evaluation framework for work within the Department:

- The Children and Young People’s Unit and other Government Departments;
- National Children’s Bureau;
- Dartington Social Research Unit;
- Audit Commission and Commission for Social Care Inspection.
10 Priorities for 2002–3

This action plan forms part of a longer term strategy to integrate participation into all policies. The initial priority is to build awareness of *Learning to Listen* and create opportunities for training, exchange of good practice and staff development within the Department and its agencies.

We recognise that there will be financial implications to additional participation activity. This type of activity is not cheap and takes time to develop. However, the Department will draw on the expertise of partner organisations and agencies thus helping us take forward this work in relevant policy areas.

The Department has already laid some sound foundations, but needs to make sure this work is extended to other parts of the organisation. The priorities for the first year of the plan are to:

- Raise awareness of *Learning to Listen*, share best practice and create opportunities for staff development;
- Create systems to support participation work across the Department;
- Improve Department communications for children, young people and parents (for example, through the development of young people friendly Departmental web-sites, newsletters and leaflets).
11 Going Forward Beyond 2003

It is too early to be specific about our plans beyond 2002/3 but we expect the emphasis to be on:

• Achieving greater cultural change, through staff training, support and development;
• Applying the lessons of pilots/programmes in Quality Protects, Public Health and Child Health Services to other parts of the organisation;
• Rolling out Learning to Listen beyond the central Department to other agencies including health agencies and Primary Care Trusts;
• Continuing to spread examples of good practice across councils, Primary Care Trusts and with health agencies and organisations;
• Developing evaluation methods for the Department (for example, indicators for participation and advocacy in the Performance Assessment Framework);
• As the Commission for Patient and Public Involvement in Health is established developing pilot projects.

Department Communications

As part of our priorities in 2002/3, the Department will develop internal systems to ensure that:

• Children and young people are consulted on Green/White papers and other consultation exercises on policies and services which directly involve children and young people;
• Children and young people are consulted on new programmes;
• Departmental publications and web-sites are improved for child friendliness;
• With the help of our Media Centre, links are established with the editors of Teenage magazines and the broadcast media, to better promote the Department’s work and dispel negative images and stories about children and young people in the national press.
12 Mapping Participation Across the Department

This action plan has concentrated on setting a number of immediate priorities for 2002/3 and mapping baseline work taking place. This can be found as Annex A.

12.1 Pilot Projects – 2002/03

It is too early for the Department to identify specific pilot projects for 2002/3 and beyond. However from policy work taking place, we anticipate that pilot programmes in the following policy areas may take place in the first year of the plan:

• Patient Surveys – developed for children and young people;
• Working models in parent partnership developed for the Patient Advice and Liaison Services (PALS);
• Development of the Independent Complaints and Advocacy Service (ICAS);
• Development of the Children’s National Service Framework (NSF) and some national roadshows for children and young people;
• Improving the hospital environment and facilities to meet the needs of teenagers and young children.

During 2002/3, the children’s taskforce will establish a national panel of children, young people, young patients and parents to help develop national framework standards and consult on the Children’s NSF as a whole.

12.2 National Patient Survey

Related to pilot projects in 2002/3 is the possibility of a national patient survey, aimed at children using services and their parents. The Department is hopeful that there will be a national patient survey on children’s services next year and are looking for other opportunities to gather views on services for children in hospital in the meantime. The proposed survey could form a major part of the strategy between now and publication since it would enable NHS Trusts/Primary Care Trusts to undertake a baseline assessment of what will be needed locally and to take account of the views of local people. Primary Care Trusts are currently being asked to undertake a baseline assessment of need for the Diabetes National Service Framework. Although it would be more difficult to do so in an area as complex as children’s services, this would be a good starting point and build on what has been achieved so far through the Local Modernisation Reviews.
13 Department Contacts about this plan

For further information about this action plan or the summary version please contact the following mailbox participation@doh.gsi.gov.uk. If you would like further information about this plan please contact: Barbara Herts on 020 7972 4415/4365

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Participation section  
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Joanne Butcher  
Policy Adviser  
Department of Health  
Sexual Health and Substance Misuse  
Public Health and Clinical Quality Directorate  
Room 580D  
Skipton House  
80 London Rd  
London SE1 6LW
### Annex A Action Plan: Mapping of Participation Activities in Department of Health 2002/03

<table>
<thead>
<tr>
<th>Policy Area</th>
<th>Milestones</th>
<th>Lead Responsibility and Context</th>
<th>Timescales</th>
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<tbody>
<tr>
<td>Directorate of Children, Older People and Social Care</td>
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<tr>
<td>Quality Protects</td>
<td>Quality Protects is a major five-year, £885m programme.</td>
<td>Steve Kingdom</td>
<td>Quality Protects Special Grant started in 1998. This is a £885m programme over five years ending in April 2004.</td>
</tr>
<tr>
<td></td>
<td>• Quality Protects – Children and Young Peoples reference group</td>
<td></td>
<td>Started in Summer 2000.</td>
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<td></td>
<td>• Consultation on advocacy standards</td>
<td></td>
<td>Consultation period ends 1 July 2002. Publication of standards summer 2002</td>
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<td></td>
<td>• Revision of Social Services complaints procedures</td>
<td>Barbara Herts/Advocacy Consortium – Advocacy Standards were commissioned from National Youth Advocacy Service and Advocacy Consortium</td>
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<td></td>
<td>• Publication of Total Respect Training Pack</td>
<td>Peter Jones</td>
<td>By autumn 2002/early 2003</td>
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<td></td>
<td>• Work placements for looked after young people under Teenagers to Work scheme</td>
<td></td>
<td>Published 2000</td>
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<td></td>
<td>• Funding of “Who Cares?” Trust Employability Project</td>
<td>Esther Austin – Ensuring young people in care and leaving care have access to employment opportunities</td>
<td>Ongoing project at the centre/local council. Guidelines published January 2002</td>
</tr>
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<td></td>
<td>• Demonstration. Make it Happen in Art projects</td>
<td>Barbara Herts/Lorraine Reid</td>
<td>Ongoing project</td>
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<td></td>
<td></td>
<td>Councils (Walsall, Brighton and Hove, Hertfordshire)/Barbara Herts/Sarah Blaquiere (Department for Media, Culture and Sports – DCMS)</td>
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<td></td>
<td>• Quality Protects 'Make it Happen' in Sport</td>
<td>Barbara Herts/DCMS</td>
<td>Ongoing project with DCMS and other Government departments</td>
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<tr>
<td>Looked After Children (Educational Attainment)</td>
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<td></td>
<td></td>
<td>Paul Jeff – To improve educational attainment for looked after young people</td>
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<td>Policy Area</td>
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<td>Lead Responsibility and Context</td>
<td>Timescales</td>
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<tr>
<td>A National Voice/First Key</td>
<td>• Development of national organisation by care experienced young people</td>
<td>Mark Burrows</td>
<td>Written consultation completed. In-depth study as part of project ongoing</td>
</tr>
<tr>
<td></td>
<td>• Development of CareZone. CareZone has been developed by the Who Cares? Trust as an interactive online community for looked after children.</td>
<td>Steve Kingdom</td>
<td>Ongoing</td>
</tr>
<tr>
<td></td>
<td>• National Foundation for Educational Research project on characteristics of looked after children who achieve (or do not achieve) GCSEs in year 11. Project involves individual case studies and interviews.</td>
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<tr>
<td>Youth Justice, Crime and Children Looked After</td>
<td>• Social Exclusion Unit conducted an extensive written consultation (<em>It's your Future – Tell us what you want</em>) with looked after children as part of their project on raising educational attainment. Consultation conducted via ‘Who Cares Trust’</td>
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<td>Improve participation through access to modern information technology</td>
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<tr>
<td></td>
<td>• Development of CareZone. CareZone has been developed by the Who Cares? Trust as an interactive online community for looked after children.</td>
<td>Steve Kingdom</td>
<td>Expected completion in July</td>
</tr>
<tr>
<td></td>
<td>• Development of national organisation by care experienced young people</td>
<td>Mark Burrows</td>
<td>Pilots in 2002/03</td>
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<td>Policy Area</td>
<td>Milestones</td>
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<tr>
<td>Involvement of Children and Young People in Social Services – children's services inspections</td>
<td>• Creation of young people Listening and Responding Teams in partnership with voluntary organisations</td>
<td>Lynda Hoare SSI/Christine Osborne (The Children's Society in partnership with Barnados, National Children's Bureau, First Key and Save the Children).</td>
<td>12 Inspections took place in 2000/2002</td>
</tr>
</tbody>
</table>
| Children's National Service Framework                                      | • External Working groups in the following areas have been established:  
  – Children Needing Acute/Hospital Services  
  – Healthy Children and Young People  
  – Children in Need  
  – Mental Health & Psychological Well-Being of Children and Young People  
  – Disabled Children  
  – Maternity  
  – Long term medical conditions                                                                                                                   | Claire Phillips (Overall)  
  Barbara Herts (for participation)  
The Children's NSF will produce national standards across the NHS and social services for children (including maternity services). The new standards will help to ensure that children and young people are able to access appropriate services at the right time and that they can take an active part in making decisions about their care.                                                                 | Acute services published December 2002  
  Remaining standards to be confirmed  
  Later in 2002, we will be organising national workshop events for children and young people  
  Roadshows from October 2002/early part of 2003                                                                                               |
| Quality Protects Disabled Children's Reference Group                       | • Production of the 'Ask Us' CD ROM  
  • Production of the 'Ask Us' CD ROM Part 2’                                                                                                                                                    | Peter Smith  
  The Children's Society  
  (Margaret Hart)/Lynette Partington/Joseph Rowntree Foundation  
  The Children's Society  
  (Margaret Hart)/Lynette Partington/Department of Health (Peter Smith)                                                                                                                                  | Consultation mid 2000 to 2001. Published in June 2001  
  Consultation April 2001–June 2002 Published By Autumn 2002                                                                                                                                          |
| Prime Minister's Review of Adoption                                         | • To inform the policy development around the White Paper, the Team organised a series of meetings with the relevant stakeholders.                                                                                                             | David Holmes  
  Given that the White Paper is child-centred in its approach, it was vital to engage with children and young people during this policy development process.                                                                                       |                                                     |


### Adoption and Permanence TaskForce

The Adoption and Permanence Taskforce, launched in October 2000, works with councils to improve performance and to disseminate good practice.

- Consultation day organised by A National Voice involving 14 young people from all over England with varied experiences of adoption.
- Consultation with adoption service users is currently being offered as part of the development plans for councils in Phase 2 through a "Listening to You" project.

**Lead Responsibility and Context**

- **Mike Lauerman**
- 'Listening to You' is a current project being carried out by the lay members of the Adoption and Permanence TaskForce. The aim is to seek the views of users of local adoption services, including children and young people, which in turn will impact on performance improvement locally and also provide the councils with opinions on their general efficacy on consulting their service users.

**Timescales**

- Event held on 1st December 2001
- Between May and October 2002

### Public Health and Health Promotion

**Inequalities/Inequalities and Public Health Task Force**

The work on Health inequalities has revolved around the setting and Health implementation of the first-ever national health inequalities targets announced in February 2001, following a commitment in *The NHS Plan*.

- **Tackling Health Inequalities: A Plan for Delivery** (to be published later 2002) – this builds on the *Tackling Health Inequalities* consultation about how to implement the national targets, and the cross cutting spending review on health inequalities. Work with children and young people have been a key theme in this developing work.

**Lead Responsibility and Context**

- **Ray Earwicker (Task Force)/Anne Griffin (other issues)**
- Health inequalities is a key priority for Public Health Group and its individual programmes. Follow up action and promotion of plan – under discussion Cross government monitoring arrangements – to be finalised.

**Timescales**

- Publication of *Tackling Health Inequalities*:
  - Responses to the consultation – Spring 2002 before the entry on the delivery plan. They are two separate documents
### Policy Area

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<tr>
<th>Milestones</th>
<th>Lead Responsibility and Context</th>
<th>Timescales</th>
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<tbody>
<tr>
<td>• There are key milestones in related policy areas – in particular on smoking, diet and nutrition, teenage pregnancy, substance misuse and healthy schools. The details of these milestones are listed under separate policy headings.</td>
<td>Imogen Sharp</td>
<td>First shown on Trouble TV Twice Daily (Weekdays only) for a period of 4 mths ending on 4 March 2002. Project ongoing. Trouble TV have option to show films for a further 4 mths from July – to be confirmed</td>
</tr>
<tr>
<td>• Under the Smoke Screen youth initiative, recruited five groups of young people (aged 11–18) to produce films designed to encourage young people to think about the dangers of smoking.</td>
<td>Joanne Butcher</td>
<td>Activity planned and delivered May-Sept 2002</td>
</tr>
<tr>
<td><strong>1. Sexual Health and Substance Misuse Cluster</strong></td>
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<tr>
<td><strong>Cross Cluster work</strong></td>
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<tr>
<td>• a) A programme of activity to support children, young people and parent/carer’s participation in the development of standards and service models (agreed with the Children’s NSF team) for universal services for children and young people</td>
<td>Joanne Butcher</td>
<td>Develop strategy November 2002</td>
</tr>
<tr>
<td>• b) Developing strategy for children and young people’s participation in the development of sexual health and substance misuse policy and practice. This will complement and build on work listed below.</td>
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<tr>
<td>Policy Area</td>
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</table>
| 2. Teenage Pregnancy | • a) Sex Education Forum and Drug Education Forum at the National Children’s Bureau (NCB) are funded through the section 64 grants scheme to run the SADLE (Sex and Drugs the Links Explored) project. This 2 year project aims to support practitioners in making the links between sex and drugs in the class room and other settings. A young people’s advisory group is supporting the project and will advise on consultations with children and young people.  
  • b) Young People’s Involvement and Consultation project (YPIC) – National Children’s Bureau. Outputs include:  
  • Development of a Young People’s Forum (including young mothers) of 12 young people  
  • A programme of targeted consultations including a residential consultation with children and young people  
  • Piloting a training event for local and regional teenage pregnancy co-ordinators on good practice in participation work.  
  • Termly bulletin | Joanne Butcher                                                                                                                          | Young People’s Forum set up in 2001 and will continue in 2002  
<p>|                                                                                                                                                                                                                                                                   | 9 consultations ran in 2001/02 and further consultations will be planned in 2002/03 | 1st bulletin to be developed in summer 2002 |</p>
<table>
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<th>Policy Area</th>
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<th>Lead Responsibility and Context</th>
<th>Timescales</th>
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<tbody>
<tr>
<td>3. Substance Misuse</td>
<td>a) Fund Drug Education Forum at the National Children's Bureau (NCB) through the section 64 grants scheme to run projects which include children's participation. Drug Education with children in public care (DEPC) Solvent Misuse Network And dissemination project (SMNDP)</td>
<td>Joanne Butcher</td>
<td>Apr 01 – Mar 03</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Drug Education with children in Public Care (DEPC) – participation activities with looked after children to find out their views and experiences with regard to drug education and support. 4 locally designed and led events to develop drug education and support that involve children and young people.</td>
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<td>• (SMNDP) – includes participation work with children and young people to involve them in policy and practice development with regard to solvents and volatile substance abuse (VSA).</td>
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<tr>
<td></td>
<td></td>
<td>• Develop and support children and young people’s participation in local and national drug policy.</td>
<td>2002/03 – 2003/04</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• To ensure participation of children and young people in any review of alcohol misuse prevention and treatment measures for children and young people.</td>
<td>Timescales to be confirmed</td>
</tr>
<tr>
<td>4. Alcohol Misuse</td>
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<tr>
<td>National School Fruit Scheme</td>
<td>By 2004 all school children aged 4–6 will be entitled to a free piece of fruit each school day.</td>
<td>Imogen Sharp</td>
<td></td>
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<tr>
<td></td>
<td>• The scheme provides free fruit each day to 80,000 children in 548 schools based in 27 areas (mostly Health Action Zones).</td>
<td>The scheme is now being scaled up to include all 4 to 6 year olds in the West Midlands region.</td>
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<td>By the end of Summer Term 2002 the Scheme should reach over 300,000 children in over 2,000 schools.</td>
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<td>The next region to be scaled up is London, starting in Autumn Term 2002. Further regions will come on stream so that by 2004, the scheme will be up and running in the whole of England</td>
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<tr>
<td>Policy Area</td>
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<td>Timescales</td>
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</tr>
<tr>
<td>Healthy Schools and Young People's Policy</td>
<td>• Pupil involvement in National Healthy School Standard</td>
<td>Joe Monks</td>
<td>Ongoing</td>
</tr>
<tr>
<td></td>
<td>• Pupil involvement in design of web-site &quot;Wired for Health&quot;</td>
<td>Joe Monks</td>
<td>As above</td>
</tr>
<tr>
<td></td>
<td>• Young People's Health Network</td>
<td>Joe Monks</td>
<td>Ongoing</td>
</tr>
<tr>
<td>NHS</td>
<td>Benchmark for change will be included in the NSF delivery strategy</td>
<td>Alan Bell</td>
<td>Milestones will be included in delivery strategy</td>
</tr>
<tr>
<td></td>
<td>• Web-site for children and young people which will give them feedback opportunities.</td>
<td>Jane Varity</td>
<td>The ten-year implementation programme for the NSF starts in April 2003. The pace of change will take account of the resources that will be available.</td>
</tr>
<tr>
<td></td>
<td>• Children and young people's conferences that will obtain views on services received and ideas for the future</td>
<td>Anne Marie Campbell</td>
<td>First conference on 6th July 2002 and second in September 2002</td>
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<tr>
<td>Diabetes National Service Framework</td>
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<td>(standards published 2001 delivery strategy to follow later in 2002)</td>
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<td>The aims of the Diabetes NSF are to improve health outcomes for people (including children) with diabetes by raising the quality of services and reducing variations between them.</td>
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<td>Renal National Service Framework</td>
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<td>The aims of the Renal National Service Framework are to improve health outcomes for people (including children) with end stage renal failure by raising the quality of services and reducing variations between them.</td>
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<tr>
<td>Patient Surveys</td>
<td>• Expand Acute Inpatients survey to cover children this Autumn</td>
<td>Richard Bond</td>
<td>Ongoing</td>
</tr>
<tr>
<td></td>
<td>• Develop Outpatients survey this Autumn, to include children's services</td>
<td></td>
<td>Subject to agreement by Ministers on overall patients survey programme</td>
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<tr>
<td></td>
<td>• Ongoing work to ensure methodology reflects the patient group</td>
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</table>
### Complaints
NHS complaints procedure allows people to raise concerns they have about the service they have received from the NHS.

- Consult all clients groups on NHS complaints procedure which includes children
- Developments of Independent Complaints Advocacy Service – Independent complaints

**Lead Responsibility and Context**

- Barbara Jordens-Harris

**Timescales**

- Ongoing

### Paediatric & Congenital Cardiac Services Review
Visits took place to 14 heart units across the country and a conference was held in September 2001

**Milestones**

- Visits took place to 14 heart units across the country and a conference was held in September 2001

**Lead Responsibility and Context**

- Michelle Armstrong/Sophie Rees

**Timescales**

- September 2001 and November 2001. Visits to Units in conjunction with Children's Heart Federation

### Patient and Public Involvement
Increase opportunities for people to influence decisions and to bring about change by equipping them with the skills to be able to do this by changing decision making processes and by promoting individuals’ rights and responsibilities in the NHS.

**Lead Responsibility**

- Lesley Hilton

**Commission for Patient and Public involvement established in 2003**

### Patient Advice and Liaison Service (PALS)
NHS Plan commitment to establish PALS in every NHS Trust and Primary Care Trust from April 2002

- PALS, where possible, will resolve problems and concerns quickly before they become more serious and will provide information to patients, carers and families and put patients in contact with relevant voluntary organisations and support groups.

**Lead Responsibility**

- Lesley Hilton

**Timescales**

- In 2002/03 financial year, funding for PALS comes out of baseline allocation to health authorities (10m for implementation, operation and to support the development of PALS).
### Patients’ Forums –
Subject to legislation
Made up of patients/carers and local patient groups, they will represent the views of local communities to Trusts about the shape and quality of local health services.

- Subject to passage of the NHS Reform and Health Care Professions Bill they will be established in every trust (over 600)
  - They will inspect every aspect of care used by NHS patients. This will include new powers to inspect primary care and GP premises and NHS care provided by the independent sector.
  - Produce an annual report of its work and make their findings and reports available. These reports maybe published as part of the Trust’s Annual Patient Prospectus.
  - As part of their overall monitoring role they will monitor the quality of the PALS and to bring problems to the attention of the relevant Trust.

### Patients’ Forum Non Executive Directors
Forums will select one of their number to be put forward for appointment to Trust boards by the appointments commission

- Over 600 new voices for patients at the top of local NHS bodies
  - Patients’ Forums will also be able to co-opt a representative onto OSCs

<table>
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<th>Milestones</th>
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<td>Lesley Hilton</td>
<td>Spring 2003 – subject to legislation</td>
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<td>They will inspect every aspect of care used by NHS patients. This will include new powers to inspect primary care and GP premises and NHS care provided by the independent sector.</td>
<td><a href="mailto:lesley.hilton@example.com">Lesley Hilton</a></td>
<td>Resources subject to Comprehensive spending Review bid</td>
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| The Commission for Patient and Public Involvement in Health | • The Commission will set standards for Patients’ Forums and support their work through the provision of training, guidance and assistance.  
• Commission staff (based with PCT Patients’ Forums) will find out from local communities issues of concern and ensure everyone gets the opportunity to take part in local consultation exercises. They will also commission and provide independent complaints advocacy services. | Meredith Vivian and Anna McDevitt  
The Commission will produce reports on the effectiveness of patient and public involvement in health, and bring issues of concern to the attention of relevant bodies such as CHI, NPSA, the police and professional regulatory bodies. It will also conduct annual reviews of issues of concern on a national level or of national significance identified in Patients’ Forum annual report. | To be established 2003 – subject to legislation |
| Overview and Scrutiny Committees                       | • When Section 7 of the Health and Social Care Act is implemented in 2002, there will be a duty on the NHS to provide information to OSCs and a duty on the NHS to consult with OSCs on major changes to health services.  
• Chief Executives and senior managers will be required to attend | Meredith Vivian |
### Policy Area

**Independent Complaints Advocacy Services (ICAS)**

- Health and Social Care Act 2001 sets out a requirement on the Secretary of State to make arrangements for the provision of Independent Advocacy Services for people making complaints.
- ICAS are intended to give people who want to complain about the treatment and services they receive from the NHS, the support they need to do so.
- People will be able to get support from ICAS providers direct, through the CPPIH’s local networks, as well as via PALS.

**Your Guide to the NHS**

The ‘Guide’ makes clear what patients have a right to expect from the NHS and what is expected from patients. It introduces new ways to strengthen patient choice and the patient voice.

- The ‘Guide’ responds to the public’s requests for clearer information on how to get treatment and provides a practical and achievable guide such as waiting times for outpatients appointments and access to GP appointments.
- It also contains statements of the minimum standards which patients can expect and developments that the NHS will make.

### Milestones

- Elizabeth Dimond
- Lesley Hilton

### Lead Responsibility and Context

- ICAS starts on 1 April 2003 (assuming that 31 March is the Community Health Council abolition date)
- The bids for pilots are being asked for in 2002 June and will start in July
- Review expected 2002/03
### Policy Area

**Patient Prospectus**
A key part of the NHS Plan sets out policy on Patient Prospectus which is a publication containing the views of patients. This will be an annual publication and Primary Care Trusts will be responsible for its publication and delivery to every household in the area.

**NHS Duty to make arrangements to consult and involve**
All NHS organisations will need to demonstrate how they involved and consulted their patients and public on their service developments and provision including proposals for any change in service provision.

**NHS Estates to ensure the Built Environment responds to the needs of Children and Young People**
Children and young people will have a chance to tell NHS Estates what they want to have in these buildings so that they may feel as comfortable and safe while receiving treatment.

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<td>• Information to every member of the community setting out what local people think of local services and how they perform.</td>
<td>Lesley Hilton</td>
<td>Guidance July 2002, publication and distribution Autumn 2002</td>
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<td>• NHS organisations demonstrating their processes for involving and consulting patients and public (including hard to reach groups) in ongoing NHS planning and provision.</td>
<td>Meredith Vivian</td>
<td>Policy and Practice guidance published for NHS organisations in the last quarter of 2002 with commencement order in early 2003</td>
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<td>• NHS organisations working through local compacts with Voluntary Sector organisations.</td>
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<td>• Developing a friendly healthcare environment for children and young people (Making places where children and young people receive treatment nicer for them)</td>
<td>June Lancaster</td>
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### Policy Area

- Guidance for the building environment to support the 5 elements of the Children's NSF (Timetable which tells people when books will be written to explain the NSF 5 main parts)
- Programme developed jointly with the Children's NSF team to identify 10 key principals of any building design which will meet the needs of Children.
- Developing publication for Cardiothoracic services for Children and Young People undergoing treatment for heart surgery.

### Lead Responsibility and Context

- **June Lancaster**

### Timescales

- July for acute module; October for Mental Health module and the rest will follow
- Begins July 2002
- Ongoing