

Insight Report: Children and Young people

Understanding the experiences, needs and preferences of children and young people, their carers / family / friends, and staff December 2022 V2.5

1. What is the purpose of this report?

This paper summarises what we know about the children and young people population in Leeds. This includes the experiences, needs and preferences of:

- Children and young people
- Their carers, family, and friends
- Staff working with children and young people

Specifically, this report:

- Sets out sources of insight that relates to this population
- Summarises the key experience themes for this population
- Highlights gaps in understanding and areas for development
- Outlines next steps

This report is written by the <u>Leeds Health and Care Partnership</u> with the support of the <u>Leeds People's Voices Partnership</u>. We have worked together (co-produced) with the key partners outlined in <u>Appendix A</u>. It is intended to support organisations in Leeds to put people's voice at the heart of decision-making. It is a public document that will be of interest to third sector organisations, health and care services and children and young people. The paper is a review of existing insight and is not an academic research study.

2. How do we support children and young people in Leeds?

Our ambition is for Leeds to be the best city in the UK for children and young people to grow up in.

To help us make this happen, we are bringing together senior people from the organisations working with children and young people in Leeds. Representatives from the NHS, Leeds City Council, Public Health, as well as the voluntary sector, make up the Children and Young People's Population Board. The board will work together to create better health and social care support for young people and their families.

The board is responsible for all children and young people living in Leeds, under the age of 18. The exception to this are pregnant people and infants, who's care is covered by the maternity board.

You can find out more about our work with children and young people by reading the Children and Young People's Plan 2018-2023 here: <u>Leeds Children and Young People's</u> <u>Plan 2018-2023</u>



3. Outcomes for children and young people's care in Leeds

The aims of the children and young people's population board work in Leeds is to make sure:

- Children are safe from harm.
- Children do well at all levels of learning and have skills for life.
- Children in Leeds are healthy.
- Children are happy and have fun.
- Children and young people in Leeds are active citizens who feel they have a voice and influence.

These are our identified outcomes. By setting these clear goals, that are focused on how services impact the people they serve, the board is able to better track whether we're really doing the right thing for the people using these services. The full framework can be seen in <u>Appendix B</u>.



4. What are the key themes identified by the report?

The insight review highlights a number of key themes:

- Children and young people tell us they want to know how and where to get support for their mental health and wellbeing if they need it. (Information)
- Children and young people tell us they want safe spaces to play, hang out and have fun to continue to be healthy. (environment)
- Children and young people tell us they want to be involved in decisions that affect their lives, express their views and feel heard. (Involvement in care, involvement in service development)
- Children and young people tell us they want to be accepted for who they are. This means not experiencing bullying and discrimination. (**Person-centered**)
- Children and young people tell us that more action needs to take place to protect the environment from climate change (Environment, wider determinants – climate change)
- Children and young people tell us that being able to travel around the city safely and easily is important to them. (Travel and transport, wider determinants safety)
- Children and young people tell us they want to know about different things to do and places to go across the city. They enjoy different cultural experiences including art, music, sport and film. (Information, wider determinants – social activities / entertainment)
- Children and young people tell us that they are worried about the impact of poverty and want to see more support for families experiencing poverty (health inequality and wider determinants income)
- Children and young people tell us it is important to have the support and information they need to make healthy choices. This includes information about opportunities to take part in regular physical activities. (Information, Choice, wider determinants exercise)
- Children and young people tell us it is important that their education takes place in settings that meet their learning needs (Environment, wider determinants – education and health inequality)
- Children and young people tell us they would like to take part in a range of work experience, employment and volunteering opportunities. (Wider determinants employment, choice)

This insight should be considered alongside city-wide cross-cutting themes available on the Leeds Health and Care Partnership website. It is important to note that the quality of the insight in Leeds is variable. While we work as a city to address this variation we will include relevant national and international data on children and young people's experience of health and social care.



5. Insight review

We are committed to starting with what we already know about people's experience, needs and preferences. This section of the report outlines insight work undertaken over the last four years and highlights key themes as identified in <u>Appendix C</u>.

| Source | Publication | No of participants and demographic s | Date | Key themes relating to children and young people's experience |
|--|---|---|------|---|
| The Leeds City Council Voice and Influence Team | 12 wishes <u>12 wishes</u> <u>(leeds.gov.uk</u> <u>)</u> | Approx. 80,000 young people over 3 years. Details of demographics aren't available | 2022 | Child Friendly Leeds has reviewed the feedback from local and city-wide consultations, surveys, and ballots over the last 3 years, capturing the views of 80,000 children and young people in the city to identify the current top issues and priorities. These are the '12 wishes' identified by the work: Children and young people tell us they want to know how and where to get support for their mental health and wellbeing if they need it. (Information) Children and young people tell us they want safe spaces to play, hang out and have fun to continue to be healthy. (environment) Children and young people tell us they want to be involved in decisions that affect their lives, express their views and feel heard. (Involvement in care, involvement in service development) Children and young people tell us they want to be accepted for who they are. This means not experiencing bullying and discrimination. (Person-centered) Children and young people tell us that more action needs to take place to protect the environment from climate change (Environment, wider determinants – climate change) Children and young people tell us that being able to travel around the city safely and easily is important to them. (Travel and transport, wider determinants - safety) |



| Source | Publication | No of participants and demographic s | Date | Key themes relating to children and young people's experience |
|--|--|---|------|---|
| | | | | Children and young people tell us they want to know about different things to do and places to go across the city. They enjoy different cultural experiences including art, music, sport and film. (Information, wider determinants – social activities / entertainment) Children and young people tell us that they are worried about the impact of poverty and want to see more support for families experiencing poverty (health inequality and wider determinants – income) Children and young people tell us it is important to have the support and information they need to make healthy choices. This includes information about opportunities to take part in regular physical activities. (Information, Choice, wider determinants - exercise) Children and young people tell us it is important that their education takes place in settings that meet their learning needs (Environment, wider determinants – education and health inequality) Children and young people tell us they would like to take part in a range of work experience, employment and volunteering opportunities. (Wider determinants - employment, choice) |
| Leeds local offer (Leeds city council) | Make Your Mark Report <u>2020-v2-</u> <u>Make-Your-</u> <u>Mark-</u> | Brief demographic info in national report | 2022 | Make Your Mark is the largest youth ballot for 11 to 18 year old's in the UK. Young people have their say and begin their democratic journey by voting on the issues they want to change. For the young people of Leeds Health and Wellbeing was the most voted for issues with 1,125 votes |



| Source | Publication | No of participants and demographic s | Date | Key themes relating to children and young people's experience |
|---|--|--|---------------|---|
| <u>Make Your Mark</u> 2022 (cloudinary.com) | Results-with- Infographics. pdf (netdna- ssl.com) | | | |
| Leeds City Council | My healthy school survey 20211105_Fi nal_Headline _Report_202 0-21_V1.pdf (airdrive- secure.s3- eu-west- 1.amazonaw s.com | 10,238 responses from 101 schools and education settings Some demographic data is collected in the raw data – but this includes national and Leeds | 2020- 2021 | My healthy schools survey has 10,238 responses from 101 schools and education settings. The key data from this report is numeral data on how many children and young people are carrying out healthy activities in their lives. However, all year groups, except Year 11, recorded their worst results for pupils feeling 'stressed or anxious every day or most days' Overall data increasing from 19% in 2009-10 to 30% this year for secondary school pupils. Primary pupils also reported increases of stress from 13% to 27% (7% increase from 2019-20) |



| Source | Publication | No of participants and demographic s | Date | Key themes relating to children and young people's experience |
|--------|---|--|------|---|
| | | <u>My Health My</u> <u>School</u> <u>Survey - Data</u> <u>Mill North</u> – please follow the download link 2020/21 for raw data | | |
| Health | Youthwatch <u>Young</u> <u>women's</u> <u>mental health</u> <u>event - Your</u> <u>Healthwatch</u> <u>Leeds</u> | 120 individuals, made up of 51 young people, 10 parents and 59 demographics aren't available | 2020 | Key themes are: Communications - Children and young people told us that they want more mental health awareness raising across a variety of media outlets, including social media. Choice, resource - Children and young people told us they would like to see more creative community approaches using different resources in the city such as churches, leisure centers. Resources - Parent / carer told us they would like more support for themselves to support their child's mental health needs, especially around how to communicate with their child. Joint working - A joined up approach between services was seen as essential and information for families on how to successfully navigate transition. Choice -Children and young people told us they would like options of an online offer rather than face-to-face. |



| Source | Publication | No of participants and demographic s | Date | Key themes relating to children and young people's experience |
|-------------|--|--|------|--|
| Healthwatch | Big Leeds Chat report big-chat- leeds-2022- RevC.pdf (healthwatchl eeds.co.uk) | demographics aren't available | 2021 | The key themes are: Wider determinants (Money, transport) - children, young people and families told us they would like more positive and accessible activities to do in the city Resource - People told us they want Leeds city to be a 'Think Family' city this means going beyond statutory services Resources, choice - Parents told us that it is hard to find evening activities for families especially under 5's Involvement in service development - Children and young people told us that they want more opportunities to share their voice. Choice- Young people told us that they want to interact with professionals in person, rather than remotely. Timely care - Children and young people told us they want easier access to mental health support services Timely care , Wider determinants (schools) - Children and young people told us they want to see earlier mental health awareness raising in schools at a younger age |



Additional Reading

- NHS England » Children and young people
- NICE impact children and young people
- Learning and Development Strategy | Leeds Safeguarding Children Partnership (leedsscp.org.uk)
- Leeds Children and Young People UTLA | Leeds | InstantAtlas Reports



6. Inequalities Review

We are committed to tacking health inequalities in Leeds. Understanding the experiences, needs and preferences of people with protected characteristics is essential in our work. This section of the report outlines our understanding of how children and young people's care is experienced by people with protected characteristics (as outlined in the Equality Act 2010 – <u>Appendix D</u>).

Please note that we are aware that the terminology used in relation to the recognition of a person's identity may depend on the context of its use. Some people may define some terms differently to us. We have tried to use terminology that is generally accepted. Please do get in touch if you would like to discuss this further.

| Protected Characteristic | Insight |
|--------------------------------|--|
| Age | We have been unable to source any local evidence relating to the experience of people of age |
| Disability | Children and young people told us it is important they are in learning settings that meet their needs. Including those with a learning needs or a disability. 12 wishes, 2022. |
| Gender (sex) | We have been unable to source any local evidence relating to the experience of people of different genders |
| Gender reassignment | We have been unable to source any local evidence relating to the experience of people who have had gender reassignment |
| Marriage and civil partnership | At present, we have been unable to source any local evidence relating to marriage and civil partnership. |
| Pregnancy and maternity | We have been unable to source any local evidence relating to the experience of people who are pregnant or have recently given birth |
| Race | We have been unable to source any local evidence relating to the experience of people who have a different race |
| Religion or belief | We have been unable to source any local evidence relating to the experience of people who have different religions and beliefs |
| Sexual orientation | A gap was identified around the provision of peer support groups for young people, particularly more vulnerable young people such as those with learning or physical disabilities, LGBTQ+, racial/ethnic groups – young womens mental health event, healthwatch leeds 2020 |
| Homelessness | We have been unable to source any local evidence relating to the experience of homeless people |



| Deprivation | We have been unable to source any local evidence relating to the experience of deprivation |
|----------------------|--|
| Carers | Parent / carer told us they would like more support from themselves to support their child's mental health needs. Healthwatch Leeds 2020 |
| Access to digital | We have been unable to source any local evidence relating to the experience of people who have access to digital |
| Served in the forces | We have been unable to source any local evidence relating to the experience of people who have served in the forces |



7. Gaps and considerations – are there any gaps in our evidence or things we need to consider?

This section explores gaps in our insight and suggests areas that may require further investigation.

Gaps identified in the report:

The follow groups of young people, we haven't heard from:

- Homelessness young people
- Experience in the care system

Another gap is the collection of equality and monitoring data for Children and young people

Additional gaps and considerations identified by stakeholders



8. Next steps – What happens next?

We would like to outline our next steps to demonstrate how this insight report will be used to improve children and young people's care in Leeds.

a. Add the report to the Leeds Health and Care Partnership website

We will add the report to our website and use this platform to demonstrate how we are responding to the findings in the report.

b. Hold a workshop with key partners in the winter

We will meet with key stakeholders in the winter to

- Describe our children and young people's work in Leeds
- Outline and agree the findings of this report
- Identify and agree additional gaps
- Plan involvement work to understand the gaps in our knowledge
- Coproduce an approach to involving the public in shaping children and young people's services in Leeds

c. Explore how we feedback our response to this report

We will work with partners to feedback to the public on how this insight is helping to shape local services.



Appendix A: Key partners

It is essential that we work with key partners when we produce insight reports. This helps us capture a true reflection of people's experience and assures us that our approach to insight is robust. To create this insight report on children and young people's care, we are working with the following key stakeholders:

| Name | Organisation |
|----------------------|--|
| Ruth Burnett | Leeds Community Healthcare Trust |
| Hannah Davies | Healthwatch Leeds |
| Louise Forrest | GIPSIL (3rd Sector Rep) |
| Julie Longworth | Leeds City Council |
| Emily Griffiths | Leeds ICB |
| Tamsin Mohans | West Yorkshire police |
| | Leeds York foundation partnership trust |
| Suzanne Abrahams | Leeds Teaching Hospital foundation trust |
| Kathryn Ingold | Public health |
| Jayne Bathgate-Roche | ICB in Leeds |
| Gaynor Connor | General practice rep |
| Helen Haywood | ICB in Leeds? |
| Mike Richards | |

Third sector and public representatives

| Name | Organisations | |
|----------------|------------------------|--|
| | Health for all | |
| Mwesi Magumba | LTHT youth forum | |
| Chris lake | LCH youth board | |
| Anna Crossland | Young lives Leeds | |
| Narwin Nijhum | Project support | |
| Harriet wright | Youth watch | |
| Liz Neil | Mindmate (common room) | |
| Laura Minney | Barca | |
| Karen cruise | Flourished minds | |



| Nicholas Lee | LYPFT |
|------------------|-------------------|
| Karen | PAFRAS |
| Abdullah Adekola | Young black minds |
| Ian Rodley | Dazl |
| Olivia Uttley | Kooth |

Networks and partnerships

| Contact | Group |
|------------------|-----------------------------|
| Rebecca | Voice and influence network |
| Charlotte Hanson | CYP city comms group |



Appendix B: Children and young people's Outcomes Framework

| Children and Young People Population Outcome Framework | | | | | | |
|--|---|---|--|---|---|--|
| | | Link t | o Healthy Leeds Plan Strategic Indicators | 4 | | |
| Health Outcome Ambitions Improve infant mortality Reduce weight in 10-11 year olds Improve healthy life expectancy Reduce potential years life lost avoidable causes and rates of early death | | r olds ncy | System Activity Metrics Increase expenditure on the 3 rd Sector Increase proportion of people being cared for in primary and community services Reduce rate of growth in non-elective bed days and A&E attendances | | Improve the e - Primary car - Community - Hospital set | services |
| | Outcome | Outcome Measure | | Process Measu | ıre | |
| 1 | Children are safe from harm | Number of children looked after (split by in Life expectancy of children looked after by | | Increasing the p care | proportion of pla | anned care versus unplanned |
| 2 | Children do well at all levels of learning and have skills for life | GCSEs Children and young people have the abilit | port that they are able to cope with feeling? | Waiting times fo children in Leed | | |
| 3 | Children in Leeds are healthy | Percentage of children in Leeds are a heat Percentage of children in Leeds are a heat Life expectancy at birth males Life expectancy at birth females Increase the percentage of Young people | althy weight at age 11 | (e.g. healthy we | eight, smoking, children with two | ity with 2 or more risk factors drug use, alcohol use, etc etc) o or more protective factors from |
| 4 | Children are happy and have fun | Percentage of primary school children in l day/most days Percentage of secondary school children day/most days | | time, in the right access to service | t place and by t ces using health | ceive the right support at the right the right person (increased in needs assessment versus and service waiting times). |
| 5 | Children and young people in Leeds are active citizens who feel they have a voice and influence | Children and young people feel that any s been heard by adults and have influenced area/community | | Percentage of c improving their | | ve shared their ideas about ly |



Children and young people population outcomes framework

Link to Healthy Leeds Plan strategic indicators:

- Health outcome ambitions
 - Improve infant mortality
 - Reduce weight in 10-11 year olds
 - Improve healthy life expectancy
 - Reduce potential years life lost avoidable causes and rates of early death

• System activity metrics

- Increase expenditure on the 3rd Sector
- Increase proportion of people being cared for in primary and community services
- Reduce rate of growth in non-elective bed days and A&E attendances

• Quality experiences measures

- Improve the experience of those using:
 - Primary care services
 - Community services
 - Hospital services
- Person-centred co-ordinated experience.

| | Outcome | Outcome measure | Process measure | |
|----|--|--|---|--|
| 1. | Children are safe from | Number of children looked after (split by in/out of area) | Increasing the proportion of planned care versus | |
| | harm | Life expectancy of children looked after by Local Care Partnership | unplanned care | |
| 2. | Children do well at all levels of learning and have skills for life | Percentage of children who live in Leeds who leave education at 16 with fewer than 5 GCSEs Children and young people have the ability to take care of themself and others percentage of children who are able to report that they are able to cope with feeling? Happy – Confident - Sad or upset - Bad tempered or angry - Stressed or anxious Lonely | Waiting times for all elective services (days missed of school for children in Leeds due to ill health) | |
| 3. | Children in Leeds are healthy | Percentage of children in Leeds are a healthy weight at age 5 Percentage of children in Leeds are a healthy weight at age 11 Life expectancy at birth males Life expectancy at birth females Increase the percentage of Young people that move into the Healthy Population | Percentage of children in the city with 2 or more risk factors (e.g. healthy weight, smoking, drug use, alcohol use, etc etc) Percentage of children with two or more protective factors from assets in their area | |
| 4. | Children are happy and have fun | Percentage of primary school children in Leeds who say they are happy every day / most days | Children and young people receive the right support at the right time, in the right place | |



| | Outcome | Outcome measure | Process measure |
|----|--------------|---|-------------------------------|
| | | Percentage of secondary school children in | and by the right person |
| | | Leeds who say they are happy every day / most | (increased access to services |
| | | days | using health needs |
| | | | assessment versus equity of |
| | | | access assessment, and |
| | | | service waiting times) |
| 5. | Children and | Children and young people feel that any | Percentage of children who |
| | young | suggestions/ideas they have shared have been | have shared their ideas about |
| | people in | heard by adults and have influenced change in | improving their local area or |
| | Leeds are | your school, local area/community | city |
| | active | | |
| | citizens who | | |
| | feel they | | |
| | have a voice | | |
| | and | | |
| | influence | | |



Appendix C: Involvement themes Sept 2023 V2

The table below outlines key themes used in our involvement and insight work. The list is not exhaustive and additional themes may be identified in specific populations.

| Theme | Description | Examples |
|----------------|--|-----------------------------------|
| Choice | Being able to choose how, where and | People report wanting to access |
| | when people access care. Being able to | the service as a walk-in patient. |
| | choose whether to access services in | People report not being able to |
| | person or digitally | see the GP of their choice |
| Clinical | Services provide high quality clinical | People told us their pain was |
| treatment | care | managed well |
| Communication | Clear communication and discussion | People report that their |
| | between professionals and patients/ | treatment was explained in a |
| | carers about services, conditions and | way that they understood and |
| | treatment. Two-way communication | they could ask questions about |
| | | the information they were given |
| Covid-19 | Services that are mindful of the impact | People report the service not |
| | of Covid-19 | being accessible during the |
| | | pandemic |
| Environment | Services are provided in a place that is | People report that the waiting |
| | easy to access, private, clean and safe | area was dirty |
| | and is a way that is environmentally | |
| | friendly and reduces pollution | |
| Health | Services are provided in a way that meet | Older people report not being |
| inequality | the needs of communities who | able to access the service |
| | experience the greatest health | digitally |
| | inequalities. | |
| Information | Provision of accessible information | People report that the leaflet |
| | about conditions and services (leaflets, | about their service was |
| | posters, digital). One-way | complicated and used terms |
| | communication. | they did not understand. |
| Involvement in | Involvement of people in individual care | People told us they were not |
| care | planning and decision-making. | asked about their needs and |
| | | preferences |
| Involvement in | Involvement of people in service | People told us that they were |
| service | development. Having the opportunity to | given an opportunity to |
| development | share views about services and staff. | feedback about the service |
| | | using the friends and family test |
| Joint working | Care is coordinated and delivered within | People report that their GP was |
| | and between services in a seamless and | not aware that they had been |
| Dereen control | integrated way | admitted to hospital |
| Person centred | Receiving individual care that doesn't | People report that their relative |
| | make assumptions about people's | died in the place they wanted |
| | needs. Being treated with dignity, | |
| | respect, care, empathy and compassion. | |



| | Respecting people's choices, views and | | |
|---------------|---|-----------------------------------|--|
| | decisions | | |
| | | | |
| Resources | Staff, patients and their | Family reported that adaptions | |
| | carers/family/friends have the resources | to the house took a long time to | |
| | and support they need | be made | |
| Satisfaction | Services are generally satisfactory | Most people told us that they | |
| | | were very happy with the | |
| | | service. | |
| Timely care | Provision of care and appointments in a | People report waiting a long | |
| | timely manner | time to get an appointment | |
| Workforce | Confidence that there are enough of the | People raised concerns that the | |
| | right staff to deliver high quality, timely | ward was busy because there | |
| | care | were not enough staff | |
| Transport and | Services are provided in a place that is | People report poor local | |
| travel | easy to access by car and public | transport links | |
| | transport. Services are located in a | People report good access to | |
| | place where it is easy to park. | parking | |
| Wider | Services and professionals are sensitive | People told us that their housing | |
| determinants | to the wider determinants of health such | had a negative impact on their | |
| | as housing | breathing | |



Appendix D: Protected characteristics (Equality and Human Rights Commission 2016)

- **1. Age -** Where this is referred to, it refers to a person belonging to a particular age (for example 32 year olds) or range of ages (for example 18 to 30 year olds).
- 2. Disability A person has a disability if she or he has a physical or mental impairment which has a substantial and long-term adverse effect on that person's ability to carry out normal day-to-day activities.
- 3. Gender (Sex) A man or a woman.
- 4. Gender reassignment The process of transitioning from one gender to another.
- 5. Marriage and civil partnership Marriage is no longer restricted to a union between a man and a woman but now includes a marriage between a same-sex couple. [1] Same-sex couples can also have their relationships legally recognised as 'civil partnerships'. Civil partners must not be treated less favourably than married couples (except where permitted by the Equality Act).
- 6. Pregnancy and maternity Pregnancy is the condition of being pregnant or expecting a baby. Maternity refers to the period after the birth, and is linked to maternity leave in the employment context. In the non-work context, protection against maternity discrimination is for 26 weeks after giving birth, and this includes treating a woman unfavourably because she is breastfeeding.
- 7. Race Refers to the protected characteristic of Race. It refers to a group of people defined by their race, colour, and nationality (including citizenship) ethnic or national origins.
- 8. Religion or belief Religion has the meaning usually given to it but belief includes religious and philosophical beliefs including lack of belief (such as Atheism). Generally, a belief should affect your life choices or the way you live for it to be included in the definition.
- **9. Sexual orientation -** Whether a person's sexual attraction is towards their own sex, the opposite sex or to both sexes.

Other characteristics

Other protected characteristics identified by the ICB in Leeds include:

- Homelessness anyone without their own home
- **Deprivation** anyone lacking material benefits considered to be basic necessities in a society
- **Carers** anyone who cares, unpaid, for a family member or friend who due to illness, disability, a mental health problem or an addiction
- Access to digital anyone lacking the digital access and skills which are essential to enabling people to fully participate in an increasingly digital society
- Served in the forces anyone who has served in the UK armed forces