



Young People and Parental Engagement Service Report

March 2015

INTRODUCTION

This report is a summary of the work carried out by Worcestershire Council for Voluntary Youth Services (WCVYS) for Healthwatch Worcestershire as part of the Young People and Parental Engagement Service 2014-15.

It covers three areas of work:

- A. Mapping of current forums used by health and social care networks, and independent forums and networks for engaging with young people and parents of children
- B. Engagement, feedback and issues from young people and parents of children about health and social care services
- C. Engagement model recommendations

A. ENGAGEMENT AND MAPPING OF CURRENT FORUMS

1. Background and Method

Before looking at an engagement model, it was important to find out what forums and networks already exist for engagement with young people and parents and what others are doing. Health and social care services, practitioners, commissioners, voluntary and community organisations across Worcestershire were contacted to find out the means they use for engagement. Information was also gathered from external organisations and individuals who have experience of these engagement methods, either directly or through supporting young people who are involved.

It was clear from the start of the contract that there was little awareness amongst many practitioners, youth workers, volunteers and parents in the children and youth sector about Healthwatch Worcestershire and its role. The youth work landscape has also changed considerably over the past few years with the shift from statutory provided youth work to commissioned Positive Activities and Early Help. This has resulted in a change of roles and personnel in the sector and less shared knowledge.

Much time was therefore been spent meeting people, attending network meetings, sharing information and distributing leaflets/posters for several aims:

- a) To raise awareness of Healthwatch Worcestershire and its work, and raise understanding of its role as the independent champion for health and social care services
- b) To build links for Healthwatch Worcestershire with children and young people's organisations which can be used for engagement and information sharing in the future
- c) To provide access to young people.

2. Who We Spoke To

2.1 Information Sharing, Contact Building and Networking

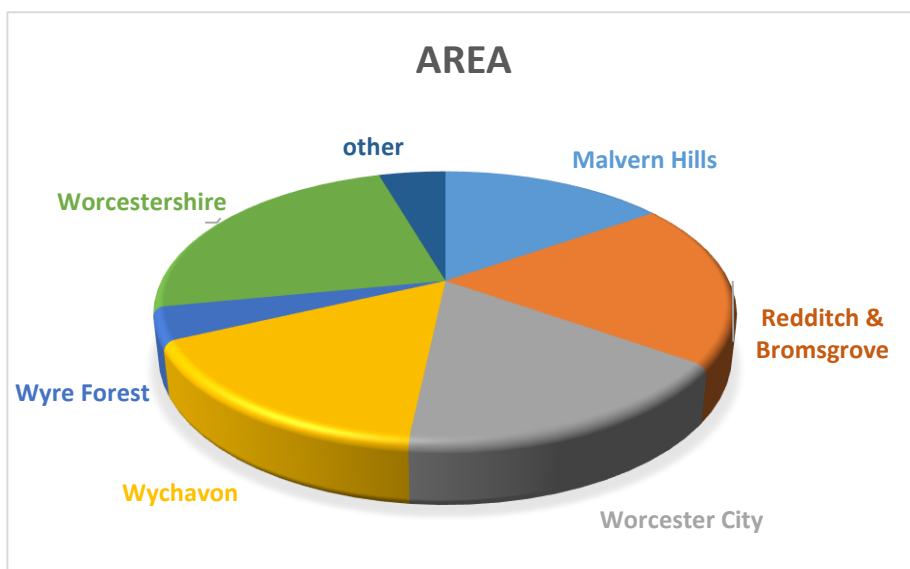
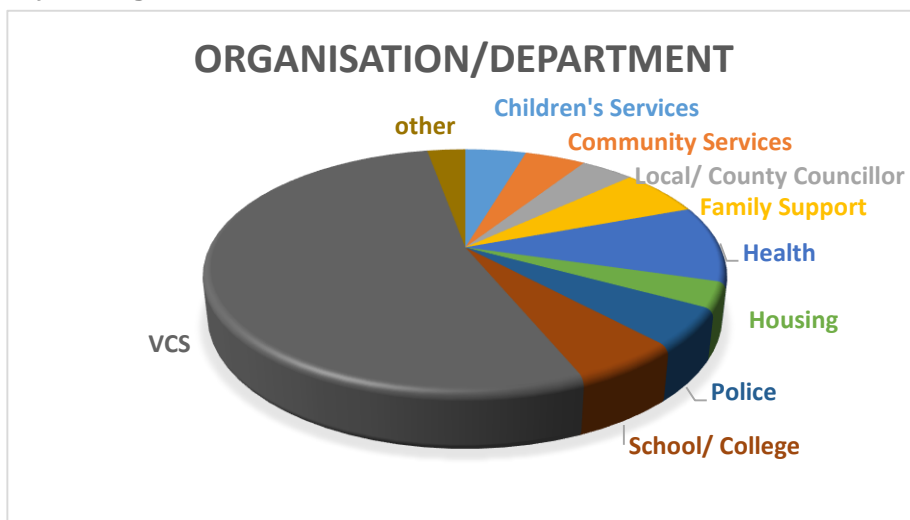
We met with, spoke to and shared Healthwatch Worcestershire information with 279 people from 123 organisations/ departments across Worcestershire (see Appendix A for full list). This included voluntary organisations, Positive Activity providers, Early Help providers, Police, Fire, Health Improvement Coordinators, District and County Councillors, schools, colleges, sports and arts organisations.

These people were all identified as useful contacts and those who either needed to know about Healthwatch Worcestershire for their role or could share information/raise awareness with their colleagues, clients or young people. Many of these people fed into the mapping exercise or enabled engagement with their young people.

The following network groups were also attended:

- Malvern Hills Early Help Strategic Board
- Malvern Hills Youth Advisory Network
- Malvern Hills Volunteering Forum
- Tenbury Positive Youth
- Martley Positive Youth
- Worcester City Early Help Strategic Board
- Worcester City Early Help Health & Wellbeing Subgroup
- Droitwich Children’s Centre Area Board
- Droitwich Additional Needs Group
- Redditch Positive Activities Subgroup
- Redditch Mental Wellbeing in Children and Young People’s Task and Finish Group
- Positive Activities Network

Summary of Organisations:



2.2 Engagement Mapping - NHS and Worcestershire County Council

The following engagement information was shared by each organisation:

NHS South Worcestershire Clinical Commissioning Group

Helen Perry Smith, Engagement Manager, helen.perry-smith@worcestershire.nhs.uk

South Worcestershire CCG do not have their own engagement group but have linked in with other groups in the past. They have previously worked with the YMCA Young Health Champions who contributed to their website, an app, set up a facebook page and information, linked into the Youth Mentors at the Hive, carried out surveys at Worcester University Fresher's Fairs and taken part in Takeover Day. They have some young people registered for information and these are mainly university students.

They are currently re-looking at their youth engagement.

NHS Redditch and Bromsgrove Clinical Commissioning Group

Henry Soulsby, Community Engagement and Social Marketing Manager,

henry.soulsby@worcestershire.nhs.uk

RBCCG do not have their own engagement group and usually use other organisations such as the voluntary sector or schools for targeted engagement work. They have:

- linked with the Young Health Champions
- worked with Ahmed Hussain at the Health and Care Trust
- a few young people aged 14 – 18 signed up to receive information
- links with the voluntary sector eg BARN

They are keen to develop their youth engagement.

NHS Wyre Forest Clinical Commissioning Group

Ruth Cooper, Patient and Public Engagement Manager,

ruth.cooper@worcestershire.nhs.uk

Ruth started in post in November 2014. The previous engagement officer didn't have a specific youth board but used voluntary organisations such as St Basils in Kidderminster to engage young people. They have several young people registered for information and are keen to develop engagement work with young people.

Worcestershire Health and Care NHS Trust

Mandi Bishop, Community Development Officer, mandi.bishop@hacw.nhs.uk

Mandi joined the Trust in January 2015 and is following on from the work of the previous Community Development Officer. The Trust have a Youth Board which is currently under development and is attended by young people aged 14 to 25 from a variety of places. These include Christopher Whitehead School, Kidderminster & District Youth Trust, Worcester University and Health & Social Care students.

Previous the Youth Board have helped to design the website, were included in an interview panel for CAMHS, questionnaires, were asked views about services etc.

The Board meet bi-monthly and previously had 10 members.

The Trust also have a few young people registered for information.

In terms of suitability for Healthwatch Worcestershire engagement, it will be important not to duplicate the work of this Youth Board and instead to work in partnership with it. Once re-established it should be a useful mechanism for engagement.

Worcestershire Acute Hospitals NHS Trust

Nell Pegg, Senior Sister, Nell.Pegg@worcsacute.nhs.uk

The Acute Trust do not have a youth forum. Young people usually access their services for only a short or limited amount of time, unless they have an ongoing condition, so their engagement work has been in the form of feedback forms and suggestions during their stay.

They have been fairly successful with this. They are keen to get young people more involved if possible.

Worcestershire County Council - Youth Cabinet

Kirsty Fraser, Youth Voice Development Worker, KFraser@worcestershire.gov.uk

This is made up of 24 young people aged 11-18 elected in each district. They currently meet monthly and have additional topic meetings. They provide a voice for young people, give advice to organisations about involving and engaging with young people and consult with thousands of young people in Worcestershire to find out their views.

This forum would be useful for Healthwatch Worcestershire to engage with.

Worcestershire County Council Children in Care Council – Who Cares, We Care and Speak Out

Kirsty Fraser, Youth Voice Development Worker, KFraser@worcestershire.gov.uk

The Children in Care Council have two forums – Who Cares, We Care (for approx. ages 12 – 16 year olds) and Speak Out (for young people who are leaving care approx ages 16-19). These groups meet every 3 – 4 weeks and the number attending varies but is around 24. They hold the County Council to account as their legal guardians, give views about services and also do consultations with other young people in care.

Both forums would be useful for Healthwatch Worcestershire to engage with.

Worcestershire Safeguarding Children’s Board – Young Person’s Panel

Kirsty Fraser, Youth Voice Development Worker, KFraser@worcestershire.gov.uk

The WSCB have a Young Person’s Panel made up of young people from the Youth Cabinet and Who Cares, We Do. This panel meet approx. every 6 weeks, there are up to 20 young people and are aged 13 plus. The panel are used for consultation and providing advice and guidance about external information and consultations eg designing questionnaires.

As this group are made up from other youth forums, they may be of less use to Healthwatch Worcestershire.

2.3 Engagement Mapping - Other Organisations

Our Voice

Sue Evans, Admin Assistant, wpccsue@gmail.com

Our Voice are a network of parents and carers of children and young people with disabilities or additional needs. They have a steering group but can also distribute information around all the parents. Our Voice are affiliated to Worcestershire Parent & Carers’ Community (WPCC) and their Chair, Anne Duddington, is a member of Healthwatch Worcestershire.

Our Voice would be very useful for Healthwatch Worcestershire to engage with.

Worcester City Early Help – Youth Forum

Kate Taylor, Early Help Worker 12-19, Kate.Taylor@actionforchildren.org.uk

Worcester City Early Help are currently in the early stages of setting up a Youth Forum. This involves young people from Worcester Community Trust, YSS and Action for Children and the current aim is for the Forum to assess services from a young person’s point of view (including but not limited to health and social care services). This Forum is still at the drawing board stage, but if set up successfully, then **it should be useful for Healthwatch Worcestershire engagement as it will involve young people from a range of backgrounds in Worcester City.**

Redditch & Bromsgrove Early Help – Redditch Youth Forum

*Louise Hall, Community Development Co-ordinator,
Louise.Hall@YMCAWorcestershire.org.uk*

Early Help in Redditch and Bromsgrove have recently set up a Youth Forum. They have been working on recruiting young people and numbers are growing slowly. They have two age bands (8 to 12 and 13 to 19 years) and aim to meet approx. every 6 weeks. As part of their work, they are trialling question sheets which will be given out regularly to young people and separate ones for parents. They are keen for other agencies to give them questions for their sheets.

This should be useful for Healthwatch Worcestershire in the Redditch area once the Forum is up and running.

Worcestershire Young Carers – Focus Group

Vicky Parker, vicky.parker@yss.org.uk

The Young Carers have a focus group of 12 young people which meets monthly for ages 14 to 23. Their overall aim is to provide a voice for young carers so that they are able to inform and influence services that are meant to meet their needs. They also aim to raise awareness of young carers and of issues affecting their lives as children and young people with caring responsibilities. Over the last year members of the group have been involved in fund and awareness raising events and they planned, organised and delivered the young carers conference that was held in May 2014 at St Peters Baptist Church. They have also participated in consultation exercises involving other organisations such as Safeguarding Board. **This group would be useful for Healthwatch Worcestershire to engage with.**

YMCA - Mental Health Champions

Leanne Fox, Project Coordinator, Leanne.Fox@YMCAWorcestershire.org.uk

The Mental Health Champions are a new Redditch/Worcester group which is currently being set up by Leanne, who previously coordinated the Young Health Champions. The Young Health Champions finished due to funding, and the Mental Health Champions have a similar but different remit. The Champions will be trained as peer leaders with the aim to de-medicalise and de-stigmatise low level mental health issues. They will also highlight mechanisms for early identification, signposting young people to specialist services and have the chance to deliver and shape the services they receive.

They are not a forum as such but could potentially be used by Healthwatch Worcestershire for engagement, especially around mental health services.

2.3 Other Organisations with Internal Youth Forums

The following organisations have internal forums of young people. These usually just advise on issues for the organisation but could potentially be used by Healthwatch Worcestershire for engagement:

- Tribe (Malvern)
- Your Ideas (Redditch)
- Stoke Parish Youth Club (Bromsgrove)
- Alvechurch Communities Together (Bromsgrove)
- Outside (Evesham)
- Pershore Riverside Youth Centre (Pershore)
- KYDT (Kidderminster)
- St Basils (Kidderminster)
- Bewdley Youth Café (Wyre Forest)
- Young Farmers (countywide)
- Explorer Scouts (countywide)

3. Key Findings

There is only a limited amount of engagement with young people currently taking place. This is for a number of reasons:

- a) It takes time to build relationships with young people and many organisations have limited resources to devote to this work
- b) Organisations have tried to engage with young people, eg set up a youth forum, and have not been able to maintain the young people's interest
- c) Young people have proved to be difficult to recruit and difficult to retain
- d) The person responsible for the engagement has left
- e) Many young people do not generally have health problems and are therefore less interested in getting involved in health-related discussions
- f) Worcestershire is a large and diverse county and it is physically difficult to bring young people from different areas together

Health and Social Care Services are mainly using external organisations, eg schools or voluntary organisations, to do targeted engagement work when they have a specific topic for engagement. Some are looking to develop their engagement work with young people but are conscious of the time and resources it takes. All the services and organisations who we have spoken to are keen to work in partnership with Healthwatch Worcestershire to develop youth engagement.

Some other forums and networks have been found in the area which would be suitable for Healthwatch Worcestershire engagement. This is an evolving area and unfortunately there are some forums which previously existed but have stopped due to funding, though some new forums are currently being set up. Retention, attendance and diverse representation is a common problem across all the forums.

Getting full representation of young people from across Worcestershire and different backgrounds is exceptionally difficult. From all the forums and networks identified it appears that there are some county-wide groups and a few groups in Redditch and Worcester, but the only opportunities for engagement in Malvern Hills, Bromsgrove, Wyre Forest and Wychavon are through individual organisations.

The only forums which exist for specific young people are for children in care, leaving care, carers and homeless (through hostels). In theory, the other forums are open to all young people, but in practise it may be difficult for disadvantaged young people to both know about and access these. Reasons include lack of interest, transport or confidence.

4. Summary & Recommendations

Only a limited number of forums exist across Worcestershire which engage young people. Healthwatch Worcestershire should use the forums that are available but also look to engage with specific organisations to access target young people. Young people are often reluctant to open up to and speak to those they don't know, especially about personal experiences, so engagement should be facilitated by those experienced in working with youth people and, more critically, the target groups.

Suitable forums for engagement (though some are still being formed):

- Worcestershire Health and Care NHS Trust – Youth Board
- Worcestershire County Council - Youth Cabinet

- Worcestershire County Council Children in Care Council – Who Cares, We Care and Speak Out
- Our Voice
- Worcester City Early Help – Youth Forum
- Redditch & Bromsgrove Early Help – Redditch Youth Forum
- Worcestershire Young Carers – Focus Group
- YMCA - Mental Health Champions

A cross-sector Youth Engagement, Networking and Partnership Group is in the process of being set up. The aim is for all relevant agencies/organisations/individuals who support young people to meet together to improve how they work with young people. It is recommended that Healthwatch Worcestershire joins this group.

B. FEEDBACK AND ISSUES FROM YOUNG PEOPLE AND PARENTS ABOUT HEALTH AND SOCIAL CARE SERVICES

1. Background and Method

It was important to find out the views of a wide range of young people and especially those whose views are seldom heard. Young people don't often open up to strangers, and it takes time and trust to engage with them, both to find them and to have a useful discussion with them get their honest feedback. Having youth workers/support staff who were 'on side' and supported the engagement activities were essential in order to access suitable young people who were willing to share their experiences. We used our knowledge of local youth activity providers and information sharing at network events to identify organisations/groups who would be willing to invite us to meet their young people and parents.

Engagement was carried out through visiting groups, doing a health quiz ice breaker, small group discussions and individual conversations. We also recruited a group of young people from Pershore High School and Evesham College for a Healthwatch Worcestershire Takeover Day and they shared their views through discussions and workshops. Views were also collected from parents in informal discussions and personal interviews. Notes were taken from all discussions and conversations and the general themes collated.

Following initial feedback and views, three topics were chosen for specific engagement. These were:

i. Access to GPs for young people

A questionnaire was designed and distributed. The closing date has been set for 30th April 2015 due to a delay in starting the engagement and the Easter holidays. Some views have already been gathered from talking to groups.

ii. Issues affecting the young homeless

This topic is part of Healthwatch Worcestershire's long term work finding out the views of those who are homeless. Some work had already been carried out by Healthwatch at St Basils Foyer in Kidderminster and follow up work was planned for the YMCA foyer in Redditch. We are awaiting a date for this work from the staff at the foyer.

iii. CAMHS service

This was identified after negative feedback from young people and professionals. It was subsequently decided to delay this work until later in the 2015/16 contract due to Worcestershire County Council carrying out their own review of CAMHS and their plan to overhaul the service. We hope to receive a copy of their current review.

2. Who We Spoke To

101 young people and parents gave their views either individually or in small group discussions. The young people came from Pershore High School, Evesham College, The Tribe (Malvern youth club), WCVYS project, DAFFY (Droitwich youth club), St Basils, Young Carers and Police Cadets. They were aged 12 to 19, but with a majority aged 16 – 17, and 60% were female.

Parents included those from Droitwich Additional Needs Groups, Our Voice and young mums. Their children were predominately aged under 10 and many of the children had special needs. Some of the views of the young carers have been included in this section as they were very similar to the parents.

3. Key Findings

3.1 Young People

From the first discussions with young people it was evident that only a minority of young people actually access health and social care services and even fewer do so on a regular basis. The main reason for this is the fact that they are generally healthy. They were therefore only able to give limited views about services they had accessed.

Subsequent engagement was therefore carried out with target groups who were more likely to access services such as those who were older, young carers and economically disadvantaged.

When speaking to young people, their initial views were generally that things were “OK” with services. Some had good views about the services they had accessed and these tended to be practice or doctor-specific comments. However on exploring further young people often gave negative comments, or areas for improvement and these were fairly similar across all the people spoken to.

The views of young people can be grouped into three areas: access to services; make services better and more young person friendly; and confidentiality.

3.1.1 Access to Services

Most young people had views about GPs and A&E hospitals and these were the most commonly accessed services (along with pharmacies and dentists). For younger people who preferred to go with their parents, their parent made the appointments, so they didn't see any access issues. However amongst older young people who were able to go on their own, the following reasons were echoed amongst all groups as barriers to these services:

- Don't like having to phone to make appointments (scared or it's inconvenient as at school)
- Sometimes miss appointments as they forget when they are or don't like to plan ahead
- Had a bad previous experience so were not keen to go
- Not registered to a service (GP or dentist)
- Don't know what services are available to them or how to access them
- Have little understanding about health services

The Access to GPs engagement work and questionnaire will give further information and qualitative results for this.

Some of the young people had accessed CAMHS or knew people who had. Their views were mainly negative, though it is unknown whether these comments were hearsay or firsthand knowledge:

- Waiting lists are long (months)
- CAMHS don't keep the patient informed/take time to get back to the patient
- Young people find the transition to adult services really hard
- Have to keep telling their story to different people/feel they don't take the patient seriously
- 'Lost referrals' due to long waiting times
- Heard negative feedback from others, that it doesn't help and can make things worse, so they don't want to attend

Sexual Health had been used by some, either at school/college or at a walk in centre. In general these were seen as good, the young people found them easy to access and they liked the walk-in, anonymous nature, but other comments included:

- “Everyone sees you going there and knows why so I wouldn't go”

- They ask too many questions
- They gave bad advice

College nurses were seen as being helpful and gave good advice. School nurses on the other hand were not generally seen as a good thing and most young people wouldn't go to see them. The main reason given was "because they don't do anything".

Other less accessed services were optometrists, physiotherapists and psychologists though no views were given about these services.

3.1.2 Make services better and more young person friendly

Some young people gave positive feedback about their GP practice/doctor/hospital saying:

- They liked the doctor
- The doctor understood them and made them feel at ease
- The people were friendly
- The practice/hospital was calm/quiet/clean
- It had good resources

Other young people felt that when they did access services, they didn't always have a positive experience.

Communication seems to be a barrier (or perceived barrier). Their common views were:

- Doctors seem old and can't relate to young people, or the young people don't understand the doctor
- See a different doctor every time or don't know the doctor
- Not confident about speaking to the medical professional and didn't know what to say – many prefer to go with their Mum and let her do the talking
- Feel looked down upon or patronised or staff are rude

There are frequently problems with the services they receive:

- There are often delays/no appointments available/poor timing of appointments
- There are long waiting times in hospitals

Many young people felt they were not given enough of or the right information:

- They want to be given the full facts and information so they can make an informed choice
- Some felt they had been mis-diagnosed or it took a long time for diagnosis – sometimes they were told to go away without a diagnosis or information

Addition comments about the service they received were:

- They want longer appointments – doctors and dentists
- They want the opportunity to talk to a male/female in pharmacies
- They are not used to complaining so just let things go

3.1.3 Confidentiality

Confidentiality was expressed as a concern by many of the young people and they were worried about why people were asking what they perceived to be personal questions and what would happen to the answers. Judgement by others was a concern. Their views were as follows:

- Walk in clinics often ask too many personal questions and record the answers
- Receptionists ask too many questions and they don't need to know

- At school or club, other young people see someone accessing eg Time4U and think things about them
- Post from health/treatment centres sometimes comes in a labelled envelope – parents can then see that the young person has accessed the service
- If post sent to home address, parents sometimes open post or ask what it is
- Have to get parent's permission to see Counsellor at school
- Sometimes they lie as they are worried about who might find out the answers
- Confidentiality in pharmacies is a concern

3.2 Parents of Children

Many of the parents spoken to had good views about services at the start of their child's life, such as the hospital and maternity. Health visitors were also praised in the majority ("excellent" and "very helpful"). As their children got older, the parents became more frustrated with the services that they access and didn't have many good views. The good views they did have were usually about a specific person rather than a service.

The main issues for parents were around information, advice and getting a diagnosis for children with special needs; and wanting better services.

3.2.1 Information, Advice and Diagnosis

A general concern expressed by most parents was knowing what information to give to health professionals. This ranged from those said who told the professionals everything all the time (and were often told to go away) and those who said little because they were scared and worried that if they said the wrong thing, that Social Services would be called.

Many mums of young children had good views of health visitors (though not all) though when the health visitor stopped they felt they were left with no one to get advice from.

Other common views were:

- Find it hard to get a diagnosis and often have to keep pushing
- Parents of children with special needs don't really get any support and they don't know how to speak up
- Want to be given full facts and info – shouldn't have to do their own research
- There is nowhere to phone to just get advice – if a parent phones 111 then usually they are sent to hospital when it is not needed
- Get conflicting advice from different services

3.2.2 Make Services Better

- Hard to get doctor's appointment with telephone triage system as the call usually comes when they are busy with their child
- Long waiting times to get appointments/referrals
- Often have to tell their story to many different people, especially when staff change
- Want joined up working between services, especially at transition ages
- There is often no follow up, especially when dealing with several services
- Patient's file should be flagged that they have special needs or a carer
- Paperwork can get lost

4. Summary and Recommendations

Young people are predominantly healthy therefore have only limited views about health and social care services in Worcestershire. Although many would say that the services were “OK”, they also have high expectations about services and are quick to find fault and suggest changes. Engagement work needs to be targeted to get meaningful information.

Young people can find it difficult to access services on their own and many rely on their parents. The telephone triage system for GP appointments does not work for them (or for parents of small children) as many are not confident enough to phone in the first place and then are unavailable for the triage phone call (as at school or eg dealing with a baby if a parent). Those who do not have parents or carers may not even know where or how to access services.

When young people do attend services, they usually prefer to go with a parent and to let them do the speaking. This may be because they don't feel confident about speaking to the doctor, they are worried about the questions they will ask or feel they can't understand what the doctor says.

Confidentiality was expressed as a concern by many of the young people, but on questioning, it would appear that this is more due to a lack of understanding of the need for the information and what will be done with the information. If this was explained to young people, then they would be more willing to give the information.

For parents, they have a better understanding of services and are more accepting. Common issues were around getting appointments, getting diagnoses and information and being able to access help. They often said they knew there was a problem with their child but worried about how to get a professional to understand this and give them the support they needed.

Our recommendations for improving services for young people and parents are:

- Make it easier to book appointments with the GP
- Speak to them in a simple, clear and respectful way
- Give full information explanation about illnesses/treatment and not expect them to do their own research
- Give more explanation about why personal information is needed and what is done with it
- Encourage more joined up work so they only need to tell their story once
- Record notes on a patient's file (with their permission) about any particular communication needs or if they have a carer
- Suggest longer appointments if required

C. RECOMMENDED ENGAGEMENT MODEL

These recommendations are based on the findings in Section A and B, i.e. that young people are difficult to engage with and retain, most have little interest in health issues as they rarely access health services and it is difficult to bring young people together from across the whole of Worcestershire. Views were also sought from young people at Takeover Day.

Our recommendations are therefore to have several methods for engagement:

1. Current forums

Where forums exist, these should be used (see the Recommendations from Section A) and Healthwatch Worcestershire links developed.

At this time we would not advise setting up a young person's forum or similar, but it may be that further work can be done with interested individuals to create an active group. This will depend on the number involved, their location, budget available and staff time available to develop the group. Transport could be an issue, especially due to the size of the county and lack of transport in rural areas, and funding may need to be able for this. Smaller forums could be created in local settings building on existing models, eg at a college, foyer or youth club but these could be work-intensive to keep active and the young people involved.

We advise having an experienced youth worker to facilitate any discussion group or forum.

2. Network of selected organisations

A network of selected organisations who work with targeted groups should be retained and close links developed with. These are predominately voluntary sector organisations and schools who have a recognised involvement with harder to reach groups (eg homeless, disabilities, NEET) and whose members can provide informed, personal views on specific topics. These organisations should be members of the REG group.

The following have so far joined the REG group:

- Worcester Community Trust
- Mentorlink
- Worcester Action for Youth
- Action for Children
- Your Ideas
- Tribe
- Ourside
- Redditch Early Help / YMCA
- Malvern Special Families
- Snoezelen
- Talentmatch/Shaw Trust
- Woodrush Youth Club

The following have been asked to join and we are awaiting their forms:

- Kidderminster and District Youth Trust
- Redditch Positive Activities Zone
- Our Way Self Advocacy
- The Lounge
- Droitwich Family Centre
- Home Start

- Wyre Forest NightStop
- Batchley Support Group
- What's Your Point

Several organisations who were asked felt they could not join for a number of reasons including time required.

We will continue to ask other organisations on an ongoing basis.

3. Individuals

There are some individuals who do have an interest in health and social care issues, whether from personal experience, family member or career goals. These should be encouraged to join Healthwatch Worcestershire.

34 individuals have so far given their contact details and registered for information with Healthwatch Worcestershire. This is out of a total of 101 people asked.

When engaging with young people who have registered for information, we would advise sending information by post rather than email. The young people have given their email address as requested by Healthwatch Worcestershire, but many have told us that they don't actually use their email. They felt that post was much more exciting and is something they would prefer.

Social media is a good way of engaging but can be hard to get right. Facebook is used by some but not all and it is something that young people use between themselves. They wouldn't necessarily choose to 'like', comment on or engage with a Healthwatch Worcestershire facebook page. Facebook Messenger could be used as a means to directly correspond or 'chat' with young people though would only work with some young people. Twitter is similar. Other popular 'apps' include Whatsapp, Snapchat, ooVoo or Skype, though young people tend to be one step ahead and change quickly to new apps.

Social media would need a lot of time investing in to maintain communication and follow the latest trends. We would suggest using a variety of apps to cover different groups of young people. Appropriate safeguarding and confidentiality policies and procedures should be put in place before contacting young people.

It also needs noting that social media usually requires the recipient to have a smart phone and data credit. Those with low income or without a generous benefactor to pay the bills may not have these and therefore may not be able to engage in this way.

Specific topic-based involvement will be best to engage young people, or task and finish groups. The young people told us they wanted their own leaflet but then said they wouldn't read it. Pens, stickers and wristbands were classed as good incentives and a way of sharing the Healthwatch message.

This area will be developed further through the 2015/16 contract.