

# Health and Social Care - The Views of Young People

# Introduction

Healthwatch Sandwell are the independent voice of the public in health and social care services. We collect feedback from the public of Sandwell about their experiences of using health and social care services and use that feedback to work with service providers and commissioners to look at ways to improve services. One of the ways that we collect feedback is to carry out focused projects each year that look at particular services, conditions, or groups. On this occasion we have carried out a project that engaged with children and young people in Sandwell about their knowledge and experiences of health and social care services.

## Methodology

This project engaged with young people through the use of a survey and a series of focus groups. The survey was hosted online but was also available as a hard copy version. The survey asked mainly multiple choice with some open text questions where respondents could expand on their answers.

The focus groups were hosted by schools, colleges, youth groups and condition related support groups that work with young people. The focus groups made use of participatory methods in order to allow a range of young people to take part in the group without having to be confident speaking within a group.

The survey and focus groups were chosen to be used together as a survey offers an opportunity to reach a large number of respondents, whilst the focus groups provide an opportunity to gather more in-depth feedback.

The approach was taken to approach venue's young people regularly attend to attempt to speak to as diverse range of young people as possible within the time frame. Several venues were identified who had young people who were open to speak about their experiences. Some venues were chosen to ensure under-represented individuals and those with wider experiences with health and social care services such as Young Carers and Children Looked After could be heard.

The survey was hosted online and promoted through a weblink and social media. Networking also took place to promote the project and encourage young people to take the time complete it. The survey was promoted during all Healthwatch engagement events.

### Who took part?

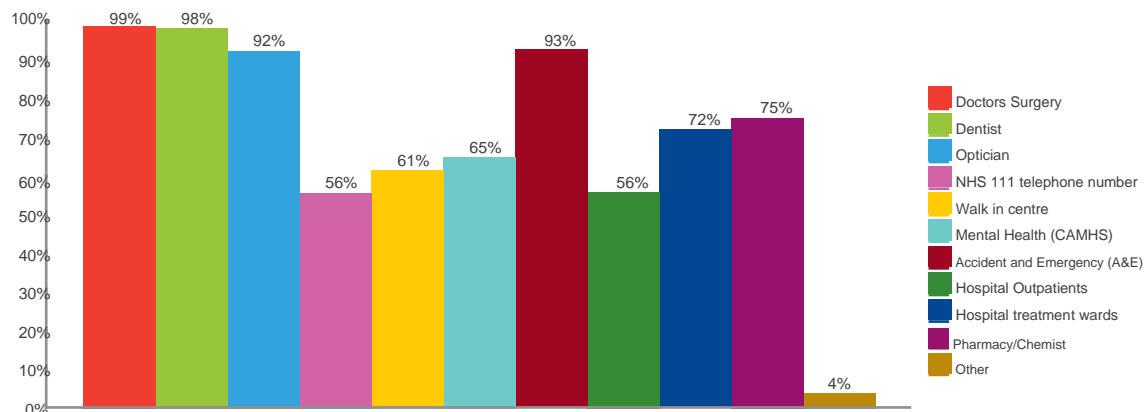
There were **364 responses** to the survey in total.

There were **9 focus groups** undertaken and a total of 71 young people took part in them.

# Findings

## What health care services do you know about? (please tick all that apply)

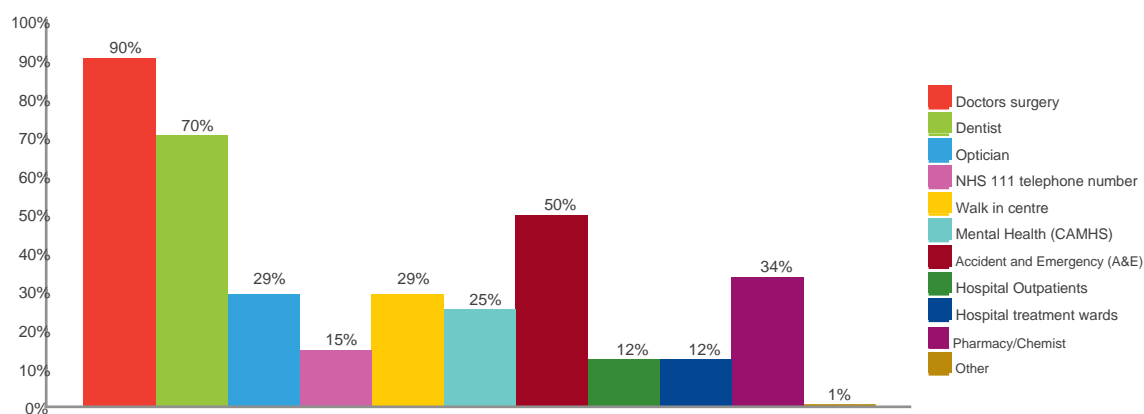
What health services do you know about? (Please tick all that apply).



Respondents to the survey were asked what health services they had heard of. Almost all of the respondents said that they had heard of doctor's surgeries and dentists with **99%** and **98%** respectively indicating that they had.

NHS 111 and hospital outpatients had the lowest percentages of respondents saying that they had heard of the services with each being **56%** of respondents.

Have you used any of these services? (Please tick all that apply).








When asked if they had used any of the services **90%** of the survey respondents said that they had used a doctor's surgery and **70%** said that they had used a dentist. **50%** of the respondents said that they had used A&E. **29%** of the respondents said that they had used an optician and the same percentage said that they had used a walk-in centre. **25%** said that they had used the CAMHS service.

## Rating Health Services

Respondents to the survey were asked to rate their experiences of the health services that they had used. The ratings are one to five with one being very good and five being very poor.

The participants in the focus groups were also asked to give ratings to services using dots and emojis to indicate what they thought of the services.



					
Hospital Ward	9	5	15	9	10
A & E	8 (3)	5 (3)	8	12	18
CAMHS	3	5 (1)	5 (1)	1 (1)	10 (1)
Dr	10	7 (1)	14 (1)	7	9
Optician	24	4	7	4	2
Special Needs Support	5	9	5	4	4
Aids & Adaptions	1	11	1	3	1
Safeguarding	7	9 (4)	2 (4)	7	5
Outpatients	7	10 (1)	12 (1)	7	5
111	6	8	19	2	4
Walk in centre	5	7	12	6	14
Dentist	20	19	8	5	13
Pharmacy	17 (1)	15 (1)	14	5	2
Children in care	6	8	8 (1)	2 (1)	1
Family Support	6	9 (3)	3 (3)	2	6

Numbers in brackets were placed on the line between the two.

## GP Practices

Survey respondents that said that they had used the doctors' surgery were asked to rate their experience of using the service. 5.9% of the respondents rated their experience of using the doctors' surgery as very good and 34.4% rated it as being good. 26% rated their experience as being poor and 9.9% rated it as being very poor.

Those that took part in the focus groups gave mainly positive or neutral ratings to doctor's surgeries with 9 saying it was very good; 9 that it was good and 11 giving a neutral response. Focus group feedback was very much that Individuals with a long-term condition appeared to know their doctor 'my doctor knows me'

When asked what worried them about health and social care services being able to access appointments was a key area of feedback from survey respondents. Likewise, in some of the focus groups being able to access appointments was a concern that was raised with comments being made such as 'you call and they are engaged' or that they 'have to ask for an emergency appointment even if it's not an emergency because other appointments have gone.' One participant in a focus group said that they used a Doctor App commenting that it was 'pointless, you go through all the questions and it says you need to see a GP and then there isn't an appointment.' Another participant commented that the waiting time for appointments 'are really long or you're offered appointments at inconvenient times and you're forced to take them unless you're willing to wait even longer and sometimes you can't afford to wait.'

## Dentists

58.3% of the respondents who answered the question rated their experience of using a dentist as either very good or good. 9.9% rated it as being poor or very poor.

Those that took part in the focus groups were generally positive in their ratings of dentists. 19 participants rated it as very good and 17 rated it as good. However, 12 participants also rated dentists as very poor.

Comments from the focus groups on dentists were limited but with generally positive comments. One participant compared the dentist to their GP commenting that they 'prefer [the] dentist to GPs. Dentist emergency is much better than GPs.' However, there was one negative comment in relation to the waiting time for braces with the participant describing the waiting list as 'horrendous' and it being a matter of concern to them that 'it's best to have them young but [you] can't because the waiting list is too long. By the time I am 17 the brace will no longer be free.'

## Opticians

Ratings for their experiences of using an optician were generally positive from the survey respondents. Of the respondents who answered the question 76.4% said that their



experience of using the optician was either very good or good. 7.6% said that it was either poor or very poor.

Participants in the focus groups also rated opticians relatively highly with 20 of the participants saying that the opticians were very good and 14 said that opticians were good.

## NHS 111

Of the respondents to the survey that answered the question 70.7% rated NHS 111 as either very good or good. 12% said rated it as poor or very poor. Focus group participants on the whole gave neutral ratings to NHS 111 with 16 giving a neutral rating and 12 rating it as either very good or good and 5 saying that it was poor or very poor.

Participants in one focus group made any comments on the NHS 111 service and this was a group related to a particular health condition. They commented that the service was quick, helpful, and sorted things out. Other focus group often based their ratings on waiting times and feeling it wasted their time.

## Walk-In Centre

The respondents to the survey that rated their experiences of the walk-in centres were more likely to rate the service as being poor or very poor (28.8% and 39.4% respectively). 8.6% rated it as being either very good or good. We were unable through the survey to identify the reason for the poor ratings however those who took part in the focus groups gave similar ratings; 19 participants rated it as poor or very poor and 12 said that it was very good or good.

There were very few comments on the outcome of visiting a walk-in centre from the focus groups, comments were focused on waiting times. One participant commented that their experience of the walk-in centre had been 'okay', but others commented about long waiting times with one saying 'waiting at the walk-in centre is really long. Having to sit there for four hours straight, then telling you everything is fine.'

## Mental Health Services

57.9% of respondents to the survey that rated their experience of the CAMHS service rated it as being very poor and 18.9% rated it as poor. 10.5% rated it as being very good or good. Opinion within the focus groups was divided in relation to CAMHS. 10 participants rated CAMHS as being either poor or very poor with most saying it was very poor; however, 8 participants rated it as being very good or good.

The service delivered by CAMHS was the subject of some discussion in the focus groups as was mental health support generally. When discussing CAMHS the feedback was mixed with

one participant giving an example of how they had helped their sibling and another said that ‘sometimes the CAMHS Crisis team is helpful’ but they went on to say that this was ‘dependent on who you get.’

Waiting times for accessing the CAMHS service were discussed with comments such as the ‘waiting list for CAMHS is too long’ being made. There were also some comments about the interactions that they had had with professionals within the CAMHS service. One participant said that they ‘don’t like how they handled issues, making everything your fault’; whilst another commented that ‘professionals think you are making it up’. A similar comment was made by a participant in a different focus group who said ‘CAMHS is a huge concern to me because of the lack of understanding and the consistency between workers insisting that your behaviour is a phase of attention seeking or copycat behaviour.’

Another said that they had been ‘discharged multiple times’ from CAMHS ‘despite being admitted to A&E time and time again.’ Being discharged from the Eating Disorder Service with no ongoing support was also raised by one participant with them saying the lack of support meant that they suffered a ‘relapse.’

Mental health support in general was raised by some participants who had not experienced CAMHS or other specialist services with comments being made about the need for ‘more groups to help with anxiety’ and the need for ‘a lot more mental health awareness.’ It was suggested that there was a need for young people’s ‘drop ins for people to talk’ because ‘a lot of kids just need someone to talk to.’ One participant said that they felt ‘not enough is being done to effectively tackle children’s mental health’ issues.

The role of education providers was discussed in relation to mental health support with one participant saying that ‘teachers and students need mental health training’. However, one participant commented that support should come from ‘external people rather than teachers’ and there was the suggestion that there should be ‘mental health nurses in school.’ For a group of young people attending college the lack of mental health support was raised and it was commented that ‘there are whole teams of support for mental health at university but not at college.’

One individual spoke about waiting times for services ‘It gets worse while you wait, then takes longer to help you... depression, I didn’t think it was real until I went through it’.

## Hospital Services

74.1% of the respondents to the survey that answered the question rated their experiences of A&E as either poor or very poor. 13.8% rated them as very good or good. Those that took part in the focus groups also rated their experiences as poor with 25 in total saying it was either poor or very poor. 11 said that their experiences had been good or very good.

Feedback from the additional comments on the survey and from the focus groups suggest that the time spent waiting to be seen in A&E may have had an influence on how the service was rated.

There was limited feedback about A&E specifically from the survey additional comments or from the focus groups and the comments that were made were generally in relation to long waiting times at A&E. However, a group of young people with a long-term condition made wider comments with one saying that they had been ‘seen quickly and put in a side waiting room’. The group also commented that ‘I felt shy because it is a big place with lots of people’ and that ‘there was no play space for children.’

Respondents to the survey who rated the hospital outpatients service were most likely to give a neutral answer 27.7%. However, 23.4% rated the service as poor and the same percentage rated it as very poor. 25.5% rated it as either very good or good. Those taking part in the focus groups were also most likely to give a neutral rating, but 14 participants rated it as very good or good and 12 said that it was poor or very poor. Individuals Looked After by social care spoke highly of their yearly mandatory medical ‘the consultant knows us’, ‘they make sure we are okay’. Although one individual did report ‘we still have to wait’.

Individual professional’s knowledge of specific conditions also appeared to be reflected in the young people’s ratings. Examples of this can be seen in condition sensitive groups, and individuals with care and support needs. They lose trust with the service overall if they have a negative experience with one professional. An individual with autism said that they refuse to go to hospital because they are afraid that they will not be made better and will ‘die in there’. Previously their nan had been admitted to hospital and after a long stay, passed away. The individual had been told that their nan would be ok and not too worry so now appears to have little trust in what will happen in hospital.

77.6% of the respondents who answered gave a rating to their experiences of the pharmacy said that it was either very good or good. 5.2% said that it was either poor or very poor. Those that took part in the focus groups also generally rated the pharmacy as being very good or good with 30 participants rating it positively. Seven of the participants said that the pharmacy was either poor or very poor.

Other services that young people had accessed include a chiropractor, physiotherapist, and occupational therapist and 63.7% rated these as either very good or good. 18.2% rated them as poor and none rated them as very poor.

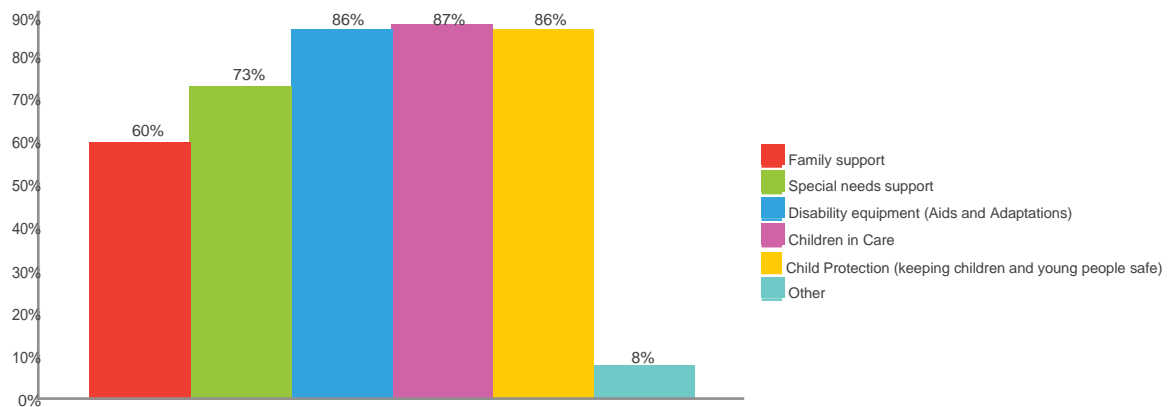
## Social Care Services

Respondents to the survey were asked what social care services they knew about. 87% of the respondents who answered the question said that they knew about services for children in care; whilst 86% said that they knew about aids and adaptations and child protection services.

8% said that they knew about other social care services however, there was only one respondent who named another service which was a contact centre for maintaining contact between children and their parents when separated for any reason.

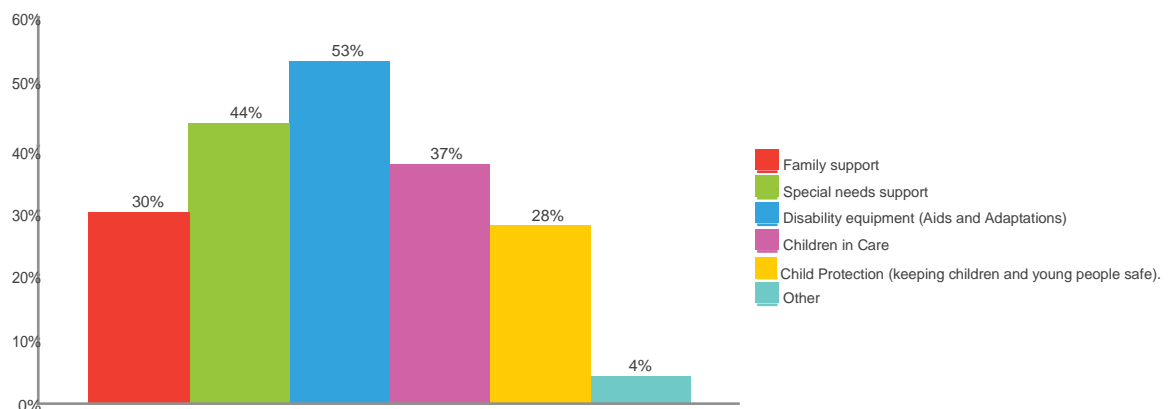


What social care services do you know about? (Please tick all that apply).



Of the respondents who answered the question **53%** had used aids and adaptations; **44%** had used special needs support and **37%** said that they had used services for children in care.

What services have you used? (Tick all that apply).



The respondents who said that they had used social care services were asked to rate those services. The ratings were between one and five with one being very good and five being very poor. As there were fewer respondents in general who had used social care services the percentages that followed are based upon smaller response rates than the survey overall.

Those that took part in the focus groups were also asked to rate the services offered by social care.

## Family Support Services

53.9% of the respondents who said that they had used family support services rated them as very good or good. 19.2% rated them as poor or very poor. Those that took part in the focus groups generally rated family support services positively with 14 saying that it was very good or good. Eight of the participants rated the service as poor or very poor.

A limitation of this report is the defining of family support services within Sandwell and individuals understanding of this. Young people speaking in focus groups clearly identified this as services within school. There was no mention of services such as the Community Operating Group (COG) teams across each town.

## Special Needs Support

54.6% of respondents who had used special needs support rated them as either very good or good. 18.2% rated them as poor or very poor. 12 of the participants in the focus groups rated special needs support as very good or good and 8 rated it as poor or very poor.

## Aids and Adaptations

79.1% of respondents who said that they had used aids and adaptations rated them as being very good or good. 7% said that they were poor or very poor. 13 of the participants in the focus groups rated the service as being very good or good and 4 rated it as being poor or very poor.

## Children in Care

When rating their experiences of services for children in care 34.4% of those that answered the question said that their experience had been very good or good. 24.1% said that it had been poor or very poor. 11 of the participants rated the services for children in care as being very good or good and 3 rated them as being poor or very poor.

One of the focus groups included young people who were in the care of the local authority and they made specific comments about their experiences of interaction with social workers in particular. It was commented that as looked after children they 'rely' on their social workers. Whilst most felt that their social workers 'do care' there were some comments about workloads and more particularly about changes of social worker which they felt to be frequent. One participant commented that 'they just disappear' although an example was given of an old social worker visiting with the new social worker in order to formalise the change, but there was a sense that this was not common practice.

A lack of communication was discussed at length with this group, with individuals feeling that communication between social workers and contact workers was not sufficient so that

things that should not ‘happen often’ ‘they don’t learn’. A different professional attending a meeting without meeting the young person first was highlighted ‘how can they speak about me?’ ‘cancel it’. Frustration with processes and the time taken was also expressed by one individual.

## Child Protection

55% of the respondents who answered the question about their experiences of child protection said that it was very good or good and 20% said that it was either poor or very poor.

The language used to ask participants in the focus groups was slightly different using safeguarding rather than child protection. From the discussions in the groups it is suggested that their understanding of safeguarding related more to the school safeguarding officers and this encompassed providing pastoral care and interventions in cases of bullying, for example. With this in mind, those taking part in the focus groups were evenly divided between positive and negative rating with 11 participants rating the service as good or very good and 11 rating it as poor or very poor.

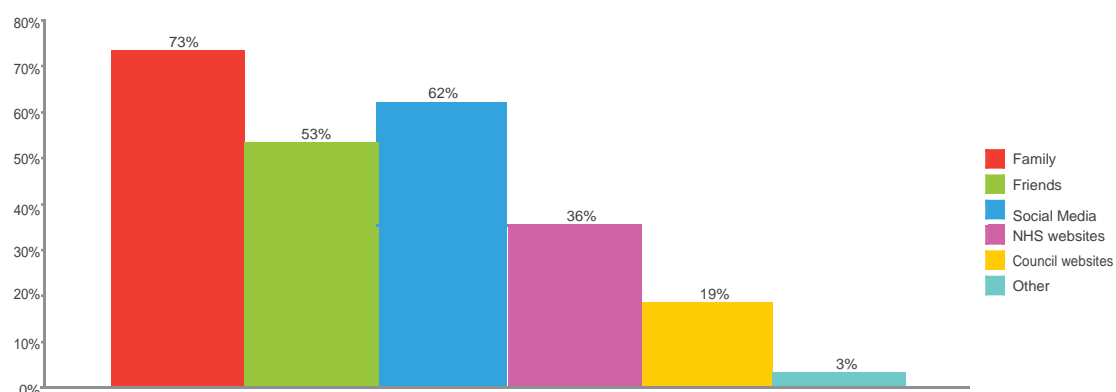
‘I have trust issues because of poor social workers. One threatened and blackmailed my mom to take us away or to say things that they wanted her to say. She would say my opinions were wrong. She would say I was not important and did not matter. I don’t have a social worker now but have good support from my advocate.’

‘Our Social Worker always helps us when we have a problem’

## Information, advice, and guidance

When asked where they would go for information about health or social care services the highest percentage of respondents said that they would go to their family with social media being the second highest choice. Websites from the NHS and the Council were less likely to be chosen by respondents than more informal sources of information.

Where would you go to find information about health or social care services? (Tick all that apply).



There was little direct discussion of where they might find information, advice, and guidance by participants in the focus groups. However, there were comments about the roles of schools in providing more advice and guidance with one participant saying that ‘school should tell us’ where to get help and another saying that their ‘school used to offer help but not anymore.’

Within three focus groups individuals could name organisations in the borough but could not identify which organisation was for which service, sexual health, drug and alcohol misuse, mental health.

## The School Nurse

There was discussion of the role of the school nurse within some of the focus groups. Some participants did not know who their school nurse was and commented that they ‘never see the school nurse’ and one group said there was ‘no such thing as school nurses anymore.’ However, others were aware of who their school nurse was but felt that their remit was limited as they ‘only see them for injections.’ Some individual’s felt that their school nurse lacked in empathy and that their nurse was ‘generally uncaring.’ Another group suggested they would like to see more of their school nurse, and they could be part of the solution for lack of support with mental health. ‘School nurses need more training in mental health’.

## Being listened to

Respondents to the survey and participants in the focus groups spoke about being listened to by professionals both within health services and social care services. It was felt by some that they were not listened to or believed by professionals. For example, comments included ‘they think I am telling lies, and no-one is bothered’ and that people were not ‘believing that you are ill’.

One group suggested that services could be improved ‘if they tried to understand how we feel and asked our opinions on services’ or that ‘it could be improved by not talking to young people as if they don’t understand or not telling them and opting to talk to parents instead.’

Young people spoke about how they knew when a professional was genuine ‘cared’ and wished to listen to them ‘you know when you are being patronised’.

However, not all of the young people taking part in the groups wanted to be involved in decision making. One of the young people who was in the care of the local authority felt that ‘meetings are boring’ and they ‘don’t want to go.’

# Conclusion

This project has been focused on a broad range of services in order to begin to engage with young people in Sandwell around health and social care and to gauge their understanding and use of services.

Most young people were aware of and had used GP services, dentists, and opticians. Feedback on dentists and opticians was generally positive but for GP practices feedback was largely focused on waiting times and the difficulty of accessing appointments. There had been limited use of both A&E and Walk-In Centres and again the feedback was largely concerned with waiting times within these services.

Waiting times were also an issue around accessing mental health services, however, there was also feedback in relation to the engagement with professionals and how supported and listened to young people who had used the service felt.

Being listened to by professionals was a theme from the feedback across services, not just around mental health services but with GP services, and particularly around the school nurse and being able to have involvement in decision making about what happened to them.

Education providers were seen as having a role in providing information, advice and guidance to students but it was felt that they were not always sufficiently trained and informed to be able to support students in accessing services and that sometimes there was a lack of provision within schools and colleges, particularly regarding mental health support. The need for more mental health provision dominated discussions within focus groups. The young people identified the need for lower level preventative support as well as quicker access to specialist support. It is clear the Governments Green Paper: Transforming children and young people's Mental Health Provision and its intention of establishing Mental Health Support Teams within schools and 4 week waiting times for specialist services has yet to be experienced by the young people contributing to this report.

It was highlighted throughout this research that young people have the skills and ideas of how the issues identified can be tackled. Many suggestions can be built upon through working directly with the young people themselves.

# Recommendations

1. A Youth watch is established within Sandwell to ensure the voice of young people continues to be heard and used to improve services across Sandwell. The Youth watch should have its own priorities beginning with the findings of this report. Youth watch volunteers to be identified and trained to be part of enter and view team and engagement teamwork.
2. Raise awareness of services available for children and young people and how to access specific advice regarding mental wellbeing, mental illness, drug and alcohol misuse and sexual health.



3. A review of mental health support in schools and colleges to enable young people to access support in an environment that suits them. Support effective and positive communication about mental wellbeing, such as mental health awareness days
4. A review of the waiting times for wellbeing services for young people, especially CAMHS. Assess and enhance the support for children and young people while they wait for an appointment by interim options for peer or online support while they wait for an appointment

Healthwatch Sandwell would like to thank the following organisations for their support with this research; The Westminster School, Sandwell Public Health Team, The Albion Foundation, Perryfields High School, Oscar Sandwell, Sandwell Advocacy Young Carers Project, and Health Futures College.



If you are a child, young person or organisation in Sandwell reading this report and would like to contribute to tackling the recommendations please contact

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Healthwatch Sandwell are in the process of setting up a Youth Healthwatch and are seeking young volunteers aged 14 - 24 years.

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