Exerts from CQC inspection of community health services for children, young people and families at Leicestershire Partnership NHS Trust, Jan 2017 – rated good overall.

Good practice

The web based health, text service and web chat service for young people has proven a successful way to communicate with youngsters and provide appropriate information. The planned health visitor inclusion for mothers and families will provide further support for all.

The flexibility and empathy demonstrated by the looked after children teams was unyielding during challenging times

The Diana team provided a dynamic and holistic caring service to young people and families.

Are services responsive to people's needs?

By responsive, we mean that services are organised so that they meet people's needs.

Summary

We rated community health services for families, young people and children as good for responsive because:

 The needs of families, young people and children were taken into account when planning and delivering

School nurses provided a text advice service called 'Chat Health' and a Web based forum to enable young people to access advice through a system they were familiar with. We saw two examples of this confidential service in action.

the complexity of the various care services available.

However we found:-

need, unaccompanied children and child protection cases without additional resource. The looked after children team had raised awareness of unaccompanied asylum-seeking children and young people by submitting a business plan for increased funding to enable them to meet the needs of vulnerable children and young people.

In audit had identified health visitor new birth reviews vithin 10-14 days were not occurring for babies idmitted to neonatal units. As a result, the service had planned and launched a neonatal pathway to ensure irst health visitor contact took place for these newborns whilst on the units. The trust was monitoring feedback from staff and patients. The trust planned to present their findings to the families, young people and

Are services effective?

Staff used tough books to electronically input assessment information. This was then downloaded onto the central server on return to the office. All information technology equipment was password protected.

Health visitors could refer directly to community paediatricians with concerns regarding developmental behaviour.

We saw how technology (tablets) was used to interact and involve children in researching and understanding their medical conditions or to identify specific health

School nurse service had implemented a confidential text service for children to contact a school nurse in relation to any concern they had. Additionally, there was a web chat facility for young people held each Monday where they were able to ask questions and share experiences.

qualified health visitors and was to be re-audited in November 2016. A senior health visitor told us visits to the unit had increased and they were confident the audit would show improvements.

Competent staff

 Staff working within families, young people and children services were suitably trained to carry out their specific roles. For example, nurses working with looked after children met the standards and base line competencies outlined in the Intercollegiate Role Framework 2015. The looked after children service included care of unaccompanied children seeking asylum.

An occupational therapist had received support to become a specialist sensory assessor for children with suspected attention deficit disorder.

All staff we spoke with told us they had been appraised within the last 12 months, or had dates to attend. Data provided by the trust supported this with 92 to 100% of