0-19 Insights

Introduction

This report forms the second part of the 2023/2024 Children and Young People's Health Needs Assessment, providing the voice of the child and those impacted by the 0-19 provision in Torbay. The report outlines the views and experiences of children, young people and parents/carers in accessing a range of services whilst gathering common themes of what it is like to live and grow in Torbay.

Torbay 0-19 Service

Torbay's 0-19 Service encompasses a range of health and social care provision for children, young people and their families from zero to 19 and age 25 for those with Special Educational Needs and Disabilities (SEND) and with care experience. 0-19 services are commonly known as the national Healthy Child Programme, including Public Health Nursing provision, or Health Visiting and School Nursing.

In Torbay, the current 0-19 Service incorporates public health and children's social care provision that connects with Public Health Nursing services, as detailed below:

- Health Visiting
- School Nursing
- Child Development and School Readiness
- National Child Measurement Programme (NCMP)
- Family Hubs
- Early Help and Family Support
- Young People's Substance Misuse Service
- Advocacy and Independent Visitor's Service
- Missing and Return Home Conversation Service

Method and Contributors

Feedback has been summarised from the results of surveys, focus groups and open-ended discussions with contributions from 0-19 Project Managers, the Voluntary Community and Social Enterprise (VCSE) sector including Sound Communities and Children's Services Youth Participation Officers. A qualitative approach was taken in interpreting the insights gathered, revealing several key issues in the form of cross-cutting themes.

Scope and Limitations

Included in this report are the views of children, young people and families accessing various services included within the 0-19 provision but also services that are not within the 0-19 contract. This report is not intended to provide a review of services, although throughout the report there are views on specific provision which provides insight into what is important to people in Torbay. Some services and broader aspects of living and growing in Torbay discussed are not within the gift of 0-19 provision, but we felt it was important to include these points in this report to show the voice of the child. For example, specific topics or themes that relate to safety and education settings.

Insights are attempted to be grouped into age ranges with themes arising from the various records of communication. There are themes that cut across all areas and these are discussed in more detail throughout the report.

The sample size of service users spoken to was smaller than initially intended or desired to capture sufficient, accurate insights. This resulted in fewer insights being recorded across all age groups but especially in the antenatal and 0-5 years and 5-19 years groups. We have been unable to quantify the number and proportion of respondents agreeing or disagreeing with any given opinion, and so cannot include quantitative data to illustrate the views or recommendations given in this report. Additionally, we have been unable to verify how representative the sample was of the entire Torbay population, which is incredibly diverse in demographics and service needs. Qualitative analysis of communications did, however, reveal several topics to be clear priorities for many individuals across all age groups, which we have highlighted as cross-cutting themes.

Cross-Cutting Themes

Several cross-cutting themes are highlighted throughout the report, with mental health support for Children and Young People (CYP) standing out as a particularly important issue. Note there is some overlap between themes. The wider context in which individuals access services and the challenges this presents are also reported. While not directly related to 0-19 services, this context featured heavily in service users' feedback and has an undeniable
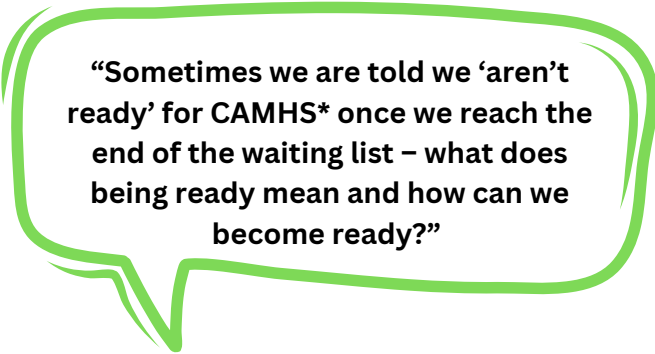
impact on their ability to access services, as well as support themselves and their families in daily life.
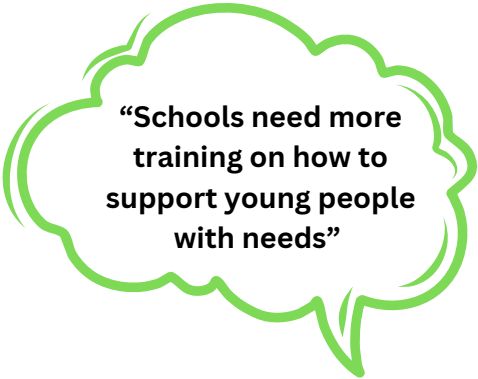
Mental Health Support

Several themes were consistent across children, young people and parents. Mental health support for CYP, but also for parents at all levels of need is a priority. Young people want guidance on how to support their own mental and general wellbeing.

All groups recognised the need for more support for both CYP and their families while waiting to be seen for mental health assessments and/or interventions, including SEND services; given the length of time people are waiting to access services and large numbers of individuals in this situation, this support could be of significant benefit to Torbay's population.

A key issue highlighted by young people is a lack of direction when they manage to access support, to be told they are 'not ready' for an intervention. Guidance on where to go for support and what CYP can do in this situation is needed. Support for people with Education, Health and Care Plans (EHCPs) transitioning to secondary school was felt to be lacking, as was communication between schools, services and parents about their children's mental health.

"Sometimes we are told we 'aren't ready' for CAMHS* once we reach the end of the waiting list – what does being ready mean and how can we become ready?"

"Schools need more training on how to support young people with needs"

*CAMHS = Child and Adolescent Mental Health Services.

Safety and Pride in Place

Torbay's positive factors include its green and blue spaces, outdoor activities and community. However safety and pride in place were frequently noted as issues and often linked, and are therefore explored as one theme.

Both children and adults reported that the streets of Torbay do not feel safe, with homelessness, drug and alcohol use and criminal behaviour deterring people from spending time outside. Young people expressed not feeling safe to go outside to socialise or engage in activities and some parents do not feel able to let their children play outside. They feel that

Torbay has deteriorated in terms of shops, parks, anti-social behaviour and lack of pride in place. Young people additionally feel stereotyped by the older population and unwelcome in the area. Youth clubs were suggested as one route for increasing options for locations and activities where children and young people could safely socialise.

Activities and Boredom

While safety issues hinder young people from going outside, a lack of activities is felt to be another barrier to socialising. More creative and age-appropriate activities, particularly for under-18s, are needed. The current offer is generally slightly better at primary school age than secondary. Parents agree with their children in that there is a lack of things for their children to do, and nowhere for them to go that's safe, warm, dry and welcoming. They noted a specific need for more activities specifically suitable for different age groups. Communication about existing activities is felt to be ineffective with more communication through educational settings and social media seen as beneficial.

Education and Alternative Provision

Children, young people and adults commonly have negative views of mainstream education. Insufficient staffing to meet the needs of children and young people in schools was noted, particularly of roles such as Special Educational Needs Coordinators (SENCOs). This is compounded by a lack of SEND-specific educational support, challenges with the time it takes for EHCP assessments to be undertaken and too few places in alternative provision for those not accessing mainstream settings. Alternative Provision is seen as an excellent resource by young people that have accessed it, offering good mental health support and career guidance, but it was also reported as being offered 'too late' to make a difference.

The following comments were collected to better understand young people's lived experiences of attending Alternative Provision in Torbay:

"Gets me calm before going into school for the week. I'm less angry, less swearing at school. I thought I was going to be excluded before but now I'm able to cope at school and stay with my friends."

"They listen and help with my emotions."

"I trust the adults and enjoy what I do here."

"I like being able to talk about my problems."

[When asked what could be better] "nothing, everything works."

"Helped me engage in learning and experience music industry and working with young people. I am a lot more confident now."

When asked what could be better about alternative provision, young people answered:

"Not to try so many other schools before AP, get it to happen sooner."

"Having more than 2 hours would be good. Having the option to come here sooner rather than moving around 3 other schools before getting it right."

"I went to four mainstream schools before being moved to [alternative provision]. None of the others could meet my needs, they didn't listen to me."

"More hours."

"Offer alternative provision earlier, stop trying different things you know won't work as it's damaging, I was too far gone by the time I was moved"

Children with Care Experience

For children and young people communicated with who had experience of care, specific trauma-informed, relational mental health support was identified as a need. Foster carers working with and caring for children with complex needs such as Post Traumatic Stress Disorder (PTSD) would benefit from more education and support around trauma.

Priorities for children with care experience centre around better relationships with foster carers, preparing for adulthood and supporting transitions between youth and adult (mental) health services. They would like to be involved in the training of Foster Carers and build stronger relationships with social workers. Housing support, job experience opportunities and creative outlets and hobbies are all important areas of future work.

Benefits of Child and Parenting Groups

The benefits of groups providing peer support was a significant theme for parents and carers. Groups enable parents to socialise in a place they feel they are not judged and share their struggles with others in similar situations. Parents are encouraged to open up about

difficulties they are facing and find comfort in knowing they are not as alone as they may have previously thought, particularly with financial problems. The presence of professionals to care for their children and discuss questions and concerns that parents have is highlighted as particularly important for parents accessing groups.

Aspects of groups valued by parents included: free entry; healthy snacks (especially given the cost of living crisis); covered in winter; outdoor activities; and creative activities. Paid groups are seen as more interactive and engaging for children but less friendly and welcoming for parents.

Logistical factors are the main barriers to parents accessing groups and suggestions are made for improving accessibility, including: locations with easier parking; groups during the school holidays; a more even spread of groups over different days; and groups that occupy children and parents simultaneously.

Parents would like more groups targeted at the following demographics/situations: post-natal depression; children with SEND; groups that fit around working parents' work schedules, for example at weekends and lunchtimes; single parents; new mothers; early pregnancy; and groups for fathers and men.

Ages 0-5: Antenatal and Early Years

This section looks at the antenatal and early years period, which refers to the critical developmental phase from pre-birth until a child starts school. It explores what people accessing services consider is working well, specifically the activities associated with the Family Hubs, and what could work better. The section begins with discussing the limitations of the report and areas of further exploration and research could focus.

Limitations

The majority of insights discussed in this section have been drawn from communication relating to the Family Hubs, as most families accessing the Hubs and related services include pregnant women and children in the 0-5 age group. The report does not provide views of pregnant mothers and families with children in this age group who do not attend Family Hubs. Further investigation is recommended involving mothers, families and professionals in a wide range of settings, including: speaking to people at antenatal clinics; surveying parents attending GP surgeries for their 6-week postnatal check-ups; communicating with health visitors directly, and potentially the families they work with; attending non-Family Hub related nurseries, pre-schools and day care providers; and connecting with families through the wider VCSE.

What's Working Well?

Family Hubs and Start for Life

Family Hubs are designed to serve as one-stop centres where families can access vital services. The Hubs act as a single front door, making it easier for families to obtain the necessary support. Services provided by the Hubs include parenting support, infant feeding advice and guidance, support with preparing children to be school ready including home learning environments, and a range of parent and child groups and community activities.

In Torbay, Family Hubs as venues are widely praised and acknowledged for providing safe, welcoming, non-judgemental spaces where parents can access trustworthy professional advice. Parents can socialise and share experiences and challenges. The Hubs are reassuring, inclusive and informative, providing a community which reduces parents' isolation. Mothers reported that their own mental health and their children's development both benefit.

> **"Energy. When you're a mum you get drained, you're pretty much always drained, but then you come here and it kind of perks you up again." [about Family Hubs]**

Services such as Infant Feeding groups enable trusted professionals to dispel common myths and help parents make sense of the multitudes of conflicting advice they receive from different sources, including social media. Groups at the Hubs do not feel rushed, and parents are not made to feel inadequate when interacting with professionals leading the groups.

> **"Every single person is giving you completely different advice – I'd rather just listen to one person, professionals"**

> **"Really grateful to have an infant feeding support here in Brixham. Very helpful and has supported me to continue with breastfeeding"**

Perinatal Infant Mental Health

The Emotional Wellbeing service, part of the Family Hubs Start for Life Perinatal Infant Mental Health programme, supports parents with their own mental health challenges and the relationship with their infant through a series of face-to-face interventions. A tool used to measure the emotional wellbeing of those accessing the service at the beginning and end of

the programme resolutely shows positive outcomes for all accessing the service, with positive scores increasing and negative score decreasing as they progress on the programme.

A young couple who accessed the Emotional Wellbeing service were supported with their relationship and the parents' relationship with their baby, through providing perinatal mental health support and signposting to other relevant agencies. Following this support, the Mum's positive emotional wellbeing scores increased considerably whilst her negative scores decreased. The Dad is accessing and enjoying DadPad, an online tool giving new dads and dads-to-be the knowledge and skills needed to gain confidence and give their baby the best start in life.

A survey of 112 learners who undertook a Solihull online antenatal course, a national online programme, reported improvements in parental anxiety and closeness to their baby.

The following comments highlight the experiences of some of the parents accessing several 0-19 and Family Hub services:

Perinatal Infant Mental Health - Emotional wellbeing service

"[Professional] has helped us a lot as a family. My partner was struggling with bonding with my baby and She gave great advice and techniques. I feel I can talk to her about any problems. I started getting anxious and She has given me relaxation techniques to try and other advice. Every time I felt better for seeing her."

"The program has been key to my healing and I cannot recommend it enough as a pathway for other fathers who have experienced trauma during the birth of their child."

1:1 Infant Feeding Support

"The speed in which my concerns were addressed was amazing. I was in no way rushed in the appointment and I felt that I was listened to with a sympathetic ear without being patronised. I can't speak highly enough about the support I've received and feel like [professionals] went above and beyond to make sure I got the help I needed. It's because of this service that I've managed to continue my breastfeeding journey which in turn has improved my mental health."

The Beehive Family Hub:

"The team at the Beehive were amazing I had a one to one support and also the support in the groups from the other staff and health visitors. I really appreciated everything they did with and for me and my children."

Health Visitors:

"Really happy with [health visitor] visits, felt she was given plenty of time and not rushed"

The Ramble Club:

"Everyone was very friendly and chatty which helped me to relax and feel more comfortable"

The following quotes are taken from feedback surveys relating to all parenting support across Action for Children's services and have been anonymised:

"[Child's] speech has improved massively! I'm so thankful for [professional's] help to give me support"

"[Professional] gave me things to do with my child that I wouldn't have thought of"

"[Professional] helped me with my anxiety so I can go out to groups. She has been extremely helpful"

"I felt it supported my child and gave me more confidence"

"Mainly gave me ideas to do at home and which best suited my child"

"[Professional] went above and beyond she helped us enormously"

Areas for Improvement

One parent felt that email updates would improve communication with regards to Family Hubs and the activities that occur at the Hubs. Another reported being unable to drive to the Infant Feeding Clinic after a c-section and therefore unable to attend; poor transport links as a barrier to attending groups was a common theme throughout feedback on all parts of 0-19 services. Parents also felt that there are currently no activities or groups targeted at children aged 1 or below and/or for the transition from baby to toddler. Babies become overstimulated and are not safe at chaotic toddler groups and so more groups for this specific age group would be welcome.

Communication with parents revealed a general feeling that the 'breast is best' message is emphasised too strongly. This message is not used within the Family Hubs and related health services, nor in more general national public health messaging, and so it is unclear where this message is originating. Incorporating discussions to address this message into myth-busting and other messaging may be useful for parents and carers.

Ages 5-19: School Age

This section considers the views of children and young people of school age who live in Torbay. It highlights significant limitations in representing the voice of the child and young person, whilst providing suggestions for further investigation and research ensuring there is a wholesome understanding of what it is like to live and grow in Torbay, covering a range of topics and themes. The report details experiences of what is working well and also what could work better for this age group. Views held have predominantly been from children with care experience and those supported by Children's Services.

Limitations and Areas for Further Investigation

The sample size in the 5-19 age group was particularly low and cannot be verified as being representative of the entire Torbay population. This leads to a risk of isolated opinions seemingly holding true for a larger proportion of CYP than in reality, although we aimed to combat this through using a variety of sources from different contributors and including views which were represented across multiple sources. The 5-11 age group was underrepresented compared to both the 11-19 and other groups in this report, partially because few of the services within the 0-19 offer are targeted specifically at this age group. School nurses and those accessing the school nursing services were not communicated with which further contributed to the paucity of responses in the 5-11 group.

For this report to represent comprehensive insights of children and young people in Torbay, many more children and young people aged between 5-19 and their parents would have been communicated with, including students and staff across mainstream, alternative and SEND education settings. In addition, youth-led groups for example the Children in Care Council,

and SEND-specific support groups would be accessed directly and foster carers would have been communicated with.

It has not been possible for us to break down the insights in this section into the 5-11 and 11-19 age groups due to the low amount and nature of data available. This creates a further limitation as what a child may experience at age 5 differs greatly from their experiences at age 12 and beyond. Ideally we would gather sufficient accurate data to provide this breakdown in future work.

The majority of responses in this age group focused on the wider aspects of growing up in Torbay which are not directly related to 0-19 services. As previously stated we have included many of these responses as they are important in hearing the voice of the child and providing understanding of their experiences of growing up in Torbay.

What's Working Well?

Children and young people known to children's social care in Torbay and who access advocacy provision report feeling listened to appropriately and feel free to talk about what's important to them during their meetings, which makes them feel empowered. There is general satisfaction with the advocacy provision and people accessing it feel the model works in terms of having their say and understanding the child protection system in Torbay.

The Independent Visitor Service, a volunteer programme providing positive role models for children and young people, stood out for this age group and received very positive feedback. Visitors and activities were seen as fun and engaging as they are tailored to the individual child's interests. Children feel that visitors enjoy their company and genuinely want to spend time with them and gain significant benefits from this feeling.

Areas for Improvement

Children and young people feel isolated. Those in mainstream education felt they had no guidance or opportunities for their futures provided within their education.

Witnessing drug and alcohol use and misuse has a negative impact on young people. They feel that their peers are influenced by gang culture from social media to become involved in drugs and criminal activity.

All CYP who were communicated with and who are in mainstream education felt negatively about school. They are frustrated with schools' and services' approach to mental and physical health conditions and SEND; approaches are seen as patronising and tick-box with meaningless consultations not resulting in any actions or feedback.

Mental Health Support

Much of the dialogue from this age group centred around mental health support in schools. Children and young people felt that more support is needed for children and parents while on waiting lists for various services, which would aid them in bridging the gap whilst waiting for an intervention or diagnosis. Children and young people report wanting more staff and more support in schools generally for those with additional needs. Some examples of what they thought would work well include:

- Mental health practitioners in schools
- Compulsory mental health training for primary and secondary staff
- A more detailed mental health educational curriculum throughout primary and secondary school
- A focus on relational practice in all support.

CYP want schools to be more open about difficult topics in mental health. Self-harm, suicide prevention and stigma around mental health conditions should all be directly addressed. Young people feel particularly lost when it comes to eating disorders and do not know where to access information and support. CYP who are home schooled may find it even more difficult to access support for their mental health. Options outside of school such as apps and ambassadors were suggested as beneficial routes to accessing support.

Ages 16-24: Transitions into Adulthood

This section considers the transition to adulthood phase, a significant period of time that marks the end of childhood and the emergence of young adulthood. During this phase, individuals are expected to acquire new roles and responsibilities, ultimately leading to emotional and functional independence. There are significant limitations in representing the voice of young people who are in this phase of life in Torbay, discussed in further detail below. The positive aspects and room for further investigation discussed in the previous section can be extended to this part of the report.

Limitations and Areas for Further Exploration

As with other age groups, the sample size of respondents was low. Sample demographics were not provided and so we cannot assume that the views of the individuals spoken to are representative of the wider Torbay population of 16-24 year olds. Ideally we would have improved on these limitations by:

- Speaking to staff and students in all types of educational settings open to this age group, including school nurses
- Met with young people in education, in employment and not in either education or employment
- Communicated directly with young people with care experience and care leavers

- Spoken to VCSE and support groups
- Surveyed both young people with SEND and parents/carers of young people with SEND

We did not have access to copies of interview and focus group questions or prompts, or transcripts of communications. We therefore cannot exclude bias in the type or phrasing of questions which may have impacted the nature of responses. Ideally we would have used open-ended questions which were neutral in nature to remove the risk of involuntarily prompting either positive or negative responses.

As a result of these limitations we have been unable to include a 'What's Working Well?' section within this age group; we did not have sufficient relevant insights to support this section. Future work should explicitly ask this question of children and young people alongside asking what needs to be improved and other neutral, open-ended prompts, to give a thorough, accurate and rounded overview of both 0-19 services and the wider aspects of living in Torbay.

Areas for Improvement

Drug and alcohol groups received conflicting feedback and would benefit from deeper, service-specific analyses. However, young people feel that positive stories from local influencers could help support a reduction in drug and alcohol use. More education around the power of social media and influencers would also be beneficial.

Sex education in schools needs to start earlier. Currently young people use the internet and pornography as education and have a poor understanding of STIs and preventing pregnancy. Their sexual health would further benefit from an improvement in the ease of navigation of sexual health services and the promotion of positive first contacts with professionals. Sexual health campaigns should be rolled out both in and outside of school settings.

Young people would like career guidance to focus more on non-university life and career paths after leaving school.

The young people in this age group feel that communication training is needed for mental health professionals to better discuss options and planning for young people transitioning to adult mental health services. Furthermore, all services should have a transition/bridging service.

Recommendations

As with the insights and themes discussed throughout this report, our 12 key recommendations align with several different categories with substantial overlap between them. The report and recommendations should be read while keeping in mind the wider

context of growing up in Torbay and the impact that broader measures beyond the remit of 0-19 services would have on the area, its services and its young people.

Mental health support for children and young people of all ages is the overarching priority and feeds into the other themes outlined below. There is already work being done in all areas, particularly mental health, and taking into account the further priorities identified here in this work will continue to improve support for young people living, growing and accessing services in Torbay.

Mental Health Support

- ☐ Put in place specific support for CYP and their families while on waiting lists.
- ☐ Produce guidance outlining the full range of support and services available outside of CAMHS, including support available when a child or young person is deemed 'not ready' for CAMHS.

Mental Health and Education

- ☐ Education settings should address traditionally 'difficult' or sensitive mental health topics directly with open discussion, including self-harm, suicide prevention and eating disorders.
- ☐ Continue to promote alternative provision for young people that need and would benefit from it, including on a less than full time basis where appropriate.
- ☐ Prioritise transitions in education-based guidance and support, such as: transitioning from children's to adult mental health and SEND services; transitioning from secondary education to employment or higher education; and transitioning out of care.

Safety and Activities

- ☐ Improve promotion of existing activities through social media and education settings.
- ☐ Target new activities at ages 11-18 and CYP with SEND.
- ☐ Introduce specific, safe spaces for children and young people such as youth clubs.

Children with Care Experience

- ☐ Involve CYP with care experience in the training of foster carers and organisation of children's services.
- ☐ Improve foster carer training with focus on complex needs, PTSD and trauma-aware and relational practice.
- ☐ Support care leavers in their transitions to adult life with guidance around housing and employment.

Child and Parent Groups

- ☐ Target future groups at specific populations including early pregnancy, new mothers, single parents, fathers, working parents and families with children with SEND.

Further Investigations

Further exploration of user experiences of 0-19 services should involve the collection of both qualitative and quantitative data. This will enable a thorough mixed-methods analysis of the experiences of children, young people and parents/carers accessing 0-19 services. A sufficiently higher sample size in all age groups will protect against outliers and skewed results. Samples in all age groups must be representative of the diversity of Torbay's population.

Investigations should utilise a mixture of surveys, interviews and focus groups and record the numbers and proportions of respondents expressing any given viewpoints. A semi-structured format for interviews and focus groups will allow for open discussion and space for service users to express their views.

Appropriate ethics and governance guidance should be followed to ensure safeguarding of all children and adults involved, particularly when communicating with vulnerable individuals and about sensitive topics.