



Royal College
of Nursing

Children and Young People's Nurse Leaders Summit 2019



Who speaks for children's nursing?



We invited forty children's nursing leaders from *across* the field of practice to discuss:

- Children's nursing needs to develop a clearer voice than ever before
- Increasing challenges in all parts of our work
- Increasing challenges for children, young people and their families



We set the scene by looking both backwards and forwards....



Health Needs

Priority health challenges

Examples of key facts

Accidents	Biggest killer of 15-19s	✓
Oral health	Inequalities persist	✓
Obesity	2050 predictions 60% men, 50% women & 25% in children	✓
Substance misuse	Increases in drug usage	✓
Low birth weight & infant mortality	Challenges on inequalities remain	✓
Sexual health	Very high teen pregnancy & STIs on the increase	✓
Life chances for children with disabilities	Poor outcomes & poor planning of services	✓
Outcomes for acute episodes of illness	Variability in services, many not meeting standards	✓
Communicable disease	Variability in rates of immunisation rates	✓
Mental and emotional	1 in 10 children has a diagnosable mental health disorder.	✓
Life-limiting diseases	Comparatively poor survival rates for cancers	✓
Long term conditions	One of highest incidence of diabetes. Poor	✓



NEWS

Child homelessness at Christmas up 46% in 4 years

3 December 2019

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Ellen Clements moved into a hostel with her mother when she was six years old

The number of children who will spend Christmas in temporary accommodation due to homelessness has risen by almost half in four years, a charity says.

Research by Shelter Cymru predicts about 1,600 children will spend the festive period in B&Bs and hostels in Wales - a 46% increase on 2015.

Health

Child life expectancy projections cut by years

By James Gallagher
Health and science correspondent

🕒 2 December 2019



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Years have been knocked off official projections of children's life expectancies in the UK, an Office for National Statistics (ONS) report shows.

A baby girl born in 2019 is now expected to celebrate three fewer birthdays on average, than under previous calculations.

Official 2014 data thought that girl would make it to 93.6. Now the figure is 90.4.

The report also slashed the likelihood of children reaching 100.

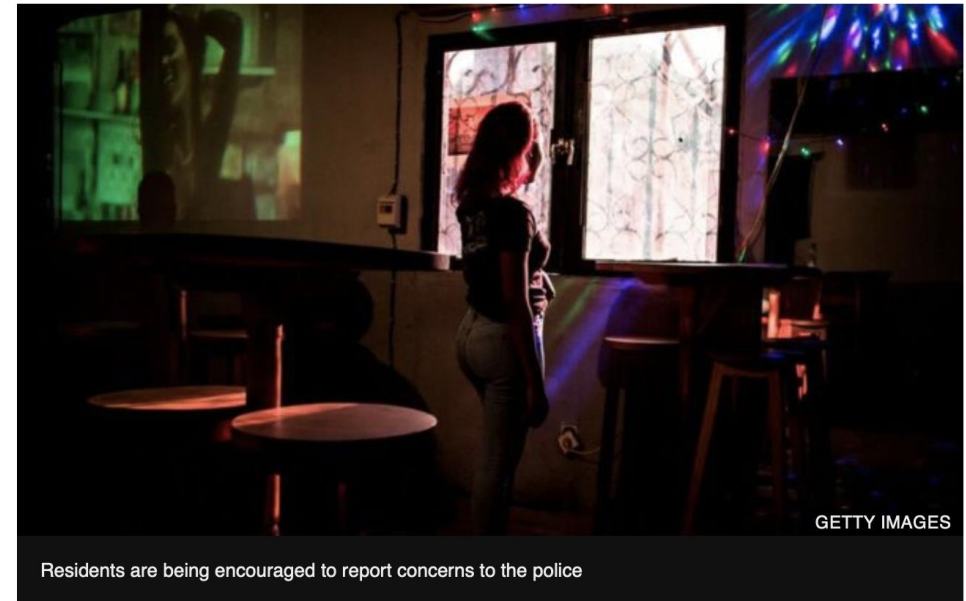


New police team to target child trafficking gangs

🕒 25 November 2019



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Residents are being encouraged to report concerns to the police

A new police team has been set up to tackle child trafficking after a major increase in the number of cases.

The move follows concern about the number of Vietnamese youngsters who have sought help in Edinburgh.

The officers will support the work of the National Human Trafficking Unit amid fears children are being used for slave labour.

Mother of Salcombe teen who died was 'off her face'

🕒 4 December 2019



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Holly Strawbridge kept giving Tyler and a friend "strips of pills" the court heard

A 15-year-old boy who died after taking drugs and drinking with his mother had overdosed 18-months earlier, a court has heard.

Tyler Peck died at his house in Salcombe, Devon in February.

His mother Holly Strawbridge denies two counts of supplying a class-A drug and two counts of child cruelty.

Plymouth Crown Court heard she was "drunk off her face" on the night her son





Round table discussions on:

- Safe Staffing
- Education
- Leadership
- Clinical
- Research
- Children and Young People's Voice



What we heard: Safe Staffing

Solutions/what needs done?

- Innovative new roles – promoting children’s nursing
- Promoting family centred care
- Integration from services into schools
- Protect CPD /training time
- Grow your own
- Flexibility within services
- Rotation acute/community
- Engaging more with primary care
- Guidance around safe staffing needs to change around new roles
- Lack of career progression/courses
- Engaging parents/families in the safe staffing campaign/patients stories
- How to engage younger nurses to campaign
- Exploring critical incidents
- Risk assessment/management individual children

What we heard: Leadership

Leadership/solutions – what needs to be done and by whom

- Leaders need to connect and network
- Need more recognition of nurse leaders/clinical leadership
- Learn from the doctors who have developed leaders over the last 10 years
- All nurses can be leaders and need to be able to articulate their ideas
- Role modelling of leaders
- Shadowing opportunities
- Senior posts within organisations leading on CYP – board level
- Role model; shop floor
- Assumption that leaders have ‘office’ not practice
- Value diversity in leadership
- Have leaders who represent the people they lead
- Queen nurse programme for community nurses
- Leadership/management training early on
- Clinical supervision
- RCN: dichotomy organisation. Union focused. Needs more professional voice
- Value leadership- bottom up, top down models

What we heard: CYP Voice

Opportunities

- Really ask CYP re practice issues/design of resources
- More collaboration with voluntary sector
- Employ youth workers to engage with CYP to obtain their voice
- Ensure appropriate for age range
- Learn from young people who have for example gone through transition
- Use of technologies to ensure voice of child/YP rather than parent
- Opportunity to engage children in undergrad
- Opportunity for RCN CYP conference to share good practice to encourage networking re voice of child
- Children & YPs champion
- E-clinics, open APPS, non-identifiable

What needs to be done?

- Support team to understand meanings and potential impact (realistic)
- Stop reinventing the wheel
- Facilitation of community (wider engagement) engagement (schools, disabled CYP, long term, social care, primary care)
- Training and supported specialist role to listen & engage
- Needs to be in culture of organisation
- Value (rewards as preferred) of CYP
- Disparity in the voices that are heard, poor and diverse are heard less than the professional/middle class
- Feel assured that the voice has influenced the service
- What matters to me ...targeted care

What we heard: Clinical Priorities

Opportunities

- Inspection (CQC)
- Resources – money does not always follow service even when recommended after reviews and recommendations,
- Disparate systems and services would disadvantage small units such as urgent care centres
- ? review KPIs replace with relevant outcome measures for children. Contract monitoring to take organisations to account
- Opportunities – E systems not talking to each other – digitalised systems – opportunities and threats
- Transition to adult services – evaluation of child's EHC
- Spotlight on results for inspections to improve clinical services
- Colocation of women and children's services
- Standardised paediatric early warning system (PEWS)

Solutions

- No easy answers – flexible options; people put up with a lot if they feel valued
- Realistic establishment to start with
- Apprentice scheme
- Use of ECHO to share expert clinical practice
- Collaborative working
- Use of tele health
- Get politics out of NHS
- Pathways get parents confident to care \$ child at home. Keep people out of hospital
- Patient cultures/education start at school
- School nurses a missed opportunity could do so much more
- Short term cost metric
- Need the data to support pathways

What we heard: CYP Education

Opportunities:

- Nursing associate role – pathways to children's nursing
- LD nurses in NHS – acute care 40% children in clinics have form of LD
- Outreach
- Apprenticeships
- Robust L&D
- Recruit to train programme
- E-learning/blended
- Creative thinking
- Pop up courses]bite size bits
- Joint programmes – social work & CH

What do we need?

- Workforce plan
- Engagement with schools
- Promotion as a career – various streams – opportunities are unlimited – research, education, policy, clinical, leadership
- Funding
- Needs to be sexy/attractive
- Celebrate success
- Dedicated study time
- PhDs

What we heard: CYP Research

Opportunities

- Looking into where the child's voice is lost/ask children what do they think their priorities are
- Making a research hub for CYP – not reinventing the wheel
- As soon as the 'child' is mentioned ethics committees make it so difficult – RCN needs to lobby
- Stress related to physical health links to mental health
- Transition –safeguarding
- Influencing adult colleagues
- Get providers to think about research
- Recognising from Pre-reg that research is a career responsibility of university, governance, hospitals
- Summer schools/social media
- Closer collaboration between practice and academia

What needs to be done?

- Needs to be a bigger drive
- We don't encourage research – don't have alliances
- Research jobs are pretty low banded jobs and university wages unable to compete with high clinical bands
- People are expected to do it in their own time
- NIHR – nurses are new to this
- Functioning – standardisation – different across 4 nations
- Medics are supported to do research and to be principal investigator
- Work needs to be done on this as a real career – talent spotting
- Empowering research engagement
- Research electives for CYP students – collaborative, opportunities with university colleagues