

Transforming Your Care Programme Team  
Health and Social Care Board  
12-22 Linenhall Street  
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15 January 2013

To whom it may concern

## **Transforming Your Care – Vision to Action**

The review of health and social care has important implications for the health and wellbeing of children, young people and families across Northern Ireland and I welcome the opportunity to respond to the current consultation. NICCY is supportive of many of the underpinning principles identified in Transforming Your Care (TYC), such as, placing the individual at the centre of care, providing a focus on prevention and early intervention and ensuring an outcomes and evidence based approach to services.

The TYC December 2011 report offers compelling evidence of the need to make sure such principles shape the commissioning and delivery of provision to ensure health and social care services can, for example, effectively address persistent health inequalities and give children the best start in life. NICCY also acknowledges the 'shift left' ethos of TYC which identifies the importance of increased investment in home and community based provision.

I have enclosed a copy of NICCY's October 2012 submission to the Office of the High Commissioner for Human Rights on children and young people's right to health. This draws on my January 2012 paper to the United Nations Committee on the Rights of the Child who are developing a General Comment which will provide further guidance to state parties on the implementation of the right to health for children under the United Nations Convention on the Rights of the Child.

I would request that the Board and Department ensure that TYC fully reflects the concerns outlined in the enclosed submission. It is of particular importance that TYC is underpinned by a rights based approach to health and wellbeing; promotes a holistic and life course understanding of health; and engages directly with children and young people in relation to both their individual care and the broader development and



review of services. This should include the participation of vulnerable groups of children and those with particular or complex health and social care needs.

In addition to submitting this paper NICCY would make a number of further comments regarding the Vision to Action document, noting that these are not intended to be comprehensive and instead highlight key concerns.

#### Delivering services at home and in the community

The principle of developing more effective and integrated ways of working, particularly in regard to primary and community based care is welcome as is recognition of the importance of early stage intervention and management of health needs and providing treatment close to home where this is appropriate. NICCY would highlight the need to ensure appropriate infrastructure is in place to support Integrated Care Partnerships (ICPs) and Health and Care Centres both in relation to capital investment, diagnostic, IT systems and so on and also staffing, training, support and leadership. It is important that new structures ensure effective engagement with the full range of professionals including allied health professionals and the community and voluntary sector.

In considering any planned increase in the mixed model of provision across statutory and non statutory agencies, NICCY would note the need to ensure appropriate safeguards are in place throughout procurement and inspection processes to make sure the principles and practices of public sector provision are properly reflected. NICCY would also comment that further detail should be provided in relation to the implications of TYC for social care as well as primary and secondary health care and notes that the detailed proposals in relation to ICPs and associated initiatives relate only to older people.

#### Learning disability

In considering the programme of care relating to learning disability I would draw attention to the findings and recommendations of NICCY's 'Review of Transitions to Adult Services for Young People with Learning Disabilities'. The Review identifies gaps, weaknesses and inconsistencies in arrangements to support young people's transition to adult services and documents where particular improvement is required. This includes areas referenced in the consultation, such as, increasing access to respite care and appropriate day opportunities and highlights the need to address current difficulties in the provision of Direct Payments to young people and their carers which the document identifies as a key mechanism to enhance self directed support and the

use of individual budgets. The report is available at:  
<http://www.niccy.org/article.aspx?menuId=15698>

### Family and childcare

It is important to note that the key proposals in the consultation do not fully reflect the TYC December 2011 report proposals and that introduction of a Headstart programme for 0-5 year olds and integrated budget pilot through the Children and Young People's Strategic Partnership are absent. NICCY acknowledges the commitment to embed family support hubs with a focus on positive parenting and speech, language and communication skills and request further detail on the multi-agency approach to supporting children to stay safely with families or ensure alternative arrangements are made.

NICCY welcomes the commitment to further develop fostering provision and requests more information regarding the Regional Review of Residential Care Services for Children and Young People. It is important that the planning of provision reflects the needs of children and young people and, as set out in the TYC December 2011 report, this should include securing flexible residential accommodation, provision which meets the needs of young people with complex needs and those over the age of 16 years.

In considering Child and Adolescent Mental Health Services (CAMHS) it is of concern that the proposals do not identify implementation of RQIA's 2011 Review recommendations as a priority as referenced in the December 2011 TYC report. While committing to address waiting lists times and provide consistent access to out of hours services is welcome, other areas specified by RQIA, including the cessation of the admission of young people to adult wards, the development of specialist services for children and young people with complex and severe conditions and the provision of advocacy services should also be progressed.

Further to this, I would draw attention to NICCY's recently published report 'Still Vulnerable: The Impact of Early Childhood Adversity on Adolescent Suicide and Accidental Death' which notes specific findings and recommendations concerning mental health services which should be reflected in the implementation of TYC. Examples of this include ensuring young people can access tailored, coordinated and sustained support and including the identification of depression in training associated with the Protect Life suicide prevention strategy. The report is available at:  
<http://www.niccy.org/article.aspx?menuId=16030>

Maternity and child health

NICCY again notes that key proposals in this programme of care differ from those set out in the December 2011 report and do not, for instance, reference a regional plan for mothers with serious psychiatric conditions or the Headstart programme. In relation to the configuration of maternity units across Northern Ireland, NICCY would highlight that options should be developed in conjunction with the ongoing Review of Paediatric Care as any changes in paediatric care provision across regional, district and general hospitals, such as in neonatal care, will directly impact on maternity services.

It is important to reflect that where networks are being established for paediatric sub specialities this should include consideration of all island arrangements as well as partnerships with other UK jurisdictions. I have enclosed NICCY's response to the consultation on the future commissioning of Paediatric Cardiac Surgery and Interventional Cardiology which notes a number of concerns that relate more widely to the provision of specialist and 'low volume' areas of care and treatment. The commitment to enhance paediatric and neonatal transport services must ensure that this meets the needs of both regional and supra regional networks of care.

NICCY would also highlight that while it is welcome that the consultation identifies the need to address the admission of children into acute adult settings, the Review of Paediatric Care should be considering this issue in relation to those under 18 years of age, not simply 16 years as referenced. I am also mindful of the implications of the outworkings of the Review of Paediatric Care on configuration requirements for the modernisation of the Royal Belfast Hospital for Sick Children (RBHSC). Finally, it is of course important that securing capital investment for RBHSC sits alongside the implementation of recommendations from the 2010 Interim Management and Support (IMAS) Team report regarding the provision of urgent and emergency care.

Do not hesitate to contact my office if you require any further information.

Yours sincerely



Patricia Lewsley-Mooney  
Commissioner for Children and Young People

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