

# Appreciative Inquiry into Community Nursing for Children and Young People

**Summative Event** 

September 2015



## Aims of today's session

- To recap on the purpose of the inquiry
- To enable us to feedback what we've done so far and what we've heard back
- To clarify next steps
- To give you the opportunity to shape how you'd like to be involved in the next steps.

## A brief recap...

putting the inquiry into context



- Changes to commissioning responsibilities for children and young people – see infographic
- 5-year strategic vision for the central Cheshire health and social care system:
- Care centred around the needs of individuals,
- Care that is joined-up and coordinated,
- That focuses on improving outcomes; and
- Tackling health inequalities



#### Children and Young People's health and wellbeing



#### **Local Authority**

#### What we do

#### What we have responsibility for





#### **NHS England**

#### What we have responsibility for

- Health visiting (until October 2015)

- Hospital and community dental
- Antenatal & new-born screening
- · Health services for people in prison



#### Clinical Commissioning Groups (CCGs)

#### What we do

#### What we have responsibility for

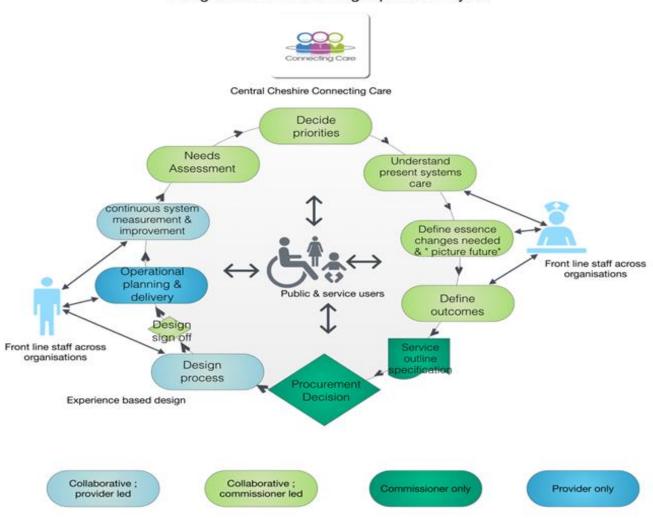




## Require a new form of commissioning – based on co-production with our public and our workforce









## Appreciative Inquiry – a positive approach to change

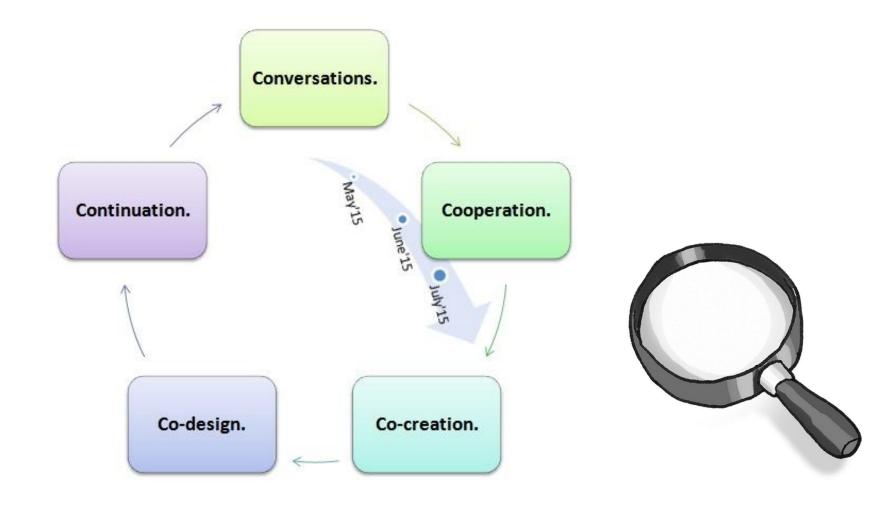
Involves working with and listening to service users, staff, other stakeholders

Ensures good practice is retained and built on as change takes place

Focuses first on what is working well



## Appreciative inquiry: a positive approach to change



## Progress to-date .....



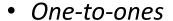
May 2015 - we started the conversation

June/July 2015 - we continued the conversation and nurtured cooperation



- Parents / carersGroup sessions (x3)
- Telephone

#### Wider 'stakeholders'







#### Nurses

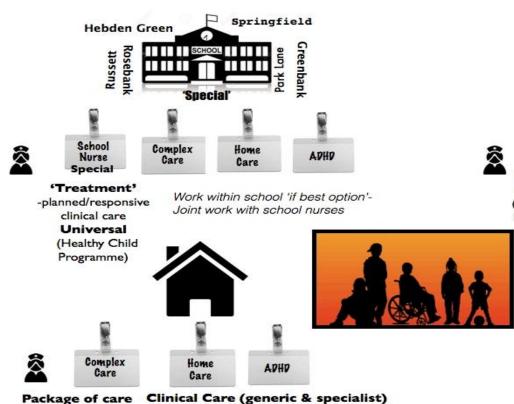
- Group sessions
- Visits to schools

Aug 2015 – we wrote up what we've heard. This comprised a 28 page report and 47 page Appendices of supporting information.

### Understanding how the present system of care works



#### Overview of Community Nursing Service (within and out of school)



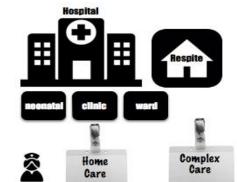






Universal (Healthy Child Programme)

Work within school 'if best option'-Joint work with school nurses



#### **Based within hospital Support CYP**

 close working with in-patient nursing (and allied) services

when away from home e.g. foster/respite

"keep as well as can be' -high threshold (Only 1% CYP receive)

#### Clinical Care (generic & specialist)

Acute & short term conditions Long term conditions Disabilities & complex conditions Life limiting & life threatening illnesses (palliative/end of life care)



## What we've heard so far...

#### cont'd

"Last week, the Nurse phoned us and said 'I think something's going on with her', so we rang the GP and got her in, on antibiotics and out of hospital...it's fantastic!" Parent

"The contribution of nursing care was singled out as an aspect of outstanding practice in an Ofsted Inspection and also highlighted on a wider CQC inspection." Head Teacher (Special School)



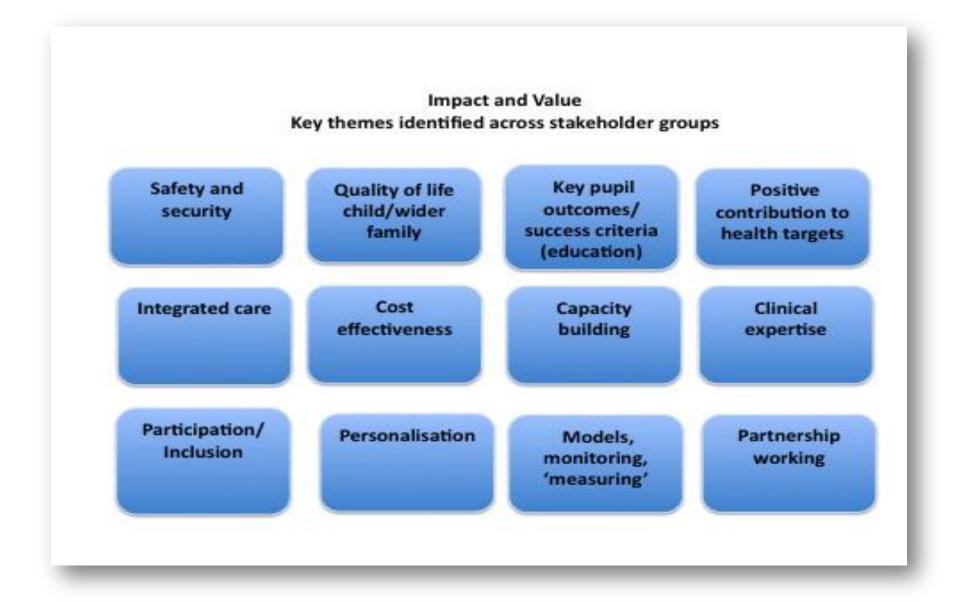




"We've had training from Reps on a new intervention to help control seizures. We're cascading that across education staff, family and foster carers." School Nurse



### What we've heard so far...





## What we've heard so far... cont'd

## Questions asked - 'what's working well?' and 'what positive practice means for you?'



Parents/carers: a service that promotes trust & joined up communication, a positive relationship with the child & a level of parental involvement that works for them. In relation to the care itself the key areas were continuity, flexibility & reliability with access to innovative up to date clinical practice.



**Nurses:** the quality of care, professional integrity, involvement in a professional network and sense of belonging to the school in which they are based.



**Headteachers**: the ability to provide a positive learning experience, to include all children, ability to plan and manage their teams and to be involved in strategic planning.

Does that sound about right?





Reflect



## What we're yet to hear .....







**All** stakeholders

All parents, carers and families





## A key priority!

How can we get the most out of this?

How can we make this happen together?

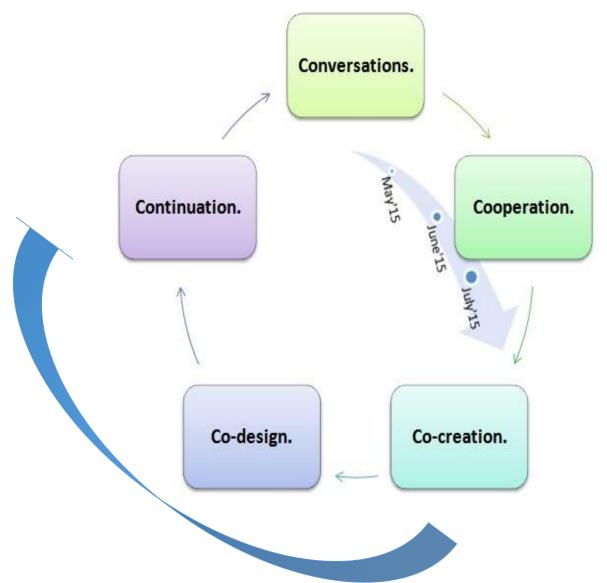
What practical support/tips can you provide?







## Moving forward ......







https://youtu.be/vugLEaEcBR0





Share knowledge, Have conversations Build ideas, Build partnerships





Knowledge

Lived **Experience** 

Skills & abilities

Influence

**Connections** 

**Resources** 

**Creativity** 

**Passion** 

**Trust** 

2





Reflect





## Moving forward ......

- Envisage key work streams around:
  - Defining what the future looks like the essence of change needed
  - Defining what matters to children, young people and their families
  - Defining how services need to be delivered to achieve change and deliver what matters to children and young people (i.e. the model for future service delivery)
  - Defining how best to enable delivery of this model i.e. funding and contracting mechanisms



## Moving Forward .....

Your involvement



time, skills, preferences, information 'provider', decision maker, consultee?



## Next steps .....

#### Sept 2015:

 Engagement with young people begins, via Young Advisors

#### Oct 2015 onwards:

- Report findings circulated
- Continue to scope your involvement (starting today).
- Convene again to start to co-create and co-design decisions and services (based on today's feedback)

## Keeping in touch





South Cheshire Clinical Commissioning Group



Vale Royal Clinical Commissioning Group





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