

Children, Families, Women and Maternity E-bulletin – September 2006

Introduction

Gateway 7070

This E-bulletin is the eighteenth edition in a series designed to provide you with regular updates on activities that are supporting the delivery of the National Service Framework for Children, Young People and Maternity Services. The NSF sets delivery standards for the *Be Healthy* and the *Be Safe* outcomes in *Every Child Matters: Change for Children*, outcomes that are now set out under the Children Act 2004. We hope to show the many connections between the underpinning and related programmes and demonstrate how they link to improve services for children, young people, pregnant women and their families. With policy updates, consultations, publications, and key events, the bulletin offers managers and front line staff the ability to share information on new roles and areas of emerging practice. Over 3,000 people across health, education, and social care receive the e-bulletin on a monthly basis. (Go to www.dh.gov.uk/childrenewsf or www.everychildmatters.gov.uk for more information on these initiatives)

The name of the bulletin has changed to reflect the widening role of the team at the Department of Health. We are now Programme and Partnerships for Children, Families, Women and Maternity.

General News

Comprehensive Spending Review 2007

Call for evidence: DfES/HM Treasury Joint Policy Review on Children and Young People

As part of the follow up activities on the above, HM Treasury and Department for Education and Skills are undertaking a 'Call for Evidence' to enable as many key stakeholders who work with, or have an interest in improving the life chances of children and young people, to contribute to the debate. The Children and Young People's Review subsumes three additional sub reviews which focus on:

- greater support to families with disabled children to improve their life chances;
- what strategy should be adopted over the next ten years to deliver a step change in youth services and support for young people;
- how services for families and children at risk of becoming locked in a cycle of low achievement, high harm and high cost can be reformed to deliver better outcomes.

Responses would be welcome for one or more of the reviews; however you are advised to complete a separate form for each review. **Responses should be submitted by 15 September 2006.** Details of the Call for Evidence and proforma can be found at:

http://www.hm-treasury.gov.uk/media/CFD/76/crs07_childrenewpeople_callforevidence.doc

Health Reform – the impact on the children's agenda

The NHS is undergoing a period of huge reform. In this bulletin in recent months we have reported on changes to Strategic Health Authorities (SHAs) and Primary Care Trusts (PCTs). In this article we have attempted to pull together some of the key changes that have happened recently and other challenges to be faced in the coming months.

As of 1 July the number of SHAs has reduced from 28 to 10. They are now in line with the boundaries of the government offices except in the South East where there are 2 SHAs, South Central and South East. The names of the 150 new PCTs have been announced and the new organisations will be in place from October 2006.

Practice Based Commissioning (PBC) is also coming into place and we are working closely with system reform colleagues and will be running pilots in a number of PCTs to ensure that the needs of children's and maternity services are met.

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The Department of Health published an update on health reform and commissioning framework on 13 July that sets out a high level framework for the next stage of the reform of the health system. It also provides an update on the other elements of the reform programme including provider reform, system management, financial incentives and information.

Alongside this the NHS is facing the challenge of achieving net financial balance following deficits of £1,227 million in 2005-06 and improving the financial performance of all organisations reporting a deficit in the last financial year. Latest figures show that 120 organisations are forecasting deficits for 2006-07 compared to 174 in the previous year.

All of this, combined with pressures around other targets and priorities, has led to a period of uncertainty, with some evidence of PCTs unable to commit resources to partnerships to deliver the children's agenda and a slowing in progress in some areas towards integration and appointment of joint posts.

However, there is also the evidence to show that, despite all these current constraints, there is commitment amongst health partners to work in close collaboration with LAs and other partners to move this agenda on.

From April 2006 the Brighton and Hove council's existing Children, Families and Schools Directorate was brought together with the equivalent Children's Community Healthcare Service to form a single organisation- the Children and Young People's Trust. The CYPT now sits at the heart of a coherent partnership that includes schools, general practitioners, hospitals, the police and community and voluntary sector organisations.

In terms of measuring the impact of these developments, it is early days. However, the JAR headline feedback for June 2006 for the *'be healthy'* outcome (still subject to further analysis and moderation) concluded that the city was making good progress in targeted work for under 5s; support for victims of domestic violence; teenage pregnancy reductions for the under 16s; chlamydia screening; development of a new children's hospital; CAMH strategy; CAMH services; under 18s drug treatment; health assessments for LAC; services for disabled children (rated as high level) and the development of an overall health strategy for children and young people.

DH and DfES have committed to producing a good practice guide for PCTs on how services can be delivered through children's centres. Later in the year DH will publish Health and Well-being Commissioning Guidance, which will be featured in the bulletin.

<http://www.dh.gov.uk/assetRoot/04/13/37/60/04133760.pdf>

¹ Names of new PCTs announced <http://www.dh.gov.uk/assetRoot/04/13/75/59/04137559.pdf>

¹ Health reform in England: update and commissioning framework <http://www.dh.gov.uk/assetRoot/04/13/72/27/04137227.pdf>

¹ NHS Financial Performance: Quarter 1 2006-7 <http://www.dh.gov.uk/assetRoot/04/13/79/95/04137995.pdf>

Strategic commissioning of maternity and child health services – PCT and SHA Fitness for Purpose

The Commissioning Framework for Health and Well-Being which will be published in December 2006 will set out the strategic direction for the commissioning of effective maternity and child health services. This will include the implications for individual, practice-based and joint commissioning.

It is important, however, that momentum is not lost in the interim. With this in mind, Kate Sallah, until recently Director of Nursing at Birmingham and the Black Country SHA, has been doing some work with us to adapt the PCT 'fitness for purpose' exercise tool to focus on the strategic aspects of commissioning services for maternity, children and young people.

This is still very much work in progress. We want to share the drafts with you at this early stage so that you might build them into plans for performance managing and commissioning these services in a wide ranging and complex area and informing the design of new commissioning structure. We believe that the main benefit is that the tool is in a format with which PCTs are already familiar. It could, of course, be transferable to other client groups.

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The working drafts can be found on the DH website at

http://www.dh.gov.uk/PublicationsAndStatistics/LettersAndCirculars/DearColleagueLetters/DearColleagueLettersArticle/fs/en?CONTENT_ID=4138613&chk=Vd5C5t

As well as doing further work on this tool, including the development of some high level indicators, we will also soon be publishing the outcome of the first ever Child Health and Maternity Atlas resulting from our national mapping exercise. We believe this information will be of significant help in focusing attention on where improvements are most needed in order to deliver the *National Service Framework for Children, Young People and Maternity Services* and the health service contribution to the *Every Child Matters* outcomes. Baseline information will be available for each PCT. The Government Offices' Children Service Advisers are currently looking at how this information can be used in assessing some of the health aspects and health questions to inform the Local Area Children's Priorities Meetings to be held in the autumn and they too are drawing on the evidence from the Mapping Exercise.

We would welcome any feedback, particularly in relation to the SHA performance indicators to be highlighted in column 4 of the tool, on the drafts and will aim to disseminate revised versions in the Autumn together with early drafts of the relevant sections of the December Commissioning Framework. We look forward to continuing to work with you to support the NHS in meeting the needs of children, young people and maternity service users.

For more information please contact Kate Sallah on kate.sallah@dh.gsi.gov.uk.

New PCTs announced

The names of the new 150 PCTs have been announced. The new organisations will be in place as of 1 October 2006. The list is available at <http://www.dh.gov.uk/assetRoot/04/13/75/59/04137559.pdf>.

Health Engagement in Children's Centres

DH would be grateful for examples of effective delivery of health services through children's centres (where those services are co-located with, or access facilitated through, children's centres).

These will be used to inform some best practice models to be issued later in the year.

Please send any examples and relevant contact details by 15 September to MB-Childrens-NSF@dh.gsi.gov.uk

Care Services Improvement Partnership and Social Care Institute for Excellence to work together

The Care Services Improvement Partnership (CSIP) and the Social Care Institute for Excellence (SCIE) this have signed an agreement to work together on social care issues to help improve the quality of services.

The organisations formalised their partnership in order to make clear their firm commitment to share resources and expertise where the two organisations' work is complementary.

CSIP and SCIE have a common aim of improving the outcomes and experiences of people who use services and their families and supporters. CSIP works through a range of activities, which provide direct support to assist health and social care organisations to improve services while SCIE's expertise is in developing and disseminating knowledge about good practice.

As a key priority the organisations will draw on each other's experience as they develop strategies to support people who use services, carers and their supporters to become more involved in their own care.

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Both organisations will make use of already established forums for exchanging and developing methods of working and share processes wherever possible to avoid duplication.

For more information about CSIP visit www.csip.org.uk and SCIE visit www.scie.org.uk.

Care Services Improvement Partnership (CSIP) Children, Young People and Families Programme: network development workstream

This workstream provides national support to the development of children's and maternity services managed networks and aims to:

- ensure Working Time Directive (WTD) 2009 compliance
- enable the delivery of NSF standards 6 (Children and Young People who are Ill), 7 (Children and Young People in Hospital) and 11 (Maternity Services)
- support the delivery of NSF Standards 4 (Growing Up into Adulthood) and 8 (Disabled Children and Young People and those with Complex Health Needs)

The 3rd national conference designed to support the development of children's and maternity services managed networks will be held at the Radisson Edwardian Marlborough Hotel, on Monday 9 October 2006. Entitled **Pushing Forward the Development of Children's and Maternity Services Managed Networks: Sharing Achievements**, this conference will aim to:

- provide a forum for discussing the role and development of managed networks in the modernisation of children's and maternity services
- raise awareness of the need for and key factors affecting the development of networks
- provide an opportunity for sharing achievements, learn from others and troubleshoot key issues

The conference will consist of a mixture of plenary and themed concurrent sessions with good opportunities for informal networking.

Guest speaker: Alison Quigley, Executive Director, Child Health Network for the Greater Toronto Area, Canada
Keynote speakers include:

- Dr Sheila Shribman, National Clinical Director for Children, Young People and Maternity Services
- Dr Hilary Cass, Deputy Medical Director, Great Ormond Street Hospital for Children; Project Lead: Achieving WTD compliance for paediatric services across North Central London
- Dr Peter Lachman, Consultant Paediatrician, Great Ormond Street Hospital for Children and Royal Free Hospital Hampstead NHS Trusts; Health Foundation Quality Improvement Fellow (2005-06), Institute for Healthcare Improvement, Cambridge, Massachusetts

Themed concurrent sessions will focus on raising awareness of local network development initiatives.

This conference is funded by the Department of Health. Places are limited and will be allocated on a first come, first served basis. To register, please contact Denise Snow via denise.snow@dh.gsi.gov.uk

Recent appointment

Sally Vernon has just joined the analytical team as an assistant statistician, working to support Children, Families and Maternity. This is her first job with the Civil Service, having finally managed to leave university where she studied maths and aerodynamics. Initially she will be providing analytical support for the Prime Minister's Delivery Unit's review of Child and Adolescent Mental Health Services target. In the longer term she will be providing analytical support to both social care and the children's and maternity policy area. When she is not in the Department of Health Sally can be found having a go at most things, from folk dancing to climbing!

Please contact Sally on sally.vernon@dh.gsi.gov.uk.

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Change of Contact Details

Andy Mobbs has changed his email address, he can now be contacted at andy.mobbs@ic.nhs.uk.

Maternity update

National Maternity Services Dataset - Consultation

The Department of Health has commissioned the National Datasets Service of The Information Centre to develop a dataset for use in England to support the implementation for the National Service Framework for Children, Young People and Maternity Services. You are invited to comment on the draft dataset, which, when implemented, will provide monitoring and other secondary uses information.

The dataset has been derived from Business and Information Requirements identified from the NSF, NICE guidelines, national audits and enquiries, as well as local requirements for information. An expert reference group with membership from the following organisations has agreed these requirements and approved the dataset for consultation and testing. This group will consider the feedback from consultation.

Royal College of Obstetricians and Gynaecologists
Royal College of Paediatrics and Child Health
Royal College of Midwives
Royal College of Nursing
British Maternal and Fetal Medicine Society
National Screening Committee
National Perinatal Epidemiology Unit
Public Health Observatories
CEMACH
Healthcare Commission
National Childbirth Trust

The dataset available is from <http://www.ic.nhs.uk/datasets/consultation> together with associated documents, and feedback should be made via email to datasets@ic.nhs.uk stating National Maternity Services Dataset Consultation in the subject line. If you have any queries regarding the dataset, please contact Peter Bindon, Project Manager or Judith Myhill, Business Analyst.

We look forward to receiving your comments by 20 October 2006.

CAMHS update

In 2006/07 £32 million will be available to the NHS to improve the CAMHS infrastructure, in particular for facilities that provide mental health services for 16-18 year olds and for those children and young people who are also learning disabled. In July the NHS were asked to send in expressions of interest by 9 August for specific initiatives which needed funding. This has resulted in some very good projects being put forward and approximately £16 million will be devoted to these projects. The balance of the funding will be allocated to SHAs via a formula. For further information please email: john.mccracken@dh.gsi.gov.uk

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Child health update

Capital funding for safeguarding children and young people 2006-2007

Last month the Department invited PCTs, NHS Trusts or network managers to submit proposals for capital funding for safeguarding children and young people. We had a very good response, receiving approximately 200 proposals.

The Department will be writing to Strategic Health Authority Directors of Finance shortly to inform them of successful proposals. Further details will be published in next month's bulletin.

Contact: MB-Childrens-Health.DOH@dh.gsi.gov.uk

Hospice service funding

On 29 May 2006 the Secretary of State announced funding of £27m spread over three years for voluntary children's hospice services. The funding is to commence this current financial year. The eligibility criteria for a grant and the application form will be available week commencing 28 August on the DH website at <http://www.dh.gov.uk/PolicyAndGuidance/HealthAndSocialCareTopics/ChildrenServices/fs/en>

Applications need to be completed and returned to the Department by 20 September.

A panel, which will include representatives of the voluntary sector, is being convened to consider the applications and make recommendations to the Department on distribution of the funding. Further information will be given in next month's Bulletin.

Responsible Commissioner Regulations

Because of the Parliamentary recess there will be a slight delay in procedures for amending the regulations. The exact timetable is not yet known but the expectation is that regulations will come into force in November 2006. Further details will be given in next month's bulletin.

Transitions

CSIP are holding an event on 28 September to plan and launch the transition "champions" programme for children and young people with long term health conditions. It will enable "invited "champions" to come together with each other, DH policy colleagues, representatives from the Royal College, voluntary organisations, CSIP and other key stakeholders to agree ways to drive forward the improvements in transition arrangements. The event will be held at the Radisson Edwardian Kenilworth, Gt Russell Street, London. Further information is available from denise.snow@dh.gsi.gov.uk

Early Childhood Forum

The Early Childhood Forum is a coalition of 48 professional associations, voluntary organisations and interest groups united in their concern about the care and education of young children from birth to eight. The Forum aims to bring together partners in the early childhood sector to debate issues, celebrate differences and develop consensus to champion quality experiences for all young children from birth to eight and their families. It promotes inclusion and challenges inequalities.

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Members attend meetings five times a year at NCB in London, at which a high profile guest from the early years field is invited to speak. Members have the opportunity to discuss current issues and become involved in project and policy work through general meetings and ECF focus groups. ECF holds an annual national conference which this year will focus on children's rights and entitlements.

The Forum is currently looking to increase representation from the health sector. If your organisation would like to receive membership information, please contact the ECF Coordinator, Heather Ransom, on 020 7843 6078 or email hansom@ncb.org.uk.

Publications

Healthy schools, healthy children? The contribution of education to pupils' health and well-being

Healthy schools, healthy children? The contribution of education to pupils' health and well-being concludes that the National Healthy School Programme and the introduction of the Every Child Matters agenda have had a positive impact on schools and made them more active in dealing with pupils' health and well-being.

The schools that contributed most effectively to pupils' health and well-being had leadership teams which recognised the link between physical well-being and the readiness to learn and achieve. An ethos was created by the schools which promoted health and engaged pupils, parents and staff. The most successful ones were those where theory was reflected in practice, for example through a school fruit and vegetable scheme and ensuring pupils had two hours of physical activity each week.

The report is available at <http://www.ofsted.gov.uk/publications/index.cfm?fuseaction=pubs.summary&id=4241>

Teenage Pregnancy Next Steps: Guidance for Local Authorities and Primary Care Trusts on Effective Delivery of Local Strategies

Teenage pregnancy rates are coming down but there is wide variation in progress across the country. Latest annual data (2004) shows reductions of 11.1% in under-18 conception rates and 15.2% in under-16 conception rates. Both rates are now at their lowest level for 20 years. The guidance sets out what we know about effective delivery of local teenage pregnancy strategies, based on in-depth reviews carried out in a number of areas with differing levels of success in reducing under-18 conception rates. It also includes new analysis on the underlying factors that affect young people's sexual behaviour and subsequent outcomes, to help areas target their strategies on young people at greatest risk of early pregnancy. The guidance asks local areas to review their strategies in the light of the review findings and new analysis and reflect them in their forward plans. It also sets out what support will be provided nationally to support local delivery. If all areas were doing as well as the top quartile (25%) the national reduction would be 23% - more than double the current rate of programme.

You can access the guidance at www.everychildmatters.gov.uk Teenage Pregnancy site.

Designing networks for collaborative advantage

Working with colleagues at the Department of Health, CSIP has recently published a briefing paper *Designing networks for collaborative advantage* that you may be interested in. It provides practice-based evidence on how to set up networks to improve partnership working and achieve positive outcomes. It is aimed at all those who take part in, run or fund networks to bring about positive change for people with health and social care needs.

Download the paper and the accompanying network design assessment tool at www.csip.org.uk/Partnershipworking

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“What’s Up” – research by Get Connected

More than four out of five young people have recently faced a problem alone when they couldn't get help.

Get Connected asked young people across the UK what stops them getting help when they need it. An online survey and focus groups in Norwich and Manchester identified a lack of trust amongst young people, both in the people around them and in the services designed to help them.

"Some places don't keep what you've told them confidential" said one young person.

"I can't trust anyone anymore I feel lost" wrote a 16 year-old respondent in the online survey.

The research is part of "What's Up?", Get Connected's project to rebrand the helpline and make its communications as accessible to young people as possible.

Ensuring its service and others are accessible to as many young people as possible is Get Connected's aim with all three of these projects. All new branding, materials and website have been created with the communication preferences of young people in mind. Get Connected's communications are to be funded for three years by the Vodafone UK Foundation.

You can download a summary of the research from <http://www.getconnected.org.uk/page.php?id=15>.

Conferences and Events

Respect Academy 2006

The Government's Respect Task Force invites you to a series of free events that will showcase how the Respect Action Plan can be successfully implemented in your area of work. The Respect Academy will steer you through what the Respect programme means in practice – from ASBOs to parenting classes and everything in between. The Respect drive will impact on many areas of public service so it affects you if you work in:

Children's and youth services • Housing Anti-social behaviour teams • Police
Community Safety • Regeneration Youth offending teams • Adult Social Services

Dates and locations of Respect Academies:

- Tuesday 12 September – London
- Monday 18 September – Bristol
- Tuesday 19 September – Solihull
- Thursday 21 September – Cardiff
- Tuesday 26 September – Carlisle
- Thursday 28 September – Sheffield
- Friday 29 September – Sheffield
- Monday 2 October – Peterborough
- Tuesday 3 October – London

The academies are free to attend, but space is strictly limited. Reserve your place now online at www.coievents.co.uk/respect. Booking enquiries can be made on 020 7261 8400

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CSIP Positive Practice Awards 2006

Now in their fourth year, the Positive Practice Awards are designed to recognise and reward the people, teams and organisations that provide mental health, wider care services and community-based support to promote positive health and wellbeing. The awards target people working in public services who support people of all ages with health and social care needs, including people with mental health problems, physical disabilities and learning disabilities. We also welcome applicants from private and voluntary organisations. **Closing date for applications: Friday 22 September.**

For more information and to download an application pack, visit <http://icn.csip.org.uk/link.cfm?lid=166>

Better Care For Children

A care pathways conference is being organised by Great Ormond Street Hospital. There will be a series of presentations on the current development of integrated care pathways across the North London sector. This event will be held on: Monday 16 October 2006 , 10:30 – 16:30 in the Homeopathic Hospital Seminar Room

To reserve your place please contact Jessica Dickie: dickij@gosh.nhs.uk 0207 813 8567

4th Annual Domestic Violence Conference

Inmarsat Conference Centre, London EC1, Wednesday 15 November 2006

Don't Ignore It – Addressing and preventing domestic violence through effective intervention and support

In association with: Refuge, national domestic violence charity and supported by the Department of Health
This national conference will bring together families of victims, representatives from the police, probation, and crown prosecution services, health service, local authorities and voluntary organisations to discuss the implications of the National Domestic Violence Delivery Plan 2005/06 Progress Report and consider the priorities for the year ahead.

Confirmed speakers include: **John Dunworth**, Head of Domestic Violence Team, Home Office; **Christine Mann**, National Domestic Violence Co-ordinator, Department of Health; **Séamus Taylor**, Director of Equality and Diversity, Crown Prosecution Service, **Jan Pickles OBE**, Director, Cardiff Women's Safety Unit, **Brian Moore**, Deputy Chief Constable, Surrey Police and ACPO lead on Domestic Violence, **Anthony Wills**, Consultant – Domestic Violence Project, Local Government Association

Further information: Contact Sarah Spencer on 020 7324 4359 or email

sarah.spencer@neilstewartassociates.co.uk

VISIT THE WEBSITE: [HTTP://WWW.NEILSTEWARTASSOCIATES.COM/LI231/](http://www.neilstewartassociates.com/LI231/)

Building Health in the Community: Women, Children and Public Health

The Auditorium, Royal Blackburn Hospital, Blackburn, 23 and 24 November 2006

Building on previous years' successes this conference will be a collaborative event involving local communities and national figures. It will address public health issues for women and children with a focus on pregnancy, childbearing and early years. Papers will cover local and national innovations in practice, or primary and secondary research, specifically in the following categories:

- Service user involvement
- Peer support
- Community development/ social capital
- Public Health initiatives aimed at tackling inequalities

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The conference will provide the opportunity to develop and disseminate evidence and good practice in the area of public health in pregnancy, childbearing and early years. It will attempt to influence working practice education, management and supervision for midwives health visitors and community practitioners, in addition to influencing policy and further collaboration. It will also aim to promote community development approaches to care, and enhance service user involvement in research and the development of service provision.

For further information please contact:

Sheena Byrom on tel 01254 293991 or email Sheena.Byrom@elht.nhs.uk or

Grace Edwards on tel 0151 7024358 or email: Grace.edwards@lwh.nhs.uk

Making Normal Birth a Reality: A collaborative team approach

Wednesday 29 November 2006

Bringing together managers, clinicians, educationalists and commissioners with backgrounds in midwifery, obstetrics, general practice, public health, labour wards, birth centres and community midwifery services, students from all disciplines and maternity services user representatives, this conference will focus on the importance of working together across disciplines to protect and promote normality in maternity care.

The Children's National Service Framework (Department of Health, 2004) calls for all NHS maternity care providers and primary care trusts to promote the normality of childbirth.

This conference will be highly practical, providing the opportunity to learn about collaborative team strategies and best practice initiatives to develop accessible, woman-centred services that keep birth as normal as possible for women with a straightforward pregnancy and for those with more complex needs.

For more information please visit http://events.nct.org.uk/event_info?event=45

Highlighting new roles

Update from the Nurse Consultant for Children's Palliative Care

Following the successful award of Big Lottery Fund (BLF) monies in 2003, the Nurse Consultant for Children's Palliative Care post was developed and implemented within the Diana Children's Community Service and Rainbow's Children's Hospice. The post was designed to work across the two organisations, enhancing existing children's palliative care services and developing new ones and was to incorporate the essential core elements of the Nurse Consultant role:

- Leadership
- Education and training
- Research
- Expert Practice

The Nurse Consultant for Children's Palliative Care is one of two posts nationally. The other post is situated within a very acute oncological base. This particular post encompasses local children's palliative care provision across the community and hospice settings, and local hospitals services which include neonatal, oncology and cardiology services. The child population for Leicester, Leicestershire and Rutland is 243,888 0-19 year olds (FHSA age-sex register, 2001) and a number in excess of 300 across the Rainbows Hospice catchment area of the East Midlands.

Leadership

This core element of the role is to ensure the effective working of staff within this area through standard setting and monitoring, promoting a safe working environment while enhancing competence/confidence levels. The role also needs to ensure that the voice of all professionals working within children's palliative care is heard across various networks and at local, national and international level. The post holder has primary responsibility for ensuring that

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those working within this field have the appropriate skills, training and experience along with continued support and supervision.

Education and Training in Practice

The post holder has a lead role in developing, implementing and evaluating training and education materials for staff across many organisations ranging from medics to health care assistants. Packages are also available on a national basis to ensure that all professionals have access to up to date and relevant information. To this end a number of conferences portraying varying elements of children's palliative and terminal care have also been organised. The post holder leads the training and education team within the hospice setting, ensuring competencies are developed, implemented and updated.

Research

Research plays a large and vital part of this role, enhancing and developing areas within children's palliative and terminal care. Research has recently been undertaken by the post holder into confidence and competence levels of professionals providing palliative and terminal care to children and families. The outcome of this study resulted in the development and national implementation of a Symptom Control Tool for children in palliative and terminal phase of illness. Publications and conference presentations are currently being prepared about the research findings.

The post holder is currently also leading and creating a Children's Palliative Care Pathway for all children and their families. This is being developed using the template from the Association for Children with Life-Threatening or Terminal Conditions and their Families (ACT) entitled 'Integrated Multi-agency care pathways for Children with Life-threatening and Life-limiting Conditions.' (2004). An audit is in the process of being evaluated to establish gaps within services and areas requiring development so that pathways can be prioritised to meet identified need.

Expert Practice

Future strategies for the commissioning of children's palliative care services across the region are currently being developed. A key role of the post holder is to influence commissioners and enhance future service developments. Various initiatives focused on meeting the needs of neonates have occurred as a result of intervention by the Nurse Consultant. The result has been an increase in the number of neonates referred to the palliative care and hospice services with professionals and parents/carers now being able to identify and make informed choices regarding providers for their child's care. The post holder maintains face-to-face contact with children and their families to fulfil core elements of the nurse consultant role and to maintain up to date practice within this field.

As with any new post, a strategic role such as this often takes a number of years to become established. Children's palliative care is an area that requires continuing evaluation and development. The nurse consultant role needs to be seen as one that is central to achieving these initiatives.

Zoe Wilkes
Nurse Consultant
Children's Palliative Care
zoewilkes@hotmail.com

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Are there any other areas of interest that you feel are not being covered here? Please drop me a line at Jo.Richardson@dh.gsi.gov.uk and let me know.

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CONTACT INFORMATION FOR THE DEPARTMENT OF HEALTH

Name of Organisation (ie Name and linked to NHS trust, PCTs etc):

Title (i.e. Mr, Ms, Mrs etc):

Full Name of Contact:

Job Role:

Job Title:

Expertise:

Postal Address Line 1:

Postal Address Line 2:

Postal Address Line 3:

City/Town:

Region (i.e. East/West):

Postcode:

Direct Telephone Number:

Fax Number you can be reached on:

Email:

Organisation Telephone Number
(if different to Direct Telephone Number);

Organisation Fax Number
(if different to Direct Fax Number):