



children's health

our vision



Care for children will be provided as close to the home as possible within settings that are easily accessible for families.

Only emergency/urgent care and highly specialised care will be delivered from a hospital setting and they will be looked after in a child-friendly environment by suitably trained and experienced staff.

Parents will know how to access care simply and swiftly through single points of access.

Teenagers will receive care in facilities that are appropriate for their needs and age rather than in either children's or adult facilities. As they get older and move into adult services they will be well-educated about their ongoing health care needs and have a clear plan about how these will be met.

Children and teenagers who have a terminal illness will have real choice about where to die and parents will be given the right level of support to enable them to achieve this.



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our priorities for change

- Ensure the different organisations which provide care to children work together better
- Deliver more care outside of hospitals, for example at doctor's surgeries, health centres, children's centres and the home
- Give families better access to clinical staff specially trained to look after children such as health visitors and school nurses
- Improve the way we look after children with long term conditions as they grow older and need to start using adult services.

the evidence for change:

- *There were 783,561 children under the age of 14 in the East Midlands at the last census. In a typical year, the average pre-school child will see their GP six times. Up to half of babies under 12 months and a quarter of older children will attend an emergency department in the same period.*
- *Children's health needs are changing evidenced by the emerging development of palliative care and the rising numbers of children with long term complex conditions*
- *There is a rising tide of behavioural problems; one in 10 children will experience a diagnosable mental health condition*



promotion, protection and prevention

- Advice on reduction of obesity, smoking and excess alcohol use is available to everyone who is contact with the child and their family
- There will be accessible, local child-friendly environments such as children's centres where children can be seen by workers from health, social care and education
- We will better identify vulnerable children as early as possible, including prior to birth



identifying problems

- There will be a single point of access to help, both in- and out-of-hours
- The child is seen promptly by a healthcare professional with appropriate skills related to children
- Parents feel able and confident to deal with minor illnesses with support from children's community nursing teams
- Children with complex long term illnesses can directly access hospital care and specialists without having to be referred by their GP



care of children who are vulnerable or have long term conditions

- The child health surveillance programme will be expanded to pick up early signs of problems and competent health professionals will work better with social care workers
- Children who have a long term condition will experience a smooth transition of services as they grow older and move into adult care



assessment and interventions

- Care will be offered as close to home as possible including early investigation and treatment, outreach services, ambulatory care for ill children and those with long term conditions and palliative care
- Children who need to go into hospital will always be treated in child-friendly environments by suitably trained and experienced staff