

North Somerset Parent Forum

Our Voice Counts

Health Working Group Meeting

29th June 2010

Cathy Fuller
Helen Ash
Paula Edmondson
Debbie Bench

1. The Consultation re Lead Professional Role

Firstly we need to have a copy of the consultation document. (?Debbie to secure a copy for the group along with the threshold criteria).

Helen spoke of her experience of having a 'lead professional' and we discussed how the Health Visitor role works well for people because of the similar role they play – but that this all (frustratingly) stops when the child reaches 5 years of age.

We need to know some information:

- who can be a lead professional? Is this role different in any way from the keyworker role? What level of accountability does the role carry?
- What does the role/job description look like?
- How come there has been something in the past that was like this – and now there is a consultation?!
- Have there been consultation planning meetings...? Parent/family involvement?
- CANS involvement in the document – or is it more geared to children receiving mainstream services?

Debbie spoke about the recent developments – particularly in relation to referral and assessment.

The introduction of the Common Assessment Framework (CAF) – means that initial assessment can be conducted by any of the services involved with the child. The involvement of Social Care does not necessarily need to happen in the early days – and may indeed never be required if earlier intervention works well in a preventative way. It seems to be that whoever has conducted the CAF tends to inherit the case as their responsibility.

It was felt by the group that this person should really know the child and their family well. Is this the role that is being consulted about that is being called the 'lead professional'.

We need to ask the Children's Trust Management Board how we can be involved in the current consultation. We should state who we are, why we have such an interest and that as a working group looking at health issues we have clear contributions regarding this consultation (ie we know what works and what doesn't work). This will need to be cc'd to the councillor with responsibility for children's services and the council chairperson. (Paula to put a letter together for the group to approve and send to the Board).

2. Training/presentation to Paediatricians

Cathy has made contact with a Dr Joanne Brooks. Dr Brooks provides Disability Awareness training to medical students and paediatricians in Bristol and, having met with Cathy and discussed the issues raised (by Cathy and at the Open Meeting workshop), feels that a presentation to paediatricians at BCH once every three months (on a rolling programme) would make best sense.

The trainings happen on a Tuesday morning for an hour starting at 8.15 and there are usually between 10 and 15 doctors present.

- Cathy and Helen are going to work on developing a presentation that helps the participants to work through 'what they would do to support a child' step by step.
- Cathy is going to contact Dr Brooks to see if they can do their first date quite quickly
- Expenses forms need to go out urgently to Cathy and Helen – to claim mileage and any other expenses they incur doing this work

The presentation will include helping the participants to think about the wider implications of a negative experience on others involved e.g. other members of the health team, family members etc.

Cathy will also talk about how, second time of trying, the early involvement of the play therapist had made a huge difference. Their early work with the child should be done as a matter of course – not just getting called in at a time of crisis.

The presentation will also include:

- valuing the input/knowledge of the family
- how to ensure that listening and attending to the little things can make all the difference
- contributing to the devising of the plan, sticking to it, getting others to sign up to it
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Next meeting to be agreed following actions and results.