Evaluation of The Children Head Injury Service (CHIS) 2007/8

Evaluation against the NSF Standard 8: Disabled Children and Young People and those with complex Health needs.
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Background:
By 2014, health, social and education services will be expected to have met all the standards set out in the Children’s NSF[1] and be providing high quality, child-centred services. Standard 8 is an individual standard in the Children’s NSF covering the needs of disabled children, young people and those with complex needs and their families 1.

“Children and young people who are disabled or who have complex health needs receive co-ordinated, high-quality child and family-centred services which are based on assessed needs, which promote social inclusion and, where possible, which enable them and their families to live ordinary lives”.

The interventions set out in Standard 8 detail the specific services and support needed by children with disabilities or have complex needs and their families and how this should be carried out by health and social care services. The Standard 8 NSF themes
- Promoting social inclusion
- Co-ordinating Child and family service planning and provision.
- Early years/Strong foundation,
- Promoting Child development and Integrated processes
- Strengthening families
- Safeguarding
- Good transition
- Living with life limiting condition
- Effective planning and commissioning for improved outcomes
- Fit for purpose workforce

Aims
To examine the extent that CHIS achieves high-quality accessible services that are focused on the needs of the child or young Person and are family centred.

Objectives
- Measure progress towards implementation of NSF standard 8.
- Identify good evidence based practice across a range of services.
- Identify positive changes to service delivery and current practice.

Method
Participants -
10 Children & Young People (CYP) who received rehabilitation at CHIS between 2005 and 2007.
- 12 Families.
- Staff from CHIS (Multi-Professional Team).
- Outside agencies and organisations (including referrers).

Procedure
Feedback from those that use the Service:
- The focus group with parents identified aspects important to families to be further explored by the family questionnaire.
- The questionnaire was completed by families. Questions were based on the themes from the NSF standard 8; looking at experiences around:
  • Gaining a place at CHIS;
  • Admission;
  • Rehabilitation and Care;
  • Preparation for return to home and school;
  • Discharge home
  • Post discharge experience.
- Interview with CYP: 1 to 1.
- Real story summaries from families and CYP.

Feedback from those that provide the Service:
- A self assessment Matrix/audit tool by CSIP/DoH[2] adapted with permission to measure to what extent CHIS are meeting the NSF Standard 8 was completed . This was achieved by consultation with the multi-professional team of staff at CHIS. During completion, CHIS staff generated actions and ideas for meeting standards where needed and for potential improvements to the service.

Feedback from those that use the Service:
“We were made very, very welcome by the staff. The atmosphere was very friendly and homely. Staff were very sensitive to both me and YP” [3]

Findings:
Feedback from those that provide the Service:
The table below summarises the extent the standard 8 NSF were achieved by CHIS.

<table>
<thead>
<tr>
<th>Table 1: NSF Standard 8 Indicator measures</th>
<th>%, n=83</th>
</tr>
</thead>
<tbody>
<tr>
<td>No plans needs investigation...</td>
<td>4 (5%)</td>
</tr>
<tr>
<td>Informally in place/ with plan to formalise in progress</td>
<td>7 (8%)</td>
</tr>
<tr>
<td>Formally in place Is presenting challenges</td>
<td>16 (19%)</td>
</tr>
<tr>
<td>Formally in place No major concerns.</td>
<td>14 (17%)</td>
</tr>
<tr>
<td>Indicator achieved/ provided by service.</td>
<td>32 (39%)</td>
</tr>
<tr>
<td>Unable to ID a measure to date - needs invest.</td>
<td>10 (12%)</td>
</tr>
</tbody>
</table>

- 56% (46 – green) of indicators applicable to the service have been achieved by CHIS.
- 5% (4) indicators were found not to be achieved and needed investigation as no plans to address them at the time.
- 27% (23 – orange/yellow) were identified as aspects that were being met in part but needed improvements &/or formalising.

All families were satisfied with the outcome of their child’s rehabilitation programme at CHIS and all CYP felt that being at CHIS helped them.

Meeting the nurse/therapist at assessment and a visit to CHIS was important.

Over 80% of families were satisfied with the service for 7/9 aspects examined. Aspects for improvement: timeliness of access to CHIS, Co-ordination of admission and Knowing how to complain if needed.

Over 80% of families were satisfied with therapies and care provided by CHIS for 6/8 aspects examined. Aspects for improvement: Involvement of parents and CYP in goal setting, and Ensuring support/time for CYP to ask questions to therapists.

Families want access to more information before coming to CHIS.

Families and the CHIS staff expressed that there was a wide variation that exists in the level of community multi-agency support and coordination families receive.

Few families (44%) had a social worker, and the CHIS staff regularly support families e.g. in completing DLA forms due to no SW support.

Families want to be asked routinely what they think about the service.

Conclusions:
According to the feedback from staff the CYP and their families to a greater extent identified that CHIS are meeting the NSF standard 8 standards. Evaluative ideas for improvement have been generated and many are expected to be implemented.

References:
2. CSIP: Care Service Improvement Partnership/DoH Self Assessment Audit Tool