



## **The Health and Social Care Bill must deliver for children and young people**

Organisations that work to promote the health and well-being of children and young people have come together to ensure that the Health and Social Care Bill leads to improved and integrated services for all children across the country, particularly for vulnerable groups and those with complex needs who often struggle to receive adequate care.

## **We want the reforms to secure effective integrated planning across the full range of services that promote children's health and well-being**

Children and young people's health and well-being is enhanced through a wide range of services, beyond health and social care. Schools and colleges, children's centres, youth services and youth offending teams all have a vital role to play. The Bill must give a much stronger direction to health and well-being boards about their role in promoting integrated commissioning and provision across all these services to improve outcomes for children and young people. Government must ensure that the health and well-being board early implementers trial effective ways of planning services for children in an integrated manner.

## **We want children and young people to have a voice in the new health system**

Healthwatch England and Local Healthwatch organisations must put in place strategies for engaging children and young people, and their parents and carers, to ensure they have a say in the development of local services and decisions about their care. This cannot be an afterthought, but must be central to the remit of Healthwatch from the start. In doing so, government and Healthwatch England should work with partners across the children's sector to build the capacity of Local Healthwatch organisations to work effectively with children. There must be a clear strategy for engaging those children and young people who often struggle to have a say, including: disabled children and young people and those with long-term health conditions, looked after children and care leavers, unaccompanied asylum seeking and refugee children, those involved in the youth justice system, those with mental health needs, and babies and young children.

**We want to ensure that health commissioners have a thorough understanding of children and young people’s needs**

GPs do not always have the depth of experience and understanding of children’s healthcare needs to commission directly and effectively for children and young people, and in particular for those with complex needs. For example, they are unlikely to have a detailed understanding of: the role and importance of wider children’s services in promoting health; safeguarding and child protection; the particular needs of disabled or looked after children; and children’s mental and emotional needs. If GPs are to lead health commissioning, it is crucial that potential gaps in children’s healthcare commissioning are addressed, perhaps through partnerships with paediatricians and relevant children’s sector organisations, to ensure pathways of care are not fragmented. Commissioning consortia pathfinders should examine children’s care pathways in detail, so that no child or family receives poorer quality care as a consequence of the new arrangements.

**We look forward to working with government and Parliamentarians, during the passage of the Bill, to identify positive solutions to address our concerns.**

This statement is supported by: 4Children; BAAF; Barnardo’s; British Academy of Childhood Disability; British Association for Community Child Health; Children’s Hospices UK; CLIC Sargent; Council for Disabled Children; Early Childhood Forum; Every Disabled Child Matters; Family Action; Fostering Network; NCB; NCVYS; Netmums; Royal College of Paediatrics and Child Health; The Children’s Society; The Children’s Trust, Tadworth; Unite/Community Practitioners and Health Visitors Association; Voice; and YoungMinds

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