

Let's talk... Outreach and Engagement with Children, Young People and Families (2024/25)



Background

The focus of Healthwatch Rutland outreach work in the second half of 2023-24 was to extend links with communities and support and social groups catering for adults. To complement this, the emphasis of our outreach in 2024-25 shifted to targeted engagement to hear more from children, young people and families.

Objectives

Our goal was to seek out the voices of children, young people (CYP), and their families to better understand their experiences with health and social care services. This was explored both generally and more specifically within our priority areas, including access to NHS dentistry and General Practice. We also aimed to do targeted visits to healthcare settings used by CYP elsewhere in Leicester, Leicestershire and Rutland, in collaboration with Healthwatch in Leicester and Leicestershire.

In addition, as part of our 2024 research project, we examined families' experiences with NHS communication, particularly regarding referral processes and transfers of care between primary and secondary healthcare services.

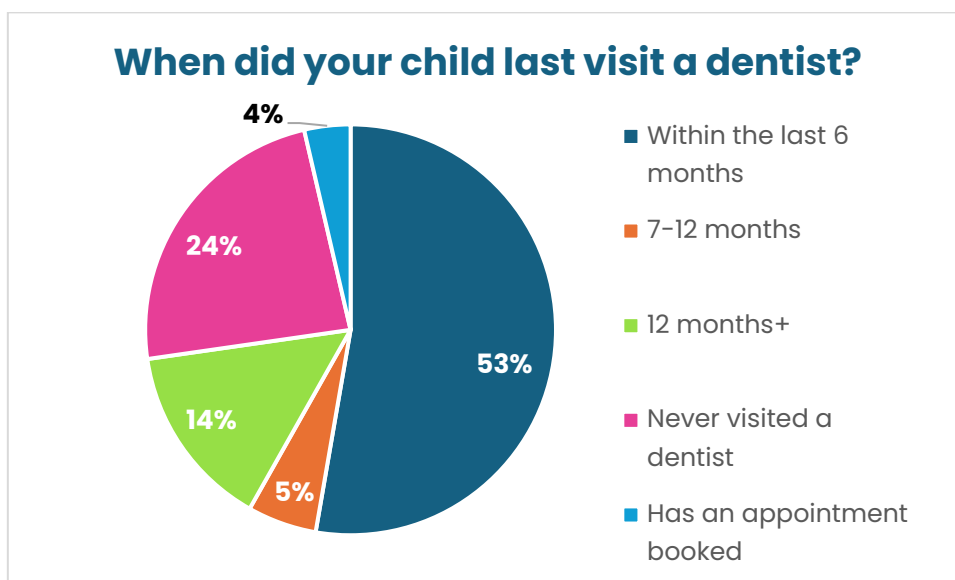
Summary

Between July 2024 and January 2025 our volunteer Community Champions and staff engaged with a total of 82 children and young people, and 122 parents and carers. This was across a variety of settings, including the Leicester Children’s Emergency Department, an inpatient mental health ward for 11 to 17 year olds, various parent and child groups, a family day and a forum for CYP with disabilities.

Findings

1. Access to NHS dentistry for families with children

63 parents with children between 1 and 18 years completed a quick poll that simply asked, ‘when did your child last visit an NHS dentist’.



Positively, for the children of families who responded to the poll, **53% have visited the dentist within the last six months**, indicating that a small majority are receiving regular checkups and preventive care.

5% of children had their last visit between 7-12 months ago. Whilst regular check-ups are essential in preventing dental issues and promoting life-long dental health, 14% of children had not been to the dentist in the last 12 months.

A troubling **24% have never visited a dentist**. This raises concern about potential effects on children’s oral health and overall wellbeing in the future.

The poll allowed free text comments on families’ experiences when trying to access NHS dental care for their children. Their experiences were mixed:

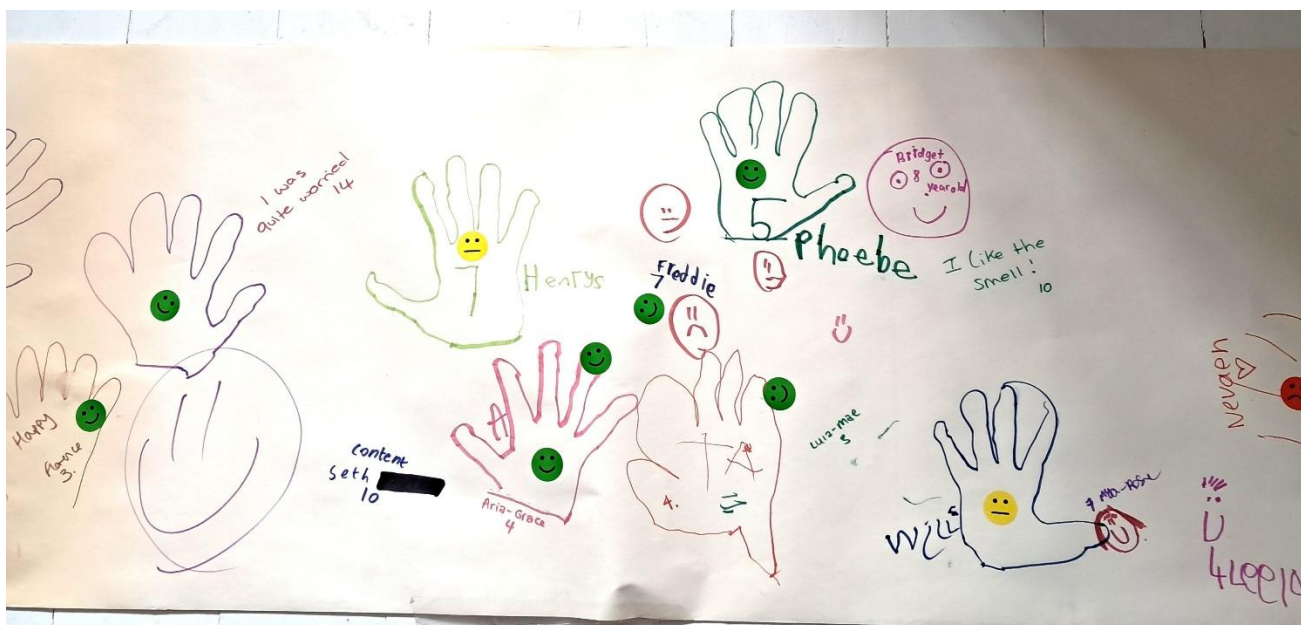
We ... wouldn't mind paying private for adults but have been told we would have to pay private fees for our 2 and 5 year olds which we cannot afford or justify.

Myself, husband and daughter have been registered at Market Place Dental in Uppingham for over 10 years but I can't get my 15 month old in to see the dentist there on the NHS! He has to go to JDRM alone.

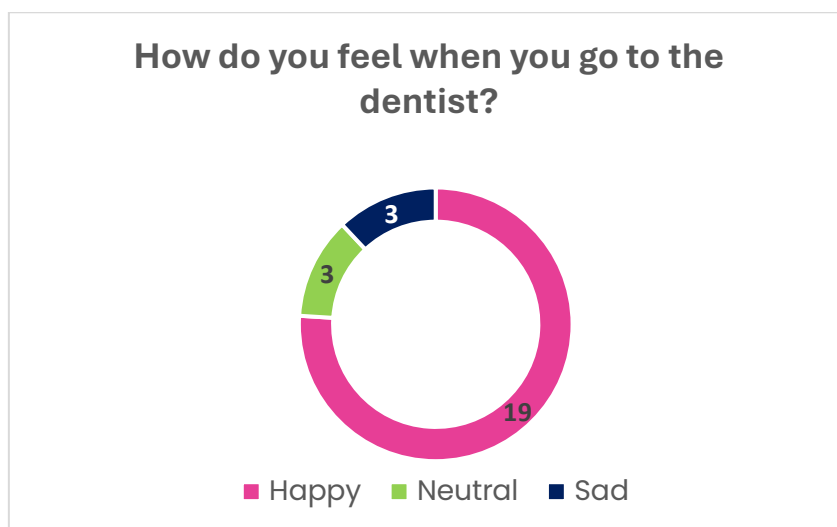
It took us a long time to find a dentist who would see the children on the NHS, it's OK now though. We [the parents] have to go private.

2. What children and young people think of going to the dentist

To initiate our conversations with the children and young people, we asked 25 children at the Rutland Memorial Hospital family day in August 2024 *How do you feel when you visit the dentist?*



We asked children to draw a picture or to draw around their hand and stick a 'happy' (green) 'sad' (red) or 'OK' (yellow) emoji sticker on the hand. Older children were asked to write what they think, if they preferred. The results were as follows:



Three quarters indicated that they are happy to go to the dentist, showing that they have no fear of the experience: *"I take care of my teeth"* (age 8)

Some of the older children wrote comments:

"Content" (age 10)

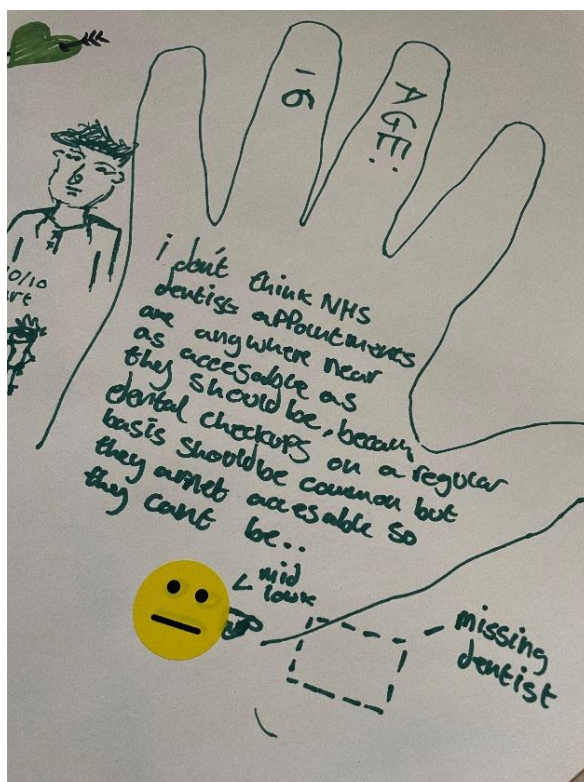
"I want to be a dentist when I grow up and I have wanted to ever since I was 6. I feel safe at the dentist and I hope I can make others feel safe and welcome too" (age 13)

"I was quite worried" (age 14)

"I like it that it makes my teeth clean"

We held similar sessions with: Little Stars in Langham; the Rutland Family Hub Mini Explorers and Grow Together; at Kendrew Barracks; St George's community centre; and Uppingham scout hut.

We also talked with older young people at the Disabled Youth Forum who commented on accessibility of dental services:



3. Children and young people with disabilities' experiences of General Practice (GP)

At two sessions in September and November last year, we heard from young people with disabilities, aged between 11 and 25 years, about their experiences of GP practices. The

young people were variously registered with Oakham Medical Practice, Empingham Medical Centre, Latham House in Melton and the health centre at Kendrew Barracks.

Without exception, the young people said they prefer face-to-face appointments:

When an appointment is face to face you feel you are actually listened to

"Last minute an appointment got changed from face to face to online and it wasn't good"

However, there was no consensus on how useful they find the NHS app:

I get my prescriptions through the NHS app and find that useful

"I find the NHS app confusing"

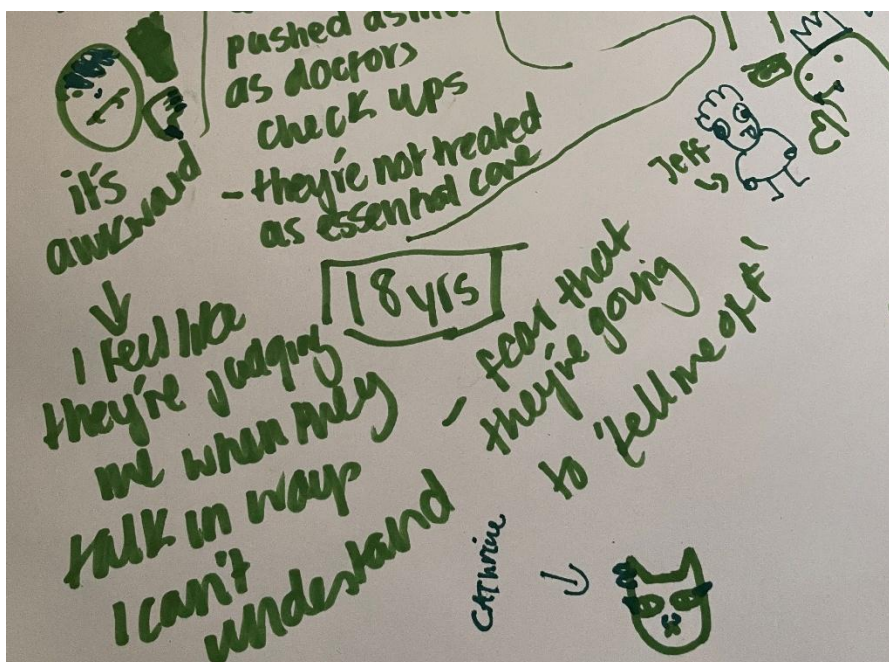
Worryingly, some young people in the group felt that clinicians at GP practices do not look beyond their disability, to listen to them as an individual. Equally, several said they are happy with their care and find it reassuring to see the same clinician at their practice:

I'm neurodivergent and they always put any conditions down to ADHD and autism, you have to suck it up

I got put on contraception and wasn't told of any side effects. I was put on it for a hormone imbalance, but no checks were done to prove this. I was 14 and didn't have any choice I was just told this is what you are doing

They get to know me and my health conditions; I have the same one every time

They explain to me, not with jargon...



4. Findings of targeted study and visits

4.1 Children's Emergency Department, Leicester Royal Infirmary



The Enter and View visits and accompanying survey involved 46 families from across Leicester, Leicestershire and Rutland (LLR) who had used the Children's Emergency Department (ED) at the Leicester Royal Infirmary (LRI) in the last 2 years. The results showed that families and children feel satisfied with the treatment they received at the department. Families felt that the department has a welcoming and child-friendly atmosphere and staff were praised for being professional and caring.

However, there are some elements which could be improved, including communications about wait times in busy periods and making information clearer within the waiting areas. Our full recommendations can be found in the report: [LRI ED Enter and View](#).

4.2 Child and Adolescent Mental Health Service (CAMHS) – The Beacon Unit

The Beacon Unit is a mental health inpatient unit in Leicester for children aged 11 to 17. [During our visit to the unit in the July 2024](#) we were spoke with 2 young patients who live outside of LLR.

To the question 'What has been the most helpful aspect of your time at the CAMHS unit?' one patient replied, "the support from the staff". When asked what could be improved, both patients suggested the food which was described by one as, "bland and tasteless".

Our recommendations included:

- Revise the food menu using feedback from the young people, to include more appealing, age-appropriate food options that can be pre-ordered to avoid waste.
- Implement standardised routines and practices across all staff to ensure consistent care for patients, reducing confusion and variability in patient experiences.

- Develop a plan to increase the utilisation of The Beacon, allowing it to provide dedicated support for young people and adolescents with moderate symptoms who do not require inpatient treatment.

4.3 Experiences of NHS communications and administration

[Our study during 2024](#) explored people's experiences of communications and administration processes in their transactions with the NHS. People were asked to share how those processes had impacted on them and what the NHS can do to make improvements.

Some families and parents of children with health problems spoke of appointment delays and the impact on their children:

'[My child is] anxious and worries quite a lot.... Having some sort of timeline setting out our options would have a positive impact on him.'

'We are currently awaiting a referral for physical therapy to see if that helps, organised by the consultant, yet my son is currently off sick from school because of the pain.'

Parents talked about needing support to help them deal with their children's health problems, with one parent praising support through the Rutland Family Hub:

"...she has been fantastic with my child... I called and she followed it up... she chased [the GP practice]. She also spoke to the school to get a plan in place. She calls me, asks how we are getting on... every couple of weeks."

Participants in young people's focus group drew attention to: the lack of co-ordination of appointments; no continuity of care; lengthy waiting times for appointments; and long waits in the outpatient departments.

They felt that information provided by the NHS is often inaccessible and local hospitals have poor signage that causes problems navigating them.

The group also felt that General Practice has unsuitable opening hours and restricts them to discussing 'only one thing' and treating 'the symptom not the cause' during a consultation, rather than providing a more holistic approach. There was a preference for face-to-face appointments but video calls were not discounted. Telephone consultation is the least preferred option. In addition, they felt they were told what medications they should take without discussions or explanations for their need or about side effects.

The full report can be downloaded from [our website](#) (for the children and family experiences see section 2.9).

Conclusion

This engagement has provided valuable insight into the experiences and perspectives of children, young people, and families on the health and care services they use. Through targeted outreach, we were able to gather a wide range of views on access to NHS dental care, experiences with general practice, mental health support, emergency care, and NHS communication and administration processes.

Key themes emerged across all settings: the importance of clear communication, continuity and accessibility of care, and the value of being treated as individuals—not just patients with conditions.

Positive feedback was noted in many areas, particularly regarding face-to-face interactions, the professionalism of staff, and local support services. However, challenges around accessibility, coordination of care, and patient empowerment remain persistent concerns.

Healthwatch Rutland will continue to use this evidence to inform service improvement and advocate for changes that reflect the needs of children, young people and families. Continued engagement will be key to shaping services that are inclusive, equitable, and responsive to the needs of the youngest members of our community.