

**The National Youth Agency working with hospital based youth workers in the UK from 2008-09 under S64 funding**

July 2009



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## 1. Introduction and Overview

The National Youth Agency (NYA) is England's national expert on non-formal education – involved in shaping youth work policy and helping improve a range of practice with young people in England.

The National Youth Agency supports those involved in young people's personal and social development and works to enable all young people to fulfil their potential as individuals through

- Informing, advising and helping those who work with young people.
- Influencing youth policy and improving services for young people.
- Promoting young people's participation, influence and place in society

The NYA has established a strong adolescent health team, and the following extracts help place the Section 64 work in an organisational and strategic context.

### Vision

In line with *Every Child Matters*, the *National Service Framework for Children, Young People and Maternity Services* and *Aiming High*, our vision is that all young people are healthy and that they enjoy good physical and mental health and are supported to adopt healthier lifestyles and develop greater emotional resilience.

### Aims

The NYA will work toward this by:

1. Promoting young people's influence, voice and place in the determination of their own health needs
2. Improving the practice, programmes and services offered to young people by the non formal education and health sectors (and particularly by youth and young people's services) to support young people to adopt and maintain healthier lifestyles;
3. Promoting the development of health education policy based on an improved understanding of adolescence and health and the contribution of non formal education and youth work approaches to achieving that;
4. Building the capacity of Children's Trusts and their partners to deliver improved health outcomes for young people at local level.

**[The National Youth Agency Health Strategy 2007-2010]**

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## **Section 64 work with hospital based youth workers**

The Department of Health approved a bid made to the Section 64 Grant scheme by NYA in 2006 which had the following aims

- To enable providers of youth work and other non- formal education to improve services so that young people in contact enjoy better physical and mental health
- To expand the understanding and raise the effectiveness of adolescent health within the non-formal education sector
- To promote non-formal education approaches to young people's health amongst PCTs and relevant health providers

The overall idea for the S. 64 work undertaken by NYA and various partners providing hospital based youth work fits all 3 criteria above, and originated as a response to a request from one hospital – Nottingham University – for assistance with recognising and celebrating its work over the previous decade. As the scope of the project grew to include other sites and individuals, the work eventually agreed by this group could be summarised as follows

***“Providing a series of inter-linked and sequential interventions to enable providers from Local Authorities, PCTs and the voluntary sector to act more coherently to improve both policy and practice around improving young people's health”***

## **2. Scope of the work**

Four separate but “*inter-linked and sequential*” pieces of work were identified locally in early 2008, looking to deliver outputs over the following year or 18 months. The work areas are detailed below, and were based on identified local need in Nottingham, an assessment of the potential needs of a larger group of professionals delivering similar services in England, and a sense of the developing strategic issues at a national level, focused on Aiming High for Young People and the movement towards a greater personalisation of health services. The four linked work areas were

- To capture a picture of what constitutes “hospital based youth work” by showcasing the longest surviving project of this type and making this accessible to a national audience
- To establish a small planning group to map other similar work in England (and beyond, in practice) and establish a clearer picture of the needs of this unique workforce
- To work with those professionals providing hospital based youth work to develop a sustainable support mechanism to encourage and develop this relatively unknown and uncharted group of providers.
- To scan for research material to assist with all of the above, and develop new ideas for demonstrating the effectiveness of this approach.

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### 3. Personnel and Resources

Resources to support this work were available to the partners involved through Section 64 funds, and through the input of time and other essentials (e.g. venues and existing products) by all of the partners involved. The main personnel involved in taking forward this work were

- Richard McKie - National Programme Manager for Health at NYA
- Donna Hilton – Nottingham University Hospitals Programme Manager
- Charlotte Frith – Birmingham Children’s Hospital
- Kerry Jones – The Inspire Project, Wrexham
- Lorraine Case – Youth Worker at The Christie Hospital, Manchester
- Over 30 staff from a network of providers in England, Scotland and Wales
- Young people from hospital based youth work provision in Nottingham and Manchester

### 4. Project Report

#### **Work area 1: the Nottingham University Hospitals Case Study**

##### **Aim:**

To observe and report back on the work of the Nottingham University Hospitals youth work team and make this practice available to a national audience

##### **Method:**

Initially unconnected, a visit was made to observe youth work practice in the City Hospital, Nottingham in July 2007. Interviews with staff and volunteers, young people using the project and the Project Manager led to the appearance of an article in Children and Young People Now magazine. The article generated some interest from the Department of Health, from senior youth work figures, and from other similar practitioners in England.

This interest led to the decision to use Section 64 funding to try to capture a longer and more detailed case study which would be available in hard copy and on line to provide a more lasting record of the work (then approaching its 10<sup>th</sup> year of operation) and a permanent reference point for the further work of the project. Consequently, a 3000 word, full colour case study was compiled, designed and produced in partnership with the NUH team and 1000 hard copies produced. A full colour PDF of the same work was made available on line as part of the NYA’s Youth Work for Health web site at [www.nya.org.uk/health](http://www.nya.org.uk/health) and is attached separately at **Appendix A**.

##### **Impact:**

As well as the publicity generated locally from the celebrations and materials made available by the NUH itself to celebrate its 10<sup>th</sup> year of successful operation in May 2008, the interest generated by all of these initiatives led to a

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number of spin off events which served to increase professional awareness and national recognition of this type of youth work in hospital settings, including

- i. a seminar input by Donna Hilton from NUH to the first national conference of the Association for Young People's Health in London in January 2008
- ii. a further input to the research conference of the same organisation in November 2008, alongside staff from a second hospital site in Wrexham (The Inspire Project)
- iii. the awarding of the title "Best Youth Work Team" in the national Children and Young People's Awards in London in November 2008

## **Work area 2: Establishing a central mapping and planning group**

### **Aim:**

To establish a small planning group to map other similar work in England (and beyond, in practice) and establish a clearer picture of the needs of the workforce

### **Method:**

By working with the Project Manager at the NUH and utilising her contacts, meetings were held with more practitioners to discuss issues of common interest and identify future areas of mutual benefit.

Using the already established reputation of Donna Hilton at NUH, a meeting was held involving two other hospital based youth workers (Charlotte Frith from Birmingham Children's Hospital and Kerry Jones from The Inspire project in Wrexham, North Wales) to continue to identify the key features of the work and discuss how to take forward the rest of the process. The staff attending came from 2 different countries, and provided different models of provision to that at NUH.

### **Birmingham Children's Hospital**

Lead youth worker Charlotte Frith works as part of a team which includes Play workers, Youth Workers and clinical staff, providing personal and social support to young people attending one of Europe's biggest dedicated children's in patient provisions.

### **Inspire Youth Project – Wrexham**

With a focus on young people who self harm, The Inspire Team, now led by Youth Worker Kerry Jones, works within the local Maelor Hospital to provide individual support, a variety of tailored interventions and referral. They are funded through a 5 year Big Lottery grant.

### **Impact:**

After several meetings in Leicester, Nottingham and Birmingham, the group felt better able to identify what they understood to be the focus of hospital based youth work, and generated a list of possible objectives which might be served by a larger and more formal professional grouping. With the aid of

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Section 64 programme and partner inputs, a project plan was agreed to hold the first ever national meeting of youth workers in hospitals.

- **Work Area 3: developing a sustainable support mechanism**

**Aim:**

To work with those professionals providing hospital based youth work to develop a sustainable support mechanism to encourage this unknown and largely uncharted group of providers.

**Method:**

The planning group devised a programme based on their previous professional discussions, focused around 3 main objectives

1. To bring together as many hospital based workers as possible and to map out where and how services are currently provided, and set this down in a publicly accessible place
2. To encourage the growth of new, supportive networks amongst the group and to identify external support for a national grouping of the same staff
3. To provide a contemporary programme of information, debate and skills sharing to enhance current work practice

To this end, the programme for the event – christened “Lifting the Lid” - was developed and included sessions by hospital based staff, the NYA, and invited external speakers. The programme and the work of the planning group was circulated through the national magazine, *Children and Young People Now*, through the e-mail bulletins of the NYA, through word of mouth amongst practitioners, and through leafleting at events featuring some aspect of the work ( e.g. the AYPH research conference; see above).

**Impact:**

**1) The first national meeting – Lifting the Lid - December 2008**

The first ever meeting of the group took place on December 8<sup>th</sup> 2008 at Birmingham Children’s Hospital, and 22 staff attended from a wide range of projects in England, Scotland and Wales. The published report of the “Lifting the Lid” event is attached at [Appendix B](#) and the evaluation feedback at [Appendix C](#).

Perhaps the most important product of the day was a list of wants and needs that the group determined as critical for their future development. This list is provided in full below

- **Standardised policies and guidelines**
  - risk assessments
  - recordings
  - documentation
  - access to medical notes
- **Professional body/association**
  - meet twice per year

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- support network/induction
  - o **Information on funding**
    - support and guidance
    - permanent funding
  - o **Better understanding of NHS for youth workers**
    - how it works
    - How youth workers operate (for NHS!)
  - o **Include workers in other related areas**
    - CAMHS etc?
  - o **Information sharing**
    - sharing good youth work practice
    - medical related issues
  - o **More youth work posts**
    - too short term
    - more hours needed
  - o **Better links and united voice**
    - with related professions (e.g. Play workers)
    - better links with local authority and voluntary sector youth services
  - o **'How to' start up guide**
  - o **Training**
    - basic counselling skills
    - end of life palliative care training
    - dealing with/talking to patients
  - o **More in depth analysis and research**
  - o **Strategies for moving forwards**
  - o **Union representation**

This list of wants and needs became – effectively – the agenda for future action, to be pursued by an enhanced Planning group, and to become the focus for future training and practice sharing events.

## **2) The second national meeting – June 2009**

Based on the success and format of the first meeting, a second national event took place on 2<sup>nd</sup> June 2009 at The Christie Hospital, Manchester. The programme and evaluation feedback are attached as **Appendices D and E** respectively. The programme included discussions on two important items in the context of the Section 64 work programme

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- Planning for the provision of a whole group residential training and networking event in November 2009
  - Support to develop a proposal to investigate the effectiveness of hospital based youth work, working with national research institutions

#### **Work Area 4: Research and deciding what works**

##### **Aim:**

To scan for research material to assist with all of the above, and develop new ideas for demonstrating the effectiveness of this approach.

##### **Method:**

Having established at the first national meeting that the full hospital youth workers' group had prioritised the need for research to demonstrate the effectiveness of the services they were providing, the NYA Information team began to track down leads for further work being done on this topic. This desk top search, and a link to an external consultant, uncovered work by the Youth Affairs Unit at De Montfort University, also in Leicester, which was focused on the same professional grouping, and which had expressed an interest in developing a research model to understand the processes involved in this work and finding ways to test out the effectiveness of these interventions over a number of indicators.

Meetings between the NYA and De Montfort University led to the creation of a joint proposal (at [Appendix F](#)) for research work in this area which has been accepted in principle by the group, and which pledges them to assist with the process in the future. A meeting to shape a more detailed proposal and look at funding and future partnership is scheduled for July 27<sup>th</sup> in Leicester.

#### **Summary and conclusions**

The National Youth Agency and the Planning group of the Hospital Based Youth Worker's Group both feel that the aims of this section of the Section 64 funded programme for 2008-09 have been largely achieved by the end of July 2009. At the end of the project year, it is clear that much has been achieved, with over 40 individuals and 15 organisations registered with the HBYWG, two successful practice sharing days completed to general approval, a developing research proposal involving one university and a national expert agency, and ambitious plans for a bespoke training residential for group members in early 2010.

The one action not **yet** achieved may prove to be the most important of all, which was to "*develop a sustainable support mechanism*" for the group. Approaches for a small amount of seed corn funding to embed the progress made and enable the group to become largely self-sustaining have, to date, been unsuccessful, although efforts continue. Despite a strong feeling in the Group that the political and professional agenda has moved to recognize their particular contribution to the health of young people – most succinctly expressed in the policy document "Healthy Lives, Brighter Futures" (DCSF and DH; 2009) – there is no guarantee that in the new economic reality, this

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quite unique and unsung area of practice will not blossom and fade, for the want of some minimal funding and general recognition.

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## **Appendix A**

The Nottingham University Hospitals case study is attached separately and is also available at <http://www.nya.org.uk/files/130499/FileName/notunihosys.pdf>

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## Appendix B

Report on “Lifting the Lid”, the first ever national Hospital Based Youth Worker event on 08/12/08

### **Lifting the Lid - A first Networking event for hospital based youth work practitioners**

This landmark networking event brought hospital based youth workers together for the first time was held at Birmingham Children’s Hospital in December 2008.

The purpose of the event was to find out the size, scope, needs and wants of the hospital based youth work sector and to examine key issues in the current climate for this work. Discussions on a way forward for this unique group were also programmed in.

The seminar- which was attended by 27 hospital based staff - consisted of a number of speakers and small workshop exercises to enable the group to look at its purpose and possible future. Those attending were encouraged to network with colleagues from other organisations in the sector. Detail from each of the programme slots is provided below.

#### *Setting the scene*

#### **Richard Mckie - The National Youth Agency**

Richard set the scene for the event and posed the question as to how the group might help influence current and future policy and practice. Richard also asked delegates to consider how the group should move forward - and what resources were available to enable that to happen.

#### *Case study 1 – Nottingham University Hospitals Youth Service*

#### **Donna Hilton – Youth Service Manager**

Donna spoke to the group about NUH Youth Service’s award winning work and how their programme has been shaped over the 10 years it has been in existence since initially starting as a two year pilot project. Donna shared examples of the activities that young people participate in, the achievements and outcomes that they experience and the reality of managing the different needs of the young people they work with.

Donna spoke about the challenges the project faced since its inception, especially regarding funding, and of the hospital trust’s understanding of what youth work offered within a clinical environment. She felt that the demand for youth work in this context ‘is huge’ and the service benefits by employing volunteers and offering student placements.

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Donna highlighted the personal but positive challenges of delivering youth work in such a setting without any prior medical knowledge. She spoke about the type of sessions that take place in the purpose built youth centre on site which range from activities such as sport, arts and drama to informal drop in sessions and open 'club' sessions.

(Presentation [available here>>](#))

*Scoping the territory: who are we, where are we, and what do we want?*

**Group exercise**

Delegates formed groups to discuss and considered the question: who are we, where are we, and what do we want? These notes have been turned into a directory of hospital based youth work and are available at [www.nya.org.uk/yw4h](http://www.nya.org.uk/yw4h)

*How current national policy is lining up for this work*

**Lily Makurah - Child and Adolescent Programmes - Department of Health**

Lily introduced her session by talking about the forthcoming Child Health Strategy which is due to include a chapter on adolescent health. She went on to discuss how the strategy looks at addressing professional development issues in health based youth and other work to improve a variety of practitioners' skills and abilities. She touched on how e - learning provision could be offered in this area.

Lily noted especially issues around transition and young people's rights and stressed the importance of young people having a voice on the health services they experience and how

the Department of Health are interested to find out about the added value they get from hospital based youth work. She asked the group to consider how to make this area of work more visible. She also felt it was important that services are mainstreamed - rather than being an 'add-on' provision - and were identified within each locality's Children and Young People's Plans.

There were questions from the floor around transition and the Your Welcome quality criteria and it was mentioned that some PCTs are putting youth work standards in plans to encourage hospital settings to test youth work out in the future.

*Commissioning and funding for hospital based youth work*

**Rob Willoughby -Children's Services Adviser at the Government Office for the West Midlands**

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Rob is currently on secondment from a local Strategic Health authority and has an overview of health services in five areas.

In terms of commissioning, Rob considers hospital based youth work to be a specialist service. He spoke about the policy agenda around the Children and Young People's National Service Framework (NSF), The Choosing Health white paper and Chief medical Officer Liam Donaldson's annual report which this year considered teenage health issues.

Rob looked at models around commissioning and highlighted the importance of youth workers' knowledge and experience of working non-formally with young people as commissioners are on the whole not familiar with the detail. He felt that understanding needs and examining outcomes and measurements are key in both supporting hospital youth work and learning what works. It was vital that youth work accepts and excels in terms of measuring and reporting on the end products of their work with young people.

Rob's presentation went on to look at needs assessment, setting priorities and a healthy youth work model.

(Presentation [available here>>](#))

#### *E – Learning; workforce development for non-medical Staff in the NHS*

#### **Dr. Janet McDonagh - Clinical Senior Lecturer in Paediatric and Adolescent Rheumatology at Birmingham Children's Hospital**

Janet began her presentation by quoting from a recent survey<sup>1</sup> which looked at the numbers of staff at Birmingham Children's Hospital which reported that only one-third had undertaken formal training in adolescent health. Previous research by Klitsner I et al, in 1992 also found that only a third of doctors (paediatric and adult) actually like working with adolescents.

Research by Dieppe<sup>2</sup> published in the Journal of Adolescent Health looked at what trainees knew about working with young people. A high proportion (90 per cent) were found to have been trained on asthma issues, less than 50 per cent on self harm, 41 per cent on adolescent health generally and only 20 percent on substance use.

The same research highlighted barriers to providing care such as:

- lack of training 66%
- lack of resources/services 60%
- lack of teaching materials 57% and
- perceived communication difficulties 48%

The remainder of the presentation looked at the young person's perspective of experiential learning, the impact of rotational training posts and the involvement of young people.

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In summing up Janet added that the RCPCH adolescent health project e - learning materials have potential for multi-professional training and with that in mind asks the group to consider what curriculum was needed and what are the baseline training needs.

(Presentation [available here>>>](#))

## References

1. McDonagh JE, Minnaar G, Kelly KM, OConnor D, Shaw KL.  
Unmet education and training needs in adolescent health of health professionals in a UK Children's Hospital.  
*Acta Paediatrica* 2006; 95(6): 715-9.
2. Dieppe CR, Kumar M, Crome I.  
Adolescent exploratory behaviour – what do trainees know?  
*Journal of Adolescent Health* 2008; 43: 520-2.

## *Case study 2 - Inspire Youth Work in Hospital Project, Wrexham*

### **Kerry Jones and colleagues**

The work of the Big Lottery funded project focused on mental health and in particular self harm was scheduled to run for 5 years initially and the Inspire team shared the first year results on what outcomes they had achieved. The close partnership across the local authority youth service and the PCT and Hospitals Trust was critical to the running of this project, which was unique in terms of its focus and methodologies.

### *Summing Up*

On summing up at the close of the seminar, Richard Mckie asked the group what key action points they should take forward to a further planning meeting in late January in Birmingham.

## **Seminar Action Points**

A summary of the needs, wants and issues from the seminar can be found below:

- **Standardised policies and guidelines**
  - risk assessments
  - recordings
  - documentation
  - access to medical notes
- **Professional body/association**
  - meet twice per year
  - support network/induction

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- **Information on funding**
    - support and guidance
    - permanent funding
  - **Better understanding of NHS for youth workers**
    - how it works
    - how youth workers operate (for NHS!)
  - **Include workers in other related areas**
    - CAMHS etc?
  - **Information sharing**
    - sharing good youth work practice
    - medical related issues
  - **More youth work posts**
    - too short term
    - more hours needed
  - **Better links and united voice**
    - with related professions (e.g. Play workers)
    - better links with local authority and voluntary sector youth services
  - **'How to' start up guide**
  - **Training**
    - basic counselling skills
    - end of life palliative care training
    - dealing with/talking to patients
  - **More in depth analysis and research**
  - **Strategies for moving forwards**
  - **Union representation**

Evaluation feedback from 08/12/08 meeting

**Monday 8<sup>th</sup> December 2008**  
**Birmingham Children's Hospital**  
**EVALUATION SUMMARY**

	Very	Useful	Slightly	Not
		useful	useful	useful
1. <b><i>How useful has the event been?</i></b>	86%	14%	0%	0%
2. <b><i>If we were to hold a similar event in the future what changes should we make to improve it?</i></b>				
<ul style="list-style-type: none"> <li>• Larger venue x 5</li> <li>• More accessible venue</li> <li>• Better parking</li> <li>• More multi agency working</li> <li>• Change set up of room</li> <li>• Planning group to push action/ideas forward x 2</li> </ul>				
3. <b><i>Domestic and Administrative Arrangements</i></b>				
	<b>Excellent</b>	<b>Good</b>	<b>Satisfactory</b>	
<b>Poor</b>				
a) Pre-conference information and administration.	41%	45%	9%	0%
b) Administration on the day	55%	41%	5%	0%
c) Venue	50%	32%	18%	0%
d) Catering	73%	14%	14%	0%
4. <b><i>Please indicate how you found out about this event:</i></b>				
NYA Publication	9%	NYA Mailing	18%	
NYA Website	9%	Word of Mouth	41%	
Other (3, Wrexham Hospital Youth Team)	32%	(Colleague is on planning group x		
5. <b><i>Please score the following aims of this event</i></b> on a scale of 1 – 10, with 1 being "the event failed to meet this objective" to 10 being "The event exceeded this aim" :				
a) Participants will find out about the size, scope, needs and wants of the hospital based youth work sector				<b>Av. = 8.4</b>
b) Participants will examine key issues in the current climate for this type of work				<b>Av. = 8.3</b>
c) Participants will decide on a way forward				<b>Av. = 8.5</b>

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6. ***Please add anything else you wish to have noted following this event, or any further requests you have***

- Good networking opportunities x 4 – would be good to happen regularly
- Very useful day – will give me the confidence to go back to my job
- Look forward to next event
- Email forum and twice yearly meeting
- Will help provide advice and guidance
- Really useful event x 2 – nice to know we are not on our own
- Excellent examples of good practice to disseminate
- Really hope this moves forward
- Excellent day – feel very positive about my job and feel we are moving on – it is an exciting time

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## Appendix D

Programme from the second meeting of the national Hospital Based Youth Workers' group on 02/06/09



**PROGRAMME**  
**Hospital Based Youth Workers Shared Practice Day**  
**Seminar Room 1, The Education Centre,**  
**The Christie Hospital, Wilmslow Road, Withington,**  
**Manchester, M20 4BX**

Chair – Donna Hilton

**Morning Programme**

Time	Session	Facilitator
10.30am	Arrive and Refreshments	
11.00am	Welcome and catch up	Donna Hilton
11.30am	Strategy and Policy: Brighter Lives, Healthy Futures	Richard McKie
12.00pm	Shared Practice: You're Welcome	Charlotte Frith
12.30pm	Lunch and Networking	

**Afternoon Programme**

1.15pm	Sometimes its Cancer – Workshop 1 and site visit	Lorraine Case
1.45pm	Sometimes its Cancer – Workshop 2 and site visit	Lorraine Case
2.15pm	Development Plan (DH)	Richard McKie
2.25pm	Group Name and Definition	Donna Hilton
2.35pm	De Montford University/NYA research proposal	Richard McKie
2.45pm	Planning Group	Donna Hilton
2.55pm	November Conference and Planning	Richard McKie

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<b>3.00pm</b>	Finish	
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Please return all evaluations forms from delegate pack to organizers. Thank you.

Evaluation of the second national Hospital Based Youth Workers Shared Practice Day

**HBYWG Shared Practice Day – 2<sup>nd</sup> June 2009  
FEEDBACK**

**Attendees:** 22

**On a scale of 1-10 (10 being the most useful) how did the day rate?**

Mean score = 9.2 out of 10

Highest score = 10; Lowest score = 6

**How could the day have been improved?**

- Cooler (air conditioning)
- When policies are discussed have a separate group for Wales where someone from Wales could take the lead on this
- Venue was good but maybe venue could be more central to attract more people from the south
- A wider representation of youth work done in health settings?
- More time for networking

**Any ideas for content of future events?**

- Include young people's presentations
- Case studies/Showcase of good practice
- Funding information
- Tackling the medical person's understanding of our role!
- Sharing ideas for practice e.g. Resources, links, activities
- Palliative care training and bereavement training
- Reflective Practice Workshop
- Problem solving ideas for fitting into a medical setting
- Psychosocial skills delivery
- Relevant guest speakers
- Volunteers/Student placements
- Mental health Issues
- Difference between hospital youth work and generic youth work
- Updates on latest policies
- How to measure the success of hospital youth work

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- Involving siblings
  - Research
  - Sustainability of services (commissioning)
  - How to set up a hospital youth club
  - Time for socialising (perhaps in the evening) would be great for teambuilding and further networking!

**Would a two-day event be useful and could you get funding?**

Useful – all said yes!

Funding – Most said yes, one said a straight no, two said maybe and two said if it was cheap (around £25)

**General comments:**

- Liked the 11-3 time slot and good mix of presentations
- All very useful
- Links to current/proposed policy was very useful
- Excellent! Really informative and empowering being amongst like-minded people!
- Really enjoyed hearing about practice examples (Christie Crew)
- Young people's participation was fantastic!
- Well done planning team, it was a good day!

### Joint research proposal for HBYW

#### **Outline proposal for possible research into hospital-based youth work**

*Youth Affairs Unit, De Montfort University and The National Youth Agency*

##### *Background*

Both the *Youth Affairs Unit at De Montfort University (YAU)* and *The National Youth Agency (NYA)* have for some time now recognised the potential positive impacts of hospital-based youth work, and we have been considering ways that we might be able to undertake some research to demonstrate this impact. A similar desire to find an evidence based method of demonstrating the effectiveness of this work was articulated at the first meeting of the Hospital Based Youth Workers' Group in December 2008.

We believe that this research would ideally have a dual focus on: i) the needs and experiences of young people in hospitals and the ways that they interact with health care staff; and ii) the processes and impacts of youth work in hospitals.

In relation to point i), we have identified a number of potential issues that demonstrate the need for something like youth work in hospitals, notably:

- Young people in hospitals have specific needs connected to their developmental and social context and to their experiences of illness
- They often experience stigmatisation, bullying, family conflict, social isolation, difficulties with relationships and withdrawal from sources of support
- Transitions from paediatric to adult care environments are often experienced as very difficult
- Differing patient and staff perceptions of ideal models of adherence to self-care routines can lead to conflict on hospital wards and neglected self-care

We also believe we have highlighted some evidence (outlined in our recent paper in the *Journal of Youth Studies* – Yates & Payne, 2009) that demonstrates that youth work has been having some positive benefits in working with young people on these and other issues. Recent Government policy has also identified the potential value of personalised care for adolescents in hospital settings (*Brighter Lives, Healthy Futures: DH/DCSF, February 2009*). We would like to carry out a programme of research that will expand our understanding of all of these issues and provide a useful resource for youth work practice and allow us to make a stronger case for hospital-based youth work to the academic and professional fields, funders and policy makers.

##### *Research questions and objectives*

We would like to carry out an in-depth evaluation of the needs of the young people who engage with youth workers work and the processes and impacts that the youth work has with young people in its resident hospital. If possible, we would like to work with existing youth work teams, but it is also potentially possible that we might seek funding for new posts as well to expand the study. We currently have in mind the aim to address the following set of research questions:

1. What perspectives do young people bring to encounters with hospital services and health professionals?
2. What challenges do young people face, and how do these affect their interactions with hospital services?

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3. How do the various hospital staff interpret and respond to the needs of young people in hospitals?
  4. What forms of youth work emerge in practice in the hospital(s)?
  5. What kinds of interventions does youth work provide and how does it function?
  6. What impact does youth work achieve (i) on young people's experiences of hospital and their interactions with hospital staff; (ii) on hospital staff, health care interventions, and health outcomes; and (iii) on other areas of young people's lives (this might include many of the areas in which youth work can have benefits, such as relationships, family life, educational engagement, etc.)?

#### *Proposed methods*

The research would be undertaken jointly by a small team from YAU, with additional input from NYA although we would also very much like to see a participant-led component undertaken by youth workers and young people themselves. We would like to share management and steering of the research with youth work professionals and young people with experience of hospitals, as well as university-based academics and NYA staff. Although we recognise that final decisions about methodology will have to wait until agreement with all of the concerned parties, at present we envisage something like:

1. Interviews with hospital staff in the departments or wards targeted for deployment of youth workers and across the staff hierarchy, ideally from consultants downwards. These will aim to ascertain the perspectives of hospital staff regarding the issues young people face in hospitals and that staff face in working with young people. Possibly surveys with staff and young people as well to produce some quantitative data.
2. Observation of the processes by which youth workers enter the hospital environment, assess the needs of young people, liaise with hospital staff, select appropriate models of intervention and begin making contact with young people. Youth workers' own perceptions of this process are also important.
3. a) Data gathered with young people. A combination of interview data carried out by the academic research team, the collection of personal accounts from young people by youth workers who work with them, and data generated by young people themselves (this could take a number of forms, to be decided further into the research).
3. b) Self-guided research by young people in hospitals. This might include diaries, peer interviews, young person-led interviews with youth workers, researchers, hospital staff, and so on, based on the model of work employed by the Young Researchers Network facilitated by NYA.
4. a) Participant-led research by youth workers. For example, research diaries in which they record notable features of their day-to-day work, including problems faced, interventions undertaken and outcomes achieved; case notes; and so on.
4. b) Interviews with the youth work team to obtain their accounts of the ongoing nature of their work, and with hospital staff about the development of youth work practice in hospitals.

#### *Final notes*

It should be said that these plans are still quite preliminary. They represent our current thinking about the sort of research we believe could usefully identify the needs, perspectives and

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experiences of young people in hospitals, the processes through which youth work works with them, and its potential impacts.

We would like this research to be rigorous enough potentially to influence policy makers and funders whilst also being flexible enough to engage professionals and young people in the processes of research. We would like to try to collect quantitative data where possible to produce statistically-valid comparisons. The bulk of the work would likely be qualitative in nature, however, and drawing on some respected and successful qualitative research and analysis tools.

All of the ideas and proposals outlined would be subject to discussion and negotiation with any co-researchers, whether young people or professionals. We would welcome the perspectives of these parties on the sort of issues we should be researching and the questions we should be asking.

For further information, or to discuss anything about this research, please contact:

Scott Yates, Youth Affairs Unit, De Montfort University, The Gateway, Leicester, LE1 9BH, [syates@dmu.ac.uk](mailto:syates@dmu.ac.uk)  
Richard Mckie, Youth Work for Health, The National Youth Agency, 19-23 Humberstone Rd., Leicester LE5 3GJ, [richardm@nya.org.uk](mailto:richardm@nya.org.uk)

# The National Youth Agency working with hospital based youth workers in the UK from 2008-09 under S64 funding

July 2009



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## 1. Introduction and Overview

The National Youth Agency (NYA) is England's national expert on non-formal education – involved in shaping youth work policy and helping improve a range of practice with young people in England.

The National Youth Agency supports those involved in young people's personal and social development and works to enable all young people to fulfil their potential as individuals through

- Informing, advising and helping those who work with young people.
- Influencing youth policy and improving services for young people.
- Promoting young people's participation, influence and place in society

The NYA has established a strong adolescent health team, and the following extracts help place the Section 64 work in an organisational and strategic context.

### Vision

In line with *Every Child Matters*, the *National Service Framework for Children, Young People and Maternity Services* and *Aiming High*, our vision is that all young people are healthy and that they enjoy good physical and mental health and are supported to adopt healthier lifestyles and develop greater emotional resilience.

### Aims

The NYA will work toward this by:

1. Promoting young people's influence, voice and place in the determination of their own health needs
2. Improving the practice, programmes and services offered to young people by the non formal education and health sectors (and particularly by youth and young people's services) to support young people to adopt and maintain healthier lifestyles;
3. Promoting the development of health education policy based on an improved understanding of adolescence and health and the contribution of non formal education and youth work approaches to achieving that;
4. Building the capacity of Children's Trusts and their partners to deliver improved health outcomes for young people at local level.

**[The National Youth Agency Health Strategy 2007-2010]**

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## **Section 64 work with hospital based youth workers**

The Department of Health approved a bid made to the Section 64 Grant scheme by NYA in 2006 which had the following aims

- To enable providers of youth work and other non- formal education to improve services so that young people in contact enjoy better physical and mental health
- To expand the understanding and raise the effectiveness of adolescent health within the non-formal education sector
- To promote non-formal education approaches to young people's health amongst PCTs and relevant health providers

The overall idea for the S. 64 work undertaken by NYA and various partners providing hospital based youth work fits all 3 criteria above, and originated as a response to a request from one hospital – Nottingham University – for assistance with recognising and celebrating its work over the previous decade. As the scope of the project grew to include other sites and individuals, the work eventually agreed by this group could be summarised as follows

***“Providing a series of inter-linked and sequential interventions to enable providers from Local Authorities, PCTs and the voluntary sector to act more coherently to improve both policy and practice around improving young people's health”***

## **2. Scope of the work**

Four separate but “*inter-linked and sequential*” pieces of work were identified locally in early 2008, looking to deliver outputs over the following year or 18 months. The work areas are detailed below, and were based on identified local need in Nottingham, an assessment of the potential needs of a larger group of professionals delivering similar services in England, and a sense of the developing strategic issues at a national level, focused on Aiming High for Young People and the movement towards a greater personalisation of health services. The four linked work areas were

- To capture a picture of what constitutes “hospital based youth work” by showcasing the longest surviving project of this type and making this accessible to a national audience
- To establish a small planning group to map other similar work in England (and beyond, in practice) and establish a clearer picture of the needs of this unique workforce
- To work with those professionals providing hospital based youth work to develop a sustainable support mechanism to encourage and develop this relatively unknown and uncharted group of providers.
- To scan for research material to assist with all of the above, and develop new ideas for demonstrating the effectiveness of this approach.

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### 3. Personnel and Resources

Resources to support this work were available to the partners involved through Section 64 funds, and through the input of time and other essentials (e.g. venues and existing products) by all of the partners involved. The main personnel involved in taking forward this work were

- Richard McKie - National Programme Manager for Health at NYA
- Donna Hilton – Nottingham University Hospitals Programme Manager
- Charlotte Frith – Birmingham Children’s Hospital
- Kerry Jones – The Inspire Project, Wrexham
- Lorraine Case – Youth Worker at The Christie Hospital, Manchester
- Over 30 staff from a network of providers in England, Scotland and Wales
- Young people from hospital based youth work provision in Nottingham and Manchester

### 4. Project Report

#### **Work area 1: the Nottingham University Hospitals Case Study**

##### **Aim:**

To observe and report back on the work of the Nottingham University Hospitals youth work team and make this practice available to a national audience

##### **Method:**

Initially unconnected, a visit was made to observe youth work practice in the City Hospital, Nottingham in July 2007. Interviews with staff and volunteers, young people using the project and the Project Manager led to the appearance of an article in Children and Young People Now magazine. The article generated some interest from the Department of Health, from senior youth work figures, and from other similar practitioners in England.

This interest led to the decision to use Section 64 funding to try to capture a longer and more detailed case study which would be available in hard copy and on line to provide a more lasting record of the work (then approaching its 10<sup>th</sup> year of operation) and a permanent reference point for the further work of the project. Consequently, a 3000 word, full colour case study was compiled, designed and produced in partnership with the NUH team and 1000 hard copies produced. A full colour PDF of the same work was made available on line as part of the NYA’s Youth Work for Health web site at [www.nya.org.uk/health](http://www.nya.org.uk/health) and is attached separately at **Appendix A**.

##### **Impact:**

As well as the publicity generated locally from the celebrations and materials made available by the NUH itself to celebrate its 10<sup>th</sup> year of successful operation in May 2008, the interest generated by all of these initiatives led to a

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number of spin off events which served to increase professional awareness and national recognition of this type of youth work in hospital settings, including

- i. a seminar input by Donna Hilton from NUH to the first national conference of the Association for Young People's Health in London in January 2008
- ii. a further input to the research conference of the same organisation in November 2008, alongside staff from a second hospital site in Wrexham (The Inspire Project)
- iii. the awarding of the title "Best Youth Work Team" in the national Children and Young People's Awards in London in November 2008

## **Work area 2: Establishing a central mapping and planning group**

### **Aim:**

To establish a small planning group to map other similar work in England (and beyond, in practice) and establish a clearer picture of the needs of the workforce

### **Method:**

By working with the Project Manager at the NUH and utilising her contacts, meetings were held with more practitioners to discuss issues of common interest and identify future areas of mutual benefit.

Using the already established reputation of Donna Hilton at NUH, a meeting was held involving two other hospital based youth workers (Charlotte Frith from Birmingham Children's Hospital and Kerry Jones from The Inspire project in Wrexham, North Wales) to continue to identify the key features of the work and discuss how to take forward the rest of the process. The staff attending came from 2 different countries, and provided different models of provision to that at NUH.

### **Birmingham Children's Hospital**

Lead youth worker Charlotte Frith works as part of a team which includes Play workers, Youth Workers and clinical staff, providing personal and social support to young people attending one of Europe's biggest dedicated children's in patient provisions.

### **Inspire Youth Project – Wrexham**

With a focus on young people who self harm, The Inspire Team, now led by Youth Worker Kerry Jones, works within the local Maelor Hospital to provide individual support, a variety of tailored interventions and referral. They are funded through a 5 year Big Lottery grant.

### **Impact:**

After several meetings in Leicester, Nottingham and Birmingham, the group felt better able to identify what they understood to be the focus of hospital based youth work, and generated a list of possible objectives which might be served by a larger and more formal professional grouping. With the aid of

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Section 64 programme and partner inputs, a project plan was agreed to hold the first ever national meeting of youth workers in hospitals.

- **Work Area 3: developing a sustainable support mechanism**

**Aim:**

To work with those professionals providing hospital based youth work to develop a sustainable support mechanism to encourage this unknown and largely uncharted group of providers.

**Method:**

The planning group devised a programme based on their previous professional discussions, focused around 3 main objectives

1. To bring together as many hospital based workers as possible and to map out where and how services are currently provided, and set this down in a publicly accessible place
2. To encourage the growth of new, supportive networks amongst the group and to identify external support for a national grouping of the same staff
3. To provide a contemporary programme of information, debate and skills sharing to enhance current work practice

To this end, the programme for the event – christened “Lifting the Lid” - was developed and included sessions by hospital based staff, the NYA, and invited external speakers. The programme and the work of the planning group was circulated through the national magazine, *Children and Young People Now*, through the e-mail bulletins of the NYA, through word of mouth amongst practitioners, and through leafleting at events featuring some aspect of the work ( e.g. the AYPH research conference; see above).

**Impact:**

**1) The first national meeting – Lifting the Lid - December 2008**

The first ever meeting of the group took place on December 8<sup>th</sup> 2008 at Birmingham Children’s Hospital, and 22 staff attended from a wide range of projects in England, Scotland and Wales. The published report of the “Lifting the Lid” event is attached at [Appendix B](#) and the evaluation feedback at [Appendix C](#).

Perhaps the most important product of the day was a list of wants and needs that the group determined as critical for their future development. This list is provided in full below

- **Standardised policies and guidelines**
  - risk assessments
  - recordings
  - documentation
  - access to medical notes
- **Professional body/association**
  - meet twice per year

- 
- support network/induction
  - **Information on funding**
    - support and guidance
    - permanent funding
  - **Better understanding of NHS for youth workers**
    - how it works
    - How youth workers operate (for NHS!)
  - **Include workers in other related areas**
    - CAMHS etc?
  - **Information sharing**
    - sharing good youth work practice
    - medical related issues
  - **More youth work posts**
    - too short term
    - more hours needed
  - **Better links and united voice**
    - with related professions (e.g. Play workers)
    - better links with local authority and voluntary sector youth services
  - **'How to' start up guide**
  - **Training**
    - basic counselling skills
    - end of life palliative care training
    - dealing with/talking to patients
  - **More in depth analysis and research**
  - **Strategies for moving forwards**
  - **Union representation**

This list of wants and needs became – effectively – the agenda for future action, to be pursued by an enhanced Planning group, and to become the focus for future training and practice sharing events.

## **2) The second national meeting – June 2009**

Based on the success and format of the first meeting, a second national event took place on 2<sup>nd</sup> June 2009 at The Christie Hospital, Manchester. The programme and evaluation feedback are attached as **Appendices D and E** respectively. The programme included discussions on two important items in the context of the Section 64 work programme

- 
- Planning for the provision of a whole group residential training and networking event in November 2009
  - Support to develop a proposal to investigate the effectiveness of hospital based youth work, working with national research institutions

#### **Work Area 4: Research and deciding what works**

##### **Aim:**

To scan for research material to assist with all of the above, and develop new ideas for demonstrating the effectiveness of this approach.

##### **Method:**

Having established at the first national meeting that the full hospital youth workers' group had prioritised the need for research to demonstrate the effectiveness of the services they were providing, the NYA Information team began to track down leads for further work being done on this topic. This desk top search, and a link to an external consultant, uncovered work by the Youth Affairs Unit at De Montfort University, also in Leicester, which was focused on the same professional grouping, and which had expressed an interest in developing a research model to understand the processes involved in this work and finding ways to test out the effectiveness of these interventions over a number of indicators.

Meetings between the NYA and De Montfort University led to the creation of a joint proposal (at [Appendix F](#)) for research work in this area which has been accepted in principle by the group, and which pledges them to assist with the process in the future. A meeting to shape a more detailed proposal and look at funding and future partnership is scheduled for July 27<sup>th</sup> in Leicester.

#### **Summary and conclusions**

The National Youth Agency and the Planning group of the Hospital Based Youth Worker's Group both feel that the aims of this section of the Section 64 funded programme for 2008-09 have been largely achieved by the end of July 2009. At the end of the project year, it is clear that much has been achieved, with over 40 individuals and 15 organisations registered with the HBYWG, two successful practice sharing days completed to general approval, a developing research proposal involving one university and a national expert agency, and ambitious plans for a bespoke training residential for group members in early 2010.

The one action not **yet** achieved may prove to be the most important of all, which was to "*develop a sustainable support mechanism*" for the group. Approaches for a small amount of seed corn funding to embed the progress made and enable the group to become largely self-sustaining have, to date, been unsuccessful, although efforts continue. Despite a strong feeling in the Group that the political and professional agenda has moved to recognize their particular contribution to the health of young people – most succinctly expressed in the policy document "Healthy Lives, Brighter Futures" (DCSF and DH; 2009) – there is no guarantee that in the new economic reality, this

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quite unique and unsung area of practice will not blossom and fade, for the want of some minimal funding and general recognition.

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## **Appendix A**

The Nottingham University Hospitals case study is attached separately and is also available at <http://www.nya.org.uk/files/130499/FileName/notunihosys.pdf>

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## Appendix B

Report on “Lifting the Lid”, the first ever national Hospital Based Youth Worker event on 08/12/08

### **Lifting the Lid - A first Networking event for hospital based youth work practitioners**

This landmark networking event brought hospital based youth workers together for the first time was held at Birmingham Children’s Hospital in December 2008.

The purpose of the event was to find out the size, scope, needs and wants of the hospital based youth work sector and to examine key issues in the current climate for this work. Discussions on a way forward for this unique group were also programmed in.

The seminar- which was attended by 27 hospital based staff - consisted of a number of speakers and small workshop exercises to enable the group to look at its purpose and possible future. Those attending were encouraged to network with colleagues from other organisations in the sector. Detail from each of the programme slots is provided below.

#### *Setting the scene*

#### **Richard Mckie - The National Youth Agency**

Richard set the scene for the event and posed the question as to how the group might help influence current and future policy and practice. Richard also asked delegates to consider how the group should move forward - and what resources were available to enable that to happen.

#### *Case study 1 – Nottingham University Hospitals Youth Service*

#### **Donna Hilton – Youth Service Manager**

Donna spoke to the group about NUH Youth Service’s award winning work and how their programme has been shaped over the 10 years it has been in existence since initially starting as a two year pilot project. Donna shared examples of the activities that young people participate in, the achievements and outcomes that they experience and the reality of managing the different needs of the young people they work with.

Donna spoke about the challenges the project faced since its inception, especially regarding funding, and of the hospital trust’s understanding of what youth work offered within a clinical environment. She felt that the demand for youth work in this context ‘is huge’ and the service benefits by employing volunteers and offering student placements.

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Donna highlighted the personal but positive challenges of delivering youth work in such a setting without any prior medical knowledge. She spoke about the type of sessions that take place in the purpose built youth centre on site which range from activities such as sport, arts and drama to informal drop in sessions and open 'club' sessions.

(Presentation [available here>>](#))

*Scoping the territory: who are we, where are we, and what do we want?*

**Group exercise**

Delegates formed groups to discuss and considered the question: who are we, where are we, and what do we want? These notes have been turned into a directory of hospital based youth work and are available at [www.nya.org.uk/yw4h](http://www.nya.org.uk/yw4h)

*How current national policy is lining up for this work*

**Lily Makurah - Child and Adolescent Programmes - Department of Health**

Lily introduced her session by talking about the forthcoming Child Health Strategy which is due to include a chapter on adolescent health. She went on to discuss how the strategy looks at addressing professional development issues in health based youth and other work to improve a variety of practitioners' skills and abilities. She touched on how e - learning provision could be offered in this area.

Lily noted especially issues around transition and young people's rights and stressed the importance of young people having a voice on the health services they experience and how

the Department of Health are interested to find out about the added value they get from hospital based youth work. She asked the group to consider how to make this area of work more visible. She also felt it was important that services are mainstreamed - rather than being an 'add-on' provision - and were identified within each locality's Children and Young People's Plans.

There were questions from the floor around transition and the Your Welcome quality criteria and it was mentioned that some PCTs are putting youth work standards in plans to encourage hospital settings to test youth work out in the future.

*Commissioning and funding for hospital based youth work*

**Rob Willoughby -Children's Services Adviser at the Government Office for the West Midlands**

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Rob is currently on secondment from a local Strategic Health authority and has an overview of health services in five areas.

In terms of commissioning, Rob considers hospital based youth work to be a specialist service. He spoke about the policy agenda around the Children and Young People's National Service Framework (NSF), The Choosing Health white paper and Chief medical Officer Liam Donaldson's annual report which this year considered teenage health issues.

Rob looked at models around commissioning and highlighted the importance of youth workers' knowledge and experience of working non-formally with young people as commissioners are on the whole not familiar with the detail. He felt that understanding needs and examining outcomes and measurements are key in both supporting hospital youth work and learning what works. It was vital that youth work accepts and excels in terms of measuring and reporting on the end products of their work with young people.

Rob's presentation went on to look at needs assessment, setting priorities and a healthy youth work model.

(Presentation [available here>>](#))

#### *E – Learning; workforce development for non-medical Staff in the NHS*

#### **Dr. Janet McDonagh - Clinical Senior Lecturer in Paediatric and Adolescent Rheumatology at Birmingham Children's Hospital**

Janet began her presentation by quoting from a recent survey<sup>1</sup> which looked at the numbers of staff at Birmingham Children's Hospital which reported that only one-third had undertaken formal training in adolescent health. Previous research by Klitsner I et al, in 1992 also found that only a third of doctors (paediatric and adult) actually like working with adolescents.

Research by Dieppe<sup>2</sup> published in the Journal of Adolescent Health looked at what trainees knew about working with young people. A high proportion (90 per cent) were found to have been trained on asthma issues, less than 50 per cent on self harm, 41 per cent on adolescent health generally and only 20 percent on substance use.

The same research highlighted barriers to providing care such as:

- lack of training 66%
- lack of resources/services 60%
- lack of teaching materials 57% and
- perceived communication difficulties 48%

The remainder of the presentation looked at the young person's perspective of experiential learning, the impact of rotational training posts and the involvement of young people.

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In summing up Janet added that the RCPCH adolescent health project e - learning materials have potential for multi-professional training and with that in mind asks the group to consider what curriculum was needed and what are the baseline training needs.

(Presentation [available here>>>](#))

### **References**

1. McDonagh JE, Minnaar G, Kelly KM, OConnor D, Shaw KL.  
Unmet education and training needs in adolescent health of health professionals in a UK Children's Hospital.  
*Acta Paediatrica* 2006; 95(6): 715-9.
2. Dieppe CR, Kumar M, Crome I.  
Adolescent exploratory behaviour – what do trainees know?  
*Journal of Adolescent Health* 2008; 43: 520-2.

### ***Case study 2 - Inspire Youth Work in Hospital Project, Wrexham***

#### **Kerry Jones and colleagues**

The work of the Big Lottery funded project focused on mental health and in particular self harm was scheduled to run for 5 years initially and the Inspire team shared the first year results on what outcomes they had achieved. The close partnership across the local authority youth service and the PCT and Hospitals Trust was critical to the running of this project, which was unique in terms of its focus and methodologies.

#### ***Summing Up***

On summing up at the close of the seminar, Richard Mckie asked the group what key action points they should take forward to a further planning meeting in late January in Birmingham.

#### **Seminar Action Points**

A summary of the needs, wants and issues from the seminar can be found below:

- **Standardised policies and guidelines**
  - risk assessments
  - recordings
  - documentation
  - access to medical notes
- **Professional body/association**
  - meet twice per year
  - support network/induction

- 
- **Information on funding**
    - support and guidance
    - permanent funding
  
  - **Better understanding of NHS for youth workers**
    - how it works
    - how youth workers operate (for NHS!)
  
  - **Include workers in other related areas**
    - CAMHS etc?
  
  - **Information sharing**
    - sharing good youth work practice
    - medical related issues
  
  - **More youth work posts**
    - too short term
    - more hours needed
  
  - **Better links and united voice**
    - with related professions (e.g. Play workers)
    - better links with local authority and voluntary sector youth services
  
  - **'How to' start up guide**
  
  - **Training**
    - basic counselling skills
    - end of life palliative care training
    - dealing with/talking to patients
  
  - **More in depth analysis and research**
  
  - **Strategies for moving forwards**
  
  - **Union representation**

**Monday 8<sup>th</sup> December 2008**  
**Birmingham Children's Hospital**  
**EVALUATION SUMMARY**

	<b>Very</b>	<b>Useful</b>	<b>Slightly</b>	<b>Not</b>
		<b>useful</b>	<b>useful</b>	<b>useful</b>
1. <b><i>How useful has the event been?</i></b>	86%	14%	0%	0%
2. <b><i>If we were to hold a similar event in the future what changes should we make to improve it?</i></b>				
<ul style="list-style-type: none"> <li>• Larger venue x 5</li> <li>• More accessible venue</li> <li>• Better parking</li> <li>• More multi agency working</li> <li>• Change set up of room</li> <li>• Planning group to push action/ideas forward x 2</li> </ul>				
3. <b><i>Domestic and Administrative Arrangements</i></b>				
	<b>Excellent</b>	<b>Good</b>	<b>Satisfactory</b>	
<b>Poor</b>				
a) Pre-conference information and administration.	41%	45%	9%	0%
b) Administration on the day	55%	41%	5%	0%
c) Venue	50%	32%	18%	0%
d) Catering	73%	14%	14%	0%
4. <b><i>Please indicate how you found out about this event:</i></b>				
NYA Publication	9%	NYA Mailing	18%	
NYA Website	9%	Word of Mouth	41%	
Other (3, Wrexham Hospital Youth Team)	32%			
5. <b><i>Please score the following aims of this event</i></b> on a scale of 1 – 10, with 1 being "the event failed to meet this objective" to 10 being "The event exceeded this aim" :				
a) Participants will find out about the size, scope, needs and wants of the hospital based youth work sector				<b>Av. = 8.4</b>
b) Participants will examine key issues in the current climate for this type of work				<b>Av. = 8.3</b>
c) Participants will decide on a way forward				<b>Av. = 8.5</b>

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6. ***Please add anything else you wish to have noted following this event, or any further requests you have***

- Good networking opportunities x 4 – would be good to happen regularly
- Very useful day – will give me the confidence to go back to my job
- Look forward to next event
- Email forum and twice yearly meeting
- Will help provide advice and guidance
- Really useful event x 2 – nice to know we are not on our own
- Excellent examples of good practice to disseminate
- Really hope this moves forward
- Excellent day – feel very positive about my job and feel we are moving on – it is an exciting time

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## Appendix D

Programme from the second meeting of the national Hospital Based Youth Workers' group on 02/06/09



**PROGRAMME**  
**Hospital Based Youth Workers Shared Practice Day**  
**Seminar Room 1, The Education Centre,**  
**The Christie Hospital, Wilmslow Road, Withington,**  
**Manchester, M20 4BX**

Chair – Donna Hilton

**Morning Programme**

Time	Session	Facilitator
10.30am	Arrive and Refreshments	
11.00am	Welcome and catch up	Donna Hilton
11.30am	Strategy and Policy: Brighter Lives, Healthy Futures	Richard McKie
12.00pm	Shared Practice: You're Welcome	Charlotte Frith
12.30pm	Lunch and Networking	

**Afternoon Programme**

1.15pm	Sometimes its Cancer – Workshop 1 and site visit	Lorraine Case
1.45pm	Sometimes its Cancer – Workshop 2 and site visit	Lorraine Case
2.15pm	Development Plan (DH)	Richard McKie
2.25pm	Group Name and Definition	Donna Hilton
2.35pm	De Montford University/NYA research proposal	Richard McKie
2.45pm	Planning Group	Donna Hilton
2.55pm	November Conference and Planning	Richard McKie

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<b>3.00pm</b>	Finish	
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Please return all evaluations forms from delegate pack to organizers. Thank you.

Evaluation of the second national Hospital Based Youth Workers Shared Practice Day

**HBYWG Shared Practice Day – 2<sup>nd</sup> June 2009  
FEEDBACK**

**Attendees:** 22

**On a scale of 1-10 (10 being the most useful) how did the day rate?**

Mean score = 9.2 out of 10

Highest score = 10; Lowest score = 6

**How could the day have been improved?**

- Cooler (air conditioning)
- When policies are discussed have a separate group for Wales where someone from Wales could take the lead on this
- Venue was good but maybe venue could be more central to attract more people from the south
- A wider representation of youth work done in health settings?
- More time for networking

**Any ideas for content of future events?**

- Include young people's presentations
- Case studies/Showcase of good practice
- Funding information
- Tackling the medical person's understanding of our role!
- Sharing ideas for practice e.g. Resources, links, activities
- Palliative care training and bereavement training
- Reflective Practice Workshop
- Problem solving ideas for fitting into a medical setting
- Psychosocial skills delivery
- Relevant guest speakers
- Volunteers/Student placements
- Mental health Issues
- Difference between hospital youth work and generic youth work
- Updates on latest policies
- How to measure the success of hospital youth work

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- Involving siblings
  - Research
  - Sustainability of services (commissioning)
  - How to set up a hospital youth club
  - Time for socialising (perhaps in the evening) would be great for teambuilding and further networking!

**Would a two-day event be useful and could you get funding?**

Useful – all said yes!

Funding – Most said yes, one said a straight no, two said maybe and two said if it was cheap (around £25)

**General comments:**

- Liked the 11-3 time slot and good mix of presentations
- All very useful
- Links to current/proposed policy was very useful
- Excellent! Really informative and empowering being amongst like-minded people!
- Really enjoyed hearing about practice examples (Christie Crew)
- Young people's participation was fantastic!
- Well done planning team, it was a good day!

### Joint research proposal for HBYW

#### **Outline proposal for possible research into hospital-based youth work**

*Youth Affairs Unit, De Montfort University and The National Youth Agency*

##### *Background*

Both the *Youth Affairs Unit at De Montfort University (YAU)* and *The National Youth Agency (NYA)* have for some time now recognised the potential positive impacts of hospital-based youth work, and we have been considering ways that we might be able to undertake some research to demonstrate this impact. A similar desire to find an evidence based method of demonstrating the effectiveness of this work was articulated at the first meeting of the Hospital Based Youth Workers' Group in December 2008.

We believe that this research would ideally have a dual focus on: i) the needs and experiences of young people in hospitals and the ways that they interact with health care staff; and ii) the processes and impacts of youth work in hospitals.

In relation to point i), we have identified a number of potential issues that demonstrate the need for something like youth work in hospitals, notably:

- Young people in hospitals have specific needs connected to their developmental and social context and to their experiences of illness
- They often experience stigmatisation, bullying, family conflict, social isolation, difficulties with relationships and withdrawal from sources of support
- Transitions from paediatric to adult care environments are often experienced as very difficult
- Differing patient and staff perceptions of ideal models of adherence to self-care routines can lead to conflict on hospital wards and neglected self-care

We also believe we have highlighted some evidence (outlined in our recent paper in the *Journal of Youth Studies* – Yates & Payne, 2009) that demonstrates that youth work has been having some positive benefits in working with young people on these and other issues. Recent Government policy has also identified the potential value of personalised care for adolescents in hospital settings (*Brighter Lives, Healthy Futures: DH/DCSF, February 2009*). We would like to carry out a programme of research that will expand our understanding of all of these issues and provide a useful resource for youth work practice and allow us to make a stronger case for hospital-based youth work to the academic and professional fields, funders and policy makers.

##### *Research questions and objectives*

We would like to carry out an in-depth evaluation of the needs of the young people who engage with youth workers work and the processes and impacts that the youth work has with young people in its resident hospital. If possible, we would like to work with existing youth work teams, but it is also potentially possible that we might seek funding for new posts as well to expand the study. We currently have in mind the aim to address the following set of research questions:

1. What perspectives do young people bring to encounters with hospital services and health professionals?
2. What challenges do young people face, and how do these affect their interactions with hospital services?

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3. How do the various hospital staff interpret and respond to the needs of young people in hospitals?
  4. What forms of youth work emerge in practice in the hospital(s)?
  5. What kinds of interventions does youth work provide and how does it function?
  6. What impact does youth work achieve (i) on young people's experiences of hospital and their interactions with hospital staff; (ii) on hospital staff, health care interventions, and health outcomes; and (iii) on other areas of young people's lives (this might include many of the areas in which youth work can have benefits, such as relationships, family life, educational engagement, etc.)?

#### *Proposed methods*

The research would be undertaken jointly by a small team from YAU, with additional input from NYA although we would also very much like to see a participant-led component undertaken by youth workers and young people themselves. We would like to share management and steering of the research with youth work professionals and young people with experience of hospitals, as well as university-based academics and NYA staff. Although we recognise that final decisions about methodology will have to wait until agreement with all of the concerned parties, at present we envisage something like:

1. Interviews with hospital staff in the departments or wards targeted for deployment of youth workers and across the staff hierarchy, ideally from consultants downwards. These will aim to ascertain the perspectives of hospital staff regarding the issues young people face in hospitals and that staff face in working with young people. Possibly surveys with staff and young people as well to produce some quantitative data.
2. Observation of the processes by which youth workers enter the hospital environment, assess the needs of young people, liaise with hospital staff, select appropriate models of intervention and begin making contact with young people. Youth workers' own perceptions of this process are also important.
3. a) Data gathered with young people. A combination of interview data carried out by the academic research team, the collection of personal accounts from young people by youth workers who work with them, and data generated by young people themselves (this could take a number of forms, to be decided further into the research).
3. b) Self-guided research by young people in hospitals. This might include diaries, peer interviews, young person-led interviews with youth workers, researchers, hospital staff, and so on, based on the model of work employed by the Young Researchers Network facilitated by NYA.
4. a) Participant-led research by youth workers. For example, research diaries in which they record notable features of their day-to-day work, including problems faced, interventions undertaken and outcomes achieved; case notes; and so on.
4. b) Interviews with the youth work team to obtain their accounts of the ongoing nature of their work, and with hospital staff about the development of youth work practice in hospitals.

#### *Final notes*

It should be said that these plans are still quite preliminary. They represent our current thinking about the sort of research we believe could usefully identify the needs, perspectives and

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experiences of young people in hospitals, the processes through which youth work works with them, and its potential impacts.

We would like this research to be rigorous enough potentially to influence policy makers and funders whilst also being flexible enough to engage professionals and young people in the processes of research. We would like to try to collect quantitative data where possible to produce statistically-valid comparisons. The bulk of the work would likely be qualitative in nature, however, and drawing on some respected and successful qualitative research and analysis tools.

All of the ideas and proposals outlined would be subject to discussion and negotiation with any co-researchers, whether young people or professionals. We would welcome the perspectives of these parties on the sort of issues we should be researching and the questions we should be asking.

For further information, or to discuss anything about this research, please contact:

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