



Winter 2019

Children's Health Scotland

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today we were doctors!**

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We are the only charity in Scotland dedicated to informing, promoting and campaigning on the healthcare needs and rights of all children and young people.

Annual Review and Impact Report

Our Annual Review and Impact Report for 2018/19, which gives a snapshot of our work over the past twelve months, has been published.

The review tracks our progress against our Key Priority Areas outlined in the Strategic Plan whilst summarising the impact we have made in our sector over the past year. The targets set were ambitious, but realistic, and delivered by staff and volunteers who worked together to help children and young people and their families.

We are still the only charity in Scotland dedicated to informing, promoting and campaigning on the healthcare needs and rights of all children and young people. This could not be achieved without the hard work, knowledge and enthusiasm of our staff, the dedication of our supporters and



volunteers, and the generosity of trusts and foundations. This support is essential to ensure our work continues and that every child and young person can continue to

exercise their rights to best quality healthcare.

To view the Annual Review and Impact Report visit www.childrenshealthscotland.org.

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Children's Health Scotland celebrates commitment to real living wage

Children's Health Scotland has been accredited as a Living Wage Employer. Our Living Wage commitment will see everyone working at Children's Health Scotland receive a minimum hourly wage of £9.30 in the UK. This rate is significantly higher than the government minimum for over 25s, which currently stands at £8.21 per hour.

Helen Forrest, Chief Executive of Children's Health Scotland said: "As a national Scottish charity there is a massive emphasis on the quality of service that our staff deliver, so it is really important that their work is fairly rewarded. Paying the real Living Wage demonstrates that Children's Health Scotland is committed to the values of fairness, and treating our workforce well, and we are delighted to have secured accreditation as a Living Wage employer."

Katherine Chapman, Director, Living Wage Foundation added:

"We are delighted to welcome Children's Health Scotland to the Living Wage movement of over 1,400 Scottish employers who together want to go further than the government minimum to make sure that all their staff earn enough to live on. They join lots of smaller employers as well as larger and iconic Scottish employers like SSE, Standard Life, Barrs, Mackies, ScotRail, DC Thomson and many more. These businesses recognise that paying the real Living Wage is the mark of a responsible employer and they, like Children's Health Scotland, believe that a hard day's work deserves a fair day's pay."



Two new Executive Committee Members

We are delighted to welcome two new Executive Committee Members to Children's Health Scotland, Penny Davis and Euan Forbes.

Penny has held a range of marketing, communication and fundraising roles within publishing and education organisations and over the past ten years has worked in Scottish further education governance and compliance. When Penny is not working, her time is taken up with two teenage children, and a large dog that needs a lot of exercise. Commenting on her appointment Penny said: "I believe that having access to the right information can greatly empower children, young people and their carers at times when they might be vulnerable with health issues. An organisation like Children's Health Scotland can make an enormous difference to the experience young people have of hospitals and healthcare, and the longer-term impact it has on their lives."

Euan is currently employed as a Trainee Solicitor and became an Executive Committee Member so that he could help support the healthcare needs and rights of children and young people, especially those leaving the care sector. Euan said: "I believe there is a real gap in provision, and knowledge of entitlement, for young people leaving the care sector and I want to do something about this. By being part of Children's Health Scotland I can do this and so much more. It is a privilege to be part of this excellent charity and I look forward to supporting the healthcare needs and rights of children and young people and of playing an active part in the further development and growth of Children's Health Scotland."



So, what is Unsafe Sleep?



The Scottish Cot Death Trust is changing the way we have the conversation about infant sleep.

This year the Scottish Cot Death Trust launched a new online learning hub, **SafeSleepScotland**.

The charity hopes that this new education brand will help reframe the conversation of sudden unexpected death in infancy (SUDI) prevention using clearer, more

accessible language to help promote further understanding of the safest way for babies to sleep.

In Scotland, a baby dies suddenly and unexpectedly every nine days. Research has identified the risk factors that make a SUDI more likely to occur and the further

increased risk when factors are present together. Unfortunately, the data also shows that unsafe sleep environments can be a contributing factor in too many avoidable deaths. The charity's education remit looks at promoting how these risks can be reduced - from babies being put to sleep on their backs in their own firm, flat, and uncluttered sleep space (a cot, crib, or Moses basket) to the importance of a smoke-free household and responsible use of products.

"The introduction of Safe Sleep Scotland allows us to have an impactful and engaging conversation with our audiences," said Lynsay Allan, Executive Director, Scottish Cot Death Trust. "It's understandable that terms such as cot death, SIDS, and SUDI may act as blockers or barriers to engagement. So, by focusing less on these terms and emphasising Safe Sleep, and how an unsafe sleep space could affect baby's breathing, we hope the evidence-based messages resonate."

To help launch www.safesleepscotland.org, the charity has created a new awareness video 'Baby's guide to Safe Sleep'. The nursery rhyme-type poem highlights all the ways we promote Safe Sleep by reducing the risks.

For more information/to book an education session, visit www.SafeSleepScotland.org. For more information on the support, research, and fundraising at the Trust, visit www.scottishcotdeathtrust.org.





My hospital experience with **SUPER TOM!**

By Laura McCartney

Laura is a mum and full-time carer for her son Tom, who has complex medical needs. 'Super Tom' as he is affectionately known, was born in Forth Valley Hospital in Larbet seven years ago. At our recent Parliamentary Reception, we were very privileged when Laura shared with us some of her hospital experiences. Here is a little of her story.

Tom's medical issues include a single ventricle cardiac defect, respiratory issues (he had a tracheostomy for five years and was on oxygen until recently), and complex epilepsy. He has profound hearing loss which is so severe that he has no audio input at all so we use Makaton signing for communication. Tom was also born without a fully formed oesophagus which has now been repaired but means he is peg fed. He would be classed as a CEN child, so a Child with Exceptional Healthcare needs. Our primary hospital for care is Glasgow, where Tom has 10 consultants, as well as two to three local ones in Forth Valley. Despite all these complications, Tom is a bright, confident, curious and a very mischievous little six-year-old.

As a result of all Tom's health issues, we have had many hospital admissions and would refer to ourselves as 'frequent flyers'. If hospital stays racked up clubcard points, I could buy everyone Christmas dinner.

We have had various reasons for admissions over years, including two-long term stays in the first year or so of Tom's life. He has had many planned surgeries and routine procedures, and we are awaiting a date for what we think will be his 36th general anaesthetic. He has also been known to spark the excitement or should I say terror of a blue lighted entrance to Forth Valley, and then very quickly straight through to Glasgow, because of acute issues. I have a grab bag packed and ready in my bedroom in case of such times with some essentials like a phone charger, spare clothes, change for vending machines, etc. So, we are pretty well versed in hospital life.



Despite all this, Tom is delighted to see the swarm of blue uniforms and claps and shouts with excitement when we drive into the hospital car park. This is partly because we have worked very hard to ensure Tom feels as comfortable and safe as he possibly can while in hospital. But it is also due to the huge amount of kindness, support and compassion we have received as a family. In fact, some hospital staff are like Aunties and Uncles to Tom.

“ When I was asked to speak at the Parliamentary Reception for Children's Health Scotland, I wrote some notes about my initial thoughts, and then I read the full survey report. I was pleased but not surprised to read that it echoed a lot of themes and comments we have as a family. ”





When I was asked to speak at the Parliamentary Reception for Children's Health Scotland, I wrote some notes about my initial thoughts, and then I read the

full survey report. I was pleased but not surprised to read that it echoed a lot of themes and comments we have as a family. Four of the 10 articles of the EACH charter mention parents/carers. I think

that's important to note – having been through a hospital admission and surgery myself as a young adult, it is a time you feel very vulnerable. And nothing eases that like having support of the people you love around you, especially your mammy and daddy. I am also a big believer from my time in this 'job' that my son can only ever be as well and as happy as I am. If we are given the support we need as a family, we can support Tom to his absolute full potential, as well as keeping him as safe and medically well as possible for a boy with all his challenges.

Some of the issues we have in hospital or any environment with Tom is communication – because he has no hearing at all, we are his translators for every interaction with health care staff, as well as doing most of the round the clock care and supervision he needs. Although most wards have cubicles and parents are encouraged to stay, there is rarely space for both of us. And the level of care as well as broken sleep, can become exhausting very quickly. It really is a two-person job.

In most hospital intensive care wards, you aren't allowed to stay at all... which I can understand is from a safety and hygiene point of view. But stays in that ward mean Tom is at his most vulnerable medically, as well as emotionally. Imagine waking up in the middle of the night and not being able to tell anyone why you were upset or scared or sore. So unless he is completely sedated, either myself or Tom's Dad Colin have to be with him at all times, or within shouting distance. Ronald McDonald (RMCD) house is an amazing place, and we have had tremendous support from them while in Yorkhill over the 11 months we stayed there. Since the new hospital opened, sadly we have rarely been able to get a room there.

And even then, during an acute situation, it would take around 15 minutes to get from RMCD to the ward. In the old hospital you could grab your jacket and be across to the ward in about 2 minutes (I know, I have done it!).

“ Other small considerations around facilities which are mentioned in the report are honestly more important than I think staff realise. ”

Other small considerations around facilities which are mentioned in the report are honestly more important than I think staff realise. Trying to get through a tense and exhausting time in hospital without caffeine feels like a form of torture. The size of the new hospital means it can take 10-15 minutes to grab a tea and get back to the ward, never mind have time to drink it. So a pragmatic approach like allowing tea and coffee on the ward as long as its in a sealed thermos cup, making parents some toast in the morning, letting parents leave their beds down during the day so I can nap if Tom naps, these wee things are big things to us.

One other area which feels close to my heart is the emotional and mental impact of hospital stays on children and their families. I was diagnosed with PTSD in 2014 not long after we took Tom home properly. We had spent 11 out of the first 14 months of his life in hospital, most of it in intensive care. When we got home the adrenaline finally ran out and I was left with flashbacks, insomnia, panic attacks and severe anxiety. I couldn't stop crying and didn't know why, which felt very frightening, especially when I had this very small baby who needed a very large amount of care. I have an amazing relationship with my GP and thankfully he referred me to a trauma psychologist. I was given EMDR therapy (Eye Movement





Desensitisation and Reprocessing) and medication to help the symptoms and keep me functioning for Tom, while working through the problems I was having with traumatic events being stuck in my memory. This is a condition I still have to manage day to day as ultimately something comes along and opens up more issues as we go along our journey.

The Articles in the EACH charter are also linked to ensuring the mental health of the child – only being in hospital if they can't stay at home, having physical and emotional support of a parent/carer, being informed and included, being amongst their peers, having access to play and education. We have accessed support from the amazing play therapy and psychology team for Tom to prepare him for the jaw distraction surgery he underwent

last summer. The family support

team in Glasgow are real heroes when it comes to having someone to talk to and have an endless supply of tissues, as well as just knowing so much about other areas of support we can access. The specialist nurses like the Cardiac Liaison, and Complex Airway team are truly some of the most important professionals in our lives because of the clarity and support they can give us when it comes to a sometimes confusing clinical plan for Tom. Nurses are the ones in charge, sorry to break that to any Doctors.

One area of the report which felt disheartening is the lack of dedicated CAMHS (Child and adolescent mental health services) support. Given all the focus of the EACH charter on these areas, in a hospital setting it feels like professional input on this should be a necessity and not a luxury. Not just for children, but also for parents.

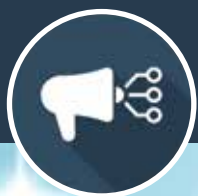
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In the community waiting times for even an initial appointment can be extremely lengthy. We are currently four months into a potential 9-12 month waiting time for an autism assessment for Tom, and I have a family member who has been waiting for over 18 months to start counselling. Support and information is great; but professional, clinical, mental health support is also crucial, and is something hospital staff should have awareness of and be able to access for all of the family.

As I mentioned earlier, as a healthy supported parent, I can help make sure my child is healthy and supported. People sometimes say 'I don't know how you do it' when they look at the life we have. I usually say – 'Neither do I'. I am not some sort of super parent – I am just like every other parent. My husband and I have just had to adapt and step up and make adjustments.

The overall theme from the report and from my experience would be to ask professionals to do the same thing. Adapt, make adjustments, find space for the things families like ours need to help our children be as safe, healthy and happy as possible while in hospital.





Recommendations made to improve hospital care for children



Alex Cole-Hamilton MSP

Our latest Children in Hospital Survey 2018/19 has made a series of recommendations for improving hospital treatment for young people. These include improvement to facilities for young people, access to education, and information for children and families highlighted as key recommendations in the latest Children in Hospital Survey.

The survey report was launched at a Scottish Parliamentary Reception, sponsored by Alex Cole-Hamilton MSP, on Wednesday 30 October 2019 and improvements in the provision of information, education and food are among the recommendations outlined in the key findings. Commenting on the launch of the survey report Alex Cole-Hamilton MSP said:

"Since 1985, Children's Health Scotland has carried out periodic surveys of Scottish NHS hospitals admitting children and young people. This latest survey highlights the good practice and progress that has been made in the provision of children's services in hospitals, whilst also identifying areas where improvements need to be made. It is an important piece of research and one which I hope will help to shape the future of services for children and young people in our hospitals."

Maree Todd MSP, Minister for Children and Young People added:

"Being in hospital is a difficult time for anyone let alone children and young people and I am pleased that the findings in this survey show there is high quality support for them while they receive treatment from the NHS."

"We will continue to build on the good work and sustain improvement so that children, young people and their families receive the best possible care."

Key recommendations outlined in the survey in relation to children and young people include:

- All wards to offer overnight accommodation and unrestricted visiting, including a sitting room close to the ward with self-catering facilities and subsidised meals in the hospital cafe/staff cafeteria.
- All wards to provide a family support/liaison worker or social worker in addition to translation services for spoken and written communications.
- Ward staff to provide information that is understood by patients and carers (not just made available) both for elective and emergency admissions.
- Young people between 16 and 18 should be offered the choice of admission to a children's or an adult ward.



- Surgery to be provided on dedicated lists with particular anaesthetists allocated to children's surgery.
- Children under the age of 16 should not be admitted to adult wards
- A named Child and Adolescent Mental Health Services (CAMHS) professional and written procedures for managing violent or aggressive behaviours to be always made available for those admitted with mental health conditions to paediatric wards.
- The provision of healthy, attractive and nutritional meals.
- The provision of education within five days of admission, or immediately if it is known that the stay will be longer.
- A consistent Child Health Commissioner role across all health boards.

The survey results have been benchmarked against the ten articles of the European Association for Children in Hospital (EACH) Charter, key standards for paediatric

care. EACH is an international umbrella organisation open to European non-governmental, non-profit national associations involved in the welfare of children in hospital and other healthcare services.

Professor Richard Olver, Chair of Children's Health Scotland

The EACH Charter echoes many of the articles of the UN Convention on the Rights of the Child (UNCRC), soon to be incorporated into Scots Law. Speaking about the research Professor Richard Olver, Chair of Children's Health Scotland said:

"Since our last survey in 2012-13, it is pleasing to note that progress has been achieved in the provision of hospital



Left to right; Miles Briggs MSP, Laura McCartney, Gwen Garner and Cameron Elliot.

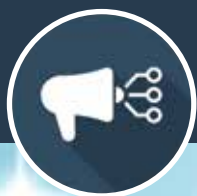
services for children and young people such as open visiting and the provision of overnight and on-ward facilities for parents/carers.

"However, there are still areas for improvement particularly with reference to the standards set out in the EACH Charter. It is a fact that all children have an explicit right to achieve their developmental potential and to sustain the highest possible standard of health, with a right to appropriate health services to facilitate attainment of these goals.

"On analysis of the findings more needs to be done, especially in relation to admission to adult wards, the provision of healthcare rights information, and compliance with Scottish Government guidance on the provision of education and on the nutritional content of food in hospital.

"We now look forward to working with those in the sector to implement the recommendations within the provision of hospital services for children and young people such as open visiting and the provision of overnight and on-ward facilities for parents/carers."





Children's Health Scotland welcomes the EACH Co-ordinating Committee Meeting to Scotland

E A C H
EUROPEAN
ASSOCIATION FOR
CHILDREN IN HOSPITAL

The European Association for Children in Hospital (EACH) is an international umbrella organisation open to European associations involved in the welfare of children in hospital and other healthcare services. Over the past year, as a member of EACH, Children's Health Scotland has worked towards bringing the EACH Coordinating Committee Meeting to Scotland. This prestigious

European event took place in Edinburgh in September 2019 and, of course, involved a visit to the Royal Hospital for Sick Children in Edinburgh.

Known affectionately by locals as Sick Kids, The Royal Hospital for Sick Children (RHSC) has been providing expert care to children in Edinburgh since 1860. Today it delivers specialist services for children and young people from across Scotland.

During the visit to the hospital, the EACH delegates had the opportunity to meet with staff from three individual services who work collaboratively to ensure that children and young people have access to age-appropriate and person-centred care during their stay in hospital and in the community. These three services included: The Lothian-Self Management Service (Children's Health Scotland); the Drop-In Centre (Edinburgh Children's Hospital Charity); and the Youth Support Coordinator Service (Teenage Cancer Trust).

The Lothian Self-Management Service delivers workshops throughout the year for children and young people aged 10-12 and 13-17 who live with long-term health conditions or disabilities. The workshops are non-condition specific, bringing together children and young people with a diverse range of conditions and backgrounds. They provide a safe space in





**Children's
Health Scotland**

E A C H
EUROPEAN
ASSOCIATION FOR
CHILDREN IN HOSPITAL

**EUROPEAN ASSOCIATION FOR CHILDREN
IN HOSPITAL (EACH) CHARTER**

The EACH Charter recognises and endorses the rights of the child as stipulated in the UN Convention on the Rights of the Child (UNCRC), and in particular the key principles that, in all situations, the best interests of the child should prevail.

Children's Health Scotland is the only charity in Scotland dedicated to informing, promoting and campaigning on the healthcare needs and rights of all children and young people.

- 2 Children and young people have their parents' and carers' support
 
 - 3 Parents and carers welcome to stay

Families have help with extra costs

Parents and carers as partners in care are kept informed


 - 4 Easy-to-understand information in line with age and understanding
 
 - 5 Take part in decision-making
 
 - 6 Cared for with others of similar age and stage
 
 - 7 Time for play, recreation and education
 
 - 8 Staff trained to know how children and young people work
 
 - 9 Team around the child for continuous care
 
 - 10 The right to understanding, respect and privacy
 

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which children and young people can build confidence and improve their relationship with their health. The workshops run in six-week blocks and at the end, children and young people are encouraged to engage with the youth group at the Edinburgh Children's Hospital Charity Drop-In Centre team (EHCH).

Commenting on the visit, Daniel Rutherford, EHCH, said: *"The visit from the EACH delegation proved to be a welcome opportunity to discuss the rights of children within a hospital context with experienced professionals from a variety of backgrounds across Europe. The visit highlighted the different approaches adopted within various settings and cultural diversities. The Hub service is located at RHSC in Edinburgh and offers a diverse program of group work activities accessible for the whole family, whilst a child or young person is accessing RHSC. The service also offers issue specific group work such as parenting courses and 1-to-1 support for a period of up to six months."*

The Youth Support Coordinator (YSC) Service is integrated into the NHS and funded by Teenage Cancer Trust. Conor Smart, the YSC, provides emotional and practical support to teenagers aged 13-18 on the haematology/oncology ward at RHSC Edinburgh and facilitates groups for young people on and off treatment. As well as providing funded staff posts, the Teenage

Cancer Trust also ensures that young people are given the opportunity to be treated in an age-appropriate environment – which is also part of the EACH Charter. Teenagers have access to a teenage social area and individual rooms to maintain their privacy and access peer support by meeting other young people on the ward who are undergoing treatment. Once they have finished treatment, young people benefit from joining the regular support groups and outings, which are often supported by staff from the ECHC project team.

The visit, arranged by Children's Health Scotland, provided the EACH delegates with the opportunity to meet and share experiences with Simita Kumar, Daniel Rutherford and Conor Smart. Presentations were delivered on each of the three services before delegates received a tour of the Teenage Cancer Trust Unit and ECHC Drop-In Centre.

Commenting on the visit, Gwen Garner, Vice-Chair of Children's Health Scotland and Secretary of the EACH Co-ordinating Committee said: *"The members of the EACH Coordinating Committee were delighted to visit the Royal Hospital for Sick Children, Edinburgh, to hear a presentation on Children's Health Scotland's Self-Management Service and to see the Teenage Cancer Trust's Unit. In addition they enjoyed the time spent at the Edinburgh Children's Hospital Charity Drop in Centre. They told me that it had all been very interesting and worthwhile."*

“Over the past year, as a member of EACH, Children’s Health Scotland has worked towards bringing the EACH Coordinating Committee Meeting to Scotland. This prestigious European event took place in Edinburgh in September 2019 and, of course, involved a visit to the Royal Hospital for Sick Children in Edinburgh.”



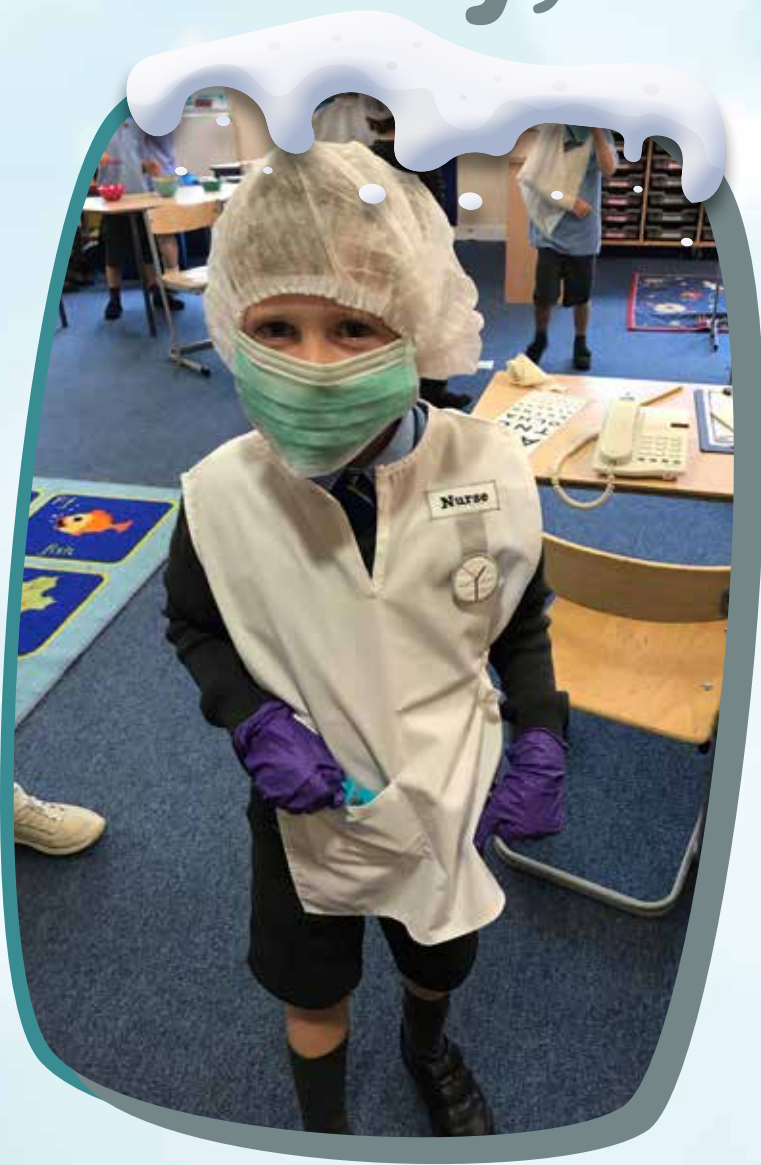
Mummy, Mummy, too

This was the excited exclamation when the children were collected after school.

Miss Cassidy, the teacher of class 2/3 at Merrylee Primary School had asked the Area Coordinator of our Glasgow Health and Wellbeing Service, Dagmar Kerr, to talk to the children during their Wellbeing Week. The visit had been planned in advance and the classroom had been set up as a doctor's surgery, complete with waiting room, reception desk and treatment area. They even had a pharmacy area for "dispensing medicines".

The session started with Dagmar and the children talking about some of the items from our health-related Play Box. The children showed off their knowledge by naming some of the real equipment, like stethoscopes, tweezers, bandages and syringes. They had detailed conversations about what these things were for and how to keep safe – especially if they were ever in a situation where they found a syringe lying around. The children were keen to share their experiences which included vaccinations, accidents, operations and their own or relatives' hospital stays.

The purpose made medical uniforms in the Play Box were particularly popular for the children who volunteered to dress up as a doctor, nurse, paramedic, or theatre staff. After this informative chat, the children were allowed to play in the various areas. Before long they were engrossed in a variety of activities: Some children were "injured" and needed "emergency surgery", while some of them preferred to answer the telephone at the reception desk and others were busy measuring out "medicines".



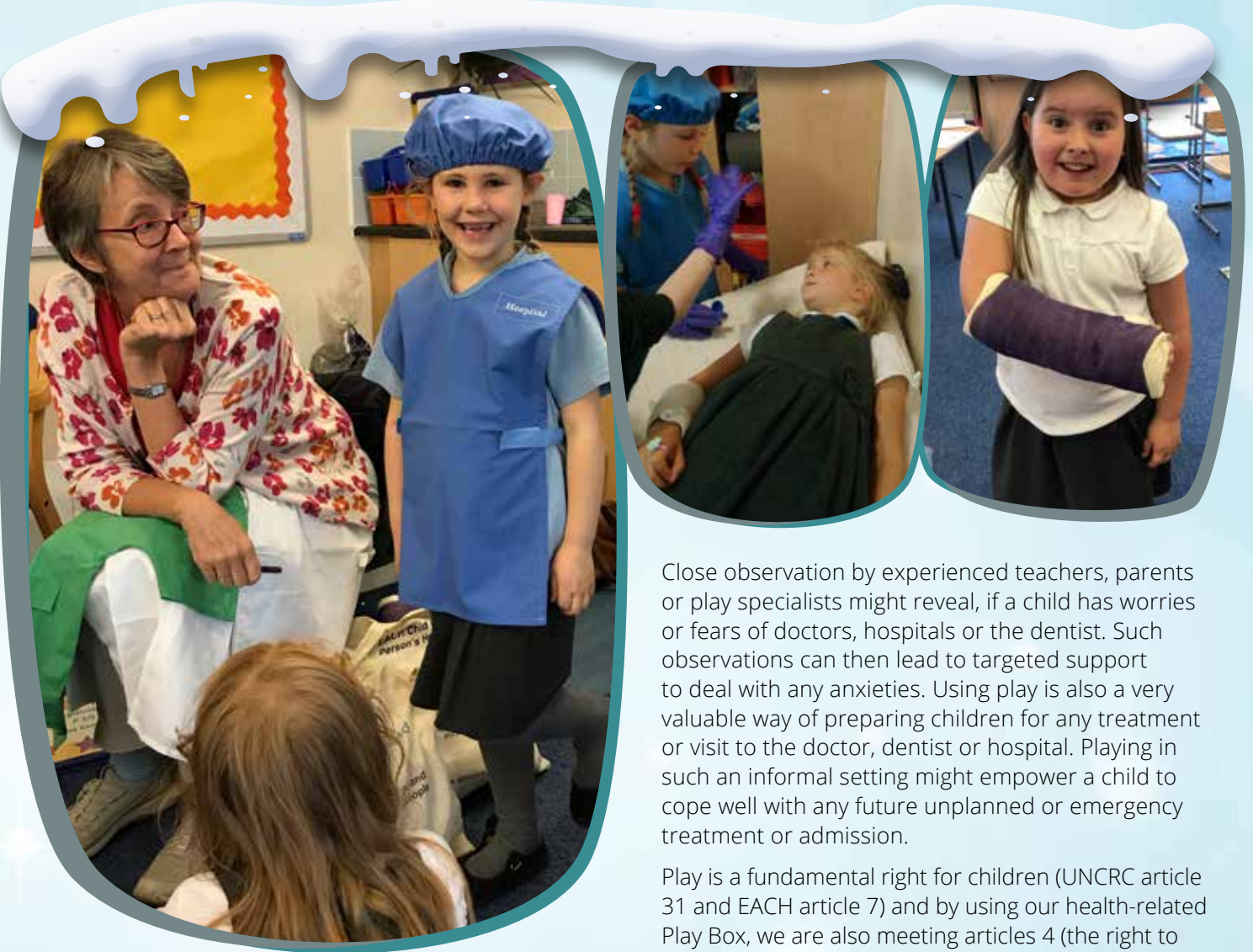
Miss Cassidy said: "Playing with the Play Box helped the children show their knowledge about their bodies and who looks after them within the healthcare system. At the same time, they had great fun and were fully immersed in playing. I was amazed at all the stories the children wanted to tell about their own experiences."

So, was all this just a bit of dressing up fun?

Far from it! Play is a child's way of learning and expressing themselves. On this occasion, the children learned important messages about public health (hygiene, germs, vaccinations), about going to the doctor and how to keep safe in certain situations (syringes). Equally important is the fact that children express their thoughts and/or worries and communicate through play.



Today we were doctors!



Close observation by experienced teachers, parents or play specialists might reveal, if a child has worries or fears of doctors, hospitals or the dentist. Such observations can then lead to targeted support to deal with any anxieties. Using play is also a very valuable way of preparing children for any treatment or visit to the doctor, dentist or hospital. Playing in such an informal setting might empower a child to cope well with any future unplanned or emergency treatment or admission.

Play is a fundamental right for children (UNCRC article 31 and EACH article 7) and by using our health-related Play Box, we are also meeting articles 4 (the right to be informed in an age appropriate manner) and 5 (the right to informed participation).

Time for play, recreation
and education



“ Play is a fundamental right for children (UNCRC article 31 and EACH article 7) and by using our health-related Play Box, we are also meeting articles 4 (the right to be informed in an age appropriate manner) and 5 (the right to informed participation). ”



Launch of new three-year strategy

We have launched a new national three-year 2020-23 Children's Health Strategy. With the identification of five new Key Priority Areas, the strategy firmly focuses on the healthcare needs and rights of all children and young people in Scotland.

On launching the new strategy, Richard Olver, Chair of Children's Health Scotland said: *"This new strategy embodies our hopes and aspirations for the future and describes the role we will play in supporting children's health in Scotland. We listened to many voices to develop this three-year strategy and to deliver it we will work with children, young people, families and key stakeholders, joining forces whenever possible to make changes and improvements that will benefit children and young people in Scotland. The next three-years promise to be both exciting and challenging but with a clear direction of travel, I am confident we will be successful."*

It is the ambition of the Scottish Government for *"Scotland to be the best place in the world to grow up and the best place in the world to bring up children"*. The new 2020-23 strategy launched by Children's Health Scotland is designed to support this high-level aspiration and commenting on its release, Maree Todd MSP, Minister for Children and Young People said:

"The Scottish Government welcomes the support of Children's Health Scotland to deliver our ambition for Scotland to be the best place in the world to grow up. There are some exciting initiatives planned within the Strategy that will make a big difference to the healthcare needs and rights of children and young people and I look forward to working together with those in the sector to make sure children and young people get the best quality healthcare in Scotland."

The five new Key Priority areas identified in the strategy include:



Expertise and Information

Children's Health Scotland will provide children, young people and families with appropriate information to enable them to have equitable access to best quality health services. Acting as experts in the sector, the charity will offer information on the needs and rights of children and young people in hospital and in the community.



Voice

The national charity will be a voice for the healthcare needs and rights of all children and young people.



Improving Life Experiences

To ensure the best possible healthcare is received for children and young people to improve their life experiences, Children's Health Scotland will work together with parents, carers and professionals.



Training and Resources

A range of training and resources will be provided to ensure that children, young people and their families are empowered to identify the needs of children during times of illness.



Health-Related Play

The charity will advocate for health-related play for all children, either in hospital or at home. More than just a chance to have fun, play is serious business when it comes to a child's health and health-related play can help children physically, mentally and emotionally.

"The targets set in the new strategy are ambitious but realistic and will be delivered by experienced and competent staff and volunteers working together to help children and young people and their families get the healthcare and treatment they need," added Helen Forrest, Chief Executive of Children's Health Scotland.



These are a few of our favourite things

Michelle Wilson, our Children's Health and Wellbeing Area Officer based in Tayside shares a little insight into learning through play with our health-related Play Boxes.

Our health-related Play Boxes are a resource filled with a variety of toys, dressing up clothes, books, jigsaws, Drs bags and real medical equipment such as stethoscopes, bandages, and syringes. Whilst I've been out in the community during the past year, I've noticed that just a few of the favourite things that children seem to regularly enjoy include:

- Play hospitals along with the little people who go inside
- Doctor and Nurse puppets
- Big Teeth and Big Toothbrush
- Real X-Rays
- The bear with real teeth.

The Big Teeth and Big Toothbrush are a real firm favourite for children and great for those who are not so keen to brush their own teeth. It is great fun and they love brushing big teeth. We then might move on to brushing the teeth of the bear, which the children always think is funny, and then finally move on to the child brushing their own teeth. Another firm favourite which I am constantly asked to bring along with me when I am out and about is the play hospital with its little patients, nurses and doctors. Children enjoy playing different scenarios and love making up silly voices for the different characters.

Our puppets might look a little old fashioned, but the children always know their job and they are great for those who need to play out something they are a bit anxious about. The puppets allow children to ask a question as someone else. When I visit nurseries the first thing the children always do is have a good look at all the contents of the Play Boxes.



They then take turns at dressing up - becoming a paramedic, dentist, Doctor, nurse, surgeon, or patient. The Drs bags are opened at their "surgeries" and everyone talks about their individual experiences. The visits normally finish with a story and then singing "Miss Polly".

Primary schools often ask for a visit during their health weeks, but they can also request a more topic-based visit. For example, the last primary school I worked with, asked if we could do something on bones as part of their topic. The children loved looking at the real X-Rays and afterwards were divided into pairs. They then drew around each other and filled their outlines with a skeleton, labelling the bones. It was a really fun way to learn more about different kinds of bones.

My car boot always has a Play Box in it! It is an invaluable resource which is used every week and I constantly reinforce the fact that children have a right to health and a right to play (United Nations Convention of the Rights of the Child Article 24 and 31 and Each Charter 7).

The joy in my work is when children learn through play and I see the huge benefit they feel when their understanding develops, and they can then communicate something that was troubling them.

“...and I constantly reinforce the fact that children have a right to health and a right to play (United Nations Convention of the Rights of the Child Article 24 and 31 and Each Charter 7).”



Help us make sure children and young people get the healthcare and treatment they need.

PLEASE DONATE TODAY

MY HEALTH: We offer information and resources and represent and support all children and young people and their families when they need help with their healthcare and the right to it.

MY MIND: We provide workshops for children and young people, some with a range of mental health and chronic conditions, to develop skills and strategies to self-manage their conditions.

MY VOICE: We are a national voice that is dedicated to informing, promoting and campaigning on the healthcare needs and rights of all children and young people.

MY RIGHTS: We exist to raise awareness of the health rights of children and young people.

If you would like to make a donation to help fund our work please send a cheque to the address below or go online at www.childrenshealthscotland.org and click on the donate button.

THANK YOU.

Registered office:

Children's Health Scotland
22 Laurie Street, Edinburgh EH6 7AB

 enquiries@childrenshealthscotland.org

 www.childrenshealthscotland.org



Find us on:



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Voice



Improving Life Experiences



Training and Resources



Health-related Play



Expertise and Information

