

**PE1471/N**

28<sup>th</sup> May 2013



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Andrew Howlett  
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Edinburgh  
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Dear Mr Howlett,

### **RCN Scotland response to petition PE1471 on young people's hospital wards**

Thank you for inviting the Royal College of Nursing to comment on this petition. We strongly support this petition and are very pleased that this issue has been brought before the committee. We have made comments on three areas which we believe to be essential for high quality care to adolescents in hospital: environment of care; the right nursing staff; and the right training for staff.

#### **Environment of care**

Young people with long-term conditions are now more than ever surviving into adulthood. This means that there is an increasing need to consider the environment of care and expertise required to provide high quality services for young people across all healthcare settings, particularly as in-patients.

In children's wards the average age is around 3 years and adult wards the average age is over 70 years. Clearly, teenagers and young adults are unlikely to feel comfortable being cared for in either environment. Young people must be cared for in an environment appropriate to their needs as far as that is possible.

The analysis of a national Young Patient Survey in England reported that young people aged 15 to 17 years were more likely to rate their overall care as excellent if nursed in an adolescent ward rather than in an adult ward. Older adolescents nursed in an adolescent ward were also significantly more likely to report satisfactory information-giving by nurses and involvement in own care and less likely to report being bored or bothered by noise than those nursed in a children's ward (Viner, 2007).

Given the configuration of health services across Scotland, the above arrangement will not be possible in all hospitals, but where dedicated beds for adolescents do not exist, single rooms should be prioritised, and careful thought must be given to meeting the social and emotional needs of young people in single rooms. There may be practical ways of creating a suitable social environment within the wider hospital setting, using different spaces such as a concourse or hospital cafe, and connecting young people to resources within a hospital where their needs can be met e.g. chaplaincy, or volunteers.

NHS Health Scotland developed excellent guidance in 2011 entitled 'Walk the talk' which the RCN jointly endorsed. This work promoted youth friendly health services in Scotland and provides useful guidance for staff when caring for young people in any health care setting (<http://www.walk-the-talk.org.uk/>).

### **The right nursing staff**

Staffing requirements for adolescent services are not clearly defined, but the RCN believes that there are core principles that should be considered when caring for adolescents and young adults:

- Workforce planning should consider the psychosocial needs of adolescents, with the registered workforce consisting of 50 per cent registered children's nurses and 50 per cent registered adult nurses who have knowledge, skills and competence in child and adolescent mental health and in caring for young people where health is compromised by drugs and alcohol
- There must be a clear plan with each young person for transition to a service with appropriate expertise for the individual.

In 2012 the RCN published core competences for nurses caring for children and young people (RCN, 2012). These include all aspects of a child or young person's wellbeing – emotional, mental, physical, social, sexual and spiritual. In addition, the Scottish Government Nursing and Midwifery Workload and Workforce Planning (NMWWP) programme has developed a range of tools to measure workload in order to determine adequate staffing levels. From April 2013 the NMWWP tool for children's and acute adult nursing has been mandatory for use across NHS Scotland.

### **The right training for staff**

In its publication 'Adolescence: boundaries, connections and dilemmas' (2008) the RCN reports the results of a UK survey:

- Of the participants who worked 'all the time' or 'often' with young people, 48% had received no training in adolescent health. Only 21% had completed a specific module in adolescent health (including mental health). 23% listed a range of survey days, and 7% cited on-the-job training or being a parent.
- The lack of adolescent specific training received by some nurses in this survey working regularly with young people is of concern, as was the reported variances in levels of support and supervision.

We have a number of recommendations in relation to training as follows.

Firstly, the RCN's publication Caring for Young People states that:

- All branches of student nurse training should include a framework to equip nurses with the right skills to care for young people.
- In addition, there is a need to provide appropriate levels of specialist post-registration training to enable practitioners to further expand knowledge and skills in this field.

Secondly, in 2011 the RCN set out 'Health care service standards in caring for neonates, children and young people' which include the following:

- Nurses working with young people should be trained in children's nursing with additional training for specialist services or roles.
- Unregistered staff must have completed a course of training specific to the setting, and in the care of young people, and have undergone a period of competence assessment before carrying out care and delegated tasks.
- Where services are provided to children there should be access to a senior children's nurse for advice at all times throughout the 24 hour period. A senior qualified children's nurse is a nurse that holds a children's nursing qualification, and also has a master's degree in an appropriate health/social care related subject, with a minimum of five years' full time experience in uninterrupted clinical practice.
- Children, young people and young adults must receive age appropriate care from an appropriately skilled workforce in appropriate dedicated environments that meet their specific needs.

We hope that our comments are helpful to the committee's consideration of the petition and wish to thank you again for the opportunity to respond.

Yours sincerely,

Theresa Fyffe,  
Director, RCN Scotland

## References

Children and Young People's Health Outcomes Forum (2012) Children and young people's health outcomes strategy: report of the Children and Young People's Health Outcomes Forum, London: DH (Chaired by I. Lewis and C. Lenehan).

Royal College of Nursing (2008) Adolescence: boundaries, connections and dilemmas (An RCN guide for working with young people) London RCN. Available at [www.rcn.org.uk](http://www.rcn.org.uk)

Royal College of Nursing (2011) Health care service standards in caring for neonates, children and young people, London: RCN. Available at [www.rcn.org.uk](http://www.rcn.org.uk)

Royal College of Nursing (2012) RCN competences: core competences for nursing children and young people, London: RCN. Available at [www.rcn.org.uk](http://www.rcn.org.uk)

Viner RM (2007) Do Adolescent Inpatient Wards Make a Difference? Findings From a National Young Patient Survey, Pediatrics Vol. 120 No. 4 October 1, 2007 pp. 749-755