

**Don't box  
me in**



**Young people-friendly services in  
Gateshead and Newcastle**

## About Healthwatch Newcastle and Gateshead

Healthwatch Newcastle and Healthwatch Gateshead are two of 152 local Healthwatch organisations established throughout England on 1 April 2013 under the provisions of the Health and Social Care Act 2012. We are the independent voice and champion of users of a range of NHS services and social care for adults, children, and young people. We have a dual role to champion the rights of users of publicly funded health and social care services for both adults and children, and to hold the system to account for how well it engages with the public.

We collect feedback on services from people of all ages and communities. We do this through our network of voluntary and community sector organisations; during events, drop-in sessions and listening events at a range of venues across Gateshead and Newcastle; online through the feedback centre on our websites; via social media; and from callers to our information and signposting helplines. As part of the remit to gather views, we also have the power to ‘enter and view’ services and conduct announced and unannounced visits.

Author: Healthwatch Gateshead

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# 1. Introduction

During 2019, Healthwatch Gateshead received negative feedback from young people about the way health professionals treated them. They told us their doctor, dentist and/or optician spoke to their parents and not to them and they felt uncomfortable with the health professional's manner. This identified further research to ensure services in Newcastle and Gateshead were young people-friendly in line with the 'You're Welcome'<sup>1</sup> quality criteria set out by the Department of Health and Social Care. The quality criteria provide a systematic framework to help commissioners and service providers to improve the suitability, accessibility, quality, and safety of health services for young people. This is also an issue highlighted nationally by Healthwatch England

We approached Children North East who were involved in the formulation of the survey to discuss the initial feedback and the work we wanted to do. Children North East felt this would support its wider consultation on poverty proofing health settings.

## 2. How we did it

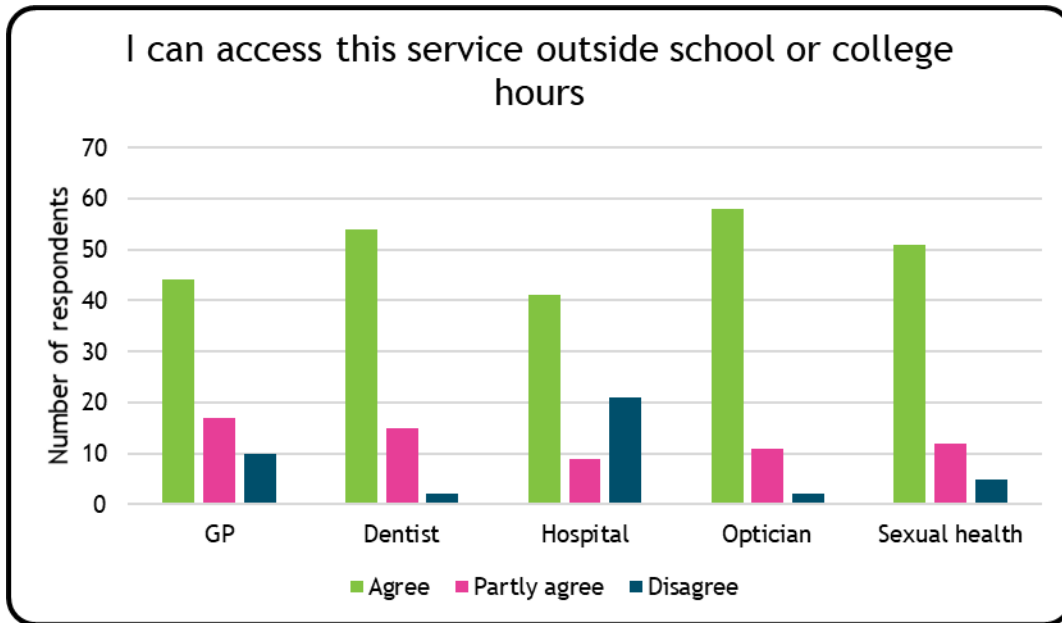
We developed a questionnaire using the 'You're Welcome' criteria and feedback as guidance. The questionnaire was created using an online survey tool (SurveyMonkey) and promoted to young people aged 11 to 20 and their parents through Twitter, Facebook, and Instagram, and via our networks. Under normal circumstances, focus groups would have taken place at young people community groups to gather more qualitative data but due to COVID-19 this could not take place. Despite this, we gathered the views of 71 young people. The results were analysed and circulated to commissioners and service providers and provided Children North East with evidence to support its wider poverty proofing health setting consultation.

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<sup>1</sup> [www.gov.uk/government/publications/quality-criteria-for-young-people-friendly-health-services](https://www.gov.uk/government/publications/quality-criteria-for-young-people-friendly-health-services)

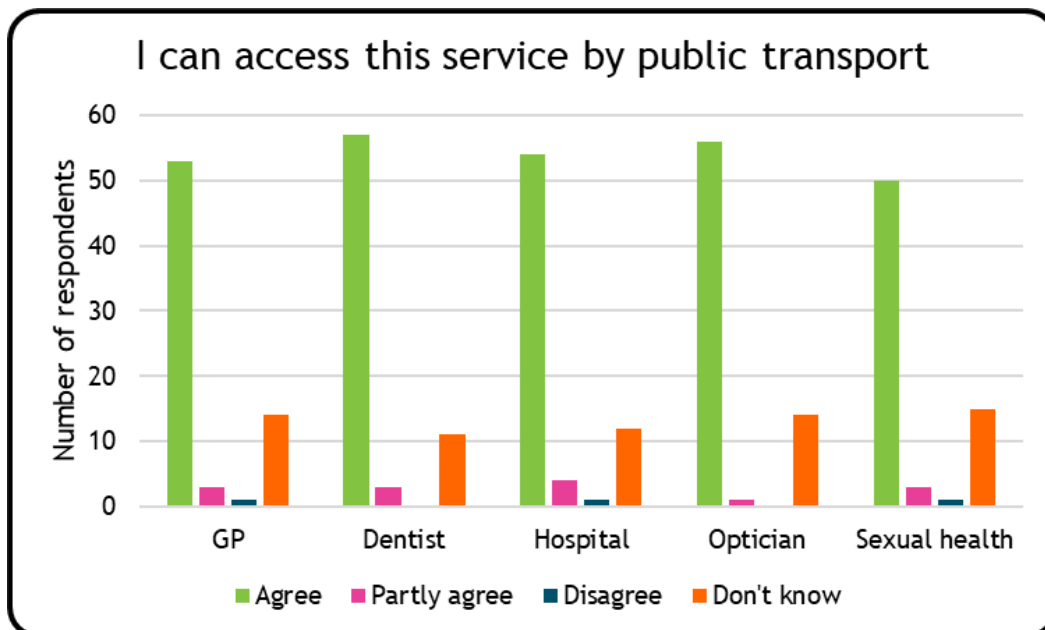
### 3. Results

#### I can access this service outside school or college hours



Out of 71 respondents to this question, opticians and dentists were the most accessible services outside school or college hours - both with 69 (98%) respondents who agreed and partly agreed. This was closely followed by sexual health services with 63 respondents (97%) and 61 respondents agreed or partly agreed this for GP (86%). The least accessible service outside school or college hours was hospitals – only 50 respondents agreed and partly agreed (71%).

#### I can access this service by public transport

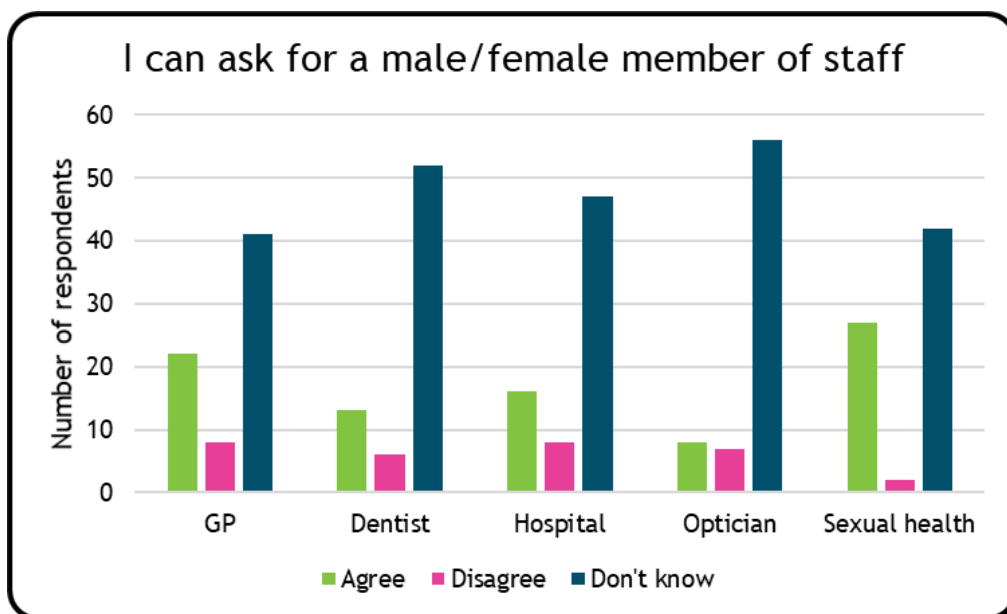


Out of 71 respondents, dentists were the most accessible by public transport – 60 young people agreed or partly agreed (84%). This was closely followed by hospital

services with 58 respondents (81%) who agreed or partly agreed. Opticians and GPs were equally accessible by public transport – 57 respondents who agreed or partly agreed (79%). Sexual health was considered the least accessible service by public transport – 53 respondents (76%) agreed and partly agreed.

However, several respondents did not know how to access services by public transport: sexual health services 15 (22%); GPs and opticians 14 (20%). The majority knew how to access hospitals and dentists via public transport. Only 11 respondents for dentists (16%) and 12 for hospitals (17%) said they did not know. Respondents to our survey were aged between 11 and 20 and this may account for the relative lack of awareness in accessing sexual health services when answering this question.

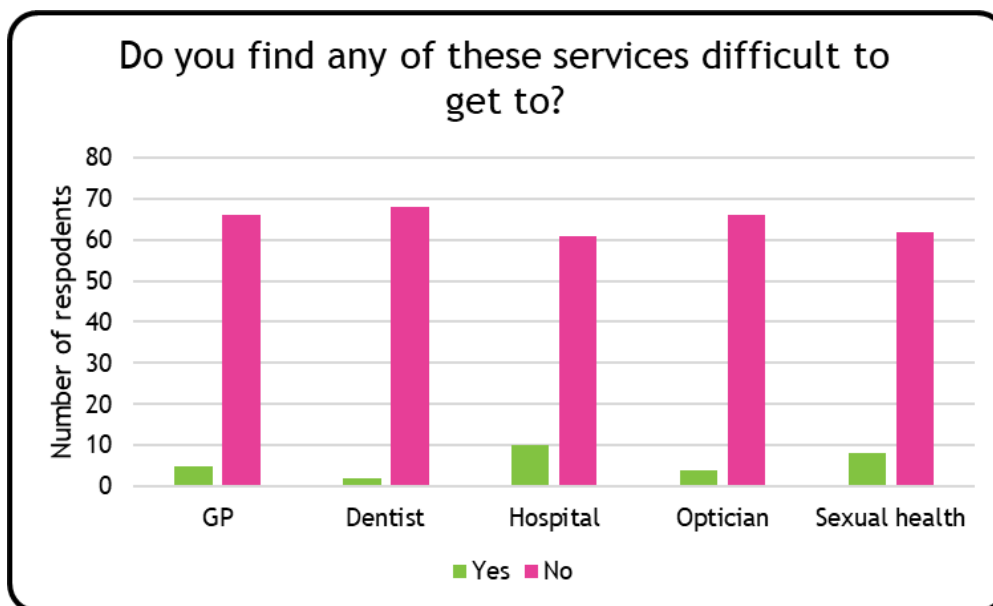
### I can ask for a male/female member of staff



Most young people did not know they could ask for a male/female staff member.

Out of 71 respondents to this question, the highest service was opticians with 56 respondents who did not know (79%). This was closely followed by dentists with 52 respondents (73%). Hospitals also show 47 respondents (66%) did not know they could ask for male/female staff member. This was closely followed by sexual health services - 42 respondents who agreed or partly agreed (59%), and GPs with 41 respondents (58%) However, sexual health services presented the highest number of respondents who agreed they could ask for gendered staff with 27 respondents (38%), closely followed by GP practices with 22 respondents (31%).

## Do you find any of these services difficult to get to?



Out of 70 respondents to this question, a high proportion (68 or 97%) agreed or partly agreed they had no difficulties in getting to dental services. This is followed by opticians and GPs equally with 66 respondents (93%). Hospital services presented to be the most difficult - 10 respondents (14%), closely followed by sexual health services with 8 respondents (12%). However, this is a very small number and could be explained by these services providing care to a wider population.

For those respondents who answered 'yes', we asked what support was needed to access these services. Responses included:

- A young people-friendly map with directions on how to access the service/clinic/department, such as which door and what stop to get off at on public transport to make it less daunting.
- To be given more information leaflets about sexual health services.
- Longer GP opening hours to make them more accessible and reduce two-week wait for an appointment.
- A respondent with a learning disability requires support to access services. Her parents, who work full time, were her only support and this made it difficult to access services.

## Are there health services you need to access but are unable to? Please state the health service and the reason why.

Mental health services were mentioned by respondents as a service they were unable to access. Reasons included the service location being unknown and far to travel to. In addition, one young person stated they were in transition into adult mental health services and had not received any support.

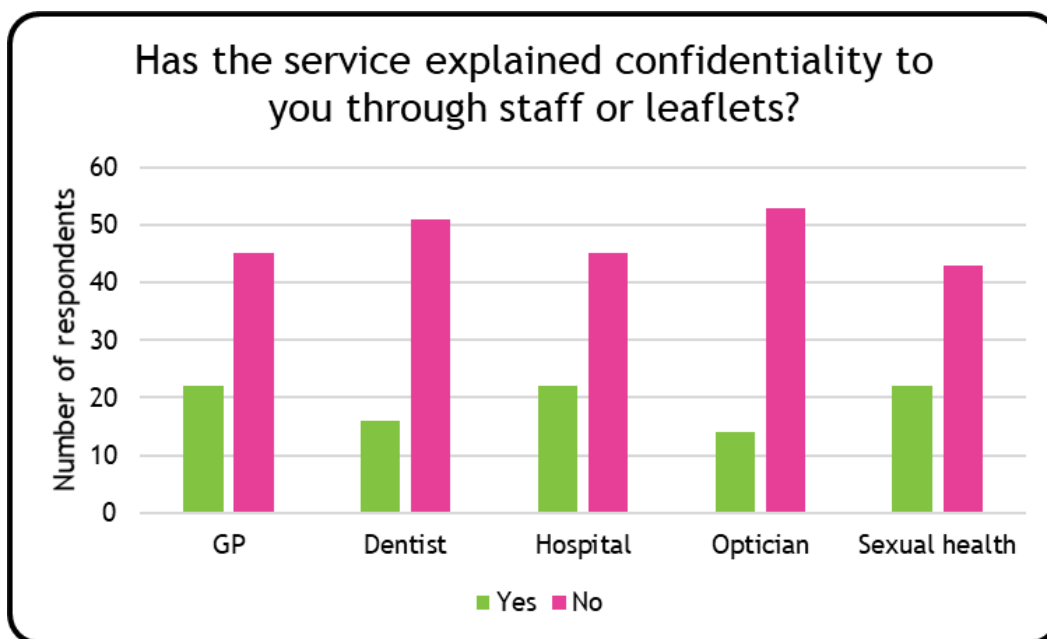
“Mental health services are in weird places, it’s a very private matter and when it’s somewhere you don’t know it’s hard to get the courage to do it.”

Some respondents were unable to access GP services. One mentioned having to cancel appointments as they could not afford the bus fare. Another said that their GP struggled to refer them to services because there was insufficient time during GP appointments.

“The GP struggles in the short appointments to grasp the whole complex picture to refer you to services you need.”

A young carer told us that they struggle to get the time to attend appointments. Another respondent expressed difficulty in accessing appointments due to the availability of an interpreter at services.

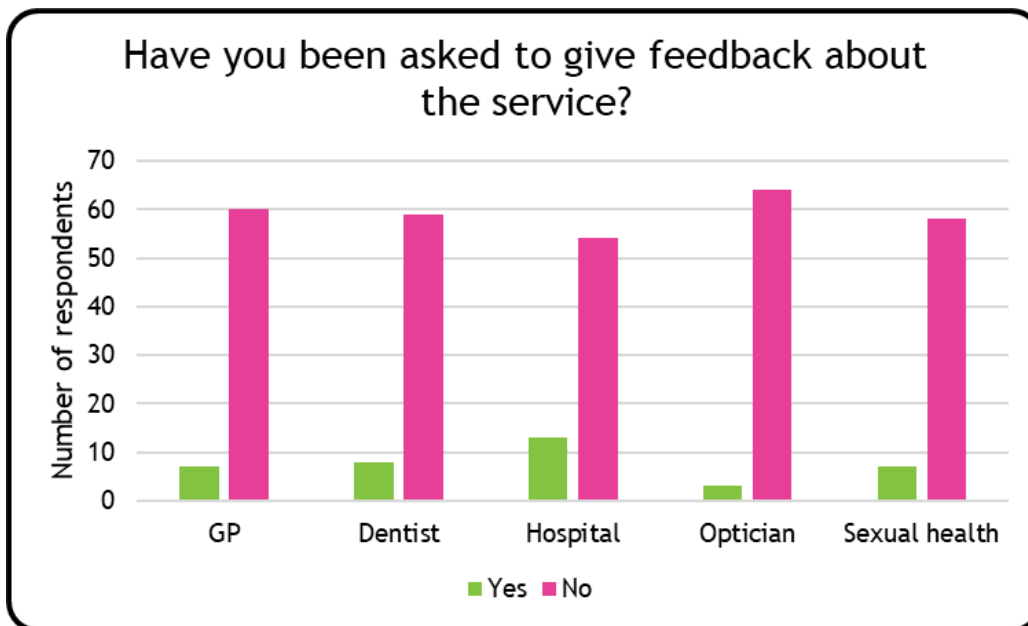
### Has the service explained confidentiality to you through staff or leaflets?



We asked young people if services had explained confidentiality to them and 67 people responded. Opticians were the least likely to explain confidentiality – 53 respondents (79%) which were closely followed by dentists with 51 respondents (76%). This may be due to the nature of the service and treatment they provide. Despite sexual health services having a high rate of respondents who did not have confidentiality explained to them, out of all services they explain confidentiality the most - with 22 respondents (34%). This was followed by GP and hospital services, both with 22 respondents (33%).



## Have you been asked to give feedback about the service?

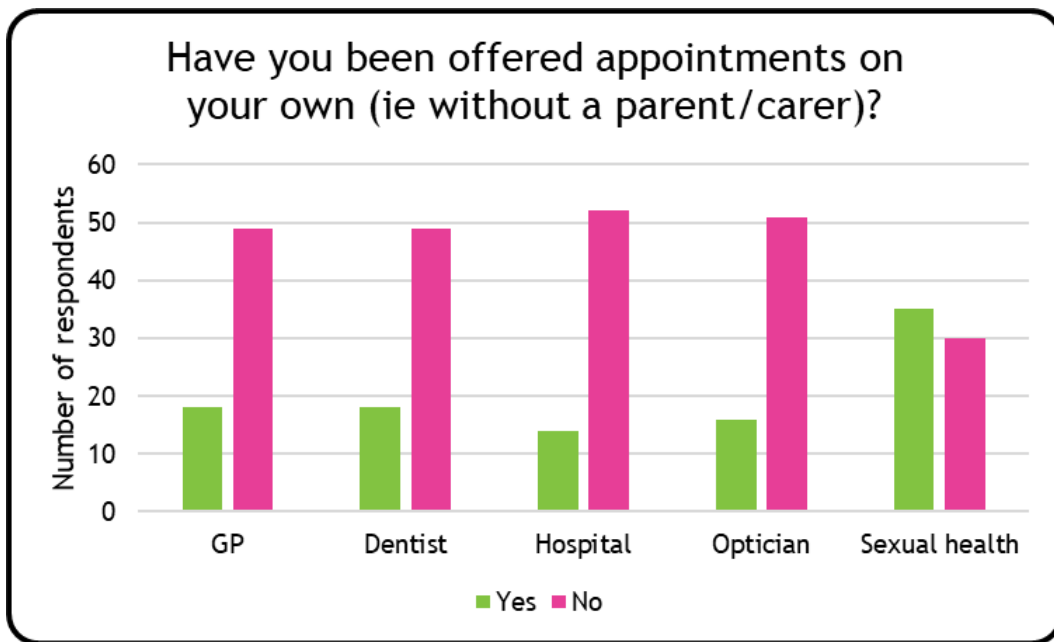


We asked young people if they had been asked to give feedback about services and the vast majority stated 'no'. Out of 71 responses, the service least likely to ask for feedback was opticians with 64 respondents (90%). This was followed by GPs with 60 respondents (84%) stating they had not been asked; closely followed by sexual health services with 58 respondents (81%) and dentists with 59 respondents (83%). It is good to see that hospital services were the highest in asking for feedback from young people with 13 respondents (18%) who answered 'yes' to this question – but this is still however a low number.

Of those who had not been asked for feedback, 44 young people (62%) said they would like to in the future. A few expressed concerns that they did not think they could give feedback.

**“Give young people a greater voice, we are the future and need more credit.”**

## Have you been offered appointments on your own (i.e. without a parent/carer)?

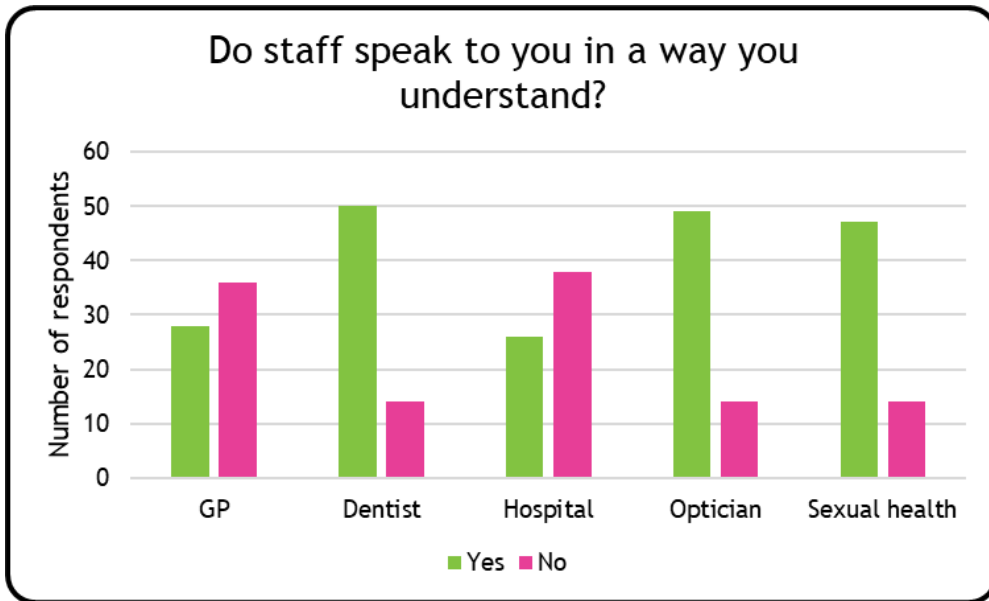


Most young people said they had not been offered young people appointments on their own. Out of 67 respondents, hospitals offered the least lone appointments with 52 respondents (79%). This was closely followed by opticians with 51 respondents (76%). Equally, 49 respondents (73%) had not been offered GP or dental appointments on their own. Sexual health services offered lone appointments to 35 respondents (54%), which is excellent to see but still not a high figure.

Of those who were not offered appointments on their own, 38 young people (54%) said they would like them in the future. A few young people said they did not know they could request an appointment without parents or carers attending.

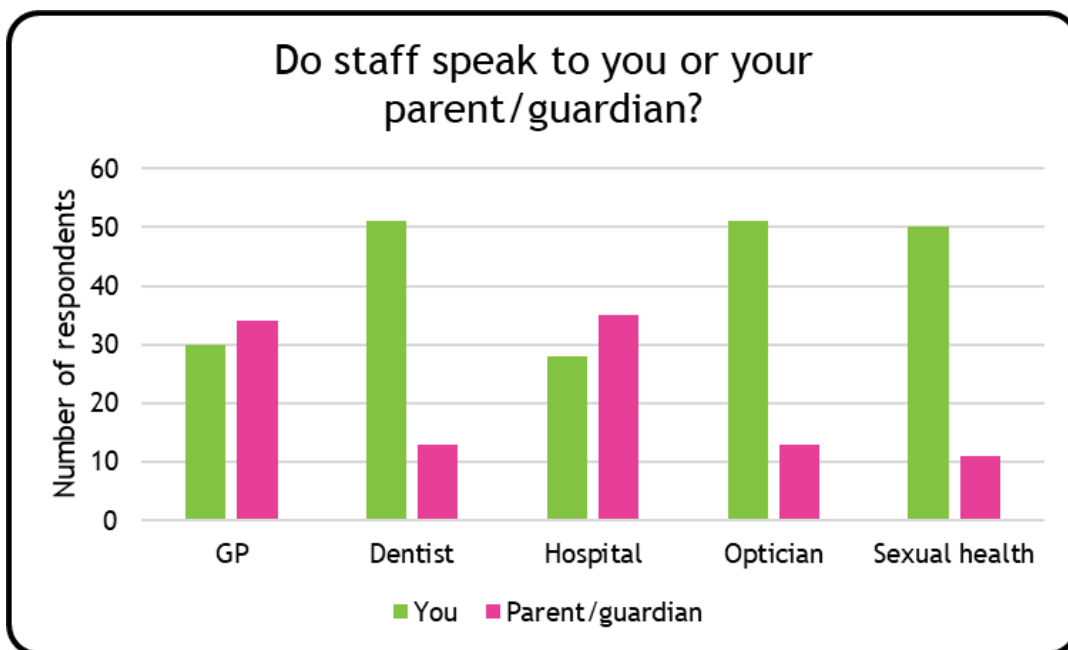
**“It’s our bodies we deserve the right to be seen alone.”**

## Do staff speak to you in a way you understand?



We asked young people if they were able to understand what health professionals were saying to them. Out of 64 respondents, dentists appeared to be the easiest to understand with 50 respondents (78%). This was closely followed by opticians with 49 respondents (77%) and sexual health services with 47 respondents (73%). From our survey results it appears that hospitals and GP staff need to do more to effectively communicate with young people – only 38 respondents (59%) for hospitals and 36 (56%) for GP services said staff spoke to them in a way that they understood.

## Do staff speak to you or your parent/guardian?



When we asked young people if health professionals spoke to them directly or to their parents/guardian, finding most services spoke to respondents directly. Out of 61 responses, 50 (82%) reported sexual health services as the service most likely to speak

to them directly. This was closely followed by opticians and dentists with 51 respondents (80%) each. Hospital services were least likely to speak directly, with 35 respondents stating they spoke to their parent or guardian (56%). In addition, 34 respondents felt they were not spoken to directly by staff at GP services (53%). This links back to question 10s finding, where GP staff were shown to be least understandable.

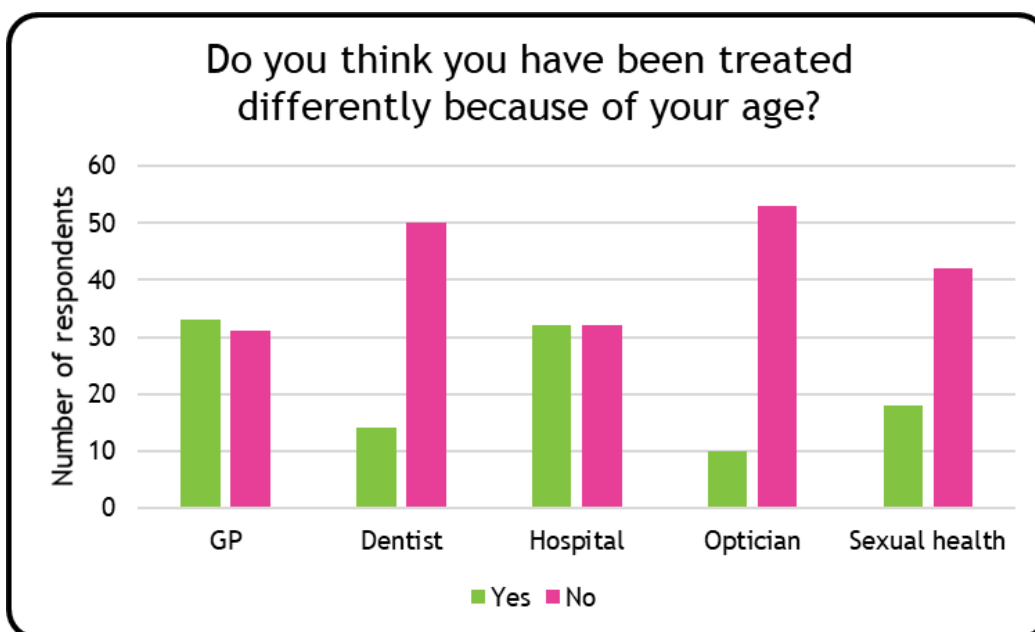
When asked why they thought staff spoke to their parent/guardian, young people raised the following issues:

- Staff think they will not understand what they mean or the terminology.
- Staff impress parents by using language only adults can understand, rather than explain clearly to them personally.
- Parents are translators as they do not discuss needs in young person-friendly way.
- Because they are under 18, staff might think it’s better to give information given directly to their parent/guardian.

“We need doctors who are aware of our whole life and experience, that know how to empower us to be able to speak up and who use different strategies to support our voice in clinic. They shy behind our parents.”

“They think that I won’t understand and that my mam wants to know more than me. I am the person with the illness, I should be the one spoken to!!”

### Do you think you have been treated differently because of your age?



We asked if young people had been treated differently because of their age. Out of 64 respondents, opticians were least likely to treat young people differently, with 53 respondents stating so (84%).

This was followed by dentists with 50 respondents (78%) and sexual health services with 42 respondents (70%). As in questions 10 and 11, respondents thought that GPs and hospitals were most likely to treat young people differently because of their age, with 33 respondents stating they felt this way about GP services (52%) and 32 respondents on hospital services (50%).

For those who answered 'yes', we asked for examples. Some young people mentioned that health professionals assume all young people are obsessed with social media and use that as a reason behind some health problems. Furthermore, they felt health professionals put all young people into one category. One respondent expressed how sexual health services seem to think young people are not sensible.

**“The doctors at GP and hospital seem to put me in this young person category whose obsessed with social media and doesn't go outside.”**

Some also raised they felt patronised and talked down to. A young carer felt patronised when receiving information about their mother's care even though they have looked after her all their life. However, one young person appreciated being treated with extra sympathy as it is what they needed.

**“They need to understand we are young adults not children, we know what's going on.”**

Health professionals treating respondents differently when their parents were in the room was raised as an issue. Several young people stated that doctors patronised them when their parents are there and acted differently when they left.

**“Staff have been lovely to me when my mam or grandma was in the room, and instantly as they've left their tone just changed and they are instantly off or rude with me for no apparent reason but I have severe anxiety so have not attended another on my own since because I've never been so uncomfortable.”**

In addition, respondents stated they were not listened to and ignored when asked questions about their care. They felt that they were spoken to in the third person rather than directly.

**“I feel like a subject matter. I'm being discussed about and not discussed to or with”**

Finally, at hospital a young person said at 16 years old she was being told what was happening, this then changed at 18 where they were told more about procedures and why it was needed. Another young person was told to talk to her mother about contraception at the GP despite being of age.

**“It’s my body, it’s my choice.”**

### **Are there any other ways that these services could be made more young people-friendly?**

When we asked young people what improvements could be made to services, the main themes that emerged were staff and the service environment. Young people told us that services could be more young people-friendly and less intimidating if staff smiled more and if reception staff were friendlier as they are the first point of contact.

Respondents also felt that staff needed to speak to them directly to build trusting relationships with them rather than their parent. They suggested staff training on how to communicate with young people and to consider employing younger staff with similar backgrounds to make them more relatable. The service environment could be improved by having more bright and colourful spaces. Young people also mentioned they would like to be provided with more information online, to be able to make their own decisions and be more responsible for their care.

**“Some people just need to realise we’re all the same it doesn’t matter what ages we are, we shouldn’t be treated differently or looked down on because we’re younger.”**

**“Let us have a choice on options available than leave it to our parents’ decision.”**

**“We need more awareness of what we can do alone.”**

## 4. Key themes from results

### Accessibility

Young people reported that all services were very easy to access, including outside school or college hours and by public transport. Dentists were seen by young people as the easiest to access out of all the services. Dentists and opticians were the most accessible service outside school or college hours, whilst GPs and hospitals were presented to be the least accessible. Dentists were the most accessible service by public transport, whereas sexual health services were said to be the least. However, sexual health services had the most respondents telling us they did not know, suggesting they may have yet to attend sexual health services. Hospitals were the least service where young people did not know how to access by public transport. Dentists appear to be least difficult to get to whereas hospital services displayed to be the most difficult.

Respondents stated services would be easier to access if they were provided with the following:

- A map with directions and more detailed information on public transport.
- More leaflets on sexual health services.
- Longer GP opening hours to get appointments easier, and for those who need the support of parents.

Mental health services were presented as a service young people needed to access but could not due to their unknown location and distance to travel. A young person was also in transition from children to adult services and received no support. GP practices were also mentioned as a service they needed to access but could not due to cost to travel, in addition to not receiving referrals to other services due to short appointments. Young people's needs were also seen to be a result of accessing services, including being a carer and needing an interpreter.

### Patient choice

Most respondents were unaware of their choices as a patient. Our survey suggests that sexual health offer patient choice more often than the other services we looked at. Most respondents did not know they could ask for male or female staff members with the highest being opticians. This was followed by dentists, suggesting this type of service has a lower gender requirement. Sexual health services present the highest number of respondents who knew they could ask for a gender of staff, followed by GP practices.

When asked if respondents had been offered appointments on their own, most respondents answered 'no'. Hospitals offered lone appointments the least often, closely followed by opticians. However, Sexual health services offered lone appointments the most. For those who had not been offered appointments on their own, over half said they would like to in the future.

## Communication

Young people provided a mixed report on communication with health professionals. When asked if they were able to understand what staff were saying to them, dentists were presented as the easiest to understand, closely followed by opticians. However, the least understandable staff were at hospital services, followed by GPs. This correlates to hospital and GP staff presented as the least likely to speak directly to young people. However, most services were reported to speak to young people directly, highest being sexual health.

When we asked respondents to explain why they thought staff spoke to their parent/guardian they raised the following ideas:

- Staff think they will not understand what they mean or the terminology.
- Staff need to impress parents by using complex language.
- Parent acts like a translator because needs are not discussed in a young people- friendly way.
- Staff might think it is better to provide information to the parent/guardian when a person is under 18.

When respondents were asked if they had been treated differently because of their age there was a varied response. Opticians were the most likely to treat young people equally. However, GP and hospitals services were presented as the services most likely to treat young people differently because of their age. When asked for examples, respondents mentioned health professionals putting young people into a category of having a social media obsession, they felt patronised and talked down to, treated differently when parents left the room, not listened to and ignored when asked about care and given filtered information based on age.

## Confidentiality and feedback

An explanation of feedback on the services was not offered to most of the respondents. Opticians were the least likely to explain confidentiality to young people through staff or leaflets, closely followed by dentists. However, sexual health services usually explained confidentiality, closely followed by GP and hospital services. When respondents were asked if they had been asked to give feedback about services, opticians were the least likely to have offered this. Hospitals asked for feedback from the respondents the most often. We asked those who had not been asked to give feedback if they would like to and well over half stated they would.

## Improvements

To ensure young people's voices and ideas are heard, we asked what improvements they thought would make services young people friendly. They suggested the following:



- Services would appear less intimidating if staff smiled more.
- Reception staff should be more friendly as they are the first point of contact.
- Staff should speak to them directly to build trusting relationships with them.
- Staff training in communicating with young people.
- Employ younger staff who have similar backgrounds who they can relate to.
- Bright and colourful spaces within service.
- More online information to be able to make own decisions and have responsibility for own care.

## 5. Recommendations

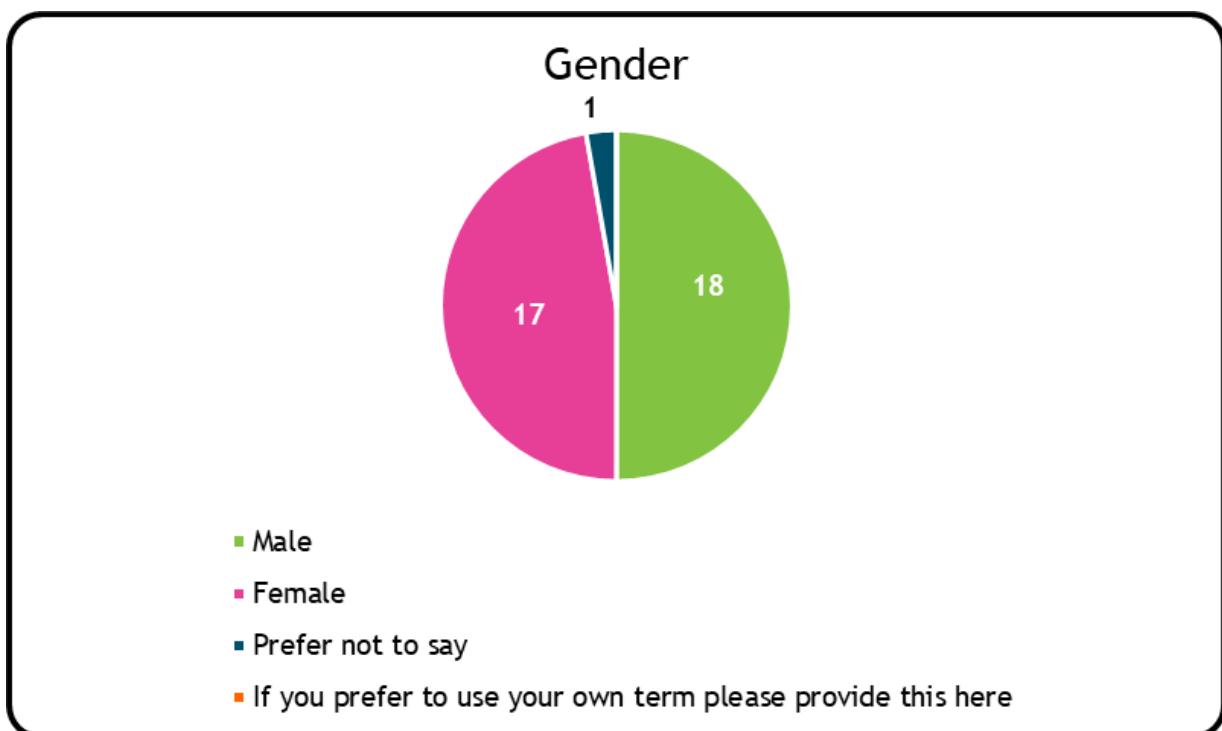
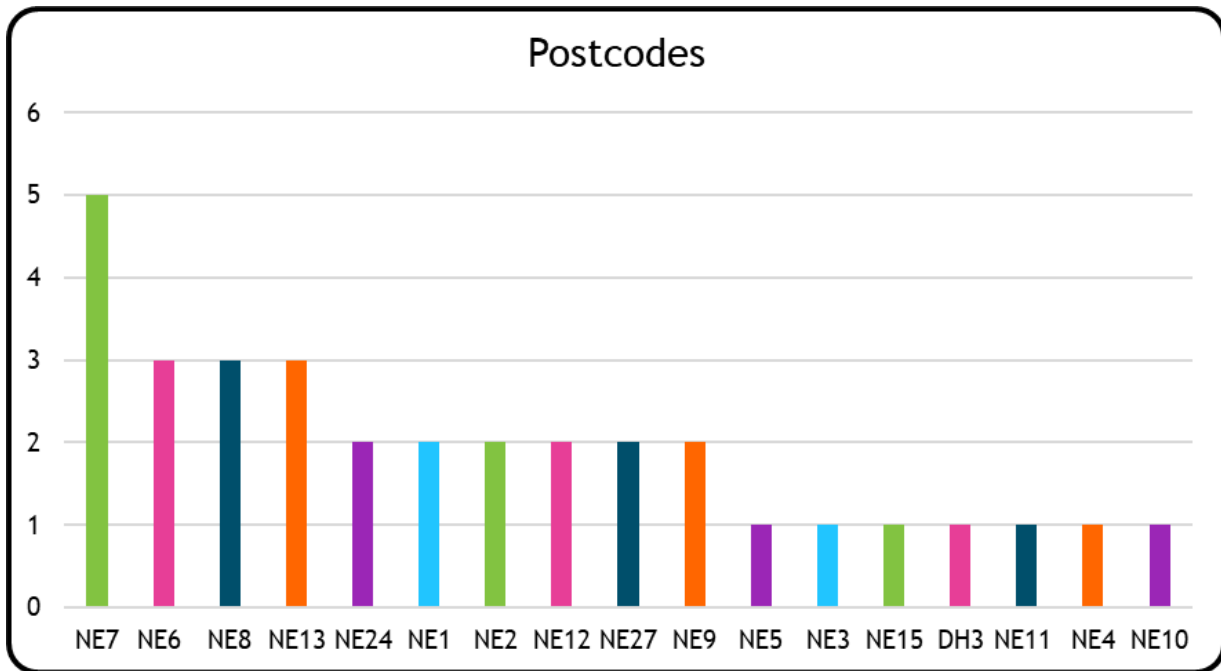
Based on the results and suggestions from young people, we suggest the following recommendations.

1. Hospital services to provide a young people-friendly map on how to access the specific ward/clinic, including more detail of using public transport (i.e. what stop).
2. Raise awareness of what services offer directly through the services and via online information, to ensure young people can make decisions and take responsibility for their own care. This includes choice of staff gender, lone appointments, confidentiality, and feedback gathering.
3. Increase staff training to improve communication skills with young people, to remove assumptions and build trusting relationships. Online training<sup>2</sup> is available
4. Mental health services to consult on how to make their services more accessible for young people.

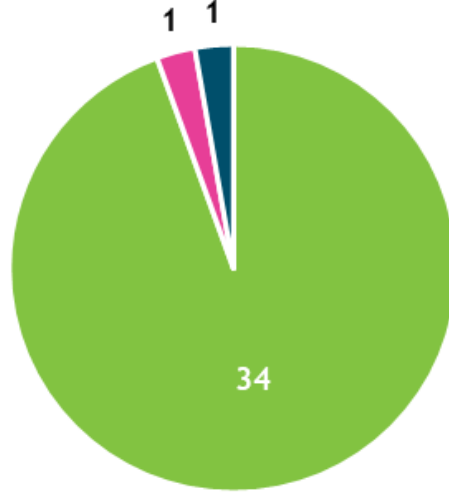
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<sup>2</sup> <https://tinyurl.com/YP-friendly2020>

## Monitoring information

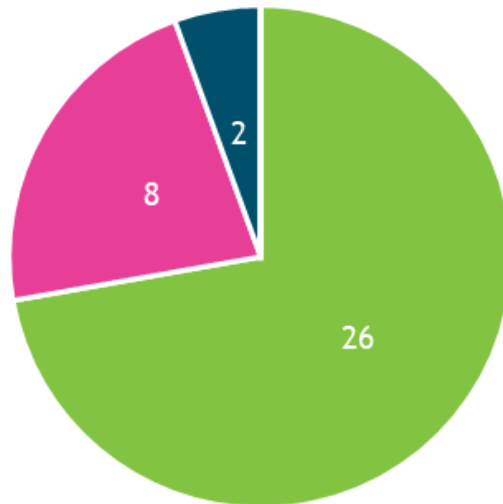


Is your gender identity the same as the gender you were assigned at birth?



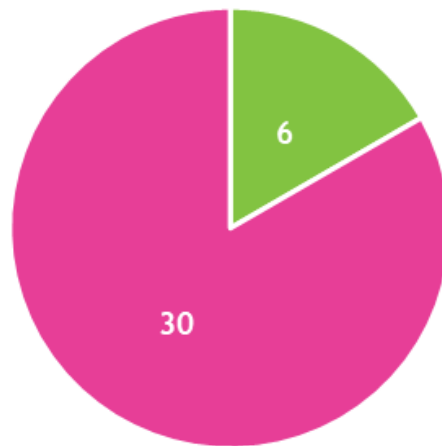
■ Yes ■ No ■ Prefer not to say

Age



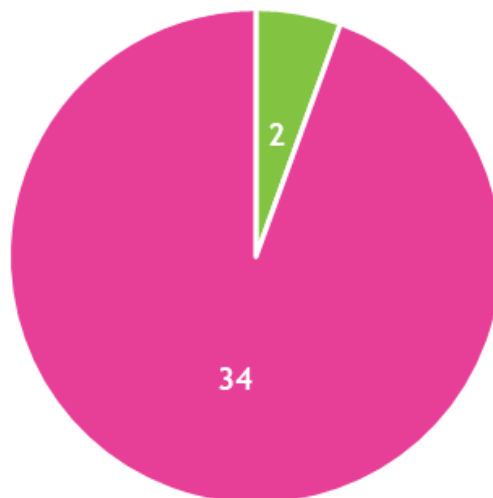
■ 17 and under ■ 18 - 24 ■ 25 - 49 ■ 50 - 64 ■ 65 - 79 ■ 80 +

Do you consider yourself to have a disability?



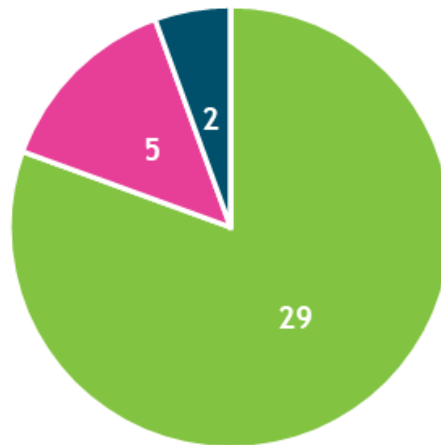
■ Yes ■ No

Are you a carer?



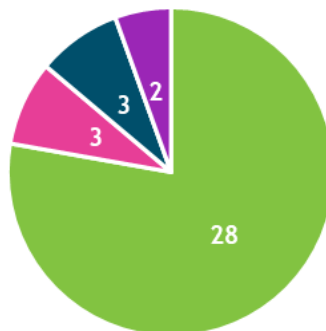
■ Yes ■ No

### Are you?



- A student or in full-time education
- Employment or self-employed
- Not in paid employment
- Retired

### Which of the following best describes how you think of yourself?



- Heterosexual/straight
- Bisexual
- Gay man
- Gay woman/lesbian
- If you prefer to use your own term please provide this here

## Response to the report from Stephanie Cairns, Tyne and Wear Local Optical Committee

Any child under 16 requires a parent or guardian to attend the practice to sign their NHS sight test (GOS) form. This needs to be done before the sight test commences and therefore their parent/guardian would have to accompany them to the appointment. On an occasion when the young person arrives straight from school, the patient will have to wait for their parent/guardian to arrive before commencing. Therefore the reliance on public transport would be dependent on how their parent/guardian arrived for the appointment as well. Many practice websites do give information about directions and transport links. If further help is needed the practice staff would be happy to advise on public transport options.

The GOS sight test does not require feedback from patients as a contractual requirement therefore it would be up to the individual optical practice to choose whether they ask patients for feedback. They would probably not ask any patients for feedback regardless of age. Any CCG commissioned services from primary care opticians do however have feedback requirements built in as a service specification. The two services commissioned in Gateshead and Newcastle would not include the age group surveyed.

While a child can choose to undertake their sight test without a parent/guardian in the room, optometrists must comply with chaperone and lone worker policies as per their NHS contract<sup>3</sup>.

Any patient who attends an optical practice for a clinical appointment can ask for a male or female optometrist. The practice may not have this option available and the patient may choose to attend a different practice if this was the case and the patient really didn't want to see the optometrist available. Everyone is free to do this. People are not registered with an optical practice like they are with GP's and dentists and the nature of our workforce is such that we have a high percentage of female optometrists. A number of practices are small single handed practices with only one regular optometrist owner or have no regular optometrist and therefore rely solely on locum cover and the availability of locum optometrists at the time.

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<sup>3</sup> [www.loc-net.org.uk/media/1751/joint\\_advice\\_on\\_chaperoning\\_policy.pdf](http://www.loc-net.org.uk/media/1751/joint_advice_on_chaperoning_policy.pdf)

## Contact details



Healthwatch Newcastle  
MEA House, Ellison Place  
Newcastle upon Tyne, NE1 8XS

Healthwatch Gateshead  
MEA House, Ellison Place  
Newcastle upon Tyne, NE1 8XS



0191 338 5720

0191 477 0033



07551 052 751

07535 877 831



info@healthwatchnewcastle.org.uk

info@healthwatchgateshead.co.uk



www.healthwatchnewcastle.org.uk

<https://healthwatchgateshead.co.uk>



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