NHS England and the British Youth Council
Bitesize guide to setting up a Youth Forum in Health Services across England
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This guide provides some good practice and practical tips on how to set up a youth forum to support involvement in NHS activity. It contains some useful case studies to illustrate different approaches.

## Document Details

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## Document Status

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1 Introduction

The past decade has seen a significant commitment by local authorities to actively involve young people in local democracy and decision-making in order to develop and improve local services, while encouraging a greater sense of ownership amongst young people and giving them a real stake in their community.

NHS services have also recognised the importance of involving children and young people and are using similar mechanisms to consult them and embed them in their decision-making processes.

The NHS England in partnership with the British Youth Council have come together to produce this guide to help support healthcare professionals who wish to set up youth forums to develop and improve their health services.

The guide uses a number of excellent case studies within the guide to demonstrate how youth forums can be effectively used across a range of health care services to involve children and young people in service development and improvement.

Youth forums give young people the chance to discuss relevant issues, engage with decision makers and contribute to improving the lives of young people within their communities. There are currently over 620 youth councils/youth forums active across the UK, working with all levels of local government including Parish and Community Councils as well as Unitary Authorities, Borough and County Councils.

NHS England is committed to working and engaging with patients, carers and the public in a wide range of ways. Ensuring that the views of the people are heard at all levels and across all parts of the healthcare system to create and deliver better health and care services. In particular, NHS England is working hard to develop approaches and networks to ensure that people’s input can be sought, heard and acted on. We are determined to ensure that voices of the people are at the heart of transforming healthcare services.

As well as helping to support healthcare professionals at a local level to involve children and young people, NHS England have also set up a National Youth Forum to work with a diverse range of young people to improve services and to seek advice from the young people about national programmes of work in the NHS. The national Youth Forum was launched in March 2014. Further details about the forum can be found here http://www.england.nhs.uk/ourwork/patients/public-voice/yth-for/

Promoting equality and addressing health inequalities are at the heart of NHS England’s values. The development of a youth forum should include

- Giving due regard to the need to eliminate discrimination, harassment and victimisation, to advance equality of opportunity, and to foster good relations between people who share a relevant protected characteristic (as cited under the Equality Act 2010) and those who do not share it; and
- Giving regard to the need to reduce inequalities between patients in access to, and outcomes from healthcare services and to ensure services are provided in an integrated way where this might reduce health inequalities.

2 What is a Youth Forum and why have one?

For the purpose of this guide we use the terms health service to represent a range of services including: GP surgeries, CCGs, Hospitals, Health Trusts etc. and youth forum to represent Advisory Group, Participation Group, Young Patient Forum etc.

A youth forum is run and developed by young people for young people. Youth forums exist to represent the views of young people, giving young people the opportunity to have a voice, discuss issues, engage with decision makers and contribute to improving and developing services for young people.

There are numerous benefits of involving children and young people in your services, in particular it can:

- Ensure that you are providing services that children and young people want and in turn make better use of resources, leading to more efficient services.

- Bring fresh new perspectives and ways of looking and thinking about a whole range of issues. Children and young people can question things that others may simply take for granted and can offer new solutions to old problems.

- Help children and young develop new skills, knowledge and increases self-esteem as well as giving them a sense of citizenship.

Nobody knows about the issues affecting young people better than young people themselves.

However, in addition to this, legislation has also been put in place to ensure that children and young people have the right to have their views heard.

- The Health and Social Care Act 2012 indicates in section 13Q and section 14Z2 that the NHS has a duty to involve service users and the public in service changes, this includes children and young people.
- The Equality Act and public sector equality duty (PSED) aim to ensure there is no age discrimination.
- The UN Convention on the Rights of the Child (UNCRC) Article 12, was ratified by the British Government in 1991 and enshrines that:

  ‘State parties shall assure to the child who is capable of forming his or her own views the right to express those views freely in all matters affecting the child, the views of the child being given due weight in accordance with the
The UN Convention of the Rights of the Child (UNCRC) Article 12.

Youth forums are seen as an effective mechanism for children and young people not only to get their views heard, but also be involved in delivering improvements to health services.

3 Getting started and setting up a Youth Forum

3.1 Forming a steering group

It is essential to involve diverse young people from the very beginning; a successful way of doing this is to form a small steering group of enthusiastic young people to work with while the initial groundwork is being done. Handing a pre-existing youth forum over to the young people will not be effective, young people need to be involved from the beginning and need to be able to shape the development of the forum.

3.2 Defining the role of the Youth Forum

It is vital from very early on to work together with the small steering group of enthusiastic and diverse young people to define the remit of the youth forum. The small steering group of children and young people, with the aid of a support worker can begin to scope out exactly what the forum should do, its responsibilities and boundaries.

A good starting point would be to establish some key aims and objectives. As the youth forum progresses and matures, additional responsibilities and objectives can be assumed.

It is also important at this stage to decide whether the forum will have a budget and if so how much and how it will be administered.

Case study – Southampton Children’s Hospital - forming a Youth Partnership from the very beginning

Southampton Children’s Hospital is in the process of launching their new Youth Partnership, in conjunction with their youth members and play team.

They are keen to involve young people between the ages of 10-18 and will formally elect a representative committee. The young people will be supported by the communications team, the matron lead for children and young people involvement and the play team.

They will meet monthly and will be engaged through social media too. They have already identified some key areas of work through an engagement day that they held with children and young people and will be focusing on making improvements around communication, food and dignity.
3.3 Formalising the Youth Forum

One of the key activities for the children and young people's steering group will be to consider who will be involved in the youth forum and how they will be recruited, selected or elected.

As part of this work, the steering group will need to think about the total number of young people to be involved, what kind of structure would be effective in the health setting and what age ranges to include.

It is important that a formalised structure, terms of reference or even a constitution for the youth forum is established, even if in practice the working of the forum is informal.

A formalised forum structure or terms of reference and holding meetings with a formal agenda ensures that meetings reach some positive and constructive conclusions. It will also enable everyone to put forward their case and take part in discussions.

It will also show the young people that often it is necessary to put forward reasoned arguments and to prepare convincing cases in order to get their opinions heard and acted upon.

In addition to this, formal structures enable the forum to apply for external grants to spend on projects and programmes.

The young people themselves should decide on the structure or terms of reference that they want to create with advice and guidance from the support worker. For example, they may want to elect a Chair to help lead the group and to chair their meetings and/or elect working sub-groups to focus on specific issues.

To avoid barriers to participation, the young people should also think about where and when they would like to hold their meetings. For example the venue should be somewhere that has good transport links and is fully accessible for young disabled people. Depending on your service there may be other health related issues to consider.

Case Study - Chilypep and STAMP (Support, Think, Act, Motivate, Participate) young people's group in Sheffield working to improve mental health and emotional wellbeing

STAMP (Support, Think, Act, Motivate, Participate) is a group of young people aged 14-25 working to improve the mental health and emotional wellbeing of young people in Sheffield. They do this by getting the message about mental health ‘out there’, through their STAMP Out Stigma campaign, challenging discrimination around mental health, and campaigning for change to make things better for other young people.

STAMP was initially set up by Chilypep (an independent charity in Sheffield).
STAMP has a core membership of approximately 16 young people. STAMP carry out regular consultations with other young people in the City to ensure they represent young people’s views. They feed into structures in the City, such as UK Youth Parliament, Sheffield Youth Cabinet, Young Healthwatch, and Decision-Making bodies, such as mental health and emotional wellbeing strategy boards.

The young people are fully involved in agreeing the purpose, objectives, meeting times, processes, delivery, how they want to be involved and how their work is evaluated.

STAMP has an open recruitment process and young people can self-refer. As STAMP uses a peer advocacy model young people in STAMP act as advocates and representatives for other young people around mental health. All STAMP members therefore have personal experience around mental health, or a passion for improving mental health support and systems for other young people.

STAMP meet every Monday evening, and also take part in additional ad-hoc events. They are supported by Chilypep’s Participation Coordinator and Project Worker, who organize and facilitate the weekly sessions. These workers also design bespoke training packages to enable young people to develop the skills and knowledge they identify as needed for their project to succeed.

STAMP is a youth-led project, and as such, they steer the agenda, and have responsibility for their own budget, deciding how this is spent and taking part in annual planning for the project. This allows young people to decide what they want to focus on and puts them in the driving seat of the project.

STAMP have had many successes but below are two examples which show how they have been able to improve services for young people and work to tackle stigma and raise awareness amongst other young people around mental health.

**STAMP ‘Dare you Share?’**

A fantastic achievement of STAMPs was the creation of ‘Dare you Share?’ a board game that promotes discussions amongst young people around mental health. Based on a theme park to symbolise life’s ups and downs, young people work their way round rides such as ‘hall of mirrors’, ‘food court’, or stigma standpoints, where they can explore and discuss mental health in a creative and thought provoking way. This is a great resource when working with young people in youth or school settings.

**You’re Welcome in CAMHS (Children’s and Adult Mental Health Services)**

STAMP work closely with CAMHS (Children’s and Adult Mental Health Services) to look at how the service can better meet the needs of children and young people.

They have worked very hard to implement ‘You’re Welcome’ standards into two of the Sheffield CAMHS teams at both Centenary House and Becton. The ‘You’re Welcome’ standards are a set of standards developed by the Department of Health to make services more young people friendly.
To carry out this piece of work STAMP recruited young people to act as Young Evaluators: Young people received interactive training around service evaluation, before breaking down the standards and coming up with their own methods to assess CAMHS. This included interviewing staff, children and young people, and parents and carers, ‘mental health orienteering’, site visits, and the collection and review of CAMHS information. Following the evaluation STAMP collated their findings into a report with key recommendations that they are now helping CAMHS to implement.

3.4 Establishing meaningful opportunities to influence decision-making

It is important to establish meaningful opportunities to influence decision-making and it is good practice to establish some kind of protocol so that the youth forum can easily and effectively feed into the general workings of the health service as a whole.

This protocol should be agreed with senior managers in the health service, to help ensure that the young people’s ideas and opinions are taken seriously and so that they have some real power and influence.

Initially this work will need to be facilitated by the support/health workers but can be done in conjunction with the young people themselves.

Case Study Alder Hey Children’s Hospital – Children and Parents Forum

Investing in Children and Alder Hey Children’s Hospital have been working in partnership since 2008 to ensure that patients have a voice and are able to influence change within the hospital. The Forum is a group of young people who care about Alder Hey, and a lot of them have been patients at the hospital.

The forum meets once every six weeks for workshops, and to talk about hospital issues. The Forum has access to key members of staff and are able to ask questions, put forward ideas and give their opinions.

The Alder Hey Hospital management team have embraced a Membership Award Scheme developed by Investing in Children – which recognises and celebrates examples of imaginative practice with children and young people. (It is a quality assurance mark validated by children and young people themselves). In 2013, 27 projects/departments, within Alder Hey Hospital, achieved the Investing in Children Membership Award.

The Cardiac Unit listened to the young people about lifestyle issues that may affect them, as they get older and the support that they might receive when they transfer to adult services. The staff responded by setting up young person’s clinics, aimed at 14-16 and 16-18 year olds. The clinics are nurse-led and two clinics take place every month, responding to the educational needs of the young people.
3.5 Recruiting young people to the Youth Forum

It is important to have an inclusive and diverse membership that reflects the service users. A range of methods should be used to recruit young people into the group, there may already young people involved in the service that would like to get involved, but it is also important to reach out more widely to other young people so that the forum as near as possible can reflect the diversity of the users of the services.

The materials produced to recruit young people, whether that is a leaflet, fliers, posters and even adverts should also be developed by the young people on the steering group. The materials should use language that is young people friendly and should not contain jargon or acronyms.

When recruiting young people it is important to consider where the materials should be available. For example you may want to make the recruitment materials available in the following places:

- Health service settings, such as GP surgeries and hospital departments
- Schools and colleges
- Places of entertainment such as cinemas, sports centres, cafes or shopping centres
- Voluntary organisations
- Local Authority support services.

Some locations should also build in the opportunity for face-to-face contact with the young people on the steering group, so that they can talk to other young people about what is involved and how they can get involved.

Additionally, there ways to ensure that the diverse views of the young people are heard. Young people on the forum can consult more widely with other young service users to gauge their views on particular issues and will therefore be able to represent their views. It is also useful to consider using social media to reach young people, which might also involve setting up a Facebook group page or a twitter feed.

Case Study - T1KZ (Type 1 Kids) children and young people’s group in County Durham

The T1KZ group is run by and for children and young people with Type 1 Diabetes and is supported by Investing in Children.

It was initially set up to support children and young people to have their say in their medical care and service provided by the Paediatric Diabetes Team in County Durham and Darlington.

However in response to comments by children and young people they began working on a peer-mentoring programme, which was designed to provide a forum for in depth discussion between peers, sharing their views on living with diabetes and supporting them to be in control of their diabetes. The programme was so successful that Diabetes UK got involved to help sustain the programme.
Currently the group has 25 children and young people involved and they meet every second Saturday of the month, providing vital peer support, both to children, young people and their families. The group is still supported by the Paediatric Diabetes Team for County Durham and the Darlington Foundation Trust.

The Diabetes Group was also responsible for the introduction of insulin pumps for children, which have subsequently been recommended nationally by NICE. The group has developed guidance for schools and made improvements to the local clinics.

There is also a collaborative commitment to develop more T1KZ groups in Newcastle, Northumberland and Gateshead.

Case Study - The Royal College of Paediatrics and Child Health (RCPCH) – Youth Advisory Panel (YAP)

The Youth Advisory Panel gives children and young people the opportunity to contribute to College’s work in a safe, meaningful and ethical way. The panel comprises of young people from all four nations aged between 12-25 years. Backgrounds vary from those with direct patient experience, those with an interest in healthcare for children and young people as well as members that have advocated on various public health issues in other youth forums.

They operate an open recruitment process through various channels including recruiting children and young people through schools. Those that are interested are asked to complete a short application form and those that are selected are invited to attend a training day. They are provided with support for every opportunity they get involved in and an on-going training programme is being developed to support their needs.

The panel meet quarterly to discuss and agree on areas of work. They have worked across a number of issues, including speaking about mental illness at conferences, presented on their experiences at breakfast policy briefings, written to parliamentarians, commented on reports and added their voices by taking part in forums, debates, blogs and reviews of services.

Recently the RCPCH Youth Advisory Panel was invited to participate in the Children and young people’s health outcomes forum Annual Summit. The two-day summit was focused around ‘how do we improve health outcomes for children and young people: reflections on work to date and the future work programme’.

The panel were instrumental in formulating some questions around key priorities, they wanted to accelerate improvements in the areas of transition, emergency care and better facilities for teenage patients in hospitals.

The panel produces a blog and podcasts in order to share their work more widely.
3.6 The first meeting of new recruits

The first meeting should be fairly informal and be led by the young people on the steering group. The young people on the steering group should provide the newly recruited young people with an overview of the youth forum its aims and objectives and what is expected of the young people and how they will be able to influence decision making within the service.

It is after this meeting that the steering group should be disbanded and the youth forum officially established. (Of course many of those young people involved in the steering group, will continue to be involved in the youth forum).

3.7 Inducting young people

Once young people have been recruited to the forum, it is important to make sure that they are fully engaged and can make a positive impact. This will involve a well-planned induction process, which includes training and recognition of the work they do.

The induction should give the children and young people all the information they need as well as a chance to understand what is expected of them and to build effective working relationships with each other.

Case study – Young Health Champions Project – Shropshire Clinical Commissioning Group

In May 2013, Shropshire CCG agreed to work in partnership with the Altogether Better who successfully secured funding from the Big Lottery for the purpose of developing ‘Young Health Champions’.

Building on Altogether Better’s evidenced based volunteer community health champion approach, Shropshire prototyped a way of working which has delivered transformational change in the relationship between children and young people with health and social care service providers and commissioners. This has led to a range of solutions for improving health and wellbeing outcomes for children and young people.

There are currently 147 Young Health Champions and there are plans are to extend the project beyond the Big Lottery Funding (May 2015) until 2017 in the first instance and see a total of 500 young people trained as health champions.

The young health champions are able to feed back their views in a range of ways:

- Working directly with professionals in the health and care services
- Through presentations to Boards
- Using creative methods such as film, art and drama
- Conversation
- Workshops
- Through advocates
The initial support is the training the young health champions receive which is delivered over two full days. This increases their confidence to feel able to engage from a position of knowledge and understanding. The training is delivered by a team of youth workers.

Through the training they gain a greater understanding of what is important to their health and to the health of the wider communities.

Following training they are able to engage in existing projects and opportunities but are encouraged to use this experience to eventually design and lead their own projects based on their interests.

An example of this can be seen through a piece of work which looked at a local hospital’s women and children’s unit which had a vibrant young children’s room but a very plain and dull space for teenagers. A group of health champions completely redesigned the room, working up mood boards and scale drawings which they presented to hospital. The plans were given the go ahead and the young health champions remained closely involved, using their energy and enthusiasm to engage local companies to support the project. Not only did the young people get the room they wanted, but it was a significantly lower cost than had it been driven by the usual procurement processes.

3.8 The first meeting of the Youth Forum

It will take a while for the children and young people to get into the swing of things and depending on their ages this is the time where they may need quite a lot of support.

This is also the time where elections for the Chair and other key roles maybe held. The young people may decide to develop further or adopt the forum’s terms of reference and any protocols that have been agreed with the health services providers.

The young people can set the agenda for the next meeting and discuss some of the issues that they would like to focus on going forward.

During this first meeting, it will be important to ensure that all the young people are engaged and feel able to contribute to discussions. The first meeting sets the tone and starts to develop the culture of the youth forum, so it is important to encourage involvement, respect and valuing young people’s views.

The first meeting can be quite daunting and a major milestone in the forums existence so a celebration after the meeting might also be appropriate.
4 Supporting a Youth Forum

4.1 Facilitating meaningful opportunities to influence decision-making

It is essential that during the development phase the groundwork is done in terms of getting the support of the adults working in the health service, so that the children and young people are able to make a real difference to the work of the service and that their voices and opinions are not only heard but also acted upon.

Case Study – South Tyne and Wear GP Practices – Teen Talk

Investing in Children worked in partnership with South Tyne and Wear Primary Care Trust in 2011 with local area GP’s to identify areas for improvement and to develop a young patient involvement group. Agenda Days (adult free spaces) were held where the views of young people were gathered and from this a young people’s focus group was formed.

It became very apparent that the information children and young people have about GP’s, healthcare, their rights and what access they can have to independent GP appointments was both inaccurate and patchy. The young people identified PSHE lessons in schools as a time when they receive information about health related issues. They agreed that these sessions should be more structured; focus on a range of health related issues and should be delivered by a health professional.

From the group meetings action was taken by the GP practices, to address the issues raised in three ways:

1. Improvements and changes in the GP practices
2. A staff development sessions for the GP’s, Practice Nurses, Practice Managers, healthcare assistants and admin staff
3. PSHE sessions to be delivered in local schools with a GP.

Alongside young people who formed the ‘Teen Talk’ group and a project worker from Investing in Children, the healthcare professionals delivered sessions in PSHE sessions in local secondary schools.

The work undertaken by the Teen Talk group, resulted in a positive change in the Washington Galleries Surgeries, the young people were invited to talk about the project and their experiences and to share the good practice in health with University students and lecturers at Sunderland University. The need to promote health messages and information for young people is also now being taken seriously and interest from local councilors has meant that the Teen Talk group were involved in designing subway murals with key health messages.

4.2 Providing a supportive environment

Initially it might be useful for some of the young people to meet with a support worker to prepare for the meetings, especially the Chair of the youth forum. The support
worker should run through with them how to chair meetings and their roles and responsibilities as Chair.

Refreshments should be provided, particularly if meetings are held around meal times. The refreshments should reflect the ethos of the particular health service, but could also be decided upon by the children and young people.

Any expenses incurred by the children and young people, especially travel or childcare should be covered. It is important to let them know how much they can claim and claiming should be a straightforward and easy process.

4.3 Safeguarding and child protection

Working directly with children and young people is an extremely good way of involving young people in decision-making, however there will be some issues around safeguarding and child protection that workers will need to consider.

In particular, you will need to ensure that everything you do adheres to your safeguarding policies and procedures and you may also want to seek advice and support from your safeguarding lead.

4.4 Building the capacity of young people

It is crucial to provide ongoing training for the children and young people, not just when they start but throughout their time of involvement.

It is key to look at their individual and collective needs in order to identify what training or support would be most appropriate and helpful. It could be that you want to provide training on how to undertake a consultation exercise or provide them with skills training to build their confidence when speaking in public.

You may also like to run a mentoring scheme to help support the young people – this could be developed with staff or could be in the form of peer mentoring.

Case Study – Birmingham Children’s Hospital Young Person’s Advisory Group (YPAG)

YPAG was set up to engage with and work alongside children and young people to influence decision-making at Birmingham Children’s Hospital (BCH) to ensure better healthcare for its patients. The group was set up in December 2009 by Janette Vyse, Lead for Patient Experience and Participation and Dave Baker, Senior Youth Worker. Chief Nurse, Michelle McLoughlin is the Executive sponsor, this has been an important factor in providing a gravitas to the group both for the young people – they can see that their participation is taken seriously, as well as for staff.

Since then, the group has increased in both size and influence. Initially, YPAG worked on a local level; improving services at BCH; but has now grown to have a national voice, working alongside other youth forums such as the Royal College of Paediatrics and Child Health Young Persons’ Panel and the National Children’s
Bureau to improve healthcare for children on a national scale as well as continuing to engage at BCH.

Members of YPAG are aged between 11-19 and there are currently about 30 young people who are regularly attending meetings and getting involved. The existing Chair and Vice Chair select a Chairperson and Vice Chair upon application for a term of 12 months. The young people at quarterly meetings agree on key objectives for the year and meet regularly to work on the specific tasks and projects.

Primarily the group focus on projects within the hospital and this has included regular quality walkabouts, advising on service redesign development, assisting with interviews, taking part in environmental assessments, youth proofing information leaflets and assisting with fundraising and events at the Hospital. They have also presented to our Executive board, spoken at the Annual General Meeting and provide a report for the annual quality report.

Training and education is provided to equip the young people to take on these tasks. This has included, in 2013 a residential course which focused on research and leadership skills, after which the young people undertook a research project on understanding what ‘made’ excellent care and the role of compassion in that.

More recently in July 2014, the decision was made to recruit a ‘YPAG Leadership Team’, made up from a core group of YPAG members who will take a more independent lead with specific projects. To recruit the Leadership Team, interested members had to go through an application process and those selected underwent Social Action Leader training, provided by the University of the First Age to ensure that they had the skills needed to take on a leadership role. Nine YPAG members did this training in September 2014 and are leading on several projects within the hospital.

The group has recently set up a twitter account @YPAG_BCH to share their activity and engage with the wider health field.

4.4 Evaluating outcomes

There are a number of tools that can be used to evaluate the work of the youth forum.

These range from simple tools such as surveys, which can gather feedback from the young people in the youth forum and the service users, through to self-assessment toolkits such as the BYC ‘Youth Voice Vehicles Standards Toolkit’ and the Membership Award Schemes such as that developed by Investing in Children.

BYC in conjunction with the Government have produced a self-assessment toolkit to help ‘Youth Voice Vehicles (YVV)’ such as youth forums to review their current arrangements and identify how they can be even more successful in listening to and acting on the views of young people. The toolkit includes 7 key questions for Youth Voice Vehicles to test the strength of their youth voice arrangements and for each of the questions there are suggested indicators of best practice.
This toolkit can be downloaded and used for a self-assessment
http://www.byc.org.uk/uk-work/support-for-local-authorities/youth-voice-vehicles.aspx

Investing in Children also run a Membership Award Scheme. This is a quality assurance mark validated by children and young people themselves. There are now 521 Membership sites across the UK. More information on this Membership Award Scheme can be found at https://sites.google.com/site/investinginchildrencic/membership-scheme

5 Promoting and recognising the work of the Youth Forum

5.1 Communications

Communicating the work of the youth forum to the wider public can both act to raise awareness of the work of the youth forum and help gain recognition for the young people, but it can also raise the profile of your health service.

With support, the children and young people could undertake media training and even write their own press releases and blogs and update Facebook group pages.

5.2 Recognition and Awards

It is extremely important to recognise and reward children and young people’s involvement. The purpose of any recognition or reward is to ensure that the children and young people feel valued and that their contributions are appreciated.

Again it is beneficial to involve the children and young people in deciding what kind of recognition they would like to receive. Some popular choices include:

- Thank you letters
- Certificates
- References
- Quoting their names in publications
- Reimbursement of Expenses
- Gift vouchers
- Training courses

6 Conclusion

Setting up a youth forum needs to be implemented by putting young people at the heart of everything and building the forum around their voices. This will ensure that they feel empowered and supported to actively contribute to improving services for other children and young people.
There should be some kind of formal structure to the youth forum, so that everyone is working towards the same common objectives and goals. It is also essential that the support worker is able to help facilitate meaningful opportunities for the children and young people to influence decision-making, so that they can have a real impact on the health services.

An effective support package will also play and important part in the success of the youth forum. Young people should be supported and/or trained for their role, so that they feel supported to stay involved and can contribute effectively and make a real difference to the health services. Part of this support package must also include safeguarding policies and procedures, in order to keep the children and young people safe. A robust support package will also help the children and young people to develop important life skills and feel that they are making a difference to the lives of other young people.

If you would like additional support to set up your Youth Forum, please take a look at BYC’s free online resource centre www.byco.org.uk/resources, which is packed with information and briefings to help with the running of your Youth Forum.
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- Birmingham Children’s Hospital Young Person’s Advisory Group (YPAG) (Contact: Janette Vyse - Patient Experience & Participation Lead at Birmingham Children's Hospital NHS Foundation Trust. Tel: 0121 333 8619 Email: Janette.vyse@bch.nhs.uk)

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- Shropshire Clinical Commissioning Group – Young Health Champions (Contact: Karen Higgins, Young Health Champions Project Manager, Shropshire Clinical Commissioning Group. Tel: 01743 277 593 Email: karen.higgins@shropshireccg.nhs.uk)

- Southampton Children’s Hospital Youth Partnership (SCHYP) (Contact: Cath Battrick – Matron, Tremona Road, Shirley, SOUTHAMPTON, SO16 6YD. Tel: Tel 02380 777222 ext 1200 Email: cathryn.battrick@uhs.nhs.uk Website: www.uhs.nhs.uk)

- Investing in Children - the Teen Talk Group, T1KZ and Alder Hey Hospital Children and Parents Forum (Contact: Email: felicity.shenton@investinginchildren.net Tel: 0191 3729200 Website: www.investinginchildren.net)

- Royal College of Paediatrics and Child Health – Youth Advisory Panel (YAP) (Contact: Farrah Raja - Children & Young People’s Participation and Advocacy Manager, Royal College of Paediatrics and Child Health, 5 - 11 Theobalds Road, London, WC1X 8SH. Tel: 020 7092 6076 Email: farrah.raja@rcpch.ac.uk Website: www.rcpch.ac.uk)