

# Hertfordshire Local Area SEND Partnership

Voice Report

Oct 2025 – Dec 2025

Voices of Hertfordshire Dashboard



# Headlines this Quarter

192

Young people with SEND attending the HCC SfYP youth councils

27

different types of diagnosis or disability reached during Voices of Hertfordshire sessions

615 responses to the SEND Young People's Health and Wellbeing Survey (SEND YPHWS)

6

ICB Youth Ambassadors representing young people across their communities in Hertfordshire and West Essex

8

Experts By Experience

11

Supported Interns working within HCC

Accessing Support Needs to Feel Safe, Comfortable and Non-Stigmatising

Young people, especially boys, expressed clear concerns about stigma and confidentiality when accessing support. They also want to know exactly what will happen in appointments and prefer environments that feel safe and predictable.

Digital and Online Resources Must Be Better Promoted. CYP are unaware of some digital offers

Young people want promotion through TikTok, Instagram, YouTube, school screens and assemblies. They also report that many now ask ChatGPT for advice before using Google or service websites.

Scheduling Support Around What Matters to Young People

Young people dislike missing favourite lessons or activities to attend appointments. They want support scheduled in a way that doesn't disrupt what matters to them in school.

Young People Value Choice, Independence and Self-Management of Care

Young people like being able to manage their own healthcare via the NHS App (appointments, information). They want clearer messaging about the independence it gives—avoiding “awkward phone calls”.

Health Information Must Be Clear, Accessible and Youth-Friendly

Young people want support explained simply: what's going to happen, what the room is like, who they'll meet. Videos, brief visuals and school-based communication methods were strongly preferred.

Accessible, Sensory-Friendly Environments Matter

Neurodivergent young people say waiting rooms and treatment spaces can be overstimulating and distressing. They want calmer, sensory-friendly environments and say this significantly affects their experience.

# CYPMHS

## Feedback by service

# Herts Mind Network – With Youth digital early help service

## ‘You Said, We Did’



*“I would like to know a bit more about my support worker (like their appearance/personality) before we start sessions.”*



*“We think it would be helpful to have shorter online groups that are around one specific topic”*

We sent a short introduction video before our first session which the young person found helpful.

with Youth

We created our new Online Groups ‘Menu’ based off this feedback.

with Youth

## ‘You Said We Did’



‘It would be great to have a resource for parents with how to support their young people through year 6 (SATs/Transitions)’ - Professional



‘I saw about the transition group on the website, would you be able to run it again?’ - Parent



‘I would prefer to see someone in person’ – Young Person

Taken this feedback to the team and begun creating a resource to support parents.

with Youth

Following interest from a few parents we will be running our Road to Year 7 group this summer and doubling capacity.

with Youth

Worked flexibly to offer young people face to face meetings to understand barriers to digital. Provided ‘hand holding’ signposting if there is a more appropriate service so the young person is supported throughout.

with Youth

# You said...We did



More joint sessions or family-based activities to strengthen the entire family's involvement.



We have a Systemic family clinic within PALMS that can be offered when clinically appropriate. Needs of this clinic are discussed as part of the package of care received



Parents within the group had received very different levels of previous support resulting in some parents having less understanding of Autism than others, which impacted the efficiency of the sessions.



All families accepted are booked on to an Intervention Workshop whilst waiting for intervention to support understanding of Autism diagnosis amongst other things.



Request for a three-month check in following groups to encourage and reinforce strategies.



We have a Patient Initiated Follow Up (PIFU) pathway that works inline with NHS England guidance. This allows families flexibility to arrange any follow-up appointments if necessary. Not all families will go on to this pathway and is discussed on a case-by-case basis with your clinician.

## PALMS Family and Friends Test

In this quarter PALMS received 15 FFT responses, over double the figure of last quarter. We continue to look at ways to increase this feedback.



*The community feel and sharing with other parents in similar circumstances, the support received by the course providers*

*Team was knowledgeable, kind, patient, willing to listen and adapt to the unique needs of the child*

### What could be better?

*Better explanation on what to expect and what we can do to help our CYP. Didn't find 'goals' made sense and marking them whilst we were there. Didn't understand whether goal ratings meant how hard we were trying or how close we were to achieving the goal  
No contact with therapist and parent*



11

Families rated PALMS Very Good



3

Families rated PALMS Good



1

Family rated PALMS Neither good nor poor

# Key Findings from review of Step 2 “You Said We Did” comments over the last 2 year (completed part of evaluation)

## 1. Community Perception & Waiting Times

Negative comments in the community were linked to concerns about waiting times.

Direct engagement clarified positive experiences and improved narrative.

## 2. Service Navigation Issues & Multi-Agency Coordination

Families experienced delays and misdirection between services.

Actions: Reviewed case in integration meeting; clarified referral criteria with Talking Therapies.

For high-risk CYP cases, Step2 coordinated physical checks, ASC assessment, safeguarding, and long-term mental health planning before discharge.

## 3. Clinic Space & in person assessment

Staff faced challenges securing clinic rooms.

CYP feedback showed preference for in-person initial assessments.

Actions: Secured spaces within 30-minute travel; reduced staff travel/admin burden. Changed system to offer face-to-face as default, with remote options if preferred.

## 4. Waiting Well Initiatives & materials

Parents felt unsupported during waiting periods.

Parents valued “Waiting Well” groups, SMS updates, and resource sharing.

Actions: Shared resources, collaborated with Carers in Herts, and explored additional support options and co production

# Herts Mind Network – community counselling

## **CYP Feedback**

3 Responses

- Rated overall experience as 4.67/5
- 100% felt listened to
- 100% were given choice in how they were supported
- 100% said their appointments were easy to access
- 100% would recommend the service to a friend
- Nothing suggested that we could do better

## **What could we do better (parents/carers):**

- “Maybe have a review to see if sessions need extending near the end of the initial 12 weeks”
- We have written a formal extension process/framework which is now in place. As a team we have reflected on the importance of communicating limits to the service offer.

# HPFT – Eating Disorder Team

'You said, we did'

## CAMHS Eating Disorders Team: 1<sup>st</sup> April 2025 – 30<sup>th</sup> June 2025

Family and  
Friends  
Test  
**100%**

Number of  
responses  
**2**



### You said

### We will

#### Things we do well

"We had amazing support and care from clinicians. They gave us appropriate advice and also referred us to other support which was very helpful."

"Weekly appointments, I felt that they cared about my wellbeing and were interested in me. I felt heard by the people I saw. Talked through feelings/worries in a helpful, guided way, offered techniques/tools to help me."

#### Things we need to improve

"Doctors appointments sometimes left me feeling worse or more confused."

We will continue to hold the trust values at the heart of our work and continue to ensure appointments allow the young person and their families to share how they are feeling and be heard.



# HPFT – Targeted Team

Things we do well	Things we need to improve on	We will
The team are excellent, knowledgeable, kind and thoughtful.	Making sure we meet our young people's neurodiverse needs prior to attending sessions.	We have created a new form to send out to young people, prior to coming into our service, where they can let us know their individual needs, so that we can meet any special requirements.
We are so pleased with all the support and knowledge provided.	Our team board was in need of updating for our young people who are neurodiverse.	Invited a young person from our team into the office to create a new design for our staff noticeboard.



# Voices of Hertfordshire – CAMHS

<b>You Said</b> Data, Feedback and Insight - What did children and young people tell us?	<b>We Did</b> What did the partnership do in response to this feedback? (or our future plans)
<i>Feedback from our young people &amp; families and our data highlight timely waits to access our specialist CYPMHS services for assessment and treatment</i>	We have partnered with the Royal College of Psychiatrists for 2-year Continuous Quality Improvement projects around ‘Demand, Capacity & Flow’ across our Children’s Eating Disorders team and our Children’s ADHD diagnosis and treatment team. We have involved 2 parent carers as part of these developments and look to partner with SfYP for consultation with their Experts by Experience and Youth Councils as part of our engagement strategy. We have also conducted interviews with local schools and parents of children with ADHD who have accessed services to gain qualitative feedback on our pathway.

# Voices of Hertfordshire – CAMHS

<b>You Said</b> Data, Feedback and Insight - What did children and young people tell us?	<b>We Did</b> What did the partnership do in response to this feedback? (or our future plans)
<i>Feedback from our young people and our data highlight inconsistent community treatment pathways across Hertfordshire i.e. different localities lead to different outcomes for young people</i>	Did' we began staff engagement sessions in Q2 of 2025 to review our community pathway offer as it stands. We have engaged 2 parent carers to work closely with us in Q3 to standardise and cluster our community pathways, consider reasonable adjustments and review points, and transitions between pathways.
<i>Neurodivergent young people highlight to staff in informal comments and through focus groups that waiting rooms and treatment are not sensory-friendly and can generate distress.</i>	Our staff have submitted bids to funding so improvements can be made in our North and East Community team, our Eating Disorder team and our inpatient unit, Forest House. Focus groups with young people have provided suggestions for how the refurbishment could look and are being rolled out across these teams. An example is listed here: Picturesque nature room unveiled at children and young people's service.

# Voices of Hertfordshire – CAMHS

<b>You Said</b> Data, Feedback and Insight - What did children and young people tell us?	<b>We Did</b> What did the partnership do in response to this feedback? (or our future plans)
<i>Parents carers' voices are missed within HPFT services as there are only a few of our experts by experience who identify as parent carers</i>	Our Lived Experience Lead has onboarded 2 new parent carers of neurodivergent young people with experience of CYPMHS in Q2/3, one of whom now sits on our Joint Service User & Carer Council and Trust Experience Group. Both our major service transformation projects across CYPMHS now involve ongoing parent carer representation. Our Family Connections group within the DBT team is co-facilitated with a parent carer who has lived experience.

# **Voices of Hertfordshire**

SEND Experts by Experience

Supported Internships

SEND Coproduction Groups

# Inclusion in Fostering

As part of the reverse mentoring work with Miranda Gittos, CJ gave a talk to foster carers on 2nd October. During the session, he shared practical advice on supporting routines and helping children and young people feel safe. He also covered ways to understand and support sensory sensitivities, improve sleep and eating habits, and communicate effectively. The presentation also included strategies for building self-esteem and confidence, talking about diagnosis, and helping children develop friendships and social skills.

## Next Steps

**Fostering:** Engage with the SEND Fostering Community Hub (around 30 families) to strengthen connections and share resources.

**Adoption:** Finalise and evaluate the “All About Me” booklet for prospective adopters and develop a plan to measure impact through usage data, feedback, and case studies.



## INCLUSION IN FOSTERING FOR INDIVIDUALS WITH NEURODIVERSITY - IFINS FOR SHORT



CJ



MIRANDA GITTOS

...ERING REVERSE MENTORING PROJECT. CJ, A YOUNG  
...N WITH NEURODIVERSITY, SUPPORTS MIRANDA, A  
...R, IN ENHANCING THE FOSTERING EXPERIENCE FOR  
...ERSE YOUTH. CJ LEVERAGES YOUNG PEOPLES' LIVED  
...E TO PROVIDE INVALUABLE INSIGHTS THROUGH TALKS  
... AND TRAINING SESSIONS.

...HARE PRACTICAL ADVICE ON CREATING INCLUSIVE  
...IRONMENTS AND EFFECTIVE COMMUNICATION  
...EGIES, HELPING FOSTER CARERS UNDERSTAND AND  
...AT THE UNIQUE NEEDS OF NEURODIVERSE CHILDREN.

...ROJECT EXEMPLIFIES THE POWER OF LIVED EXPERIENCE IN  
...DRIVING MEANINGFUL CHANGE AND HIGHLIGHTS THE  
...IMPORTANCE OF INCLUSIVE PRACTICES IN FOSTERING  
...PLACEMENTS.



# SEND Takeover Day 2025

On Wednesday, 3rd December, Voices of Hertfordshire used social media to amplify the voices of young people with SEND. Throughout the day, content was shared from schools, settings, health groups, and Youth Councils, highlighting what young people think, feel, and experience. This year's theme focused on hidden disabilities."

In the morning session, Emma and CJ interviewed Hero Slinn (Director of Inclusion & Skills), Mark Watkins (Executive Member for Education, SEND & Inclusion), and Hillary Skoczylas (Deputy Executive Member for Education, SEND & Inclusion)." In the afternoon session, Freddie and Timi interviewed Melissa Robertson (NHS Designated Clinical Officer) and Elisabet Eldred (NHS Deputy Designated Clinical Officer)."



### Top content based on views

[See all](#)

 1.9K 24 Nov	 1.5K 21 Nov	 1K 24 Nov	 924 19 Nov	 891 3 Dec
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# It's OK to be different

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Emma, an expert by experience, attended Almond Hill school to share what it's like to grow up with SEND and why it's okay to be different. Emma talked about her sensory sensitivities that influence clothing and food preferences and about her medical condition, scoliosis, which required multiple surgeries and limits her participation in certain activities.

Frequent school changes created challenges for Emma in forming friendships, though smaller class sizes in later primary years provided more tailored support. Mainstream secondary education did not fully meet their needs until an Education, Health and Care Plan facilitated placement in a SEND school, where support was more aligned. Currently, Emma works with Hertfordshire County Council to contribute insights on improving services for children and young people with SEND and to ensure that their perspectives are considered in decision-making.



Voices of Hertfordshire



# **Public Health**

SEND Young People's Health and Wellbeing Survey (SEND YPHWS)

# SEND Young People's Health and Wellbeing Survey (SEND YPHWS)

## Headline Summary

**615**

Total responses as of 09/02/2026. This is up on the 212 responses received last year

**17**

Schools/colleges. 29% of responses were from college students.

**4**

Garston Manor, North Herts College, Oaklands College and Knightsfield each submitted more than 50 responses.

**The report will be completed end of March**

# Educational Psychology Service

Educational Psychologists use their professional judgment to choose activities that best match the child's individual needs, strengths, and developmental goals, ensuring interventions are appropriate and effective. There is a wide range of possible activities, and the following slides will present examples of different approaches and styles across the key stages.

# Early years

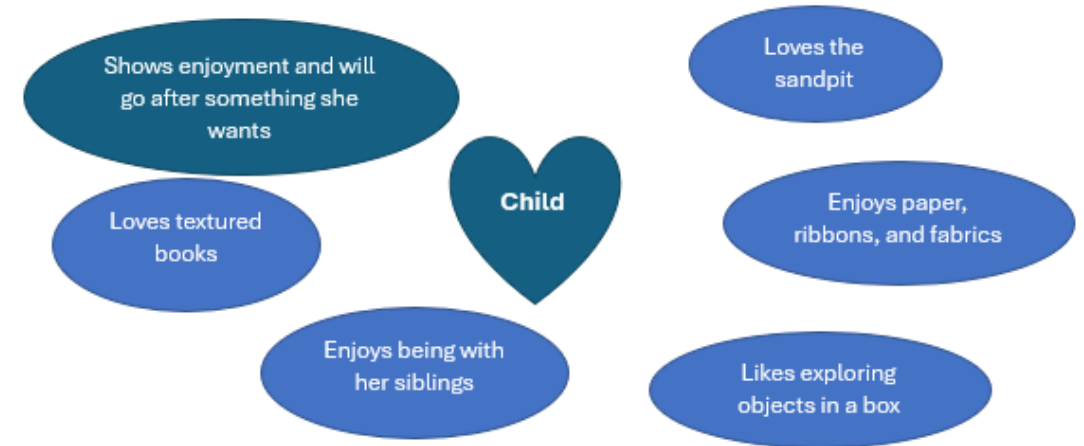
- Structured observations in natural settings
- Collaborative consultation with parents and education staff to understand the child's experiences and preferences

## Child/Young Person's and Parent Views

Due to Child's language and communication needs he has not been able to provide his views directly. These have therefore been obtained through observations of him at home and by speaking with those who know him best.

Child is a very active child who enjoys engaging in physical activity and outside play. He continues to explore the world using his senses and during my home visit particularly liked jumping up and down on his trampette. He is reported to love being out of the house in the community and enjoys experiencing the environment from the comfort of his buggy which he often rocks back and forth in. He enjoys engaging in activities that provide sensory feedback such as pulling up grass, climbing, and exploring items with his mouth.

Child is not yet at the stage where she is able to communicate her views, wishes or feelings. Therefore, Child's views are represented here by people who know her best.



## What others like and admire about Child:

Strong

Resilient

Happy

Content

# Primary School

- School wellbeing cards
- Completing sentences
- Scaling activities
- Conversations

## PUPIL's other views during the assessment

- What are you most proud of at school? "headteacher's tea party for good maths"
- What is important to you? "My life, I'm important"
- What makes you unique? "My ADHD"
- In the future what would you like to do? "I would like to be a teacher in a different country...America."
- What would you like to get even better at? "listening/ spelling and learn to play the guitar."
- What is your favourite school lunch option? "Chicken curry".
- What would you change about school? "Mondays off" "On your birthday you could go home early"
- PUPIL shared his favourite things "penguins, blue, football, science and geography".
- On a scale of 0-10 PUPIL reported finding...
  - Reading (0/10) "easy"
  - Writing (5/10) "because I can't spell much"
  - Learning at school (10/10) "hard"

## OUR ASPIRATIONS

### 🗣️ CYP'S Dream:

- "I would like to get better at spelling and writing."
- "I would like to be a teacher".

### Child/Young's Views

#### Gemstones



#### Flags



**PUPIL**  
likes...

#### Football



#### Facts



#### Science and geography

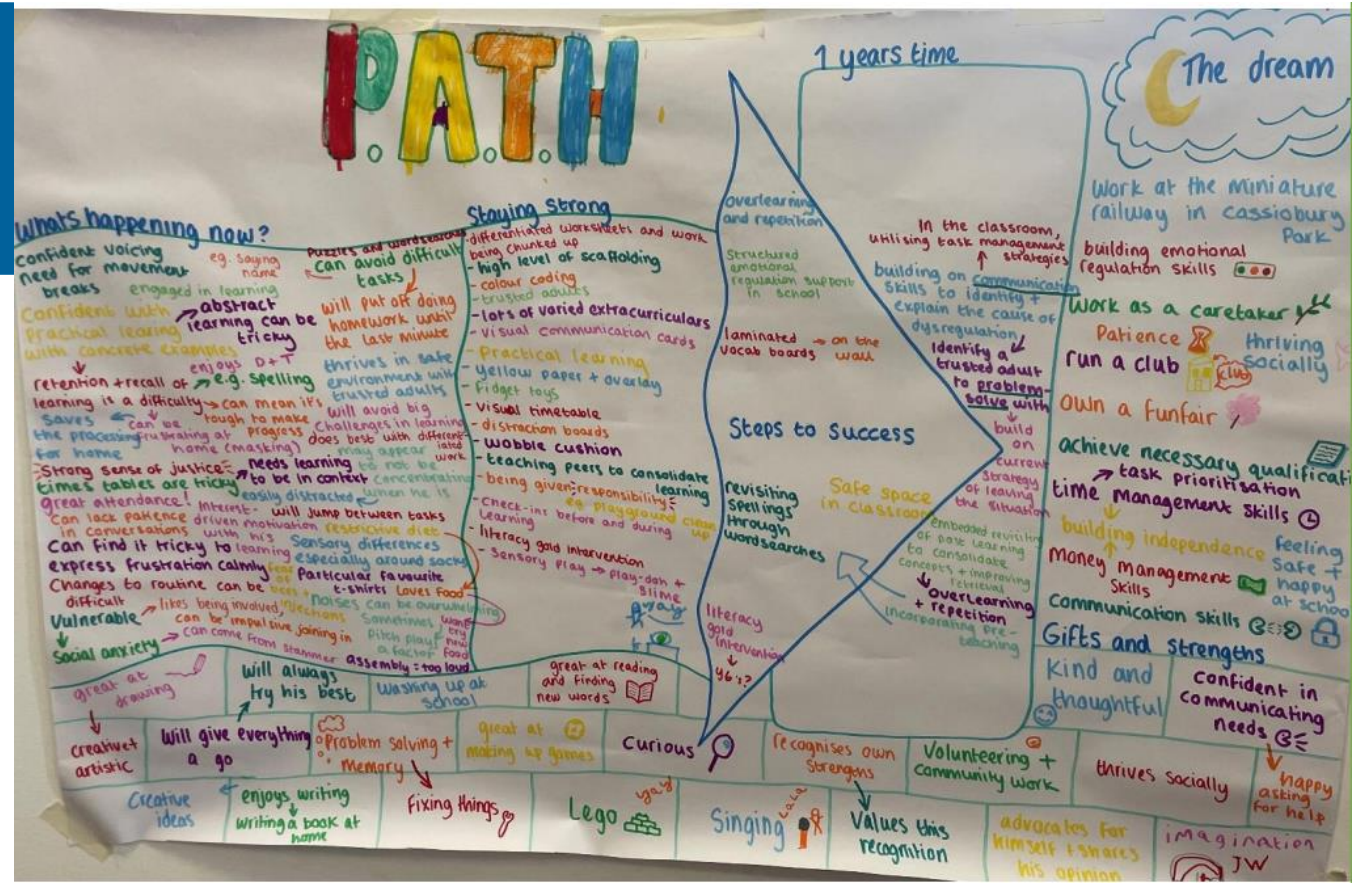


## School Wellbeing Cards

Yes (I feel like this)	No (I don't feel like this)
I worry about coming into school	I can show my true feelings at school
I find the school environment overwhelming	I want to go to school
I feel like I can make a difference in my life	I worry about the schoolwork
I enjoy learning new topics	The other children are mean to me
I feel safe in school	

# Primary School

- Promoting alternative tomorrow with Hope or PATH ((Pearpoint, O'Brien Forest, 1993)- this is a visual, person-centred planning tool designed to help individuals and teams create a shared vision for the future and map out practical steps to achieve it



Key information from the PATH will be reported below under the relevant headings alongside information from the observation of CYP and provided within the EHCNA request form and documentation. CYP attended the PATH meeting for the majority of the time; he went outside at break time and then returned. CYP coloured in the PATH letters and added some drawings to paper during the meeting

In the future, there are three jobs that Harrison would like to do; he would like to be a caretaker at Lanchester School, work at the miniature railway at Cassiobury Park or work at a festival. He shared during the PATH meeting that he would like to own a funfair. Harrison would also like to run his secret club, where people sign up and are offered different activities, such as rock climbing.

# Secondary School

- Ideal self (Moran,2000)

## Ideal self

Drawing the Ideal Self (Moran, 2000) is a technique based upon the theory of Personal Construct Psychology (PCP) which identifies the way an individual child sees themselves and enables the expression of personal views. I asked CYP to imagine a person that he didn't want to be like, considering the personality of the individual, what the future entails, the greatest fear, what they're like at school, how they act with friends and family, and what would be in their school bag (Figure 1).

I then asked CYP to imagine the kind of person he would like to be like, following the same steps (Figure 2). I added a third piece of paper (Figure 3) and asked CYP where he currently fits on the scale, and he indicated that he felt around an 8 and expressed that he could achieve his ideal self if he "listened more in class". This suggests that CYP has a good level of self-esteem as he rated himself close to the person he would ideally be like.

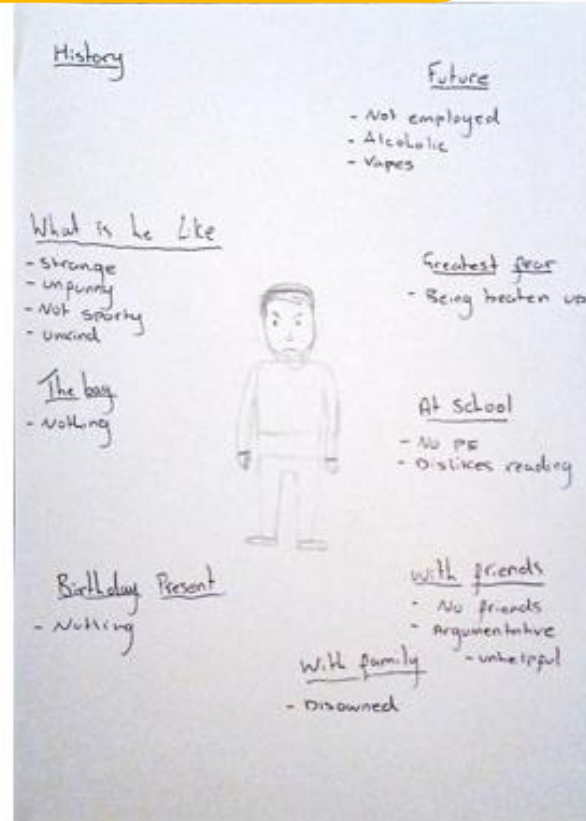


Figure 1. Non-Ideal self



Figure 2. Ideal self

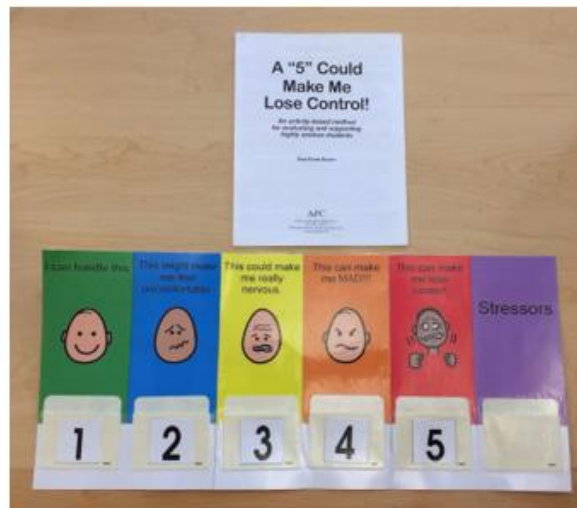
# Secondary School

- A Five Can Make Me Lose Control” is a visual or structured activity where the child rates situations, sensations, or experiences on a scale (often 1–5). Five represents the highest level of discomfort or stress—something that can cause the child to feel overwhelmed or “lose control.” This helps children recognise and communicate their triggers.

I can handle this	This might make me feel uncomfortable	This could make me really nervous	This could make me mad	This can make me lose control
Not being first in line Horses Music Cinema Riding in a car Computer time Playtime Eating Bedtime Lunchroom	PE Taking a bath Library Holidays Walking Someone talking to me Getting a present	Smelling food Smelling breath Meeting people Weather alerts Being sick Bright lights Looking at books Walking in the hallway	Shopping Brushing teeth Playing board games Loud noises Taking a shower Being in a group Going to school Waking up	Dogs barking cleaning up Being told no Losing a game Crowds Wi-Fi being cancelled

CYP’s elaborations on her answers:

- CYP hates taking a bath because she can’t reach her back
- She hates meeting new people
- Weather alerts make her nervous because she hates change
- She doesn’t like walking in hallways because she hates people staring at her
- She won’t play board games because she hates losing
- She doesn’t like showers because she hates getting her hair wet
- CYP doesn’t like groups because she hates being left out



# Post 16

- Strengths cards such as amazing autistic Brain cards (Gloria Dura- Vila)



The Amazing Autistic Brain Cards (Gloria Dura-Vila) are a deck of 150 cards which show strengths and challenges that individuals may face. X and her mother went through some of the cards (we took 10-15 out of each set as the whole pack was overwhelming) and X was able to indicate whether she agreed with the statement on the card or felt that it was not relevant to her.

The positives that X identified are listed below **“I am”**:

- Good at accepting a challenge
- Good at following rules
- Good at remembering things
- Good with routines
- Caring
- Organised
- Fair and just

X shared that she feels she is good at finding things out, entertaining and good on her own in some contexts but not all of the time.

X identified that **“I struggle with”**:

- Knowing how to behave in different situations
- Working in groups - *particularly with unfamiliar people*
- Understanding people’s reactions
- Multi-step instructions
- Paying attention
- Even doing the things I want to do

X shared that she struggles to show her true feelings in some situations depending on who she is with, she doesn’t mind losing games but doesn’t like it when others are competitive, and she feels she is motivated, quirky and easy-going in some situations and environments.

X shared with the support of her mother, that she would like more help in class and would like someone to sit with her to explain the task. In the EHCNA request form X shared she would like adults to *“explain to me what I’m supposed to do, or I will read the questions 10 times and get myself in a loop. Don’t sit with me for 1 minute then leave, it will take at least 5 minutes before I get what to do as I’m still panicking and in a loop. Don’t assume that I have understood what to do – ask me if I now understand before you leave me. I prefer to use PowerPoint because Word documents change when you move one letter which exasperates me to the point of having a full meltdown and hitting someone”*.

# Post 16

- River of life (Mercer, 2019)- this is a facilitated, visual metaphor activity where individuals draw their life as a river, including bends, rapids, still water and obstacles.

## Reflections of YP's River of Life

- YP quickly understood the metaphor of the 'river' and referenced her experiences 'starting as a little stream' and then becoming 'big and wavy'.
- She did not recall any positive experiences of friendships or sense of belonging withing her settings.
- YP did not want to discuss any 'obstacles or boulders' in river.
- Many of her memories involved difficulties with the adults supporting her. She referenced being 'kicked out' of class several times but for most, she was unable to (or preferred not to) share her recollections about why these events happened.
- We did not discuss any memories or stories outside of education.

## River of Life

The River of Life (as developed by Joyce Mercer) was used as a tool to explore YP's educational experiences. She was invited to recall as many memories as possible that she could and felt comfortable sharing. Wayne Reeves shared YP's account with her to give her the opportunity to 'reauthor' or make any amendments. She confirmed that listed below is an account of how she recalled her experiences.

*In Reception class, I just remember walking in. I started playing. My teacher was Mrs C. I still see her sometimes walking around Watford. In Year 1 we had Miss W. We sat on the floor for learning. In Year 3, there was this teacher. She used to shove kids off their chairs. They would be swinging on their chairs, and she would kick the chairs. I would be kicked out of her lessons. I would always be kicked out of her lessons.*

*I can't remember any trips or lessons really from primary school. I did some poetry in primary school, but I can't remember when. I just started writing it. I've got lots of my own poetry now.*

*Secondary school. I hated it. I liked year 7 though. My first day at secondary school was good. With the rest, I didn't really go into lessons. Just running around the corridors. I don't know. I just don't like it. Easier to be out the classroom. I would be in seclusion all day. I preferred being sent home than being at school. In the art lessons and stuff, I still got kicked out.*

*Year 8 was lockdown. I still went into school from the beginning though. There was five of us. We didn't have lessons. They did stuff like Easter Egg hunts and weightlifting. When all the other kids came back after lockdown, I got excluded. I don't remember any friends. They were all horrible to me.*

*My river for school, my journey, I don't know. It started little stream but then up and down and then got big [wavy]. After getting excluded, after year 8, it, the river went in lots of different directions.*

*I liked the fresh air in Kent. I didn't do any learning there though. Went on walks. I did some school in Year 10 and 11 at hospital. I didn't do lessons. Just fun stuff. Music and arts and sports. I used to like trampolining and martial arts. Sports that I can do by myself. I used to do boxing and use the punchbag.*

*This woman came after GCSE time and was teaching me stuff like my ABCs and phonics. She was boring and couldn't get her laptop to start. It took ages to start; she tried for about half an hour. I already knew everything that she was trying to teach me.*

*Now? I've got a guitar lesson tomorrow. They're coming here but then I'll go to the music block.*

# Summary:



Key principles underlining pupil views: person-centred, Strengths based, solution- focused and collaboration.



Benefits: Improved engagement, builds trust, supports wellbeing and promotes progress

# **Services for Young People**

Overview of SEND Youth Councils

# Latest update from our youth councils for young people with SEND

Contributed to the Hertfordshire Health and Wellbeing Survey for young people with SEND, reviewing the questions and co-producing the design of the survey

Reviewed the Hertfordshire and West Essex SEND Mental Health Support Team's materials and resources

Continued co-producing the HCC youth vaping campaign 'Vape Brain'

Worked with Hertfordshire Police on community knife crime and personal safety campaigns

Worked with transport providers to highlight issues in relation to public transport in Hertfordshire

Reviewed the draft HCC Plan for Children and Young People 2026-31, which sets out our ambitions for improving outcomes for Hertfordshire's children and young people, and co-produced the video to launch the final plan

# **Integrated Care Board Youth Council**

Overview of Youth Council activities

# ICB Youth Council

**6 Youth Ambassador** representing young people across their communities in Hertfordshire and West Essex

## Discussion from the most recent meeting

### **MENTAL HEALTH HUBS AND EATING DISORDER SUPPORT FOR YOUNG PEOPLE IN HERTFORDSHIRE**

Provide an overview of the new HertsHub website, which offers quick and accessible mental health and emotional wellbeing support for children and young people in Hertfordshire.

Gather feedback from young people on how to promote a new campaign focused on support for eating disorders, ensuring information reaches those who need help quickly and easily.

## Youth Council input/outcomes

**School-based delivery:** Young people felt that school or college assemblies would be an effective way to share information, as most young people are in education settings.

**Use of video content:** A short video could be a practical alternative to visiting every school. Young people agreed that brief, engaging videos would work well.

**Social media promotion:** Social media was seen as an important channel. TikTok was highlighted as the most effective platform for under-16s, with suggested videos around 15 seconds long featuring real people. Instagram was viewed as more relevant for 16–18-year-olds.

**In-school visibility:** Suggestions included using existing display spaces such as TV screens, lockers, and noticeboards to share information.

**Physical take-away resources:** Some schools provide small business-card sized information cards with QR codes. This was seen as an effective way to offer discreet, quick access to support.

**Search behaviour:** Young people reported that many now seek advice via ChatGPT first rather than using Google or directly searching for services. **PHSE sessions and staff training:**

Dedicated PHSE sessions on mental health and eating disorders were recommended, alongside staff training so that adults know how to respond safely and calmly. Whole-day PHSE formats were described as working well in some schools.

# ICB Youth Council

**6 Youth Ambassador** representing young people across their communities in Hertfordshire and West Essex

## Discussion from the most recent meeting

### **NHS APP**

Consultation with the group about the NHS App to find out how best to encourage young people to download and use the NHS App for their own health and care.

## Youth Council input/outcomes

The NHS App should be promoted more widely in schools, colleges, youth clubs, GP surgeries, and on social media.

Young people suggested explaining why they should download the App—especially that it allows them to book appointments themselves without needing to make awkward phone calls.

Many young people do not realise they can manage their own healthcare through the App, so raising awareness of this independence is important.

Most participants were already aware of the NHS App. Posters in GP surgeries are useful, and letters sent at age 16 with download links help. Plans to display posters in more locations, including dentists, hospitals, and pharmacies, were supported.

For influencers, young people said they would not respond to MPs but might engage more with actors or footballers. Trusted voices, teachers, doctors, and family, were identified as the most effective messengers.

Large roadside posters were suggested to capture attention from people stuck in traffic. Young people can help older relatives use the App, though they felt a formal campaign encouraging them to teach older family members is unnecessary. The App's notification feature is helpful, and users should be encouraged to keep notifications switched on.

Increasing App use may make it easier for people without smartphones or internet access to contact GP services by phone.

# Homecare

# Homecare in Hertfordshire provides personalised support to children and young people.

## How children and young people express their views

CYP share what they want, like, feel, and what matters to them during assessments.

Communication is adapted to each child's abilities, including speaking verbally, using behaviour to express needs, using pictures, books, signs, or written communication relying on parents/carers when non-verbal

"I" statements are used for verbal CYP so their views are captured in their own voice.

CYP are involved in care planning from the beginning and activities are chosen to match their interests.

## How children and young peoples voice shapes their care

Activities they enjoy are added into their care plans and reviewed to ensure they remain relevant.

Routines are adapted when CYP show distress or discomfort, helping them feel calmer and more secure.

Care rotas are changed so CYP receive support when it works best for them, enabling positive engagement.

For children who have been isolated or afraid to leave the house, following their interests (e.g., music, outdoor time) helps them take major steps—such as going outside or attending appointments.

Trust built through listening leads to greater confidence, more independence, and improved experiences for both the CYP and their families.

# **Neurodiversity Support Hub**

# ADD-vance ask all callers/enquirers for feedback on the service they have received-

Based on a total of 993 responses

## Headline Summary

**4.9**

On a scale of 1-5, how useful did you find the service?

**98.7%**

% who would recommend the service

**16.3%**

% callers who complete feedback form

# Some feedback comments from Q3 25/26

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I am very grateful for Claire taking the time to call me, she was amazing, she had lots of knowledge, and it was lovely being able to speak to someone who understood the situation we are in. She has since taken the time to send me a very in depth, personalised email with lots of relevant information and advice which we will be very useful in helping us try and improve things for our daughter.”

This is the 2nd time I have called Addvance and have received amazing support. The information I received was very helpful and Sarah was really friendly, kind and understanding. It was nice to hear from someone who was able to empathise and make me feel heard when I sometimes feel like I'm fighting a losing battle. Much appreciated. Thank you

XXwas very helpful and really nice speaking too she listened and helped me with all my questions and queries and also emailed me the next day with all information I asked or requested. I am extremely pleased and very happy I spoken to XX as I was totally lost and confused now I have some understanding and all information to go through thank you XX much appreciated

**Supporting Families and  
Social Care Participation Team**

# Voices of Hertfordshire – Supporting Families

<b>Service Area</b>	<b>You Said</b> <b>Data, Feedback and Insight</b> - What did children and young people tell us?	<b>We Did</b> What did the partnership do in response to this feedback? (or our future plans)
<b>Ongoing priorities</b>		
<b>Intensive Family Support Team (IFST) – User Surveys</b>	<p>Children and young people who are supported by IFST are encouraged to complete feedback on their experience of working with the team. Between July – Dec 2025, 52 children and young people completed surveys. Key results included:</p> <p>‘The help I received was the right help to improve things’ – 59%</p> <p>‘I know where to go to get the right help and support if I need to in the future’ – 57%</p>	<p>All information was collated into a quarterly report and shared across the service. This will be monitored by the Supporting Families Senior Management Team and participation is a theme across the SFs Annual and individual team plans.</p>

### Examples of work undertaken

**CHICC Seniors** produced their care experience for Corporate parenting strategy and provided a voice over for this to really capture how they as care experience young people in our services, wish and desire from Corporate parents in Hertfordshire.

**Junior CHICC meeting** held on 9<sup>th</sup> October at Shephall community Centre, with 12 young people present. Discussed the word ‘Hazard’ used in our service and what they felt about this, some recognising it carries a negative meaning and doesn’t reflect their lives experience, but understand what hazard means and why its used in the service, this was fed back to the CLA service managers. We tasked our Senior CHICC members to separate into small groups with our juniors and engage in discussion about ‘what matters to me’ whether that’s their care experience, there hopes, frustrations and aspirations for the future. This enabled the seniors to build a relationship with the juniors with open conversations that are relatable to them.

**Junior CHICC** – Halloween event set up by the Participation team, with support from our Senior CHICC. It was successful event, with 12 young people and some younger siblings from fostering families attending including pumpkin carving, where prizes for best design and a Halloween goodie bag for everyone involved. We welcomed foster parents to get involved and the afternoon was filled with lots of mess, and lots of fun for the young people.

**Co-produced Video with Children and young people** –The Participation team co-produced a video with our children and young people. This involved discusseing with 6 children and young people across our services and asked them what the best way as a professional to engage with them and how professionals can be more curious when supporting them.

### Examples of work undertaken

**In November** the Participation Team started work with the **youth justice service** providing independent feedback to the services from listening to parents/carers and children and young people that are currently under the service or have been. Based on previous feedback the service had gained, key questions were designed to ask in consultation with parents, children and young people. This work with YJS will continue monthly and feedbacks directly to the Service managers in youth justice. In January/February the team will be looking at producing a video with young people from the service, to support other young people when they first come into the service.

**HSCP Conference** –presented at this conference to discuss effective engagement with multi agency professionals and presented our co-produced effective engagement video which you will find in this link <https://youtu.be/esF9tjo5tp4> and here is the [brochure](#) . Attendees were tasked to take this back to their colleagues, managers and asked them what will they change, how will they become more curious in their profession.

**CHICC Corporate Parenting Board** – Discussed their ideas for a community Hub, something the young people feel strongly about the service running for them, a place for care leavers to attend regularly, network with each other and the service can provide more opportunities for them. Also discussed a theme for our Chicc co-production review, also previously known as scrutiny. Some of the themes identified included Prevention and mental health support.

**SMC Placement visit** – Attended one of the placements to discuss what's going well and what isn't and how we can improve this. They discussed how they desired a place to go, to feel safe to connect with other young people and came up with solutions for their care plans, using photos to explain, where English isn't there first language. Suggestions to also shorten the plan, and to have it in different languages for initial support. Whilst the SMC feel strongly they want to learn English and are doing everything they can to achieve this, as a start for understanding they felt it would be good for different languages to be included. This has been fed back to the service. Each month we visit a different placement for SMC.

### Examples of work undertaken

**CHICC Seniors** supported two young people interview panels. The first one was for the Director of children and families and the second was for our team for a Participation team worker. The young people really enjoyed this experience again, asking great questions and unpicking where they felt necessary. They were clear and demonstrated professionalism through out the interview process.

**CHICC Juniors** – Coming into care packs are being piloted with emergency hubs through December and January, Once we have the feedback from these, this will be taken this to the Junior group to discuss.

**CHICC Juniors** – This year for Christmas we tasked the senior to organise the juniors Christmas party. We gave them a budget and took them out shopping to get supplies and everything Christmas for our juniors. It was a huge success and the karaoke with all I want for Christmas in a room with 25 young people was amazing! Each young person, partnered up to build a gingerbread house and the winner took a prize as well as each young person had a Christmas bag filled with lots of fun goodies but also day to day practical presents.

**CHICC Seniors** – This year we wanted to give back something special to our seniors. They have supported throughout the year with amazing work, solutions and dedicated there time week in and week out, when really, we should only be meeting them each month. There commitment to CHICC, mentoring, finding solutions, discussing openly from their own experience has led to so many changes across children services. As a way of thank you, we wanted to end the year with a wonderful Christmas gift, so we took them to the Polar Express train in Kent.