

AGENDA ITEM	
2.3	

POPULATION HEALTH & PARTNERSHIPS COMMITTEE

PROPOSAL FOR HEALTH BOARD COMMITMENT TO CHILDREN'S **RIGHTS**

Date of meeting	07/07/2021	
FOI Status	Open/Public	
If closed please indicate reason	Choose an item.	
Prepared by	Joanna North, Head of Strategic Planning and Commissioning	
Presented by	Greg Dix, Executive Director of Nursing, Midwifery and Patient Care Linda Prosser, Executive Director of Strategy and Transformation	
Approving Executive Sponsor	Executive Director of Nursing	
Report purpose	ENDORSE FOR BOARD APPROVAL	

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Engagement (internal/external) undertaken to date (including receipt/consideration at Committee/group)			
Committee/Group/Individuals	Date	Outcome	
Management Board	(16/06/2021)	ENDORSED FOR APPROVAL	

ACRONYMS			
UNCRC	United Nations Convention for the Rights of the Child		

SITUATION/BACKGROUND

Children's rights are enshrined in international law through the UNCRC, which was ratified by the UK in 1991. The 54 Articles list the rights that children have to be safe, have a say in the decisions that affect them and to reach their full potential. In 2011 Wales became

¹ https://treaties.un.org/Pages/ViewDetails.aspx?src=TREATY&mtdsg_no=IV-11&chapter=4&clang=_en



- the first country in the UK to incorporate the UNCRC into domestic law through the Rights of Children and Young Persons (Wales) Measure.²
- 1.2 The Children's Commissioner for Wales has published a framework to help public bodies fulfil their statutory duty to integrate children's rights into decision-making, policy and practice. The Right Way: A Children's Rights Approach in Wales provides a model for public bodies to follow, with five principles³ that can be put into practice.
- 1.3 Other NHS Wales organisations have undertaken a considerable amount of work to deliver their own version of a Children's Rights approach. Aneurin Bevan UHB were the first Health Board to adopt Welsh Government's Children and Young People's Participation Standards⁴ and were awarded the National Children's Participation Kitemark by the First Minister. The former Abertawe Bro Morgannwg UHB were the first Health Board to publish a Children's Rights Charter, with Cardiff & Vale UHB following in 2018. These organisations have also established Youth Boards in a variety of formats.
- 1.4 CTM UHB began a programme of work in 2019 to embed a Children's Rights approach within the Health Board. As part of this, an engagement event was held with young people across the Health Board in February 2020 where feedback was obtained on how Health Board services currently deliver against the articles in the UNCRC. This was shared with Management Board in February 2020.
- 1.5 The impact of COVID and changes in staff roles meant that further work stalled until early 2021.
- 1.6 A small team convened in January 2021 to revive this work. In April 2021 the Executive Directors of Nursing, Midwifery and Patient Care and Planning and Performance gave a mandate for the programme of work to be revisited under the Children and Young People System Group governance structure, as well as seeking support from Independent Members. This approach was made and on the 18th May 2021 a presentation to the former and current Vice Chair was delivered, outlining the background to Children's Rights, the achievements to date, progress by other Health Boards and our request for their support at the highest level of the organisation.

2. SPECIFIC MATTERS FOR CONSIDERATION BY THIS MEETING (ASSESSMENT)

2.1 To successfully embed the Children's Rights programme within the Health Board and change culture, a public commitment to a Children's Rights Approach, meaning that "organisations will prioritise children's

² https://www.legislation.gov.uk/mwa/2011/2/contents

https://www.childcomwales.org.uk/resources/childrens-rights-approach/right-way-childrens-rights-approach-wales/

⁴ https://gov.wales/sites/default/files/publications/2018-02/Bilingual-Participation-Standards-poster2016.pdf



- rights in their work with children and families to improve children's lives"⁵ is essential. The advice from the Vice Chairs was that this needed Executive support prior to submission to a public board meeting of the Health Board.
- 2.2 A refreshed strategy has been drafted, with objectives to support the five principles introduced in section 1.2 of this paper. A visual representation of this strategy can be seen below:

Our Purpose	We want to change culture in Cwm Taf Morganwwg by placing Children's Rights at the core of everything we do			
Our Vision	Our Principles		Our Objectives	Our Outcomes
To enable children and young people to be meaningfully supported to	Embedding Children's Rights		Formal adoption of our Children's Charter by the Health Board	Our Children's Charter will be the starting point for all significant policy change in the Health Board
influence health agendas that will shape and improve their lives and those of their communities	Participation		Utilise the National Participation Standards	We will have a mechanism to measure our commitment to Children's Rights
	Empowering Children		Re-establish our links with local Youth Forums	Our policies will be informed by the people that they are designed to work for
	Equality and Non- discrimination		Develop a programme of impact assessments	We will become more aware of barriers impeding access to our services and can work to redress this
	Accountability		Invite young people to appraise our performance	We will be directly accountable to our children and young people

We are already progressing the outcomes listed in the visualisation of the strategy above, with the drafting of a Children's Charter for the Health Board being the first deliverable. This could be made available for the public meeting of the Health Board in July and can be used for promotional/public relations material.

3. KEY RISKS/MATTERS FOR ESCALATION TO BOARD/COMMITTEE

3.1 The Health Board is lagging behind other Health Boards in our progress and public acknowledgment of Children's Rights. There is a risk to our reputation if we do not approach this matter at a strategic, whole Health Board level and have progress to report to the Children's Commissioner for Wales in the autumn.

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⁵ The Right Way, Children's Commissioner for Wales, March 2017



3.2 In addition, as a public body, we have a statutory obligation to contribute to the realisation of Children's Rights, therefore there is a potential risk that the Health Board may be in breach of this obligation if we do not demonstrate our commitment and progress in this area.

4. IMPACT ASSESSMENT

Quality/Safety/Patient Experience implications	Yes (Please see detail below)		
	Direct impact on the quality agenda		
Related Health and Care	Governance, Leadership and Accountability		
standard(s)	Staying Healthy Individual Care		
Equality Impact Assessment (EIA) completed - Please note EIAs are required for <u>all</u> new, changed or withdrawn policies and services.	No (Include further detail below) If yes, please provide a hyperlink to the location of the completed EIA or who it would be available from in the box below. If no, please provide reasons why an EIA was not considered to be required in the box below. Not required at this stage		
Legal implications / impact	There are no specific legal implications related to the activity outlined in this report.		
Resource (Capital/Revenue £/Workforce) implications / Impact	There is no direct impact on resources as a result of the activity outlined in this report.		
Link to Strategic Well-being Objectives	Co-create with staff and partners a learning and growing culture		

5. RECOMMENDATION

5.1 The Population Health and Partnerships Committee is asked to **ENDORSE** a commitment to a Children's Rights Approach, for the purposes of approval at CTM UHB Public Board meeting in July 2021.

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