Children’s rights in primary health care
Volume 6. Assessment and improvement Tool for Parents and Carers
Children’s rights in primary health care
Volume 6. Assessment and improvement Tool for Parents and Carers
ABSTRACT

This publication presents a Manual and Tools for the assessment and improvement of children’s rights in primary health care (PHC) for five groups of stakeholders, namely PHC services’ management, health professionals, parents and carers, children aged 6-11 and children and adolescents aged 12-18. The Manual contains a short methodological guide and the five tools, which may be used through focus group discussions or as a survey.

The series Children’s rights in Primary Health care consists of 6 volumes:

Volume 1. Manual and Tools for assessment and improvement
Volume 2. Assessment and improvement Tool for Children aged 6-11
Volume 3. Assessment and improvement Tool for Children and Adolescents aged 12-18
Volume 4. Assessment and improvement Tool for Health Professionals
Volume 5. Assessment and improvement Tool for Management
Volume 6. Assessment and improvement Tool for Parents and Carers

Address requests about publications of the WHO Regional Office for Europe to:
Publications
WHO Regional Office for Europe
UN City, Marmorvej 51
DK-2100 Copenhagen Ø, Denmark

Alternatively, complete an online request form for documentation, health information, or for permission to quote or translate, on the Regional Office website (http://www.euro.who.int/pubrequest).

© World Health Organization 2015

All rights reserved. The Regional Office for Europe of the World Health Organization welcomes requests for permission to reproduce or translate its publications, in part or in full.

The designations employed and the presentation of the material in this publication do not imply the expression of any opinion whatsoever on the part of the World Health Organization concerning the legal status of any country, territory, city or area or of its authorities, or concerning the delimitation of its frontiers or boundaries. Dotted lines on maps represent approximate border lines for which there may not yet be full agreement.

The mention of specific companies or of certain manufacturers’ products does not imply that they are endorsed or recommended by the World Health Organization in preference to others of a similar nature that are not mentioned. Errors and omissions excepted, the names of proprietary products are distinguished by initial capital letters.

All reasonable precautions have been taken by the World Health Organization to verify the information contained in this publication. However, the published material is being distributed without warranty of any kind, either express or implied. The responsibility for the interpretation and use of the material lies with the reader. In no event shall the World Health Organization be liable for damages arising from its use. The views expressed by authors, editors, or expert groups do not necessarily represent the decisions or the stated policy of the World Health Organization.
TABLE OF CONTENTS

ACKNOWLEDGMENTS 5

INTRODUCTION 6

STANDARD 1: QUALITY SERVICES FOR CHILDREN 8

1.1. All PHC services are based on the best evidence available and staff are adequately trained. 8
1.2. All PHC services delivered are regularly monitored and evaluated. 9
1.3. PHC services have adopted a Charter on Children’s Rights in PHC, in line with the United Nations Convention on the Rights of the Child. 10
1.4. PHC services ensure continuity of care and articulation with key services and institutions working for and with children. 11
1.5. Services for children are designed and delivered taking into account children’s needs and characteristics. 11

STANDARD 2: EQUALITY AND NON-DISCRIMINATION 14

2.1. PHC services fulfil the rights of access of all children without discrimination of any kind. 14
2.2. PHC services deliver a patient-centred care, which recognises not only the child’s individuality and diverse circumstances and needs, but also those of his or her parents or carers. 15
2.3. PHC services ensure the respect of children’s privacy at all times. 16

STANDARD 3: PARENTING 19

3.1. PHC services provide ante-natal and post-natal care for mothers and newborn babies and child care, which complies with a concept of continuity of care for children, starting with pregnancy, through a life course approach. 19
3.2. PHC services support the role of parents and promote health literacy. 21

STANDARD 4: INFORMATION AND PARTICIPATION 24

4.1. PHC services fulfil children’s right to information and participation. 24
4.2. Staff in PHC services have the skills to engage in dialogue and information-sharing with children of all ages and maturity. 25
4.3. PHC services engage with children and parents or carers for the development and improvement of health care services. 27
STANDARD 5: SAFETY AND ENVIRONMENT 29

5.1. The infrastructure of the PHC facility is designed, furnished and equipped to meet children’s health, safety and mobility needs. 29

5.2. Spaces for children are designed and delivered taking into account children’s needs and characteristics. 31

STANDARD 6: PROTECTION (1) 33

6.1. PHC services have in place a system that ensures the protection of children against all forms of violence. 33

6.2. The PHC service ensures that all appropriate staff have the adequate skills to identify, protect, treat and refer children who have been a victim of any kind of abuse or unintentional injury. 33

STANDARD 6: PROTECTION (2) 36

6.1. PHC services have in place a system that ensures the protection of children against all forms of violence. 36

6.2. The PHC service ensures that all appropriate staff have the adequate skills to identify, protect, treat and refer children who have been a victim of any kind of abuse or unintentional injury. 37

6.3. PHC services provide prevention against and treatment for mental ill-health. 37

STANDARD 7: CHRONIC ILLNESS AND OTHER LONG-TERM HEALTH CARE NEEDS 40

7.1. PHC services ensure the management of child chronic illness or other long-term health care needs. 40

STANDARD 8: PAIN MANAGEMENT AND PALLIATIVE CARE 44

8.1. PHC services’ policy and practice ensure the prevention and management of pain. 44

8.2. PHC services’ policy and practice ensure that palliative care is provided to all children who face life-threatening illness. 45

LAST QUESTION 48

TEMPLATE FOR FOCUS GROUP DISCUSSION WITH PARENTS/CARERS 50

Discussion themes 50
ACKNOWLEDGMENTS

The Manual and Tools for the assessment and improvement of children’s rights in primary health care have been prepared by Ana Isabel F. Guerreiro. Its development was carried out in consultation with Ana Margarida Sola, Cristina Gouveia, Natália Correia and Sónia Coelho (ACES Central – Group of primary health care Centres of the Algarve I) (Portugal); Jim Robinson (University of Edinburgh), Janice Allister and Imran Rafi (Royal College of General Practitioners), Andrew Clarke (Lancashire Care Foundation NHS Trust), Anne-Marie Comber (Edinburgh Community Health Partnership) and Jillian Taylor (University of the West of Scotland) (UK); Kristin Wik (Department of Health and care, Enebakk municipality), Kjersti Johanne Fløttten and Einhild Selnes (Akershus University Hospital) (Norway); Sergey Sargsyan, Eva Movsesyan and Marina Melkumova (Arabkir Medical Centre, Institute of Child and Adolescent Health), Anna Balyan (University Clinic Heratsi) and Grigor Nazinyan (Ijevan Policlinic) (Armenia); Vivian Barnekow, Aigul Kuttumuratova and Åsa Nihlén (WHO Europe) and Marcus Stahlhofer (WHO Headquarters).
In the 25 years since the adoption of the Convention on the Rights of the Child (CRC) (1), significant experience and knowledge has been generated in relation to the interpretation of article 24 on children’s right to health and its respect, protection and fulfilment in children’s various life settings. The importance of adopting a human-rights based approach to health is reinforced in the recently adopted WHO Strategy ‘Investing in children: child and adolescent health strategy for Europe 2015 –2020’, which states that “as human rights become better respected, they become more effective in helping governments to strengthen their health systems, deliver health care for all and improve health (2).”Within children’s right to health, the CRC places a great emphasis on primary health care (PHC), which is to be the gateway to pregnant women, mothers, newborns and children throughout their life stages. This is reinforced by General Comment №15 on article 24, which declares that “States should prioritize universal access for children to primary health care services provided as close as possible to where children and their families live, particularly in community settings” (3).

Furthermore, the centrality of the role of PHC within health systems is recognised by WHO in a number of strategies and legal instruments, including the Declaration of Alma-Ata1 (4) and the European policy for health and well-being - Health 2020 (5). PHC is the closest care to the population and most children will have contact with its services and professionals throughout their development, which makes it a privileged setting to invest in. At the same time, PHC services have a great responsibility to provide quality services to children, to give them a voice and to enable them to reach their full potential.

The development of the Manual and Tools for the assessment and improvement of children’s rights in PHC is part of an ongoing process at international level that aims to translate children’s rights as enshrined in the CRC into practical principles and actions that health care services can apply in daily practice. The Manual and Tools should serve as a means of assessment, identification of areas for improvement and of raising awareness on children’s rights of health professionals and other stakeholders working for and with children in the health sector.


In 2012-2013, WHO Europe implemented successfully the tools in hospitals in Kyrgyzstan, Tajikistan and Moldova, in the framework of its work on improvement of hospital care for children (7, 8). This experience demonstrated both the importance and the need to address and assess the respect of children’s rights in healthcare settings. Taking into account the growing recognition of the importance of children’s rights in healthcare and the good acceptance of the Manual and Tools in the aforementioned countries, WHO Europe initiated a process to prepare a similar set of tools on assessing and improving the respect of children’s rights in PHC.

For the preparation of the present Manual and Tools for the assessment and improvement of children’s rights in PHC, working groups were established in Armenia, Norway, Portugal and the UK. Health

---

1 The Declaration of Alma-Ata defines Primary Health Care as essential health care based on practical, scientifically sound and socially acceptable methods and technology made universally accessible to individuals and families in the community through their full participation and at a cost that the community and country can afford to maintain at every stage of their development in the spirit of self-reliance and self-determination. It forms an integral part both of the country’s health system, of which it is the central function and main focus, and of the overall social and economic development of the community. It is the first level of contact of individuals, the family and community with the national health system bringing health care as close as possible to where people live and work, and constitutes the first element of a continuing health care process.
professionals working at different levels of health care service provision gave their inputs regarding the development and applicability of the standards and sub-standards, as well as, the suitability of the questions in their contexts. The development of the Manual and Tools was prepared in consultation with a team at the WHO European Office and Headquarters.

The contents of the Manual and Tools include:

- **Methodology section**, which provides general information about assessment processes and a proposed work methodology for the implementation of the tools in PHC settings;

- **Assessment and improvement tool for management**. Depending on the health system, this group of stakeholders may include managers of a health facility and senior health staff. If the PHC facility is organized under a regional structure, it may also include regional managers or equivalent.

- **Assessment and improvement tool for health professionals**. This group of stakeholders may include any professional working at a PHC facility, from medical to administrative and cleaning staff.

- **Assessment and improvement tool for children aged 6-11**. This tool does not follow the same structure of the remaining tools. It is adapted to young children and aims to assess their overall experience in PHC services. It is made-up of open-ended questions, which enable children to expand on their views and provide suggestions for improvements.

- **Assessment and improvement tool for children and adolescents aged 12-18**. This tool follows the same structure of the tools for management, health professionals and parents and carers. The tool includes a simple template for focus group discussions that can be adapted to groups made up of children or parents and carers;

- **Assessment and improvement tool for parents and carers**. This tool aims to gather the views of parents and other carers. As mentioned above, it also includes a template that can be used for a focus group discussion.
STANDARD 1: QUALITY SERVICES FOR CHILDREN

(Convention on the Rights of the Child, Articles 9, 24 and 31)

All services provided to children aim at delivering the best quality possible health care.

Sub-Standards

1.1. All PHC services are based on the best evidence available and staff are adequately trained.

1.1.1. Do you think that your child received the best health care that is available here?

   Yes □    No □    Not applicable/ don’t know □

   Comments

1.1.2. Do you feel you are included in planning your child’s care?

   Yes □    No □    Not applicable/ don’t know □

   Comments

1.1.3. Have you been given any advice/information about keeping your child healthy in the future?

   Yes □    No □    Not applicable/ don’t know □

   Comments

1.1.3.1. If yes, was this information given verbally or in written/pictorial form? (Please tick)

   □ verbally   □ written   □ pictorial
1.1.4. Has your child seen any professional other than a general practitioner or practice nurse, such as a psychologist, social worker, school nurse or other?

Yes ☐       No ☐       Not applicable/ don’t know ☐

Comments

1.2. All PHC services delivered are regularly monitored and evaluated.

1.2.1. Have you participated in any survey or been asked what you think about the services and care?

Yes ☐       No ☐       Not applicable/ don’t know ☐

Comments

1.2.2. If you have participated in a survey or other programme for evaluating and/or improving health care services for children; did you receive clear feedback about how your contributions were used and/or influenced any outcomes?

Yes ☐       No ☐       Not applicable/ don’t know ☐

Comments

1.2.3. Are you aware whether PHC services have a satisfaction and/or complaints’ mechanism whereby you or your child can make suggestions or complaints?

Yes ☐       No ☐       Not applicable/ don’t know ☐

Comments
1.2.4. Have you ever made a suggestion or complaint?

Yes ☐  No ☐  Not applicable/ don’t know ☐

Comments

1.2.4.1. If yes, did you receive feedback about how your opinion was used?

Yes ☐  No ☐  Not applicable/ don’t know ☐

Comments

1.3. PHC services have adopted a Charter on Children’s Rights in PHC, in line with the United Nations Convention on the Rights of the Child.

1.3.1. Have you or your child been given a copy of a Charter on Children's Rights in PHC?

Yes ☐  No ☐  Not applicable/ don’t know ☐

Comments

1.3.2. Have you seen a Charter or poster displayed in the PHC service about children's rights?

Yes ☐  No ☐  Not applicable/ don’t know ☐

Comments
1.3.3. Has any health professional talked to you about your child’s rights in PHC?

- Yes ☐
- No ☐
- Not applicable/ don’t know ☐

Comments

1.4. PHC services ensure continuity of care and articulation with key services and institutions working for and with children.

1.4.1. If needed, has your child ever been referred to a specialised hospital service?

- Yes ☐
- No ☐
- Not applicable/ don’t know ☐

Comments

1.4.2. If needed, has the school that your child attends ever referred s/he to your local PHC service?

- Yes ☐
- No ☐
- Not applicable/ don’t know ☐

Comments

1.5. Services for children are designed and delivered taking into account children’s needs and characteristics.

1.5.1. If you have an adolescent daughter or son, are you aware whether s/he has ever consulted a doctor or nurse by themselves?

- Yes ☐
- No ☐
- Not applicable/ don’t know ☐

Comments
1.5.2. If needed, has your child ever received specific care to address obesity or malnutrition, mental health, substance abuse or another specific problem?

Yes ☐ No ☐ Not applicable/ don’t know ☐

Comments

1.5.3. Does your child receive immunisation at your local PHC service, in accordance to a national programme and calendar?

Yes ☐ No ☐ Not applicable/ don’t know ☐

Comments

1.5.4. Were you allowed to accompany your child during the length of their visit to the PHC service, including whilst undergoing any procedures?

Yes ☐ No ☐ Not applicable/ don’t know ☐

Comments

Please use this space to record any ideas or evidence
Standard 1: Quality Services for Children

Complementary indicators or information

(Add any complementary indicators or other information, which may be relevant to the PHC facility and was not covered by the questions above)

Additional indicators

(Add existing local PHC facility indicators you may want to consider for the Action Plan)
STANDARD 2: EQUALITY AND NON-DISCRIMINATION

(Convention on the Rights of the Child, Articles 2 and 16)

All children should be able to access health care and undergo any type of care and treatment without discrimination of any kind, irrespective of the child’s or his or her parent’s or legal guardian’s race, colour, sex, language, religion, political or other opinion, national, ethnic or social origin, property, disability, birth or other status.

Sub-Standards

2.1. PHC services fulfil the rights of access of all children without discrimination of any kind.

2.1.1. In your opinion, are there sufficient child care facilities in quantity and quality in the area where you live?

- Yes □
- No □
- Not applicable/ don’t know □

Comments

2.1.2. Do you think PHC facilities are within reach of all children, including children living in isolated areas?

- Yes □
- No □
- Not applicable/ don’t know □

Comments

2.1.3. Have you ever paid for the care that your child has received in PHC services?

- Yes □
- No □
- Not applicable/ don’t know □

Comments
2.1.4. Has your child ever been prevented from receiving the care s/he needed?

Yes ☐  No ☐  Not applicable/ don’t know ☐

Comments

2.1.4.1. If yes, what was the reason?

_________________________________________________________________________________
_________________________________________________________________________________
_________________________________________________________________________________
_________________________________________________________________________________
_________________________________________________________________________________

2.2. PHC services deliver a patient-centred care, which recognises not only the child’s individuality and diverse circumstances and needs, but also those of his or her parents or carers.

2.2.1. Were you and your child treated with respect at the PHC service by all professionals?

Yes ☐  No ☐  Not applicable/ don’t know ☐

Comments

2.2.2. Do the health professionals always use your child’s preferred name?

Yes ☐  No ☐  Not applicable/ don’t know ☐

Comments
2.2.3. If you needed, did the PHC service offer you translation services?

<table>
<thead>
<tr>
<th></th>
<th>Yes</th>
<th>No</th>
<th>Not applicable/ don’t know</th>
</tr>
</thead>
</table>

*Comments*

2.3. **PHC services ensure the respect of children’s privacy at all times.**

2.3.1. Was your child given the opportunity to be examined by a health professional of the same sex, upon your or his or her request?

<table>
<thead>
<tr>
<th></th>
<th>Yes</th>
<th>No</th>
<th>Not applicable/ don’t know</th>
</tr>
</thead>
</table>

*Comments*

2.3.2. Were you and your child given information in a private area?

<table>
<thead>
<tr>
<th></th>
<th>Yes</th>
<th>No</th>
<th>Not applicable/ don’t know</th>
</tr>
</thead>
</table>

*Comments*

2.3.3. Upon diagnosis of your child’s condition, did the health professional discuss with you difficulties she/he may find in his/her daily life, including in school; and how to deal with them?

<table>
<thead>
<tr>
<th></th>
<th>Yes</th>
<th>No</th>
<th>Not applicable/ don’t know</th>
</tr>
</thead>
</table>

*Comments*
2.3.4. Was your child examined in a private area?

Yes ☐  No ☐  Not applicable/ don’t know ☐

Comments

Please use this space to record any ideas or evidence

Standard 2: Equality and non-discrimination

Complementary indicators or information

(Add any complementary indicators or other information, which may be relevant to the PHC facility and was not covered by the questions above)
Additional indicators

(Add existing local PHC facility indicators you may want to consider for the Action Plan)
STANDARD 3: PARENTING

(Convention on the Rights of the Child, Articles 5, 18 and 24)

PHC services support the realization of the mother’s right to health and healthy pregnancy and the role of parents, as a key determinant of children’s health, nutrition and development.

Sub-Standards

3.1. PHC services provide ante-natal and post-natal care for mothers and newborn babies and child care, which complies with a concept of continuity of care for children, starting with pregnancy, through a life course approach.

3.1.1. If you are a mother, have you received family planning, ante-natal and post-natal care at your local PHC service?

Yes ☐ No ☐ Not applicable/ don’t know ☐

Comments

3.1.2. Upon returning home, after delivering your baby, did you or your newborn receive a home visit?

Yes ☐ No ☐ Not applicable/ don’t know ☐

Comments

3.1.3. Have you experienced any ante-natal or post-natal mental health problem, including post-natal depression?

Yes ☐ No ☐ Not applicable/ don’t know ☐

Comments
3.1.4. If yes, have you received mental health support at your local PHC service?

Yes □  No □  Not applicable/ don’t know □

Comments

3.1.5. Have you received any support about exclusive breastfeeding for infants up to 6 months, including awareness raising, counselling and support services, home visits or other programmes?

Yes □  No □  Not applicable/ don’t know □

Comments

3.1.6. Has your child been monitored in terms of adequate nutrition, growth and development in early childhood?

Yes □  No □  Not applicable/ don’t know □

Comments

3.1.7. If you have an older child, has s/he received regular check-ups at your local PHC service?

Yes □  No □  Not applicable/ don’t know □

Comments
3.2. **PHC services support the role of parents and promote health literacy.**

3.2.1. As a parent, have you ever received any type of training during pregnancy or about early childhood and other stages of childhood, including adolescence?

Yes ☐  No ☐  Not applicable/ don’t know ☐

*Comments*

If no, go to question 3.2.4.

3.2.2. If yes, did you find the programme contents relevant and adequate to your needs?

Yes ☐  No ☐  Not applicable/ don’t know ☐

*Comments*

3.2.3. If yes, in your opinion, did you receive an appropriate balance of information, skills, support and resources?

Yes ☐  No ☐  Not applicable/ don’t know ☐

*Comments*

3.2.4. Do you feel confident about how and where to seek health care when your child is in need?

Yes ☐  No ☐  Not applicable/ don’t know ☐

*Comments*
Standard 3: Parenting

Complementary indicators or information

(Add any complementary indicators or other information, which may be relevant to the PHC facility and was not covered by the questions above)
Additional indicators

(Add existing local PHC facility indicators you may want to consider for the Action Plan)
STANDARD 4: INFORMATION AND PARTICIPATION

(Convention on the Rights of the Child, Article 12)

All children receive health-related information and information about their health problem, in ways that are understandable to them, can express their views and participate in decision-making about their care and treatment, in a manner consistent with their evolving capacities.

Sub Standards

4.1. PHC services fulfil children’s right to information and participation.

4.1.1. Did your child receive any information about what PHC-related services are available to them and how to access them whilst you were at the PHC facility?

   Yes ☐  No ☐  Not applicable/ don’t know ☐

   Comments

4.1.2. Has your child received information at their school, community, sports centre or other area and in different formats about what PHC-related services are available to them and how to access them?

   Yes ☐  No ☐  Not applicable/ don’t know ☐

   Comments

4.1.3. Have you or your child participated in the design of health information materials?

   Yes ☐  No ☐  Not applicable/ don’t know ☐

   Comments
4.1.4. Are you aware whether your child has received confidential counselling and advice at your local PHC service?

Yes □  No □  Not applicable/ don’t know □

Comments

4.1.5. In your opinion, do health professionals deliver care in a way that enables your child to make informed choices in relation to his or her lifestyle?

Yes □  No □  Not applicable/ don’t know □

Comments

4.1.6. Have you ever given your written informed consent to any treatment or procedure, which your child received?

Yes □  No □  Not applicable/ don’t know □

Comments

4.2. Staff in PHC services have the skills to engage in dialogue and information-sharing with children of all ages and maturity.

4.2.1. Did the health professionals explain both to you and your child, in a manner which you understood, about his/her condition, i.e. what is happening to them, which treatments are proposed, options that are available, implications of all the options, treatment side effects, and likelihood of discomfort?
4.2.2. Did you and your child understand everything that you were told by the health professionals?

Yes ☐ No ☐ Not applicable/ don’t know ☐

Comments

4.2.3. Do you think that you were given enough information about what is wrong with your child?

Yes ☐ No ☐ Not applicable/ don’t know ☐

Comments

4.2.4. Have you and your child been told that you can ask the health professionals questions?

Yes ☐ No ☐ Not applicable/ don’t know ☐

Comments
4.3. **PHC services engage with children and parents or carers for the development and improvement of health care services.**

4.3.1. Have you or your child ever participated in a consultation or other programme for evaluation and/or improving health care services for children?

- Yes ☐
- No ☐
- Not applicable/ don’t know ☐

*Comments*

4.3.2. If you or your child participated in a consultation or other programme for evaluating and/or improving health care services for children; did s/he receive clear feedback about how his/her contributions were used and/or influenced any outcomes?

- Yes ☐
- No ☐
- Not applicable/ don’t know ☐

*Comments*

4.3.3. Do you feel that your contributions influenced decision-making?

- Yes ☐
- No ☐
- Not applicable/ don’t know ☐

*Comments*

*Please use this space to record any ideas or evidence*
Standard 4: Information and Participation

Complementary indicators or information

(Add any complementary indicators or other information, which may be relevant to the PHC facility and was not covered by the questions above)

Additional indicators

(Add existing local PHC facility indicators you may want to consider for the Action Plan)
STANDARD 5: SAFETY AND ENVIRONMENT

(Convention on the Rights of the Child, Article 3)

All services for children are provided in a safe environment designed, furnished and equipped to meet their needs.

Sub Standards

5.1. The infrastructure of the PHC facility is designed, furnished and equipped to meet children’s health, safety and mobility needs.

5.1.1. If your child has mobility restrictions, was s/he able to access the areas of the building easily, which she/he needed?

Yes ☐ No ☐ Not applicable/ don’t know ☐

Comments

5.1.2. In your opinion, in terms of equipment and materials, does your local PHC service use products that follow safety norms?

Yes ☐ No ☐ Not applicable/ don’t know ☐

Comments

5.1.3. Does the PHC facility have functioning and clean rest rooms?

Yes ☐ No ☐ Not applicable/ don’t know ☐

Comments
5.1.4. Does the PHC facility have uninterrupted electricity?

Yes ☐    No ☐    Not applicable/ don’t know ☐

Comments

5.1.5. Does the PHC facility have a functioning heating system?

Yes ☐    No ☐    Not applicable/ don’t know ☐

Comments

5.1.6. Does the PHC facility have sources of drinking water?

Yes ☐    No ☐    Not applicable/ don’t know ☐

Comments

5.1.7. In your opinion, are the PHC facilities and equipment properly maintained?

Yes ☐    No ☐    Not applicable/ don’t know ☐

Comments
5.2. **Spaces for children are designed and delivered taking into account children’s needs and characteristics.**

5.2.1. In your opinion, are the waiting areas child-friendly, comfortable and welcoming?

- Yes □
- No □
- Not applicable/ don’t know □

*Comments*

5.2.2. Were there play areas for younger children in waiting areas where you have been?

- Yes □
- No □
- Not applicable/ don’t know □

*Comments*

5.2.3. In your opinion, are spaces where children’s appointments take place child-friendly and adequate to meet children’s needs and characteristics?

- Yes □
- No □
- Not applicable/ don’t know □

*Comments*

*Please use this space to record any ideas or evidence*
Standard 5: Safety and Environment

Complementary indicators or information

(Add any complementary indicators or other information, which may be relevant to the PHC facility and was not covered by the questions above)

Additional indicators

(Add existing local PHC facility indicators you may want to consider for the Action Plan)
STANDARD 6: PROTECTION (1)

(Convention on the Rights of the Child, Articles 6, 19 and 39)

Children are protected from all forms of physical or mental violence, unintentional injury, injury or abuse, neglect or negligent treatment, maltreatment or exploitation, including sexual abuse.

Sub Standards

6.1. PHC services have in place a system that ensures the protection of children against all forms of violence.

6.1.1. Have you ever received information about services for children and adolescents who need support against physical or mental violence?

Yes ☐  No ☐  Not applicable/ don’t know ☐

Comments

6.1.2. If your child suffered any kind of abuse, would you know where to go for help?

Yes ☐  No ☐  Not applicable/ don’t know ☐

Comments

6.2. The PHC service ensures that all appropriate staff have the adequate skills to identify, protect, treat and refer children who have been a victim of any kind of abuse or unintentional injury.

6.2.1. Have you ever received advice from your child’s doctor or nurse against corporal punishment of children in the home?
6.2.2. Have you ever received advice from your child’s doctor or nurse for the prevention of child injuries, such as car safety, prevention of drowning, burning or other accidents?

[Yes □] [No □] [Not applicable/ don’t know □]

Comments

Please use this space to record any ideas or evidence
Standard 6: Protection (1)

Complementary indicators or information

(Add any complementary indicators or other information, which may be relevant to the PHC facility and was not covered by the questions above)

Additional indicators

(Add existing local PHC facility indicators you may want to consider for the Action Plan)
STANDARD 6: PROTECTION (2)

(Convention on the Rights of the Child, Articles 6, 19 and 39)

Children are protected from all forms of physical or mental violence, unintentional injury, injury or abuse, neglect or negligent treatment, maltreatment or exploitation, including sexual abuse.

Sub Standards
To be answered by parents/carers whose children have suffered abuse.

6.1. PHC services have in place a system that ensures the protection of children against all forms of violence.

6.1.1. If your child suffered any kind of abuse, do you think s/he was treated in the best way possible here?

- Yes ☐
- No ☐
- Not applicable/ don’t know ☐

Comments

6.1.2. Was the case of your child referred to the social services, the police, child court or any other authority?

- Yes ☐
- No ☐
- Not applicable/ don’t know ☐

Comments

6.1.3. Did your child receive support in the PHC service by a specialised team or worker?

- Yes ☐
- No ☐
- Not applicable/ don’t know ☐

Comments
6.1.4. Have you ever received information on the prevention of child maltreatment and abuse?

Yes ☐  No ☐  Not applicable/ don’t know ☐

Comments

6.1.5. In your opinion, is there an effective system at your local PHC service for the protection and treatment of children against abuse?

Yes ☐  No ☐  Not applicable/ don’t know ☐

Comments

6.2. The PHC service ensures that all appropriate staff have the adequate skills to identify, protect, treat and refer children who have been a victim of any kind of abuse or unintentional injury.

6.2.1. Are you satisfied by the work of the health professional(s) that took care of your child?

Yes ☐  No ☐  Not applicable/ don’t know ☐

Comments

6.3. PHC services provide prevention against and treatment for mental ill-health.

6.3.1. If your child suffers from mental ill-health, has s/he received care at your local PHC service?

Yes ☐  No ☐  Not applicable/ don’t know ☐

Comments
6.3.2. **Was your child’s mental illness detected early and treated accordingly?**

<p>| | | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Yes</td>
<td>No</td>
<td>Not applicable/ don’t know</td>
</tr>
</tbody>
</table>

**Comments**

6.3.3. **Has your child been referred to secondary care for the prevention of relapse or community care in case of long-term mental health problems?**

<p>| | | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Yes</td>
<td>No</td>
<td>Not applicable/ don’t know</td>
</tr>
</tbody>
</table>

**Comments**

*Please use this space to record any ideas or evidence*
Standard 6: Protection (2)

Complementary indicators or information

(Add any complementary indicators or other information, which may be relevant to the PHC facility and was not covered by the questions above)

Additional indicators

(Add existing local PHC facility indicators you may want to consider for the Action Plan)
STANDARD 7: CHRONIC ILLNESS AND OTHER LONG-TERM HEALTH CARE NEEDS

*Convention on the Rights of the Child, Article 23*

All children have the right to individualized, culturally and age appropriate management of chronic illness and other long-term health care needs.

**Sub Standards**

*To be answered by parents/carers, whose children have a chronic illness or other long-term health care need.*

7.1. **PHC services ensure the management of child chronic illness or other long-term health care needs.**

7.1.1. If your child has a chronic illness or other long-term health care need, does s/he receive care at your local PHC service?

<p>| | | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Yes</strong></td>
<td><strong>No</strong></td>
<td><strong>Not applicable/ don’t know</strong></td>
</tr>
</tbody>
</table>

**Comments**

7.1.2. Is the care of your child articulated with speciality care, his or her kindergarten or school and/or a home care programme?

<p>| | | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Yes</strong></td>
<td><strong>No</strong></td>
<td><strong>Not applicable/ don’t know</strong></td>
</tr>
</tbody>
</table>

**Comments**

7.1.3. In your opinion, is your child supported in the management of his or her own illness?

<p>| | | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Yes</strong></td>
<td><strong>No</strong></td>
<td><strong>Not applicable/ don’t know</strong></td>
</tr>
</tbody>
</table>

**Comments**
7.1.4. Has your child received a written care plan for the management of his or her illness?
Has it been revised?

<table>
<thead>
<tr>
<th>Yes</th>
<th>No</th>
<th>Not applicable/ don’t know</th>
</tr>
</thead>
</table>

Comments

7.1.5. Did your child participate in writing the care plan?

<table>
<thead>
<tr>
<th>Yes</th>
<th>No</th>
<th>Not applicable/ don’t know</th>
</tr>
</thead>
</table>

Comments

7.1.6. Has your child been assessed for readiness for transition and provided with a personalised transition care plan?

<table>
<thead>
<tr>
<th>Yes</th>
<th>No</th>
<th>Not applicable/ don’t know</th>
</tr>
</thead>
</table>

Comments

7.1.7. Have you been provided support as a parent to deal with the chronic illness of your child?

<table>
<thead>
<tr>
<th>Yes</th>
<th>No</th>
<th>Not applicable/ don’t know</th>
</tr>
</thead>
</table>

Comments
Please use this space to record any ideas or evidence

Standard 7: Chronic illness and other long-term health care needs

Complementary indicators or information

(Add any complementary indicators or other information, which may be relevant to the PHC facility and was not covered by the questions above)
Additional indicators

(Add existing local PHC facility indicators you may want to consider for the Action Plan)
STANDARD 8: PAIN MANAGEMENT AND PALLIATIVE CARE

*(Convention on the Rights of the Child, Article 24)*

All children have the right to individualized, culturally and age appropriate prevention and management of pain and palliative care.

Sub Standards

8.1. **PHC services’ policy and practice ensure the prevention and management of pain.**

8.1.1. Was your child in pain here?

Yes ☐  No ☐  Not applicable/ don’t know ☐

*Comments*

8.1.2. Was your child given any treatment for this pain?

Yes ☐  No ☐  Not applicable/ don’t know ☐

*Comments*

8.1.3. Has anything else been done to make your child feel more comfortable (apart from medicine)?

Yes ☐  No ☐  Not applicable/ don’t know ☐

*Comments*
8.1.4. Did the health professionals ask your child if s/he was in pain?

Yes ☐  No ☐  Not applicable/ don’t know ☐

Comments

8.2. PHC services’ policy and practice ensure that palliative care is provided to all children who face life-threatening illness.

To be answered by parents/carers, whose children have received palliative care.

8.2.1. If needed, has your child received palliative care at your local PHC service or in your home?

Yes ☐  No ☐  Not applicable/ don’t know ☐

Comments

8.2.2. Did your child’s palliative care begin once the illness was diagnosed and continued regardless of whether or not s/he received treatment directed at the illness?

Yes ☐  No ☐  Not applicable/ don’t know ☐

Comments

8.2.3. Were you or other members of your family referred to psychological support?

Yes ☐  No ☐  Not applicable/ don’t know ☐

Comments
8.2.4. Was the palliative care your child received articulated with hospital or home programmes?

Yes ☐  No ☐  Not applicable/ don’t know ☐

Comments

Please use this space to record any ideas or evidence

Standard 8: Pain management and palliative care

Complementary indicators or information

(Add any complementary indicators or other information, which may be relevant to the PHC facility and was not covered by the questions above)
Additional indicators

(Add existing local PHC facility indicators you may want to consider for the Action Plan)
**Last question**

| What have been the good things about the services provided here? |

| What have been the bad things about the services provided here? |
What ideas do you have that could make good changes here for children?

THANK YOU

Printed name and initials of Interviewer ____________________________________________

Post held ________________________________________________________________

Signature of Interviewer ______________________________ Date ______________________
Children’s rights in primary health care

Template for Focus Group discussion with parents/carers

The template for Focus Group discussions with parents/carers focuses on what is good or not good about the services provided to children in specific PHC facilities. It includes discussion themes for each standard of the assessment and improvement tools.

Date ____________________________________________

Country ____________________________________________

Health facility ____________________________________________

Clinical area ____________________________________________

Number of parents/carers ____________________________________________

Gender:  Number of □ Male  Number of □ Female

Rules and boundaries of the group discussed and agreed:

□ Yes  □ No

Discussion themes

• What is good here?

• What is not good?

• **Quality Services for Children** — do you think your child receives good quality care; making suggestions and complaints about services; learning about children’s and parent’s rights in PHC

• **Equality and non-discrimination** — feeling welcome here; being treated equally; having privacy, dignity and being respected

• **Parenting** — receiving information about how to take care of children; children receiving care throughout their various ages and stages

• **Information and participation** — receiving information; being consulted about making decisions about our own health; giving opinion about the services received and how to improve them

• **Safety and environment** — moving around the health service; friendly spaces; friendly services

• **Protection** — being safe and feeling safe
• **Chronic illness and other long-term health care needs** — receiving care for chronic illness
• **Pain management and Palliative Care** — receiving care for things that make children upset and uncomfortable
• Ideas for things that would make it better here.

Please record the findings below:

*Record of Focus Group discussion and summary of key points raised*
The WHO Regional Office for Europe

The World Health Organization (WHO) is a specialized agency of the United Nations created in 1948 with the primary responsibility for international health matters and public health. The WHO Regional Office for Europe is one of six regional offices throughout the world, each with its own programme geared to the particular health conditions of the countries it serves.

Member States

Albania
Andorra
Armenia
Austria
Azerbaijan
Belarus
Belgium
Bosnia and Herzegovina
Bulgaria
Croatia
Cyprus
Czech Republic
Denmark
Estonia
Finland
France
Georgia
Germany
Greece
Hungary
Iceland
Ireland
Israel
Italy
Kazakhstan
Kyrgyzstan
Latvia
Lithuania
Luxembourg
Malta
Monaco
Montenegro
Netherlands
Norway
Poland
Portugal
Republic of Moldova
Romania
Russian Federation
San Marino
Serbia
Slovakia
Slovenia
Spain
Sweden
Switzerland
Tajikistan
The former Yugoslav
Republic of Macedonia
Turkey
Turkmenistan
Ukraine
United Kingdom
Uzbekistan