

YOUTH HEALTH CARE AND ITS PROFESSIONALS. INDISPENSABLE COOPERATION OF DOCTORS, NURSES, NURSE PRACTITIONERS AND ASSISTANTS.

WHAT ABOUT YOUR COUNTRY?

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Program

- Introduction
- At work! Which professionals work within YHC in the different countries?
- At work! Sharing strengths of the different disciplines
- At work! How to strengthen the quality of care by better cooperation between disciplines
- The Dutch Position Paper

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Introduction (1)

>17 milion inhabitants
Language: Dutch
Densely populated
388 municipalities
Immigration

29% < 25 yr
Obligation school
5 - 16/18 yr



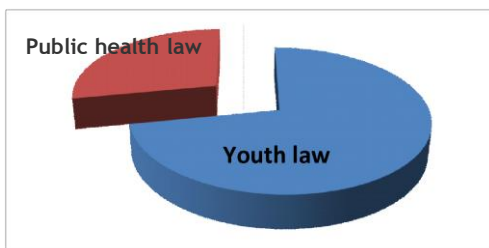
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Introduction YHC (2)

- Exists more than 110 years
- 0-18 years, longitudinal care
- 15 routine assessments
- Specialized doctors and nurses, doctors assistants
- Individual care: immunization, screening, physical examination, giving advice and minor interventions

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Finance YHC



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Developments

- Collective care: i.e. school assistance
- Regional advice local government
- Local and regional collaboration
- Customization, YHC more flexible
- Digital patient files, E-health
- Focus on 'self-help'
- Triage and shift of tasks



Cost-effectiveness (1)

- 2012: Kosteneffectiviteit van de jeugdgezondheidszorg. Actiz.
 - Mainly physical health.
 - Every euro invested in good youth health care, saves €11 for later costs of care.



Cost-effectiveness (2)

- 2013: Investeren in opvoeden en opgroeien loont. Actiz/GGD NL.
 - Mainly educational and psychological problems.
 - Every euro invested in preventive youth health care, three to fifty times.



Which professionals work within YHC

At work!

- Small groups per country/ individual
- Fill in the format YHC:
 - in preschool, school or integrated?
 - Preventive and/ or curative?
 - Special tasks?
- Profs:
 - Which professionals (plus) and level of education?
 - How do professionals work together?



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Strengths of the different disciplines

At work!

- Specific strenght of doctor, nurse, nurse practitioner, assistant?



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Strengthen the quality of care

At work!

- Focus on:
 - cooperation between disciplines
- Discussion in small groups
- What is important for quality of care?
- How can professionals **together** improve quality?



The Dutch position paper

Together for Youth (2016)



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Worries

- Attention to healthy / safe growing, positive health not yet visible everywhere
- Shift from heavier care to prevention – but cuts to prevention
- Task shift not based on occupational considerations
- Municipalities and management want to influence content and execution

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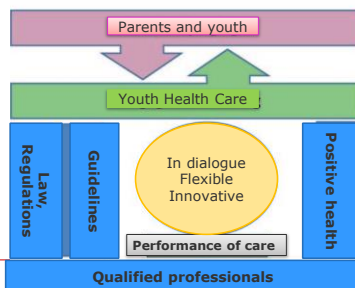
Motto

- The JGZ has been shining for over 100 years.

This preserves, requires continuous investment in quality and in the basic conditions for performance.



Professionals as foundation



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Our unique power

- Expertise about the healthy growing child within and outside the context of the family, which allows prevention, early signaling and normalization (do not take care if not needed).
- Our goal is to encourage parents and young people to live and (live) manage (on) their own lives

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Our common strength

- Social medical / nursing knowledge and skills
- AND!
 - Working from own expertise, responsibility and specific field of study
 - Vote mutually by mutual agreement
 - Are complementary
 - Know own limits (grey area)
 - Important to know expertise of the other

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Shared areas

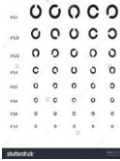
- Collective prevention
- Preparation of health profiles
- Policy advice research
- Link with education, social domain including youth care and curative health care
- From the own background examination, physical and psycho-social

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Colour assistant



- ...is strong in performing protocol-based screening / triage and other delegated tasks such as giving information and transmitting signals to YHC-doctor and -nurse.



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Colour YHC doctor



- ...focus on public health as a healthcare provider, on social and psychiatric diagnosis and on the detection or exclusion of medical problems in the child, within the context of the family and the surrounding environment.
- The YHC doctor monitors health at the collective level with a social-medical view.

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Colour YHC nurse



- ...focus on supporting self-management, parenting, promoting healthy behavior and lifestyle, providing short-term support and possible preventive interventions from the youth act.
- For example, at the target or population level, the youth nurse initiates and performs education programs and interventions.

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Colour nurse practitioner



- ...offers in addition to regular and complex nursing care, patented medical care within her own field of expertise. The focus is mainly on the integration of both. She can respond flexibly and quickly, thus providing continuity of care.
- This method is especially beneficial in specific (vulnerable) target groups and / or specific neighborhoods.

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Conditions for professionals as foundations



- Sufficient specialized professionals
- Focusing on basic education and space for expertise including periodic review of skills, intervision and reflection on each other
- Space for dialogue with organizations, parents of youth and chain partners
- Space for innovation, non-client-related care and policy information
- Guarantee for the use of specific prevention activities

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Conclusion (1)



- Keeping the YHC gold shining calls for continued investment and continuous attention to the quality of performance. The effort and cooperation of YHC-doctors, -nurses, nurse practitioners and doctor's assistants together form the strength and shine of this foundation.



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Conclusion (2)

- The condition is that municipalities, YHC organizations and YHC profs themselves take their responsibility to meet the mentioned conditions.



Only then can we guarantee a good basic provision for the youth of the Netherlands!