

Evidence from Royal College of Paediatrics and Child Health – LGY 07 / Tystiolaeth gan Coleg Brenhinol Pediatreg ac Iechyd Plant – LGY 07

Re: Response to the Health & Social Care Committee Legacy inquiry
September 2015

Dear David Rees AM

I am responding to the inquiry as Officer for Wales for the Royal College of Paediatrics and Child Health.

About RCPCH

The Royal College of Paediatrics and Child Health is responsible for training and examining paediatricians in the UK. The College has over 16,000 members in the UK and internationally (around 650 in Wales), and sets standards for professional and postgraduate medical education. RCPCH also works to:

- Engage with the media, government, policymakers, NHS, charities and other stakeholders.
- Improve child health through research, standards, quality improvement and policy.
- Provide educational programmes for paediatricians and child health professionals.
- Improve global child health.

Please see the attached responses to the H&SC Committee's questions.

Yours sincerely,

Dr Mair Parry
RCPCH Officer for Wales
Chair of the Paediatric & Child Health National Specialist Advisory Group
President of the Welsh Paediatric Society

Response to consultation questions

Name:	Dr Mair Parry
Are you responding as an individual or on behalf of an organisation?	On behalf of RCPCH Wales
Organisation (and role if applicable):	Officer for Wales for the Royal College of Paediatrics and Child Health (RCPCH)

Question 1

Thinking about the past five years, in your view:

- to what extent has the Health and Social Care Committee had an impact on health and social care in Wales?

Not answered

- what has been the Committee's biggest achievement?

The H&SC Committee has had a very large workload this Assembly term with existing duties combined with major pieces of primary legislation for the first time. Assembly Members and committee staff have performed well especially given the relative shortage of resources available to carry out this work.

- if the Committee could have done one thing differently, what would it be, and why?

To consider the health and wellbeing impact children and young people in all inquiries – even those not specifically about 'children's issues'. As the Welsh Government increasingly adopts a 'people model' in its policymaking the specific circumstances of children and young people should always be considered. When the committee has looked at these issues - and with the help of children's advocacy organisations - its findings have been very helpful, e.g. report on post-legislative scrutiny of the Mental Health (Wales) Measure 2010 (January 2015).

- has the Committee's work struck the right balance between scrutiny of policy, finances and legislation?

Not answered

Question 2

Looking ahead to the next five years, in your view what will be the three biggest challenges for health and social care in Wales?

1. Workforce strategy

The H&SC will be aware of increasing pressure on hospital services because of rising admissions and not enough care delivered in the community. Paediatric services are experiencing this trend too. Wales also has the second highest UK vacancy rates on tier 2 rotas (over a quarter of posts vacant). RCPCH's rota vacancies survey¹ found almost two thirds of units responding to the survey were very concerned about the future. Addressing these vacancies and the failure to recruit to available posts is a considerable challenge and is also shared by other specialist services such as psychiatry and general practice. There also needs to be more progress on moving care outside hospitals, such as expanding the number of GPs trained in paediatrics and the number of registered children's nurses.

Vacancies are an emerging threat to patient care and safety in many inpatient units and compromises training for many junior and middle grade doctors. The situation is also a major factor in recent reconfiguration debates in Wales, where a shortage of staff in medical specialties is causing problems for Local Health Boards' delivery of maternity, paediatric and neonatal services. RCPCH Wales is calling for a workforce strategy to set a vision for future healthcare services for Wales and to provide for the required healthcare professionals to do this. H&SC consideration of the wider issues of recruitment, retention and training of healthcare professionals would be welcome during the next Assembly term.

2. Health inequalities

Several health indicators show concerning trends for Wales. The challenge for Wales will be to use the right mix of evidence-based interventions (e.g. legislation, education, policy etc) to promote good public health and reduce inequalities. The indicators include:

- Childhood obesity: Public Health Wales' child measurement programme's 2013-14 report found a strong relationship between obesity and deprivation. 28.5% of children living in the most deprived areas of Wales were overweight or obese, compared to 22.2% in the least deprived areas.
- Child mental health: the World Health Organisation concluded that mental health difficulties are most pronounced in countries like Great Britain, which have high levels of income and social inequality.² RCPCH Wales evidence to the committee during this Assembly term highlighted a quote by a paediatrician based in a district

¹ <http://www.rcpch.ac.uk/improving-child-health/better-nhs-children/workforce-planning/workforce-studies-and-data/rota-compli>

² http://www.euro.who.int/__data/assets/pdf_file/0012/100821/E92227.pdf

Charity in England and Wales: 1057744 Registered charity in Scotland SCO38299

general hospital who reported one or two admissions per day that needed input from Child and Adolescent Mental Health Services.³

- Child mortality: RCPCH's Why Children Die report highlighted that children in the most deprived parts of Wales were almost twice as likely to die as those in the least deprived.⁴ The causes are complex and there are different challenges for the two 'risk groups' (neonatal and adolescent deaths) that will require a mix of healthcare and social interventions.

3. Prevention and early intervention

Many of the wider determinants of (child) health lie outside the NHS and social care services. Aligning other policy areas' approach to promote good health will be a challenge. For example:

- Using new devolved tax and borrowing powers to promote health.
- Reforming local planning and community involvement in public health to promote physical activity and healthy living.
- Improving use of education to promote health, such as personal and social education.
- Giving non-healthcare professionals the skills and knowledge they need to support children's wellbeing, e.g. basic mental health support training for all adults who work closely with children and young people.

³<http://www.senedd.assembly.wales/documents/s24674/CAM%2019%20Royal%20College%20of%20Paediatrics%20and%20Child%20Health%20Wales.pdf>

⁴ RCPCH, Why Children Die, <http://www.rcpch.ac.uk/improving-child-health/child-mortality/child-mortality>
Charity in England and Wales: 1057744 Registered charity in Scotland SCO38299