



In partnership with

# Working together to improve child health in Wales

#### **June 2025**

The child health workforce consists of a diverse group of expert health professionals, practicing in both Welsh and English, each specialising in different aspects of child and adolescent health. These professions frequently work across different settings including health, education, social care and social justice. Often, they come together to form a multi-disciplinary team (MDT), and bring together their expertise to review a child's condition, plan ongoing management and ensure the child received the best personalised care in a timely way.

The Welsh Royal Colleges Child Health Collaborative (WRCCHC) convened by the Royal College of Paediatrics and Child Health (RCPCH) Wales, brings together over 20 Royal Colleges and professional bodies with the aim to improve the health and wellbeing of children and young people in Wales. Below are just some of the professions we represent and how they deliver for children, young people and their families.

#### Dentists and oral health professionals

Paediatric dentists focus on children's oral health, including prevention and treatment of dental problems like tooth decay, guiding proper oral hygiene practices and ensuring healthy development.

#### **Dieticians**

Paediatric dietitians are trained to provide specialised nutritional care to infants, children and young people taking into account their age, condition and growth requirements. They may have specific areas of expertise for certain conditions, such as kidney disease (renal dietitians).

# **General Practitioners (GPs)**

GPs play a central role in supporting child development and health. They care for children and their families, often over many years and this longitudinal, relationship-based care enables them to recognise problems at an early stage and so signpost families to help and support when needed.

GPs care for mothers during pregnancy, following delivery, through the early postnatal and baby checks. They give vaccinations and support parents to gain confidence in understanding healthy weight, physical activity, emotional development and managing self-limiting childhood. When there are concerns, GPs liaise with health visitors, school nurses, secondary care, social care and safeguarding teams to ensure a full picture of the family is appreciated.

#### Health visitors and school nurses

Health visitors and school nurses promote the health and wellbeing of children and families and support early childhood development. They are specialist community public health nurses: registered nurses or midwives who have undertaken additional master's level education in public health.

Health visitors work closely with parents, from pregnancy through the early years of a child's life, providing advice and guidance on issues such as nutrition, breastfeeding and sleep routines and monitor a child's development. School nurses are crucial in continuing health promotion during childhood, through immunisations and health education. Both are often one of the first professionals to identify risks to a child's welfare and work closely with social services and safeguarding teams to protect vulnerable children. Part of their roles, combined with the broader children's workforce, is to lead the delivery of the Healthy Child Wales Programme, a framework of targeted and universal approaches to CYP wellbeing.

#### **Nurses supporting school attendance**

Ysgol Cwm Brombil is a 3-18 'super school' in Port Talbot. The school employs two nurses - one full-time Specialist Community Public Health Nurse (SCPHN) and one Registered. They run a dedicated sexual health clinic, and a consultant-led diabetes clinic also takes place at the school. They made over 4,000 contacts with pupils in 2023. Emphasis is put on health education, teaching self-care, mirroring the NHS 'Choose Well' campaign.

Attendance is often used as a way to gauge wellbeing. Having a health professional on site, allows for the 'unpicking' of the reasons for poor attendance. This may be through a conversation with a child as to why they want to go home on a regular basis; or about working with the family to enable their child to have the support they need to return and remain in school. When dealt with in this way, on average only 6% of pupils need to be sent home.

The Children's Commissioner for Wales has worked with Ysgol Cwm Brombil to produce videos explaining the service and impact: <u>learners at YCB talking about the health offer</u>

#### **Midwives**

Midwives have a foundational role in supporting child development and health through comprehensive care for mothers and newborns during pregnancy, birth and the postnatal period. They provide crucial antenatal care, promote maternal health and identify potential risks, such as gestational diabetes and preeclampsia, which can affect foetal development.

Through education and support, midwives help parents to understand the importance of nutrition, mental health, and early bonding, laying the groundwork for a child's healthy development.

#### **Occupational Therapists (OTs)**

OTs support children and young people (CYP) to do the activities they need, want or are expected to do, but that are challenging due to physical, learning or mental health needs, illness or social circumstances. They are an integral part of rehabilitation programmes. OTs help by finding different ways of doing things, teaching new skills, providing equipment or adapting the environment to make it easier for young people to participate and achieve.

#### Occupational Therapy: enabling school inclusion

Occupational therapists (OTs) work with every school in Neath Port Talbot offering advice, support and training to school staff as well as providing targeted interventions for specialist settings. In 2022-23, OTs working in educational settings in NPT provided 219 direct advice clinics to staff in schools; 30 training sessions for 690 staff; 73 school visits to specialist provision and social schools

They support teachers to notice dysregulation issues and issues related to school engagement and attendance such as anxiety, difficulties with dressing, poor organisational skills and developmental concerns.

On average there has been a reduction of referrals from teaching staff into health OT by around 60% and as well as a positive impact on school attendance. As far as we are aware, there are no other models of this kind currently in operation in Wales.

More information can be found here

# **Ophthalmologists**

Ophthalmologists diagnose, treat and manage eye conditions that can impact vision and overall development. They often work closely with schools, paediatricians and other specialists to identify vision problems early.

#### **Paediatricians**

Paediatricians are medical doctors who treat infants, children and young people. Paediatricians are dedicated to promoting the health and well-being of children, addressing their health needs, and take a holistic approach to monitoring children and young people's growth and development. Paediatricians range from trainees starting their paediatric journey to Specialist, Associate Specialist and Specialty (SAS) doctors working at all levels, locally employed doctors, and consultants who are the senior leaders in teams.

Paediatricians work across the full breadth of child health, with some being general paediatricians whereas others are experts in a particular sub-specialty, for example, community paediatrics, intensive care, respiratory medicine and oncology - see the **full list of sub-specialties**.

#### 111 offer for children under the age of 16

Paediatric consultants are working within 111 to provide timely access for children under 16 to an appropriate clinician, helping to reduce onward referrals to Emergency Departments and Primary Care across Wales. During the first 15 weeks, over 500 children were supported, with 64.9% of cases being closed by offering advice.

More information can be found here

#### **Paramedics**

Paramedics provide critical care during emergencies. Their rapid response skills are vital in acute situations, such as severe allergic reactions, asthma attacks, trauma, or seizures, which, if not managed promptly, could have long-term impacts on a child's development and health outcomes.

Beyond emergency care, paramedics are increasingly involved in preventative and early intervention work, such as identifying signs of neglect, abuse or undiagnosed medical conditions during home visits.

#### **Pathologists**

Pathologists analyse biological samples to diagnose diseases, genetic conditions and infections, enabling early intervention and personalised care that support's a child's physical and developmental health. Neonatal screening programmes are often led by pathologists. They also support the investigation of development delays and work closely with paediatricians on treatment plans. And they have a key research role, contributing to advancements in understanding childhood diseases, which informs new treatments.

#### **Pharmacists**

Paediatric pharmacists are experts in medications and prescribing. They are fundamental to ensure that prescribing for children is both safe and effective. They provide advice about optimum drug choices to be used in a given clinical situation, the potential side effects of medications and any required drug monitoring. They also carry out structured medication reviews for children with ongoing health problems and collaborate with the patient and their parents to deliver education and improve compliance. This education may involve supporting children to swallow tablets and advice to families on how to store medications at home.

#### KidzMedz Cymru

KidzMedz Cymru is designed to teach CYP over the age of five how to safely swallow tablets and capsules. Pills offer numerous advantages over liquid medications for patients, carers, and healthcare professionals. For children, they are less sickly, contain less sugar, and can improve adherence to medication. Carers benefit from their longer shelf life, ease of storage and transport, and greater availability in pharmacies. Prescribers can reduce errors and issue larger quantities, while pharmacists find pills more commonly stocked than liquid alternatives.

The programme follows an evidence-based six-step technique where children choose a preferred drink—water or sugar-free juice—and gradually progress through different-sized sweets to practice swallowing. Once they successfully and confidently swallow tablets or capsules, they receive an education kit containing a pill packet, water bottle, and certificate. Parents and carers also receive an information leaflet to support the transition.

More information can be found here

#### **Podiatrists**

Paediatric podiatrists have a wide range of skills to successfully manage children experiencing foot and lower limb pain, including conditions such as childhood arthritis, prematurity and neuro-developmental challenges, all of which can make children less active than their healthy peers. Foot impairments and disability can persist into adulthood, and it is important that more serious joint pains are spotted early, such as juvenile arthritis, where 60% of children have problems as adults. Access to podiatry supports children to develop healthy habits towards exercise and activity that can support longer term health and wellbeing.

#### The QuickChange project, Cardiff and Vale UHB

Cardiff and Vale University Health Board's Children's Podiatry team had observed increasing rates of obesity and inactivity among patients. The QuickChange project developed from a desire to do something to tackle this and promote the health of future generations. The initial pilot used podiatric expertise to develop a short animation with age-appropriate motor skills activities, stretching and strengthening exercises that could be done in the classroom. This was rolled out to 5 primary schools, with positive feedback. The plan is to spread and scale the project, but also diversify and extend the resources, for example for early years settings.

More information can be found here

## **Psychiatrists**

Child and adolescent psychiatrists work with children and young people up to the age of 18 to identify and treat a wide range of mental health conditions, including emotional and psychiatric issues. Mental ill-health in childhood can have an enormous impact on a person's development. By treating and curing CYP with mental health problems, not only can pain be quelled, but whole life trajectories can be altered. Identifying disorders early allows for timely intervention, which can increase the chances of successful treatment and prevent issues from becoming more severe and enduring.

Most of the work of a CAMHS psychiatrist takes place in outpatient settings and clinics, though there are some inpatient settings which provide care for individuals with more complex needs. They work as part of a multidisciplinary service that includes other child mental health professionals, and frequently liaise with external agencies, such as schools and social services. In comparison to paediatrics, with which it has a large cross-over, child and adolescent psychiatry is undersubscribed. This is resulting in too many children and young people experiencing a deterioration in their mental health while on waiting lists.

#### 111 press 2 service (MH111#2)

Launched in June 2023, the 24-hour seven-day-a-week service provides urgent mental health support by connecting callers with a mental health professional in their local health board area. Data from the Royal College of Psychiatrists (to 16 June 2024) shows that a total of 101,450 calls were made to MH111#2 since its launch, of which 4,257 were from CYP (under 18 years old). A greater proportion of children and young people that call is female than male (44.5% female compared to 25.4% male), with the gap increasing in 16–17-year-olds (68.9% female compared to 27.6% male).

The service is effective at reducing caller distress, as measured by the Subjective Units of Distress Scale (SUDS). Developed in 1969, SUDS is a tool for measuring the intensity of distress, psychological disturbance and painful feelings. The scale ranges from 0 to 10, with zero indicating no distress and 10 being the most intense distress a person can experience. Data up to 31 May 2024 shows that 99.7% of under 18 callers reported that their distress had reduced by calling MH111#2. The average SUDS score for under 18s at the start of a call was 6.4; by the end of the call, this had reduced to 4.8.

More information can be found here

#### **Psychologists**

Psychologists work in a variety of settings to reduce psychological and physical distress and enhance the promotion of psychological well-being. They promote healthy lifestyles in the general population, with a focus on prevention of illness and disability. They provide CYP support to manage the challenges of their mental and physical conditions in healthcare settings. They also work with schools, local authorities and communities, supporting children and their families to adjust to a new diagnosis or circumstance.

# Neath Port Talbot Council's (NPT) 'Community Early Years Educational Psychology Circles of Support' model

The model is designed to meet the psychological needs of all children across the whole of NPT, and not just those requiring psychological advice as part of the statutory assessment. It uses a holistic approach that is tailored to support the individual strengths and the needs of each child and family, with a focus on what the child 'can do' to help provide advice on what they 'may need support for'. This model also empowers the adults who are important for the child to make positive changes to their development, learning, and wellbeing.

Multi-agency work and collaboration within the community (either physically or with the community that surrounds the child/family) is key to supporting this work. Feeback and data on the implementation of the model suggests that earlier, and more systemic support is helping to ensure less support is required at a more complex, individual level.

More information can be found here

#### Aneurin Bevan UHB - Recovering from Illness service (RFI)

In response to an increase in the rates of COVID in children and young people, and a recognition that many children were suffering long covid symptoms, ABUHB developed their psychology-led recovering from illness (RFI) multidisciplinary team (MDT). Of those children reporting a variety of symptoms (eg. respiratory problems, dizziness, muscle weakness, chest pains, fatigue), 50% were not attending school as normal, and almost 10% said their ability to carry out day to day activities was significantly reduced.

ABUHB developed a holistic and multi-disciplinary RFI pathway, led by paediatric psychology, providing universal, targeted and specialist services. They have developed a series of resources that children and families can access from Education Hwbs, GP surgeries, Post-Covid Recovery for Children website (ABUHB), and the Healthier Together (ABUHB) website. The service offers case consultation to GPs to support their management of CYP with long covid. Their specialist level of services offers an MDT assessment and menu for RFI interventions personalised to the individual child or young person.

Evaluations of the service has been very positive, and the service now has grown to support children with chronic pain and other long-term illnesses.

#### Safe alternatives to hospital admission for children and young people in crisis: Sanctuary Pilot Project

Health boards have been testing projects aimed at preventing or reducing the deterioration in a young person's emotional, behavioural or wellbeing in crisis. Hywel Dda, Aneurin Bevan and Swansea Bay health boards have developed sanctuary services which are safe spaces for CYP who would otherwise end up in Emergency Departments or on a Mental Health ward. Support teams provide therapeutic interventions and clinical assessments where necessary.

Cwm Taf, Betsi Cadwaladr and Powys health boards are developing their own crisis sanctuaries or community-based hubs.

More information can be found here

# **Physiotherapists**

Paediatric physiotherapists help children whose movement and development is affected by injury, illness or disability through movement, exercise, manual therapy and advice. They are experts in child development and work collaboratively with children and their families to maximise a child's physical abilities and independence.

# Hywel Dda University Health Board- improving the patient journey for paediatric musculoskeletal problems

It was identified that there were unnecessary referrals of children with musculoskeletal concerns to orthopaedic teams, or a paediatric consultant, rather than paediatric allied health professionals. This was having an adverse effect on waiting times and increases costs due to multiple appointments with various teams. Hywel Dda revised their pathways to allow triage of referrals to paediatric physiotherapists and podiatry, for more timely assessment, diagnosis and intervention.

The impact of this is an estimated 70% reduction in referrals to the orthopaedic consultant surgeon and consequently a reduction in waiting times. As well as the quality benefits, the estimated cost savings were over £7,000 a year.

#### **Speech and Language Therapists**

Speech and language therapists (SLTs) help to assess and manage children and young people who have difficulties with communication, eating, drinking and swallowing. They work closely with families, educators and other healthcare professionals to create tailored intervention plans and provide guidance to parents and caregivers to support their child's progress. They make a significant contribution to the prevention of long-term communication difficulties, improving educational outcomes, social integration, and mental health for children.

#### **Speech & Language Therapists in Youth Justice Multi-Agency Teams**

There is strong international evidence that the incidence of speech, language and communication needs (SLCN) is much more prevalent in the offending population than in the general population. The most recent statistics from the Youth Justice Board revealed that 71% of children sentenced in the youth justice system in England and Wales (Apr 19 - Mar 20) had SLCN. This compares to an estimated 10% for CYP as a whole.

Speech and Language Therapists (SLTs) are an integral part of the Youth Justice Multi Agency Team, providing assessment and intervention to CYP. In 2023-24, 89% of young people known to the Neath Port Talbot Youth Justice Service were identified as struggling with understanding and expressing themselves. This can hinder their ability to engage in legal processes and rehabilitation programs effectively. Despite this, 93% of CYP referred to the speech and language therapy service in NPT YJS had not previously been identified as having SLCN. The speech and language therapy service aims to help reduce the impact of these difficulties on the wellbeing of CYP and to allow them to participate fully in daily life, including education, training and to help reduce offending behaviour.

As well as offering assessment and interventions SLTs in youth justice provide training to the wider team to raise awareness of speech, language and communication difficulties in the CYP they work with and how best to support these. They also develop and adapt resources in order to make them more accessible and therefore effective.

More information on speech, language, and communication needs in youth justice can be found **here** 

#### **Surgeons**

Paediatric surgeons are doctors who are trained to undertake surgical procedures specific to babies, children and adolescents. They usually perform surgery on a specific part of the body. This includes orthopaedic, general surgery or ENT (ear, nose and throat) surgery.

#### Radiographers

Diagnostic radiographers use advanced imaging equipment to look inside a person's body to help diagnose and understand an illness or injury. Therapeutic radiographers use complex and advanced equipment to plan and deliver radiation treatment to treat cancer patients. They support patients throughout their radiotherapy treatment pathway.

#### **Radiologists**

Radiologists are doctors who are trained to interpret and direct the use of medical imaging such as X-rays, Computed Tomography (CT), Magnetic Resonance Imaging (MRI) and ultrasounds to help diagnose and treat diseases and injuries.

### **Registered nurses**

Children's nurses are registered nurses who have completed an undergraduate degree and/or postgraduate education in children's nursing. Children's nurses work in settings ranging from emergency departments, acute assessment units, general paediatric wards, neonatal units, and sub-specialty wards to the community and continuing care settings. Mental health nurses can also specialise in working with children and adolescents as a Child and Adolescent Mental Health Nurse by completing a postgraduate qualification.

Children's nurses can specialise in a vast array of areas encompassing all four pillars of advanced practice: clinical practice (e.g., Advanced Nurse Practitioner), research (e.g., Research Nurse), education (e.g., Practice Educator) and leadership (e.g., Ward Manager/Matron). Clinical Nurse Specialists are a further example. These expert nurses have specialist skills and knowledge in a particular area, such as paediatric rheumatology or paediatric gastroenterology. They provide education and training alongside practical and emotional support. They are often a patient and their family's key point of contact through treatment.

# Paediatric advanced clinical practitioner

These are health practitioners, such as a nurse, pharmacist or occupational therapist, who are educated to a Master's level or equivalent. They can assess, diagnose and initiate treatment in children and young people within their scope of practice. They may also take on key roles in leadership, management, governance, research and education.

#### **About the WRCCHC**

The WRCCHC is a collaboration led by the Royal College of Paediatrics and Child Health (RCPCH) Wales of over 20 Royal Colleges and professional bodies. We have come together to improve the health and wellbeing of children and young people in Wales.

The Collaborative is also a platform by which member organisations can share information, engage with stakeholders and campaign for the prioritisation of child health in Wales, using expert insight from clinicians and policy leads.

#### **Our shared objectives**

- Improve child health outcomes: Tackle health inequalities and address physical and mental health issues as early as possible in order to avoid more complex and longerterm challenges for the individual and for the NHS.
- Workforce planning: Greater investment in the recruitment, retention and training of the child health workforce across Wales.
- **Integrated care:** Promote collaboration across health, social care, education and wider community settings to deliver more holistic services for children and their families.
- A child health focus: Ensure policies and funding plans consider to needs of children, young people and families.

For more information contact WRCCHC Chair and RCPCH Wales Policy and Public Affairs Manager: <a href="mailto:Sarah.Williamson@rcpch.ac.uk">Sarah.Williamson@rcpch.ac.uk</a>

#### How you can help

You can play a critical role in advancing the work of the WRCCHC by championing child health. Be a voice for children by championing the work child health professionals do day in, day out across Wales. Support their calls for more investment and better prioritisation of child health services, the workforce and data.



Welsh Royal Colleges Child Health Collaborative (WRCCHC) as designed by Reggie on the Tŷ Hafan Youth Board (2024).

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