

Royal College of Paediatrics and Child Health (RCPCH) Wales response to the Senedd Health & Social Care Committee's Inquiry into the Future of General Practice in Wales

March 2025

RCPCH Wales welcomes the opportunity to respond to the Senedd Health & Social Care Committee's inquiry into the [future of general practice in Wales](#). This response highlights the impact of pressures in general practice on child health and underscores the urgent need to prioritise child health services to manage longer-term pressures in primary care, and across the NHS.

Summary

- General practitioners (GPs) and the wider primary care workforce are situated within the heart of communities and often have a thorough understanding of the physical and mental health, social and vocational care needs of patients. It is important that this knowledge is utilised within strategic planning for health services.
- Children [are estimated](#) to make up around 40% of a typical GPs workload though only around one in three GPs in the UK have postgraduate specialist paediatric training, with little undergraduate exposure to paediatrics.
- The lack of interoperable information systems often means health professionals seeing children do not have timely access to the child's shared electronic health record.
- Prioritising child health by sufficiently resourcing general practice teams and enabling greater collaboration between primary and secondary care is not only necessary for individuals and their families but is also critical for managing longer-term pressures on the NHS.

Our recommendations

- Children must be included in the systems and frameworks that incentivise improvements in preventing and managing their health needs.
- GP practices and child health services should use the [RCPCH Facing the Future: Together for child health standards](#) (and future iterations post-review) to plan, deliver and evaluate services allowing for effective interface working.
- All GPs who provide care for children and young people should have the opportunity to receive training so that they are skilled to deal with childhood illness.
- The Welsh Government should develop a bespoke child health workforce strategy to ensure Wales has a workforce able to meet the rising demands.

Introduction

Over the last decade we have seen increasingly complex care needs, comorbidities, rising poverty that disproportionately affects children, and a sharp rise in demand for mental health services for children. These factors have placed a greater strain on the healthcare system and its workforce.

When primary care functions well, there are enormous benefits for patients and the wider health system. Effective support in primary care to manage the growing demand for children's health services is crucial to improve health outcomes and reduce pressure on secondary and emergency care.

Children and young people are major users of primary care services and [are estimated](#) to make up around 40% of a typical GPs workload.

GPs are often one of the first points of contact for children and their families within the health system, acting as the 'front door' to secondary care services. However, as a [BMA Wales survey](#) highlights, the current state of general practice in Wales is characterised by unsustainably high workloads, financial viability concerns and significant workforce shortages. These pressures have the potential to directly impact on the quality of care provided to infants, children and young people.

The wider workforce across primary and community care, including nursing, health visiting and allied health professionals are also facing high workloads and workforce numbers incapable of meeting demand. In order to improve long term health outcomes, school readiness, and reduce demand on services later in life, this workforce needs investment.

Education and collaboration

GPs and paediatricians sit at the heart of health care for babies, children and young people. There is strong conviction that some of the traditional boundaries between these professionals must be broken down to provide a high-quality health service for child and their families with the right health professional who has the necessary expertise.

Poor health outcomes for children, the demand for service redesign, and the imperatives for change in training demand multi-professional and interdisciplinary collaboration, in a way that matches access to care for adult patients.

In line with the [Facing the Future standards](#) developed by RCPCH, RCGP and the RCN, GPs should also be able to partner with local paediatric services to draw upon greater expertise and collaborate with secondary services to prevent unnecessary admissions and referrals to hospital.

The interface between primary care and paediatric services is essential for timely access to care and ensuring children, young people and their families are supported by the right professional, in the right place.

The [Primary Care Model for Wales](#) does promote seamless working across primary and secondary care services with the aim of improving communication between services and to enhance coordination. However, while there are pockets of good practice, its clear more could still be done to improve this interface. An RCPCH Wales survey (2024) found that nearly half of members (48%) wanting the Welsh Government to prioritise the interface between community, primary, secondary and tertiary care.

A failure to keep up with demand and improve the interface between primary, community, secondary and tertiary care has the potential to contribute to; falling immunisation rates, poor school readiness and worsening early years and family mental wellbeing.

Recommendations

- Paediatricians should spend time working side by side with GPs and other primary care professionals in general practice settings with a view to upscaling the pockets of good practice that exist across Wales.
- Trainee GPs should spend time in generalist and specialist settings alongside paediatricians to expose them to larger numbers of children requiring treatment and care in safe, supervised environments.
- GP training should include specialist child health training where possible and as soon as practicable.
- Ongoing collaboration between GPs and consultant paediatricians in general practice and specialist settings should be supported to enhance effective service design and delivery.

Workforce Shortages

As part of a whole-system approach to workforce planning and resource distribution, primary care requires additional support and capacity building to better meet children's needs and ensure they receive the right care, at the right place, at the right time.

Workforce numbers within primary care and wider child health teams are insufficient to match the growing demand for children's health services or to meet the increased complexity of children's health needs.

There are widely reported general practice workforce shortages resulting in increased workloads and longer patient waits for appointments. The [latest figures](#) show that there were 372 active GP practices in Wales – 7 fewer practices than in 2023.

Furthermore, whilst the number of consultant paediatricians in Wales has increased by 25% since 2016, child health professionals working in primary care and community settings have not experienced a similar increase. The increase in paediatricians has not

resulted in obvious improvements, with waiting times continuing to grow, giving further credence to the need for a collaborative approach to child health.

[Health visitors](#) for example have declined by 5% since 2019. In a recent [survey](#) of health visitors by the Institute of Health Visiting (IHV) 53% of health visitors in Wales said workforce shortages had impacted their ability to support families when a need was identified. The same number said workforce shortages had impacted on the delivery of the universal health visiting contacts.

Funding constraints and staff shortages have led to a significant increase in the number of incomplete [Healthy Child Wales Programme](#) (HCWP) contacts – up from 7.5% in 2018 to 20.3% in 2023. Regular HCWP contacts are crucial for monitoring a child's development and identifying any issues early. Reduced contact can lead to delays in detecting developmental problems, which can affect a child's long-term health and educational outcomes. Unchecked and untreated care needs in children inevitably lead to higher rates of physical and mental illness and rising demand on general practice.

Policy reforms and workforce planning developments have not adequately addressed the specific needs of children or paediatric services, focusing predominantly on the needs of an ageing population as shown in HEIW, Social Care Wales and Welsh Government workforce plans. It is also the case that, beyond paediatricians and nursing professions, Wales doesn't publish data relating to how many other professions provide care for children and/or work within a paediatric setting.

Recommendations

- The Welsh Government should raise the proportion of its budget provided to primary care providers to help them meet the growing demand for health services from children and young people.
- A gap analysis of the entire child health workforce is needed to better understand how Wales can meet demands for children and young people. This should inform a bespoke child health workforce strategy which considers the interface between primary and secondary care services for children and the need for fair funding for child health services.

Vaccinations

[Vaccinations](#) are a key example of how general practices supports child health as GP surgeries typically administer vaccinations to pre-school infants during routine check-ups such as the 6-in-1 vaccine, MMR and the 4-in-1 pre-school booster.

School nurses often handle vaccinations for school-aged children, such as the annual flu vaccine and the HPV vaccine for adolescents. This approach has generally ensured

that the majority of children receive their vaccinations at the appropriate times and in convenient settings, which has helped maintain relatively high vaccination coverage.

The WHO sets a target of 95% vaccine coverage to maintain population or ‘herd’ immunity. However PHW’s 2023/24 [annual report](#) shows this target was achieved for only one vaccine in Wales: the pneumococcal vaccine (PCV) in one year olds, with a 96% uptake. The [report](#) highlights that only 84.3% of children were up to date with their vaccinations by the age of four. When vaccine coverage falls below the target, communities face an increased risk of disease outbreak, which can particularly endanger children too young to be vaccinated and individuals with compromised immune systems.

Achieving 95% vaccination coverage could eliminate many childhood diseases in Wales, which would not only benefit individuals but could also help reduce demand on general practice, paediatric services and emergency care.

Recommendations

- Provide resources to expand access and capacity of vaccine appointments to provide more flexible access to families.
- Prioritise the development of an integrated child health record to enable access to key data for all child health professionals.
- Accelerate the development of the Digital Child Health Record
- Introduce a consistent child identifier to improve multi-agency information sharing to improve children’s health.

Find more on the RCPCH vaccinations position statement [here](#)

About the Royal College of Paediatrics and Child Health (RCPCH) Wales

The RCPCH works to transform child health through knowledge, innovation and expertise. We have over 600 members in Wales, 14,000 across the UK and an additional 17,000 worldwide. The RCPCH is responsible for training and examining paediatricians. We also advocate on behalf of members, represent their views and draw upon their expertise to inform policy development and the maintenance of professional standards.

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