

RCPCH &Us – Medical Training Review

May 2025

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Background

On the 8th of April 2025, the Medical Training Review launched an extensive programme of engagement to ensure that doctors, educators, patients, and NHS leaders had the opportunity to shape medical training in England for the futureⁱ. In response to this call for evidence, the Royal College of Paediatrics and Child Health children and young people's programme, RCPCH &Us, conducted several engagement activities over 13 days in May 2025 with children, young people, and families.

RCPCH keeps children and young people at the centre by having a rights-based approach. Children and young people have the right to be involved in decisions that affect them (UNCRC Article 12)ⁱⁱ and the right to have the best healthcare and health services, including input into medical training (UNCRC Article 24ⁱⁱⁱ / General Comment 15^{iv}). They also have the right to be involved via age and stage-appropriate means (UNCRC General Comments 12 & 25^v). To find out more about the United Nation Convention on the Rights of the Child, please read our submission to the Change NHS public conversation in 2024^{vi}.

Methodology

Aims

The overarching aim of this engagement initiative was to inform medical training for all specialities that interact with children and young people, from surgeons to GPs, anaesthetists, oncologists, and the wider postgraduate workforce.

Approach

Several methods were used to engage children, young people, and families from across England. This included:

- Individual (self-completed) surveys completed online (the surveys were promoted by RCPCH and our network of child and youth focused organisations)
- Individual surveys completed by a KZP youth voice advisor working with RCPCH in street engagement, University campuses, libraries, parks, and other public settings
- Surveys completed as small groups using KZP youth voice advisors working with RCPCH Street Focus Group methodology. All these responses were recorded on paper and were transcribed onto an online survey platform.
- Small group workshops led in-person and online by a range of workers (via RCPCH or networks). Comments from these workshops were transcribed and integrated with the final survey data.

To support accessible and equitable access to the medical training review consultation, key questions were identified within the full consultation and adapted to meet the needs of children and young people. Some language was tailored and concepts clarified for the age and stage of those we were engaging with. A shorter response was formally submitted through the NHSE portal, with the wider detail

shared in this document, to aid workforce development programmes across the NHS. A detailed data pack is available on request via and_us@rcpch.ac.uk

Participants

A total of 545 children and young people aged 7 – 25 years were involved in this initiative.

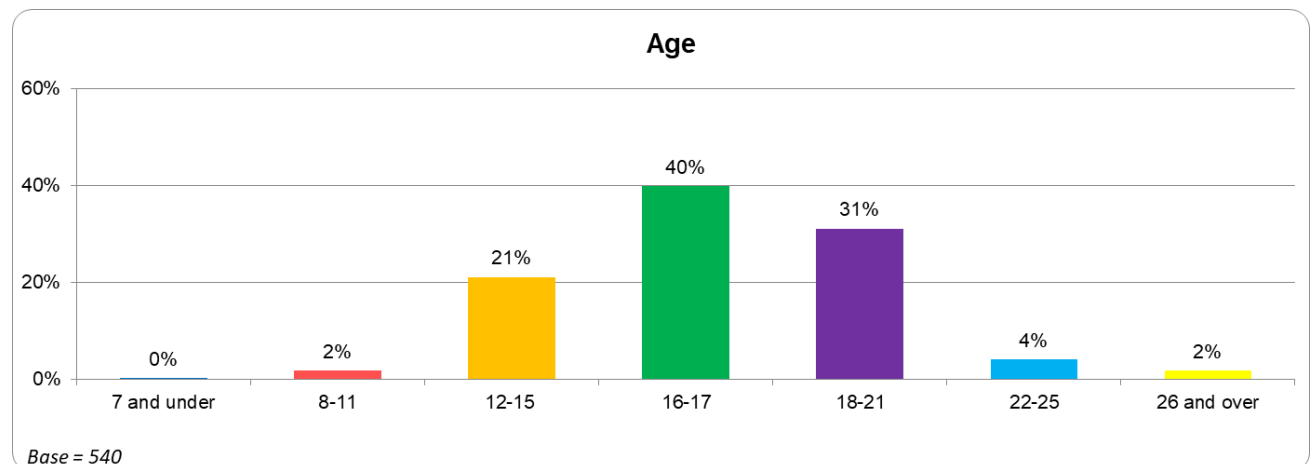


Fig 1. Ages of participating children and young people

Children and young people described themselves as male (44%), female (55%) and non-binary (2%). Some children and young people who took part described themselves as having a disability, health condition or learning need (30%). Children and young people were from a range of regions across England.

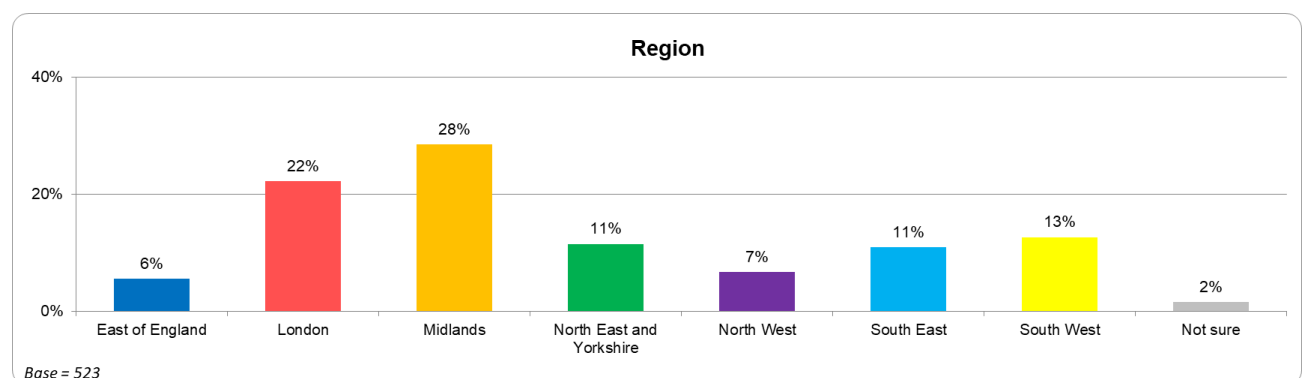


Fig 2. Regions where participating children and young people were based

It should be noted that most participating children and young people were white (58%).

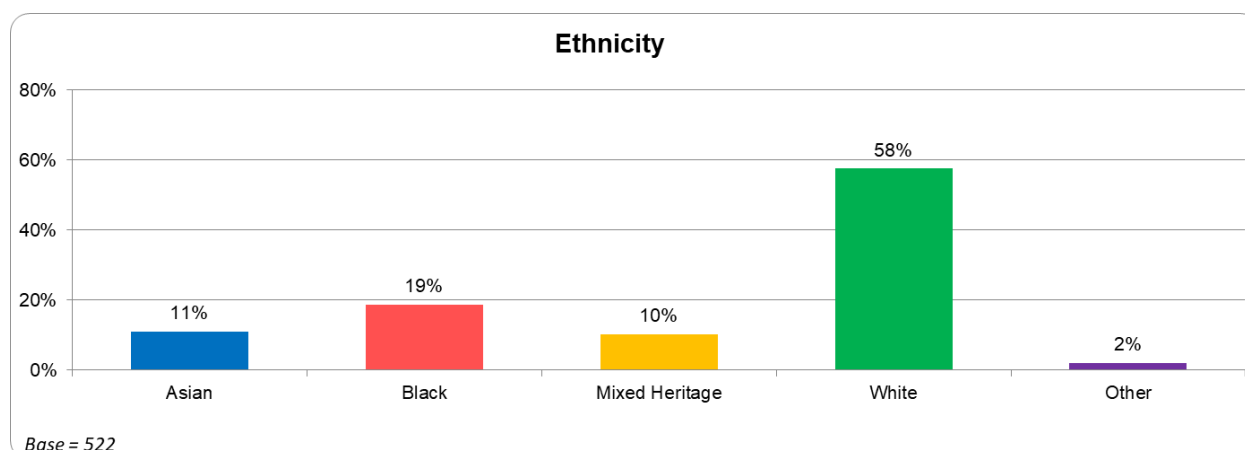


Fig 3. Ethnicity of participating children and young people

Key Finding 1: Would children and young people like to be involved in the training of healthcare workers?

Of the 507 children and young people consulted who completed this question, **85% answered “Definitely yes” or “Possibly”** when asked whether they felt that children and young people should have input or be involved in the training or teaching of doctors and health workers.

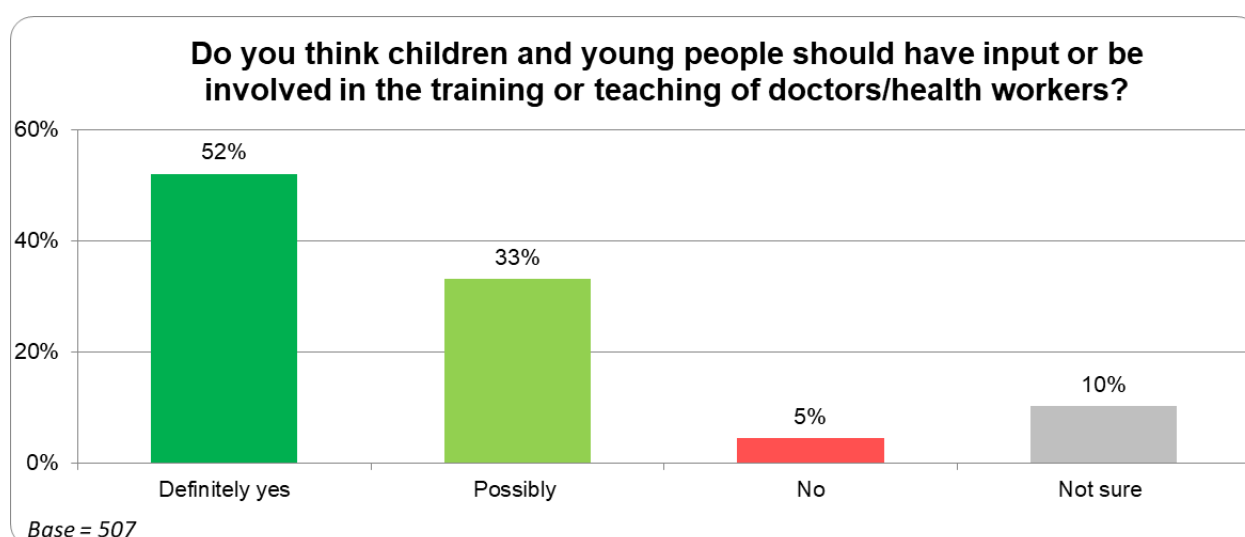


Fig 4. Percentage of children and young people who felt they should or shouldn't be involved in training doctors

Most felt that they should have the opportunity to provide input into the training of healthcare workers and have *“a say in the care they are provided.”* They highlighted their willingness to support the training of doctors and healthcare workers:

“First-hand personal stories mean so much more to people and help doctors and medical staff to understand and have empathy. Children and young people are our future and need to have opportunities to talk passionately about their views and beliefs on medical care. We need a medical system where we are all working together.”

This follows similar findings from a previous consultation by the RCPCH &Us team that found that **89% of children and young people** agreed that they should have the opportunity to provide input and shape the design and delivery of NHS services that directly affect them^{vii}.

Key Themes

Children and young people shared several key comments about why it was important that they were involved in supporting the training of doctors and healthcare workers:

- **Having a say on the things that impact them:** Children and young people we spoke to recognise the direct impact that medical training has on the care that they receive. Many felt it was important that they be offered the opportunity to provide input on the decisions that impacted their lives.

“Children and young people are the ones directly affected by the care doctors provide, so it makes sense for us to have a say in how they are trained. We can help them understand how we think and feel, what makes us comfortable, and how they can communicate with us better. Involving us will help make healthcare more youth-friendly and less scary.”

- **No ‘one-size-fits-all’:** Children and young people highlighted the importance of recognising that they are unique individuals with different experiences and needs. As a result, many felt it was important that everyone has the chance to provide feedback and share these experiences to diversify training and improve the care that they receive.

“Opinions should be taken from everybody regarding how they felt about their case”

Children and young people felt that they had a lot that they could offer doctors and healthcare workers in training:

- **Lived experience:** Children and young people highlighted the power of their lived experiences in shaping medical training, providing first-hand examples that could inform doctors and healthcare workers in training.

“First-hand personal stories mean so much more to people and help doctors and medical staff to understand and have empathy. Children and young people are our future and need to have opportunities to talk passionately about their views and beliefs on medical care. We need a medical system where we are all working together, not staff only willing to do things in one particular way and feeling threatened by patients and their views.”

- **Unique skills:** Children and young people recognised that there are many areas of medical training that should be balanced with the unique skills and medical knowledge that professionals can bring to the training. Though they felt it was important to have opportunities to feedback and share their lived experience, they wanted to ensure this process was collaborative and informed by effective medical and scientific training too.

“I think it is key to consult the public about what skills a doctor should have because they will be treating the public, however, the public aren't professionals in healthcare and may not understand why healthcare professionals do certain things. Healthcare professionals should also have a strong say about these matters”

Overall, children and young people explained how their involvement could provide benefits for healthcare workers, the NHS, and children and young people accessing care:

- **Communication:** Children and young people felt that one of the primary benefits of their involvement would be in equipping all doctors and healthcare workers with the skills required to listen to and communicate with children, young people, and their families. They felt that all doctors should be invited to meet and work with children and young people directly.

“Every doctor/nurse [should spend] some [time] training in paediatrics so they know how to interact with children”

- **Collaborative care:** Children and young people also agreed that their involvement could make the care they receive more collaborative. By providing input on the training doctors received, this could ensure that these doctors consider the views and experiences of children and young people more often in their future careers and interactions with children and young people.

“Sometimes I don't feel in control of my health - i.e. being told instead of being asked. I know how I feel, I know me!”

- **Supporting understanding:** Children and young people also recognised that they are unique from adults and older adults, and therefore it is important that they are allowed to share their lived experience with doctors and healthcare

workers to support their understanding of what it's really like as a child or young person navigating the health system today.

“Understanding how young people or children understand health conditions and being able to support them in the mind of young people”

Key Finding 2: In what ways do children and young people want to be involved in the training of healthcare workers?

As part of this series of engagement activities, we also asked children and young people how they would like to be involved in the training of doctors and healthcare workers. Children and young people were provided with a list of suggestions, from which they could select as many as they agreed with:

- Sharing ideas on topics that doctors learn about (74%)
- Helping to create materials and resources for them, e.g. leaflets, articles, stories, podcasts, videos (53%)
- Children and young people acting as buddies or mentors to them (48%)
- Children and young people creating lessons, webinars, or training sessions for them (45%),
- Being involved in their exams or assessments (42%)

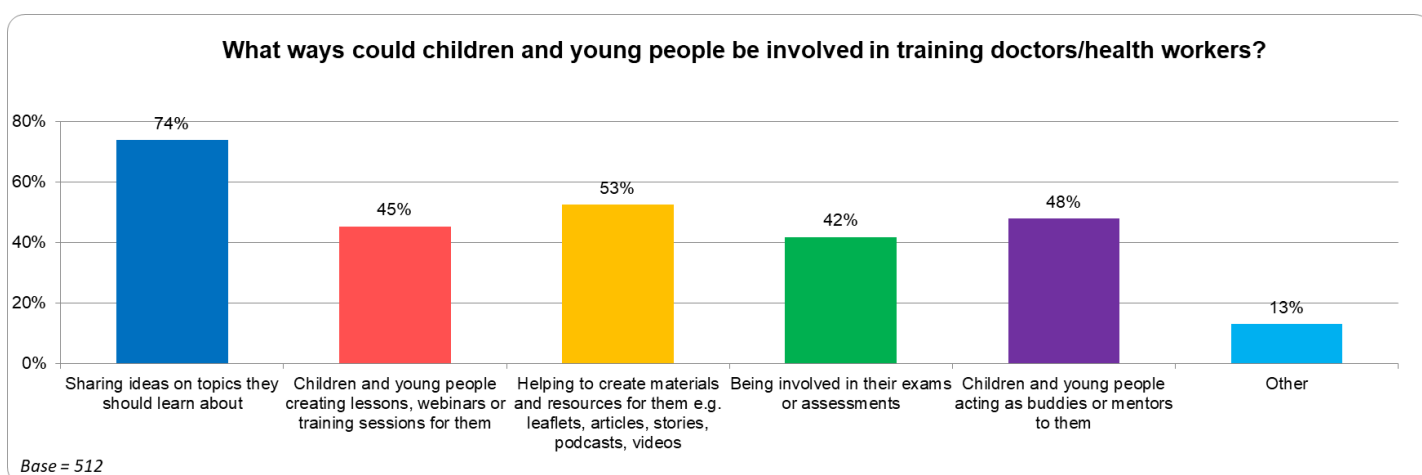


Fig 5. Suggestions from children and young people about the ways they could be involved in the training of doctors

Additional Suggestions

In addition to the set of options provided, children and young people also highlighted the following suggestions for their involvement in medical training:

- Group discussions between healthcare workers and children and young people
- Diaries about a young person's experience of healthcare, to be shared with doctors and healthcare workers

- Shadowing 'a day in the life' of a young person with a long-term health condition, to understand their experiences first-hand. This might be done via programmes such as the Diabetes UK camp, where interaction can happen outside of a hospital setting.
- Engaging in and experiencing cultural events in the community to understand different cultural perspectives and influences
- Stronger contact and collaboration with schools, to deliver workshops and meet young people

Key Finding 3: What specific training areas matter most to children and young people?

To explore this further, we also asked children and young people which training topics they felt they would like to be involved in. Of the 521 children and young people consulted for this question, the primary suggestions were:

- Supporting children and young people's mental health (97%)
- Understanding children's rights in health (95%)
- Helping people from all abilities, backgrounds, and life experiences with their health (94%)

Children and young people felt it was important that they weren't overlooked in the training of doctors and healthcare workers, as something that directly affects them and the care they receive.

Key areas to focus on when training for children's health

Children and young people shared several key comments about the key areas they felt should be included in medical training for all doctors and healthcare workers:

- **Youth Mental Health:** A primary focus for children and young people was equipping all healthcare workers with the knowledge and skills required to support their mental health and well-being. This was especially true for those children and young people with long-term health conditions.

"From speaking to other young people, and from my own experience, often we never have enough social support or mental health support when accessing care for long-term physical health conditions"

- **Demystifying the NHS:** Children and young people also felt that more training could be provided to doctors around supporting children and young people to navigate and understand the healthcare system.

"Explain processes of how to get the care needed and how it is decided who to allocate care to, especially within mental health services."

- **Culture of Care:** A further focus for children and young people was on supporting doctors and healthcare workers to develop respect, empathy and the skills to create a safe environment and an inclusive culture of care.

Doctors and health workers should be trained in listening without judgment, understanding how trauma or difficult life experiences affect young people, and being more aware of issues like bullying, online safety, and social media pressure. They should also learn how to spot early signs of mental health struggles and know how to support us in a calm, respectful way."

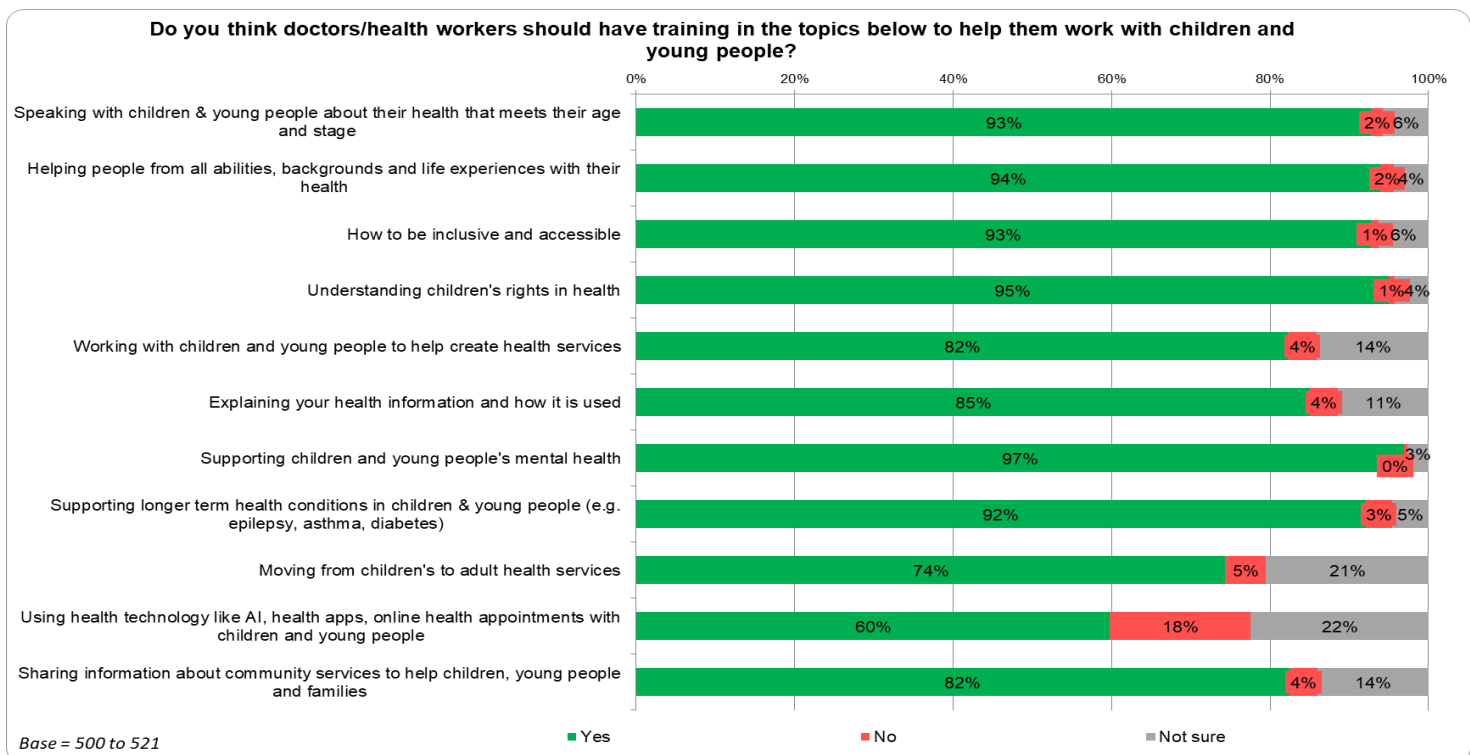


Fig 6. Suggestions from children and young people about the topics that should be included in the training of doctors

- **Moving healthcare into the community:** Children and young people also highlighted the specific skills doctors and healthcare workers would need to provide stronger support outside of traditional healthcare settings. They advocated for more community-focused approaches, guided by the needs and experiences of children and young people.

"Developing training and creating services that support health promotion and social prescribing. Bringing healthcare into the community. Make it fun and interesting for young people"

- **Children and Young people first:** Finally, participants felt that there should be dedicated training to ensure that doctors and healthcare workers see them as children and young people first, rather than just patients with a health condition. Children and young people felt that if this learning was implemented, the care they received would reflect more understanding of the additional changes and challenges they face.

“Taking the child/young person as a complete person; We need continuity - we experience change in lots of other areas as a young person, changes in school, friendships. It is important that our care remains consistent”

To enquire about the full data pack, findings or formal response submitted to NHS England from RCPCH &Us, please contact and_us@rcpch.ac.uk

References

ⁱ Medical Training Review – call for evidence - NHS England - Citizen Space [Internet]. [cited 2025 May 19]. Available from: <https://www.engage.england.nhs.uk/survey/medical-education-programme-review/>

ⁱⁱ United Nations Convention on the Rights of the Child [cited 2025 May 19] Available from <https://www.ohchr.org/en/instruments-mechanisms/instruments/convention-rights-child>

ⁱⁱⁱ Ibid

^{iv} United Nations Convention on the Rights of the Child: General Comments [cited 2025 May 19] Available from https://tbinternet.ohchr.org/_layouts/15/treatybodyexternal/TBSearch.aspx?Lang=en&TreatyID=5&DocTypeID=11

^v Ibid

^{vi} NHS 10 Year Health Plan - RCPCH and RCPCH &Us organisational responses | RCPCH [Internet]. [cited 2025 Mar 28]. Available from: <https://www.rcpch.ac.uk/key-topics/nhs-ten-year-plan/organisational-responses#rcpch-us-response>

^{vii} Ibid