

About the RCPCH

The Royal College of Paediatrics and Child Health (RCPCH) is responsible for training and examining paediatricians. The College has over 18,000 members in the UK and internationally and sets standards for professional and postgraduate education. We work to transform child health through knowledge, research and expertise, to improve the health and wellbeing of infants, children and young people across the world.

RCPCH response to the Scottish Government's consultation on 'Progressing Children's Rights in Scotland - An Action Plan 2018-21'

Comments

Question 1 – High Level Contents of the Action Plan

Do you agree that the Action Plan should include:

- i. Identified strategic actions intended to secure transformational change in how children and young people experience their rights. **Yes**
- ii. A summary of specific initiatives being taken forward across all Scottish Government portfolios that captures what we will do in the next 3 years to secure better or further effect of the UNCRC principles. **Yes**
- iii. A number of key policy specific actions identified through the consultation process that are not currently being taken forward through other Scottish Government initiatives. **Yes**

Question 2: Do you agree that the 4 proposed strategic actions are appropriate and will help to take forward the principles of the UNCRC?

- i. Development of a dynamic Participation Framework for Children and Young People. **Yes**
- ii. Ambitious delivery, through co-production, of the 3 year children's rights awareness programme. **Yes**
- iii. Progressing the comprehensive audit on the most effective and practical way to further embed the principles of the UNCRC into policy, practice and legislation, including the option of full incorporation into domestic law. **Yes**
- iv. Evaluation of the Child Rights and Wellbeing Impact Assessment (CRWIA). **Yes**

Question 3: Are there ways in which the proposed strategic actions listed above could be further strengthened? – please specify.

RCPCH are pleased to see the continued commitment to Child Rights and Wellbeing Impact Assessments (CRWIAs) to ensure that all Scottish Government portfolios consider how proposed new policies and legislation might impact of the rights and wellbeing of children and young people.

RCPCH support the principles of taking a children's rights approach to all policy, which should ensure:

- Children's best interests are always central
- The voice of the child is at the centre
- Children's views are taken into account and given due weight
- A holistic approach which looks at the whole child and not just their status e.g. a disabled child

Participation

RCPCH are pleased to see the amount of action taking place to secure participation of children and young people at a national level. It is important that the voices of infants, children, young people and their families are heard at a local level to ensure that local differences and vulnerable groups are represented. Consultations should be delivered to children and young people in their setting (universal e.g. school/youth club, targeted e.g. special school/health charity, specialist e.g. children's hospital) in interactive and creative activities by participation specialists. Responses can then be collated, themed and shared with strategic committees, policy boards and policy officers to influence thinking around standards, guidelines & work-plans. Children and young people should then support the development of solutions using the theory of child and youth participation to ensure that their views are central to service design and planning at every stage in a meaningful, relevant and appropriate way.

Voice within healthcare is not consistently focused on the needs, wishes and feelings of children and young people as standard in every intervention. Children and young people have reported feeling that conversations are focused on the adult with them, language is inaccessible, there are not opportunities to explore topics or develop greater understanding, focus is given to the presenting problem and not the holistic review of the child or young person and positive, empowering behaviour is not consistent across all professionals, all of the time (RCPCH &Us Voice Bank 2016, 2017).

All health and partner organisations must demonstrate how they are effectively engaging with infants, children and young people and their families and embedding their recommendations in quality improvement programmes for their services.

Training should be mandatory and regularly refreshed for all health care professionals on how to communicate with children and young people to enable them to be heard and listened to in individual care discussions and strategic decision making (RCPCH &Us Voice Bank 2017, 2018).

Question 4: Are there additional or alternative strategic actions that the Scottish Ministers should consider? – please specify.

Infants, children and young people must be considered equitably to adults in all aspects of the NHS. Under Article 24 of the UNCRC, all children have the right to be as healthy as they can be and to access health services. This right needs to be embedded in all health services for infants, children and young people. Children have the right to be involved in decisions that affect them in an appropriate way and health professionals must ensure their views are included in decisions about their care (by following the principles of article 12). Improving communication between health professionals and children, and including their rights to information, healthcare and involvement in decision-making are key to improving the wellbeing of children overall.

Question 5: Are there any specific actions – not currently being progressed within a wider Scottish Government action plan, framework or other initiative, -that should be considered for inclusion within the Action Plan?

Protection of vulnerable groups

We urge the Scottish government to ensure that our most vulnerable children, including looked after children, children in care, homeless children and those living in poverty are given parity of esteem in this plan.

Rights of participation and provision for children are as important as rights of protection, with protection, provision and participation being indivisible. Complaints procedures should be provided in ways accessible to children to ensure complaints are heard, listened to and responded to. Involving service users (or future service users) in the design of services must ensure that participation is meaningful in service scoping and that proposals for change and other best practice is followed using legislative guidance.

Child maltreatment is rarely seen as a violation of children's human rights, although it results in rights violations of the profoundest kind; including the right to survival. The UNCRC provides a framework for understanding child maltreatment as part of a range of violations of the rights of children including violence, harm, exploitation, discrimination, marginalisation and exclusion at individual, institutional, and societal levels.

Whilst the rights of refugee children and unaccompanied migrant children are included within the UNCRC, child health professionals are still not included in the assessment process to determine whether the child is a victim of modern slavery and human trafficking. The health assessment of refugee children and young people, whether undertaken as part of a statutory Initial Health Assessment for looked-after children or as part of an initial general health assessment, should be a thorough and rounded one.

Mental health and learning disabilities

THE CESR committee examined the UK in 2016 and raised concerns about lack of sufficient adequate resources for mental health services, despite the legal duty introduced by the 2012 Health and Social Care Act to deliver parity of esteem between mental and physical health. It recommended that sufficient resources are allocated to the health sector to ensure the accessibility, availability and quality of mental health care, including for person's in detention. We recommend that the Scottish government focus on these groups as a priority and make sure that children who have learning disabilities and mental health needs have parity of esteem in investment and access to services.

RCPCH &Us, the voice of children, young people and families within RCPCH have also identified the need for increased support and awareness of LGBT+ children and young people, particularly in health care settings. The Rainbow NHS Badge is a great example of project could be initiated in health care settings, with children and young people supporting the development of resources, training and case studies (RCPCH &Us Voice Bank 2018). Children also stated in sessions with RCPCH &Us in 2018 in Scotland, that children and young people wanted to be involved in developing community based solutions to tackling food inequalities, improve access to free sports activities and to ensure every child has someone to talk to (RCPCH &Us Voice Bank 2018). This echoes sessions in 2017 which identified improving skills by health care workers to involve children and young people in service design, tackling child poverty with children and young people's involvement through participation structures and supporting mental health services for children and young people (RCPCH &Us Voice Bank 2017).

Resource:

RCPCH Child Protection Companion, Children's Rights (Chapter 4). 2017. Available online at: <http://pcouk.org/chapter.aspx?sectionid=111267394&bookid=1674>

For further information about any aspect of this consultation response, please contact Professor Steve Turner, Officer for Scotland at: s.w.turner@abdn.ac.uk