

RCPCH Workforce Census 2017: Focus on Wales

This document accompanies the Focus on Wales full report¹, published in May 2019. Wales has seven Health Boards providing a range of paediatric services. Paediatric consultant whole time equivalent (WTE) growth in Wales between 2015 and 2017 was 2.9%, the lowest of all the UK nations: lower than the England growth of 6.4% and the UK growth of 6.7% over the same period. To meet the RCPCH standards set out in Facing the Future² and other service standards, there needs to be an additional 73.7 whole time equivalent consultants: from 175.7 WTE to 249.4 WTE. This would be an expansion of the current consultant workforce of 42.0%.

The general paediatric workload is shifting, and we report a year-on-year upwards trend of admissions³. A more effective way of working across primary and secondary care, as described in Facing the Future Together for Child Health⁴, is needed to keep up with this surge in admissions. The number of paediatric trainees and consultants are unlikely to rise by the amount needed to meet demand in the immediate future, especially as a 2018 report found that only 6% of foundation year 1 (F1) doctors consider specialising in paediatrics⁵. Therefore, workforce planners need to develop appropriately trained non-medical workforces such as advanced nurse practitioners and physician associates and see their potential in helping paediatric services meet standards and demand.

There are particular challenges in relation to the geography, demography and location of the population centres. Alongside trends towards less than full time working, planners must consider technology requiring more staff, traveling times and the effect that using consultants in either out of hours or resident working has on their availability during the week. Young doctors looking at choices between paediatrics and other specialities may view rota gaps and poor work life balance as disincentives to this otherwise deeply rewarding career.

This report makes recommendations specific to Wales in 5 key areas:

1. Planning the child health workforce
2. Recruiting, training and retaining more paediatricians
3. Incentivising the paediatric workforce
4. Planning for and expanding the non-medical workforce
5. Expand the primary care workforce

¹ <https://www.rcpch.ac.uk/resources/workforce-census-2017-focus-wales>

² <https://www.rcpch.ac.uk/resources/facing-future-standards-paediatric-care>

³ <http://www.infoandstats.wales.nhs.uk/page.cfm?orgid=869&pid=40977>

⁴ <https://www.rcpch.ac.uk/resources/facing-future-together-child-health>

⁵ http://www.foundationprogramme.nhs.uk/sites/default/files/2019-01/F2%20Career%20Destinations%20Report_FINAL.pdf

Key Facts

Career grade workforce

- The consultant paediatric workforce in Wales grew from 177 in 2015 to 186 in 2017; an increase of 5.1%. In terms of Whole Time Equivalent (WTE), in 2017 there were 175.7 WTE compared to 170.7 WTE in 2015; an increase of only 2.9%.
- The RCPCH estimates that approximately 249.4 WTE consultants in total are needed to meet demand.
- There were 68 headcount SAS doctors in 2017 and 2015, but WTE increased by 2.6% from 56.7 WTE in 2015 to 58.2 WTE.
- There was a drop in the proportion of female consultants between 2015 (50.8%) and 2017 (45.7%); the opposite trend to the rest of the UK nations which has seen a steady increase in the proportion of female consultants.
- In 2017, consultants in Wales have a lower rate of less than full time (LTFT) working - 18.4% compared to the UK as a whole - 24.5%. An increase from 14.5% in 2015.

Trainees

- Wales has a lower rate of applications for paediatric training posts than the UK. In January 2018, first preference applications to posts ratio was 1.1 to 1 compared to 1.4 to 1 for the UK overall.
- The vacancy rates in Wales are higher than the UK overall for every rota.
- RCPCH estimate that there is a need to recruit approximately 22 doctors into ST1 training posts each year.

Service pressures

- In Wales, the most frequently selected pressures were “Difficulty recruiting paediatric non-consultant, non-training grade staff”; “Patient/Public expectations on services”; “Paediatric training post vacancies and gaps” and; “Difficulty recruiting paediatric consultants” with 100% of respondents selecting these.
- There are three Neonatal Intensive Care Units (NICUs), three local neonatal units (LNU) and two Special Care Baby Units (SCBU) in Wales. A new “Sub Regional Neonatal Intensive Care Centre (SuRNICC)” was announced on 12/10/2018 in North Wales. Neonatal units had to close for a total of 59 days in the previous year to September 2017.