

Royal College of Paediatrics and Child Health (RCPCH) – Submission to the Autumn 2023 Budget

The Royal College of Paediatrics and Child Health (RCPCH) is the membership body for paediatricians, and we have over 22,000 members across the UK and internationally. We are responsible for education, training and setting professional standards and informing research and policy. 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.

Overview

As a nation, we cannot afford not to take children's health more seriously. Child health inequalities continue to widen, poor mental health is soaring, and record numbers of children are waiting for care. It is a scandal that across the board we have some of the worst child health outcomes in Europe. With consequences well into adulthood, we cannot ignore the economic cost of failing to act.

Furthermore, it is our firm view that children, young people, families, patients and the public deserve to have the best NHS care possible, and they will only do so when their NHS workforce is valued, receives investment and is truly supported. The UK Government should seize this opportunity presented by the budget to make a real difference to the futures of children and young people and the staff who support them.

RCPCH welcomes the opportunity to respond to the Autumn Budget for 2023. This document contains our key calls to Government and includes **our overarching call for investment in a fully costed cross-departmental child health and wellbeing strategy**, and we'd welcome support from the Treasury to help see this embedded.

Furthermore, our further calls into five pillars each of which include a suite of policy recommendations that we urge political parties to support. These pillars are:

1. A focus on child health services
2. Support for the paediatric workforce
3. Greater ambition on prevention
4. Ensure every child is protected
5. Harness the power of data and digital

We have drawn from our [manifesto which you can find here](#), and firmly believe this spending review is an opportunity for Government to create the change needed to set a course to support future generations.

Finally, this document contains the information the Treasury should consider regarding the devolved nations, there is a clear opportunity here for the Treasury to support the health and care whole of the UK.

A focus on child health services

More children and young people are now waiting for months to access health services than ever before, with many experiencing unacceptably long waits. The waiting lists for children's health services are rising at double the rate of adult waiting lists, with children waiting longer than ever for hospital appointments, operations, community health services, speech and language therapy,

neurodevelopmental assessments, and support. However, all too often the experiences of children and young people are forgotten, against a focus on the pressure faced by the adult health system.

Long waits for care are particularly damaging for children as many treatments and interventions should be administered within specific timeframes or developmental stages. Prolonged waits not only impair children's mental and physical development but also have a detrimental impact on their education, their mental health and wellbeing and that of their parents and carers.

This Government should:

- Ensure there is ring-fenced funding for children's health services in any plans that seek to address pressures in the wider health system.
- Ensure investment in children's health service recovery including children's community services so at least over 92% of children are seen within the 18-week target and absolutely no child is left waiting more than 6 months for an appointment.
- Improve join-up across primary and secondary/urgent care so that more children and families receive the right support closer to home by:
 - Reinstating and improving the training, confidence, and capacity of the primary care workforce to manage common paediatric presentations.
 - Embedding paediatric clinical input into every NHS 111 service so families receive more appropriate advice.
 - Improving the online health information and support available to families by investing in NHS online and a national roll-out of Healthier Together.
- Invest in the children's mental health system by:
 - Strengthening community mental health support to improve access to mental health services, reduce the number of children reaching crisis and improve outcomes.
 - Improve the training and environment of acute/inpatient settings so they are safer and more beneficial environments for any children and young people who do need hospital care.

Taking a global perspective of child health services

In November 2020, the Government announced aid spending would fall from 0.7% to 0.5% of Gross National Income (GNI) as a "temporary measure," in response to the Covid-19 pandemic's effects on the UK's public finances and economy. It is not planned to return to 0.7% until at least after 2027/28.

This Government should:

- Return to 0.7% with a particular focus on programmes to support children and young people globally, which would help entrench support for future generations.

Support for the paediatric workforce

Post-pandemic demand on the paediatric workforce has continued to increase, with the number of children on waiting lists now at an all-time high, a sharp rise in the complexity of child health needs, and additional expectations being placed on the paediatric and wider child health workforce. Despite this, the NHS Long Term Workforce Plan leaves the children's health workforce largely unaddressed, with a 0% increase in child nursing numbers compared to a 92% increase in adult nursing numbers, which is unsustainable given the levels of demand.

The UK Government must recognise that none of the above challenges will be addressed effectively without properly considering and resourcing the child health workforce, including paediatricians. The paediatric workforce is under extreme pressure. Pressure on staff capacity and significant population demand is stretching a workforce already vulnerable to surges in infectious disease and workplace burnout, with up to 1 in 4 gaps on hospital rotas. [Paediatrics 2040](#) shows that while the ratio of paediatric consultants has steadily grown over the last 8 years, UK paediatric workforce numbers still fall behind countries of similar economic and healthcare models by up to 40%. Frontline NHS activity and waiting times have also risen by up to 40% since the pandemic.

This Government should:

- Ensure equitable investment in the child health workforce compared to the adult health workforce, to reflect the increased demand and complexity faced by the child health system, and to ensure child health services are safely staffed. This could include the appointment of a national lead or advisory group to support and oversee child health workforce planning and development.
- Introduce measures that will help drive recruitment and retention of paediatricians, for example in equality, diversity, and inclusion (EDI), support for wellbeing and lifelong careers, and adequate flexible working and flexible retirement policies.
- Appoint a Neonatal Safety Champion with responsibility to improve safety across maternity and neonatal services.
- Investment in the community child health workforce with the view to increase the number of community paediatricians and action to address gaps in community consultant posts.
- Commit to long-term funding for a Mental Health Champion on every paediatric ward across the country

Prevention and public health

In the context of escalating pressures on public services as well as rising demand, the College recommends where possible that the Budget prioritises public health, prevention and early intervention.

The College is concerned that there is too little focus on this agenda within Government given the worsening picture on children's health outcomes that are often entirely preventable, as shown in The Academy of Medical Royal College's paper supported by the UK's 24 Royal Colleges '[Securing our Healthy Future: Prevention is better than cure](#)'.

There are five key indicators that demonstrate most acutely the benefits when prevention and early intervention of ill health are realised to ensure healthy children can grow up to be healthy adults and should be priority areas for improving child health. They are healthy weight, oral health, vaccinations, clean air and mental health. It is also important to reflect that poverty is often a key driver to poor health and health inequalities.

Healthy weight

- Regulations and guidance are in place to reduce the sugar and salt contained in foods; however, baby food and drinks are excluded from these. You can act now to change this by committing to publish guidelines for improving nutritional content of infant foods.
- In England, expand the Free School Meals scheme to all children in primary schools so they can all be provided with a nutritious meal.

- Implement ambitious policies in order to meet a goal of halving childhood obesity by 2030, including those set out by the Obesity Health Alliance.

Oral health

- Enable children to take up positive oral health habits by implementing supervised tooth brushing schemes in all nurseries and primary schools.
- Ensure all children are seen by a dentist by the age of one to support good oral health development.

Vaccinations

- Vaccination coverage decreased in 13 out of 14 of the routine childhood vaccination programmes in the UK, and no vaccines met the 95% uptake target in 2021-22. Government should publish and fully cost a vaccinations strategy, alongside a public facing campaign to drive progress in reaching WHO targets for vaccination uptake rates.

Mental health

- Rates of poor mental health for children and young people are rising: in England, 5.5% of 2 to 4-year-olds have experienced a mental disorder, while 15% of 7-10s, 20% of 11 to 16s and 26% of 17-19 year olds now have a probable mental health disorder.
- This Government should outline greater investment in Child and Adolescent Mental Health Services (CAMHS) and community support to improve children's access to mental health support, reduce the long waits for care, and reduce the growing number of children and young people who are reaching crisis point and ending up in emergency care settings whilst waiting for mental health support.

Clean air

- We were disappointed to see Government's recent roll backs on investments to tackle climate change. A key indicator of health that Government should prioritise is to improve air quality across the UK. Air pollution is linked to 40,000 deaths in the UK every year.
- By committing to meet the 2005 WHO limits Air Quality Guidelines (for particulate matter (PM2.5) of no more than 10 micrograms per cubic metre) by 2030, 10 years earlier than the current proposal of 2040.

Ensure every child is protected

As signatories of the United Nations Convention on the Rights of the Child (UNCRC), the UK Government is required to uphold children's rights to protection from violence, abuse and neglect. Recent serious case reviews and the Child Safeguarding Practice Review Panel national review, such as Child Protection in England, have demonstrated that the current social care system is not fit for purpose in protecting children and young people and supporting families.

It is essential to acknowledge the scale of reform required to adequately support families and protect children, and the costs associated with this. The UNCRC also requires the UK Government to uphold the rights of children seeking refuge and asylum in the UK. Currently, children across the world who face danger or persecution are not offered safe or legal routes through which to seek asylum in the UK. Children who arrive in the UK seeking refugee or asylum must be afforded their rights to protection, shelter and education promptly.

Support families and protect children

- Align with advice received from the independent review lead Josh MacAlister in ringfencing £2.6bn in order to modernise the social care system into one which adequately supports families and children and provides equal provision to all those who need it.
- Commit, as a part of social care reform, to updating and reforming all relevant existing legislation which impacts children for whom there are safeguarding (and child protection) concerns and Looked After Children.

Uphold the rights of children seeking refuge and asylum

- Create adequate funding to ensure that safe routes are available for children and young people facing persecution to access their right to seek asylum without further risk to their safety and wellbeing.
- Adequately commission and invest in services which ensure that children arriving in the UK can promptly access safe, appropriate accommodation, healthcare, education and support.

Harnessing data and digital to transform child health

Whether it is building a clearer picture of child health needs, supporting professionals to share information more easily within and between services, or empowering children, young people and parents to take control of their health, improving data and investing in digital innovations has the power to transform child health outcomes.

Yet even now improvement in data and digital health often fails to reach child health services. It is right that political parties are talking about the importance of data interoperability. It is vital that the specific benefits it can bring for children and young people are properly considered.

This Government should invest to:

- Develop a children's information standard and amend adult-centric legislation to make it clear when and how child health, care and education services can share information to improve children's health and identify harm.
- Implement the NHS Number as a consistent child identifier for improved information sharing and linkage across children's health, care and education, to support the provision of better, more joined-up care and protection of children and young people.
- Ensure the digitisation of the red book is taken forward and goes beyond just the use of growth charts, vaccines, and screening in order to support parents and provide professionals with a full picture a child's health.
- Embed Electronic Medical Records systems which make it much easier for clinicians to capture data at the point of care.

Devolved nations

We are mindful that health remains a devolved issue but call on the Treasury to provide the funds to tackle the significant issues facing child health services in those nations.

Northern Ireland

- In Northern Ireland (NI) the budget has been set by the UK Secretary of State, in lieu of a functioning Executive. As such, for the Health Department there is a projected funding gap of £732 million for this financial year. This shortfall will further impact children, young people and services, as well as the workforce who supports them.

- Children and young people are already experiencing difficulty, the NI Audit Office [reported](#) that at August 2022, there were 38,628 children waiting for a first outpatient appointment. For the [Department of Education](#), the 2023-24 Budget allocation creates a funding gap in excess of £300m impacting support and intervention services across mental health, SEND and access to school meals. The RCPCH [flagged](#) the dire situation faced in NI earlier this year. An opportunity to exists to review these allocations.

Wales

- In Wales, the Welsh Government [detailed](#) the 'financial position after the UK Spring Budget in March, was up to £900m lower in real terms than when that budget was set by the UK Government at the time of the last spending review in 2021'. This has led to departments having to make cuts, although the extent of the cuts isn't known yet, but is understood that budgets relating to child health and wellbeing will be impacted. With more than [1 in 3](#) children living in poverty, this may have significant repercussions for children and families. Concerns that the Welsh NHS could have a deficit of nearly [£800 million by Spring 2024](#) and the fact that all Health Boards have been put on [escalation status](#) due to their inability to submit financially balanced Integrated Medium-Term Plans creates a bleak picture.

Scotland

- In Scotland, it's estimated that [over one million people](#) are living in poverty, the present cost-of-living crisis is estimated to escalate existing health inequalities faced by those in need. There must be sufficient funds made available in order to meet the increasing demands on child health services and combat issues like the significant waiting lists that RCPCH members in Scotland are reporting, for paediatric appointments alone, this sits at 12,769 [waiting](#) at June 2023. There must be continued investment in vital lifelines for families, such as the Scottish Child Payment which has been [shown](#) to support families not to cut back on their food budget or make use of food banks and has improved children's quality of life.

Further information

If you would like any further information, or to discuss these issues in detail please contact us on public.affars@rcpch.ac.uk