

Cynulliad Cenedlaethol Cymru | National Assembly for Wales  
Y Pwyllgor Plant, Pobl Ifanc ac Addysg | Children, Young People and  
Education Committee

Blaenoriaethau ar gyfer y Pwyllgor Plant, Pobl Ifanc ac Addysg |  
Priorities for the Children, Young People and Education Committee

CYPE 10

Ymateb gan : Coleg Brenhinol Pediatreg a Iechyd Plant

Response from : Royal College of Paediatrics and Child Health

**Question 1** – Within the remit set out above: what do you consider to be the priorities or issues that the Children, Young People and Education Committee should consider during the Fifth Assembly?

## **1 Prevention and Early Intervention**

1.1 Children who enjoy better health and wellbeing now will grow up to be resilient adults. In addition to the benefit to the population this also means reduced pressure on the health service and all public services that children and families use. With more than a quarter of children in Wales at reception age overweight or obese and more than half of all adults with mental health problems diagnosed in childhood, early intervention and prevention for children's mental and physical health is crucial. We would like to see the Children, Young People and Education Committee scrutinise Welsh Government plans for prevention and early intervention and ensure this is a priority. In particular, we would like the Committee to:

- Hold the Welsh Government to account on action to reduce consumption of food and drinks high in fat, sugar and salt.
- Scrutinise Welsh Government plans relating to the introduction of evidence-based personal and social education (PSE) programmes across primary and secondary schools covering social inclusion, bullying, drug and alcohol use, mental health and healthy relationships that foster children's social and emotional health and wellbeing.

- Call for the timely publication and implementation of the 2016–19 Together for Mental Health Delivery Plan and ensure that the multi-agency Together 4 Children and Young People project is effective in delivering Together for Mental Health objectives as they relate to children and young people.

## **2 Tackling Child Health Inequalities**

2.1 Poverty, inequality and where a family lives have a direct relationship with child health. Child death rates in the most deprived parts of Wales are 70% higher than in the least deprived parts. Every opportunity must be taken to reduce inequalities to improve the health of children and young people in Wales. We ask that the Committee makes holding the Welsh Government to account on reducing child health inequality a priority. Specific areas that require scrutiny include:

- Ensuring that the Welsh Government delivers parity of esteem for child mental and physical health.
- Establishing what plans there are to improve support for children with medical needs in education settings and how all schools can be made to comply with these plans, challenging the Welsh Government on how this can be ensured in the absence of a mandatory duty on schools to do so.
- What plans there are to address the known risk groups and factors to reduce child deaths across all ages, ideally as part of a cross-departmental child health strategy.

## **3 Involving children and young people in decision making in Wales**

3.1 At present the voice of children and young people and their families is often lost within the adult-centric nature of health and social care provision. Children's services are not a bolt-on to adult services and should be co-produced with children and young people. Their voices must be heard and listened to with their views given due weight. We would urge the Committee to establish how the Welsh Government will achieve this. Again, we would suggest specific actions:

- We would urge that the Committee itself engages directly with the views of children and young people across Wales to ensure they are included in decisions about their health and wellbeing.
- We would also suggest that the Committee scrutinises the collection and use of data we have about child health and wellbeing. Currently, the National Survey for Wales does not include children under 16 years old and does not take survey responses directly from children.

#### **4 A joint commitment on health for children and young people**

4.1 Integrating all care around the needs of children, young people and their families is crucial to improving health outcomes. Working across professional and service boundaries should be the norm for all those who work with children and young people. We would urge the committee to scrutinise work across government departments and hold government to account collectively if action on child health is not joined up.

4.2 We also need to address the paediatric workforce across Wales, which is facing considerable pressures in recruiting and retaining paediatricians and addressing shortfalls. The Committee has a role in scrutinising the Welsh Government's successes or otherwise in recruiting and retaining paediatricians.

4.3 We would suggest specific actions by the Committee to:

- Make the case for a cross-departmental child health strategy.
- Scrutinise the work and success of Public Health Wales in raising awareness of unexpected sudden infant deaths and of known risk factors such as parental smoking; and to increase awareness of safe sleeping habits.
- Scrutinise the effectiveness of measures to address shortfalls in the paediatric and child health workforce.
- Scrutinise the implementation of the RCPCH's Facing the Future: Standards for Acute General Paediatric Services and Facing the Future: Together for Child Health Standards.

**Question 2** – From the list of priorities or issues you have identified, what do you consider to be the key areas that should be considered during the next 12 months (please identify up to three areas or issues)? Please outline why these should be considered as key priorities.

### **A Joint Commitment on Health for Children and Young People**

Welsh Government policy, expenditure and administration affecting the health and wellbeing of children and young people in Wales is now spread across a number of Cabinet portfolios and departments, including Health, Wellbeing and Sport; Education; Public Health; and Children and Communities. There is therefore a need for a cross-departmental child health strategy and for the Children, Young People and Education Committee to scrutinise outcomes across government as a priority.

### **Early Intervention**

As outlined above, children who enjoy better health and wellbeing now will grow up to be resilient adults. In turn this means reduced pressure on not only the health service but all public services that children and families use. Early intervention and prevention for children's mental and physical health is therefore crucial and scrutinising Welsh Government policy and expenditure on early intervention and prevention, particularly around efforts to reduce consumption of food and drink high in sugar, fat and salt, should be a priority for the next 12 months.

### **Tackling Child Health Inequalities**

As outlined above, poverty, inequality and where a family lives have a direct relationship with child health. Child death rates in the most deprived parts of Wales are 70% higher than in the least deprived parts. Scrutiny of Welsh Government policy and spending to reduce child health inequalities should therefore be an immediate priority.