

Developing the NHSE Long Term Workforce Plan for children and young people's services: Supporting local long term workforce planning

Introduction

Post-pandemic demand for child health services has consistently increased, exacerbated by a changing landscape of child health inequalities and rising complexity of care.

While the NHSE Long-Term Workforce Plan (LTWP) recognises increased demand for CYP mental health services, going forward there needs to be greater focus on the increase in demand for child health services at all levels from secondary specialist care, community services, to urgent and emergency care.

The RCPCH and its members are calling on national and local stakeholders in England to begin a programme of work from the LTWP that will more appropriately reflect the needs of 25% of the UK population.

This briefing supports local conversations and outlines the three key points local policy makers should consider when taking forward the LTWP to local bodies including Integrated Care Boards in England:

- Current demand for CYP health services
- Future demand for CYP health services - population and complexity
- Future demand for CYP health services – prevention and inequalities

Data sources from England have been provided where possible, and members are encouraged to add local data that may be available from these and other regional resources to share relevant evidence, case studies, lived experience and data to support local discussions.

If you have any further questions, please contact the Workforce and Careers team

1. Current demand for CYP health services

Waiting list numbers:

CYP waiting lists in England are at the highest level, rising at double the rate of the adult population.^{1,2}

Data: [NHS Digital Waiting Times \(England\)](#)

Data: [RCPCH Workforce Information: Waiting Times \(England\)](#)

Data: [RCPCH Workforce Information: Bed Occupancy \(England\)](#)

Insert local data below - include data where demand for CYP services is especially high:

Waiting lists for CYP community services:

CYP community service waiting lists in England are rising at three times the rate of adults.^{3,4}

Data: [NHS Digital Community Waiting Times \(England\)](#)

Insert local data below - breakdown data where possible into community, SLT etc:

Mental health service demand:

Mental health service capacity in England is currently unable to meet increasing CYP demand.^{5,6}

Data: [NHS Digital CYP Mental Health data \(England\)](#)

Insert local data below:

CYP emergency department admissions:

Persistent annual rises CYP ED attendance in England over the last 10 years.⁷

Data: [NHS Digital Admissions data \(England\)](#)

Data: [RCPCH Workforce Information: Emergency Admissions](#)

Insert local data below:

2 Future demand: CYP population and complexity

The CYP population

CYP between 0-19 years make up c.25% of the UK population. Birth rate is higher in disadvantaged populations where there is increased risk of inherited disease and poorer health outcomes.⁸ There are also challenges in the transition from child to adult health care for young people with evidence to suggest high risk of disengagement and variation in services.⁹

Local CYP population:

Data: [ONS Child Population Data \(England\)](#)

Insert local data below:

Multiple service pathways and emerging healthcare priorities:

Increasingly complex CYP care pathways require working between multiple sectors, including primary care, community, CAMHS, schools and social care.

Impact of new or growth areas in medicine, working in new ways on a wider range of issues alongside development of new technology including Genomics, AI and Gender Dysphoria ¹⁰

Changes in ways of working:

Insert local data below - include examples of complex local pathways an ensuing challenges and potential solutions:

New technologies introduced:

Insert local data below - include examples where technologies are changing ways of working:

Wider range of issues:

Insert local data below - include examples of other challenges due to increased complexity of need:

3. Future demand: Prevention and Inequalities

Investing in the child health workforce to tackle ill health and reduce risk factors early in life is the most effective way to ensure a healthier future population and reduced demand on services. This is evidenced in a recent publication by The Academy of Medical Royal Colleges report on Prevention, September 2023 [Securing our healthy future: Prevention is better than cure](#)

One in four UK children live in poverty and are therefore, more likely to have poorer health outcomes.^{8, 12, 13} There are inequalities associated with both ethnicity and deprivation alongside regional variation that impact local child health needs^{9, 14} and demand on child health services.

Index of Deprivation:

Data: [Government Deprivation Index \(England\)](#)

Data: [Indicators of Child Poverty](#)

Insert local data below:

Incidence of LAC:

Increase in the number of LAC with increasing vulnerability to health inequalities and poorer outcomes including mental health.^{15, 16}

Data: [Government Data on LAC \(England\)](#)

Insert local data below:

Obesity in CYP:

A quarter of children aged between 10 and 11 years in England are obese with increasing incidence of Type 2 DM reported.^{17, 18}

Insert local data below - include any additional data that links to child poverty:

References

1. Royal College of Paediatrics and Child Health. Record high: Over 400,000 children waiting for treatment amidst child health crisis 2023. <https://www.rcpch.ac.uk/news-events/news/record-high-over-400000-children-waiting-treatment-amidst-child-health-crisis>.
2. Royal College of Paediatrics and Child Health. Paediatricians call on government to take action as children's waiting lists soar to 350,000 for the first time 2022. <https://www.rcpch.ac.uk/news-events/news/paediatricians-call-government-take-action-childrens-waiting-lists-soar-to-350000-for-the-first-time-2022>.