

PE2193/D: Address Dangerous Delays in Paediatric Cancer Diagnostics

Royal College of Paediatrics and Child Health Scotland written submission, 12 February 2026

Thank you for the opportunity to provide a response to the Citizen Participation and Public Petitions Committee's petition *PE2193: Address Dangerous Delays in Paediatric Cancer Diagnostics*, and in particular the Committee's request for RCPCH's view on greater accountability when an urgent paediatric cancer referral by a GP to be downgraded or delayed by a specialist, solely based on the patient's age.

The NHS is currently facing immense pressures, particularly within paediatric services, where unacceptably long waiting times can have serious and lasting consequences for children and young people. While delays in care are concerning for all patients, the impact on children is especially critical. Many essential treatments and interventions are time-sensitive for children, with effectiveness often dependent on being delivered within specific developmental windows. Missed opportunities for early intervention can lead to irreversible harm, compounding health inequalities and placing greater strain on services in the long term.

These delays are not only a service challenge but a clear children's rights issue. Under the UNCRC, every child has the right to the highest attainable standard of health, as set out in Article 24. This means that timely, appropriate and accessible healthcare is not optional but is an obligation. When children face long waits for assessments, treatment or referral, their rights are not being upheld. We must ensure that children's health needs are prioritised across every hospital, clinic, school and community, recognising that protecting their right to health requires investment, coordinated action and a system designed around what children need to thrive.

The Royal College of Paediatrics and Child Health's *Facing the Future: Standards for children with ongoing health needs* set out what safe, timely and well-coordinated care should look like for all children. While the standards do not address cancer pathways specifically, they cover the whole system and include cancer services within their scope.

In relation to accountability when referrals are modified, several standards are relevant. Standard one requires referrals to be assessed and responded to within five working days, with paediatric involvement in the child's care from the point of referral. Standards two and four highlight the importance of rapid access to specialist advice for healthcare professionals, including urgent advice available at any time of day or night. Other standards highlight the need for robust communication systems, timely sharing of information and clear processes for monitoring, reviewing and improving services (standards five, seven and eleven).

The standards also emphasise the importance of involving children, families and all relevant professionals in the design and evaluation of services (standards ten and eleven), alongside strong leadership for children's services at executive or board level (standard nine). These principles reinforce the need for an accountable system

in which decisions are transparent, evidence based and responsive to the needs of children and their families.

For further information the full Facing the Future report is attached and available here: <https://www.rcpch.ac.uk/resources/facing-future-standards-ongoing-health-needs>

We trust this response assists the Committee's deliberations and remain available to provide any further clarification if required.