Children’s Commissioner for Wales: position paper on *Mind Over Matter*

**Key Messages**

- The Welsh Government has missed an opportunity for a step-change in our approach to children and young people’s emotional and mental health.

- We need to develop a coherent system that mobilises the resources and expertise available in our education, social care and health services, with support from others including youth services, police and the voluntary sector.

- The Welsh Government needs to act to ensure that Regional Partnership Boards have a mechanism to focus on children and young people, and that they require all regions to ensure that CAMHS and social care services provide an integrated service to children with emotional, behavioural and mental health needs.

- A whole-school approach, mapped and led jointly by health, education and social care which guides schools on the help that should be available for children and young people must be the foundation to establishing an equitable emotional and mental health service for children and young people in Wales.

**Introduction**

As Assembly Members prepare to debate the Children, Young People and Education Committee’s report, *Mind Over Matter*, on 4th July, this briefing document outlines my position on the future of emotional and mental health services for children in Wales.

Children and young people’s mental health and emotional resilience is one of the biggest challenges facing Wales today. *Mind Over Matter* has acknowledged this, painting a picture of emotional and mental health services that too often do not fit around children’s needs, with many children not receiving the help they need, when they need it.

The guiding principles of the United Nations Convention on the Rights of the Child (UNCRC) state that the convention applies to every child without discrimination; that the best interests of the child must be a priority; that every child has a right to life, survival and development; and that every child has the right to express their views, feelings and wishes in all matters affecting them. Getting our approach to children and young people’s emotional and mental health right is essential in upholding these guiding principles.

**In its response to the Committee’s report, the Welsh Government has missed an opportunity to acknowledge that it is time for a ‘step-change’ in our approach to children’s emotional and mental health.**

**A whole-systems approach**

Having considered the evidence given to the Children, Young People and Education Committee, and its report, and through my own ongoing engagement with children, their families and professionals, it is clear to me that the current effort to simply re-frame what we already have in place is not going to meet the needs of our children and young people. The time
has come for a more significant shift to a coherent whole-systems approach to meeting children’s needs, across the spectrum of emotional well-being and mental health.

I acknowledge that there have been significant efforts made within the health service to improve the coherency of pathways and to reduce waiting times. There have, of course, also been positive developments in Education. With health and well-being at the centre of the new curriculum, the Welsh Government’s aims are that children’s learning and experience at school will equip them with the tools to be healthy, confident and resilient. I do not doubt the commitment to the emotional and mental health of children and young people of those working within Health, Education and Social Care in Welsh Government.

It is, however, clear to me that the system is still failing in a number of ways. **I believe that we need to develop a coherent system that mobilises the resources and expertise available in our education, social care and health services, with support from others including youth services, police and the voluntary sector,** to provide services that:

- Promote mental health and wellbeing at a universal level under a unified vision that sets clear aims for young people’s well-being and mental health in Wales.
- Provide help as early as possible when it is required
- Have no ‘wrong door’ for children and young people who need more support with emotional, behavioural or mental health problems. These should be able to address social needs alongside mental health needs, as these are so often intertwined.

We have a varied population and geography across Wales, and it would be inappropriate to have identikit schools and support services everywhere. However, a clearly articulated vision for our children and young people would give local areas outcomes to work towards in the way that is most appropriate for their population. I believe that every child in Wales should have access to the following, as needed:

- a whole-school approach to wellbeing and mental health,
- easy to access early help with a single point of entry,
- and a joined-up multi-disciplinary service for those with higher levels of need, that avoids artificial barriers between social care and mental health needs.

Local and regional planning is needed to ensure that this is coherent and avoids overlap in services or gaps between them. Some Regional Partnership Boards have established specific sub-groups to focus on the well-being needs of their local child and young people population. Others have not, and where this is missing there risks being a lack of co-ordination in planning and delivering services. **I believe that the Welsh Government needs to act to ensure that Regional Partnership Boards have a mechanism to focus on children and young people, and that they require all regions to ensure that CAMHS and social care services provide an integrated service to children with emotional, behavioural and mental health needs.**

**A whole-school approach and the new curriculum**

I have been concerned for some time that the health and education departments within Welsh Government do not have sufficient join-up when it comes to emotional and mental health.

In late 2016 and early 2017 I wrote memoranda for both the Together for Children and Young People Programme (T4CYP) and the curriculum reform programme to express my view that it
would be a missed opportunity if reform programmes in both mental health and education did not work together to devise a blueprint for a whole-school approach to wellbeing and mental health in schools. I wrote to the Cabinet Secretaries for Health and Education in March 2017 to express my concern at the lack of progress on this.

In January 2018, I met with the Cabinet Secretaries for Health and Education. In that meeting, I was assured that both departments were working together on emotional and mental health in schools. The Cabinet Secretaries repeated these assurances in joint evidence to the Children, Young People and Education Committee’s Inquiry into the emotional and mental health of children and young people on 15th February 2018.

I am not convinced, despite the hard work of both Education and Health departments in Welsh Government in delivering their own programmes of work, that this join-up is happening. Although there is a pilot in-Reach programme, this can only form part of a whole-school approach. My meetings in the last month with officials from both departments and attendance at the Expert Reference Group for the T4CYP have reinforced this conviction. Officials still express the view that it would be desirable to work together, rather than providing any reassurance that this is underway. This is particularly frustrating as the Programme’s Resilience and Early Intervention work stream’s high impact change areas have clear multi-disciplinary objectives including linking in with educational reform, enabling and supporting schools, identifying cross sector services, and identifying support for vulnerable children and young people, including looked after children and adopted children.

### A Whole-School Approach

A Whole-School approach will include what children learn in school (for example mental health awareness, child and adolescent development, relationships and sexuality education, expressive arts and physical literacy), and the supportive environment of the school (which should include anti-bullying measures, school counsellors, opportunities for mindfulness, yoga or physical activity, support groups, evidence-based preventative programmes and nurture areas). It will need skilled and knowledgeable staff to support children, including pastoral staff, school nurses and youth workers. Those staff will need to be able to communicate quickly and easily with local health, social care and family support services when pupils need extra support. The In-Reach programme, if successful, will support this. Schools will also regularly ask pupils about their emotional health and involve them in developing the right environment.

Many schools provide much of this already, but many others, particularly in secondary schools, report that they are struggling to meet the social and emotional needs of all of their students and would like more support to provide help within school, and to get help from external agencies when needed.

Drawing on the expertise of mental health and education professionals and schools, including young people themselves, the Welsh Government should articulate the aims of a whole-school approach to wellbeing and what this will mean for children and young people in Wales. These aims should be underpinned by the general principles of the United Nations Convention of the Rights of the Child. A route map should also be created that outlines how various elements of provision, both within and outside of school, can work together to support these aims. School leaders can then decide which elements of support they should access to meet these aims for the young people in their school. Without this clarity, teachers are understandably confused by how different elements of external provision support their work across the school. This will be
of assistance to teachers in all schools, particularly those pioneering the Health and Well-being Area of Learning and Experience (AOLE), to understand how they can develop an approach that links into the wider support programmes that could be of benefit to their young people. Setting out aims for a whole-school approach would also be a useful step in enabling schools to measure and critically evaluate the approaches they are taking to young people's wellbeing, in order to develop an improving system.

As the Welsh Government’s response outlines, there are lots of interventions and initiatives which often individually provide a highly valuable service. However, the current position is that of multiple interventions lacking a cross-departmental joint approach. The Welsh Government as a whole, not just individual departments, needs to re-evaluate what such an approach actually looks like and what services schools could be working with.

The different layers of support available across multiple agencies and sectors need to be made clear to schools and to children themselves. The Welsh Government needs to make sure that this is being planned together with schools so that schools are clear what young people should expect from schools, services and government.

**Lack of prevention and early help**

There are multiple programmes of work which are designed to provide early intervention, or are attempting to address areas where it is lacking. This includes the T4CYP, the CAMHS school in-reach pilot, the Adverse Childhood Experiences (ACEs) Hub, Flying Start, and the revised school nursing framework. In social care, Families First provides a multi-agency early intervention and prevention service which has been beneficial to families across Wales.

Despite these programmes, some children and their families report that their mental health or social problems had to get much worse before they could access a service.

Promising initiatives like the Flintshire Early Help hub which provides a whole-county, multi-disciplinary one-stop response service for children experiencing ACEs should be the norm.

**Higher level needs**

My office has dealt with several cases of children with higher levels of need who require specialist mental health provision and who have struggled to access this help in a timely manner. While waiting times for CAMHS assessment have improved, the Committee’s report identifies that this tells us little about a child or young person’s wait for treatment. In children’s mental health, the targets are to first appointment for assessment rather than to receive treatment, so in reality children are waiting longer than the published figures might suggest to receive this support.

It also distresses me to see the small numbers of children with very high levels of need where there can be major disputes about responsibility between tier 4 psychiatric in-patient services, and social care services over where and how they can be safely housed. These disputes are sometimes being played out in court, which is highly concerning and illustrates the need for a much more integrated social care and mental health service.

Children and young people who display high level needs are often placed in specialist units far away from home, across the border in England. Whilst the help they receive at these units is
desperately needed, for some children separation from their families may have been avoidable were there improved preventative and early intervention services in place.

‘The Missing Middle’

The current system is not adequate for those children whose needs are not deemed severe enough to require specialist help, but who are highly distressed and often display concerning emotional behaviour. Too often, these children do not receive the help they need. The Committee refer to these children as ‘the missing middle’.

There are particular concerns around the support for children who have also experienced multiple ACEs. Because these children often have problems which are emotional and behavioural, rather than mental disorders, they can struggle to get therapeutic and other support services they need. This includes looked after children and adopted children.

There are also concerns for children with neurodevelopmental conditions, whose behaviour is often dismissed as being ‘naughty’, or a result of ‘poor parenting’. These children might not be seen by mental health professionals until the situation has resulted in a crisis. This cannot be right, as the professional expertise is there to help these children. We must reduce the unhelpful distinction between social and health needs and provide a more integrated service.

Conclusion: a truly multidisciplinary approach to emotional and mental health services.

The Welsh Assembly has passed some ground-breaking legislation in recent years and the government has published aspirational policy intentions to provide citizen-centred, joined-up, preventative services. Wales has also made strong commitments in law to safeguarding children’s human rights that enable them to be happy, health and safe.

In order to fulfil the positive intentions of these measures, we need a fundamental shift in our approach to providing emotional and mental health services to children and young people, ensuring we deliver services that embody the guiding principles of the UNCRC (articles 1, 2, 3, 6 and 12). There should be no ‘wrong door’ for our children and young people. There should be a multi-disciplinary service available to all young people who are suffering from distress, which involves health, education and social care. This model can be found in pockets across Wales, provided by dedicated professionals, but it is by no means the experience everywhere.

A whole-school approach, mapped and led jointly by health, education and social care which guides schools on the help that should be available for children and young people must be the foundation to establishing an equitable emotional and mental health service for children and young people in Wales.

As young people using CAMHS in north Wales told me just last week, children should be able to speak to someone they trust, at school or in their community, who can ensure that they get the help they need, no matter what point they are at on their mental health journey.

The debate on 4th July provides the opportunity to explore the above issues in detail and ensure that children across Wales are receiving the services described above, so that statutory agencies and others are working together to promote and support positive emotional and mental health for children and young people right now.