

## **Agenda – Health, Social Care and Sport Committee**

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Meeting Venue:

For further information contact:

Video conferencing via Zoom

Sarah Beasley

Meeting date: 14 October 2020

Committee Clerk

Meeting time: 09.00

0300 200 6565

[SeneddHealth@senedd.wales](mailto:SeneddHealth@senedd.wales)

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In accordance with Standing Order 34.19, the Chair has determined that the public are excluded from the Committee's meeting in order to protect public health. This meeting will be broadcast live on [www.senedd.tv](http://www.senedd.tv)

### **Informal pre-meeting (09.00–09.30)**

#### **1 Introductions, apologies, substitutions and declarations of interest**

(09.30)

#### **2 COVID-19: Evidence session with Papyrus and Samaritans Cymru**

(09.30–10.40)

(Pages 1 – 17)

Kate Heneghan, Head of Papyrus in Wales

Sarah Stone, Executive Director for Wales – Samaritans Cymru

Research brief

Paper 1 – Samaritans Cymru

### **Break (10.40–11.00)**

#### **3 COVID-19: Evidence session with academics**

(11.00–12.10)



Professor Ann John, Professor of Public Health and Psychiatry, Swansea University, and Chair of the National Advisory Group on suicide and self-harm prevention

Dr Antonis Kousoulis, Director for England and Wales – Mental Health Foundation

#### **4 Paper(s) to note**

(12.10)

##### **4.1 Letter from the Minister for Health and Social Services regarding the Statutory Instrument Consent Memorandum – Reciprocal and Cross-Border Healthcare (Amendment etc) (EU Exit) Regulations 2020**

(Page 18)

##### **4.2 Letter from the Minister for Health and Social Services regarding the Code of Practice on the Delivery of Autism Services public consultation**

(Page 19)

#### **5 Motion under Standing Order 17.42 (ix) to resolve to exclude the public from the remainder of this meeting**

(12.10)

#### **6 COVID-19: Consideration of evidence**

(12.10–12.15)

#### **7 Legislative Consent Memorandum for the Medicines and Medical Devices Bill: Consideration of additional written evidence and approach to the report**

(12.15–12.20)

(Pages 20 – 24)

#### **8 Forward Work Programme**

(12.20–12.30)

(Pages 25 – 29)

Paper 4: Forward work programme

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We welcome the opportunity to respond to the Health, Social Care and Sport Committee's inquiry into the impact of the Covid-19 outbreak, and its management, on health and social care in Wales.

Samaritans Cymru exists to reduce the number of people who die by suicide. Each year, between 300 and 350 people die by suicide in Wales, which is around three times the number killed in road accidents. Every one of these deaths is a tragedy that devastates families, friends and communities.

Samaritans Cymru calls on the Welsh Government to adopt a comprehensive and ambitious workstream for preventing suicides connected to the COVID-19 pandemic. This approach should recognise the far reaching and unprecedented nature of the impact of the Covid-19 crisis and that suicide prevention is a whole population public mental health issue. The plan should be responsive to emerging evidence and draw on existing strategy and structures. It should recognise the importance of not medicalising distress, of supporting a compassionate response and building resilience, recognising and building on the capabilities of individuals and communities. It should be informed by what we already know about those who are at greatest risk and those actions which are the most effective mitigations.

In the six weeks since lockdown began, we have provided emotional support nearly 400,000 times. Callers have mentioned COVID-19 specifically in 1 in 3 emotional support contacts. We are seeing significant caller concerns being expressed around mental health and illness, family and relationships, isolation and loneliness. Volunteers said some of the most common concerns include being unable to access mental health services, reduced coping mechanisms – for instance through the loss of seeing friends, taking part in hobbies or having a consistent routine and strained relationships both from being separated from loved ones or tensions rising in households. Lack of access to mental health services (e.g. crisis teams, appointments) has been a major theme since the beginning of the lockdown and is causing callers increasing levels of distress. As lockdown is eased, we are hearing additional reports of insufficient and inadequate support. Samaritans helpline has been used as an alternative by some callers (Source, Samaritans volunteer survey).

Volunteers have also told us that callers are concerned about the impact on basic needs such as food, housing and employment. Coronavirus and lockdown is exacerbating callers' existing conditions – mainly anxiety, but also depression, OCD and others too. Levels of expressed suicidality in our callers appear to have remained steady but anxiety has risen, with more callers talking to us about anxiety and the level of anxiety being higher (Source, Samaritans volunteer survey).

At Samaritans Cymru, we believe that preventative action and reaching high-risk groups is vital to minimising the number of people who reach crisis point. Suicide is not inevitable, and preventing suicide needs to be approached with urgency.

## **Policy recommendations**

The Welsh Government must prioritise support for groups already at increased risk of suicide, likely to be especially impacted by social distancing measures and a possible economic recession. The Welsh Government should also recognise that suicide prevention is a whole population public mental health issue, and early intervention can reduce human, social and economic costs

Samaritans Cymru welcomes the recent Lancet article [Suicide risk and prevention during the COVID-19 pandemic](#). This document identifies a number of priorities which can inform the next Welsh Government, which should also draw on the discussions with the Wales Alliance for Mental Health (WAMH), to form the basis of its response to ensure that as few people as possible die by suicide during and following the pandemic.

### **Recommendation: The next Welsh Government should prioritise self-harm**

**Short term: The next Welsh Government and NHS Wales should work together to bolster quality support provided online, by scaling up and fast tracking the development of existing support apps**

**Medium term: NHS Wales should provide comprehensive online therapies to deal directly with self-harming behaviour as well as underlying distress**

We are concerned that many people who self-harm may have been left without their usual coping mechanisms and are struggling to access external support. Measures are needed to ensure that particularly vulnerable people are supported throughout the pandemic and beyond.

### **Recommendation: The next Welsh Government should ensure remote and digital support is available to those who are struggling**

**Short term: NHS Wales should increase remote and digital support to:**

- Ensure clear remote assessment and care pathways for people who are struggling with their mental health
- Support people who have been bereaved

**Medium term: NHS Wales should ensure that evidence-based online interventions and therapies are made available to support people who are suicidal.**

It's possible that existing mental health conditions will be exacerbated by the pandemic and those with poor mental health or a mental health problem may experience a worsening of symptoms as a result of fear, self-isolation and uncertainty. It's also possible that people may develop new mental health problems, especially depression, anxiety, and post-traumatic stress (all associated with increased suicide risk).<sup>3</sup>

There is a serious risk that those struggling with their mental health or at crisis point won't be able to access their usual mental health services and support networks. Poor management of severe and enduring mental health problems during isolation or due to limited access to the usual mental health services or support networks could increase risk of worsening mental

health or suicidality. As a result, it's absolutely vital that remote and digital support is available and accessible for those who are struggling.

**Recommendation: Collecting timely, quality data on suicide**

**Short term:** Real-time surveillance must be rolled out across Wales to understand and effectively respond to emerging trends in suicide linked to COVID-19 in a timely way

More must be understood around the trends and prevalence of suicide, for example in different ethnic groups, and how these trends are being impacted in relation to COVID-19. Implementing a system of real-time surveillance of suicide data also presents an opportunity for coroners' records on suspected suicides to be stored digitally, rather than in paper form.



Llywodraeth Cymru  
Welsh Government

Ein cyf/Our ref: MA VG 2969 20

Dai Lloyd MS  
Chair, Health, Social Care and Sport Committee

Mick Antoniw MS  
Chair, Legislation, Justice and Constitution Committee

Welsh Parliament  
Cardiff Bay  
Cardiff  
CF99 1SN

2 October 2020

Dear Dai, Mick,

This letter is to inform you that I have laid a Statutory Instrument Consent Memorandum in the Senedd in respect of:

- **Reciprocal and Cross-Border Healthcare (Amendment etc) (EU Exit) Regulations 2020**

as required by Standing Order 30A (SO30A).

I am also writing to inform you that I am not minded to table a motion for a debate about this SI in this instance. I have reached this decision on the basis that this SI is restricted to making corrections to the deficiencies in law that will arise as a result of the UK leaving the EU. The provisions of the SI are technical in nature, and there is no divergence in policy between the Welsh Government and the UK Government in this case.

SO30A provides that any Member may table a motion for a debate on this SI. Given the volume of legislation that the Senedd is considering, I will not myself be seeking to initiate such a debate.

Yours sincerely,

**Vaughan Gething AS/MS**

Y Gweinidog Iechyd a Gwasanaethau Cymdeithasol  
Minister for Health and Social Services

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Rydym yn croesawu derbyn gohebiaeth yn Gymraeg. Byddwn yn ateb gohebiaeth a dderbynnir yn Gymraeg yn Gymraeg ac ni fydd gohebu yn Gymraeg yn arwain at oedi.

We welcome receiving correspondence in Welsh. Any correspondence received in Welsh will be answered in Welsh and corresponding in Welsh will not lead to a delay in responding.

Vaughan Gething AS/MS  
Y Gweinidog Iechyd a Gwasanaethau Cymdeithasol  
Minister for Health and Social Services

Agenda Item 4.2



Llywodraeth Cymru  
Welsh Government

Our ref: MA/P/0453/20

Dai Lloyd MS  
Chair, Health, Social Care and Sport Committee  
Welsh Senedd  
Cardiff Bay  
Cardiff  
CF99 1NA

5 October 2020

Dear Dai,

### **Code of Practice on the Delivery of Autism Services public consultation**

I write to you in your capacity as Chair of the Health, Social Care and Sport Committee, in December 2019 I sent the Committee a copy of the draft consultation document. I would now like to draw Committee's attention to the public consultation on the draft Statutory Code of Practice on the Delivery of Autism Services which launched on 21 September 2020. I welcome the Committee's views on the draft code of practice and accompanying guidance document.

I enclose for information a link to my Written Statement which was published on the same day which includes a link to the public consultation web page <https://gov.wales/code-practice-provision-autism-services>. The consultation is due to run for 12 weeks and will close on 14 December 2020

Yours sincerely,

**Vaughan Gething AS/MS**  
Y Gweinidog Iechyd a Gwasanaethau Cymdeithasol  
Minister for Health and Social Services

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# Agenda Item 7

By virtue of paragraph(s) vi of Standing Order 17.42

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