

Lynne Neagle AS/MS,  
Y Dirprwy Weinidog Iechyd Meddwl a Llesiant  
Deputy Minister for Mental Health and Wellbeing



Jayne Bryant MS  
Chair of the Children, Young People and Education Committee

Llywodraeth Cymru  
Welsh Government

13 November 2023

Dear Jayne

Thank you for your letter dated 15 September 2023 regarding your ongoing work relating to the mental health of children and young people. The letter also requests more information or updates in a number of areas which I have set out in this response.

Work is now well underway to develop our Mental Health Strategy and our Suicide and Self-Harm Prevention Strategy for consultation later this year. I would like to assure the Committee that we continue to engage children and young people to help shape this work. I met with the Welsh Youth Parliament in July to discuss the alignment between the key themes across their Mental Health Committee's recommendations with the developing mental health programme of work, and the emerging priorities in the strategy. Officials have also had a number of sessions with the Welsh Youth Parliament and the Youth Stakeholder Group, most recently in October to further inform our strategy work.

We also launched a survey over the summer to inform our strategies and we promoted this to encourage young people to share their views. Our aim is to consolidate the findings from this work and the recommendations from the previous Senedd Committee reports to shape the actions in the strategies. To meaningfully change and improve the support that is available, it is vital that we focus our work in key priority areas or common themes from across the range of reports, surveys and reviews which make recommendations to improve the mental health and well-being of children and young people. The new strategies are an opportunity to do that; setting out key priorities that will bring about the changes we all want to see.

The draft strategies will set out the high-level actions and will be supported by more detailed Delivery Plans. When the strategies are out for consultation, officials will begin work on the detailed Delivery Plans. Our aim is to assure the Committee, through the actions in the Delivery Plan, that the key themes from the Committee reports are included.

Bae Caerdydd • Cardiff Bay  
Caerdydd • Cardiff  
CF99 1SN

Canolfan Cyswllt Cyntaf / First Point of Contact Centre:  
0300 0604400

[Gohebiaeth.Eluned.Morgan@llyw.cymru](mailto:Gohebiaeth.Eluned.Morgan@llyw.cymru)  
[Correspondence.Eluned.Morgan@gov.wales](mailto:Correspondence.Eluned.Morgan@gov.wales)

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.

The Committee will then receive the routine reporting against the Delivery Plan as opposed to separate reporting on previous Committee reports published in the last Senedd term. This will ensure you receive regular assurance, but also guarantees officials and colleagues in the NHS Executive can focus on the delivery of the actions without having to provide multiple updates.

We will publish the Mental Health and Suicide Prevention strategies for consultation at the end of the year. During the consultation period, I'd like to offer a meeting with officials to provide you with a factual briefing on how the Committee recommendations have shaped the actions.

### **Transitions from CAHMS to AMS**

Sort the Switch includes one main overarching recommendation to implement and to improve our ability to monitor the Welsh Government's Transitions Guidance. I accept this key recommendation and I am committed to delivering it. As you are aware, in May 2022 the Welsh Government commissioned TGP Cymru to take forward a consultation and publish a report highlighting the transition experiences of young people in their own words. In May 2022 MIND Cymru also published an independent young person transition report. Both reports make a number of recommendations and to ensure that we are able to focus limited resources in key areas, we are focusing on the common themes across both reports. These are:

- Improving support while waiting to move to AMHS.
- Improving communication and information.
- Better co-production of transition healthcare plans.
- Implementing the transitions guidance.
- Improving our ability to monitor progress and experience

Whilst a focus in these areas will deliver the vision in both reports, I recognise that Sort the Switch Report includes a range of wider, underpinning recommendations – for instance extending advocacy support, which are not included in the transitions workplan. These wider recommendations have been considered along with a range of other information to inform the draft strategies and we will consult on these later this year.

Following the workshops held over winter 2022/23 the CAMHS Implementation Network (in the NHS Executive) are working with Health Boards (CAMHS and AMHS), Mind Cymru and young people with lived experience to improve and monitor the ongoing transition process. The CAMHS Implementation Network is currently liaising with Mind Cymru to identify participants and to bring a group of young people together. I will be involved with this liaison and consultation process with young people. This work will be used to inform a strengthened framework for monitoring implementation of the guidance and the replacement or redesign of the young person passport. The CAMHS Implementation Network's key focus will be the following:

- Continuous development of a clear understanding of the transition process in consultation with young people with lived experience of services.
- Continue to build an understanding of Health Boards current offer and their approaches through the lived experience of young people.
- Work with young people and health boards to co-create practice-based evidence to support service development.
- Encourage and facilitate health boards to provide a quality, seamless transition process.

- Ensure that quality care and treatment plans and transition healthcare plans are co-produced with the young person.
- Share good practice across health boards.
- Continue to explore the evidence for extending the age range of Specialist CAMHS to 25 years.
- Develop and report regular evaluation and monitoring of the maturity of service provision in individual Health Boards

The work that the CAMHS Implementation Network team are now taking forward will include ongoing consultation with young people whilst working alongside the Performance and Assurance Division of the NHS Executive. This work will help us to understand the young person's journey and experience and support the development of data collation and patient satisfaction questionnaires. The planned development of regular service evaluation and reporting will also support ongoing service improvement.

Improving transitions will be a priority in the draft Strategy with routine updates on progress against the final Delivery Plan once agreed.

In respect of the Delivery Unit's work on CAMHS; the Implementation Board for CAMHS is leading work to deliver the necessary changes identified by the NHS Delivery Unit (now part of the NHS Executive) including supporting the dissemination of good practice examples across Wales. This will be underpinned by a national service specification for NHS specialist CAMHS to ensure equity of provision across the whole of Wales and enable Health Boards to develop quality improvement plans. The current aim is for health board to have agreed improvement plans that they can be held accountable for by Spring 2024. The NHS Executive will shortly be appointing a dedicated mental health Clinical lead to drive this work at the necessary pace.

This work is in parallel to the strengthened focus on performance in monthly meetings between the NHS Executive and health boards. All have boards have performance and waiting time trajectories in place to achieve waiting time targets by March 2024.

In my response of 26 May to recommendation 8 of your inquiry into mental health support in higher education, I noted that we have now agreed our governance and reporting arrangements for the Whole School Approach (the education aspect of the wider NYTH/NEST whole system approach).

A new Oversight and Delivery Board, jointly convened by the Minister for Education and Welsh Language and I, replaced the previous Joint Ministerial Task and Finish (T&F) Group on a Whole School/System Approach to Wellbeing. The T&F Group had fulfilled its remit in relation to education settings with the publication of the statutory Framework on embedding a whole school approach to emotional and mental wellbeing (March 2021) and associated significant funding from the Welsh Government to support activity. As such the Minister for Education and Welsh Language and I felt that the T&F Group should now focus on implementation and delivery of activity. The newly constituted Oversight and Delivery Board held its first meeting in May.

The Board has a specific focus on scrutiny and challenge to ensure consistent and effective implementation of our Framework and the associated work which supports its implementation. Beneath the Board seven workstreams report on the key activity required to successfully meet our wellbeing objectives. These are:

- implementation of the Framework;
- rollout of our CAMHS school in-reach service;

- expanding and improving school counselling;
- education workforce wellbeing and training;
- a whole education group, which looks at wellbeing across the whole sector from foundation to higher education;
- a stakeholder reference group which considers issues such as resources, monitoring and evaluation; and
- our National Youth Stakeholder Group which ensures the voice of children and young people informs activity.

In my response to your inquiry, I undertook to provide an annual report (by academic year) of activity. We are currently considering the first such report and I will write further in relation to this in due course.

We also recognise that the school alone cannot address all the wellbeing issues facing young people today and that our whole school approach must sit within a wider whole system approach. The [NYTH/NEST framework](#) takes a whole system approach to mental health and wellbeing services for babies, children and young people. Our governance around NYTH/NEST is aimed at fostering the principles of a connected system. Our National NYTH/NEST Steering Group is a mix of Welsh Government colleagues as well as external stakeholders involved in the creation of NYTH/NEST to direct implementation. In addition, we have a cross governmental group which draws in a broad range of policy holders to ensure NYTH/NEST is applied throughout our broader work for babies, children and young people. It is important to us that our whole system work in relation to mental health and wellbeing is shaped and directed by young people themselves and thus we work closely with the National Youth Stakeholder Group and other youth groups to continually engage on our ongoing NYTH/NEST implementation. We are developing annual National NYTH/NEST reporting which will provide progress updates on the implementation of NYTH/NEST both nationally and regionally. To support NYTH/NEST implementation we are co-producing a NYTH/NEST Self-Assessment and Implementation tool and NYTH/NEST training as well as a [good practice examples document](#).

In relation to the specific questions you raised (5 a to c) in your letter:

- The work of Public Health Wales' implementation co-ordinators, how well-established the network of co-ordinators is across Wales, and what impact this work is having.

The Welsh Government has provided Public Health Wales (PHW) with £670,000 in the current year to support implementation of the statutory Framework. This has enabled PHW to recruit seven (whole time equivalent) implementation coordinators, embedded within the Welsh Network of Health School Schemes. Progress to embed the Framework across maintained schools in Wales continues to improve, particularly among schools with secondary-aged learners. However, continued focus is being placed on increasing the proportion of schools with strategic action plans routinely embedded within their School Development Plans (SDPs). As at the end of July 2023 52% of schools (48% primary, 73% secondary and 73% special schools/PRUs) had undertaken the self-evaluation process, whilst 28% (24% primary, 46% secondary and 47% special/PRUs) had action plans in place. Both the Minister for Education and Welsh Language and I remain concerned at the pace of progress and made this point to PHW when we met them in September. PHW have set a target that 80% of schools with secondary learners having identified actions within their SDPs by March 2024, increasing to at least 90% by March 2025

PHW is also conducting a mixed-methods evaluation that is focused on the implementation of the Framework across several stages, including self-assessing needs and strengths; creating an action plan; and implementing, system wide-working. This work draws on feedback from schools who have already engaged with implementation coordinators.

In addition, the Welsh Government conducted a survey in June/July 2023 that explored the progress of schools and education settings in developing their whole school approaches and their use of available resources to achieve this. The survey invited members of senior management and leadership teams, and/or health and well-being lead staff from schools and education settings to respond. This included maintained nursery, primary, secondary, middle, and special schools including pupil referral units. We intend to formally publish the results on 16 November as a Government Social Research Bulletin. In addition, pending budgetary agreement, we also intend to undertake some follow-up work in the form of interviews and/or focus group work with respondents to further consider some of the issues raised in the survey.

b. An update on work to measure and evaluate the implementation of/outcomes from the whole-school approach, following the publication of the evaluability assessment in January 2022.

There is a range of activity underway to measure and evaluate activity at the strategic, local and school level. However, we are concerned that the activity is disparate and does not fully recognise the many interdependencies in this area. As such we have agreed that there is a need to develop a detailed evaluation and monitoring strategy which seeks to pull all this activity together into an evaluation plan that will include our short-term research projects and will explore how we can consider longer-term monitoring. I am hopeful that the initial scoping of this work can occur in early 2024 for agreement by the Oversight and Delivery Board and to inform the funding and budget setting process for 2024-25.

This will include:

- A research summary on the effectiveness and impact of statutory school and community-based counselling services for children and young people.
- Phase 2 of our research to explore implementation of the whole school approach survey (as detailed in (a) above), which will explore the help provided to schools and education settings and the resources utilised to support the development of their approach, as well as how they can be further supported to deliver their approach.
- The biennial School Health Research Network (SHRN) survey for senior leaders in secondary schools and work to extend this to primary schools.
- The Wolfson Centre for Young People's Mental Health evaluation of the whole school approach in Wales.
- PHW evaluation activity (as detailed in (a)) on implementation of the whole school approach and schools engaging in the process.
- Wider interdependencies such as the wellbeing activity schools are supporting using their PDG funding and the work of Estyn in considering wellbeing as part of the inspection process.
- Data provided by local authorities and local health boards to support the funding we provide in respect of school counselling; delivering training and interventions in schools; and in relation to our CAMHS school in-reach service.

c. Barriers identified so far to the successful implementation of the whole-school approach across Wales (for example, in relation to the capacity of school staff to

support children and young people's emotional and mental wellbeing, and the availability of specialist support in local areas).

the points you mention around capacity and availability of support are both valid. In addition, the establishment of our workforce workstream, beneath the Oversight and Delivery Board has not progressed at the pace we would like to see, for a variety of reasons. However, the Board discussed progress in this area at its recent meeting on 24 October and agreed a number of actions which should mark a step change in this work.

In addition, we are pleased that we now have CAMHS school in-reach support available across all of Wales, with over £5m annual Welsh Government funding supporting this important initiative. However, as the teams establish, we will want to ensure that provision is consistent and equitable across all of Wales and that regional variations in provision do not disadvantage children and young people in receiving support.

There is an interdependency between the NYTH/NEST framework and the Whole School Approach to emotional health and wellbeing. We have been clear, and will strengthen our communications, to ensure that educators understand that the two are complimentary guidance to support the mental health and emotional wellbeing of children and young people in educational, health and social care settings.

The statutory Framework provides statutory guidance to schools to meet the needs of children and young people in educational establishments, whilst the NYTH/NEST framework relates to the whole system including health, social care and third sector. Alignment of the core values ensures that implementation of either framework in their specific area will meet the principles of both sets of guidance. Together, these frameworks provide a holistic approach to children's mental health and wellbeing, promoting clarity, collaboration and continuity of practice across each sector and as long as educators are working towards the statutory whole school approach Framework, then they will be meeting the requirements of NYTH/NEST also.

Yours sincerely,



**Lynne Neagle AS/MS**

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