Jeremy Miles AS/MS Gweinidog y Gymraeg ac Addysg Minister for Education and Welsh Language

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



Llywodraeth Cymru Welsh Government

Jayne Bryant MS Chair Children, Young People and Education Committee Senedd Cymru Cardiff Bay CF99 1SN

8 February 2024

Dear Jayne,

During 2023 the Children, Young People and Education Committee undertook an inquiry into Mental Health Support in Higher Education. The final report (March 2023) recommended, among other things, that:

'the Welsh Government provides us with regular information and any available data on the roll-out of the whole-system approach in pre-16 education. This information should be provided twice a year and should provide us with the information to understand the impact the roll out is having on children and young people's emotional and mental well-being, as well as the extent to which it is building resilience'.

On 26 May we responded, noting that we had agreed our governance and reporting arrangements for the Whole School Approach to Emotional and Mental Wellbeing (WSAEMW), the education aspect of the wider NEST/NYTH whole system approach.

Our response also stated we would provide a single annual report (covering the academic year) towards the end of 2023, early 2024 and we are pleased to attach with this letter the first such report. The report builds on the information provided in the letter from the Deputy Minister for Mental Health and Wellbeing in response to your letter of 15 September regarding the rollout, implementation and barriers to progressing the WSAEMW. However, providing information by academic year has proved difficult due to differing timeframes used in reporting aspects of our work, something we will seek to align for the future.

Bae Caerdydd • Cardiff Bay Caerdydd • Cardiff CF99 1SN

Canolfan Cyswllt Cyntaf / First Point of Contact Centre: 0300 0604400 <u>Gohebiaeth.Jeremy.Miles@llyw.cymru</u> <u>Correspondence.Jeremy.Miles@gov.wales</u>

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 hope you find the report informative and useful to your ongoing work in relation to the emotional and mental wellbeing of children and young people.

Yours sincerely,

Jeremy Miles AS/MS Gweinidog y Gymraeg ac Addysg Minister for Education and Welsh Language

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

Whole School Approach to Emotional and Mental Wellbeing update for Children, Young People and Education Committee

Introduction

In March 2021 the Welsh Government published the statutory guidance, the Framework on Embedding a Whole School Approach to Emotional and Mental Wellbeing¹ (WSAEMW) against the backdrop of the Covid19 pandemic. Since then we believe we have made steady progress in implementing the requirements of the guidance. Initial rollout was hindered by the impact and recovery from the Covid19 pandemic, when schools and local public health team capacity was focused on controlling the spread of the virus and ensuring continuity of learning during the 2021/22 academic year. The rate of implementation increased during the 2022/23 academic year and continues to improve. The pandemic adversely affected the wellbeing of children and young people and also the ability of services to recover and manage the backlog of individuals requiring support. In addition, children and young people's wellbeing is now being affected by the subsequent cost of living crisis; where we know the impact poverty can have on the emotional wellbeing of individuals, families and wider communities.

Governance arrangements

As noted in the Deputy Minister for Mental Health and Wellbeing's letter to the Chair of the CYPE Committee on 9 November the Welsh Government now has in place governance and reporting arrangements for the Whole School Approach, with an Oversight and Delivery Board, jointly convened by the Minister for Education and Welsh Language and Deputy Minister.

The Board meets termly (with the next meeting on 21 February) with a specific focus on scrutiny and challenge (the February meeting will consider the work of the school counselling workstream) to ensure consistent and effective implementation of our Framework and the associated work.

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.

¹ WG42005 (gov.wales)

WSAEMW roll out

1. Framework implementation

As noted in the Welsh Government's response to the CYPE Committee Chair's letter of 15 September, we have provided Public Health Wales (PHW) with £670,000 in the 2023-24 to support implementation of the statutory guidance. This has enabled PHW to recruit seven (whole time equivalent) implementation coordinators, working across the seven health board regions and alongside the Welsh Network of Health Promoting Schools Schemes (WNHPSS).

Progress to embed the Framework across maintained schools in Wales continues to improve, particularly among schools with secondary-aged learners.

Every health board has reported that 100 percent of maintained schools in their area are aware of the statutory guidance and have been offered support from Implementation Co-ordinators or WNHPSS Co-ordinators to progress with implementation. As of November 2023, 95 percent of maintained secondary schools have engaged with Co-ordinators, as a minimum attending a briefing session to understand the process to undertake self-evaluations, this involves using a standardised toolkit developed by PHW and which supports the school in assessing strengths, weaknesses and engaging with the school community to develop an action plan. of strengths and areas for improvement in relation to implementation (recorded as "on-board"), the majority of which have commenced their self-evaluation. This represents a significant increase over the 2022/23 academic year, with roll-out continuing to improve through the Autumn term (see table 1)

In September 2022 15 percent of all schools and 31 percent of secondary schools were undertaking self-evaluations and 6 percent and 12 percent respectively had action plans to address areas for improvement. As of November 2023 this has increased to 59 percent of all schools and 82 percent of secondary schools undertaking self-evaluations and 33 percent and 57 percent respectively with action plans in place.

	Sept 2022			July 2023			Nov 2023		
School type	Conta ct made [[] <u>1</u>]	Self- evaluation commence d ^[2]	Action plans [[] <u>31</u>	Contac t made	Self- evaluatio n commenc ed	Actio n plans	Conta ct made	Self evalu ation comm enced	Action plannin g
Primary	18% (220)	12% (141)	5% (55)	59% (731)	48% (579)	24% (285)	66% (795)	54% (650)	28% (341)
Secondary	48% (99)	31% (45)	12% (24)	86% (176)	73% (150)	46% (94)	95% (195)	82% (168)	57% (116)
Special schools & PRUs	34% (21)	31% (19)	15% (9)	77% (48)	73% (45)	47% (29)	86% (53)	86% (53)	60% (37)

Table 1

All schools	23% (340)	15% (223)	6% (88)	63% (951)	52% (774)	28% (408)	71% (1045)	59% (868)	33% (494)	
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¹¹ **On-board** – schools have, as a minimum, attended a briefing session with Implementation Co-ordinators/WNHSS Co-ordinators and indicated their intention to commence self-evaluation.

^[2] Self-evaluation – Schools have commenced or completed their self-evaluation of strengths and needs against the WG Framework

[3] Action plans – schools have action plans in place for improvement against priorities identified in their self-evaluation

Whilst performance indicators for the implementation of the WSAEMW continue to improve addressing variation in engagement between local authority areas is a priority. This is being addressed alongside maintaining momentum with schools already engaged to ensure they embed actions for improvement in their School Development Plans (SDPs). A further priority is to strengthen alignment between WSAEMW and CAMHS School In-Reach activities, enabling schools to improve support for those children and young people who do not meet the threshold for specialist CAMHS.

We want momentum to continue and the Minister for Education and Welsh Language and Deputy Minister for Mental Health and Wellbeing made this point to PHW when they met in September 2023. PHW have set an ambition that 80 percent of schools with secondary learners will have identified actions within their SDPs by March 2024, increasing to at least 90 percent by March 2025.

2. Survey of schools

The Welsh Government undertook a survey of school leaders and practitioners in summer 2023 to understand the progress of schools and education settings in developing and delivering their WSAEMW in their learning settings. The survey invited responses from school leaders (a member of the school's senior management team including headteachers, assistant headteachers, or deputy headteachers) and well-being leads on behalf of their learning settings. The research aims of the survey were to:

- Map the progress of schools in developing and implementing their WSAEMW,
- Explore the extent of support that schools have received to develop and implement their approach,
- Examine the use of relevant resources by schools,
- Understand how schools' progress, as well as the support they have received and their use of resources, varies based on the characteristics of the schools.

A total of 152 responses were received, although some schools submitted more than one return and in total responses were received from 136 (9 percent) of schools. The findings were published as a Government Social Research bulletin on 16 November 2023².

²Whole-School Approach to Emotional and Mental Wellbeing: Research bulletin (gov.wales)

Overall respondents reported that their schools were at various stages of developing their whole school approach, with both primary and secondary schools most frequently reporting that they were in the action planning stage (slightly under one in three primary schools and over one in three secondary schools), followed by continuous improvement and implementation (around one in five primary and secondary schools for both stages). A small group of schools (5 percent) indicated that they had not started to develop their whole-school approach.

Under half of schools (47 percent) reported that they had contact from their dedicated Implementation Coordinator or local WNHPSS to support the development of their approach once a term or more frequently, although a higher proportion of secondary schools reported that they received more frequent engagement than primary schools (around two in three secondary schools compared to two in five primary schools). Of respondents who have had communication, three quarters (75 percent) reported being 'Quite' or 'Very satisfied' with the quality of their support, 13 percent indicated that they were 'A little' satisfied and 4 percent reported that they were 'Not at all satisfied'.

Most respondents (86 percent) reported that their school had used the statutory framework to some extent, although 10 percent of respondents indicated that they were not aware of the framework. Amongst schools who had used the framework, respondents from secondary schools were slightly more likely to indicate that the framework was 'Very' or 'Quite useful'.

The intention is to undertake further work with school leaders and practitioners, through interviews and focus groups to further explore some of the issues arising from the survey. This work will occur during 2024.

3. CAMHS Schools In-Reach

The CAMHS Schools In-Reach service, which sees dedicated mental health and wellbeing practitioners in schools providing consultation, liaison, advice and training, for school staff, remains an important element of our WSAEMW programme of work. During 2023-24 we are providing over £5m to support the service in local health boards.

Currently, there are 136 full time equivalent practitioners (FTE) spread across the teams. Each team has formed a strong identity with their schools and partners, has a depth of local intelligence (in relation to local services, schools and third sector provision) and are working to influence the culture and ways of working of schools and partner organisations.

The Welsh Government funds PHW to provide national oversight and coordination of the In-Reach service and PHW has identified common themes across the CAMHS In-Reach teams in terms of 'how the service works' across the nation. These are:

- collaboration with others,
- relational approach,
- enabling schools,
- strong leadership,

- complimenting other services
- addressing systems around the child.

In addition, common themes on 'what the service does' are:

- upskilling school staff,
- creative problem solving with the school,
- culture and systems influencing,
- being locally intelligent,
- bridging services,
- preventing escalation
- Normalising (including reducing stigma).

These are initial findings from PHW analysis of engagement with In-Reach teams, and further validation of these themes with the In-Reach teams will be happening in the next few months to inform a final narrative of the offer across Wales.

In addition, PHW, working with the Welsh Government and partners will prepare a CAMHS In-Reach Learning Report (to be published in Autumn 2024). This intends to capture the work of CAMHS In-Reach to date, review the current theory of change, review data collection methods and report on the value/impact of this service in return for the investment with recommendations.

PHW are bringing together clinical and team leads from each of the In-Reach services for regular cross-regional networking opportunities, enabling sharing of good practice and to review and improve monitoring data collected by the local teams, including strengthening locally collected impact data.

In addition, individual CAMHS In-Reach services are reported directly to the Welsh Government as part of the NHS Performance Framework. Progress is reported biannually during October (covering the period April to September) and April (covering the previous October to end March). The information reported is variable and makes comparison across areas difficult with a range of qualitative and quantitative information provided. The priority for coming months is, working with PHW and health boards, to review data collection and standardise the range of information provided for consistency and comparison. We hope this work can be completed to inform the October 2024 reporting period.

In addition, one of the key recommendations of the CAMHS review undertaken by the Performance and Assurance Team, was to review the current guidance and develop a CAMHS service specification for Wales that will support equity of access, quality and outcome measurement and reduce variation. The NHS Executive has worked with several partners including, clinicians, managers, third sector organisations, parents and carers, to develop a document aligned to legislation, clinical guidelines and national priorities. This is currently under consultation with Welsh Government officials and partners, including the Health Boards and will include the In-Reach service within its scope.

Notwithstanding the inconsistent reporting thus far, the last reporting period has shown the following progress across health boards.

ABUHB - Majority of schools in Gwent have engaged with in-reach through consultation, group work and training. There are only a few primary schools and alternative provisions that have not engaged in anything, but they have been sent information.

Secondary schools have dedicated fortnightly slots for consultation and primary schools and alternative provisions have monthly slots available to them. Between September 2022 and July 2023, ABUHB completed 3,116 consultations to all schools. 2,033 group sessions were offered to young people in secondary schools. 1,418 staff received online training and 92 schools received in person training.

BCUHB - In collaboration with Director of Education for Denbighshire and the Chief Education Officer for Conwy financial support was provided to promote Compassionate Leadership at the counties headteacher's conferences in June 2023 and delivery of the FRIENDS Resilience programme within the two counties. The East team are providing support with the development of GP In-Reach service in Wrexham/Flintshire, with the aim of being developed with GP Family Wellbeing Practitioners. The Clinical Service Manager and Senior Education Mental Health Practitioners have met all LA Education Officers to promote the service.

CTMUHB - SHINE (CAMHS In-Reach) have worked closely with WSAEMW implementation leads to operate a pilot programme. SHINE have completed one phase in over fifty schools. The Shine team have organised regular multi-agency co-production workshops in each locality area. Multi-agency forums are now in situ across the localities with good engagement. In-Reach have provided significant input into approximately 80-85 per cent of the schools in CTM.

HDUHB - The multi-agency steering group is well established since 2021, quarterly meetings are held and membership includes representatives from all stakeholder groups including LA partners, ALN DECLO, WSAEMW Implementation lead and school staff. LHB continues to engage with relevant priority groups/partners including ALNCO, Head teacher Forums and the Emotional Health and Well-being Group. Team Leads continue to attend TAPPAS (team around pupil, parent and school) meetings for every secondary school to offer advice and support. Good links have been made with Mind and Adferiad on their new Children and Young People Sanctuary projects.

PtHB - The Service continues to develop and has experienced some changes in staff and challenges from staff absence, which may have had an impact on relationships with schools, but consultation work was prioritised and the response to referrals and performance in terms timescales was not affected.

Staff contact schools as a minimum twice in a school half-term and have developed relationships with assigned schools and key stakeholders, offering staff training, learner learning and consultation. The Service has a central telephone number and email, so schools are able to contact a member of the team during office hours and have a Twitter/X account to share relevant information relating to emotional health and wellbeing in schools. A Powys annual wellbeing calendar is developed and is shared with schools.

SBUHB - Participate in the monthly Emotional Health and Wellbeing Forum, a meeting that allows multiple agencies from the school communities to gather and share the current status in relation to their services. To develop relationships the LHB invited a head teacher and school based counselling lead to attend the interview panel for the In-Reach team lead.

Regularly attend meetings with primary school heads and engage with wellbeing leaders within Secondary Schools. Tailor training programmes to meet the specific needs of the school and actively contribute to the LEA training program. Actively participate in events such as Wellbeing Wednesday and parent workshops to foster discussions on mental health. Also utilise social media, distribute termly newsletters and send yearly questionnaires to schools.

C&VUHB - The In-Reach clinical lead has continued to engage with regional partners. Over the past year, a monthly meeting with Cardiff Education Services was established to progress the joint core emotional wellbeing offer for schools and to explore opportunities for further partnership development. The clinical lead has recently joined the Vale Wellbeing Leads Meeting.

Worked with LA and education partners in the development of thinking around topics pertinent to schools such as Self-Harm and Emotional Based School Avoidance/Anxiety Based School Avoidance. Conversations with leads from primary schools have started (through attendance at Headteachers Forum and via email to schools inviting representatives to attend a focus group) and are planned to continue to understand needs and support. Termly newsletter is sent to over 500 recipients. This includes updates on work, news, and details of upcoming training and service developments.

4. Use of PDG to support wellbeing

Regional Education Consortia / Local Authorities are required to submit to the Welsh Government a Support Plan setting out how they will ensure effective use is made of the PDG in line with the *High Standards and Aspirations for All* eight key areas, one of which includes the Health and Well-being of Children and Young People. An analysis of the support provided using PDG on Wellbeing in 2022/23, highlighted the key contribution this funding provides to support our wellbeing agenda. Examples of support include:

Education Achievement Servive

- All schools received a bespoke grant from the EAS to fund a key member of staff to become the Wellbeing Lead for that school.
- > The WSAEMW is promoted in all professional learning events.
- A bespoke document for each LA is currently in development to be shared with all its schools mapping the national, regional, and local offer available to support each school to embed the WSAEMW framework.

Central South Consortium

- Meet monthly with PHW Implementation Leads that cover the region to discuss key priorities and areas of focus and have supported all direct school engagement events that cover all three local authorities.
- Worked with the PHW Implementation Leads to identify additional PL opportunities that would support both the WSAEMW and wider equity and wellbeing work across the region.

<u>Partneriaeth</u>

Worked with the School Improvement Adviser Teams across each LA to increase understanding and awareness of the WSAEMW and the link with the PDG to ensure that school strategic planning is robust and in line with all expectations.

Neath Port Talbot LA

- Education Support Officers have engaged with all school leaders to develop an understanding of WSAEMW.
- All schools have attended two training sessions on the WSAEMW Self Assessment Toolkit with PHW.
- Many schools continue to use PDG to support wellbeing interventions e.g. ELSA, relationship based play, school based counselling. The Inclusion Service continue to provide professional learning and support to schools who recognise the need to support pupil's emotional health and wellbeing.

Ceredigion LA

A majority of schools in the local authority are reporting that they are spending their PDG on health and wellbeing and a majority of schools report that health and wellbeing is where they spent the majority of their PDG.

Powys LA

Share emerging practice is supported by the use of funding to ensure a cohesive approach. Clear guidance is being developed to support the wellbeing of all learners. Partnership working is well developed but is being further strengthened with a range of partners, including the Healthy Schools Team, which supports many settings and schools.

5. Professional learning and development

The most important thing we can do to implement the WSAEMW is to upskill our schools workforce. We are in the process of commissioning a professional learning response and package of support which will underpin teaching staff, their development and ongoing learning in relation to the WSAEMW. Linked to this it will also address the need for learning around child development and neurodiversity, recognising the interdependencies. This is a considerable step change in the provision of professional learning and will take time to develop but the Welsh Government is committed to making progress at pace in this area due to its importance in underpinning our wellbeing commitment.

WSAEMW impact

Measuring the impact of our work in this area is not straightforward as there are many interdependencies impacting the wellbeing of children and young people and these occur both in and outside the school environment. There is no 'silver bullet' and changing cultures takes time. However, there is a range of activity underway to measure and evaluate our work at the strategic, local and school level. This includes some of the work outlined in this report, such as routine monitoring of implementation progress, PHW and Welsh Government led evaluation activity and the independent evaluation by the Wolfson Centre.

In 2022 we published the evaluability assessment³ for the WSAEMW to aid implementation and evaluation. This report suggested reviewing the logic model as the programme of work progressed. To this end, PHW convened relevant stakeholders in November 2023, to consider establishing the overall evaluation narrative for the WSAEMW following a logic model approach. This event determined the following aims going forward:

- 1. Communication between all researchers/evaluators on a quarterly basis.
- 2. Clarifying the research questions being answered for the full programme and identifying any evaluation activity gaps to be addressed.
- 3. Creating an overall narrative bringing together each of the evaluation strands and updated logic model
- 4. Integrate the progress over the next year, into the new Health Promoting Schools programme of work.

Item 3 above will provide an overview of all research and evaluation activities. The plan will also aim to outline how the implementation and impact of the WSAEMW can be monitored long-term within the Health Promoting Schools Programme of work.

In addition to this there is much work already occurring upon which to build and which provides us with a snapshot and benchmark of the wellbeing of our children and young people.

In April the School Health Research Network published the 2021/22 Student Health and Wellbeing Survey report⁴. The survey was completed online in the classroom by 123,204 students across years 7 to 11 in 202 schools (196 maintained schools and six independent schools), and the report showed:

- at least 'slightly raised' mental health symptoms in almost a half of learners (46 percent) and 'very high' symptoms in almost a quarter (24 percent) using the Strengths and Difficulties Questionnaire. An increase from 39 percent and 19 percent, respectively, in 2019.
- The percentage with elevated (i.e. at least 'slightly raised') mental health symptoms increased with age. However, between 2019 and 2021, the percentage increased disproportionately in the younger age groups (years 7 and 8) compared to the older age groups (years 9-11).

³ Whole School Approach to Mental and Emotional Wellbeing: evaluability assessment | GOV.WALES

⁴ National Data - School Health Research Network (shrn.org.uk)

- Elevated symptoms were more common in girls than in boys, with this gap widening with age. Between 2019 and 2021, the percentage with elevated symptoms also increased disproportionately in girls (from 44 percent to 53 percent) compared to boys (from 34 percent to 36 percent).
- Elevated symptoms were more common in learners from the least affluent families, but there was no evidence of this gap widening between 2019 and 2021.
- Overall, 62 per cent of learners agreed there was mental health support at their school, declining from 67 percent in 2019. Girls were less likely to agree there is support compared to boys (59 percent vs. 66 percent), with a greater decline since 2019. Those in older age groups were also less likely to agree there is support.

While the survey showed that most young people are healthy and happy with their lives, it evidenced a decline in positive results on many indicators of mental health and wellbeing, as well as school, family and social life, compared to data collected in 2019, before the COVID-19 pandemic. On many of these indicators, the decline in positive results was more marked in girls than in boys.

The Welsh Government is keen to extend the School Health Research Network and Student Health and Wellbeing Survey to primary schools and have been funding pilot work to explore how this can be effectively accomplished. The report of the first primary school survey undertaken across school years 3-6 (i.e. 7-11 year-olds) was published in October⁵. Self-reported data were collected online from students in the classroom. The national averages are based on 32,606 responses from 354 primary schools in Wales, collected between September 2022 and March 2023. Schools in 21 out of 22 local authorities took part. The final version of the survey included 19 questions for years 3 and 4, 28 questions for year 5, and 33 questions for year 6.

The report presents overall results, as well as results by school year, gender, and family affluence (only asked of learners in school years 5 and 6), along with a brief narrative summary. A brief selection of findings in relation to mental health and wellbeing are:

- The *Me and My Feelings Questionnaire* is a validated tool consisting of 16 questions, assessing emotional and behavioural difficulties. Overall, more than a quarter of learners (27 percent) reported elevated emotional difficulties, with 13 percent reporting potentially clinically significant emotional difficulties. Some 14 percent of learners reported elevated behavioural difficulties, with 8 percent reporting potentially clinically significant behavioural difficulties.
- On average, girls were more likely to report emotional difficulties than boys, and boys were more likely to report behavioural difficulties than girls. However, those who identified as neither a boy nor a girl were the most likely to report both emotional and behavioural difficulties.
- Learners from less affluent families were more likely to report both emotional and behavioural difficulties than those from more affluent families. The pattern by age was less clear.

⁵ National Data - School Health Research Network (shrn.org.uk)

The survey showed that most children aged 7-11 are healthy and happy with their lives. However, a substantial minority reported emotional and/or behavioural difficulties; experience of bullying; less positive engagement with school, staff and/or other learners; and worries about the transition to secondary school.

Addressing some of these issues in schools will be a key focus of school based counselling support services. Counselling is an important aspect of the support we provide under the auspices of the WSAEMW. Local authorities are required to make reasonable provision of independent counselling services for children and young people aged between 11 and 18 on the site of each secondary school that it maintains and for pupils in Year 6 of primary school. In recent years we have also asked counselling commissioners and providers to extend support below the current year 6 threshold to younger children. The Welsh Government collects annual data from local authorities on counselling provision and publishes the data. The last such report was published⁶ in March 2023 for the 2021/22 academic year (academic year 22/23 will be published in March 2024). It showed:

- 12,522 children or young people received counselling services in 2021/22 an increase on the 10,601 receiving support in the previous year.
- School-based and other education staff were the most common form of referral, accounting for over half of all referrals (56 percent).
- Females accounted for around two thirds of children and young people who received counselling in 2021/22 and males accounted for a third.
- 20 percent of all children and young people who received counselling were in Year 10.
- Anxiety and family issues were the most common type of issue for children and young people who received counselling.
- 87 percent of children and young people did not require onward referral after completion of counselling sessions.

YP Core (the Young Person's CORE is a ten item measure designed for use with the 11-18 years age range) is used to measure psychological distress reported by young people, both before and after counselling. The average improvement in YP Core score amongst children and young people who received counselling in 2021/22 ranged from 3.8 in Ceredigion to 11.8 in Neath Port Talbot.

We are also in the process of considering a formal evaluation of the impact of counselling services, involving developing a paper that summarises key evidence on the effectiveness and impact of statutory school and community-based counselling services for children and young people. This paper will bring together research previously commissioned by the Welsh Government that contains a focus on evaluating the impact of counselling services for children and young people, alongside statistical analysis monitoring information provided by local authorities about their counselling services

In addition, LAs also provide a range of management information to the Welsh Government, to support the direct grant funding for counselling support (£2.1m in 2023-24) they receive as part of the WSAEMW. This management information

⁶ Counselling for children and young people: September 2021 to August 2022 | GOV.WALES

showed that for the academic year 2022/23 the number of sessions provided for pupils was 111,800. Across 12 of the LAs a total of 3,092 sessions have also been provided to staff.

All 22 LAs also provided the total number of counsellors (FTE) that were in post as at the end of the 2022-23 Academic Year. Overall, the number of counsellors (FTE) in post was 158.14. This number has increased since the 2019 review report, where 110.7 counsellors were in post.

The number of pupils on waiting lists at the end of 2022-23 Academic Year has reduced by 17% since 2019.

At July 2023 the average waiting times for primary school pupils were 4 weeks or less for 9 of the LAs and in excess of 4 weeks for 11 LAs, and 2 LAs not running waiting lists. For secondary school pupils the average wait for counselling is 4 weeks or less in 11 LAs and in excess of 4 weeks at 11 LAs.

The longest maximum wait was 60 weeks and the shortest maximum wait 1 week. 13 LAs reported a decrease to the maximum wait whilst 5 reported an increase compared to the 2019 review.

We also provide funding to support the delivery of universal and targeted wellbeing interventions in schools; and to train teachers and other school staff on wellbeing; and dedicated support for PRUs and children in EOTAS, recognising this cohort are likely to have increased wellbeing needs. In the current year we have provided \pounds 1.1m for interventions and training and £350,000 for PRU/EOTAS support.

Management information provided by LAs for the 2022/23 academic year show that a wide range of training and interventions (including at PRUs, SEBD schools (Social Emotional & Behavioural Difficulties), SRB (Specialist Resource Based) schools and other EOTAS provisions) have been utilised throughout the LAs. The most prevalent programmes funded by LAs using the Welsh Government grant funding include:

- Emotional Literacy Support Assistants (ELSA)
- Emotionally Based School Avoidance (EBSA) Programme
- Trauma Informed Schools (TIS)
- Outdoor area or activities (including garden, allotments, forest schools,)
- Mental Health or Psychological First Aid
- Developmental Play/Play Therapy
- Lego based therapy/Lego Club
- Seasons for Growth (grief education programme)
- Physical activity/sports

In 2022/2023 PHW drew together learning from a range of data to describe the early phases of embedding the WSAEMW. The learning to date includes the following:

• The WSAEMW framework is highly valued by schools and professional stakeholders.

- Feedback from the Implementation Coordinators suggests that the delivery of the programme had contributed to the strengthening of local cross-sector partnerships.
- Schools have recognised the potential benefits that the approach brings for promoting positive mental health and wellbeing for learners and staff.
- Schools felt supported by their Implementation Coordinators in the process of self-evaluation and action planning.
- Schools reported that competing demands for their different priorities were challenging.

In 2023/2024, a learning report⁷ was published exploring how and why schools have engaged with the self-evaluation process; investigating how the guidance and tools have been used and the extent to which the whole school community has been involved. The things that appear to make a difference to successfully embedding self-evaluation are:

- Foster a culture that values identification or where complementary action can be taken to maximise impact and reduce burden.
- Have strong leadership that implements a structured approach to selfevaluation aligned to school development and improvement plans.
- Develop school engagement activity that meets the needs of different groups in the school community.
- Consider all the views when determining priorities for improvement.
- When priorities are identified, work through the entire relevant domain area as a school community before agreeing on intervention activity or drawing in external support.
- Enhance continuous improvement by exchanging learning and experience with other schools to develop a shared understanding of self-evaluation approaches.

The latest learning report will be published in 2023/2024 and has explored how schools have planned and implemented action to protect and promote mental wellbeing. Emerging findings point to how schools overcome challenges in navigating the crowded space of interventions and initiatives in order to choose what fits for them. Also, the various roles, responsibilities and resources that contribute to selecting, implementing and understanding the impact of action are explored, alongside the influence of school culture.

The evaluation will continue into 2024/2025 and will focus its next phase on exploring WSAEMW as part of the wider system at local, regional and national level, describing the role of multi-agency partnerships, including CAMHS In-Reach.

In measuring future impact there are also several areas of activity currently underway or planned upon which we can draw including:

• PHW are conducting a mixed-methods evaluation focused on the implementation of the Framework across several stages, including self-assessing needs and strengths; creating an action plan; and implementing,

⁷ phw.nhs.wales/topics/promoting-individual-and-community-wellbeing/whole-school-approach-toemotional-and-mental-wellbeing-learning-report/

system wide-working. This work draws on feedback from diverse schools across every area of Wales that have already engaged with implementation coordinators and the workforce supporting these schools. It is uncovering what works for whom and in what circumstances, to inform the continuous improvement of school-level activity and any necessary adaptations to supporting resources.

- The Wolfson Centre for Children's Mental Health is conducting an evaluation
 of the WSAEMW. The aim of this evaluation is to explore the contribution of
 the statutory framework in improving young people's mental health and
 emotional wellbeing in Wales, and considering the recovery from the COVID19 pandemic. The evaluation will also identify to what extent the framework
 has contributed to changes to the system of mental health and wellbeing
 practices in and around schools. The evaluation is running until 2025 and
 includes a range of data collection research methods across three
 workstreams:
 - The context of existing practice prior to and then following the framework,
 - Implementation over time in individual schools,
 - Data on learners' mental health and well-being over time.

The evaluation has completed the first phase and data from all work packages is being reviewed to consider the contribution of the framework. Two research papers are being produced:

- 1. A paper exploring quantitative data on learners' well-being up to 2021 to provide a baseline for the context of introducing the Framework.
- 2. A paper exploring initial system responses to the Framework, outlining where early changes are being seen or not and why.

Conclusion

We hope the Committee finds this report useful and that its underscores the Welsh Government's commitment in this area.

Wellbeing is central to 'Our National Mission: high standards and aspirations for all'⁸. It underpins all aspects of learning and by tackling the impact of poor wellbeing, building resilience and supporting our children and young people when they need it, we can have a much wider impact including on behaviour, attendance and attainment to name but a few.

In relation to behaviour, policy needs to be framed in terms of supporting the individual and viewing behavioural issues as a symptom of underlying wellbeing issues. The overall consensus is that instances of challenging (and sometimes aggressive) behaviour have increased since the pandemic. More young people are presenting with mental health or wellbeing issues and are unable to self-regulate. It is therefore important that supportive approaches to improving pupil behaviour

⁸ Our national mission: high standards and aspirations for all [HTML] | GOV.WALES

should be seen as integral to improving learner and staff wellbeing and learning within our schools. These are key components of the reforms to address educational inequalities that were already underway in Wales before the pandemic.

Wellbeing is also central to our new attendance guidance – Belonging, Engaging and Participating, which sets out approaches to help practitioners and partners to improve learner engagement and attendance. It recognises the overlapping causes which lie behind learner absence and/or disengagement from education, including mental health and wellbeing. That is why the multi-agency National Attendance Taskforce, announced by the Minister for Education and Welsh Language in October, alongside publication of the guidance will need to ensure wellbeing is central to its work as it looks to provide strategic direction, set priorities and identify further tangible actions to drive improvements in attendance and re-engage learners.

In 2023 we also provided funding for an Attainment Champions' pilot project delivered by the National Academy for Educational Leadership. The pilot aimed to explore ways of reducing the impact of poverty on learners' attainment by drawing on the knowledge and experience that exists within our schools and amongst our school leaders who have achieved sustained success in this area to support other leaders who are at an earlier stage of the journey. The project evaluation demonstrated that collaborative professional learning has a profound impact on leadership, provision, and practice and importantly that wellbeing for both staff and children was better supported through this approach.

In concluding it is also worth noting that, whilst important, the school is merely one part of a much wider system which needs to function effectively to ensure that children and young people requiring support are able to access that support in an appropriate and timely fashion. It is also worth noting that schools are busy spaces and one whose priority is education. They are not 'mental health treatment' centres and should not be burdened as such, but they are one of those valuable spaces in a child's life that provides an environment of wellbeing and a place to develop good and trusting relationships.

In this respect the NYTH/NEST framework⁹ compliments the WSAEMW framework and seeks to take 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. We are developing annual National NYTH/NEST reporting which will provide progress updates on the implementation of NYTH/NEST both nationally and regionally.

A NYTH/NEST Self-Assessment and Implementation tool has been co-produced and is being piloted by ten organisations and will be finalised following their feedback. The launch event will occur in February. In addition, NYTH/NEST and children's rights training has also been co-produced with the Children's Commissioner for Wales' office, ABUHB and young people, it is currently being piloted and will be finalised following feedback and made available to all sectors on the HEIW Y Ty Dysgu website.

⁹ NEST framework (mental health and wellbeing): introduction | GOV.WALES

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