

Cynulliad Cenedlaethol Cymru | National Assembly for Wales

Y Pwyllgor Plant, Pobl Ifanc ac Addysg | Children, Young People and Education Committee

Ymchwiliad i Gwella Iechyd Emosiynol ac Iechyd Meddwl Plant a Phobl Ifanc | Inquiry into The Emotional and Mental Health of Children and Young People  
EMH 59

Ymateb gan: Cymdeithas y Seicolegwyr Addysg

Response from: Association of Educational Psychologists (AEP)

## **Introduction**

The Association of Educational Psychologists (AEP) is the professional association and trade union for the 3,200 Educational Psychologists across the UK. In Wales the AEP has around 200 members which represents virtually 100% of the educational psychologist (EP) workforce in Wales.

The AEP seeks to promote the overall wellbeing of children and young people as well as to ensure that their specific special educational and mental health needs are met. This briefing is designed to share the expertise and insight of our members for the ongoing inquiry into the Emotional and Mental Health of Children and Young People.

## **Executive summary**

The educational psychology (EP) profession is a highly skilled and essential element in the nation's workforce, expert in responding to the special educational needs and disability (SEND) and mental health issues of children and young people (CYP) and supporting their emotional well-being.

EPs work to provide support to pupils with special educational needs across multiple levels in both mainstream and alternative provision (AP). In Wales EPs have duties to contribute to statements of SEN.

EPs are trained in a holistic approach to support and help schools, families, and all children and young people within their communities, up to the age of 25.

The AEP would like to make the following key points in response to this consultation:

- **EPs have a vital role to play in supporting the good mental health and wellbeing of children and young people;**
- **Within schools, EPs fulfil a wide range of functions across multiple levels, including training staff on approaches to mental health, referrals to CAMHS and working with young people to address their mental health;**
- **EPs should be working more therapeutically in schools to support children and young people, particularly with regards to anxiety;**

- **The capacity of EP services, both in terms of scope and depth, is limited by workforce pressures and shortages. EP services have been subject to extensive cuts across the UK;**
- **Recruiting Welsh-speaking EPs can mean that some local authorities have difficulties meeting their requirements;**
- **An over-emphasis on academic attainment in the current curriculum does not give adequate scope for the mental health and wellbeing of CYP to be effectively provided for;**
- **Schools should be supported to move away from a narrow focus on academic attainment and be encouraged to take more account of the development and emotional wellbeing of CYP;**
- **The AEP would recommend that the Welsh government incorporates a child-centred strategy to mental health in schools, which is set in a whole-school approach to wellbeing;**

Please see below for further comments on the questions set out in the consultation:

**To what extent do Educational Psychologists in Wales perceive themselves as having a role in children and young people’s mental health?**

EPs have a very significant role to play in children and young people’s mental health, providing support to schools at multiple levels, such as:

- Working at the level of the individual child, groups of children, the whole class, and the year-group;
- Whole school-based interventions;
- Advice to senior staff in education settings at pre-school, school and college;
- Direct work (training and/or consultation) with parents and carers in their responses to their children;
- Supporting other childcare professionals through training, advice and consultation.

It is vital that children feel valued and understood at school in order to maintain good mental health, and EPs play a functional role consulting with schools as to how best they can support this. EPs also provide this support and guidance first-hand.

**Do you think this differs from how schools perceive the role of Educational Psychologists in relation to children and young people’s mental health?**

Our members had mixed views on the perception of EPs by schools. Whilst some believe that schools understand their role very well, others note that whilst schools appreciate the function of EPs and the support they provide, more could still be done. It is important that schools understand the different

levels of support that EPs can, and do, provide, to ensure that they draw on this expertise and experience effectively.

Some members noted that schools do not always recognise that children's behaviour is an expression of their mental health, and fail to see the effects of a child's mental health beyond the implications for their academic progress.

### **What is the current role of Educational Psychologists in Wales in relation to children and young people's mental health?**

EPs provide a number of functions within their role in schools, which include:

- Discussing all areas of concern with pupils;
- Training schools how to approach mental health issues in their students;
- Training staff on areas of wellbeing;
- Meeting with parents;
- Working with young people to address their mental health, such as dealing with anxiety, low mood and emotional wellbeing through CBT and DBT;
- Referral to CAMHS;
- Working with and advising on young people with serious mental health issues prior to referral to CAMHS;
- Referrals to other agencies (if appropriate).

### **Should Educational Psychologists be working more therapeutically in schools to support children and young people with emotional and health difficulties?**

Our members believe that EPs should be working more therapeutically in schools to support children and young people with emotional and health difficulties. Many believe that this already is the case, with individual sessions carried out between EPs and young people, particularly with regards to anxiety. Training provided to staff in schools is a key example of this. However, some members report that their capacity to engage fully with schools and pupils is limited by the perception of their function by services, and by funding.

### **Do Educational Psychologists in Wales have the specialist skills, knowledge and capacity to promote the mental health of children and young people at both an individual and consultative level with schools?**

EPs are a highly trained workforce, and have all of the specialist skills needed to promote mental health amongst young people in schools both at an individual and consultative level. EPs have three years of postgraduate training and are regulated by the Health and Care Professions Council. EPs provide and support evidence-informed and well-evaluated interventions to promote emotional wellbeing and mental health in schools

EPs are the only professionals trained to work with schools, with parents and with individual pupils of all ages. They are often trained for therapies, system consultations, assessments of needs and advice, and as such, present a number of skills to address mental health in schools.

Whilst EPs cannot diagnose mental health difficulties, they can support schools when children present with particular difficulties. It is worth noting that this support is enhanced in circumstances where EPs have recommendations based on assessments by clinical colleagues.

### **What are the facilitators and barriers to Educational Psychologists engaging in work related to children and young people's mental health?**

Our members noted a number of facilitators to EPs engaging in work with children and young people's mental health. These include:

- Recognition by senior officers in LAs of the breadth of knowledge and skills which is available within the EP workforce;
- The vision of principal EPs of how the role can be developed;
- Principal EPs status within the local authority hierarchy;
- CAMHS referring young people to EPs.

Similarly, they noted the following barriers:

- The failure of schools to allow adequate time and prioritisation the work of EPs;
- A lack of understanding of the function of EPs, particularly the wide range of support that EPs can provide at multiple levels throughout the school;
- The issue of capacity, given there are on average 7,500 pupils to one EP, which hinders access to long term support;
- Recruiting Welsh speaking EPs can mean that certain LAs have difficulties meeting their requirements.
- The lack of sufficient Welsh language professionals causes difficulties in some areas as there is a greater emphasis put on language requirements, than on expertise, because of new initiatives

### **To what extent does the current curriculum provide adequate opportunities for children and young people to learn about emotional and mental health and to manage any issues they might have in this regard?**

The AEP supports the views of its members that the current curriculum does not, in all cases, provide adequate opportunities for children and young people to learn about emotional wellbeing and mental health. **An over-emphasis on academic attainment in the current curriculum does not give adequate scope for the mental health and wellbeing of CYP to be effectively provided for.** Within this system pressure is placed on children at an early age, facilitating the development of stress and poor emotional health.

PHSE lessons are a way in which mental wellbeing can be taught by pupils, but in some cases it is optional, in others, it is included in the curriculum, but not prioritised or taken seriously. In addition, PHSE is just one aspect of supporting CYP with their mental health. The AEP would like to emphasise the importance of a whole school approach in which the principles and ethos of good mental health and wellbeing are embedded at every level.

It is essential that settings adopt a whole school approach to mental health, in which a culture of promoting well-being and good mental health is formally embedded at every level. This should include the whole curriculum, training and continuing professional development (CPD) for every member of staff, and all school policies and procedures. A whole school approach also involves working closely with the local community, with parents and families, and with the CYP themselves. In addition, there is a need for this approach to be underpinned by the appropriate values and ethos within each setting.

EPs have a vital role to play in promoting good mental health and well-being in schools. However, their capacity to provide this support is being undermined by extensive cuts and staff shortages.

### **How might the new Curriculum for Wales being developed following the Donaldson Review improve the current position?**

Our members made a number of suggestions on possible improvements to the system following the Donaldson Review. These include:

- Taking a more holistic view of young people's wellbeing;
- Fostering a child-centred approach;
- Incorporating the role of teachers in the process;
- Giving children and young people a voice;
- Devolving more attention and resources for pupils who are unable to cope with the demands of the curriculum;
- Greater scope for training on issues relating to SEN/ALN – without this, NQTs enter the school system unprepared to deal with issues they will face on a day to day basis;
- A greater emphasis on mental health and wellbeing in schools through a whole-school approach;
- Greater options for vocational study and apprenticeships as an alternative to university.

### **Has the Association of Educational Psychologists been involved with the Pioneer schools in Wales, focusing on the Health and Wellbeing Area of Learning and Experience?**

The members that were aware of this noted that the AEP has been involved with the Pioneer schools in Wales as much as possible. However, issues of capacity, arising as a result of the very small numbers of EPs in each authority have been barriers to this process.

### **In your view, how should mental health practice in schools be improved?**

Our members believe a fundamental change of mindset and prioritisation of mental health and wellbeing is necessary, as opposed to purely attainment-based practices. EPs should also be more involved in schools, providing services such as group tuition on mental health problems. Schools should also place a greater emphasis on addressing bullying and fostering social skills. Smaller class sizes would also be beneficial, as well as a clearer route to accessing referrals to specialist CAMHS. Ultimately, the most effective way to achieve better mental health practice would be to adopt a whole-school approach.

### **The Committee has been told by the Association of School and College Leaders Cymru that in some local authorities there appears to be a significant shortage of Educational Psychologists. Do you agree with this?**

The AEP agrees with this. There is a large shortage of EPs in Wales across all local authorities. There have been a number of posts cut from staffing so there appear to be fewer vacancies. However, this is because of the number of positions eliminated.

### **The Association of School and College Leaders Cymru also told the Committee that “Child Adolescent Mental Health Services will not consider a referral without an Educational Psychologist report, and yet because of the shortage of Educational Psychologists, it can take two or three weeks before an assessment can be made and a report written. In the meantime, the young person is receiving no support”. Is this a picture you recognise in Wales?**

The situation on this matter varies across Wales. Many of our members did not find this to be the case, noting that referrals to CAMHS can be made via schools and GPs (although many of these referrals are often as a result of the EPs intervention with young pupils). However, for some, difficulties arise as CAMHS want referrals to come directly from an EP, and schools are not usually allowed to make referrals. In some areas, GPs can. Our members also noted that the waiting list for CAMHS is currently around 18-24 months, and therefore EPs can and do offer ‘talking therapies’ when their workload provides. However, the difficulty to access CAMHS is frustrating for schools and EPs alike.