**Healthcare Inspectorate Wales, Care Inspectorate Wales, and Estyn Joint National Review**

**How are healthcare, education, and children’s services supporting the mental health needs of children and young people in Wales?**

**Terms of Reference**

**Context**

Good mental health is a fundamental part of children and young people’s general well-being. It is closely bound with physical health, life experiences and life chances. There are many different causes of poor mental health in children and young people, these reasons can be complex, and there may not be one specific cause, but a combination of contributory factors.

A key risk in maintaining the mental well-being of children and young people who need support in the community setting, is the accessibility to the right support at the right time, and by the right service. For example, what support is available to children and young people who are waiting for assessment by specialist Child and Adolescent Mental Health Services (CAMHS). In addition, if a person has been assessed by specialist CAMHS, but does not meet the threshold for CAMHS intervention, how can they then be adequately supported with their mental health?

The socioeconomic impact on children and young people’s mental health is a concern. In 2022, The Health Foundation reported a stark contrast in socioeconomic deprivation, where in the most deprived areas across Wales, England, and Scotland, more prescriptions and mental health crises occur[[1]](#footnote-1). Public Health Wales also emphasises[[2]](#footnote-2), that in Wales, children and young people living in the most socially deprived areas of Wales are twice as likely to experience a mental health crisis compared to those living in the least deprived areas. These issues are similarly highlighted within the Children’s Commissioner for Wales strategy, [Making *Life Better for Children in Wales: Our three-year strategy 2023-2026.*](https://www.childcomwales.org.uk/wp-content/uploads/2023/05/ThreeYearStrategy_ENG.pdf)

To improve the delivery of mental health services to everyone in Wales, Welsh Government implemented the legislation; [*Mental Health (Wales) Measure 2010*](https://www.legislation.gov.uk/mwa/2010/7/contents), and in 2012, it published its 10 year mental health strategy [*Together for Mental Health*](https://www.gov.wales/sites/default/files/publications/2020-01/together-for-mental-health-delivery-plan-2019-to-2022.pdf) (the new Mental Health strategy is scheduled for publication during autumn 2023). The strategy implied several actions for children and young people, which included promoting well-being and preventing mental illness and improved access to specialist CAMHS. In 2015, Welsh Government launched [*Together for Children and Young People*](http://www.wales.nhs.uk/documents/Framework%20For%20Action.pdf); a multi-agency programme designed to improve mental health services for children. Later in 2018, a report published by the [*Children, Young People and Education Committee ‘Mind over Matter’*](https://senedd.wales/laid%20documents/cr-ld11522/cr-ld11522-e.pdf), suggested a number of changes to the multi-agency programme, which was extended until 2022. In Estyn’s *Annual Report 2021-2022,* it highlights that across all sectors, there has been a notable increase in demand for well-being and mental health support for children and young people. This is further highlighted in the Children’s Commissioner report; [*No Wrong Door: bringing services together to meet children’s needs*](https://www.childcomwales.org.uk/publications/no-wrong-door-bringing-services-together-to-meet-childrens-needs/#content).

Aside from the support provided to young people by their parents, carers, schools, or peers, further mental health support is provided mostly throughout community services. This is often through primary care services, local authority teams or education services. If a child or young person needs more specialist support for their mental health through services such as specialist CAMHS, this can only be accessed following a referral. However, this may be further complicated by the issues that exist for some people within children’s services, such as not having an appropriate diagnosis of a mental health condition. For example, if a young person self-harms, they sometimes may be deemed not to meet a mental health diagnosis threshold or may not have a diagnosed mental health condition. In most instances, a referral to specialist CAMHS is made by a General Practitioner, however, some referrals are made by local authority children’s services or education services. For acceptance by specialist CAMHS services, the referral must be approved through an assessment process, which is based on the level of risk and symptoms presented of an individual.

A range of intelligence held by HIW highlights that the demand for mental health support is significantly above service capacity. This is a national issue, which has been exacerbated by the COVID-19 pandemic, resulting in a high number of children and young people waiting prolonged periods for specialist CAMHS assessment and intervention. Consequently, this can result in people not receiving the support needed and, in some cases, their mental health condition is deteriorating further.

In view of the concerns highlighted above and key intelligence sources, in January 2022, HIW wrote to Care Inspectorate Wales (CIW) and Estyn to ask if they would consider undertaking joint work in this area. This was agreed, and in July 2022 it was decided that HIW would lead a joint review which would commence during 2023-2024. Audit Wales will not participate in the review but will support the three organisations throughout the project.

**Consideration** **of work by other organisations**

HIW, CIW and Estyn will consider any work that is being undertaken or is being planned in Wales regarding the mental health needs of children and young people, who are not managed by specialist CAMHS services. In particular, the support available for those awaiting a specialist CAMHS assessment, or who do not meet the threshold for specialist CAMHS intervention.

**Scope**

The aim of our joint review is to consider whether children and young people are receiving timely and effective support for their mental health needs. Our review will focus on children aged 11 to 16 in mandatory education and will consider the services available to support their mental health needs within healthcare, education, and children’s services, before referral to or assessment by specialist CAMHS.

Should any information or intelligence arise in relation to children or young people of other ages, then this will be collated and used to inform future decisions and assurance activity by each inspectorate.

Our research and stakeholder engagement has helped inform the scope of our work to answer the question:

* **How are healthcare, education, and children’s services in Wales supporting the mental health needs of children and young people, as they wait for assessment, or who do not meet the criteria for specialist CAMHS intervention?**

Our key lines of enquiry include:

* Do education and children’s services provide effective support to children and young people who have new or existing mental health conditions?
* What services are available to manage the mental health needs of children and young people across Wales?
* Do children and young people have timely and equitable access to healthcare interventions to support their mental health needs?
* Are healthcare interventions adequate to support the mental health needs of children and young people, as they wait for assessment or who do not meet the criteria for specialist CAMHS intervention?
* What referral pathways are in place across healthcare and local authority services, for children and young people to access specialist CAMHS services, and are these effective?
* How are services considering equality, diversity and inclusion for children and young people who need mental health support, and those affected by socio-economic deprivation?

**Methodology**

To consider the key lines of enquiry above, the approach to our work will include HIW, Estyn and CIW exploring the processes in place within their respective remits of healthcare, education, and children’s services. Throughout, we will seek to explore evidence of good practice and areas for improvement.

To help inform the findings of our review we will consider:

* The experiences of young people aged 11 to 16, who need support with their mental health
* The experiences of parents, guardians, or carers responsible for the young people who need support with their mental health.

We seek to engage with:

* Young people, parents, guardians, or carers about their experiences of mental health support, and a range of staff who interact with children or manage the services a child may need to support their mental health needs, within healthcare, education, and children services
* The public and staff through national surveys.

**HIW will:**

* Develop and consider a health board self-assessments of the mental health services available to for children and young people across Wales
* Undertake a document review and analysis of health board data
* Analyse key national data relating to children and young people’s mental health in Wales
* Undertake a case tracking exercise of children and young people who have received support for their mental health prior to or following specialist CAMHS assessment.

**CIW will:**

* Focus on children and young people known to children’s services which may include:
	+ Children and young people who are looked after[[3]](#footnote-3)
	+ Children accommodated in unregistered settings[[4]](#footnote-4)
* Collate and consider intelligence from local authorities and providers across Wales
* Support HIW with their case tracking exercise of children and young people who received support for their mental health.

**Estyn will:**

* Analyse evidence and findings from Estyn’s inspections undertaken between February 2022 to July 2023, in relation to the mental health needs of children from within:
	+ Secondary schools and independent schools
	+ All-age schools
	+ Special schools[[5]](#footnote-5) and independent special schools,
	+ Pupil referral units[[6]](#footnote-6).

**Working with other organisations**

We will seek to collaborate with a range of stakeholders. This will help us engage with children and young people, their parents, guardians, carers and family members, to understand their experiences when needing mental health support. We will liaise with stakeholders at key intervals throughout the review, to share plans and ensure any joint working opportunities are explored to avoid unnecessary duplication of efforts and to share findings following completion of fieldwork.

**Planning**

We will establish a stakeholder reference group to help inform the review. The group will provide support and advice to our internal project board as required, on the day-to-day implementation of the review.

**Timescales**

Scoping and research for the review commenced during 2022, and further work was completed during spring 2023 to refine the scope of the review. Planning the review’s methodology for the fieldwork commenced during September 2023.

On receipt of, and following analysis of health board self-assessment data, a decision will be made on the localities and methodology tools for the fieldwork. Fieldwork will take place during winter 2023-24, with analysis of the fieldwork findings scheduled for spring of 2024, and the aim to publish a national report in autumn 2024.

Proposed timeline:

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| Scope refining and planning | Summer 2023 |
| Fieldwork planning & remote/onsite activity | November 2023 – 30 April 2024 |
| Launch of public and professional surveys | January 2024 |
| Analysis of evidence  | May 2024 |
| Report drafting | June 2024 |
| Report publication date | Autumn 2024 |

**Analysis and reporting**

The review will conclude with the publication of a joint national report in the autumn of 2024. The report will highlight key themes and areas of good practice and will make recommendations where required improvements are identified throughout our review. If any urgent concerns are identified during our review, these will be raised promptly with healthcare providers, education services and children’s services, or Welsh Government. In addition, where we feel appropriate, any interim findings will be communicated to our stakeholders, healthcare providers, children’s services and education services as appropriate.

**Publication and engagement**

A dedicated webpage for the review will be developed on HIW’s website, with updates on the key findings from the review. We will also use several communication tools and social media channels to raise awareness of how people can take part in the national survey and engagement activities. Following the publication of the national report, follow-up, engagement, and potential learning events will be considered.

**Follow-up**

Our expectation is that services will consider the findings in our report alongside the recommendations and submit an improvement plan to each relevant inspectorate, highlighting what action will be taken to make the required improvements. We will aim to monitor the implemented actions to understand the impact of our work.

**Personal data**

This review forms part of our work to provide independent assurance on the quality and safety of healthcare services, education services and social care services in Wales. The Health and Social Care (Community Health and Standards) Act 2003 (Part II, Chapter 4) gives HIW the power to carry out inspections, reviews and investigations of the NHS or services provided for the NHS.

Where we process personal data, this is in accordance with data protection legislation, including the Data Protection Act 2018 and the General Data Protection Regulations. Further information is set out in:

* HIWs privacy notice which can be found on its website: [HIW privacy notice](https://www.hiw.org.uk/privacy-policy)
* Estyn’s privacy notice which can be found in its website here: [Estyn privacy notice](https://eur01.safelinks.protection.outlook.com/?url=https%3A%2F%2Fwww.estyn.gov.wales%2Fprivacy-statement&data=05%7C01%7CVanessa.Davies008%40gov.wales%7Ca739dba6bb484d8caef908db25488dda%7Ca2cc36c592804ae78887d06dab89216b%7C0%7C0%7C638144765781668998%7CUnknown%7CTWFpbGZsb3d8eyJWIjoiMC4wLjAwMDAiLCJQIjoiV2luMzIiLCJBTiI6Ik1haWwiLCJXVCI6Mn0%3D%7C3000%7C%7C%7C&sdata=1rh1%2FedsDwTQ%2BaJTENgPY%2FRnhnk6Te4KgWE0lRt141k%3D&reserved=0)
* CIWs privacy notice which can be found on its website here: [CIW Privacy notice](https://www.careinspectorate.wales/how-we-use-your-information).
1. [Improving children and young people's mental health services: Local data insights from England, Scotland and Wales](https://reader.health.org.uk/improving_CYPMHS) [↑](#footnote-ref-1)
2. [New analysis reveals trends in children and young people's mental health care in Wales: published 2022](https://phw.nhs.wales/news/new-analysis-reveals-trends-in-children-and-young-peoples-mental-health-care-in-wales/#:~:text=New%20analysis%20reveals%20trends%20in%20children%20and%20young,most%20frequently%20experiencing%20mental%20health%20crises%20More%20items) [↑](#footnote-ref-2)
3. [Section 74 of the Social Services and Well-being (Wales) Act 2014](https://www.legislation.gov.uk/anaw/2014/4/section/74) states that a child who is looked after by a local authority is a child who is in its care; or provided with accommodation, for a continuous period of more than 24 hours, by the authority in the exercise of any functions which are social services functions, apart from functions under section 15, Part 4, or section 109, 114 or 115. [↑](#footnote-ref-3)
4. [Section 5 of the Regulation and Inspection of Social Care (Wales) Act 2016](https://www.legislation.gov.uk/anaw/2016/2/section/5) highlights it is an offence for a person to provide a regulated service without being registered in respect of that service. [↑](#footnote-ref-4)
5. Special schools provide education for pupils with a range of special educational needs, including those with physical disabilities, sensory impairments, learning difficulties and behavioural difficulties. They cater for pupils aged from 3 to 19 years old. [↑](#footnote-ref-5)
6. Pupil referral units (PRUs) are legally both a type of school and education otherwise than at school (EOTAS). They are established and maintained by a local authority to provide suitable education for children and young people who, by reason of illness, exclusion or otherwise, may not receive such education (section 19 of the Education Act 1996). [↑](#footnote-ref-6)