



How much do you agree that the following statement sets out an overall vision that is right for Wales?

"People in Wales will live in communities which promote, support and empower them to improve their mental health and wellbeing, and will be free from stigma and discrimination. We will take a rights-based approach to ensuring that everyone has the best mental health possible. There will be a connected system of support across health, social care, third sector and wider, where people can access the right service, at the right time, and in the right place. Care and support will be personcentered, compassionate and recovery-focused, with an emphasis on improving quality, safety and access. Care and support will be delivered by a workforce that feels supported and has the capacity, competence and confidence to meet the diverse needs of the people of Wales."

## Answer:

Place2Be is a leading children's mental health charity and provider of school-based mental health services. For almost twenty years, we have been working, embedded with school communities to deliver a whole-school approach to mental health within their settings. Through working with young people providing counselling, as well as engaging with families through parenting training, and providing training to school staff to build their knowledge of mental health, we can ensure that no child struggles with their mental health alone. Overall across our services in the UK, we see consistently strong outcomes in improving children's mental health and wellbeing: after one-to-one counselling with Place2Be, 89% of children age 11-18 and 77% of those age 4-11 had an improvement reported in their mental health by one or more measure.

Through this combined approach to mental health support, we have developed significant real-world insight and expertise that can be utilised by the Government. In addition to providing targeted and universal services, we train the adults around a child to have the confidence and understanding to support their mental health. This is invaluable in supporting school staff to embed a positive culture of wellbeing and follow the Whole School Approach Guidance. We also deliver training and qualification routes into the child counselling profession, to ensure that every child can access the support they need in a safe, familiar and comfortable environment.

With this in mind we agree that every person should have a safe, loving and supportive home life and community that builds positive wellbeing. Developing young people's resilience is important, and we welcome the intent to empower young people to support their own wellbeing. We agree that a connected system of support is key, to ensure no child falls through or passes between different agencies. We support the commitment to ensuring every person can access the right support for them, at the right time – we believe that schools are an effective place for support for children and young people, as this is easily accessible and normal for them. We encourage flexibility within mental health services to ensure that local needs are met, avoiding a one-size-fits-all approach. We welcome the focus on expanding and upskilling the workforce: we recognise the challenges in recruitment of qualified mental health staff in Wales, particularly in rural areas, and urge the Government to make workforce expansion a priority.



In the introduction, we have set out ten principles that are the building blocks of the new Mental Health and Wellbeing Strategy. Do you agree these principles are the right ones?

#### Answer:

Place2Be agrees that the mental health provision should be person-centered, rights based, trauma informed, evidence driven, outcome focused and free of stigma. To deliver this, we need to extend school-based services, delivered by expert practitioners who are qualified child counsellors. School based provision helps to make support easily accessible, and embedded practitioners can support with referrals to other agencies, supporting a 'no wrong door' approach. To remove stigma associated with mental ill health, we recommend school staff are trained to understand children's mental health, and recognise when a young person may be struggling. Extending mental health training to educational staff should be a key element of the strategy.

While the draft strategy mentions babies, children and young people's needs, we would recommend a separate cross-departmental strategy for children and young people's mental health that enables greater collaboration for the specific mental health needs of children and young people. This should focus on prevention and early intervention through school-based support, as set out in the whole school approach guidance.

### **Vision Statement 1**

Vision statement 1 is that people have the knowledge, confidence and opportunities to protect and improve mental health and wellbeing. Do you agree that this section sets out the direction to achieve this?

#### Answer:

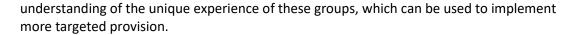
We believe that in order to give people the knowledge, confidence and opportunities to protect their mental health, we need to ensure that services are accessible to them. By working within school settings, we can teach young people how to understand and manage their feelings, know how to build resilience and where to go for support when they need more help. We also recommend that training in mental health is offered to every adult who works with a child, such as youth and social workers, school staff and community leads.

We've included a number of high-level actions for vision statement 1 in the strategy. Do you agree with these actions and are there any changes you would like to see made to these actions?

# Answer:

We welcome the commitment to understand the drivers of mental ill health and the protective factors that support mental health. We welcome the focus on underserved communities, and encourage a specific focus on childhood, as this is a key developmental period for mental health issues, since around half have arisen before age 14.

We welcome the commitment to work in partnership with community settings and expand early support within non-clinical settings, such as schools and sport groups. The third sector has significant expertise and capacity that should be better utilised by health boards, local authorities and policymakers. Charitable partners often have ties with under-served communities, as well as a greater





We welcome the launch of a 'national conversation' about mental health, and urge this to reach marginalised groups to understand their unique experiences of mental health issues. We urge the findings of the national conversation to inform future reviews of the mental health and wellbeing strategy and future service provision.

We welcome the intent to communicate the offers that already exist, however this communication must also come alongside evaluating and expanding these services into communities.

## **Vision Statement 2**

Vision statement 2 is that there is cross government action to protect good mental health and wellbeing. Do you agree that this section sets out the direction to achieve this?

## Answer:

The strategy recognises the calls across the sector for mental health and wellbeing support within secondary schools. We recommend that expanding this to every school in Wales is a priority, including primary schools. Protecting good mental health is key, and can be delivered through intervening early with mental health support within a school setting. To protect children's mental health, we recommend that every child has access to expert support when they need it. We also recommend that school staff are trained in mental health, and are able to fulfil the proposals within the Government's whole school approach guidance. We also recommend that families are supported with training, guidance and coaching, as well as mental health support, to ensure that they are able to support their own child's mental health and know when they need more targeted support.

We welcome the commitment to cross-government collaboration within the strategy. This collaboration should be long term, and the decisions made within the strategy relating to service provision should be fully and sustainably funded.

Governmental initiatives, such as the whole school approach guidance contain policies, guidance and strategies that schools are expected to follow, and should be backed up with funding and resource. We welcome the commitment to ensure regional consistency in outcomes across Wales and recommend that alongside consistency in outcomes we see similar consistency in service provision, to remove postcode lotteries in access to expert mental health provision such as CAMHS.

Is there anything else that mental health policy can do to ensure that work across Government improves mental health outcomes?

# Answer:

Mental health policy has been identified in the strategy as developing care and treatment planning, and influencing wider government. We welcome the plan for transitioning young people between CAMHS and adult services. We recommend that similar pathways of support are implemented for young people transitioning in school settings, both from primary to secondary or high schools, as well as between different mainstream and alternative provision. Transitions can be a key challenge for young people that



can affect their mental health. Transitions into CAMHS should also be streamlined, to prevent long waits for support, appointments, and diagnoses. Care and treatment plans could be an effective offer for young people with Additional Learning Needs and neurodivergence, in addition to those with mental health issues.

There is lots of work happening across Government that could improve mental health outcomes. Is there any work we have missed that you think we should include?

### Answer:

The School Standards and Organisation (Wales) Act 2013 required all local authorities to provide school counselling services for pupils in Year 6 and above. Yet for younger aged pupils, third sector providers such as Place2Be have been filling the gap, through our expert, embedded mental health services in primary schools. This service provides students with one-to-one counselling, self-referral sessions with a counsellor, parenting interventions and family therapy, group therapy sessions and whole-class work. For primary schools without statutory support for their younger pupils, they are commissioning external providers directly from their own budgets or using their pupil development grants. With schools facing significant strain on their budgets, this is not sustainable.

We therefore recommend that the strategy commits to evaluating existing statutory provision of support and expanding it to those not currently being met, such as younger pupils.

An example of government work being done in the strategy is the Whole School Approach to Emotional Health and Wellbeing Guidance (2021). We welcome this guidance, however, there are several challenges that have prevented it achieving optimal outcomes. Despite funding being announced to implement this, schools have not felt the effects this money or resource. Therefore, legislation and policy should be backed up with the relevant funding for schools to implement it. Furthermore, the guidance intends to equip schools to be able to support pupils with minor difficulties, such as CAMHS-In Reach and mental health training for school staff. While important, this offer is not comprehensive or robust enough to meet the high demand for mental health support in schools. We therefore recommend that schools should have the support of an expert child counsellor within their settings, to meet a wider range of pupil mental health difficulties, and support each school to embed a whole school approach to mental health.

We've identified a number of high-level actions for vision statement 2 in the strategy, do you agree with them and are there any changes you would like to see made to these actions?

### Answer:

We welcome the focus on the impact on children and young people's mental health within policymaking, in line with the UNCRC.

# Vision Statement 3

Vision statement 3 is that there is a connected system where all people will receive the appropriate level of support wherever they reach out for help. Do you agree that this section sets out the direction to achieve this?

# Answer:

We welcome the inclusion of education settings identified as a service that provides mental health support, as well as early years, childcare and youth work settings for babies and children. We welcome the commitment to ensure joined-up support, and the commitment to skill providers in supporting neurodivergent people with their mental health. We welcome the commitment to train professionals who deliver mental health support, with CAMHS In-reach given as an example of this in the strategy. While we urge the guidance to go further in expanding school staff knowledge of mental health issues, this will ensure that every adult is safeguarding young people's mental health and knows how to support them, and where to refer them for more intensive support when needed.

We welcome the recognition within the strategy of the whole school approach guidance which brings together responsibilities for education settings, local authorities and community provision. We urge the Government to commit to giving schools the tools to implement the guidance more effectively. We welcome the intent to ensure every service around a young person has their needs at the center, is sharing insight, advice and capacity, and delivers effective outcomes based on the person's goals and needs.

We've identified a number of high-level actions for vision statement 3 in the strategy, do you agree with them and are there any changes you would like to see made to these actions?

### Answer:

We welcome action VS3.7 around 'supporting the whole school approach delivery' However we emphasise the several issues schools are facing in implementing this guidance. We recommend the Government gives schools the resources and funding needed to make it fit for purpose. In addition, the guidance should be supplemented by ensuring every child has access to a mental health professional in their school, including younger aged primary pupils.

## Vision Statement 4

Vision statement 4 is that people experience seamless mental health pathways – person-centered, needs led and guided to the right support first time without delay. Do you agree that this section sets out the direction to achieve this?

#### Answer:

We welcome the commitment to delivering consistent outcomes and service provision across Wales. To achieve this, we welcome the focus on implementing Welsh language considerations into service delivery. We also recommend a focus on recruitment of mental health staff such as child counsellors in rural and areas of social deprivation in Wales, to ensure there is effective supply to meet the demand for mental health support, without compromising on skill and outcomes.

We agree with the focus on delivering evidence-based psychological therapies. Place2Be's child counsellors have clinical supervision, access to safeguarding support and rigorous evaluation of outcomes to ensure quality of provision. We recommend that every mental health service has this level of oversight.

As a school-based mental health provider, a key focus of our work is on early intervention, so we welcome this focus within the strategy. To achieve this, we agree with the need to place a child at the

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centre, and work with the adults in a child's life. As such, we welcome the focus of the strategy on engaging with families and parents, to strengthen familial relationships, and give them the understanding to support children's mental health.

We recognise the distinction made in the strategy between mild-to-moderate mental health issues and those with severe, complex or re-occurring issues. At present, support for pupils with mild-to-moderate mental health issues has been given through the whole school approach guidance, which skills school staff to manage these concerns. However, this guidance has not been effectively implemented across the country, due to limited funding and regional challenges. As such, the support this delivers is patchy. Furthermore, we agree with the need to invest in specialist CAMHS so that we reduce the delays in specialist support.

We know that demand for mental health services in schools exceeds the offers provided in the whole school approach guidance, particularly since children are struggling to access CAMHS. While children in Year 6 and above have access to a school counsellor, we urge the Government to extend this to younger pupils in primary school settings. Alongside the child counsellor, the whole school should be supported to implement positive practices and build an inclusive, mentally healthy setting for young people.

We've identified a number of high-level actions for vision statement 4 in the strategy, do you agree with them and are there any changes you would like to see made to these actions?

#### Answer:

We welcome the action to work with people with lived experience of mental ill health, and third sector providers. Organisations such as Place2Be who are embedded in the school community, have significant expertise that is being under-utilised. We recommend greater representation within Health Boards and local authorities, and more collaboration to commission services that meet local need and deliver positive outcomes.

We welcome the action to support access to psychological therapies, focusing on people with anxiety, depression, and those with mental health conditions sch as bipolar and psychosis. We recommend that there is flexibility within the support offered, and that this is done in collaboration with the individual to ensure they have the agency to get the right support for them.

Within the school context for young people, our expert child counsellors are able to assess each child and understand their goals and the support they could benefit from, and deliver this within a familiar, de-medicalised setting. For example, we can offer specialist group therapy, self-referral appointments with the counsellor, and one-to-one counselling for those with more severe issues. The assessment is an important process, that should not be done by non-clinical staff such as teachers. While it is key that school staff are trained to understand children's mental health, have the confidence to support young people and build mentally health practices, they should not be expected to deliver mental health interventions.

Instead, to ensure that every child is accessing the mental health support that appropriately meets their needs, we recommend that every child in Wales can access an expert child counsellor within their school environment.



We welcome the commitment to embed routine access, outcome and experience measures into practice. This is beneficial in understanding the scale of mental health issues across Wales, enabling more effective service design and delivery. Similarly, greater data on outcomes allows us to identify any gaps in provision and areas of best practice.

We have identified some areas where action is needed to support the mental health system as a whole.

## These areas are:

- digital and technology
- data capture and measurement of outcomes
- supporting the mental health workforce
- physical infrastructure (including the physical estate of services)
- science, research and innovation
- communications

Do you agree these are the rights areas to focus on?

#### Answer:

We welcome the need to strengthen the mental health workforce. We recommend the Government engages with the third sector, including voluntary and community services, who have a wealth of experience, skills and staff capacity that could be utilised by the Government. For example, Place2Be has been working with schools for thirty years, including developing expert training and qualifications to build the child counselling workforce. We welcome the opportunity to work with the Welsh Government to expand this expertise into the Welsh context.

At present, Place2e struggles to recruit the child counsellors needed to meet the demand for support in schools across Wales. We struggle particularly to recruit Welsh speakers and recruit for schools in rural areas. To support recruitment, we recommend developing accessible training and qualification pathways into counselling, to remove barriers.

We welcome the commitment to use research and evaluation to enable the Government to understand what works. Place2Be continually publishes outcomes for our mental health services, and we have the oversight of an external Research Advisory Group, and clinical team including Educational Psychologists, so that we can ensure our counsellors are delivering high-quality services that children deserve. We recommend that every mental health service uses this model.

We welcome the commitment to publish clearer communication on services for children and young people. While the whole school approach guidance exists, we need to ensure that local authorities, health boards and schools understand their duties under the guidance and are able to implement these. This requires greater investment and funding, particularly for schools.

# **The Strategy Overall**

The high-level actions in the strategy will apply across the life of the strategy. They will be supported by delivery plans that provide detailed actions. These delivery plans will be updated regularly. Are there any detailed actions you would like to see included in our initial delivery plans?



- Review the whole school approach guidance and identify areas where it could be consolidated, and what measures schools need to implement it, such as areas of funding deficits.
- Expand mental health training for education and youth staff to ensure that everyone has the understanding to support children's mental health.
- Expand parenting support to every family, from online parenting advice and guidance, training for parents to support their child's mental health issues, and family practitioners to deliver interventions with a child and their family where necessary.
- Work with third-sector service providers to understand the best practice approach for early intervention through school based mental health services.
- Commit to a long-term funding plan to ensure every school has the capacity and resources to centre mental health, and deliver mental health services that meet pupils' needs.
- Expand the statutory provision of school counselling to children and young people in reception to year 5.

This is an all-age strategy. Whenever we talk about our population, we are including babies, children, young people, adults and older adults in our plans. How much do you agree that the strategy is clear about how it delivers for all age groups?

### Answer:

We welcome the mention throughout the strategy of children, including through support in education settings. However we urge the Government to go further than currently available, and ensure that every child has access in school to support that meets their needs. This support should be flexible and tailored to their needs, and practitioners should have the ability to support a wide range of issues. This includes delivering targeted counselling, group work, self-referral sessions, whole-class work for young people. To build a whole school approach, we need to see greater training for school staff and leaders in children's mental health, so that they know how to support pupils. Furthermore, this needs to encompass family support, including parenting training delivered by mental health practitioners, so that every person around a child has the understanding, skills and confidence to support their mental health and wellbeing.

To achieve this for every child, we need a dedicated children's mental health plan, that is fully funded, long-term and sustainable.

We would like to know your views on the effects that the strategy could have on the Welsh language. How could we change the strategy to give people greater opportunities to use the Welsh language? How could we change the strategy to make sure that the Welsh language is treated as well as the English language?

### Answer:

In order to ensure that every young person can access the support that they need to live well and thrive, it is important that they can receive support from a professional that speaks their language and represents them. Through our therapeutic practice, Place2Be sees daily the benefit of diversifying the

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mental health workforce, so that children feel seen and heard. We anecdotally know that when a child feels represented by their counsellor, they are more likely to seek support and engage with their therapy.

We have recently launched our school staff training programme 'Mental Health Champions – Foundation' programme in the Welsh language, to increase diversity and representation across Wales. However, further expansion of mental health services in Welsh remains a key challenge for service providers such as Place2Be, where struggle to recruit Welsh speakers into our child counselling workforce. We recommend the strategy specifically targets the expansion of Welsh-speaking mental health professionals including child counsellors. We also recommend that initiatives within the strategy such as school-based provision is available to Welsh speakers.