

Agenda – Children, Young People and Education Committee

Meeting Venue:

Committee Room 1 – Senedd

Meeting date: 10 January 2018

Meeting time: 09.15

For further information contact:

Llinos Madeley

Committee Clerk

0300 200 6565

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Private Pre-meeting

(09:15 – 09:30)

1 Introductions, apologies, substitutions and declarations of interest

(09:30)

2 Inquiry into the Emotional and Mental Health of Children and Young People – Evidence session 9

(09:30 – 10:15)

(Pages 1 – 28)

Samaritans Cymru

Sarah Stone, Executive Director

Emma Harris, Policy and Communications Officer

Carol Fradd, Functional Lead for Schools

Attached Documents:

Research Brief

CYPE(5)-01-18 – Paper 1 – Samaritans Cymru



Break

(10:15 – 10:30)

3 Inquiry into the Emotional and Mental Health of Children and Young People – Evidence session 10

(10:30 – 11:30)

NHS Emergency Duty Team / Crisis Care Practitioners

Sharon Stirrup, Operational Manager CAMHS – Powys Teaching Health Board

Darren Rennie, Co-ordinated Intensive Treatment Team (CITT) Practitioner – Powys Teaching Health Board

Caren Weaver, Crisis Nurse – Cwm Taf University Health Board

Dr Mark Griffiths, Clinical Director, CAMHS – Aneurin Bevan University Health Board

Melanie Jones, CAMHS Crisis Liaison Nurse – Abertawe Bro Morgannwg University Health Board

General responses from all Health Boards and the Welsh NHS Confederation have been published on the [inquiry](#) consultation page

4 Inquiry into the Emotional and Mental Health of Children and Young People – Evidence session 11

(Pages 29 – 31)

Police Representatives

Assistant Chief Constable Jonathan Drake, South Wales Police and Mental Health Regional Wales lead, National Police Chiefs Council

Detective Chief Inspector Alistair Mitchell, South Wales Police

Superintendent Nicholas McLain, Gwent Police

Attached Documents:

CYPE(5)-01-18 – Paper 2 – South Wales Police

5 Paper(s) to note

(12:15)

5.1 Letter from the Cabinet Secretary for Education – Package of investment in the additional learning needs transformation programme

(Pages 32 – 38)

Attached Documents:

CYPE(5)-01-18 – Paper to note 1

5.2 Letter from the Cabinet Secretary for Education – Implementation of the additional learning needs (ALN) transformation programme

(Pages 39 – 42)

Attached Documents:

CYPE(5)-01-18 – Paper to note 2

6 Motion under Standing Order 17.42(ix) to resolve to exclude the public from the meeting for the remainder of the meeting.

(12:15)

7 Inquiry into the Emotional and Mental Health of Children and Young People – Consideration of the evidence received

(12:15 – 12:30)

Document is Restricted

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 33

Ymateb gan: Y Samariaid

Response from: Samaritans

1. Samaritans Cymru welcomes the opportunity to respond to this inquiry into the Emotional and Mental Health of Children and Young People. Since launching our bilingual emotional health resource for schools in Wales in 2014, we have worked extensively on policy areas surrounding the emotional health of children and young people. Young people are a high-risk group for mental illness and suicide, and in Wales, we are witnessing a significant rise in precursory factors such as self harm, admissions for eating disorders and referrals to the specialist Child and Adolescent Mental Health Service (CAMHS) which can contribute to suicidal ideation or intent in adolescents. In 2016, there were 16 suicides in the 15-19 age group in Wales; the highest rate in 5 years and second highest in 12 years.

2. Specialist CAMHS

- 2.1. Despite the welcome additional investment from Welsh Government for CAMHS in Wales, the overall strain on mental health services in Wales is increasing; 2012-2016 saw a 100% increase in demand for CAMHS.¹ Following the initial announcement, we were pleased to see a push to make CAMHS more responsive by placing an emphasis on expanding access to psychological therapies.
- 2.2. We believe that swift and timely access to psychological therapies can enable and improve recovery, and act as a form of early intervention which can reduce the need for secondary services. Despite the cross-party support and focus on access to psychological therapies in the Together for Children and Young People Programme (T4CYP), Together for Mental Health and the Mental Health (Wales) Measure, access to psychological therapies is still a problematic issue in Wales.
- 2.3. Children and young people's mental health can deteriorate significantly during lengthy waiting times for psychological therapies. *Putting Mental Health on the Agenda*, a collaborative manifesto which Samaritans Cymru supported, states that *"lengthy waiting times can lead to absence from education and work, hospitalisation or even*

¹ [Mental Health in Wales: Fundamental Facts 2016](#), Mental Health Foundation (2016)

*homelessness. Early access to psychological therapies can prevent deterioration and avoid the need for more acute services, benefiting the person and the public purse”.*²

- 2.4. Although there has been a reduction in the number of children and young people waiting between 4 and 26 weeks following the 2015 Welsh Government announcement, there were still more than 1,000 young people out of 18,000 referred to mental health services in 2016 who waited more than six months for a first appointment.³ This initial reduction in waiting times was observed by reviewing board papers for each Health Board, reviewing Referral to Treatment Times published on the Welsh Government website and by directly requesting the information from Health Boards as opposed to routinely collected data. We believe this lack of central data is one the critical barriers for the improvement of CAMHS in Wales.
- 2.5. Despite the highly welcome introduction of a 56-day waiting time target for primary care interventions in the Measure, which has since been reduced to 28 days, there is no statutory requirement for health boards to collect specific waiting time data for psychological therapies. As this data for psychological interventions is not routinely collected or published, it is difficult to measure the scale of the problem. National data is recorded in relation to first appointments and does not include the length of time people are waiting in total (from referral to treatment). The data is also not broken down by Health Board area. In order to access a true reflection of specialist CAMHS in Wales, it is vital that waiting time data and patient outcome data are routinely collected and published.

3. Post-hospital support

- 3.1. It is also crucial that health boards in Wales collect and publish data for post-hospital support for patients following admissions for self-harm or a mental health crisis. According to Mind Cymru, as of April 2017, there is only one health board in Wales that records how many people get timely follow up contact after they've been discharged. The lack of data for post-hospital support in Wales is a major concern. A survey of over 850 people with mental health problems about their experiences after leaving hospital in Wales showed those who weren't followed up appropriately (after seven days or not at all) were twice as likely to attempt suicide and a third more likely to harm themselves compared to respondents who said they were followed up within seven days of being discharged.⁴
- 3.2. Research by the NSPCC found that 1,193 young people were admitted to A&E departments in Wales because of self-harm in 2015. That

² [Putting Mental Health on the Agenda](#), Gofal & Mental Health Foundation (2015)

³ [Child and Adolescent Mental Health Services \(CAMHS\): Position Statement](#), Community Health Council (2017)

⁴ [Thousands left to cope alone after leaving mental health hospital - putting their lives at risk](#) Mind Cymru (April 2017)

number has increased by 41 per cent in the past three years.⁵ National suicide prevention strategies recognise that Accident & Emergency services have an important role in treating people who have self-harmed or have made a suicide attempt. At least half of people who die by suicide have a history of self-harm and one in four have attended hospital for self-harm in the preceding year.⁶ Given the particularly high suicide risk of people who attend hospital and A&E after harming themselves it is essential that rapid follow-up care is always available. It's essential that anyone having self-harmed is treated with respect, given a proper assessment and follow-up care.

4. Links with Education (emotional intelligence and healthy coping mechanisms)

- 4.1. Following the Donaldson review and announcement of the new curriculum in Wales, we have been lobbying extensively for real change which these education developments could create. As a core purpose of the new curriculum and as one of the six Areas of Learning and Experience (AoLE), health and wellbeing have risen up the agenda for education in Wales. We have welcomed this focus but continue to emphasise the importance of implementation and the potential of this AoLE.
- 4.2. Currently in Wales, Personal and Social Education (PSE) is compulsory for all students at Key Stages 1,2,3 and 4 (5-16 years old) and covers an extensive and wide range of topics including sex education, spirituality, healthy eating, careers advice and online safety. Lesson plans which focus on emotional health and wellbeing, or mental health, are also freely available to schools within this remit . However, with increasing pressure on schools to deliver such a robust PSE framework, emotional and mental health lessons are often excluded.
- 4.3. In August 2017, we made a second campaign call for emotional and mental health lessons to be mandatory in Wales. This September, we have welcomed the announcement of a two-year Welsh Government trial which will allow pupils with mental health problems at more than 200 schools in Wales to access early help from onsite CAMHS practitioners. Whilst this kind of linking up between education and health services is essential, we would like to take this opportunity to emphasise that our call for action continues to be placed further downstream and in the primary context of early intervention through building resilience.

⁵ [Child self-harm figures 'frightening' in Wales, NSPCC says](#), BBC Wales (December 2016)

⁶ [How local authorities can prevent suicide](#), Samaritans (2017)

- 4.4. Whilst we welcome any initiative to help young people experiencing mental ill-health in Wales, our primary focus is to decrease the likelihood of mental illness developing in the first instance. In order to deal with and manage periods of low mental wellbeing, pupils need to develop and build their emotional resilience. Building resilience can help children and young people to view failures and mistakes as lessons to be learned from, and as opportunities for growth instead of viewing them as a negative reflection on our abilities or self-worth. Developing resilience increases the likelihood of people feeling committed to their lives and their goals, and having a compelling reason to get out of bed in the morning. Evidence shows that being taught about emotional health can reduce specific mental health problems and help with communication skills, social skills, cooperation, resilience, a sense of optimism, empathy, a positive and realistic self-concept and problem-solving skills. We also know that children with higher levels of emotional, behavioural and social wellbeing have, on average, higher levels of academic achievement and are more engaged in their education.
- 4.5. Being taught about emotional health helps people become less prejudiced which reduces the stigma surrounding asking for help. A major concern for Samaritans is the stigma which children and young people will experience in school when needing to access support for low mental wellbeing or specific mental health issues. During our time working with the Cardiff Healthy Schools team, we discovered that one of the key reasons pupils don't access support through their counselling service is because of stigma. We are also aware that it is this reluctance to seek help, teamed with a lack of knowledge surrounding emotional health and healthy coping mechanisms, that can worsen a child's mental health and eventually lead to an unnecessary CAMHS' referral for the pupil and an over-referral to CAMHS' nationally. It is imperative that we don't medicalise emotional distress in children and young people's formative years. Whilst we advocate for parity of esteem for physical and mental health in Wales, it is importance to identify the wider societal and cultural aspects of today's modern society which impact negatively on the mental health and wellbeing of children and young people.
- 4.6. Children today are born into a complex world which we can struggle to understand, one where social media, internet use, information and communication technology is embedded in their early development, childhood and subsequent maturation. There is increasing evidence that social media may be causing loneliness and depression in teenagers. In a recent US study on the effect of social media use on feelings of social isolation, the University of Pittsburgh found that more than two hours of social media use a day doubled the chances of a person experiencing social isolation.⁷ In September 2017, a

⁷ [Social Media users more likely to feel isolated](#), Medical News Today (2017)

government-funded study found that one in four girls in the United Kingdom is clinically depressed by the time they turn 14, a startling figure which once again has been attributed to increasing pressure and loneliness caused by social media.⁸

- 4.7. We must embed a public health approach to mental health by placing a primary focus on prevention rather than cure alone. Investment in prevention and early intervention can reduce human, social and economic costs. With half of all mental health problems beginning by the age of 14, the case for this approach is clear; school years are the crucial opportunity to equip children and young people with the skills they need to face the modern society they find themselves in. Emotional health programmes in schools should be viewed as a form of promotion, prevention and early intervention which could reduce pressure on CAMHS, reduce specific mental health problems and increase academic achievement.
- 4.8. We are concerned to hear the recent announcement that the introduction of the new curriculum in Wales will be delayed. However, we hope this phased roll-out will provide more time for the opportunities within Health and Wellbeing AoLE to be realised. We believe lessons in emotional and mental health should be mandatory for all secondary schools in Wales and should form part of the new curriculum under the Health and Wellbeing AoLE. For the 2016/17 academic year, we have worked with five schools in Cardiff to help them implement our own emotional health lesson plans (DEAL – Developing Emotional Awareness and Listening) into their curriculum. We look forward to assessing the evaluation of this project and are pleased to already hear that the schools will continue to use it in the future.

5. Teacher Training

- 5.1. We would also like to highlight the training gap in emotional and mental health for teachers in Wales. This is another growing concern which could be addressed during the phased roll-out of the new curriculum. We believe existing teaching staff across all schools in Wales should be provided with basic emotional and mental health awareness to increase confidence in teaching the subject. We should also be equipping new teaching staff with the confidence and skills they need by embedding emotional and mental health awareness in Initial Teacher Training (ITT). We are pleased to see the '*upskilling of teachers to recognise and deal with low level problems*' included in the recent announcement of the £1.4m mental health project in schools. However, we must ensure consistency across all educational settings

⁸ [One in four girls have depression by the time they hit 14, study reveals](#), Guardian (September 2017)

in Wales and make sure teaching staff are equipped to deal with emotional and mental health. During our training session for the Cardiff DEAL Pilot, the most frequent concern raised was the lack of confidence the teaching staff had in dealing with difficult questions. Of the five schools involved, all of them raised the issue of not knowing how to respond to instances of self-harm or questions about suicidal feelings. This lack of confidence is apparent in passionate PSE staff so we must be realistic about the many other teachers in Wales who don't have the confidence or knowledge to deal with these issues. During our time engaging with teaching staff, we have heard of many instances where pupils are referred to services because the first point of contact, the teachers themselves, do not know how to deal with them.

- 5.2. It is vital that we realise the potential of the new curriculum. Its success will improve the future of public health in Wales and in turn, could save us economic, health and most importantly, human costs. Finally, we believe the potential of this change in Wales strongly adheres to the principles of the Well-being of Future Generations (Wales) Act 2015, particularly in terms of the sustainable development principle. This change would contribute to a solid foundation for the next generation; it is vital to create opportunities for every child and young person in Wales.

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 28

Ymateb gan: Awdurdod Heddlu De Cymru

Response from: South Wales Police

Consultation Response

I refer to the CAMHS consultation on the Emotional and Mental Health of Children and Young People and the committee's inquiry to consider whether the review of CAMHS is on track to deliver the 'step-change' in CAMHS services that is needed under the following headings:
Specialist CAMHS.

Transition to Adult Services.

Links with education (emotional intelligence and healthy coping mechanisms).

South Wales Police (SWP) acknowledges the changes to CAMHS services facilitated by the additional funding from Welsh Government to improve services to children and young persons (C&YP's) under 18 years of age and report as follows under the above headings:

Specialist CAMHS

1.1 South Wales Police recognises the new service provision of the crisis liaison teams in each of its 3 local health boards between the hours of 9am and 9.30 pm, with out of hours CAMHS On-Call maintained at the switchboard at the University Hospital of Wales. This service will provide vital contact advice which is required under the Police and Crime Act 2017 (when effective later this year) where officers must where practicable telephone for advice from a health care professional prior to arrest. The police officer must, if it is practicable to do so, consult with-

- a) A registered medical practitioner,
- b) A registered nurse,
- c) An approved mental health professional.

1.2 For 2015/16 and 2016/17 the number of section 136 detentions has increased from 36 to 48 respectively against a total number of all detentions of 680 which represents a significant increase year on year for C&YP's. Whilst police officers are encouraged to use police protection powers under the Children's Act 1989 so as not to stigmatise children, officers are too often left with no choice but to invoke section 136 in the best interests of the child or young person.

1.3 Designated places of safety remain the same for C &YP's as they do for adults. However on occasions officers are encouraged/directed to use CAMHS establishments such as St David's Hospital in Canton, Cardiff. Whilst using these resources during office hours perhaps consideration should be given to having separate PoS's within each LHB or a regional facility such as Ty Llidiard as a hub for the reception of C&YP's detained under section 136. Completion of the requisite section 136 forms by CAMHS is indifferent and should be forwarded to the mental health act department in each LHB in every case.

1.4 Additionally, expanding the services of Ty Llidiard as a triage centre could facilitate the reception of C&YP's in need of specialist help. In August 2017 SWP dealt with a C&YP discharged from section by Ty Llidiard into the care of local services only to be re taken a short while later by police under section 136 to A&E, before being returned to Ty Llidiard where they were detained under the act. Such a facility would reduce demand on A&E departments.

1.5 SWP understands that there is insufficient in -patient capacity in Wales

1.6 Liaison and diversion services are yet to be determined by CAMHS in the SWP force area for C&YP's who have committed a crime under the Welsh Government's Policy Implementation Guidance on Addressing Mental Health Problems of Children and Young People in the Youth Justice System. By employing means designed to keep a small but often vulnerable group of children and young people out of the criminal justice system, it is more likely to stop problems from escalating and, critically help prevent the stigma and debilitating effect of a criminal record later on in life.

1.7 SWP acknowledges in cases of crime, specialist forensic opinion may be required from the CAMHS psychiatrist to the Forensic Adolescent Consultation Team (FACTS). This is also incorporated in the MOU on Murder /Manslaughter which will soon to be finalised with services.

1.8 SWP have in place the Welsh Accord for the Sharing of Personal Information (WASPI) agreement with the 3 LHB's in it's force area. Information sharing can on occasions be difficult to access and is an area for improvement.

Transition to Adult Services

1.9 SWP acknowledges that as a C&YP approaches the age of 18 there is difficulty in determining the appropriate action in the best interests of the C&YP. SWP advocate a joint partnership approach by CAMHS and adult services so that C&YP's do not fall between services.

Links with Education (emotional intelligence and health coping mechanisms)

2.0 SWP are aware of the services CAMHS provides but do not directly have involvement through the schools programme. We are therefore unable to comment further on any improvement to their service since implementing any changes. Anecdotally we are aware that there is a long waiting time for C&YP's identified as needing counselling services. Our schools community police officers (SCPO's) do not refer pupils into CAMHS and schools are not allowed to make direct referrals to CAMH's. The parents are advised to go to their GP. We understand that schools are unhappy with this direction. SCPO's may, however be aware of pupils currently either waiting for or receiving CAMHS services.

2.1 Children do not suddenly become unwell, then have a few months treatment and are cured. Meaningful provision means preventative steps must be taken to protect our young minds from an early age. We need far more robust education in our schools and care homes to identify the signs of mental health – and strategies and support put in place to help these C&YP's. It is also crucial that there are 'step down' facilities so C&YP's have the support to re integrate them into society and are not just referred back into the situation that caused their illness in the first instance.

I submit this response on behalf of South Wales Police to the children, Young people and education committee.

CYPE(5)-01-18 – Paper to note 1
Agenda Item 5.1

Kirsty Williams AC/AM
Ysgrifennydd y Cabinet dros Addysg
Cabinet Secretary for Education



Llywodraeth Cymru
Welsh Government

Ein cyf/Our ref: MA(L)/KW/0528/17

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Children, Young People and Education Committee
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11th December 2017

Dear Simon,

I am writing to provide a further update about the £20m package of investment in the additional learning needs transformation programme, which was announced earlier this year. In March, the then Minister for Lifelong Learning and Welsh Language wrote to you about the funding package, and highlighted that the indicative budget allocations were likely to change as a result of ongoing engagement and consultation with delivery partners.

At his appearance before your Committee on 21st September, the then Minister undertook to write to the Committee outlining how the £20 million package of support for additional learning needs will facilitate and support the implementation of the Bill, including how it will be profiled for local authorities, and to provide you with information on how implementation of the Bill will be monitored.

The Committee's Stage 1 report on the Additional Learning Needs and Education Tribunal (Wales) Bill recommended "there is transparency regarding the £20m additional funding for Additional Learning Needs." I trust this letter will provide that transparency.

My officials have been working work closely with stakeholders to develop the approach to supporting the implementation of the new additional learning needs

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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.

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We welcome receiving correspondence in Welsh. Any correspondence received in Welsh will be answered in Welsh and corresponding in Welsh will not lead to a delay in responding.

framework. A public consultation about how the Bill should be implemented, subject to its passage through the National Assembly, closed in June. We have been reflecting on the feedback received about the priorities for implementation and transition support and have refined our budget forecasting accordingly. I published a statement on 11th December outlining our proposed approach, and indicated that following analysis of the consultation responses, we have restructured our £20m funding commitments to better align them with the needs of the sector.

This letter sets out the changes to the indicative budget allocations across the various strands of the transformation programme since March. It also provides further information in response to questions raised by the Committee about which activities in the programme are funded through our additional investment of £100m to raise school standards; which costs are directly related to the Bill and which costs have been included in the revised regulatory impact assessment as transition costs that fall directly to the Welsh Government.

I have also made it clear where information provided below links to other relevant recommendations in the Finance Committee's Stage 1 report, therefore expanding on then Minister formal response to the Committee's report in his letter of 17 July.

Changes to the ALN transformation budget profile

In summary, I expect the indicative transformation programme work strands to be profiled over the next four financial years as follows:

Table 1: Breakdown of ALN transformation programme work strands

Workstream	2017-18	2018-19	2019-20	2020-21	Total
Implementation/ transition support	1,873,000	3,457,000	3,453,500	3,305,000	12,088,500
Workforce development	843,000	2,081,000	2,081,000	2,292,000	7,297,000
Awareness- raising	237,500	142,500	167,500	105,000	652,500
Supporting policy	82,500	55,500	34,000	34,000	206,000
Total	3,036,000	5,736,000	5,736,000	5,736,000	20,244,000

Overall, the total indicative budget for the transformation programme remains £20.244m between 2017-18 and 2020-21, and the annual totals remains the same. However, the profiling of the budget between the various strands of the programme has changed.

The changes reflect the development in our thinking about the role of the ALN Transformation Leads, who will be appointed this autumn. The former Minister wrote to you on 11 July to inform you of the written statement published that day about the

Transformation Leads, explaining that these roles would be responsible for managing the implementation grants for local authorities and further education institutions, pooled to maximise the impact of investment.

We have reallocated a significant element of the budget from the workforce strand of the transformation programme to the implementation and transition support strand, in order to increase the grant funding for the ALN Transformation Leads, to be used for coordinating the delivery of regional, multi-agency training and professional development on the new legislative framework and its implications for all those involved in supporting learners with ALN.. This reflects the feedback to the consultation which identified funding for training for all staff involved with ALN as a priority for implementation, as well as specific training for those with new roles and responsibilities (such as additional learning needs coordinators (ALNCos), designated education clinical lead officers (DECLOs) in health boards and local authority early years ALN lead officers).

The increased investment in the grants for the Transformation Leads also reflects calls from respondents to the consultation for strong strategic leadership, both at a national level from Welsh Government, and in providing direct support and advice to local authorities, FEIs, schools, early years settings and health boards. There were also calls for detailed implementation plans to be put in place and communicated to all delivery partners, and effective monitoring arrangements to be put in place to ensure that the roll-out of the new system remained on track.

Funding for the regional posts will be provided to a lead local authority on behalf of the other authorities in the region (on a regional education consortia footprint). The lead authorities will employ the Regional Transformation Leads directly. Colegau Cymru will employ and receive the grant for the FE Transformation Lead post.

In 2017-18, each of the four lead authorities will be provided with an equal grant allocation of £67,500. From 2018-19 to 2020-21, each lead authority will be provided with £0.125m to cover the costs of the Transformation Leads (including salary and other associated on-costs) and to provide administration and finance support to the Transformation Lead. The remaining budget (£2.7m) will be allocated on a formula basis, with a 70% weighting for pupil numbers (aged 5-15) and 30% weighting for school numbers.

While the funding for the rollout of training will be coordinated by the Regional Transformation Leads under the implementation and transition support strand of the programme, the materials to be used to deliver training will be developed by the Welsh Government under the awareness-raising strand of the budget. This is in line with a key recommendation of the ALN training expert group – that training must be based on a consistent, national set of messages about the new system that should be developed centrally. The training package will include modules targeting key practitioners with specific roles in the new system, including It will also target leaders with corporate or statutory responsibilities under the Bill, highlighting key messages focusing on their legal responsibilities, readiness and strategic planning to prepare for implementation.

The awareness-raising budget has therefore been increased to accommodate the significant amount of materials which need to be developed for the implementation of the training programme. This includes the procurement of e-learning packages; face-to-face training materials; videos and animations; and a train-the-trainer course to support the roll-out of a comprehensive training programme. The awareness-raising strand of the programme will also include the creation of resources to raise awareness of the new system targeting children, young people, families and the public.

£100m for improving school standards

£10.1m of the transformation programme budget is being drawn from our additional investment of £100m to raise school standards. This comprises £9.85m to fund the Regional ALN Transformation Leads and provide them with a budget for implementation training and £0.25m to develop training materials and for surveys of the SENCo and specialist workforce to inform the approach to the roll-out of training and development for those key professions.

The costs of the rest of the programme are based on the planning assumption that the Government's ALN budget line is maintained at its current level until 2020-21 (£2.786m in 2017-18). This is subject to consideration and agreement in future year budget allocations.

Bill-related costs and the revised RIA

In line with the Finance Committee's recommendation in its Stage 1 report – "the Regulatory Impact Assessment is updated to incorporate the relevant revisions to figures" – the RIA has been revised over the summer and the Committee was provided with an updated version on 8 September. A further version was laid before the Assembly as part of the revised Explanatory Memorandum on 14 November.

The Committee also recommended "any revised Regulatory Impact Assessment makes clear whether additional funding is being made available for the purposes of the Bill." The revised RIA includes a number of costs, which will be directly incurred by the Welsh Government in relation to the implementation of the Bill:

- £0.61m of these costs will be funded through the transformation programme – the ALN Strategic Implementation Group and expert groups (£0.01m); compliance and impact monitoring (£0.21m); and the development of awareness raising training and resources (£0.39m);
- The other Welsh Government transition costs listed in the RIA relate to staff costs or come from other budgets such as the annual funding for Careers Wales and are not part of the £20m ALN transformation programme funding.

For the purposes of the RIA, grants that the Welsh Government will be issuing have not been included because these costs do not directly fall on the Welsh Government as a result of the Bill, but on delivery partners. The Welsh Government has committed to provide grant funding to support organisations in making the transition

to the new legislative system and these will come from the £20m ALN transformation programme funding.

The indicative grant funding includes £10.4235m between 2017-18 and 2020-21. The grants for the Regional and FE Transformation Leads during that period will total £9.87m and £0.35m respectively (plus a one-off cost for the recruitment process for all five posts of £0.038m in 2017-18). It also includes grant funding to cover the costs of implementing the new legislative system, as identified in the RIA, that will fall to the Special Educational Needs Tribunal for Wales (£0.103m between 2018-19 and 2019-20) and Estyn (£0.0625m in 2019-20).

The terms and conditions attached to the grant funding will ensure they are used for specific purposes to support implementation of the new legislative system, in line with the Committee's recommendation that "the Additional Learning Needs implementation grant funding provided to local authorities and other organisations should be ring-fenced to ensure that its use specifically relates to implementing obligations from the Bill".

In total, these Bill-related activities are expected to amount to £11.0335m between 2017-18 and 2020-21 (see table 2, annex 1). The remainder of the activities in the transformation programme contribute to the same aims as the Bill – to ensure all learners with ALN are supported to overcome barriers to learning and can achieve their full potential, however these are not directly related to implementing the new legislative framework.

These wider transformational activities include, for example, the ALN innovation projects which are developing innovative, multi-agency solutions to improve services for learners with ALN; local authority specialist services skills development (for example, educational psychologists, specialist advisory teachers for learners with hearing impairment, visual impairment or multi-sensory impairment) and the Learning with Autism programme for the work-based learning sector. Details about all the activities in the programme were provided to you in March.

Arrangements for monitoring implementation

The approach to monitoring the Additional Learning Needs and Education Tribunal (Wales) Bill will consider whether stakeholders are ready for implementation, are compliant with the provisions set out in the Bill and whether the Bill has achieved the expected outcomes and impacts. This will be undertaken prior to implementation, during implementation and post implementation.

Prior to implementation, the main focus of the work will be to assess the readiness of delivery partners to implement the new system. We have begun by commissioning a baseline evaluation, currently being undertaken by Arad Research and the University of South Wales. Early in the new year, the Transformation Leads will begin working with the authorities in their region, or FEIs in the case of the FE Transformation Lead, to undertake readiness assessments. This will be supported by a thematic review of the readiness of schools to implement the new ALN system. The Transformation Leads will use the evidence from these sources to develop implementation plans.

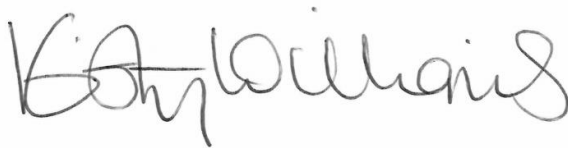
During implementation, progress against implementation plans will be reported to the Welsh Government and monitored at a national level through the ALN Strategic Implementation Group. The ALN-SIG and the new Transformation Leads will also help support local authorities to manage the transition of the agreed cohorts of eligible learners onto Individual Development Plans within set timescales. This will also be reported to Ministers on a regular basis.

A post-implementation review will consider the extent to which the Bill has achieved the expected impacts. This will use the Arad evaluation as a baseline against which the new system can be compared, supported by evidence from Estyn, statistical data, and research with stakeholders, including parents. This will be reported to the National Assembly in due course.

I hope this information is helpful and provides the Committee with reassurance around the direction of travel as regards our investment in real transformation of the way in which support for children and young people with ALN is planned and delivered.

I am copying this letter to Lynne Neagle AM, chair of the Children, Young People and Education Committee.

Yours sincerely,

A handwritten signature in black ink, appearing to read 'Kirsty Williams'.

Kirsty Williams AC/AM

Ysgrifennydd y Cabinet dros Addysg
Cabinet Secretary for Education

Table 2: Directly Bill-related costs

	Activity	2017-18	2018-19	2019-20	2020-21	Total	Total
Included in revised RIA as WG transition costs	ALN-SIG & Expert Groups	5,000	5,000			10,000	610,000
	Readiness, compliance and impact monitoring	80,000	130,000			210,000	
	Development of core skills/ awareness-raising materials	100,000	50,000	135,000	105,000	390,000	
Not included in revised RIA – grants to support partners in relation to costs which befall them via the Bill	SENTW transition support		17,000	86,000		103,000	10,423,500
	Estyn transition support			62,500		62,500	
	Regional ALN Transformation Leads	270,000	3,200,000	3,200,000	3,200,000	9,870,000	
	FE Transformation Lead	35,000	105,000	105,000	105,000	350,000	
	Recruitment of Transformation Leads	38,000				38,000	
	Total	528,000	3,507,000	3,588,500	3,410,000	11,033,500	

Kirsty Williams AC/AM
Ysgrifennydd y Cabinet dros Addysg
Cabinet Secretary for Education



Llywodraeth Cymru
Welsh Government

Ein cyf/Our ref: MA(L)/KW/0871/17

Lynne Neagle AM
Chair
Children, Young People and Education Committee
National Assembly for Wales
Ty Hywel
Cardiff Bay
CF99 1NA
SeneddCYPE@assembly.wales

15th December 2017

Dear Lynne,

In September the former Minister for Lifelong Learning and Welsh Language wrote to you to provide you with an update on the implementation of the additional learning needs (ALN) transformation programme and committed to doing so on a quarterly basis; this was in response to the Children, Young People and Education Committee's second recommendation in its stage 1 report on the Additional Learning Needs and Education Tribunal (Wales) Bill.

This letter is the second of these updates. I have also previously provided you with a copy of my letter to the Finance Committee on 11 December on the breakdown of the £20m package of investment to deliver the programme.

Legislation and Statutory Guidance

It was my privilege to help steer the Additional Learning Needs and Education Tribunal (Wales) Bill through its final stages, and I was delighted that it was unanimously passed by the Assembly on Tuesday 12 December, exactly a year on from its introduction in 2016.

I would like to reiterate my thanks to your Committee for its diligent consideration throughout the legislative process which strengthened the robustness of the Bill. I am confident this legislation will help create a better system for supporting some of our most vulnerable learners.

Going forward, in anticipation that the Bill gains Royal Assent, our focus in 2018 will shift to the subordinate legislation, including a consultation in the autumn on some of the draft regulations and the next iteration of the draft ALN Code. These will then be

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Rydym yn croesawu derbyn gohebiaeth yn Gymraeg. Byddwn yn ateb gohebiaeth a dderbynnir yn Gymraeg yn Gymraeg ac ni fydd gohebu yn Gymraeg yn arwain at oedi.

We welcome receiving correspondence in Welsh. Any correspondence received in Welsh will be answered in Welsh and corresponding in Welsh will not lead to a delay in responding.

subject to Assembly scrutiny. I anticipate the final Code being published by the end of 2019.

Implementation/ transition support

On 11 December I published a summary of consultation responses on the implementation of the Bill alongside our proposed approach. Beginning September 2020, learners with existing Statements will transfer to the new system within two years, and all other learners with non-statutory plans within three years. This reflects stakeholder feedback from our consultation on options for implementation.

This will now be used to develop and refine a transition guide for delivery partners setting out detailed guidelines to support implementation. This will include detailed timescales for the roll-out of individual development plans to each cohort of learners in the phased approach. The guidance will be developed in partnership with key stakeholders and published for consultation next year. 2018 will see an acceleration of activities as we move into the implementation phase, including increased support and challenge for partners to prepare for operating the new system.

The five ALN transformation leads will take up post by spring 2018 and will be responsible for supporting delivery partners to undertake readiness assessments and develop implementation plans. The readiness work will be complemented by a thematic review that Estyn will be undertaking, exploring the extent to which primary and secondary schools, pupil referral units and education other than at school providers are aware of the reforms being introduced through the Bill and are preparing for implementation.

In September 2017 the ALN Strategic Implementation Group (ALN SIG) held its final meeting in its current format. The group has been instrumental to date in co-constructing the approach to implementation and the transformation programme as a whole. They have agreed that as we move into the implementation phase of the reforms, a smaller high-level group will oversee the work of the ALN Transformation Leads and support consistency of implementation, collaboration and the sharing of good practice.

The eight expert groups which were established by the ALN SIG will continue to work towards their agreed set of actions. This includes helping to develop the Individual Development Plan (IDP) template, awareness raising materials and new arrangements for health practitioners.

Workforce development

Specialists play a vital role in supporting learners with ALN. In partnership with the Welsh Local Government Association and the Wales Data Unit, local authority heads of service have been helping us get a clearer picture of local authorities' current specialist support services workforce.

I have agreed to allocate £352,000 from within the ALN workforce development budget to be distributed as grant funding to local authorities over the next 2 financial years (2018-19 and 2019-20) to support the postgraduate training of local authority-

based specialist and advisory teachers of learners with visual impairment (VI), hearing impairment (HI) and multi-sensory impairment (MSI). This funding may also be used to facilitate training in Braille and British Sign Language for local authority-based specialist staff.

In order to ensure a continued supply of Educational Psychologists, we fund Cardiff University's Doctorate in Educational Psychology (DEdPsy) professional training programme. I have agreed to continue the current arrangement to DEdPsy for a further cohort from September 2018, whilst negotiations about arrangements from 2019-20 onwards are concluded.

Following recommendations from the Committee, we have undertaken further work on scoping the role of the ALN Coordinator (ALNCo). My officials have worked closely with a range of stakeholders to identify skills and training requirements for this important role. We envisage ALNCoS providing strategic leadership and acting as the first point of contact within the education setting for the provision of professional advice and guidance. ALNCoS will be expected to apply evidence based practice and to assess the impact of different approaches and techniques on outcomes for learners with ALN. They will also be expected to support sustainable and effectively professional learning for all ALN across the setting.

Awareness raising

As a result of the feedback to the consultation on implementing the Bill, we have commissioned Eliesha Cymru to develop a suite of learning and training materials to support implementation of the ALN transformation programme, including the Bill. These will form the basis of multi-agency implementation training once the Code and subordinate legislation are in place. This will help practitioners to understand and prepare for the changes being introduced under the new system and help ensure consistency across Wales.

Rapid evidence assessments and accessible guides on effective interventions to support children and young people with a range of ALN were commissioned earlier this year. The rapid evidence assessments of interventions to support children and young people with ADHD and ASD are nearing completion. The evidence from the assessments has been used to develop accessible guides and workshops have been held with practitioners and parents to understand their preferences regarding the structure and content of the guides.

Supporting policy/ business continuity

This strand of the programme focuses on ensuring the existing SEN and LDD system operates smoothly until the new ALN system comes into effect. As we move into implementation, this aspect of the programme increasingly focuses on maintaining business continuity.

To support the current post-16 specialist placement process, we have published technical guidance for specialist further education (FE) establishments. This guidance provides clear advice on Welsh Government's expectations regarding the role of specialist FE establishments in delivering post-16 provision for young people.

We have also published revised technical guidance for Careers Wales. Workshops will be used to reinforce the guidance and explore how it is working in practice.

I am confident we can continue to work effectively during the implementation phase on what is a major transformation package which will benefit the most vulnerable people of Wales.

I am copying this letter to Simon Thomas AM, Chair of the Finance Committee and Mick Antoniw AM, Chair of the Constitutional Affairs and Legislative Committee.

Yours sincerely,

A handwritten signature in black ink, appearing to read 'Kirsty Williams'.

Kirsty Williams AC/AM

Ysgrifennydd y Cabinet dros Addysg
Cabinet Secretary for Education