

Children, Young People and Education Committee

Sixth Senedd Priorities Consultation

July 2021

In order to help inform our strategic planning and forward work programme, we are asking for your views on what you think, at this stage, our **main priorities should be during the Sixth Senedd (2021-2026)**. Where overlaps between committee remits exist, we will ensure that relevant issues are shared with other committees.

We are keen to start this work as soon as possible, to make sure our plans take account of your views. We know people take a well-earned break over the summer, and many education institutions also pause for a holiday, so we will run this consultation until **Friday 17 September 2021** to make sure everyone has the opportunity to contribute when they return to work. Please be aware that it may not be possible to take into account responses received after this date.

A key priority for us is to ensure that children and young people's voices are heard in our work. To do this in a meaningful way, we know that we need tailored and appropriate ways of engaging. In light of that, **this consultation is not aimed at children and young people. Instead, we will run activities with children and young people in the autumn to help us understand their priorities for the Sixth Senedd.** We will share the findings of this work with all Senedd committees. If you are – or your child is – under 16 and interested in being involved in this activity, please email us on SeneddChildren@senedd.wales to let us know. You can also use this mail address to send us your ideas on how you would like to see us engaging with children and young people – we have lots of ideas ourselves, but we're also interested in yours!

Information about consultations, which you should consider carefully before submitting a response, is available in our [privacy notice](#). Please answer questions 6-8 at the end of this proforma to enable us to process your response appropriately.

The Senedd has two official languages, Welsh and English. In line with the [Senedd's Official Languages Scheme](#), we request that you submit your response in both languages if you are able to do so. If your response is not submitted bilingually, we will publish in the language submitted, stating that it has been received in that language only. We expect other organisations to implement their own standards or schemes and to comply with their statutory obligation.

If you have any queries about this consultation, please contact the Committee team on SeneddChildren@senedd.wales.



1. Name:

Gethin Matthews-Jones

2. Email address:

Gethin.matthews-jones@rcpch.ac.uk

3. Please tell us in what capacity you are responding to this consultation (Please select one answer only.):

Individual responding in a personal capacity (go straight to question 4)	<input type="checkbox"/>
Individual responding in a professional capacity (go straight to question 4)	<input type="checkbox"/>
Individual responding on behalf of an organisation (please answer question 3.1)	<input checked="" type="checkbox"/>

3.1. If you are an individual responding on behalf of an organisation, please tell us the name of the organisation you are representing and your job title:

Head of Policy and Public Affairs (Devolved Nations) at the Royal College of Paediatrics and Child Health (RCPCH)

4. Would you like to be added to the Children, Young People and Education Committee's contacts list in order to receive updates about our work? (Please select one answer only.)

Please note that you can unsubscribe by emailing SeneddChildren@senedd.wales

Yes	<input checked="" type="checkbox"/>
No	<input type="checkbox"/>



5. What do you consider to be the main priorities or issues that the Committee should consider during the Sixth Senedd? Where possible, please set out your view about how the Committee could address them.

Please answer in relation to as many of the themes below as you are able.

Please keep your response to no more than 2000 words in total.

Theme 1: School-age education

Theme 2: Further and higher education

Theme 3: Health and well-being, including social care (as they relate to children and young people)

Covid recovery and child health services

The previous Committee's [report on the impact of COVID-19 on children and young people](#) recommended that the next Welsh Government and their successor committee should maintain a close focus on:

- "Placing children and young people's wellbeing and education at the centre of all recovery planning"
- "Preparing for, and resourcing, the response to supporting our children and young people through any further disruption from COVID-19"
- "Adopting a children's rights approach to all decisions, across all sectors, must be a priority, and the voices of children and young people must be heard by the decision makers to help shape our road to recovery".¹

¹ Welsh Parliament Children, Young People and Education Committee (2021). *The impact of COVID-19 on children and young people: Final report*. Available at: <https://senedd.wales/media/ixzpwqr5/cr-ld14286-e.pdf>



We agree with this analysis which reflects our recent [manifesto for Wales](#) and hope that the CYPE Committee will prioritise recovery in all children's services, both within and outside of health services, with ongoing scrutiny and evidence from Ministers and officials.

Children and young people have highlighted to us that their recovery priorities for health services coming through and out of the pandemic are:

- Increasing access to mental health services (early intervention and prevention through to in patient)
- Improving pandemic information for children and young people
- Improving virtual health services for children and young people.

These areas need to be considered in any overarching priorities for health and social care, keeping children and young people and their rights at the centre, with particular regard to the shift to digital working and how this might be directly or indirectly impacting children and young people, for example not feeling able to access online mental health support due to not having a device/access to WiFi or being in a home setting where there is no privacy, confidentiality or a safe space to talk about issues that might be in conflict to family views, for example being LGBTQ+.

Covid recovery and public health

Our 2020 [State of Child Health](#) report captured information across a range of indicators and could be seen as a pre-pandemic benchmark of children's health and wellbeing. Understandably, there was disruption to government action relating to a number of these indicators during the pandemic, but the challenges identified in the report have not gone away. We need to understand what progress is now being made to improve children's health across a range of public health issues including childhood obesity; smoking during pregnancy; breastfeeding rates; preventative dental health; and smoking in young people.

One outcome of Committee work could be to focus attention on these issues, either individually as short enquiries, or grouped together as a bigger piece of work, and establish whether the Welsh Government is on track to deliver on its existing commitments on CYP public health, prevention and early intervention. If it is not, the Committee might consider making recommendations for improvement. These commitments include:

- On oral health, the '[Designed to Smile](#)' programme; and commitments made as part of [A Healthier Wales](#) including a "year-on-year increase in the proportion of people who have seen an NHS dental practitioner in the last 2



years (1 year for children) in all Health Boards"; and "continued child oral health improvement 5 & 12 year old surveys"²

- On preventing and addressing childhood obesity, '[Healthy Weight: Healthy Wales](#)'
- On breastfeeding, the '[All-Wales Breastfeeding Plan](#)'
- At a strategic level, [A Healthier Wales](#) set out the need to deliver "a 'wellness' system, which aims to support and anticipate health needs, to prevent illness, and to reduce the impact of poor health."³

Running through each of these issues is the impact of inequalities. We highlighted this in relation to oral health, childhood obesity and breastfeeding in our State of Child Health reports. We have previously called for "specific targets for key areas of child health inequalities, with clear accountability across Government"⁴.

We would encourage the Committee to consider what actions it can take to provide scrutiny of the government's response to health inequalities; whether the current strategic framework for reducing inequalities is successful; and whether government is doing enough to ensure that tackling health inequalities is a priority in recovery from the pandemic.

Chronic fatigue services for children and young people

One of the things that the Covid pandemic has exposed is a lack of services for children and young people experiencing chronic fatigue.

Although at the time of writing there is no agreed case definition for 'Long Covid' in children, the issue has gained significant profile and this has shone a light on existing problems. Paediatricians around Wales have reported a lack of referral options for children and young people presenting with fatigue, with no services at all for children in many parts of Wales.

Regardless of whether need is driven by viral infection; social, familial and educational impacts of the pandemic; or causes that have nothing to do with COVID-19 and which existed long before COVID-19, paediatricians would like to see rapid improvement.

An impact or outcome of Committee work around this could include scrutiny of Welsh Government understanding of gaps in services and demand for these services; along with providing government and service planners with recommendations to take forward.

² Welsh Government (2018) *The oral health and dental services response*. Available at:

<https://gov.wales/sites/default/files/publications/2019-03/the-oral-health-and-dental-services-response.pdf>

³ Welsh Government (2019) *A Healthier Wales: our Plan for Health and Social Care*. Available at:

<https://gov.wales/sites/default/files/publications/2019-10/a-healthier-wales-action-plan.pdf> 2019

⁴ Royal College of Paediatrics and Child Health (2021). *Senedd Elections Manifesto*. Available at:

<https://www.rcpch.ac.uk/sites/default/files/2021-03/RCPCWales-Senedd-election-2021-manifesto.pdf>



Mental health

In the last Senedd term, the previous CYPE Committee published the influential Mind Over Matter report. We hope that over the course of this Senedd, the Welsh Government will deliver those recommendations with which it agreed or agreed in principle and that we will see an improvement in children's mental health. However, it is vital that there is effective scrutiny to ensure this is the case.

Over the course of the pandemic, we [published data](#) showing a sharp rise in the proportion of inpatient beds taken by children and young people due to a mental health admission. Anecdotal feedback from paediatricians suggests an increase in complex and severe presentations due to mental health. Children and young people consistently identify mental health as a priority in our engagement work both in Wales and UK-wide.

Children and young people with long term conditions in Wales and throughout the UK have told us that there are challenges around mental health support for them, needing all health services to be able to:

- Provide up to date sign posting information to support self-care, early intervention and prevention with staff being trained in mental health first aid
- Have access to specialist services that can provide psychological support around their health conditions
- Be able to also provide quick access wider specialist mental health support that isn't connected to their health conditions

We therefore ask the Committee to consider:

- Demand and capacity within neurodevelopmental (ND) services: paediatricians have highlighted the need to understand ND services as a whole so that we have a better picture of demand and capacity throughout Wales, not just of autism services but the whole ND pathway. During the consultation and development of the [Code of Practice on the Delivery of Autism Services](#), several stakeholders raised concerns about capacity within ND services. Now that the Code has been published, it would be timely to investigate this. Outputs could include a review with evidence gathering; and a report to understand bottlenecks and pinch points within services, with recommendations as to how we can ensure services can meet demand not just for autism services but for all ND services, regardless of diagnosis.
- Continued monitoring by the CYPE Committee of delivery of the Mind Over Matter report and the impact of the pandemic on children's mental health, picking up where the previous CYPE Committee left off. One of the original



Mind Over Matter recommendations was around training all professionals working with children and young people basic skills around mental health: it would be helpful to understand progress on this and the report's other recommendations.

- Long term strategy and delivery for children's mental health: the Together 4 Children and Young People programme (T4CYP) has a relatively short term funding model as we understand it. It may be helpful to take evidence from stakeholders to understand the Welsh Government's long term thinking and planning around children and young people's mental health and the services that support them.
- Adverse Childhood Experiences (ACEs): we would hope to see ongoing scrutiny of work to develop 'trauma informed' programmes and to ensure that key stakeholders are working in a joined-up way, particularly given the changes and challenges to youth services over the period of the pandemic.

Allergy services

Allergic illnesses are common affecting different aged children in a variety of ways. Issues with the universal provision of excellent management of infants and children with eczema exist. For older children with allergic hayfever, access to disease modifying immunotherapy is restricted and not equitable throughout Wales. Access to a new oral desensitisation treatment currently being licensed for peanut allergy will be an issue we face over the coming Senedd term.

We propose a one-day inquiry looking at allergy services throughout Wales to highlight inequalities and make recommendations for providing excellent services throughout Wales.

Medication safety

Children are at particular risk of medication errors due to their wide ranges of weights, calculations use for medications and the variety of unlicensed preparations that exist. The lack of universal electronic physician support prescribing systems means that children remain at a higher risk of medication errors. Research by Dr Tuthill and colleagues found that in Wales, over a two-year period, a total of 50 tenfold medication errors were reported in children; 20 of these errors reached the child and there were 30 near miss cases. This yields a minimum annual incidence of 1 tenfold error per 3,797 Paediatric admissions, or 4.6/100 000 children resident in Wales.

We ask the Committee to consider how it could approach scrutiny of medication safety and the lack of an electronic prescribing physician support system



throughout Wales, to reduce the chance of these medication errors continuing at this rate.

Paediatric research in Wales

In the last Senedd term, the [previous CYPE Committee took evidence](#) from the child health research unit at Noah's Ark Children's Hospital for Wales, who highlighted the difficulties in attracting funding for paediatric research in Wales compared with adult research in Wales, or with paediatric research elsewhere in the UK. The consistent message from the paediatric research community in Wales is that the structural issues persist and disadvantage paediatric research in Wales, meaning that Welsh children and young people miss out on opportunities to be part of medical research.

The CYPE Committee could undertake a one-day inquiry into paediatric research in Wales, as a piece of follow-up to the issues identified by its predecessor committee; and consider at that point whether further recommendations should be made to the Welsh Government and/or whether these issues should be debated in the Senedd.

Theme 4: Children and young people

As in previous Senedd terms, it is vital that the CYPE Committee works closely with other Committees, particularly the Health and Social Care; Equality and Social Justice; and Climate Change, Environment and Infrastructure Committees to take a joined-up approach to scrutiny of issues that have a significant impact on children's health and to ensure that work is complementary but does not duplicate.

These include active travel, road and street safety (including implementation of the 20mph policy), recovery of children's services, oral and dental health (including consideration of water fluoridation) and taking strategic action on unequal outcomes in children's health caused by broader issues of poverty and inequality.

We will also respond to the Health and Social Care Committee's consultation on its priorities and some of the issues we have highlighted here will also inform our response to the Health and Social Care Committee.

We are pleased to hear that the Committee means to undertake a programme of engagement directly with Children and Young People. We would encourage the Committee to engage with children and young people in, or with recent experience of, health settings including hospitals. Children and young people with long term health conditions may miss school, have contact with other services or feel they are seen exclusively through a 'health' prism that doesn't adequately capture their wider concerns and aspirations. We would therefore ask the Committee to consider specific engagement with these groups.



Considering feedback in engagement work through a number of our projects including [State of Child Health](#), [Paediatrics 2040](#) and [Covid Bookclub](#), priorities consistently highlighted to us by young people in Wales include:

- Mental health
- Youth friendly services (including anywhere young people are accessing health information)
- Access to services
- Children's rights (including issues around choice, consent and confidentiality)

Their priorities and the data sets published and listed above identify recommendations and wishes from children and young people that extend wider than individual health discussions and look at the system as a whole. Children and young people have continuously asked that services are connected and place them at the centre as a person, for example with good information sharing between health and education linked to condition management.



USE OF YOUR INFORMATION

In order to enable us to handle your information in accordance with our [privacy notice](#), please complete the questions below. We will be unable to process your response if these questions are not completed.

6. We have stated our intention to engage meaningfully with children and young people, in tailored and appropriate ways, in the autumn. However, if you are responding using this proforma and are under 13 years old, we will only be able to accept your response if your parent or guardian has confirmed that you can participate. They can do this by sending us an email to SeneddChildren@senedd.wales.

Are you under 13 years old?

I am under 13 years old	<input type="checkbox"/>
I am 13 or over	<input checked="" type="checkbox"/>

7. Please choose one of the following options to confirm whether you would prefer that your name is not published alongside your evidence.

We will not publish the names of people under the age of 18.

I am aged 18 or over and I am content for you to publish my name alongside my evidence	<input checked="" type="checkbox"/>
I am aged 18 or over and I would prefer that you did not publish my name alongside my evidence.	<input type="checkbox"/>
I am under the age of 18	<input type="checkbox"/>

8. Please choose one of the following options to confirm whether you have agreement from any third parties referred to in your evidence that you can share information that may be used to identify them and that they understand that it may be published.

I confirm that any third party I have referred to in my evidence has agreed that I can share information that may be used to identify them, and that they understand that it may be published.	<input type="checkbox"/>
I do not have the agreement of one or more of the third parties I have referred to in my evidence.	<input type="checkbox"/>
I have not referred to any third parties in my evidence.	<input checked="" type="checkbox"/>

