



House of Commons
Education and Health
Committees

**Children and young
people's mental
health—the role of
education: Government
Response to the First
Joint Report of the
Education and Health
Committees of Session
2016–17**

**First Joint Special Report of Session
2017–19**

*Ordered by the House of Commons
to be printed 10 October 2017*

HC 451
Published on 24 October 2017
by authority of the House of Commons

The Education Committee

The Education Committee is appointed by the House of Commons to examine the expenditure, administration, and policy of the Department for Education and its associated public bodies.

Current membership

[Rt Hon Robert Halfon MP](#) (*Conservative, Harlow*) (Chair)

[Lucy Allan MP](#) (*Conservative, Telford*)

[Michelle Donelan MP](#) (*Conservative, Chippenham*)

[Marion Fellows MP](#) (*Scottish National Party, Motherwell and Wishaw*)

[James Frith MP](#) (*Labour, Bury North*)

[Emma Hardy MP](#) (*Labour, Kingston upon Hull West and Hessle*)

[Trudy Harrison MP](#) (*Conservative, Copeland*)

[Ian Mearns MP](#) (*Labour, Gateshead*)

[Lucy Powell MP](#) (*Labour (Co-op), Manchester Central*)

[Thelma Walker MP](#) (*Labour, Colne Valley*)

[Mr William Wragg MP](#) (*Conservative, Hazel Grove*)

Health Committee

The Health Committee is appointed by the House of Commons to examine the expenditure, administration, and policy of the Department of Health.

Current membership

[Dr Sarah Wollaston MP](#) (*Conservative, Totnes*) (Chair)

[Luciana Berger MP](#) (*Labour (Co-op), Liverpool, Wavertree*)

[Mr Ben Bradshaw MP](#) (*Labour, Exeter*)

[Dr Lisa Cameron MP](#) (*Scottish National Party, East Kilbride, Strathaven and Lesmahagow*)

[Rosie Cooper MP](#) (*Labour, West Lancashire*)

[Dr Caroline Johnson MP](#) (*Conservative, Sleaford and North Hykeham*)

[Diana Johnson MP](#) (*Labour, Kingston upon Hull North*)

[Johnny Mercer MP](#) (*Conservative, Plymouth, Moor View*)

[Andrew Selous MP](#) (*Conservative, South West Bedfordshire*)

[Maggie Throup MP](#) (*Conservative, Erewash*)

[Dr Paul Williams MP](#) (*Labour, Stockton South*)

The Education Committee

Powers

The Committee is one of the departmental select committees, the powers of which are set out in House of Commons Standing Orders, principally in SO No 152. These are available on the Internet via www.parliament.uk.

Publications

Committee reports are published on the Committee's website at www.parliament.uk/education-committee and in print by Order of the House.

Evidence relating to this report is published on the [inquiry publications page](#) of the Committee's website.

Committee staff

The current staff of the Committee are Richard Ward (Clerk), Katya Cassidy (Second Clerk), Anna Connell-Smith (Committee Specialist), Chloë Cockett (Committee Specialist), Madeline Williams (Inquiry Manager), Jonathan Arkless (Senior Committee Assistant), Simon Armitage (Committee Assistant), Hajera Begum (Committee Apprentice), Gary Calder (Senior Media Officer), and Oliver Florence (Media Officer).

Contacts

All correspondence should be addressed to the Clerk of the Education Committee, House of Commons, London, SW1A 0AA. The telephone number for general enquiries is 020 7219 1376; the Committee's email address is educom@parliament.uk.

Health Committee

Powers

The Committee is one of the departmental select committees, the powers of which are set out in House of Commons Standing Orders, principally in SO No 152. These are available on the internet via www.parliament.uk.

Publication

Committee reports are published on the Committee's website at www.parliament.uk/healthcom and in print by Order of the House.

Evidence relating to this report is published on the [inquiry publications page](#) of the Committee's website.

Committee staff

The current staff of the Committee are Huw Yardley (Clerk), Seth Roberts (Second Clerk), Laura Daniels (Senior Committee Specialist), Lewis Pickett (Committee Specialist), Dr Juliette Mullin (Clinical Fellow), Cecilia Santi O Desanti, (Senior Committee Assistant), Lucy Hale (Committee Assistant), and Alex Paterson (Media Officer).

Contacts

All correspondence should be addressed to the Clerk of the Health Committee, House of Commons, London SW1A 0AA. The telephone number for general enquiries is 020 7219 6182; the Committee's email address is healthcom@parliament.uk.

First Special Report

The Education and Health Committees' report to the House on [Children and young people's mental health—the role of education](#) (HC 849) was published on 2 May 2017 as their first Joint Report of Session 2016–17. The Government's response was received on 11 September 2017, after the formation of the Government following the election. The Government's response and a separate response from HM Chief Inspector are appended to this report.

In both the Government's response and the response from HM Chief Inspector, the Committee's recommendations appear in bold text while the responses are in plain text.

Appendix 1: Response from the Government

The Education and Health Select Committees published a report of their inquiry on the role of education in children and young people's mental health on 2 May 2017. This document sets out the Government's response to the report.

Introduction

Children and young people's mental health remains a key priority for the Government. On 9th January, speaking at the Charity Commission annual meeting, the Prime Minister committed to tackling the burning injustice of mental health problems and on 21st June the Government committed in the Queen's Speech to ensure that mental health is prioritised in the National Health Service in England. We want to transform the way we deal with mental health problems right across society, and at every stage of life-making mental health an everyday issue to be addressed in every one of our institutions.

The speech acknowledged that education can play an important role in promoting good mental wellbeing and in helping to respond quickly to emerging mental health problems faced by children and young people. It set out plans to introduce new support for schools which we are taking forward, including funding Mental Health First Aid training for a teacher in every secondary school, trials of what works to support the mental wellbeing of pupils and a pilot of how to set up peer support schemes.

However, as the Committees acknowledged, teachers are not mental health professionals and need support from specialist services. This is why we have been trialling approaches to help schools and colleges work closer together with local NHS services to provide dedicated children and young people's mental health services. The Government has also commissioned the Care Quality Commission to carry out a major thematic review of children and adolescent mental health services across the country, with input from Ofsted. This is now underway.

We remain committed to the publication of a children and young people's mental health green paper by the end of this year. The green paper will focus on how to go further in improving prevention and access to specialist support. In this context, the Government welcomes the Committees' focus on the role of education in mental health. We acknowledge

that in line with the Committees first recommendation, successor Committees may wish to return to the issue during this Parliament. Evidence collected by the committees and the recommendations made in the report will be very helpful in informing the proposals to be made in the green paper.

Detailed response to recommendations

Well-being in schools and colleges

Recommendation 3

We welcome the Government’s commitment to making PSHE a compulsory part of the curriculum and recommend that the next Government upholds that commitment. We recommend that our successor Committees explore in more detail how this is best implemented. (Paragraph 9)

Recommendation 4

The promotion of well-being cannot be confined to the provision of PSHE classes. To achieve the whole school approach, senior leadership must embed well-being throughout their provision and culture. Doing so will have implications for staffing and training and the balance of provision and delivery of subjects across the curriculum to allow more time to focus on well-being and building resilience. We believe that this would be in the best interests of children and young people. (Paragraph 13)

Recommendation 6

Achieving a balance between promoting academic attainment and well-being should not be regarded as a zero-sum activity. Greater well-being can equip pupils to achieve academically. If the pressure to promote academic excellence is detrimentally affecting pupils, it becomes self-defeating. Government and schools must be conscious of the stress and anxiety that they are placing on pupils and ensure that sufficient time is allowed for activities which develop life-long skills for well-being. (Paragraph 19)

Government Response

1. All young people should have access to a curriculum that ensures they are prepared for adult life in modern Britain. Personal, Social, Health and Economic education (PSHE), Relationships Education, and Relationships and Sex Education (RSE) help to provide pupils with the key knowledge and skills to ensure that they can keep themselves safe, develop healthy and positive relationships, maintain good mental health, build resilience and successfully navigate the changing world in which they are growing up.
2. The Children and Social Work Act 2017 gives the Secretary of State the power to make PSHE (or elements therein) mandatory in the future, subject to careful consideration. It has also given a duty to the Secretary of State to make Relationships Education (in primary) and Relationships and Sex Education (in secondary) mandatory in all schools.

3. The Department for Education will be conducting a thorough and wide-ranging engagement process on the scope and content of these subjects – considering school practice and quality of delivery - to determine the content of the regulations and statutory guidance. The engagement process will seek evidence from schools and teachers, parents and pupils; experts in safeguarding and child wellbeing; subject experts; voluntary organisations and other interested parties; and other government departments and public sector bodies. This will consider what should be taught at a high-level whilst maintaining flexibility for schools in how best to deliver these subjects as part of a broad and balanced curriculum. We will set out more details in due course about the engagement process and the work to consider age appropriate subject content.

4. While many of the issues that are relevant to mental wellbeing will be part of Relationships Education and RSE, it is likely that there are a number of other issues that might fit with PSHE, such as understanding the risks of drugs and alcohol and safeguarding physical and mental health. We will ensure our work results in a clear understanding of the full set of knowledge and life skills that Relationships Education, RSE and PSHE should provide for young people to support them to be safe, healthy, happy and successful and will give careful consideration to how teaching about mental wellbeing might be reflected in the content of these subjects. We would appreciate the future committees' further input on this issue.

Recommendation 5

We welcome the inclusion of the personal development and well-being criteria in the Ofsted inspection framework. However, it seems that insufficient prominence is being given to it by inspectors. More must be done to ensure that mental health and well-being are given appropriate prominence in inspections and in contributing to the overall grade given to the school or college. The recently appointed Chief Inspector should, as a matter of priority, consider ways in which the inspection regime gives sufficient prominence to well-being. Should our successor Committees return to this subject, we recommend that they hear from her about the steps she is taking in this regard. (Paragraph 16)

5. HM Chief Inspector, Amanda Spielman, will be responding separately to recommendation 5. [See appendix 2.]

Mental health support in education providers

Recommendation 7

Teachers are not mental health professionals, but they are in many cases well placed to identify mental ill health and refer students to further assessment and support. Training school and college staff to recognise the warning signs of mental health ill health in their students is crucial. We encourage the Government to build on the inclusion of mental health training in initial teacher training and ensure current teachers also receive training as part of an entitlement to continuing professional development. (Paragraph 25)

Government Response

6. We agree that it is important for teachers to understand mental health issues in young people and to be able to identify where pupils might have an underlying mental health problem. A new initial teacher training framework was published in July 2016 and includes specific detail on mental health relating to standard 5 of the Teachers' Standards (Adapt teaching to respond to the strengths and needs of all pupils). The framework states that: "providers should emphasise the importance of emotional development such as attachment issues and mental health on pupils' performance, supporting trainees to recognise typical child and adolescent development, and to respond to atypical development". With the framework implemented fully then mental health training should feature prominently in initial teacher training (ITT). Courses are still being redesigned to reflect the new framework, but we know that there are examples of specific mental health training being offered to trainees such as the Carnegie Centre of Excellence for Mental Health in Schools, established by Leeds Beckett University. In developing our green paper we will look at what might be done to build on those changes and the commitment in that every secondary school in the country will be offered mental health first aid training.

Co-ordination between health and education services

Recommendation 8

A structured approach to referrals from education providers to CAMHS must be developed across the country. We have seen cases of strong partnerships between mental health services and education providers, but such links do not exist in many local areas. (Paragraph 32)

Recommendation 9

We are encouraged by the results of the CAMHS link pilot and are pleased that the pilot has been extended. We recommend that the Government should follow the advice of the evaluation and commit resource to establish partnerships with mental health services across all schools and colleges. The variation in access for children and young people to timely assessment and support for mental illness is unacceptable. (Paragraph 33)

Government Response

7. There is a significant work programme underway to support improved access and support which aims to address variation in timely assessment and evidence based interventions for mental health problems. By 2020 at least 70,000 more children and young people per annum will be able to access effective care. The work programme includes:

- a) Introduction of the first ever access and waiting standards for mental health services – bringing them in line with other services.
- b) NHS England commissioning NICE and the National Collaborating Centre for Mental Health to develop a joint agency evidence based pathway for children and young people from signposting to inpatient care.

- c) NHS England making a further £25m available on top of the £149m issued in 2016/17 to Clinical Commissioning Groups to support children and young people's service transformation and delivery, with a focus on reducing current waiting times for mental health services.
- d) The 67 new or extended local Community Eating Disorder Services are working with schools to ensure that teachers are fully briefed on how eating disorders may present early and how to refer for quick access to advice and support.
- e) Public Health England has produced a Mental and Wellbeing Joint Strategic Needs Assessment toolkit (a data profile and a knowledge guide) that includes meeting the needs of children and young people taking into account local assets, risks and protective factors .
- f) The children and young people's mental health green paper will include further steps to improve access to appropriate services.

8. We agree that partnership between schools and children and young people's mental health services is vital to provide the best possible prevention and support. As announced by the Prime Minister in January, the Government plans to extend our joint training pilot to improve collaborative working across schools and mental health services to test the sustainability of models of joint working across a larger number of schools.

9. As part of preparing the green paper, the pilot will fit with other proposals on how to improve the timeliness and accessibility of specialist support.

Cuts to school and college based services

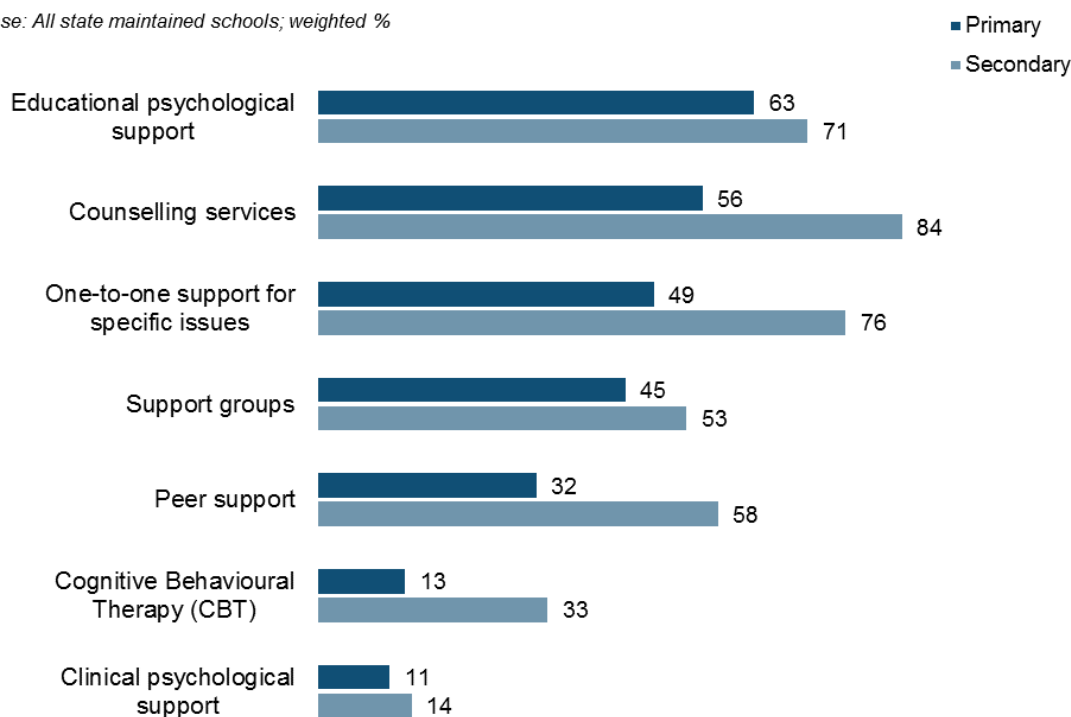
Recommendation 10

We heard evidence of the adverse impact of funding pressures on mental health provision in schools and colleges, including the ability to bring in external support. We know that over half of all mental ill health starts before the age of fifteen and it is therefore a false economy to cut services for children and young people. We strongly urge the next Government to review the effect of budget reductions on the in-school provision of services to support children and young people's mental health and well-being. (Paragraph 39)

Government Response

10. We have recently published the results of a nationally representative survey of mental health provision in schools and colleges. It does not show changes over time, but information collected last year indicates that the following support was offered by maintained schools

Base: All state maintained schools; weighted %



11. Other activity included

- 73% reported providing specific skills sessions to promote positive mental health and wellbeing.
- 53% offered taught sessions on issues such as body image or self-harm
- 90% of schools and colleges offered at least some staff training about how to support pupils' mental health and wellbeing
- 47% schools and colleges offered training on mental health and wellbeing to all staff.
- 59% of schools and colleges offer mental health interventions for pupils that include parents/caregivers
- 57% offer face-to-face sessions about mental health for parents/caregivers
- 46% offer one-to-one support for parents and caregivers

12. We recognise that this support and activity has been delivered at a time of increasing cost pressures in schools, which is why the Government has recently announced an additional £1.3 billion for schools and high needs across 2018–19 and 2019–20, in addition to the schools budget set at Spending Review 2015 which protected the schools budget in real terms. As a result, core funding for schools and high needs will rise from almost £41 billion in 2017–18 to £42.4 billion in 2018–19 and £43.5 billion in 2019–20.

13. We have also confirmed that we will introduce national funding formulae for schools and high needs in April 2018, because the way funding is distributed to schools in England is not fair: across the country, schools teaching children with the same needs get markedly different amounts of money for no good reason and the data that we use to allocate funding to local authorities is over a decade out of date. We have consulted on the national funding formulae and received over 26,000 responses.

14. The additional investment will allow us to:

- Increase the basic amount that every pupil will attract in 2018–19 and 2019–20
- For the next two years, provide for up to 3% gains per pupil for underfunded schools and local authorities, and a 0.5% a year cash increase for every school and local authority
- Continue to protect funding for pupils with additional needs, as we proposed in December
- Increase the percentage of funding allocated to pupil led factors and provide at least £4,800 per pupil for every secondary school

15. Local authorities provide additional funding for schools from their high needs block when the cost of additional support for a pupil exceeds £6,000, and they can give additional funding for schools that have a disproportionate number of pupils with additional needs. We have also confirmed that, although we will ring-fence the vast majority of school funding, local authorities will have some flexibility to move limited amounts of funding to other areas where this better matches local need.

16. The additional funding and a national funding formula will help schools provide more support for those with mental illness. The details of the formulae will be set out shortly when we respond in full to the consultations.

Social Media

Recommendation 11

We recommend that schools should include education on social media as part of PSHE, including educating children on how to assess and manage the risks of social media and providing them with the skills and ability to make wiser and more informed choices about their use of social media. (Paragraph 47)

Recommendation 12

We recommend that the Government should encourage schools to share details of PSHE and other specialist expertise and knowledge, including relevant online support, with parents to increase awareness of what their children will be taught at school about social media. This should include guidance on the effects of sleep deprivation on children and young people’s well-being and mental health. Parents have a key role to play in limiting screen time, reducing sleep deprivation and preventing exposure to harmful online activity. (Paragraph 50)

Government Response

17. It is important that all children are taught about the risks of social media and the potential impact on their mental wellbeing. As a part of the work set out in the response to recommendations 3, 4 and 6, the Government will consider how RSE and PSHE can add to what children and young people are already being taught about internet safety as a part of the curriculum. We will also consider as part of that work how schools can engage with parents on the content of the curriculum.

18. The UK Council for Child Internet Safety (UKCCIS) has already provided some support for parents in this area:

- Created a guide for providers of social media and interactive services with examples of “safety by design” from leading technology companies, and advice from NGOs and other online child safety experts;
- Created a guide of practical tips for parents and carers whose children are using social media about the use of safety and privacy features on apps and platforms, as well as conversation prompts to help families begin talking about online safety; and
- Supported the roll-out of free, family-friendly ISP level filters and the deployment of Friendly Wi-Fi filtering in public spaces.

Recommendation 13

We urge the Government to continue the work that is being done by the United Kingdom Council for Child Internet Safety and to take steps to ensure that social media organisations and internet providers prioritise child internet safety and dealing with cyber-bullying. These organisations and providers must not be allowed to duck their own responsibility for preventing harm to children and young people. (Paragraph 52)

19. The Government takes the issue of child safety online very seriously and engages intensively with industry through UKCCIS. We expect social media companies to respond quickly to incidents of abusive behaviour on their networks. This includes having easy to use reporting tools, robust processes in place to respond promptly when abuse is reported, and suspending or terminating the accounts of those who do not comply with acceptable use policies. Both social media sites and users need to take responsibility. The law does not differentiate between criminal offences committed on social media or anywhere else—it is the action that is illegal. What is illegal offline, is illegal online.

20. We support the good work done by the UK Council for Child Internet Safety. The DCMS internet safety strategy will address the need for social media organisations and internet providers to take more action to prevent children from being harmed online, aligning with the green paper on children and young people’s mental health, which will address the interface between internet use and mental health issues in children and young people.

21. The recently enacted Digital Economy Act will help to ensure that online abuse is more effectively tackled by requiring a code of practice to be established. We will consult with social media and other interested parties on what the code will look like.

Appendix 2: Response from Ofsted

The Health and Education Select Committee published the report of its joint inquiry into [children and young people's mental health](#) on 2 May 2017. This document sets out Ofsted's response to a relevant recommendation in the Committee's report.

Response to recommendation 5

We welcome the inclusion of the personal development and well-being criteria in the Ofsted inspection framework. However, it seems that insufficient prominence is being given to it by inspectors. More must be done to ensure that mental health and well-being are given appropriate prominence in inspections and in contributing to the overall grade given to the school or college. The recently appointed Chief Inspector should, as a matter of priority, consider ways in which the inspection regime gives sufficient prominence to well-being. Should our successor Committees return to this subject, we recommend that they hear from her about the steps she is taking in this regard. (Paragraph 16)

We are pleased to see that the Committees have recognised the inclusion of personal development in Ofsted's school inspections. The Education Act 2011 amended the statutory reporting areas for school inspection to cover four core areas of schools' business, one of which is pupils' personal development, behaviour and welfare. Inspectors must evaluate and report on this in all section 5 inspections and a graded judgement is included in the inspection report. In doing so, inspectors grade personal development and welfare separately from behaviour, before judging them together. The focus here is on determining the impact of the school's actions on outcomes for pupils, including their wider wellbeing.

As set out in the school inspection handbook, the overall effectiveness of a school is likely to be inadequate if personal development behaviour and welfare, or any of the other core areas, is judged inadequate.

Pupils' mental health and well-being are also relevant to consideration of the suitability of a school's curriculum, within the assessment of leadership and management. Inspectors will consider whether the curriculum also contributes well to pupils' behaviour and welfare, including their physical, mental and personal well-being, safety and spiritual, moral, social and cultural development.

We are working with CQC colleagues who are leading on the thematic review of children and adolescent mental health services to identify what is working well and what is not. This will draw on evidence from inspections, including the first year of local area inspections of services for children and young people who have special educational needs and/or disabilities. We will use the findings from this review to inform future thinking about all relevant inspection remits.

Whilst we believe that mental health and well-being are given due prominence in our school inspection handbook, we will keep under review the position in light of emerging policy developments, in discussion with relevant government departments.