

# Publication Report



## **Child & Adolescent Mental Health Services (CAMHS) Benchmarking Balanced Scorecard**

**Quarter ending 31<sup>st</sup> December 2013**

**Publication date – 25<sup>th</sup> March 2014**

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## Introduction

This publication contains information relating to Child and Adolescent Mental Health Services (CAMHS) in NHS Scotland.

The main objective of the CAMHS Benchmarking Balanced Scorecard is to support efforts aimed at closing the gap between stakeholder aspirations and the outputs of specialist CAMH providers across Scotland. It will act as a lever, as a barometer of success and as a mechanism for ensuring enhanced quality, accountability and transparency.

The balanced scorecard is structured to provide a balanced view of the service incorporating the aims of the Quality Strategy domains within the following performance themes: Client/Patient Focus, Delivering Best Practice, Internal Processes and Best Use of Resources. This release of the scorecard contains information on a range of indicators across these themes. Additional indicators will be included in future releases of the scorecard.

The scorecard consists of the CAMHS Benchmarking toolkit containing detailed information on all the indicators; and its companion tool, the CAMHS dashboard, which presents the information in a visual and interactive manner to aid interpretation of the analysis. Both components cover how long children and young people waited for mental health services, workforce, NHS Board submissions and hospital activity in NHS Scotland.

The NHS in Scotland provides mental health services for children and young people with a wide range of mental health conditions including Attention Deficit Hyperactivity Disorder (ADHD), anxiety, behaviour problems, depression and early onset psychosis. These services, which are mainly outpatient and community based, are provided by a range of staff including psychiatrists, mental health nurses, clinical psychologists, child psychotherapists, occupational therapists and other allied health professionals.

A target has been set by the Scottish Government for the NHS in Scotland to deliver a maximum 26 week waiting time from a patient's referral to treatment for specialist CAMH services from March 2013, reducing to 18 weeks from December 2014.

With regards to data quality, the following should be noted:

- Ongoing efforts to improve the quality of SMR04 data may result in future differences to previously published information. Due to the implementation of a new patient management system, information on treatments delivered at NHS Ayrshire & Arran, as taken from SMR04 for the years to 31 March 2012 and 31 March 2013 are not available and are replaced with data for the year to 31 March 2011 instead. Caution should be taken when comparing Scotland level data for the year to 31 March 2012 and 31 March 2013 with previous years.
- Waiting times information for CAMH services is still in development. NHS Boards are working with ISD and the Scottish Government to improve the consistency and completeness of the information.

## Key points

- During the quarter ending 31 December 2013, around 90% of people were seen within 26 weeks
- Clinical CAMHS staff working in the community equated to 734.2 whole time equivalents (WTE) representing 70.7 WTE community clinical workers per 100,000 people under 18 in Scotland as at 31 December 2013. [See NHS Scotland Child & Adolescent Mental Health Services: Workforce Information as at 31 December 2013, table 11.](#)
- Sickness absence of dedicated CAMHS clinicians in Scotland ranged from 0 - 5.5% for NHS boards across Scotland for the quarter ending 31 December 2013
- In Scotland, child & adolescent unit psychiatric hospital admissions in 2012/13 were 21.2 per 100,000 people under 18, an increase from 19.2 in 2011/12. CAMHS admissions to adult psychiatric wards in Scotland increased from 16.5 per 100,000 people under 18 in 2011/12 to 21.1 in 2012/13

## Results and Commentary

Waiting times for most NHS services are worked out using a calculation that takes into account any periods a person is unavailable and missed or cancelled appointments. These are referred to as adjustments. Some NHS Boards are not able to make all the appropriate adjustments to waiting times for CAMH services so the toolkit includes information on what adjustments each NHS Board has made.

Waiting time adjustments allow fair reporting of waiting times which have been affected by factors outside the NHS Board's control. However the timing of appointments is always based on clinical need. For CAMH services, resetting the waiting time to zero is done for reporting purposes only and does not impact on the timing of any further appointments.

The main adjustments that are made to CAMH services waiting times are:

- If a person is unavailable (for example on holiday), the period for which they are unavailable is subtracted from their total waiting time
- If a person does not attend an appointment and has to be given another, their waiting time is reset to zero
- If a person rearranges an appointment their waiting time is reset to zero on the day they contact the service to rearrange their appointment
- If a person is offered several appointments and declines them all, their waiting time is reset to zero. NHS Boards report that this happens very rarely as most appointments are agreed by telephone.

This report also shows unadjusted waiting times. These are the actual times people have waited. Unadjusted waiting times are available for all NHS Boards except NHS Dumfries & Galloway.

The [Summary Report on the Application of NHSScotland Waiting Times Guidance](#) provides further explanations on the main adjustments that are made to waiting times for CAMH services.

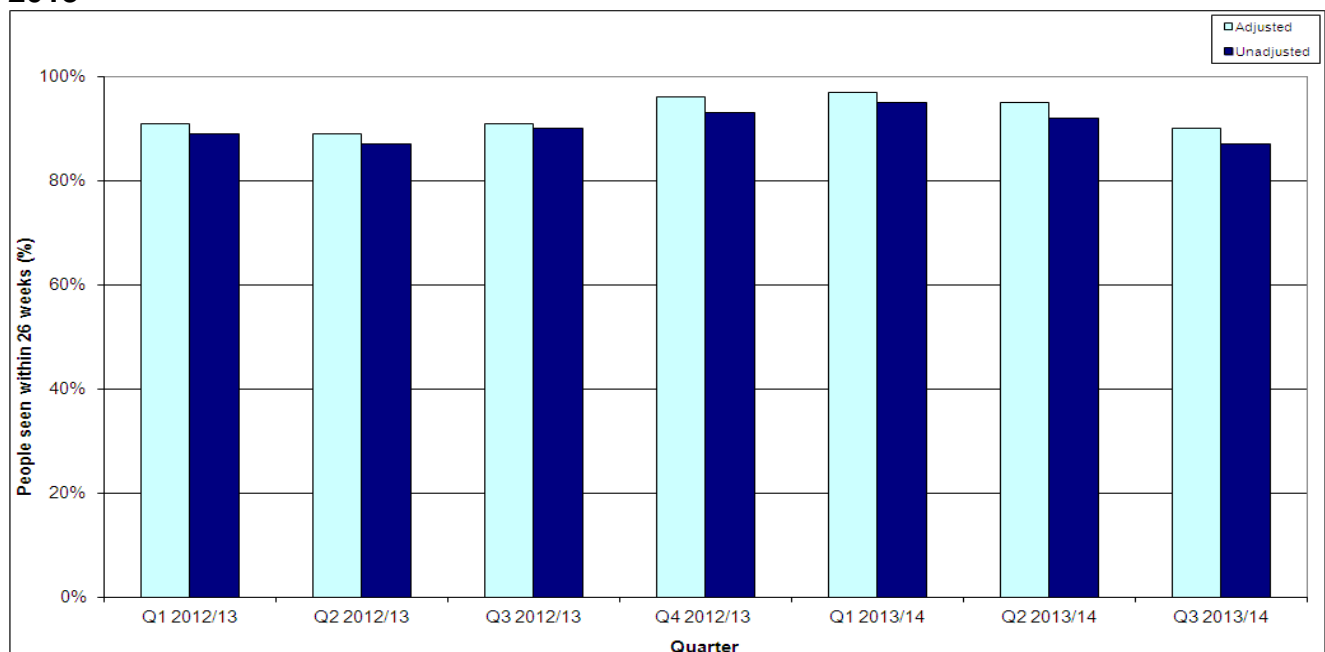
## Client/Patient Focus

- NHS Scotland CAMHS vary in the age of population served. In some areas services are provided up to 16 only; while others offer services up to 18 years. This has significant implications for workforce requirements. See table 1 for details.
- 3,300 children and young people started their treatment at CAMH services in Scotland during the quarter ending 31 December 2013.
- Using adjusted waits where available, 90% of people seen by a CAMH service started their treatment within 26 weeks of being referred for the quarter ending 31 December 2013. See figure 1 for details.
- Around 6,400 people were waiting to start treatment at CAMH services in Scotland for the quarter ending 31 December 2013.
- Using adjusted waits where available, 708 people had been waiting for more than 26 weeks.

**Table 1: NHS Scotland CAMHS Service Age Provision as at 31st December 2013 by NHS Board**

NHS Board	Service Age Provision as at 31st December 2013
NHS Ayrshire & Arran	Up to 18th birthday if still in full time education.
NHS Borders	Up to 18th birthday.
NHS Dumfries & Galloway	Up to 18th birthday, but occasionally beyond. Child Clinical Psychology Service; up to 18th birthday provided in full-time secondary education (not tertiary i.e. not college), up to 16 if not in school.
NHS Fife	Up to 18th birthday.
NHS Forth Valley	Core CAMHS is up to 18th birthday, Learning Disabilities CAMHS is up to 16th birthday.
NHS Grampian	Up to 18 <sup>th</sup> birthday
NHS Greater Glasgow & Clyde	Up to 18th birthday across all services.
NHS Highland	Up to 18th birthday if in full-time secondary education otherwise up to age 16 years. Learning Disabilities CAMHS up to 19th birthday provided still in full-time education
NHS Lanarkshire	Tier 3 Child & Family Clinic Teams: up to 16th birthday, up to 18th birthday if referred before 16th birthday or at a point before 18th birthday when it is suitable to discharge them (currently under review). CAMHS Learning Disabilities, Primary Mental Health & CAMHS for Accommodated Young People (CAYP) Teams: up to 18th birthday.
NHS Lothian	Up to 18th birthday across all areas.
NHS Orkney	Up to 18th birthday.
NHS Shetland	Up to 18th year if in full time education, and up to 16th year if not in full time education.
NHS Tayside	Up to 18th birthday provided in full-time secondary education (not tertiary i.e. not college). Learning Disability and Tier 4 services are up to 18 years
NHS Western Isles	Up to the 18th birthday.

**Figure 1: Percentage of people who started their treatment within 26 weeks of waiting, adjusted<sup>1,2,5,6</sup> and unadjusted<sup>1,2,3,4,5,6</sup> waits, 1 April 2012 – 31 December 2013**



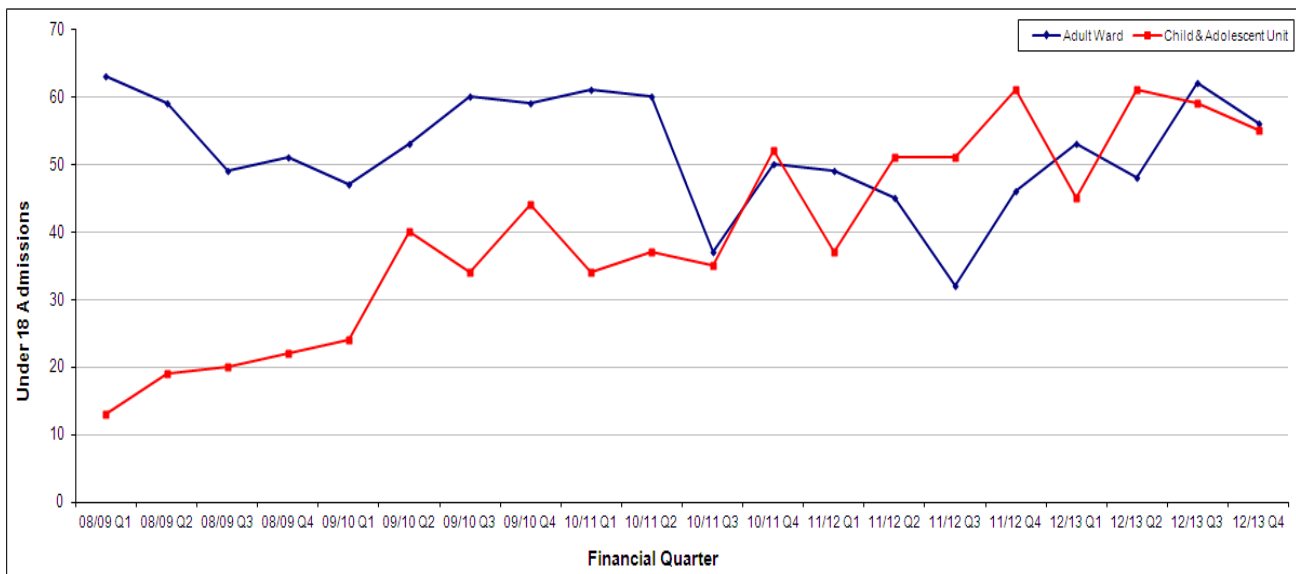
Notes

1. Excludes NHS Fife data 1 April 2012 to 30 September 2012.
2. Excludes NHS Highland data 1 April 2012 to 31 July 2012 and NHS Grampian data is estimated to be 80% complete for 1 October 2012 to 30 September 2013.
3. Excludes NHS Ayrshire & Arran and NHS Tayside data for 1 April 2012 to 30 June 2012.
4. Excludes NHS Dumfries & Galloway data for 1 April 2012 to 30 September 2013.
5. NHS Tayside June 2013 data is referral to treatment. Before June 2013 data from referral to first completed appointment was used as an approximation for referral to treatment.
6. NHS Ayrshire & Arran resubmitted July – September 2013 data.

**Delivering Best Practice**

- In Scotland, child & adolescent unit admissions to psychiatric hospitals in 2012/13 were 21.2 per 100,000 people under 18. This is an increase from 19.2 per 100,000 people under 18 in 2011/12. Admissions to adult wards in Scotland increased from 16.5 per 100,000 people under 18 in 2011/12 to 21.1 per 100,000 people under 18 in 2012/13.
- Admissions to child & adolescent units has increased steadily since quarter 1 2008/09, see figure 2 below.

**Figure 2: Mental Health Admissions to Adult wards and Child & Adolescent units for under 18's in Scotland by financial quarter**



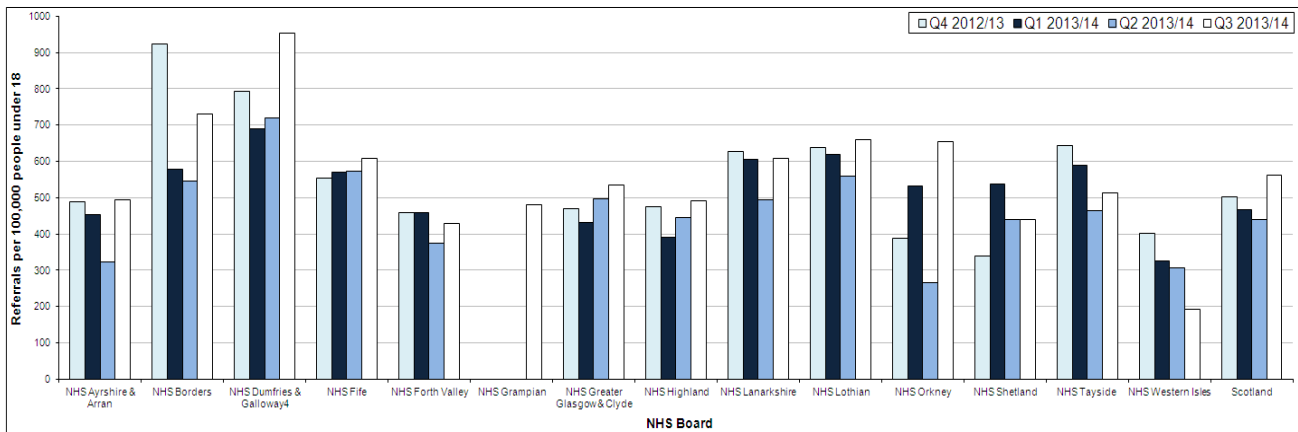
Notes

Due to incomplete data for Ayrshire & Arran 2011/12 & 2012/13, their 2010/11 data has been used.  
 Child & Adolescent unit=admissions to specialty G2 (Child & Adolescent psychiatry) at RHSC (Yorkhill), Skye House, Royal Edinburgh Hospital & Dudhope House (Young Persons Unit).  
 Adult Ward=All other admissions.

**Internal Processes**

- During the quarter ending 31 December 2013, 7,204 children and young people were referred to CAMH services, up from 6,062 for the previous quarter. [See Child and Adolescent Mental Health Services \(CAMHS\) Waiting Times 31 December 2013.](#)
- The number of referrals excluding those rejected has increased from 4,554 for the quarter ending 30 September 2013 to 5,839 for the quarter ending 31 December 2013, see figure 3.

**Figure 3: Referrals<sup>1</sup> per 100,000 people under 18<sup>2</sup> to CAMH Services by NHS Board 1 January 2013 – 31 December 2013<sup>3,4</sup>**



**Notes**

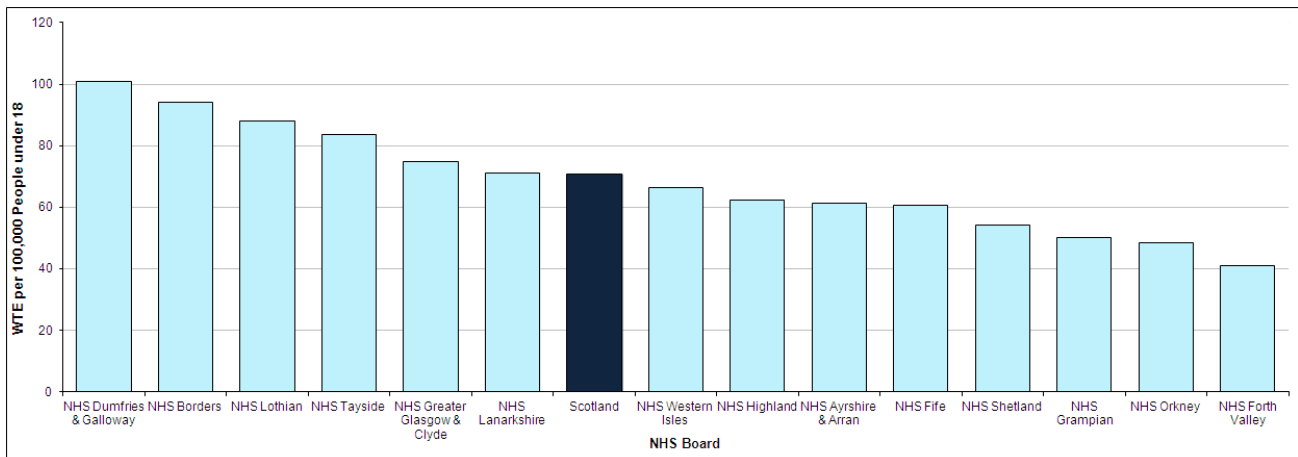
It is not possible to give a direct comparison of referral rates across the NHS Boards as CAMH services vary in the age of population served, see table 1.

1. Excludes referrals that were rejected.
2. Population data taken from mid-year population Records of Scotland (NRS) June 2012.
3. No data available for NHS Grampian. This information is developmental and may contain inaccuracies.
4. For the September 2013 publication NHS Dumfries & Galloway included Child Psychology Services in the ISD return with CAMH services. The Psychology Services information is currently not comparable to CAMHS services information (measured differently) therefore this information has been removed whilst the Board develop their system.

**Best Use of Resources**

- Community CAMHS staff employed in Scotland based on Whole Time Equivalent (WTE) equated to 70.7 per 100,000 people under 18 as at 31 December 2013, see figure 4 below.
- The percentage of sickness absence of dedicated NHS CAMHS clinicians ranged from nil to 5.5% across the NHS Boards in Scotland for the quarter ending 31 December 2013.
- As at 31 December 2013, NHS Borders had the highest community CAMHS wages budget, £48,221 per 1,000 people under 18 and NHS Orkney had the lowest, £8,762.

**Figure 4: Clinical Staff employed in Scotland CAMHS as at 31 December 2013, community working only WTE per 100,000 people under 18**





## Glossary

CAMHS	Child and Adolescent Mental Health Services. Services are provided by teams of clinicians including psychiatrists, mental health nurses, clinical psychologists, child psychotherapists, occupational therapists and other allied health professionals.
Children and young people	These are the people served by CAMH services. Some areas provide services for all those under 18, while others offer services to those over 16 only if they are in full time education.
Start of treatment	This is when treatment starts or the person is removed from the waiting list. Not all people who are referred to a CAMH service go on to have treatment. Some people attend an assessment appointment, need no further treatment and so are removed from the waiting list. Some people are offered treatment but decide not to go ahead.
Adjusted waiting time	This is how long a person waited after taking into account any periods they were unavailable and any appointments that they missed or rearranged. The adjustments are described on page 4. If a person has no periods of unavailability and attends on the first date that they accept then no adjustments are made and their adjusted waiting time is the same as their unadjusted waiting time.
Unadjusted waiting time	The total time from the date the referral was received by the CAMH service to the date treatment commenced.
SMR04	Scottish Morbidity Record 04 – records information on all inpatient admissions and discharges from NHS mental health (psychiatric) hospitals in Scotland.
Whole Time Equivalent (WTE)	WTE adjusts headcount figures to take account of part-time staff.

## List of Tables

Table No.	Name	Time period	File & size
<a href="#">Toolkit</a>	CAMHS Benchmarking Toolkit	2012/13	Excel [753kb]
<a href="#">Dashboard</a>	CAMHS Benchmarking Dashboard	2012/13	Flash [2500KB]

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## Further Information

Further information on CAMHS benchmarking can be found on the [National Benchmarking](#) area of the ISD website.

Further information can be found on the [ISD website](#)

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Appendix

## **A1 – Background Information**

For the past five years there has been unprecedented interest in the activities of NHS specialist CAMH Services in Scotland. Much of this interest centres on the requirement of NHS Boards to lead their planning partners in the implementation, by 2015, of The Mental Health of Children and Young People: A Framework for Promotion, Prevention and Care (2005). The policy is bold and ambitious and has already been the inspiration behind a range of new developments however, much remains to be done. To succeed will require unprecedented commitment and effort. The current economic climate has created an additional level of challenge by making it more important than ever that effort is properly channelled, that good practice is widely shared and that the performance improvements of specialist CAMH services are clearly articulated.

A decision was taken in 2008 to create a Balanced Scorecard for specialist CAMHS in Scotland using a strategic performance measurement approach. This approach offers an opportunity for tying together the CAMHS 'benchmarking type' activities which have been running in parallel with its development (for example around waiting times and workforce and the creation of Integrated Care Pathway (ICP) standards but also requires the creation of further key performance indicators (KPIs)).

An initial draft scorecard was produced in 2009 following a successful stakeholder event in August 2008 and input from the University of Strathclyde Department of Management Science.

Now reporting to the Scottish Government National Mental Health Benchmarking Group the next stage of this work began in January 2010 with an input from ISD. Following a successful workshop in July 2010, a CAMHS Balanced Scorecard indicator development group was established in order to work towards this final consultation paper. The work of designing the scorecard indicators has been carried out making explicit reference to The Healthcare Quality Strategy for NHS Scotland (Scottish Government 2010).

The overarching aim of this project has been to produce indicators which will generate the production of management information and benchmarking data which will prove meaningful and useful to a wide range of stakeholders which includes CAMHS clinicians and managers, NHS Boards and the Scottish Government.

**A2 – Publication Metadata (including revisions details)**

<b>Metadata Indicator</b>	<b>Description</b>
Publication title	CAMHS Benchmarking Balanced Scorecard
Description	The CAMHS Health Benchmarking Toolkit is structured to provide a balanced view across the Quality Strategy domains of Client/Patient Focus, Delivering Best Practice, Internal Processes and Best Use of Resources.
Theme	Health and Social Care.
Topic	Child and Adolescent Mental Health Services (CAMHS).
Format	Excel workbook, interactive flash based dashboard.
Data source(s)	Multiple data sources including SMR04, ISD CAMHS waiting times database, CAMHS workforce database, NHS Board submissions and General Register for Scotland (GROS).
Date that data are acquired	Due to the multiple data sources and the variable dates of data availability, the data in this publication was acquired over the period June 2012 to February 2014.
Release date	25th March 2014.
Frequency	Quarterly.
Timeframe of data and timeliness	Waiting times, workforce and NHS Board submissions data covers quarter ending 31 December 2013 and SMR04 data covers the year ending 31 March 2013.
Continuity of data	Waiting times information has been collected nationally since January 2010 with a revised dataset introduced in April 2012. SMR04 data has been available since 1981 and the NHS Board submissions began in April 2012.
Revisions statement	<p>The CAMHS Benchmarking Toolkit is regarded as an evolving document and as such revisions to existing indicators and/or new indicators may be added based on discussions with the relevant stakeholders.</p> <p>Previously published waiting times are revised at each publication to reflect the latest available data submitted to ISD by the NHS Boards.</p>
Revisions relevant to this publication	<p>One health board has supplied revisions to their previously published waiting times data for July to September 2013. This has been footnoted in the relevant publication tables.</p> <p>As part of their data quality process NHS Ayrshire &amp; Arran identified an over recording of patients waiting and patients seen increased due to an administrative error. July to September 2013 data was re-submitted.</p>
Concepts and definitions	Definitions not contained in this report are included in the

	CAMHS Benchmarking Toolkit.
Relevance and key uses of the statistics	These statistics cover a wide range of comparative information across many aspects of the Child and Adolescent Mental Health Service in Scotland. They are intended for both clinical and management use to identify efficiency and productivity opportunities.
Accuracy	Information on the accuracy of some of the national datasets used within this publication is available on the <a href="#">ISD website</a> . Waiting times data are classified as developmental, ISD only receives aggregate data from each board. Derivation of the figures and data accuracy are matters for individual NHS Boards. Workforce data received 100% sign off from CAHMS lead clinicians.
Completeness	For the reporting period, information based on the SMR04 data completeness can be found <a href="#">here</a> . 100% of waiting times data is used for analysis and publication. 100% of workforce data returned.
Comparability	<p>There will be differences in the measures used and collection methods of CAMHS waiting times statistics, as well as differences in service structures between the administrations. The different datasets will not be strictly comparable.</p> <p>Users need to carefully read the publications when making comparisons.</p> <p>Links to other CAMHS waiting time information published can be found below:</p> <p>England: No data available at the moment in England. Monthly submission to the CAMHS dataset is due to start in Spring 2014.</p> <p>Northern Ireland: They have a Ministerial Target of 9 weeks for patients waiting. This information is not published and they do not have any referral to treatment data for CAMHS.</p> <p>Wales: <a href="http://wales.gov.uk/statistics-and-research/referral-to-treatment-times/?lang=en">http://wales.gov.uk/statistics-and-research/referral-to-treatment-times/?lang=en</a> They have a standard for patients referred to Specialist Child and Adolescent Mental Health Services (CAMHS), assessment and any intervention plans required are to be initiated within 16 weeks.</p>
Accessibility	It is the policy of ISD Scotland to make its web sites and products accessible according to <a href="#">published guidelines</a> .
Coherence and clarity	The benchmarking toolkit is an Excel workbook with information on individual indicators contained in separate worksheets that are navigable via hyperlinks from the main summary page. Each worksheet contains, where

	applicable, data for NHS Scotland and a breakdown by NHS Board. The dashboard contains similar data to the toolkit however; it is displayed in a different format. It allows the user to select a particular NHS Board and compare their data with Scotland and HEAT targets if there is one for the indicator.
Value type and unit of measurement	There are multiple units of measure including numbers, percentages, population rates, costs (£) and whole time equivalents (WTE).
Disclosure	The <a href="#">ISD protocol on Statistical Disclosure Protocol</a> is followed.
Official Statistics designation	Official Statistics
UK Statistics Authority Assessment	Not currently put forward for assessment
Last published	17 December 2013
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Help email	<a href="mailto:johnconnor@nhs.net">johnconnor@nhs.net</a>
Date form completed	03-Mar-14

## **A3 – Early Access details (including Pre-Release Access)**

### **Pre-Release Access**

Under terms of the "Pre-Release Access to Official Statistics (Scotland) Order 2008", ISD are obliged to publish information on those receiving Pre-Release Access ("Pre-Release Access" refers to statistics in their final form prior to publication). The standard maximum Pre-Release Access is five working days. Shown below are details of those receiving standard Pre-Release Access and, separately, those receiving extended Pre-Release Access.

#### **Standard Pre-Release Access:**

- Scottish Government Health Department
- NHS Board Chief Executives
- NHS Board Communication leads

#### **Extended Pre-Release Access**

Extended Pre-Release Access of 8 working days is given to a small number of named individuals in the Scottish Government Health Department (Analytical Services Division). This Pre-Release Access is for the sole purpose of enabling that department to gain an understanding of the statistics prior to briefing others in Scottish Government (during the period of standard Pre-Release Access).

- Scottish Government Health Department (Analytical Services Division)

#### **Early Access for Management Information**

These statistics will also have been made available to those who needed access to 'management information', ie as part of the delivery of health and care:

- Members of the Mental Health Benchmarking Board Contacts Group
- Members of the CAMHS Implementation and Monitoring Group

#### **Early Access for Quality Assurance**

These statistics will also have been made available to those who needed access to help quality assure the publication:

- Members of the Mental Health Benchmarking Board Contacts Group
- Members of the CAMHS Implementation and Monitoring Group



## A4 – ISD and Official Statistics

### About ISD

Scotland has some of the best health service data in the world combining high quality, consistency, national coverage and the ability to link data to allow patient based analysis and follow up.

Information Services Division (ISD) is a business operating unit of NHS National Services Scotland and has been in existence for over 40 years. We are an essential support service to NHSScotland and the Scottish Government and others, responsive to the needs of NHSScotland as the delivery of health and social care evolves.

**Purpose:** To deliver effective national and specialist intelligence services to improve the health and wellbeing of people in Scotland.

**Mission:** Better Information, Better Decisions, Better Health

**Vision:** To be a valued partner in improving health and wellbeing in Scotland by providing a world class intelligence service.

### Official Statistics

Information Services Division (ISD) is the principal and authoritative source of statistics on health and care services in Scotland. ISD is designated by legislation as a producer of 'Official Statistics'. Our official statistics publications are produced to a high professional standard and comply with the Code of Practice for Official Statistics. The Code of Practice is produced and monitored by the UK Statistics Authority which is independent of Government. Under the Code of Practice, the format, content and timing of statistics publications are the responsibility of professional staff working within ISD.

ISD's statistical publications are currently classified as one of the following:

- National Statistics (ie assessed by the UK Statistics Authority as complying with the Code of Practice)
- National Statistics (ie legacy, still to be assessed by the UK Statistics Authority)
- Official Statistics (ie still to be assessed by the UK Statistics Authority)
- other (not Official Statistics)

Further information on ISD's statistics, including compliance with the Code of Practice for Official Statistics, and on the UK Statistics Authority, is available on the [ISD website](#).