

Newbury District

2017/18 Standard	30%	E.H.9	16/17 Estimate*	16/17 CCG Revised Estimate*	Q1 17/18	Q2 17/18	Q3 17/18	Q4 17 / 18	Q1 18/19	Q2 18/19	Q3 18/19	Q4 18/19	
2018/19 Standard	32%												
Improve Access Rate to CYP MH	1a - The number of new children and young people aged 0-18 receiving treatment from NHS funded community services in the reporting period.												
		100	100	26	26	27	28	28	28	29	30		
		16/17 Final Estimate	17/18 Plan	18/19 Plan	16/17 to 17/18 change	17/18 to 18/19 change							
		100	107	115	7.0%	7.5%							
		16/17 Estimates**	16/17 CCG Revised Estimate**	Q1 17/18	Q2 17/18	Q3 17/18	Q4 17 / 18	17/18	Q1 18/19	Q2 18/19	Q3 18/19	Q4 18/19	18/19
	2a - Total number of individual children and young people aged 0-18 receiving treatment by NHS funded community services in the reporting period.												
	275	558	151	151	151	152	605	161	161	161	162	645	
	2b - Total number of individual children and young people aged 0-18 with a diagnosable mental health condition.												
	2,011	2,011						2,011					2,011
	Percentage of children and young people aged 0-18 with a diagnosable mental health condition who are receiving treatment from NHS funded community services.												
	13.7%	27.7%						30.1%					32.1%

*For indicators 1a and 2a, please note that the indicator has recently been requested to be added to the MHSDS monthly publication. Due to the experimental nature of these indicators the underlying data will be published as part of NHS Digital's Supplementary Information pages (<http://content.digital.nhs.uk/suppinfofiles>). Please refer to the footnotes of the publication for more details on construction and caveats. Initial analysis of this management information data suggests that coverage, issues associated with this being only the second cut of data from a data collection established in January 2016 and problems with data completeness exists. Therefore the baseline estimates contained in G104 and G110 are very crude and basic:

1a 16/17 Estimate = 4 * The number of new children and young people aged 0-18 receiving treatment from NHS funded community services in the reporting period. (Q1 16/17)

2a 16/17 Estimate = Total number of individual children and young people aged 0-18 receiving treatment by NHS funded community services in the reporting period (Q1 16/17) + 3* The number of new children and young people aged 0-18 receiving treatment from NHS funded community services in the reporting period.

Given the issues CCGs have therefore been provided with an opportunity in cell H98 for measure 1a and cell H104 for measure 2a to submit alternative values which will be validated based on local intelligence and additional information.

**For indicator 2b, there is limited recent data available on the estimated prevalence. In the absence of recent data an estimate has been created by applying the 5-16 year old estimates as provided in the PHE fingertip tool (<https://fingertips.phe.org.uk/profile-group/mental-health/profile/cypmh/data>) to 0-17 ONS 2014 - based population projections (<https://www.ons.gov.uk/peoplepopulationandcommunity/populationandmigration/populationprojections/datasets/clinicalcommissioninggroupsineotland2>). Please note that where CCG data wasn't available a regional estimate was used.

As with indicators 1a and 2a, CCGs have therefore been provided with an opportunity to use local intelligence and additional information on prevalence to improve the estimates in cell H105. These estimates will be validated.

Standard (to be achieved by 2020)	95%	E.H.10	Q1	Q2	Q3	Q4
Diff. Tolerance	25%					
Waiting Times for Routine Referrals to CYP Eating Disorder Services - Within 4 Weeks	2017/18 Plan	Number of CYP with ED (routine cases) referred with a suspected ED that start treatment within 4 weeks of referral		1	1	1
		Number of CYP with a suspected ED (routine cases) that start treatment		1	1	1
		%	100.0%	100.0%	100.0%	100.0%
	2018/19 Plan	Number of CYP with ED (routine cases) referred with a suspected ED that start treatment within 4 weeks of referral		1	1	1
		Number of CYP with a suspected ED (routine cases) that start treatment		1	1	1
		%	100.0%	100.0%	100.0%	100.0%

Standard (to be achieved by 2020)	95%	E.H.11	Q1	Q2	Q3	Q4
Diff. Tolerance	25%					
Waiting Times for Urgent Referrals to CYP Eating Disorder Services - Within 1 Week	2017/18 Plan	Number of CYP with ED (urgent cases) referred with a suspected ED that start treatment within 1 week of referral		1	1	1
		Number of CYP with a suspected ED (urgent cases) that start treatment		1	1	1
		%	100.0%	100.0%	100.0%	100.0%
	2018/19 Plan	Number of CYP with ED (urgent cases) referred with a suspected ED that start treatment within 1 week of referral		1	1	1
		Number of CYP with a suspected ED (urgent cases) that start treatment		1	1	1
		%	100.0%	100.0%	100.0%	100.0%

North West Reading

2017/18 Standard	30%	E.H.9	16/17 Estimate*	16/17 CCG Revised Estimate*	Q1 17/18	Q2 17/18	Q3 17/18	Q4 17 / 18	Q1 18/19	Q2 18/19	Q3 18/19	Q4 18/19	
2018/19 Standard	32%												
Improve Access Rate to CYPMH	1a - The number of new children and young people aged 0-18 receiving treatment from NHS funded community services in the reporting period.												
		120	120	32	32	32	33	34	35	35	35		
		16/17 Final Estimate	17/18 Plan	18/19 Plan	16/17 to 17/18 change	17/18 to 18/19 change							
		120	129	139	7.5%	7.8%							
		16/17 Estimates**	16/17 CCG Revised Estimate**	Q1 17/18	Q2 17/18	Q3 17/18	Q4 17 / 18	17/18	Q1 18/19	Q2 18/19	Q3 18/19	Q4 18/19	18/19
		275	474	143	143	144	144	574	153	153	153	154	613
2b - Total number of individual children and young people aged 0-18 with a diagnosable mental health condition.													
	1,907	1,907						1,907					1,907
Percentage of children and young people aged 0-18 with a diagnosable mental health condition who are receiving treatment from NHS funded community services.													
	14.4%	24.9%						30.1%					32.1%

*For indicators 1a and 2a, please note that the indicator has recently been requested to be added to the MHSDS monthly publication. Due to the experimental nature of these indicators the underlying data will be published as part of NHS Digital's Supplementary Information pages (<http://content.digital.nhs.uk/supinfofiles>). Please refer to the footnotes of the publication for more details on construction and caveats. Initial analysis of this management information data suggests that coverage, issues associated with this being only the second cut of data from a data collection established in January 2016 and problems with data completeness exists. Therefore the baseline estimates contained in G104 and G110 are very crude and basic:

1a 16/17 Estimate = 4 * The number of new children and young people aged 0-18 receiving treatment from NHS funded community services in the reporting period. (Q1 16/17)

2a 16/17 Estimate = Total number of individual children and young people aged 0-18 receiving treatment by NHS funded community services in the reporting period (Q1 16/17) + 3* The number of new children and young people aged 0-18 receiving treatment from NHS funded community services in the reporting period.

Given the issues CCGs have therefore been provided with an opportunity in cell H98 for measure 1a and cell H104 for measure 2a to submit alternatives values which will be validated based on local intelligence and additional information.

**For indicator 2b, there is limited recent data available on the estimated prevalence. In the absence of recent data an estimate has been created by applying the 5-16 year old estimates as provided in the PHE fingertip tool (<https://fingertips.phe.org.uk/profile-group/mental-health/profile/cypmh/data>) to 0-17 ONS 2014- based population projections (<https://www.ons.gov.uk/peoplepopulationandcommunity/populationandmigration/populationprojections/datasets/clinicalcommissioninggroupsinglandz2>). Please note that where CCG data wasn't available a regional estimate was used.

As with indicators 1a and 2a, CCGs have therefore been provided with an opportunity to use local intelligence and additional information on prevalence to improve the estimates in cell H105. These estimates will be validated.

Standard (to be achieved by 2020)	95%	E.H.10	Q1	Q2	Q3	Q4	
Diff. Tolerance	25%						
Waiting Times for Routine Referrals to CYP Eating Disorder Services - Within 4 Weeks	2017/18 Plan	Number of CYP with ED (routine cases) referred with a suspected ED that start treatment within 4 weeks of referral		1	1	1	1
		Number of CYP with a suspected ED (routine cases) that start treatment		1	1	1	1
		%	100.0%	100.0%	100.0%	100.0%	
	2018/19 Plan	Number of CYP with ED (routine cases) referred with a suspected ED that start treatment within 4 weeks of referral		1	1	1	1
		Number of CYP with a suspected ED (routine cases) that start treatment		1	1	1	1
		%	100.0%	100.0%	100.0%	100.0%	

Standard (to be achieved by 2020)	95%	E.H.11	Q1	Q2	Q3	Q4	
Diff. Tolerance	25%						
Waiting Times for Urgent Referrals to CYP Eating Disorder Services - Within 1 Week	2017/18 Plan	Number of CYP with ED (urgent cases) referred with a suspected ED that start treatment within 1 week of referral		1	1	1	1
		Number of CYP with a suspected ED (urgent cases) that start treatment		1	1	1	1
		%	100.0%	100.0%	100.0%	100.0%	
	2018/19 Plan	Number of CYP with ED (urgent cases) referred with a suspected ED that start treatment within 1 week of referral		1	1	1	1
		Number of CYP with a suspected ED (urgent cases) that start treatment		1	1	1	1
		%	100.0%	100.0%	100.0%	100.0%	

South Reading

2017/18 Standard	30%	E.H.9	16/17 Estimate*	16/17 CCG Revised Estimate*	Q1 17/18	Q2 17/18	Q3 17/18	Q4 17 / 18	Q1 18/19	Q2 18/19	Q3 18/19	Q4 18/19		
2018/19 Standard	32%													
Improve Access Rate to CYP MH		1a - The number of new children and young people aged 0-18 receiving treatment from NHS funded community services in the reporting period.	120	120	32	32	32	33	34	35	35	35		
			16/17 Final Estimate	17/18 Plan	18/19 Plan	16/17 to 17/18 change	17/18 to 18/19 change							
		Annual change for 1a - The number of new young people receiving treatment from NHS funded community services	120	129	139	7.5%	7.8%							
			16/17 Estimates**	16/17 CCG Revised Estimate**	Q1 17/18	Q2 17/18	Q3 17/18	Q4 17 / 18	17/18	Q1 18/19	Q2 18/19	Q3 18/19	Q4 18/19	18/19
		2a - Total number of individual children and young people aged 0-18 receiving treatment by NHS funded community services in the reporting period.	280	547	175	176	176	176	703	187	187	188	188	750
		2b - Total number of individual children and young people aged 0-18 with a diagnosable mental health condition.	2,337	2,337				2,337					2,337	
		Percentage of children and young people aged 0-18 with a diagnosable mental health condition who are receiving treatment from NHS funded community services.	12.0%	23.4%				30.1%					32.1%	

*For indicators 1a and 2a, please note that the indicator has recently been requested to be added to the MHSDS monthly publication. Due to the experimental nature of these indicators the underlying data will be published as part of NHS Digital's Supplementary Information pages (<http://content.digital.nhs.uk/suppinfiles>). Please refer to the footnotes of the publication for more details on construction and caveats. Initial analysis of this management information data suggests that coverage, issues associated with this being only the second cut of data from a data collection established in January 2016 and problems with data completeness exists. Therefore the baseline estimates contained in G104 and G110 are very crude and basic:

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2a 16/17 Estimate = Total number of individual children and young people aged 0-18 receiving treatment by NHS funded community services in the reporting period (Q1 16/17) + 3* The number of new children and young people aged 0-18 receiving treatment from NHS funded community services in the reporting period.

Given the issues CCGs have therefore been provided with an opportunity in cell H98 for measure 1a and cell H104 for measure 2a to submit alternative values which will be validated based on local intelligence and additional information.

**For indicator 2b, there is limited recent data available on the estimated prevalence. In the absence of recent data an estimate has been created by applying the 5-16 year old estimates as provided in the PHE fingertip tool (<https://fingertips.phe.org.uk/profile-group/mental-health/profile/cypmh/data>) to 0-17 ONS 2014-based population projections (<https://www.ons.gov.uk/peoplepopulationandcommunity/populationandmigration/populationprojections/datasets/clinicalcommissioninggroupsineurope>). Please note that where CCG data wasn't available a regional estimate was used.

As with indicators 1a and 2a, CCGs have therefore been provided with an opportunity to use local intelligence and additional information on prevalence to improve the estimates in cell H105. These estimates will be validated.

Standard (to be achieved by 2020)	95%	E.H.10	Q1	Q2	Q3	Q4
Diff. Tolerance	25%					
Waiting Times for Routine Referrals to CYP Eating Disorder Services - Within 4 Weeks	2017/18 Plan	Number of CYP with ED (routine cases) referred with a suspected ED that start treatment within 4 weeks of referral	1	1	1	1
		Number of CYP with a suspected ED (routine cases) that start treatment	1	1	1	1
	%	100.0%	100.0%	100.0%	100.0%	
	2018/19 Plan	Number of CYP with ED (routine cases) referred with a suspected ED that start treatment within 4 weeks of referral	1	1	1	1
		Number of CYP with a suspected ED (routine cases) that start treatment	1	1	1	1
	%	100.0%	100.0%	100.0%	100.0%	

Standard (to be achieved by 2020)	95%	E.H.11	Q1	Q2	Q3	Q4
Diff. Tolerance	25%					
Waiting Times for Urgent Referrals to CYP Eating Disorder Services - Within 1 Week	2017/18 Plan	Number of CYP with ED (urgent cases) referred with a suspected ED that start treatment within 1 week of referral	1	1	1	1
		Number of CYP with a suspected ED (urgent cases) that start treatment	1	1	1	1
	%	100.0%	100.0%	100.0%	100.0%	
	2018/19 Plan	Number of CYP with ED (urgent cases) referred with a suspected ED that start treatment within 1 week of referral	1	1	1	1
		Number of CYP with a suspected ED (urgent cases) that start treatment	1	1	1	1
	%	100.0%	100.0%	100.0%	100.0%	

Wokingham

2017/18 Standard	30%	E.H.9	16/17 Estimate*	16/17 CCG Revised Estimate*	Q1 17/18	Q2 17/18	Q3 17/18	Q4 17 / 18	Q1 18/19	Q2 18/19	Q3 18/19	Q4 18/19		
2018/19 Standard	32%													
Improve Access Rate to CYP MH	1a - The number of new children and young people aged 0-18 receiving treatment from NHS funded community services in the reporting period.		140	140	37	37	38	38	39	40	41	41		
			16/17 Final Estimate	17/18 Plan	18/19 Plan	16/17 to 17/18 change	17/18 to 18/19 change							
			140	150	161	7.1%	7.3%							
			16/17 Estimates**	16/17 CCG Revised Estimate**	Q1 17/18	Q2 17/18	Q3 17/18	Q4 17 / 18	17/18	Q1 18/19	Q2 18/19	Q3 18/19	Q4 18/19	18/19
	2a - Total number of individual children and young people aged 0-18 receiving treatment by NHS funded community services in the reporting period.		365	810	206	207	207	207	827	220	220	221	221	882
2b - Total number of individual children and young people aged 0-18 with a diagnosable mental health condition.		2,749	2,749					2,749					2,749	
Percentage of children and young people aged 0-18 with a diagnosable mental health condition who are receiving treatment from NHS funded community services.		13.3%	29.5%					30.1%					32.1%	

*For indicators 1a and 2a, please note that the indicator has recently been requested to be added to the MHS monthly publication. Due to the experimental nature of these indicators the underlying data will be published as part of NHS Digital's Supplementary Information pages (<http://content.digital.nhs.uk/suppinfofiles>). Please refer to the footnotes of the publication for more details on construction and caveats. Initial analysis of this management information data suggests that coverage, issues associated with this being only the second cut of data from a data collection established in January 2016 and problems with data completeness exists. Therefore the baseline estimates contained in G104 and G110 are very crude and basic:

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Standard (to be achieved by 2020)	95%	E.H.10	Q1	Q2	Q3	Q4
Diff. Tolerance	25%					
Waiting Times for Routine Referrals to CYP Eating Disorder Services - Within 4 Weeks	2017/18 Plan	Number of CYP with ED (routine cases) referred with a suspected ED that start treatment within 4 weeks of referral	2	2	2	2
		Number of CYP with a suspected ED (routine cases) that start treatment	2	2	2	2
			100.0%	100.0%	100.0%	100.0%
	2018/19 Plan	Number of CYP with ED (routine cases) referred with a suspected ED that start treatment within 4 weeks of referral	2	2	2	2
		Number of CYP with a suspected ED (routine cases) that start treatment	2	2	2	2
			100.0%	100.0%	100.0%	100.0%

Standard (to be achieved by 2020)	95%	E.H.11	Q1	Q2	Q3	Q4
Diff. Tolerance	25%					
Waiting Times for Urgent Referrals to CYP Eating Disorder Services - Within 1 Week	2017/18 Plan	Number of CYP with ED (urgent cases) referred with a suspected ED that start treatment within 1 week of referral	1	1	1	1
		Number of CYP with a suspected ED (urgent cases) that start treatment	1	1	1	1
			100.0%	100.0%	100.0%	100.0%
	2018/19 Plan	Number of CYP with ED (urgent cases) referred with a suspected ED that start treatment within 1 week of referral	1	1	1	1
		Number of CYP with a suspected ED (urgent cases) that start treatment	1	1	1	1
			100.0%	100.0%	100.0%	100.0%