Child and Adolescent Mental Health Services Benchmarking Analysis for NHS Wales 2021/22

NHS Benchmarking Network 19.01.2023





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Children and young people's mental health services in Wales Key findings 2021/22







Referrals

5,212 referrals received per 100,000 population (0-18) to total CAMHS



Contacts

17,908 community contacts delivered in total CAMHS per 100,000 population (0-18)



Digital Contacts

38% of community CAMHS contacts were delivered in non face to face settings (44% of these were delivered digitally)





Occupancy

51% bed occupancy (excluding leave) in general admission beds



Length of Stay

60 days (excluding leave) in general admission beds



Workforce

39 WTE per 10 general admission beds





Workforce

135 WTE per 100,000 population in total community CAMHS



Vacancies

18% vacancy rate in general community CAMHS



Turnover

12% staff turnover rate (annual) in general community CAMHS



Source: 2021/22 NHS Benchmarking CYPMHS collection





Introduction and Executive summary

- This year marks the tenth year that the NHS Benchmarking Network has provided a Welsh view of the data collected as part of the annual benchmarking process for Adults and Older People and Children and Young People's services (CYPMHS). The analysis in this report concentrates on the children's and young people's data and should be read alongside the bespoke reports produced as part of the annual data collection that were produced and distributed to health boards in November 2022.
- The annual NHSBN benchmarking reports have become a fixed point in understanding how the Children and Young People's Mental Health sector is performing and how new policies and associated financial frameworks impact on the size and shape of the CYPMHS sector. This report explores data from the 2021/22 financial year, a year in which the impact of the Covid-19 pandemic and subsequent recovery continues to be seen.
- All seven Welsh Health Boards submitted data to the project this year although there is variation in the completeness of data submitted for individual metrics. Further, for the first
 time this year all Scottish Health Boards participated in the annual children and young people's mental health benchmarking project; the data presented in this report presents a
 comprehensive account of UK mental health services. In total 87 organisations submitted 142 data submissions for the project. Full UK participation this year has therefore increased
 the volume of data submitted to the project. Where there are material differences as a result of increased participation these will be referenced throughout the report.

Key findings

Ethnicity of service users

Compared to the Wales population there is an under-representation of Asian/Asian British children on community caseloads and admitted to children and young people (CYP) units. The data also shows an over-representation for children from a mixed ethnic background in community caseloads and an over representation of Black/Black British children in inpatient beds. It should be noted that ethnicity data in Wales was not available for 36% of CYP in community services and 7% of CYP admitted into inpatient care, this is compared to 19% of CYP in community services; 10% of CYP admitted into inpatient care in the UK.

Key findings for community services

Referrals

Referrals to Wales community mental health teams (CMHTs) have increased by 39% in 2021/22 when compared to 2020/21 and are higher when benchmarked per 100,000 population to the rest of the UK. Referral rates vary by health board and range from 6,424 (mean) per 100,000 population in Cardiff and Vale to 3,504 (mean) per 100,000 population in Swansea Bay.

Waiting Times for Referral to Treatment

Wales has longer waiting times for general CYPMH services than the UK position for referral to treatment waiting times. Wales reports higher proportions of patients in the 4-18 week band at 50% compared to 46% in the national reporting. Twenty four per cent of patients in Wales were in the 18+ week band compared to 21% of patients in the national position.



Introduction and Executive Summary (cont'd)

Waiting lists

Waiting lists for 1st appointments are higher in Wales than the UK with an average of 1,309 CYP per 100,000 population waiting for a 1st appointment compared to an average of 918 CYP per 100,000 population waiting for 1st appointment in the UK. Four Welsh health boards are above the UK average for total number of patients on the waiting list awaiting their 1st appointment, however there is variation between the boards that ranged from 2,777 per 100,000 population at Hywel Dda to 312 per 100,000 population at Cwm Taf.

Caseload

Caseloads for CYPMH services were higher in Wales than the UK position at 2,425 children and young people on caseload per 100,000 population. This is compared to 2,240 children and young people on caseload per 100,000 population at 31st March 2022 in the UK. In the UK caseloads per 100,000 population have increased in 2020/21 and 2021/22. In Wales there was a 39% increase between 2019/20 and 2020/21, however, caseloads have remained stable in 2021/22.

Contacts

Contacts for CYPMH services were lower in Wales when compared to the UK position. The mean average in Wales was 17,908 contacts per 100,000 population compared to a mean average of 30,209 per 100,000 population in the UK. There is notable variation between boards with Powys above the UK average at 31,232 contacts per 100,000 population and Hywel Dda having one of the lowest rates in the UK at 2,861 per 100,000 population. Contacts in Wales reduced by 8% between 2019/20 and 2020/21 and then reduced by a further 7% between 2020/21 and 2021/22. It should be noted that there may be issues with data quality and completeness impacting on the data in Wales.

Workforce

Welsh health boards employed a mean average of 135 WTEs per 100,000 population in community services. This was above the UK mean average (117 WTEs) and represents a 14% increase from the 118 WTEs per 100,000 population employed in 2020/21.

• Finance

Costs for CYPMH community services in Wales were higher than the UK average (£7.7m) at a mean of £8.2 million. This was an increase from £7.2 million in 2020/21. There is large variation in costs between boards, costs ranged from a mean average of £2.4 million at Hywel Dda per 100k population to a mean average of £14.9 million per 100k population at Betsi Cadwaladr, which was one of the highest reported costs in the UK. Costs per contact were also higher in Wales than in the UK overall at a mean average of £519 per contact compared to £292 per contact in the UK.



Introduction and Executive Summary (cont'd)

Key findings for CYPMH inpatient services

Bed occupancy

Bed occupancy for general admission beds was 51% in Wales, lower than the average of 69% in the UK.

Average length of stay

Average lengths of stay in Wales are, on average, shorter than in the UK as a whole. CYP average lengths of stay in Betsi Cadwaladr were 73 days and in Cwm Taf had average lengths of stay for children and young people of 46 days. This compares to a UK mean average of 90 days.

Use of restraint

The two Welsh health boards with inpatient beds reported a lower level of the use of restraint when compared to the UK at a mean average of 592 per 10,000 occupied bed days. The UK mean average for this indicator was 1,188 uses of restraint per 10,000 occupied bed days. For prone restraint, Wales average 6 uses of prone restraint per 10,000 occupied bed days in the UK overall.

Workforce

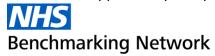
Cwm Taf and Betsi Cadwaladr reported inpatient workforce below the UK average (45 WTEs) at 41 WTEs and 36 WTEs per 10 beds respectively. The mean average in Wales was 39 WTEs and this represented a marginal increase from 38 WTEs per 10 CYP beds in 2020/21.

Finance

In 2021/22 costs per bed and per inpatient episode were lower in Wales when compared to the UK overall. Costs per bed increased in 2021/22 to £231,402 from £222,388 in 2020/21. In contrast costs per inpatient episode reduced from £83,982 in 2020/21 to £64,400 in 2021/22, this was due to a 29% increase in the number of inpatient episodes and a 5% increase in total costs of services.

As well as reading this national report individual Health Boards should refer to both their annual benchmarking report and services tracker reports to support quality improvement and service transformation activities. A continued focus on improving both the quality and completeness of data submissions will ensure the most robust account of mental health service delivery.

The NHS Benchmarking Network team would like to thank our colleagues in all Health Boards, Welsh Government, and National Collaborative Commissioning Unit for their continued support and participation in the annual children's and young people's mental health benchmarking project.



CYPMH Community services 2021/2022

Patient demographics
Activity: referrals, waiting lists, waiting times, caseload, contacts
Workforce

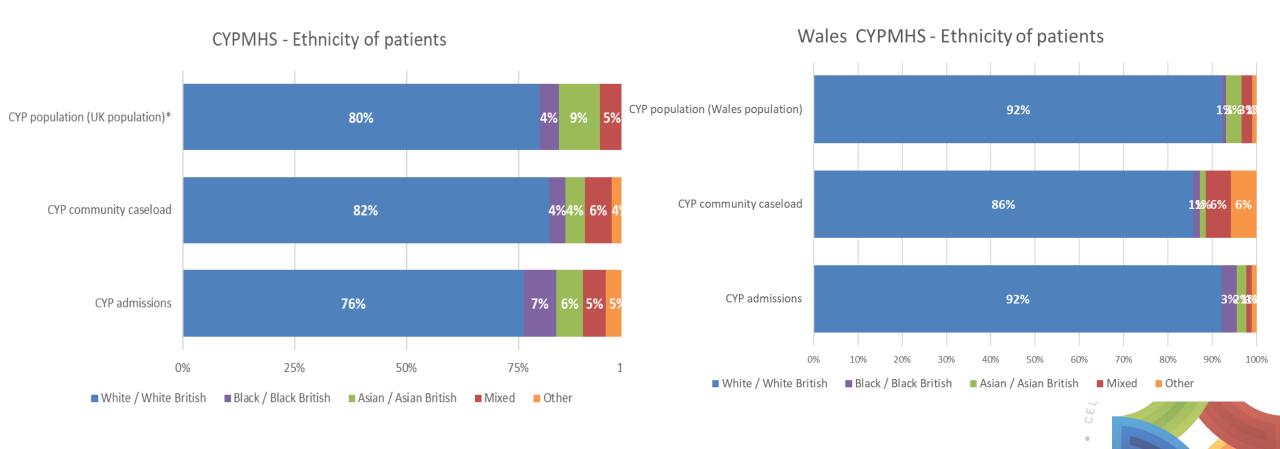




Ethnicity: UK comparisons

The charts show a comparison of community and inpatient services for CYP resident population (0-18) in UK and Wales. In the UK ethnicity data was not available for 19% of CYP in community services; 10% of CYP admitted into inpatient care. In Wales ethnicity data was not available for 36% of CYP in community services; 7% of CYP admitted into inpatient care.

Compared to the Wales population there is an under-representation of Asian/Asian British children on community caseloads and admitted to CYP units. The data also shows an over-representation for children from a mixed ethnic background in community caseloads and an over representation of Black/Black British children in inpatient beds.



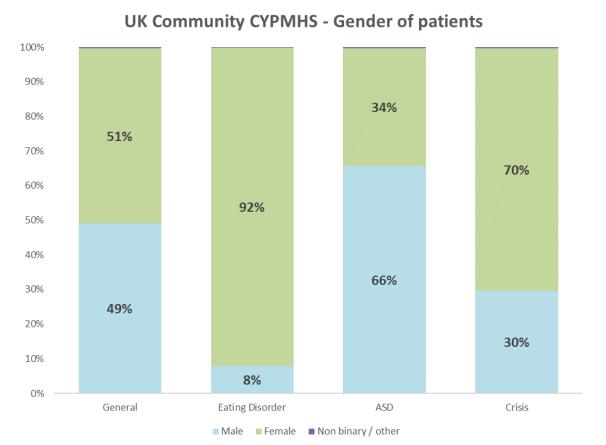


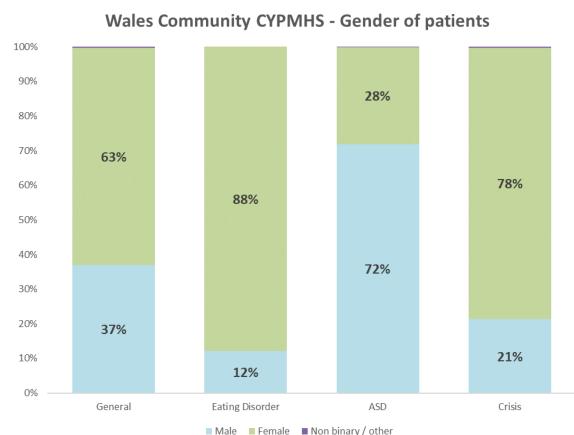
^{*}The data used is the latest available from each of the nations. For England and Wales this is from the Office of National Statistics (2019), Scotland is from the Population Estimates from the National Registry Office (2014) and the Northern Ireland data is from the 2011 Northern Ireland census.

Gender – Community

The NHS Benchmarking Network collection included gender profiling for the third consecutive year in 2021/22. This data shows the proportion of patients seen in community settings by gender.

There is variation in the proportion of male and female patients seen in the different community settings and differences between the UK position and the Welsh positions. This is most notable in general community services where in the UK there is an even proportion of male / female patients whereas in Wales 63% of service users are female.





UK Community service models and provision

The chart shows the types of services provided in the community for children and young people in the UK. The stars denote where the services are found in all Welsh health boards.

The variety of services across the UK is notable.

In the UK, 98% of organisations offer family therapy and group work, this is available in all Welsh health boards.

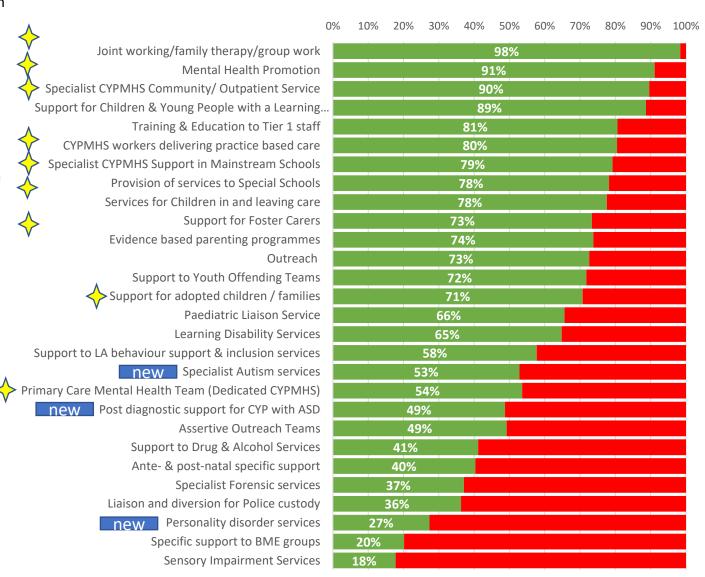
Twenty per cent of organisations in the UK provide specific support to ethnic minority groups, however, this was not offered in Wales.

Sixty five per cent of organisations in the UK provide a learning disability service. In Wales five of the seven boards provide this service (71%).

Three new services were reported on in the 2021/22 benchmarking exercise:

- Specialist autism services; just over half of UK organisation reported having these services. In Wales four of the seven health boards had these services.
- Post diagnostic support for CYP with ASD; just under half of UK organisations reported having these services. Two health boards in Wales reported having these services.
- Personality disorder services; under a third of UK organisations had these services. In Wales two of the seven health boards reported having these services.

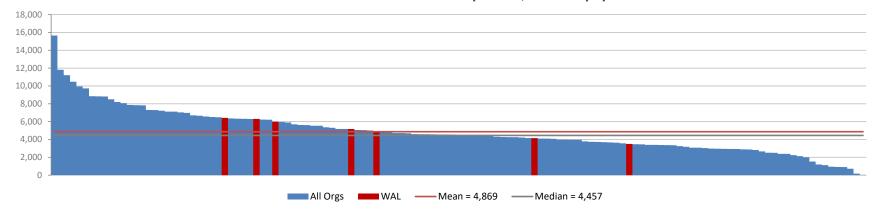
♦ denotes services in 100% of Welsh Health Boards



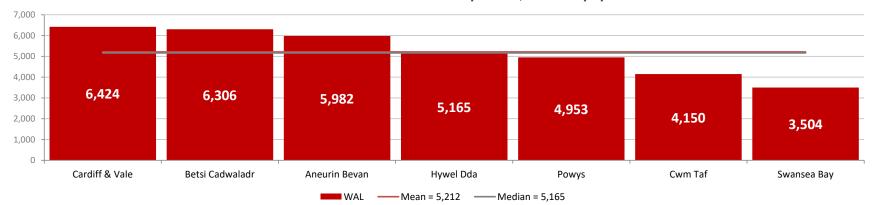


Referrals to CYPMHS

Total referrals into CYPMHS 2021/22 per 100,000 total population



Total referrals into CYPMHS 2021/22 per 100,000 total population



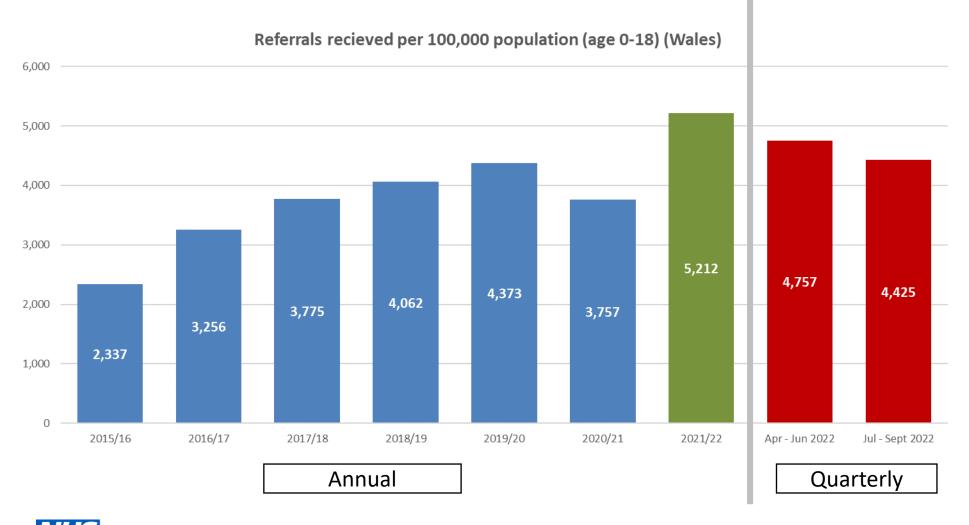
Referrals to community services were higher in Wales than the rest of the UK. A mean of 5,212 referrals per 100,000 population was reported for Wales compared to a mean average of 4,869 referrals per 100,000 population in the UK.

Referral rates varied between Health Boards ranging between 6,424 (mean) per 100,000 population in Cardiff and Vale to 3,504 (mean) per 100,000 population in Swansea Bay.





Referral timeseries: Wales



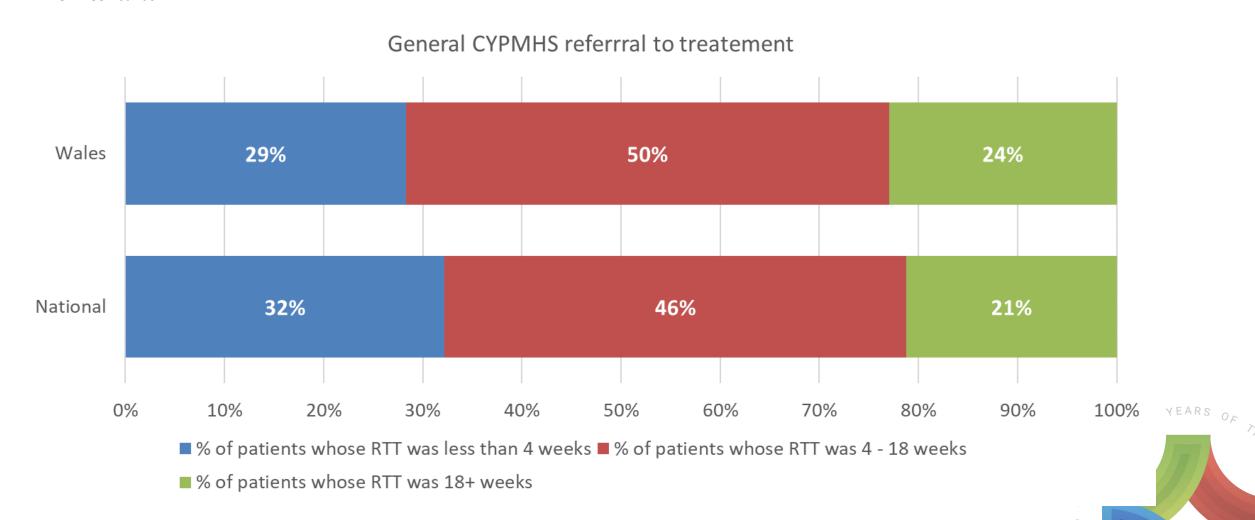
Referrals to Wales CMHTs have increased by 39% in 2021/22 from 3,757 referrals per 100,000 population in 2020/21 to 5,212 referrals in 2021/22. The data from the quarterly tracker in 2022/23 shows the level of referrals have remained high.



NHS Quarterly figures have been annualized for comparison purposes and may be based on fewer submissions than the annual position

Referral to Treatment waiting times (RTT)

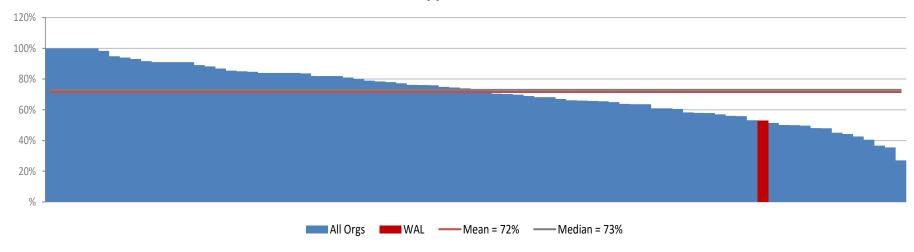
The chart highlights that Wales has longer RTT waiting times than the national position for general CYPMH services with higher proportions of patients in the 4-18 and 18+ week bands.





Conversion rate





The conversion rate for referrals is the percentage of patients who had a first appointment and then had a second or subsequent appointment. In the UK there is a mean average conversion rate of 72%. This has decreased from a conversion rate of 75% in 2020/21.

One Welsh health board provided data on this metric which limits the analysis.

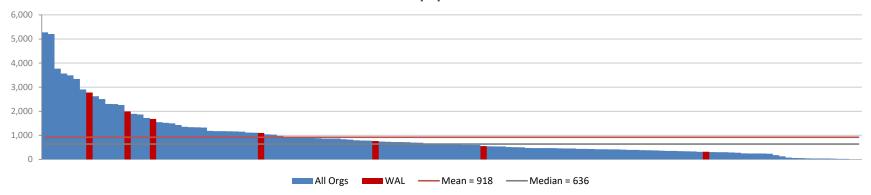




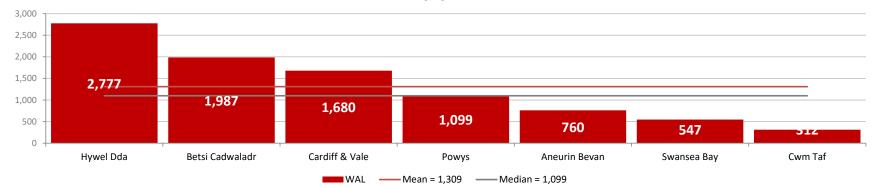
Waiting lists

1st routine appointment

Total - Number of patients on the waiting list awaiting 1st appointment on 31st March 2022 per 100,000 total population



Total - Number of patients on the waiting list awaiting 1st appointment on 31st March 2022 per 100,000 total population



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Waiting lists for 1st appointments are higher in Wales than in the UK with an average of 1,309 CYP per 100,000 population waiting for a 1st appointment compared to an average of 918 CYP per 100,000 population waiting for 1st appointment in the UK.

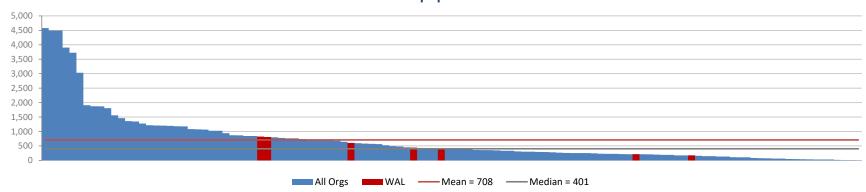
Average waiting lists varied between boards and ranged from 2,777 per 100,000 population at Hywel Dda to 312 per 100,000 population at Cwm Taf.



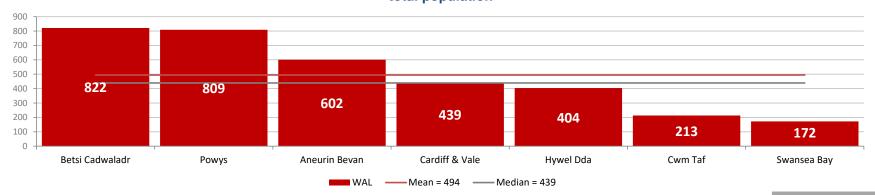
Waiting lists

2nd routine appointment

Total - Number of patients on the waiting list awaiting 2nd appointment on 31st March 2022 per 100,000 total population



Total - Number of patients on the waiting list awaiting 2nd appointment on 31st March 2022 per 100,000 total population



In the UK a further 708 CYP per 100,000 population are waiting for their 2nd appointment. This is an increase of 53% (49%*) compared to last year (462 per 100,000 population).

In Wales the average of 494 CYP per 100,000 population waiting for a 2nd appointment is lower than the UK position but has increased by 59% from 311 per 100,000 population in 2020/21.



* Based on data submissions consistent with 2020/21



Waiting lists

A snapshot of the waiting list was taken at 31st March 2022. In the UK overall waiting lists have increased compared to the same time in 2021.

In the UK there were 126,000 children and young people waiting for a first appointment on 31st March 2022. A further 96,000 children and young people were waiting for a second appointment following their initial assessment.

In Wales the number of children and young people waiting for a first appointment had increased by 44% between 31st March 2021 and 31st March 2022 (from 6,036 to 8,700). A further 3,300 children and young people were waiting for their second appointment as at 31st March 2022, this had increased by 121% from 1,492 as at 31st March 2021.

Referrals received



126,000 CYP at this stage (Wales = 8,700)



Initial assessment



96,000 CYP at this stage (Wales = 3,300)







Added to caseload

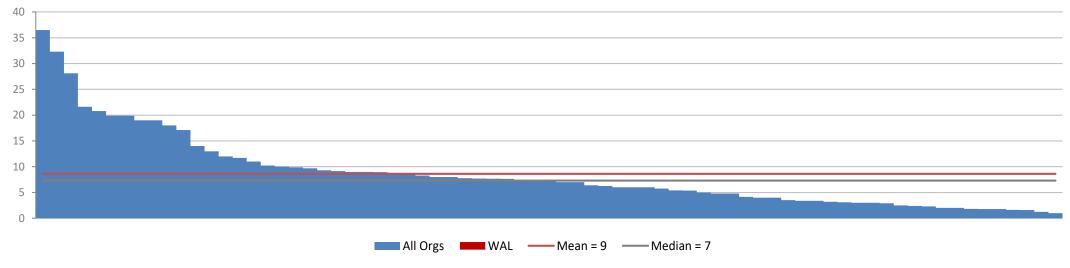


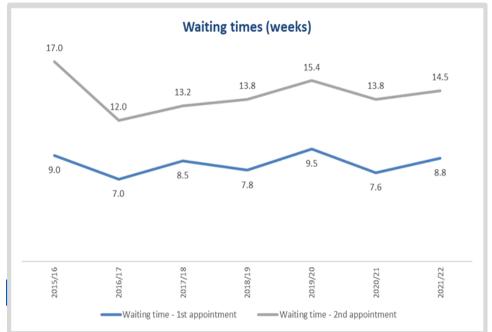




Waiting times – routine care

Total - Mean waiting time from referral to 1st appointment for routine appointments (weeks)





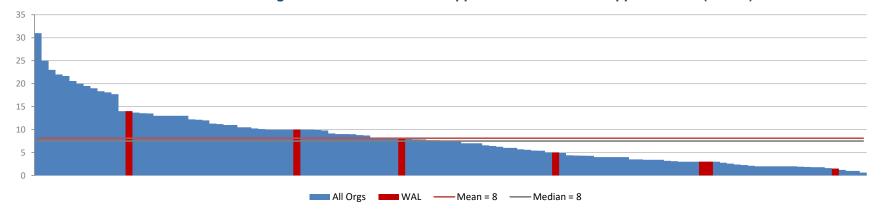
Data on whole service average waiting times in CYPMH was not provided by Welsh health boards.

In the UK waiting times for 1st appointments were 9 weeks in 2021/22, this had increased from 7 weeks in 2020/21. The waiting time for 2nd appointments was 15 weeks, an increase from 14 weeks in 2020/21.

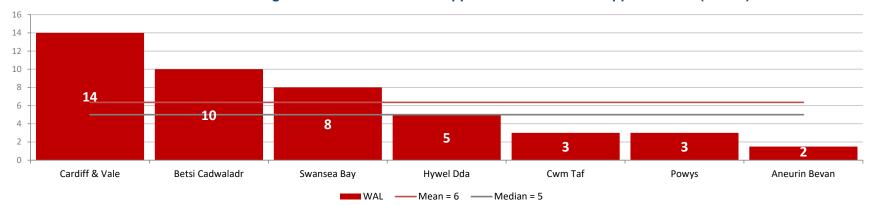


Waiting times - General

General - Mean waiting time from referral to 1st appointment for routine appointments (weeks)



General - Mean waiting time from referral to 1st appointment for routine appointments (weeks)



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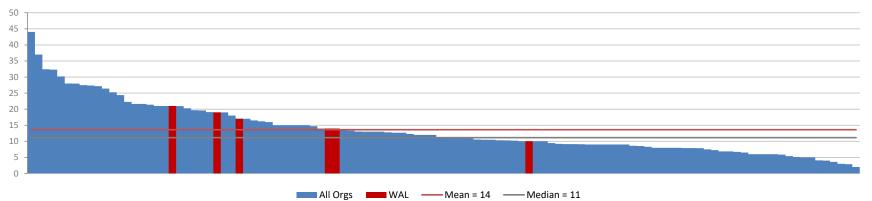
In the UK general services waiting times are 8 weeks from referral to 1st appointment. This is an increase of 1 week from 7 weeks in 2020/21.

In Wales the average waiting time is 6 weeks from referral to 1st appointment. Waiting times have remained stable from 2020/21. Variation in waiting times is evident with a range of 2 to 14 weeks between boards.



Waiting times - General





General - Mean waiting time from referral to 2nd appointment for routine appointments (weeks)



In the UK general services waiting times are 14 weeks from referral to 2nd appointment. This is an increase of 1 week from 13 weeks in 2020/21.

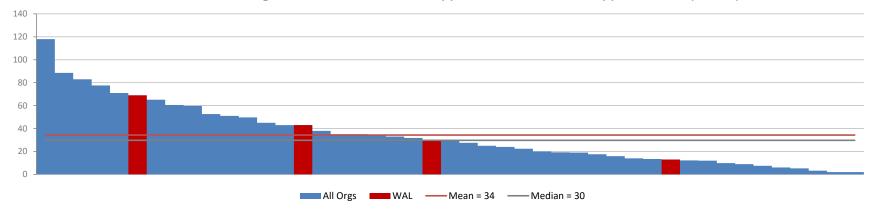
In Wales the average waiting time is 16 weeks from referral to 2nd appointment. This represents an increase of three weeks from 13 weeks in 2020/21. Variation in waiting times is evident between boards with a range of 10 to 21 weeks.





Waiting times - ASD

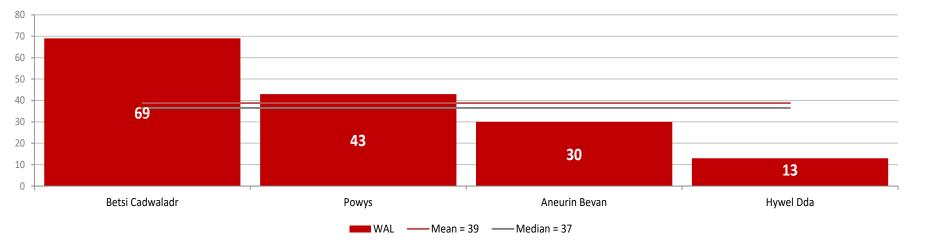




In the UK ASD services waiting times are longer than general services with a mean average of 34 weeks from referral to 1st appointment. This is an increase of 6 weeks from 28 weeks in 2020/21.

In Wales the average waiting time is 39 weeks from referral to 1st appointment. This was based on data submitted by the four boards noted in the in chart. Waiting times have reduced from 47 weeks in 2020/21. Variation in waiting times is evident with an up to five fold variation between Health Boards.

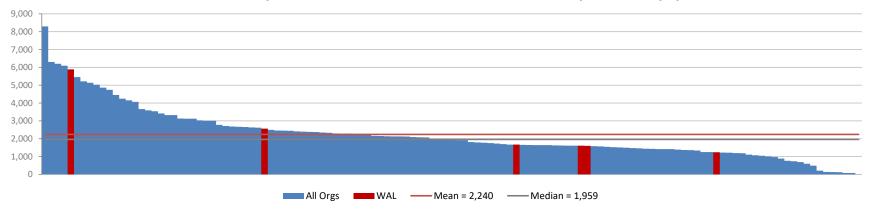




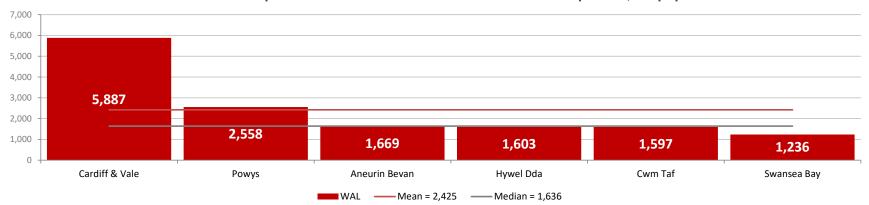


Caseload as of 31st March 2021





Total - Number of patients on the caseload as of 31st March 2022 per 100,000 population



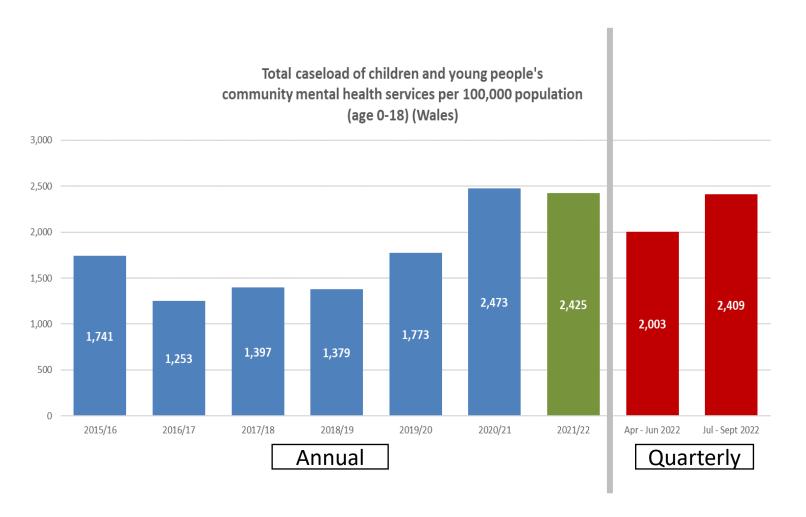


In the UK there were 2,240 children and young people on caseload per 100,000 population at 31st March 2022. This was an increase of 17% compared to 2020/21 when 1,913 children and young people were on caseload.

In Wales the mean average was higher than the UK position at 2,425 children and young people on caseload per 100,000 population. This represented a marginal decrease from a mean average of 2,473 people on caseload at 31st March 2021.

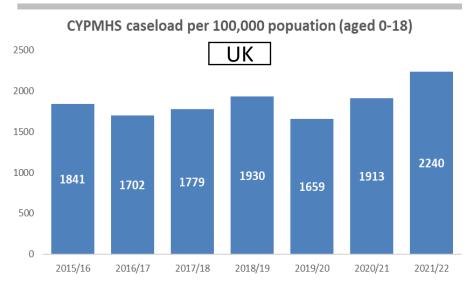


Caseload timeseries



In the UK caseloads per 100,000 population have increased in 2020/21 and 2021/22.

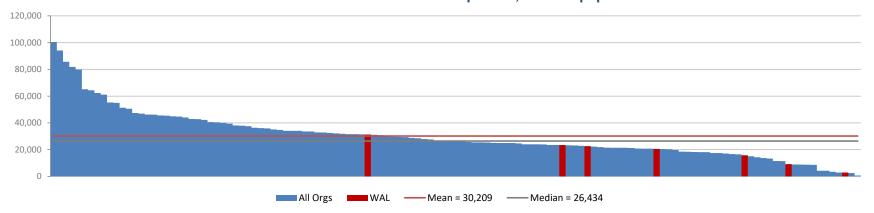
In Wales there was a 39% increase between 2019/20 and 2020/21, however, caseloads have remained stable in 2021/22.



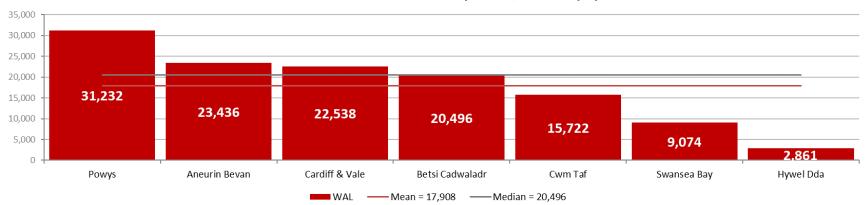


Contacts





Total - Number of contacts - 2021/22 per 100,000 total population



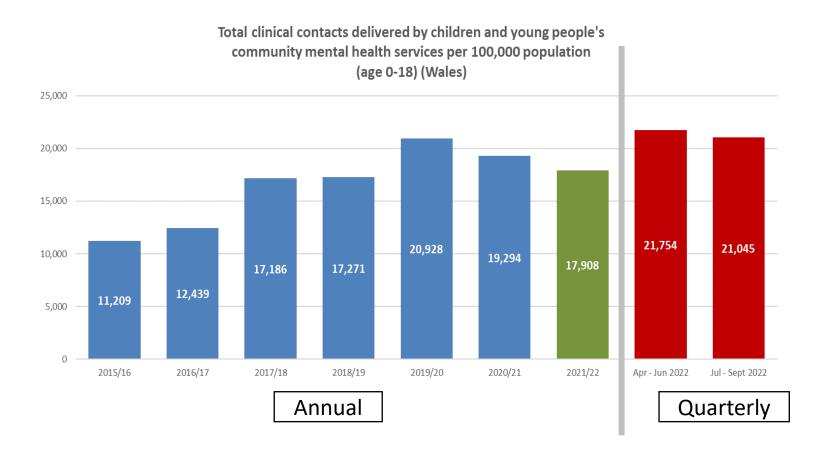
In the UK there was a mean average of 30,209 contacts per 100,000 population. This was a marginal increase from 29,642 contacts per 100,000 in 2020/21.

The mean average in Wales was below the UK mean average at 17,908 per 100,000 population. There is notable variation between boards with Powys above the UK average at 31,232 contacts per 100,000 and Hywel Dda having one of the lowest rates in the UK at 2,861 per 100,000. However, it should be noted that there may be issues with data quality and completeness impacting on the data in Wales.





Contacts timeseries: Wales



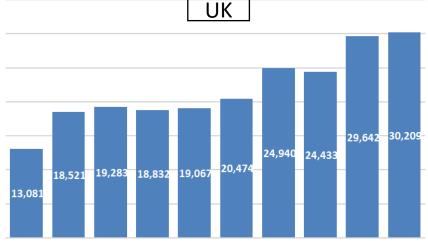
NHSBenchmarking Network

Quarterly figures have been annualized for comparison purposes and may be based on fewer submissions that the annual position

In the UK overall contact rates remained broadly stable between 2020/21 and 2021/22, following an increase in contacts in 2020/21.

In Wales contacts per 100,000 population reduced by 8% between 2019/20 and 2020/21 and then reduced by a further 7% between 2020/21 and 2021/22. Data from the quarterly tracker shows contacts to be higher in 2022, however these may be based on fewer submissions than the annual position.

Contacts per 100,000 population (age 0-18)

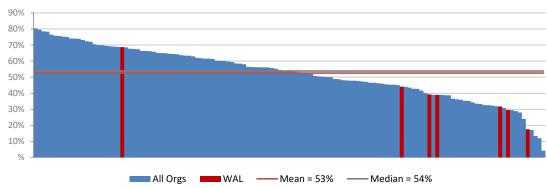


2012/13 2013/14 2014/15 2015/16 2016/17 2017/18 2018/19 2019/20 2020/21 2021/22

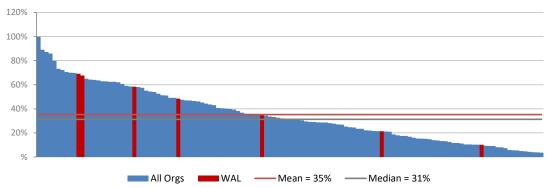
Non face to face contacts

The charts show the proportion of contacts delivered non-face to face via telephone or delivered digitally. Welsh health boards see proportionally more patients face to face than in the UK as a whole. Variations are evident between boards with Cardiff and Vale above the UK average at a mean of 69% and all other boards below the UK average and ranging to 17% at Cwm Taf. The range for non face to face contacts delivered digitally also varies between boards from 69% at Cwm Taf to 10% at Powys.

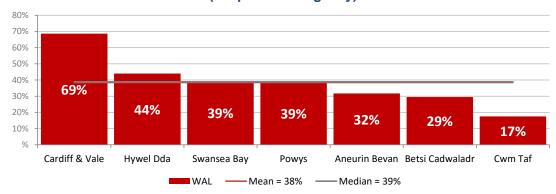
Total - Proportion of contacts delivered non face to face (telephone or digitally)



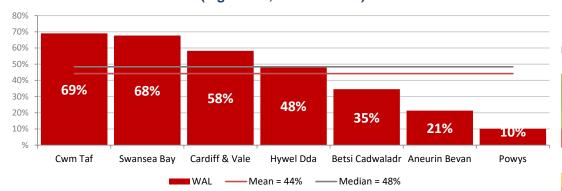
Total - Proportion of non face to face contacts delivered digitally (e.g. video, telemedicine)



Total - Proportion of contacts delivered non face to face (telephone or digitally)

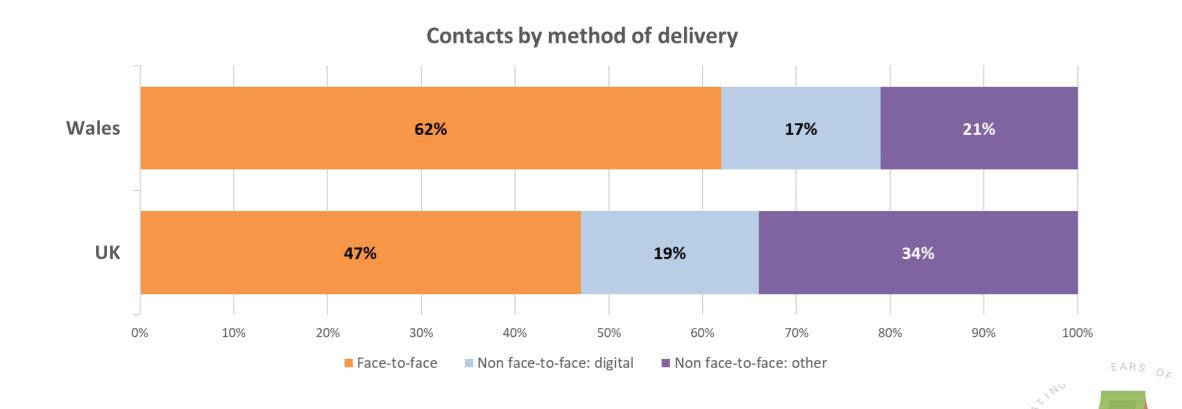


Total - Proportion of non face to face contacts delivered digitally (e.g. video, telemedicine)



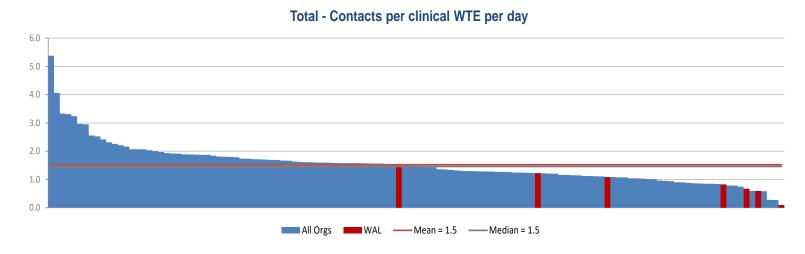
Summary of contact medium

The Wales Health Boards had a higher percentage of care delivered face to face than in the UK as a whole (62% v. 47%) and this resulted in a smaller percentage of care delivered digitally. In particular a reliance on telephone contacts was lower in Wales than in the UK (21% v. 34%).

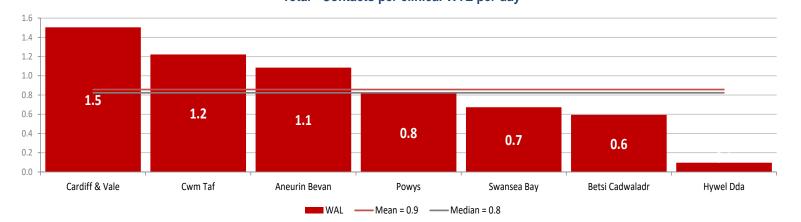




Contacts per clinical WTE per day



Total - Contacts per clinical WTE per day





In the UK there was mean average of 1.5 contacts per clinical WTE per day delivered in 2021/22 (accounting for 220 working days). This was a reduction from a mean of 1.8 in 2020/21

In Wales there was a mean average of 0.9 contacts per clinical WTE per day. This also represents a reduction from a mean of 1.04 in 2020/21.

UK

- YEARS

Total CYPMH services	2019/20	2020/21	2021/22
Contacts/clinical WTE	339	386	335
Contacts/clinical WTE/day	1.5	1.8 [1.76]	1.5

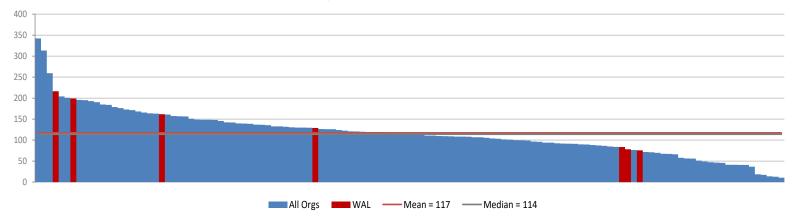
Community Workforce



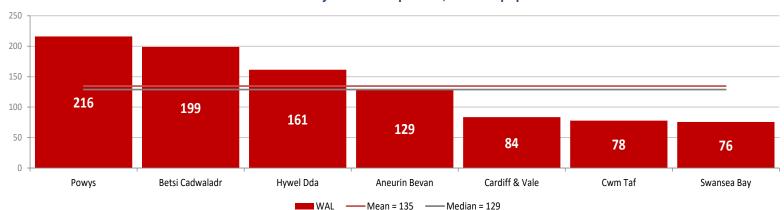


Community workforce



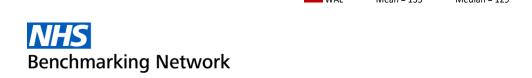


Total Community Workforce per 100,000 total population



The total community workforce data includes both clinical and non-clinical staff working in community services. In the UK there were 117 WTEs per 100,000 population in 2020/21, this was an increase of 19% from 98 WTEs per 100,000 population in 2020/21. However, it should be noted that the increase is partly a result of additional data submitted through increased participation in Scotland. When the data is analysed without the additional participants a rise in workforce is still evident although it is of a smaller magnitude.

In Wales the health boards reported they employed a mean average of 135 WTEs per 100,000 population. This is above the UK average and represents a 14% increase from the 118 WTEs per 100,000 population employed in 2020/21. Four of the health boards reported WTEs above the UK national mean average.

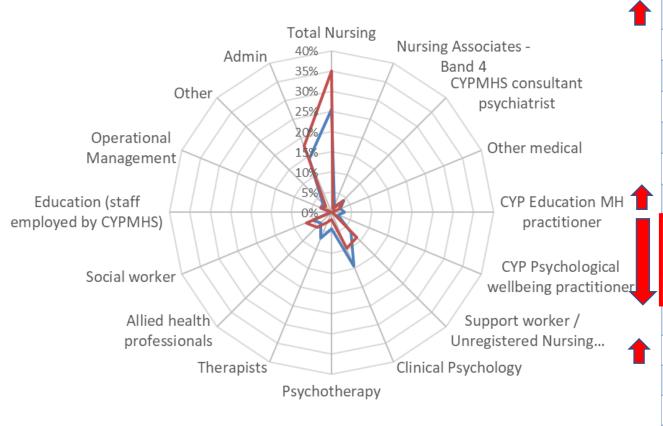




Community CYPMHS workforce profile

The radar chart and table show the workforce profile for community services. When compared to the UK position Wales has a greater proportion of total nursing staff, support workers and unregistered nursing staff. However Wales has a lower proportion of clinical psychologists, psychotherapists and therapists.

Community CYPMHS staff discipline mix



–All participants ——Wales

Discipline	All participants	Wales
Total Nursing	26%	35%
Nursing Associates - Band 4	2%	1%
CYPMHS consultant psychiatrist	4%	4%
Other medical	2%	2%
CYP Education MH practitioner	3%	0%
CYP Psychological wellbeing practitioner	2%	1%
Support worker / Unregistered Nursing Staff	7%	9%
Clinical Psychology	14%	10%
Psychotherapy	4%	2%
Therapists	7%	3%
Allied health professionals	4%	5%
Social worker	5%	7%
Education (staff employed by CYPMHS)	0%	0%
Operational Management	3%	3%
Other	3%	2%
Admin	14%	18%

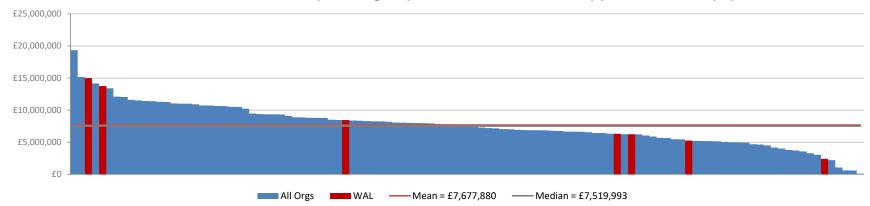
Community Finance



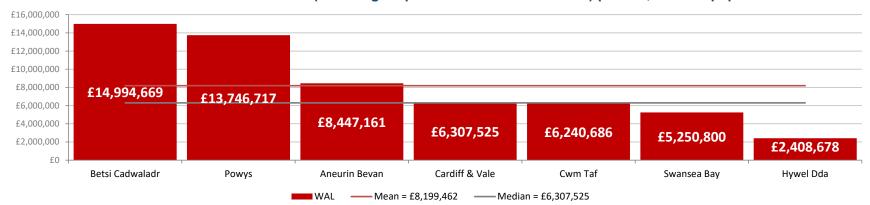


Total community costs per 100,000 population





Total Costs of service in 2021/22 (including corporate costs and overheads) per 100,000 total population



In the UK the total mean average community cost per 100,000 population was £7.7 million, this was an increase on the £6.6 million spend in 2020/21.

Costs for CYPMH community services in Wales were higher than the UK average at a mean of £8.2 million. This was an increase from £7.2 million in 2020/21. Variation between boards was evident and costs ranged from £2.4 million at Hywel Dda to £14.9 million at Betsi Cadwaladr, which was one of the highest reported costs in the UK.



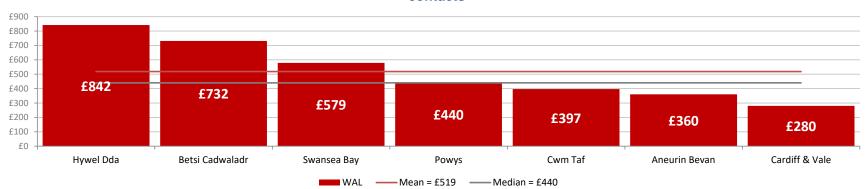


Total community costs per contact

Total Costs of service in 2021/22 (including corporate costs and overheads) per total number of contacts



Total Costs of service in 2021/22 (including corporate costs and overheads) per total number of contacts



In addition to looking at costs per population, it is also useful to benchmark costs per contact with service users. In the UK as a whole the mean average cost per community contact was £292 in 2021/22 which was a 13% increase from the £259 spent per contact in 2020/21.

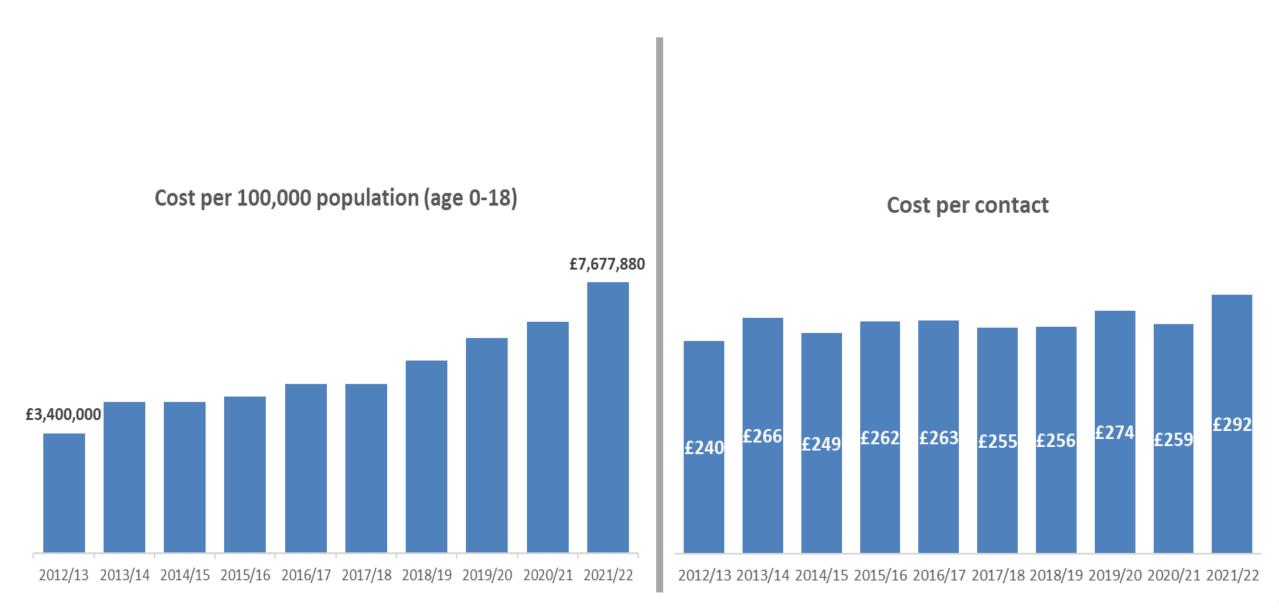
In Wales the mean average cost per contact was £519. This was a 24% increase from the £418 per contact spent in 2020/21. Three Welsh health boards had the highest reported costs per contact in the UK; Hywel Dda (£842), Betsi Cadwaladr (£732) and Swansea Bay £579).





Total community costs timeseries: UK

The charts below show the time series data for the UK for costs per population and costs per contact. When benchmarked per population costs have risen annually from 2012/13. Costs per contact have fluctuated on an annual basis, at a mean average of £292 per contact in 2021/22 is the highest calculated costs in the lifetime of the project.



Child and adolescent inpatient mental health services 2021/2022

patient demographic profiles bed profiles lengths of stay occupancy restraint workforce finance

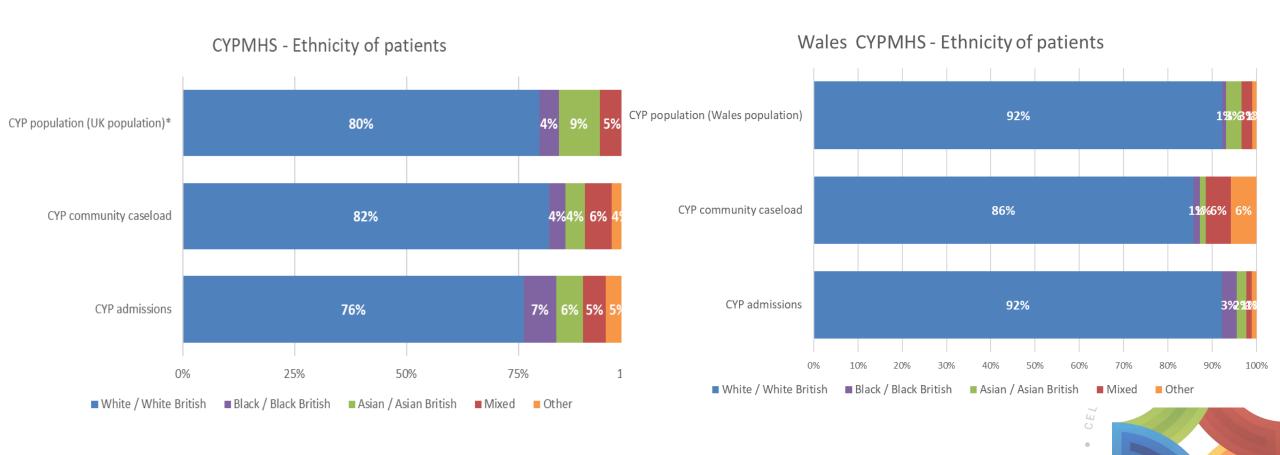




Ethnicity: UK comparisons

The charts show a comparison of community and inpatient services for CYP resident population (0-18) in UK and Wales. In the UK ethnicity data was not available for 19% of CYP in community services; 10% of CYP admitted into inpatient care. In Wales ethnicity data was not available for 36% of CYP in community services; 7% of CYP admitted into inpatient care.

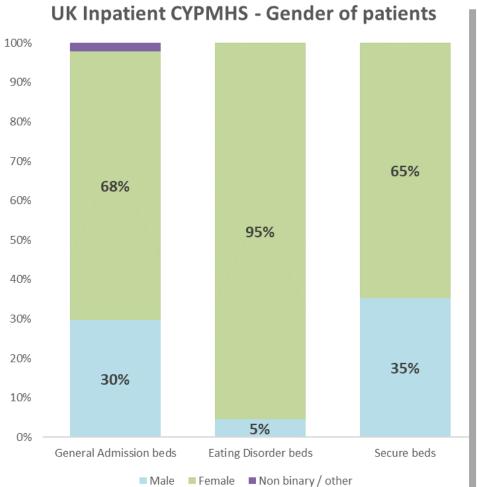
Compared to the Wales population there is an under-representation of Asian/Asian British children on community caseloads and admitted to CYP units. The data also shows an over-representation for children from a mixed ethnic heritage in community caseloads and an over representation of Black/Black British children in inpatient beds.

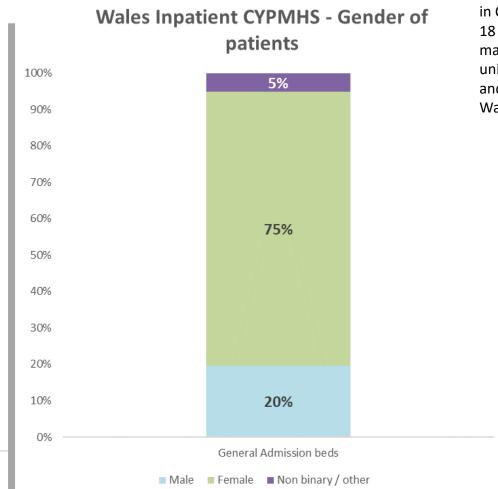




*The data used is the latest available from each of the nations. For England and Wales this is from the Office of National Statistics (2019), Scotland is from the Population Estimates from the National Registry Office (2014) and the Northern Ireland data is from the 2011 Northern Ireland census.

Gender - Inpatient



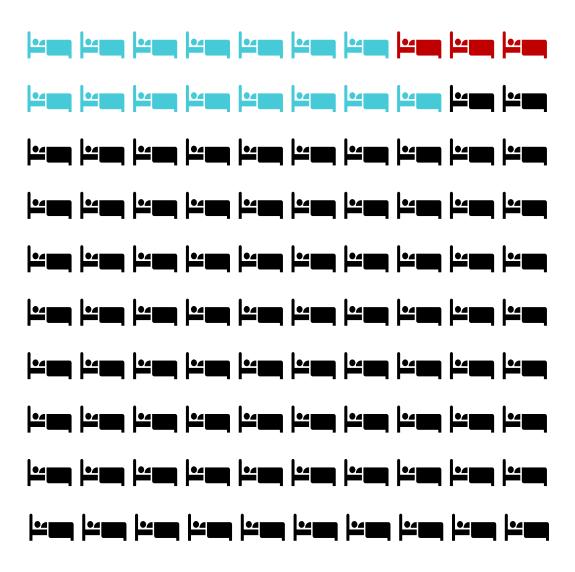


The charts show a comparison of gender in CYPMH general inpatient services (0-18 years) in UK and Wales. The ratio of males to females admitted to inpatient units is broadly comparable for children and young people across the UK and Wales.





UK Bed type profile CYPMHS at 31st March 2022



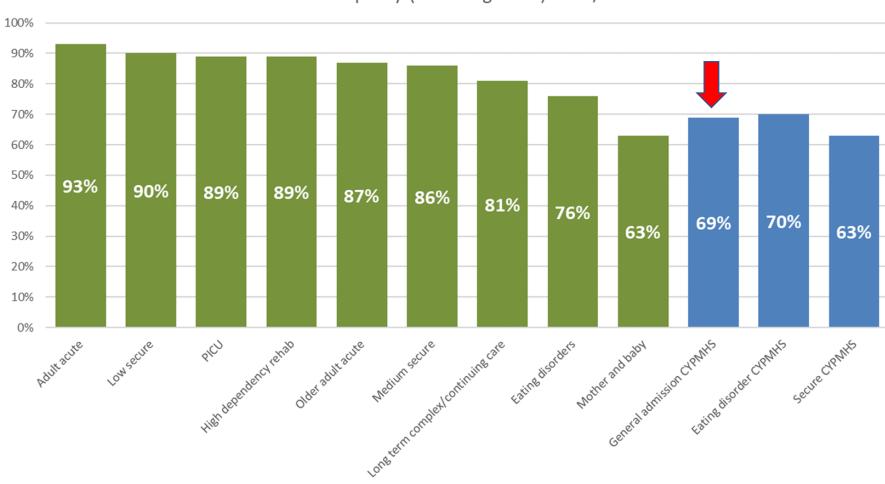
The infographic shows the UK bed profile for CYPMH beds as at 31st March 2022. Eighty two percent of beds were general admission beds (including PICU beds). Fifteen per cent of beds were in secure settings (low and medium) and 3% of beds were specialist eating disorder beds.

In the census as at 31st March 2022 there were 893 beds in the UK, 27 of these beds were in Wales. This is predominantly from NHS bed providers and does not include all independent sector providers.



Adult and CYPMH Bed occupancy by bed type: UK and Wales





In Wales the CYPMH bed occupancy rate was 51% for general admission inpatient services. This is compared to 69% across the UK.





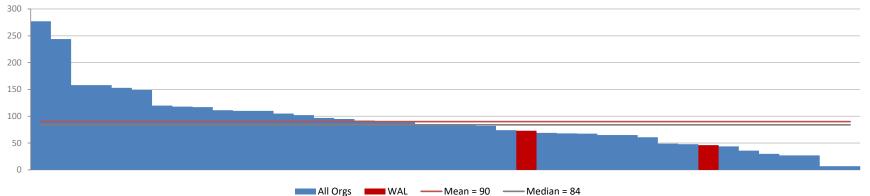
Inpatient average length of stay

In the UK the average length of stay (excluding leave) in CYP general admission beds was 90 days. For context the adult acute ALOS was 35 days in 2021/22. Lengths of stays have increased from 71 days in 2020/21.

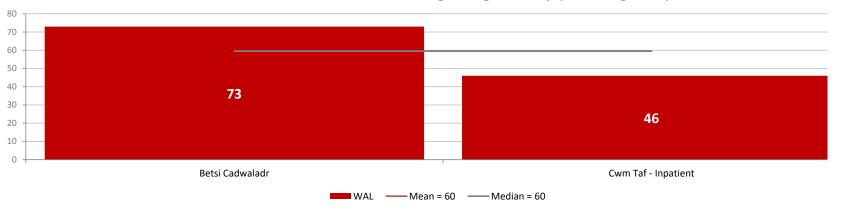
Two boards in Wales have CYP inpatient beds. CYP average lengths of stay in Betsi Cadwaladr were 73 days (adult acute 29 days). Cwm Taf had average lengths of stay for children and young people of 46 days (adult acute 26 days).

Overall the mean average was 60 days, a decrease from the mean average of 65 days in 2020/21.

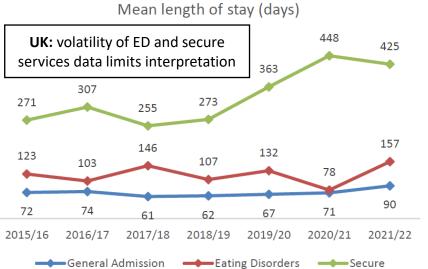






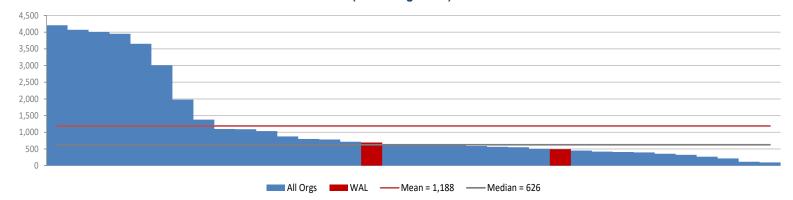




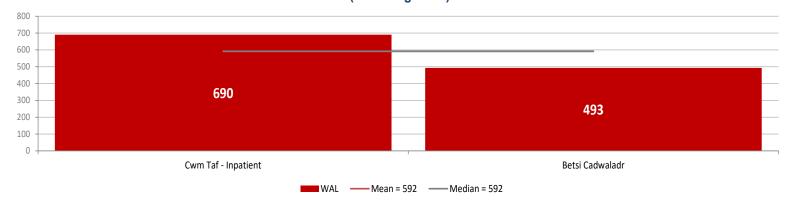


Use of restraint

General Admission CYPMHS: Number of incidents of use of restraint in 2021/22 per 10,000 OBDs (excluding leave)



General Admission CYPMHS: Number of incidents of use of restraint in 2021/22 per 10,000 OBDs (excluding leave)



In the UK there was a mean average of 1,188 (median = 626) uses of restraint per 10,000 OBDs (excluding leave) in 2021/22. Use of restraint had increased by 37% from 867 (median = 698) uses of restraint per 10,000 OBDs (excluding leave) in 2020/21.

There was a mean average of 85 uses of prone restraint per 10,000 OBDs, this represented a 38% decrease from 2020/21.

Wales had a lower rate of use of restraint at a mean average of 592 per 10,000 OBDs (excluding leave). This was a 45% reduction from 2020/21.

For prone restraint, Wales average 6 uses of prone restraint per 10,000 OBDs. This has remained stable from 2020/21.



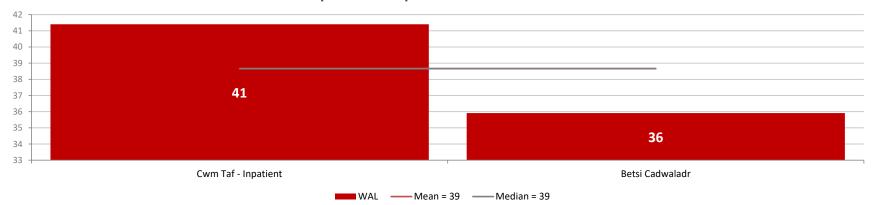


Inpatient workforce





Total Inpatient WTE per 10 beds at 31st March 2022





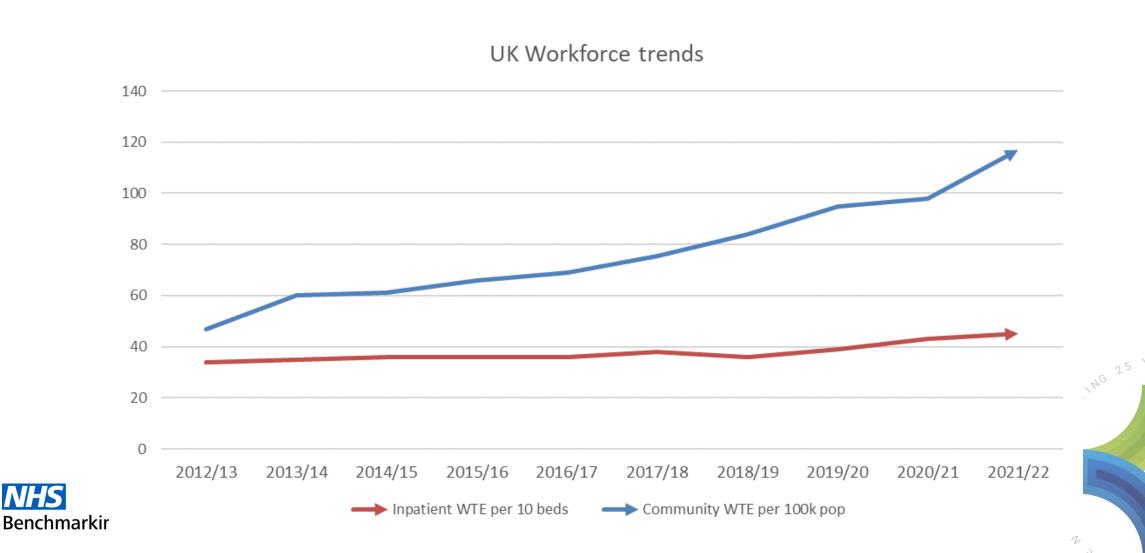
In the UK there was a mean average of 45 WTE per 10 CYP beds. This was an increase from 43 WTE per 10 CYP beds in 2020/21.

Cwm Taf and Betsi Cadwaladr reported inpatient workforce below the UK average at 41 WTEs and 36 WTEs respectively. The mean average was 39 WTEs and this represented a marginal increase from 38 WTEs per 10 CYP beds in 2020/21.



UK changes in workforce

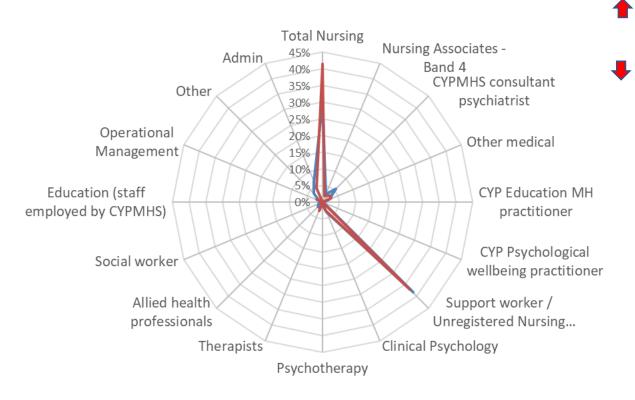
The chart below shows the trend in the children's and young people's workforce in the UK from 2012/13 to 2021/22. It shows that both the inpatient and community workforce have increased over time, however the community workforce has grown at a quicker rate. The magnitude of the increase in 2021/22 is in part the result of new participants and data submitted to the benchmarking project this year.



Inpatient CYPMHS workforce profile

The radar chart and table show the workforce profile for total inpatient beds. When compared to the UK position Wales has a greater proportion of total nursing staff, however a lower proportion of consultant psychiatrists.

Inpatient CYPMHS staff discipline mix



—All participants ——Wales

Discipline	All participants	Wales
Total Nursing	30%	41%
Nursing Associates - Band 4	3%	2%
CYPMHS consultant psychiatrist	6%	3%
Other medical	2%	3%
CYP Education MH practitioner	0%	0%
CYP Psychological wellbeing practitioner	0%	0%
Support worker / Unregistered Nursing Staff	38%	37%
Clinical Psychology	3%	3%
Psychotherapy	1%	1%
Therapists	2%	3%
Allied health professionals	2%	1%
Social worker	1%	1%
Education (staff employed by CYPMHS)	0%	0%
Operational Management	1%	2%
Other	4%	0%
Admin	7%	5%

Cost per bed & cost per admission

The table below compares the cost per bed and cost per inpatient episode for the general admissions CYPMHS beds and secure CYPMH beds. The table shows that for cost per bed Wales were below the UK average in 2021/22. Costs per inpatient episode reduced in Wales in 2021/22, this was due to a 29% increase in the number of inpatient episodes and a 5% increase in total costs of services.

	Cost per bed		Cost per inpatient episode	
	2020/21	2021/22	2020/21	2021/22
General Admission	UK: £288,419	UK: 325,411	UK: £74,086	UK: £114,956
CYPMHS	Wales: £222,338	Wales: 231,403	Wales: £83,982	Wales: £64,400
Secure CYPMHS	UK: £402,472	UK: 487,490	UK: £723,205	UK: £720,943





Summary and Key Findings

We would like to express our thanks to all Health Boards in Wales for their contributions to the 2021/22 mental health benchmarking process during what continues to be a challenging year for the NHS.

There was comprehensive UK participation in the annual benchmarking project for the first time this year with full participation from Scottish Health Boards. We adopted a pragmatic approach to data analysis to account for the increased volume of data received this year, i.e. new data submitted this year for the first time. Where there was a material impact of increased data submissions this has been referenced in the report.

Inequalities continue to be evident across services with over- and under-representation of patients from minority ethnic groups in inpatient and community services although the interpretation of ethnicity data is limited due to data quality and completeness issues. Continual improvement in the quality and completeness of ethnicity data should continue to be a focus.

Key findings for community services

- Referrals to Wales CMHTs have increased by 39% in 2021/22 when compared to 2020/21 and are higher when benchmarked per 100,000 population to the rest of the UK. Referral rates vary by health board and range from 6,424 (mean) per 100,000 population in Cardiff and Vale to 3,504 (mean) per 100,000 population in Swansea Bay.
- Waiting lists for 1st appointments are higher in Wales than the UK with an average of 1,309 CYP per 100,000 population waiting for a 1st appointment compared to an average of 918 CYP per 100,000 population waiting for 1st appointment in the UK.
- Caseloads for CYPMH services were higher in Wales than the UK position at 2,425 children and young people on caseload per 100,000 population. This is compared to 2,240 children and young people on caseload per 100,000 population at 31st March 2022 in the UK. In the UK caseloads per 100,000 population have increased in 2020/21 and 2021/22. In Wales there was a 39% increase between 2019/20 and 2020/21, however, caseloads have remained stable in 2021/22.
- Contacts for CYPMH services were lower in Wales when compared to the UK position. The mean average in Wales was 17,908 contacts per 100,000 population compared to a mean average of 30,209 per 100,000 population in the UK. Contacts in Wales reduced by 8% between 2019/20 and 2020/21 and then reduced by a further 7% between 2020/21 and 2021/22. It should be noted that there may be issues with data quality and completeness impacting on the data in Wales.



Summary and Key findings (cont'd)

Key findings for Community Services (cont'd)

- Welsh health boards employed a mean average of 135 WTEs per 100,000 population in community services. This was above the UK mean average (117 WTEs) and represents a 14% increase from the 118 WTEs per 100,000 population employed in 2020/21.
- Costs for CYPMH community services in Wales were higher than the UK average (£7.7m) at a mean of £8.2 million. This was an increase from £7.2 million in 2020/21. There is large variation in costs between boards, costs ranged from £2.4 million at Hywel Dda per 100k population to £14.9 million per 100k population at Betsi Cadwaladr, which was one of the highest reported costs in the UK. Costs per contact were also higher in Wales than in the UK overall at a mean average of £519 per contact compared to £292 per contact in the UK.

Key findings for CYPMH inpatient services

- Bed occupancy for general admission beds was 51% in Wales, lower than the average of 69% in the UK.
- Average lengths of stay in Wales are, on average, shorter than in the UK as a whole. CYP average lengths of stay in Betsi Cadwaladr were 73 days and in Cwm Taf had average lengths of stay for children and young people of 46 days. This compares to a UK mean average of 90 days.
- Welsh health boards reported a lower level of the use of restraint when compared to the UK overall at a mean average of 592 per 10,000 occupied bed days. The UK mean average for this indicator was 1,188 uses of restraint per 10,000 occupied bed days. For prone restraint, Wales average 6 uses of prone restraint per 10,000 occupied bed days in the UK overall.
- In 2021/22 costs per bed and per inpatient episode were lower in Wales when compared to the UK overall. Costs per bed increased in 2021/22 to £231,402 from £222,388 in 2020/21. In contrast costs per inpatient episode reduced from £83,982 in 2020/21 to £64,400 in 2021/22, this is due to a 29% increase in the number of inpatient episodes and a 5% increase in total costs of services.

We hope that the annual benchmarking process in 2021/22 has provided useful intelligence to support local service provision, transformation and quality improvement activities. NHS Benchmarking Network will also continue to produce the Mental Health, Learning Disability and Autism Services Tracker to provide members with contemporaneous data on key ARS metrics throughout the year.

Please contact either Kirsten Windfuhr (k.windfuhr@nhs.net) or Alison Worden (a.worden@nhs.net) with further queries or comments about this report.

