Hillingdon's Child and Adolescent Mental Health Performance

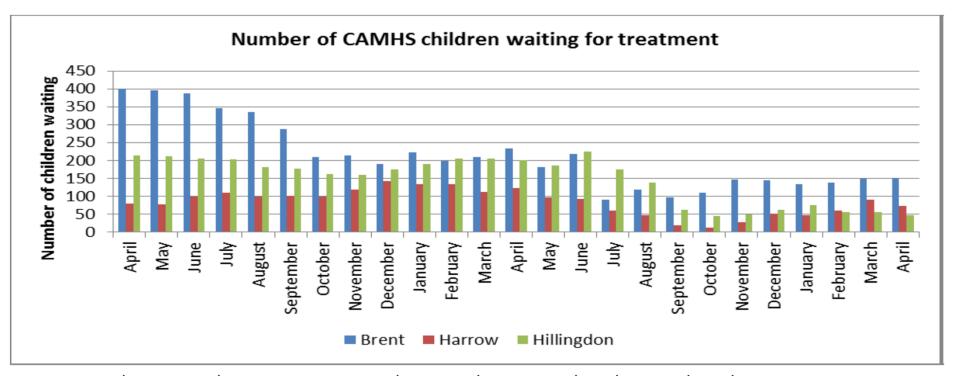
January 2017





HCCG Month 12 Integrated Performance Report (CAMHs) CNWL Report

Mental Health - CAMHS	Frequency	Threshold (month)	Prev month	Month 12	YTD
CAMHS - 1st Appt. DNA Rates	Monthly	<15%	8.7%	12.6%	11.1%
CAMHS -FU Appt. DNA Rates	Monthly	<15%	9.1%	14.2%	13.1%
Outcome measure completed on acceptance	Monthly	85%	86.2%	86.1%	91.7%
Outcome measure completed on discharges	Monthly	80%	80%	80%	81.1%
Outcome measure improvement	Monthly	>60%	75%	7 5%	71.7%
CAMHS Eating Disorder - Urgent Referrals seen within 1 week.	Monthly	100%	100%	No Activity	77.8%
CAMHS Eating Disorder – Routine Referrals seen within 4 weeks	Monthly	>95%	40%	100%	72%
CAMHS 18 weeks waiting times	Monthly	85%	100%	95.7%	75.8%

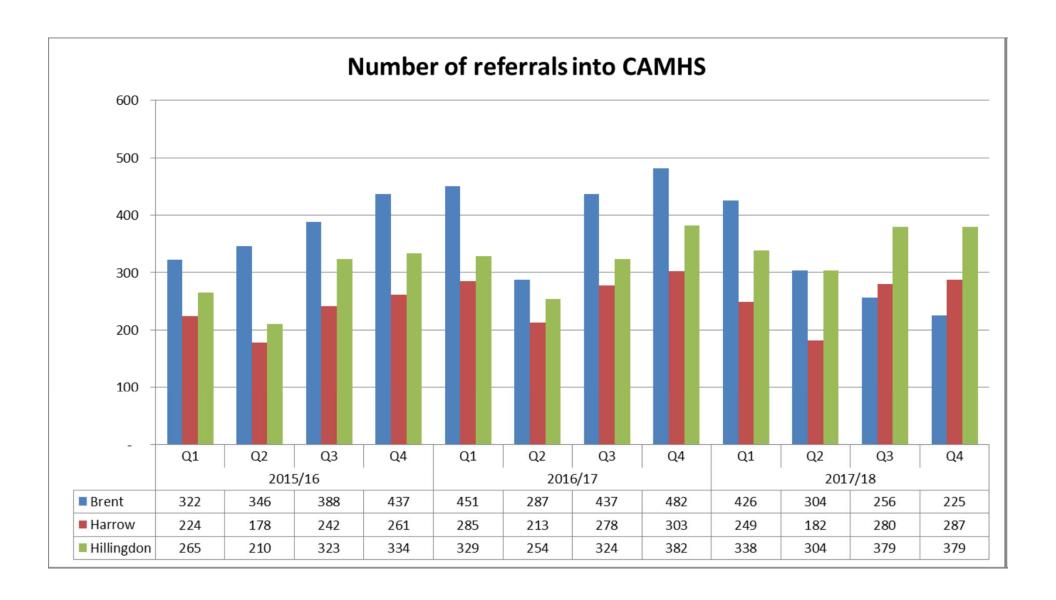


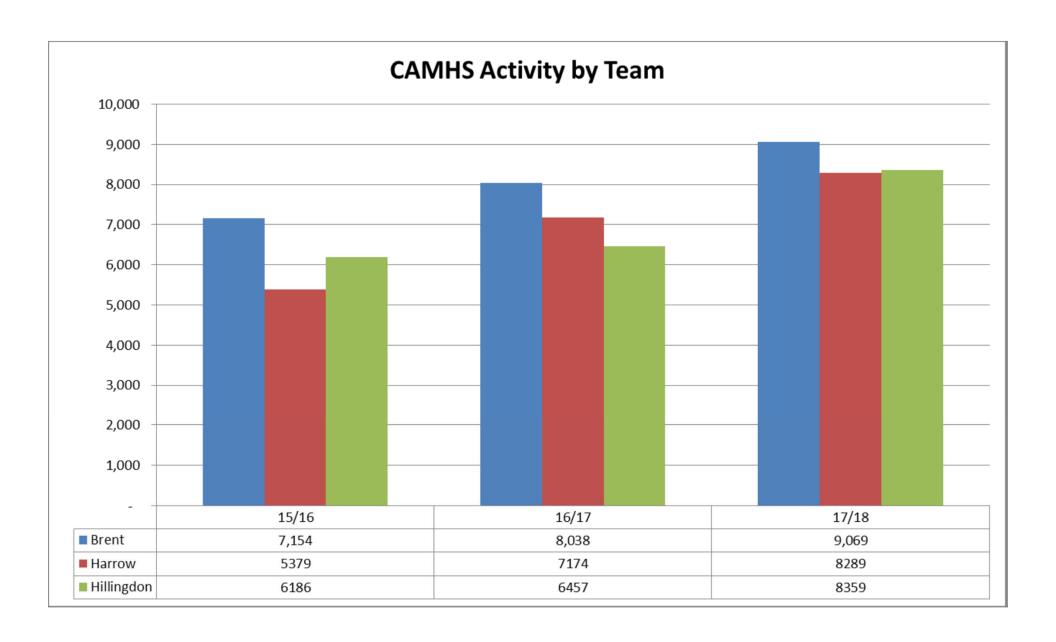
In order to meet the waiting time target the service has increased productivity through:

- · Increasing capacity for face to face sessions in teams
- · Increasing patient throughput through roll out of evidence based care pathways
- Stopping the clock more quickly through improved recording and first treatment interventions delivered more quickly

In addition to the focus on waiting times CNWL is also working on a number of additional transformation projects. These are:

- · Brief Treatment and Intervention
- Redesign of core CAMHS
- T4 New Models of Care
- Development of a 24/7 intensive Community Support Service
- Piloting Child Wellbeing Practitioners (CWP)





Month 12 CAMHS performance (CNWL)

Local Quality Requirements						TRUST TOTAL		BHH FEDERATION	
NHS Domain	Category	Quality Requirement	Description	Reporting Frequency	Threshold	CENTRAL & NORTH WEST LONDON NHS FOUNDATION TRUST		NHS HILLINGDON CCG	
						In mth/qtr	YTD	In mth/qtr	YTD
Domain 2: Enhancing the quality of life of people with long	DNA	CAMHS DNA 1st appointments	% DNA for 1st appointments	Monthly	<15%	10.2%	11.0%	12.6%	11.1%
		CAMHS DNA follow-up appointments	% DNA for Follow Up appointments	Monthly	<15%	11.9%	11.1%	14.2%	13.1%
Domain 3: Helping people to recover from episodes of ill-health or following injury	CAMHS Eating Disorder	Urgent Referrals seen within 1 week	% of CYP with ED (urgent cases) referred with a suspected ED will access NICE concordant treatment within 1 week of referral	Monthly	100%	66.7%	83.3%	NO ACTIVITY	77.8%
		Routine Referrals seen within 4 weeks	% of CYP referred (routine cases) with suspected ED that started treatment within 4 week of referral in the reporting period	Monthly	>95%	100.0%	72.9%	100.0%	72.0%
	Outcome Measures	Outcome measure completed on acceptance	% of CYPIAPT/ CAMHS Outcome Research Consortium (CORC) measure completed for patients accepted into the service	Monthly	85%	92.3%	91.4%	86.1%	91.7%
		Outcome measure completed on discharges	% of appropriate CYPIAPT/ CAMHS Outcome Research Consortium (CORC) measure completed for patients discharged from the service	Monthly	80%	70.8%	81.7%	80.0%	81.1%
		Outcome measure improvement	% of young people discharged with CYPIAPT/ CAMHS Outcome Research Consortium (CORC) measure showing improvement between acceptance and discharge	Monthly	>60%	72.5%	73.4%	75.0%	71.7%
nain 5: Infing that ple have a tive erience of	Appointments	Location - 1st appointments	% of first appointments to be offered in locations other than CAMHS clinic buildings, excluding eating disorder service	Quarterly	>10%	28.9%	27.1%	25.5%	20.5%
		Location - follow-up appointments	% of follow up appointments to be offered in locations other than CAMHS clinic buildings, excluding eating disorder service	Quarterly	>10%	26.0%	27.3%	20.8%	19.0%
	Waiting Times	CAMHS 18 weeks waiting times	% of CAMHS Referral to treatment under 18 weeks. This excludes neurodevelopmental services.	Monthly	85%	90.0%	85.3%	95.1%	75.8%