

Children and Young People's Mental Health Services Baseline Report

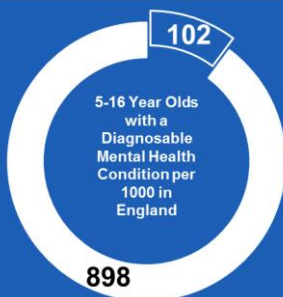
Local Transformation Plans Review 2015

January 2016



Summary

CYPMH Prevalence



CYPMH Staff

0.7 WTE

Approx average CYPMH clinical workforce WTE in England per 1000 0-17 year olds (Tier 2&3)



Approx average total CYPMH workforce WTE in England per 1000 0-17 year olds (Tier 2&3)

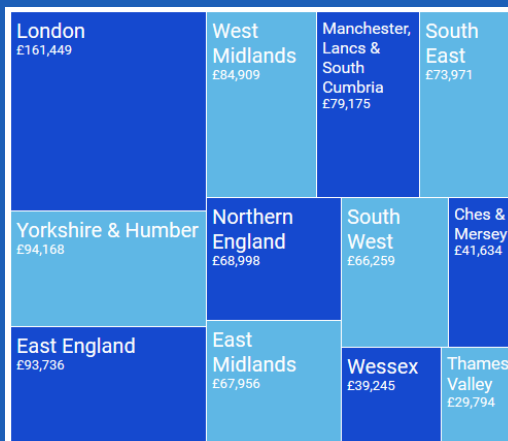
0.9 WTE

CYPMH Expenditure

Approx Average CYPMH spend per child general 0-17 years population

£78

Approximate annual spend on CYPMH 14/15



£273m

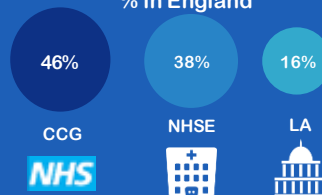
Approx annual NHSE spend on CYPMH 14/15



£628m

Approx annual spend on CYPMH 14/15 by CCGs and Local Authorities

Approx average annual CYPMH spend by funding source % in England



CYPMH Referrals

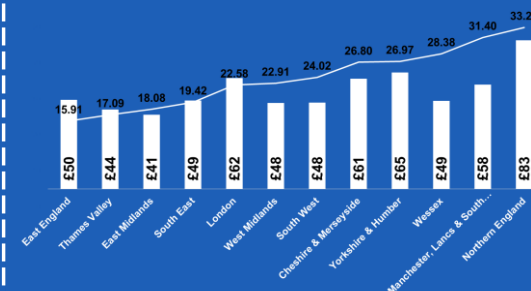
270k

Approx annual total CYPMH Referrals 14/15

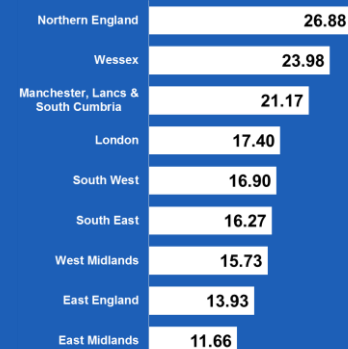
24

Approx average annual total CYPMH referrals per general population 1000 0-17 year olds (Tiers 2/3)

Approx Average annual total CYPMH referrals per general 1000 0-17 year olds compared to total CYPMH spend per 1000 0-17 year population £'000s (CCG and LA only)



Approx annual total CYPMH referrals accepted per general 1000 0-17 year olds in England



If England were a 1000 children and young people...

If England were a village of 1000 children and young people (CYP) of 0-17 year* olds there would be:

24 CYP referred into community services**

18 CYP referrals accepted into community services**

£78 spent on community and inpatient services*** per CYP

Of total CYPMH spend on community and inpatient services***, **46%** would come from CCGs, **38%** from NHSE and **16%** from Local Authorities

0.7 clinical CYPMH staff in community services**

* Population segments used are 0-17 years general population based on latest available ONS data

** Community services in relation to *referrals and work force* refers to Tier 3 or Tier 2/3 depending on the data provided by the local CYPMH system.

*** Community and Inpatient services in relation to *expenditure* includes Tier 2/3 **and** also NHSE spend on in-patient services (Tier 4)

Introduction

Background

- This report provides a summary of baseline data insights of Children and Young People's Mental Health Services (CYPMH) in England for 14/15 collected from the 2015 CYPMH Local Transformation Plans (LTP) submitted to NHS England (NHSE).
- The 2015 LTPs outlined how CCG and CCG consortia, working with partner agencies, would work together to improve services for children and young people with mental health problems across the whole care pathway. The plans include information about how partners would use new funding to improve children and young people's mental health and wellbeing. They will also be used to improve community based eating disorder (ED) services so CYP are helped earlier and fewer need in-patient care.
- In accordance with the need for full transparency outlined in *Future in Mind*, LTPs were also required to publish baseline information on current services. This presented a unique opportunity to look at CYPMH data on a regional and national level.
- This report forms the quantitative part of a wider project to review the 2015 LTPs, which will include a qualitative analysis on seven thematic areas in line with the themes set out in 2015 in *Future in Mind*.
- This project is being developed by NELCSU who have been commissioned by NHSE following consultation with system partners in the Departments of Health, Education and Justice and with the Association of Directors of Children's Services, the Local Government Association, Care Quality Commission, Health Education England and Public Health England.

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Introduction

Data Guidance

- The data for this baselining report was collected from 122 quantitative data reports that were submitted from 123 LTPs which were assured
- We also took data from other sources to build a national picture
- LTP areas outlined their current services including expenditure, referrals and workforce and this data was harvested to develop the insights in this report. A few plans did not break this data down further and have been excluded from the relevant quantitative insights
- The LTP areas collected, classified and interpreted data in different ways depending on how they define CYPMH locally. This makes it more difficult to make comparisons and understand trends and the data presented in this pack should be read with this warning in mind
- The data assumptions outlined on the next page should be considered alongside the data presented in the pack

Introduction

Assumptions and Caveats

General data assumptions

- Data is presented at a NHS Strategic Clinical Network (SCN) regional level. The assurance process was at DCO (Directorate of Commissioning and Operations) regional level
- The data presented here is for 14/15
- Due to joint submissions, each LTP consisted of 1-8 CCGs, but data has been normalised by per 1000 CYP population where necessary to enable comparisons
- For population, the mid-2013 ONS data estimates were used
- Population segments used are 5-16 years with a diagnosable mental health condition (based on latest available ONS data provided in LTPs) or 0-17 years general population. These age ranges compare different populations both in terms of age and whether affected by mental health conditions and therefore it is not possible to directly compare these two population segments in analyses. Therefore, this analysis set out in this pack use either the 5-16 years population or the 0-17 years population but do not use these together
- Expenditure, referral and workforce data were not broken down by age groups but provided as total figures relevant to the entire CYPMH population in that area (areas define this differently, please see note on page 4). However it should be noted that certain graphs compare total expenditure, referrals and workforce data to 5-16 years and general 0-17 years population segments as proxies for normalising the data
- The age bracket for the expenditure, referrals and workforce data was not always specified. This was assumed to be 0-17 years as, for most part, services cover 0-17 year olds. However, in some cases services offered might cease at 16, be transitional and/or cover 0-25 years
- For all data insights, a regional data quality information tab has been provided which indicates the percentage of CCGs (not LTPs) in that SCN who returned categorised data
- When data refers to “LA” and “CCG”, this analysis has broken down joint submission areas by their CCG and LA constituent parts (i.e. analysis not looking at Manchester LTP but at its three component CCGs)
- This report uses the language presented in the LTPs, such as the Tier systems, however there is a recognition that many areas are moving away from this system, for example 0-25 services, the THRIVE model

Introduction

Assumptions and Caveats

Needs data

- Needs data was extracted from LTPs which was based on latest 5-16 ONS data as this was the most consistent segment across LTPs. This was the most consistent prevalence data provided in LTPs
- Total population need (5-16 years with a diagnosable mental health condition) is based on JSNA's latest figures included in the LTPs. Where unavailable (19% of the LTPs), this was calculated based on 1/10 of the 5-16 population

Expenditure data

- All financial numbers are in £'000s
- The analysis included the expenditure that LTPs identified as community CYPMH spend. The majority of total expenditure data is Tier 3 but some areas define their CYPMH services differently locally (for example, as Tier 2/3)
- Tier 1 / universal services expenditure has been excluded
- The graphs indicate which expenditure data has been included e.g. NHSE, CCG and LA. Please refer to the notes for each individual graph
- In the LTPs, LA expenditure inclusion of PH and Education expenditure was variable with most cases excluding or breaking it out. Areas recognised PH and Education contribution to the CYPMH system but focused on providing data on services provided by MH practitioners. Due to the incomplete nature of PH and Education data, this has been excluded
- Northern England numbers are much higher than other SCNs as five CCGs (45% of total) expenditure data was estimated by disaggregating from Trusts' block contract service line which may lead to inflated figures
- Thames Valley and Wessex numbers should also be read with caution as the sample sizes of LTPs, CCGs and population these SCNs are much lower than other regions
- NHSE expenditure figures should be viewed as indicative only. Expenditure has been mapped to CCGs based on actuals where this information was available. For any expenditure unable to be

mapped directly to CCGs, specialised commissioning hubs have apportioned the expenditure using the most appropriate method available

Referrals data

Referrals data was mainly for Tier 3 or Tier 2/3 depending on the data provided by the local CYPMH system

Where total referrals are higher than total need, the data has been excluded as an outlier. This was the case in one instance for referrals for the Vale of York

- Some regions did not submit both total referrals and accepted referrals. As a result, total referrals and accepted referrals cannot be compared as a ratio or as a percentage as neither are complete

Additionally, Wessex and Thames Valley submitted less than 50% of data on total referrals accepted, and as a result were excluded from that particular analysis

- Additional outlier anomalies that were significantly distorting the analysis were taken out. This happened in two instances, South East referrals data was initially coming out as very low as a result of low figures from Surrey and Northern England was very high due to high figures from Durham

Workforce data

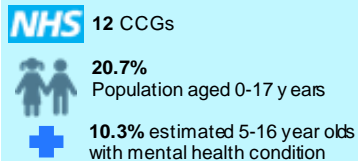
- Total workforce data has been analysed by clinical versus non-clinical (although not all LTPs provided this breakdown and instead just gave totals). Therefore, total workforce cannot be compared with clinical and non-clinical workforce
- Segmentation by profession (psychologist, nurse etc.) was not consistent enough to break down to this level of detail
- Total workforce is based on data provided. It was often not specified which services, tiers or organisation the workforce data related to but the analysis included the workforce that LTPs defined locally as their CYPMH workforce. Tier 1 and Tier 4 were excluded where this was provided separately

Introduction

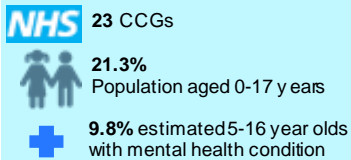
Strategic Clinical Network Regions

This is a map of the Strategic Clinical Network (SCN) regions which are used for the analysis in this report

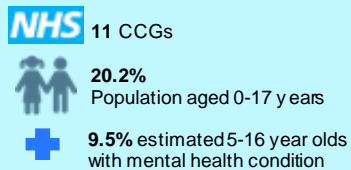
Cheshire & Merseyside



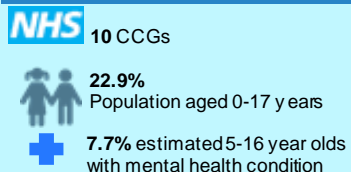
West Midlands



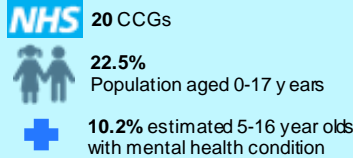
South West



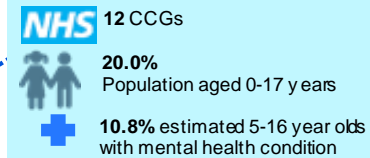
Thames Valley



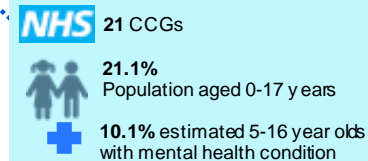
Manchester, Lancashire and Cumbria



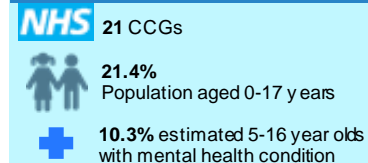
Northern England



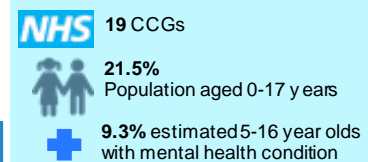
Yorkshire & Humber



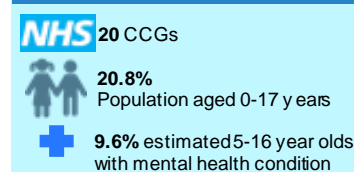
East Midlands



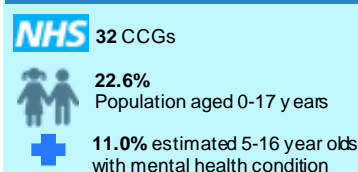
East of England



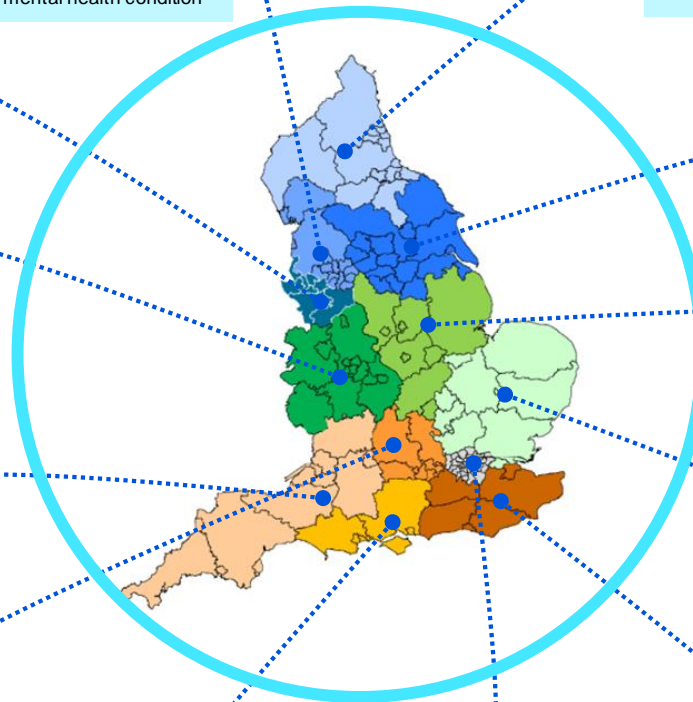
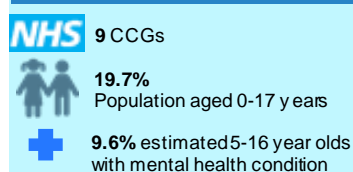
South East



London



Wessex



What is the prevalence of CYP with diagnosable MH conditions?

Mental Health Prevalence in Children and Young People

- Figure 1 shows the total population of 5-16 year olds with a diagnosable mental health conditions in England. This was taken from the LTPs and are the latest estimates based on the latest local population data in CCG JSNAs which are based on latest ONS population figures (years vary)
- It indicates that London, West Midlands and East England have the highest absolute total populations of 5-16 year olds with diagnosable mental health conditions in England
- Figure 2 adjusts this data to compare SCNs by analysing total prevalence per 1000 5-16 year old population. The average for England is 102, and this still shows that London has the highest mental health prevalence, but Northern England, East Midlands, Cheshire & Merseyside and Manchester, Lancs & Cumbria have an above average prevalence as well
- The data compares mental health prevalence with % of children in poverty and % 16-24 NEET (Not in Employment, Education or Training).
- The linear dotted line shows that there is some correlation as poverty and NEET % increases, prevalence also increases

Figure 1

Prevalence of diagnosable mental health conditions in 5-16 year olds by SCN in England as proportion of the total country prevalence

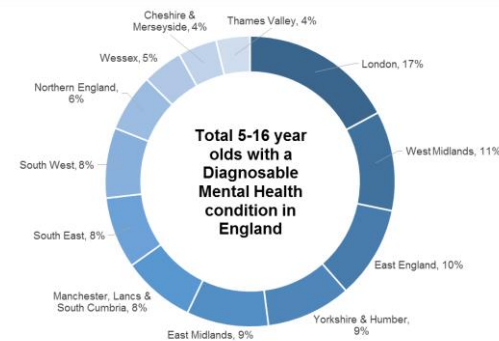
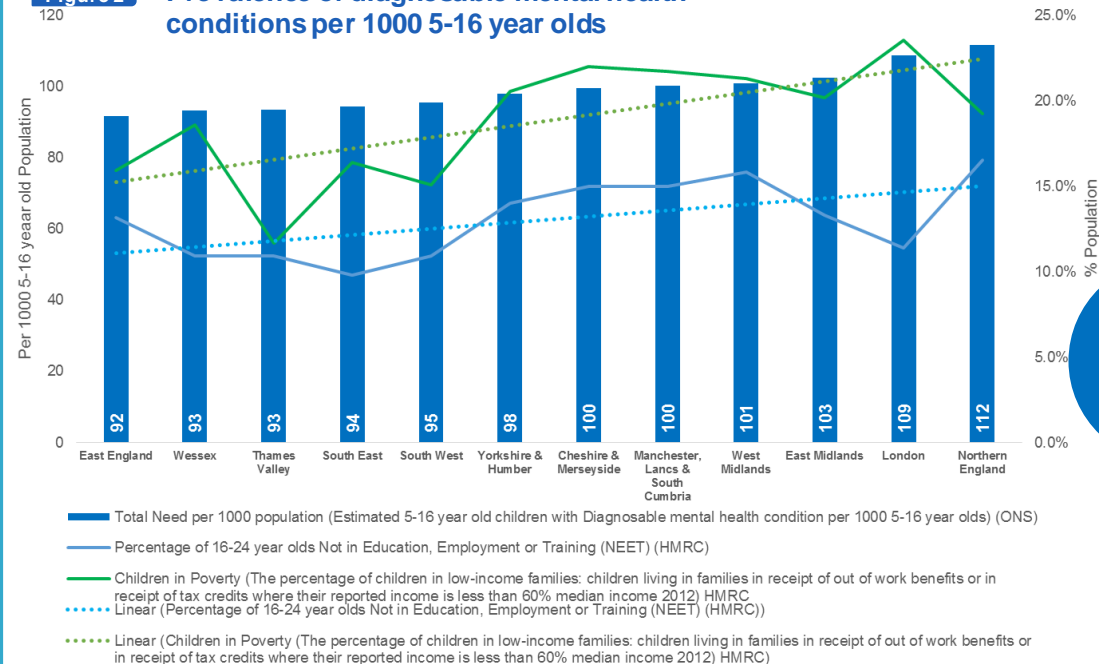


Figure 2

Prevalence of diagnosable mental health conditions per 1000 5-16 year olds



How much in total is spent on CYPMH?

Overall Expenditure

- Figure 3 outlines the total expenditure on CYPMH services for in England for 14/15. The analysis included the expenditure that LTPs identified as community CYPMH spend and NHSE Tier 4 specialised commissioning expenditure. The majority of total expenditure data is Tier 3 but some areas define their CYPMH services differently locally (for example, as Tier 2/3). Tiers 1 expenditure has been excluded
- Each square size corresponds to the relative size of expenditure of the whole. The highest spending region being London. CCGs and LA spent £628m and NHSE spent £273m (taking into account data completion)
- Figure 4 shows the average annual expenditure for each of the main organisations that fund direct CYPMH services in a local area. Total expenditure includes CCG, LA and NHSE data. The LA expenditure excludes universal services such as Public Health, Educational Psychology, Education, Health Visitors and School Nursing
- When data refers to "LA" and "CCG", this analysis has broken down joint submission areas by their CCG and LA constituent parts (i.e. analysis is not looking at Manchester LTP but at its three component CCGs)

Figure 3

Total annual CYPMH expenditure in England (CCG, LA and NHSE) for 14/15
£'000s

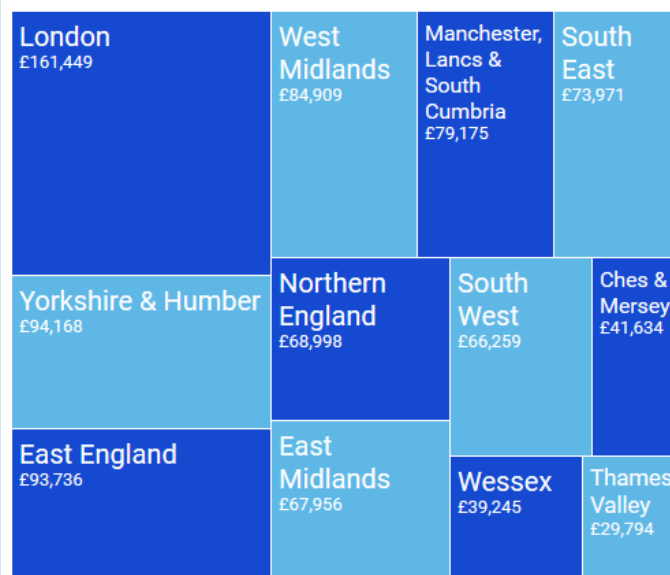


Figure 4

Average annual CYPMH spend by funding source % in England (including NHSE expenditure)
£'000s

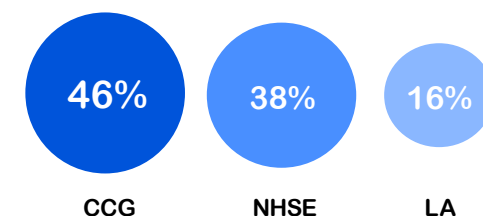
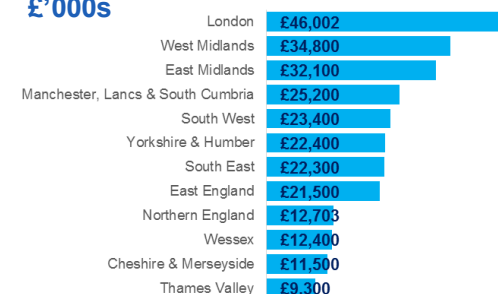


Figure 5

Annual NHSE Specialised Commissioning CYPMH spend 14/15
£'000s



Data Quality

Data completion % of LTPs total expenditure data

- 100% of total expenditure data
- 88% of CCG expenditure data
- 87% LA expenditure data
- 100% NHSE expenditure data

In the LTPs, inclusion of PH expenditure was variable with most cases excluding or breaking it out. Areas recognised PH contribution to the CYPMH system but focused on providing data on community services. Due to the

- incomplete nature of PH data, this has been excluded
- NHSE expenditure figures should be viewed as indicative only. Expenditure has been mapped to CCGs based on actuals where this information was available. For any expenditure unable to be mapped directly to CCGs, specialised commissioning hubs have apportioned the expenditure using the most appropriate method available

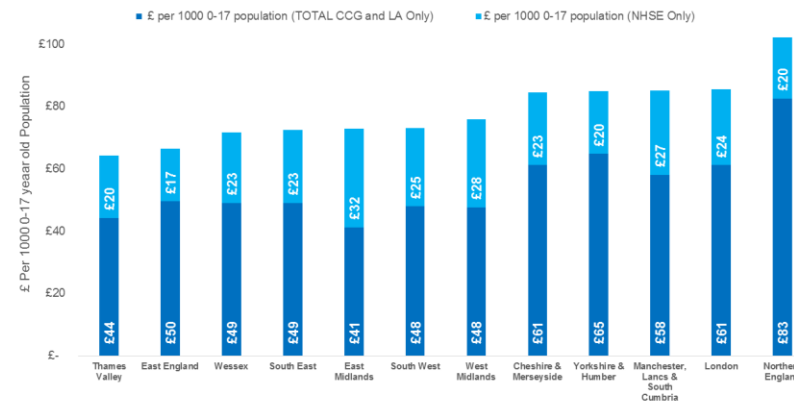
How much is spent on CYPMH per 1000 population?

Expenditure per 1000 population compared

- This page presents the total CYPMH expenditure normalised so that the SCNs can be compared by dividing the total CYPMH expenditure (excluding Tier 1) per 1000 0-17 years general population in Figure 6. It includes Tiers 2/3 and 4
- Figure 7 shows annual average community expenditure (CCG and LA only) per referral per 1000 0-17 general population £'000s. The total referrals and expenditure data here excludes NHSE tier 4
- When data refers to "LA" and "CCG", this analysis has broken down joint submission areas by their CCG and LA constituent parts (i.e. analysis is not looking at Manchester LTP but at its three component CCGs)
- Please note that Figure 6 is in £'000s
- Northern England numbers are much higher than other SCNs as five CCGs (45% of total) expenditure data was estimated by a disaggregation from their provider Trusts block contract service lines which may of inflated figures

Figure 6

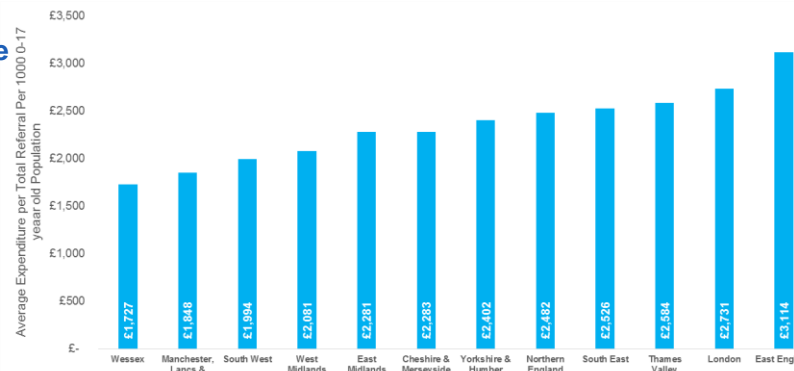
Annual total CYPMH expenditure per 1000 0-17 general population £'000s



England
Average
per child
£78

Figure 7

Annual average community expenditure (CCG and LA only) per referral per 1000 0-17 general population



England
Average
Community
Expenditure
per Referral
£2,338

Data Quality

- Data completion % of all LTP total expenditure data
 - Cheshire & Merseyside -100%
 - East England -100%
 - East Midlands -100%
 - London-100%
 - Manchester, Lancs & South Cumbria -100%
 - Northern England – 100%
 - South East -100%
 - South West – 100%
 - Thames Valley -100%
 - Wessex -100%
 - West Midlands -100%
 - Yorkshire & Humber -100%

How much on average is spent on CYPMH by funding source?

Average Expenditure by Funding Source compared

- Figure 8 shows the average annual CYPMH expenditure by CCG and Local Authority by SCN. This data was taken only when LTPs broke down expenditure by funding sources. NHSE expenditure has been excluded

- The chart shows that CCGs spend more on CYPMH services than Local Authority

- Northern England, South West, East England and London CCGs spend on average more than the rest of England. However Manchester, Lancs & South Cumbria, East England, South East and Yorkshire & Humber Local Authorities spend more than the rest of England

- This data only shows direct Tier 2 and 3 CYPMH services expenditure and as a result excludes Local Authority indirect universal services

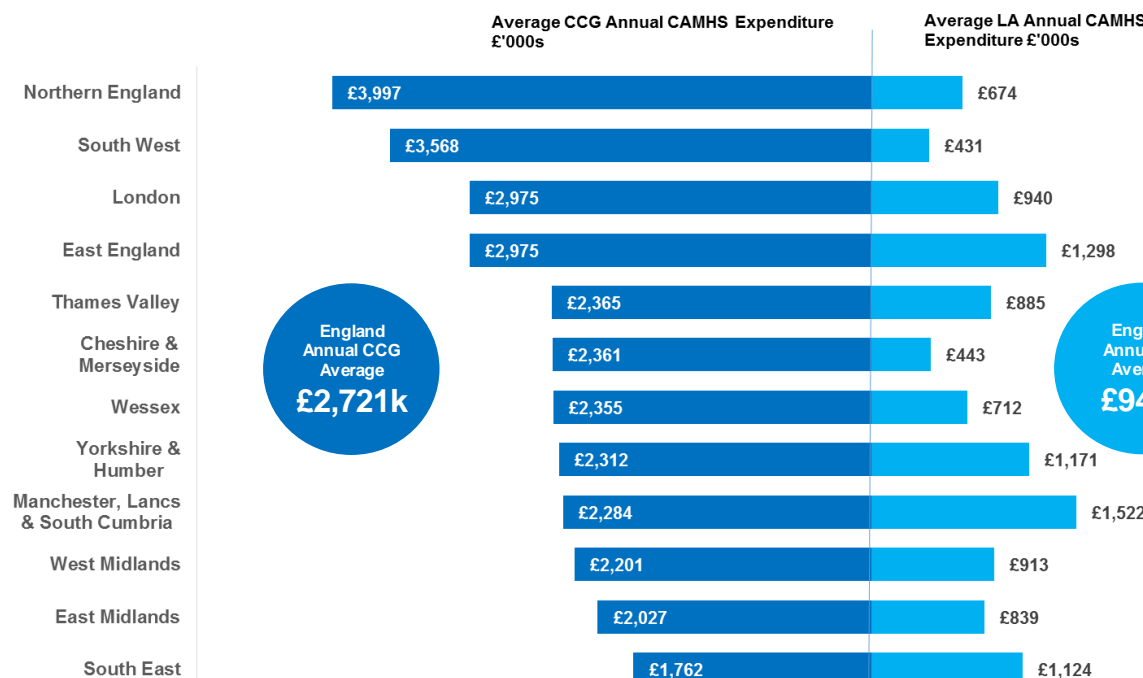
- When data refers to "LA" and "CCG", this analysis has broken down joint submission areas by their CCG and LA constituent parts (i.e. analysis is not looking at Manchester LTP but at its three component CCGs)

- Please note that Figure 8 is in £'000s

- Northern England numbers are much higher than other SCNs as five CCGs (45% of total) expenditure data was estimated by disaggregating from Trusts block contract service line which may of inflated figures

- East of England had under 50% CCG expenditure data, however an assumption was calculated by subtracting LA expenditure from total expenditure to develop an estimate from the remainder of CCG spend

Figure 8 Average annual CYPMH expenditure per CCG or LA by funding source by SCN (excluding NHSE expenditure)



Data Quality

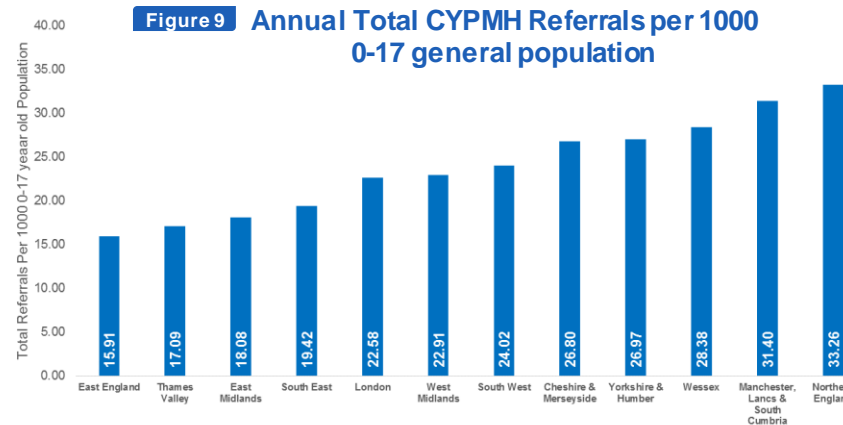
- Data completion % of all CCGs
 - Cheshire & Merseyside- CCG – 92% LA 67%
 - East England – CCG – 37% LA 74%
 - East Midlands – CCG 86% LA 86%
 - London – CCG 94% LA 94%
 - Manchester, Lancs & South Cumbria – CCG 100% LA 100%
 - Northern England – CCG 75% LA 67%
 - South East – CCG 100% LA 100%

- South West – CCG 91% LA 91%
- Thames Valley – CCG 100% LA 60%
- Wessex – CCG 89% LA 89%
- West Midlands – CCG 91% LA 91%
- Yorkshire & Humber – CCG 95% LA 95%

How many CYP are referred per 1000 population?

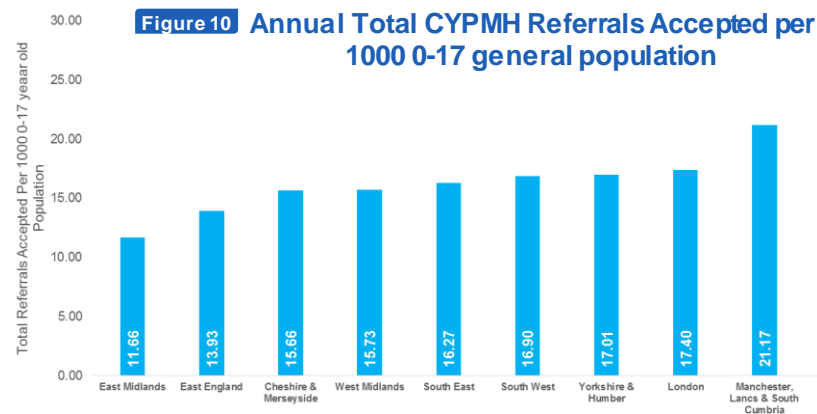
Total and Accepted Referrals per 1000 population compared

- The two figures on this page present the Total CYPMH Referrals normalised so that the SCNs can be compared. This has been done by dividing the total CYPMH referrals per 1000 0-17 aged general population and per 1000 5-16 aged population with diagnosable mental health conditions using latest estimates from LTPs and JSNAs
- The data does not include Tier 1 and Tier 4 referrals
- Some regions did not submit both total referrals and accepted referrals. As a result, total referrals and accepted referrals cannot be compared as a ratio or as a percentage as neither are complete. However from the 2015 CAMHS Benchmarking report created by the Benchmarking Network, approximately 79% of all referrals were accepted in 14/15
- There was an approximate total of 270,000 total referrals and 198,000 referrals accepted in 14/15. These are approximated figures as the data was incomplete and as a result these figures have been extrapolated from the data collected
- Figure 9 shows the total CYPMH referrals compared by SCN and Figure 10 shows total referrals accepted, both by per 1000 0-17 aged general populations
- Wessex and Thames Valley Accepted Data was below 50% and was excluded
- Where total referrals are significantly higher (more than 20%) than total need, the data has been excluded as an outlier. This was the case in one instance for referrals for the Vale of York
- Additional distorting outlier anomalies (Durham and Surrey) were removed



England Average
24

England approx. total referrals
270k



England Average
18

England approx. total referrals accepted
198k

Data Quality

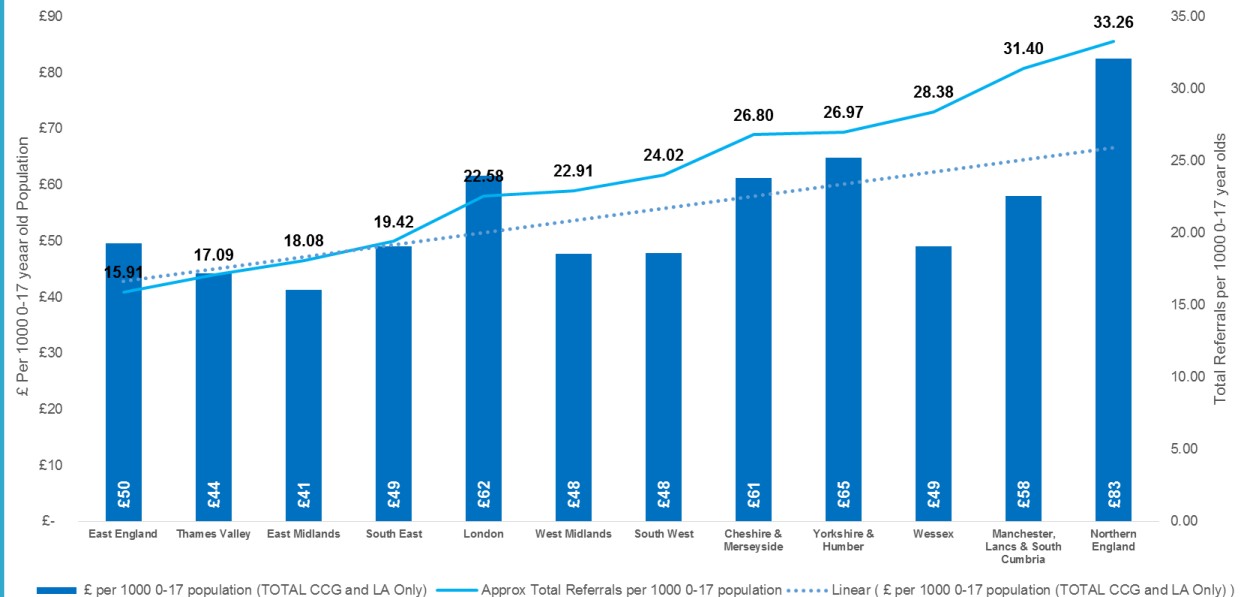
- Data completion % of all CCGs
 - Cheshire & Merseyside- TR 92% TRA 58%
 - East England – TR 100% TRA 79%
 - East Midlands – TR 67% TRA 90%
 - London – TR 94% TRA 81%
 - Manchester, Lancs & South Cumbria – TR 80% TRA 95%
 - Northern England – TR 92% TRA 83%
 - South East – TR 100% TRA 50%
- South West – TR 73% TRA 73%
- Thames Valley – TR 70% TRA 30%
- Wessex – TR 100% TRA 33%
- West Midlands – TR 100% TRA 65%
- Yorkshire & Humber – TR 95% TRA 76%

How does CYPMH referrals and expenditure relate?

Total Referrals and Total CYPMH Expenditure compared

- Figure 11 brings total CYPMH expenditure and total CYPMH referrals together for comparison
- The chart again looks at total referrals and total expenditure per 1000 0-17 aged general population
- The data does not include Tier 1 and Tier 4 referrals. As a result, the total expenditure is for CCG and LA only as Tier 4 NHSE expenditure does not apply to these referrals
- The linear dotted line shows that there is a correlation as total referrals increases, expenditure also increases
- This correlation is also the case if compared to (i) 5-16 years population with a diagnosable mental health condition and (ii) referrals accepted
- Please note that Figure 11 is in £'000s
- Northern England numbers are much higher than other SCNs as five CCGs (45% of total) expenditure data was estimated by disaggregating from Trusts block contract service line which may of inflated figures

Figure 11 Annual Total CYPMH referrals compared to expenditure per 1000 0-17 general population £'000s (CCG and LA only)



Data Quality

- Data completion % of all CCGs (TR: Total Referrals)
 - Cheshire & Merseyside- TR 92%
 - East England – TR 100%
 - East Midlands – TR 67%
 - London – TR 94%
 - Manchester, Lancs & South Cumbria – TR 80%
 - Northern England – TR 92%
 - South East – TR 100%
 - South West – TR 73%

- Thames Valley – TR 70%
- Wessex – TR 100%
- West Midlands – TR 100%
- Yorkshire & Humber – TR 95%

What is the workforce in CYPMH?

Overall Total Workforce WTE

- Figures 12 and 13 present CYPMH workforce data for Tiers 2 and 3. It was often not specified which services, tiers or organisation the workforce data related to but the analysis included the workforce that LTPs defined locally as their CYPMH workforce. Tier 1 and Tier 4 were excluded where this was provided separately
- The total expenditure is for CCG and LA only as Tier 4 NHSE expenditure does not apply to these referrals
- Total workforce data has been analysed by clinical versus non-clinical (although not all LTPs provided this breakdown and instead just gave totals). Therefore total workforce cannot be compared with clinical and non-clinical workforce
- There were approximately 9,000 WTE working in CYPMH Tiers 2 and 3 in 14/15
- Figure 12 shows the average CYPMH workforce by WTE in each of the SCNs per 1000 0-17 general population and compares this to total CYPMH spend for the same population cohort.
- Figure 13 shows the split between clinical and non-clinical workforce in England for a typical area per 1000 0-17 general population
- The linear dotted line shows that there is a correlation as total WTE increases, expenditure also increases
- Northern England numbers are much higher than other SCNs as five CCGs (45% of total) expenditure data was estimated by disaggregating from Trusts block contract service line which may of inflated figures

Figure 12 Average CYPMH workforce WTE compared to expenditure per 1000 0-17 general population (Tier 2&3) £'000s

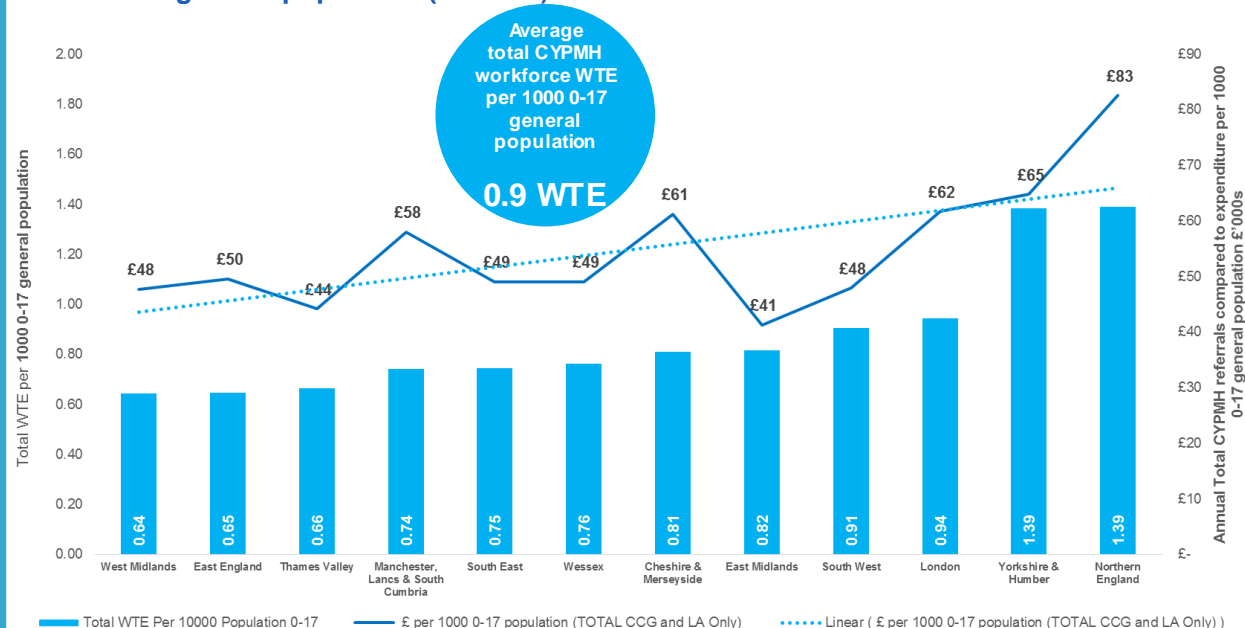
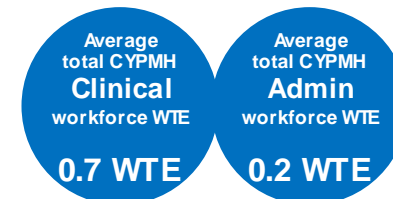


Figure 13 Average clinical and non-clinical CYPMH workforce WTE in England per 1000 0-17 general population



Data Quality

- Data completion % of all CCGs
 - Cheshire & Merseyside- Total WTE 100%
 - East England – Total WTE 100%
 - East Midlands – Total WTE 100%
 - London – Total WTE 100%
 - Manchester, Lancs & South Cumbria – Total WTE 100%
 - Northern England – Total WTE 100%
 - South East – Total WTE 100%
- South West – Total WTE 100%
- Thames Valley – Total WTE 100%
- Wessex – Total WTE 100%
- West Midlands – Total WTE 100%
- Yorkshire & Humber – Total WTE 100%

Appendices

Local Transformation Plan Areas and CCGs (1)

- Data for this baseline overview has been sourced from the 2015 CYPMH LTP submitted to NHSE
- The tables on the next two pages outline the areas that make up the SCNs across England
- Each of these areas submitted a LTP either individually as a CCG or jointly in collaboration with other neighbouring CCGs
- Joint plans are indicated in **dark blue**

Cheshire & Merseyside



1. Warrington
2. Liverpool
3. Eastern Cheshire and South Cheshire
4. Halton
5. St Helens
6. West Cheshire and Vale Royal
7. Wirral
8. Knowsley
9. Southport, Formby & South Sefton

Yorkshire & Humber



10. East Riding of Yorkshire
11. Calderdale
12. Doncaster
13. Sheffield
14. Greater Huddersfield & North Kirklees
15. Wakefield
16. Airedale, Wharfedale & Craven and Bradford City & District
17. Rotherham
18. Barnsley
19. North East Lincolnshire
20. North Lincolnshire
21. Vale of York
22. Harrogate & Rural District
23. Hull
24. Leeds (North, South & East and West)
25. Scarborough and Ryedale

West Midlands



26. Worcestershire (South Worcestershire, Redditch & Bromsgrove, Wyre Forest)
27. Sandwell
28. Staffordshire (South East, Stoke, Cannock East, Stafford and Surrounds and North)
29. Shropshire and Telford & Wrekin
30. Solihull
31. Birmingham (South & Central and CrossCity)
32. Coventry & Warwickshire (Coventry & Rugby, Warwickshire North and South Warwickshire)
33. Wolverhampton
34. Herefordshire
35. Walsall
36. Dudley

South East



37. Medway
38. Kent (Incl Ashford, Canterbury & Costal, Dartford, Gravesham and Swanley, South Kent Coast, Swale, Thanet, West Kent)
39. East Sussex (Incl Eastbourne, Hailsham and Seaford, Hastings & Rother and High Weald Lewes Havens)
40. West Sussex (Incl Coastal West Sussex, Crawley, Horsham & Mid Sussex)
41. Surrey (Incl East Surrey, Guildford, North West Surrey, Surrey Downs, Surrey Heath)
42. Brighton & Hove

South West



43. Bath and North East Somerset
44. Wiltshire
45. Gloucestershire
46. Swindon
47. North Somerset
48. Somerset
49. Bristol
50. NEW Devon
51. South Gloucestershire
52. South Devon & Torbay
53. Kernow

Local Transformation Plan Areas and CCGs (2)

Wessex



- 54. Dorset
- 55. Portsmouth
- 56. Southampton
- 57. Hampshire Cluster (Fareham and Gosport, NE Hampshire, N Hampshire, SE Hampshire, W Hampshire)
- 58. Isle of Wight

Manchester, Lancashire & South Cumbria



- 59. Lancashire (incl Blackburn, Blackpool, Chorley & South Ribble, East Lancs, Fylde & Wyre, Greater Preston, North Lancs, and West Lancs)
- 60. Wigan
- 61. Bolton
- 62. Heywood, Middleton & Rochdale
- 63. Manchester (North, South and Central)
- 64. Bury
- 65. Oldham
- 66. Salford
- 67. Stockport
- 68. Tameside & Glossop
- 69. Trafford

East England



- 70. Norfolk and Waveney (S Norfolk, N Norfolk, Norwich, W Norfolk and Great Yarmouth & Waveney)
- 71. Suffolk (West Suffolk, Ipswich and East Sussex)
- 72. Hertfordshire (Herts Valley, East and North)
- 73. Cambridgeshire & Peterborough
- 74. Essex (W Essex, NE Essex, Mid Essex, Basildon & Brentwood, Thurrock, Southend and Castle Point)
- 75. Bedfordshire and Luton

Northern England



- 76. South Tyneside
- 77. Northumberland
- 78. Newcastle-Gateshead
- 79. North Tyneside
- 80. Sunderland
- 81. Darlington
- 82. CNE Joint N Durham and DDES
- 83. Hartlepool and Stockton
- 84. South Tees
- 85. Cumbria
- 86. Hambleton Richmondshire & Whitby

Thames Valley



- 87. Berkshire West (incl Newbury and District, North & West Reading, South Reading and Wokingham)
- 88. Oxfordshire
- 89. Buckinghamshire (incl Aylesbury and Chiltern)
- 90. Berkshire East (Incl Bracknell & Ascot, Slough and Windsor, Ascot and Maidenhead)

London



- 91. Barnet
- 92. Camden
- 93. Wandsworth
- 94. Barking and Dagenham
- 95. Bromley
- 96. Croydon
- 97. Havering
- 98. Islington
- 99. Merton
- 100. Newham
- 101. NW London (Incl Brent, Harrow, Hammersmith & Fulham, West London, Westminster, Hounslow, Hillingdon and Ealing)
- 102. Redbridge
- 103. Richmond
- 104. Tower Hamlets
- 105. Waltham Forest
- 106. City and Hackney
- 107. Enfield
- 108. Haringey
- 109. Kingston
- 110. Lambeth
- 111. Lewisham
- 112. Southwark
- 113. Sutton
- 114. Bexley
- 115. Greenwich

East Midlands



- 116. Milton Keynes
- 117. Lincolnshire (South West, South, East and West)
- 118. Leicestershire (West, City and East & Rutland)
- 119. Northamptonshire (Nene and Corby)
- 120. Nottinghamshire (incl West, North & East, Rushcliffe, Newark & Sherwood and Mansfield & Ashfield and Bassetlaw)
- 121. Derbyshire & Derby City (North, Southern, Erewash and Hardwick)
- 122. Nottingham City

