

**STATISTICAL PRESS NOTICE**  
**Children and Young People with an Eating Disorder Waiting Times**  
**Q2 2017-18**

The following experimental statistics were published today by NHS England:

Quarterly Children and Young People with an Eating Disorder Waiting Times for Q2 2017-18.

**The main findings for Q2 2017-18 were:**

- 71.0% of patients started urgent treatment within one week in Q2 2017-18 (203 out of 286 patients started treatment within one week)
- 82.4% of patients started routine treatment within four weeks in Q2 2017-18 (1,099 out of 1,333 patients started treatment within four weeks)
- The number of incomplete urgent pathways (patients waiting for urgent treatment) at the end of Q2 2017-18 was 39. Of these 23 were waiting for more than one week.
- The number of incomplete routine pathways (patients waiting for routine treatment) at the end of Q2 2017-18 was 489. Of these 194 were waiting for more than four weeks.

Detailed reports with information by provider and commissioner can be found via the following link:

<http://www.england.nhs.uk/statistics/statistical-work-areas/cyped-waiting-times/>

The back data from Q1 2016-17 – Q1 2017-18 are also published. The full set of revised data can be found on the above link.

## Notes to Editors

### 1. Children and Young People with an Eating Disorder (CYP ED) Waiting Time Standard

NHS England has outlined a clear commitment to driving a more equal response across mental and physical health. A key element of this is ensuring that people have timely access to evidence-based and effective treatment. This vision outlined in [Achieving Better Access for Mental Health Services by 2020](#), is supported by the ambitions set out in [Future in Mind \(2015\)](#) and the publication of the [Eating Disorder standard and pathway \(2015\)](#). NHS England committed to improving access to community evidence-based eating disorder care by introducing a referral to treatment waiting time standard. Community eating disorder teams are expected to enable swift access to care and maintain contact with the child, young person and their family throughout their treatment pathway including episodes of inpatient care.

The eating disorder referral to treatment standard for children and young people states: By 2020, 95% of children and young people (up to the age of 19) referred for assessment or treatment for an eating disorder should receive NICE-approved treatment within 1 week if the case is urgent, and 4 weeks if the case is routine/non-urgent. There are therefore two conditions for the standard to be met: a maximum wait from referral, and treatment delivered in accordance with NICE guidance. The designation of an urgent or routine referral is a clinical decision based on the information received and recorded in the 'clinical response priority type' on local IT systems.

### 2. Measuring the Standard

The data reported in this publication cover the waiting time element of the standard.

The collection of data via Unify2 is an interim measure. Ultimately, data collected by NHS Digital via the Mental Health Services Data (MHSDS) will supersede this collection once MHSDS data quality is of a sufficient standard. The MHSDS includes data regarding children and young people's mental health from January 2016. The data collection is still experimental, with a focus on data quality and completion. Anticipating poor quality data in the early stages of the MHSDS, NHS England implemented an interim data collection via Unify2 that focused on the referral to treatment waiting time element of the Children and Young People with an Eating Disorder (CYP ED) evidence based care pathway. This interim measure enabled collection of data and is helping to verify and improve the quality of statistics derived from the Mental Health Services Dataset.

### 3. Data quality

Providers are continuing to work to improve data quality. Two main issues have been highlighted by providers:

1. Some providers were not able to submit incomplete waits as there was not currently a designated CAMHS ED team.
2. Some providers moved to a new system, and on the old system they were unable to record the ED status.

These issues may impact on reporting of the number of complete and incomplete pathways, with numbers potentially being underreported. This may ultimately impact on performance against the standard.

#### **4. Provider and Commissioner data**

Commissioner based returns reflect data on a responsible population basis, which is defined as:

- all those patients resident within the CCG boundary; plus
- all patients registered with GPs who are members of the CCG, but are resident in another CCG; minus
- All patients resident in the CCG, but registered with a GP who is a member of another CCG

Provider based returns cover patients for whom English commissioners are responsible.

#### **5. Feedback**

We welcome feedback on the content and presentation of Children and Young People Eating Disorder Waiting Times statistics within this Statistical Press Notice and those published on the NHS England website. Please email any comments on this, or any other issues regarding the Children and Young People Waiting Times data and statistics, to: [england.mh-data@nhs.net](mailto:england.mh-data@nhs.net)

#### **Additional Information**

For press enquiries please contact the NHS England media team on 0113 825 0958 or 0113 825 0959.

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