

Children and Young People's Health Services Monthly Statistics

Experimental Statistics, England, May 2017

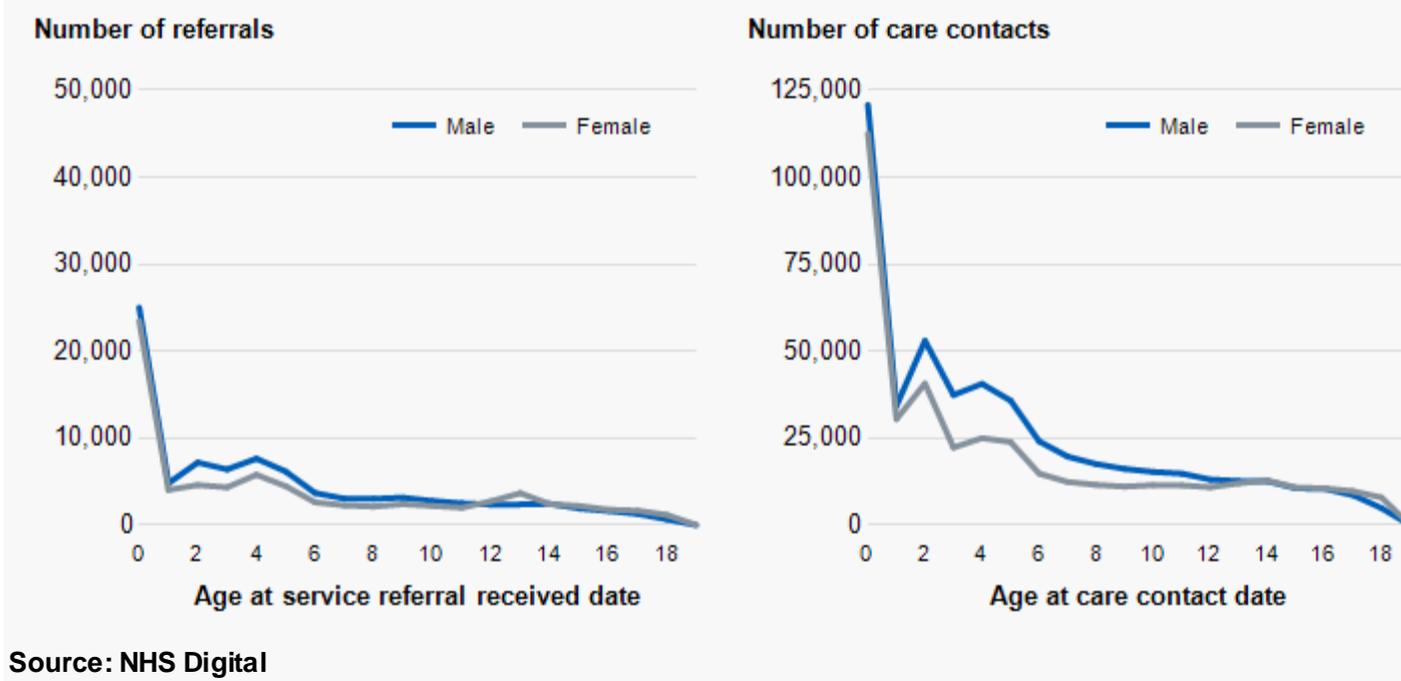
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This is a monthly report on NHS-funded Community Services for children and young people aged 18 years or under in England using data submitted to the Children and Young People's Health Services (CYPHS) Data Set for May 2017 activity.

Key findings

- There were **92 providers** that submitted data in May 2017
- There were **174,158 referrals received**, relating to **149,264 children and young people**.
- There were **935,873 care contacts** with **545,081 children and young people**.

Figure 1: Number of referrals and care contacts by age and gender (where both were recorded)



Source: NHS Digital

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This is an Experimental Statistics publication



This document is published by NHS Digital,
part of the Government Statistical Service

Experimental Statistics are official statistics which are published in order to involve users and stakeholders in their development and as a means to build in quality at an early stage. It is important that users understand that limitations may apply to the interpretation of this data. More details are given in the report.

All official statistics should comply with the UK Statistics Authority's Code of Practice for Official Statistics which promotes the production and dissemination of official statistics that inform decision making.

Find out more about the Code of Practice for Official Statistics at
www.statisticsauthority.gov.uk/assessment/code-of-practice

Find out more about Experimental Statistics at
https://gss.civilservice.gov.uk/wp-content/uploads/2016/02/Guidance-on-Experimental-Statistics_1.0.pdf

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This report may be of interest to members of the public, policy officials and other stakeholders to make local and national comparisons and to monitor the quality and effectiveness of services.

Introduction

This is a monthly report on NHS-funded Community Services for children and young people aged 18 years or under using data from the Children and Young People's Health Services (CYPHS) data set reported in England for May 2017.

This report can be downloaded from the NHS Digital website at:
<http://content.digital.nhs.uk/maternityandchildren/CYPHSreports>

This release comprises:

- This report which presents analysis of key measures
- An Excel data quality report which presents data quality measures at provider level
- A CSV file which contains provider-level data in a machine readable format
- A metadata file to accompany the CSV file, providing contextual information
- Analysis by provider (interactive spreadsheet)
- A separate collaborative report produced between NHS Digital and Ofsted investigating how sources of early years data including that from the CYPHS can be used together to enrich analysis and insight in child health and development.

The CYPHS data set is a patient-level dataset providing information relating to NHS-funded community services for children and young people aged 18 years or under. These services can include health centres, schools and mental health trusts. The data collected includes personal and demographic information, diagnoses including long-term conditions and childhood disabilities and care events plus screening activities.

It has been developed as part of the Maternity and Children's Data Set (MCDS) project to achieve better outcomes of care for children and young people. It provides data that will be used to improve clinical quality and service efficiency, in a way that improves health and reduces inequalities.

It is intended that information from the data set will be made widely available to commissioners, providers, clinicians, service users, and the general public to inform choice through statistical publications.

Further information on the CYPHS data set is available at:
<http://content.digital.nhs.uk/maternityandchildren/CYPHS>

Main Findings

This report contains key information based on the submissions that have been made by providers and will focus on data relating to activity that occurred in May 2017.

- 92 providers successfully submitted data for the CYPHS data set.
- There were 174,158 referrals received¹ by reporting organisations, relating to 149,264 children and young people.
- There were 935,873 care contacts with 545,081 children and young people across all submitters.
- Of the 140,759 children with a recorded gender and a referral received in the period, 53 per cent (75,189) were males, and of the 526,719 children with a recorded gender with a care contact in the period, 54 per cent (286,635) were males².
- Of the 143,353 children and young people with a recorded age and with a referral received in the period, 63 per cent (90,339) were children aged five or under. This compares with 17 per cent (23,723) that were aged between six and ten, 15 per cent (21,987) that were aged between eleven and fifteen, and 5 per cent (7,304) between sixteen and nineteen³. There were also 5,955 children with ages that were missing or outside reporting parameters.
- There were 102,013 health visitor appointments across all submitters. This accounts for 12 per cent of all care activities where an activity code was recorded⁴.
- Across all submitters, 307,993 immunisations⁵ for children and young people occurred during May 2017.
- Across all submitters, 89 per cent (776,554) of care contacts were attended by the patient and 7 per cent (62,673) were not attended by the patient (Where attendance or non-attendance was recorded). The remaining 4 per cent of care contacts (35,865) were cancelled by the patient or health care provider.

[1] Referrals with a referral request received date between 01 May 2017 and 31 May 2017.

[2] A data item being recorded is defined as a data item that is not missing and within reporting parameters. E.g. the value is within a national code list.

[3] Children and young people aged 19 at the start of the reporting period cannot be submitted to the CYPHS data set. A patient may have their 19th birthday between the start of the reporting period and the referral received date, meaning there may be some patients aged 19 contained in the data set.

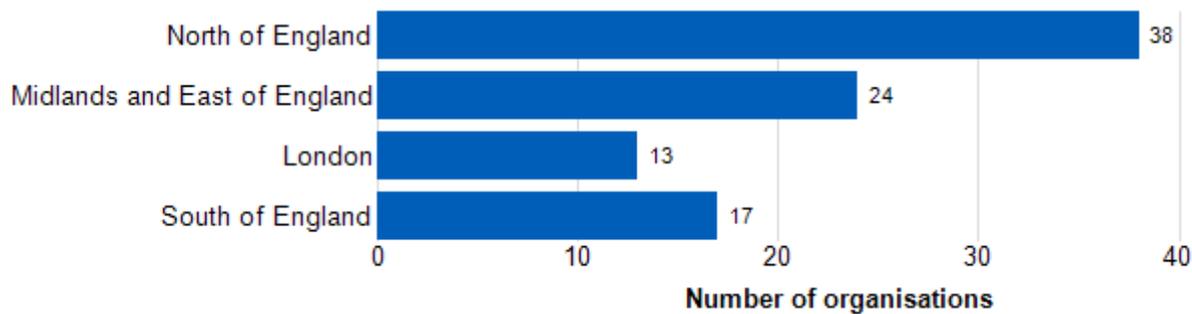
[4] An activity code is a mandatory item where a care activity is recorded. However, the activity code submitted could still be outside the reporting parameters.

[5] Immunisations can be submitted in two tables (CYP501 and CYP502). There is no way to identify duplicate information, therefore; if an organisation submits the same data in both tables, this data will be counted twice.

Who Submitted?

Providers of NHS-funded community services were required to collect information locally from September 2015, and from October 2015 were required to commence making CYPHS data set submissions in accordance with the Information Standards Notice⁶.

Figure 2: Number of organisations successfully submitting data to the CYPHS data set by commissioning region, May 2017



A total of 92 organisations provided data relating to May 2017 to the CYPHS data set. While the data set has been mandated to flow since October 2015 (for September 2015 data), not all providers of CYPHS data have been able to submit. We are working closely with providers who did not respond and expect coverage and data quality to increase.

A list of organisations that successfully made a submission can be found in the accompanying CSV file and in the data quality report.

What Was Submitted?

There are 31 tables in the CYPHS data set that include information on the key areas such as personal and social circumstances, diseases and disabilities and scored assessments. However, only two of these tables must be submitted each time activity occurs in the reporting period⁷. These tables cover the personal details and risk factors of the child or young person.

Initial reporting will focus on 6 of the 31 tables, which include:

- Master Patient Index and Risk Indicators (CYP001)
- Referral Details (CYP101)
- Care Contact Details (CYP201)
- Care Activity Details (CYP202)
- Immunisations (CYP501 and CYP502)

[6] Information Standards Notices (ISNs) are published by SCCI to announce new or changes to information standards and data collections. [CYPHS ISN](#)

[7] The Mandatory tables are CYP001 (Master Patient Index and Risk Indicators) and CYP002 (GP Practice Registration). The [CYPHS Data Model](#) contains details of the tables and fields that can be submitted for the CYPHS data set.

Referral Details

A service referral is a request for a care service to be provided for a patient. This could include patient self-referrals for an appointment to see or be in contact with a care professional.

Across all submitters, there were 174,158 referral requests in total during May 2017.

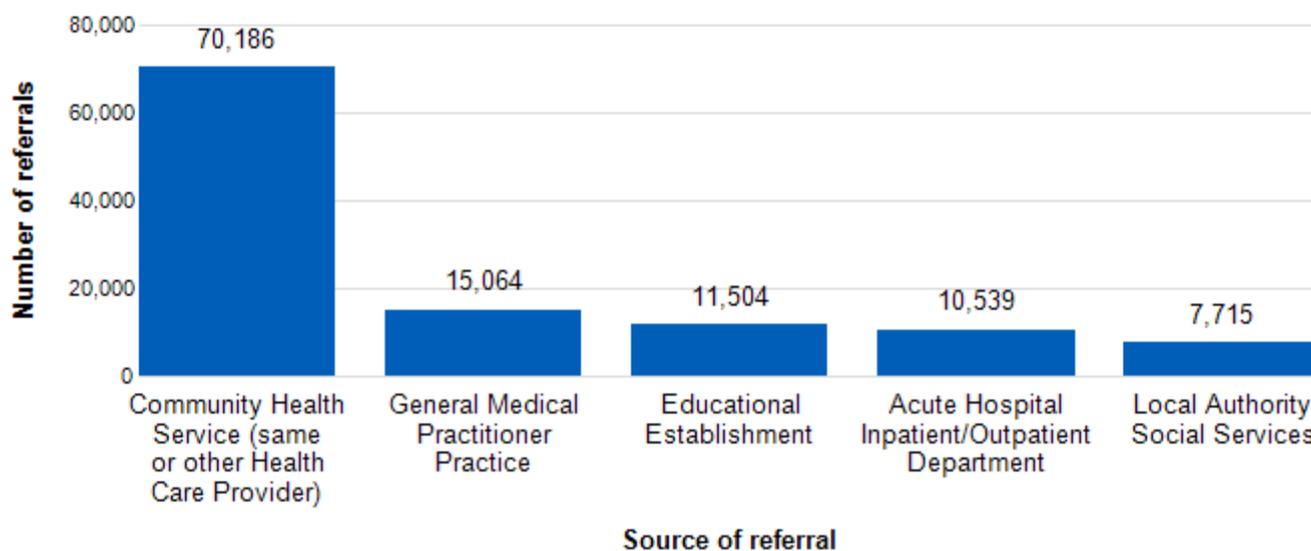


Table 1: Data Quality: Percentage of values missing or with a value outside the reporting parameters by data item and commissioning region, May 2017

Data Item ^{8 9}	Commissioning Region				All Submitters
	North of England	Midlands and East of England	London	South of England	
Referral reason	27%	41%	37%	41%	36%
Referral source	10%	18%	7%	25%	15%

Referral source and referral reason are required data items and so must be submitted if they are collected by the provider. Both of these data items have pre-defined code lists, therefore any value not contained within the code list will be considered to be outside reporting parameters.

Figure 3: Number of referrals for the five most recorded referral sources by referral source (where recorded and excluding "Not Known"), all submitters, May 2017



A referral source of "Not Known" accounted for 11 per cent (15,906) of all recorded referral sources. We are working with providers to better understand the reasons for this. "Not Known" is the default value for this data item, and it may be that this data has been submitted in order to provide a valid submission of data. It is hoped that as reporting of the new dataset becomes established the number of "Not Known" referral sources will decrease in the coming months.

[8] Each data item links to the corresponding description with the [CYPHS data set user guidance](#). Each section contains data quality information on the data items used in this report that are most associated with that section.

[9] If a region has less than 5 values missing or outside reporting parameters, a * is displayed.

Figure 4: Number of referrals for the five most recorded referral reasons by referral reason (where recorded and excluding "Not Known"), all submitters, May 2017

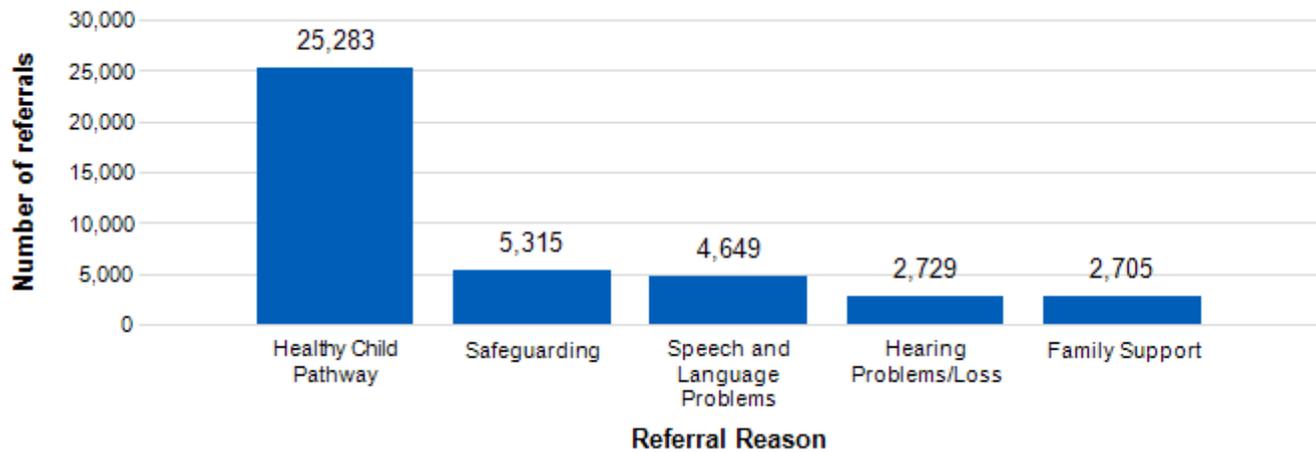


Table 2: Number and percentage of the most recorded¹⁰ referral reason by age group at referral received date (where both were recorded and excluding "Not Known"), all submitters, May 2017

Age Group	Referral Reason	Referrals	Percentage (%)
5 or under	Healthy Child Pathway	21,318	30%
6 to 10	Safeguarding	1,599	9%
11 to 15	Healthy Child Pathway	1,836	11%
16 to 19	Healthy Child Pathway	764	14%

A referral reason of "Not Known" accounted for 46 per cent (51,083) of all recorded referral reasons. The referral reason is the primary presenting condition or symptom for which the patient was referred to a Community Health Service. Like the source of referral, we are working with providers to better understand the reasons for this. It is hoped that as reporting of the new dataset becomes established the number of "Not Known" referral reasons will decrease in the coming months.

[10] The most recorded data items are the most recorded data items within each age group.

Children and young people with a referral

In May 2017, there were 149,264 children and young people with a referral received during the month. There is no single definition of children and young people, however this dataset only collects data on people aged 18 years and under.

This section looks at some aspects of these children and young people with a new referral.

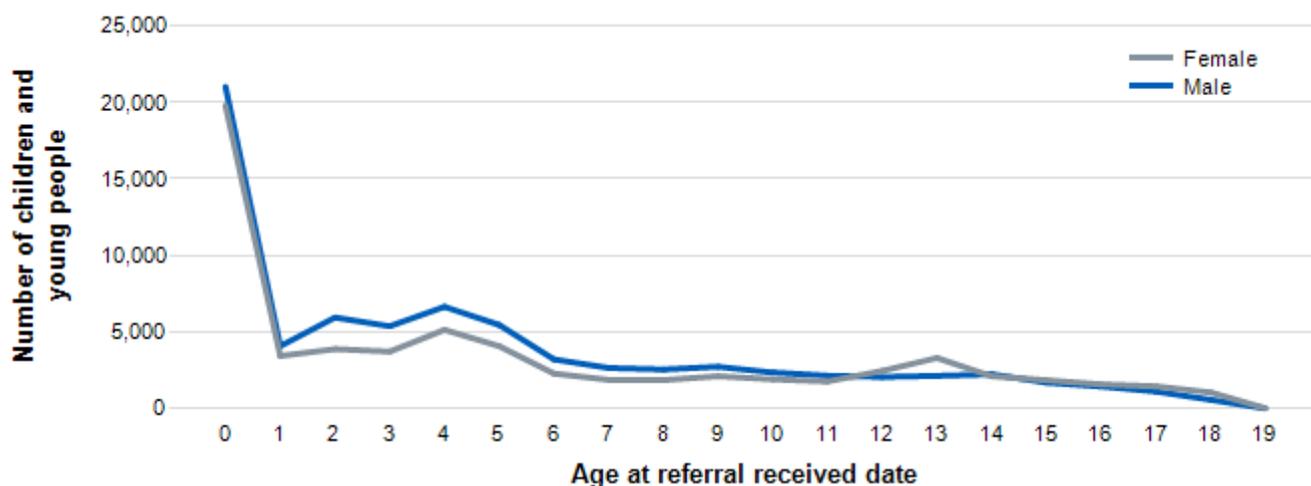


Table 3: Data Quality: Percentage of values missing or with a value outside the reporting parameters by data item and commissioning region, May 2017

Data item	Commissioning Region				
	North of England	Midlands and East of England	London	South of England	All Submitters
Age at referral received date	*	12%	*	*	4%
Gender	*	17%	*	*	6%

Date of birth (from which age at referral received date is derived) and gender are required data items. Therefore, they must be submitted for the CYPHS data set, if they are collected by the provider.

Figure 5: Number of children and young people with a referral received in May 2017 by age at referral received date and gender (where both were recorded), all submitters, May 2017



The number of new referrals for children and young people by age follows roughly the same trend for both males and females. The CYPHS data set only accepts data for children and young people that were aged 18 or under at the beginning of the reporting period (in this instance 01 May 2017). There were however, 12 people who had their 19th birthday between the start of the reporting period and the date their referral was received, hence their presence in the Figure 5.

Care Contact Appointment Details

Care contact appointments are telephone consultations and appointments that should include all face-to-face contacts with the patient, or a proxy where this is in lieu of a contact with a patient.

There were 935,873 care contacts that took place during May 2017. This section looks at the detail of these care contacts.



Table 4: Data Quality: Percentage of values missing or with a value outside the reporting parameters by data item and commissioning region, May 2017

Dimension	Commissioning Region				All Submitters
	North of England	Midlands and East of England	London	South of England	
Activity code	0%	0%	4%	*	0%
Attendance code	8%	8%	4%	1%	6%
Consultation medium	32%	16%	30%	15%	22%
Consultation type	22%	12%	22%	6%	15%

Activity Code is a mandatory data item, and therefore must be submitted if details about the care activity are submitted. Attendance code, Consultation type and consultation medium are all required data items, so must be submitted if they are collected by the provider.

Figure 6: Percentage of care contacts with an attendance code of not attended or attended too late to be seen by commissioning region, May 2017

Missed and cancelled appointments can have an impact on the healthcare system, not least because they may add delays to the care needed by the patient, increase waiting times and also prevent other patients from receiving health care sooner than they could. Across all submitters, 7 per cent of appointments were not attended.

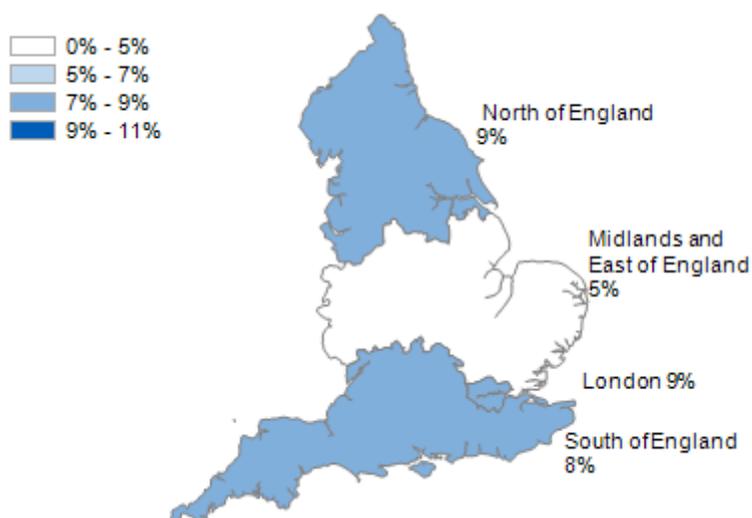
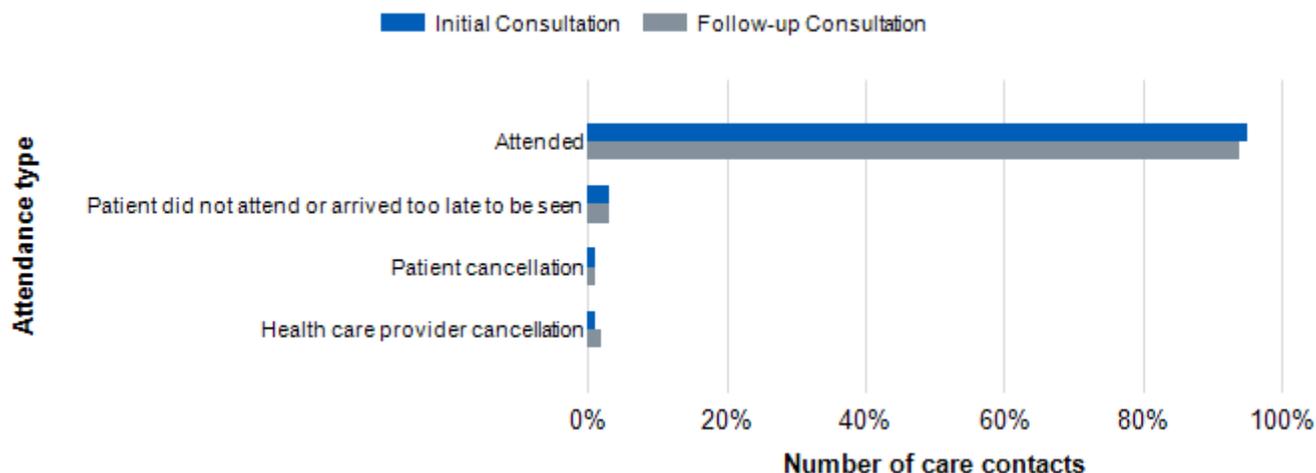
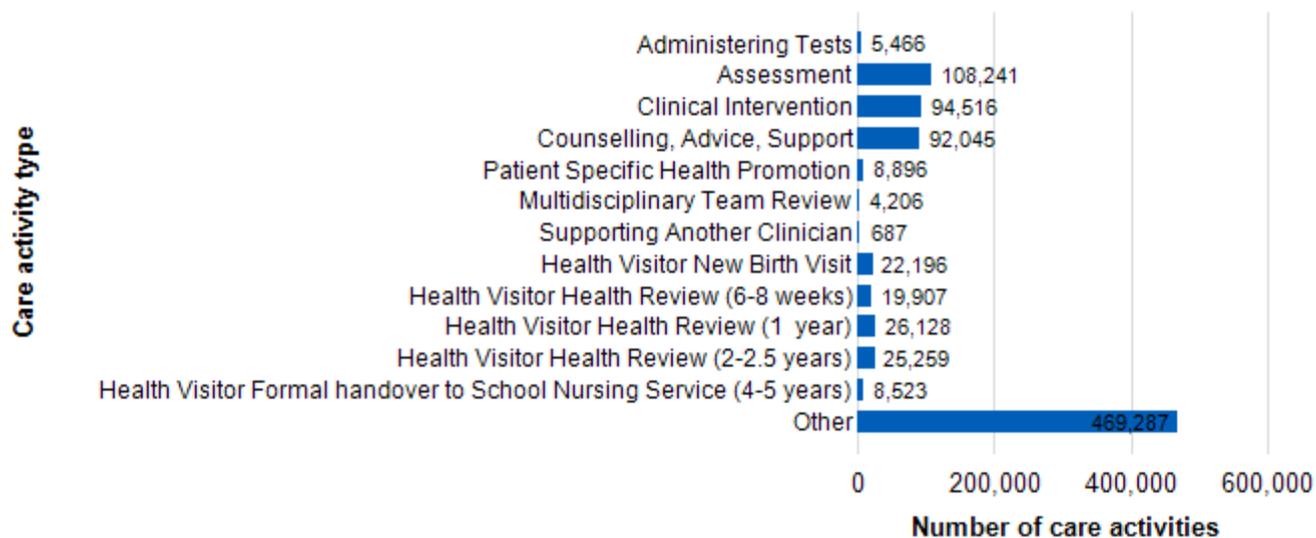


Figure 7: Percentage of care contacts by attendance code group¹¹ and consultation type (where both were recorded), all submitters, May 2017



Appointments are classed as cancelled when advance notice is given that the patient will not attend their appointment. A re-arranged appointment is effectively classed as one cancelled appointment and one other appointment that is either attended or not attended by the patient. Children and young people attended 95 per cent of initial consultations and 94 per cent of follow-up consultations.

Figure 8: Number of care activities¹² by activity type (where recorded), all submitters, May 2017



There were 888,477 care activities recorded taking place in care contacts during May 2017. Of these care activities, 0 per cent (3,120) were submitted with an invalid activity type code. A care contact activity can range from a breast feeding assessment to offering advice on how to use a blood pressure monitor. The most recorded care activity across all submitters was "Other" which accounted for 469,287 care activities.

[11] Attendance code group is defined as: 5, 6 = Attended; 3, 7 = Patient did not attend or arrived too late to be seen; 2 = Patient Cancellation; 4 = Hospital care provider cancellation.

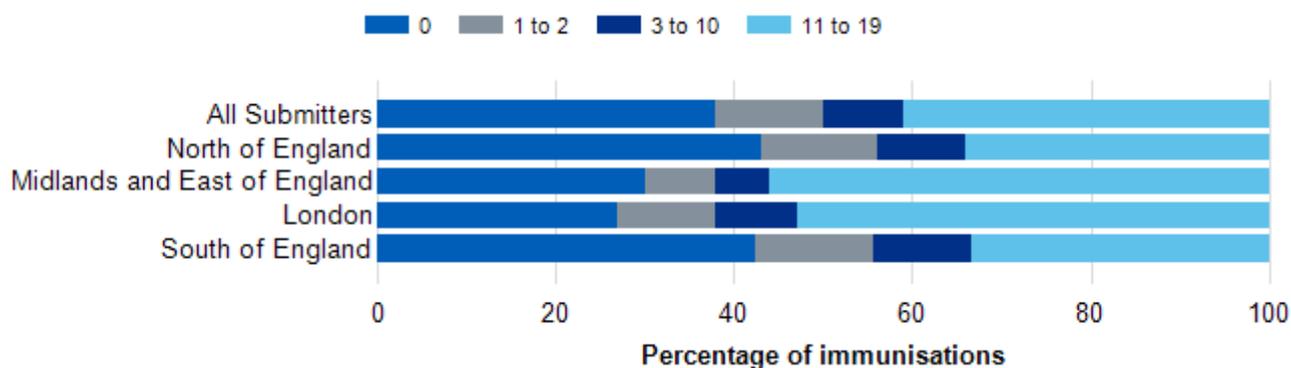
[12] A single care contact can have zero or many care activities associated to it.

Immunisations

There were 307,993 immunisations reported by organisations submitting data to the CYPHS data set that took place during May 2017. A child or young person may have had many vaccinations during this period so this section considers the total number of immunisations that have been carried out.



Figure 9: Percentage of immunisations by age at immunisation (where recorded) and commissioning region, May 2017



There are a number of vaccines that are routinely offered to everyone in the UK for free through the NHS, that should ideally be delivered at a specific age during childhood. A large proportion of vaccinations given to a child will take place between 8 and 16 weeks after birth.

Further Information

Related NHS Digital publications and data sets

Maternity and Children's Data Set

The Maternity and Children's Data Set (MCDS) has been developed to help achieve better outcomes of care for mothers, babies and children. This publication is part of the MCDS and further information on the MCDS is available at the NHS Digital website:

<http://content.digital.nhs.uk/maternityandchildren/>

Maternity Services Monthly Statistics

This is a monthly statistical report on NHS-funded maternity services in England, using data submitted to the Maternity Services Data Set (MSDS). The MSDS has been developed to help achieve better outcomes of care for mothers, babies and children. Reports are available from the NHS Digital website:

<http://content.digital.nhs.uk/maternityandchildren/maternityreports>

Mental Health Services Monthly Statistics Reports

This monthly statistics series reports from the Mental Health Services Data Set (MHSDS). This includes information on people in children's and young people's mental health services, including Child and Adolescent Mental Health Services (CAMHS). Reports are available from the NHS Digital website:

<http://content.digital.nhs.uk/mhldsreports>

Hospital Episode Statistics (HES)

HES is a data warehouse containing details of all admissions, outpatient appointments and A&E attendances at NHS hospitals in England. The data covers all age groups.

<http://content.digital.nhs.uk/hes>

Immunisation Statistics

The information in this bulletin about immunisation statistics in England comes from Public Health England (PHE). Information on childhood immunisation coverage at ages 1, 2 and 5 years is collected through the Cover of Vaccination Evaluated Rapidly (COVER) data collection for Upper Tier Local Authorities (LAs):

<http://content.digital.nhs.uk/pubs/immstats1516>

National Child Measurement Programme

NHS Digital produces reports summarising annually the key findings from the Government's National Child Measurement Programme (NCMP) for England. It provides high-level analysis of the prevalence of 'underweight', 'healthy weight', 'overweight', 'obese' and 'overweight and obese combined' children, in Reception (aged 4–5 years) and Year 6 (aged 10–11 years), measured in state schools in England. The latest report is available from:

<http://www.content.digital.nhs.uk/catalogue/PUB22269>

Health and Wellbeing of 15-year-olds in England - What About YOUth? Survey 2014

WAY 2014 is the first survey to be conducted of its kind and it is hoped that the survey will be repeated in order to form a time series of comparable data on a range of indicators for 15 year-olds across England. Data has been collected on general health, diet, use of free time, physical activity, smoking, drinking, emotional wellbeing, drugs and bullying.

<http://content.digital.nhs.uk/catalogue/PUB19244>

Smoking, Drinking and Drug use among young people

The survey report presents information on the percentage of pupils who have ever smoked, tried alcohol or taken drugs. The report also explores the attitudes of school children towards smoking and drinking. Relationships between smoking, drinking and drug use are explored along with the links between smoking, drinking and drug use and other factors such as age, gender, ethnicity and previous truancy or exclusion.

<http://content.digital.nhs.uk/catalogue/PUB17879>

National Policy Framework

NHS Outcomes Framework

The NHS Outcomes Framework sets out the outcomes and corresponding indicators used by the Secretary of State to hold NHS England to account for improvements in health outcomes. The indicators are available on the NHS Digital website:

<http://content.digital.nhs.uk/nhsf>

Public Health Outcomes framework

The Public Health Outcomes Framework sets out a vision for public health, desired outcomes and the indicators that will help us understand how well public health is being improved and protected. The framework concentrates on two high-level outcomes and groups further indicators into four 'domains' that cover the full spectrum of public health. The outcomes reflect a focus not only on how long people live, but on how well they live at all stages of life:

<http://www.phoutcomes.info/>

CCG Outcomes Indicator Set

The CCG Outcomes Indicator Set provides clear, comparative information about the quality of health services commissioned by CCGs and the associated health outcomes:

<http://www.england.nhs.uk/ccg-ois/>

Other related information

Health Behaviour in School-Aged Children (HBSC)

A pioneer cross-national study gaining insight into young people's well-being, health behaviours and their social context. This research collaboration with the WHO Regional Office for Europe is conducted every four years in 44 countries and regions across Europe and North America:

<http://www.hbsc.org/publications/datavisualisations/index.html>

Child and Maternal Health Intelligence Network (CHIMAT)

Public Health England's National Child and Maternal Health Intelligence Network (CHIMAT) website brings together a searchable range of resources relating to children and young people's health services:

<https://fingertips.phe.org.uk/profile-group/child-health>

Childcare and early years statistics

This data relates to childcare arrangements for all ages and early years provision for children who are 5 years of age or younger:

<https://www.gov.uk/government/collections/statistics-childcare-and-early-years>

Child mortality statistics

Annual statistics on stillbirths, infant deaths and childhood deaths occurring annually in England and Wales. Also contains data on cause of death, sex and age-group plus analyses by some of the key risk factors affecting stillbirths and infant deaths including age of mother and birth weight:

<http://www.ons.gov.uk/ons/rel/vsob1/child-mortality-statistics--childhood--infant-and-perinatal/index.html>

Children's social services

Information on children referred to and assessed by children's social services:

<https://www.gov.uk/government/collections/statistics-children-in-need>

Annex 1 - Data Quality Report

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Purpose of this Document

This document aims to provide users with an evidence based assessment of the quality of the statistical output of the Children and Young People's Health Services Monthly Statistics Reports publication by reporting against the European Statistical System (ESS) quality dimensions and principles appropriate to this output.

In doing so, this meets our obligation to comply with the UK Statistics Authority (UKSA) Code of Practice for Official Statistics, particularly Principle 4, Practice 2 which states:

“Ensure that official statistics are produced to a level of quality that meets users’ needs, and that users are informed about the quality of statistical outputs, including estimates of the main sources of bias and other errors and other aspects of the European Statistical System definition of quality”.

For each dimension this paper describes how this applies to the publication and references any measures in the accompanying monthly data quality measures report that are relevant for assessing the quality of the output.

Introduction

Community Services that are funded and/or provided by the NHS are required to submit data relating to their clinical activity in the CYPHS data set provided the patient is less than 19 years old.

The CYPHS data set does not cover non-NHS funded children and young people's services provided by independent organisations (e.g. private clinics).

Providers receive immediate feedback on the quality of their submission and a variety of data quality checks are run as part of the validation and load process for the monthly data, prior to production of this monthly release.

Initially, reporting will focus on simple measures from 6 key tables (Patient Details (CYP001), Referral Details (CYP101), Care Contact Details (CYP201), Care Activity Details (CYP202), and Immunisations (CYP501 and CYP502)). However, as coverage and accuracy improves, these monthly reports will also evolve to report on different measures.

These statistics are classified as experimental and should be used with caution. Experimental statistics are new official statistics undergoing evaluation. They are published in order to involve users and stakeholders in their development and as a means to build in quality at an early stage. More information about experimental statistics can be found on the [UK Statistics Authority website](#).

Assessment of Statistics Against Quality Dimensions and Principles

Assessment of User Needs and Perceptions

The CYPHS data set has been developed as a key driver to achieving better outcomes of care for children and young people. These monthly reports provide community service providers, commissioners and other stakeholders with timely information about activity. This is intended to support changes in commissioning arrangements as services move from block commissioning to commissioning based on activity and outcomes for children and young people. Some specific examples of how users wish to utilise CYPHS data for their own needs maybe found in the following [brochure](#).

NHS Digital has held and continues to hold workshops for community service providers and system suppliers, providing updates on the development of the reports and allowing clinicians, system administrators and informatics staff to provide feedback on reporting during development and beyond.

Reporting is currently shaped by the coverage and accuracy of the data, however as data quality improves; these reports will change to present other information. Feedback is very welcome via our enquiries@nhsdigital.nhs.uk address (please quote 'CYPHS Monthly Statistics' in the subject line).

Relevance

This publication comprises a set of reports which have been produced from NHS-funded community service providers' monthly CYPHS data set submissions.

The CYPHS data set provides comparative, child-centric data that will be used to improve clinical quality and service efficiency; and to commission services in a way that improves health and reduces inequalities. This is done by capturing detailed information about the patient (gender, ethnicity, age deprivation etc.) along with associated risk factors such as whether they are on a child protection plan and other safeguarding indicators and reporting against this their referral details to NHS funded community services along with any information around care contacts and outcomes that have been achieved as a result of this activity. Further detail on the information captured within the dataset is available from <http://content.digital.nhs.uk/maternityandchildren/CYPHS>

Each publication comprises an Executive Summary and Provider Level Analysis, a summary of key information based on those organisations that submitted data, including visual representations. A monthly data file containing the underlying data is also provided. These files are supported by national and provider-level data quality measures, which include validation of key data items from the CYPHS data set.

This publication also includes a detailed metadata file describing all of the measures in the Executive Summary, Provider Level Analysis and the monthly data file. This includes, for each measure, how it has been constructed from providers' submissions and how and where it is used.

For members of the public, researchers and other stakeholders, the release provides up to date information about the people under the age of 19 who are in contact with NHS funded community services. This publication contains information at total, regional and provider level, in a variety of

formats. Also included is a metadata document containing information on how the derivations and constructions were calculated.

As a new national data collection the CYPHS data set is still becoming established and a number of organisations were unable to submit data for the whole scope of the CYPHS data set. Therefore figures at levels other than individual provider level may not fully represent the true figure at that level.

There are currently 31 tables in the CYPHS data set that each contain information relating to a specific event or type of information that may occur during the community care of children and young people. However, only 6 of these tables are currently reported on. This will change to include more data tables as data quality and coverage improves and hence increase the relevance of this report to reflect wider user needs.

Accuracy & Reliability

Accuracy

The CYPHS data set is a rich, person level dataset that records packages of care received by individuals under the age of 19 years in contact with NHS-funded community services. NHS Digital provides a number of different reports at different stages in the data flow to ensure that the submitted data reflect the services that have been provided:

At the point of submission, providers receive immediate feedback on the quality of their submission through a validation file. This file includes details of record-level reports of any submission errors, giving the data providers' detailed information of which records produced which errors. Providers should then, where possible, use these errors and warnings to rectify these issues before resubmitting their data.

A variety of data quality checks are run as part of the validation and load process for monthly data, prior to production of this monthly release. Where there are concerns about data quality, providers are contacted directly so that any issues with local data extraction processes can be addressed for a future submission. Details of these data quality checks may be found within the Data Quality Measures worksheet within the Metadata file published as part of this statistical release.

Initial reporting may contain data quality issues due to inaccurate content being submitted. While steps are taken to nullify data quality issues in the reporting, some of these issues affect the outputs. However, as data providers become accustomed to additional data quality requirements over the coming reporting periods, the effect on outputs should dissipate.

Also published, is the "VODIM" data quality report. This shows the proportion of records as counts and percentages which have 'valid', 'other', 'default', 'invalid' and 'missing' values. This report also describes data quality issues relevant to the analysis in the release and is produced each time as part of the publication. This allows users of the data to make their own assessment of the quality of the data for a particular purpose, drawing on these resources.

In addition, local knowledge, or other comparative data sources, may be required to distinguish changes in volume between reporting periods that reflect changes in service delivery from those that are an artefact of changes in data quality.

Reliability

Whilst local systems may be continuously updated, the CYPHS data set submission process provides two opportunities for data relevant to each month to be submitted. The primary submission window opens roughly one month following the end of the reporting month and the refresh submission window opens roughly two months following the end of the reporting month. This means that the timeliness of recording all relevant activity on local systems has an impact on the completeness of the CYPHS data set submission. For example, a referral made in September 2015, but not entered onto the local system until the beginning of December 2015, will not be included in the final September 2015 submission. Providers should use the Submission Summary Reports produced at the point of submission to ensure that all relevant data has been included. Statistics published in this report are calculated using data taken after the refresh submission has closed with no early estimated values therefore published.

Coverage – are all eligible providers submitting data?

All providers of NHS-funded community services should submit CYPHS data set data if they provide care for anyone under the age of 19. However, at present we are aware that a number of providers are not currently making submissions. Within the accompanying "VODIM" data quality report, there is a full list of providers submitting data in each period. When an organisation starts or ceases to submit data this can affect overall record numbers.

As a new national level dataset there are a number of issues in terms of non-response from providers which in turn has an impact in regards to the geographical coverage expected of the dataset. Therefore caution should be taken when interpreting the data at levels higher than individual provider level. Because of this no figures derived from the CYPHS data set data are presented as England total figures rather they are presented in terms of all providers who submitted data to the CYPHS data set for the reporting period in question.

Organisations who provide NHS funded community services to those aged under 19 years of age are required to report to the CYPHS data set. However different models of local health service provision across England means that the organisations delivering such activity varies between local areas. For example some regions have a dedicated Community Healthcare trust for all ages of patients whilst others may separate community healthcare for adults and children between separate organisations and for other organisations responsibilities for such activities may fall within a local acute trust. Such models of provision can be fluid and therefore it is difficult to determine an exact number of organisations that should be submitting data to the CYPHS data set however it is currently expected that around 150 organisations nationwide should be submitting data to the CYPHS data set.

In May 2017, 92 organisations submitted data for the CYPHS Data Set.

Local knowledge may be required to assess the completeness of a submission, based on information about local caseload. This publication provides detailed information about activity, which providers and commissioners are encouraged to review to ensure that submissions accurately reflect the local situation. Providers should also use all the aggregate record counts produced at the point of submission as part of the Submission Summary Reports to check coverage in key areas (e.g. Number of referrals).

Timeliness and Punctuality

Timeliness

The analysis in this report is based on data submitted by providers during both the primary and refresh submission windows. Any data which are re-submitted by a provider will be used in place of an earlier submission only within the submission window.

The monthly publication is based on the most recent available final data. For this publication, the CYPHS Monthly Statistics are published within 5 weeks of the refresh submission window closing for the latest reporting period reported upon.

Information regarding submission deadlines for CYPHS data set is published here:

<http://content.digital.nhs.uk/maternityandchildren/CYPHS>

Punctuality

The CYPHS data set monthly publications will be published on pre-announced dates and is therefore deemed to be punctual.

Coherence and Comparability

Coherence

There are no other national monthly publications that include the same measures as are included in this publication. However, measures that provide a snapshot count as at the end of the month are comparable with measures as at the end of a year.

However for different activities that will be reported within the CYPHS data set there are a number of existing national data collections and reports that currently publish data depending upon their own specific topical area these are listed below.

Vaccination and Immunisation Data

Information on childhood immunisation coverage at ages one, two and five are collected through the UK Cover of Vaccination Evaluated Rapidly (COVER) collection by Public Health England. These aggregated data are collected from Child Health Information Systems (CHISs) which are computerised systems storing clinical records supporting health promotion and prevention activities for children, including immunisation.

Data from the Cover is published by NHS Digital the latest statistics for which are available through the following link <http://content.digital.nhs.uk/pubs/immstats1516>

Further information on vaccination and immunisation is captured by NHS Digital as part of the General Practice Extraction Service (GPES) via which GP Contract Services data are collected. This represents recorded activity undertaken by a practice. It is important to note that not all practices are required to flow vaccination and immunisation data for this. Currently information on vaccination and immunisations from GPES is published as Experimental Statistics and are available via <http://www.content.digital.nhs.uk/catalogue/PUB22004>

National Child Measurement Programme

The National Child Measurement Programme (NCMP) measures the height and weight of children in reception class (aged 4 to 5 years) and year 6 (aged 10 to 11 years) to assess overweight and obesity levels in children within primary schools. This data can be used at a national level to support local public health initiatives and inform the local planning and delivery of services for children.

Local Authorities are asked to collect data on children's height and weight from all state maintained schools within their area. Participation in the programme is not compulsory, but non-participation is on an opt-out basis only. The data are submitted to NHS Digital and all of the returns are collated and validated centrally.

The latest published data on the NCMP is available via the following link.

<http://www.content.digital.nhs.uk/catalogue/PUB22269>

Children's public health 0-5 years - national reporting

Public Health England (PHE) implemented an interim approach to national reporting on children's public health for the 0-5 years in 2015/16. This was until such time as the Maternity and Children's Datasets of which the CYPHS data set is one have reached full maturity in terms of data quality and coverage.

Data is submitted to PHE by local authorities on a voluntary basis and is published quarterly. The

indicators include breastfeeding prevalence at 6-8 weeks and Health Visitor Service Delivery Metrics described in legislation for universal health visitor reviews and key outcomes for children resident within a local authority (based on the child's postcode).

Data on both Breastfeeding at 6 to 8 weeks after birth and Health Visitor Service Delivery Metrics are available from <http://www.chimat.org.uk/transfer>

Community Information Data Set (CIDS)

The CIDS is a patient level, output based, secondary uses data set which will deliver robust, comprehensive, nationally consistent and comparable person-based information on patients who are in contact with Community Services. Currently CIDS has only been mandated for local data collection and data extraction only. CIDS is aligned with the CYPHS data set, the two share the same structure and data items.

As such there may be local reporting of data using CIDS which would report on similar data to that reported in the CYPHS data set however the nature and extent of such local reporting remains unknown at the national level.

Comparability

The Executive Summary presents monthly data for the measures reported at regional level. The accompanying data quality report shows where a failure to submit or the discontinuation or introduction of services will have an impact on total counts.

Accessibility and Clarity

Accessibility

The format of this publication meets user needs for a greater wealth of information on children and young people's services in England. Benefits to users include the publication of detailed data on a monthly basis together with associated data quality measures, as well as a visual representation of the national picture on a monthly basis.

We produce a machine-readable data file which allows data users to easily produce custom tabulations as required for their own analytical purposes.

This report is made freely accessible via the NHS Digital website as a PDF document together with a supporting monthly data file in machine-readable format (with an accompanying metadata document). The monthly data files are also available on the data.gov website, here:

<https://data.gov.uk/data/search>

Re-use of our data is subject to conditions outlined here:

<http://content.digital.nhs.uk/data-protection/terms-and-conditions>

Providers are able to obtain a record level data extract for their care activity from the Open Exeter Bureau Service Portal

Clarity

The monthly data file is presented as a .csv file, with an accompanying metadata file in MS Excel format. A broad definition of each indicator, including the data items used in the analysis and constructions and current or intended uses are provided. Terminology is defined where appropriate.

Full details of the way that CYPHS data set returns are processed, which will be of use to analysts and other users of these data, are provided in the CYPHS data set User Guidance, available on the NHS Digital website:

<http://content.digital.nhs.uk/maternityandchildren/CYPHS>

Trade-offs between output quality components

The format of this publication meets user needs for a greater wealth of information on NHS funded community services for those aged under 19 years in England. Benefits to users include the publication of detailed data on a monthly basis together with associated data quality measures, as well as a visual representation of the national picture on a monthly basis.

The aggregate underlying data provides a much greater scope of analysis and will support a variety of local uses as well as meeting our obligations under the Code of Practice for National Statistics and the Transparency Agenda.

The format of this publication balances the need for increased frequency of reporting and scope of analysis with NHS Digital resources and production time. NHS Digital is supporting the Open Data initiative by also publishing data in a machine-readable format.

By publishing a range of clearly defined dimensions and measures in a timely fashion we hope to support discussions between providers and commissioners about caseload and activity and promote a virtuous cycle of improving data quality, through use.

Balance between performance, cost and respondent burden

As a 'secondary uses' data set, the CYPHS data set does not require the collection of new data items by community providers. It re-uses existing clinical and operational data for purposes other than direct patient care.

Providers are not required to submit data held only on paper records as no provision has been made in the CYPHS data set for the cost of transcribing these records to an electronic format.

Only two of the data tables are required to flow each time any activity is reported within the CYPHS data set (CYP001; patient demographics and CYP002; GP registration); completion of the remaining tables is only necessary when activity has occurred that is captured within these tables.

Confidentiality, Transparency and Security

In order to prevent disclosure of identities or information about service users, all figures (except national) for all organisations which submitted, are rounded to the nearest five. All figures between 0 and 4 are suppressed (*).

All publications are subject to a standard NHS Digital risk assessment prior to issue. Disclosure control is implemented where deemed necessary.

Please see links below to relevant NHS Digital policies:

- Statistical Governance Policy (see link in 'user documents' on right hand side of page)
<http://content.digital.nhs.uk/pubs/calendar>
- Freedom of Information Process
<http://content.digital.nhs.uk/foi>
- A Guide to Confidentiality in Health and Social Care
<http://content.digital.nhs.uk/article/4979/Assuring-information>
- Privacy and Data Protection
<http://content.digital.nhs.uk/privacy>

Appendix

Table 5: Number of organisations submitting data and expected to submit data by commissioning region

Number of organisations submitting CYPHS data by month	North of England	Midlands and East of England	London	South of England	All Submitters
May 2016	28	16	10	12	66
June 2016	29	17	11	11	68
July 2016	29	17	10	14	70
August 2016	31	18	9	15	73
September 2016	31	16	9	15	71
October 2016	35	17	11	16	79
November 2016	32	18	10	16	76
December 2016	36	18	11	16	81
January 2017	35	20	12	17	84
February 2017	35	23	12	16	86
March 2017	34	22	14	15	85
April 2017	36	24	13	17	90
May 2017	38	24	13	17	92
Number of organisations currently expected* to submit CYPHS data	49	35	29	34	147
% Organisations expected to submit that did so in latest reporting month of CYPHS	78%	69%	45%	50%	63%
Number of providers that submitted CYPHS data at least once since September 2015	40	25	16	18	99

“**” Organisations identified by various national and regional stakeholders as providing services within scope of the dataset this number may vary throughout the year.

In order to submit CYPHS data to NHS Digital an organisation must first register their details with the Bureau Service Portal (BSP) in to ensure that national requirements for Information Governance, Data Protection, Data Security and Confidentiality are being met. The information shown in this table only presents details of those organisations who have registered with the BSP. Not all organisations who we expect to submit data are currently registered with the BSP and we are working with these organisations centrally to address this issue. Hence the figures above are displayed to provide an indication of the levels of coverage rather than a definitive national and regional total.

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We welcome any questions, comments or feedback relating to this new publication including:

- How useful you found the content in this publication
- What the report was used for
- Which information was the most useful
- Any changes you would like to see to improve this publication

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