

FOI 3954

Mental Health Stats 2026

Where figures are broken down by financial year, provide data for the last three completed financial years (2022/23, 2023/24, 2024/25) and year-to-date for 2025/26 where available. Where possible, provide data broken down by adult mental health services and Child and Adolescent Mental Health Services (CAMHS) separately.

Referrals and Access

1. The total number of referrals received by the Trust's mental health services in each of the periods above, broken down by adult services and CAMHS.

Service	Year			
	2022/2023	2023/2024	2024/2025	2025/2026*
	Received	Received	Received	Received
Community Mental Health Teams for Adults	6950	7391	7215	6849
Community Mental Health Teams for Older People (Functional)	656	689	*	*
Forensic Service	87	170	129	46
Eating Disorder Service	145	133	113	69
Addiction Service	2241	2460	2329	2493
Personality Disorder Service	108	158	93	34
Total	10187	11001	12119	12903
CAMHS	-	-	-	2699

*Nb: Referral information for this period has still to be validated.

2. The number of referrals accepted and the number rejected or signposted elsewhere in each period, with the most common reasons for rejection.

Service	Accepted	Year			
		2022/2023	2023/2024	2024/2025	2025/2026*
		Accepted	Accepted	Accepted	Accepted
Community Mental Health Teams for Adults		5530	5106	4766	3826
Community Mental Health Teams for Older People (Functional)		587	604	*	*
Forensic Service		83	165	123	46
Eating Disorder Service		125	108	103	54
Addiction Service		2070	2206	1920	1751
Personality Disorder Service		82	143	89	10
Total		8477	8332	8076	7054
CAMHS		2123	1714	-	1523

*Nb: Referral information for this period has still to be validated.

Service	Rejected	Year			
		2022/2023	2023/2024	2024/2025	2025/2026
		Rejected	Rejected	Rejected	Rejected
Community Mental Health Teams for Adults		1420	2285	2449	3023
Community Mental Health Teams for Older People (Functional)		69	85	*	*
Forensic Service		4	5	6	0
Eating Disorder Service		20	25	10	15
Addiction Service		171	254	409	742
Personality Disorder Service		26	15	4	24
	Total	1710	2669	4043	5849
CAMHS **		-	-	-	1716

**The process of accurately recording/identifying 'Not Accepted' referrals was not available on the system used to record CAMHS data previous to the introduction of the encompass system on 07/11/2024. Due to the introduction of Encompass during the 2024/25 year we are unable to provide data with confidence for this year.

3. The number of patients currently on an active caseload within adult mental health services and CAMHS.

Current Active Caseloads as at 31/03/2026

Adult Mental Health Services	Active Cases
Community Mental Health Teams for Adults *	6566
Community Mental Health Teams for Older People (Functional) *	5310
Forensic Service	33
Eating Disorder Service	57
Addiction Service	784
Personality Disorder Service	38
CAMHS	854

*Nb: Adult Mental Health Services active caseloads have not been validated.

Waiting Times

4. The average (mean and median) waiting time, in weeks, from referral to first assessment appointment for:

(a) Adult Mental Health Services

The Northern Health and Social Care Trust does not record this information centrally; therefore, to provide this information would require an extensive manual exercise which the Trust considers would exceed 18 hours of staff time. Therefore the Trust is applying Section 12 (1) of the FOIA, which states that a public authority is not obliged to comply with a

request, if the staff time taken to determine whether the information is held, locating, retrieving and extracting the information, would exceed 18 hours (at a cost exceeding £450).

(b) CAMHS

	CAMHS Mean Wait (Weeks)	CAMHS Median Wait (Weeks)
2022/23	15	14
2023/24	14	10
2024/25*	-	-
2025/26	6	5

*encompass was implemented in the Northern Trust on 7th November 2024, therefore we are unable to provide accurate figures with confidence for 2024/25.

(c) Psychological Therapies

Refer to section 12 exemption.

(d) Eating Disorder services,

Refer to section 12 exemption.

(e) ADHD assessment services – There is no commissioned service for adult ADHD within the Northern Trust therefore no performance data.

(f) Autism Assessment Services.

Refer to section 12 exemption.

5. The longest waiting time, in weeks, currently recorded from referral to first assessment for each of the services listed in question 4.

CAMHS Longest Wait at 31 March 2026 (Weeks)
13

6. The average and longest waiting time, in weeks, from first assessment to commencement of treatment for each of the services listed in question 4.

CAMHS - Unable to provide information for wait to treatment.

Adult- The Northern Health and Social Care Trust does not record this information centrally; therefore, to provide this information would require an extensive manual exercise which the Trust considers would exceed 18 hours of staff time. Therefore the Trust is applying Section 12 (1) of the FOIA, which states that a public authority is not obliged to comply with a

request, if the staff time taken to determine whether the information is held, locating, retrieving and extracting the information, would exceed 18 hours (at a cost exceeding £450).

7. The number of patients currently waiting longer than 9 weeks, 13 weeks, 26 weeks, and 52 weeks for (a) first assessment and (b) treatment, broken down by service.

(As at 31/3/26) Weeks Waiting <i>as reported to SPPG</i>	AMH	Psychological Therapies - all services *	Eating Disorder Service	Autism Diagnostic	CAMHS
> 9 weeks	9	58	2	31	18
>13 weeks	4	120	13	104	0
>26 Weeks	0	177	7	249	0
>52 weeks	4	253	0	1219	0
Total	17	608	22	1603	18

ADHD assessment services - There is no commissioned service for adult ADHD within the Northern Trust therefore no performance data.

*Psychological Therapies - This includes waits for Adult Mental Health Psychology, Clinical Health Psychology, Learning Disability Psychology, and Children's Psychology.

(b) Adult - The breakdown of treatment by service is not available.

CAMHS - Unable to provide information for wait to treatment.

8. The number of patients whose referral was closed or discharged without treatment while on a waiting list, in each of the periods above.

(a) Adult Mental Health Services,

Adult- The Northern Health and Social Care Trust does not record this information centrally; therefore, to provide this information would require an extensive manual exercise which the Trust considers would exceed 18 hours of staff time. Therefore the Trust is applying Section 12 (1) of the FOIA, which states that a public authority is not obliged to comply with a request, if the staff time taken to determine whether the information is held, locating, retrieving and extracting the information, would exceed 18 hours (at a cost exceeding £450).

(b) CAMHS,

	CAMHS
2022/23	465
2023/24	479
2024/25*	-
2025/26	214

*Due to the introduction of encompass during the 2024/25 year we are unable to provide data with confidence for this year.

(c) Psychological Therapies,

Refer to section 12 exemption.

(d) Eating Disorder Services,

Refer to section 12 exemption.

(e) ADHD Assessment Services - There is no commissioned service for adult ADHD within the Northern Trust therefore no performance data.

(f) Autism Assessment Services.

Refer to section 12 exemption.

Crisis, Inpatient and Out-of-Area Care

9. The number of mental health crisis presentations to Emergency Departments within the Trust in each period.

The Northern Health and Social Care Trust does not record this information centrally; therefore, to provide this information would require an extensive manual exercise which the Trust considers would exceed 18 hours of staff time. Therefore the Trust is applying Section 12 (1) of the FOIA, which states that a public authority is not obliged to comply with a request, if the staff time taken to determine whether the information is held, locating, retrieving and extracting the information, would exceed 18 hours (at a cost exceeding £450).

10. The number of adult and CAMHS inpatient mental health beds commissioned by the Trust, and the average bed occupancy rate in each period.

Belfast Health and Social Care Trust is responsible for the management and provision of the Regional Adolescent Mental Health Inpatient unit. As Regional beds, places are not allocated per Trust but upon assessed clinical need.

11. The number of patients placed in out-of-area inpatient placements (including placements outside Northern Ireland) in each period, the total cost of these placements, and the average length of stay.

Information not held.

12. The number of under-18s admitted to adult mental health wards in each period.

- 1/4/22-31/3/23 = 8 admissions by 6 people
- 1/4/23-31/3/24 = 4 admissions
- 1/4/24-31/3/25 = 10 admissions by 6 people
- 1/4/25-31/3/26 = 1 Learning Disability Admission

Workforce

13. The current number of funded whole-time equivalent (WTE) posts within mental health services, broken down by staff group (consultant psychiatrist, other medical staff, mental health nursing, psychology, allied health professionals, social work, support staff).

CAMHS

Staff Group	WTE
Admin & Clerical	4.5
Medical & Dental	9.01
Nursing/Midwifery	23.96
Clinical Psychology	7.42
Allied Health Professional	4.03
Social Services	40.69
TOTAL	89.61

Adult Mental Health Services

Staff Group	WTE
Admin & Clerical	161.49
Medical & Dental	89.51
Nursing/Midwifery	515.30
Clinical Psychology	100.37
Allied Health Professional	96.79
Social Services	257.85
Support Services	15.14
TOTAL	1236.45

14. The number of vacant WTE posts within mental health services at the end of each period, broken down by the same staff groups.

CAMHS

Staff Group	22/23 WTE	23/24 WTE	24/25 WTE	25/26 WTE
Admin & Clerical	2.66	2.0	3.5	1.5
Medical & Dental	2.81	1.12	2.72	0.87
Nursing/Midwifery	1.16	2.66	5.91	1.42
Clinical Psychology	-0.47	3.0	-0.81	-1.57
Allied Health Professional	1.15	-0.65	0.73	3.03
Social Services	-0.68	7.57	5.96	5.19
TOTAL	6.63	15.7	18.01	10.44

Adult Mental Health Services

Staff Group	22/23 WTE	23/24 WTE	24/25 WTE	25/26 WTE
Admin & Clerical	31.20	23.34	26.41	31.05
Medical & Dental	44.18	19.70	25.04	15.78
Nursing/Midwifery	99.69	85.99	73.78	56.00
Clinical Psychology	37.98	28.54	30.96	29.65
Allied Health Professional	9.84	14.58	3.73	6.85
Social Services	34.86	20.94	23.21	22.01
Support Services	6.05	6.44	6.75	4.87
TOTAL	263.81	199.52	189.88	166.21

15. The total spend on agency and locum staff within mental health services in each period.

CAMHS

Spend	22/23 £	23/24 £	24/25 £	25/26 £
Agency & Locum	21,583	62,135	52,681	5,391

Adult Mental Health Services

Spend	22/23 £	23/24 £	24/25 £	25/26 £
Agency & Locum	9,775,954	8,187,792	7,511,890	5,739,316

Finance and Serious Incidents

16. The total budget allocated to mental health services in each period, expressed as both an absolute figure and as a percentage of the Trust's total budget.

CAMHS

Budget	22/23 £	23/24 £	24/25 £	25/26 £
Budget	5,723,736	5,923,355	6,778,458	5,541,882
% of Trust's total budget	0.6%	0.5%	0.6%	0.4%

Adult Mental Health Services

Budget	22/23 £	23/24 £	24/25 £	25/26 £
Budget	125,891,478	132,533,225	155,267,476	170,379,956
% of Trust's total budget	12.6%	12%	13.3%	13.6%

This relates to the budget directly managed by the Service Heads and Assistant Directors who manage these services. It excludes indirect costs (where other services in the Trust provide services to CAMHS or Adult Mental Health Services) and overheads (building costs, support services, HLP, management etc.).

17. The number of Serious Adverse Incidents (SAIs) recorded within mental health services in each period.

	SAIs
2022/23	32
2023/24	42
2024/25	40
2025/26	30

Please note: These figures represent SAI cases where Service users were known to Mental Health, LD and Psychological Services Division. Due to nature of our reporting process, we are unable to separate these into service areas.

18. The number of recorded deaths by suicide of patients who were under the care of, or had been discharged within the preceding 12 months from, the Trust's mental health services in each period.

	Suspected suicide
2022/23	10
2023/24	10
2024/25	19
2025/26	8

Please note: Due to the nature of reporting *suspected* suicide, the number of deaths recorded as suspected suicide is dependent on clarity of intent apparent at time of initial reporting on NHSCT information systems. Final recorded cause of death may change as a result of coronial processes that can lag 2 - 3years behind NHSCT SAI report.