

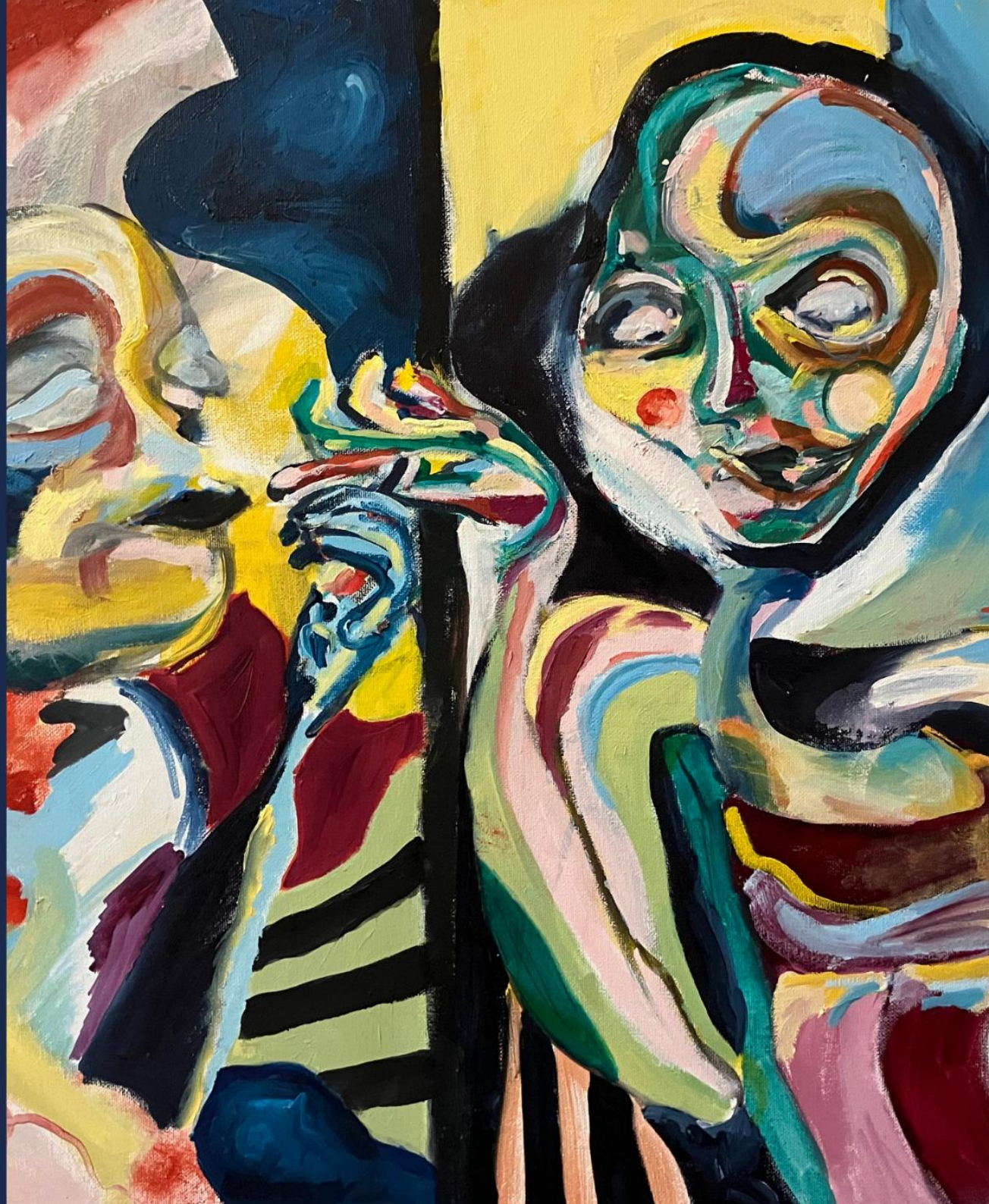
National Clinical Audit of Psychosis (NCAP)

State of the Nation Report 2026

Supplementary Analysis

This supplementary analysis provides additional data and statistical outputs to support the findings presented in the NCAP State of the Nation Report 2026. It includes detailed demographic information, regional analyses, physical health data, outcome measure recording and statistical analyses of inequalities in access to care and outcomes.

Unless otherwise stated, results are presented as percentages with frequencies shown in brackets (% (n)). Where statistical analyses are reported, standardised residuals with an absolute value greater than 2 are shown in bold.



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Full demographic profile of the cohort

Table 1 presents the demographic profile of people receiving EIP care in England and Wales. Percentages and frequencies are shown for age group, gender, ethnicity and Index of Multiple Deprivation (IMD) (England only). Comparisons with the 2024 bespoke audit are included where available.

Table 1. Full demographic breakdown for England and Wales by age, gender, ethnicity and IMD (England only)

	National (England & Wales) Bespoke 2024 n=10,625	National (England & Wales) Routine 2026 n= 15,663	England Routine 2026 n=15,370	Wales Routine 2026 n=293
AGE GROUP				
Under 18	2.5% (269)	3.4% (538)	3.4% (524) ¹	4.8% (14)
18-35	61.1% (6,493)	61.4% (9,611)	60.8% (9,338)	93.2% (273)
36 and over	36.4% (3,863)	35.2% (5,513)	35.8% (5,508)	1.7% (5)
Unknown/missing	0% (0)	0% (1)	0% (0)	0.3% (1)
GENDER				
Male	58% (6,160)	57.5% (9,013)	57.4% (8,822)	65.2% (191)
Female	41.8% (4,443)	41.4% (6,490)	41.6% (6,389)	34.5% (101)
Indeterminate	0.2% (22)	0.1% (12)	0.1% (11)	0.3% (1)
Unknown/missing	N/A	0.9% (148)	1% (148)	0% (0)
ETHNICITY (GROUPED CATEGORIES)				
Asian or Asian British	13% (1,382)	10% (1,568)	10% (1,542)	8.9% (26)
Black or Black British	13.2% (1,403)	12.6% (1,974)	12.7% (1,952)	7.5% (22)
Mixed	4.1% (431)	6.1% (957)	6.1% (944)	4.4% (13)
Other ethnic groups	3.9% (415)	7.7% (1,209)	7.8% (1,201)	2.7% (8)
White	61.3% (6,508)	53% (8,295)	52.6% (8,081)	73% (214)

¹ As the cohort includes people who had been on an EIP caseload for at least one year, the proportion of people aged under 18 at the reporting point may underestimate the number of children and young people who were referred to, or received care from, EIP services before age 18.

	National (England & Wales) Bespoke 2024 n=10,625	National (England & Wales) Routine 2026 n= 15,663	England Routine 2026 n=15,370	Wales Routine 2026 n=293
Unknown/missing	4.6% (486)	10.6% (1,660)	10.7% (1,650)	3.4% (10)
IMD				
Quartile 1 (most deprived)			44.2% (6,789)	
Quartile 2			26.3% (4,043)	
Quartile 3			16.1% (2,468)	
Quartile 4 (least deprived)			11.6% (1,776)	
Missing			1.9% (294)	

Figures 1 and 2 show the distribution of people receiving EIP care by age in England and Wales.

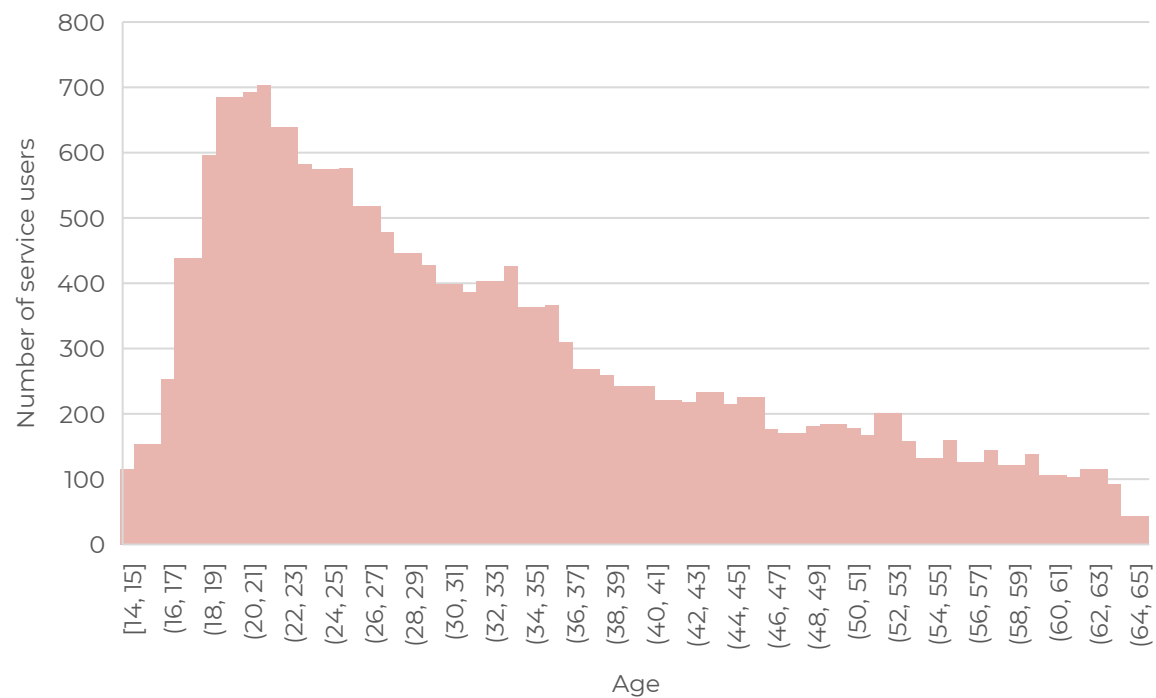


Figure 1. Age distribution of people receiving EIP care in England (n = 15,370)

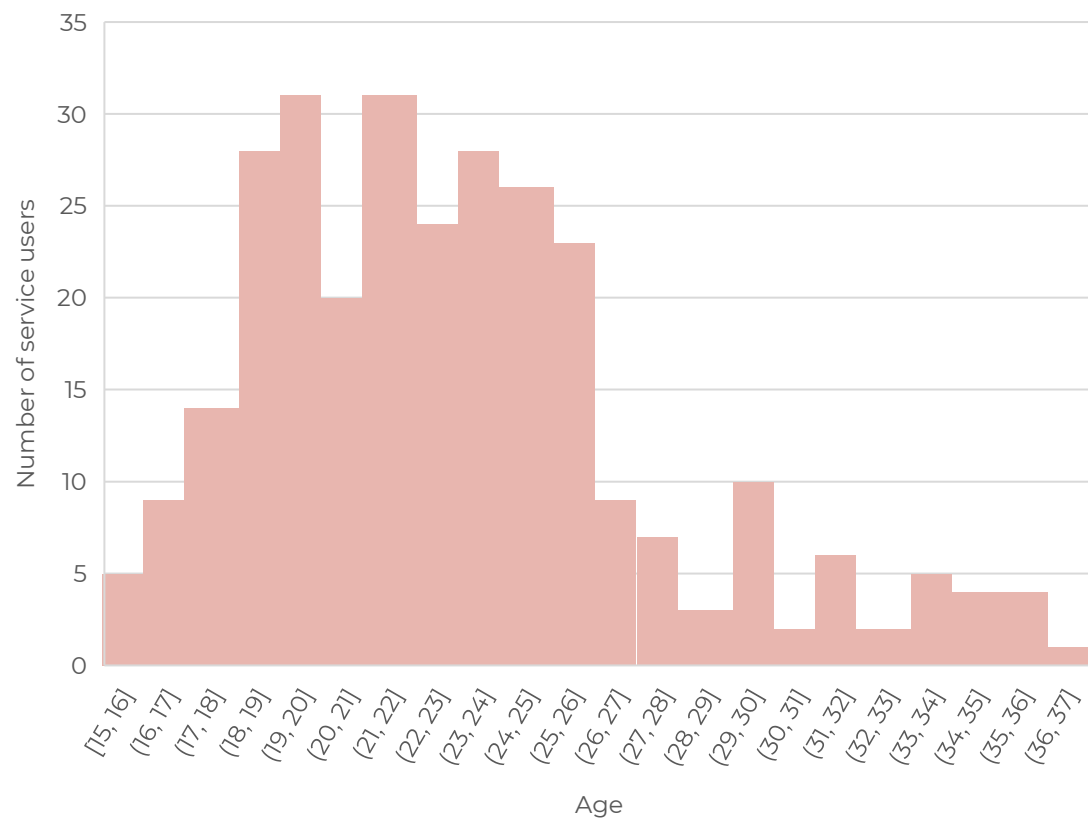


Figure 2. Age distribution of people receiving EIP care in Wales (n=293)

Distribution of the national cohort

Table 2 shows the proportion of the national cohort contributed by each participating NHS Trust and Health Board.

Table 2. Distribution of the national cohort across participating NHS Trusts and Health Boards.

NHS Trust/Health Board	% of national cohort (n)
EAST OF ENGLAND	
Cambridgeshire and Peterborough NHS Foundation Trust	0.6% (96)
Essex Partnership University NHS Foundation Trust	1.2% (182)
Hertfordshire Partnership University NHS Foundation Trust	2.1% (328)
Norfolk & Suffolk NHS Foundation Trust	1.8% (285)
LONDON	
Central and North West London NHS Foundation Trust	2.8% (445)
East London NHS Foundation Trust	4.4% (692)
North East London NHS Foundation Trust	2.2% (345)
Oxleas NHS Foundation Trust	1.5% (238)
South London and Maudsley NHS Foundation Trust	4.3% (667)
South West London and St George's Mental Health Trust	1.2% (193)
West London Mental Health NHS Trust	2.0% (321)
North London NHS Foundation Trust	4.2% (659)
MIDLANDS	
Birmingham and Solihull Mental Health NHS Foundation Trust	3.1% (487)
Black Country Healthcare NHS Foundation Trust	2.1% (328)
Coventry and Warwickshire Partnership Trust	1.0% (162)
Derbyshire Healthcare NHS Foundation Trust	1.5% (231)
Leicestershire Partnership NHS Trust	2.0% (317)
Lincolnshire Partnership NHS Foundation Trust	0.3% (53)
North Staffordshire Combined Healthcare NHS Trust	1.0% (153)
Northamptonshire Healthcare NHS Foundation Trust	0.7% (107)
Nottinghamshire Healthcare NHS Trust	2.6% (414)
Midlands Partnership NHS Foundation Trust	1.3% (207)
Herefordshire and Worcestershire Health and Care NHS Trust	1.1% (174)
NORTH EAST AND YORKSHIRE	

NHS Trust/Health Board	% of national cohort (n)
Bradford District Care NHS Foundation Trust	2.6% (415)
Humber NHS Foundation Trust	1.1% (179)
NAVIGO Health and Social Care CIC	0.3% (41)
Cumbria, Northumberland, Tyne and Wear NHS Foundation Trust	2.9% (459)
Rotherham, Doncaster and South Humber Mental Health NHS Foundation Trust	1.6% (252)
Sheffield Health & Social Care NHS Foundation Trust	1.8% (289)
South West Yorkshire Partnership NHS Foundation Trust	2.8% (441)
Tees, Esk and Wear Valley NHS Foundation Trust	4.0% (626)
Community Links Northern Ltd	2.2% (337)
NORTH WEST	
Cheshire and Wirral Partnership NHS Foundation Trust	1.9% (290)
Greater Manchester Mental Health Services NHS Foundation Trust	5.4% (839)
Lancashire and South Cumbria NHS Foundation Trust	3.5% (543)
Mersey Care NHS Foundation Trust	3.8% (589)
Pennine Care NHS Foundation Trust	2.9% (451)
SOUTH EAST	
Berkshire Healthcare NHS Foundation Trust	0.5% (79)
Kent and Medway Mental Health NHS Trust	2.1% (329)
Oxford Health NHS Foundation Trust	1.6% (256)
Sussex Partnership NHS Foundation Trust	2.2% (345)
Hampshire and Isle of Wight Healthcare NHS Foundation Trust	2.5% (394)
SOUTH WEST	
Gloucestershire Health and Care NHS Foundation Trust	0.6% (98)
Avon & Wiltshire Mental Health Partnership NHS Trust	2.6% (401)
Cornwall Partnership NHS Foundation Trust	1.0% (160)
Devon Partnership Trust	1.2% (186)
Dorset Healthcare University NHS Foundation Trust	0.8% (121)
Livewell Southwest CIC	0.6% (95)
Somerset NHS Foundation Trust	0.5% (71)
WALES	
Aneurin Bevan	0.4% (68)

NHS Trust/Health Board	% of national cohort (n)
Betsi Cadwaladr - East	0.2% (35)
Cardiff and Vale	0.5% (72)
Cwm Taf Morgannwg	0.2% (31)
Hywel Dda	0.3% (53)
Powys Teaching Health Board	0.0% (4)
Swansea Bay	0.2% (30)

Table 3. Regional distribution of NCAP cases compared with Psymaptic data.

	East of England	London	Midlands	North East & Yorkshire	North West	South East	South West
NCAP England Routine 2026	5.8%	23.2%	17.1%	19.8%	17.6%	9.1%	7.4%
Psymaptic England Probable FEP count 2025	8.3%	30.3%	19.9%	13.9%	12.5%	7.9%	7.2%

Caseload size and uptake of psychosocial interventions

Additional analysis was conducted to examine the relationship between team caseload size and uptake of NCAP standards. The analysis accounted for differences in patient characteristics (including age, gender, ethnicity and deprivation), as well as variation between teams and trusts.

- **CBTp** - There was no significant association between team caseload size and receipt of CBTp.
- **Family intervention** - Higher team caseloads were associated with lower receipt of family intervention. For every 50-patient increase in caseload, the odds of receiving family intervention decreased by almost 20%.
- **Supported employment and education** - Higher team caseloads were also associated with lower receipt of supported employment and education. For every 50-patient increase in caseload, the odds of receiving supported employment and education decreased by 18%.
- **Carer support** - Higher team caseloads were associated with lower receipt of carer support. For every 50-patient increase in caseload, the odds of receiving carer support decreased by around 30%.

Variance analysis

Further analysis explored the extent to which variation in the uptake of psychosocial interventions was attributable to differences between trusts, teams and individual patients.

- **CBTp** - The variance analysis suggested that just over 20% of the variation in CBTp receipt was attributable to differences between trusts, while around 5% was attributable to differences between teams within trusts. Most of the variation (over 70%) was attributable to differences between individual patients.
- **Family intervention** - The variance analysis suggested that around 10% of the variation in family intervention receipt was attributable to differences between trusts and a further 10% to differences between teams within trusts. However, most of the variation (around 80%) was attributable to differences between individual patients.
- **Education and employment support** - The analyses indicated that around 16-21% of the variation in the receipt of education and employment support is due to differences between Trusts. The influence of the Trust on the use of education and employment support was greater than the influence of the team, as a smaller amount of variation (around 8% of the total) was attributable to differences between teams (within Trusts). As with other outcomes, much of the variation (over 70%) in the receipt of education and employment support is attributable to differences between individual patients.
- **Carer support** - The analysis suggested that around 20%–25% of the variation in receipt of carer support was attributable to differences between trusts, while around 9% was attributable to differences between teams within trusts. Most of the remaining variation (approximately 70%) was attributable to differences between individual patients.

Referrals by region

This section provides additional information on regional variation in the delivery of psychosocial interventions. Table 3 shows the proportion of people receiving EIP care who had a recorded referral to a psychosocial intervention within routine data. Referrals are identified using SNOMED CT referral codes as defined in the NCAP SNOMED Coding Guidance and represent referrals or signposting to an intervention, rather than confirmed receipt of the intervention.

Note: Referral rates are based on the recording of relevant SNOMED CT referral codes and indicate referral or signposting to an intervention. They do not represent confirmed receipt of the intervention or performance against the NCAP standard.

Table 4. Percentage of people with a recorded referral to psychosocial interventions by region

	East of England (n = 891)	London (n = 3560)	Midlands (n = 2633)	North East & Yorkshire (n = 3039)	North West (n = 2712)	South East (n = 1403)	South West (n = 1132)	Wales (n = 293)
Cognitive Behavioural Therapy for Psychosis (CBTp)	2% (18)	0% (0)	1.1% (29)	0.9% (27)	0.3% (8)	0.4% (6)	0.2% (2)	3.4% (10)
Family intervention	0.9% (8)	0.6% (21)	0.6% (15)	0.6% (19)	1.5% (40)	0.2% (3)	0.2% (2)	0% (0)
Education and employment support	3.9% (35)	0% (0)	1.8% (47)	1.3% (39)	10.4% (283)	0.6% (9)	1.1% (12)	4.8% (14)
Carer support	0.2% (2)	0% (0)	1.6% (42)	0.4% (12)	0.1% (4)	0.4% (6)	0% (0)	2.7% (8)

Physical health

Physical healthcare data were examined across three stages and are presented as the percentage of people with a recorded activity at each stage:

1. Physical healthcare screening or assessment offered
2. Recording of screening/assessment outcomes
3. Offer of appropriate interventions where an intervention is required according to the Lester tool framework.

The results below provide additional detail to support the findings presented in the main report and highlight differences in recording between England and Wales. Table 4 provides a breakdown of the individual components of the physical health standards and illustrates where activity is most frequently recorded and where recording gaps are most apparent.

Table 5. Physical health assessments by screening offered, screening outcome recorded and intervention offered

Assessment type	Assessment	Step 1: Screening offered		Step 2: Screening outcome recorded		Step 3: Intervention offered	
		England	Wales	England	Wales	England	Wales
Verbal assessment	Smoking	15.1% (2,325)	90.3% (260)	5.3% (817)	82.9% (243)	6.0% (921)	88.1% (258)
	Alcohol use	13.5% (2,073)	89.3% (258)	2.3% (350)	82.3% (241)	5.4% (832)	87.4% (256)
	Substance misuse	9.5% (1,455)	90.0% (260)	1.0% (159)	83.6% (245)	3.9% (599)	87.7% (257)
Clinical observations	BMI	26.9% (4,142)	88.2% (254)	8.0% (1,225)	79.9% (234)	19.4% (2,982)	82.3% (241)
	Blood pressure	15.1% (2,321)	89.6% (258)	4.0% (618)	81.9% (240)	12.7% (1,949)	87.4% (256)
Blood tests	Glucose	19.1% (2,931)	85.0% (243)	2.0% (311)	73.7% (216)	13.4% (2,053)	82.6% (242)
	Cholesterol	18.5% (2,838)	87.4% (249)	2.0% (310)	76.8% (225)	12.3% (1,886)	84.6% (248)

Outcome measures

Outcome measures provide an important way of assessing changes in clinical and personal outcomes over time and supporting recovery. Figure 3 shows the frequency with which different outcome measures were recorded on more than one occasion across England and Wales. DIALOG was the most frequently repeated outcome measure (44%), followed by HoNOS (34%) and QPR (15%). ReQOL-10 accounted for 7% of repeated outcome measures, while HoNOSCA and Goal-Based Outcomes (GBO) each accounted for less than 1%.

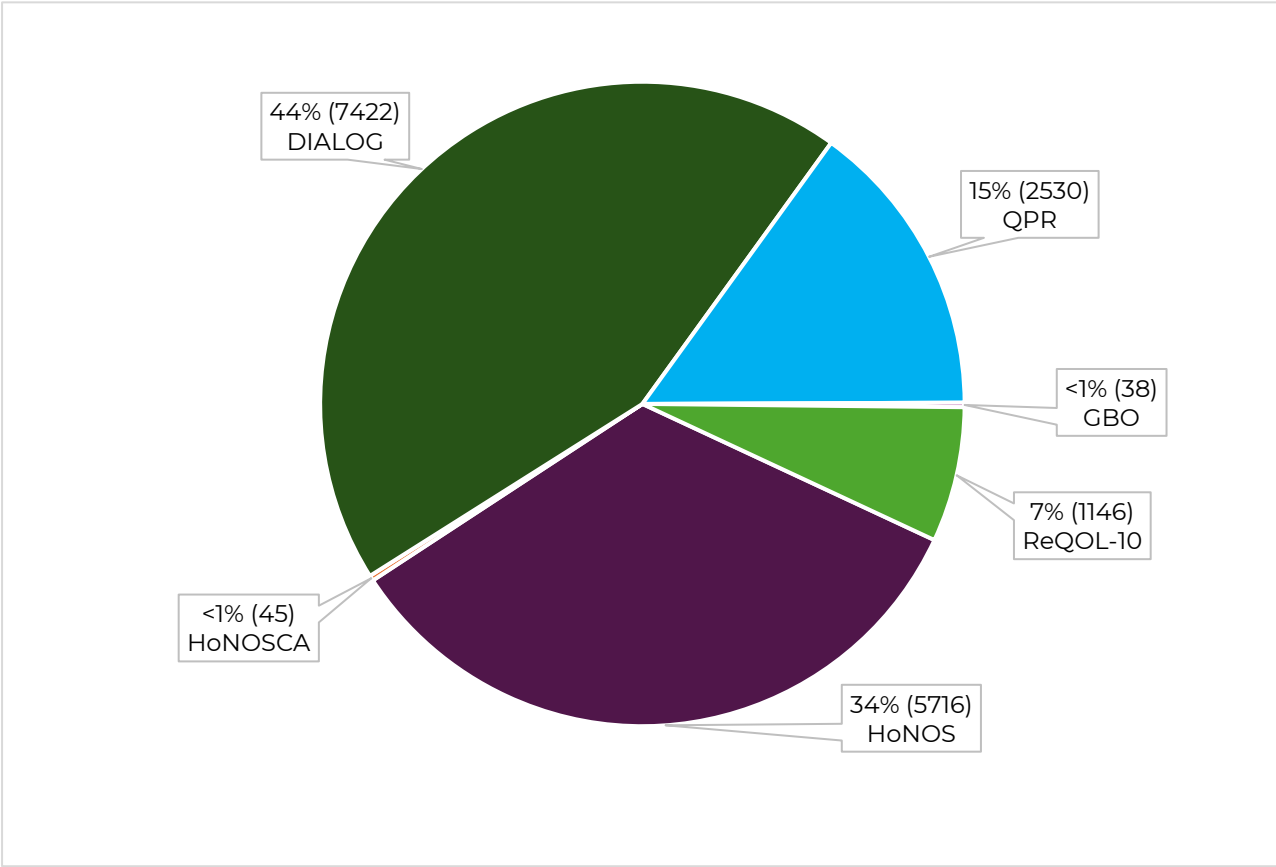


Figure 3. Frequency of outcome measures recorded twice in England and Wales

Health inequalities

This section provides additional information on differences in recorded delivery of care across demographic groups. The analyses support the findings presented in the main report and should be interpreted alongside known limitations in routine data recording and completeness.

These bar graphs display the percentage of NCAP standards met for timely access, CBTp, support employment, family intervention, carer-focused education and support programmes, as well as outcome measures displayed in each age category.

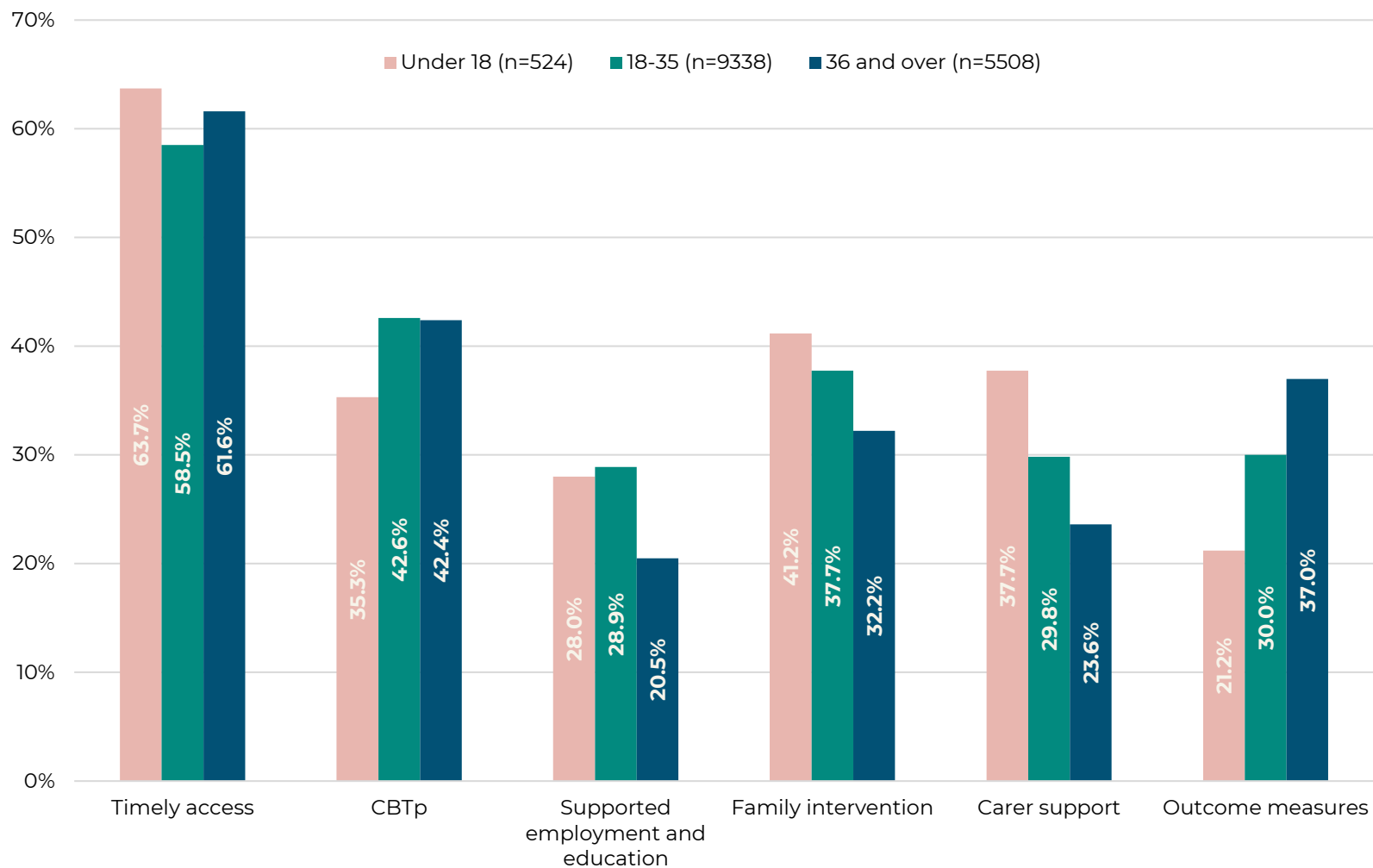


Figure 4. Performance against NCAP standards by age group in England

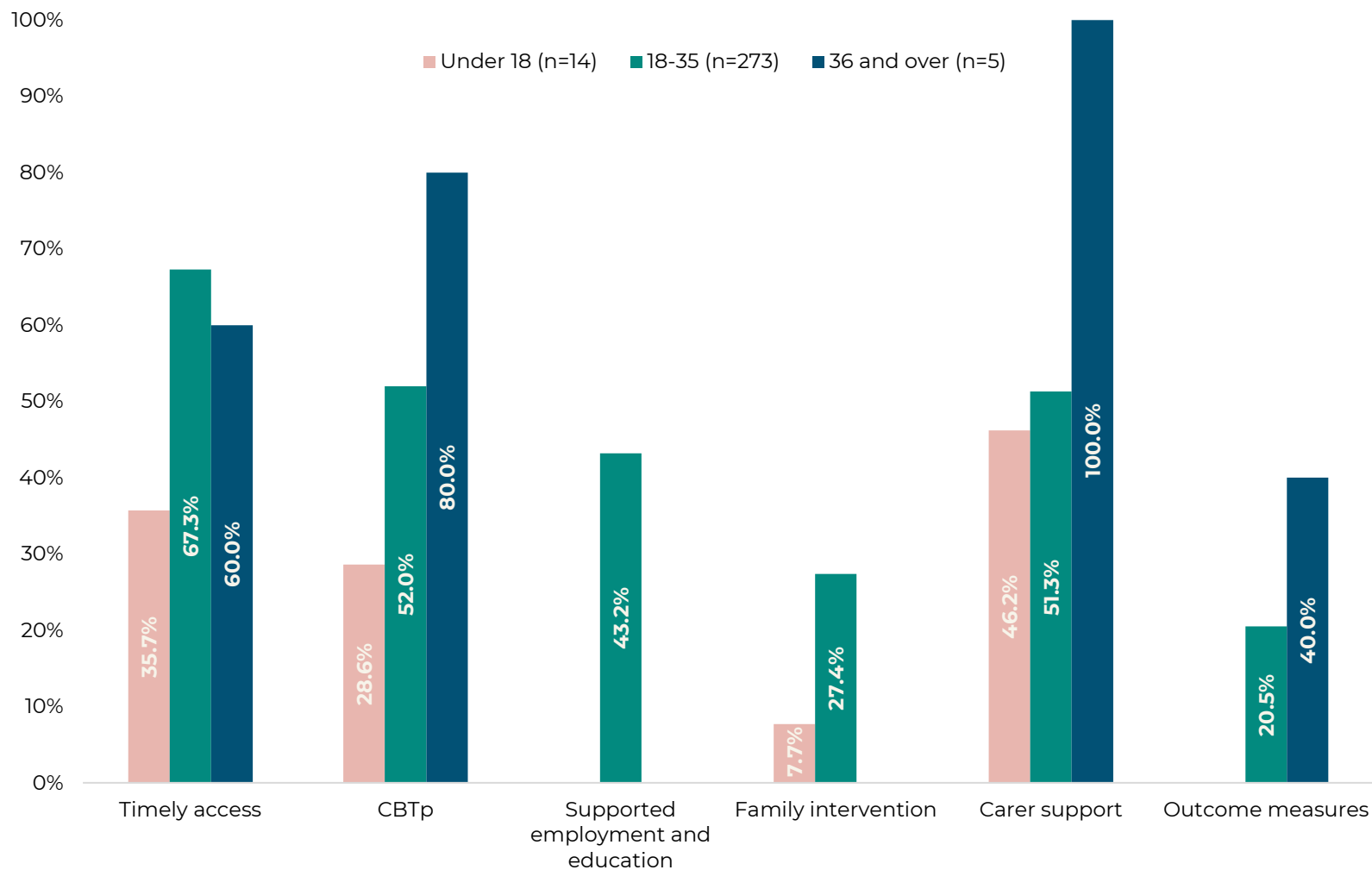


Figure 5. Performance against NCAP standards by age group in Wales²

² Findings for some age groups in Wales should be interpreted cautiously because of small numbers.

Health inequalities: statistical analysis

Pearson's chi-squared tests were used to identify statistically significant differences between demographic groups. Where significant associations were identified, standardised residuals were examined to determine which groups contributed most strongly to the findings. Residual values greater than ± 2 were considered statistically significant.

To improve readability, detailed tables are included where multiple demographic groups contributed significantly to a finding or where percentages and standardised residuals provide important additional context. Where only a small number of significant differences were identified, findings are summarised narratively.

Note: Standardised residuals with an absolute value greater than 2 are shown in bold, indicating statistically significant contributions to the chi-squared result.

Age

Family Intervention

Statistical analysis: The proportion of people with FEP or ARMS who received, did not receive, or were referred for family intervention differed significantly by age group (X^2 (df, 10) = 149.504, $p = <0.001$). Standardised residuals indicated that the significant contributions to the chi-squared result came only from people aged 18-35 years, who were more likely to receive ($z = 2.5$) family intervention, and people aged 36 and older, who were less likely to receive ($z = -3.8$) family intervention.

Summary: Younger people were more likely to receive family intervention, whereas people aged 36 years and over were less likely to receive family intervention.

Education and employment support

Statistical analysis: The proportion of people with FEP or ARMS who received, did not receive, or were referred for supported employment and education differed significantly by age group (X^2 (df, 8) = 176.775, $p = <0.001$). Standardised residuals indicated that significant contributions to the chi-squared result came only from people aged 18 through 35, who were more likely to receive ($z = 5.6$) education and employment support, and people aged 36 and older who were less likely to receive ($z = -7.1$) education and employment support.

Summary: People aged 18–35 are more likely to receive employment and education support, while those aged 36 and over are less likely to receive employment and education support.

Carer support

Statistical analysis: The proportions of people with FEP or ARMS who received, did not receive, or were referred for carer support differed significantly by age group (X^2 (df, 10) = 139.815, p = <0.001). The associated standardised residuals are shown in table 5.

Summary: Carers of young people are more likely to receive carer support, while carers of people aged 36 and over are less likely to receive carer support.

Table 6. Take up of carer support programmes by age group, with standardised residuals

Age group	Took up	z	Not recorded	z
Under 18	30.3% (163)	3.8	68.8% (370)	-2.0
18-35	24.3% (2338)	3.6	74.2% (7134)	-2.3
36 and over	18.8% (1035)	-5.9	80.7% (4448)	3.7

Outcome measures

Statistical analysis: The proportions of people with FEP or ARMS who recorded two or more outcome measures at both an initial and follow-up assessment differed significantly by age group, (X^2 (df, 2) = 116.716, p = <0.001). All age groups significantly contributed to the chi-squared analysis. Please see table 6.

Summary: Outcome measures are more consistently recorded for older adults, while younger people, particularly those under-18, are less likely to have outcome measures recorded. This may reflect differences in the measures used and data recording practices across age groups, particularly where tools developed for adult populations are not consistently applied in younger cohorts.

Table 7. Recording of outcome measures by age group, with standardised residuals

Age group	Two or more outcome measures recorded twice	z	Less than two outcome measures were recorded twice	z
Under 18	20.6% (111)	-4.7	79.4% (427)	3.2
18 – 35	29.8% (2862)	-3.9	70.2% (6749)	2.6
36 and over	37.0% (2039)	6.5	63.0% (3474)	-4.5

Gender

CBTp

Statistical analysis: The proportion of people with FEP or ARMS who received, did not receive, or were referred for CBTp differed significantly by gender (X^2 (df, 15) = 84.693, p = <0.001). Males who received (z = -4.3) CBTp, and females who received (z = 5.1) CBTp contributed significantly to the chi-square analysis.

Summary: Males are less likely to receive CBTp, while females are more likely to receive CBTp.

Education and employment support

Statistical analysis: The proportions of people with FEP or ARMS who received, did not receive, or were referred for education and employment support differed significantly by gender (X^2 (df, 12) = 37.277, p = <0.001). Standardised residuals indicated that significant contributions to the chi-squared analysis came only from those who had an 'unknown' gender and received (z = 3.4) education and employment support.

Summary: There is no clear difference in access to employment and education support between males and females, with variation driven primarily by records with unknown gender.

Carer support

Statistical analysis: The proportions of people with FEP or ARMS who received, did not receive, or were referred for carer support differed significantly by gender (X^2 (df, 15) = 122.577, p = <0.001). Standardised residuals indicated that significant contributions to the chi-squared analysis came from those who were male and received (z = 2.1) carer support and those who were female and received (z = -2.3) carer support.

Summary: Carers of people who were males are slightly more likely to receive carer support while females are less likely to receive carer support.

Outcome measures

Statistical analysis: The proportions of people with FEP or ARMS who recorded two or more outcome measures at both an initial and follow-up assessment differed significantly by gender (X^2 (df, 3) = 39.321, p = <0.001). Standardised residuals indicated that significant contributions to the chi-squared analysis came from those who were female and recorded two or more outcome measures across two timepoints (z = 2.7), and those who were unknown who did (z = -4.0) and did not (z = 2.7) record two or more outcome measures across two timepoints.

Summary: Outcome measures were more likely to be recorded at both assessment timepoints for females. However, much of the observed variation was attributable to records with unknown gender.

Ethnicity group

CBTp

Statistical analysis: The proportion of people with FEP or ARMS who received, did not receive, or were referred for CBTp differed significantly by ethnicity (X^2 (df, 25) = 162.116, p = <0.001). Table 7 shows the associated standardised residuals.

Summary: People from Black or Black British groups and those with an unknown or missing ethnicity are less likely to receive CBTp, while Asian or Asian British groups and White groups are more likely to receive CBTp.

Table 8. Take up of CBTp by ethnicity group, with standardised residuals

Ethnicity (grouped categories)	Took up	z	Not recorded	z
Asian or Asian British	49.7% (780)	4.4	48.7% (763)	-3.9
Black or Black British	38.6% (762)	-2.6	60.2% (1,188)	2.4
Mixed	43.7% (418)	0.6	55.0% (526)	-0.5
Other Ethnic Groups	40.1% (485)	-1.2	58.6% (709)	1.2
White	44.2% (3,665)	2.4	54.2% (4,497)	-2.3
Unknown or not recorded	32.3% (536)	-6.3	66.5% (1,104)	5.7

Family intervention

Statistical analysis: The proportions of people with FEP or ARMS who received, did not receive, or were referred for family intervention differed significantly by ethnicity, (X^2 (df, 25) = 103.018, p = <.001). The table 8 shows the associated standardised residuals.

Summary: People from Black or Black British groups and those with an unknown or missing ethnicity are less likely to receive family intervention, while White ethnic groups are more likely to receive it.

Table 9. Take up of family intervention by ethnicity group, with standardised residuals

Ethnicity (grouped categories)	Took up	z	Not recorded	z
Asian or Asian British	25.8% (404)	-0.7	72.4% (1,135)	0.6
Black or Black British	22.8% (451)	-3.3	75.4% (1,488)	2.2
Mixed	25.3% (242)	-0.9	72.8% (697)	0.6
Other Ethnic Groups	25.9% (313)	-0.6	73.0% (882)	0.7
White	29.0% (2,402)	3.9	68.4% (5,676)	-3.0
Unknown or not recorded	22.5% (374)	-3.3	76.7% (1,273)	2.7

Education and employment support

Statistical analysis: The proportions of people with FEP or ARMS who received, did not receive, or were referred for education and employment support differed significantly by ethnicity (X^2 (df, 20) = 76.621, $p = <.001$). Standardised residuals indicated that significant contributions to the chi-squared analysis came only from those who were referred and identified as Black or Black British ($z = -3.4$), Other ($z = -2.4$), White ($z = 3.7$), or those who were Unknown and received ($z = -2.6$) education and employment support.

Summary: People from Black or Black British groups or other ethnic groups are less likely to be referred for education and employment support, while White ethnic groups are more likely to be referred. Those from and unknown ethnic groups were more likely to receive education and employment support.

Carer support

Statistical analysis: The proportions of people with FEP or ARMS who received, did not receive, and were referred for carer support differed significantly by ethnicity (X^2 (df, 25) = 127.880, $p = <.001$). The associated standardised residuals are in Table 9.

Summary: Carers of people from Black or Black British groups and from unknown backgrounds are less likely to receive carer support. Carers of people from Asian or Asian British groups and White ethnic groups are more likely to receive carer support.

Table 10. Take up of carer support by ethnicity group, with standardised residuals

Ethnicity (grouped categories)	Took up	z	Not recorded	z
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Asian or Asian British	27.2% (426)	3.8	72.0% (1,129)	-2.0
Black or Black British	17.7% (349)	-4.6	81.9% (1,616)	2.8
Mixed	21.4% (205)	-0.8	78.0% (746)	0.6
Other Ethnic Groups	20.5% (248)	-1.5	79.2% (958)	1.2
White	23.9% (1,982)	2.5	74.5% (6,181)	-1.9
Unknown or not recorded	19.6% (326)	-2.5	79.7% (1,323)	1.6

Clozapine

Statistical analysis: The proportions of people with FEP or ARMS who received or did not receive clozapine differed significantly by ethnicity (X^2 (df, 20) = 91.201, $p = <0.001$). Standardised residuals indicated that significant contributions came from those who received clozapine and identified as Asian/Asian British ($z = 2.6$), Black or Black British ($z = 3.5$), and Unknown/missing ($z = -3.6$).

Summary: People from Black or Black British backgrounds and Asian or Asian British backgrounds were more likely to receive clozapine.

Outcome measures

Statistical analysis: The proportions of people with FEP or ARMS who recorded two or more outcome measures at both an initial and follow-up assessment differed significantly by ethnicity (X^2 (df, 5) = 211.616, $p = <0.001$). Standardised residuals indicated that significant contributions to the chi-squared analysis came from those who recorded two or more outcome measures across two timepoints and were Asian/Asian British ($z = -2.0$), Black or Black British ($z = -5.8$), White or White British ($z = 7.6$), and Unknown ($z = -6.7$).

Summary: People from White ethnic groups were more likely to have two or more outcome measures recorded at both timepoints, while people from Asian or Asian British, Black or Black British, and unknown backgrounds were less likely to have this information recorded.

Ethnicity

Statistical analysis: The above analysis was repeated using more detailed ethnicity categories. Table 10 shows the individual ethnicities within each grouped ethnicity category used throughout the report and provides additional context to the ethnicity findings presented in the 2026 State of the Nation Report. This analysis is provided for reference only.

Table 11. Take up of CBTp, family intervention and carer support programmes by ethnicity (ungrouped categories)

Ethnicity (ungrouped categories)	CBTp	Family intervention	Carer support
Asian/Asian British (1568)	49.7% (780)	25.8% (404)	27.2% (426)
Asian or Asian British - Bangladeshi (330)	62.3% (203)	21.5% (71)	19.6% (64)
Asian or Asian British - Indian (429)	54% (231)	32.9% (141)	30.5% (131)
Asian or Asian British - Pakistani (798)	42.6% (335)	23.8% (19)	28.4% (227)
Black/Black British (1974)	38.6% (762)	22.8% (451)	17.7% (349)
Black or Black British - African (1116)	36.6% (409)	20.2% (225)	15.3% (171)
Black or Black British - any other Black background (495)	40.2% (199)	28.3% (140)	21.0% (104)
Black or Black British - Caribbean (363)	42.4% (154)	23.7% (86)	20.4% (74)
Mixed (957)	43.7% (418)	25.3% (242)	21.4% (205)
Mixed - any other mixed background (212)	41.5% (88)	29.1% (61)	28.8% (61)
Mixed - White and Asian (520)	43.1% (224)	25.8% (134)	19.8% (103)
Mixed - White and Black African (103)	47.6% (49)	26.2% (27)	21.4% (22)
Mixed - White and Black Caribbean (119)	46.7% (57)	16.4% (20)	15.6% (19)
Unknown/not recorded (1,660)	32.3% (536)	22.5% (374)	19.6% (326)
Not known (879)	34.4% (267)	21.0% (185)	19.3% (170)
Not stated (781)	34.4% (269)	24.2% (189)	20.0% (156)
Other Ethnic Groups (1,209)	40.1% (485)	25.9% (313)	20.5% (248)
Other Ethnic Groups - any other ethnic group (898)	38% (339)	24.6% (219)	18.8% (169)
Other Ethnic Groups - Chinese (311)	46% (143)	30.2% (94)	25.4% (79)
White (8,295)	43.8% (3,541)	29.0% (2,402)	23.9% (1,982)
White - Any other white background (1,109)	43.2% (479)	24.8% (275)	19.0% (211)
White - British (7,127)	44.3% (3,159)	29.6% (2,109)	24.7% (1,759)
White - Irish (59)	45.8% (27)	30.5% (18)	20.3% (12)

CBTp

Table 12. Take up of CBTp by ethnicity (ungrouped categories), with standardised residuals

Ethnicity	Took up	z	Not recorded	z
Asian or Asian British - Any other Asian background	45.5% (5)	0.2	0.0% (0)	-2.5
Asian or Asian British - Bangladeshi	62.4% (206)	5.6	37.0% (122)	-4.6
Asian or Asian British - Indian	53.8% (231)	3.6	44.8% (192)	-3.1
Asian or Asian British - Pakistani	42.4% (338)	0.0	56.3% (449)	0.1
Black or Black British - African	36.6% (409)	-3.0	62.0% (692)	2.6
Black or Black British - Any other Black background	40.2% (199)	-0.8	58.4% (289)	0.7
Black or Black British - Caribbean	42.4% (154)	0.0	57.0% (207)	0.2
Mixed - Any other mixed background	41.5% (88)	-0.2	55.7% (118)	0.9
Mixed - White and Asian	43.1% (224)	0.2	56.0% (291)	0.0
Mixed - White and Black African	47.6% (49)	0.8	52.4% (54)	-0.5
Mixed - White and Black Caribbean	46.7% (57)	0.7	51.6% (63)	-0.7
Other Ethnic Groups - Any other ethnic group	38.1% (342)	-2.0	60.9% (547)	1.9
Other Ethnic Groups - Chinese	46.0% (143)	1.0	52.1% (162)	-0.9
White - Any other white background	43.2% (479)	0.4	54.9% (609)	-0.5
White - British	44.3% (3159)	2.5	54.1% (3856)	-2.3
White - Irish	45.8% (27)	0.4	54.2% (32)	-0.2
Not known	30.4% (267)	-5.5	68.7% (604)	5.0
Not stated	34.4% (269)	-3.4	64.0% (500)	3.0

Family intervention

Table 13. Take up of family intervention by ethnicity (ungrouped categories), with standardised residuals

Ethnicity	Took up	z	Not recorded	z
Asian or Asian British - Any other Asian background	18.2% (2)	-0.5	9.1% (1)	-2.4
Asian or Asian British - Bangladeshi	21.5% (71)	-1.8	77.3% (255)	1.3
Asian or Asian British - Indian	32.9% (141)	2.5	65.7% (282)	-1.3
Asian or Asian British - Pakistani	23.8% (190)	-1.6	74.8% (597)	1.2

Black or Black British - African	20.2% (225)	-4.2	77.9% (869)	2.6
Black or Black British - Any other Black background	28.3% (140)	0.7	69.7% (345)	-0.4
Black or Black British - Caribbean	23.7% (86)	-1.1	75.5% (274)	1.0
Mixed - Any other mixed background	28.8% (61)	0.6	67.9% (144)	-0.6
Mixed - White and Asian	25.8% (134)	-0.4	72.7% (378)	0.4
Mixed - White and Black African	26.2% (27)	-0.1	73.8% (76)	0.3
Mixed - White and Black Caribbean	16.4% (20)	-2.2	81.1% (99)	1.3
Other Ethnic Groups - Any other ethnic group	24.4% (219)	-1.4	74.4% (668)	1.1
Other Ethnic Groups - Chinese	30.2% (94)	1.2	68.8% (214)	-0.5
White - Any other white background	24.8% (275)	-1.2	72.4% (803)	0.5
White - British	29.6% (2109)	4.7	67.8% (4832)	-3.4
White - Irish	30.5% (18)	0.6	69.5% (41)	-0.2
Not known	21.0% (185)	-3.3	78.6% (691)	2.6
Not stated	24.2% (189)	-1.4	74.5% (582)	1.1

Education and employment support

Table 14. Take up of education and employment support by ethnicity (ungrouped categories), with standardised residuals

Ethnicity	Took up	z	Not recorded	z
Asian or Asian British - Any other Asian background	45.5% (5)	1.6	18.2% (2)	-2.2
Asian or Asian British - Bangladeshi	15.8% (52)	-2.6	82.1% (271)	1.7
Asian or Asian British - Indian	24.5% (105)	0.9	73.9% (317)	0.0
Asian or Asian British - Pakistani	24.5% (105)	0.9	73.9% (317)	0.0
Black or Black British - African	22.0% (246)	-0.3	75.5% (843)	0.6
Black or Black British - Any other Black background	21.4% (106)	-0.5	77.4% (383)	0.9
Black or Black British - Caribbean	20.9% (76)	-0.6	77.4% (281)	0.8
Mixed - Any other mixed background	25.9% (55)	1.1	69.8% (148)	-0.7
Mixed - White and Asian	22.9% (119)	0.2	74.6% (388)	0.2
Mixed - White and Black African	23.3% (24)	0.2	74.8% (77)	0.1
Mixed - White and Black Caribbean	20.5% (25)	-0.5	74.8% (94)	0.4

Other Ethnic Groups - Any other ethnic group	19.3% (173)	-2.0	79.0% (709)	1.7
Other Ethnic Groups - Chinese	25.1% (78)	1.0	72.0% (224)	-0.4
White - Any other white background	19.9% (221)	-1.8	76.9% (853)	1.1
White - British	23.6% (1,682)	2.0	71.7% (5,111)	-2.2
White - Irish	16.9% (10)	-0.9	79.7% (47)	0.5
Not known	19.8% (174)	-1.7	76.7% (674)	0.9
Not stated	19.2% (150)	-1.9	78.2% (611)	1.4

Carer support

Table 15. Take up of carer support by ethnicity (ungrouped categories), with standardised residuals

Ethnicity	Took up	z	Not recorded	z
Asian or Asian British – Any other Asian background	36.4% (4)	1.0	27.3% (3)	-1.9
Asian or Asian British - Bangladeshi	19.4% (64)	-1.2	79.1% (261)	0.6
Asian or Asian British - Indian	30.5% (131)	3.5	69.5% (298)	-1.6
Asian or Asian British - Pakistani	28.4% (227)	3.5	71.1% (567)	-1.7
Black or Black British - African	15.3% (171)	-5.1	84.2% (940)	3.0
Black or Black British - Any other Black background	21.0% (104)	-0.7	78.2% (387)	0.5
Black or Black British - Caribbean	20.4% (74)	-0.9	79.6% (289)	0.7
Mixed - Any other mixed background	28.8% (61)	1.9	70.8% (150)	-0.9
Mixed - White and Asian	19.8% (103)	-1.3	79.8% (415)	0.9
Mixed - White and Black African	21.4% (22)	-0.3	78.6% (81)	0.3
Mixed - White and Black Caribbean	15.6% (19)	-1.6	82.0% (100)	0.7
Other Ethnic Groups - Any other ethnic group	18.8% (169)	-2.4	80.8% (726)	1.6
Other Ethnic Groups - Chinese	25.4% (79)	1.0	74.6% (232)	-0.3
White - Any other white background	19.0% (211)	-2.5	79.6% (883)	1.3
White - British	24.7% (1,759)	3.7	73.7% (5,251)	-2.5
White - Irish	20.3% (12)	-0.4	79.7% (47)	0.3

Not known	19.3% (170)	-2.0	80.1% (704)	1.3
Not stated	20.0% (156)	-1.5	79.3% (619)	0.9

Outcome measures

Table 16. Recording of outcome measures by ethnicity (ungrouped categories), with standardised residuals

Ethnicity	Two or more outcome measures recorded twice	z	Less than two outcome measures were recorded twice	z
Asian or Asian British – Any other Asian background	9.1% (1)	-1.3	90.9% (10)	0.9
Asian or Asian British - Bangladeshi	19.4% (64)	-4.0	80.6% (266)	2.8
Asian or Asian British - Indian	35.7% (153)	1.3	64.3% (276)	-0.9
Asian or Asian British - Pakistani	29.8% (238)	-1.1	70.2% (560)	0.7
Black or Black British - African	24.5% (273)	-4.5	75.5% (843)	3.1
Black or Black British - Any other Black background	23.4% (116)	-3.4	76.6% (379)	2.3
Black or Black British - Caribbean	26.4% (96)	-1.9	73.6% (267)	1.3
Mixed - Any other mixed background	31.6% (67)	-0.1	68.4% (145)	0.1
Mixed - White and Asian	31.0% (161)	-0.4	69.0% (359)	0.3
Mixed - White and Black African	36.9% (38)	0.9	63.1% (65)	-0.6
Mixed - White and Black Caribbean	25.4% (31)	-1.3	74.6% (91)	0.9
Other Ethnic Groups - Any other ethnic group	29.3% (263)	-1.4	70.7% (635)	1.0
Other Ethnic Groups - Chinese	28.6% (89)	-1.1	71.4% (222)	0.7
White - Any other white background	30.7% (341)	-0.7	69.3% (768)	0.5
White - British	37.7% (2,690)	8.6	62.3% (4,437)	-5.9
White - Irish	23.7% (14)	-1.1	76.3% (45)	0.8
Not known	18.3% (161)	-7.2	81.7% (718)	4.9
Not stated	27.7% (216)	-2.1	72.3% (565)	1.5

Clozapine

Table 17. Take up of clozapine by ethnicity (ungrouped categories), with standardised residuals

Ethnicity	Took up	z	Not recorded	z
Asian or Asian British – Any other Asian background	0.0% (0)	-0.5	0.0% (0)	-3.2
Asian or Asian British - Bangladeshi	2.4% (8)	0.0	96.4% (318)	0.1
Asian or Asian British - Indian	5.4% (23)	3.9	94.4% (405)	-0.3
Asian or Asian British - Pakistani	2.9% (23)	0.9	96.0% (766)	0.0
Black or Black British - African	3.2% (36)	1.7	95.4% (1065)	-0.2
Black or Black British - Any other Black background	3.1% (34)	1.4	94.9% (1052)	-0.4
Black or Black British - Caribbean	3.0% (11)	0.8	96.1% (349)	0.0
Mixed - Any other mixed background	1.9% (4)	-0.5	95.3% (202)	-0.1
Mixed - White and Asian	3.1% (16)	1.0	96.2% (500)	0.1
Mixed - White and Black African	1.0% (1)	-0.9	99.0% (102)	0.3
Mixed - White and Black Caribbean	0.8% (1)	-1.1	96.7% (118)	0.1
Other Ethnic Groups - Any other ethnic group	3.2% (29)	1.6	96.2% (864)	0.1
Other Ethnic Groups - Chinese	1.9% (6)	-0.5	98.1% (305)	0.4
White - Any other white background	3.1% (34)	1.4	94.9% (1052)	-0.4
White - British	2.0% (142)	-2.3	95.7% (6824)	-0.2
White - Irish	3.4% (2)	0.5	96.6% (57)	0.1
Not known	1.1% (10)	-2.4	98.5% (866)	0.8
Not stated	0.9% (7)	-2.7	98.2% (767)	0.6

IMD

CBTp

Statistical analysis: The proportion of people with FEP or ARMS who received, did not receive, or were referred for CBTp differed significantly by IMD (X^2 (df, 6) = 85.152, $p = <0.001$). Table 17 shows the associated standardised residuals.

Summary: Patients living in the most deprived areas are less likely to receive CBTp, while patients living in the least deprived are more likely to receive CBTp.

Table 18. Take up of CBTp by deprivation quartile (IMD), with standardised residuals

IMD Quartile	Took up	z	Not recorded	z
Quartile 1 (most deprived)	39.3% (2,665)	-4.4	60.0% (4,075)	3.7
Quartile 2	43.2% (1,748)	0.4	56.2% (2,271)	-0.4
Quartile 3	47.7% (1,177)	3.7	51.9% (1,282)	-3.1
Quartile 4 (least deprived)	48.4% (860)	3.6	51.2% (909)	-3.0

Family intervention

Statistical analysis: The proportion of people with FEP or ARMS who received, did not receive, or were referred for family intervention differed significantly by IMD (X^2 (df, 6) = 156.847, p = <0.001). Table 18 shows the associated standardised residuals.

Summary: Patients who are living in the most deprived are less likely to receive family intervention. Patients who are least deprived are more likely to receive, but less likely to be referred for family intervention.

Table 19. Take up of family intervention by deprivation quartile (IMD), with standardised residuals

IMD Quartile	Took up	z	Not recorded	z
Quartile 1 (most deprived)	23.3% (1,579)	-6.0	75.8% (5,149)	3.4
Quartile 2	26.4% (1,068)	-0.7	72.9% (2,948)	0.5
Quartile 3	32.3% (798)	5.1	67.1% (1,657)	-3.0
Quartile 4 (least deprived)	35.4% (629)	6.8	64.4% (1,144)	-3.9

Education and employment support

Statistical analysis: The proportions of people with FEP or ARMS who received, did not receive, or were referred for education and employment support differed significantly by IMD (X^2 (df, 6) = 31.316, p = <0.001). Standardised residuals indicated that significant contributions to the chi-squared analysis came only from those who were referred and most deprived (z = 3.3) and second most deprived (z = -2.8).

Summary: Patients living in the most deprived areas were more likely to have a recorded referral for education and employment support.

Carer support

The proportions of people with FEP or ARMS who received, did not receive, or were referred for carer support differed significantly by IMD (X^2 (df, 6) = 13.729, p = 0.033). The associated standardised residuals showed no significant contributions.

Summary: There was no evidence of meaningful differences in access to carer support programmes across deprivation groups.

Outcome measures

Statistical analysis: The proportions of people with FEP or ARMS who recorded two or more outcome measures at both an initial and follow-up assessment differed significantly by IMD (X^2 (df, 3) = 84.867, p = <0.001). Table 19 shows the associated standardised residuals.

Summary: Patients living in the least deprived areas are more likely to have two or more outcome measures recorded twice, while patients living in the most deprived areas are less likely to have this information recorded.

Table 20. Recording of outcome measures by deprivation quartile (IMD), with standardised residuals

IMD Quartile	Two or more outcome measures recorded twice	z	Less than two outcome measures recorded twice	z
Quartile 1 (most deprived)	29.3% (1986)	-4.6	70.7% (4803)	3.2
Quartile 2	32.4% (1310)	-0.1	67.6% (2733)	0.1
Quartile 3	37.3% (921)	4.2	62.7% (1547)	-2.9
Quartile 4 (least deprived)	38.2% (678)	4.2	61.8% (1098)	-2.9