

WELSH INFORMATION STANDARDS BOARD

DSC Notice:	DSCN 2017 / 04
Date of Issue:	8 th June 2017

Ministerial / Official Letter: N/A	Subject: Mental Health (Wales) Measure 2010 –Performance Measure Tool for Part 4 – Advocacy Services
Sponsor: Dr Sarah Watkins, Deputy Director, Mental Health and Vulnerable Groups Policy Division, Welsh Government	
Implementation Date: 1st October 2016	

DATA STANDARDS CHANGE NOTICE

A Data Standards Change Notice (DSCN) is an information mandate for a new or revised information standard.

This DSCN was approved by the Welsh Information Standards Board (WISB) in June 2017

WISB Reference: ISRN 2017 / 007

Summary:

To introduce changes to the data collection to monitor performance against Part 4 of the Mental Health (Wales) Measure 2010

Data sets / returns affected:

- Mental Health (Wales) Measure 2010 Data Collection

Please address enquiries about this Data Standards Change Notice to the Data Standards Team in NHS Wales Informatics Service

E-mail: data.standards@wales.nhs.uk / Tel: 029 2050 2539

The Welsh Information Standards Board is responsible for appraising information standards. Submission documents and WISB Outcomes relating to the approval of this standard can be found at:

<http://howis.wales.nhs.uk/sites3/page.cfm?orgid=742&pid=24632>

DATA STANDARDS CHANGE NOTICE

Introduction

The 'Mental Health (Wales) Measure 2010' ('The Measure') was passed by the National Assembly for Wales in November 2010. Phased implementation of the four Parts of the Measure began in 2012.

The Measure placed new legal duties on Local Health Boards (LHBs) and Local Authorities (LAs) about the assessment and treatment of mental health problems and expanded access to independent mental health advocacy for people with mental health problems. This duty relates to their resident population. It includes those patients receiving care and treatment on a voluntary basis and not just those needing compulsory treatment, which is also a matter for the Mental Health Act 1983.

The Measure has four main Parts:

- Part 1 of the Measure covers primary care mental health services.
- Part 2 relates to Care and Treatment Plans (CTP) for all patients in secondary care mental health services.
- Part 3 relates to adults discharged from secondary care mental health services who are referring themselves back to those services.
- Part 4 relates to the provision of independent mental health advocacy.

Reporting requirements for these were introduced by DSCN 2013/06¹ and were subsequently updated for Parts 1, 2 and 3 by DSCN 2016/04²

As described in DSCN 2016/04, the changes to Part 4 of the Measure were still in development at the time of issue. This DSCN describes the changes to Part 4, effective from Quarter 3 2016-17.

Description of Change

To update the data collection for Part 4 to include additional information requirements and change data submission from six monthly to quarterly.

Data Dictionary Version

Where applicable, this DSCN reflects changes introduced by DSCN and/or DDCN since the release of version 4.8 of the NHS Wales Data Dictionary.

The changes introduced by such DSCNs will be published in version 4.9 of the NHS Wales Data Dictionary.

¹ [DSCN 2013/06](#)

² [DSCN 2016/04](#)

Actions Required

Local Health Boards / Trust:

- Ensure arrangements are in place to enable the collection of the information required for Part 4 of the Measure in accordance with the definitions set out in this DSCN.
- Ensure that Part 4 proformas are submitted to the Welsh Government Delivery & Performance Division (HSSDG.Performance@wales.gsi.gov.uk) quarterly.

Actions for the Welsh Government Delivery & Performance Division:

- On an annual basis, make the form available for Mental Health Services to complete and notify them of the deadline for the submission of data.

Appendix A: Table reflecting areas that are impacted as a result of this DSCN

The following table shows where there are changes to the scope and/or definitions of applicable data sets, data items, terms and other associated areas that are linked with the changes documented within this DSCN.

Each data definition type is listed in alphabetical order and is shown in the sequence in which it appears in this DSCN.

Data Definition Type	Name	New/Retired/Changed	Page Number
Aggregate Proformas	Mental Health (Wales) Measures 2010 Data Collection	New	6

Appendix B: Highlighted changes to be made to the NHS Wales Data Dictionary

Changes to the NHS Wales Data Dictionary are detailed below, with new text being highlighted in **blue** and deletions are shown with a ~~strikethrough~~. The text shaded in **grey** shows existing text copied from the NHS Wales Data Dictionary.

Mental Health (Wales) Measure 2010 Data Collections

Return Submission Details

These forms should be completed by each Local Health Board (LHB) and submitted to the Welsh Government Delivery & Performance Division:

HSSDG.Performance@wales.gsi.gov.uk

There are separate submission arrangements relating to each part of the Measure, as follows:

- For Part 1, each LHB should submit one monthly return, with data grouped by each age breakdown and the number of practitioners (WTE).
- For Part 2, each LHB should submit one monthly return, relating to each service area.
- For Part 3, each LHB should submit one monthly return, relating to each service area.
- For Part 4, each LHB should submit one quarterly return as outlined in the Definitions & Guidance provided in the proforma.

Forms relating to Parts 1, 2 & 3 are to be submitted at the end of the following month. Forms relating to Part 4 are to be submitted at the end of the following month after each three month period. Exact dates of submission, guidance notes and definitions for the completion of each Mental Health form are included on each form.

The latest version of each form is available on the Welsh Government's Performance Management Website:

<http://howis.wales.nhs.uk/sitesplus/407/home>

Any further queries regarding the data collection forms should be directed to the Delivery & Performance Division, Welsh Government, on 03000 258871, or e-mail:

HSSDG.Performance@wales.gsi.gov.uk

Any queries regarding the Mental Health legislation should be directed to the Mental Health and Vulnerable Groups Division, Welsh Government, on 029 2082 3294, or e-mail:

mentalhealthlegislation@wales.gsi.gov.uk

Information Requirements 2016-17 onwards

Part One

Part 1 of the Measure requires local health boards and local authorities to work together to establish Local Primary Mental Health Support Services across Wales.

1) The number of practitioners per 20,000 population (all ages) at the end of the month

This is the number of practitioners (calculated in Whole Time Equivalent (WTE), that are in post to provide Local Primary Mental Health Support Services (LPMHSS) as required under Part 1 of the Measure for all age and client groups, at the reporting date, and to show the rate per 20,000 population.

2) The number of referrals for an assessment by Local Primary Mental Health Support Services (LPMHSS) received during the month

This is to show the number of referrals for assessment received for each of the categories of patient identified in the Measure (primary care and secondary mental health service), and the total number of referrals received during the month.

3) The number of assessments undertaken by LPMHSS during the month, by category

This is to show the number of assessments undertaken within the LPMHSS for each of the two categories of patient identified in the Measure (above), and the total number of assessments undertaken.

4) Waiting times for assessments undertaken by LPMHSS during the month

This is to show the number of patients who had waited for assessment by LPMHSS in time bands, so as to assess the performance of the service against the target waiting time of 28 calendar days. The time bands are 0-28 days, 29-56 days and 57+ days.

5) The total number of patients discharged during the month by category

This is to show how many patients were discharged during the month following direct intervention, referral or signposting to services other than secondary mental health services, provision of information or referral to secondary care, and the total number of patients discharged.

6) Waiting times for therapeutic interventions started during the month

This is to record waiting times for therapeutic interventions, whether delivered on an individual or group basis, provided by the LPMHSS following assessment. The time bands are 0-28 days, 29-56 days and 57+ days. The target waiting time is 28 days.

Part Two

Part 2 of the Measure places duties on local health boards and local authorities in Wales to work together to ensure that people of all ages within secondary mental health services have a care co-ordinator and a care and treatment plan (CTP) that is reviewed at least yearly.

1) The total number of patients with a valid care and treatment plan (CTP) at end of month (including new patients)

This is the number of LHB residents who have current CTP which has not passed its review dates

2) Number of patients resident in your LHB new to secondary mental health services within month

This is the number of LHB residents who are new referrals into secondary Mental Health Services during the reporting month

3) The number of patients resident in your LHB discharged / transferred out of secondary mental health services within month

This is the total number of residents who are discharged or transferred out of the secondary mental health services during the reporting month.

4) Total number of patients in receipt of secondary mental health services at end of the month

This is the total number of residents who are currently on a secondary mental health service caseload at end of the month

5) The percentage of valid CTPs completed

6) The total number of patients in receipt of secondary mental health services, as at the 31st March 2016

Part Three

Part 3 of the Measure is to enable eligible adults who have been discharged from secondary mental health services, but who subsequently believe that their mental health is deteriorating to such a point as to require such care and treatment again, to refer themselves back to secondary services directly for an assessment, without necessarily needing to first go to their general practitioner.

1) The number of people resident in your LHB requesting an assessment under Part 3 of the Measure within the month

This is the number of LHB residents who have requested an assessment during the month, following a self referral, under Part 3 of the Measure

2) The number of people resident in your LHB who were assessed following a referral

This is the number of LHB residents who had a routine assessment during the month following a referral, under Part 3 of the Measure, and how long they had waited for that assessment.

2a) The number of people resident in your LHB who were assessed following a referral for an emergency assessment

This is the number of LHB residents who had an emergency assessment during the month following a referral, under Part 3 of the Measure, and how long they had waited for that assessment.

2b) The number of people resident in your LHB who were assessed following a referral for an urgent assessment

This is the number of LHB residents who had an urgent assessment during the month following a referral, under Part 3 of the Measure, and how long they had waited for that assessment.

2c) The number of people resident in your LHB who were assessed following a referral for a routine assessment

This is the number of LHB residents who had a routine assessment during the month following a referral, under Part 3 of the Measure, and how long they had waited for that assessment.

3) The number of patients resident in your LHB assessed under Part 3 of the Measure within the month, how many outcome of assessment reports were sent after the assessment had taken place

This is the number of outcome assessment reports which were sent to LHB resident patients following their assessment under part 3 of the Measure, and how long after their assessment were they sent.

Information Requirements Quarter 3 2016-17 onwards

Part Four

Part 4 of the Measure ensures all inpatients in Wales who are receiving assessment or treatment for a mental disorder are entitled to request support from an Independent Mental Health Advocate (IMHA).

1) The total number of all hospitals within the Local Health Board at the end of the quarter

This includes NHS mental hospitals, independent mental health hospitals, other NHS hospitals and any other setting.

2) The total number of all hospitals with arrangements in place to ensure advocacy is available to qualifying patients at the end of the quarter

This includes individuals eligible for independent mental health advocacy (IMHA) services where they fall within the meaning of a Welsh qualifying compulsory patient or within the meaning of a Welsh qualifying informal patient.

3) The total number of whole time equivalent (WTE) independent mental health advocates (IMHAs) in the Local Health Board at the end of the quarter

This is the number of whole time equivalent (WTE) independent mental health advocates at the end of the quarter.

4) The qualification status of the of the IMHAs in the Local Health Board (as given in indicator 3) at the end of the quarter

This is the number of whole time equivalent (WTE) independent mental health advocates in the Local Health Board at the end of the quarter categorised by whether they satisfy appointment requirements, have or are working towards the IMHA diploma, or have any additional relevant qualifications.

5) Whether the advocacy provider within the Local Health Board has, or is working towards, a recognised advocacy quality performance mark

This indicates whether the advocacy provider delivering IMHA services on behalf of the Local Health Board has achieved, or is working towards achieving, a recognised advocacy quality performance mark.

6) The total number of newly qualifying patients accepted into IMHA services during the quarter

This is the number of new patients accepted into the IMHA service during the quarter and whether these are compulsory or informal/voluntary patients.

7) The total number of qualifying patients in receipt of IMHA services at the end of the quarter

This is the total number of patients on the IMHA service caseload (open cases) as at the end of the quarter and whether these are compulsory or informal/voluntary patients.

8) The total number of qualifying patients discharged from IMHA services during the quarter

This is the number of patients discharged from (no longer receiving) IMHA services during the quarter and whether these were compulsory or informal/voluntary patients.

9) The total number of qualifying compulsory patients who had their first contact with an IMHA during the quarter

This is the number of qualifying compulsory patients who had their first contact with an IMHA during the quarter, further specifying whether they had waited five working days or less or six working days or more following their request for an IMHA before that first contact.

10) The total number of qualifying informal/voluntary patients who had their first contact with an IMHA during the quarter

This is the number of qualifying informal/voluntary patients who had their first contact with an IMHA during the quarter, further specifying whether they had waited five working days or less or six working days or more following their request for an IMHA before that first contact.

Information Requirements 2013-14, 2015-16 (Archive)

Part One

Part 1 of the Measure requires Local Health Boards and Local Authorities to work together to establish Local Primary Mental Health Support Services across Wales.

1) The number of practitioners per 20,000 population (all ages) at the end of the month

This is the number of practitioners (calculated in Whole Time Equivalent (WTE),) that are in post to provide Local Primary Mental Health Support Services (LPMHSS) as required under Part 1 of the Measure for all age and client groups, at the reporting date, and to show the rate per 20,000 population.

2) The number of referrals for an assessment by Local Primary Mental Health Support Services (LPMHSS) received during the month by category

This is to show the number of referrals for assessment received for each of the three categories of patient identified in the Measure (registered, non registered and secondary), and the total number of referrals received during the month.

3) The number of assessments undertaken by LPMHSS during the month, by category

This is to show the number of assessments undertaken within the LPMHSS for each of the three categories of patient identified in the Measure (above), and the total number of assessments undertaken during the month.

4) Waiting times for assessments undertaken by LPMHSS during the month

This is to show the number of patients who had waited for assessment by LPMHSS in time bands, so as to assess the performance of the service against the target waiting time of 28 calendar days. The time bands are 0-28 days, 29-56 days and 57+ days.

5) The total number of patients discharged during the month by category

This is to show how many patients were discharged during the month following direct intervention, referral or signposting to services other than secondary mental health services, provision of information or referral to secondary care, and the total number of patients discharged.

6) Waiting times for therapeutic interventions started during the month

This is to record waiting times from assessment to therapeutic interventions, whether delivered on an individual or group basis, provided by the LPMHSS following assessment. The time bands are 0-28 days, 29-56 days and 57+ days. Also, the total number of therapeutic interventions during the month.

Parts Two and Three (April – June 2013 only)

Part 2 of the Measure places duties on Local Health Boards and Local Authorities in Wales to work together to ensure that people of all ages within secondary mental health services have a care co-ordinator and a care and treatment plan (CTP) that is reviewed at least yearly.

Part 3 of the Measure is to enable eligible adults who have been discharged from secondary mental health services, but who subsequently believe that their mental health is deteriorating to such a point as to require such care and treatment again, to refer themselves back to secondary services directly, without necessarily needing to first go to their general practitioner.

A) Total number of patients in receipt of secondary Mental Health / Learning Disabilities (MH / LD) services at end of March 2013

This is the total number of people on the 'caseload' as at 31 March 2013.

1) The total number of patients with a valid Care and Treatment Plan (CTP) at end of month (including new patients)

This is the number of patients who have a current CTP which has not passed its review date.

2) Total number of patients in secondary care with a valid alternative care plan (i.e. non CTP) at end of month

This is the number of patients who have a care plan other than in the CTP format, which has not passed its review date.

3) Number of patients new to the LHB's secondary Mental Health (MH) services within month

This is the number of new patients, self-referrals (under Part 3) or transfers-in, taken on during the reporting month

3a) The number of direct self-referrals referred into the LHB's service under Part 3 of the Measure, within the month

This is the number referrals received during the month for Part 3 self-referrals, whether accepted or not

3b) The number of direct self-referrals accepted into the LHB's service under Part 3 of the Measure, within the month

This is the number of Part 3 self-referrals accepted onto the team's caseload during the month

4) The number of patients discharged / transferred out of secondary MH/LD services within month

This is the total number of patients discharged or transferred out of the LHB's service during the reporting month

5) The number of patients transferred from CPA to CTP (til June 2013 only)

This is the total number of patients currently with a care plan not in the CTP format who have been reviewed and given a new CTP during the month. All patients will be expected to have a CTP by 6 June 2013.

6) The total number of patients with a valid CTP/care plan at end of month

This adds the number of patients with a valid CTP (Row 1) to the number of patients with an alternative care plan (Row 2), to give the total number of patients with a valid care plan.

7) The Total number of patients in receipt of secondary care services, at end of month

8) The Percentage of care plans completed

9) Monthly variance

The difference between the number of people taken on the caseload and the number taken off.

Parts Two & Three (July 2013 onwards)

1) Total number of patients resident in the LHB with a valid Care and Treatment Plan (CTP) at the end of the month

This is the number of LHB residents who have a current CTP which has not passed its review date.

2) Total number of patients resident in the LHB that are new to secondary Mental Health services within the month

This is the number of LHB residents who are new referrals into a secondary Mental Health service during the month.

3a) The number of people resident in the LHB requesting an assessment under Part 3 of the Measure within the month

This is the number of LHB residents who have requested an assessment during the month, following a self referral, under Part 3 of the Measure - whether accepted or not.

3b) The number of people resident in the LHB assessed under Part 3 of the Measure within the month

This is the number of LHB residents who have an assessment during the month, following a self referral, under Part 3 of the Measure.

3c) The number of people resident in the LHB accepted onto the caseload under Part 3 of the Measure within the month

This is the number of LHB residents who are accepted onto the caseload after during the month, following an assessment, under Part 3 of the Measure.

4) Number of patients resident in the LHB who are discharged / transferred out of secondary Mental Health services within the month

The total number of residents who are discharged or transferred out of a secondary Mental Health service during the reporting month.

5) Total number of patients resident in the LHB currently in receipt of secondary Mental Health services at the end of the month (i.e. the caseload)

This is the number of residents who are currently on a secondary Mental Service caseload at the end of the month

6) Percentage of valid CTPs completed

7) Total number of patients resident in your LHB in receipt of secondary Mental Health services as at the 30th June 2013

This is the number of residents who are currently on a secondary Mental Health Service caseload as at 30th June 2013

Part Four

Part 4 of the Measure ensures all inpatients in Wales who are receiving assessment or treatment for a mental disorder are entitled to request support from an Independent Mental Health Advocate (IMHA). This extends the Independent Mental Health Advocacy scheme provided under the Mental Health Act 1983. It covers patients subject to compulsion under the Mental Health Act 1983, and those in hospital voluntarily. This includes patients that are receiving treatment for their mental disorder in: mental health specific hospitals, independent hospitals and general hospitals

- 1) The Total number of hospitals within the Local Health Board (LHB)**
- 2) The number of hospitals who have arrangements in place to ensure advocacy is available to qualifying patients, split by hospital type.**

The hospital types are NHS Mental Health hospitals, Independent Mental Health hospitals and Other NHS hospitals

- 3) The number of qualifying compulsory patients who have accessed advocacy services, split by hospital type**

The hospital types are NHS Mental Health hospitals, Independent Mental Health hospitals and Other NHS hospitals

- 4) The number of qualifying informal / voluntary patients who have accessed advocacy services, split by hospital type.**

The hospital types are NHS Mental Health hospitals, Independent Mental Health hospitals and Other NHS hospitals

- 5) Total number of Independent Mental Health Advocates (IMHAs) in the Local Health Board at the end of each 6 month period.**

- 6) The qualification status of the IMHAs in the Local Health Board**

- 7) Whether the LHB's advocacy provider has the 'Action for Advocacy' quality performance mark.**