CQC Mental Health NHS Insight
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- Activity levels at provider, inpatient and community-based services level
- Staffing capacity, turnover and sickness; financial information

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Intelligence analysis

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- Intelligence overview of key messages for trust/provider, inpatient and community based services

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Featured data sources

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MENTAL HEALTH ACT	INCIDENTS	SAFETY THERMOMETER	PLACE	DELAYED TRANSFERS	PATIENT SURVEYS	STAFF SURVEYS	DATA QUALITY

- Mental Health Act
- Incidents (mortality, notifications, incidents reported to StEIS and NRLS)
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TRUST	INPATIENT SERVICES	COMMUNITY-BASED SERVICES	RATINGS

Trust level rating:

Date of last inspection: Not available
Date of publication: 26/01/2016

Safe	Effective	Caring	Responsive	Well led	Overall
I	RI	G	RI	RI	RI

Provider type: Mental Health - FT

Organisational context

The main local authorities served by the provider are: Essex

The main clinical commissioning groups for this provider are: NHS MID ESSEX CCG; NHS NORTH EAST ESSEX CCG and NHS WEST ESSEX CCG

Assessments of CCGs can be **found at:**

- Mental Health Five Year Forward View Dashboard

- CCG ratings – Mental Health

- NHS RightCare CCG data packs

Registered locations

Population estimate: N/A (Specialist Trust)

People in contact with services at the end of 31/10/2016	Adult mental health services	Learning disability and autism services	Children and young people's services
People in contact with services	13320	60	25
All contacts	19680	-	-
Attended contacts	16235	-	935
Open referrals	17915	500	25
Open ward stays	280	10	20
People discharged from the service	2865	-	105
People assigned to a Mental Health Care Cluster	11040	-	-
People in contact with mental health services aged 0 to 18	25	-	260

People in contact with adult mental health services	At the end of 31/10/2016	At the end of 30/04/2016
At the end of the reporting period	13320	14140
On CPA at the end of the reporting period	3230	3145
On CPA for 12 months at the end of the reporting period	2110	2160
On CPA for 12 months with review at the end of the reporting period	1835	1710
People with a crisis plan in place at the end of the reporting period	10665	10635

People in contact with mental health services on CPA aged 18-69 at the end of the reporting period	At the end of 31/10/2016		At the end of 30/04/2016	
	Provider	England	Provider	England
On Care Programme Approach (CPA) aged 18-69 at the end of the reporting period	2495	136163	2525	131344
Aged 18-69 on CPA at the end of the reporting period in settled accommodation	170	77508	155	60220
Proportion of aged 18-69 on CPA at the end of the reporting period in settled accommodation	7%	56.9%	6.1%	45.8%
Aged 18-69 on CPA at the end of the reporting period in employment	55	10385	30	8039
Proportion aged 18-69 on CPA at the end of the reporting period in employment	2%	7.6%	1.1%	6.1%

North Essex Partnership University NHS Foundation Trust (RRD)
Facts and figures > Trust level continued

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TRUST	INPATIENT SERVICES	COMMUNITY-BASED SERVICES	RATINGS

Trust level rating:

Date of last inspection: Not available
Date of publication: 26/01/2016

Safe	Effective	Caring	Responsive	Well led	Overall
I	RI	G	RI	RI	RI

Provider type: Mental Health - FT

Capacity	Previous	Latest	Change	National comparison
Number of staff (contracted WTE)				
Medical and Dental		90	NA	
Nursing and Midwifery		483	NA	
Other clinical staff		529	NA	
All other staff		474 Apr 16	NA	
Staff turnover (Headcount)				
Medical and Dental		5.2%	NA	
Nursing and Midwifery		12.4%	NA	
Other clinical staff		13.7%	NA	
All other staff		10.6% May 15 - Apr 16	NA	
Staff sickness				
Medical and Dental		2.4%	NA	
Nursing and Midwifery		4.3%	NA	
Other clinical staff		3.9%	NA	
All other staff		4.0% May 15 - Apr 16	NA	

Finance and governance	Previous	Latest	Change	National comparison
Projected surplus [£000s] (deficit)		9,591	NA	
Turnover [£000s]		105,642	NA	
NHSI Single Oversight Framework segmentation	NA	Providers receiving mandated support	NA	

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Ratings for inpatient core services:

	Safe	Effective	Caring	Responsive	Well led	Overall
Acute wards for adults of working age and psychiatric intensive care units (26/01/2016)	I	RI	RI	I	I	I
Long stay/rehabilitation mental health wards for working age adults (26/01/2016)	G	G	G	G	G	G
Forensic inpatient/secure wards (26/01/2016)	RI	G	G	G	RI	RI
Child and adolescent mental health wards (26/01/2016)	G	G	O	G	G	G
Wards for older people with mental health problems (26/01/2016)	RI	RI	G	G	G	RI
Wards for people with learning disabilities or autism	NA	NA	NA	NA	NA	NA

Admissions, discharges and bed days

Activity	May-16	Jun-16	Jul-16	Aug-16	Sep-16	Oct-16
Admissions to hospital	155	140	145	130	145	130
Discharges from hospital	150	130	130	150	145	135
Bed days	9415	9435	9875	9855	9285	9375
Days of delayed discharge	260	170	320	385	465	510
Under 16 bed days on adult wards	*	*	*	*	*	*
Age 16 bed days on adult wards	*	*	*	*	*	*
Age 17 bed days on adult wards	*	*	*	*	*	*

Open ward stays

Inpatient service	At the end of 30/04/2016	At the end of 31/10/2016
Adult mental health services	280	280
Adult acute mental health care	140	130
Specialised adult mental health services	25	25

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Ratings for inpatient core services:

	Safe	Effective	Caring	Responsive	Well led	Overall
Acute wards for adults of working age and psychiatric intensive care units (26/01/2016)	I	RI	RI	I	I	I
Long stay/rehabilitation mental health wards for working age adults (26/01/2016)	G	G	G	G	G	G
Forensic inpatient/secure wards (26/01/2016)	RI	G	G	G	RI	RI
Child and adolescent mental health wards (26/01/2016)	G	G	O	G	G	G
Wards for older people with mental health problems (26/01/2016)	RI	RI	G	G	G	RI
Wards for people with learning disabilities or autism	NA	NA	NA	NA	NA	NA

Age profiles

Age profile	Open hospital spells at the end of 31/10/2016)
0 – 18	25
19 – 64	165
65 and over	115

Age profile	Subject to detention at end of 31/10/2016
0 – 17	*
18 – 64	20
65 and over	10

Out of area treatment (OAT)

Distance to treatment	Open ward stays – adult acute care at end of 31/10/2016	OAT Open ward stays – adult acute care at end of 31/10/2016
0-19 kilometres	85	5
20-49 kilometres	30	*
50-99 kilometres	*	*
100 kilometres and over	*	*

Average length of stay

Under development

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Ratings for community-based core services:

	Safe	Effective	Caring	Responsive	Well led	Overall
Community-based mental health services for adults of working age	NA	NA	NA	NA	NA	NA
Mental health crisis services and health-based places of safety (26/01/2016)	RI	RI	G	G	G	RI
Specialist community mental health services for children and young people (26/01/2016)	G	G	G	G	G	G
Community-based mental health services for older people (26/01/2016)	RI	G	G	RI	G	RI
Community mental health services for people with learning disabilities or autism	NA	NA	NA	NA	NA	NA

Proportion of admissions to acute wards gate kept by the crisis resolution home treatment team

Trust — England (dashed) — Target

Contact with specialist community teams:

Contacts at 31/10/2016	All Contacts	Attended contacts
Crisis resolution service or home treatment team	2625	2465
Memory services team	2855	2440
Perinatal mental health team	*	*

Seven day follow up of patients on Care Programme Approach (CPA):

	Trust	England Average
2015/16 Q4	98.7%	97.2%
2016/17 Q1	98.8%	96.2%
2016/17 Q2	95%	96.8%
2016/17 Q3	96.2%	96.7%
2016/17 Q4	98.2%	96.7%

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This page displays the latest ratings and the direction of travel for intelligence indicators that relate to the five key questions (safe, effective, caring, responsive and well-led), inpatient and community mental health services and to the trust overall.

Key messages

Intelligence indicates that:

• Overall performance for this trust is about the same

• Responsive, Safe performance is declining

• Caring, Effective, Well led performance is stable

• Trust wide indicators, Inpatient services, Community-based services performance is stable

		Safe	Effective	Caring	Responsive	Well led	Overall
		↓	→	→	↓	→	→
	Overall	I	RI	G	RI	RI	RI
Inpatient services	Acute wards for adults of working age and psychiatric intensive care units	I	RI	RI	I	I	I
	Long stay/rehabilitation mental health wards for working age adults	G	G	G	G	G	G
	Forensic inpatient/secure wards	RI	G	G	G	RI	RI
	Child and adolescent mental health wards	G	G	O	G	G	G
	Wards for older people with mental health problems	RI	RI	G	G	G	RI
	Wards for people with learning disabilities or autism	NA	NA	NA	NA	NA	NA
Community-based services	Community-based mental health services for adults of working age	NA	NA	NA	NA	NA	NA
	Mental health crisis services and health-based places of safety	RI	RI	G	G	G	RI
	Specialist community mental health services for children and young people	G	G	G	G	G	G
	Community-based mental health services for older people	RI	G	G	RI	G	RI
	Community mental health services for people with learning disabilities or autism	NA	NA	NA	NA	NA	NA

North Essex Partnership University NHS Foundation Trust (RRD)
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TRUST	INPATIENT SERVICES	COMMUNITY-BASED SERVICES	**RATINGS**

This page displays changes to the core service, key questions and overall ratings.

Key messages

Intelligence indicates that:

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		Safe ↓	Effective ➡	Caring ➡	Responsive ↓	Well led ➡	Overall ➡
	Overall	January 2016	January 2016	January 2016	January 2016	January 2016	January 2016
Inpatient services	Acute wards for adults of working age and psychiatric intensive care units	January 2016	January 2016	January 2016	January 2016	January 2016	January 2016
	Long stay/rehabilitation mental health wards for working age adults	January 2016	January 2016	January 2016	January 2016	January 2016	January 2016
	Forensic inpatient/secure wards	January 2016	January 2016	January 2016	January 2016	January 2016	January 2016
	Child and adolescent mental health wards	January 2016	January 2016	January 2016	January 2016	January 2016	January 2016
	Wards for older people with mental health problems	January 2016	January 2016	January 2016	January 2016	January 2016	January 2016
	Wards for people with learning disabilities or autism	NA -	NA -	NA -	NA -	NA -	NA -
Community-based services	Community-based mental health services for adults of working age	NA -	NA -	NA -	NA -	NA -	NA -
	Mental health crisis services and health-based places of safety	January 2016	January 2016	January 2016	January 2016	January 2016	January 2016
	Specialist community mental health services for children and young people	January 2016	January 2016	January 2016	January 2016	January 2016	January 2016
	Community-based mental health services for older people	January 2016	January 2016	January 2016	January 2016	January 2016	January 2016
	Community mental health services for people with learning disabilities or autism	NA -	NA -	NA -	NA -	NA -	NA -

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This page displays the latest ratings for any community health services provided and the direction of travel for intelligence indicators that relate to the five key questions (safe, effective, caring, responsive and well-led) for the trust overall.

Key messages

Intelligence indicates that:

• Overall performance for this trust is about the same

• Responsive, Safe performance is declining

• Caring, Effective, Well led performance is stable

• Trust wide indicators, Inpatient services, Community-based services performance is stable

		Safe ↓	Effective ➡	Caring ➡	Responsive ↓	Well led ➡	Overall ➡
	Overall	I	RI	G	RI	RI	RI
Community health services	Community health services for adults	NA	NA	NA	NA	NA	NA
	Community health services for children, young people and families	NA	NA	NA	NA	NA	NA
	Community health inpatient services	NA	NA	NA	NA	NA	NA
	Community end of life care	NA	NA	NA	NA	NA	NA
	Urgent care services	NA	NA	NA	NA	NA	NA
	Community dental services	NA	NA	NA	NA	NA	NA
	HIV and sexual health services	NA	NA	NA	NA	NA	NA

Source(s): CQC data warehouse

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North Essex Partnership University NHS Foundation Trust (RRD)
Facts and figures > Ratings continued

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| TRUST | INPATIENT SERVICES | COMMUNITY-BASED SERVICES | **RATINGS** |

This page displays changes to the core service, key questions and overall ratings.

Key messages

Intelligence indicates that:

• Overall performance for this trust is about the same

• Responsive, Safe performance is declining

• Caring, Effective, Well led performance is stable

• Trust wide indicators, Inpatient services, Community-based services performance is stable

		Safe ↓	Effective ➡	Caring ➡	Responsive ↓	Well led ➡	Overall ➡
	Overall	January 2016	January 2016	January 2016	January 2016	January 2016	January 2016
Community health services	Community health services for adults	NA -	NA -	NA -	NA -	NA -	NA -
	Community health services for children, young people and families	NA -	NA -	NA -	NA -	NA -	NA -
	Community health inpatient services	NA -	NA -	NA -	NA -	NA -	NA -
	Community end of life care	NA -	NA -	NA -	NA -	NA -	NA -
	Urgent care services	NA -	NA -	NA -	NA -	NA -	NA -
	Community dental services	NA -	NA -	NA -	NA -	NA -	NA -
	HIV and sexual health services	NA -	NA -	NA -	NA -	NA -	NA -

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TRUST	INPATIENT SERVICES	COMMUNITY-BASED SERVICES	**RATINGS**

This page displays the latest ratings for any additional core service provided and the direction of travel for intelligence indicators that relate to the five key questions (safe, effective, caring, responsive and well-led) for the trust overall.

Key messages

Intelligence indicates that:

• Overall performance for this trust is about the same

• Responsive, Safe performance is declining

• Caring, Effective, Well led performance is stable

• Trust wide indicators, Inpatient services, Community-based services performance is stable

		Safe	Effective	Caring	Responsive	Well led	Overall
		↓	➡	➡	↓	➡	➡
Overall		I	RI	G	RI	RI	RI
Additional core services	Community-based mental health services for adults	G	G	G	G	G	G

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TRUST	INPATIENT SERVICES	COMMUNITY-BASED SERVICES	RATINGS

This page displays changes to the core service, key questions and overall ratings.

Key messages

Intelligence indicates that:

• Overall performance for this trust is about the same

• Responsive, Safe performance is declining

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• Trust wide indicators, Inpatient services, Community-based services performance is stable

		Safe ↓	Effective ➡	Caring ➡	Responsive ↓	Well led ➡	Overall ➡
	Overall	January 2016	January 2016	January 2016	January 2016	January 2016	January 2016
Additional core services	Community-based mental health services for adults	January 2016	January 2016	January 2016	January 2016	January 2016	January 2016

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Current enforcement and regulatory action

Under development

Service Area	Core Service	Publication date	Type	Summary (correct as at January 2017)
Additional services	Trust wide	05/12/2016	Must	The trust must ensure that action is taken to remove identified ligature risks and to mitigate where there are poor lines of sight.
Additional services	Trust wide	05/12/2016	Must	The trust must ensure that all staff receive regular supervision, and training.
Additional services	Trust wide	05/12/2016	Must	The trust must ensure that emergency equipment is fit for use.
Additional services	Trust wide	05/12/2016	Must	The trust must ensure that it complies with Department of Health guidance in relation to mixed sex accommodation.
Additional services	Trust wide	05/12/2016	Must	The trust must ensure that policies and procedures give clear information for staff reference when reporting incidents. That policies and procedures are updated to reflect current national guidance.
Additional services	Trust wide	05/12/2016	Must	The trust must ensure that wards ensure dignity and comfort for patients and that maintenance is completed in a timely manner.
Additional services	Trust wide	05/12/2016	Must	The trust must ensure that wards have sufficient bathrooms for patients to bathe or shower in.
Additional services	Trust wide	05/12/2016	Must	The trust must ensure the Christopher unit seclusion room is fit for purpose.
Additional services	Trust wide	05/12/2016	Must	The trust must ensure there is sufficient staff on duty at all times to provide skilled care to meet patients' needs.
Additional services	Trust wide	05/12/2016	Must	The trust must have effective systems in place for the safe administration and storage of medication.
Additional services	Trust wide	05/12/2016	Must	The trust must improve their governance and assurance systems relating to the assessment and management of risk such as ligature risks, mixed sex accommodation and learning from incidents.
Additional services	Trust wide	05/12/2016	Must	The trust must proactively address any practices that could be considered restrictive, for example, access to toilets, access to the gardens, and access to snacks and beverages.
Additional services	Trust wide	05/12/2016	Must	The trust should ensure learning from serious incidents is shared with teams to ensure future risks are mitigated.
Additional services	Trust wide	05/12/2016	Should	The trust should ensure that care and treatment records, including risk assessments, are sufficiently detailed, personalised and kept up to date.
Additional services	Trust wide	05/12/2016	Should	The trust should ensure that their action plans clearly state how they are addressing issues raised from the NHS staff survey.

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TRUST	INPATIENT SERVICES	COMMUNITY-BASED SERVICES	RATINGS

Service Area	Core Service	Publication date	Type	Summary (correct as at January 2017)
Additional services	Trust wide	05/12/2016	Should	The trust should formally review each restraint involving the prone position.

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OVERVIEW	TRUST WIDE	INPATIENT SERVICES	COMMUNITY-BASED SERVICES

Trust level rating:

Date of last inspection: Not available
Date of publication: 26/01/2016

Safe	Effective	Caring	Responsive	Well led	Overall
I	RI	G	RI	RI	RI

Intelligence key messages

Trust-wide, inpatient and community-based indicators

Trust Wide indicators
• A total of 1 (3%) indicators have improved.

• No key questions are improving

• Proportion of days sick in the last 12 months for Nursing and Midwifery staff (%) are among the best in the country.

• A total of 4 (13%) indicators have declined.

• No key questions are declining

• Percentage of staff appraised in last 12 months (%); Support from immediate managers (%); The number of fully and partially upheld complaints; Potential under-reporting of patient safety incidents - count of reported incidents as a ratio to MHMDS and HES spells (no harm, low harm, moderate harm, severe harm, death); Identified level of potential support needs by the provider shadow segmentation; Percentage of staff able to contribute towards improvements at work (%); Percentage of staff feeling unwell due to work related stress in the last 12 months (%); Percentage of staff reporting good communication between senior management and staff (%); Staff recommendation of the organisation as a place to work or receive treatment (%); Central Alerting System (CAS): Composite indicator on dealing with (CAS) safety alerts indicators in a timely way are among the worst in the country.

Inpatient services
• A total of 2 (20%) indicators have improved.

• No key questions are improving

• A total of 1 (10%) indicators have declined.

• No key questions are declining

• Proportion of detained mental health inpatients who attend Accident and Emergency departments (%); Patients that die following injury or self-harm within 3 days of being admitted to acute hospital beds; Rate of recorded incidences of Absence without Leave (AWOL) per 100 MH detained patients, in higher security (level 1,2 or 3) wards; Ratio of occupied beds to all nursing staff; Bed occupancy: Composite indicator; Detained patient deaths: Composite indicator are among the worst in the country.

Community based services
• A total of 1 (9%) indicators have improved.

• No key questions are improving

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Intelligence key messages

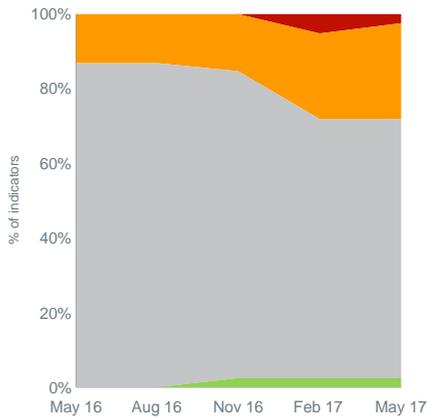### Trust-wide, inpatient and community-based indicators

• A total of 1 (9%) indicators have declined.

• No key questions are declining

• Q15. Were you involved as much as you wanted to be in discussing how your care is working?; Q25. Were you involved as much as you wanted to be in decisions about which medicines you receive?; Q37. Have NHS mental health services involved a member of your family or someone else close to you as much as you would like?; Q39. Do the people you see through NHS mental health services help you with what is important to you?; Q33. In the last 12 months, did NHS mental health services give you any help/advice with finding support for physical health needs (this might be an injury, disability, or condition such as diabetes)? are among the worst in the country.

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What's the current performance of trust wide indicators?
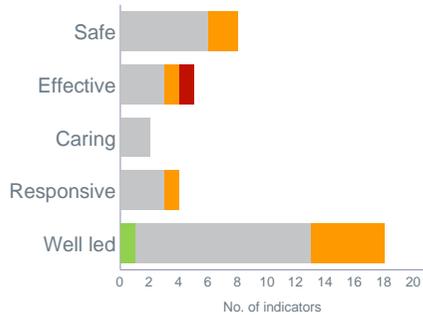
How have the performance of the trust-wide indicators changed over time?

Key question	KLOE	Indicator	National average	Performance		Change	National comparison
				Previous	**Latest**		
Safe	S1	**Consistency of reporting to the National Reporting and Learning System (NRLS)** National Reporting Learning System (NRLS) - National Reporting Learning System (NRLS) (13 Feb 2017)		6 months of reporting Oct 14 - Mar 15	6 months of reporting Oct 15 - Mar 16	➡	⬤
	S1	**Fairness and effectiveness of procedures for reporting errors, near misses and incidents (%)** NHS England - NHS Staff Survey (31 Mar 2017)	68.4%	62.6% Oct 15 - Dec 15	63.1% Oct 16 - Dec 16	➡	⬤
	S1	**Percentage of staff witnessing potentially harmful errors, near misses or incidents in last month (%)** NHS England - NHS Staff Survey (31 Mar 2017)	24.3%	26.4% Oct 15 - Dec 15	28.7% Oct 16 - Dec 16	➡	⬤
	S1	**Potential under-reporting of patient safety incidents - count of reported incidents as a ratio to MHMDS and HES spells (no harm, low harm, moderate harm, severe harm, death)** National Reporting and Learning System / Health and Social Care Information Centre - NRLS / MHLDDS-HES Bridged (25 May 2017)	0.1	NA	0.0 Mar 16 - Feb 17	Under dev	⬤
	S1	**Proportion of reported patient safety incidents that are harmful - proportion of all incidents reported to the NRLS that are categorised as low harm, moderate, severe or death (%)** National Reporting and Learning System - NRLS (25 May 2017)	35.4%	35.9% Nov 14 - Oct 15	44.0% Mar 16 - Feb 17	⬇	⬤
	S2	**Central Alerting System (CAS): Composite indicator on dealing with (CAS) safety alerts indicators in a timely way** Medicines and Healthcare products Regulatory Agency (MHRA) - Central Alerting System (27 Apr 2017)			Apr 15 - Mar 17	NA	⬤
		Central Alerting System (CAS): The number of alerts which CAS stipulated should have been closed by trusts during the preceding 12 months, but which were still open on the date CQC extracted data		0 alerts still open Nov 14 - Oct 15	1-4 alerts still open Apr 16 - Mar 17	⬇	⬤
		Central Alerting System (CAS): The number of alerts which CAS stipulated should have been closed by trusts more than 12 months before, but which were still open on the date CQC extracted data		0 alerts still open Mar 09 - Oct 14	0 alerts still open Apr 15 - Apr 16	➡	⬤
		Central Alerting System (CAS): The percentage of CAS alerts with closing dates during the preceding 12 months which the trust has closed late		< 25% of alerts closed late Nov 14 - Oct 15	>=25% & <50% alerts closed late Apr 16 - Mar 17	⬇	⬤
	S3	**CQCs National Customer Service Centre (NCSC) safeguarding concerns** Care Quality Commission - Internal data (17 Feb 2017)	-	0.7 Nov 14 - Oct 15	0.5 Nov 15 - Oct 16	➡	⬤

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Key question	KLOE	Indicator	National average	Performance			National comparison
				Previous	Latest	Change	
	S4	**Percentage of staff working extra hours (%)** NHS England - NHS Staff Survey (31 Mar 2017)	71.4%	73.5% Oct 15 - Dec 15	73.6% Oct 16 - Dec 16	→	⚪
Effective	E3	**Percentage of staff appraised in last 12 months (%)** NHS England - NHS Staff Survey (31 Mar 2017)	89.8%	85.6% Oct 15 - Dec 15	81.4% Oct 16 - Dec 16	→	🟠
	E3	**Support from immediate managers (%)** NHS England - NHS Staff Survey (31 Mar 2017)	72.0%	66.7% Oct 15 - Dec 15	66.3% Oct 16 - Dec 16	→	🔴
	E4	**Proportion of hospital spells under detention (ages 18-64) that finished in the period where patients were readmitted under detention (sections 2 and 3 of the MHA) within 30 days (%)** HSCIC - MHLDDS (05 Sep 2016)	9.2%	NA	6.3% Aug 14 - Jul 15	NA	⚪
	E4	**Proportion of informal hospital spells (ages 18-64) that finished in the period where patients were readmitted under detention (sections 2 and 3 of the MHA) within 30 days (%)** HSCIC - MHLDDS (05 Sep 2016)	2.2%	NA	2.0% Aug 14 - Jul 15	NA	⚪
	E7	**Ratio of the number of uses of section 4 to the number of uses of section 2 of the MHA** HSCIC - MHLDDS (20 Feb 2017)	0.0	NA	0.0 Oct 14 - Sep 15	Under dev	⚪
Caring	C1	**Negative comments received to Patient Opinion sources** Patient Opinion - Patient Comments (17 Feb 2017)	-	0.6 Aug 14 - Jul 15	0.8 Sep 15 - Aug 16	→	⚪
	C1	**Share Your Experience** Care Quality Commission - Share Your Experience (17 Feb 2017)	-	0.2 Apr 14 - Mar 15	0.1 Sep 15 - Aug 16	→	⚪
Responsive	R4	**CQC concerns and complaints excluding high secure wards** Care Quality Commisson - Care Quality Commisson (17 Feb 2017)	-	1.1 Nov 14 - Oct 15	0.2 Nov 15 - Oct 16	→	⚪
	R4	**Provider complaints** Health and Social Care Information Centre - NHS data on written complaints (17 Feb 2017)	-	0.8 Apr 14 - Mar 15	0.6 Apr 15 - Mar 16	→	⚪
	R4	**Ratio of Mental Health Act complaints received by CQC per 1,000 detentions and CTOs** MHAdb / HSCIC (KP90) - Complaints / Detentions under MHA (20 Feb 2017)	23.2	NA	15.7 Aug 15 - Jul 16	Under dev	⚪

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| Key question | KLOE | Indicator | National average | Performance | | | National comparison |
				Previous	Latest	Change	
	R4	**The number of fully and partially upheld complaints** Parliamentary Health Service Ombudsman - PHSO complaints (17 Feb 2017)	-	0.7 Apr 14 - Mar 15	0.0 Apr 15 - Mar 16	🔻	🟠
	W2	**Identified level of potential support needs by the provider shadow segmentation** NHS Improvement - Single Oversight Framework (SOF) (08 May 2017)		NA	Providers receiving mandated support Apr 17	NA	🟠
	W3	**General Medical Council (GMC) – enhanced monitoring** General Medical Council - Enhanced Monitoring (24 Mar 2017)		No concerns Jun 15	No concerns Feb 17	➡	⚪
	W3	**General Medical Council (GMC) national training survey - trainees overall satisfaction** General Medical Council - National Training Surveys (17 Feb 2017)		Within middle quartile (Q2/IQR) Mar 15 - May 15	Within middle quartile (Q2/IQR) Mar 16 - May 16	➡	⚪
Well led	W3	**Percentage of staff able to contribute towards improvements at work (%)** NHS England - NHS Staff Survey (31 Mar 2017)	73.3%	66.1% Oct 15 - Dec 15	65.7% Oct 16 - Dec 16	➡	🟠
	W3	**Percentage of staff agreeing that their role makes a difference to patients / service users (%)** NHS England - NHS Staff Survey (31 Mar 2017)	89.1%	84.4% Oct 15 - Dec 15	85.4% Oct 16 - Dec 16	➡	⚪
	W3	**Percentage of staff attending work in the last 3 months despite feeling unwell because they felt pressure from their manager, colleagues or themselves (%)** NHS England - NHS Staff Survey (31 Mar 2017)	55.4%	58.8% Oct 15 - Dec 15	60.2% Oct 16 - Dec 16	➡	⚪
	W3	**Percentage of staff experiencing discrimination at work in the last 12 months (%)** NHS England - NHS Staff Survey (31 Mar 2017)	12.5%	17.3% Oct 15 - Dec 15	17.7% Oct 16 - Dec 16	➡	⚪
	W3	**Percentage of staff experiencing harassment, bullying or abuse from patients, relatives or the public in last 12 months (%)** NHS England - NHS Staff Survey (31 Mar 2017)	29.8%	33.5% Oct 15 - Dec 15	35.2% Oct 16 - Dec 16	➡	⚪
	W3	**Percentage of staff experiencing physical violence from patients, relatives or the public in last 12 months (%)** NHS England - NHS Staff Survey (31 Mar 2017)	18.0%	20.0% Oct 15 - Dec 15	20.4% Oct 16 - Dec 16	➡	⚪

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Key question	KLOE	Indicator	National average	Performance			National comparison
				Previous	**Latest**	**Change**	
	W3	**Percentage of staff feeling unwell due to work related stress in the last 12 months (%)** NHS England - NHS Staff Survey (31 Mar 2017)	38.7%	48.8% Oct 15 - Dec 15	47.8% Oct 16 - Dec 16	➡	🟠
	W3	**Percentage of staff reporting good communication between senior management and staff (%)** NHS England - NHS Staff Survey (31 Mar 2017)	35.0%	28.8% Oct 15 - Dec 15	23.5% Oct 16 - Dec 16	🔻	🟠
	W3	**Proportion of days sick in the last 12 months for Medical and Dental staff (%)** Electronic Staff Record - ESR Data Warehouse (13 Apr 2017)	2.1%	1.2% Oct 14 - Sep 15	3.3% Feb 16 - Jan 17	➡	⚪
	W3	**Proportion of days sick in the last 12 months for non-clinical staff (%)** Electronic Staff Record - ESR Data Warehouse (13 Apr 2017)	4.3%	4.3% Oct 14 - Sep 15	4.4% Feb 16 - Jan 17	➡	⚪
	W3	**Proportion of days sick in the last 12 months for Nursing and Midwifery staff (%)** Electronic Staff Record - ESR Data Warehouse (13 Apr 2017)	5.2%	4.5% Oct 14 - Sep 15	4.1% Feb 16 - Jan 17	➡	🟢
	W3	**Proportion of days sick in the last 12 months for other clinical staff (%)** Electronic Staff Record - ESR Data Warehouse (13 Apr 2017)	5.2%	4.4% Oct 14 - Sep 15	4.6% Feb 16 - Jan 17	➡	⚪
	W3	**Proportion of Health Care Workers with direct patient care that have been vaccinated against seasonal influenza (%)** Department of Health - HCW Seasonal Influenza Vaccination Programme (15 Dec 2016)	38.9%	44.4% Sep 14 - Feb 15	35.2% Sep 15 - Feb 16	🔻	⚪
	W3	**Staff recommendation of the organisation as a place to work or receive treatment (%)** NHS England - NHS Staff Survey (04 Apr 2017)	66.7%	60.1% Oct 15 - Dec 15	57.3% Oct 16 - Dec 16	➡	🟠
	W4	**Snapshot of whistleblowing alerts received by CQC** Care Quality Commission - Internal data (13 Feb 2017)		1 or more Nov 15	0 Nov 16 - Jan 17	🔺	⚪

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What's the current performance?

No. of indicators

Key question	KLOE	Indicator	National average	Performance Previous	Performance Latest	Change	National comparison
Safe	S1	**Detained patient deaths: Composite indicator** Care Quality Commission / Health and Social Care Information Centre - Mental Health Act database / MHLDDS / KP90 (24 Feb 2017)			Nov 14 - Oct 15	NA	🟠
		Detained patient deaths: Trusts flagging for risk in relation to the number of deaths due to natural causes of patients detained under the Mental Health Act (people aged under 75) MHLDDS/MHAdb	-		0.0 Nov 14 - Oct 15	NA	🟠
		Detained patient deaths: Trusts flagging for risk in the number of suicides of patients detained under the Mental Health Act (all ages)- MHLDDS/MHAdb	1.0		0.0 Nov 14 - Oct 15	NA	⚪
	S1	**Patients that die following injury or self-harm within 3 days of being admitted to acute hospital beds** Health and Social Care Information Centre - MHLDDS - HES Bridged (24 Feb 2017)	1.0	0.0 Oct 13 - Sep 14	Data suppressed Mar 15 - Feb 16	⬆️	🟠
	S1	**Proportion of mortality among mental health inpatients aged 0 - 74 (death recorded in ONS) (%)** HSCIC - MHLDDS (10 Jan 2017)	1.4%	NA	2.5% Nov 14 - Oct 15	Under dev	⚪
	S1	**Rate of recorded incidences of assault (on a patient by another patient) per 100 MH inpatients in general security (level 0) wards** HSCIC - MHLDDS (09 Feb 2017)	10.1	NA	0.1 Nov 14 - Oct 15	Under dev	⚪
	S1	**Suicides within 3 days of discharge from hospital** Health and Social Care Information Centre - MHLDDS - HES Bridged (10 Jan 2017)	1.0	0.0 Apr 13 - Mar 14	0.1 Nov 14 - Oct 15	➡️	⚪
	S3	**PLACE score for cleanliness of environment (%)** Information Centre for Health & Social Care (IC) - PLACE (24 Jan 2017)	98.3%	NA	99.1% Feb 16 - Jun 16	NA	⚪
	S4	**Proportion of registered nursing staff (%)** Electronic Staff Record - ESR Data Warehouse (13 Apr 2017)	52.3%	53.1% Sep 15	47.8% Jan 17	⬇️	⚪
	S4	**Rate of recorded incidences of Absence without Leave (AWOL) per 100 MH detained patients, in general security (level 0) wards** HSCIC - MHLDDS (09 Feb 2017)	3.8	NA	0.6 Nov 14 - Oct 15	Under dev	⚪
	S4	**Rate of recorded incidences of Absence without Leave (AWOL) per 100 MH detained patients, in higher security (level 1,2 or 3) wards** HSCIC - MHLDDS (09 Feb 2017)	3.4	NA	79.3 Nov 14 - Oct 15	Under dev	🔴

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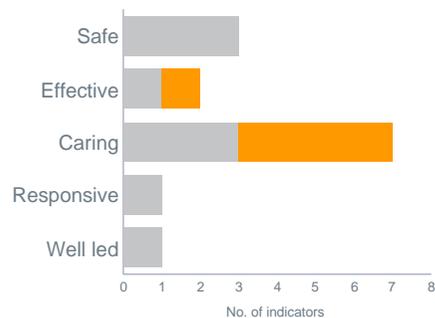| Key question	KLOE	Indicator	National average	Performance			National comparison
				Previous	Latest	Change	
	S4	**Rate of recorded incidences of restraint per 100 MH inpatients in general security (level 0) wards** HSCIC - MHLDDS (09 Feb 2017)	22.3	NA	0.2 Nov 14 - Oct 15	Under dev	⚪
	S4	**Rate of recorded incidences of restraint per 100 MH inpatients in higher security (level 1-3) wards** HSCIC - MHLDDS (09 Feb 2017)	44.7	NA	3.4 Nov 14 - Oct 15	Under dev	⚪
	S4	**Ratio of occupied beds to all nursing staff** Electronic Staff Record - ESR Data Warehouse (13 Apr 2017)	4.6	NA	8.2 Jan 17	Under dev	🟠
	E1	**Emergency admissions of mental health inpatients for ambulatory care sensitive (ACS) conditions** HSCIC - MHLDDS (17 Jan 2017)	-	NA	0.0 Nov 14 - Oct 15	NA	⚪
	E1	**PLACE score for food (%)** Information Centre for Health & Social Care (IC) - PLACE (24 Jan 2017)	90.8%	NA	87.5% Feb 16 - Jun 16	NA	⚪
Effective	E1	**Proportion of detained mental health inpatients who attend Accident and Emergency departments (%)** HSCIC - MHLDDS (10 Jan 2017)	21.1%	NA	27.8% Nov 14 - Oct 15	NA	🟠
	E1	**Proportion of patient records checked that show evidence of a physical health check on admission where the patient has been in hospital less than a year (%)** Care Quality Commission - Mental Health Act database (07 Apr 2017)	95.8%	95.6% Sep 14 - Aug 15	100.0% Jan 16 - Dec 16	➡	⚪
	E1	**Proportion of patient records checked where care plans showed evidence of discharge planning (%)** Care Quality Commission - Mental Health Act database (07 Apr 2017)	74.3%	73.7% Sep 14 - Aug 15	70.0% Jan 16 - Dec 16	➡	⚪
	E1	**Proportion of wards visited where there were difficulties in arranging GP services for detained patients (%)** Care Quality Commission - Mental Health Act database (05 Apr 2017)	7.1%	0.0% Sep 14 - Aug 15	0.0% Jan 16 - Dec 16	➡	⚪
	E6	**Proportion of patient records checked where the Responsible Clinician has recorded their assessment of a patients capacity to consent at first treatment (%)** Care Quality Commission - Mental Health Act database (07 Apr 2017)	74.7%	20.0% Sep 14 - Aug 15	81.3% Jan 16 - Dec 16	⬆	⚪

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Key question	KLOE	Indicator	National average	Performance			National comparison
				Previous	Latest	Change	
	E7	**Proportion of patient records checked that show evidence of discussions about rights on detention (%)** Care Quality Commission - Mental Health Act database (07 Apr 2017)	89.6%	98.0% Sep 14 - Aug 15	95.0% Jan 16 - Dec 16	➡	⚪
	E7	**Proportion of patient records checked where there was an approved mental health practitioner (AMHP) report available (%)** Care Quality Commission - Mental Health Act database (07 Apr 2017)	79.4%	87.2% Sep 14 - Aug 15	90.0% Jan 16 - Dec 16	➡	⚪
	E7	**Proportion of wards visited where there is an Independent Mental Health Advocacy (IMHA) service available (%)** Care Quality Commission - Mental Health Act database (06 Apr 2017)	99.5%	100.0% Sep 14 - Aug 15	100.0% Jan 16 - Dec 16	➡	⚪
Caring	C1	**PLACE score for privacy, dignity and well-being (%)** Information Centre for Health & Social Care (IC) - PLACE (24 Jan 2017)	88.9%	NA	79.2% Feb 16 - Jun 16	NA	⚪
	R1	**Bed occupancy: Composite indicator** Care Quality Commission / Department of Health - Mental Health Act database / KH03 (08 May 2017)			Jan 16 - Dec 16	NA	🟠
		Bed occupancy: Occupancy ratio, looking at the average daily number of available and occupied consultant-led beds open overnight - NHS England	0.9		1.0 Jan 16 - Dec 16	Under dev	🟠
		Bed occupancy: Occupancy ratio, looking at the number of patients allocated to visited wards, compared with the number of available beds - MHA Database	0.9		0.9 Jan 16 - Dec 16	Under dev	⚪
	R1	**PLACE score for condition, appearance and maintenance (%)** Information Centre for Health & Social Care (IC) - PLACE (24 Jan 2017)	94.6%	NA	92.0% Feb 16 - Jun 16	NA	⚪
Responsive	R2	**Delayed transfers of care: Composite indicator** NHS England - KH03/NcBD/Delayed Transfers of Care (04 May 2017)			Oct 16 - Dec 16	NA	⚪
		Delayed transfers of care: Ratio of number of patients whose care is delayed to average daily number of occupied beds open overnight in quarter, delay is attributable to NHS and NHS / social care	0.0		0.0 Oct 16 - Dec 16	Under dev	⚪
		Delayed transfers of care: The number of trusts where there is evidence of delayed transfers of care but no bed data available		No Jul 15 - Sep 15	No Oct 16 - Dec 16	➡	⚪
	R3	**Proportion of care spells where patients are discharged without a recorded crisis plan (%)** HSCIC - MHLDDS (10 Jan 2017)	84.5%	NA	43.7% Nov 14 - Oct 15	NA	⚪

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Key question	KLOE	Indicator	National average	Performance			National comparison
				Previous	Latest	Change	
Well led	W2	**Data quality: Composite indicator on provider closed Mental Health Act (MHA) and hospital inpatient episodes (%)** MHAdb / HSCIC KP90 - Well-led (10 Jan 2017)			Nov 14 - Oct 15	NA	⬤
		Data quality: The proportion of provider closed hospital inpatient episodes out of total closed patient episodes over a 12 month period (%)	93.1%		99.9% Nov 14 - Oct 15	NA	⬤
		Data quality: The proportion of provider closed episodes of patients detained under the Mental Health Act (MHA) out of total closed patient episodes over a 12 month period (%)	93.1%		97.2% Nov 14 - Oct 15	NA	⬤

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What's the current performance?

No. of indicators

Key question	KLOE	Indicator	National average	Performance			National comparison
				Previous	**Latest**	**Change**	
Safe	S1	**Proportion of mortality among people in contact with community mental health services aged 0-74 (death recorded in ONS) (%)** HSCIC - MHLDDS (10 Jan 2017)	0.7%	NA	0.8% Nov 14 - Oct 15	Under dev	⚪
	S1	**Proportion of mortality among people in contact with community mental health services aged 0-74 (self-harm or undetermined ONS death) (%)** HSCIC - MHLDDS (10 Jan 2017)	0.0%	NA	0.1% Nov 14 - Oct 15	Under dev	⚪
	S3	**Proportion of discharges from hospital followed up within 7 days (%)** Health and Social Care Information Centre - MHLDDS (10 Jan 2017)	69.4%	56.2% Apr 13 - Mar 14	48.6% Nov 14 - Oct 15	🔻	⚪
Effective	E1	**Q33. In the last 12 months, did NHS mental health services give you any help/advice with finding support for physical health needs (this might be an injury, disability, or condition such as diabetes)?** Care Quality Commission - Community Mental Health Survey (23 Dec 2016)	-	4.0 Sep 14 - Nov 14	4.2 Sep 15 - Nov 15	➡	🟠
	E1	**Q7. Have you been told who is in charge of organising your care and services? (This person can be anyone providing your care, and may be called a care coordinator or lead professional.)** Care Quality Commission - Community Mental Health Survey (23 Dec 2016)	-	6.8 Sep 14 - Nov 14	7.2 Sep 15 - Nov 15	➡	⚪
Caring	C1	**Q41. Overall in the last 12 months, did you feel that you were treated with respect and dignity by NHS mental health services?** Care Quality Commission - Community Mental Health Survey (23 Dec 2016)	-	7.8 Sep 14 - Nov 14	8.2 Sep 15 - Nov 15	➡	⚪
	C1	**Q5. Thinking about the most recent time you saw someone from NHS mental health services for your mental health needs, were you given enough time to discuss your needs and treatment?** Care Quality Commission - Community Mental Health Survey (23 Dec 2016)	-	6.8 Sep 14 - Nov 14	7.1 Sep 15 - Nov 15	➡	⚪

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Key question	KLOE	Indicator	National average	Performance			National comparison
				Previous	**Latest**	**Change**	
	C2	**Q12. Were you involved as much as you wanted to be in agreeing what care you will receive?** Care Quality Commission - Community Mental Health Survey (23 Dec 2016)	-	6.5 Sep 14 - Nov 14	6.9 Sep 15 - Nov 15	→	⚪
	C2	**Q15. Were you involved as much as you wanted to be in discussing how your care is working?** Care Quality Commission - Community Mental Health Survey (23 Dec 2016)	-	6.9 Sep 14 - Nov 14	6.8 Sep 15 - Nov 15	→	🟠
	C2	**Q25. Were you involved as much as you wanted to be in decisions about which medicines you receive?** Care Quality Commission - Community Mental Health Survey (23 Dec 2016)	-	6.4 Sep 14 - Nov 14	6.3 Sep 15 - Nov 15	→	🟠
	C2	**Q37. Have NHS mental health services involved a member of your family or someone else close to you as much as you would like?** Care Quality Commission - Community Mental Health Survey (23 Dec 2016)	-	6.3 Sep 14 - Nov 14	6.0 Sep 15 - Nov 15	→	🟠
	C3	**Q39. Do the people you see through NHS mental health services help you with what is important to you?** Care Quality Commission - Community Mental Health Survey (23 Dec 2016)	-	4.9 Sep 14 - Nov 14	5.7 Sep 15 - Nov 15	⬆	🟠
Responsive	R3	**Q21. Do you know who to contact out of office hours if you have a crisis?** Care Quality Commission - Community Mental Health Survey (23 Dec 2016)	-	7.3 Sep 14 - Nov 14	7.1 Sep 15 - Nov 15	→	⚪
Well led	W4	**Survey errors: Composite indicator to assess occurrence of sampling errors or non-submission of data to the two most recent iterations of the Community Mental Health Survey** Care Quality Commission - Community Mental Health Survey (23 Dec 2016)			Sep 14 - Nov 15	NA	⚪
		Survey errors: Occurrence of sampling errors or non-submission of data relating to the current iteration of the Community Mental Health Survey		Submission, no errors Sep 14 - Nov 14	Submission, no errors Sep 15 - Nov 15	→	⚪
		Survey errors: Occurrence of sampling errors or non-submission of data relating to the previous iteration of the Community Mental Health Survey		Submission with errors (minor) Sep 13 - Nov 13	Submission, no errors Sep 14 - Nov 14	⬆	⚪

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MENTAL HEALTH ACT	INCIDENTS	SAFETY THERMOMETER	PLACE	DELAYED TRANSFERS	PATIENT SURVEYS	STAFF SURVEYS	DATA QUALITY

Summary Information

Relevant Registered Locations:

439 Ipswich Road (RRDA1)
Brian Roycroft Ward (RRDX3)
Chelmer and Stort Mental Health Wards (RRDPA)
Edward House (RRDAC)
Kitwood and Roding Mental Health Wards (RRD15)
Landermere Centre Mental Health Wards (RRDB7)
The Christopher Unit (RRDY6)
The Crystal Centre (RRD16)
The King's Wood Centre (RRDY7)
The Lakes Mental Health Wards (RRDX1)
The Linden Centre Mental Health Wards (RRDAH)
The St Aubyn Centre (RRD22)

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MENTAL HEALTH ACT	INCIDENTS	SAFETY THERMOMETER	PLACE	DELAYED TRANSFERS	PATIENT SURVEYS	STAFF SURVEYS	DATA QUALITY

Use of Mental Health Act

Detention Type	Section	Sections starting in most recent 6 months (Apr 15 - Sep 15)	Sections starting in most recent 6 months (Oct 14 - Mar 15)	Sections starting in most recent 6 months (Sep 15)
Detentions under Part ii of the Mental Health Act	Section 2	271	272	32
	Section 3	174	157	104
Detentions under Part iii of the Mental Health Act	Section 35	0	0	0
	Section 36	0	0	0
	Section 37 (with S41 restrictions)	0	0	23
	Section 37 (without S41 restrictions)	0	*	*
	Section 45A	0	0	0
	Section 47 (with S49 restrictions)	0	0	0
	Section 47 (without S49 restrictions)	0	*	0
	Section 48 (with S49 restrictions)	*	*	*
	Section 48 (without S49 restrictions)	0	0	0
	Other sections - 38, 44 and 46	0	*	0
Place of safety orders	Section 135	0	0	0
	Section 136	197	177	*
Uses of Section 4	Section 4	*	*	0
Uses of Section 5	Section 5 (2)	95	65	*
	Section 5 (4)	7	12	0

An asterisk (*) indicates a suppressed value between 1 & 5.

Data source: Mental health & learning disabilities data set, HSCIC

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MENTAL HEALTH ACT	INCIDENTS	SAFETY THERMOMETER	PLACE	DELAYED TRANSFERS	PATIENT SURVEYS	STAFF SURVEYS	DATA QUALITY

Health based places of safety

Name of Place of Safety	Local Authorities Served	Type of Place of Safety	Opening Hours	Capacity	Ages Accepted
Harbour Suite, The Lakes Mental Health Unit	Essex	Mental health service (mental health hospital site)	24 hours a day, 365 days a year	1	18 and over
The Christopher Unit, Linden Centre	Essex	Mental health service (mental health hospital site)	24 hours a day, 365 days a year	1	18 and over
The St Aubyn Centre	Essex	Mental health service (mental health hospital site)	24 hours a day, 365 days a year	1	Under 18

Data source: CQC survey of health based places of safety, last refreshed 15 Oct 2015

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MENTAL HEALTH ACT	INCIDENTS	SAFETY THERMOMETER	PLACE	DELAYED TRANSFERS	PATIENT SURVEYS	STAFF SURVEYS	DATA QUALITY

Complaints and Notifications

Mental Health Act Complaints

CQC received 19 Mental Health Act complaints for this provider from 01/03/2016 to 28/02/2017.

Location	Total number of complaints
Chelmer and Stort Mental Health Wards (RRDPA)	9
The Lakes Mental Health Wards (RRDX1)	3
The Linden Centre Mental Health Wards (RRDAH)	2
The King's Wood Centre (RRDY7)	2
Edward House (RRDAC)	1
Landermere Centre Mental Health Wards (RRDB7)	1
The Christopher Unit (RRDY6)	1

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| MENTAL HEALTH ACT | INCIDENTS | SAFETY THERMOMETER | PLACE | DELAYED TRANSFERS | PATIENT SURVEYS | STAFF SURVEYS | DATA QUALITY |

Complaints and Notifications

Deaths of Detained Patients

CQC received 2 notification(s) of death(s) that occurred at this provider for the period 01/03/2016 to 28/02/2017. Summary details of deaths are listed in the table below

Reference number	Date of death	Location	Ward	Cause of death	Additional information	Notification received within 3 days
4242	12/09/2016	The King's Wood Centre	HENNEAGE	Natural Causes	Death during escorted leave.	Yes
4096	02/03/2016	Chelmer and Stort Mental Health Wards	CHELMER	Unsure Suicide/Accident		No

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| MENTAL HEALTH ACT | INCIDENTS | SAFETY THERMOMETER | PLACE | DELAYED TRANSFERS | PATIENT SURVEYS | STAFF SURVEYS | DATA QUALITY |

Complaints and Notifications

Absence Without Leave (AWOL)

CQC received COUNTOFAWOLS notification(s) of unauthorised absence that occurred at this provider for the period 01/03/2016 to 28/02/2017.

The notification(s) referred to 16 service user(s).

A count of absences by type is recorded in the table below.

AWOL Incident Description	Count
Failed to return from authorised leave	14
Absented him or herself during escorted leave	4
Absented him or herself from hospital	0
Not known	0

| MENTAL HEALTH ACT | INCIDENTS | SAFETY THERMOMETER | PLACE | DELAYED TRANSFERS | PATIENT SURVEYS | STAFF SURVEYS | DATA QUALITY |

Second Opinion Appointed Doctor (SOAD) Measures

Below is a table showing a summary of the SOAD visits carried out by the CQC at the provider's request for the period 01/02/2016 to 31/01/2017.

Total Number of SOAD Visits	Proportion of visits where problems were reported[1]	Proportion of relevant SOAD visit requests received late[2]
106	23%	18%

[1] Problems reported by SOADs with the administration of the visit, e.g. paperwork/consultees/patient not available etc.

Please note: includes problems reported during SOAD visits for CTO patients, where non-attendance of patients may not be the direct

fault of the provider that requested the visit.

[2] The proportion of requests for SOAD visits for medication submitted due to the expiry of a one month (for community patients) or three

month (for detained patients) rule that were received later than one or three months (as appropriate) from the date of section (for

community patients) or the date of treatment (for detained patients).

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Risk Monitoring Indicators

Key Question	Indicator Name	Indicator Description	Observed Value	Numerator	Denominator	National Comparison
Safe	Detained patient suicides (01/11/2014 - 31/10/2015)	Trusts flagging for risk in the number of suicides of patients detained under the Mental Health Act (all ages) - MHA Database/MHLDDS	0.00	n/a	n/a	⚪
Safe	Detained patient deaths dues to natural causes (01/11/2014 - 31/10/2015)	Trusts flagging for risk in relation to the number of deaths due to natural causes of patients detained under the Mental Health Act (people aged under 75) - MHA Database/KP90	*	n/a	n/a	🟠

1. An asterisk (*) in the observed column indicates a suppressed value between 1 and 5. .

2. Not applicable: "n/a" is used to mean that this value is not relevant to this indicator, this may be because the indicator is rules based or does not have an observed value.

KEY: ⚪ - About the Same   🟠 - Worse   🔴 - Much Worse

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Risk Monitoring Indicators

Key Question	Indicator Name	Indicator Description	Observed Value	Numerator	Denominator	National Comparison
Effective	GP services for patients (01/01/2016 - 31/12/2016)	Proportion of wards visited where there were difficulties in arranging GP services for detained patients - MHA Database	0%	0	3	
Effective	Explanation of rights (01/01/2016 - 31/12/2016)	Proportion of patient records checked that show evidence of discussions about rights on detention - MHA Database	95%	19	20	
Effective	Recording of capacity assessments (01/01/2016 - 31/12/2016)	Proportion of patient records checked where the Responsible Clinician has recorded their assessment of a patient's capacity to consent at first treatment - MHA Database	81%	13	16	
Effective	Use of Section 4 (01/10/2014 - 30/09/2015)	Ratio of the number of uses of section 4 to the number of uses of section 2 of the MHA - MHLDDS	*	*	*	
Effective	AMHP reports (01/01/2016 - 31/12/2016)	Proportion of patient records checked where there was an approved mental health practitioner (AMHP) report available - MHA Database	90%	18	20	
Effective	Physical health checks (01/01/2016 - 31/12/2016)	Proportion of patient records checked that show evidence of a physical health check on admission where the patient has been in hospital less than a year - MHA Database	100%	12	12	

1. An asterisk (*) in the observed column indicates a suppressed value between 1 and 5. .

2. Not applicable: "n/a" is used to mean that this value is not relevant to this indicator, this may be because the indicator is rules based or does not have an observed value.

KEY: ⬤ - About the Same   ⬤ - Worse   ⬤ - Much Worse

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Risk Monitoring Indicators

Key Question	Indicator Name	Indicator Description	Observed Value	Numerator	Denominator	National Comparison
Effective	Readmission under the MHA of previously informal inpatients (01/08/2014 - 31/07/2015)	Proportion of informal hospital spells (ages 18-64) that finished in the period where patients were readmitted under detention (sections 2 and 3 of the MHA) within 30 days - MHLDDS	2%	12	588	⬤
Effective	Readmission under the MHA of detained patients (01/08/2014 - 31/07/2015)	Proportion of hospital spells under detention (ages 18-64) that finished in the period where patients were readmitted under detention (sections 2 and 3 of the MHA) within 30 days - MHLDDS	6%	23	365	⬤
Effective	Discharge planning (01/01/2016 - 31/12/2016)	Proportion of patient records checked where care plans showed evidence of discharge planning - MHA Database	70%	7	10	⬤

1. An asterisk (*) in the observed column indicates a suppressed value between 1 and 5. .

2. Not applicable: "n/a" is used to mean that this value is not relevant to this indicator, this may be because the indicator is rules based or does not have an observed value.

KEY: ⬤ - About the Same   ⬤ - Worse   ⬤ - Much Worse

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Risk Monitoring Indicators

Key Question	Indicator Name	Indicator Description	Observed Value	Numerator	Denominator	National Comparison
Responsive	Bed occupancy (01/01/2016 - 31/12/2016)	Occupancy ratio, looking at the number of patients allocated to visited wards, compared with the number of available beds - MHA Database	93%	201	215	⬤
Responsive	MHA complaints (01/08/2015 - 31/07/2016)	Ratio of Mental Health Act complaints received by CQC per 1,000 detentions and CTOs - MHA Database/KP90	15.73	14	0.89	⬤

1. An asterisk (*) in the observed column indicates a suppressed value between 1 and 5. .

2. Not applicable: "n/a" is used to mean that this value is not relevant to this indicator, this may be because the indicator is rules based or does not have an observed value.

KEY: ⬤ - About the Same   ⬤ - Worse   ⬤ - Much Worse

North Essex Partnership University NHS Foundation Trust (RRD)
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MENTAL HEALTH ACT	INCIDENTS	SAFETY THERMOMETER	PLACE	DELAYED TRANSFERS	PATIENT SURVEYS	STAFF SURVEYS	DATA QUALITY

Mortality

Deaths recorded in ONS mortality statistics

Deaths of people aged 0-74 in contact with mental health services	Previous	Latest Nov 14 - Oct 15
People in contact with community mental health services	NA	151
People in contact with community mental health services due to self-harm or undetermined injury	NA	10
Mental health inpatients	NA	42

An asterisk (*) indicates a suppressed value between 1 & 5.

Reported deaths

Reporting System	Previous Mar 15 - Feb 16	Latest Mar 16 - Feb 17
National Reporting and Learning System (NRLS)	2	7

Notifications and whistleblowing to CQC

	Apr 2016	May 2016	Jun 2016	Jul 2016	Aug 2016	Sep 2016	Oct 2016	Nov 2016	Dec 2016	Jan 2017	Feb 2017	Mar 2017
12-3 Statement of Purpose	1	0	0	0	0	0	1	0	0	0	0	0
14-1,3,4 Absence	0	0	0	0	0	2	0	0	0	0	0	0
16-1 Unexpected Death	0	0	0	1	0	0	0	0	10	1	1	11
17-1 MHA Death in Detention	0	0	0	0	0	2	0	0	0	2	0	0
18-2c DoL Apply Supervis Body	5	4	1	1	3	2	0	2	0	0	4	1
18-2e Abuse or Allegation	0	0	1	0	0	0	0	0	0	0	0	0
Whistleblower	0	1	0	0	0	0	0	1	1	0	0	0

Safeguarding alerts to CQC

	Jun 2016	Sep 2016	Oct 2016	Jan 2017
Safeguarding alert	2	1	2	2

Never Events

Never events reported between 01/04/2016 **and** 31/03/2017 : 0

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Serious incidents reported to Strategic Executive Information System (from and)

Type of Incident	Total
Grand Total	0

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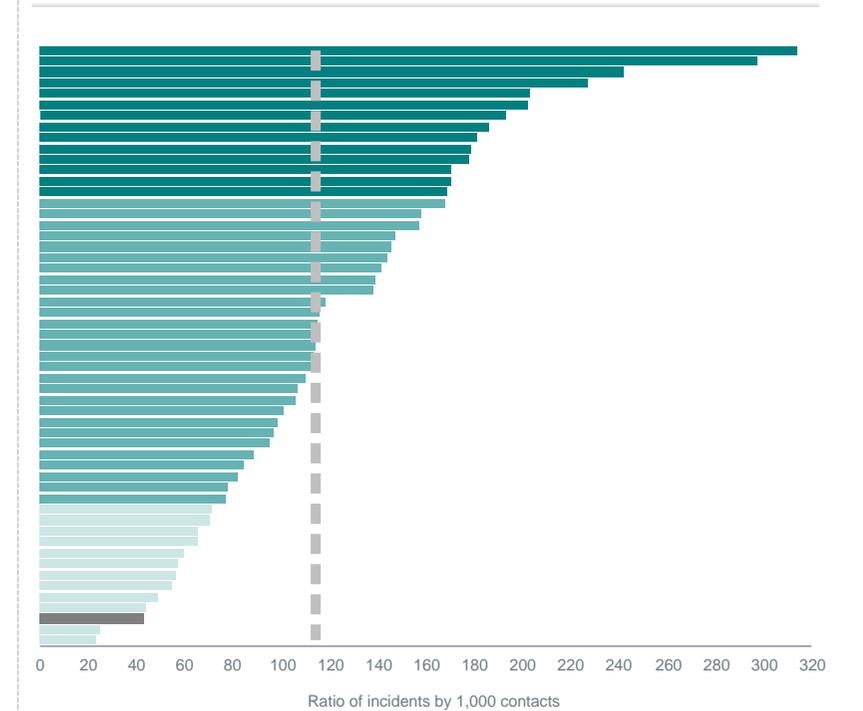| MENTAL HEALTH ACT | **INCIDENTS** | SAFETY THERMOMETER | PLACE | DELAYED TRANSFERS | PATIENT SURVEYS | STAFF SURVEYS | DATA QUALITY |

Key messages

• The median time taken to report incidents was 50 days for this organisation compared to 26 for all trusts between Apr 16 and Sep 16

- This trust
- Highest 25% of reporters
- Middle 50% of reporters
- Lowest 25% of reporters
- Median

All reported incidents

Reported incidents that resulted in moderate, severe harm or death
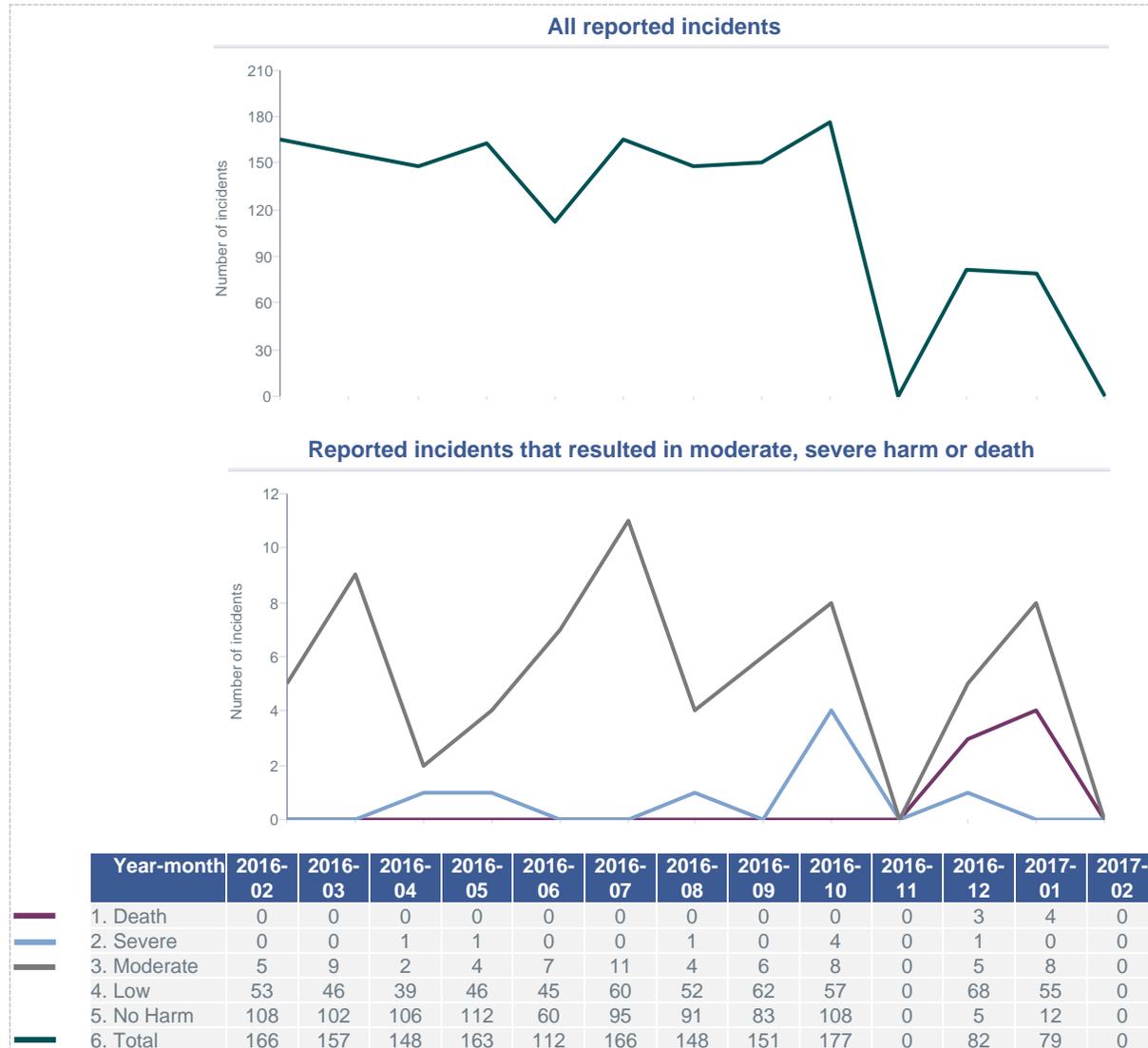
Comparative reporting rate for incidents in mental health trusts

Ratio of incidents by 1,000 contacts

Year-month	2016-02	2016-03	2016-04	2016-05	2016-06	2016-07	2016-08	2016-09	2016-10	2016-11	2016-12	2017-01	2017-02
1. Death	0	0	0	0	0	0	0	0	0	0	3	4	0
2. Severe	0	0	1	1	0	0	1	0	4	0	1	0	0
3. Moderate	5	9	2	4	7	11	4	6	8	0	5	8	0
4. Low	53	46	39	46	45	60	52	62	57	0	68	55	0
5. No Harm	108	102	106	112	60	95	91	83	108	0	5	12	0
6. Total	166	157	148	163	112	166	148	151	177	0	82	79	0

Indicator	Trend	Performance
NRLS – Proportion of reported incidents that are harmful	⬇	⚪
NRLS - Potential under-reporting of patient safety incidents	Under dev	🟠
NRLS – Consistency of reporting	➡	⚪

North Essex Partnership University NHS Foundation Trust (RRD)
Featured data sources > Incidents > NRLS

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National Reporting and Learning System (NRLS) incidents by type and severity between Mar 16 **and** Feb 17

Type of Incident	No Harm	Low	Moderate	Severe	Death	Total
Self-harming behaviour	269	250	25	2	3	549
Patient accident	267	153	18	5		443
Disruptive, aggressive behaviour (includes patient-to-patient)	164	104	11			279
Medication	29	4	1			34
Access, admission, transfer, discharge (including missing patient)	30	2				32
Other	7	16	4	1	4	32
Treatment, procedure	1	1	1			3
Infrastructure (including staffing, facilities, environment)	2		1			3
Patient abuse (by staff / third party)	2					2
Consent, communication, confidentiality	1		1			2
Documentation (including electronic & paper records, identification and drug charts)	1		1			2
Clinical assessment (including diagnosis, scans, tests, assessments)			1			1
Implementation of care and ongoing monitoring / review	1					1
Total	**774**	**530**	**64**	**8**	**7**	**1383**

Speciality	No Harm	Low	Moderate	Severe	Death	Total
Mental health	773	530	64	8	7	1382
Other specialties	1					1
	774	**530**	**64**	**8**	**7**	**1383**

North Essex Partnership University NHS Foundation Trust (RRD)
Featured data sources > NHS Safety thermometer > Mental health

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Mental Health Safety Thermometer

Under development

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Physical Safety Thermometer

Under development

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Featured data sources > Patient led assessments of the care environment (PLACE)

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PLACE assessments are self-assessments undertaken by teams of NHS and private/independent health care providers, and include at least 50 per cent members of the public (known as patient assessors). They focus on different aspects of the environment in which care is provided, as well as supporting non-clinical services such as cleanliness.

The 2016 PLACE scores for North Essex Partnership University NHS Foundation Trust were:

Site scores		PLACE scores					
Site name	Site type	Cleanliness	Privacy, dignity and well being	Food	Facilities	Dementia	Disability
THE CRYSTAL CENTRE	Mental Health Only	99.35%	82.56%	87.96%	98.48%	83.29%	86.04%
THE BRAMBLES	Mental Health Only	97.83%	62.5%		83.95%		57.14%
LINDEN CENTRE	Mental Health Only	98.58%	84.15%	88.19%	96.45%	69.38%	76.38%
LANDERMERE CENTRE	Mental Health Only	99.37%	91.13%	84.14%	87.61%	87.14%	86.08%
KINGS WOOD CENTRE	Mental Health Only	99.45%	69.53%	87.52%	92.86%	78.3%	82.44%
ST AUBYN CENTRE	Mental Health Only	98.92%	81.29%	88.41%	96.54%		86.17%
THE LAKES	Mental Health Only	99.36%	77.66%	87.37%	91.27%	82.37%	79.4%
CLACTON HOSPITAL	Mental Health Only	99.44%	67.42%	83.97%	91.18%	80.21%	83.53%
ST MARGRET'S HOSPITAL	Mental Health Only	99.4%	84.52%	86.89%	91.5%	87.61%	88.68%
SYDENHAM HOUSE	Mental Health Only	99.08%	65.74%	93.38%	93.06%	89.07%	86.58%
DERWENT CENTRE	Mental Health Only	99.36%	80.47%	86.08%	80.77%	88.17%	82.31%
This trust		99.09%	79.33%	87.49%	92.2%	80.87%	81.53%
England average (MH and LD trusts)		98.22%	88.71%	90.36%	94.32%	84.67%	84.58%
England average (All MH trusts)		98.29%	88.82%	90.6%	94.5%	84.73%	84.45%
England average (ALL CHS trusts)		98%	85.1%	87.9%	92.1%	80.3%	84.6%

North Essex Partnership University NHS Foundation Trust (RRD)
Featured data sources > Surveys > Community mental health survey

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MENTAL HEALTH ACT	INCIDENTS	SAFETY THERMOMETER	PLACE	DELAYED TRANSFERS	PATIENT SURVEYS	STAFF SURVEYS	DATA QUALITY

Concern status:

2016

	No concern
	Moderate concern
	High concern

Click **here** to contact the Surveys Team to discuss survey data

Concerns live	Escalated to inspector	Action taken	Closed
Under development			

Concerns are flagged where a high proportion of people told us their experience of care was in line with the worst possible answer to a wide range of questions across the entire survey.

Feedback from adults (aged 18 or over) who received care or treatment for a mental health condition during September - November 2015

Where has patient experience improved from 2015 to 2016?

7 areas have improved:
- ⬆ Staff listened carefully when discussing needs
- ⬆ Treated with respect and dignity
- ⬆ Given enough time to discuss needs and treatment
- ⬆ Involved in agreeing care to be received
- ⬆ Involved in decisions about treatments and therapies
- ⬆ Care takes account of personal circumstances
- ⬆ Seen NHS mental health services often enough

Where has patient experience declined from 2015 to 2016?

3 areas have declined:
- ⬇ Given help or advice with finding support for physical health
- ⬇ Staff involved a member of family/friend as much as wanted
- ⬇ Care and services organised well

Where has patient experience continued to be better?

There were no areas better than expected

Where has patient experience continued to be worse?

7 areas once again performed worse than expected:
- · Agreed care and services that will be received
- · Decisions about care made together
- · Involved in decisions about medication
- · Involved in discussing how care is working
- · Overall experience
- · Staff understood impact of mental health on other areas of life
- · Got help needed during a crisis

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Key:

0 2 4 6 8 10

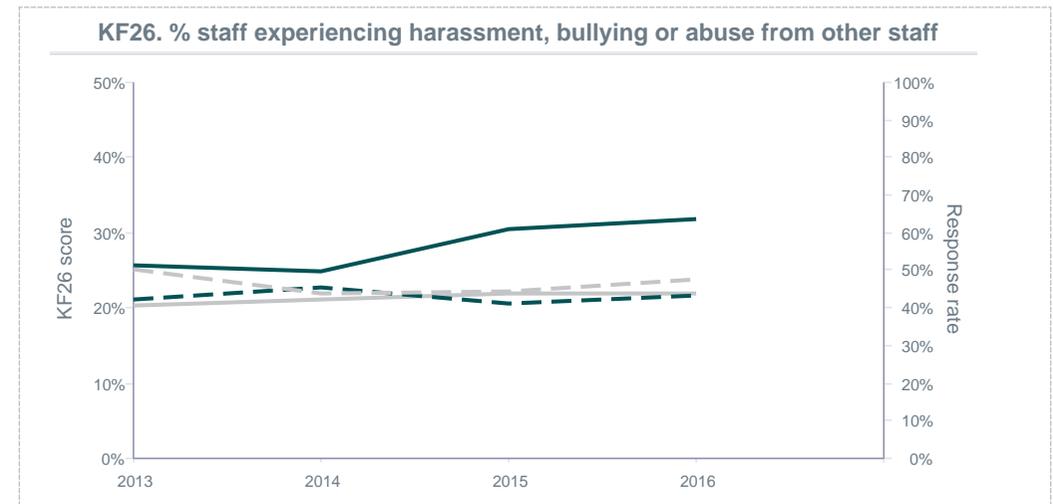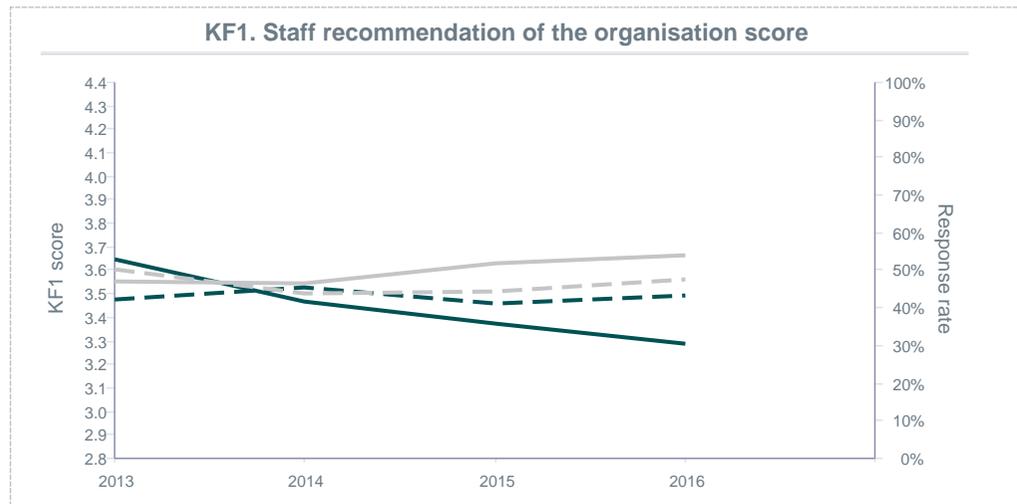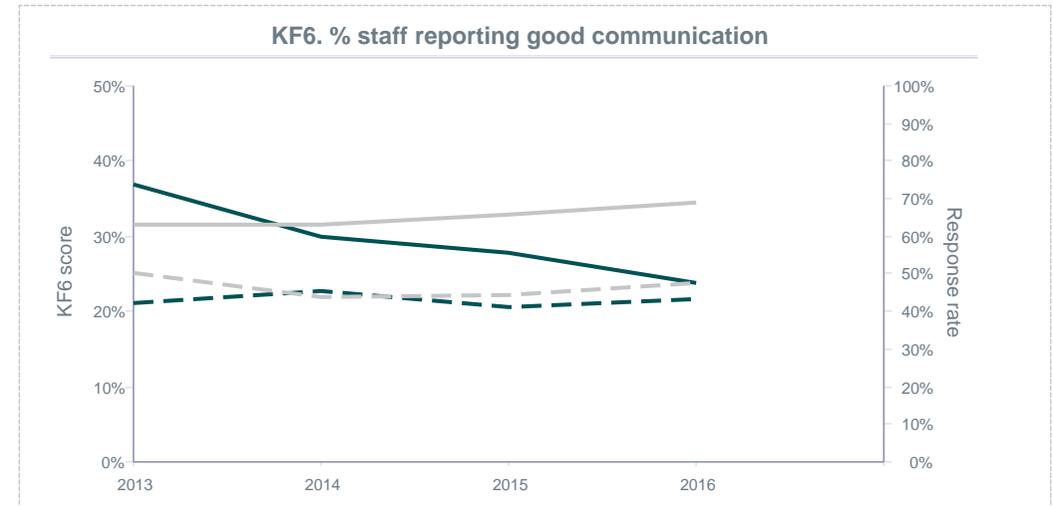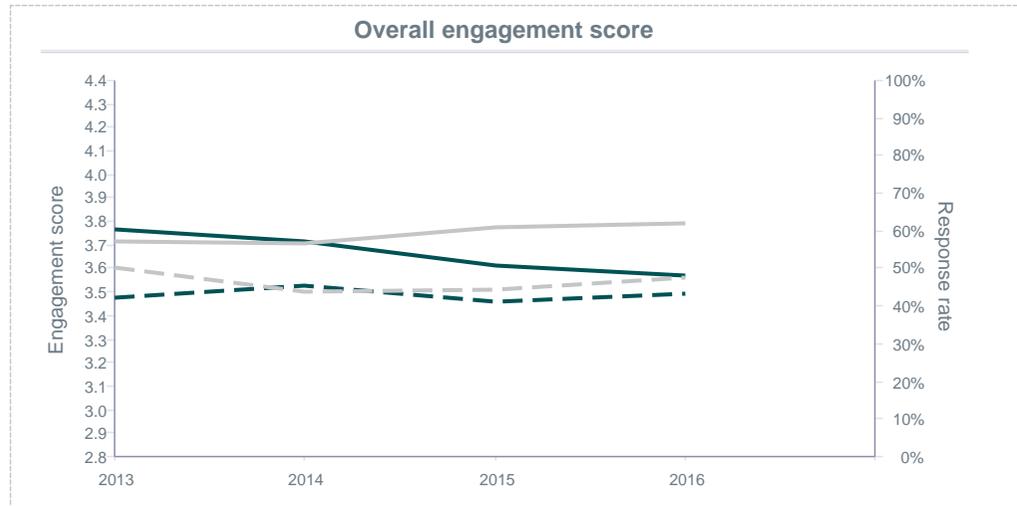|	
As expected	+ +
Worse	+ +
Better	+ +

→ Remained: 'better'/ 'as expected' / 'worse'

↓ Changed from: 'better' to 'as expected'/ 'as expected' to 'worse' / 'better' to 'worse'

↑ Changed from: 'as expected' to 'better'/ 'worse' to 'as expected' / 'worse' to 'better'

Question	2014	2015	2016	Threshold between 'As expected' and Worse	Threshold between 'As expected' and Better	Trend
	Score out of 10					
Q3. In the last 12 months, do you feel you have seen NHS mental health services often enough for your needs?	6.7	5.3	5.7	5.5	6.9	↑
Q4. Did the person or people you saw listen carefully to you?	8.5	7.6	7.9	7.8	8.5	↑
Q5. Were you given enough time to discuss your needs and treatment?	7.9	6.8	7.1	7.1	8.0	↑
Q6. Did the person or people you saw understand how your mental health needs affect other areas of your life?	7.3	6.0	6.5	6.5	7.7	→
Q7. Have you been told who is in charge of organising your care and services?	8.8	6.8	7.2	6.8	8.4	→
Q9. Do you know how to contact this person if you have a concern about your care?	9.8	9.6	9.4	9.2	10.0	→
Q10. How well does this person organise the care and services you need?	8.2	8.1	7.7	7.8	8.8	↓
Q11. Have you agreed with someone from NHS mental health services what care you will receive?	6.5	5.0	5.3	5.3	6.7	→
Q12. Were you involved as much as you wanted to be in agreeing what care you will receive?	7.3	6.5	6.9	6.7	8.1	↑
Q13. Does this agreement on what care you will receive take your personal circumstances into account?	7.8	6.8	7.1	7.0	8.2	↑
Q14. In the last 12 months have you had a formal meeting with NHS mental health services to discuss how your care is working?	8.2	6.8	6.7	6.6	7.9	→
Q15. Were you involved as much as you wanted to be in discussing how your care is working?	-	6.9	6.8	6.9	8.4	→
Q16. Did you feel that decisions were made together by you and the person you saw during this discussion?	-	6.8	6.7	6.8	8.4	→
Q18. Were the reasons for this change explained to you at the time?	-	-	5.3	5.5	7.0	NA
Q19. What impact has this had on the care you receive?	-	-	6.7	5.9	7.8	NA
Q20. Did you know who was in charge of organising your care while this change was taking place?	-	-	4.3	4.1	6.7	NA
Q21. Do you know who to contact out of office hours if you have a crisis?	8.4	7.3	7.1	5.7	7.9	→
Q23. When you tried to contact them, did you get the help you needed?	6.1	4.2	4.3	4.7	7.0	→
Q25. Were you involved as much as you wanted to be in decisions about which medicines you receive?	6.8	6.4	6.3	6.5	7.6	→
Q27. Were you given information about new medicine(s) in a way that you were able to understand?	7.1	6.3	6.7	6.2	7.8	→
Q29. In the last 12 months, has an NHS mental health worker checked with you about how you are getting on with your medicines?	8.3	8.0	7.0	6.9	8.6	→
Q31. Were these treatments or therapies explained to you in a way you could understand?	-	-	8.0	7.5	8.9	NA
Q32. Were you involved as much as you wanted to be in deciding what treatments or therapies to use?	7.4	6.2	6.9	6.5	8.1	↑
Q33. In the last 12 months, did NHS mental health services provide help or advice with finding support for physical health needs?	5.6	4.0	4.2	4.4	5.8	↓
Q34. In the last 12 months, did NHS mental health services provide help or advice with finding support for financial advice or benefits?	5.0	3.6	4.0	3.7	5.2	→
Q35. In the last 12 months, did NHS mental health services provide help or advice with finding support for finding or keeping work?	4.9	4.0	3.9	2.9	5.6	→
Q36. Has someone from NHS mental health services supported you in taking part in an activity locally?	5.1	3.7	3.7	3.4	5.4	→
Q37. Have NHS mental health services involved a member of your family or someone else close to you as much as you would like?	7.0	6.3	6.0	6.1	7.4	↓
Q38. Have you been given information about getting support from people with experience of the same mental health needs?	3.6	3.1	3.2	2.9	4.7	→
Q39. Do the people you see through NHS mental health services help you with what is important to you?	-	-	5.7	5.8	7.1	NA
Q40. Overall experience	7.2	6.3	6.4	6.5	7.5	→
Q41. Overall in the last 12 months, did you feel that you were treated with respect and dignity by NHS mental health services?	8.6	7.8	8.2	8.0	8.7	↑

Score out of 10

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Key messages

Overall engagement score

KF6. % staff reporting good communication

KF1. Staff recommendation of the organisation score

KF26. % staff experiencing harassment, bullying or abuse from other staff

Mental Health trusts — This trust

Response rate for mental health trusts — Response rate for this trust

North Essex Partnership University NHS Foundation Trust (RRD)
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Insight MH NHS
CareQuality Commission

FACTS, FIGURES & RATINGS	INTELLIGENCE	FEATURED DATA SOURCES	DEFINITIONS

26 May 2017

MENTAL HEALTH ACT	INCIDENTS	SAFETY THERMOMETER	PLACE	DELAYED TRANSFERS	PATIENT SURVEYS	STAFF SURVEYS	DATA QUALITY

NHS STAFF SURVEY 2016

KF1. Staff recommendation of the trust as a place to work or receive treatment
KF2. Staff satisfaction with the quality of work and patient care they are able to deliver
KF3. % agreeing that their role makes a difference to patients
KF4. Staff motivation at work
KF5. Recognition and value of staff by managers and the organisation
KF6. % reporting good communication between senior management and staff
KF7. % staff able to contribute towards improvements at work
KF8. Staff satisfaction with level of responsibility and involvement
KF9. Effective team working
KF10. Support from immediate managers
KF11. % appraised in last 12 months
KF12. Quality of appraisals
KF13. Quality of non-mandatory training, learning or development
KF14. Staff satisfaction with resourcing and support
KF15. % of staff satisfied with the opportunities for flexible working patterns
*KF16. % working extra hours
*KF17. % suffering work related stress in last 12 months
*KF18. % feeling pressure in last 3 months to attend work when feeling unwell
KF19. Organisation and management interest in and action on health and wellbeing
*KF20. % experiencing discrimination at work in the last 12 months
KF21. % believing that trust provides equal opportunities for career progression or promotion
*KF22. % experiencing physical violence from patients, relatives or the public in last 12 months
*KF23. % experiencing physical violence from staff in last 12 months
KF24. % reporting most recent experience of violence
*KF25. % experiencing harassment, bullying or abuse from patients, relatives or the public in last 12 months
*KF26. % experiencing harassment, bullying or abuse from staff in last 12 months
KF27. % reporting most recent experience of harassment, bullying or abuse
*KF28 % witnessing potentially harmful errors, near misses or incidents in last month
KF29. % reporting errors, near misses or incidents witnessed in the last month
KF30. Fairness and effectiveness of procedures for reporting errors, near misses and incidents
KF31. Staff confidence and security in reporting unsafe clinical practice
KF32. Effective use of patient / service user feedback

*lower scores are better

Staff Survey Key
Below Average — Ranked 40 – 58 from 58
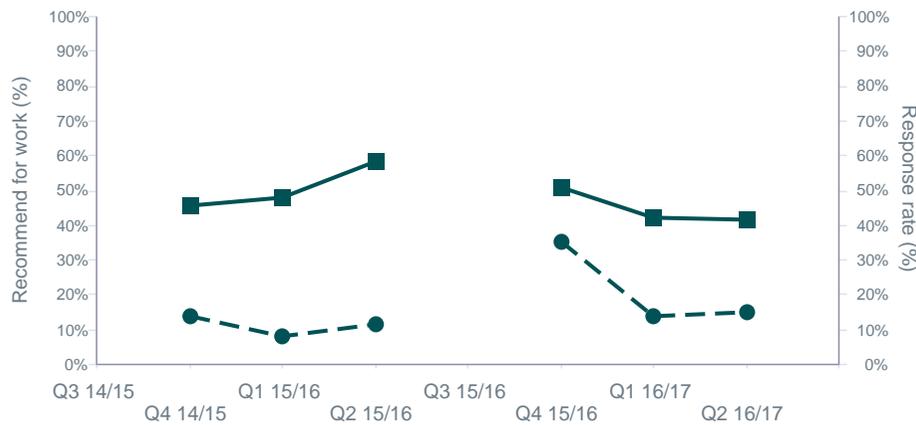Average — Ranked 20 – 39 from 58
Above Average — Ranked 1 – 19 from 58

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Key finding	Rank	Change
KF1. Staff recommendation of the trust as a place to work or receive treatment	57	-0.1
KF2. Staff satisfaction with the quality of work and patient care they are able to deliver	57	-0
KF3. % agreeing that their role makes a difference to patients	48	1.1%
KF4. Staff motivation at work	55	-0
KF5. Recognition and value of staff by managers and the organisation	58	-0
KF6. % reporting good communication between senior management and staff	57	-4%
KF7. % staff able to contribute towards improvements at work	57	0.5%
KF8. Staff satisfaction with level of responsibility and involvement	58	0
KF9. Effective team working	57	-0.1
KF10. Support from immediate managers	58	-0
KF11. % appraised in last 12 months	55	-3.7%
KF12. Quality of appraisals	32	0.1
KF13. Quality of non-mandatory training, learning or development	58	-0.1
KF14. Staff satisfaction with resourcing and support	58	-0
KF15. % of staff satisfied with the opportunities for flexible working patterns	57	0.6%
*KF16. % working extra hours	51	1%
*KF17. % suffering work related stress in last 12 months	56	-0.8%
*KF18. % feeling pressure in last 3 months to attend work when feeling unwell	44	1.5%
KF19. Organisation and management interest in and action on health and wellbeing	58	-0.1
*KF20. % experiencing discrimination at work in the last 12 months	48	0.4%
KF21. % believing that trust provides equal opportunities for career progression or promotion	49	-1%
*KF22. % experiencing physical violence from patients, relatives or the public in last 12 months	41	0.4%
*KF23. % experiencing physical violence from staff in last 12 months	55	1%
KF24. % reporting most recent experience of violence	34	NDC
*KF25. % experiencing harassment, bullying or abuse from patients, relatives or the public in last 12 months	52	1.8%
*KF26. % experiencing harassment, bullying or abuse from staff in last 12 months	58	1.2%
KF27. % reporting most recent experience of harassment, bullying or abuse	56	NDC
*KF28 % witnessing potentially harmful errors, near misses or incidents in last month	54	2.4%
KF29. % reporting errors, near misses or incidents witnessed in the last month	55	2.8%
KF30. Fairness and effectiveness of procedures for reporting errors, near misses and incidents	57	0
KF31. Staff confidence and security in reporting unsafe clinical practice	57	0
KF32. Effective use of patient / service user feedback	56	-0

*lower scores are better

Staff Survey Key

Rank		
Below Average	Ranked 40 – 58 from 58	
Average	Ranked 20 – 39 from 58	
Above Average	Ranked 1 – 19 from 58	

Change
Improving   Worsening

North Essex Partnership University NHS Foundation Trust (RRD)
Featured data sources > Surveys > Staff friends and family

FOR INTERNAL USE ONLY

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| MENTAL HEALTH ACT | INCIDENTS | SAFETY THERMOMETER | PLACE | DELAYED TRANSFERS | PATIENT SURVEYS | STAFF SURVEYS | DATA QUALITY |

Key messages

• The percentage of staff that would recommend this trust as a place to work in Q2 16/17 decreased when compared to the same time last year.

• The percentage of staff that would recommend this trust as a place to receive care in Q2 16/17 decreased when compared to the same time last year

Staff (%) that would recommend trust for work

Staff (%) that would recommend trust for care
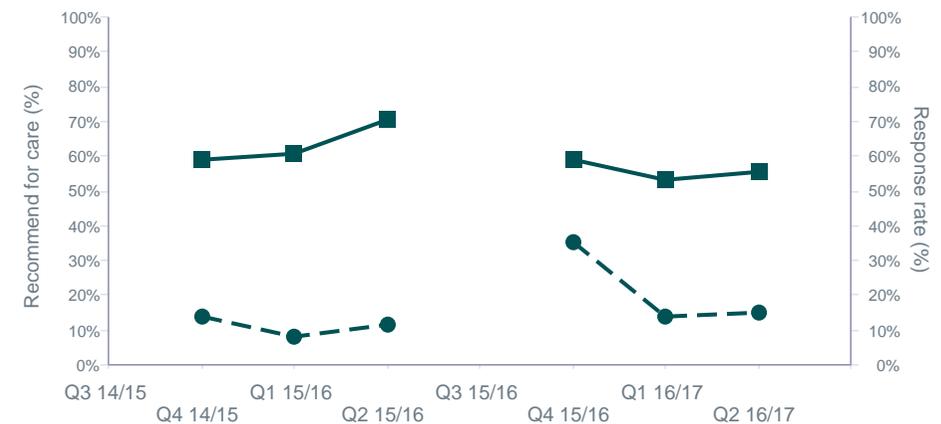
This trust   Response rate for this trust

Please note: Data is not collected during Q3 each year because the Staff Survey is conducted during this time

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Mental Health Services Data Set Monthly Statistics - Provider level data quality measures

Dataset coverage

DQ Measure – proportion of valid records		
Description		**May 15 - Apr 16**
MHS-DQM01 NHS Number	not available	99%
MHS-DQM02 Postcode Of Usual Address	not available	99%
MHS-DQM03 Person Birth Date	not available	100%
MHS-DQM04 Person Stated Gender Code	not available	100%
MHS-DQM05 Ethnic Category Code	not available	93%
MHS-DQM06 General Medical Practice Code (Patient Registration)	not available	99%
MHS-DQM07 Mental Health Act Legal Status Classification Code	not available	28%
MHS-DQM08 Treatment Function Code (Mental Health)	not available	86%
MHS-DQM09 Site Code (Of Treatment)	not available	100%
MHS-DQM10 Primary Reason for Referral (Mental Health)	not available	59%
MHS-DQM11 Care Professional Service Or Team Type Association (Mental Health)	not available	93%
MHS-DQM12 Organisation Code (Code of Commissioner)	not available	100%
MHS-DQM13 Organisation Code (Code of Commissioner)	not available	100%
MHS-DQM14 Organisation Code (Code of Commissioner)	not available	not available
MHS-DQM15 Organisation Code (Code of Commissioner)	not available	not available
MHS-DQM16 Organisation Code (Code of Commissioner)	not available	100%
MHS-DQM18 Service Or Team Type Referred To (Mental Health)	not available	87%
MHS-DQM19 Primary Reason for Referral (Mental Health) (Referral received on or after 1st Jan 2016)	not available	98%
MHS-DQM20 Clinical Response Priority Type	not available	32%
MHS-DQM22 Coded Procedure (Clinical Terminology Read Codes CTV3)	not available	not available
MHS-DQM23 Coded Procedure (Clinical Terminology Snomed CT)	not available	98%
MHS-DQM25 Coded Finding (Clinical Terminology Read Codes CTV3)	not available	not available
MHS-DQM26 Coded Finding (Clinical Terminology ICD10)	not available	not available
MHS-DQM27 Coded Finding (Clinical Terminology Snomed CT)	not available	100%
MHS-DQM29 Coded Observation (Clinical Terminology Read Codes CTV3)	not available	not available
MHS-DQM30 Coded Observation (Clinical Terminology Snomed CT)	not available	not available

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KEY	DATA

Performance level

- Much better
- Better
- About the same
- Worse
- Much worse
- ○ No data

Performance change

⬆ Improving

➡ About the same

⬇ Declining

Ratings

O	Outstanding
G	Good
RI	Requires improvement
I	Inadequate
NR*	Inspected but not formally rated
NA	Not rated

Understanding data

The boxes represent all Mental Health NHS trusts from smallest to largest in five groups, or quintiles. The purple highlighted box shows you where this trust lies relative to the other trusts. If the smallest box is highlighted this trust is in the group of the smallest trust or lowest activity level, and if the second largest box is highlighted the trust is in the second largest group, or quintile, for higher activity levels.

What do N/A, *, and - mean when they are used for data values?

n/a   Value is not applicable

-   Data is not available for trust or time period.

*****   Suppressed values between 1 and 5. We apply a strict statistical disclosure control in accordance with the HES protocol to all published data. This requires that small numbers are supressed to prevent individuals being identified and to ensure that patient confidentiality is maintained.

Links to guidance documents

Statistical methods of analysis guidance

North Essex Partnership University NHS Foundation Trust (RRD)
Definitions > Data

KEY | DATA

Data and indicator definitions

Indicator Guidance

Download the current data

Data Sheet

More information about Insight can be found on the Insight home page **here**.

not directly comparable