Mental Health Se

2014-15 NELFT Mental Health Services

Barking & Dagenham CCG Information Requirements

No	Requirement	Threshold		Apr	Мау	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	YTD	Comments
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GEN 1	4 Hour A&E waiting times	95%		98.9%	96.5%	95.9%	97.3%	97.6%	99.0%	99.0%	95.8%	91.0%	94.3%	92.7%	98.1%		
	Average length of stay for Inpatients	< 25 days	Adults	26.6	17.9	23	25	19.6	33.3	25.9	25.1	24.4	26.6	30	32.3		
GEN 2	(trimmed)	< 45 days	Older Adults	49.0	51	no	59	52.0	64	56	54.5	no	19	46	36.5		
			Adults	0.0%	2.1%	discharges 0.8%	0.4%	0.0%	0.0%	0.8%	7.1%	discharges 6.0%	4.1%	3.2%	0.5%		.
GEN 3	Delayed Transfer of Care	< 7.5%	Older Adults	0.0%	0.0%	3.6%	8.1%	10.3%	17.8%	7.0%	0.0%	0.0%	26.3%	0.0%	7.4%		
		90%	Male	94.2%	97.6%	99.9%	91.3%	94.2%	99.2%	98.7%	98.9%	95.8%	101.3%	100.6%	98.9%		
GEN 4	% occupancy adult acute wards	90%	Female	77.2%	82.8%	93.5%	94.4%	92.4%	84.2%	87.3%	73.6%	75.9%	79.5%	84.3%	84.0%		
GEN 5	% occupancy older adult acute wards	90%	Male	73.2%	73.1%	74.8%	60.2%	101%	93.2%	97.7%	84.8%	91.8%	92.1%	75.9%	77.6%		
OEN 5	7 occupancy older addit acute wards		Female	82.9%	80.9%	68.7%	65.5%	95.0%	94.9%	81.0%	82.5%	89.9%	97.2%	102.5%	96.9%		
GEN 6	Re-referral rate for Tariff in scope services (re referred within 30 days)			13.0%	12.0%	11.9%	11.4%	14.4%	13.3%	11.0%	11.3%	14.2%	11.5%	12.1%	11.6%		
GEN 7	Proportion of CPA reviews with a corresponding Clustering review			23.1%	19.8%	14.9%	15.8%	18.0%	25.7%	15.7%	12.0%	13.8%	22.9%	23.0%	24.1%		
GEN 8	Indicator of Accomodation problems			245	240	241	247	236	251	256	246	236	242	238	240		
No	Requirement	Threshold			Q1			Q2			Q3			Q4		YTD	Comments
GEN 9	Number of readmissions within 28 days of		Adults			5			9			17			21		
GEN 9	discharge since start of financial year		Older Adults			0			0			0			0		
GEN 10	Cumulative % of readmissions within 28 days of discharge since start of financial		Adults			11.4%			8.2%			11.8%			9.3%		
GEN 10	year		Older Adults			0.0%			0.0%			0.0%			0.0%		
	Number of inpatient admissions that have		Adults			45			56			59			40		
GEN 11	been gate-kept by crisis resolution/ home treatment team		Older Adults			6			6			3			9		
	Percentage of inpatient admissions that	050/	Adults			100%			100%			94.9%			90.0%		
GEN 12	have been gate-kept by crisis resolution/ home treatment team	95%	Older Adults			100%			100%			66.7%			100.0%		
GEN 13	Number of patients on CPA discharged		Adults			20			32			34			26		
GEN 13	from inpatient care who are followed up within 7 days		Older Adults			1			7			2			3		
GEN 14	% of patients on CPA discharged from inpatient care who are followed up within	95%	Adults			100%			100%			100%			100%		
GEN 14	7 days	5570	Older Adults			100%			100%			100%			100%		
			ADULTS														
			Employment status			99.5%			99.5%			99.4%			99.7%		
		I	Accommodation Status			99.7%			99.4%			99.2%			99.7%		L

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No	Requirement	Threshold		Apr	Мау	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	YTD	Comments
			Having a HoNos Assessments in the last 12 months			96.4%			97%			96.5%			96.2%		
	Proportion of service users on CPA with a		Having a diagnosis for patients discharged from inpatient care			86.7%			92%			82.5%			81.1%		
	recording of: 1. Employment Status. 2. Accommodation status.		Having a formal CPA Review in the past 12 months			96.1%			99%			98.3%			98.6%		
	3. Having a HoNOS assessment in the last	97% minimum of	Having a crisis plan			94.8%			95%			95.6%			95.6%		
GEN 15	GEN 15 12 months. 4. Having a diagnosis for patients patient	patients should have this information	A copy of their care plan			99.5%			100%			99.1%			98.9%		
		recorded	OLDER ADULTS			00.00/			70.00/			70.00/			00.00/		
	5. Having a formal CPA HoNOS review in	10001000	Employment status Accommodation Status			82.9% 84.7%			78.0% 79.7%			79.8% 81.7%			86.3% 89.2%		
	5. Having a formal CPA HoNOS review in the past 12 months. 6. Having a Crisis Plan. 7. Having a copy of their care plan		Having a HoNos Assessments in the last 12 months			99%			96%			98.2%			97.1%		
		Having a diagnosis for patients discharged from inpatient care			100%			91%			50%			50.0%			
		Having a formal CPA Review in the past 12 months			96.1%			100%			99%			96.1%			
		Having a crisis plan			94.4%			88.1%			89.0%			95.1%			
			A copy of their care plan			98.2%			95.8%			93.6%			99.0%		

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No	Requirement	Threshold		Apr	Мау	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	YTD	Comments
			Adults		-	1000/			1000/			1000/			40004		
			NHS Number		-	100%			100%			100%			100%		
			Date of Birth			100%			100%			100%			100%		
			Postcode (normal residence)		-	100%			99.8%			100.0%			100%		
	Minimum patient identity data to consist of:		Current Gender			100%			100%			100%			100%		
	1. NHS Number.		Marital Status			99%			99%			99%			99%		
	2. Date of Birth.	070/	Registered GP Code			98.1%			99.2%			99.2%			99%		
	3. Postcode (normal residence).	97% minimum of patients should have	Commissioner code			100%			100%			100%			100%		
GEN 16	4. Current Gender.	this information	Ethnicity			100%			100%			100%			100%		
	5. Marital Status.	recorded	Older Adults														
	6. Registered General Practice Code.		NHS Number			100%			100%			100%			100%		
	7. Commissioner organisation code		Date of Birth			100%			100%			100%			100%		
	8. Ethnicity		Postcode (normal residence)			100%			100%			100%			100%		
			Current Gender			100%			100%			100%			100%		
			Marital Status			100%			100%			100%			100%		
			Registered GP Code			98.0%			98.1%			97%			97%		
			Commissioner code			100%			100%			100%			100%		
			Ethnicity			100%			100%			100%			100%		
GEN 17	Number of Patients on Memory services Caseload					320			251			232			204		
GEN 18	Number of new patients allocated in					162			124			125			135		
GEN 10	Memory Services Number of people with a new diagnosis of			-					124			125			155		
GEN19	Dementia					47			40			39			42		
GEN20	Number of referrals received by memory service					164			148			128			140		
GEN21	Referrals by source for memory services			See "m	emory re	ferrals" tab	See "me	emory refe	errals" tab	See "m	nemory re	ferrals" tab	See "n	nemory referr	als" tab		
GEN22	Memory services - Time from referral to assessment (days)					27.28			26.02			23.98			23.16		
	Number of people managed by the																
GEN23	memory service with an indivdual care plan																Audit Q2 & Q4 reports
GEN24	Total early intervention (EI) patients being treated by EI Teams (all patients receiving EI treatment at a point in time)		El Caseload			70			75			65			72		
GEN25	Total number of new patients taken on by Early Intervention Team since the start of the financial year		New EI cases			15			25			32			44		
GEN26	Proportion of adults (18-69) on CPA in settled accommodation		Settled accomodation			75.6%			78.5%			86.8%			89.3%		
GEN27	Proportion of adults (18-69) on CPA in employment		In employment			2.64%			3.2%			4.0%			5.0%		

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CFAI	iformation																
No	Requirement	Threshold		Apr	Мау	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	YTD	Comments
GEN28	The number of episodes of AWOL for the number of patients detained under the MHA 1983		AWoL of Detained Patients			1 of 59			0 of 80			0 of 63			1 of 51		
GEN 29	Number of bed days within 12 months prior to commencing with IMPART, compared to number of bed days during year of IMPART treatment for those discharged in the quarter		Impart bed day comparision						0/0								
GEN 30	Percentage reduction in self harm and suicide attempts comparing first month of treatment with last month of treatment for clients discharged from Impart in the quarter		Impart reduction in self harm						Suicide = 100% Self Harm = 100%								
GEN 31	Number of patients with LD as a primary diagnosis accessing all services by service area		Primary LD diagnosis			98			95			95			92		Agreed annual report to CQRM
GEN 32	Number of patients with LD a as a secondary diagnosis accessing all services by service area		Secondary LD diagnosis			2			2			3			2		Agreed annual report to CQRM
GEN 33	Number of patients with ASC as a primary diagnosis accessing all services by service area		Primary ASC diagnosis			0			0			0			0		Agreed annual report to CQRM
GEN 34	Number of patients with ASC as a secondary diagnosis accessing all services by service area		Secondary ASC Diagnosis			8			8			8			8		Agreed annual report to CQRM

IAPT I	nformation												
No	Requirement	Threshold	Borough	Q1		Q2		C	3	Q4		YTD	Comments
GEN 45	Number of people who have been referred to IAPT for psychological therapies during reporting period				721		680		710		929	2111	
GEN 46	The number of IAPT active referrals who have waited more than 28 days from referral/first contact to first treatment/first therapeutic session at the end of the quarter				22		9		6		19		

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CPA Information

	normation															
No	Requirement	Threshold	Apr	Мау	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	YTD	Comments
GEN 47	The number of people who have entered psychological therapies (i.e. had first therapeutic session during the reporting quarter)				513			498			570			638		
GEN 48	The number of people who have completed treatment and are moving to recovery				218			203			204			225		
GEN 49	The number of people who have completed treatment who did not achieve clinical caseness at initial assessment				0			0			0			0		
GEN 50	IAPT - The number of people moving off sick pay and benefits during the reporting quarter				44			55			65			31		
GEN 51	The proportion of those referred to IAPT services that enter treatment				71.2%			73.2%			80.3%			68.7%		
GEN 52	Access to psychological therapies services by people from black and minority ethnic groups				28.3%			28.1%			29.4%			30.7%		

CAMHS Information

	Simormation		 										
No	Requirement	Threshold	Q1		Q2		Q3			Q4		YTD	Comments
GEN 53	CAMHS 2 % DNA rate	Less than 25% moving to 15% by Q4	25	25%		27.2%	See "CAMHS	DNA tab"	See "(CAMHS DN	A tab"		
GEN 54	CAMHS 5 Annual Report of service satisfaction, based on chisq questionnaire, by borough camhs tier 3 service												
GEN 55	CAMHS 6 Number of staff completed Safeguarding training: Level 1 Level 2 Level 3		Lvl 2	=4, = 0 , =13		.vl 1 =7, .vl 2 = 0 Lvl 3 =19		Lvl 1 =6, Lvl 2 = 0 , Lvl 3 =14					

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No	Requirement	Threshold	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	YTD	Comments
GEN 56	CAMHS 6 Rate of staff completed Safeguarding training: Level 1 Level 2 Level 3	90%			Lvl 1 =100%, Lvl 2 = 100%, Lvl 3 =86.7%			LvI 1 =100%, LvI 2 = 100%, LvI 3 =86.7%		L	Lvl 1 =100%, .vl 2 = n/a, Lvl 3 =100%					
GEN 57	CAMHS 7 Audit quality of transition plans for any yp, where necessary, by borough camhs tier 3 service															
GEN 58	% of referrals accepted				94%			94%			96.4%			83.6%		
GEN 59	Number of referrals redirected by Tier 3 CAMHS				1			2			0			0		
GEN 60	Number of inpatients discharged from hospital receiving follow up within 7 days: Split by F2F and telephone contact				3 discharged - 3 F2F & 0 Telephone			6 discharged 6 F2F & 0 Telephone		5	discharged 4 F2F & 1 Telephone			1 discharged 0 F2F & 0 Telephone		
GEN 61	% of inpatients discharged from hospital receiving follow up within 7 days: Split by F2F and telephone contact	95%			100%			100%			100%			0.0%		
GEN 62	Number of CYP assessment appointments by Tier 3 CAMHS team				212			193			260			219		
GEN 63	Number of CYP whose cases were closed by team				290			262			317			251		
GEN 64	Average number of sessions completed per child/family by Tier 3 CAMHS team				9.2			6.5			6.8			8.1		
GEN 65	Breakdown of destination on case closure by Team by available RIO reporting category		See (CAMHS I Dest		See C	AMHS D Dest	ischarge	See C	CAMHS Dis Dest	scharge	See CA	MHS Discha	rge Dest		
GEN 66	Participation report annually by borough, including details of how CYP have been involved in service development															
GEN 67	Number (client total) of initial measures completed. By team				104			67			85			58		
GEN 68	%age (client total) of initial measures completed. By team				33.1%			29.1%			31%			24.2%		
GEN 69	Number of follow up mental health measures completed by Team				21			18			15			5		
GEN 70	%age of follow up mental health measures completed by Team				6.7%			7.8%			5.4%			2.1%		