



*Transforming Care: A national response to
Winterbourne View Hospital and the Concordat:
Programme of Action*

Assuring Transformation – Quarterly Data Collection

Instructions and Guidance notes

NHS England INFORMATION READER BOX**Directorate**

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1 Purpose

The purpose of this data collection is to ensure that the public reporting on progress to implement the NHS commitments in the [Winterbourne View Concordat¹](#) is transparent and robust. It will be used to triangulate with the Learning Disability census completed by providers on 30 September 2014.

2 Is this data collection approved?

The collection of this data return is under the Review of Central Returns (ROCR) licence **ROCR/OR/2203/001MAND**.

The Secretary of State for Health has approved that NHS England can receive all this data. Reference: Health Research Authority Confidential Advisory Group **CAG 6-07(a) 2013**.

3 Who should complete the data collection?

The following NHS commissioners are responsible for ensuring the completion of the data collection:

- NHS Clinical Commissioning Groups
- NHS England specialised commissioning teams for secure mental health and child and adolescent mental health in-patient services.

The collection may be completed on behalf of an NHS commissioner by a Commissioning Support Unit (CSU) or other commissioners that have a pooled budget arrangement.

Please note: A separate return has to be completed for each commissioning organisation that has the statutory responsibility for commissioning the care for all relevant patients.

- For pooled budget arrangements this means a separate return for each NHS Commissioner that is contributing to the budget.
- Simply, if you are a commissioner and anyone from the population for whom you have a statutory duty to commission care meets the definition then a return is needed for your organisation.

If you have not commissioned in-patient care for people who meet the definition in the required period, please complete the front sheet and submit a 'nil' return.

Please note: To enable this data collection an update for the 30 June workbook has been issued. This will allow dates after 30 June 2014 to be entered into the worksheets. It is important that this validation update is installed before you start to complete the return. It was issued in the following NHS England Bulletins:

- Area Team 26 August; and
- Clinical Commissioning Group 28 August

¹ DH Winterbourne View Review: Concordat: Programme of Action; Department of Health, December 2012.

The work book contains patient confidential data (PCD). It is imperative that the workbook is saved securely and access is managed within your local information governance arrangements to protect PCD.

4 How to use this guidance?

Please read this guidance before completing the return. It has been prepared to help you. It contains important information on how to complete the data collection, including when to use drop down menus within the workbook.

The most important instruction is **please do not use cut/copy and paste to enter data.** This will lead to errors in the data collation and validation processes and vital information will not be able to be analysed and reported. Where possible we have created drop-down menus to reduce the time taken to input data.

5 How often will data be collected?

The data will be collected quarterly. The collection points are based on the four quarters within the NHS financial year:

	Quarter 1	Quarter 2	Quarter 3*	Quarter 4*
Data collection point date	01/04/14 and 30/06/14	01/07/14 and 30/09/14	01/10/14 and 31/12/14	01/01/15 and 31/03/15
Data return date	14/04/14	14/10/14	31/12/14	31/03/15

*It is intended to transfer the collection of the data to the Health and Social Care Information Centre. When this takes place a new process for collecting the data will be introduced. This new approach will mean the data is automatically collected on the last day of the quarter rather than a submission being returned. Detailed guidance will be provided for the new process.

6 Who (which people) should be included in the data collection?

The data should be recorded for each individual person who meets these requirements:

- i. for whom an NHS commissioner has the statutory responsibility for commissioning their care; and
- ii. who is an in-patient at 23:59 on the data collection point day or
- iii. who was an inpatient at 00:01 at the start of the relevant quarter and has been transferred/discharged before the data collection point day ;and
- iv. who is covered in the following definition.

Learning Disability Census Definition

People included:

People in in-patient beds for mental and/or behavioural healthcare who have either learning disabilities and/or autistic spectrum disorder (including Asperger's syndrome)

- Any age.
- Any level of security (general / low / medium / high).
- Any status under the Mental Health Act (informal or detained).

People not included:

- People in accommodation not registered with the CQC as hospital beds.
- People in beds for physical health care.
- People who do not have either learning disabilities or autism.

7 Why collect over a quarter?

We need to understand 'patient flow'. Therefore we need to ensure we have a clear record of both transfer from and admission to an in-patient service.

Please use the actual setting that the person transferred to in response to Q23 and the actual date of transfer in response to Q27a. In these cases please do not answer Q28.

8 How do I update, save, and return the workbook

Please use your 30 June return and install the validation update.

Please save the file as follows:

- DO NOT password protect this file, it is being returned to a secure and restricted access inbox:
- File type: Excel Macro-Enabled spreadsheet. (If you are using an old version of excel please save your file as an Excel 97-2003 worksheet)
- File name: Use your organisation name e.g. BoltonCCGwvdata.xlsx

Once data entry is complete and all data quality checks finished, please send your returns to: england.wvdata@nhs.net. *Please do not copy the email with the data return to anyone else. It contains patient identifiable data that must go to a secure and restricted access address.*

9 Deadline

For 30 September the deadline for returns is by **5pm on the 14 October 2014**

Subject to the successful transfer of the collection to the HSCIC all other collections will be extracted at midnight on the final day of the quarter.

All data will need to be validated prior to this deadline.

10 Data quality, validations and reporting

10.1 Validation

The aim the data collection is to ensure that the public reporting on progress to implement the NHS commitments in the Winterbourne View Concordat is transparent and robust. Good data will help manage the risk around achieving the commitments. It is therefore important we try to get as higher quality data as possible.

The data collection workbook includes a 'Validations' worksheet, please use this to ensure that the data within the return is of the highest quality. The validation summary table should show all areas as green before you return. Further information on the validation sheet is provided on page 15 of this guidance.

10.2 Pre-submission data validation

NHS England Area Teams will be in contact with commissioners to support and discuss data quality before the return is submitted **by 5pm 14 October 2014**.

Local commissioners and the relevant specialised commissioning teams are able to share the status 'Validations' worksheet with NHS England Area Teams in advance of submission. This should be done by a 'screen shot' of the validation sheet being taken.

This is to support commissioners and to identify any issues within the data collection that need to be discussed. The 'Validations' worksheet will provide a Green/Red assessment for 6 key elements of the questions within the data collection. These are:

- Mandatory
- Postcodes
- Transfers
- Advocacy
- Dates
- Invalid answers

Please seek to ensure that these are green before submission.

Please note there is a small error within the 'Validations' section of the data collection workbook that is affecting the 'Invalid answers' matrix. This means that the workbook may not pass the validations and will remain 'Failed'. There are two areas where it is affected:

- All patients and;
- Former WV patients

For All Patients:

This error occurs in the Invalid Answers matrix for the all patient question 27b. It will occur when you have selected 'No' for question 26 for a patient. The error is that the validation cells for 27b for each patient on these questions will remain red.

For former WV patients for questions:

This error occurs in the Invalid Answers matrix for the former WV patient questions WV3a and WV3b. The error will occur when you have selected 'No' for question WV3 for a patient. The error is that the validation cells for WV3a and WV3b for each patient on these questions will remain red.

We recognise that there may be times when some of the required data may not be available to commissioners for submission.

Please provide details if any areas are not green when submitting stating reasons why.

This process is to support dialogue between commissioners and NHS England Area Teams.

Please note: No patient identifiable data should be transferred to the Area Team. The transfer of patient confidential data for this collection is only approved to be sent to england.wvdata@nhs.net . This is to protect patient confidentiality. The email account is secure with restricted access.

10.3 Post-submission data validation

There will be a short period of post-submission data validation. This will provide commissioners with one more opportunity to re-submit the data.

This will take place between 14-28 October 2014. The deadline for post submission validation query returns is 5pm 28 October 2014.

Where appropriate, commissioners will be contacted by the support team with data validation queries following submission of the return. This will highlight specific areas of data for the commissioner to address.

10.4 Closure dates for data returns - deadlines

There are two key dates for 30 September data submissions.

14 October 2014 – this is for the data submissions

- If no submission is received from, or on behalf of, an individual commissioner this will be recorded and reported as a 'No return'.
- If a return has been submitted on behalf of more than one commissioner, for example in a pooled budget arrangement, a separate return for each Commissioner that is contributing to the pooled budget is required. If not received this will be recorded and reported as a 'No return'
- If you have not commissioned in-patient care for people who meet the definition in the required period, please complete the front sheet and submit a 'nil' return. This will be recorded and reported as a 'Nil return'

28 October 2014 - this is for post submission data validation queries

- This is for the receipt of revised data following the validation process.
- All public reporting and management information will be based on the validated data received by 5pm 28 October 2014.

A short period of data validation will take place on all returns received by the 14 October deadline. Late returns **will not** be included in reporting.

Commissioners will be contacted to resolve data issues and the deadline for validation responses will be **5pm 28 October 2014**.

10.5 Reporting and publication of data

The public reporting and NHS management information will be based on the returns that were received from commissioners by the 14 October 2014 deadline and then validated by 28 October 2014.

We aim to publish summary statistics on 14 November. They will be published on the NHS England website

11 Data collection workbook

As this is an Excel based data collection it is important that the following steps are adhered to. Failure to do so could lead to vital information not being recorded.

- **Do not change any of the formulae that appear:** this would compromise the national collection and reporting.
- **Do not cut/copy and paste:** this will lead to an error in the data collation of returns and vital information will not be recorded for public reporting purposes.
- **Follow the guidance** and return the data in the correct format
- Update the 30 June template with and begin to complete the returns as soon as possible

11.1 Front sheet

Your organisation: Please **use the drop-down menu** to choose the correct name for the commissioning organisation for the patient.

Please note: this will pre-populate answers in the all-patient question work sheet.

Please **ensure you have chosen the correct name** for the organisation which is paying for the care of this patient.

If the collection is being completed by a Commissioning Support Unit (CSU) on behalf of a Clinical Commissioning Group (CCG), then the CSU should complete **one workbook for each CCG**. Each workbook must be saved with a **unique filename** that includes the name of each CCG.

NHS England specialised mental health commissioning teams should complete one workbook for each team.

The workbooks will hold up to 20 patients, if there are more than 20 patients being recorded for one team/CCG, use more workbooks. Please fully complete a workbook before moving on to the next.

Data Period: use the drop-down menu to choose the correct end date for the quarter.

Number of patients: Do not complete. This cell will record the number of patients for whom you have completed a return. Please check this is correct before you submit.

Number of former Winterbourne View Patients: Do not complete. This cell will record the number of patients for whom you have completed a return. Please check this is correct before you submit.

Validation Summary: Do not complete. This section records an overall the data quality status and summary data validation table to help identify issues.

12 Data quality status

This shows the overall data quality status for the entire workbook, this should say “**PASSED**” before the template is sent to england.wvdata@nhs.net if it says “**FAILED**” there are data validation errors that need to be resolved.

Please note the explanation on errors pages 6 and 7.

12.1 Summary data validation table

This table shows a summary of which data validations are causing the data quality status to show as “**FAILED**”. If any of the cells are red this means that there is an error within the data provided in the ‘All patient questions’ worksheet, these tables can be found in greater detail on the ‘Validations’ worksheet where the error will be shown in the corresponding table.

All patients’ questions – Please do not cut and paste data to enter.

12.2 Personal information

1. Provide the person’s unique NHS number **ensuring this is entered correctly**. This is 10 digits with **no spaces** or letters or punctuation.
2. Provide the person’s date of birth as day/month/year (dd/mm/yyyy).
3. Gender: **Use the drop-down menu** to provide the person’s gender.
4. Postcode:
 - a. If admitted from a community setting. The full postcode for the last known residence for the person in a community setting. That is not a hospital, but may include the person’s own home; a family home; supported housing; residential or nursing care home; or

- b. If admitted from another hospital or criminal justice setting. The full postcode of the hospital or criminal justice setting from which they were admitted for this current episode of care.

The following list shows the valid Postcode formats that we require. "A" indicates an alphabetic character and "N" indicates a numeric character. It is important that one of these formats is used for data validation purposes.

FORMAT EXAMPLE

AN NAA	M1 1AA
ANN NAA	M60 1NW
AAN NAA	CR2 6XH
AANN NAA	DN55 1PT
ANA NAA	W1A 1HQ
AANA NAA	EC1A 1BB

5. **Use the drop-down menu.** Does the person have a legal Guardian or Appointeeship Order?
- a. If yes, **please use the second drop-down menu to select which.**

12.3 Supporting information on Guardian and Appointeeship

The person is subject to a legal Guardianship Order under the Mental Health Act; or do they have an 'Appointee':

An Appointee is a "person authorised" by the Department for Work & Pensions (DWP) to claim, collect and use benefits on behalf of a claimant who lacks mental or physical capacity to handle their own affairs.'

Appointeeship is only applicable where the person is receiving state benefit only and has little savings (less than £5,000). Where the person is receiving a private pension or has capital then a Court of Protection Deputyship order should be used.

An Appointee could be required under the following circumstances:

- When a client is no longer able to manage their financial affairs due to mental or physical incapacity.
- If the client is being subjected to financial abuse by someone helping them with their finances.
- If the client did not appoint a Lasting Power of Attorney before becoming unable to manage their finances.
- Where the client is only in receipt of state benefit income and cannot manage their finances.

6. **Use the drop-down menu.** Answer 'Yes', if the person is considered as one of the former 47 patients of Winterbourne View for whom the NHS is the lead commissioner.

If 'Yes', then complete all the supplementary questions for this person, WV1-WV5 on the tab called 'Former WV patient(s)'.

When WV1-WV5 is complete, please return to the all patients questions tab and complete all the other questions.

If the answer is 'No', then answer no and go to Q7.

12.4 Commissioner information

7. **Use the drop-down menu.** Is this person on the register that your organisation, as a commissioner, has put in place to meet the requirements of the Winterbourne View Concordat: Action Plan?

This register should have been established by the former Primary Care Trusts in January 2013 and handed over to Clinical Commissioning Groups on 31 March 2013 and then kept up to date to record transfers and new admissions.

8. **Do not complete.** Commissioner name and code (8a and 8b) will pre-populate when you answer Q7 using the information provided in the front sheet.

12.5 In-patient care information

Please use drop down menus where provided. Do not cut and paste

9. Date of admission for this episode of care:
- The date that the person was admitted to the provider for the current episode of care.
 - If the person was admitted from another in-patient or criminal justice setting, not a community setting seen as their home, please enter the date that this previous admission for in-patient care started.
10. Provider name and code. **A drop-down list is provided, this is in alphabetical order** – choose the correct organisational name for the provider. Please note this may not be the name of the facility. The code will then pre-populate.
- The recognised name of the providing organisation.
 - The recognised NHS code for the provider.

If the name of the provider is not on the list please contact england.wvdata@nhs.net stating the name and code of the provider.

11. Please enter the name of the actual facility/hospital at which care is being provided as registered with the CQC.
12. The full postcode of the actual location of the facility at which the in-patient care is being provided, as given in Q11.

13. **Use the drop-down menu** to select the primary reason for this admission for in-patient care from the options that you can see below the question. If you choose 'Other', please state the reason for this admission.
14. **Use the drop-down menu.** Please state if the person is detained under the auspices of the Mental Health Act (1983). Select from the options that you can see below the question to select which section of the Act applies:
- For the purpose of Assessment (Section 2).
 - For the purpose of Treatment (Section 3).
 - Section 37 (Hospital Order).
 - Section 37/41 (Hospital Order with restrictions).
 - Section 47/49 (transfer from prison to hospital with restrictions).
 - Other. If you choose 'Other', please state which section of the Act applies.
15. **Use the drop-down menu** from the options that you can see below the question to select which option best describes the type of service or setting that the person's care is being provided in. If 'Other' is selected, please describe what it is.
16. **Use the drop-down menu.** Please select 'Yes' or 'No'.

Ensure that this service, i.e. the actual facility as registered with the CQC, meets all the CQC essential standards. Check the details at <http://www.cqc.org.uk>.

17. **Use the drop-down menu.** Please select 'Yes' or 'No'.

Community Treatment Orders were introduced in November 2008 by new sections 17A-G being inserted into the Mental Health Act (1983) by the Mental Health Act (2007). In the Code of Practice it is called Supervised Community Treatment; in the Act those subject to CTOs are called community patients. Please state if, for this current episode of in-patient care, such an order/option of care has been considered for the person.

Please select 'No' if not appropriate under the Mental Health Act.

12.6 Advocacy

18. **Use the drop-down menu.** Please select 'Yes' or 'No'.
- If 'No', please state why.
 - If 'Yes', **please use the drop-down menu a response is required for each advocate option.**

A family member is only considered to be independent if the person has expressly chosen them as an independent advocate.

An independent advocate can be a neighbour, a friend, a relative, a volunteer from an advocacy organisation or a paid independent advocate. Independent advocacy is not usually about legal representation, or paying a solicitor or

lawyer to act as your advocate, but there is legislation that does cover advocacy.

Therefore an independent advocate may be either:

- i. Family Member; someone who has been asked by, or given permission by the person, to represent them
- ii. Independent Person; someone who has been asked by, or given permission by the person to represent them
- iii. A formal Independent Mental Capacity Advocate (IMCA)
- iv. An Independent Mental Health Advocate (IMHA); or
- v. Self-Advocate

The Mental Capacity Act (2005) provides the legal framework for acting and making decisions on behalf of individuals who lack the mental capacity to make particular decisions for themselves. The Act introduces several new roles, bodies and powers, all of which support the Act's provisions. One of the new services created by the Act is the Independent Mental Capacity Advocacy (IMCA) Service, which introduces the new role of the Independent Mental Capacity Advocate (IMCA).

The Mental Health Act (2007) created the role of the independent mental health advocate (IMHA).

19. Please use the drop down menu to select the most appropriate answer.

Is the person's own family actively involved in the planning and ensuring the highest quality of their care for them?

12.7 Case management & transfer to community setting

20. Use the drop-down menu. Does the person have a named locality care coordinator or case manager? This is in the local area (either local authority or NHS commissioner) where they are usually resident prior to this episode of in-patient care.

21. What day, month and year (dd/mm/yyyy) was the last formal review of the care plan for this person carried out? Formal review means that a formal record of the review has been made and shared with the person; their family, carer and/or advocate; other key providers and commissioners. This may include a Care Programme Approach (CPA) review. This date needs to be before 1 April 2014 for the 31 March data collection and before 1 July 2014 for the 30 June collection.

22. Use the drop-down menu a response is required for each option. From the options that you can see below the question, select for each of the categories if the discharge/transfer plan is agreed. Please note, a response for each option is required. For Directly Commissioned Services only - If a discharge/transfer plan cannot be agreed, because of legal restriction or because the clinical outcome remains unclear, then please enter an ESTIMATED date of discharge/transfer based on average lengths of stay for the service type.

23. **Use the drop-down menu** from the options that you can see below the question to select the option which best describes the community setting to which the person will transfer. If it is a transfer to another in-patient setting or a community setting not listed please select 'Other', and state what sort of setting.
24. The full postcode of the setting to which the person is planned to transfer. Please see notes in question 4 on Postcode format.
25. **Use the drop-down menu.** As the NHS commissioner have you or the care coordinator informed the relevant Local Authority for the area to which it is planned that the person will transfer to a community-based setting?
26. **Use the drop-down menu.** Is there an agreed or estimated date for this episode of in-patient care to end, with a planned transfer to another setting? This may include the person's own home; a family home; supported housing; residential or nursing care home. If you answer yes, you must provide the planned/estimated date in question 27. If 'No', please go to Q28.
27. Date of the planned/estimated transfer.

If the person has already transferred – please enter the actual date of transfer.

- a. The agreed date of the planned transfer (dd/mm/yyyy).
- b. This will be after 01/06/14, and the cell will automatically populate with a "Yes" – please go to Q28.

28. If there are reasons that are delaying the person being transferred from this episode of in-patient care to a community setting, **please use the drop-down menu** to select each of the categories that best describes the barrier(s). **More than one answer is possible.**

If there are issues that are stopping the person being transferred from this episode of in-patient care to a community setting that are not covered in the drop-down menu, or that you wish to expand on, please state here.

If there are no reasons which are delaying the transfer please select 'No' for each option.

13 Validations worksheet

This worksheet includes 6 tables that are used to validate the data that has been entered into the 'All patient questions' worksheet. If any of the cells are red this means that there is an error within the data provided in the 'All patient questions' worksheet. Each table shows the validations for each patient separately so that any errors can be easily located within the 'All patient questions' worksheet. All

validations need to be resolved before the data is submitted to england.wvdata@nhs.net

13.1 Mandatory

This table shows all the mandatory questions within the 'All patient questions'. It shows the number of mandatory questions that have been answered for each patient and a matrix to show all the mandatory questions for each patient separately. If a mandatory question has been answered it will show as a "Y" in the matrix and if it hasn't been answered it will appear as an "N" in the matrix. All "N"s need to be resolved before submission.

13.2 Postcodes

This tables shows if a valid postcode has been provided for those questions in the 'All patients questions' worksheet that ask for a postcode. A "Y" will be shown if the postcode has a space in it and will show an "N" if the postcode does not have a space in it. All "N"s need to be resolved before submission.

13.3 Transfers

This table relates to Q26 and Q27a within the 'All patient questions' worksheet and indicates if these questions have been answered correctly. If Q26 has been answered "Yes" there should be a valid date input into Q27a. Similarly, if Q26 has been answered "No" there should not be a date input into Q27a. If either of these two criteria has been satisfied the cells will be green. However, if the cells are red there is an error which needs to be resolved.

13.4 Advocacy

This table relates to Q18 within the 'All patient questions' worksheet and if this and subsequent questions 18a/18b have been answered correctly. If Q18 has been answered "Yes" there should be a valid answer of "Yes" or "No" for Q18bi - Q18bv. Similarly, if Q18 has been answered "No" there should be an explanation in Q18a. If either of these two criteria has been satisfied the cells will be green. However, if the cells are red there is an error which needs to be resolved.

13.5 Dates

This tables shows if a valid date has been provided for those questions in the 'All patients questions' worksheet that ask for a date. A "Y" will be shown if a valid date has been provided and will show an "N" if a valid date has not been provided. All "N"s need to be resolved before submission.

13.6 Invalid Answers

This matrix shows if any question has an invalid answer. The matrix has all questions for all patients. A cell will show green if there is a valid answer in the corresponding question in the 'All patients questions' worksheet. A cell will show red if there is not a valid answer in the corresponding question in the 'All patients questions' worksheet.

A cell will show black if an answer is not required for that question. All cells that are red need to have the invalid answer amended before submission.

A short period of data validation will take place on all returns received by the 14 October 2014 deadline but not for late returns.

Commissioners will be contacted to resolve data issues and the deadline for validation responses will be **5pm 28 October 2014**.

14 Further queries

If you have any further queries, please email them to england.wvdata@nhs.net.