

Child and Adolescent Mental Health Services (CAMHS) – Low Secure Quality Dashboard 2019/20

| Indicator Reference Number | Domain | Theme | Measure | Rationale | Name of Indicator / Description | Numerator | Denominator | Period Type | Frequency | Data Source Numerator | Data Source Denominator | Target | Interpretation Guidance | Notes | Reporting Periods | | | |
|----------------------------|---|------------------|--------------------------|--|--|---|--|-------------|-----------|-------------------------|-------------------------|--------|-------------------------|--|-------------------|--------------------|------------------|------------------|
| | | | | | | | | | | | | | | | Q1 | Q2 | Q3 | Q4 |
| MHCLS01 | Domain 2: Enhancing quality of life for people with long-term conditions | Clinical Process | Timeliness of assessment | | Proportion of urgent cases responded to by the assessing unit within 5 days | Of those cases in the denominator, number responded to by the assessing unit within 5 days | Total number of cases seen by the assessing unit in the reporting period | Quarterly | Quarterly | Provider submitted data | Provider submitted data | | Higher is better | Only include assessments carried out in the commissioned unit this dashboard concerns. | Apr 19 Jun 19 | Jul 19 - Sep 19 | Oct 19 Dec 19 | Jan 20 Mar 20 |
| MHCLS02 | Domain 5: Treating and caring for people in a safe environment; and protecting them from avoidable harm | Clinical Process | Timeliness of assessment | | Proportion of people with learning disabilities and/or autism receiving a Care, Education and Treatment Review (CETR) prior to admission or within 2 weeks of admission | Of those patients in the denominator, number receiving a CETR prior to or within 2 weeks of admission | Total number of people with learning disabilities/autism registered at the service in the reporting period | Quarterly | Quarterly | Provider submitted data | Provider submitted data | | Higher is better | | Apr 19 Jun 19 | Jul 19 - Sep 19 | Oct 19 Dec 19 | Jan 20 Mar 20 |
| MHCLS03 | Domain 2: Enhancing quality of life for people with long-term conditions | Clinical Process | Discharge Plan | | Proportion of patients who have a discharge plan agreed prior to or within 48 hours of admission | Of those patients in the denominator, number who have a discharge plan agreed prior to or within 48 hours of admission | Total number of patients discharged in the reporting period | Quarterly | Quarterly | Provider submitted data | Provider submitted data | | Higher is better | | Apr 19 Jun 19 | Jul 19 - Sep 19 | Oct 19 Dec 19 | Jan 20 Mar 20 |
| MHCLS04 | Domain 2: Enhancing quality of life for people with long-term conditions | Clinical Process | Timeliness of assessment | The HoNOSCA outcome measuring tool is designed to determine health and social functioning. GBOs are a way of evaluating progress towards a goal set by themselves. | Proportion of patients assessed within 7 days of admission using HoNOSCA (patient, family/carer and clinician rated versions) and GBO to determine their health and social functioning | Of those patients in the denominator, number assessed within 7 days of admission using HoNOSCA or GBO | Total number of patients admitted to the service in the reporting period | Quarterly | Quarterly | Provider submitted data | Provider submitted data | | Higher is better | HoNOSCA: Health of the Nation Outcome Scales Child and Adolescent Mental Health GBO: Goal Based Outcomes | Apr 19 Jun 19 | Jul 19 - Sep 19 | Oct 19 Dec 19 | Jan 20 Mar 20 |
| MHCLS05 | Domain 2: Enhancing quality of life for people with long-term conditions | Clinical Outcome | HONOSCA Outcome | | Mean (average) HoNOSCA improvement score for patients discharged during the quarter | Of those patients in the denominator, sum total of HoNOSCA improvement scores | Total number of patients discharged in the reporting period | Quarterly | Quarterly | Provider submitted data | Provider submitted data | | Higher is better | HoNOSCA: Health of the Nation Outcome Scales Child and Adolescent Mental Health | Apr 19 Jun 19 | Jul 19 - Sep 19 | Oct 19 Dec 19 | Jan 20 Mar 20 |
| MHCLS06 | Domain 5: Treating and caring for people in a safe environment; and protecting them from avoidable harm | Clinical Process | Care Plan | | Proportion of patients who receive their initial care plan prior to or within 2 weeks of admission | Of those patients in the denominator, number who received their initial care plan prior to or within 2 weeks of admission | Total number of patients admitted in the reporting period | Quarterly | Quarterly | Provider submitted data | Provider submitted data | | Higher is better | Include a CPA | Apr 19 Jun 19 | Jul 19 - Sep 19 | Oct 19 Dec 19 | Jan 20 Mar 20 |
| MHCLS07 | Domain 5: Treating and caring for people in a safe environment; and protecting them from avoidable harm | Clinical Process | Physical Monitoring | | Proportion of young people prescribed antipsychotics who receive appropriate physical monitoring | Of those patients in the denominator, number who receive appropriate physical monitoring | Total number of patients prescribed antipsychotics in the reporting period | Quarterly | Quarterly | Provider submitted data | Provider submitted data | | Higher is better | Physical monitoring as per National Institute for Health and Care Excellence (NICE) guidelines | Apr 19 Jun 19 | Jul 19 - Sep 19 | Oct 19 Dec 19 | Jan 20 Mar 20 |
| MHCLS08 | Domain 5: Treating and caring for people in a safe environment; and protecting them from avoidable harm | Clinical Process | Clinical supervision | | Proportion of eligible staff who have received clinical supervision as per trust / organisation policy | Of those staff in the denominator, number who received clinical supervision as per trust / organisation policy | Total number of staff eligible for clinical supervision | Quarterly | Quarterly | Provider submitted data | Provider submitted data | | Higher is better | Eligible: all staff with a responsibility to provide care; this includes professionally qualified or unqualified staff | Apr 19 Jun 19 | Jul 19 - Sep 19 | Oct 19 Dec 19 | Jan 20 Mar 20 |
| MHCLS09 | Domain 5: Treating and caring for people in a safe environment; and protecting them from avoidable harm | Clinical Process | Safeguarding | | Proportion of staff requiring training, who have received level 3 safeguarding children training | Of those staff in the denominator, number of staff receiving level 3 safeguarding children training | Total number of staff eligible for level 3 safeguarding children training | Quarterly | Quarterly | Provider submitted data | Provider submitted data | | Higher is better | Eligible: all staff with a responsibility to provide care; this includes professionally qualified or unqualified staff | Apr 19 Jun 19 | Jul 19 - Sep 19 | Oct 19 Dec 19 | Jan 20 Mar 20 |
| MHCLS10 | Domain 2: Enhancing quality of life for people with long-term conditions | Clinical Outcome | Length of stay | | Mean (average) length of stay for patients discharged in the reporting period | Sum total of length of stay in days for those patients in the denominator | Total number of patients discharged in the reporting period | Quarterly | Quarterly | Provider submitted data | Provider submitted data | | Lower is better | | Apr 19 Jun 19 | Jul 19 - Sep 19 | Oct 19 Dec 19 | Jan 20 Mar 20 |
| MHCLS11 | Domain 5: Treating and caring for people in a safe environment; and protecting them from avoidable harm | Clinical Process | Staffing levels | The general consensus is that more than 25% bank or agency in any shift is undesirable. Be aware many units may have difficulty given lack of staffing available and take supportive approach; need to also consider how many are agency staff booked for long periods or internal bank staff trained by the trust | Ratio of substantive staff to agency staff or bank staff | Total number of substantive staff | Total number of agency or bank staff | Quarterly | Quarterly | Provider submitted data | Provider submitted data | | Lower is better | | Apr 19 Jun 19 | Jul 19 - Sep 19 | Oct 19 Dec 19 | Jan 20 Mar 20 |
| MHCLS12a | Domain 5: Treating and caring for people in a safe environment; and protecting them from avoidable harm | Clinical Process | CHPPD | | Care hours per patient day - registered nurses | Sum total of hours of registered nurses during reporting period | Sum total of patient days in the reporting period | Quarterly | Quarterly | Provider submitted data | Provider submitted data | | Higher is better | patient day = count of patients at midnight | Apr 19 Jun 19 | Jul 19 - Sep 19 | Oct 19 Dec 19 | Jan 20 Mar 20 |

Child and Adolescent Mental Health Services (CAMHS) – Low Secure Quality Dashboard 2019/20



| Indicator Reference Number | Domain | Theme | Measure | Rationale | Name of Indicator / Description | Numerator | Denominator | Period Type | Frequency | Data Source Numerator | Data Source Denominator | Target | Interpretation Guidance | Notes | Reporting Periods | | | |
|---|---|------------------|---------|-----------|---|--|---|-------------|-----------|-------------------------|-------------------------|--------|-------------------------|---|-------------------|-----------------|-----------------|-----------------|
| | | | | | | | | | | | | | | | Q1 | Q2 | Q3 | Q4 |
| MHCLS12b | Domain 5: Treating and caring for people in a safe environment; and protecting them from avoidable harm | Clinical Process | CHPPD | | Care hours per patient day - healthcare support workers | Sum total of hours of healthcare support workers during reporting period | Sum total of patient days in the reporting period | Quarterly | Quarterly | Provider submitted data | Provider submitted data | | Higher is better | patient day = count of patients at midnight | Apr 19 - Jun 19 | Jul 19 - Sep 19 | Oct 19 - Dec 19 | Jan 20 - Mar 20 |
| MHCLS12c | Domain 5: Treating and caring for people in a safe environment; and protecting them from avoidable harm | Clinical Process | CHPPD | | Care hours per patient day - all nursing staff | Sum total of hours of registered nurses and healthcare support workers during reporting period | Sum total of patient days in the reporting period | Quarterly | Quarterly | Provider submitted data | Provider submitted data | | Higher is better | patient day = count of patients at midnight | Apr 19 - Jun 19 | Jul 19 - Sep 19 | Oct 19 - Dec 19 | Jan 20 - Mar 20 |
| Data collection has been approved by the Review of Central Returns - ROCR ROCR/OR/2230/001MAND | | | | | | | | | | | | | | | | | | |