Ed Humpherson, Director General for Regulation

Chris Roebuck
Director of Publications and Head of Profession for Statistics
NHS Digital
Trevelyan House
1 Trevelyan Square
Boar Lane
Leeds
LS1 6AE

22 January 2018

Dear Chris

NATIONAL STATISTICS STATUS OF MENTAL HEALTH ACT STATISTICS, ANNUAL FIGURES

The statistics I am writing to you about, Mental Health Act Statistics, Annual Figures, are especially important as they are about vulnerable individuals, detained in hospitals at a point of crisis when they are in need of specialist mental health care.

On behalf of the Board of the Statistics Authority, I am pleased to confirm the designation of the Mental Health Act Statistics, Annual Figures as National Statistics from the publication of the 2017/18 annual statistics. This follows our Assessment of the predecessor statistics, which led to them having their National Statistics status removed while the transition to a new data source took place.

When we assessed the predecessor statistics we welcomed plans to change to a new data source because we recognised the change had the potential to better reflect the experiences of those vulnerable individuals, rather than being restricted to counting the different uses of the Act. The new data source was part of a long-term change to data collection for all mental health services including crisis care. The improved statistics have already provided more insight into how the Mental Health Act is used.

The team made a good start on its contact with support and advocacy groups and told us of plans to revive this, following a period focusing on quality. We encourage you to renew your efforts to reach service users as you continue to develop the statistics.

The data is important to clinicians, policy makers and others who want to use the statistics to understand use of the Mental Health Act, how it affects those who become subject to the Act, or to improve crisis care. It would benefit them and, most importantly service users, if reporting could go even further, for example to look at the number of individuals passing through the mental healthcare system in a year, how often they are admitted and the pathways they take. Your team told us of its ambition to extend the value of the report in this way and we encourage you to do this.

We recognise your commitment and effort to improve data coverage, especially among independent service providers, to better reflect crisis care as a whole. In particular the team understands the value of the data quality report as a tool to improve data quality and the report could be an exemplar in NHS Digital.

The annex to this letter includes a fuller description of the improvements made to the statistics.

Thank you for your concerted efforts over a long time period to improve the existing statistics and your clear intention to continue that improvement in the future.

Yours sincerely

Ed Humpherson
Director General for Regulation

I am copying this letter to Noel Gordon, Chair NHS Digital and Jo Simpson, Community and Mental Health Team, NHS Digital

Annex: Review of actions taken by NHS Digital in response to Assessment Report 294: Statistics about Inpatients formally detained in hospitals under the Mental Health Act 1983, and patients subject to supervised community treatment (now published as Mental Health Act Statistics, Annual Figures)

Value: increase engagement with service users and supporters; use the data and statistics to demonstrate how service users experience the provisions of the Act and how the Act is used		
Requirement	**Actions taken by NHS Digital to meet Requirements**	**Office for Statistics Regulation's evaluation of evidence in meeting Requirements**

<u>Requirement 1</u>
 	
NHS Digital should take steps to investigate the needs of less-expert users, including for example service users and their families, and publish plans for ongoing engagement, referring to the Authority's Monitoring Brief *The Use Made of Official Statistics*
 	
<u>Requirement 6</u>
 	
NHS Digital should improve the narrative and analysis for *Inpatients detained* so that it aids user interpretation of the statistics, taking particular account of the need to provide information on the wider context of mental health policy and treatment, and on the effects of operational policy on the statistics
	The team:
	
	• Engaged with ReThink Mental Health and the Mental Health Alliance
	
	• Designed the latest report's language and presentation style following that contact
	
	• Analysed rates of detention by age, gender and ethnicity, shedding new light on the experiences of different service users
	
	• Timed the report's publication so that detention rates by ethnic group could be included in the Cabinet Office's Ethnicity Facts and Figures
	
	• Demonstrated where the previous data source did not correctly represent patient experience including:
	
	  i. wrongly counting detention after admission where these happened on the same day
	
	  ii. transfers between hospitals that were not previously visible and double-counted as admissions
	
	• Built new methods to replicate the previous measures to meet the needs of clinicians monitoring use of the Act
		To judge whether NHS Digital has met these Requirements, we considered:
		
		• The team's engagement with mental health charities
		
		• The team's re-creation of previous measures, its detention rate analysis and the discovery of previous inaccuracies that shed new light on the workings of the Act
		
		• The way the statistics were reported in the 2016/17 report
		
		Positive factors we saw include:
		
		• The team's determination to better understand and represent the experience of service users
		
		• The team's contact with support groups which led it to think of different ways to tell the story as well as recreating existing measures that are valued by long-standing users
		
		• Feedback from a leading clinician who, while valuing continuity, recognised the trade-off between the new insight into how the Act is working and the break in the time series
		
		Taking these factors together, our overall judgement is that NHS Digital has met these Requirements.
		
		<u>Future considerations</u>
		
		The team should continue to find new ways to present the data to lead to even greater understanding of the experiences of service users and of how the Act is used. The team should refresh its dialogue with service users and their supporters to develop their analysis and reporting and continue talking to clinicians to ensure their data and analysis needs are met.

Quality: understand, improve, assure data quality; tell people about data quality, the impacts of quality issues and limitations on use		
Requirement	**Actions taken by NHS Digital to meet Requirements**	**Office for Statistics Regulation's evaluation of evidence in meeting Requirements**
Requirement 5 NHS Digital should: a) Investigate the risks arising from the data sources and determine the appropriate scale of assurance and documentation required for the administrative data used in the *Inpatients detained* statistics based on pragmatic and proportionate judgement about the quality of the data and the public interest profile of the statistics b) communicate this requirement to suppliers and publish an appropriate level of detail to inform users about the quality assurance and audit arrangements for the administrative data c) in implementing parts a) and b), take into consideration the Authority's Report *Quality Assurance and Audit Arrangements for Administrative Data* Requirement 2 NHS Digital should indicate the likely scale and impact of missing data on the quality of the statistics and the limitations that this places on the uses of the statistics	The team has: • Investigated the data to identify missing data by healthcare provider and why the data are missing • Worked one-to-one with individual suppliers to identify errors in the data submissions and improve quality • Worked directly with the Care Quality Commission to better inform its local auditing and use that auditing to quality assure data submitted by mental healthcare providers • Analysed and published a detailed account of missing data and the impact that has on quality • Told people about the limitations arising from the missing data in the 2016/17 summary report • Presented a comparison with the previous year using analysis of a subset of providers with complete data in 2016/17 and 2015/16, and that had no significant data quality issues	The national data standard sets out data requirements and submission is through a central system with inbuilt quality assurance checks. Both of these factors reduce the risk to data quality compared with the previous data source. The team has carried out a thorough analysis of missing data and has worked with data suppliers and partners, including NHS England, NHS Improvement and CQC, to understand, improve and quality assure the data and ensure that all eligible organisations submit data. The team intends to use the data quality report as a tool to drive improvement. The team told us that it designed the analysis to show where it and its partners can best focus their improvement activities. The team has raised data quality issues with the senior manager responsible for quality in NHS Digital to support their work. In the published data quality report for 2016/17, the team has comprehensively reported the scale of the missing data and the impact on the headline statistics and by data table. The report gives a clear description of the consequences of missing data on the ability to compare years and includes analysis of a sub-set of data to give long-standing users information about year-on-year change. Considering all of the evidence, we judge that NHS Digital has met these Requirements.

Trustworthiness: Tell people about plans to change data sources Value: Tell people what sources to use in which circumstance and about equivalent statistics elsewhere in the UK		
Requirement	**Actions taken by NHS Digital to meet Requirements**	**Office for Statistics Regulation's evaluation of evidence in meeting Requirements**
Requirement 3 NHS Digital should publish a transition plan and associated timetable showing when it expects to achieve the transfer between data sources for *Inpatients detained*, and communicate regular updates to users on progress made until it completes the plan Requirement 4 NHS Digital should: a) tell users about all the possible reasons for differences between the wider range of estimates available, and which statistics should be used for which purposes, during the transition period b) provide guidance on the uses to which the different estimates are better suited based on their strengths, and the uses for which users should apply caution based on their limitations Requirement 7 NHS Digital should publish clear information about the publication of equivalent statistics in the devolved administrations and signpost users to the relevant statistics	The team published a transition report: 'Mental Health Act Statistics: Improved reporting to support better care' in 2016 alongside the 2015/16 statistics. It confirmed that the basis for the statistics would change to the new data source from the 2016/17 publication. The team also included this text in the 2015/16 statistical report: 'This is the last year that these annual statistics will be produced from the KP90 collection which has now been retired. From now onwards Mental Health Service Dataset (MHSDS) will be the source of information about uses of The Act. We are also planning to change the title of these statistics to 'Mental Health Act Statistics, Annual Figures' from next year.' The team published information on coherence between different data sources in the 2015/16 report, including information on what could be compared between the data source that was retired in that year and the new data source. The team included links to publications in the devolved administrations in its 2015/16 and 2016/17 reports	This collection of requirements mostly reflected our view that there was potential for confusion during the transition period if NHS Digital did not clearly communicate its plans and because it was reporting on more than one source of data. The main potential for confusion due to multiple sources no longer exists now that the original data source is retired. We judge that NHS Digital has met these Requirements.