Intelligent Monitoring Report

Report on

Black Country Partnership NHS Foundation Trust

To view the most recent inspection report please visit the link below.

http://www.cqc.org.uk/Provider/TAJ

February 2016

Intelligent Monitoring: Report published on 25 February 2016

CQC has developed a model for monitoring a range of key indicators about Trusts that provide Mental Health services. These indicators relate to the five key questions we will ask of all services – are they safe, effective, caring, responsive and well-led? The indicators will be used to raise questions about the quality of care. They will not be used on their own to make judgements. **Our judgements will always be based on the result of an inspection, which will take into account our Intelligent Monitoring analysis alongside local information from the public, the trust and other organisations.**

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What does this report contain?

This report presents CQC's analysis of the key indicators (which we call 'tier one indicators') for Black Country Partnership NHS Foundation Trust. We have analysed each indicator to identify two possible levels of risk.

We have used a number of statistical tests to determine where the thresholds of "risk" and "elevated risk" sit for each indicator, based on our judgement of which statistical tests are most appropriate.Where an indicator has 'no evidence of risk' this refers to where our statistical analysis has not deemed there to be a risk or elevated risk. For some data sources we have applied a set of rules to the data as the basis for these thresholds - for example concerns raised by staff to CQC (and validated by CQC) are always flagged in the model.

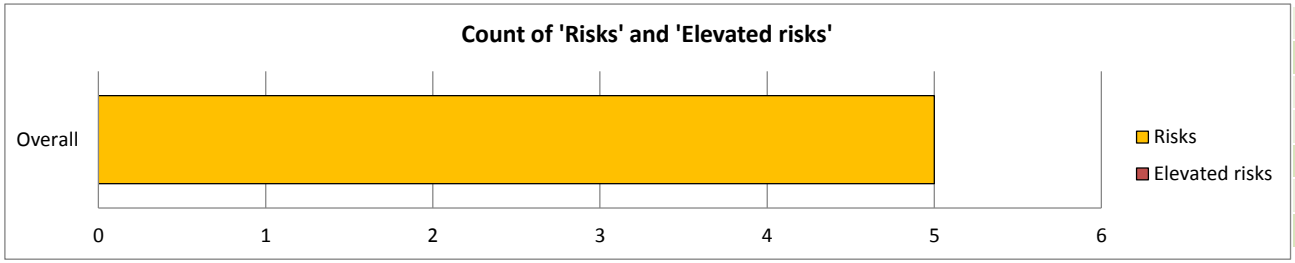
Further details of the analysis applied are explained in the accompanying guidance document.

What guidance is available?

We have published a document setting out the definition and full methodology for each indicator. If you have any queries or need more information, please email enquiries@cqc.org.uk or use the contact details at www.cqc.org.uk/contact-us

Black Country Partnership NHS Foundation Trust

Trust Summary



Number of 'Risks'	5
Number of 'Elevated risks'	0
Overall Risk Score	5
Number of "No Evidence of risk"	68
Number of Applicable Indicators	73
Proportional Score	3.47%
Maximum Possible Risk Score	144

Safe	Fairness and effectiveness of incident reporting procedures - NHS Staff Survey	Risk
	Composite indicator showing trusts flagging for risk in relation to the number of deaths of patients detained under the Mental Health Act - MHA database/MHLDDS	Risk
	Consistency of reporting to the National Reporting and Learning System - NRLS	Risk
Well-led	Monitor: risk rating for governance - Monitor	Risk
	Monitor: continuity of service rating - Monitor	Risk

Black Country Partnership NHS Foundation Trust

Tier One Indicators

Key Question	ID	Indicators - **Source**	From	To	Observed	Expected	Risk?
Safe	MHSAF07C	Potential under-reporting of patient safety incidents - **NRLS/MHLDDS-HES Bridged**	01/11/2014	31/10/2015	0.09	0.10	No evidence of risk
	MHSAFE06	Proportion of reported patient safety incidents that are harmful - **NRLS**	01/11/2014	31/10/2015	0.34	0.38	No evidence of risk
	MHSDS_PMIN1	Proportion of mortality among mental health inpatients aged 0-74 (death recorded in ONS) - **MHLDDS-HES/ONS**	01/07/2014	30/06/2015	0.01	0.01	No evidence of risk
	MHSDS_PMCT1	Proportion of mortality among people in contact with community mental health services aged 0-74 (death recorded in ONS) **- MHLDDS-HES/ONS**	01/07/2014	30/06/2015	0.01	0.01	No evidence of risk
	MHSDS_PMCT2	Proportion of mortality among people in contact with community mental health services aged 0-74 (self-harm or undetermined ONS death) **- MHLDDS-HES/ONS**	01/07/2014	30/06/2015	0.00	0.00	No evidence of risk
	MHSAFE63	Patients that die following injury or self-harm within 3 days of being admitted to acute hospital beds - **MHLDDS-HES Bridged**	01/07/2014	30/06/2015	0.00	n/a	No evidence of risk
	MHSAFE64	People that take their own lives within 3 days of discharge from hospital - **MHLDDS-HES Bridged**	01/07/2014	30/06/2015	0.00	0.07	No evidence of risk
	COM_MORT01	Composite indicator showing trusts flagging for risk in relation to the number of deaths of patients detained under the Mental Health Act - **MHA database/MHLDDS**	01/08/2014	31/07/2015	n/a	n/a	Risk
	MHMORT01	*Trusts flagging for risk in the number of suicides of patients detained under the Mental Health Act (all ages) **- MHA database/HSCIC KP90***	*01/08/2014*	*31/07/2015*	*0.00*	*n/a*	*No evidence of risk*
	MHMORT03	*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/HSCIC KP90***	*01/08/2014*	*31/07/2015*	*	*0.68*	*Risk*
	NHSSTAFF11	Fairness and effectiveness of incident reporting procedures - **NHS Staff Survey**	01/09/2014	31/12/2014	0.59	0.63	Risk
	NRLSL08MH	Consistency of reporting to the National Reporting and Learning System - **NRLS**	01/10/2014	31/03/2015	3 months of reporting	n/a	Risk
	COM_CASMH	Composite of Central Alerting System (CAS): Dealing with (CAS) safety alerts in a timely way - **CAS**	01/03/2009	31/10/2015	n/a	n/a	No evidence of risk
	CASMH01A	*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 from the CAS system - **CAS***	*01/11/2014*	*31/10/2015*	*0 alerts still open*	*n/a*	*No evidence of risk*
	CASMH01B	*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 from the CAS system - **CAS***	*01/03/2009*	*31/10/2014*	*0 alerts still open*	*n/a*	*No evidence of risk*
	CASMH01C	*Percentage of CAS alerts with closing dates during the preceding 12 months which the trust has closed late - **CAS***	*01/11/2014*	*31/10/2015*	*< 25% of alerts closed late*	*n/a*	*No evidence of risk*
	MHRES20	Proportion of discharges from hospital followed up within 7 days - **MHLDDS**	01/07/2014	30/06/2015	0.52	0.70	No evidence of risk
	NHSSTAFF07	Proportion of staff receiving health and safety training in last 12 months - **NHS Staff Survey**	01/09/2014	31/12/2014	0.89	0.73	No evidence of risk
	PLACE_MH01	PLACE (patient-led assessments of the care environment) score for cleanliness of environment - **PLACE**	04/02/2015	30/06/2015	0.99	0.98	No evidence of risk
	SAFEGUAR01	CQC's National Customer Service Centre (NCSC) safeguarding concerns - **CQC**	01/11/2014	31/10/2015	16.00	16.54	No evidence of risk
	MHESR01	Proportion of registered nursing staff - **ESR**	30/09/2015	30/09/2015	0.64	0.53	No evidence of risk
	MHESR02	Ratio of occupied beds to all nursing staff - **ESR**	30/09/2015	30/09/2015	3.19	4.53	No evidence of risk
Effective	CMHSURA06	Being informed: for having been told who is in charge of organising their care and services - **CMH Survey**	01/09/2014	30/11/2014	7.01	n/a	No evidence of risk
	CMHSURA38	Help finding support for physical health needs: for those with physical health needs receiving help or advice with finding support for this, if they needed this - **CMH Survey**	01/09/2014	30/11/2014	4.80	n/a	No evidence of risk
	MHCAR201	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**	01/09/2014	31/08/2015	1.00	0.96	No evidence of risk
	MHSDS_AE1	Proportion of detained mental health inpatients who attend Accident and Emergency departments **- MHLDDS - HES bridged**	01/07/2014	30/06/2015	0.25	0.21	No evidence of risk
	MHSDS_ACS1	Proportion of emergency admissions of mental health inpatients for ambulatory care sensitive conditions - **MHLDDS - HES bridged**	01/07/2014	30/06/2015	0.45	0.35	No evidence of risk
	MHCAR202	Proportion of wards visited where there were difficulties in arranging GP services for detained patients - **MHA Database**	01/09/2014	31/08/2015	0.17	0.13	No evidence of risk
	MHEFF107	Proportion of patient records checked where care plans showed evidence of discharge planning - **MHA Database**	01/09/2014	31/08/2015	0.94	0.70	No evidence of risk
	NAS_PH02	Service users who had five individual cardiometabolic health risk factors monitored in the past 12 months - **NAS2**	01/08/2013	30/11/2013	0.33	0.33	No evidence of risk
	NAS_PH03	Monitoring of alcohol intake in the past 12 months - **NAS2**	01/08/2013	30/11/2013	0.52	0.71	No evidence of risk
	NAS_PT01	Has cognitive behavioural therapy ever been offered to the service user? - **NAS2**	01/08/2013	30/11/2013	0.37	0.41	No evidence of risk
	NAS_PT02	Has family intervention ever been offered to the service user? - **NAS2**	01/08/2013	30/11/2013	0.19	0.20	No evidence of risk
	PLACE_MH02	PLACE (patient-led assessments of the care environment) score for food - **PLACE**	04/02/2015	30/06/2015	0.88	0.90	No evidence of risk
	NHSSTAFF04	Proportion of staff appraised in last 12 months - **NHS Staff Survey**	01/09/2014	31/12/2014	0.95	0.87	No evidence of risk
	NHSSTAFF05	Proportion of staff having well-structured appraisals in last 12 months - **NHS Staff Survey**	01/09/2014	31/12/2014	0.45	0.41	No evidence of risk
	NHSSTAFF06	Proportion of staff receiving support from immediate managers - **NHS Staff Survey**	01/09/2014	31/12/2014	0.67	0.70	No evidence of risk
	MHSAFE51	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**	01/09/2014	31/08/2015	0.50	0.67	No evidence of risk
	MHCAR19	Proportion of wards visited where there is an Independent Mental Health Advocacy (IMHA) service available - **MHA Database**	01/09/2014	31/08/2015	1.00	1.00	No evidence of risk

Key Question	ID	Indicators - **Source**	From	To	Observed	Expected	Risk?
	MHCAR20	Proportion of wards visited where detained patients have direct access to the Independent Mental Health Advocacy (IMHA) service - **MHA Database**	01/09/2014	31/08/2015	1.00	0.95	No evidence of risk
	MHEFF106	Proportion of patient records checked where there was an approved mental health practitioner (AMHP) report available - **MHA Database**	01/09/2014	31/08/2015	0.91	0.77	No evidence of risk
	MHSAFE52	Proportion of patient records checked that show evidence of discussions about rights on detention - **MHA Database**	01/09/2014	31/08/2015	0.82	0.89	No evidence of risk
Caring	CMHSURA18	Respect and dignity: for feeling that they were treated with respect and dignity by NHS mental health services - **CMH Survey**	01/09/2014	30/11/2014	8.36	n/a	No evidence of risk
	CMHSURA31	Time: for being given enough time to discuss their needs and treatment - **CMH Survey**	01/09/2014	30/11/2014	7.67	n/a	No evidence of risk
	PLACE_MH03	PLACE (patient-led assessments of the care environment) score for privacy, dignity and well being - **PLACE**	04/02/2015	30/06/2015	0.91	0.90	No evidence of risk
	CMHSURA10	Involvement in planning care: for those who have agreed what care and services they will receive, being involved as much as they would like in agreeing this - **CMH Survey**	01/09/2014	30/11/2014	7.71	n/a	No evidence of risk
	CMHSURA12	Involvement in care review: for those who had had a formal meeting to discuss how their care is working, being involved as much as they wanted to be in this discussion - **CMH Survey**	01/09/2014	30/11/2014	7.54	n/a	No evidence of risk
	CMHSURA35	Involvement in decisions: for those receiving medicines, being involved as much as they wanted in decisions about medicines received - **CMH Survey**	01/09/2014	30/11/2014	6.99	n/a	No evidence of risk
	CMHSURA42	Involving family or friends: for NHS mental health services involving family or someone else close to them as much as they would like - **CMH Survey**	01/09/2014	30/11/2014	7.16	n/a	No evidence of risk
	NAS_SD01	Was the patient provided with written information (or an appropriate alternative) about the most recent antipsychotic prescribed? - **NAS2**	01/08/2013	30/11/2013	0.66	0.36	No evidence of risk
	CMHSURA16	Support: for the people seen through NHS mental health services helping them achieve what is important to them - **CMH Survey**	01/09/2014	30/11/2014	6.00	n/a	No evidence of risk
Responsive	COM_BEDS	Composite indicator to assess bed occupancy - **MHA Database/KH03**	01/09/2014	30/09/2015	n/a	n/a	No evidence of risk
	MHSAF65a	*Occupancy ratio, looking at the number of patients allocated to visited wards, compared with the number of available beds - **MHA Database***	*01/09/2014*	*31/08/2015*	*0.89*	*n/a*	*No evidence of risk*
	MHSAF65c	*Occupancy ratio, looking at the average daily number of available and occupied consultant-led beds open overnight - **KH03***	*01/10/2014*	*30/09/2015*	*0.83*	*n/a*	*No evidence of risk*
	PLACE_MH04	PLACE (patient-led assessments of the care environment) score for facilities - **PLACE**	04/02/2015	30/06/2015	0.94	0.92	No evidence of risk
	CMHSURA23	Contact: for knowing who to contact out of office hours if they have a crisis - **CMH Survey**	01/09/2014	30/11/2014	6.19	n/a	No evidence of risk
	CP_MH01	Proportion of care spells where patients are discharged without a recorded crisis plan - **MHLDDS**	01/07/2014	30/06/2015	0.95	0.75	No evidence of risk
	COM_DtcMH01	Composite indicator using analysis of delayed transfers of care where bed data is available (DTC46) and where it is not available (DTCMH01) - **NHS England Delayed Transfers of Care/KH03**	01/07/2015	30/09/2015	n/a	n/a	No evidence of risk
	DTC46	*The ratio of the number of patients whose transfer of care is delayed to the average daily number of occupied beds open overnight in the quarter, where the delay is attributable to the NHS or both the NHS and social care - **Delayed Transfers of Care/KH03***	*01/07/2015*	*30/09/2015*	*0.04*	*0.03*	*No evidence of risk*
	DTCMH01	*Trusts where there is evidence of delayed transfers of care but no bed data available - **Delayed Transfers of Care***	*01/07/2015*	*30/09/2015*	*No*	*n/a*	*No evidence of risk*
	CQC_COM02	Concerns and complaints received by CQC - **CQC**	01/11/2014	31/10/2015	21.00	30.36	No evidence of risk
	PHSOMH01	Fully and partially upheld investigations into complaints - **PHSO**	01/04/2014	31/03/2015	1.00	1.31	No evidence of risk
	PROV_COM01	NHS written complaints - **HSCIC**	01/04/2014	31/03/2015	137.00	163.38	No evidence of risk
	MHA_COMP01	Mental Health Act complaints received by CQC as a ratio to MHA activity **- MHA Database/KP90**	01/11/2014	31/10/2015	3.60	n/a	No evidence of risk
Well-led	COM_CPEMH	Composite Indicator: Proportion of Mental Health Act (MHA) and hospital inpatient episodes closed by the provider - **MHLDDS**	01/07/2014	30/06/2015	n/a	n/a	No evidence of risk
	MHSDS_CPE01	*Proportion of provider closed episodes of patients detained under the Mental Health Act (MHA) **- MHLDDS***	*01/07/2014*	*30/06/2015*	*0.96*	*n/a*	*No evidence of risk*
	MHSDS_CPE02	*Proportion of provider closed hospital inpatient episodes **- MHLDDS***	*01/07/2014*	*30/06/2015*	*0.97*	*n/a*	*No evidence of risk*
	MONITOR_MH01	Monitor: risk rating for governance - **Monitor**	17/11/2015	17/11/2015	Monitor risk rating: Currently under investigation	n/a	Risk
	TDA_MH01	NHS Trust Development Authority escalation score - **TDA**	Not included	Not included	Not included	Not included	Not included
	FLUVACMH01	Proportion of Health Care Workers with direct patient care that have been vaccinated against seasonal influenza - **Department of Health**	01/09/2014	28/02/2015	0.38	0.43	No evidence of risk
	MHWEL137	Proportion of days sick in the last 12 months for medical and dental staff - **ESR**	01/10/2014	30/09/2015	0.02	0.02	No evidence of risk
	MHWEL138	Proportion of days sick in the last 12 months for nursing and midwifery staff - **ESR**	01/10/2014	30/09/2015	0.06	0.05	No evidence of risk
	MHWEL139	Proportion of days sick in the last 12 months for other clinical staff - **ESR**	01/10/2014	30/09/2015	0.06	0.05	No evidence of risk
	MHWEL140	Proportion of days sick in the last 12 months for non-clinical staff - **ESR**	01/10/2014	30/09/2015	0.05	0.04	No evidence of risk
	NHSSTAFF16	Proportion of staff reporting good communication between senior management and staff - **NHS Staff Survey**	01/09/2014	31/12/2014	0.27	0.31	No evidence of risk

Key Question	ID	Indicators - **Source**	From	To	Observed	Expected	Risk?
	NHSSTAFF20	Proportion of staff feeling pressure to attend work when feeling unwell in the last 3 months - **NHS Staff Survey**	01/09/2014	31/12/2014	0.24	0.21	No evidence of risk
	NTS12_MH01	General Medical Council national training survey – trainee's overall satisfaction - **GMC**	24/03/2015	06/05/2015	Within the middle quartile (Q2/IQR)	n/a	No evidence of risk
	STASURBG01	Proportion of staff who would recommend the trust as a place to work or receive treatment - **NHS Staff Survey**	01/09/2014	31/12/2014	0.59	0.63	No evidence of risk
	GMC_MH01	General Medical Council enhanced monitoring - **GMC**	01/06/2015	30/06/2015	No concerns	n/a	No evidence of risk
	MHRES17	Proportion of wards visited that have community meetings - **MHA Database**	01/09/2014	31/08/2015	0.83	0.92	No evidence of risk
	WBLOW_MH01	Snapshot of whistleblowing alerts received by CQC - **CQC**	16/11/2015	01/02/2016	0.00	n/a	No evidence of risk
	COM_CMHS	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 - **CMH Survey**	01/09/2013	30/11/2014	n/a	n/a	No evidence of risk
	CMHS_CURR	*Occurrence of sampling errors or non-submission of data relating to the current iteration of the Community Mental Health Survey - **CMH Survey***	*01/09/2014*	*30/11/2014*	*Submission, no errors*	*n/a*	*No evidence of risk*
	CMHS_PREV	*Occurrence of sampling errors or non-submission of data relating to the previous iteration of the Community Mental Health Survey - **CMH Survey***	*01/09/2013*	*30/11/2013*	*Submission, no errors*	*n/a*	*No evidence of risk*
	MONITOR_MH02	Monitor: continuity of service rating - **Monitor**	17/11/2015	17/11/2015	2: material risk	n/a	Risk
Cross cutting	SYEMH	Negative comments submitted to Share Your Experience - **CQC**	01/10/2014	30/09/2015	3.00	8.77	No evidence of risk
	P_OPINIONMH	Negative comments submitted to Patient Opinion sources - **Patient Opinion**	01/08/2014	31/07/2015	0.00	3.86	No evidence of risk

Suppression: We apply a strict statistical disclosure control in accordance with the HES protocol to all published data. This requires that small numbers are suppressed to prevent individuals being identified and to ensure that patient confidentiality is maintained. An asterisk (*) in the observed column indicates a suppressed value between 1 and 5.

Not applicable or N/A Values: "n/a" is used to mean either that an expected value is not relevant to a specific indicator because the indicator is rules based or the indicator does not have an observed value.

Rounding: All observed values have been rounded to two decimal places. Therefore, numbers that are less than 0.005 may be displayed on this report as '0.00'. The datasheet contains the numbers used to calculate the indicators.