

Intelligent Monitoring Report

Report on

Barnet, Enfield and Haringey Mental Health NHS Trust

June 2015

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

<http://www.cqc.org.uk/Provider/RRP>

CQC has developed a new 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 Barnet, Enfield and Haringey Mental Health NHS Trust. We have analysed each indicator to identify two possible levels of risk.

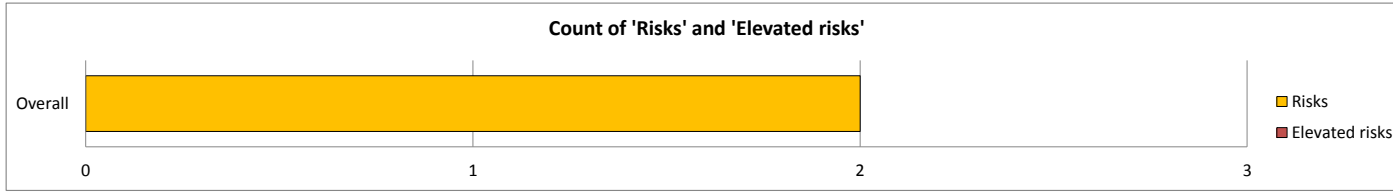
We have used a number of statistical tests to determine where the thresholds of "risk" and "elevated risk" sit for each indicator, based on our judgement of which statistical tests are most appropriate. These tests include Poisson and z scoring techniques. Where an indicator has 'no evidence of risk' 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

Trust Summary



Band	4
Number of 'Risks'	2
Number of 'Elevated risks'	0
Overall Risk Score	2
Number without "Evidence of risk"	59
Number of Applicable Indicators	61
Proportional Score	1.65%
Maximum Possible Risk Score	121

Safe	Proportion of staff receiving health and safety training in last 12 months - NHS Staff Survey	Risk
Well-led	NHS Trust Development Authority escalation score - TDA	Risk

Domain	ID	Indicators - Source	From	To	Observed	Expected	Risk?
Safe	MHSAF07C	Potential under-reporting of patient safety incidents - NRLS/MHLDDS-HES Bridged	01/12/2013	30/11/2014	0.07	0.10	No evidence of risk
	MHSAFE06	Proportion of reported patient safety incidents that are harmful - NRLS	01/12/2013	30/11/2014	0.33	0.40	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	01/10/2013	30/09/2014	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	01/12/2013	30/11/2014	0.00	0.12	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 - MHLDDS/MHAdb	01/01/2014	31/12/2014	n/a	n/a	No evidence of risk
	MHMORT01	Trusts flagging for risk in the number of suicides of patients detained under the Mental Health Act (all ages) - MHLDDS/MHAdb	01/01/2014	31/12/2014	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) - MHAdb/HSCIC KP90	01/01/2014	31/12/2014	*	n/a	No evidence of risk
	NHSSTAFF11	Fairness and effectiveness of incident reporting procedures - NHS Staff Survey	01/09/2014	31/12/2014	0.62	0.63	No evidence of risk
	NRLSL08	Consistency of reporting to the National Reporting and Learning System - NRLS	01/04/2014	30/09/2014	6 months of reporting	n/a	No evidence of risk
	COM_CASMH	Composite of Central Alerting System (CAS): Dealing with (CAS) safety alerts in a timely way - CAS	01/04/2004	31/01/2015	n/a	n/a	No evidence of risk
	CASM01A	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	01/02/2014	31/01/2015	0 alerts still open	n/a	No evidence of risk
	CASM01B	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	01/04/2004	31/01/2014	0 alerts still open	n/a	No evidence of risk
	CASM01C	Percentage of CAS alerts with closing dates during the preceding 12 months which the trust has closed late - CAS	01/02/2014	31/01/2015	< 25% of alerts closed late	n/a	No evidence of risk
	MHRES20	Proportion of discharges from hospital followed up within 7 days - MHLDDS	01/12/2013	30/11/2014	0.82	0.72	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	0.56	0.73	Risk
	PLACE01	PLACE (patient-led assessments of the care environment) score for cleanliness of environment - PLACE	29/01/2014	17/06/2014	1.00	0.98	No evidence of risk
	SAFEGUAR01	CQC's National Customer Service Centre (NCSC) safeguarding concerns - CQC	25/02/2014	24/02/2015	23.00	19.38	No evidence of risk
MHWEL129	Proportion of registered nursing staff - ESR	31/12/2014	31/12/2014	0.53	0.52	No evidence of risk	
MHWEL132	Ratio of occupied beds to all nursing staff - ESR	31/12/2014	31/12/2014	4.38	2.85	No evidence of risk	
Effective	CMHSURA06	Being informed: for having been told who is in charge of organising their care and services - CMH Survey	01/09/2013	30/11/2013	7.29	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	01/09/2013	30/11/2013	5.41	n/a	No evidence of risk
	MHCAR201	Proportion of patients who have been in hospital less than a year who received a physical health check on admission - MHA Database	01/12/2013	30/11/2014	0.91	0.97	No evidence of risk
	MHCAR202	Proportion of wards where there were difficulties in arranging GP services - MHA Database	01/12/2013	30/11/2014	0.25	0.13	No evidence of risk
	MHEFF107	Proportion of records checked that show evidence of discharge planning - MHA Database	01/12/2013	30/11/2014	0.53	0.72	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	0.25	0.33	No evidence of risk
	NAS_PH03	Monitoring of alcohol intake in the past 12 months - NAS2	01/08/2013	30/11/2013	0.69	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	0.53	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
	PLACE02	PLACE (patient-led assessments of the care environment) score for food - PLACE	29/01/2014	17/06/2014	0.91	0.90	No evidence of risk
	NHSSTAFF04	Proportion of staff appraised in last 12 months - NHS Staff Survey	01/09/2014	31/12/2014	0.94	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	0.49	0.41	No evidence of risk
	NHSSTAFF06	Proportion of staff receiving support from immediate managers - NHS Staff Survey	01/09/2014	31/12/2014	0.71	0.70	No evidence of risk
	MHSAFE51	The proportion of times that the Responsible Clinician has recorded their assessment of a patients' capacity to consent at first treatment - MHA Database	01/12/2013	30/11/2014	0.71	0.65	No evidence of risk
	MHCAR19	Is there a current independent Mental Health Advocate (IMHA) service? - MHA Database	01/12/2013	30/11/2014	1.00	0.99	No evidence of risk
	MHCAR20	Do detained patients have direct access to the Independent Mental Health Advocate (IMHA) service? - MHA Database	01/12/2013	30/11/2014	1.00	0.94	No evidence of risk
	MHEFF106	Proportion of Approved Mental Health Practitioner (AMHP) reports available - MHA Database	01/12/2013	30/11/2014	0.74	0.77	No evidence of risk
MHSAFE52	Proportion of patients who have their rights on detention explained to them - MHA Database	01/12/2013	30/11/2014	0.88	0.90	No evidence of risk	

Domain	ID	Indicators - Source	From	To	Observed	Expected	Risk?
Caring	CMHSURA18	Respect and dignity: for feeling that they were treated with respect and dignity by NHS mental health services - CMH Survey	01/09/2013	30/11/2013	8.14	n/a	No evidence of risk
	CMHSURA31	Time: for being given enough time to discuss their needs and treatment - CMH Survey	01/09/2013	30/11/2013	7.65	n/a	No evidence of risk
	PLACE03	PLACE (patient-led assessments of the care environment) score for privacy, dignity and well being - PLACE	29/01/2014	17/06/2014	0.93	0.89	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	01/09/2013	30/11/2013	7.14	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	01/09/2013	30/11/2013	7.36	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	01/09/2013	30/11/2013	6.82	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	01/09/2013	30/11/2013	7.05	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	0.40	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	01/09/2013	30/11/2013	5.85	n/a	No evidence of risk
Responsive	COM_BEDS	Composite indicator to assess bed occupancy - MHA Database/NHS England	01/12/2013	31/12/2014	n/a	n/a	No evidence of risk
	MHSAF65a	Occupancy ratio, looking at the number of patients allocated to a location, compared with the number of available beds - MHA Database	01/12/2013	30/11/2014	0.95	n/a	No evidence of risk
	MHSAF65c	Occupancy ratio, looking at the average daily number of available and occupied beds open overnight - NHS England	01/01/2014	31/12/2014	0.99	n/a	Risk
	PLACE04	PLACE (patient-led Assessments of the care environment) score for facilities - PLACE	29/01/2014	17/06/2014	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	01/09/2013	30/11/2013	6.72	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 - NHS England	01/10/2014	31/12/2014	0.01	0.03	No evidence of risk
	MHRES12	Proportion of IAPT referrals with first assessment in the reporting period where people have waited more than 28 days - IAPT	Not included	Not included	Not included	Not included	Not included
	MHRES13	Proportion of IAPT referrals with first treatment in the reporting period where people have waited more than 28 days - IAPT	Not included	Not included	Not included	Not included	Not included
	CQC_COM01	Concerns and complaints received by CQC - CQC	25/02/2014	24/02/2015	30.00	26.23	No evidence of risk
	PHSOMH01	Fully and partially upheld investigations into complaints - PHSO	01/04/2013	31/03/2014	Less than 3	n/a	No evidence of risk
PROV_COM01	NHS written complaints - HSCIC	01/04/2013	31/03/2014	293.00	221.50	No evidence of risk	
Well-led	MONITOR01	Monitor: risk rating for governance - Monitor	Not included	Not included	Not included	Not included	Not included
	TDA03	NHS Trust Development Authority escalation score - TDA	01/11/2014	30/11/2014	Intervention (significant delivery issues)	n/a	Risk
	FLUVACMH01	Proportion of Health Care Workers with direct patient care that have been vaccinated against seasonal influenza - Department of Health	01/09/2013	31/01/2014	0.25	0.41	No evidence of risk
	MHWEL137	Proportion of days sick in the last 12 months for medical and dental staff - ESR	01/01/2014	31/12/2014	0.02	0.02	No evidence of risk
	MHWEL138	Proportion of days sick in the last 12 months for nursing and midwifery staff - ESR	01/01/2014	31/12/2014	0.05	0.05	No evidence of risk
	MHWEL139	Proportion of days sick in the last 12 months for other clinical staff - ESR	01/01/2014	31/12/2014	0.05	0.05	No evidence of risk
	MHWEL140	Proportion of days sick in the last 12 months for non-clinical staff - ESR	01/01/2014	31/12/2014	0.04	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	0.33	0.31	No evidence of 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	0.20	0.21	No evidence of risk
	GMC_MH01	General Medical Council enhanced monitoring - GMC	31/03/2015	31/03/2015	No concerns	n/a	No evidence of risk
	NTS12	General Medical Council national training survey – trainee's overall satisfaction - GMC	26/03/2014	08/05/2014	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	0.61	0.63	No evidence of risk
	MHRES17	Proportion of wards that have community meetings - MHA Database	01/12/2013	30/11/2014	0.94	0.92	No evidence of risk
	WBLOW_MH01	Snapshot of whistleblowing alerts received by CQC - CQC	04/03/2015	04/03/2015	0.00	n/a	No evidence of risk
	MONITOR02	Monitor: continuity of service rating - Monitor	Not included	Not included	Not included	Not included	Not included

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.