

Intelligent Monitoring Report

Report on

Mersey Care NHS Trust

February 2016

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

<http://www.cqc.org.uk/Provider/RW4>

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.**

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

<http://www.cqc.org.uk/Provider/RW4>

What does this report contain?

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

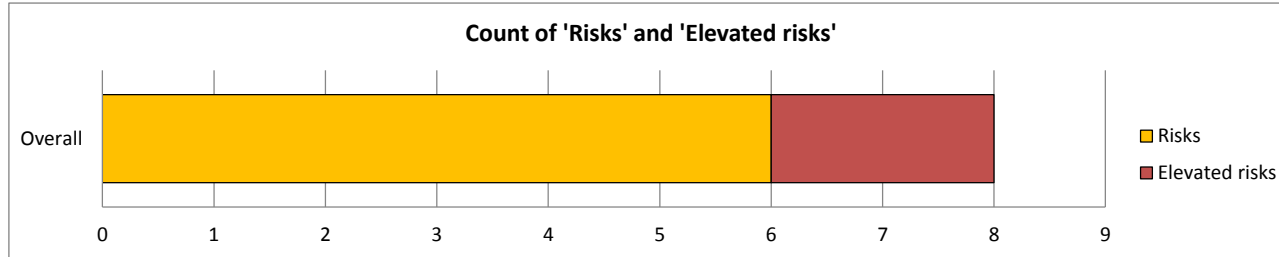
We have used a number of statistical tests to determine where the thresholds of "risk" and "elevated risk" sit for each indicator, based on our judgement of which statistical tests are most appropriate. Where an indicator has 'no evidence of risk' this refers to where our statistical analysis has not 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



Number of 'Risks'	6
Number of 'Elevated risks'	2
Overall Risk Score	10
Number of "No Evidence of risk"	64
Number of Applicable Indicators	72
Proportional Score	7.04%
Maximum Possible Risk Score	142

Safe	Proportion of mortality among people in contact with community mental health services aged 0-74 (death recorded in ONS) - MHLDDS-HES/ONS	Elevated 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
Effective	Monitoring of alcohol intake in the past 12 months - NAS2	Risk
	Has family intervention ever been offered to the service user? - NAS2	Risk
Responsive	Composite indicator to assess bed occupancy - MHA Database/KH03	Risk
	Proportion of care spells where patients are discharged without a recorded crisis plan - MHLDDS	Elevated risk
	PLACE (patient-led assessments of the care environment) score for facilities - PLACE	Risk
Well-led	Proportion of days sick in the last 12 months for nursing and midwifery staff - ESR	Risk

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	0.10	0.10	No evidence of risk
	MHSAFE06	Proportion of reported patient safety incidents that are harmful - NRLS	01/11/2014	31/10/2015	0.23	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	0.02	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	Elevated 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	0.14	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	*	n/a	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	*	1.46	No evidence of risk
	NHSSTAFF11	Fairness and effectiveness of incident reporting procedures - NHS Staff Survey	01/09/2014	31/12/2014	0.63	0.63	No evidence of risk
	NRLS08MH	Consistency of reporting to the National Reporting and Learning System - NRLS	01/10/2014	31/03/2015	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	01/03/2009	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	0.54	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	0.61	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	0.95	0.98	No evidence of risk
	SAFEGUAR01	CQC's National Customer Service Centre (NCSC) safeguarding concerns - CQC	01/11/2014	31/10/2015	11.00	26.93	No evidence of risk
	MHESR01	Proportion of registered nursing staff - ESR	30/09/2015	30/09/2015	0.45	0.53	No evidence of risk
	MHESR02	Ratio of occupied beds to all nursing staff - ESR	30/09/2015	30/09/2015	4.00	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	8.30	n/a
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	6.18	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	0.20	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	0.42	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	0.15	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	0.49	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	0.28	0.33	No evidence of risk
NAS_PH03		Monitoring of alcohol intake in the past 12 months - NAS2	01/08/2013	30/11/2013	0.38	0.71	Risk
NAS_PT01		Has cognitive behavioural therapy ever been offered to the service user? - NAS2	01/08/2013	30/11/2013	0.34	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	0.06	0.20	Risk
PLACE_MH02		PLACE (patient-led assessments of the care environment) score for food - PLACE	04/02/2015	30/06/2015	0.83	0.90	No evidence of risk
NHSSTAFF04		Proportion of staff appraised in last 12 months - NHS Staff Survey	01/09/2014	31/12/2014	0.89	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	0.41	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		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	0.80	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	0.60	0.77	No evidence of risk
	MHSAF52	Proportion of patient records checked that show evidence of discussions about rights on detention - MHA Database	01/09/2014	31/08/2015	0.95	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	8.78	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	7.95	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	0.88	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	8.19	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	8.00	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	7.34	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	7.36	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	0.35	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	6.61	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	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	0.91	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	0.88	n/a	Risk
	PLACE_MH04	PLACE (patient-led assessments of the care environment) score for facilities - PLACE Survey	04/02/2015	30/06/2015	0.81	0.92	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	7.62	n/a	No evidence of risk
	CP_MH01	Proportion of care spells where patients are discharged without a recorded crisis plan - MHLDDDS	01/07/2014	30/06/2015	1.00	0.75	Elevated 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	0.01	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	42.00	44.30	No evidence of risk
	PHSOMH01	Fully and partially upheld investigations into complaints - PHSO	01/04/2014	31/03/2015	1.00	1.94	No evidence of risk
	PROV_COM01	NHS written complaints - HSCIC	01/04/2014	31/03/2015	479.00	295.72	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	5.46	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 - MHLDDDS	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) - MHLDDDS	01/07/2014	30/06/2015	0.96	n/a	No evidence of risk
	MHSDS_CPE02	Proportion of provider closed hospital inpatient episodes - MHLDDDS	01/07/2014	30/06/2015	0.91	n/a	No evidence of risk
	MONITOR_MH01	Monitor: risk rating for governance - Monitor	Not included	Not included	Not included	Not included	Not included
	TDA_MH01	NHS Trust Development Authority escalation score - TDA	01/04/2015	30/06/2015	Standard oversight (limited/no delivery issues)	n/a	No evidence of risk
	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	0.74	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	Risk
	MHWEL139	Proportion of days sick in the last 12 months for other clinical staff - ESR	01/10/2014	30/09/2015	0.07	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	0.33	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	0.20	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	0.65	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	0.96	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	<i>Occurrence of sampling errors or non-submission of data relating to the current iteration of the Community Mental Health Survey - CMH Survey</i>	01/09/2014	30/11/2014	<i>Submission, no errors</i>	<i>n/a</i>	<i>No evidence of risk</i>
	CMHS_PREV	<i>Occurrence of sampling errors or non-submission of data relating to the previous iteration of the Community Mental Health Survey - CMH Survey</i>	01/09/2013	30/11/2013	<i>Submission, no errors</i>	<i>n/a</i>	<i>No evidence of risk</i>
	MONITOR_MH02	Monitor: continuity of service rating - Monitor	Not included	Not included	Not included	Not included	Not included

Cross cutting	SYEMH	Negative comments submitted to Share Your Experience - CQC	01/10/2014	30/09/2015	12.00	8.13	No evidence of risk
	P_OPINIONMH	Negative comments submitted to Patient Opinion sources - Patient Opinion	01/08/2014	31/07/2015	9.00	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.