



Health & Social Care
Information Centre

Data Provision Notice

For

Mental Health Services Data Set

Notified 03/05/2016



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Executive Summary

Improving mental health data for all ages is a government priority. Key to achieving this is the assurance that the data collected locally and nationally supports evidence-based clinical practice and helps us to demonstrate improved outcomes.

The Mental Health Services Data Set (MHSDS) is a patient level, output based, secondary uses data set which delivers robust, comprehensive, nationally consistent and comparable person-based information for children, young people and adults who are in contact with Mental Health or Learning Disability Services. The MHSDS will contribute to embedding 'parity of esteem' that is - 'valuing mental health equally with physical health'.

The data set is used to inform service improvements and monitor service performance, clinical interventions, patient experience and treatment outcomes.

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– Mental Health

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Background

The Health and Social Care Act 2012 (the Act) gives the Health and Social Care Information Centre (HSCIC) statutory powers, under section 259(1), to require data from health or social care bodies or organisations that provide health or adult social care in England, where it has been directed to establish an information system by the Department of Health (DH) (on behalf of the Secretary of State) or NHS England.

When a direction is received, the HSCIC can issue a Data Provision Notice to the appropriate providers of the required data.

The data, as specified by the HSCIC in this published Data Provision Notice, is required to support a direction from NHS England to the HSCIC. Therefore, organisations that are in scope of the notice are legally required, under section 259(5) of the Act, to provide the data in the form and manner specified below.

Purpose of the collection

The MHSDS is a patient level, output based, secondary uses data set which will deliver robust, comprehensive, nationally consistent and comparable person-based information for children, young people and adults who are in contact with mental health, learning disabilities or autism spectrum disorder services. As a secondary uses data set it intends to re-use clinical and operational data for purposes other than direct patient care.

The latest Information Standard release and associated documentation can be found on the Standardisation Committee for Care Information (SCCI) publication page for this SCCI0011 Information Standard:

<http://www.hscic.gov.uk/isce/publication/SCCI0011>

The MHSDS is a change to the Mental Health and Learning Disabilities Data Set (MHLDDS) standard, which supersedes and replaces this and the following standards:

- ISB 1072 Child and Adolescent Mental Health Services (CAMHS) data set
- ISB 1509 Mental Health Care Cluster
- ISB 1078 Mental Health Clustering Tool

Previous development history of the SCCI0011 Information Standard, including the superseded MHLDDS and previous releases going back to 1999, can be found on the Information Standards Board for Health and Social Care (ISB) website:

<http://webarchive.nationalarchives.gov.uk/+http://www.isb.nhs.uk/library/standard/76>

The MHSDS is used to inform service improvements and monitor service performance, clinical interventions, patient experience and treatment outcomes. In particular it has been designed to support the introduction of access and waiting time standard measurements¹ as part of support of the Five Year Forward View for Mental Health for the NHS in England² and policy commitments related to parity of esteem for mental health³.

¹ <https://www.england.nhs.uk/mentalhealth/resources/access-waiting-time/>

² <https://www.england.nhs.uk/mentalhealth/taskforce/>

³ <https://www.england.nhs.uk/mentalhealth/parity/>

The HSCIC has a central reporting system where an anonymised version of the MHSDS will be held for reporting purposes. This platform will support the effective monitoring of service standards including efficiency, equity and effectiveness of service.

Benefits of the collection

MHSDS supports a variety of secondary use functions such as:

- commissioning
- clinical audit
- research
- service planning
- inspection and regulation
- monitoring government policies and legislation
- local and national performance management and benchmarking
- national reporting and analysis

Examples of the way information collected is used include checking:

- Mental Health Services are available to all patients
- Patients are provided with care that is compliant with standards set by the National Institute for Health and Care Excellence (NICE)
- Whether services help patients to recover
- Access and Waiting Time standards are monitored nationally to improve patient experience of mental health services
- The organisations that commission services know what services have been delivered

Legal basis for the collection, handling, publication and dissemination

The HSCIC has been directed by NHS England under section 254 of the Health and Social Care Act 2012 to establish and operate a system for the collection and analysis of the information specified for this service. A copy of the Directions can be found on the government website: https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/455853/Mental_Health_Services.pdf

This information is required by the HSCIC under section 259(1) of the Health and Social Care Act 2012. In line with section 259(5) of the Act, all Mental Health Services in England must comply with the requirement and provide information to the HSCIC in the form, manner and period specified in this Data Provision Notice.

The data to be processed includes patient identifiable data which is deemed to be personal and as such requires fair processing under the Data Protection Act 1998. Details of how the HSCIC will meet the requirements of fair processing are published on the HSCIC website: www.hscic.gov.uk/yourinfo.

The HSCIC has also produced an *IG and Consent Guidance* containing information for care providers to give to Patients using their services. This document is available from the MHSDS webpage:

<http://www.hscic.gov.uk/mhsds>

This Notice is issued in accordance with the procedure published as part of the HSCIC duty under section 259(8).

Persons consulted

Following receipt of a direction to establish the Mental Health Services Data Set, the HSCIC has, as required under section 258 of the Health and Social Care Act 2012, consulted with the following:

- Mental Health Data & Information Programme Board
- Department of Health - Sponsor
- Director of Mental Health, NHS England – SRO
- The Standardisation Committee for Care Information (SCCI), which included representatives from the Allied Health Professionals Federation, Data Standards Panel, Department of Health (DH), Medicines and Healthcare products Regulatory Agency (MHRA), Monitor, NHS Employers, NHS England, NHS Northern Ireland, Professional Records Standards Body (PRSB), techUK and the HSCIC.

As part of assurance processes, the MHSDS v1.0 also went to public consultation, between 19th March 2015 and 29th April 2015. The consultation was accessible through the HSCIC's Consultation Hub and can be found on the below page:

<https://hscic-standards.citizenspace.com/scci/mhsds>

Scope of the collection

Under section 259(1) of the Health and Social Care Act 2012, this Notice is served in accordance with the procedure published as part of the HSCIC duty under section 259(8) on the following persons:

Service Providers and organisations in England that provide specialist secondary mental health and/or learning disabilities and/or autism spectrum disorder services (irrespective of funding arrangements) including:

- NHS Mental Health Trusts
- NHS Learning Disabilities Trusts
- NHS Acute Trusts⁴
- NHS Care Trusts¹
- Independent sector providers offering a service model that includes NHS funded and non-NHS funded patients Error! Bookmark not defined.
- Any qualified provider offering specialist secondary mental health, learning disabilities or autism spectrum disorder services
- Community providers of mental health, learning disabilities or autism spectrum disorder services for children.

⁴ Where there is direct provision of specialist secondary mental health, learning disabilities, or autism spectrum disorder services

Please see the *Requirements Specification* for the full scope of the MHSDS. This document is available from the SCCI0011 webpage:

<http://www.hscic.gov.uk/isce/publication/SCCI0011>

Under section 259(5) of the Health and Social Care Act 2012 the organisation types specified in the above Scope must comply with the Form, Manner and Period requirements below:

Form of the collection

The requirement relates to the extraction and submission of patient identifiable data. Full details of the data to be collected can be found in the *Technical Output Specification*.

Providers of Mental Health Services MUST create a data submission file as set out in the *Technical Guidance*. Therefore, providers of Mental Health Services MUST be able to:

- Collate and extract data from local IT systems as per the *Technical Output Specification*.
- Structure the data and create a data submission file using the *Intermediate Database (IDB)* as per the *Technical Guidance*.
- Apply the basic validation rules and ensure that the submission file conforms to these, as per the *Technical Output Specification*.
- Ensure the data submission file only contains data for a single month or consecutive months and relates to one provider organisation.

The *Technical Output Specification* and *Technical Guidance* are both available from the MHSDS webpage:

<http://www.hscic.gov.uk/mhsds>

Manner of the collection

Providers of Mental Health Services must submit data submission files to a secure Central Data Warehouse as per the data submission protocol highlighted in the *Technical Guidance*.

For the MHSDS, the secure Central Data Warehouse chosen is the Open Exeter Bureau Service Portal. Further details on Open Exeter can be found at:

<http://systems.hscic.gov.uk/ssd/prodserv/vaprodoopenexe/>

Period of the collection

As per the Requirements Specification:

- Local data collection will commence 1st January 2016
- Central data submission to the Bureau Service Portal will commence 1st February 2016

The HSCIC has a statutory obligation to keep collections under review on an ongoing basis. As such, the Mental Health Services Data Set is reviewed on an annual basis to ensure it:

- remains fit for purpose

- maintains alignment with clinical practice and coding
- responds to policy requirements
- matches the NHS Data Model and Dictionary
- is corrected in light of errors highlighted by stakeholders.

A new Data Provision Notice may be issued following any amendments to the data set resulting from an annual review.

Data Quality

As per the *Requirements Specification*, providers of Mental Health Services MUST review the *Technical Output Specification* to understand the data quality rules that will be applied to each data group on arrival at the Central Data Warehouse. Data quality issues will be highlighted in a data quality report made available to the providers for them to take further action before the submission window closes.

Providers of Mental Health Services SHOULD make every effort to resolve inherent systemic errors and address recurring data quality issues.

As an output data set, the MHSDS does not mandate design of local systems or specific local data quality measures. However, the data set developers have outlined recommendations for consideration by data providers to ensure good data quality in respect of the extracted submission. These recommendations can be found in the *Implementation Guidance* available from the SCCI0011 webpage: <http://www.hscic.gov.uk/isce/publication/SCCI0011>

Further Information and Support

All of the MHSDS documentation referenced within this Data Provision Notice are published on the HSCIC's website. In particular, further information about this collection and the mechanism for collecting this data are available from the [MHSDS webpage](#).

For specific enquiries relating to the MHSDS including scope, data items, definitions and data values, future requirements and changes, submission deadlines, analysis and reporting of MHSDS data please contact:

Health and Social Care Information Centre

Telephone: 0300 303 5678

Email: enquiries@hscic.gov.uk (please include 'FAO MHSDS' in subject line)

For enquiries relating to technical products including the MHSDS IDB, or data submissions using the BSP (on Open Exeter) please contact:

Open Exeter helpdesk:

Telephone: 01392 251289 / 0300 303 4034

Email: exeter.helpdesk@hscic.gov.uk (please include 'FAO MHSDS' in subject line)

Burden of the collection

Steps taken by HSCIC to minimise the burden of collection

In discharging its statutory duty to seek to minimise the burden it imposes on others the HSCIC has:

The HSCIC has sought to minimise the burden on care providers by using a newly developed relational data set structure which more closely resembles how the data is locally captured. Allowing a choice of terminology and classification scheme (e.g. SNOMED CT) has minimised the burden of mapping to a single mandated scheme.

In seeking to minimise the burden it imposes on others, in line with sections 253(2a) and 265(3) of the Health and Social Care Act 2012, the HSCIC has an assessment process to validate and challenge the level of burden incurred through introducing new information standards, collections and extractions.

This assessment is carried out by the Burden Advice and Assessment Service (BAAS) who carry out a Detailed Burden Assessment (DBA) and report findings and recommendations, as part of the overarching SCCI process. The Committee oversees the development, assurance and acceptance of information standards, data collections and data extractions for the health and social care system in England.

Whilst the burden is shown is high it should also be taken into consideration that the amalgamation of existing datasets is expected to reduce the overall impact figures BAAS maintain and publish a central register of assessed data collections and extractions, including burden assessment detail relating to all national collections. Further information about the collection and estimated costs can be viewed from this register.

Assessed costs

The associated burden of the data collection is:

Burden on providers	£1m	
Set up costs for the data collection	£1.5m	Based on an additional 5 days per organisation and an additional 3 hours of management time for each. This will reduce once established.
Other costs of the data collection	£2m	£1.5m resources costs and £500k for ongoing maintenance and support for the processing platform. This covers validation, publication and maintenance costs.

Help us to identify inappropriate collections

The whistleblowing service offers a confidential way to refer data collections that you feel might benefit from further scrutiny. Collections referred to the service will receive an objective evaluation, looking at quality, suitability and value to the health and social care system.

You can refer a data collection to the Burden Advice and Assessment Service by completing the form at the link below. Please provide as much information as you can to enable us to effectively investigate any issues.

To refer a data collection please visit www.hscic.gov.uk/article/6183/Burden-Whistleblowing-Service

For further information

www.hscic.gov.uk

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