

NATIONAL HEALTH SERVICE, ENGLAND

The Health and Social Care Information Centre (Learning Disability Census) Directions 2014

The Secretary of State gives the following Directions in exercise of the powers conferred by sections 254(1) and (6), 262(3) and (7), 274(2) and 304(9) and (10) of the Health and Social Care Act 2012(a) and regulation 32 of the National Institute for Health and Social Care Excellence (Constitution and Functions) and the Health and Social Care Information Centre (Functions) Regulations 2013(b).

In accordance with section 254(5) of the Health and Social Care Act 2012, the Secretary of State has consulted the Health and Social Care Information Centre before giving these Directions.

Citation, commencement and interpretation

1.—(1) These Directions may be cited as the Health and Social Care Information Centre (Learning Disability Census) Directions 2014 and come into force on [3rd] September 2014.

(2) In these Directions—

“the Act” means the Health and Social Care Act 2012;

“CAP” means Clinical Audit Platform, which is a systems delivery function of the Secretary of State that uses a secure interface for the collection of confidential information;

“Census date” means the date specified in paragraph 2(2)(a), on which date a Census Response is to be provided by a relevant hospital for the purposes of the Learning Disability Census;

“Census Questions” means questions concerning LDC patients in a relevant hospital on the Census date which are similar to and likely to include most of the questions set out in the Schedule;

“Census Response” means the responses of a relevant hospital to Census Questions;

“confidential information” means information in a form which identifies any individual to whom the information relates who is not a relevant person or enables the identity of such an individual to be ascertained;

“HSCIC” means the Health and Social Care Information Centre(c);

“LDC notification” means a notification from HSCIC to a relevant hospital that requires the relevant hospital to provide HSCIC on the Census date with a Census Response in relation to Census Questions identified in the notification;

“LDC patient” means:—

- (a) a person with a learning disability or an autistic spectrum disorder, or both, and either a mental health condition or behaviour that challenges, or both, who receives in-patient health services from a relevant hospital, whether that person receives the services as part of the health service or otherwise; and
- (b) in relation to whom a relevant hospital has received a LDC notification;

(a) 2012 c. 7 (“the Act”).

(b) S.I. 2013/259.

(c) The Health and Social Care Information Centre is a body corporate established by section 252(1) of the Act.

“Learning Disability Census” means an information collection and analysis system in connection with the provision by relevant hospitals of specialised mental or behavioural health services in a hospital setting to LDC patients which includes:—

- (a) the issuing by HSCIC of a LDC notification to a relevant hospital prior to the Census date;
- (b) the collection on the Census date from a relevant hospital that has received a LDC notification of a Census Response;
- (c) the analysis of information contained in Census Responses by HSCIC in accordance with directions notified in writing to HSCIC as described in paragraph 2(3) and (4)(a); and
- (d) the publication of information obtained from information contained in Census Responses in a form which does not identify any individual to whom the information relates who is not a relevant person or enable the identity of such an individual to be ascertained; and

“relevant hospital” means a facility registered by the Care Quality Commission as a hospital that provides specialist mental or behavioural health services in a hospital setting to LDC patients.

Learning Disability Census

2.—(1) The Secretary of State directs HSCIC to establish and operate the Learning Disability Census.

(2) For the purposes of the Learning Disability Census:—

- (a) the Census date is:—
 - (i) 30th September 2014; or
 - (ii) 30th September 2015,as the context requires; and
- (b) HSCIC must not require a relevant hospital to provide information that is confidential information about, or in relation to, an LDC patient, if the LDC patient has objected to the provision of the confidential information.

(3) HSCIC must carry out the Learning Disability Census functions described in sub-paragraph (1) in accordance with directions notified by the Secretary of State in writing to HSCIC about HSCIC’s exercise of the Learning Disability Census functions:—

- (a) as at the date these Directions come into force; or
- (b) as those directions are amended and notified by the Secretary of State in writing to HSCIC from time to time.

(4) The directions referred to in sub-paragraph (3) may include directions about:—

- (a) the collection or analysis by HSCIC of confidential information, including the disaggregation of confidential information from other information collected or analysed by HSCIC;
- (b) the dissemination of confidential information:—
 - (i) which HSCIC collects pursuant to sub-paragraph (1); or
 - (ii) under a power HSCIC has under or by virtue of a provision of the Act other than section 261(1) or (5) or any other Act to disseminate information which HSCIC obtains by complying with sub-paragraph (1).

(5) In exercising the Learning Disability Census functions referred to in sub-paragraph (1), HSCIC must have regard to such priorities, policies, advice or guidance of the Secretary of State as the Secretary of State may notify in writing to HSCIC.

Systems delivery functions for the Learning Disability Census

3.—(1) The Secretary of State directs HSCIC to exercise such systems delivery functions of the Secretary of State as are necessary for it to deliver the functions described in paragraph 2(1).

(2) The systems delivery functions mentioned in sub-paragraph (1) include the CAP.

(3) HSCIC must exercise the systems delivery functions referred to in sub-paragraph (1) in accordance with directions notified by the Secretary of State in writing to HSCIC about HSCIC's exercise of the systems delivery functions:—

(a) as at the date these Directions come into force, or

(b) as those directions are amended and notified by the Secretary of State in writing to HSCIC from time to time.

(4) In exercising the systems delivery functions referred to in sub-paragraph (1), HSCIC must have regard to such priorities, policies, advice or guidance of the Secretary of State as the Secretary of State may notify in writing to HSCIC.

Payments for the Learning Disability Census

4. The Secretary of State may make payments to HSCIC for things done in connection with the exercise of systems delivery functions for the Learning Disability Census.

Reports and accounts

5.—(1) HSCIC must provide the Secretary of State with such reports and information as the Secretary of State may specify in a direction in writing in connection with the Learning Disability Census.

(2) The Secretary of State may specify in a direction in writing the form, manner or timing of a report required pursuant to sub-paragraph (1).

(3) In particular, HSCIC must provide the Secretary of State with reports on the exercise of its functions under this Direction, by:—

(a) 31st December 2014; and

(b) 31st March 2015.

(4) HSCIC must keep proper accounts, and proper records in relation to the accounts, in connection with the Learning Disability Census.

Signed by authority of the Secretary of State for Health



F. S. MEMVOOR, Name

Address RICHMOND HOUSE, 79 WHITMANE Member of the Senior Civil Service

Date LONDON SW1A 2NS Department of Health

23/09/2014

SCHEDULE

Paragraph 1(2)

Examples of questions concerning LDC patients

Consent Question

Has the patient objected to having their data / information about them and their care shared by the Health and Social Care Information Centre (HSCIC)?

Has the patient withdrawn their consent to the HSCIC processing their data / information while it is identifiable as relating to them?

Patient Registration Information

Q1. Surname of patient

- Q2. First name(s) of patient
- Q3. NHS Number of patient
- Q4. Patient's date of birth
- Q5. Gender of patient
- Q6. Patient's ethnicity
- Q7. How was the ethnicity determined?
- Q8. Provider Organisation Code
- Q9a. What was the patient's residence prior to admission?
- Q9b. If Q9a is coded Other please specify
- Q9c. Full Post Code of last known residential address of patient before admission to hospital
- Q9d. The first line of the full residential address of the patient before admission
- Q9e. The second line of the full residential address of the patient before admission
- Q9f. The third line of the full residential address of the patient before admission
- Q9g. The town of the full residential address of the patient before admission
- Q10. Full Post Code of next of kin
- Q11. What is the legal status of the patient on census day?

Information on Admission / Census Day

- Q12a. What was the legal status of the patient on admission to this facility?
- Q12b. If the patient was subject to the Mental Health Act on the date of admission to services, what was the start date of the order in place at the time?
- Q13. Is the patient receiving treatment authorised without their consent by a Second Opinion Approved Doctor under section 58 of the Mental Health Act?
- Q14. Was the patient subject to "deprivation of liberty authorisation"?
- Q15. Who is the referrer?
- Q16a. Date of admission to current hospital spell with this provider
- Q16b. Date of the first admission to any hospital as part of this continuous period of inpatient care.
- Q17a. On Census day what was the main treatment reason for the patient remaining in hospital?
- Q17b. On Census day was a diagnostic category of Learning Disability (ICD codes F70 to F79) applicable to the patient?
- Q17c. On Census day was a diagnostic category on the Autistic Spectrum made to include Asperger's Syndrome (ICD codes F840, F841 or F845) applicable to the patient?
- Q17d. On Census day was a diagnostic category of Psychotic disorder (ICD codes F20 to F29) applicable to the patient?
- Q17e. On Census day was a diagnostic category of Affective disorder (F30 to F39) applicable to the patient?
- Q17f. On Census day was a diagnostic category of Personality disorder (F60 to F69) applicable to the patient?

Q17g. On Census day was a diagnostic category of Other mental illness (applicable to the patient)?

Q17h. If Q17g is coded 2 or 3 then please specify the ICD10 code.

Q18a. On Census day, was the patient recorded to be at risk of the following behavioural problems: violence or threats of violence to others?

Q18b. On Census day, was the patient recorded to be at risk of the following behavioural problems: sexual behaviour constituting risk to others?

Q18c. On Census day, was the patient recorded to be at risk of the following behavioural problems: sexual behaviour constituting risk to self?

Q18d. On Census day, was the patient recorded to be at risk of the following behavioural problems: risk of fire setting?

Q18e. On Census day, was the patient recorded to be at risk of the following behavioural problems: injury to self?

Q18f. On Census day, was the patient recorded to be at risk of the following behavioural problems: property damage?

Q18g. On Census day, was the patient recorded to be at risk of the following behavioural problems: other (please specify)?

Q19. Is the patient blind or does the patient have sight impairment?

Q20. Is the patient deaf or does the patient have a hearing impairment?

Q21. Does the patient use a wheelchair or have mobility impairment?

Q22. How does the patient communicate?

Q23a. Is it recorded in the patient care plan that the patient has difficulty with understanding spoken language?

Q23b. Is it recorded in the patient care plan that the patient has difficulty expressing themselves?

Q23c. Is it recorded in the patient care plan that the patient has difficulty engaging with others?

Experience of care at this hospital

Q24. The number of times any of the following incidents have been recorded for the patient during the hospital spell or within the last three months (if hospital spell is longer) – Self Harm

Q25. The number of times any of the following incidents have been recorded for the patient during the hospital spell, or within the last three months (if hospital spell is longer) – Accidents

Q26. The number of times any of the following incidents have been recorded for the patient during the hospital spell, or within the last three months (if hospital spell is longer) – Physical assault on the patient

Q27. The number of times any of the following incidents have been recorded for the patient during the hospital spell, or within the last three months (if hospital spell is longer) – Hands on restraint

Q28. The number of times any of the following incidents have been recorded for the patient during the hospital spell, or within the last three months (if hospital spell is longer) – Seclusion

Accommodation Information

Q29. Is the gender designation of the ward to which the patient has been admitted male only, female only or mixed?

Q30. If Mixed ward, is there a Single Sex Sleeping area?

Q31. If Mixed ward, is there a Single Sex bathing area?

Q32. If Mixed ward, is there a Single Sex day space?

Location Details

Q33. Hospital site code where the patient is receiving treatment

Q34. Hospital name where the patient is receiving treatment

Q35. Postcode of the hospital where the patient is receiving treatment

Q36. What is the predominant service type of the ward?

Q37a. What is the lower limit of the intended age range of patients using the ward?

Q37b. What is the upper limit of the intended age range of patients using the ward?

Q38. What is the ward security level?

Q39. What is the ward type?

Patient Care Details

Q40a. In the last 28 days prior to Census day has the patient received any anti-psychotic medication?

Q40b. If response for Q40a is coded as 2, 3, or 4, was this:

For the treatment of a formally diagnosed mental illness;

For the management of challenging behaviour;

A therapeutic trial in the context of uncertainty about psychiatric diagnosis: Other?

Q40c. If Q40b is coded as Other, please specify

Q41. In the last 28 days prior to Census day has the patient received rapid tranquilisation medication?

Q42. Does the patient's care plan include a positive behaviour support plan?

Q43. Has the patient's care plan involved leaving the hospital for therapeutic work in the last 28 days?

Q44a. Has the patient's Care Plan been agreed with the Commissioner of the placement/Care Manager?

Q44b. Has the patient's Care Plan been agreed with the relevant Community Clinical Team?

Q44c. Details of patient's Care Plan

Q44d. If Q44c was coded as 6 then please explain the reason for the delay.

Q44e. If Q44c was coded as 6 then please explain what the delay is attributed to.

Q44f. In the last year, there has been:

A shared review which involved an independent, face-to-face assessment by a clinician from a relevant community clinical team;

Discussions with members of the relevant community clinical team in the last year, but not including independent clinical assessment;

Discussions with the placement Commissioner/Care Manager;

None of the above.

Q44g. Are members of the patient's family currently involved in discussing the patient's Care Plan?

Q45a. Has the patient made use of independent advocacy in the last 12 months?

Q45b. If Q45a is yes, has the patient made use of an independent advocate – family member (someone who has been asked by, or given permission by the patient to represent them)?

Q45c. If Q45a is yes, has the patient made use of an independent person (someone who has been asked by, or given permission by the patient to represent them)?

Q45d. If Q45a is yes, has the patient made use of a formal Independent Mental Capacity Advocate (IMCA)?

Q45e. If Q45a is yes, has the patient made use of an Independent Mental Health Advocacy (IMHA)?

Q45f. If Q45a is yes, has the patient made use of a non-instructed advocate?

Q45g. If Q45a is no, why not?

Commissioning and Cost of Care

Q46a. Organisation Code of Commissioner

Q46b. Name of Commissioner

Q47. What is the actual weekly charge to the commissioner of the patient's placement? (to the nearest £100)

Q48a. Which Commissioner, other organisation or individual is paying for the cost of treatment and care?

Q48b. If Q48a is coded 1, which CCG is paying for the cost of the patient's treatment and care?

Q48c. If Q48a is coded 4, which Other NHS provider is the recognised commissioner for the cost of the patient's treatment and care?

Q48d. If Q48a is coded 5, which CCG is the recognised funder for the cost of the patient's treatment and care?

Q48e. If Q48a is coded 6, which Local Authority is the recognised commissioner for the cost of the patient's treatment and care?

Q48f. If Q48a is coded 7, indicate the source of private funding of the cost of the patient's treatment and care?