

Data Provision Notice

COVID-19 Daily NHS Provider MHLDA SitRep & COVID-19 Daily Independent
Provider MHLDA SitRep

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Version: 1.0

Publication date: 14 February 2025

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Background

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

The data, as specified by NHS England in this published Data Provision Notice, is required to support a direction from the Secretary of State for Health and Social Care to NHS England. 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

It is important for the MH Programme, regions and ICBs to have accurate and timely information on mental health inpatient bed capacity and availability in the system as well as the pressures on the main providers of mental health inpatient care in local areas. It is also important to understand the volume of beds occupied by patients who are clinically ready for discharge but where their discharge is delayed, as well as the barriers to discharge from hospital. Required information includes:

- Number of beds by type:
- Occupied
- Unoccupied
- Closed
- Number of beds occupied by people Clinically Ready for Discharge (CRFD)
- Reasons for delayed discharge

Data is reported weekly through a dashboard available on FutureNHS. The dashboard is restricted. Those with access are mainly internal NHSE staff from central and regional teams but also include occasional users from ICBs, CSUs, providers, local authorities and CQC.

The aggregate data is shared with regional teams.

This collection is expected to run from 1st October 2024 this data is available in the Mental Health Services Data Set (MHSDS): <https://digital.nhs.uk/data-and-information/data-collections-and-data-sets/data-sets/mental-health-services-data-set>

NHS England has a statutory obligation to keep collections under review on an ongoing basis. As such a review date must be set at which point NHS England will review the continuing need for this collection.

Benefits

This information will:

- support the management of capacity and patient flow within regions by providing regions and ICBs with a weekly view of pressures on the main providers in their area
- be used by regional analytics teams to produce weekly reports on bed occupancy, availability and CRFD

- be used by regions to inform provider discussions with the aim of reducing inappropriate out of area placements. NB: Inappropriate out of area placements is one of the key NHS planning metrics for mental health in 2024/25.
- provide data to support the national MH OPEL framework which is being developed to support effective operational management of inpatient services.
- be used by the national policy team to better understand the barriers to discharge as well as demonstrate to Government the wider pressures with housing and social care that are impacting on mental health services.

Please provide a brief plain English summary of the benefits that will be realised by the successful collection and use of the data. This may be in the form of a list. Please emphasise those that will be of most interest to the target audience of this Notice.

Legal basis for collection, analysis, publication and dissemination

NHS England has been directed by the Secretary of State for Health and Social Care 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. The direction and accompanying requirements specification are published on the NHS England website: <https://gbr01.safelinks.protection.outlook.com/?url=https%3A%2F%2Fdigital.nhs.uk%2Fabout-nhs-digital%2Fcorporate-information-and-documents%2Fdirections-and-data-provision-notices%2Fnhs-england-directions%2Fmental-health-services-directions-2020&data=05%7C02%7Csarah.freeman4%40nhs.net%7C5369972c23a24a8e997b08dcdbee1921%7C37c354b285b047f5b22207b48d774ee3%7C0%7C0%7C638627063745456201%7CUnknown%7CTWFpbGZsb3d8eyJWljojMC4wLjAwMDAiLCJQIjoiV2luMzliLCJBTiI6Ij1haWwiLCJXVCi6Mn0%3D%7C0%7C%7C%7C&sdata=IBnRDouvcrTiJlwgkcYhUL5rHPFvZolSnV%2FfCnBxMlo%3D&reserved=0>

This information is required by NHS England under section 259(1)(a) of the Health and Social Care Act 2012.

In line with section 259(5) of the Act, all organisations in scope, in England, must comply with the requirement and provide information to NHS England in the form, manner and period specified in this Data Provision Notice.

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

Persons consulted

Following receipt of a direction to establish a system to collect [enter name of collection], NHS England has, as required under section 258 of the Health and Social Care Act 2012, consulted with the following persons:

- Department of Health and Social Care (as the directing organisation)
- NHS England analytical teams
- MHLDA service providers

Scope of the collection

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

- Mental Health, Learning Disability and Autism and Community Services (NHS Providers)
- Mental Health, Learning Disability and Autism, and Community Services (Independent sector)

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

Form of the collection

The following aggregate data items are collected:

Number of beds by type:

- Occupied
- Occupied by patient with a learning disability or who is autistic
- Unoccupied
- Closed
- Number of beds occupied by people Clinically Ready for Discharge (CRFD)
- Reasons for delayed discharge of those CRFD

Bed types: acute adult mental health beds, acute older adult mental health beds, PICU beds, specialised commissioned mental health beds, ICB commissioned learning disability beds, specialised commissioned learning disability beds, other beds.

Manner of the collection

Each submitting organisation will employ a controlled MS Excel template as the means to collect the data stipulated for each SitRep.

Organisations will submit their data via the NHSE Strategic Data Collection Service (SDCS). Guidance on how to register and upload the data template is available here:

<https://digital.nhs.uk/services/strategic-data-collection-service-sdcs/strategic-data-collection-service-for-general-collections---user-guidance>

Period of the collection

From 1st October 2024, data is submitted daily to NHS England's submission platform The Strategic Data Collections Service (SDCS) between 8am-1pm.

Data quality

Data quality validations are built into the purpose-built Excel submission templates to ensure consistency and accuracy of submitted data.

Burden of the collection

Steps taken by NHS England to minimise the burden of collection

NHS England has a statutory duty under section 253(2) of the Act to seek to minimise the burden it imposes on others. In seeking to meet these obligations in relation to this collection.

Burden assessments did not take place these SitRep collections. The urgent requirement for the data to support the nationwide response of the NHS to COVID-19 outweighed the requirement for such assessments at when the data collections were set up originally.

The COVID19 data items have been removed from these data collections as part of NHS England's commitment to retire unnecessary data collections. While the covid-specific data is no longer needed, data on bed occupancy and reasons for delay when patients are clinically ready for discharge (CRfD) remains important. While these data items are also now in MHSDS v6, the more-timely sitrep data is needed over the winter period. NHS England plans to retire the Sitrep altogether from Q1 2025/26, allowing sufficient time for data quality/completeness to improve in the MHSDS and for new indicators to be developed.