

**DSC Notice: DSCN (2009) 07 (W)**  
**English DSCN Equivalent: N/A**  
**Initiating Welsh Reference: WHC (2005)048; EH/ML/29/08**  
**Date of Issue: 2<sup>nd</sup> June 2009**

<b>WIGSB</b> <b>Welsh Information Governance</b> <b>and Standards Board</b>	<b>Subject: Crisis Resolution / Home Treatment Services</b>
	<b>Implementation date: 1<sup>st</sup> April 2009</b>

**Summary of change:**

To introduce the Crisis Resolution / Home Treatment Monthly Data Collection to monitor delivery of Crisis Resolution / Home Treatment Services in NHS Wales.

These changes will be applied in version 2.21 of the NHS Wales Data Dictionary.

<b>WIGSB Reference No:</b> <b>IGRN 2008 / 017</b>
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Welsh Information Governance and Standards Board (WIGSB), is responsible for approving information standards.

Please address enquiries about Data Set change proposals to the Data Standards and Data Quality Team, HSW, Brunel House, 2 Fitzalan Road, Cardiff CF24 0HA Tel: 029 20502539 or E-mail [Data.Standards@hsm.wales.nhs.uk](mailto:Data.Standards@hsm.wales.nhs.uk)

Data Set Change Notices are available via the Intranet Service HOWIS <http://howis.wales.nhs.uk/sites3/home.cfm?orgid=299> or by contacting the above address.

**Draft DSCN numbering format** = (year of draft) 2-character alpha (W).

Upon receiving approval for the change by WIGSB, the draft DSCN number will be reformatted to:  
**DSCN number format** = (year of issue) 2-character numeric (W)

In addition,  
**WIGSB Reference No. format** = WIGSB Submission Reference

## DSCN Distribution List

<b>Name</b>	<b>Job Title</b>	<b>Organisation</b>
Carol Davies	Data Services Co-ordinator	Abertawe Bro Morgannwg University NHS Trust
Helen Thomas	Acting Assistant Director of Information	Abertawe Bro Morgannwg University NHS Trust
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Deborah Usher	Information Manager	Abertawe Bro Morgannwg University NHS Trust
John Dicker	Regional IM&T Manager	Business Services Centre
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Mark Piper	Information Services Business Manager	Business Services Centre
Trevor Hughes	Regional Information Manager	Business Services Centre
Tim O'Sullivan	Regional Information Manager	Business Services Centre
Vince Lacey	Acting Head of IM&T Manager	Business Services Centre
Alan Roderick	Acting Head of Performance & Information	Cardiff and Vale NHS Trust
Kerry Ashmore	Information Modernisation & Development Manager	Cardiff and Vale NHS Trust
Steven Thomson	Information Manager	Cardiff and Vale NHS Trust
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Graham Crooks	Information Manager	Cwm Taf NHS Trust
Jack Attwood	Head of Information Services	Cwm Taf NHS Trust
Lloyd Bishop	Head of Business Information Systems	Cwm Taf NHS Trust
Sonia Stevens	Head of Information	Gwent Healthcare NHS Trust
Cath Jones	Principal Information Manager	Gwent Healthcare NHS Trust
Robin Jones	Director of Informatics	Hywel Dda NHS Trust
Carl Davies	Deputy Software Development Manager	Hywel Dda NHS Trust
Debbie Croft	Information Manager	Hywel Dda NHS Trust
Eric Lewis	Head of Information	Hywel Dda NHS Trust
Richard Noyce	Senior Information Analyst	Hywel Dda NHS Trust
Nia Jones	Acting Information Services Manager	Hywel Dda NHS Trust
Michelle Campbell	Corporate Information Manager	Hywel Dda NHS Trust
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Peter Burcham	Senior Information Analyst	North Wales NHS Trust (Central)
Christine Fisher	Head of Information	North Wales NHS Trust (East)
Janet Holmes	Information Analyst Community & Mental Health	North Wales NHS Trust (East)
Jeff Pye	Head of IM&T	North West Wales NHS Trust
Vaughan Hughes	Information Manager	North West Wales NHS Trust
Lynda James	Head of Information	Powys LHB
Mike Jones	Operational	Powys LHB
Tracey Jones	Information Services Manager	Powys LHB
Dave Morrey	Information Manager	Velindre NHS Trust
David Howells	Senior Analyst Programmer	Velindre NHS Trust
Gordon McKenzie	Head of Information Services Division	Welsh Assembly Government
Sally Greenway	Head of Information Standards	Welsh Assembly Government
David Hawes	Corporate Health Information Programme	Welsh Assembly Government
Anthony Tracey	Corporate Health Information Programme	Welsh Assembly Government
Catherine Bridges	Information Services Division, Information Analysis	Welsh Assembly Government
Martyn Rees	Department of Health and Social Services	Welsh Assembly Government
Pam Hall	Corporate Health Information Programme	Welsh Assembly Government
Sue Leake	Health Statistics & Analysis Unit	Welsh Assembly Government
Denise Roberts	Financial Information Service	Welsh Assembly Government
Shelagh Reynolds	General Manager	Welsh Cancer Intelligence & Surveillance Unit

<b>Gareth John</b>	<b>Head of Information Products Unit</b>	<b>Health Solutions Wales</b>
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## Document Control

<b>Version:</b>	<b>Changed on:</b>	<b>Owner</b>	<b>Details:</b>
0.01	16/03/2009	Rebecca Wells	DSCN produced following sign off of aggregate counts and explanatory diagram by DSCN sub-group. DSCN submitted for approval to sub-group 25 <sup>th</sup> March 2009.
0.02	07/04/2009	Rebecca Wells	DSCN updated following DSCN sub-group review 25 <sup>th</sup> March 2009. Sub-Group members to sign off by 9 <sup>th</sup> April 2009.
0.03	16/04/2009	Rebecca Wells	DSCN updated following review by Emrys Elias, submitter and developer of standard.
0.04	08/05/2009	Rebecca Wells	DSCN to be updated following submission to WIGSB. Changes agreed at the DSCN sub-group on the 29 <sup>th</sup> April 2009. DSCN to be signed off by Developers of Standard and circulated out of committee to members for approval.
0.05	26/05/2009	Rebecca Wells	Slight cosmetic alterations made following final sign off of the DSCN from the DSCN sub-group. DSCN issued to WIGSB for Final Approval 26 <sup>th</sup> May 2009.
1.0	02/06/2009	Rebecca Wells	DSCN Approved by WIGSB Out of Committee and Issued to the Service 2 <sup>nd</sup> June 2009.

## DATA SET CHANGE NOTICE (2009) 07 (W)

**WIGSB Reference:** IGRN 2008 / 017

**Subject:** Crisis Resolution / Home Treatment Services

**Reason for Change:** To Support the Annual Operating Framework 2009/10 Target – Crisis Resolution / Home Treatment Services

**Implementation Date:** 1<sup>st</sup> April 2009

### **Background:**

Crisis Resolution Services have been implemented in response to WHC (2005)048 Policy Implementation Guidance on the development of Crisis Resolution/Home Treatment Services in Wales. Across Wales service models are variable, ranging from a comprehensive multidisciplinary team approach to a single person service or no service at all.

A project was established in Wales to provide the opportunity to monitor progress against the delivery of Crisis Resolution Services. The initial project included four Key Performance Indicators (KPIs) which led to the development of the Crisis Resolution / Home Treatment Data Collection and the Annual Operating Framework Targets introduced in EH/ML/29/08:-

*“To achieve a Crisis Resolution Home Treatment service and other community services that ensures:*

- 95% of service users admitted to a psychiatric hospital between 0900 and 2100 will have received a gate-keeping assessment by the CRHT service prior to admission; and
- 100% of service users admitted to a psychiatric hospital, who have not received a gate keeping assessment by the CRHTS, will receive a follow up assessment by the CRHTS within 24 hours of admission.”

The Crisis Resolution / Home Treatment Aggregate Data Collection will inform the effectiveness of service delivery and enable measurement against the Annual Operating Framework Targets.

### **Description of Change:**

This DSCN introduces the information requirements that have been developed to support the Annual Operating Framework 2009/10 Target. The information required will relate to **all** adult patients over the age of 18 years referred to Welsh Organisations, including non-Welsh residents, and from all sources.

### **Actions Required:**

- Organisations are required to report on a monthly basis, on the 10<sup>th</sup> working day of each month for the previous month.
- The daily data collection and monthly submission proforma is available as an Excel spreadsheet and is presented at Appendix D.

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Author: Data Standards & Data Quality, HSW  
Template Version: 0.01

Date Created: 02/06/2009  
Date Printed: 02/06/2009  
Status: Final  
Version: 1.0

- For submission purposes, files should be names as:  
CRHT[team]mmmyy.xls  
Where [team] = The CRHT Service to which the return relates  
mmm = First three letters of the month to which the return relates  
yy = Last two digits of the year
- Files should be submitted to [ISD.CAT@wales.gsi.gov.uk](mailto:ISD.CAT@wales.gsi.gov.uk)

**Changes to be applied to the NHS Wales Data Dictionary:**

Table reflecting areas that are impacted as a result of this DSCN can be found in Appendix A.

Changes to be made to the NHS Wales Data Dictionary are highlighted in Appendix B.

Changes as they will appear in the NHS Wales Data Dictionary can be found in Appendix C.

**Appendix A: Table reflecting areas that are impacted as a result of this DSCN.**

The following table shows all Data Items, Terms and associated areas that are linked with the changes documented within this DSCN.

<b>Data Definition Type</b>	<b>Name</b>	<b>New / Retired / Changed</b>
Data Items & Terms Grouped by Data Set	Crisis Resolution / Home Treatment Services	New

## **Appendix B: Highlighted changes to be made to the NHS Wales Data Dictionary**

Changes to the NHS Wales Data Dictionary are detailed below, with new text being highlighted in **blue** and deletions are shown with a ~~strikethrough~~. The text shaded in **grey** shows existing text copied from the NHS Wales Data Dictionary.

### **Crisis Resolution / Home Treatment Services Monthly Data Collection**

#### **Valid From: 1<sup>st</sup> April 2009**

Organisations are required to report on a monthly basis, on the 10<sup>th</sup> working day of each month for the previous month. The daily data collection and monthly submission proforma is available as an Excel spreadsheet from the Delivery and Support Unit and is presented at Appendix D.

For submission purposes, files should be names as:

CRHT[team]mmmyy.xls

Where [team] = The CRHT Service to which the return relates

mmm = First three letters of the month to which the return relates

yy = Last two digits of the year

- Files should be submitted to [ISD.CAT@wales.gsi.gov.uk](mailto:ISD.CAT@wales.gsi.gov.uk)

Organisations are required to report the following information in an excel file format on the 10th working day of the month for the previous month.

In addition to the information requirements, Organisations should include the following in their excel spreadsheet:

- CRHT Team –*Team to which the return relates*
- Return Month –*This is the calendar month to which the return relates*

Organisations should e-mail their returns to [ISD.CAT@wales.gsi.gov.uk](mailto:ISD.CAT@wales.gsi.gov.uk) with the subject 'Crisis Resolution'.

### **Information Requirements**

Note: Numbers 1-17 of the aggregated count relate to the explanatory diagram below:

#### **Referrals:**

**1. Total Number of Referrals Received**

*This is the total number of referrals received by the CRHT Service*

**2. Number of Appropriate Referrals Accepted for Assessment**

*This is the number of referrals that are appropriate (as defined in WHC (2005) 048) and are accepted onto the CRHT caseload for assessment*

**3. Number of Rejected Appropriate Referrals Not Assessed Due to Lack of Capacity**

*This is the number of appropriate referrals rejected for assessment by the CRHT Service due to lack of service capacity.*

**4. Number of Inappropriate Referrals**

This is the number of referrals deemed to be inappropriate referrals by the CRHT service (as defined in WHC (2005) 048).

**5. Time Referrals Accepted by CRHT Service**

This is the number of referrals within each time period accepted onto case load by the CRHT Service . (24 Hour Clock)

09:00 – 11:59

12:00 – 14:59

15:00 – 17:59

18:00 – 20:59

21:00 – 08:59

**6. Time Between Referral and Face to Face Contact with CRHT Service**

This is the time in hourly bands between the time the referral is accepted by the CRHT service and the time the face to face assessment is undertaken by a CRHT team practitioner. Patients who do not receive an assessment by a CRHT Practitioner following acceptance of an appropriate referral should be counted in 'Assessment Not Undertaken'.

≤ 1 hour

> 1 hour: ≤ 2 hours

> 2 hours: ≤ 3 hours

> 3 hours: ≤ 4 hours

> 4 hours: Crisis

> 4 hours: Home Treatment

Assessment Not Undertaken

**Outcomes of Assessment:**

**7. Number of Patients Admitted to the MH Inpatient Unit – Agreed by CRHT Service**

This is the number of patients admitted to the Mental Health Inpatient Unit that have been agreed by the CRHT Service following assessment within the hours of 9am - 9pm.

**8. Number of Patients Received Home Treatment from CRHT Service**

This is the number of patients who received home treatment from the CRHT Service following assessment.

**9. Number of Patients Received Home Treatment but NOT from CRHT Service**

This is the number of patients who received home treatment following assessment but home treatment not undertaken by the CRHT Service.

**10. Number of Patients Who Chose Not to Receive Treatment**

This is the number of patients who chose not to receive treatment following assessment from the CRHT Service.

**11. Number of Patients Discharged back to Referrer**

This is the number of patients who were discharged back to referrer following assessment by the CRHT Service with NO Home Treatment.

**Admissions:**

**12. Total Number of Admissions to Mental Health Inpatient Units**

**7. Number of Admissions to MH Inpatient Unit Agreed by CRHT**

This is the number of patients admitted to the MH Inpatient Unit between the hours of 9am and 9pm agreed by the CRHT Service.

**13. Number of Admissions to MH Inpatient Unit NOT Agreed by CRHT**

This is the number of patients admitted to the MH Inpatient Unit within the hours of 9am and 9pm not agreed by the CRHT Service.

**14. Number of Admissions to MH Inpatient Unit with No CHRT Involvement**

This is the number of patients admitted to the MH Inpatient Unit with no involvement from the CRHT Service outside the hours of 9am and 9pm.

**Follow-Up:**

**15. Number of Follow-Up Assessment Undertaken within 24 Hours**

This is the number of patients who received a follow-up assessment within 24 hours of admission to the MH Inpatient Unit who have had no prior assessment with the CRHT service.

**16. Number of Follow-Up Assessments NOT Undertaken within 24 Hours**

This is the number of patients who DID NOT receive a follow-up assessment within 24 hours of admission to the MH Inpatient Unit who had no prior assessment with the CRHT service.

**Home Treatment:**

**17. Duration of Home Treatment**

This is an aggregate counts of the period of time in weeks between assessment and completion of Home Treatment.

- ≤ 1 week
- > 1 week: ≤ 2 weeks
- > 2 weeks: ≤ 3 weeks
- > 3 weeks: ≤ 4 weeks
- > 4 weeks: ≤ 5 weeks
- > 5 weeks: ≤ 6 weeks
- > 6 weeks: ≤ 7 weeks
- > 7 weeks: ≤ 8 weeks
- > 8 weeks

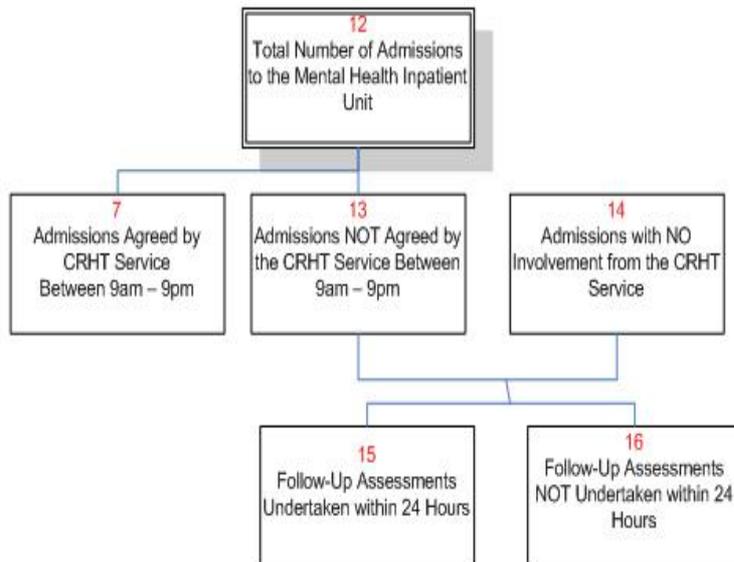
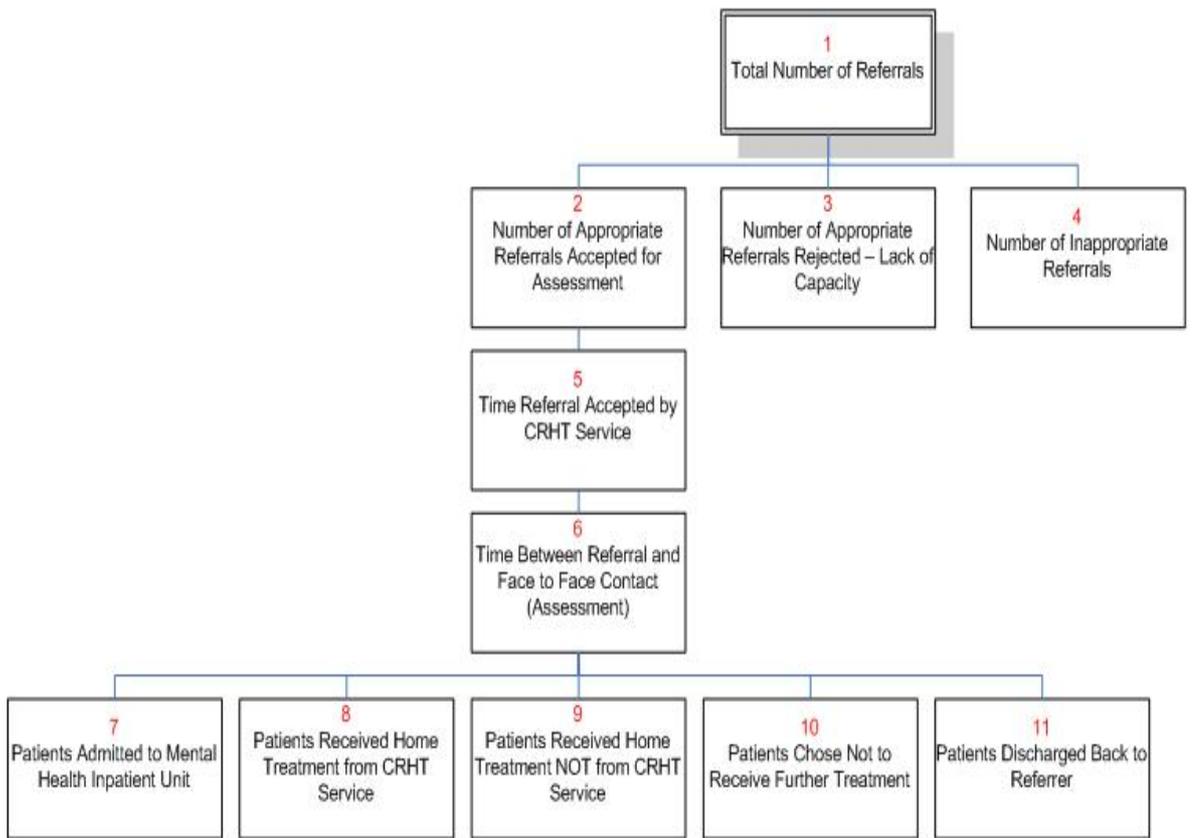
**18. Discharge Destination**

This is a count of the destination agreed following completion of CRHT Service Home Treatment Intervention.

- Community Mental Health Team
- General Practice
- Mental Health Inpatient Unit
- Other

$7 / (7 + 13) * 100 = \% \text{ of service users admitted to a psychiatric hospital between 0900 and 2100 will have received a gate-keeping assessment by the CRHT service prior to admission}$

*15 / (13 + 14) \* 100 = % of service users admitted to a psychiatric hospital, who have not received a gate keeping assessment by the CRHTS, will receive a follow up assessment by the CRHTS within 24 hours of admission.”*



## **Appendix C: Data Items and Term as they will appear in the Data Dictionary.**

### **Crisis Resolution / Home Treatment Services Monthly Data Collection**

**Valid From: 1<sup>st</sup> April 2009**

Organisations are required to report on a monthly basis, on the 10<sup>th</sup> working day of each month for the previous month. The daily data collection and monthly submission proforma is available as an Excel spreadsheet from the Delivery and Support Unit and is presented at Appendix D.

For submission purposes, files should be names as:

CRHT[team]mmmyy.xls

Where [team] = The CRHT Service to which the return relates

mmm = First three letters of the month to which the return relates

yy = Last two digits of the year

- Files should be submitted to [ISD.CAT@wales.gsi.gov.uk](mailto:ISD.CAT@wales.gsi.gov.uk)

Organisations are required to report the following information in an excel file format on the 10th working day of the month for the previous month.

In addition to the information requirements, Organisations should include the following in their excel spreadsheet:

- CRHT Team –*Team to which the return relates*
- Return Month –*This is the calendar month to which the return relates*

Organisations should e-mail their returns to [ISD.CAT@wales.gsi.gov.uk](mailto:ISD.CAT@wales.gsi.gov.uk) with the subject 'Crisis Resolution'.

### **Information Requirements**

Note: Numbers 1-17 of the aggregated count relate to the explanatory diagram below:

#### **Referrals:**

##### **19. Total Number of Referrals Received**

*This is the total number of referrals received by the CRHT Service*

##### **20. Number of Appropriate Referrals Accepted for Assessment**

*This is the number of referrals that are appropriate (as defined in WHC (2005) 048) and are accepted onto the CRHT caseload for assessment*

##### **21. Number of Rejected Appropriate Referrals Not Assessed Due to Lack of Capacity**

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*This is the number of appropriate referrals rejected for assessment by the CRHT Service due to lack of service capacity.*

**22. Number of Inappropriate Referrals**

This is the number of referrals deemed to be inappropriate referrals by the CRHT service (as defined in WHC (2005) 048).

**23. Time Referrals Accepted by CRHT Service**

This is the number of referrals within each time period accepted onto case load by the CRHT Service . (24 Hour Clock)

09:00 – 11:59

12:00 – 14:59

15:00 – 17:59

18:00 – 20:59

21:00 – 08:59

**24. Time Between Referral and Face to Face Contact with CRHT Service**

This is the time in hourly bands between the time the referral is accepted by the CRHT service and the time the face to face assessment is undertaken by a CRHT team practitioner. Patients who do not receive an assessment by a CRHT Practitioner following acceptance of an appropriate referral should be counted in 'Assessment Not Undertaken'.

≤ 1 hour

> 1 hour: ≤ 2 hours

> 2 hours: ≤ 3 hours

> 3 hours: ≤ 4 hours

> 4 hours: Crisis

> 4 hours: Home Treatment

Assessment Not Undertaken

**Outcomes of Assessment:**

**25. Number of Patients Admitted to the MH Inpatient Unit – Agreed by CRHT Service**

This is the number of patients admitted to the Mental Health Inpatient Unit that have been agreed by the CRHT Service following assessment within the hours of 9am - 9pm.

**26. Number of Patients Received Home Treatment from CRHT Service**

This is the number of patients who received home treatment from the CRHT Service following assessment.

**27. Number of Patients Received Home Treatment but NOT from CRHT Service**

This is the number of patients who received home treatment following assessment but home treatment not undertaken by the CRHT Service.

**28. Number of Patients Who Chose Not to Receive Treatment**

This is the number of patients who chose not to receive treatment following assessment from the CRHT Service.

**29. Number of Patients Discharged back to Referrer**

This is the number of patients who were discharged back to referrer following assessment by the CRHT Service with NO Home Treatment.

**Admissions:**

**30. Total Number of Admissions to Mental Health Inpatient Units**

**8. Number of Admissions to MH Inpatient Unit Agreed by CRHT**

This is the number of patients admitted to the MH Inpatient Unit between the hours of 9am and 9pm agreed by the CRHT Service.

**31. Number of Admissions to MH Inpatient Unit NOT Agreed by CRHT**

This is the number of patients admitted to the MH Inpatient Unit within the hours of 9am and 9pm not agreed by the CRHT Service.

**32. Number of Admissions to MH Inpatient Unit with No CHRT Involvement**

This is the number of patients admitted to the MH Inpatient Unit with no involvement from the CRHT Service outside the hours of 9am and 9pm.

**Follow-Up:**

**33. Number of Follow-Up Assessment Undertaken within 24 Hours**

This is the number of patients who received a follow-up assessment within 24 hours of admission to the MH Inpatient Unit who have had no prior assessment with the CRHT service.

**34. Number of Follow-Up Assessments NOT Undertaken within 24 Hours**

This is the number of patients who DID NOT receive a follow-up assessment within 24 hours of admission to the MH Inpatient Unit who had no prior assessment with the CRHT service.

**Home Treatment:**

**35. Duration of Home Treatment**

This is an aggregate counts of the period of time in weeks between assessment and completion of Home Treatment.

- ≤ 1 week
- > 1 week: ≤ 2 weeks
- > 2 weeks: ≤ 3 weeks
- > 3 weeks: ≤ 4 weeks
- > 4 weeks: ≤ 5 weeks
- > 5 weeks: ≤ 6 weeks
- > 6 weeks: ≤ 7 weeks
- > 7 weeks: ≤ 8 weeks
- > 8 weeks

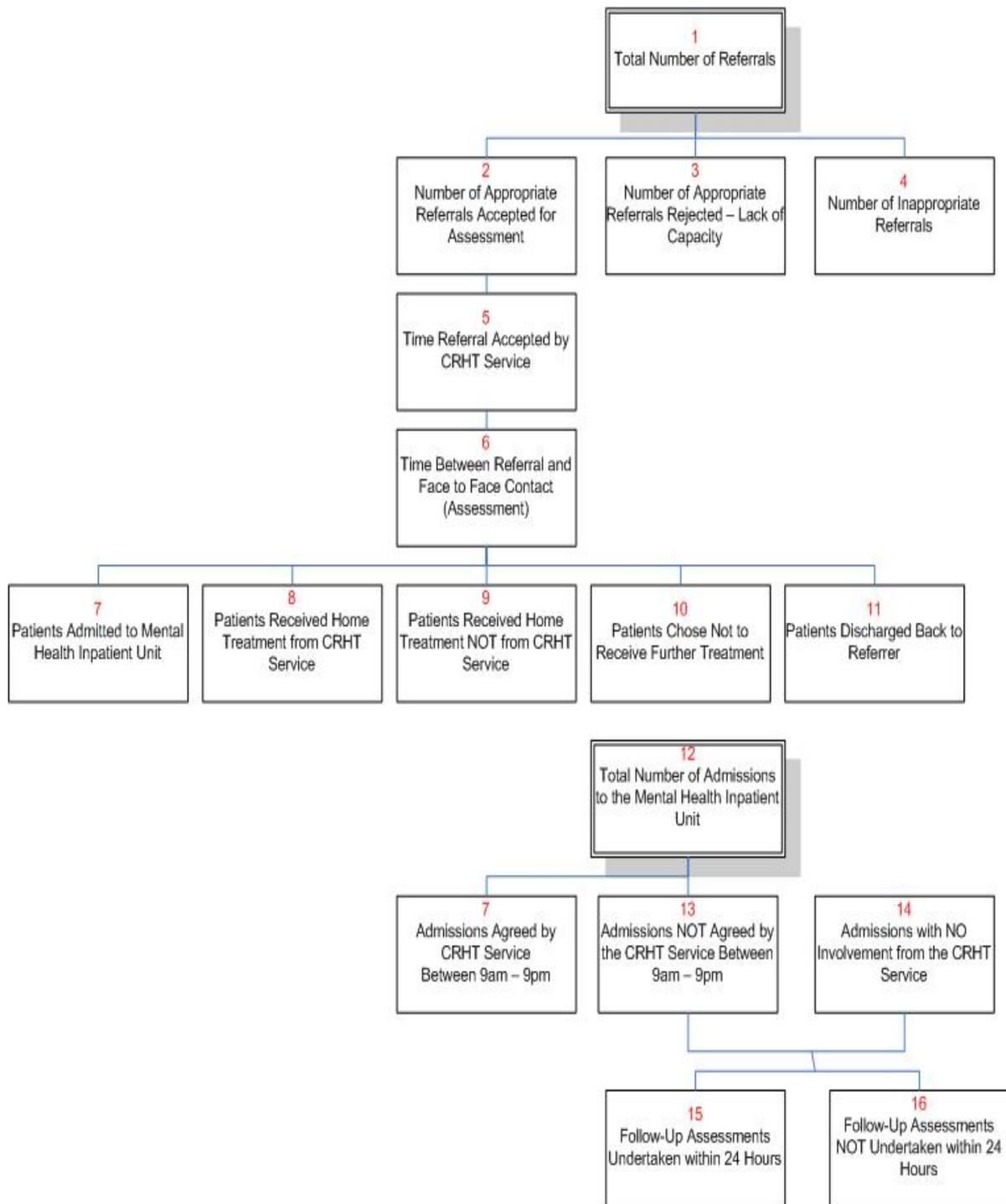
**36. Discharge Destination**

This is a count of the destination agreed following completion of CRHT Service Home Treatment Intervention.

- Community Mental Health Team
- General Practice
- Mental Health Inpatient Unit
- Other

*7 / (7 + 13) \* 100 = % of service users admitted to a psychiatric hospital between 0900 and 2100 will have received a gate-keeping assessment by the CRHT service prior to admission*

*15 / (13 + 14) \* 100 = % of service users admitted to a psychiatric hospital, who have not received a gate keeping assessment by the CRHTS, will receive a follow up assessment by the CRHTS within 24 hours of admission."*



## **Appendix D: Data Collection Tool**

Please open excel document below to access the data collection tool:-



CRHT Data  
Template.xls

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**Additional Information:**

*Please address enquiries about this DSCN to: -*

*Data Standards and Data Quality Team  
Health Solutions Wales  
14<sup>th</sup> Floor - Brunel House  
2 Fitzalan Road  
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*E-mail: [Datastandards@hsw.wales.nhs.uk](mailto:Datastandards@hsw.wales.nhs.uk)*