



Background Quality Report:

Guardianship under the Mental Health Act 1983 2011/12

The Health and Social Care Information Centre¹
is England's central, authoritative source
of health and social care information.

www.ic.nhs.uk

Author: The Health and Social Care Information Centre, Community & Mental Health Team

Responsible Statistician: Claire Thompson, Principal Information Analyst

Version: 1

Date of Publication: 18th September 2012

¹ Formerly known as the NHS Information Centre

Contents

| | |
|---|----------|
| Contents | 3 |
| Introduction | 4 |
| Context | 4 |
| Background to this publication | 4 |
| Purpose of this document | 4 |
| Assessment of statistics against quality dimensions and principles | 5 |
| Relevance | 5 |
| Accuracy and reliability | 5 |
| Accuracy | 5 |
| Timeliness and punctuality | 7 |
| Accessibility and clarity | 7 |
| Accessibility | 7 |
| Clarity | 7 |
| Coherence and comparability | 8 |
| Coherence | 8 |
| Comparability | 8 |
| Trade-offs between output quality components | 8 |
| Assessment of user needs and perceptions | 8 |

Introduction

This document constitutes a background quality report for the publication of the 'Guardianship under the Mental Health Act 1983' report. The statistics included in this release are the latest available, covering the reporting period 1st April 2011 – 31st March 2012.

Context

Background to this publication

Guardianship, under Sections 7 and 37 of the Mental Health Act 1983, provides a framework for the Local Authority or a named individual to provide care for patients in the community. It is intended for individuals aged 16 years or more whose mental disorder is of a nature or degree that such care is necessary for the person's own welfare or for the protection of others and where this care cannot be provided without the use of compulsory powers (see Background). These statistics cover new, continuing and closed cases at a National, Regional and Local Authority level and includes breakdowns by gender, the type of Guardianship and type of Local Authority.

Purpose of this document

This paper aims to provide users with an evidence based assessment of the quality of the statistical output from the Guardianship 2012 collection. It reports against those of the nine European Statistical System (ESS) quality dimensions and principles² appropriate to this output.

In doing so, this meets our obligation to comply with the UK Statistics Authority (UKSA) Code of Practice for Official Statistics³, particularly Principle 4, Practice 2 which states:

“Ensure that official statistics are produced to a level of quality that meets users’ needs, and that users are informed about the quality of statistical outputs, including estimates of the main sources of bias and other errors, and other aspects of the European Statistical System definition of quality”.

² The original quality dimensions are: relevance, accuracy and reliability, timeliness and punctuality, accessibility and clarity, and coherence and comparability; these are set out in Eurostat Statistical Law. However more recent quality guidance from Eurostat includes some additional quality principles on: output quality trade-offs, user needs and perceptions, performance cost and respondent burden, and confidentiality, transparency and security.

³ UKSA Code of Practice for Statistics

Assessment of statistics against quality dimensions and principles

Relevance

This dimension covers the degree to which the statistical product meets user need in both coverage and content.

The publication report contains the latest statistics about cases of guardianship under Sections 7 and 37 of the Mental Health Act 1983. This report contains summary statistics detailing the following information:

- Cases of Guardianship under the Mental Health Act 1983, by year, section and relationship of guardian
- Cases of Guardianship under the Mental Health Act 1983, by gender, section and relationship of guardian
- Cases of Guardianship under the Mental Health Act 1983, by region and type of Local Authority
- Duration of closed Guardianship cases under the Mental Health Act 1983, by region and type of local authority
- Cases of Guardianship under the Mental Health Act 1983, by region and Local Authority, 2011-12 (including duration of closed cases)
- Cases of Guardianship under the Mental Health Act 1983, by region and Local Authority, 2011-12 (ordered by number of continuing cases)

The report contains figures and commentary, and is accompanied by a series of data tables in a separate spreadsheet.

Accuracy and reliability

This dimension covers, with respect to the statistics, their proximity between an estimate and the unknown true value.

Accuracy

The collection was sent to all Local Authorities and responses were mandatory, regardless of whether Guardianship cases had been handled in the reporting year by the Authority. Nil returns were accepted. Returns were received from all 152 Local Authorities.

A set of validation routines were carried out by the Omnibus collection system, and details of these may be found in the Appendix at the end of this document. Data quality assurance was carried out on

all derived and calculated figures in the report (including replication from base data by at least one other analyst).

Reliability

Historical data – continuing cases

In the previous publication, we reported an issue observed whereby some Local Authorities had been closing continuing cases and then reopening them as new cases whenever a Guardianship order had been renewed. This has an impact on historical figures for new, continuing and closed cases as well as the length of historical closed cases. Amendments to figures were made where information pertaining to this issue was received in time, but historical data should continue to be interpreted with caution. This issue appears to have been resolved so should not affect 2011/12 data.

Historical data - revisions

As with previous data collections on Guardianship, in provider submissions we have accepted information about cases opened and closed in earlier years that have led to revisions to the published figures for earlier years. These include:

- 8 cases with a commencement date prior to 1st April 2011 which were not included in any previous returns. These new cases alter the previously published figures for new and continuing cases. These adjustments were received from Norfolk, Lancashire, South Tyneside, Gloucestershire, Camden, Stockton on Tees and Leicester.
- 60 cases which have been updated in this year's return with a closed date prior to 1st April 2011. These updates alter previously published figures for continuing and closed cases. These adjustments were received from Kent, Lincolnshire, Newham, Sefton, Nottingham, Birmingham, Kingston upon Hull, Cumbria, Derbyshire, Nottinghamshire, Westminster, Northumberland, Newcastle upon Tyne, North Tyneside, Knowsley, Dudley, Walsall, Lancashire, Warwickshire, Gloucestershire, Hampshire and East Sussex.

Users should bear this in mind if comparing these data to information published in previous reports; the most recent reporting period should be taken as the authoritative representation of the data.

Timeliness and punctuality

Timeliness refers to the time gap between publication and the reference period. Punctuality refers to the gap between planned and actual publication dates.

This report is based on an annual collection, for which the submission window was open between 2nd April 2012 and 3rd May 2012. Results were published approximately 20 weeks after the collection deadline, following validation and analysis.

Accessibility and clarity

Accessibility is the ease with which users are able to access the data, also reflecting the format in which the data are available and the availability of supporting information. Clarity refers to the quality and sufficiency of the metadata, illustrations and accompanying advice.

Accessibility

The publication is accessible via the Health and Social Care Information Centre (HSCIC) internet as a series of Excel spreadsheet tables and a report in PDF format. A machine readable file containing the data used to create the analysis within the report is published alongside the main publication document. Its reuse is subject to conditions outlined here:

<http://www.ic.nhs.uk/data-protection/terms-and-conditions>

Clarity

The reference data tables are presented as separate Excel worksheets. Each details a different aspect of these statistics, e.g. historical time series, information by section, gender and relationship of guardian, geographical information. Information at Local Authority level includes one table including duration of cases closed in the reporting year and another with case information ordered by number of cases continuing at the end of the year.

Coherence and comparability

Coherence is the degree to which data which have been derived from different sources or methods but refer to the same topic are similar. Comparability is the degree to which data can be compared over time and domain.

Coherence

There are no current alternative sources of data with which these can be compared. Data are collected from Local Authorities in England. Mental Health Act publications are available for Scotland and Wales and can be found using these links:

Wales: <http://www.hiw.org.uk>

Scotland: <http://www.scotland.gov.uk/Publications/Recent>

Comparability

The most recent reported data should be taken as the definitive version, since revisions to historical data are accepted during collection. See 'Reliability' section above.

It should also be noted that calculated rates within are based on 2010/11 estimates as 2011/12 population estimates were not available at the time of publication of this report.

Trade-offs between output quality components

This dimension describes the extent to which different aspects of quality are balanced against each other.

This submission was mandatory and therefore all organisations in existence at the point of collection submitted data. There are no known data quality issues other than those mentioned above.

Assessment of user needs and perceptions

This dimension covers the processes for finding out about users and uses, and their views on the statistical products.

We anticipate that this publication will be relevant to anyone with responsibility for handling applications for Guardianship or who is involved in monitoring uses of the Mental Health Act and the rights of people with mental disorders. It will be of particular interest to local social services authorities

(who are the named guardians in the majority of cases) and who supply the data used for these statistics.

This publication has been recently subject to a public consultation as part of the Zero Based Review of Adult Social Care Returns, which aims to reform national data collections in this area.

Details of the consultation (now closed) can be found using the link below; results will be published in the same area of the HSCIC website:

<http://www.ic.nhs.uk/adultsocialcareconsultation12>

Performance, Cost and Respondent Burden

This dimension describes the effectiveness, efficiency and economy of the statistical output.

We are required to report on Guardianship cases at organisation level so the collection is necessarily a census of Local Authorities. Data should be submitted by all local authorities who have open, continuing or have closed any cases of Guardianship under the Mental Health Act 1983 in the reported year. Nil returns are accepted from organisations which have no cases to report. Respondents are required to complete a survey form with some details of each case. For more information on the format and content of the survey form please see Appendix B within the main publication document available here:

<http://ic.nhs.uk/pubs/guardianmh12>

The information was collected using the HSCIC Omnibus online collection system. This is likely to continue, but collections may be made as part of a wider Adult Social Care collection in future, depending on the recommendations emerging from the Zero Based Review of Adult Social Care Returns.

Confidentiality, transparency and security

The procedures and policy used to ensure sound confidentiality, security and transparent practices.

- Local Authorities may submit revised historical data during the collection period should they wish and this will be published as part of the annual release.
- All publications are subject to a standard HSCIC risk assessment prior to issue. Disclosure control is implemented where deemed necessary.

Please see links below to relevant HSCIC policies:

Statistical Governance Policy:

<http://www.ic.nhs.uk/webfiles/publications/Statistical%20Governance%20Policy.pdf>

Freedom of Information Process:

<http://www.ic.nhs.uk/data-protection/freedom-of-information-foi>

Data Access and Information Sharing Policy:

[Click here to go to policy](#)

Data Protection Charter:

<http://www.ic.nhs.uk/data-protection/data-protection-charter>

Appendix

Validation routines used during the online Omnibus data collection for Guardianship under the Mental Health Act, 1983 – 2011/12

- 1) Check for new cases where "Date case commenced" is after 31st March 2012
- 2) Check new Cases "Date case commenced" is before 1 April 2011
- 3) Check for cases where "Date case closed" is on or before 31st March 2011
- 4) Check for cases where "Date case closed" is after 31st March 2012
- 5) Check "Date case closed" is in correct format (dd/mm/yyyy)
- 6) Check "Date case closed" is after "Date case commenced"
- 7) Check for identical reference numbers

Guidance for the Guardianship collection process can be found on the Omnibus web page:

<http://www.ic.nhs.uk/services/omnibus-survey/using-the-service/data-collections/ssda702-guardianship>

Published by the Health and Social Care Information Centre
Part of the Government Statistical Service

ISBN 978-1-84636-750-2

This publication may be requested in large print or other formats.

Responsible Statistician

Claire Thompson, Principal Information Analyst

For further information:

www.ic.nhs.uk

0845 300 6016

enquiries@ic.nhs.uk

Copyright © 2012 Health and Social Care Information Centre, Community & Mental Health Team
All rights reserved.

This work remains the sole and exclusive property of the Health and Social Care Information Centre (HSCIC) and may only be reproduced where there is explicit reference to the ownership of the Health and Social Care Information Centre.

This work may be re-used by NHS and government organisations without permission.

This work is subject to the Re-Use of Public Sector Information Regulations and permission for commercial use must be obtained from the copyright holder.