

Mental Health CQUIN 2018/19 (Indicator 3a)

Data collection form

Please complete this CQUIN form for each patient. Before completing this form please read the guidance document.

All data must be collected and submitted online by **15 March 2019**. Information on how to submit data online will be emailed to CQUIN leads.

For further assistance and information please contact your local CQUIN lead in the first instance. You may also contact the central CQUIN team on cquin@rcpsych.ac.uk or 020 3701 2602, or visit our website at www.rcpsych.ac.uk/cquin.

All questions are mandatory except where marked by an asterisk (*)

Your local CQUIN lead is *(to be completed by the CQUIN lead)*

Patient identifier *(this can be a code which allows you to identify the patient on whom data are collected)* **Please do not enter personally identifiable data, such as NHS number or full date of birth.**

Initials of data collector/ clinician

PATIENT INFORMATION

Patient setting

Inpatient

Please tick to confirm the patient has been admitted for 7 nights or more

Community patient

Please tick to confirm the patient has been on the team caseload for 12 months or more

Date of admission (inpatients only)

DD / MM / YYYY

Date of discharge (inpatients only)

DD / MM / YYYY

Still an inpatient at time of data collection

Date of acceptance onto caseload
(community caseload patients only)

DD / MM / YYYY

Year of birth

YYYY

Gender

Male

Female

Other

Main ward the patient stayed on during this admission (inpatients only)

Acute inpatient ward

Psychiatric intensive care unit (PICU)

Child and adolescent mental health ward

Older adults ward

High dependency/ rehabilitation ward

Other (including eating disorder, mother and baby units)

Ethnicity:

White	Black or Black British	Asian or Asian British	Mixed	Other ethnic groups
<input type="checkbox"/> <i>British</i>	<input type="checkbox"/> <i>African</i>	<input type="checkbox"/> <i>Bangladeshi</i>	<input type="checkbox"/> <i>Asian & white</i>	<input type="checkbox"/> <i>Chinese</i>
<input type="checkbox"/> <i>Irish</i>	<input type="checkbox"/> <i>Caribbean</i>	<input type="checkbox"/> <i>Indian</i>	<input type="checkbox"/> <i>Black African & white</i>	<input type="checkbox"/> <i>Any other ethnic background</i>
<input type="checkbox"/> <i>Any other white background</i>	<input type="checkbox"/> <i>Any other black background</i>	<input type="checkbox"/> <i>Pakistani</i>	<input type="checkbox"/> <i>Black Caribbean & white</i>	<input type="checkbox"/> <i>Not documented/ refused/ not stated</i>
		<input type="checkbox"/> <i>Any other Asian background</i>	<input type="checkbox"/> <i>Any other mixed background</i>	

SCREENING

The next questions relate to whether screening/ assessments that were carried out at any point during the inpatient stay; from the point of admission up to 30 September 2018. **If the patient was admitted over a year ago, there should be evidence of screening within the last 12 months (prior to 30 September 2018); if this is not present, please tick 'not documented'.**

For community patients, there should be evidence of screening within the last 12 months (prior to 30 September 2018). If this is not present, please tick 'not documented'.

Q1. Smoking status

*Current smoker --> *Enter number of cigarettes smoked per day:*

Ex-smoker or non-smoker

Not documented

Documented evidence of refusal to provide information on more than one occasion after it is assured that the person has been given the information on which to make an informed decision

Q2. Alcohol consumption

- Yes --→ Harmful or hazardous use of alcohol*
 Alcohol use that is NOT harmful or hazardous

No

Not documented

Documented evidence of refusal to provide information on more than one occasion after it is assured that the person has been given the information on which to make an informed decision

*Identification of harmful or hazardous use of alcohol is described in NICE guideline CG115 <https://www.nice.org.uk/guidance/cg115>. It may be assessed using structured measures such as the 'AUDIT' or based on enquiring about quantity, frequency and any health or social consequences of alcohol consumption.

Where there is a record of drinking that is neither harmful nor hazardous e.g. 'rarely drinks'/'drinks in moderation' this should be recorded as 'Alcohol use that is NOT harmful or hazardous'.

Q3. Substance misuse

Yes

No

Not documented

Documented evidence of refusal to provide information on more than one occasion after it is assured that the person has been given the information on which to make an informed decision

Q4. BMI /Weight

Is information about weight recorded in the patient's notes?

Yes (*please enter value below*)

Not documented

Documented evidence of refusal to be weighed/ measured on more than one occasion after it is assured that the person has been given the information on which to make an informed decision

Person was pregnant/ gave birth within last 6 weeks (weight not measured)

BMI (Body Mass Index) (Kg/m²)

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Change in weight over a 3-month period: > 5kg ≤ 5kg increase

Q5. Blood pressure

Is information about blood pressure recorded in the patient's notes?

Yes (*please enter at least one value below*)

Not documented

Documented evidence of refusal to take blood pressure on more than one occasion after it is assured that the person has been given the information on which to make an informed decision

Systolic (*mmHg*)

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and/or

Diastolic (*mmHg*)

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Q6. Glucose

Is information about glucose recorded in the patient's notes?

Yes (*please enter at least one value below*)

Not documented

Documented evidence of refusal of blood test on more than one occasion after it is assured that the person has been given the information on which to make an informed decision

Person was pregnant/ gave birth within last 6 weeks (*glucose screening not carried out*)

Glycated haemoglobin or HbA1c (*mmol/mol*)

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and/or

Fasting plasma glucose (*mmol/l*)

		.		
--	--	---	--	--

and/or

Random plasma glucose (*mmol/l*)

		.		
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Q7. Cholesterol

Is information about cholesterol recorded in the patient's notes?

Yes (*please enter at least one value below*)

Not documented

Documented evidence of refusal of blood test on more than one occasion after it is assured that the person has been given the information on which to make an informed decision

Total cholesterol (*mmol/l*)

 .

and/or

Non-HDL cholesterol (*mmol/l*)

 .

and/or

QRISK-2 score (%)

 .

INTERVENTIONS

For inpatients, interventions could have been carried out at any point during the inpatient stay; from the point of admission to discharge, or up to 18 January 2019.

For community patients, interventions could have been carried out at any time in the last 12 months, up to 18 January 2019.

To ascertain if an individual requires intervention based on their physical health screening, please refer to the Lester UK Adaptation of the Positive Cardiometabolic Health Resource.

Please tick all that apply:

Q8. Interventions for smoking cessation

Brief intervention

Referral to smoking cessation service

Combined NRT (*nicotine replacement therapy*) and/or varenicline/bupropion

Individual/group behavioural support

Documented evidence of refusing intervention after it is assured that the person has been given the information on which to make an informed decision

No intervention needed

Not documented

Q9. Interventions for harmful alcohol use

- Brief intervention and advice*
- Motivational interviewing*
- Referral to psycho-education programme*
- Individual/group behavioural support*
- Pharmacological intervention for harmful use of alcohol commenced or reviewed (e.g. acamprosate, disulfiram or naltrexone)*
- Referral to specialist service*
- Documented evidence of refusing intervention after it is assured that the person has been given the information on which to make an informed decision*
- No intervention needed*
- Not documented*

Q10. Interventions for substance misuse

- Brief intervention/advice*
- Referral to detoxification programme*
- Referral to psycho-education programme*
- Motivational interviewing*
- Referral to specialist service*
- Documented evidence of refusing intervention after it is assured that the person has been given the information on which to make an informed decision*
- No intervention needed*
- Not documented*

Q11. Interventions for weight gain/obesity

- Mental health medication review with respect to weight (e.g. antipsychotic)*
- Advice or referral about diet*
- Advice or referral about exercise*
- Referral to structured lifestyle education programme*
- Pharmacological intervention for obesity commenced or reviewed*
- Referral to primary or secondary care physician*
- Documented evidence of refusing intervention after it is assured that the person has been given the information on which to make an informed decision*
- No intervention needed*
- Not documented*

Q12. Interventions for hypertension

- Mental health medication review with respect to high blood pressure (e.g. antipsychotic)*
- Advice or referral about diet/ salt intake*
- Advice or referral about exercise*
- Anti-hypertensive drug treatment commenced or reviewed*
- Referral to primary or secondary care physician*
- Documented evidence of refusing intervention after it is assured that the person has been given the information on which to make an informed decision*
- No intervention needed as repeat blood pressure reading normal*
- No intervention needed*
- Not documented*

Q13. Interventions for diabetes/high risk of diabetes

- Mental health medication review with respect to glucose regulation (e.g. antipsychotic)*
- Advice or referral about diet*
- Advice or referral about exercise*
- Pharmacotherapy for diabetes commenced or reviewed (e.g. metformin, insulin, acarbose or exenatide)*
- Referral to structured lifestyle education programme*
- Referral to primary or secondary care physician*
- Documented evidence of refusing intervention after it is assured that the person has been given the information on which to make an informed decision*
- No intervention needed*
- Not documented*

Q14. Interventions for dyslipidaemia

- Mental health medication review to lower blood lipids (e.g. antipsychotic)*
- Advice or referral about diet*
- Advice or referral about exercise*
- Lipid modification medication (e.g. statin)*
- Referral to primary or secondary care physician*
- Documented evidence of refusing intervention after it is assured that the person has been given the information on which to make an informed decision*
- No intervention needed*
- Not documented*

Thank you for completing the CQUIN form for this patient