

# DATA CLEANING GUIDANCE

## NHS COMMUNITY MENTAL HEALTH SURVEY 2018

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## Updates

Before you use this document, check that you have the latest version, as there might be some small amendments from time to time (the date of the last update is on the front page). In the very unlikely event that there are any major changes, we will e-mail all trust contacts and contractors directly to inform them of the change.

This document is available from: [www.nhssurveys.org/surveys/1166](http://www.nhssurveys.org/surveys/1166)

## Questions and comments

If you have any questions or concerns regarding this document, please contact the Survey Coordination Centre using the details provided at the top of this page.



### For trusts and contractors taking part in the survey:

Contractors and trusts submitting final data for the NHS Community Mental Survey **must not** clean their data before submitting it to the Survey Coordination Centre. Please refer to the [Survey Handbook](#) and [Entering and Submitting Final Data](#) instructions for more details.

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# Data Cleaning – An Overview

## Introduction

Once fieldwork for the 2018 Community Mental Health Survey has been completed, participating trusts and contractors are required to submit final data to the Survey Coordination Centre in a raw / uncleaned format. The Survey Coordination Centre will clean the data once all trusts and contractors have submitted their files. To ensure that the cleaning process is comparable across all NHS trusts, data for all trusts in the survey are collated and cleaning is carried out on the full collated dataset.

This document provides a description of the processes that will be used by the Survey Coordination Centre to clean and standardise data submitted by contractors and trusts as part of the 2018 Community Mental Health Survey. By following the guidance contained in this document it should be possible to recreate this cleaning process.

## Definitions

Definitions of terms commonly used in this document, as they apply to the Community Mental Health Survey are as follows:

**Raw / uncleaned data:** ‘Raw’ or ‘uncleaned’ data is data that has been entered from completed questionnaires following the instructions detailed in the [Entering and Submitting Final Data](#) document. The requirement for raw / uncleaned data does **not**, however, preclude the checking of data for errors resulting from problems with data entry or similar as detailed in the [Final Data Checklist](#).

**Data cleaning:** The Survey Coordination Centre uses the term ‘data cleaning’ to refer to all editing processes applied to the final collated dataset.

**Routing questions:** These are items in the questionnaire which instruct respondents either to continue on to the next question or to skip irrelevant questions, depending on their response to the routing question. For the 2018 Community Mental Health Survey, the routing questions in the questionnaire are **Q1, Q6, Q10, Q13, Q15, Q18, Q20, Q24, Q26 and Q39.**<sup>1</sup>

**Filtered questions:** These are items in the questionnaire which are not intended to be answered by all respondents. Whether individual respondents are expected to answer filtered questions depends on their responses to preceding routing questions. For the 2018 Community Mental Health Survey, the filtered questions in the questionnaire are **Q7-Q9, Q11-Q12, Q14, Q16-Q17, Q19, Q21-Q25, Q27-Q30 and Q40-Q41.**

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<sup>1</sup> Q1 is considered a routing question however it is cleaned differently to the other routing questions due to the nature of the question. If option 7 (‘I have never seen anyone from NHS mental health services’) is selected on Q1 then the respondent has indicated they are ineligible to participate. Therefore, in addition to removing all subsequent responses their outcome code is recoded to ‘5’ (ineligible).

**Non-filtered questions:** These are items in the questionnaire which are not subject to any filtering and which should therefore be answered by all respondents (except those who ticked response option 7 at Q1). For the 2018 Community Mental Health Survey, the non-filtered questions are **Q1-Q6, Q10, Q13, Q15, Q18, Q20, Q26, Q31-Q39 and Q42-Q47**.

**Sample data:** Service user data that is provided from the trust as part of the sampling process. This includes gender, year of birth and ethnicity as it is recorded on the trust's system.

**Response data:** Data from the completed questionnaire which is provided from the service user. This includes answers to Q1 through Q47.

**Out-of-range data:** This refers to instances where data within a variable has a value that is not permissible. For categorical data – most of the variables in this survey – this would mean a value not allowed in the data, for example, a value of '3' being entered in a variable with only two response categories (1 or 2).

**Outcome:** An outcome code is given to each service user to indicate the end result of their participation in the survey. This is used when calculating the adjusted response rate for the survey and is therefore vital to ensure all service users are coded appropriately. The coding for outcome is as follows:

- Outcome 1: Returned completed questionnaire
- Outcome 2: Undelivered / moved house
- Outcome 3: Deceased
- Outcome 4: Too ill / opt out
- Outcome 5: Ineligible
- Outcome 6: Unknown
- Outcome 7: Deceased during fieldwork

**Non-specific response:** This term refers to response options that do not provide useful evaluative information. Most commonly, these are responses such as 'don't know / can't remember. Likewise, responses that indicate the question is not applicable to the respondent are considered 'non-specific' – for example, responses such as 'I do not need support for this' or 'I did not want to be involved in making decisions'.

# Editing and Cleaning Final Data

## Approach and rationale

The aim of the Survey Coordination Centre in cleaning the collated final data is to ensure an optimal balance between data quality and completeness. We do this by removing responses that are known to be erroneous or inappropriate.

## Cleaning filtered questions

When routing questions are not followed correctly and participants have answered questions in which they were instructed to skip, it is necessary to clean the data to remove these inappropriate responses. In such cases, participants' responses to questions that were not relevant to them are recoded to '998' to indicate a non-applicable response.<sup>1</sup> See table 1 for a list of all routing questions included in the 2018 Community Mental Health Survey, the response values that require cleaning, and the appropriate filtered questions to recode as '998'.

Table 1. Appropriate cleaning for routing questions in the 2018 Community Mental Health Survey

Routing question	Response values requiring cleaning	Filtered questions to be recoded
Q1	7	See <b>Eligibility</b>
Q6	2 or 3	Q7 – Q9
Q10	3	Q11 – Q12
Q13	2 or 3	Q14
Q15	2, 3, 4, 5 or 6	Q16 – Q17
Q18	2 or 3	Q19
Q20	2	Q21 – Q25
Q24	2 or 3	Q25
Q26	2, 3, 4 or 5	Q27 – Q30
Q39	2	See <b>Cleaning special cases.</b>

Please note that these instructions should be followed in the order shown above.

A worked example of the cleaning process for recoding non-applicable responses to filtered questions is included in [Appendix A: Example of cleaning](#).

<sup>1</sup> Code '998' is an arbitrary value chosen because it is out of range for all other questions on the survey.

Responses are only recoded where respondents have answered filtered questions despite ticking an earlier response on a routing question instructing them to skip these questions.

**Example:**

20. In the last 12 months, have you been receiving any **medicines** for your mental health needs?

1  Yes → Go to 21

2  No → Go to 26

21. Were you **involved** as much as you wanted to be in decisions about which **medicines** you receive?

1  Yes, definitely

2  Yes, to some extent

3  No, but I wanted to be

4  No, but I did not want to be

5  Don't know / can't remember

In the example above, the response to Q21 would be recoded to '998' because according to their answer from Q20 (the routing question), they were supposed to skip Q21 through Q25.

Responses to filtered questions are not removed where the response to the routing question is missing.

**Example:**

20. In the last 12 months, have you been receiving any **medicines** for your mental health needs?

1  Yes → Go to 21

2  No → Go to 26

21. Were you **involved** as much as you wanted to be in decisions about which **medicines** you receive?

1  Yes, definitely

2  Yes, to some extent

3  No, but I wanted to be

4  No, but I did not want to be

5  Don't know / can't remember

In the example above, the response to Q21 would remain as code 4 and Q20 would be coded as missing.

## Cleaning special cases

Some questions require additional cleaning due to the nature of the question. For instance, the below questions require additional cleaning to ensure that the results of the analysis are as fair as possible when assessing trust performance.

### Cleaning of Q8 and Q9

**Q8** Do you know how to contact this person if you have a concern about your care?

**Q9** How well does this person organise the care and services you need?

If **Q7** has been given a response option of 1 ('A GP' is the main person in charge of organising their care and services) then **Q8** and **Q9** are recoded as '998' for not-applicable. This is because it is not fair to assess the mental health trust on the organising of their care if the main person in charge of organising their care and services is not someone from the mental health trust.

### Cleaning of Q13 and Q14

**Q13** In the last 12 months, have you had a formal meeting with someone from NHS mental health services to discuss how your care is working?

**Q14** Did you feel that decisions were made together by you and the person you saw during this discussion?

As the question specifies a time period of 'the last 12 months', if **Q2** has been given a response option of 1 ('Less than 1 year' of contact with mental health services) then **Q13** and **Q14** are recoded as '998' as they are not applicable. This is because it is not fair to penalise a mental health trust for not having reviewed a person's care, if the person has not been in contact with these services for long enough to have reasonably expected them to have had a care review.

### Cleaning of Q39, Q40 and Q41

**Q39** Do you have any physical or mental health conditions, disabilities or illnesses that have lasted or are expected to last for 12 months or more? Include problems related to old age.

**Q40** Do you have any of the following? Select ALL conditions you have that have lasted or are expected to last for 12 months or more.

**Q41** Do any of these reduce your ability to care out day-to-day activities?

Although Q39 is a routing question and Q40 and Q41 are the corresponding filtering questions, these three questions are cleaned differently due to the nature of the questions.

When a respondent has answered 'No' to Q39 but has answered Q40 by selecting one or more long term condition, their response to Q39 is cleaned. This is because their response to Q40 indicates that they do in fact have a long-standing condition and therefore their response to Q39 is likely to be incorrect.

However, when a respondent has answered 'No' to Q39 and has not selected any long-term conditions in Q40 but has answered Q41 then their response to Q41 is cleaned. As they have

indicated that they do not have a long-term condition and have also skipped Q40, this would suggest that their response to Q41 is incorrect. See table 2 for a summary of how Q39, Q40 and Q41 are cleaned.

Table 2. Cleaning for Q39, Q40 and Q41

Q39 response	Q40 response	Q41 response	Cleaning
Ticked option 2 (no)	Ticked one or more options	No response	Q39 is set to missing.
Ticked option 2 (no)	Ticked one or more options	Ticked any option	Q39 is set to missing.
Ticked option 2 (no)	No response	Ticked any option	Q41 is set to not-applicable

## Cleaning multiple response questions

For most questions, each column corresponds to one survey question. There are two exceptions to this rule; **Q7**<sup>1</sup> and the multiple response question **Q40** where each response option is treated as a separate question.

Each response option that is ticked for **Q7** and **Q40** are coded as '1' in the data file and all other responses are coded as '0'. This is to ensure these questions can be appropriately counted for when assessing usability.

### Example

**7. Is the main person in charge of organising your care and services...**

1  A GP

2  Another type of NHS health or social care worker (e.g. a community psychiatric nurse, psychotherapist, mental health support worker etc).

3  Don't know / not sure

The above example would be coded with three columns in the data file, labelled as follows:

Column headings	Q7_1	Q7_2	Q7_3
Codings for this example	1	1	0

<sup>1</sup> Q7 is treated as a multiple choice question, although it is not presented as such. This is due to service users historically ticking multiple responses options for this question.

## Eligibility

### Age / Year of birth

There may be instances where the sample and response data is mismatched and the response data indicates that the respondent is under the age of 18. When this occurs, respondents will *not* be considered ineligible for the survey and therefore remain as outcome 1 (see table 2)<sup>1</sup>. This is because of the difficulty of inferring the source of errors when year of birth from sample and response data are mismatched. We cannot be certain whether this mismatch occurs due to an error in the sample file, an error in the patient's completion of the questionnaire form or an error in data entry.

Another scenario could be that the respondent has indicated they are under the age of eighteen in the response data, but year of birth is missing from the sample data. As this is the only available data for their year of birth, these respondents would be considered ineligible for the survey and would therefore be recoded to outcome 5 (see table 2).

In the unlikely event that the sample data includes a year of birth that indicates a service user is under the age of 18, they will be considered ineligible *only* if the response data is missing or out-of-range. In this case, outcome will be recoded to 5 (see table 2). Since the sample data is checked for these types of cases prior to mailing, there are unlikely to be any such cases in the final data.

Table 3. Eligibility and outcome codes of service users based on sample and response data of age

Original outcome code	Sample data	Response data	Eligibility	Final outcome code
1	YoB ≤ 2000	Q44 > 2000	Eligible	1
1	YoB ≤ 2000	Q44 ≤ 2000	Eligible	1
1	YoB ≤ 2000	Q44 = missing	Eligible	1
1	YoB ≤ 2000	Q44 = out of range	Eligible	1
1	YoB = missing	Q44 > 2000	Ineligible	5
1	YoB = missing	Q44 ≤ 2000	Eligible	1
1	YoB > 2000	Q44 = missing	Ineligible	5
1	YoB > 2000	Q44 = out of range	Ineligible	5
1	YoB > 2000	Q44 ≤ 2000	Eligible	1

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<sup>1</sup> This is to avoid removing legitimate responses because of an overly conservative approach to assessing eligibility; in other words, where the respondent's age is uncertain (because sample and response information contradict each other and in different instances either of these may be accurate or inaccurate) the benefit of the doubt is given in any assessment of eligibility.

## Q1 / Contact with NHS mental health services

A respondent who has marked response option 7 for **Q1**<sup>1</sup> (stating they 'have never seen anyone from NHS mental health services') is recoded from outcome 1 to outcome 5. This is because the respondent is not eligible to take part in the survey if they have never seen anyone from NHS mental health services. For all ineligible respondents (outcome 5), any responses to Q1 through Q47 are set to missing.

## Demographics

In a small number of cases, sample data and response data does not correspond for age and gender. For example, the sample may identify a service user as male only for them to report being female, or the sample data may identify an individual as being born in 1980 only for the service user to report being born in 1985.

Where responses to demographic questions are present, it is assumed these are more likely to be accurate than sample data (since it is assumed that respondents are best placed to know their own gender and age). However, because questions about demographics tend to produce relatively high item non-response rates, it is not appropriate to rely on response data alone.

For demographic analysis on groups of cases, it is therefore necessary to use some combination of the information supplied in the sample data and response data. To do this, we first copy all valid responses to survey demographic questions into a new variable. Where response data is missing we then copy in the relevant sample data (note that for a very small number of respondents demographic information may be missing in both the sample and response data; in such cases data must necessarily be left missing in the new variable)<sup>2</sup>.

## Out-of-range data

A common error when completing year of birth questions on forms is for respondents to accidentally write in the current year. In this case, the response to **Q44** would be considered as an out-of-range response and would therefore be set to missing. For the 2018 Community Mental Health survey, out-of-range responses for **Q44** are defined as **Q44 ≤ 1900 or Q44 ≥ 2001**. This must only be done after eligibility has been set as described in the earlier section titled 'Eligibility'.

Out-of-range data must also be set for invalid responses to all other questions in the survey. The out-of-range responses will depend on the number of response options given for each question. For instance, all questions with 3 response options (i.e. Q6, Q7, Q8, Q10, Q13, Q18, Q24, Q25,

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<sup>1</sup> Q1 is a routing question which instructs respondents to go to the next applicable question. If a respondent ticks response option 7, the next applicable question is Q39 because Q2 through Q38 is in regards to their mental health care however they have indicated that they have never seen anyone from NHS mental health services. Due to these service users also being recoded as ineligible (outcome 5), all response data is set to missing including Q39 through Q47.

<sup>2</sup> The exception to this is when response rates are calculated. Because response rates vary between demographic groups, using response and sample data to calculate response rates would create a systematic source of bias in that we are only able to amend information for the *respondents*. Therefore, only the sample data should be used to calculate response rates by demographic groups.

Q38, and Q41) with response data of  $\leq 0$  or  $\geq 4$  would be set to missing. A full list of out-of-range responses for the 2018 Community Mental Health Survey is listed in [Appendix B: Out-of-range data](#).

## Usability

Sometimes questionnaires are returned with only a very small number of questions completed. For the Community Mental Health Survey, questionnaires containing fewer than five responses are considered 'unusable' – we will set all responses pertaining to such cases as missing and recode outcome to 6. This should only affect a very limited number of cases and so should not have a significant impact on response rates. The number of responses per questionnaire (including responses to the demographic questions) will be counted after all cleaning has been conducted.

When counting the total number of responses for the purpose of determining if a questionnaire is usable, multiple choice questions are counted once. For instance, Q40 would be counted as one response in the below scenario.

**40. Do you have any of the following?**

Select **ALL** conditions you have that have lasted or are expected to last for 12 months or more.

- 1  Breathing problem, such as asthma
- 2  Blindness or partial sight
- 3  Cancer in the last 5 years
- 4  Dementia or Alzheimer's disease
- 5  Deafness or hearing loss
- 6  Diabetes
- 7  Heart problem, such as angina
- 8  Joint problem, such as arthritis
- 9  Kidney or liver disease
- 10  Learning disability
- 11  Mental health condition
- 12  Neurological condition
- 13  Another long-term condition

It is possible that a questionnaire could be considered usable because there are five or more responses, despite having an outcome code of 2, 3, 4, 6 or 7. In this case outcome would be recoded to 1 to indicate a complete usable questionnaire.

## Missing responses

It is useful to be able to see the number of missed responses for each question. Responses are considered to be missing when a respondent is expected to answer a question but no response is present. For non-filtered questions, responses are expected from all respondents – thus any

instance of missing data constitutes a missing response. For filtered questions, only respondents who have answered a previous routing question instructing them to go on to that filtered question or set of filtered questions are expected to give answers. Where respondents have missed a routing question, they are not expected to answer subsequent filtered questions; thus only where respondents were explicitly instructed to answer filtered questions should such blank cells be coded as missing responses.

The Survey Coordination Centre codes missing responses in the data as '999'<sup>1</sup>. For results to be consistent with those produced by the Survey Coordination Centre, missing responses should be presented but should not be included in the base number of respondents for percentages.

## Non-specific responses

As well as excluding missing responses from results, the Survey Coordination Centre also removes non-specific responses from base numbers for percentages. The rationale for this is to facilitate easy comparison between institutions by presenting only results from those respondents who felt able to give an evaluative response to questions. For a full listing of 'non-specific' responses in the 2018 Community Mental Health survey, please see [Appendix C: Non-specific responses](#).

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<sup>1</sup> This is an arbitrary value chosen because it is 'out-of-range' for all other questions on the survey.

# Appendix A: Example of cleaning

Figure 1 shows hypothetical raw / uncleaned data for eight service users, five of whom have responded to the survey. It can be seen from this data that some of the respondents have followed instructions from routing questions incorrectly:

Respondent '002' has reported that they have not received any NHS therapies in the last 12 months (Q26=2) and respondent '005' has reported that they cannot remember if they have received any NHS therapies (Q26=5), but they have both responded to filtered questions Q27 and Q28.

Record	Outcome	Q26	Q27	Q28
Service User Record Number	Outcome of sending questionnaire (N)	In the last 12 months, have you received any NHS therapies for your mental health needs that do not involve medicines?	Were these NHS therapies explained to you in a way you could understand?	Were you involved as much as you wanted to be in deciding what NHS therapies to use?
001	6			
002	1	2	1	2
003	1	1	2	4
004	4			
005	1	5	3	3
006	6			
007	1	1	2	2
008	1	1	3	2

Figure 1. Example of raw / uncleaned data

Following the cleaning instructions above will remove these inappropriate responses. Firstly, the filter instructions specify that:

Routing question	Response values requiring cleaning	Filtered questions to be recoded
Q26	2, 3, 4 or 5	Q27 – Q30

In accordance with this, all responses for **Q27** and **Q30** must be set to missing in cases where the respondent has ticked **Q26 = 2, 3, 4 or 5** (i.e. not had received NHS therapies).

Figure 2 below shows how the data would look after cleaning is done by the Survey Coordination Centre to remove responses to filtered questions that should have been skipped – cells where responses have been set to missing are shaded.

Record	Outcome	Q26	Q27	Q28
Service User Record Number	Outcome of sending questionnaire (N)	In the last 12 months, have you received any NHS therapies for your mental health needs that do not involve medicines?	Were these NHS therapies explained to you in a way you could understand?	Were you involved as much as you wanted to be in deciding what NHS therapies to use?
001	6			
002	1	2	.	.
003	1	1	2	4
004	4			
005	1	5	.	.
006	6			
007	1	1	2	2
008	1	1	3	2

Figure 2. Example of cleaned data

# Appendix B: Out-of-range data

Variable	Out-of-range data
Birth	$\leq 1900$ $\geq 2001$
Gender	$\leq 0$ 3-8 $\geq 10$
Ethnic	Anything except A-H, J-N, P, R, S or Z
DayLcon	$\leq 0$ $\geq 32$
MonthLCon	$\leq 0$ 4-8 $\geq 13$
YearLCon	$\leq 2016$ $\geq 2019$
DayQRec	$\leq 0$ $\geq 32$
MonthQRec	$\leq 1$ $\geq 7$
YearQRec	$\leq 2017$ $\geq 2019$
Q1	$\leq 0$ $\geq 8$
Q2	$\leq 0$ $\geq 7$
Q3	$\leq 0$ $\geq 6$
Q4	$\leq 0$ $\geq 5$
Q5	$\leq 0$ $\geq 5$
Q6	$\leq 0$ $\geq 4$
Q7_1	$< 0$ $\geq 2$
Q7_2	$< 0$ $\geq 2$
Q7_3	$< 0$ $\geq 2$

Variable	Out-of-range data
Q8	$\leq 0$ $\geq 4$
Q9	$\leq 0$ $\geq 5$
Q10	$\leq 0$ $\geq 4$
Q11	$\leq 0$ $\geq 6$
Q12	$\leq 0$ $\geq 5$
Q13	$\leq 0$ $\geq 4$
Q14	$\leq 0$ $\geq 6$
Q15	$\leq 0$ $\geq 7$
Q16	$\leq 0$ $\geq 5$
Q17	$\leq 0$ $\geq 5$
Q18	$\leq 0$ $\geq 4$
Q19	$\leq 0$ $\geq 7$
Q20	$\leq 0$ $\geq 3$
Q21	$\leq 0$ $\geq 6$
Q22	$\leq 0$ $\geq 6$
Q23	$\leq 0$ $\geq 5$
Q24	$\leq 0$ $\geq 4$
Q25	$\leq 0$ $\geq 4$
Q26	$\leq 0$ $\geq 6$
Q27	$\leq 0$ $\geq 5$

Variable	Out-of-range data
Q28	$\leq 0$ $\geq 6$
Q29	$\leq 0$ $\geq 5$
Q30	$\leq 0$ $\geq 7$
Q31	$\leq 0$ $\geq 7$
Q32	$\leq 0$ $\geq 6$
Q33	$\leq 0$ $\geq 7$
Q34	$\leq 0$ $\geq 5$
Q35	$\leq 0$ $\geq 8$
Q36	$\leq 0$ $\geq 5$
Q37	$< 0$ $\geq 11$
Q38	$\leq 0$ $\geq 4$
Q39	$\leq 0$ $\geq 3$
Q40_1	$< 0$ $\geq 2$
Q40_2	$< 0$ $\geq 2$
Q40_3	$< 0$ $\geq 2$
Q40_4	$< 0$ $\geq 2$
Q40_5	$< 0$ $\geq 2$
Q40_6	$< 0$ $\geq 2$
Q40_7	$< 0$ $\geq 2$
Q40_8	$< 0$ $\geq 2$
Q40_9	$< 0$ $\geq 2$
Q40_10	$< 0$ $\geq 2$

Variable	Out-of-range data
Q40_11	$< 0$ $\geq 2$
Q40_12	$< 0$ $\geq 2$
Q40_13	$< 0$ $\geq 2$
Q41	$\leq 0$ $\geq 4$
Q42	$\leq 0$ $\geq 5$
Q43	$\leq 0$ $\geq 3$
Q44	$\leq 1900$ $\geq 2001$
Q45	$\leq 0$ $\geq 10$
Q46	$\leq 0$ $\geq 6$
Q47	$\leq 0$ $\geq 19$

## Appendix C: Non-specific responses

The following table lists all ‘non-specific responses’ included in the 2018 Community Mental Health survey. Numbers in the final column indicate the response options that should be considered non-specific. Where the ‘non-specific responses’ column contains only a dash, the relevant question has no such response options. The data presented in the table below is for all questions, whether they are scored or not. The non-specific responses given below are defined for all survey outputs (trust level data and national level reporting).

No.	Question	Non-specific responses
Q1	When was the <b>last time</b> you saw someone from the <b>NHS mental health services</b> ?	6,7
Q2	Overall, how long have you been in contact with NHS mental health services?	5,6
Q3	In the last 12 months, do you feel you have seen NHS mental health services <b>often enough</b> for your needs?	5
Q4	Were you given <b>enough time</b> to discuss your needs and treatment?	4
Q5	Did the person or people you saw <b>understand</b> how your mental health needs affect <b>other areas of your life</b> ?	4
Q6	Have you been told <b>who is in charge</b> of organising your care and services? (This person may be anyone providing your care, and may be called a “care coordinator” or “lead professional”)	3
Q7	Is the <b>main</b> person in charge of organising your care and services....	3
Q8	Do you know how to contact this person if you have a concern about your care?	3
Q9	How well does this person organise the care and services you need?	-
Q10	Have you agreed with someone from <b>NHS mental health services</b> what care you will receive?	-
Q11	Were you involved as much as you wanted to be in agreeing what care you will receive?	4,5

No.	Question	Non-specific responses
Q12	Does this agreement on what care you will receive take your personal circumstances into account?	4
Q13	In the last 12 months have you had a formal meeting with someone from NHS mental health services to discuss how your care is working?	3
Q14	Did you feel that decisions were made <b>together</b> by you and the person you saw during this discussion?	4,5
Q15	<b>In the last 12 months</b> , have the people you see for your care or services changed?	6
Q16	Were the reasons for this change explained to you at the time?	4
Q17	What impact has this had on the <b>care</b> you receive?	4
Q18	Do you know who to contact out of office hours if you have a crisis?	3
Q19	<b>In the last 12 months</b> , did you get the help you needed when you tried contacting this person or team?	5,6
Q20	In the last 12 months, have you been receiving any <b>medicines</b> for your mental health needs?	-
Q21	Were you <b>involved</b> as much as you wanted to be in decisions about which <b>medicines</b> you receive?	4,5
Q22	Were you given <b>information</b> about your <b>medicines</b> in a way that you were able to understand?	5
Q23	Do you feel your <b>medicines</b> have helped your mental health?	4
Q24	Have you been receiving any <b>medicines</b> for your mental health needs for 12 months or longer?	3
Q25	In the last 12 months, has an <b>NHS mental health worker</b> checked with you about how you are getting on with your medicines? (That is, have your medicines been reviewed?)	3
Q26	In the last 12 months, have you received any <b>NHS therapies</b> for your mental health needs that do not involve medicines?	4,5

No.	Question	Non-specific responses
Q27	Were these <b>NHS therapies</b> explained to you in a way you could understand?	4
Q28	Were you <b>involved</b> as much as you wanted to be in deciding what <b>NHS therapies</b> to use?	4,5
Q29	Do you feel you <b>NHS therapies</b> have helped your mental health?	4
Q30	How long were you on the waiting list before your <b>NHS therapy</b> began?	6
Q31	In the last 12 months, did NHS mental health services give you any <b>help or advice</b> with <b>finding support</b> for <b>physical health needs</b> (this might be an injury, a disability, or a condition such as diabetes, epilepsy, etc)?	4,5,6
Q32	In the last 12 months, did NHS mental health services give you any <b>help or advice</b> with <b>finding support</b> for <b>financial advice or benefits</b> ?	4,5
Q33	In the last 12 months, did NHS mental health services give you any <b>help or advice</b> with <b>finding support</b> for <b>finding or keeping work</b> ?	4,5,6
Q34	In the last 12 months, has someone from NHS mental health services supported you in joining a group or taking part in an activity?	4
Q35	Have NHS mental health services involved a member of your family or someone else close to you as much as you would like?	5,6,7
Q36	Have you been given <b>information</b> by NHS mental health services about getting support from people who have experience of the same mental health needs as you?	4
Q37	Overall....	-
Q38	Overall in the last 12 months, did you feel that you were treated with <b>respect and dignity</b> by NHS mental health services?	-
Q39	Do you have any physical or mental health conditions, disabilities or illnesses that have lasted or are expected to last for 12 months or more? Include problems related to old age.	-
Q40	Do you have any of the following? Select <b>ALL</b> conditions you have that have lasted or are expected to last for 12 months or more.	-
Q41	Do any of these reduce your ability to carry out day-to-day activities?	-

No.	Question	Non-specific responses
Q42	Who was the main person or people that filled in this questionnaire?	-
Q43	Are you male or female?	-
Q44	What was your <b>year of birth</b> ? (Please write in)	-
Q45	What is your religion?	-
Q46	Which of the following best describes how you think of yourself?	-
Q47	What is your ethnic group? ( <b>Cross ONE box only</b> )	-