DATA CLEANING GUIDANCE

NHS COMMUNITY MENTAL HEALTH SURVEY 2020

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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 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: https://nhssurveys.org/surveys/survey/05-community-mental-health/

Questions and comments

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

> **For trusts and contractors taking part in the survey:**
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> 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 for Existing Methods. 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 Community Mental Health Survey 2020 has been completed, participating trusts and contractors are required to submit final data to the SCCEM in a raw / uncleaned format. The SCCEM 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 SCCEM to clean and standardise data submitted by contractors and trusts as part of the Community Mental Health Survey 2020. 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 2020 are as follows:

Raw / uncleaned data: 'Raw' or 'uncleaned' data are data that have been entered verbatim from completed questionnaires without any editing taking place to remove contradictory or inappropriate responses; thus, all response boxes crossed on the questionnaire should be included in the data entry spreadsheet (see 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. Ensuring high data quality is paramount and errors resulting from data entry problems can and should be corrected by checking against the appropriate completed questionnaire.

Data cleaning: The Survey Coordination Centre for Existing Methods uses the term 'data cleaning' to refer to all editing processes undertaken upon survey data once the survey has been completed and the data has been entered and collated.

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 Community Mental Health Survey 2020, the routing questions in the questionnaire are **Q1, Q7, Q11, Q14, Q16, Q18, Q23, Q25, and Q38.**[1]
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

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[1] Q1 is considered a routing question. However it is cleaned differently from the other routing questions due to the nature of the question. If option 4 ('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).

Community Mental Health Survey 2020, the filtered questions in the questionnaire are **Q8-Q10, Q12-Q13, Q15, Q17, Q19-Q24, Q26-Q29 and Q39-Q40.**

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 4 at Q1). For the Community Mental Health Survey 2020, the non-filtered questions are **Q1-Q7, Q11, Q14, Q16, Q18, Q25, Q30-Q38 and Q41-Q46.**

Sample data: Service user data that is provided from the trust as part of the sampling process. This includes gender, year of birth, ethnicity, date of last contact, CPA status, CCG code,Care Cluster and mobile phone indicator.

Response data: Data from the completed questionnaire which is provided from the service user. This includes answers to Q1 through Q46.

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). Out-of-range responses entered into the dataset should not be automatically (e.g. algorithmically) removed prior to submitting the data to the Survey Coordination Centre for Existing Methods.

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 after fieldwork started
> Outcome 4: Too ill / opt out
> Outcome 5: Ineligible
> Outcome 6: Unknown
> Outcome 7: Deceased prior to fieldwork

Non-specific response: This is a loose term for response options that can be considered as not being applicable to the respondent in terms of directly answering the specific question to which they are linked. Most commonly, these are responses such as "Don't know / can't remember", which indicate a failure to recall the issue in question. 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'. A full list of such responses for the 2020 Community Mental Health Survey can be found in Appendix C. Please note: non-specific responses are set to user missing in the final respondent level dataset. This does not delete the data in any way but alters how that data is used in analysis.

Missing responses: This term is used to describe data which are not stored as a valid response for a question or variable in a dataset. There can be a number of different types of missing data, with the most common being classed as 'user missing' data. Within the data cleaning process, a number of different missing response codes are used to identify how data for a particular respondent has been handled. These codes are as follows:

- 999: this code is used when someone should have answered a question, but did not. For example, non-filtered questions or filtered questions where the respondent meets the filter criteria.

- 998: this code is used when someone answered a question but should not have. For example, filtered questions.

- 996: this code is used to suppress data at trust level when a question has fewer than 30 responses. These responses would also remain suppressed from the overall base at a national level

Entering and coding data prior to submission

For the 2020 survey, trusts and contractors are required to submit raw ('uncleaned') data to the Survey Coordination Centre for Existing Methods. For clarification, raw data is created as follows:

- All responses should be entered into the dataset, regardless of whether or not the respondent was meant to respond to the question (e.g. where service users answer questions that they have been directed to skip past, these responses should still be entered).

- Where a respondent has selected more than one response category on a question, this question should be set to 'missing' for that person in the data (i.e. left blank, or coded as a full stop (.)). The exceptions to this are for the 'multiple response' questions, where respondents may select more than one response option and for Q35 where a code of '98' is used for respondents who have circled more than one answer as it cannot be determined which number they wanted to circle

- Where a respondent has crossed out a response, this should not be entered in the data (the response should be left blank, or coded as a full stop (.)). Where a respondent has crossed out a response and instead selected a second response option, the second choice should be entered into the data.

- Where a respondent has given their response inconsistently with the formatting of the questionnaire but where their intended response is nonetheless unambiguous upon inspection of the completed questionnaire, then the respondent's intended response should be entered. For example, where a respondent has written their date of birth underneath the boxes at Q43 ("What was your year of birth?"), then their year of birth should be entered.

- For the year of birth / age questions, unrealistic responses should still be entered except following the rule above. For example, if a respondent enters '2019' in the year of birth box, this should still be entered unless the respondent has unambiguously indicated their actual year of birth to the side.

- Once the data has been entered, no responses should be removed or changed in any way except where responses are known to have been entered incorrectly or where inspection of the questionnaire indicates that the service user's intended response has not been captured. This includes 'out-of-range' responses, which must not be automatically removed from the dataset. Responses in the dataset should only be changed before submission to the Survey Coordination Centre for Existing Methods where they are found to have been entered inconsistently with the respondent's intended response.

Editing and cleaning data after submission

Approach and rationale

The aim of the SCCEM in cleaning the collated final data is to ensure an optimal balance between data quality and completeness. Thus, we seek to remove responses that are known to be erroneous or inappropriate, but to do so in a relatively permissive way to enable as many responses as possible to contribute to the overall survey results.

Dealing with filtered questions

Some of the questions included in the survey are only relevant to a subset of respondents, and in these cases filter instructions are included in the questionnaire to route respondents past questions that are not applicable to them.

It is necessary to clean the data to recode responses where filter instructions have been incorrectly followed. In such cases, participants' responses to questions that were not relevant to them are recoded in the dataset. Responses are only recoded where respondents have answered filtered questions despite selecting an earlier response on a routing question instructing them to skip these questions.

In such cases, participants' responses to questions that were not relevant to them are recoded to '998' to indicate a non-applicable response.[1] See table 1 for a list of all routing questions included in the Community Mental Health Survey 2020, the response values that require cleaning, and the appropriate filtered questions to recode as '998'.

Table 1. Appropriate cleaning for routing questions in the Community Mental Health Survey 2020

Routing question	Response values requiring cleaning	Filtered questions to be recoded
Q1	4	See **Eligibility**.
Q7	2 or 3	**Q8 – Q10**
Q11	3	**Q12 – Q13**
Q14	2 or 3	**Q15**
Q16	2 or 3	**Q17**
Q18	2	**Q19 – Q24**
Q23	2 or 3	**Q24**
Q25	2, 3, 4 or 5	**Q26 – Q29**
Q38	2	See **Cleaning special cases.**

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

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[1] Code '998' is an arbitrary value chosen because it is out of range for all other questions on the survey.

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

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 1:

In the example above (example 1), the response to Q15 would be recoded to '998' because according to their answer from Q14 (the routing question), they were supposed to skip Q15. Responses to filtered questions are not removed where the response to the routing question is missing.

Example 2:

In the example above (example 2), the response to Q15 would remain as code 2 and Q14 would be coded as missing (999).

Cleaning special cases

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

Cleaning of Q9 and Q10

> **Q8** Is the **main** person in charge of organising your care and services…
> **Q9** Do you know how to contact this person if you have a concern about your care?
> **Q10** How well does this person organise the care and services you need?

If **Q8** has been given a response option of 1 ('A GP' is the main person in charge of organising their care and services) then **Q9** and **Q10** 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 the service user's care and services is not someone from the mental health trust.

Cleaning of Q14 and Q15

> **Q2** Overall, how long have you been in contact with NHS mental health services?
> **Q14** In the last 12 months, have you had a specific meeting with someone from NHS mental health services to discuss how your care is working?
> **Q15** Did you feel that decisions were made **together** by you and the person you saw during this discussion?

As Q14 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 **Q14** and **Q15** 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 meeting to discuss how their care is working.

Cleaning of Q38, Q39 and Q40

> **Q38** 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.
> **Q39** 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.
> **Q40** Do any of these reduce your ability to carry out day-to-day activities?

Although Q38 is a routing question and Q39 and Q40 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 Q38 but has answered Q39 by selecting one or more long term conditions, their response to Q38 is cleaned. This is because their response to Q39 indicates that they do in fact have a long-standing condition and therefore their response to Q38 is likely to be incorrect.

However, when a respondent has answered 'No' to Q38 and has not selected any long-term conditions at Q39 but has answered Q40 then their response to Q40 is cleaned. As they have indicated that they do not have a long-term condition and have also skipped Q39, this would suggest that their response to Q40 is incorrect. See table 2 for a summary of how Q38, Q39 and Q40 are cleaned.

Table 2. Cleaning for Q38, Q39 and Q40

Q38 response	Q39 response	Q40 response	Cleaning
Ticked option 2 (no)	Ticked one or more options	No response	Q38 is set to missing (999).
Ticked option 2 (no)	Ticked one or more options	Ticked any option	Q38 is set to missing (999).
Ticked option 2 (no)	No response	Ticked any option	Q40 is set to not applicable (998)

Dealing with multiple response questions

For most questions, each column corresponds to one survey question. There are two exceptions to this rule; **Q8**[1] and the multiple response question **Q39** where each response option is treated as a separate question.

Each response option that is ticked for **Q8** and **Q39** 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 usablilty.

Example

8. 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

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[1] Q8 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.

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

Column headings	Q8_1	Q8_2	Q8_3
Codings for this example	1	1	0

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 if their sample data is not missing and therefore remain as outcome 1. 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. We cannot be certain whether the mismatch occurs due to an error in the sample file or an error in the service user's completion of the questionnaire. It is also possible that there has been an error in data entry.

In instances where the sample data is missing, the response data is the only proof of age available. If the response data indicates the respondent is under the age of 18, the respondent will be considered ineligible (outcome 5). See table 3.

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 ≤ 2002	Q43 > 2002	Eligible	1
1	YoB ≤ 2002	Q43 ≤ 2002	Eligible	1
1	YoB ≤ 2002	Q43 = missing	Eligible	1
1	YoB ≤ 2002	Q43 = out of range[1]	Eligible	1
1	YoB = missing	Q43 > 2002	Ineligible	5
1	YoB = missing	Q43 = missing	Ineligible	5
1	YoB = missing	Q43 = out of range	Ineligible	5

Q1 / Contact with NHS mental health services

A respondent who has marked response option 4 for **Q1**[1] (stating they 'have never seen anyone from NHS mental health services') is recoded from outcome 1 to outcome 5. This is because the

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[1] Out-of range responses for Q43 are defined as Q43 $\leq$ 1900 or Q43 $\geq$ 2003 (see 'Out-of-range data' for more details)

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 Q46 are set to system 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)[2].

Out-of-range data

A common error when completing year of birth questions is for respondents to accidentally write in the current year. In this case, the response to **Q43** would be considered as an out-of-range response and would therefore be set to missing (999). For the Community Mental Health Survey 2020, out-of range responses for **Q43** are defined as **Q43 ≤ 1900 or Q43 ≥ 2003.** 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 three response options[3] (i.e. Q7, Q9, Q11, Q14, Q16, Q23, Q24, Q36, Q37 and Q40) with response data of **≤ 0 or ≥ 4** would be set to missing. A full list of out-of-range responses for the Community Mental Health Survey 2020 is listed in Appendix B: Out-of-range data.

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[1] Q1 is a routing question which instructs respondents to go to the next applicable question. If a respondent ticks response option 4, the next applicable question is Q38 because Q2 through Q37 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 Q38 through Q46.

[2] 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.

[3] With the exception of Q8 which is treated as a multiple response question.

Usability

Sometimes questionnaires are returned with only a very small number of questions completed. For the Community Mental Health Survey 2020, questionnaires containing fewer than five responses are considered 'unusable' – we will set all responses pertaining to such cases as system 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, Q39 would be counted as one response in the below scenario:

39. **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

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respondents were explicitly instructed to answer filtered questions should such blank cells be coded as missing responses.

The SCCEM codes missing responses in the data as '999'[1]. For results to be consistent with those produced by the SCCEM, missing responses should be presented but should not be included in the base number of respondents for percentages.

The SCCEM will suppress results at both national and trust level for questions that have fewer than 30 respondents[2] and code as '996'.

Non-specific responses

As well as excluding missing responses from results, the SCCEM 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 Community Mental Health Survey 2020, please see Appendix C: Non-specific responses.

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[1] This is an arbitrary value chosen because it is 'out-of-range' for all other questions on the survey.

[2] This does not include the demographic items included in the 'about you' section of the questionnaire.

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 (Q25=2) and respondent '005' has reported that they cannot remember if they have received any NHS therapies (Q25=5), but they have both responded to filtered questions Q26, Q27, Q28 and Q29.

Record	Outcome	Q25	Q26	Q27	Q28	Q29
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?	Do you feel your NHS therapies have helped your mental health?	Overall, how did you feel about the length of time you waited before receiving NHS therapies?
001	6					
002	1	2	1	2	2	2
003	1	1	2	4		
004	4					
005	1	5	3	3	1	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, the SCCEM will remove these inappropriate responses. Firstly, the filter instructions specify that:

Routing question	Response values requiring cleaning	Filtered questions to be recoded
Q25	2, 3, 4 or 5	**Q26 – Q29**

In accordance with this, all responses for **Q26**, **Q27, Q28** and **Q29** must be set to not applicable in cases where the respondent has answered **Q25 = 2, 3, 4 or 5** (i.e. had not received NHS therapies).

Figure 2 below shows how the data would look after cleaning is done by the SCCEM to remove responses to filtered questions that should have been skipped – cells where responses have been set to not applicable are shaded.

Record	Outcome	Q25	Q26	Q27	Q28	Q29
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?	Do you feel your NHS therapies have helped your mental health?	Overall, how did you feel about the length of time you waited before receiving NHS therapies?
001	6					
002	1	2	998	998	998	998
003	1	1	2	4	1	1
004	4					
005	1	5	998	998	998	998
006	6					
007	1	1	2	2	2	3
008	1	1	3	2		

Figure 2. Example of cleaned data

Appendix B: Out-of-range data

Variable	Out-of-range data
Birth	≤ 1900 ≥ 2003
Gender	≤ 0 3-8 ≥ 10
Ethnic	Anything except A-H, J-N, P, R, S, Z or 99
DayLcon	≤ 0 ≥ 32
MonthLCon	≤ 0 4-8 ≥ 13
YearLCon	≤ 2018 ≥ 2021
DayQRec	≤ 0 ≥ 32
MonthQRec	≤ 1 ≥ 7
YearQRec	≤ 2019 > 2020
Q1	≤ 0 ≥ 5
Q2	≤ 0 ≥ 7
Q3	≤ 0 ≥ 6
Q4	≤ 0 ≥ 5
Q5	≤ 0 ≥ 5
Q6	≤ 0 ≥ 6
Q7	≤ 0 ≥ 4
Q8_1	< 0 ≥ 2
Q8_2	< 0 ≥ 2
Q8_3	< 0 ≥ 2

Variable	Out-of-range data
Q9	≤ 0 ≥ 4
Q10	≤ 0 ≥ 5
Q11	≤ 0 ≥ 4
Q12	≤ 0 ≥ 6
Q13	≤ 0 ≥ 5
Q14	≤ 0 ≥ 4
Q15	≤ 0 ≥ 6
Q16	≤ 0 ≥ 4
Q17	≤ 0 ≥ 7
Q18	≤ 0 ≥ 3
Q19	≤ 0 ≥ 6
Q20	≤ 0 ≥ 5
Q21	≤ 0 ≥ 5
Q22	≤ 0 ≥ 5
Q23	≤ 0 ≥ 4
Q24	≤ 0 ≥ 4
Q25	≤ 0 ≥ 6
Q26	≤ 0 ≥ 5
Q27	≤ 0 ≥ 6
Q28	≤ 0 ≥ 5

Variable	Out-of-range data
Q29	≤ 0 ≥ 5
Q30	≤ 0 ≥ 7
Q31	≤ 0 ≥ 6
Q32	≤ 0 ≥ 7
Q33	≤ 0 ≥ 5
Q34	≤ 0 ≥ 8
Q35	< 0 ≥ 11
Q36	≤ 0 ≥ 4
Q37	≤ 0 ≥ 4
Q38	≤ 0 ≥ 3
Q39_1	< 0 ≥ 2
Q39_2	< 0 ≥ 2
Q39_3	< 0 ≥ 2
Q39_4	< 0 ≥ 2
Q39_5	< 0 ≥ 2
Q39_6	< 0 ≥ 2
Q39_7	< 0 ≥ 2
Q39_8	< 0 ≥ 2
Q39_9	< 0 ≥ 2
Q39_10	< 0 ≥ 2
Q39_11	< 0 ≥ 2
Q39_12	< 0 ≥ 2
Q39_13	< 0 ≥ 2
Q40	≤ 0 ≥ 4
Q41	≤ 0 ≥ 5

Variable	Out-of-range data
Q42	≤ 0 ≥ 3
Q43	≤ 1900 ≥ 2003
Q44	≤ 0 ≥ 10
Q45	≤ 0 ≥ 6
Q46	≤ 0 ≥ 19

Appendix C: Non-specific responses

The following table lists all 'non-specific responses' included in the Community Mental Health Survey 2020. 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 **last time** you saw someone from the **NHS mental health services**?	3,4
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 **often enough** for your needs?	5
Q4	Were you given **enough time** to discuss your needs and treatment?	4
Q5	Did the person or people you saw **understand** how your mental health needs affect **other areas of your life**?	4
Q6	Did the person or people you saw appear to be aware of your **treatment history**?	4,5
Q7	Have you been told **who is in charge** 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
Q8	Is the **main** person in charge of organising your care and services….	3
Q9	Do you know how to contact this person if you have a concern about your care?	3
Q10	How well does this person organise the care and services you need?	-
Q11	Have you agreed with someone from **NHS mental health services** what care you will receive?	-
Q12	Were you involved as much as you wanted to be in agreeing what care you will receive?	4,5

No.	Question	Non-specific responses
Q13	Does this agreement on what care you will receive take into account your needs in other areas of your life?	4
Q14	In the last 12 months have you had a specific meeting with someone from NHS mental health services to discuss how your care is working?	3
Q15	Did you feel that decisions were made **together** by you and the person you saw during this discussion?	4,5
Q16	Would you know who to contact out of office hours within the **NHS** if you have a crisis?	3
Q17	**In the last 12 months,** did you get the help you needed when you tried contacting this person or team?	5,6
Q18	In the last 12 months, have you been receiving any **medicines** for your mental health needs?	-
Q19	Were you **involved** as much as you wanted to be in decisions about which **medicines** you receive?	4,5
Q20	Has the **purpose** of your medicines ever been discussed with you?	4
Q21	Have the possible **side-effects** of your medicines ever been discussed with you?	4
Q22	Do you feel your **medicines** have helped your mental health?	4
Q23	Have you been receiving any **medicines** for your mental health needs for 12 months or longer?	3
Q24	In the last 12 months, has an **NHS mental health worker** checked with you about how you are getting on with your medicines? (That is, have your medicines been reviewed?)	3
Q25	In the last 12 months, have you received any **NHS therapies** for your mental health needs that do not involve medicines?	4,5
Q26	Were these **NHS therapies** explained to you in a way you could understand?	4
Q27	Were you **involved** as much as you wanted to be in deciding what **NHS therapies** to use?	4,5

No.	Question	Non-specific responses
Q28	Do you feel your **NHS therapies** have helped your mental health?	4
Q29	Overall, how did you feel about the length of time you waited before receiving **NHS therapies**?	4
Q30	In the last 12 months, did NHS mental health services **support you** with your **physical health needs** (this might be an injury, a disability, or a condition such as diabetes, epilepsy, etc)?	4,5,6
Q31	In the last 12 months, did NHS mental health services give you any **help or advice** with **finding support** for **financial advice or benefits**?	4,5
Q32	In the last 12 months, did NHS mental health services give you any **help or advice** with **finding support** for **finding** or **keeping work** (paid or voluntary)?	4,5,6
Q33	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
Q34	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
Q35	Overall….	-
Q36	Overall in the last 12 months, did you feel that you were treated with **respect and dignity** by NHS mental health services?	-
Q37	Aside from in this questionnaire, in the last 12 months, have you been asked by NHS mental health services to give your views on the quality of your care?	3
Q38	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.	-
Q39	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.	-
Q40	Do any of these reduce your ability to carry out day-to-day activities?	-
Q41	Who was the main person or people that filled in this questionnaire?	-
Q42	Are you male or female?	-

No.	Question	Non-specific responses
Q43	What was your **year of birth**? (Please write in)	-
Q44	What is your religion?	-
Q45	Which of the following best describes how you think of yourself?	-
Q46	What is your ethnic group? (**Cross ONE box only**)	-