

SURVEY HANDBOOK

2025 COMMUNITY MENTAL HEALTH SURVEY

Last updated: June 2025

# Contents

[Section 1: About this handbook 3](#_Toc194667549)

[Section 2: Introduction 4](#_Toc194667550)

[2.1 The importance of service user feedback 4](#_Toc194667551)

[2.2 Overview of the Community Mental Health Survey 4](#_Toc194667552)

[2.3 Use of Community Mental Health Survey Data 4](#_Toc194667553)

[Section 3: Survey timetable 6](#_Toc194667554)

[Section 4: Data protection and confidentiality 9](#_Toc194667555)

[4.1 Data protection and confidentiality 9](#_Toc194667556)

[4.2 Data Security and Protection Toolkit 10](#_Toc194667557)

[4.3 Ethics 10](#_Toc194667558)

[4.4 Research governance requirements 10](#_Toc194667560)

[Section 5: Changes to the survey 12](#_Toc194667561)

[Section 6: Managing the survey 15](#_Toc194667562)

[6.1 Setting up a project team 15](#_Toc194667563)

[6.2 Displaying dissent posters 15](#_Toc194667564)

[6.3 Compiling a list of service users 16](#_Toc194667565)

[6.4 Conducting DBS checks 17](#_Toc194667566)

[6.5 Submitting your sample file 18](#_Toc194667567)

[Section 7: Fieldwork preparation 20](#_Toc194667568)

[7.1 Setting up freepost address and PO box 20](#_Toc194667569)

[7.2 Prepare the survey materials 20](#_Toc194667570)

[7.1 Prepare the survey materials 21](#_Toc194667571)

[7.2 Printing the survey materials 23](#_Toc194667572)

[7.3 Implementing the online survey 24](#_Toc194667573)

[7.4 Quality Assurance of survey materials 24](#_Toc194667580)

[7.5 Publicising the survey 25](#_Toc194667581)

[Section 8: Conducting fieldwork 26](#_Toc194667582)

[8.1 Mailing protocol 26](#_Toc194667583)

[8.2 SMS reminders 27](#_Toc194667584)

[8.3 DBS and local extractions 28](#_Toc194667585)

[8.4 Weekly monitoring (for contractors and in-house trusts only) 29](#_Toc194667586)

[8.5 Reviewing open-ended comments 29](#_Toc194667587)

[8.6 Processing returned paper questionnaires 30](#_Toc194667588)

[Section 9: Survey communications 31](#_Toc194667589)

[9.1 Managing and recording service user communications 31](#_Toc194667590)

[Section 10: Survey accessibility 32](#_Toc194667591)

[Section 11: Submitting interim data 34](#_Toc194667592)

[Section 12: Final data 35](#_Toc194667593)

[12.1 Free-text data 35](#_Toc194667594)

[12.2 Entering easy read responses 36](#_Toc194667595)

[12.3 Checking final data 36](#_Toc194667596)

[12.4 Submitting data 36](#_Toc194667597)

[12.5 Making sense of the data 36](#_Toc194667598)

[Section 13: Appendix – online survey guidelines 38](#_Toc194667599)

[13.1 Introduction to online survey guidelines 38](#_Toc194667600)

[13.2 Requirements 38](#_Toc194667602)

[13.3 English online survey 41](#_Toc194667610)

[13.4 Translated online survey 41](#_Toc194667611)

[13.5 Quality Assurance 41](#_Toc194667612)

**Table of Figures**

1. Table 1. Timetable for Approved Contractors ……………………………………………………….. 6
2. Table 2. Timetable for contractors hosting their own online survey ………………………………. 7
3. Table 3. Timetable for trusts working with Approved Contractors ………………………………… 8
4. Table 5. Changes to the 2025 survey ………………………………………………………………… 12
5. Table 6. DBS and local checks requirements ……………………………………………………….. 17
6. Table 7. Print specification …………………………………………………………………………….. 22
7. Table 8. Mailing protocol ……………………………………………………………………………….. 27
8. Table 9. DBS protocol ………………………………………………………………………………….. 29
9. Table 10. Guidance on providing accessible formats of the survey ………………………………. 32

# Section 1: About this handbook

This handbook details the processes involved in preparing and running the 2025 NHS Community Mental Health Survey. **The information contained in this handbook supersedes all previous versions of the handbook.**

The handbook is designed to be used by trusts delivering the survey in partnership with an approved contractor or for trusts delivering the survey in-house.

There are a number of documents that should be used in conjunction with this handbook. These are:

* [The Sampling Instructions](https://nhssurveys.org/wp-content/surveys/05-community-mental-health/03-instructions-guidance/2025/Sampling%20Instructions.docx), which contains detailed information about how the sample should be drawn.
* [The Sample Construction Spreadsheet](https://nhssurveys.org/wp-content/surveys/05-community-mental-health/03-instructions-guidance/2025/Sample%20construction%20spreadsheet_for%20trust%20using%20approved%20contractor.xlsx), which is used by trusts to construct the sample of service users.
* [The Sample Declaration Form](https://nhssurveys.org/wp-content/surveys/05-community-mental-health/03-instructions-guidance/2025/Sample%20Declaration%20Form.xlsx), which is used to confirm the sample has been drawn correctly before submission.
* [The Data Entry Spreadsheet](https://nhssurveys.org/surveys/survey/05-community-mental-health/year/2025/), which is used to collate the final survey data.

The most recent versions of these [documents can be downloaded from the NHS surveys website](https://nhssurveys.org/surveys/survey/05-community-mental-health/year/2025/).

If you have any queries about the contents of the handbook, please contact your approved contractor in the first instance (where relevant), or the Survey Coordination Centre (SCC) [mentalhealth@surveycoordination.com](mailto:mentalhealth@surveycoordination.com).

# Section 2: Introduction

## The importance of service user feedback

Improving the experience of individual patients and service users is at the centre of the NHS Constitution, which requires that services reflect the needs and preferences of service users, their families, and their carers:

"You have the right to receive care and treatment that is appropriate to you, meets your needs, and reflects your preferences."[[1]](#footnote-2)

Furthermore, taking account of service users’ views and priorities can lead to the delivery of real service improvements. It is therefore important that all NHS trusts give service users the opportunity to feedback on their care and treatment. The NHS Patient Survey Programme (NPSP) provides an important mechanism for achieving this by:

* Providing information to support local quality improvement initiatives
* Tracking changes in service user experience locally over time
* Providing information for active performance management
* Providing information to support public and parliamentary accountability
* Providing information for the Care Quality Commission’s programme of reviews, monitoring, and inspections.

## Overview of the Community Mental Health Survey

The NPSP was established by the Department of Health and Social Care (DHSC) and has been operating since 2002. It is now overseen by CQC, the independent regulator of health and adult social care in England. CQC regulates care provided by the NHS, private companies, and voluntary organisations, and aims to ensure that better care is provided for everyone.

The Survey Coordination Centre is based at Picker and works under contract to the CQC to design, test, and coordinate the 2025 Community Mental Health Survey.

Please note that the Survey Coordination Centre is a completely separate division at Picker from the approved contractor. View the [full list of CQC approved contractors](http://nhssurveys.org/approvedcontractors) on the NHS Surveys website.

## 2.3 Use of Community Mental Health Survey Data

Information drawn from the questions in the 2025 Community Mental Health Survey will be used by the CQC in its [assessment of community mental health trusts](https://www.cqc.org.uk/what-we-do/services-we-regulate/find-mental-health-service) in England. Questions from the survey will be used within CQC’s performance monitoring tools and within CQC’s inspections of community mental health services.

In addition to the performance assessment, CQC will publish comparable data from the survey to allow trusts to make meaningful comparisons between themselves based on reliable data.

1. Asking each trust to carry out a service user survey in a consistent way builds a detailed picture of service users' experiences of NHS community mental health services. The data is used by a range of organisations for different purposes. For example:

* Information drawn from the questions in the survey is used by the CQC within its performance monitoring tools and inspections of community mental health services.
* Published data from the survey allows for reliable comparisons between trusts.
* Information collected nationally in a consistent way is also essential to support public and parliamentary accountability.
* The results are used by NHS England and the Department for Health and Social Care for performance assessment, improvement, and regulatory purposes.

CQC intends to archive the survey data with the UK Data Service after the analysis is completed and published. This will be done with appropriate safeguards that ensure service user confidentiality.

# Section 3: Survey timetable

1. The following timetables detail the key dates for: approved contractors (Table 1); contractors hosting their own online survey (Table 2); the trusts who are working with approved contractors (Table 3). Please ensure that you refer to the relevant timetable.
2. *Table 1. Timetable for Approved Contractors*

|  |  |  |
| --- | --- | --- |
| **Task** | **Responsibility** | **Date** |
| Briefing and Q&A with approved contractors | SCC | 13 June 2025 |
| Final materials available on the website (questionnaire and cover letters)\* | SCC | 23 June 2025 |
| Send PDF copies of the questionnaire, cover letter and SMS text to Survey Coordination Centre | Approved contractor | 07 July 2025 |
| Send hard copies of the questionnaire, cover letter and SMS text to Survey Coordination Centre | Approved contractor | 23 July 2025 |
| Start submitting weekly sample checking update to Survey Coordination Centre | Approved contractor | 08 July 2025 |
| Submit sample data to the Survey Coordination Centre | Approved contractor | By 31 July 2025 |
| Survey Coordination Centre to contact all trusts with outstanding sample data | SCC | 04 August 2025 |
| CQC to contact all trusts with outstanding sample data | CQC | 11 August 2025 |
| Fieldwork starts\*\* | Approved contractor | 18 August 2025 |
| Deadline to have 85% of trust in field and 95% of samples signed off | Approved contractor | 12 September 2025 |
| Send interim data to Survey Coordination Centre | Approved contractor | 10 October 2025 |
| Fieldwork ends | Approved contractor | 28 November 2025 |
| Send final data to Survey Coordination Centre | Approved contractor | 5 December 2025 |

\*Draft versions will be shared with contractors in May.

\*\*Fieldwork may start earlier than the official start date, as long as the sample and survey materials have been signed off by the Survey Coordination Centre, the sample has been loaded into the online survey and the DBS checks are in date.

Detailed timings for the development of the online survey are outlined below, if there are likely to be challenges with meeting these timings this should be flagged at least 10 days in advance to Survey Coordination Centre.

Table 2. Timetable for contractors hosting their own online survey

|  |  |  |  |
| --- | --- | --- | --- |
| Task | Responsibility | Start | Finish |
| Updated English online survey, QA documentation and change log shared with contractors | SCC | 23 June 2025 | 23 June 2025 |
| **English online survey tool** | | | |
| Scripting and checking online survey – English | Approved contractor | 24 June 2025 | 07 July 2025 |
| Send English online version to Survey Coordination Centre | Approved contractor | 07 July 2025 | 07 July 2025 |
| Survey Coordination Centre to review English online survey tool | SCC | 08 July 2025 | 09 July 2025 |
| Contractor to amend English version | Approved contractor | 10 July 2025 | 14 July 2025 |
| Survey Coordination Centre sign off English online survey tool | SCC | 15 July 2025 | 16 July 2025 |
| CQC to review translated version of contractor online survey | CQC | 17 July 2025 | 18 July 2025 |
| Amends made by contractors and sent back to CQC | Approved contractor | 21 July 2025 | 23 July 2025 |
| CQC review and sign off contractor surveys | CQC | 24 July 2025 | 25 July 2025 |
| **Translated online survey tool** | | | |
| Translations shared with contractors | SCC | 07 July 2025 | 07 July 2025 |
| Contractors to add in translations and send to Survey Coordination Centre | Approved contractor | 28 July 2025 | 28 July 2025 |
| Survey Coordination Centre to review translated online survey tool | SCC | 29 July 2025 | 30 July 2025 |
| Contractors amend translation version | Approved contractor | 31 July 2025 | 01 August 2025 |
| Survey Coordination Centre to sign off contractor surveys | SCC | 04 August 2025 | 04 August 2025 |
| CQC to review translated version of contractor online survey | CQC | 05 August 2025 | 06 August 2025 |
| Amends made by contractors and sent back to CQC | Approved contractor | 07 August 2025 | 08 August 2025 |
| CQC review and sign off contractor surveys | CQC | 11 August 2025 | 11 August 2025 |

Table 3. Timetable for trusts working with Approved Contractors

|  |  |  |
| --- | --- | --- |
| **Task** | **Responsibility** | **Date** |
| Dissent posters available on the website | SCC | March 2025 |
| Dissent posters to be displayed in trusts | Trust | April and May 2025 |
| Ensure project team (Caldicott Guardian and person drawing sample) are aware of project timings | Trust | June 2025 |
| Provide Survey Coordination Centre with contact details of project team | Trust | June 2025 |
| 2nd Trust Webinar | SCC | 19 June 2025 |
| Sample to be drawn and checked | Trust | 1 July 2025 – 31 July 2025 |
| Completed sample declaration form to be signed by Caldicott Guardian | Trust | To be confirmed by approved contractor |
| Submit sample declaration form to approved contractor | Trust | To be confirmed by approved contractor |
| Submit sample to approved contractor | Trust | To be confirmed by approved contractor |
| Survey Coordination Centre to contact all trusts with outstanding sample data | SCC | 4 August 2025 |
| CQC to contact all trusts with outstanding sample data | CQC | 11 August 2025 |
| Fieldwork starts\* | Approved contractor | 18 August 2025 |
| Fieldwork ends | Approved contractor | 28 November 2025 |

\*Fieldwork may start earlier than the official start date, as long as the sample and survey materials have been signed off by the Survey Coordination Centre, the sample has been loaded into the online survey and the DBS checks are in date.

# Section 4: Data protection and confidentiality

## Data protection and confidentiality

This survey has been awarded [approval under Section 251 of the NHS Act 2006.](https://nhssurveys.org/surveys/survey/05-community-mental-health/)

Any suspected breach of Section 251 approval by your trust should be raised with your approved contractor, or the SCC, immediately. Breaches will need to be reviewed, and your trust will need to decide whether the breach is to be reported through the Data Security and Protection Toolkit. CQC are obligated to inform the Confidentiality Advisory Group at the Health Research Authority of any breaches and the outcomes of incident reviews.

When carrying out your survey, you will need to ensure that you comply with the General Data Protection Regulation ([GDPR](https://digital.nhs.uk/services/national-data-opt-out/understanding-the-national-data-opt-out/protecting-patient-data)) in providing individuals with sufficient information about the survey (via dissent posters and leaflets) and [ensuring that all responses are kept confidential.](http://nhssurveys.org/survey-instructions/data-protection-and-confidentiality/) If you have not already done so, please ensure that you add ‘research’ as one of the purposes for processing personal data supplied by data subjects under your privacy notices and, to the extent applicable, any necessary consents are obtained to the sharing of this data.

**General Data Protection Regulation (GDPR)**

Changes in the law governing the management and use of patient data went into effect on the 25th May 2018 (known as the GDPR). The Data Protection Act 1998 is the UK’s implementation of [the GDPR](https://digital.nhs.uk/services/national-data-opt-out/understanding-the-national-data-opt-out/protecting-patient-data) and outlines how personal data should be managed by organisations.

If your trust has implemented operational changes as a consequence of the GDPR and you think these changes will impact how you sample and how you share data, please contact the Survey Coordination Centre: [mentalhealth@surveycoordination.com](mailto:mentalhealth@surveycoordination.com).



If you are conducting the survey **in-house**, that is, you are undertaking the survey yourself and have not employed the services of an approved contractor, you must ensure that a Declaration of Compliance with the General Data Protection Regulation is completed for all staff working with the data, which must be signed off by your trust’s Caldicott Guardian. Only trust staff who have completed this declaration will be authorised to view this restricted data. If the trust’s Caldicott Guardian does not authorise this, the trust must carry out the survey using an approved contractor. The statement of compliance should be submitted to the SCC no later than **27 June 2025** This is to confirm that data shall only be displayed, reported, or disseminated in compliance with guidelines outlines in the Survey Handbook.

If you are conducting the survey **in-house,** you will also need to comply with the [NHS Code of Practice on Confidentiality](https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/200146/Confidentiality_-_NHS_Code_of_Practice.pdf), which incorporates the [Caldicott principles](https://www.ukcgc.uk/manual/principles). You should take particular care to ensure that your use of service user data in carrying out the survey complies with these six principles. In particular, you should be aware of the flows of service user data, and the issues which these present. If your trust is planning to implement trust-wide opt-in policies, or if your trust already has an opt-in consent mechanism in place, we ask you that you get in touch with the SCC.

**National Data Opt-out Programme**

The [National Data Opt-out Programme](https://digital.nhs.uk/services/national-data-opt-out-programme) does not apply to the surveys running under the NPSP and you must not exclude people on this basis. The 2025 Community Mental Health Survey will continue to operate separate opt-out mechanisms as described in the [Sampling Instructions](https://nhssurveys.org/wp-content/surveys/05-community-mental-health/03-instructions-guidance/2025/Sampling%20Instructions.docx). This means that service users do not have to actively consent to their data being used for the purpose of these surveys.

However, if service users choose to specifically opt-out of the 2025 survey, their wishes should be respected. [Dissent posters](https://nhssurveys.org/surveys/survey/05-community-mental-health/year/2025/) will need to be displayed in the trust during the sampling period, to ensure potential participants are made aware of the survey and have an opportunity to opt-out in advance if they would like to do so.



## Data Security and Protection Toolkit

All organisations that have access to NHS service user data and systems must use the Data Security and Protection Toolkit to measure their performance against the National Data Guardian’s 10 data security standards. This is to provide assurance that they are practicing good data security and that personal information is handled correctly. To find out more about the toolkit and create your account, please visit the [data security and protection toolkit web page](https://www.dsptoolkit.nhs.uk).

## Ethics

NHS organisations in England follow a [process of seeking approval to undertake research.](http://www.hra.nhs.uk/research-community/before-you-apply/) Although the NPSP is considered a service evaluation and therefore does not require approval, every survey within the programme has in the past applied for ethical approval to comply with best practice.

The 2025 Community Mental Health Survey will not submit an application to the National Office for Research Ethics Committees (NREC) for ethical approval, as this is not required for service evaluation. Furthermore, minimal changes have been made to the survey since ethical approval was granted for the 2023 Community Mental Health Survey. This is a deviation to the approach used on surveys prior to 2020 where ethical approval was sought on a discretionary basis. The Health Research Authority (HRA) has ruled that they will no longer be providing ethical approval for service evaluation studies.

## Research governance requirements

The [UK Policy Framework for Health and Social Care Research](https://www.hra.nhs.uk/planning-and-improving-research/policies-standards-legislation/uk-policy-framework-health-social-care-research/) sets out the principles of good research governance and aims to ensure that health and social care research is conducted to high scientific and ethical standards. It spells out standards and the responsibilities of various parties involved in the research. The CQC has produced [a table that sets out the responsibilities of organisations providing care](https://nhssurveys.org/survey-instructions/ethical-issues-ethics-committees-and-research-governance/) and the arrangements made by the CQC for patient surveys.

# Section 5: Changes to the survey

In 2023 the survey transitioned from a paper-based method to a mixed mode approach. This meant service users had the option of completing the questionnaire online in the first instance before being offered a paper questionnaire later in fieldwork. In addition to postal invitations and reminders, service users also received two text message (SMS) reminders containing a unique link to the online survey. The same method will be used for the 2025 survey.

The questionnaire, materials and sample variables have been reviewed for 2025 to ensure they reflect any new policies or changes in the way community mental health services are delivered, to identify any areas that are no longer relevant, and to incorporate feedback and learnings from the 2024 survey.

Table 5. Changes to the 2025 survey

|  |
| --- |
| **Questionnaire changes**  **New questions:**  Q13 is a new question asking, “Did your mental health team tell you who to contact if you had any questions or concerns about your care or treatment?”. This was added as stakeholders agreed that the survey should include a question about service users knowing whom to contact if they have questions or concerns between appointments. They also felt that service users should have a named contact for any questions or concerns.  A new Q19 has been added to ask service users if they have been given a diagnosis for their mental health. This question provides an opportunity for service users to flag if they receive a diagnosis if it has changed. It includes an option to opt out as some service users felt it could be too sensitive.  5 questions added to the online only survey on service users’ experiences transitioning from Children Young People’s Mental Health Services to Adult Mental Health Services. The 2023 survey attempted to explore the transition experience, but a sufficient number of responses were not received to report on the questions. For these reasons, the questions were not included in the 2024 survey. This year the transition questions will be included due to continued interest from stakeholders. The questions have been kept the same as 2023, to explore the possibility of combining data years. The questions will be only included in the online survey due to audience and paper questionnaire restrictions and restricted to those aged 16-25 years.  **Deleted questions:**  Q14 asking whether service users have a care plan has been removed. Trusts expressed that the term ‘care plan’ is mostly or always used when in discussion with service users, but that the language around the ‘care plan’ can be misleading as it is not always a specific document and might be incorporated within a clinical letter.  Q19 on asking if they felt in control of their care has been removed, as it was felt that this information is already covered by other questions in the survey, such as questions related to involvement and choices.  Q21 (“Who prescribed medication for your mental health needs?”) has been removed due to it being combined into another question: “In the last 12 months, have you been receiving any prescribed medication for your mental health needs?”.  Q33\_4 removed for the cost of living option, due to stakeholder feedback to combine the “In the last 12 months, did your NHS mental health team give you any help or advice with finding support for…Financial advice or benefits” and “In the last 12 months, did your NHS mental health team give you any help or advice with finding support for…Cost of living” questions into one (“In the last 12 months, did your NHS mental health team give you any help or advice with finding support for…Help with money or benefits”).  **Amended questions:**  Q15 is an amended question asking “Did your mental health team involve you in a plan for your care” which cognitive testing showed was easier to answer with previous iterations having too many response options. Stakeholder feedback noted that a service user’s care plan should focus on their goals and aspirations and both the service user and staff should be involved in creating it. Stakeholders wanted to move away from a focus on ‘agreeing’ the plan, as some service users will have been involved but not all will agree with the plan put in place.  Q20 has been amended by combining the two previous questions in the ‘Your Treatment’ section: “In the last 12 months, have you been receiving any medication for your mental health needs?” and “Who prescribed medication for your mental health needs?”. This amend has been added as the majority of survey respondents consistently reported that they receive medication, so it seemed sensible to combine to one question. This allowed for a new question to be added without increasing the number of questions in the survey.  Q27 (Q26 in CMH25) on whether service users know who to contact out of office hours within the NHS is they had a crisis has been amended to remove the explanation text that this should be a person or team within NHS mental health services.  Q28 (Q27 in CMH25) asking “In the last 12 months, have you contacted NHS mental health crisis support?” has been amended to provide service users with options to feedback on what crisis care support they utilised. Based on feedback from trusts and stakeholders, the question now includes NHS 111 mental health option, text support, local crisis service and A&E options.  Q29 (Q28 in CMH25), asking how service users felt about the length of time it took them to get through to someone last time they contacted NHS mental health crisis support, has been amended to get clarity on how long it took service users to get through to NHS mental health crisis support. The question was changed to past tense and was amended to explicitly state ‘NHS mental health crisis support’.  Q30 (Q29 in CMH25) asking ‘Thinking about the last time you contacted NHS mental health crisis support, did you get the help you needed?” has been amended to explicitly state ‘NHS mental health crisis support’.  Q31 (Q30 in CMH25) was amended so it was clear that the question was asking about the NHS mental health team giving service users’ family or carer information or support whilst in crisis.  Q33\_1, Q33\_3 (Q32\_1, Q32\_3 in CMH25) on whether the NHS mental health team give service users any help or advice with finding support has amended grid options by combining the previously-two response options (“Financial advice or benefits” and “Cost of living”), which stakeholders agreed are capturing the same aspect, into “Help with money or benefits”. It was fed back that this simplifies the language in this question, as it does with removing “or taking part in an activity” for Q33\_1 (Q32\_1 in CMH25).  The crisis care instruction text has been amended by including “NHS 111 mental health option” as an example of the number service users were told to contact. Mental health crisis support can now be accessed through NHS 111-phone line, mental health option. This amend has been added as feedback from trusts showed that there was mixed interest in capturing service user experience of NHS 111. NHS England are also keen to explore this area.  Q46 (Q45 in CMH25) amended text to “at birth were you assigned as” in order to keep consistent with text that follows. |
| **Covering letter changes:**  To make the survey more appealing and to drive up the response rate, additional text was added to the first covering letter: “The best way for us to improve our care is by hearing from people who have recently used our services. Last year, almost 15,000 adults used the survey to tell the NHS about their care and help improve services in the future. Your voice matters more than ever - share your experience in the NHS survey and help shape better care for everyone.”  The text to the final covering letter has been changed to “we recently sent”, instead of stating the month, as month can differ depending on when the trust entered fieldwork. |

# Section 6: Managing the survey

This section outlines the key stages involved in managing the survey, as well as drawing and submitting a trust sample. Detailed explanations of each of these stages are provided within the [Sampling Instructions](https://nhssurveys.org/wp-content/surveys/05-community-mental-health/03-instructions-guidance/2025/Sampling%20Instructions.docx).

Figure 1. Key stages to draw and submit the sample

Confirm project team with SCC

Display dissent posters

Compile list of individuals

Submit sample file

Submit sample declaration form

Conduct DBS checks

## Setting up a project team

We recommend you [set up a survey team](http://nhssurveys.org/survey-instructions/setting-up-a-project-team/) in your trust to assist you. The best way to ensure that your survey is a success is to involve from the beginning those people who have the most impact on service users’ experiences and who will be responsible for responding to the results of the survey. As a minimum, you will need a survey lead, a person from your data team who will draw your sample, and your Caldicott Guardian, who will sign off the sample before the data leaves your trust’s systems. Please provide your Caldicott Guardian with notice of this requirement to avoid delays in the sign-off process.

If there are any changes to the project team from previous years, please inform the Survey Coordination Centre.

As timing is crucial in implementing the survey, you might want to map planned leave of the members of the project team in order to ensure that deadlines are met. For example, you might want to consider who would be the person of contact to answer queries if the person who drew the sample is out of the office. This is particularly relevant during the sampling phase and when the questionnaires are being sent out.

## Displaying dissent posters

1. It is a requirement as per [Section 251 approval](https://nhssurveys.org/surveys/survey/05-community-mental-health/year/2025/) that your trust advertise the upcoming survey during the sampling period. This is done by putting up [dissent posters](https://nhssurveys.org/surveys/survey/05-community-mental-health/year/2025/) in the locations where trusts deliver services. Sharing also on the trust website, social media platforms, NHS patient portals and apps increases the opportunity for the trust to share information about the upcoming survey to the people who use their service.
2. The poster allows service users to be aware of the survey and provides an opportunity for them to
3. ask questions or give dissent if they wish to be excluded from taking part. The poster is available in English and the 12 most commonly spoken languages in England. Trusts should display the posters most relevant to their own service user populations.

Posters must be displayed throughout the entire sampling period. At minimum, this will be from 1 April until 31 May 2025. If your trust has not displayed the dissent poster during April and May, you should inform your Caldicott Guardian and gain their approval for continuing to create a sample.

A separate [16-17 year olds information leaflet](https://nhssurveys.org/wp-content/surveys/05-community-mental-health/02-survey-materials/2025/16-17%20year%20olds%20leaflet.pptx) has also been produced for trusts to share. This increases awareness of the survey and provides an opportunity for service users to ask questions or give dissent if they wish to be excluded from taking part. We are also advising that trusts hand out the leaflet to 16 and 17 year olds who attended appointments in April and May, as well as displaying the dissent poster and the 16-17 year olds leaflet on their website given that some service users continue to receive care and treatment via video and telephone consultations.

## Compiling a list of service users

You are required to follow the [sampling instructions](https://nhssurveys.org/wp-content/surveys/05-community-mental-health/03-instructions-guidance/2025/Sampling%20Instructions.docx) published for this survey. If an error in sampling is detected, queries will be raised, and you may be required to redraw your sample. This can cause delays in approving your sample which may result in a shorter fieldwork period for your trust. A shorter fieldwork period could impact on response rates as previous research has shown that any delay entering fieldwork can have an impact on demographic groups (such as younger service users and those from non-white ethnic categories) who tend to take longer to respond to surveys.

If you have any questions regarding the eligibility criteria or how to draw your sample, be sure to contact your approved contractor or the Survey Coordination Centre in plenty of time before drawing your sample.

1. Please ensure you provide service users mobile numbers, as this allows us to send SMS reminders. The Section 251 approval grants “the legal basis to allow access to the specified confidential patient information without consent.” This allows for trusts to provide details like service user postal addresses and applies to mobile numbers too.
2. Two members of staff from the Survey Coordination Centre will be included in the sample for each in-house trust and contractor. This will enable the Survey Coordination Centre to receive each mailing and reminder (including SMS reminders) in real time. These names and addresses will be provided ahead of sampling and should be randomly allocated to trusts where contractors are working with multiple trusts.

**Boosted samples**

For the 2025 Community Mental Health Survey, **boosted samples** **will be accepted**, and will be included as part of the analysis delivered by CQC. By submitting a higher number of service users in your sample, it means you will receive more data and will increase the possibility of granular reporting, this could include reporting by assessment service group and service or team type.

However, it is crucial that you ensure that any additional sampling does not affect the quality or the timeliness of the sampling for the survey. Common examples of this include sampling the same service user twice or including service users who did not have two contacts during the sampling period.



## Conducting DBS checks

Once you draw your sample of eligible service users, this list must be locally checked for deceased service users, **and** it must be submitted for DBS (Demographic Batch Service) checks. This is to check for any service users who may have died since they used services at your trust. Please ensure you read the [sampling instructions](https://nhssurveys.org/wp-content/surveys/05-community-mental-health/03-instructions-guidance/2025/Sampling%20Instructions.docx) carefully on how to submit your file to DBS and how to remove deceased persons.

If there is more than two weeks between the DBS check and the first mailing, additional local and DBS checks have to be conducted.

Before mailing two, a local check **must** be done and we would recommend doing another DBS check. Before mailing three, you **must** do another local check and we would recommend doing another DBS check. If your contractor has the capability to run DBS checks on your behalf these checks can be conducted instead of local checks. However, trusts can still choose to run local checks if they wish. Please check with your contractor. Please ensure you read the sampling instructions carefully on how to submit your file to DBS and how to remove deceased service users.



**Contractors running DBS Checks**

**on behalf of trusts**

Some contractors have the capability of running DBS checks during fieldwork on the trusts behalf. This removes the requirement for trusts to run DBS and local checks ahead of mailing two and mailing three. **Trusts are still expected to run the initial DBS checks when drawing the initial sample.**

**Please contact your contractor to discuss this further**.

Table 6. DBS and local checks requirements

|  |  |
| --- | --- |
| **DBS & local checks requirements** | |
| Before mailing 1 | Local checks **AND** DBS checks at the time of drawing your sample **(This must be conducted by the trust).**  Further deceased checks may be needed if it has been 2 weeks or more since DBS checks prior to sample submission and mailing 1. This can be conducted by your contractor if they have the capability |
| Before SMS 1 | No checks |
| Before mailing 2 | Local checks (+ strongly recommended DBS check)  If your contractor has the capability to run DBS checks on your behalf these checks can be conducted instead of local checks. However, trusts can still choose to run local checks if they wish. Please check with your contractor. |
| Before SMS 2 | No checks |
| Before mailing 3 | Local checks (+ strongly recommended DBS check)  If your contractor has the capability to run DBS checks on your behalf these checks can be conducted instead of local checks. However, trusts can still choose to run local checks if they wish. Please check with your contractor. |

1. Your sample should only be used for the purposes of distributing the described protocol of invitation, reminder letters and reminder SMS for the Community Mental Health Survey. This is because the sample collated for the survey only has Section 251 approval for these specific uses. Any additional use of the sample (for example, sending out additional reminders, contacting the sample in advance or reusing the sample for a local survey) would therefore be in breach of Section 251 approval.

## Submitting your sample file

Before [submitting your sample file](http://nhssurveys.org/survey-instructions/submitting-samples/), you must complete the [sample declaration form](https://nhssurveys.org/wp-content/surveys/05-community-mental-health/03-instructions-guidance/2025/Sample%20Declaration%20Form.xlsx), confirming the sample has been drawn as per the sampling instructions and your Caldicott Guardian is required to sign off on the form. Please provide your Caldicott Guardian with notice of this requirement to avoid delays in the sign-off process.

Your completed sample declaration form should be submitted (copying in the Caldicott Guardian) and approved prior to sending your sample data. [Your sample file must be transferred over a secure encrypted link](http://nhssurveys.org/survey-instructions/submitting-samples/), meeting standard NHS levels of encryption (i.e. AES256 or higher) and password-protected (unless your contractor uses a file transfer site with inbuilt encryption).

**Data should never be sent via email as this would constitute a breach of section 251 approval**.

1. **If you are a trust using an approved contractor**: your approved contractor will be in touch with details on how to submit your sample securely, once the declaration form has been approved. Your sample data and mailing data should be submitted all in one file to your approved contractor via their secure transfer site.
2. Please note that unless you are conducting the survey in-house, you should not submit any data files to the Survey Coordination Centre.

**If you are delivering the survey in-house or are an approved contractor**: samples will be submitted to the SCC using a secure website. A series of checks will be conducted on the sample as you submit it. Log-in details and instructions of how to submit the sample will be provided prior to the sampling period.

Following receipt of the sample from trusts, contractors will conduct additional checks and separate out the sample data from the mailing information. Contractors and in-house trusts will then provide sign-off for the submission of a sample file which does not contain name, mobile number, or full address to the Survey Coordination Centre.

# Section 7: Fieldwork preparation

This section outlines the steps to be taken by **approved contractors and in-house trusts** prior to the start of fieldwork. The key steps to be undertaken are outlined in the diagram below and detailed throughout this section.

Figure 2. Key stages to prepare for fieldwork

You can find information and advice on printing the survey materials, setting up a PO box and a Freepost address, sending out the survey packs, and booking in questionnaires in the [implementing the survey advice webpage.](http://nhssurveys.org/survey-instructions/implementing-the-survey-the-practicalities/)

## Setting up freepost address and PO box

Approved contactors and in-house trusts must set up both a freepost address and a PO box.

**Setting up a freepost address** - The freepost address will allow participants to return completed questionnaires at no cost to themselves. After the licence is paid, organisations will pay only for the responses received. The freepost address must be printed on the envelopes sent with the questionnaires. Printed envelopes must comply with Royal Mail guidelines.

**Setting up a PO Box** - The mail-out envelope(s) must not include any indication of the sender address, and a PO Box should be set up for undelivered mail. Approved contractors and trusts conducting the survey in-house must set up a freepost address, as well as a PO address. This will be printed on the envelope and be used to return post to sender if undelivered.

## Prepare the survey materials

The fieldwork period is 15 weeks. It is important that your trust enters fieldwork on time **by 18 August 2025** to maximise response rate and responses from younger people and people from ethnic minority backgrounds. [Previous research](https://nhssurveys.org/surveys/survey/02-adults-inpatients/year/2007/f) shows that these groups take longer to respond.

The best way to optimise the length of available fieldwork is:

1. To map internal contingencies such as planned leave of staff in charge of drawing the sample and/or sending the questionnaire. This could result in delays producing the sample or entering fieldwork.
2. To inform the Survey Coordination Centre immediately of changes of survey lead.
3. To ensure that you generate your sample promptly - within the recommended three-week sample checking period.
4. Please note that you might need to resubmit the sample following queries from the Survey Coordination Centre. This should be considered when planning your sampling.
5. Respond to queries as quickly as possible to avoid unnecessary delays.
6. Adhere to the [key dates](#_Section_3:_Survey) listed above.

## Prepare the survey materials

1. The Survey Coordination Centre will provide electronic versions of all survey materials on the NHS surveys website. These materials have been designed to meet best-practice guidelines and have been extensively cognitively tested with service users to ensure maximum engagement and comprehension. Furthermore, they have been approved by Section 251.
2. No changes to the wording of invitation letters, reminder letters, SMS text, multilanguage sheet, or questionnaire are permissible (due to Section 251 requirements), and we advise that amends made to other materials, including dissent posters are minimised.
3. Specific considerations for preparing the questionnaire and letters are detailed below.
4. Paper Questionnaire
5. The paper questionnaire template will be provided by the Survey Coordination Centre. The template is provided in a word document which can be edited if needed. If you intend to copy the questionnaire into your own format you must be careful to replicate it exactly. This includes:

* The wording of questions and response options
* The numbering and order of questions and response options
* Routing instructions
* Any other instructions to respondents

1. Questions should be formatted as two columns and set out across the page as per the questionnaire provided by the Survey Coordination Centre. All design and formatting elements of the questionnaire should also be replicated. Questionnaires must be printed in an A4 booklet and centre stapled.
2. Invitation and reminder letters
3. Invitation and reminder letters should be printed on each trust’s letterhead paper. There is a different letter for each mailing.
4. Do not make any modifications to the wording of invitation or reminder letters other than to populate the letters with trust-specific information where required. This is because the letters have been submitted for Section 251 approval. Once approval has been granted, changes to the wording of invitation and reminder letters are not permissible.
5. At this point, approval of PDF and hard copies of all materials must be sought from Survey Coordination Centre and CQC (see [section 7.5](#_Quality_Assurance_of) for more information).

Multilanguage sheet

The online survey will be translated into nine non-English languages that are most frequently spoken in the UK. The multilanguage sheet, which should be included in all mailings, includes a link and a QR code to the online survey in these languages:

1. Arabic

2. Bengali

3. French

4. Gujarati

5. Polish

6. Portuguese

7. Punjabi

8. Spanish

9. Urdu

The multilanguage sheet continues to include the languages listed below, directing the participant to a helpline number. Although a translated online survey is not available in these languages, a telephone assisted survey using Language Line can continue to be offered.

1. Cantonese (Traditional Chinese)

2. Mandarin (Simplified Chinese)

3. Turkish

4. Italian

5. Russian

6. Kurdish

7. Tamil

8. Thai

9. Farsi

10. Somali

## Printing the survey materials

1. After approval of the digital proofs from the Survey Coordination Centre has been received, materials should be printed to the following specifications.

Table 7. Print specification

|  |  |  |
| --- | --- | --- |
| **Material** | **Specification** | **Personalisation details** |
| **Letters** | * A4 * 1 page * 2 sided * Colour * Service user personalisation to front and back | Letters are personalised according to trust, contractor, and respondent level information.The letter must be personalised with the service user online survey log-in details and QR code. |
| **Multilanguage sheet** | * A4 * 1 page * 2 sided * Black and white * No service user personalisation | 1. If a contractor is using their own online survey tool, the multilanguage sheet will need to be updated to show the links to the translated survey and QR codes. No service user level personalisation is required. Please note that QR codes are provided on the multilanguage sheet only for those languages offered online. |
| **Questionnaire** | * A4 * 4-page booklet * 2 sided * Colour * Service user personalisation to front and back covers | Each questionnaire needs to be personalised with an identifier to identify the respondent, using either a serial number or a barcode. |
| **Freepost return envelope** | * Black and white * No service user personalisation | Freepost envelopes will be personalised for each contractor and in-house trust to reflect the address completed questionnaires should be sent to. No service user level personalisation is required. |
| **Outer envelope** | * Black and white * No service user personalisation | The PO box on the back of the letter should be personalised for each contractor and in-house trust with their PO box address for undelivered mail. |

## Implementing the online survey

1. **This section is for approved contractors and in-house trusts only.**

Service users can choose whether they would like to complete the survey online or using the paper questionnaire. The online survey is set-up to be device-agnostic, meaning that it is suitable for completion on any device - mobile phones, tablets, or desktops. Participants will either be able to click the link provided in the SMS reminders, scan the QR code, or log-in using the details provided in their letter. The online survey is available in English and nine non-English languages.

There are four routes into the online survey:

* **Using the URL provided in the letters**: The URL and log-in details are provided on the survey invitation letters. These log-in details are personalised for each respondent, to allow identification of which service users have taken part and their removal from future mailings.
* **QR codes**: QR codes should be included within the survey invitation letters Each respondent has the option to scan the QR code which will take them directly to the online survey, without needing their log-in details. The QR code should be linked to the service users unique survey link.
* **SMS reminder**: There is a shortened URL included in the SMS reminder that is unique to each service user. This will allow service users to access the survey directly without needing their log-in details.
* **Using the URL or QR code provided on the multi**-**language sheet:** There are separate links for each language provided on the multi-language sheet which will take service users to a translated log-in page in their chosen language. QR codes will also be included next to 9 languages offered online which should take service users to a translated log-in page in their chosen language.

## Quality Assurance of survey materials

1. **In-house trusts and approved contractors** are required to submit PDF and hard copies of the survey materials to the Survey Coordination Centre before any mailings take place. The deadline for providing these is included in the [timetable section](#_Section_3:_Survey). Approval of each of these is a requirement before the first mailing can be sent.
2. All proofs created ahead of printing must match the style, format and content of the materials provided on the NHS Surveys website.

Two members of staff from the Survey Coordination Centre will be included in the sample for each in-house trust and contractor. This will enable the Survey Coordination Centre to receive each mailing and reminder (including SMS reminders) in real time. These names and addresses will be provided ahead of sampling and should be randomly allocated to trusts where contractors are working with multiple trusts.

## Publicising the survey

The best way to ensure your survey is a success is to ensure that you involve those people who have the most impact on service users’ experiences and who will be responsible for responding to the results of the survey. We recommend that you keep everyone in your trust informed and that you [publicise the survey externally](https://nhssurveys.org/survey-instructions/publicising-surveys/).

Complementary documents will be shared with your trust before fieldwork to help you raise awareness of the survey, and boost engagement and response rates to your survey. These are:

* **Press Release template**,which explains the purpose, value of participation, how to participate, and what happens to the feedback. We welcome your trust to add to this template to explain how your trust will use the data or what actions have previously been taken as a result of the survey. We therefore encourage a ‘You said We Did’ section to drive engagement.
* **Social Media cards**, which provide information about the purpose, value, and dates of the survey, these can be shared on your social media platforms, such as Facebook, X (formerly Twitter), Instagram and LinkedIn. Alternatively, they could be used as handouts or uploaded onto other trust platforms.
* **Website banners**, which will promote the survey. The website banner can be used on trust website, email signatures and uploading to NHS patient portals to promote the survey amongst service users and staff.
* **Infographic of 2024 results**, which will provide trusts will an editable infographic to share the results of their previous survey. This will close the loop and provide service users with information on what last year’s results found and how the trust plans to implement change.

# Section 8: Conducting fieldwork

1. This section outlines the **steps to be taken by approved contractors and in-house trusts** from the first mailing onwards. The key steps to be undertaken are outlined in the diagram below and detailed within the section.

Figure 3. Key stages to conduct fieldwork

Send first mailing

Send SMS 1

Local + \*DBS checks

Send second mailing

Local + \*DBS checks

Send SMS 2

Send third mailing

Weekly monitoring

Review open-ended comments

Process paper questionnaires (after third mailing)

Process returned paper questionnaires (third mailing onwards)

*\*Local checks must be conducted after first and second mailings, DBS checks are also strongly recommended. DBS checks can be conducted by contractors if they have the capability. However, trusts can still choose to run local checks.*

## Mailing protocol

The following table outlines the mailing protocol to be followed. This approach has been developed to maximise the proportion of service users who complete the survey online.

The intervals between each contact must be adhered to once the first mailing has been sent to maximise response rates. Where the timing of an SMS reminder falls on a weekend or Bank Holiday, it should be sent on the next working day.

Please ensure DBS and local checks are provided in plenty of time to send the mailings on time. Contractors and trusts should work together to agree dates for these in advance of fieldwork start.

**After the initial full DBS check, trusts may have the option of allowing their contractor to conduct the DBS checks on their behalf, this depends on contractor access to the DBS. Please liaise with your contractor.**

Table 8. Mailing protocol

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Contact** | **Type** | **Content of contact** | **Days from first mailing** | **Example of mailing days** |
| 1.0 | Postal | Invitation letter with URL and QR code for online survey  Multilanguage sheet with QR codes | 0 | Monday 18 August |
| 1.1 | SMS | SMS reminder (if phone number available) | 7  (5 working days  after contact 1.0) | Tuesday 26 August – Pushed to Tuesday as the Monday falls on a bank holiday |
| 2.0 | Postal | Reminder letter with URL and QR code for online survey  Paper Questionnaire  Freepost return envelope  Multilanguage sheet with QR codes | 14 (10 working days after contact 1.0) | Monday 01 September |
| 2.1 | SMS | SMS reminder (if phone number available) | 21  (5 working days  after contact 2.0) | Monday 08 September |
| 3.0 | Postal | Reminder letter with URL and QR code for online survey  Paper Questionnaire  Freepost return envelope  Multilanguage sheet with QR codes | 28  (10 working days after contact 2.0) | Monday 15 September |

## SMS reminders

1. To encourage a higher proportion of online respondents, we will be sending SMS reminders to those for whom we have mobile numbers in the sample. The SMS reminders will include a personalised URL taking the participant directly into the survey (without the need to input login details). There will be two SMS reminders sent – the first five working days after contact 1.0, and the second five working days after contact 2.0. **If the day the reminder is due to be sent is a weekend or bank holiday, it should be sent on the next working day.**
2. The SMS will be sent at different times of day to reach different groups:

* the first SMS should be sent between 9am and 10am five working days after mailing 1 is sent
* the second SMS should be sent between 4pm and 5pm five working days after mailing 2 is sent

1. The content and sender name will be provided by the Survey Coordination Centre and will be available on the [NHS Surveys Website](https://nhssurveys.org/surveys/survey/05-community-mental-health/year/2025/). This guidance must be followed.
2. Each SMS will be personalised for each service user, with the name of the trust they attended, and a unique link which will allow them to enter the survey without their log in details. These unique links will need to be shortened before including the SMS, to ensure they do not exceed 35 characters. Your SMS provider should be able to provide this service.
3. At the end of the SMS, the survey helpline phone number will be provided. It will not be possible for service users to reply to the SMS reminder.
4. **Note for approved contractors and in house trusts: you may add the service user record number to the SMS which is sent, if it will help with processing respondent communications. Please see the SMS guidance on the survey website for more information and exact text to include.**

To monitor the quality of the phone numbers in the sample, it is a requirement to report on the number of messages which have not been delivered within 72 hours of the SMS being sent as part of the weekly monitoring report.

Any SMS provider can be used for this purpose, but the provider chosen must use technology which supports concatenation and should also confirm they are not using a "grey route”[[2]](#footnote-3) to send SMS reminders. Messages sent without these requirements in place will risk the message being split into two messages and being received in a different order. Text messages sent in this way can get delayed, lost, or suddenly blocked.

## DBS and local extractions

Ahead of each reminder mailing, it will be necessary to remove all respondents who have completed the survey already, and to conduct a local check on the full sample[[3]](#footnote-4). It is also recommended that a DBS check be completed ahead of each mailing. If anyone has requested to be opted out of further reminders, they should also be removed. If your contractor has the capability to run DBS checks on your behalf these checks can be conducted instead of local checks. However, trusts can still choose to run local checks if they wish. Please check with your contractor.

On the day of the mailing, the DBS and local check should aim to be no more than 10 days old. If the check expires before the mailing is sent, a local check should be undertaken before the mailing begins.

Table 9. DBS protocol

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Contact** | **Content** | **Type of check to do on the sample before sending the mailing (DBS or local)** | **Should online responses be removed from the mailing?** | **Should anyone who has opted out be removed from the mailing?** |
| 1.0 | Postal – Letter only | DBS check | N/A – First mailing | N/A – First mailing |
| 1.1 | SMS | No check required | Yes | Yes |
| 2.0 | Postal – Letter + Questionnaire | Local check (+ strongly recommended DBS checks[[4]](#footnote-5)) | Yes | Yes |
| 2.1 | SMS | No check required | Yes | Yes |
| 3.0 | Postal – Letter + Questionnaire | Local check (+ strongly recommended DBS checks) | Yes | Yes |

## 8.4 Weekly monitoring (for contractors and in-house trusts only)

Contractors and in-house trusts are required to submit a monitoring report to the Survey Coordination Centre each week during fieldwork. This will allow the Survey Coordination Centre and CQC to monitor response rates, volume of service user communications, and uptake of accessible options across the fieldwork period.

These reports should follow the template provided on the [NHS Surveys website](https://nhssurveys.org/surveys/survey/05-community-mental-health/year/2025/) and be submitted each Tuesday during fieldwork by 12 noon once fieldwork has started. First report is due on 20th August 2025 Please send reports to [mentalhealth@surveycoordination.com](mailto:mentalhealth@surveycoordination.com), using the file naming format “CMH25\_Weekly monitoring report\_DATE\_CONTRACTOR”.

## Reviewing open-ended comments

1. It is strongly recommended that all free text comments are reviewed by approved contractors and in-house trusts for possible reports of safeguarding issues and followed up with the appropriate authority to allow further investigation. The following text has been included within all cover letters to inform respondents of the possible follow-up action which may be taken. “*If comments on the questionnaire were to suggest that you or someone else is at serious risk of harm, your details would be provided to the appropriate authority to investigate, as part of our safeguarding duty.”*

## Processing returned paper questionnaires

1. **If using a contractor,** your contractor will process the questionnaires received.
2. **If conducting the survey in-house,** when questionnaires are received, match up the Service User Record Number against the list of service users so that you can record (in the outcome column of your ‘sample file’) which service users have returned questionnaires and will not, therefore, need to be sent reminders.
3. Keep paper copies (or scanned pictures of all the pages of the questionnaires, including the front page) of any questionnaires that are returned to you until further notice – but do not send these to the Survey Coordination Centre unless requested.

If a questionnaire is returned with the Service User Record Number removed, please enter the questionnaire response information in an additional row at the bottom of the data file when submitting it to the Survey Coordination Centre.

If a questionnaire is returned blank, this indicates the service user would like to opt-out of the survey. In this case, please remove the service user from future mailings and code as outcome 4.

# Section 9: Survey communications

1. Each approved contractor or in-house trust should have both a freephone line and an email address for service users to contact in the event of queries. Details of both the freephone number and email address should be provided in the invitation and reminder letters.
2. All staff who are likely to respond to service user communications should be properly briefed about the details of the survey and be aware of the questions or complaints they are likely to receive.
3. The freephone line and email inbox should be monitored between 9am and 5pm on weekdays as a minimum.

## Managing and recording service user communications

1. Throughout fieldwork, all communication with service users should be logged and included in the weekly monitoring report. Wherever relevant, the following information should be logged for each contact with a service user:

* Service User Record Number
* Date of contact
* Reason for contact
* Action to be taken

1. A large volume of calls and emails are expected for this survey. You should expect peaks in calls 2-3 days after a mailing, and on the day of sending an SMS reminder.
2. Please ensure there are appropriate resources in place to respond to queries.

# Section 10: Survey accessibility

1. The accessible options to be provided for the survey are outlined below, with guidance on how they should be administered, recorded, and processed.
2. Please note if a large print, Easy Read, or Braille format is requested, you do not need to wait until the third mailing to provide this format to the participant.

Table 10. Guidance on providing accessible formats of the survey

|  |  |  |
| --- | --- | --- |
| **Accessible format** | **Administering the format** | **Processing the return** |
| **Online survey:** Ability to change font size and background colour; screen reader compatible. | This will be provided by the Survey Coordination Centre.  If using a contractor-provided online survey tool, guidance on scripting the online survey to meet these accessibility standards is included in the [appendix](#_Section_13:_Appendix) of this document. | Processed through the online survey. |
| **Online survey:** non-English language completes (9 languages). | Excel templates with translations will be provided to contractors. Guidance on scripting the online survey in 9 languages will be included in the online survey specification for contractor.  All contractors and in-house trusts will need to update the multilanguage sheet with online survey links, QR codes and helpline details. | Processed through the online survey or via Language Line.  For non-English online survey completes, open-ended comments will be translated by the CQC. |
| **Online survey:** British Sign Language (BSL). | This will be provided by the Survey Coordination Centre.  If using a contractor-provided online survey tool, translated videos will be provided to contractors to incorporate into their surveys. | Processed through the online survey. |
| **Telephone assisted complete:** In English or in a non-English language using a service such as Language Line. | Contractor or in-house trust helpline staff to complete survey over the phone with participant, entering their responses into the online survey (or on paper if that is preferable).  Offer support on 22 languages. | Processed through the online survey and noted as a telephone assisted complete in the weekly monitoring report and in the final dataset. |
| **Large print:** Signposted on the letters and administered at the request of the service user. | Large print invitation letter will be available on the [NHS Surveys website](https://nhssurveys.org/surveys/survey/05-community-mental-health/year/2025/). Contractor or in-house trust to print invitation letter on A4 paper (adding service user contact details and survey number) and standard PDF questionnaire on A3 paper (adding service user record number), and post these to service user alongside a return envelope.  Further instructions can be found on the [large print cover letter](https://nhssurveys.org/surveys/survey/05-community-mental-health/year/2025/). | Large print return processed manually (e.g., responses entered into the [Data Entry Spreadsheet](https://nhssurveys.org/surveys/survey/05-community-mental-health/year/2025/) for that service user). |
| **Easy Read:** Signposted on the letter and administered at the request of the service user. | Easy Read invitation letter and questionnaire will be available on the [NHS Surveys website](https://nhssurveys.org/surveys/survey/05-community-mental-health/year/2025/). Contractor or in-house trust to print both documents on A4 paper and post these to service user (adding service user log-in details to the questionnaire for processing) alongside a return envelope.  Further instructions can be found on the [Easy Read questionnaire](https://nhssurveys.org/surveys/survey/05-community-mental-health/year/2025/). | Easy Read return processed manually into the separate data entry sheet. These returns will **not** be combined with the main dataset due to differences in question wording and answer codes. |
| **Braille:** Signposted on the letter and administered at the request of the participant. | Braille questionnaire and invitation letter to be set up centrally by Survey Coordination Centre. Contractor or in-house trust to request both documents from external Braille supplier (personalising letter with service user log-in details). Supplier should not be provided with service user contact details but can post these to the contractor or in-house trust, who will then post documents to the service user.  Further instructions can be found on the [Braille cover letter](https://nhssurveys.org/surveys/survey/05-community-mental-health/year/2025/). | Braille questionnaires cannot be completed in Braille, and invitation letter would advise the participant to complete this online (using a screen reader or with the help of a friend/family member) or as a telephone assisted complete. |

# Section 11: Submitting interim data

During fieldwork an interim data file will be required, to aid data management set up and allow early checks to be conducted. Interim data should be submitted in the Data Entry Spreadsheet, and should include raw, uncleaned data of **both paper and online responses**.

**Your interim data file should be submitted to the Survey Coordination Centre on 10th October 2025.**

Responses from all trusts should be included, as well as all outcome codes, not just those that have responded. The total number of records submitted should match the sample for each trust. The data file should not include free text comments.

# Section 12: Final data

Figure 4. Key stages to submit final data

Final data must be submitted to the Survey Coordination Centre uncleaned and checked using the [final data checklist](https://nhssurveys.org/surveys/survey/02-adults-inpatients/) and [Data Entry Spreadsheet](https://nhssurveys.org/surveys/survey/05-community-mental-health/year/2025/) provided in the [Instructions and Guidance Section](https://nhssurveys.org/surveys/survey/05-community-mental-health/year/2025/).

The completed data entry spreadsheet **must not** be emailed, instead it must be password protected and submitted via our secure transfer site.

Free-text comments should be entered verbatim and in full. More details on how to code final data is detailed in the [Data Entry Spreadsheet](https://nhssurveys.org/surveys/survey/05-community-mental-health/year/2025/).

Final data must be entered into the Data Entry Spreadsheet provided, following the coding rules summarised below and detailed in the Data Entry checklist. Both of which will be made available from the [NHS Surveys website](https://nhssurveys.org/surveys/survey/05-community-mental-health/year/2025/).

Survey responses received through online and paper methods must follow the same coding rules and be provided in a single spreadsheet. Nothing more should be done to amend or clean the data.

Information on how to code the data is detailed in the [Data Cleaning Guidance](https://nhssurveys.org/surveys/survey/05-community-mental-health/year/2025/).

## 12.1 Free-text data

All free-text comments are required to be submitted to the SCC. Any analysis of these free text comments will be conducted in a way that would not allow individuals to be identified.

The free-text comments must be included in full, including any comments on additional sheets of paper. Comments should be recorded verbatim with sensitive information included. The only exception to the above is that names of individual staff members may be redacted at your discretion or on advice from a trust. Redacted characters should be replaced with 'X'. Comments that are submitted in a language other than English should be sent to the SCC in the language they are submitted in at the end of fieldwork, alongside a flag which confirms which language this is (i.e. which online survey was used). The CQC will be responsible for translating any non-English free-text data into English. Once translated, the comments will be shared and can be combined with the remainder of the dataset.

## 12.2 Entering easy read responses

The easy read questions and answer codes are different to the main questionnaire and should be inputted into the [Easy Read Data Entry Spreadsheet](https://nhssurveys.org/surveys/survey/05-community-mental-health/year/2025/).

For easy read completes, please also complete:

* Columns from the sample construction spreadsheet
* Columns about mode of completion

Use the outcome of “returned completed” for any easy read returns.

## Checking final data

You are required to submit raw (“uncleaned”) data to the SCC. Final data should be entered exactly as stated in the previous section. Before submitting your data, you must carry out the checks outlined in the [Final Data Checklist](https://nhssurveys.org/surveys/survey/05-community-mental-health/year/2025/). Please refer to this checklist when preparing the data throughout fieldwork to ensure all the checks are included in your data processing processes.

Before submitting final data to the Survey Coordination Centre, please carry out the checks included in the data entry checklist, which is available on the website. It is essential that these checks are carried out thoroughly. **The SCC is not responsible for correcting any errors in the data.** If errors are identified, the approved contractor or trust will be required to correct and resubmit the final data.

Having conducted the checks in the checklist, please ensure the relevant information is populated, including the contact details of two team members. The data entry checklist must be uploaded when submitting the data to the Survey Coordination Centre.

## Submitting data

The completed Data Entry Spreadsheet must be submitted to the Survey Coordination Centre as a single file. It must include all anonymised sample information as well as the survey responses.

The Data Entry Spreadsheet should be submitted to the SCC by secure transfer. Final data **must not** be sent via email.

**Following the closure of fieldwork, the SCC will provide you with a link to upload the data via secure transfer.**

## 12.5 Making sense of the data

CQC will provide **full benchmark reports** based on each individual trust’s results from the survey. Benchmark reports by Assessment Service Group will also be provided for each individual trust with sufficient responses. Benchmark reports provide the score for each trust for each question and section and whether it performs ‘’much better’, ‘better’, ‘somewhat better’, ‘about the same’, ‘somewhat worse’, ‘worse’ or ‘much worse’ compared to other participating trusts. These results will also be made public on the [NHS patient survey website](https://nhssurveys.org/surveys/survey/05-community-mental-health/year/2025/) and on [CQC's website](http://www.cqc.org.uk/cmhsurvey) under the organisation’s search tool.

Approved contractors might provide trusts with additional analysis of the data as part of their contractual agreement with the trust. Please note that CQC does not see these outputs and cannot comment on these.

The usefulness of trusts survey data will depend on having a clear improvement programme in place and on how well you are able to make use of the data. The fundamental steps of understanding and interpreting data usually involve:

* Examining the number and percentage of service users giving each response to a question.
* Analysing the data by different groups of service users (e.g. males/females, different ethnicities, different long-term conditions), aspects of care (assessment service group, whether they were a mental health inpatient) or other information (e.g. different services or teams in your trust). This type of analysis requires additional data not delivered by CQC as standard.
* Look at the comments from the last question – these can provide additional insight into where your trust is doing well and areas to focus on for improvement.

You can find further advice and suggestions tailored to the surveys within the NPSP in the [making sense of the data webpage.](http://nhssurveys.org/survey-instructions/making-sense-of-the-data/)

# Section 13: Appendix – online survey guidelines

## Introduction to online survey guidelines

1. This guidance is for any contractor wishing to host their own online survey. If you would like to use your own internal online tool, you must be able to meet each of the below requirements. Use of any internal online tool is subject to sign-off from CQC that it can sufficiently replicate the format of the Survey Coordination Centre tool and provide all accessibility options.

## Requirements

The set-up process for the online survey timetable will start in July 2025. There will be two phases of development:

1. **Scripting the English survey** – this will be the full questionnaire in English and will include all accessibility, formatting, and design elements of the survey, with examples of each type of question (single code, multi code, free text).
2. **Scripting the translated versions of the survey** – all languages will be scripted at this stage.

### Inputs from the Survey Coordination Centre

1. The contractor will be provided with the following documentation by the Survey Coordination Centre to support with set up of the online survey:

* Guidance on set up and requirements (this document)
* Online questionnaire with routing and scripting instructions included
* Quality assurance declaration to be returned to the Survey Coordination Centre alongside links for sign off
* Translations for all questions
* NHS and CQC logos
* British Sign Language video translations

### Routes into the online survey

There are five routes into the online survey:

* **Using the link on the letters** – there is a link, and online log-in details provided in the survey invitation letters. These details are personalised for each respondent, so you can be sure who has taken part and remove them from future mailings.
* **QR code on the letter** – this QR code should be unique to that respondent. When scanned, it will allow them to go straight into the survey without needing their log in details.
* **SMS reminder** – there is a link included in the SMS reminder which will be unique to that respondent. This will allow them to go straight into the survey without needing their log in details. The links for the SMS can be in any format but cannot exceed 35 characters and must be unique to that respondent. If respondents enter the survey through this route, they should be asked which language they would like to complete the survey in before proceeding to the main survey.
* **Links on the multilanguage sheet** – there will be specific links for each of the nine languages that the online survey is available in. These will take the respondent to a version of the online survey that has been translated into their chosen language.
* **QR codes on multilanguage sheet** –there will be specific QR codes for each of the nine languages that the online survey is available in. These will take the respondent to the log-in page of the online survey that has been translated into their chosen language. This link is not personalised for respondents.

### Log-in details

The online log-in details will be generated using the sample construction sheet when the sample is populated. The log-in details must be a combination of the Service User Record Number and a five letter and digits upper case password.

1. The Service User Record Number will follow this structure: **MH25XXX1111**. **MH25** identifies a survey respondent, **XXX** denotes trust code and **1111** will be a unique number for that respondent.

### Para data

1. There are several metrics which will need to be collected for everyone who has entered the online survey:

* Time and date of survey access
* Mode of survey access (type of device used)
* Time and date of survey submissions
* Access mode – short or unique link or QR Code
* Operating system – iOS, android etc
* Active participation in the survey – how long were they actively taking part in the survey, excluding breaks
* Drop out question for those who do not complete the survey
* Time and date of drop outs
* Language the survey was completed in

The para data will be included in the data entry sheet to be submitted to the Survey Coordination Centre at the end of fieldwork.

### Free text questions

1. For free text questions, a character count of 1000 should be included to show how many characters are available and how many respondents have used. It should not be possible to type more than the characters available, so respondents do not get frustrated.

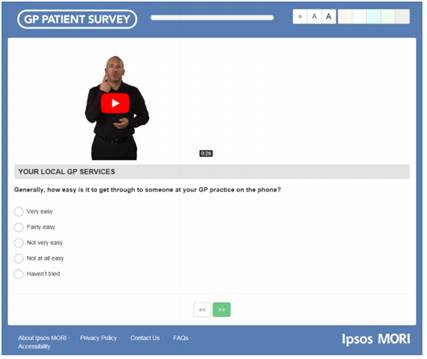
### Translations

1. The online survey will be offered in 9 non-English languages and British Sign Language. The non-English languages are:

* Arabic
* Bengali
* French
* Gujarati
* Polish
* Portuguese
* Punjabi
* Spanish
* Urdu

1. The translations for these languages will be provided in an Excel format which will include all translations in one document for all questions, respondent instructions and supporting text.

British Sign Language translations will be provided in video format, and the videos will need to show above the question text as per the following example.



### Functionality requirements

The English version of the online survey will need the full questionnaire content included, alongside accessibility and functionality requirements. At this stage all content, design, accessibility, para data, formatting and log in screens should be scripted. This includes the following:

* All questions and survey content as per the online questionnaire document.
* Set up of the log-in page, including a drop-down menu for languages.
* Mobile optimisation – the content of the screen should automatically adapt to the size of the screen on the device the respondent is using.
* Progress bar at the top of the page (after the log in screen).
* Accessibility:
  + The ability to increase and decrease the font size. Exact sizes are included below to ensure consistency across all tools.
    - Smallest size: Question and headers 15.4 pixels, answer options 14 pixels.
    - Medium size: Question and headers 19.8 pixels, answer options 18 pixels.
    - Largest size: Question and headers 24.2 pixels, answer options 22 pixels.
  + Screener reader functionality.
  + The ability to change the colour of the screen behind the question text. The HEX and RGB codes for the colours are included below to ensure a colour match across online survey tools.

Text, table

Description automatically generated

* Set up of each route into the survey – via short link, language short links and unique links in SMS.
* Para data as outlined above.

## English online survey

1. The full questionnaire along with routing instructions and scripting information will be provided to all contractors who wish to use their own online survey tool. Changes vs the 2024 survey will be highlighted and logged in a change log for quick reference.

## Translated online survey

1. Survey translations will be provided to contractors in 9 non-English languages and BSL. The translations will be provided in Excel format with all languages in one document. BSL videos will be provided separately.

## Quality Assurance

1. Quality assurance documentation will be provided to contractors. This will need to be submitted to the Survey Coordination Centre along with the survey links for testing.

There are several stages at which sign off by the SCC and CQC is required:

* **The online survey tool**:
  + Full English version, including all functionality.
  + Full translated versions.
  + Live version loaded with sample.
* **The online survey data**:
  + First week of fieldwork – to check data is being captured correctly. This should be submitted to the SCC no more than 1 week after the first mailing is sent.
  + Mid-point of fieldwork – This should be submitted to the SCC no more than 1 week after the third mailing is sent.

1. The *NHS Constitution for England*. Department of Health and Social Care. Available at: <<https://www.gov.uk/government/publications/the-nhs-constitution-for-england/the-nhs-constitution-for-england>> [Accessed 11 June 2020]. [↑](#footnote-ref-2)
2. SMS grey routing is when an SMS is sent through a legal channel initially, but at some point travels through illegal channels before reaching its destination. [↑](#footnote-ref-3)
3. You now have the option of asking your contractor to conduct DBS that are required after the initial first full DBS check. Please liaise with your contractor to arrange this. [↑](#footnote-ref-4)
4. If your contractor is able to run DBS checks for you, local checks will be optional. [↑](#footnote-ref-5)