



**Survey
Coordination
Centre**

COMMUNITY MENTAL HEALTH SURVEY 2021: SAMPLING ERRORS REPORT

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Updates

Before using this document, please check that you have the latest version, as small amendments are made 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 email all trust contacts and contractors directly to inform them of the change.

This document is available from the [NHS Surveys website](http://www.nhssurveys.org).

Questions and comments

If you have any questions or concerns regarding this document, please contact the [Survey Coordination Centre for Existing Methods](mailto:team@surveycoordination.com).

1. Introduction

The Community Mental Health Survey 2021 (CMH21) included 54 participating trusts. Their sample files were submitted to the Survey Coordination Centre for Existing Methods (SCCEM) for quality control checks before survey packs could be mailed to service users. This included their sample declaration form and sample data, with the latter being sent in a password protected file. For trusts working with contractors, a contractor checklist was also submitted which outlined the checks that contractors had conducted on the sample files.

Data inspections were undertaken by the SCCEM to check that trusts had drawn samples correctly according to the sampling criteria to aid trusts in avoiding common errors prior to fieldwork commencing. It is important that errors are identified as they can lead to delays in the survey process and/or poor data quality. Such errors are flagged to the trust in order to help them avoid these types of errors in future iterations of the survey.

This report details the errors that were found during the course of the sample checking conducted by the SCCEM. It is worth noting that it only gives details of the major, minor and historical errors found by the SCCEM; samples may have contained further errors which would have been identified and corrected during checks by their trust-appointed contractor, if the trust used one. For the CMH21 survey, all 54 trusts had a trust-appointed contractor.

Four types of error are identified by the SCCEM during the sample drawing and submission process, including:

- **Major errors** – errors that require the sample to be redrawn. For example, where ineligible service users have been included or eligible service users have been excluded from the eligible population and/or drawn sample, or where a sample has not been drawn at random. If such errors cannot be corrected, they can invalidate a trust's participation in the survey, preventing the trust's survey data from being used by the Care Quality Commission (CQC) for regulatory and assessment activities.
- **Minor errors** – errors that do not require the sample to be redrawn, but instead require amendments to be made to the sample data.
- **Historical errors** – errors relating to a trust's previous survey sample submission(s). These errors come to light during checks of their 2021 sample and therefore cannot be corrected. Depending on the nature of the historical error, it may not be possible to provide historical data comparisons for the trust in question during the reporting stage of the survey.
- **Section 251 breaches** – these are failures to adhere to the stated processes which give the survey approval for the common law duty of confidentiality to be put aside.

This document should be used by trusts and contractors to familiarise themselves with past errors to prevent them from recurring.

2. Frequency of errors

During the sample checking process for CMH21, the SCCEM detected one major error, six minor errors, and one historical error. No Section 251 breaches were detected (see figure 1).

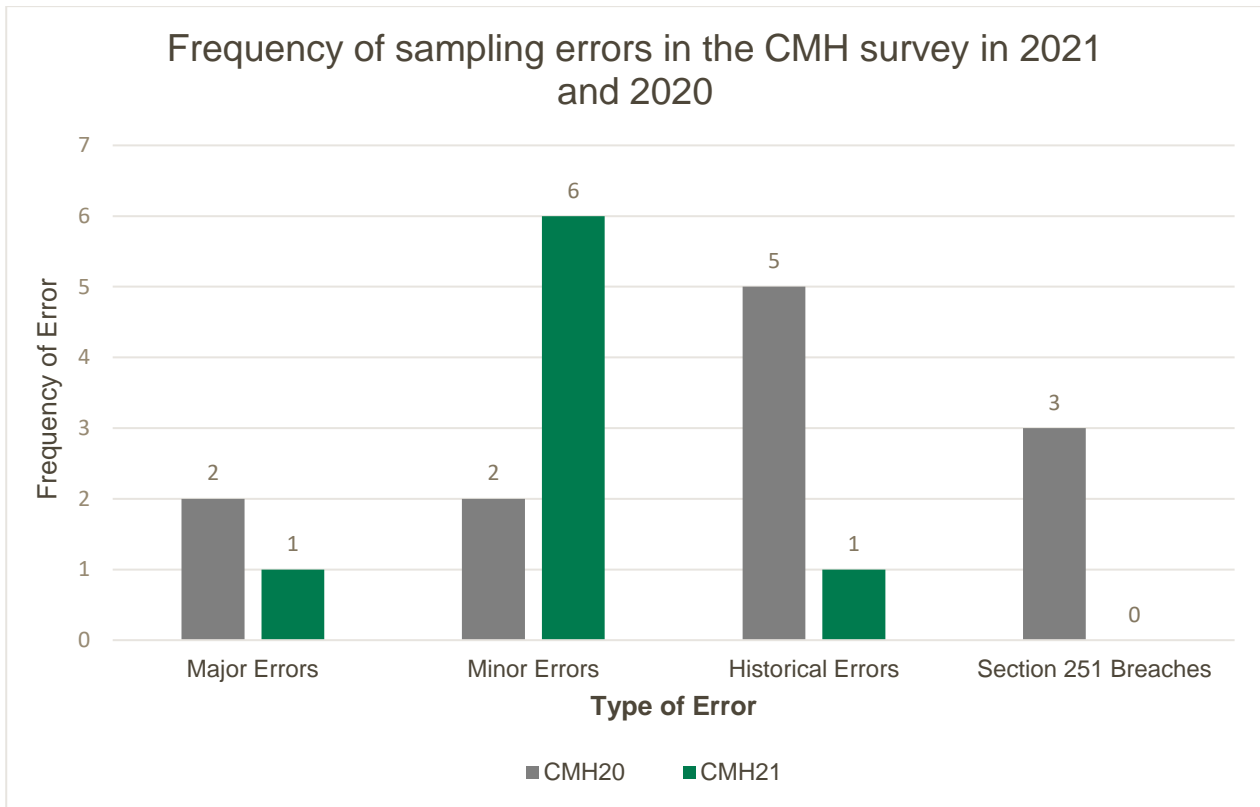


Figure 1: Frequency of errors in the CMH21 survey compared to the 2020 survey.

3. Major errors

Major errors tend to take the form of either extract logic being incorrectly scripted when drawing the eligible population or misunderstanding the survey’s eligibility criteria. As with previous iterations of the survey, the sampling frame¹ for CMH21 was from 1st September 2020 to 30th November 2020. Samples are drawn randomly from the eligible population, following instructions published by the SCCEM².

Due to the Covid-19 pandemic and the impact on the provision of NHS community mental health services (services now having to deliver care and treatment via remote setting mechanisms and not just face to face appointments), the sampling criteria for the CMH21 survey has been amended. The eligibility criteria were adjusted to include contact via video-conferencing or telephone as well face-to-face contact.

3.1. Exclusion of video conferencing and telephone contacts

There was one major error identified by the SCCEM. When this trust submitted their sample declaration form, it was identified by their contractor that there had been a substantial decrease in their eligible population of service users, as stated in Section B of the declaration form. The trust explained this decrease was due to a number of service users not having the facility to conduct virtual appointments which therefore resulted in an increase in the number of telephone contacts

¹ The period of time service users eligible for the survey must have had contact with participating trusts

² CMH21 sampling instructions provided by the SCCEM can be found here: <https://nhssurveys.org/wp-content/surveys/05-community-mental-health/03-instructions-guidance/2021/Sampling%20Instructions.pdf>

for this sampling period. The trust had excluded telephone contacts from their eligible population due to misinterpretation of the sampling criteria.

The SCCEM followed this up with the trust, asking them to redraw their sample to include those service users who had video-conferencing and telephone appointments, as per the amended eligibility criteria in light of the Covid-19 pandemic. The trust redrew their sample and this was rectified for their second submission of the sample declaration form.

4. Minor errors

There were six minor errors identified during the CMH21 sample checking (see table 1).

Frequency of minor errors	
Type of minor error	Frequency
Mode of contact errors	2
CCG coding errors	2
Incorrect coding - gender variable	1
Incorrect Service User Record Number format	1

Table 1. Frequency of minor errors in the CMH21 sampling

4.1. Mode of contact errors

Incorrect coding

The mode of contact variable was new to this iteration of the survey and as a result produced two minor errors. The first was where one trust had coded several records as 5 (“Unsure”) which, after being queried by the SCCEM, the trust explained records were coded this way when there was no clear distinction in the most common method of contact used, i.e. different modes have been used the same number of times. The SCCEM asked the trust to amend these codes of 5 (“Unsure”) to 4 (“Multiple modes of contact used”) as per the sampling instructions which stated that “Multiple modes of contact” should be used when there is no clear majority. The trust amended this and resubmitted their sample.

Incorrect mapping

The second minor error made in relation to the new variable was where one trust had incorrectly mapped the mode of contact codes. In their original sample, the SCCEM queried with the trust a small proportion of telephone mode of contact, as this proportion differed to most other trusts where telephone contact had made up the majority of their sample. The trust explained this was due to having incorrectly coded telephone as “2” and video conferencing as “3” whereas these should have been mapped the other way around. The trust resubmitted their sample after recoding these correctly.

4.2. CCG coding errors

Invalid CCG codes

Several CCGs have recently merged and the new CCG codes went into effect on 1st April 2020. Therefore during the sample checking process, the SCCEM check that each service user has been assigned a valid CCG code as a quality check. While inspecting one trust’s sample data, the

SCCEM identified old CCG codes for fifteen service users. The trust updated their sample data with the current CCG codes.

Missing value for CCG codes

Similarly, the SCCEM queried with one trust a CCG code which had been inputted as [No value]. The SCCEM asked the trust for this to be changed to X98, which is the correct CCG code if unknown. The trust confirmed that this had been amended.

4.3. Incorrect coding of the gender variable

It was highlighted by the SCCEM that one trust's sample contained proportions of Male and Female service users which were very different from previous years, 2020 and 2019. The SCCEM queried with the trust whether these had been coded the other way around, as the opposite figures would then make proportions more similar to previous years. The trust confirmed that this had been the case and male and female had been coded incorrectly. The trust recoded this and resubmitted their sample.

4.4. Incorrect Service User Record Number format

During the sample checking process, the SCCEM also check that each service user has been assigned a unique Service User Record Number (SURN) in the format MH21XXXNNNN. When checking one trust's sample, the SCCEM identified several records which had 5 digits on the SURN instead of 4. The SCCEM queried this with the trust and the trust explained that the additional digits were the result of an error on the original file. The trust amended their record numbers following this.

5. Historical errors

Part of the sample checking process conducted by the SCCEM involves comparing trust's sample data to that submitted for previous iterations of the survey in order to investigate any discrepancies. This is conducted for two reasons: 1) to give added reassurance that the current sample has been drawn correctly; and 2) to ensure historical comparisons can be made in the analysis.

Sometimes, these checks can uncover errors made during previous survey iterations which are only identifiable with an additional year of data. Such errors may mean that historical comparisons between a trust's current and previous year's data are not recommended.

During the CMH21 sample checking process, the SCCEM identified one historical error, as detailed below.

5.1. Eligibility criteria incorrectly applied

The eligibility criteria for the survey as stated in the sampling instructions is:

All service users (aged 18 and above) who were seen by someone at your trust between 1st September and 30th November 2020. These are people who:

a) Had at least one face-to-face, video-conference, or telephone contact* during the sampling period (this could include an initial assessment)

AND

b) Had at least one other contact (face-to-face, video-conference, phone or email) either before, during or after the sampling period.

**By contact, we mean an attendance/appointment where a service user would have received care, treatment, or assessment. For example, do not include service users who simply called the trust to query details about forthcoming appointments.*

Following the submission of one trust's sample declaration form, it was highlighted by the SCCEM that there had been a significant increase in the trust's eligible population for this iteration of the survey, as detailed in Section B of the form. The trust explained that in previous survey years they had only classed service users as eligible if they had two contacts on the same referral. However, for the CMH21 sample they had included service users whose second contact was not in relation to the same episode of care as the first, resulting in an increase in the eligible population for this year. The SCCEM confirmed that the trust was correct to include these service users in the 2021 sample, as per the sampling instructions. However, these criteria should have been applied in previous iterations of the survey as this was not something unique to CMH21, therefore the SCCEM has identified this as a historical sampling error. Comparability to previous years will be explored during bespoke analysis.

6. Section 251 breaches

Section 251 gives the survey approval for the common law duty of confidentiality of the NHS Act 2006 to be put aside and it is essential that trusts follow the requirements of that approval. When a trust fails to adhere to the processes under the Section 251, process breaches can occur.

Trusts who work with an approved contractor must send their sample declaration form to their contractor for approval. Once approved, the trust can then submit their password protected sample to the contractor's secure file transfer site. When the contractor has signed off the trust's sample data, both the sample declaration form and anonymised sample data file are submitted to the SCCEM by the contractor. This is the process trusts and contractors must follow in order to adhere to the processes under the Section 251 approval.

During the sample checking process for CMH21, the SCCEM identified no Section 251 breaches.