

Dorset HealthCare NHS Benchmarking Network: Mental Health 2015

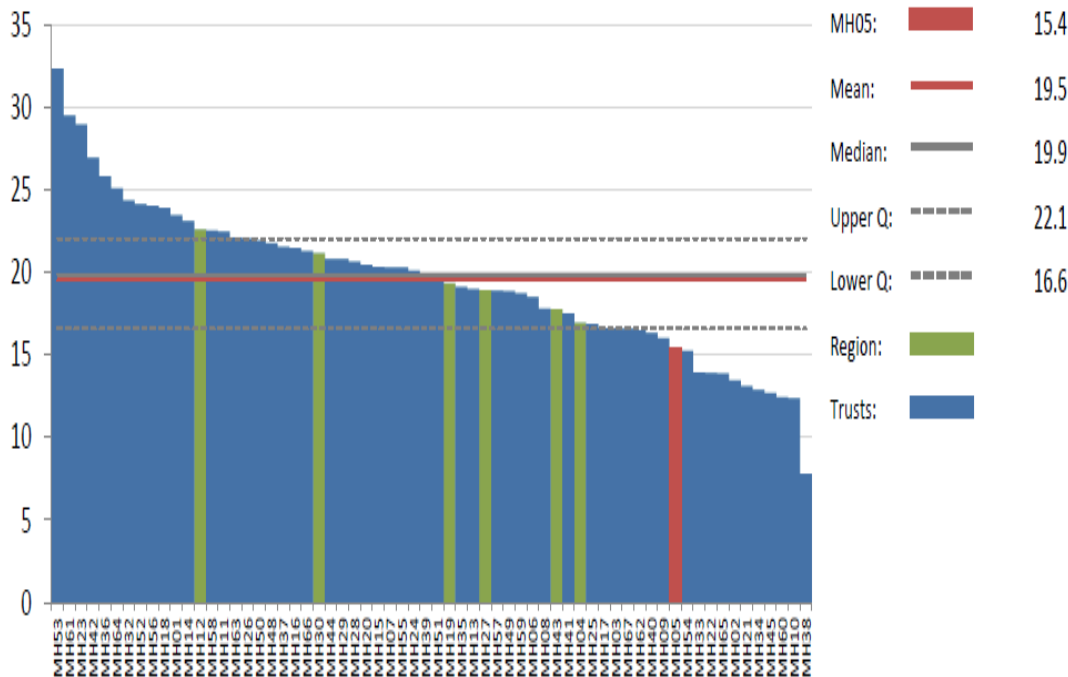


This report summarises the main findings from the 2015 benchmarking process that has taken place across NHS mental health services in England, Wales and Scotland. This year we are delighted to report that participation levels are at record levels with all English NHS Trusts and Foundation Trusts who are providers of secondary mental health services taking part, along with NHS providers of secondary mental health services within the NHS in Wales and Scotland.

We are also pleased to report that we again have involvement from independent sector specialist mental health providers. The high levels of involvement and data completion levels make the 2015 findings compelling. The key to any successful benchmarking project is securing critical mass of data submissions so that findings have both rigour and authority. We feel this has been achieved in 2015 and are grateful to member organisations for their submissions. This is the NHS Benchmarking Network's 4th cycle of mental health benchmarking and the depth of the database developed with members has been used in the report to make observations on time series comparisons and trends evident in NHS mental health services.

Adult Acute Beds

Adult Acute: Beds per 100,000 weighted population



Recent years have seen a sustained reduction in the number of Adult Acute beds provided by organisations across England and Wales.

Provision across the NHS ranges from 7.8 to 32.4 beds per 100,000 population (aged 16-64) with a median position of 19.9 beds.

This compares to median figures of 21, 22.6 and 24 beds in 2014, 2013 and 2012.

DHC's figure is currently at 15.4 which has slightly increased from 2014 where the figure was 15, however remains in the lower Q which is 16.6

Adult Acute Beds

As in previous years, the range on this metric is relatively low with a lower quartile of 87.0% and an upper quartile of 96.5% suggesting that most participants are within a few percentage points of their peers.

Therefore any drive to reduce bed occupancy to these levels will need to consider policy and practice at a UK-wide level given the ongoing high utilisation levels evident in acute inpatient mental health services.

DHC has risen from 94% to 97.1% which puts us in above the Upper Q which is 96.5%

