

SCOTTISH HOSPITAL SERVICEMental Health Statistics

1. This memorandum explains the new scheme for collecting statistics about psychiatric in-patients (including patients receiving treatment for mental deficiency) which is to be introduced in the Scottish Hospital Service from 1st June, 1962.
2. In hospitals hitherto designated as mental hospitals or mental deficiency institutions, the new scheme will replace the existing scheme under which, on the admission of a patient, an index card is completed and sent to the General Board of Control for Scotland. In other hospitals, the new scheme will replace the present hospital morbidity scheme outlined in S.H.M.60/66 in the case of patients admitted to the care of a psychiatrist.
3. The new arrangements are made necessary by the coming into full operation on 1st June of the Mental Health (Scotland) Act, 1960, which requires both a revision of the data collected at present and new arrangements for their collection, since the General Board of Control will then cease to exist. The opportunity is also being taken to extend the special arrangements for the collection of data about psychiatric patients to hospitals not in the past designated as mental hospitals or mental deficiency institutions, since for a proper assessment of the existing and future demands on the psychiatric services it is important that the data collected and analysed should cover all psychiatric in-patients. The scheme will not, however, at present extend to cover out-patients.

How the Scheme will Work

4. A new index card (enclosed with this memorandum) has been devised after consultation with psychiatrists. Part 1 of this card should be completed on the admission of a patient to a mental or mental deficiency hospital and on the admission of a patient in any other hospital to the care of a psychiatrist. The cards should then be sent in weekly batches to the Statistics Branch, Scottish Home and Health Department (see the address in paragraph 16). The data on the cards will be recorded on punched cards, and the index cards will then be returned to the hospital to be retained until the patient's discharge.
5. On the discharge of a patient, Part 2 of that patient's card should be completed and returned (again in weekly batches) to Statistics Branch. The information given in Part 2 will then be recorded on the punched card, and the index card retained.
6. "On discharge" in this instance should be taken as including on transfer to another hospital, whether for psychiatric or other treatment, or on the death of the patient. It does not include, however, changes in the status of the patient while remaining in the same hospital. That is, it is not necessary to complete Part 2 of the card held for the patient at that time and Part 1 of a new card where a compulsory patient is "discharged" in terms of the Mental Health (Scotland) Act but remains in the hospital as an informal patient, or where an informal patient already in the hospital has to be "admitted" compulsorily in terms of the Act.
7. Where a compulsory patient leaves the hospital on leave of absence and is expected to remain away for longer than four weeks, Part 2 of the card should be completed even if he is not then discharged from compulsion in terms of the Act (and Part 1 of a new card should be completed if he subsequently has to be re-admitted). Part 2 should not however be completed in respect of any patient (compulsory or informal) who leaves the hospital for a holiday, week-end, etc., and is expected to return within four weeks. It will be noted that the new arrangements thus differ from the present scheme in mental and mental

deficiency hospitals under which notices of discharge are not sent to the General Board of Control in respect of certified patients until the patient is discharged from certification, even if he has spent a lengthy period on probation or licence before discharge.

8. Where a compulsory patient absents himself without leave, Part 2 of the card should not be completed until the period allowed for his retaking has expired, i.e. until he has been "discharged by escape".

9. Instructions for completing the new index card are contained in the Appendix to this memorandum, additional copies of which may be obtained from Statistics Branch. Supplies of the cards will be issued to Regional Hospital Boards for distribution as soon as possible. It is estimated that the supply of cards to Regional Hospital Boards will be sufficient for the needs of the hospitals in their area until the end of this year when the opportunity may be taken to revise the card slightly in the light of the experience gained in the operation of the new scheme up to that time. Should further supplies be required before the end of the year, however, they may be obtained from Statistics Branch.

10. The index card has been so designed that a minimum of clerical recording will be required at the hospital. It is suggested that in mental and mental deficiency hospitals the arrangements for completing the existing index cards should continue for the new scheme and that in other hospitals the officer responsible for medical records should complete the card.

#### Transitional Arrangements

##### Mental and Mental Deficiency Hospitals

11. As indicated in paragraphs 1 and 2 the new scheme will replace the existing scheme in mental and mental deficiency hospitals in respect of all patients admitted on or after 1st June, that is, Part 1 of the new index card should be completed in respect of all such patients.

12. Where patients have been admitted before 1st June, but the index cards under the scheme being superseded have not been sent to the General Board of Control by that date, index cards in the old form should be sent to the Mental Welfare Commission for Scotland, St. Andrew's House, Edinburgh, 1. Where patients have been admitted and discharged before 1st June, but the notices of discharge, death or transfer required under the existing scheme have not been sent to the General Board of Control by that date, the notices should be sent to the Mental Welfare Commission who will complete Part B of the cards already held.

13. Where patients have been admitted to mental and mental deficiency hospitals before 1st June, but have not been discharged by that date, on their discharge Part 2 of the new index card should be completed, and in addition cols. 1 to 27 of Part 1 of the card. This additional identifying information is required in the case of patients resident at 31st May in order to relate the data received on discharge with that previously received on the old index card by the General Board of Control.

##### Other hospitals

14. In the case of patients admitted for psychiatric treatment before 1st June and discharged before that date, a discharge sheet should be completed in accordance with the hospital morbidity scheme outlined in S.H.M. 60/66. No discharge sheet will be required in the case of any patient admitted for psychiatric treatment and discharged after 1st June. In the case of patients admitted before 1st June, but discharged after that date, both Parts 1 and 2 of the new index card should be completed on discharge. In the case of patients admitted after 1st June, Part 1 should be completed on admission and Part 2 on discharge in accordance with the general arrangements outlined above.

Inquiries

15. Tables derived from the collected data will be published annually. In addition, the Department will consider any requests from those concerned with the subject for further analyses of the collected data.

16. Any inquiries about the scheme should be addressed to:-

Statistics Branch,  
Scottish Home and Health Department,  
Room 130,  
St. Andrew's House,  
Edinburgh, 1.

Telephone extension:- 122 or  
179

Department of Health for Scotland,  
St. Andrew's House,  
Edinburgh, 1.

STAT/GBC/1 Pt. B

APPENDIXMental Health Statistics - ScotlandInstructions for Completion of Hospital Index Cards

The index card has been designed so that the information can be transferred to punched cards and analysed mechanically. The column numbers shown on the card are for use in the machine processing.

The card is in two parts. Part 1 is for recording particulars of the patient on admission, and Part 2 for completing the record on discharge. On the admission of a patient, Part 1 should be completed and the card should be sent to Statistics Branch, Scottish Home and Health Department, where the data will be transferred to punched cards. The index card will then be returned to the hospital to be retained until the patient is discharged. On discharge Part 2 should be completed and the card sent again to Statistics Branch, where, after recording on a punched card, it will be retained.

"On discharge" in this instance should be taken as including on transfer to another hospital, whether for psychiatric or other treatment, or on the death of the patient. It does not include, however, changes in the status of the patient while remaining in the same hospital (see note on "Category of Admission" below). Where a compulsory patient leaves the hospital on leave of absence and is expected to remain away for longer than four weeks, Part 2 of the card should be completed even if he is not then discharged from compulsion in terms of the Mental Health (Scotland) Act, 1960 (and Part 1 of a new card should be completed if he subsequently has to be re-admitted). Part 2 should not, however, be completed in respect of any patient (compulsory or informal) who leaves the hospital for a holiday, weekend, etc., and is expected to return within four weeks. It will be noted that the new arrangements thus differ from the present scheme in mental and mental deficiency hospitals under which notices of discharge are not sent to the General Board of Control in respect of certified patients until the patient is discharged from certification, even if he has spent a lengthy period on probation or licence before discharge.

Where a compulsory patient absents himself without leave, Part 2 of the card should not be completed until the period allowed for his retaking has expired, i.e., until he has been "discharged by escape". (In such cases, the entry in boxes 60 and 61 (Disposal on Discharge) will be 03 (absconded).)

When entering numbers in the boxes provided on the card, enter units in the right hand box, tens in the box on its left, hundreds in the box to the left of tens, etc. Where there are two boxes and the entry is 9, the boxes on completion should show 0/9; where there are three boxes and the entry is 29, the boxes on completion should show 0/2/9. No box should be left blank, except those which are to be coded in the Department (see detailed notes below) and box 65 which should be left empty in the case of dead patients. Apart from these boxes, where there is no entry insert 0.

Part 1 of the card

Name of Patient: Enter the initials and surname in the appropriate places, beginning on the left and entering each letter in a box. If the name is too long, enter as many letters as there are boxes.

Hospital: Enter the name of the hospital in the space provided and enter the appropriate code number in boxes 16 to 18. Copies of the list of hospital code numbers will be sent to Regional Hospital Boards with the supplies of index

cards, and any hospital which is uncertain as to the appropriate code number should obtain a copy of the list from the Regional Hospital Board.

Date of Birth: Enter day, month and year in the appropriate boxes, e.g., in the case of a patient born on 4th December, 1937, the entry should be:-

Day	Month	Year
0	4	1
2	3	7

Sex: Enter 1 for male, 2 for female in box 24.

Marital Status: Enter the appropriate number in box 25. In the case of a married patient, the figure 2 should be entered where he or she is living with his or her spouse, and 5 where he or she is separated.

Age on Admission: Enter in years in boxes 26 and 27.

Date of Admission: Enter day, month and the last two figures of the year in the appropriate boxes.

Number of Previous Admissions: Enter the number for the current year in box 33, and the number for earlier years in box 34.

Address of Usual Residence: Enter in full in the space provided. The area of reference will be coded by the Department in boxes 35 to 39.

Occupation: If the patient is 18 years of age or over on admission and has or has had an occupation, enter his occupation in the space provided. The entry should give full details and be as precise as possible. The occupation will be coded by the Department.

If the patient is either under 18 years of age or has had no occupation, give details of the occupation of the person (parent, relative or other person) responsible for providing for him before admission, and indicate that this is the parent's, relative's etc. occupation.

In the case of a married woman or widow enter her husband's occupation, whether or not she herself is gainfully employed.

Where the patient, person responsible for him, or patient's husband is unemployed, enter the usual occupation; where he is retired give the last regular occupation and add the word "retired".

Type of Admission: Enter the appropriate number in box 45.

Category of Admission: Enter the appropriate number in box 46. In the case of compulsory patients, enter 1 (section 24) if the patient has been admitted on an application under Part IV of the Mental Health (Scotland) Act, 1960, 2 (section 31) if he has been admitted on an emergency recommendation, 3 (Part V) if he has been admitted on an order by the criminal courts or on transfer from prison or a similar institution under Part V of the Act, and 4 (Part VI) if he has been admitted on transfer from England and Wales

or Northern Ireland under Part VI of the Act. In the case of a compulsory patient transferred to the hospital under section 37 of the Act, enter 1, 3 or 4 according to whether the patient is liable to be detained under Part IV or Part V or was previously transferred from England and Wales or elsewhere under Part VI. (It should be noted that it is not necessary to treat a patient as discharged and readmitted if he changes status while remaining in the same hospital. That is, it is not necessary to complete Part 2 of the card held for the patient at that time and Part 1 of a new card where a compulsory patient is "discharged" in terms of the Act but remains in the hospital as an informal patient, or where an informal patient already in the hospital has to be "admitted" compulsorily in terms of the Act.)

Age Limits:

Enter the appropriate number in box 47. If the patient is a compulsory patient and his mental disorder is of a type subject to age limits under the Mental Health (Scotland) Act, 1960 (i.e., if he is a mental defective capable of living an independent life, or mentally ill and suffering from a persistent behaviour disorder only) enter 1 (age limit applicable) even if the patient was admitted under Part V of the Act. If the patient is a compulsory patient and his mental disorder is of a type not subject to age limits, or if he is not a compulsory patient, enter 2 (age limits not applicable).

Source of Referral:

Enter the appropriate number in box 48. The number 7 (judicial or prison) should be entered only if the patient was committed to hospital by the criminal courts or transferred from prison or a similar institution. Compulsory admission under Part IV of the 1960 Act on an application under section 24 approved by the sheriff should not be entered as "judicial", but as "psychiatrist at domiciliary or other visit", "general practitioner", or "local authority agency", etc., as appropriate.

Religion:

Enter the appropriate number in box 49.

Principal Diagnosis on Admission:

Enter the precise diagnosis in the space provided. The code number will be entered in the boxes by the Department.

Other Conditions if not already stated:

If applicable, the code number of one of the eight conditions listed should be entered in box 54.

Part 2

General:

See introductory paragraphs of this Appendix on the circumstances in which this Part of the card is to be completed, and the note on reclassification under the heading "Category of Admission".

Date of Discharge:

Enter day, month and year in the boxes provided.

Disposal on Discharge:

Enter the appropriate number in boxes 60 to 61.

Duration of In-patient Stay:

Enter the appropriate number in weeks in boxes 62 to 64.

Condition on  
Discharge:

Enter the appropriate number in box 65.

Treatment:

Enter the appropriate number in box 66. Enter 0 only if the patient received no treatment other than nursing care and psychotherapy. Items 1 to 7 assume that the patient received nursing care and some psychotherapy in addition to the forms of treatment specified.

Diagnosis  
at Discharge:

Enter the precise diagnosis at discharge (i.e., the final diagnosis of the condition for which the patient was treated in hospital) in the space provided: the diagnosis will be coded in the boxes by the Department. If the diagnosis on discharge is classifiable to section 17 (accidents, poisoning, and violence) of the International Statistical Classification of Diseases give sufficient detail to enable both the E and N codes to be entered.

Registered  
Cause of  
Death:

In cases where the patient is discharged by death enter the registered cause of death in the space provided. The code will be entered in the boxes by the Department.