National Clinical Audit of Psychosis

UPCARE: 0.01 Programme name - please do not change this field.*	National Clinical Audit of Psychosis
0.02 Workstream name (if applicable) - please do not change this field.*	Not applicable
0.1 Contract status	Ongoing
0.2 Audit or non-audit	Audit
0.3 HQIP commissioned*	Yes
0.41 HQIP AD	PS
0.42 HQIP PM	NP
1.0 Included in current NHS Quality Accounts*	Yes
1.1a Geographical coverage - HQIP agreement*	England; Wales
1.1b Geographical coverage - External agreement*	Republic of Ireland
1.2a Topic - please select which ONE of the following best describes the topic area for the programme or workstream. If more than one apply, please select 'Other' and add comment to the next question.*	Mental Health
1.3a Healthcare setting*	NHS mental healthcare; NHS secondary or tertiary care; NHS community care
1.4a Does your patient cohort include the following?*	Both adults and under 18s

1.4b Inclusion and exclusion criteria*

Eligibility criteria for patients in the Routine Data Audit:

- The patient is aged 65 years and under.
- On the caseload of an NHS-funded EIP team in England or Wales OR
- On the caseload of an NHS-funded Children and Young People's Mental Health (CYPMH) teams/ Child and Adolescent Mental Health Services (CAMHS) where EIP teams do not extend their offer to CYP
- The patient has first episode psychosis (FEP) **or** an At-Risk-Mental-State (ARMS) diagnosis.
- Patient has been on the team's caseload for 1 year or more at the date of data extraction and still on the caseload.

1.5 Methods of data submission*

Extraction from existing data source(s)

1.6a 2023/24 data submission closes - please indicate date, series of dates or frequency.*

England

EIP teams in England submit data to the MHSDS on a ongoing basis. NCAP extract this routine data quarterly and update the online dashboard.

Wales

From January 2026 Improvement Cymru submit audit data to NCAP on a monthly basis.

1.6b 2024/25 data submission closes - please indicate date, series of dates or frequency.*

England - Quarterly data extractions with the hopes to move to monthly by 2027.

Wales - Monthly data extractions.

1.6c 2025/26 data submission closes - please indicate date, series of dates or frequency.*

N/A as NCAP uses routine data which is continuously updated.

1.6d 2026/27 data submission closes - please indicate date, series of dates or frequency.*

N/A as NCAP uses routine data which is continuously updated.

1.7 Data flow diagram

Data flow diagrams can be found on the [Information governance](#) page on our website.

1.8 Data quality & analysis plan	The Data analysis plan can be found on our audit resources page on the website in the methodology document, under [audit standards and calculations](#) (pages 5-8).

The data analysis plan for Welsh EIP teams will be based primarily on previous Bespoke analysis plans, which can be found here: [NCAP Resources (rcpsych.ac.uk)](#) |
| **1.9a Link to the outlier policy*** | Due to the current issues with data quality and completeness of data in the MHSDS in agreement with HQIP NCAP is not currently identifying outliers. Once the data quality improves this process will resume and the policy will be available on our website.

The outlier policies for previous years can be found here: [NCAP Resources (rcpsych.ac.uk)](#) |
| **1.9b Link to the cause for concern policy*** | Cause for concern policy can be found on the [Information governance](#) page on our website. |
| **2.1 Outcome measures** | We collect the following outcome measures and their associated scores:

- HONOS
- HONOSCa
- DIALOG
- QPR
- GBO
- ReQOL-10 |
| **2.2 Process measures** | **Timely Access -** The percentage of service users with first episode of psychosis that started treatment in early intervention in psychosis services within two weeks of referral (allocated to, and engaged with, an EIP care coordinator).

Cognitive Behavioural Therapy for Psychosis (CBTp) -The percentage people with first episode psychosis (FEP) that have taken up Cognitive Behavioural Therapy (CBTp).

CBT for At Risk Mental State (ARMS) - The percentage of service users with an at risk mental state that have taken up Cognitive Behavioural Therapy.

Family Intervention (FI) - The percentage of people with FEP and their families that have taken up Family Interventions.

Prescribing of clozapine - The percentage of people with FEP who have not responded adequately to or tolerated treatment with at least two antipsychotic drugs are offered clozapine.

Supported education and employment programmes - The percentage of people with FEP that have taken up supported employment and education programmes.

Physical health screening - The percentage of people with FEP who were offered all 7 physical health screenings in the last 12 months. Screenings include |

smoking status, alcohol intake, substance misuse, BMI, blood pressure, glucose and cholesterol.

Physical health intervention - The percentage of people with FEP who were offered all relevant interventions where screening indicated a risk level requiring intervention within the last 12 months, as per the Lester Tool.

Carer focussed education and support programmes - The percentage of carers of people with FEP that have taken up carer-focused education and support programmes.

Outcome measures - Clinical outcome measurement data for people with FEP (two or more outcome measures from HoNOS/HoNOSCA, DIALOG, QPR, ReQOL-10, GBO) recorded at least twice (assessment and one other time point).

2.3 Organisational measures	Organisational measures are not available in the MHSDS.
2.4 Patient reported outcome measures	- DIALOG - QPR (Questionnaire are the Process of Recovery) - GBO (Goal-based outcomes) - ReQoL-10 (Recovering quality of life - 10 item)
2.5 Patient reported experience measures	N/A
2.6a Do measures align with any of the following sources of evidence (select all that apply)	NICE clinical guideline; NICE quality standard
3.1 Results visualisation	Static data files; Interactive online portal (run charts available); Annual report
3.2a Levels of reporting*	Trust or health board; National; Team/ ward
3.3 Timeliness of results feedback	Within 3 months
3.4 Link to dynamic reporting*	https://data.casecapture.com/pages/home
4.01 2023/24 Dataset covers the period FROM/TO (within financial year 01/04 to 31/03)*	01/01/2022 - 01/02/2023

4.02 2024/25 Dataset covers the period FROM/TO (within financial year 01/04 to 31/03)*	01/01/2023 - 01/01/2024
4.03 2025/26 Dataset covers the period FROM/TO (within financial year 01/04 to 31/03)*	04/01/2022 - 03/31/2025
4.10 Dataset #1 name	NCAP bespoke audit 2023
4.11 Dataset #1 type	Clinical audit; Organisational audit
4.12 Dataset #1 population coverage*	Sample of eligible patients
4.13 Dataset #1 items collected (n)	121
4.14 Dataset #1 items from existing national datasets (n)	1
4.15 Dataset #1 use of existing national datasets	Mental health services dataset (MHSD)
4.16 Dataset #1 specification	Our audit resources webpages contain paper copies of questionnaires (casenote and contextual) which show all of the data items collected for the bespoke audit for both England and Wales.
4.20 Dataset #2 name	NCAP Bespoke audit 2024
4.21 Dataset #2 type	Clinical audit; Organisational audit
4.22 Dataset #2 population coverage*	Sample of eligible patients
4.23 Dataset #2 items collected (n)	121
4.24 Dataset #2 items from existing national datasets (n)	1
4.25 Dataset #2 use of existing national datasets	Mental health services dataset (MHSD)

4.26 Dataset #2 specification	Our [audit resources webpages](#) contain paper copies of questionnaires (casenote and contextual) which show all of the data items collected for the bespoke audit for both England and Wales.
4.30 Dataset #3 name	State of the data report 2025
4.31 Dataset #3 type	Clinical audit
4.32 Dataset #3 population coverage*	All eligible patients
4.34 Dataset #3 items from existing national datasets (n)	All data items collected from the MHSDS
4.35 Dataset #3 use of existing national datasets	Mental health services dataset (MHSD)
4.36 Dataset #3 specification	Full details can be found on our [NCAP audit resources webpages.](#)
5.00 When was your healthcare quality improvement plan (referred to as a QI Plan) last reviewed? Please upload under 'Files' below using the HQIP naming convention (click on response to see pop-up help text).	10/10/2024
5.10 When were your clinical performance indicators (referred to as metrics) signed off by funders? Please upload under 'Files' below using the HQIP template and naming convention (click on response to see pop-up help text).	11/20/2025

5.11 Please add the hyperlink to where your clinical performance indicators (referred to as metrics) are published on your project website.*	https://www.rcpsych.ac.uk/improving-care/ccqi/national-clinical-audits/national-clinical-audit-of-psychosis/audit-resources
5.20 National report publication date (within calendar year 01/01 - 31/12/2023)*	N/A
5.21 Published/planned national report publication date (within calendar year 01/01 - 31/12/2024)*	N/A
5.22 Planned national report publication date (within calendar year 01/01 - 31/12/2025)*	February 2025 - NCAP State of the Nation Report 2024
5.23 Planned national report publication date (within calendar year 01/01 - 31/12/2026)*	NCAP State of the Data Report 2025 - 12/02/2026 NCAP State of the Nations report 2026 - 08/10/2026
5.24 Planned national report publication date (within calendar year 01/01 - 31/12/2027)*	NCAP State of the Nations report 2027 - 22/07/2027
6.0 Please add the most recent date that you have reviewed and updated an online version of UPCARE Workstream section(s) on your project's website (click into the response to see pop-up guidance).	01/28/2026
6.1 Please add a hyperlink to UPCARE Workstream section(s) on your website (click into the response to see pop-up guidance).*	https://www.rcpsych.ac.uk/improving-care/ccqi/national-clinical-audits/national-clinical-audit-of-psychosis/information-governance
Files	ncap-qi-plan-2022-2025.docx