

## Health and Social Care Information Centre

### NHS Data Model and Dictionary Service

**Type:** Data Dictionary Change Notice  
**Reference:** 1480  
**Version No:** 1.0  
**Subject:** Mental Health Care Cluster 9  
**Effective Date:** Immediate  
**Reason for Change:** Update to definitions  
**Publication Date:** 9 July 2014

#### Background:

The NHS Business Definition "Mental Health Care Cluster" and Attribute "MENTAL HEALTH CARE CLUSTER CODE" state that Mental Health Care Cluster 9 is under review by the Department of Health, which is no longer correct.

This Data Dictionary Change Notice (DDCN) updates the:

- NHS Business Definition "Mental Health Care Cluster" to remove the reference to the Department of Health from Care Cluster 9
- Attribute "MENTAL HEALTH CARE CLUSTER CODE" to remove the reference to the Department of Health from National Code 9.

Note: the change to MENTAL HEALTH CARE CLUSTER CODE does not change the code, it only changes the note on the code.

To view a demonstration on "How to Read an NHS Data Model and Dictionary Change Request", visit the NHS Data Model and Dictionary help pages at: [http://www.datadictionary.nhs.uk/Flash\\_Files/changerequest.htm](http://www.datadictionary.nhs.uk/Flash_Files/changerequest.htm).

Note: if the web page does not open, please copy the link and paste into the web browser.

#### Summary of changes:

##### Supporting Information

[MENTAL HEALTH CARE CLUSTER](#) Changed Description

##### Attribute Definitions

[MENTAL HEALTH CARE CLUSTER CODE](#) Changed Description

**Date:** 9 July 2014

**Sponsor:** Dr K. Lunn, Director of Information Standards Delivery, Health and Social Care Information Centre

**Note:** New text is shown with a blue background. Deleted text is crossed out. Retired text is shown in grey. Within the Diagrams deleted classes and relationships are red, changed items are blue and new items are green.

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#### MENTAL HEALTH CARE CLUSTER

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Change to Supporting Information: Changed Description

A [Mental Health Care Cluster](#) is a [MENTAL HEALTH CARE CLUSTER](#) which is a type of [CATEGORY VALUED PERSON OBSERVATION](#).

A [Mental Health Care Cluster](#) is part of a currency developed to support [Payment by Results](#) for Mental Health Services. [Mental Health Care Clusters](#) are 21 groupings of Mental Health [PATIENTS](#) based on their characteristics, and are a way of classifying individuals utilising Mental Health Services that forms the basis for payment.

A [Mental Health Care Cluster](#) is assigned using a decision tree or algorithm based on the [PERSON SCORE](#) from the [Mental Health Clustering Tool](#) undertaken by a [CARE PROFESSIONAL](#) for the [PATIENT](#).

This is done by first assigning the [PATIENT](#) to one of three [Mental Health Care Cluster Super Classes](#), to narrow down the number of possible [Mental Health Care Clusters](#) which are applicable to the [PATIENTS](#) condition. The [PATIENT](#) is then assigned to the most appropriate of this sub-set of [Mental Health Care Clusters](#).

The [Mental Health Care Clusters](#) into which the presenting needs of the [PATIENT](#) may fall are:

**Care Cluster 0: Variance** - Despite careful consideration of all the other [Mental Health Care Clusters](#), this group of [PATIENTS](#) are not adequately described by any of their descriptions. [PATIENTS](#) who cannot be initially assigned to a [Mental Health Care Cluster Super Class](#) during the clustering process will be automatically assigned to this [Mental Health Care Cluster](#).

**Care Cluster 1: Common Mental Health Problems (Low Severity)** - This group of [PATIENTS](#) has definite but minor problems of depressed mood, anxiety or other disorder, but they do not present with any psychotic symptoms

**Care Cluster 2: Common Mental Health Problems (Low Severity with Greater Need)** - This group of [PATIENTS](#) has definite but minor problems of depressed mood, anxiety or other disorder, but not with any psychotic symptoms. They may have already received care associated with Care Cluster 1 and require more specific intervention, or previously been successfully treated at a higher level but are re-presenting with low level symptoms

**Care Cluster 3: Non-Psychotic (Moderate Severity)** - This group of [PATIENTS](#) have moderate problems involving depressed mood, anxiety or other disorder (not including psychosis)

**Care Cluster 4: Non-Psychotic (Severe)** - This group of [PATIENTS](#) is characterised by severe depression and/or anxiety and/or other disorders, and increasing complexity of needs. They may experience disruption to function in everyday life and there is an increasing likelihood of significant risks.

**Care Cluster 5: Non-Psychotic Disorders (Very Severe)** - This group of [PATIENTS](#) will be severely depressed and/or anxious and/or other. They will not present with hallucinations or delusions but may have some unreasonable beliefs. They may often be at high risk for suicide and they may present safeguarding issues and have severe disruption to everyday living.

**Care Cluster 6: Non-Psychotic Disorder of Over-Valued Ideas** - This group of [PATIENTS](#) suffer from moderate to very severe disorders that are difficult to treat. This may include treatment resistant eating disorders, Obsessive Compulsive Disorder etc, where extreme beliefs are strongly held, some personality disorders, and enduring depression.

**Care Cluster 7: Enduring Non-Psychotic Disorders (High Disability)** - This group of [PATIENTS](#) suffer from moderate to severe disorders that are very disabling. They will have received treatment for a number of years and although they may have an improvement in positive symptoms, considerable disability remains that is likely to affect role functioning in many ways.

**Care Cluster 8: Non-Psychotic Chaotic and Challenging Disorders** - This group of [PATIENTS](#) will have a wide range of symptoms and chaotic and challenging lifestyles. They are characterised by moderate to very severe repeat deliberate self-harm and/or other impulsive behaviour and chaotic, over-dependant engagement, and are often hostile with services.

~~Care Cluster 9: Cluster Under Review~~ - Note: This ~~Mental Health Care Cluster~~ is under review by the ~~Department of Health~~ and should not be used. **Care Cluster 9: Cluster Under Review** - Note: This **Mental Health Care Cluster** is under review and should not be used.

**Care Cluster 10: First Episode Psychosis** - This group of [PATIENTS](#) will be presenting to the Mental Health service for the first time with mild to severe psychotic phenomena. They may also have depressed mood and/or anxiety and/or other behaviours. Drinking or drug taking may be present but *will not* be the only problem.

**Care Cluster 11: Ongoing Recurrent Psychosis (Low Symptoms)** - This group of [PATIENTS](#) have a history of psychotic symptoms that are currently controlled and causing minor problems if any at all. They are currently experiencing a period of recovery where they are capable of full or near functioning. However, there may be impairment in self-esteem and efficacy and vulnerability to life.

**Care Cluster 12: Ongoing or Recurrent Psychosis (High Disability)** - This group of [PATIENTS](#) have a history of psychotic symptoms with a significant disability with major impact on role functioning. They are likely to be vulnerable to abuse or exploitation.

**Care Cluster 13: Ongoing or Recurrent Psychosis (High Symptoms and Disability)** - This group of [PATIENTS](#) will have a history of psychotic symptoms which are not controlled. They will present with moderate to severe psychotic symptoms and some anxiety or depression. They have a significant disability with major impact on role functioning.

**Care Cluster 14: Psychotic Crisis** - This group of [PATIENTS](#) will be experiencing an acute psychotic episode with severe symptoms that cause severe disruption to role functioning. They may present as vulnerable and a risk to others or themselves.

**Care Cluster 15: Severe Psychotic Depression** - This group of [PATIENTS](#) will be suffering from an acute episode of moderate to severe depressive symptoms. Hallucinations and delusions will be present. It is likely that this group will present a risk of suicide and have disruption in many areas of their lives.

**Care Cluster 16: Dual Diagnosis** - This group of [PATIENTS](#) have enduring, moderate to severe psychotic of affective symptoms with unstable, chaotic lifestyles and *co-existing* substance misuse. They may present a risk to self and others and engage poorly with services. Role functioning is often globally impaired.

**Care Cluster 17: Psychosis and Affective Disorder (Difficult to Engage)** - This group of [PATIENTS](#) have moderate to severe psychotic symptoms with unstable, chaotic lifestyles. There may be some problems with drugs or alcohol not severe enough to warrant dual diagnosis care. This group have a history of non-concordance, are vulnerable, and engage poorly with services.

**Care Cluster 18: Cognitive Impairment (Low Need)** - People who may be in the early stages of dementia (or who may have an organic brain disorder affecting their cognitive function) who have some memory problems, or other low level cognitive impairment, but who are still managing to cope reasonably well. Underlying reversible physical causes have been ruled out.

**Care Cluster 19: Cognitive Impairment or Dementia Complicated (Moderate Need)** - People who have problems with their memory, and/or other aspects of cognitive functioning resulting in moderate problems looking after themselves and maintaining social relationships. Probable risk of self-neglect or harm to others and may be experiencing some anxiety or depression.

**Care Cluster 20: Cognitive Impairment or Dementia (High Need)** - People with dementia who are having significant problems in looking after themselves and whose behaviour may challenge their carers or services. They may have high levels of anxiety or depression, psychotic symptoms, or significant problems such as aggression or agitation. They may not be aware of their problems. They are likely to be at high risk of self-neglect or harm to others, and there may be a significant risk of their care arrangements breaking down.

**Care Cluster 21: Cognitive Impairment or Dementia (High Physical or Engagement)** - People with cognitive impairment or dementia who are having significant problems in looking after themselves, and whose

physical condition is becoming increasingly frail. They may not be aware of their problems and there may be a significant risk of their care arrangements breaking down.

Further information relating to the [Mental Health Clustering Tool](#) and [Mental Health Care Clusters](#) is available from the [Monitor](#) website at: [National Tariff document and annexes: Annex 7C - Mental health clustering tool booklet](#).

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#### MENTAL HEALTH CARE CLUSTER CODE

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Change to Attribute: Changed Description

The [Mental Health Care Cluster](#) assigned to a [PATIENT](#).

*National Codes:*

- 00 Care Cluster 0 - Variance (unable to assign [MENTAL HEALTH CARE CLUSTER CODE](#))
- 01 Care Cluster 1 - Common Mental Health Problems (Low Severity)
- 02 Care Cluster 2 - Common Mental Health Problems (Low Severity with Greater Need)
- 03 Care Cluster 3 - Non-Psychotic (Moderate Severity)
- 04 Care Cluster 4 - Non-Psychotic (Severe)
- 05 Care Cluster 5 - Non-Psychotic Disorders (Very Severe)
- 06 Care Cluster 6 - Non-Psychotic Disorder of Over-Valued Ideas
- 07 Care Cluster 7 - Enduring Non-Psychotic Disorders (High Disability)
- 08 Care Cluster 8 - Non-Psychotic Chaotic and Challenging Disorders
- ~~09 Care Cluster 9 - Cluster Under Review - Note: This [Mental Health Care Cluster](#) is under review by the [Department of Health](#) and should not be used.~~
- 09 Care Cluster 9 - Cluster Under Review - Note: This [Mental Health Care Cluster](#) is under review and should not be used.
- 10 Care Cluster 10 - First Episode Psychosis
- 11 Care Cluster 11 - Ongoing Recurrent Psychosis (Low Symptoms)
- 12 Care Cluster 12 - Ongoing or Recurrent Psychosis (High Disability)
- 13 Care Cluster 13 - Ongoing or Recurrent Psychosis (High Symptoms and Disability)
- 14 Care Cluster 14 - Psychotic Crisis
- 15 Care Cluster 15 - Severe Psychotic Depression
- 16 Care Cluster 16 - Dual Diagnosis
- 17 Care Cluster 17 - Psychosis and Affective Disorder (Difficult to Engage)
- 18 Care Cluster 18 - Cognitive Impairment (Low Need)
- 19 Care Cluster 19 - Cognitive Impairment or Dementia Complicated (Moderate Need)
- 20 Care Cluster 20 - Cognitive Impairment or Dementia Complicated (High Need)
- 21 Care Cluster 21 - Cognitive Impairment or Dementia Complicated (High Physical or Engagement)

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For enquiries about this Change Request, please email [information.standards@hscic.gov.uk](mailto:information.standards@hscic.gov.uk)