



Bipolar, schizophrenia and other psychoses: care planning

NICE indicator

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Indicator

The percentage of patients with schizophrenia, bipolar affective disorder and other psychoses who have a comprehensive care plan documented in the record, in the preceding 12 months, agreed between individuals, their family and/or carers as applicable.

Indicator type

General practice indicator suitable for use in the Quality and Outcomes Framework.

This document does not represent formal NICE guidance. For a full list of NICE indicators, see our [menu of indicators](#).

To find out how to use indicators and how we develop them, see our [NICE indicator process guide](#).

Rationale

This indicator supports the coordinated delivery of health care services for people with schizophrenia, bipolar disorder or other psychoses. Between 18-30% of people with severe mental illness in the UK are described as being seen only in a primary care setting so it is important that practices take responsibility for discussing and documenting care plans for these people in their care record ([Reilly et al. 2012](#)). Care plans should include a crisis plan, medication plan and individualised recovery goals.

Source guidance

- [Psychosis and schizophrenia in adults: prevention and management. NICE guideline CG178 \(2014\)](#), recommendations 1.3.3.5 and 1.5.3.6
- [Bipolar disorder: assessment and management. NICE guideline CG185 \(2014\)](#), recommendations 1.2.4, 1.3.4 and 1.9.4

Specification

Numerator: The number of patients in the denominator who have an agreed comprehensive care plan documented in their record (recorded in the preceding 12 months).

Denominator: The number of patients with schizophrenia, bipolar disorder or other psychoses.

Calculation: Numerator divided by the denominator, multiplied by 100.

Exclusions:

- Care plans dated prior to a date of relapse should not be included.
- A care plan should be updated on relapse if the patient has been previously recorded as in remission.

Minimum population: The indicator would be appropriate to assess performance at individual general practice level.

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