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| Mental Health Bulletin 81 |
| Restrictive Interventions – UpdateNew Category Codes |
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## Purpose and Scope

To outline data reporting requirements for capturing restrictive interventions in Emergency Departments and Urgent Care Centres.

To inform Area Mental Health & Wellbeing Services (AMHWS) of new category codes for use in various functions of CMI/ODS.

## Overview

### From 1st April 2024 the Office of the Chief Psychiatrist will oversee the use of restrictive interventions on any person receiving a mental health and wellbeing service in the Emergency Department (ED) or Urgent Care Centre (UCC) of a designated mental health service. The oversight is extended beyond people subject to compulsory assessment and treatment orders to also include people who present voluntarily even in circumstances where consent is unclear.

The *Mental Health and Wellbeing Act 2022* (the Act) defines a mental health and wellbeing service as:

* A professional service performed for the primary purpose of:
	+ Improving or supporting a person’s mental health and wellbeing, or
	+ Assessing, or providing treatment, care or support to, a person for mental illness or psychological distress, or
	+ Providing care or support to a person who is a family member, carer, or supporter, of a person with mental illness or psychological distress.

Please also refer to the Chief Psychiatrist guidelines on restrictive interventions:
<https://www.health.vic.gov.au/chief-psychiatrist/chief-psychiatrists-restrictive-interventions>

## CMI/ODS Data Entry

### Restrictive Interventions:

When a restrictive intervention is applied in an ED or UCC of a designated mental health service on a person receiving a mental health service, the restrictive intervention must be reported to the Office of the Chief Psychiatrist (refer to the [Chief Psychiatrist guidelines](https://www.health.vic.gov.au/chief-psychiatrist/chief-psychiatrists-restrictive-interventions) <https://www.health.vic.gov.au/chief-psychiatrist/chief-psychiatrists-restrictive-interventions> for more information on specific criteria).

For this reporting to take place, staff will need to register the consumer in CMI/ODS. The registration of a consumer does not necessarily require a case and episode to be opened (see below).

The scenarios below can help determine whether registration is required.

**Scenario 1:**

* *The primary purpose of a restrictive intervention is for the treatment of a medical condition rather than a mental health illness, and the person is not in receipt of a mental health and wellbeing service whilst in the ED or UCC.*

The use of the restrictive intervention is not reportable to the Chief Psychiatrist and registration on CMI/ODS is not required.

**Scenario 2**:

* *A consumer has a restrictive intervention applied, the clinical decision has been made that the restrictive intervention is occurring in accordance with the Act and the consumer is seen by a mental health clinician.*

The consumer will need to be registered (if no prior registration has occurred) and a case and episode opened.

**Scenario 3:**

* *A consumer has a restrictive intervention applied and the clinical decision has been made that the restrictive intervention is occurring in accordance with the Act. It is then decided that a mental health assessment by a specialist mental health clinician is not required and/or specialist mental health clinicians have not been able to perform an assessment on the consumer.*

The consumer will need to be registered in CMI/ODS. A case and episode may not be required.

**Note:** The Act specifies personnel other than an authorised psychiatrist who are permitted to authorise a restrictive intervention.

Please refer to the advice provided in PMC, Recording Case in CMI/ODS, July 2015:

A case is ‘*a clinically determined period of care for a consumer that involves individual service planning and clinical review generally within a framework of multidisciplinary care*’.

Therefore, if a mental health assessment has not been completed, a case and episode are not required to be opened at the time of registration. Outcome measures are not required if a case/episode are not opened.

If registration occurs but no case or episode are commenced, this data is transmitted to the ODS and will be sent to IMHA (non-legal mental health advocacy service). This restrictive intervention will also appear on the monthly restrictive intervention register that is submitted to the Chief Psychiatrist and will identify the Service Location.

A new ‘Service Location’ has been added to CMI/ODS to capture restrictive interventions that occur in an UCC that is under the governance of a designated mental health service. The ‘Service Location’ of ‘Emergency Department’ already exists.

### New Category Codes

The Screening Register will be updated to include the following category codes:

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| **Category Code** | **Function** | **New Data item** |
| Assessment Outcome (OUTASS) | Assessment | Code 12 – Referred to Mental Health & Wellbeing Local |
| Service Location (SRVLOC) | ContactsScreening Register  | Code 35 - Mental Health & Wellbeing LocalCode 30 – Urgent Care Centre |
| Service Location (SRVLOC) | Bodily RestraintChemical Restraint | Code 30 – Urgent Care Centre |
| Referral Source (REFSRC) | AssessmentRegistrationScreening Register | Code 60 - Mental Health & Wellbeing LocalCode 61 - Urgent Care Centre |
| Outcome (OUTSRG) | Screening Register | Code 35 - Referred to Mental Health & Wellbeing Local |
| Service Response (SRVRES) | Screening Register | Code 47 - Mental Health & Wellbeing Local |
| Service Recipient (SRVRCP) | ContactsScreening Register | Code 50 - Urgent Care CentreCode 55 - Mental Health & Wellbeing Local |

Those AMHWS who use Screening Register will be able to access the above options. Those AMHWS who do not use the Screening Register for their triage dataset may need to discuss the addition of this information with your vendor.

As can be seen, the above additions to the category codes will also be available in other functions of CMI/ODS as indicated in the table.

## Further information

# Further information about the correct use of CMI/ODS can be found on the Victorian Government’s website. In particular, see the sections on; Registration of Clients, CMI/ODS Service Contacts and Subcentre/Program Maintenance. <https://www.health.vic.gov.au/research-and-reporting/bulletins-and-program-management-circulars-pmc>

# For any queries relating to data reporting or program setup please email: MHDReporting@health.vic.gov.au

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