							Pre					From ED to
			Trimmed				admission				Outcome	MH bed
			average	Longstay	28 day		contact -	Post	Seclusions	Multiple	(HoNOS)	within 8
		Bed	length of stay	patient bed	readmiss'n	Pre admission	ongoing	discharge	per 1000 bed	seclusion	compliance	1
Hospital - Area mental health service	Local access	occupancy	(1-35 days)	occupancy	rate	contact	clients	follow up	days	episodes	(inpatient)	hours '
<u>Metro</u>												
Austin Health - North East	81%	89%	9.5	21%	8%	61%	72%	89%	3.9	0%	94%	72%
Alfred Health - Inner South East	84%	91%	11.2	9%	18%	65%	73%	77%	24.6	4%	81%	86%
Eastern Health - Central East	68%	96%	10.8	12%	9%	66%	76%	66%	7.7	1%	51%	77%
Eastern Health - Outer East	79%	94%	11.6	11%	12%	57%	67%	82%	7.6	2%	94%	80%
Eastern Health	75%	94%	11.3	11%	11%	60%	70%	76%	7.7	1%	79%	78%
Melbourne Health - Inner West 4	59%	78%	10.1	3%	15%	51%	59%	92%	14.4	3%	66%	64%
Melbourne Health - Mid West	93%	98%	10.8	14%	7%	64%	70%	80%	32.7	6%	98%	34%
Melbourne Health - North West	60%	90%	10.0	19%	13%	65%	74%	85%	6.3	2%	88%	
Melbourne Health - Northern	88%	92%	11.0	14%	13%	61%	69%	90%	35.4	5%	90%	72%
Melbourne Health, ORYGEN Youth Health *	91%	100%	10.7	33%	18%	77%	88%	84%	23.1	6%	92%	
Melbourne Health *	77%	89%	10.6	12%	12%	60%	68%	87%	24.8	4%	84%	57%
Peninsula Health - Peninsula	85%	96%	11.5	12%	13%	68%	77%	86%	0.8	0%	99%	80%
Southern Health (Casey Hospital) - Dandenong	97%	98%	11.1	18%	9%	51%	59%	96%	20.9	4%	96%	73%
Southern Health (Dandenong Hosp) - Dandenong	86%	73%	11.5	9%	15%	56%	64%	94%	18.7	1%	91%	79%
Southern Health - Middle South	67%	99%	11.6	21%	13%	51%	66%	75%	12.9	3%	91%	72%
Southern Health	84%	86%	11.4	14%	13%	53%	63%	89%	17.5	3%	92%	75%
St Vincent's Health - Inner Urban East	74%	101%	12.8	41%	9%	69%	85%	92%	11.5	3%	96%	67%
Werribee Mercy - South West 4	81%	96%	12.9	19%	7%	68%	78%	62%	18.3	3%	79%	36%
Metro Result *	80%	91%	11.2	16%	12%	61%	70%	83%	16.5	3%	86%	67%
Statewide *	84%	90%	10.6	14%	12%	60%	69%	83%	16.6	3%	85%	71%

## **Mental Health - DRAFT Adult Community Performance Indicators - Metropolitan Services**

	New Case	Case 6 Mth Re-referral Rate (2 Qtr	Average Length of Case (Ended	Average Treatment	Per Cent Community Clients on	Outcome (HoNOS) compliance	Mean HoNOS	Mean Change in Clinically Significant	Proportion cases with significant improvement at case	Outcome (BASIS)	Total Service
Hospital - Area mental health service	Rate	Lag)	in Qtr)	Days	СТО	(community)	at Case Start	item	closure	Compliance	Hours
Metro		- Oi	,	,		, ,,,					
Austin Health - North East	25%	26%	381	14	23%	72%	11.5	1.5	54%	88%	9,765
Alfred Health - Inner South East	29%	32%	203	11	30%	62%	12.9	1.1	45%	86%	12,571
Eastern Health - Central East	35%	37%	144	10	29%	66%	12.6	1.1	35%	81%	6,615
Eastern Health - Outer East	37%	37%	236	12	27%	69%	15.2	1.7	57%	84%	10,207
Eastern Health	36%	37%	206	11	28%	68%	14.4	na	50%	83%	16,822
Melbourne Health - Inner West	20%	36%	114	11	29%	56%	15.3	0.9	35%	84%	9,224
Melbourne Health - Mid West	33%	27%	125	14	34%	86%	14.6	2.0	61%	97%	7,318
Melbourne Health - North West	26%	27%	249	13	20%	75%	12.3	1.2	44%	98%	9,725
Melbourne Health - Northern	27%	28%	163	14	21%	59%	13.0	1.4	44%	78%	9,685
Melbourne Health, ORYGEN Youth Health *	30%	25%	195	13	4%	30%	14.7	0.8	34%	82%	9 5,732
Melbourne Health *	26%	30%	166	13	25%	70%	13.6	na	47%	90%	35,952
Peninsula Health - Peninsula	37%	24%	83	17	28%	88%	11.4	1.3	43%	92%	8,744
Southern Health (Casey Hospital) - Dandenong	40%	42%	70	6	25%	66%	12.9	1.6	48%	95%	9 3,668
Southern Health (Dandenong Hosp) - Dandenong	31%	53%	98	10	32%	65%	14.9	1.5	50%	85%	7,169
Southern Health - Middle South	18%	42%	188	13	23%	69%	13.2	1.8	58%	77%	6,051
Southern Health	28%	47%	107	10	27%	67%	13.9	na	51%	85%	16,887
St Vincent's Health - Inner Urban East	27%	23%	158	13	21%	62%	13.1	1.1	36%	83%	11,505
Werribee Mercy - South West 4	62%	39%	127	14	31%	43%	7.9	1.0	33%	83%	10,711
Metro Result *	32%	35%	165	12	26%	67%	13.1	1.4	47%	87%	122,957
Statewide *	29%	31%	188	12	21%	62%	13.3	1.5	49%	85%	177,518

<sup>1</sup> Includes departure to mental health ward at this, or another hospital.

Population data distributed across other campuses.

<sup>&</sup>lt;sup>4</sup> Includes short stay psychiatric assessment and planning unit (PAPU) beds

<sup>--</sup> Not applicable

<sup>\*</sup> ORYGEN Youth Health results excluded from all Melbourne Health, Metro, and Statewide results, except 'Mean Change in Clinically Significant Item'.

		Bed	Trimmed average length of stay (1-35	Longstay patient bed	28 day readmiss'n	Pre admission	Pre admission contact - ongoing	Post discharge	Seclusions per 1000	Multiple seclusion	Outcome (HoNOS) compliance	From ED to MH bed within 8
Hospital - Area mental health service	Local access	occupancy	days)	occupancy	rate	contact	clients	follow up	bed days	episodes	(inpatient)	hours <sup>1</sup>
Rural												
Ballarat Health - Grampians	94%	73%	10.8	5%	10%	60%	71%	85%	19.5	5%	98%	88%
Bendigo Health - Loddon Southern Mallee	93%	87%	8.9	6%	9%	61%	74%	71%	15.6	1%	77%	80%
Barwon Health - Barwon	99%	88%	9.5	5%	11%	58%	70%	85%	27.3	7%	54%	92%
Goulburn Valley Health - Campaspe	97%	89%	11.4	13%	6%	59%	65%	82%	9.8	0%	91%	88%
Latrobe Regional Hospital - Gippsland	98%	87%	7.5	13%	15%	60%	68%	73%	5.0	0%	94%	84%
Mildura Base Hospital - Northern Mallee	88%	102%	8.7	17%	7%	66%	78%	82%	25.5	5%	68%	100%
South West Healthcare	98%	88%	8.4	19%	17%	76%	83%	97%	11.2	2%	94%	100%
Northeast Vic Mental Health - Hume	96%	73%	8.7	14%	11%	49%	62%	92%	22.9	8%	91%	94%
Rural Result	96%	85%	9.1	10%	11%	60%	71%	82%	16.8	3%	82%	87%
Statewide *	84%	90%	10.6	14%	12%	60%	69%	83%	16.6	3%	85%	71%

## **Mental Health - DRAFT Adult Community Performance Indicators - Rural Services**

									Proportion		
								Mean	cases with		
		Case 6 Mth	Average		Per Cent	Outcome		Change in	significant		
		Re-referral	Length of	Average	Community	(HoNOS)	Mean	Clinically	improvement	Outcome	
	New Case	Rate (2 Qtr	Case (Ended	Treatment	Clients on	compliance	HoNOS at	Significant	at case	(BASIS)	<b>Total Service</b>
Hospital - Area mental health service	Rate	Lag)	in Qtr)	Days	СТО	(community)	Case Start	item	closure	Compliance	Hours
Rural											
Ballarat Health - Grampians	18%	16%	529	9	11%	45%	14.1	2.3	57%	73%	7,306
Bendigo Health - Loddon Southern Mallee	35%	23%	201	12	14%	51%	13.4	1.7	50%	77%	7,436
Barwon Health - Barwon	18%	16%	297	10	16%	35%	9.0	1.0	40%	59%	9,321
Goulburn Valley Health - Campaspe	28%	17%	175	12	15%	62%	16.0	2.4	65%	97%	4,913
Latrobe Regional Hospital - Gippsland	19%	15%	338	10	13%	74%	15.3	1.9	60%	89%	10,800
Mildura Base Hospital - Northern Mallee	26%	13%	185	9	8%	45%	10.4	1.6	48%	71%	2,990
South West Healthcare	22%	12%	224	10	7%	54%	13.2	1.7	47%	79%	5,399
Northeast Vic Mental Health - Hume	29%	26%	246	10	8%	56%	15.4	1.9	64%	83%	6,395
Rural Result	24%	18%	264	10	12%	53%	14.0	1.8	55%	80%	54,561
Statewide *	29%	31%	188	12	21%	62%	13.3	1.5	49%	85%	177,518

<sup>1</sup> Includes departure to mental health ward at this, or another hospital.

Not applicable

<sup>\*</sup> ORYGEN Youth Health results excluded from all Metro and Statewide results, except 'Mean Change in Clinically Significant Item'.

## DRAFT Indicator Definitions for Quarterly Mental Health KPI Reports for 2010-11

Indicators	Description	Comments, including targets
Local access	Percentage of non-statistical non-sameday statewide separations from adult general acute psychiatric inpatient units for residents of the AMHS's catchment (as recorded in the MHA (catchment) field)	<ul> <li>No specified benchmark – reflection of a service's ability to meet the inpatient mental health needs of people within its catchment.</li> </ul>
Bed Occupancy	Total number of occupied bed hours in adult general acute psychiatric inpatient units / total number of funded bed hours for the reporting period.	<ul> <li>Contextual measure.</li> <li>Underpinning data supports the statewide bed availability query system.</li> <li>Calculation uses hours not days.</li> </ul>
Trimmed adult average length of stay (1-35 days)	Average length of stay of overnight stay separations from adult general acute psychiatric inpatient units managed by the mental health service organisation for the reporting period, excluding	Contextual measure.     Shorter lengths of stay can be associated with higher readmission rates.
Long stay patient bed occupancy	Admission hours falling within the reporting period, for "long stay" admissions in adult acute psychiatric inpatient units, as a proportion of funded bed hours for the campus. Excludes the first 35 days (840	Contextual measure.     Can reflect SECU capacity constraints.
28-day Readmision rate	hours) of admission.  Percentage of non-statistical separations from adult acute inpatient units that are followed by a non-statistical readmission to any adult acute inpatient unit within 28 days. Excludes overnight ECT admissions based on ECT task data	<ul> <li>Statewide and Health Service target of 14%.</li> <li>Can reflect quality of care, effectiveness of discharge planning, level of support post discharge, and other factors.</li> <li>Separations are lagged by one month. For example quarter 1 looks at June, July and August separations rather than July, August and</li> </ul>
Seclusions per 1000 occupied bed days	(Total number of seclusion episodes divided by occupied bed days) multiplied by 1000.	Policy emphasis is on reducing use of seclusion where possible.     Defined according to proposed national definition.
Multiple seclusion	Percentage of adult general acute separations with more than one	While an initial need for seclusion can sometimes be unforeseen (see
episodes New Case Rate	seclusion event during the reporting period.  The percentage of Adult cases open at any time during the reporting period, that were started during the reporting period.	above), close management can sometimes avoid repeated episodes.     Adult cases identified by latest episode subcentre outcome measure setting, or client age at end of reporting period.     No specified benchmark set.
Case Re-referral Rate	The percentage of Adult cases closed during the reporting quarter where the client involved has a new case opened within six months of case closure.	<ul> <li>Adult cases identified by latest episode subcentre outcome measure settina. or client age at end of reporting period.</li> <li>No specified benchmark set.</li> </ul>
Average Length of Case (Closed in Qtr)	The average of total days open for all cases that were closed during the reporting period.	<ul> <li>Adult cases identified by latest episode subcentre outcome measure setting, or client age at end of reporting period.</li> <li>Average based on start and end dates of cases with a end date during the reporting period.</li> </ul>
Average Treatment Days (Community)	The number of distinct days with a contact, for each client with an open community case during the reporting quarter, divided by the number of clients with an open community case during the reporting period.	Adult community cases are selected by the OM setting of the subcentre of the last episode for the case during the quarter.  Cases that have been open for less than 91 days in total are excluded.  All contacts are included. Lagged by 1 month.
Per Cent Community Clients on CTO	The percentage of Clients with an open aged community case durnig the reporting period, who were on a CTO (Community Treatment Order) during the reporting quarter.	<ul> <li>Aged community cases are selected by the OM setting of the subcentre of the last episode for the case during the quarter.</li> <li>Client must be on CTO during the open case and the reporting quarter.</li> </ul>
Pre-admission contact	Percentage of non-statistical admissions to adult general acute inpatient unit(s) for which a community ambulatory service contact was recorded in the seven days immediately preceding the day of admission. Transfers from another hospital and out of area	<ul> <li>Statewide target of 60%.</li> <li>Reflects service responsiveness and a planned approach to admission, rather than a crisis response.</li> <li>State rate does not adjust for out-of-area admissions.</li> </ul>
Pre-admission contact - Ongoing Clients	Percentage of non-statistical admissions to adult general acute inpatient unit(s) for which a community ambulatory service contact was recorded in the seven days immediately preceding the day of admission. Transfers from another hospital and out of area admissions are excluded. Clients who were registered for the first	<ul> <li>Reflects service responsiveness and a planned approach to admission, rather than a crisis response.</li> <li>State rate does not adjust for out-of-area admissions.</li> </ul>
Post-discharge follow-up	Percentage of non-statistical non-sameday separations, excluding transfers and left against medical advice/absconded, from adult general acute inpatient unit(s) for which a community ambulatory service contact was recorded in the seven days immediately following that separation.	<ul> <li>Statewide target of 70%.</li> <li>Indicator of effective discharge management.</li> <li>Indictor selects separations 7 days before the start of the period up to 7 days before the end of the period to ensure all contact data is available.</li> </ul>
Valid Outcome (HoNOS) compliance (inpatient and community)	Percentage of adult inpatient and community-based episodes with valid HoNOS collection. (number of valid HoNOS collection events / total number of outcome collection occasions that should be recorded for in-scope service settings for the reporting period).	<ul> <li>National and statewide target of 85%.</li> <li>Commitment to adoption of outcome measurement part of National Mental Health Strategy, and National Action Plan.</li> <li>For 2009-10 HoNOS ratings must be valid (less than 2 items rated as 9).</li> </ul>
Mean HoNOS at Case Start	The average of HoNOS collected on case commencement. (Average HoNOS for adult cases / total number of completed cases for in-scope service settings for the reporting period).	Contextual measure of symptom severity at case commencement .
Mean Change in Clinically Significant item	The average number HoNOS items rate 2,3,4 rating on case start and minus the average number HoNOS items rate 2,3,4 rating on case end	<ul> <li>Alternative measure of symptom severity reduction based only on split of each HoNOS item into clinically significant (2,3,4) or not clinically significant (0,1), rather than the sum of each scaled measure.</li> <li>Method aims to focus more on clinically significant change as opposed to</li> </ul>
	The percentage of completed cases with a significant positive change calculation on HoNOS collected on case start and case end. (Total number of cases with a Significant change score >.5 / The total number of completed case in-scope service setting for the reporting period)	Calculation for significant positive change score utilises Nation KPI methodology     Measure of symptom severity reduction.
Outcome (BASIS) Compliance	Percentage of episodes with a Basis collection either offered or recorded as not offered. (number of Basis offered or not offered / total number of Basis collection occasions that should be recorded	Contextual measure.     This measure can demonstrate services that actively seek client feedback and have systems in place to ensure that at a minimum the consumer measures are considered for collection.
ED presentations departing to a MH bed within 8 hours	for in-scope service settings for the reporting period).  Percentage of emergency department presentations departing to a mental health bed (at this or another hospital) within 8 hours of arrival.	<ul> <li>Statewide target of 80%.</li> <li>Mental health bed access indicator, although affected by local admission practices, such as direct admissions.</li> <li>For 2009-10, activity in all non-specialty EDs is included. EDs without onsite adult acute MH beds are mapped to their responsible AMHS.</li> </ul>
Total Service Hours	Total service hours provided during the reporting quarter.	Contextual measure.     Service hours includes unregistered contacts.