## Mental Health - Adult Inpatient Performance Indicators - Metropolitan Services - Quarter 4 2012-13

11 July 2013

Hospital - Area mental health service	Adult beds per 10,000 adult population	Local access	Bed occupancy	Trimmed average length of stay (1-35 days)	Longstay patient bed occupancy	28 day readmiss'n rate	Pre admission contact	Pre admission contact - ongoing clients	Post discharge follow up	Seclusions per 1000 bed days	Multiple seclusion episodes	Outcome (HoNOS) compliance (inpatient)	From ED to MH bed within 8 hours <sup>1</sup>
Austin Health - North East	1.52	82%	77%	10.7	8%	15%	67%	95%	91%	4.5	1%	95%	59%
Alfred Health - Inner South East	2.62	77%	100%	13.2	19%	13%	67%	90%	89%	14.4	4%	76%	73%
Eastern Health - Central East	1.08	68%	89%	9.9	13%	23%	60%	91%	79%	29.6	4%	60%	76%
Eastern Health - Outer East	1.64	80%	90%	10.0	2%	16%	56%	82%	84%	2.0	0%	91%	76%
Eastern Health	1.40	77%	89%	10.0	6%	18%	57%	85%	83%	11.1	1%	81%	76%
Melbourne Health - Inner West 4	2.02 <sup>5</sup>	63%	77%	9.4	5%	9%	51%	67%	87%	9.3	1%	55%	65%
Melbourne Health - Mid West	1.06 <sup>5</sup>	94%	69%	8.9	6%	18%	56%	91%	92%	3.2	0%	99%	48%
Melbourne Health - North West	1.43 <sup>5,6</sup>	72%	88%	10.2	3%	20%	70%	90%	80%	13.5	4%	79%	
Melbourne Health - Northern	2.49 <sup>5</sup>	86%	91%	11.1	12%	15%	55%	82%	84%	11.1	2%	78%	72%
Melbourne Health, ORYGEN Youth Health *	5	88%	88%	8.7	1%	na	60%	66%	79%	13.2	1%	80%	
Melbourne Health *	1.71	79%	83%	10.1	8%	15%	58%	83%	86%	9.9	2%	76%	61%
Peninsula Health - Peninsula	1.67	88%	94%	9.6	9%	14%	71%	95%	89%	0.8	0%	96%	76%
Southern Health (Casey Hospital) - Dandenong		96%	98%	10.0	13%	12%	52%	90%	94%	15.7	2%	97%	52%
Southern Health (Dandenong Hosp) - Dandenong	2.08	87%	74%	10.8	9%	19%	61%	88%	94%	11.7	2%	90%	77%
Southern Health - Middle South	1.45	61%	97%	10.8	11%	6%	53%	95%	82%	11.3	1%	96%	61%
Southern Health	1.85	81%	86%	10.6	10%	13%	56%	90%	90%	12.7	2%	93%	65%
St Vincent's Health - Inner Urban East	2.25	73%	91%	11.4	30%	12%	69%	89%	76%	11.2	1%	79%	61%
Werribee Mercy - South West 4	1.55 <sup>5</sup>	81%	98%	12.5	13%	15%	58%	68%	77%	13.9	6%	74%	44%
Metro Result *	1.76	79%	89%	10.6	12%	15%	60%	86%	85%	10.9	2%	83%	65%
Statewide *	1.73	83%	87%	10.2	11%	14%	59%	86%	85%	12.4	2%	84%	69%

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

Hospital - Area mental health service	New Case Rate	Case 6 Mth Re-referral Rate (2 Qtr Lag)	Average Length of Case (Ended in Qtr)	Average Treatment Days	Per Cent Community Clients on CTO	Outcome (HoNOS) compliance (community)	Mean HoNOS at Case Start	Mean Change in Clinically Significant item	Proportion cases with significant improvement at case closure	Outcome (BASIS) Compliance	Total Service Hours
Metro		203)	(0.1)	Dujo	0.0	(connunty)	at out o blan		0.000.0	oompilailoo	
Austin Health - North East	27%	34%	204	12	21%	81%	10.8	1.8	51%	88%	7,545
Alfred Health - Inner South East	28%	32%	236	12	29%	46%	14.0	1.2	45%	42%	10,800
Eastern Health - Central East	32%	38%	192	11	35%	59%	14.9	1.0	34%	58%	5,958
Eastern Health - Outer East	39%	34%	131	10	28%	63%	16.9	1.7	55%	70%	10,452
Eastern Health	36%	35%	152	10	31%	61%	16.4	na	50%	65%	16,410
Melbourne Health - Inner West	21%	32%	115	11	31%	27%	15.1	1.3	39%	34%	8,643
Melbourne Health - Mid West	36%	36%	130	13	30%	85%	12.3	1.7	57%	95%	7,733
Melbourne Health - North West	26%	26%	263	12	23%	75%	11.9	1.3	43%	90%	7,445
Melbourne Health - Northern	33%	29%	157	11	24%	46%	11.8	1.1	39%	42%	6,641
Melbourne Health, ORYGEN Youth Health *	30%	25%	215	9	6%	25%	14.7	1.6	46%	25%	5,515
Melbourne Health *	28%	31%	163	11	26%	60%	12.5	na	45%	67%	30,464
Peninsula Health - Peninsula	41%	31%	98	15	25%	86%	11.5	1.4	43%	59%	9,185
Southern Health (Casey Hospital) - Dandenong	48%	33%	69	11	30%	63%	12.5	1.4	45%	46%	4,493
Southern Health (Dandenong Hosp) - Dandenong	34%	42%	149	11	28%	70%	14.8	1.5	45%	81%	8,557
Southern Health - Middle South	17%	37%	226	13	26%	78%	14.3	2.0	62%	82%	6,178
Southern Health	30%	37%	134	12	28%	70%	13.9	na	48%	69%	19,227
St Vincent's Health - Inner Urban East	29%	25%	238	14	18%	62%	12.5	0.9	30%	76%	11,456
Werribee Mercy - South West 4	52%	40%	62	10	32%	47%	9.3	1.0	33%	43%	9,697
Metro Result *	33%	34%	146	12	27%	63%	13.2	1.4	46%	64%	114,784
Statewide *	30%	30%	171	11	21%	60%	13.4	1.5	48%	63%	166,743

Includes departure to mental health ward at this, or another hospital.

<sup>6</sup> 3 beds at North West and Northern AMHSs reverted back to Melbourne Clinic .

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

 $^5\,$  16 beds at ORYGEN allocated across NWMH AMHSs and Werribee Mercy (SWAMHS) in proportion to separations.

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

## Mental Health - Adult Inpatient Performance Indicators - Rural Services - Quarter 4 2012-13

11 July 2013

Hospital - Area mental health service	Adult beds pe 10,000 adult population		Bed	Trimmed average length of stay (1-35 days)	Longstay patient bed occupancy	28 day readmiss'n rate	Pre admission contact	Pre admission contact - ongoing clients	Post discharge follow up	Seclusions per 1000 bed days	Multiple seclusion episodes	Outcome (HoNOS) compliance (inpatient)	From ED to MH bed within 8 hours <sup>1</sup>
Rural				, ,						,	·		
Ballarat Health - Grampians	1.71	92%	52%	9.1	2%	6%	56%	95%	90%	11.0	1%	96%	90%
Bendigo Health - Loddon Southern Mallee	1.52	95%	97%	11.5	7%	6%	63%	87%	88%	34.1	3%	80%	61%
Barwon Health - Barwon	1.49	96%	84%	7.8	13%	15%	57%	89%	80%	12.7	1%	90%	91%
Goulburn Valley Health	1.73	95%	75%	9.8	11%	13%	58%	95%	88%	30.2	3%	85%	92%
Latrobe Regional Hospital - Gippsland	1.56	98%	94%	9.5	7%	16%	60%	89%	73%	10.8	2%	97%	81%
Mildura Base Hospital - Northern Mallee	2.89	87%	79%	5.8	6%	10%	45%	82%	88%	23.8	2%	67%	91%
South West Healthcare	1.58	97%	91%	9.6	14%	16%	77%	88%	95%	8.5	2%	95%	92%
Northeast & Border Mental Health Service	1.87	94%	81%	10.2	14%	8%	51%	70%	83%	9.0	1%	83%	86%
Rural Result	1.66	95%	82%	9.1	9%	11%	58%	87%	83%	17.9	2%	87%	82%
Statewide *	1.73	83%	87%	10.2	11%	14%	59%	86%	85%	12.4	2%	84%	69%

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

Hospital - Area mental health service	New Case Rate	Case 6 Mth Re-referral Rate (2 Qtr Lag)	Average Length of Case (Ended in Qtr)	Average Treatment Days	Per Cent Community Clients on CTO	Outcome (HoNOS) compliance (community)	Mean HoNOS at Case Start	Mean Change in Clinically Significant item	Proportion cases with significant improvement at case closure	Outcome (BASIS) Compliance	Total Service Hours
Rural	riato	Lag	in duy	Dayo	010	(commanity)	oudo otan	lioni	0,000,0	Compilario	Houro
Ballarat Health - Grampians	22%	15%	388	12	6%	41%	13.3	1.6	54%	42%	8,427
Bendigo Health - Loddon Southern Mallee	33%	24%	135	11	13%	54%	13.1	1.6	52%	56%	6,891
Barwon Health - Barwon	18%	16%	358	11	19%	61%	10.8	1.5	46%	64%	7,690
Goulburn Valley Health	31%	19%	217	15	16%	41%	12.6	2.2	56%	54%	3,645
Latrobe Regional Hospital - Gippsland	17%	25%	338	10	13%	76%	16.2	2.1	64%	82%	11,016
Mildura Base Hospital - Northern Mallee	28%	15%	149	9	7%	51%	11.5	2.1	69%	60%	2,651
South West Healthcare	20%	8%	328	9	8%	55%	16.3	2.7	74%	56%	4,555
Northeast & Border Mental Health Service	26%	14%	203	9	10%	42%	15.4	1.9	58%	52%	7,085
Rural Result	23%	18%	251	11	12%	55%	13.9	1.9	58%	59%	51,959
Statewide *	30%	30%	171	11	21%	60%	13.4	1.5	48%	63%	166,743

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

Indicators	Indicator Definitions for Quarterly Mental Description	Comments, including targets						
Adult beds per 10,000 adult population	Number of funded adult general acute inpatient beds per 10,000 population aged 16-64 in catchment of the area mental health service. Specialist units psychiatric are excluded (Veterans, Koori),	No specified benchmark - bed numbers to be expanded in line with Government policy announcements.						
	and beds at Orygen and Melbourne Clinic allocated to relevant AMHS.	<ul> <li>Included as a contextual item.</li> <li>Population figures are Estimated Resident Population (ERP) figures for July 2011.</li> </ul>						
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) who separated from that AMHS's inpatient unit(s).	<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> </ul>						
Trimment and the surgery		Calculation uses hours not days.						
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 separations with length of stay greater than 35 days.	<ul><li>Contextual measure.</li><li>Shorter lengths of stay can be associated with higher readmission rate</li></ul>						
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 hours) of admission.	Contextual measure.     Can reflect SECU capacity constraints.						
28-day Readmission rate	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 Separations are lagged by one month. For example quarter 1 looks at June, July and August separations rather than July, August and September separations.</li> </ul>						
Seclusions per 1000 occupied bed days	(Total number of seclusion episodes divided by occupied bed days) multiplied by 1000.	<ul><li>Policy emphasis is on reducing use of seclusion where possible.</li><li>Defined according to proposed national definition.</li></ul>						
Multiple seclusion	Percentage of adult general acute separations with more than one	<ul> <li>Target is less than 20</li> <li>While an initial need for seclusion can sometimes be unforeseen (see</li> </ul>						
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.	<ul> <li>Adult cases identified by latest episode subcentre outcome measure</li> <li>No specified benchmark set.</li> </ul>						
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 aae at end of reborting 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</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.	<ul> <li>Adult community cases are selected by the OM setting of the subcentr of the last episode for the case during the quarter.</li> <li>Cases that have been open for less than 91 days in total are excluded</li> <li>All contacts are included. Lagged by 1 month.</li> </ul>						
Per Cent Community Clients on CTO	The percentage of Clients with an open aged community case during 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 subcentr 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 admissions are excluded.	<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 did not have an open community episode within 7 days prior to admission are excluded.	<ul> <li>Reflects service responsiveness and a planned approach to admission</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	Statewide target of 75%.     Indicator of effective discharge management.						
	following that separation. Percentage of adult inpatient and community-based episodes with	<ul> <li>Indictor selects separations 7 days before the start of the period up to days before the end of the period to ensure all contact data is available</li> <li>National and statewide target of 85%.</li> </ul>						
compliance (inpatient and community)	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).	Commitment to adoption of outcome measurement part of National Mental Health Strategy, and National Action Plan.						
		• For 2009-10 HoNOS ratings must be valid (less than 2 items rated as 9						
Mean HoNOS at Case Start	The average of HoNOS collected on case commencement. (Average HoNOS for adult cases / total number of completed cases	Contextual measure of symptom severity at case commencement .						
Mean Change in Clinically Significant item	for in-scope service settings for the reporting period). 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 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 overall change.</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 reacting conject.)	<ul> <li>Calculation for significant positive change score utilises Nation KPI methodology</li> <li>Measure of symptom severity reduction.</li> </ul>						
Outcome (BASIS) Compliance	reporting period) 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 for in-scope service settings for the reporting period).	<ul> <li>Contextual measure.</li> <li>This measure can demonstrate services that actively seek client feedb and have systems in place to ensure that at a minimum the consumer measure or experience for certification.</li> </ul>						
ED presentations departing to a MH bed within 8 hours	Percentage of emergency department presentations departing to a mental health bed (at this or another hospital) within 8 hours of arrival.	<ul> <li>measures are considered for collection.</li> <li>Statewide target of 80%.</li> <li>Mental health bed access indicator, although affected by local admissi practices, such as direct admissions.</li> <li>For 2009-10, activity in all non-specialty EDs is included. EDs without or its activity activity to add acc areased to their program.</li> </ul>						
Total Service Hours	Total service hours provided during the reporting quarter.	site adult acute MH beds are mapped to their responsible AMHS. • Contextual measure. • Service hours includes type 'B' unregistered and type 'C' community contacts.						