Mental Health - Adult Inpatient Performance Indicators - Metropolitan Services - Quarter 2 2012-13

Hospital - Area mental health service	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 [1]
Metro												
Austin Health - North East	75%	78%	10.8	8%	7%	59%	79%	95%	2.9	0%	94%	71%
Alfred Health - Inner South East	77%	99%	11.9	13%	19%	62%	88%	74%	16.0	4%	74%	75%
Eastern Health - Central East	69%	92%	9.0	4%	22%	58%	85%	75%	15.2	2%	56%	66%
Eastern Health - Outer East	76%	94%	10.2	7%	19%	53%	81%	79%	7.6	0%	88%	70%
Eastern Health	74%	94%	9.8	6%	20%	55%	82%	78%	10.1	1%	77%	68%
Melbourne Health - Inner West [4]	62%	76%	8.1	6%	17%	57%	83%	74%	21.5	2%	60%	53%
Melbourne Health - Mid West	96%	93%	9.4	5%	10%	61%	88%	83%	37.8	3%	97%	57%
Melbourne Health - North West	75%	92%	11.6	5%	10%	72%	92%	81%	16.1	3%	73%	--
Melbourne Health - Northern	87%	90%	12.4	8%	14%	52%	68%	79%	10.6	2%	86%	76%
Melbourne Health, ORYGEN Youth Health *	92%	90%	10.4	4%	na	59%	76%	83%	15.8	3%	39%	--
Melbourne Health *	81%	88%	10.5	7%	13%	59%	80%	79%	19.5	2%	80%	63%
Peninsula Health - Peninsula	89%	97%	10.0	8%	9%	64%	89%	86%	0.8	0%	95%	78%
Southern Health (Casey Hospital) - Dandenong	95%	97%	9.2	13%	11%	58%	95%	92%	1.8	0%	95%	55%
Southern Health (Dandenong Hosp) - Dandenong	85%	73%	9.9	12%	17%	59%	84%	97%	9.8	1%	89%	79%
Southern Health - Middle South	53%	97%	11.5	10%	17%	66%	91%	87%	16.8	4%	90%	69%
Southern Health	78%	86%	10.2	12%	15%	60%	90%	93%	9.7	2%	91%	69%
St Vincent's Health - Inner Urban East	73%	90%	12.5	22%	19%	69%	86%	81%	10.5	3%	62%	70%
Werribee Mercy - South West [4]	83%	99%	15.6	19%	13%	78%	86%	77%	21.6	7%	72%	28%
Metro Result *	79%	91%	10.7	11%	15%	61%	84%	82%	13.2	2%	81%	66%
Statewide *	83%	89%	10.4	11%	14%	58%	84%	83%	13.3	2%	80%	68%

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											
Austin Health - North East	26%	27%	234	14	20%	74%	11.1	1.3	48%	79%	9,009
Alfred Health - Inner South East	30%	35%	239	11	27%	27%	12.8	1.1	41%	42%	10,537
Eastern Health - Central East	41%	39%	90	10	31%	51%	14.5	1.1	39%	50%	5,404
Eastern Health - Outer East	40%	37%	101	8	27%	66%	17.1	1.7	54%	68%	8,439
Eastern Health	40%	37%	97	9	29%	60%	16.4	na	50%	61%	13,843
Melbourne Health - Inner West	18%	37%	147	10	31%	30%	15.1	1.0	32%	32%	7,815
Melbourne Health - Mid West	37%	35%	150	13	31%	79%	14.0	1.8	61%	88%	7,299
Melbourne Health - North West	27%	31%	168	12	23%	74%	12.0	1.3	45%	91%	8,935
Melbourne Health - Northern	29%	29%	170	12	24%	49%	13.6	1.6	49%	45%	7,499
Melbourne Health, ORYGEN Youth Health *	28%	20%	238	8	6%	28%	13.9	0.7	32%	30%	4,350
Melbourne Health *	27%	33%	159	12	27%	60%	13.5	na	49%	67%	31,547
Peninsula Health - Peninsula	42%	32%	90	15	26%	87%	10.9	1.2	43%	71%	9,015
Southern Health (Casey Hospital) - Dandenong	40%	31%	131	10	32%	64%	12.6	1.7	54%	52%	4,252
Southern Health (Dandenong Hosp) - Dandenong	32%	52%	131	11	29%	65%	13.9	1.4	43%	75%	7,101
Southern Health - Middle South	18%	36%	232	12	27%	72%	14.6	2.3	64%	78%	6,241
Southern Health	28%	42%	155	11	29%	67%	13.7	na	52%	69%	17,594
St Vincent's Health - Inner Urban East	31%	33%	166	12	20%	55%	12.0	0.6	24%	65%	9,863
Werribee Mercy - South West [4]	54%	42%	60	10	33%	44%	11.9	1.8	51%	46%	8,849
Metro Result *	33%	36%	138	11	27%	60%	13.4	1.5	48%	63%	110,258
Statewide *	30%	32%	158	11	22%	56%	13.4	1.5	48%	61%	162,444

[1] Includes departure to mental health ward at this, or another hospital.   -- Not applicable

[4] Includes short stay psychiatric assessment and planning unit (PAPU) beds   na - not yet available at health service level

* 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 2 2012-13

Hospital - Area mental health service	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[1]
Rural												
Ballarat Health - Grampians	94%	65%	11.5	5%	8%	63%	87%	97%	5.1	1%	91%	86%
Bendigo Health - Loddon Southern Mallee	87%	94%	10.1	9%	11%	61%	82%	89%	15.9	4%	64%	54%
Barwon Health - Barwon	99%	86%	8.4	16%	14%	51%	88%	81%	25.8	4%	69%	87%
Goulburn Valley Health	94%	85%	9.5	7%	17%	65%	90%	82%	7.7	1%	89%	78%
Latrobe Regional Hospital - Gippsland	97%	95%	9.0	8%	12%	55%	89%	72%	7.8	1%	81%	72%
Mildura Base Hospital - Northern Mallee	83%	81%	7.6	9%	8%	57%	81%	86%	24.3	3%	50%	100%
South West Healthcare	97%	90%	9.9	17%	11%	67%	84%	92%	10.9	1%	92%	93%
Northeast & Border Mental Health Service	99%	88%	9.1	14%	15%	46%	75%	91%	10.7	3%	93%	90%
Rural Result	**94%**	**86%**	**9.4**	**10%**	**12%**	**57%**	**85%**	**84%**	**13.8**	**2%**	**76%**	**74%**
Statewide *	**83%**	**89%**	**10.4**	**11%**	**14%**	**58%**	**84%**	**83%**	**13.3**	**2%**	**80%**	**68%**

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											
Ballarat Health - Grampians	23%	22%	295	11	6%	35%	13.1	1.7	50%	34%	8,140
Bendigo Health - Loddon Southern Mallee	30%	20%	169	10	14%	48%	12.7	1.5	50%	48%	6,581
Barwon Health - Barwon	14%	15%	316	10	19%	37%	9.8	1.2	44%	43%	7,932
Goulburn Valley Health	30%	13%	158	14	15%	49%	15.1	2.0	57%	63%	3,918
Latrobe Regional Hospital - Gippsland	21%	21%	264	10	14%	69%	15.4	1.5	45%	84%	11,140
Mildura Base Hospital - Northern Mallee	25%	15%	205	10	6%	50%	9.8	1.3	52%	65%	2,562
South West Healthcare	19%	12%	221	9	7%	53%	12.9	1.9	52%	58%	5,368
Northeast & Border Mental Health Service	27%	22%	189	9	11%	40%	14.9	2.1	64%	57%	6,544
Rural Result	**23%**	**18%**	**223**	**10**	**12%**	**49%**	**13.4**	**1.7**	**51%**	**56%**	**52,185**
Statewide *	**30%**	**32%**	**158**	**11**	**22%**	**56%**	**13.4**	**1.5**	**48%**	**61%**	**162,444**

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

Indicator Definitions for Quarterly Mental Health KPI Reports for 2012-13

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) who separated from that AMHS's inpatient unit(s)	● No specified benchmark – reflection of a service's ability to meet the inpatient mental health needs of people within its catchment.
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.	● Contextual measure. ● Underpinning data supports the statewide bed availability query system. ● 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.	● 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 hours) of admission.	● Contextual measure. ● Can reflect SECU capacity constraints.
28-day Readmision 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	● Statewide and Health Service target of 14%. ● Can reflect quality of care, effectiveness of discharge planning, level of support post discharge, and other factors. ● Separations are lagged by one month. For example quarter 1 looks at June, July and August separations rather than July, August and September separations.
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. ● Target is less than 20
Multiple seclusion episodes	Percentage of adult general acute separations with more than one seclusion event during the reporting period.	● While an initial need for seclusion can sometimes be unforseen (see above), close management can sometimes avoid repeated episodes.
New Case Rate	The percentage of Adult cases open at any time during the reporting period, that were started during the reporting period.	● 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.	● Adult cases identified by latest episode subcentre outcome measure setting, or client age at end of reporting period. ● No specified benchmark set.
Average Length of Case (Closed in Qtr)	The average of total days open for all cases that were closed during the reporting period.	● Adult cases identified by latest episode subcentre outcome measure setting, or client age at end of reporting period. ● Average based on start and end dates of cases with a end date during the reporting period.
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 reporting 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.	● Aged community cases are selected by the OM setting of the subcentre of the last episode for the case during the quarter. ● Client must be on CTO during the open case and the reporting quarter.
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.	● Statewide target of 60%. ● Reflects service responsiveness and a planned approach to admission, rather than a crisis response. ● State rate does not adjust for out-of-area admissions.
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.	● Reflects service responsiveness and a planned approach to admission, rather than a crisis response. ● State rate does not adjust for out-of-area admissions.
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.	● Statewide target of 75%. ● Indicator of effective discharge management. ● 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.
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).	● National and statewide target of 85%. ● 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 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	● 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. Method aims to focus more on clinically significant change as opposed to overall change.
% Proportion cases with significant improvement at case closure	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 for in-scope service settings for the reporting period).	● 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	Percentage of emergency department presentations departing to a mental health bed (at this or another hospital) within 8 hours of arrival.	● Statewide target of 80%. ● Mental health bed access indicator, although affected by local admission practices, such as direct admissions. ● For 2009-10, activity in all non-specialty EDs is included. EDs without on-site adult acute MH beds are mapped to their responsible AMHS.
Total Service Hours	Total service hours provided during the reporting quarter.	● Contextual measure. ● Service hours includes type 'B' unregistered and type 'C' community contacts.

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Current at 11 January 2013