

Recording Electroconvulsive therapy (ECT) in CMI/ODS

health

Program management circular

Key Message

Effective from **1 October 2008**, clients receiving ECT at a public area mental health service must have an ECT task assigned by the campus providing the treatment.

Purpose

To clarify the reporting requirements and improve the consistency and quality of data submitted to CMI/ODS in relation to ECT.

Background

CMI/ODS is the Victorian public mental health client information management system and comprises:

- Client Management Interface (CMI). The CMI is the local client information system used by each public mental health service
- Operational Data Store (ODS). The ODS manages a set of select data items from each CMI and is used to:
 - allocate a unique (mental health) registration number for each client, known as the statewide unit record (UR) number
 - share select client-level data between Victorian public area mental health services (AMHS) to support continuity of treatment and care
 - ensure the legal basis for providing treatment is evident to all public mental health service providers where a client may be unable or unwilling to consent to treatment
 - meet the various reporting requirements of the Department of Health
 - support the statutory functions of the Chief Psychiatrist and the Mental Health Review Board.

Recording of ECT in CMI/ODS

Effective **1 October 2008**, all clients receiving ECT at a licensed public area mental health service must have a task allocated for each ECT procedure provided. The following items are required:

- Task – 'ECT Procedure'
- Subcentre – 'Same-day ECT suite' (or equivalent)
- Program – optional
- Responsible HCP – name of doctor administering the ECT or 'Not Assigned' if only scheduling task
- Due date – scheduled date for the ECT procedure
- Completed date – actual date of the procedure

The following is applicable for each treatment setting:

Ambulatory: Services are not required to record an admitted episode on CMI/ODS for a client in an open ambulatory episode. The task 'ECT Procedure' is required to be entered by the campus providing the treatment.

About management circulars

The information provided in this circular is intended as general information and not as legal advice. Mental health service management should ensure that policies and procedures are developed and implemented to enable staff to collect and use health information in accordance with relevant legislation.

Acknowledgements

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Community residential: In a multi-day episode of care, there is no requirement to record treatment leave for each ECT event. The task 'ECT Procedure' is required to be entered by the campus providing the treatment.

Inpatient:

- **Same-day episode of care**

Admitted episodes for same day ECT are no longer required to be recorded on the CMI/ODS. The task 'ECT Procedure' is required to be entered by the campus providing the treatment.

- **Multi-day episode of care**

There is no requirement to record ward or program classification transfers for clients in a multi-day episode of care. The task 'ECT Procedure' is required to be entered by the campus providing the treatment.

Further information

For information in relation to statutory ECT reporting

www.health.vic.gov.au/mentalhealth/ect/ect.pdf

For details about VAED funding for ECT and reporting changes (Hospital circular 20/2008)

www.health.vic.gov.au/hospitalcirculars/circ08/index.htm