

Mental Health - Key Performance Indicators - Adult

Quarter 1 2007-08

12-Mar-08

| 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 | Seclusions per 1000 bed days | Multiple seclusion episodes | Pre admission contact | Post discharge follow up | Outcome (HoNOS) compliance (inpatient) | Outcome (HoNOS) compliance (community) | Community cases with 8 hrs or more contact | From ED to MH bed within 8 hours ¹ |
|--|--|-----------------|-----------------|--|--------------------------------|------------------------|------------------------------|-----------------------------|-----------------------|--------------------------|--|--|--|---|
| Metro | | | | | | | | | | | | | | |
| Austin Health - North East | 1.23 | 86% | 95% | 11.9 | 18% | 9% | 35.9 | 7% | 67% | 89% | 53% | 17% | 29% | 60% |
| Bayside Health - Inner South East | 2.76 | 88% | 89% | 12.3 | 13% | 12% | 27.2 | 7% | 61% | 67% | 84% | 46% | 45% | 67% |
| Eastern Health - Central East | 1.11 | 72% | 92% | 9.9 | 11% | 17% | 61.3 | 9% | 49% | 60% | 54% | 27% | 37% | 64% |
| Eastern Health - Outer East | 1.34 ² | 89% | 98% | 9.6 | 15% | 17% | 19.5 | 5% | 55% | 54% | 17% | 32% | 32% | 62% |
| Melbourne Health - Inner West ³ | 2.26 ⁴ | 75% | 83% | 11.4 | 9% | 12% | 45.1 | 8% | 62% | 59% | 78% | 6% | 25% | 66% |
| Melbourne Health - Mid West | 1.53 ⁴ | 97% | 83% | 8.9 | 18% | 17% | 36.8 | 7% | 67% | 78% | 89% | 54% | 41% | 61% |
| Melbourne Health - North West | 1.68 ^{4,5} | 83% | 102% | 8.8 | 19% | 17% | 42.4 | 6% | 67% | 63% | 78% | 44% | 23% | .. ⁷ |
| Melbourne Health - Northern | 1.49 ⁵ | 92% | 90% | 10.6 | 7% | 10% | 38.0 | 6% | 59% | 67% | 87% | 62% | 35% | 67% |
| Melbourne Health, ORYGEN Youth Health | .. ⁴ | 94% | 76% | 8.0 | 9% | 33% | 29.5 | 3% | 61% | 73% | 75% | 16% | 44% | .. ⁷ |
| Peninsula Health - Peninsula | 1.74 | 84% | 84% | 9.6 | 9% | 10% | 7.5 | 1% | 58% | 69% | 37% | 42% | 51% | 78% |
| Southern Health (Casey Hospital) - Dandenong | incl. below | 95% | 94% | 10.6 | 17% | 14% | 29.5 | 9% | 46% | 49% | 90% | 68% | 33% | 80% |
| Southern Health (Dandenong Hosp) - Dandenong | 2.05 ² | 95% | 93% | 11.4 | 15% | 15% | 14.7 | 3% | 51% | 57% | 26% | 43% | 33% | 86% |
| Southern Health - Middle South | 1.53 | 81% | 91% | 10.5 | 10% | 16% | 19.5 | 4% | 55% | 63% | 73% | 38% | 40% | 76% |
| St Vincent's Health - Inner Urban East | 2.34 | 75% | 88% | 12.0 | 23% | 16% | 16.2 | 5% | 71% | 74% | 53% | 41% | 41% | 77% |
| Werribee Mercy - South West | 1.65 | 93% | 95% | 13.1 | 23% | 9% | 29.6 | 11% | 72% | 81% | 74% | 25% | 38% | .. ⁶ |
| Average Metro | 1.74 | 87% | 90% | 10.5 | 15% | 15% | 28.3 | 6% | 59% | 65% | 62% | 38% | 36% | 69% |
| Rural | | | | | | | | | | | | | | |
| Ballarat Health - Grampians | 1.76 | 93% | 76% | 9.9 | 6% | 10% | 14.1 | 3% | 55% | 87% | 34% | 23% | 29% | 75% |
| Bendigo Health - Loddon Southern Mallee | 1.55 | 95% | 78% | 10.2 | 2% | 8% | 7.7 | 0% | 65% | 71% | 30% | 40% | 28% | 78% |
| Barwon Health - Barwon | 1.21 | 95% | 99% | 8.4 | 22% | 8% | 71.9 | 6% | 57% | 78% | .. ⁶ | .. ⁶ | 20% | 84% |
| Goulburn Valley Health - Campaspe | 1.78 | 94% | 91% | 10.5 | 16% | 14% | 6.8 | 2% | 67% | 90% | 62% | 41% | 42% | 100% |
| Latrobe Regional Hospital - Gippsland | 1.62 | 99% | 90% | 8.9 | 9% | 10% | 14.7 | 3% | 63% | 76% | 18% | 24% | 34% | 77% |
| Mildura Base Hospital - Northern Mallee | 2.88 | 86% | 79% | 6.3 | 10% | 16% | 12.2 | 1% | 54% | 81% | 44% | 24% | 22% | 100% |
| South West Healthcare - Glenelg | 1.58 | 91% | 63% | 7.9 | 1% | 13% | 1.1 | 0% | 72% | 91% | 84% | 62% | 19% | 80% |
| Northeast Health Wangaratta - Hume | 1.88 | 98% | 76% | 10.2 | 9% | 14% | 23.0 | 4% | 60% | 74% | 94% | 25% | 13% | .. ⁶ |
| Wodonga Regional Health - Hume | .. ⁷ | .. ⁷ | .. ⁷ | .. ⁷ | .. ⁷ | .. ⁷ | .. ⁷ | .. ⁷ | .. ⁷ | .. ⁷ | .. ⁷ | 6% | 51% | .. ⁷ |
| Average Rural | 1.64 | 94% | 83% | 9.1 | 9% | 11% | 20.8 | 3% | 61% | 79% | 37% | 30% | 27% | 80% |
| Statewide | 1.71 | 89% | 89% | 10.1 | 13% | 14% | 26.5 | 5% | 60% | 69% | 56% | 36% | 33% | 71% |

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

² 10 beds set aside at Dandenong Hospital for Maroondah Hospital included in Maroondah figures

³ Includes short stay psychiatric assessment and planning unit (PAPU) beds

⁴ 16 beds at ORYGEN Youth Health allocated across NWMH AMHSs and Werribee Mercy (SWAMHS) in proportion to separations

⁵ 3 beds at Melbourne Clinic allocated to North West and Northern AMHSs

⁶ Data unavailable or incomplete

⁷ Not applicable

Indicator Definitions for Quarterly Mental Health KPI Reports for 2007-08

| Indicators | Description | Comments, including targets |
|---|---|---|
| Adult beds per 10,000 adult population | Number of available 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), and beds at Orygen, Melbourne Clinic and Maroondah beds at Dandenong allocated to relevant AMHS. | <ul style="list-style-type: none"> ● No specified benchmark - bed numbers to be expanded in line with Government policy announcements. ● Included as a contextual item |
| 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 style="list-style-type: none"> ● No specified benchmark –reflection of a service's ability to meet the inpatient mental health needs of people within its catchment ● Austin Veterans subcentre excluded |
| Bed Occupancy | Total number of occupied bed hours in adult general acute psychiatric inpatient units / total number of available bed hours for the reporting period. | <ul style="list-style-type: none"> ● 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 non-statistical 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 style="list-style-type: none"> ● 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 available bed hours for the campus. Excludes the first 35 days (840 hours) of admission. | <ul style="list-style-type: none"> ● Contextual measure ● Can reflect SECU capacity constraints |
| 28-day Readmiss'n rate | Percentage of non-statistical separations from the adult acute inpatient unit(s) occurring in the reference period that are followed by a readmission to the same or any other adult acute inpatient unit with 28 days | <ul style="list-style-type: none"> ● Statewide and Health Service target of 14% ● Can reflect quality of care, effectiveness of discharge planning, level of support post discharge, and other factors |
| Seclusions per 1000 occupied bed days * | (Total number of seclusion episodes divided by occupied bed days) multiplied by 1000. | <ul style="list-style-type: none"> ● Policy emphasis is on reducing use of seclusion where possible ● Defined according to proposed national definition |
| Multiple seclusion episodes | Percentage of adult general acute separations with more than one seclusion event during the reporting period. | <ul style="list-style-type: none"> ● While an initial need for seclusion can sometimes be unforeseen (see above), close management can sometimes avoid repeated episodes |
| 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 style="list-style-type: none"> ● Statewide target of 60% ● Reflects service responsiveness and a planned approach to admission, rather than a crisis response |
| 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 style="list-style-type: none"> ● Statewide target of 70% ● Indicator of effective discharge management ● Indicator 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 |
| 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 style="list-style-type: none"> ● National and statewide target of 85% ● Commitment to adoption of outcome measurement part of National Mental Health Strategy, and National Action Plan |
| Community cases with 8 hours or more contact | Percentage of active adult community cases with total contact of 8 hours or more received during the reporting period. Cases with Crisis Assessment and Treatment only or Consultation and Liaison only are excluded. | <ul style="list-style-type: none"> ● Contextual measure ● Definition differs slightly from case management report which include CCT and MST case contacts only |
| 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 style="list-style-type: none"> ● Statewide target of 80% ● Mental health bed access indicator, although affected by local admission practices, such as direct admissions ● Some services not yet fully compliant with new data departure status items in VEMD |

* New in 2007 - 08