


Using collections across settings for clinical indicators: like Venus and Mars

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Department of Health

- Information development in mental health nationally
 - Consumer journey and KPIs
 - Practical application of data linkage
 - Improving consumer outcomes
- 

Integrated Mental Health Services

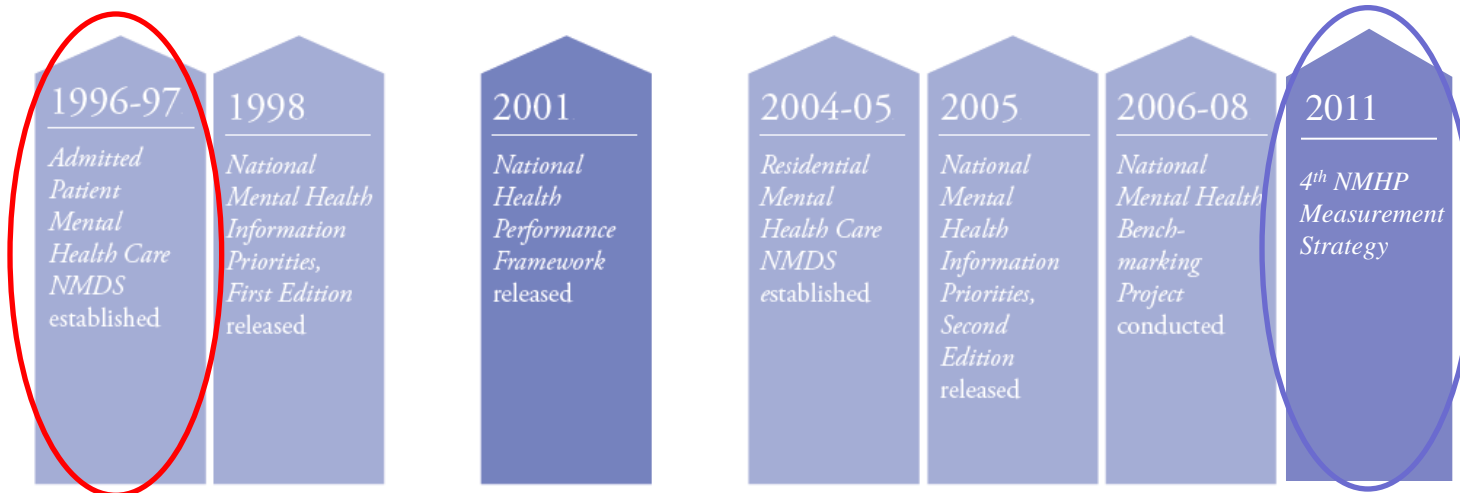
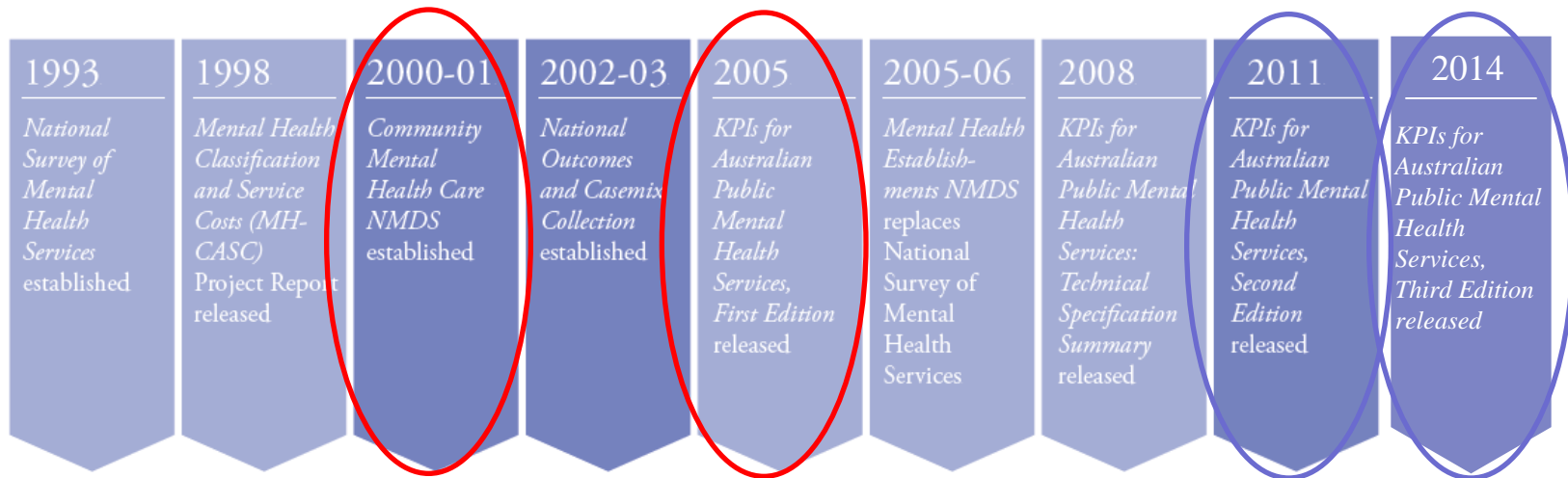
Mental Health Service Organisation

Inpatient



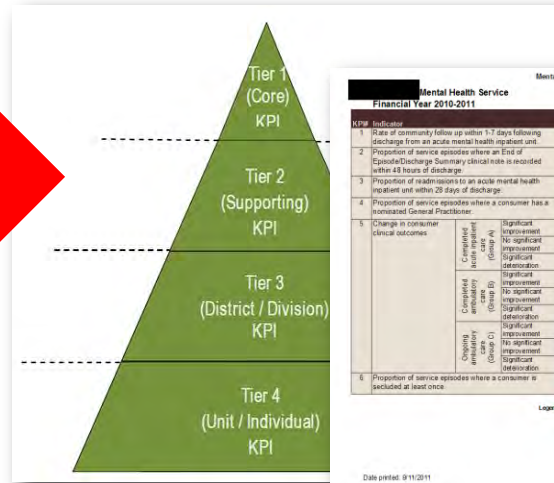
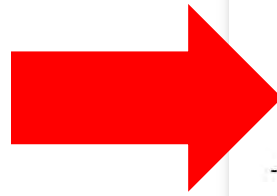
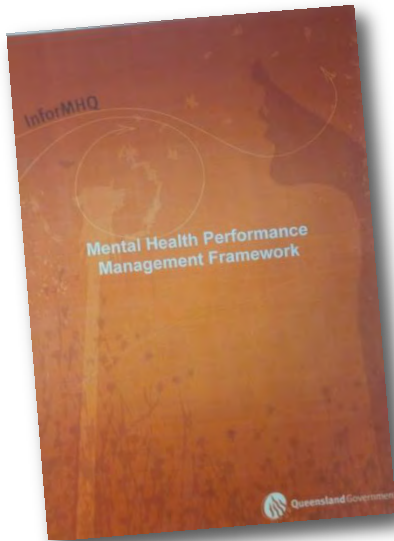
Community





Adapted from: Key Performance Indicators for Australian Public Mental Health Services 3rd Edition, 2013

Evolution of a Performance Framework

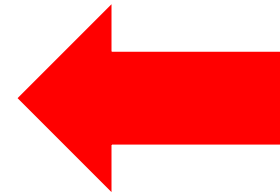


Mental Health Performance Management Framework
Mental Health Service
Financial Year 2010-2011

KPI Indicators	2010-2011	Q1 2010-2011	Q2 2010-11	Q3 2010-11	Q4 2010-11	State FY10-2011	
1. Rate of community follow up within 1-7 days following discharge from an acute mental health inpatient unit.	≥ 55%	63.75%	42.10%	47.60%	51.54%	42.45%	
2. Proportion of service episodes where an End of Episode/Discharge Summary clinical note is recorded within 48 hours of discharge.	≥ 40%	0.40%	1.41%	0.00%	0.42%	19.34%	
3. Proportion of readmissions to an acute mental health inpatient unit within 28 days of discharge.	≤ 14%	26.94%	17.74%	17.92%	14.21%	14.74%	
4. Proportion of service episodes where a consumer has a nominated General Practitioner.	≥ 25%	16.30%	22.89%	29.97%	61.18%	27.94%	
5. Change in consumer clinical outcomes:	Completed secondary health treatment (Group A)	Significant improvement	N/A	68.87%	66.25%	80.71%	77.10%
		No significant improvement	N/A	25.88%	30.00%	33.33%	20.61%
		Significant deterioration	N/A	5.17%	3.75%	5.95%	2.29%
		Significant deterioration	N/A	14.29%	36.94%	31.13%	28.40%
	Completed secondary health treatment (Group B)	Significant improvement	N/A	57.54%	51.92%	50.94%	58.01%
		No significant improvement	N/A	28.67%	11.54%	17.92%	13.60%
		Significant deterioration	N/A	20.00%	50.88%	48.44%	56.20%
		Significant deterioration	N/A	70.00%	47.37%	42.19%	42.19%
	Ongoing secondary health treatment (Group C)	Significant improvement	N/A	10.00%	1.75%	9.38%	1.58%
		No significant improvement	N/A	10.00%	1.75%	9.38%	1.58%
		Significant deterioration	N/A	10.00%	1.75%	9.38%	1.58%
		Significant deterioration	N/A	10.00%	1.75%	9.38%	1.58%
6. Proportion of service episodes where a consumer is secluded at least once.							

Legend: Performance is excellent or better than target (Green), Performance is target but tolerance (Yellow), Performance is unfavourable to target and exceeds the tolerance levels (Red).

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Consumer journey



Post-discharge Community Care

Measures:

- Proportion of consumers followed up in person by a community mental health clinician in 1-7 days post discharge from an acute mental health inpatient unit

Strategic issue.

Continuity of care and support following discharge from a mental health inpatient service.

Rationale.

- A responsive community support system for persons who have experienced an acute psychiatric episode requiring hospitalisation is essential to maintain clinical and functional stability and to minimise the need for hospital readmission.
- Patients leaving hospital after a psychiatric admission with a formal discharge plan, involving linkages with community services and supports, are less likely to need early readmission.
- Research indicates that patients have increased vulnerability immediately following discharge, including higher risk for suicide.

Venus and Mars

Mental Health Service Organisation

Inpatient

Community



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NO ADMITTANCE
TO BE OBTAINED
WITHOUT PERMISSION
OF THE SUPERVISOR

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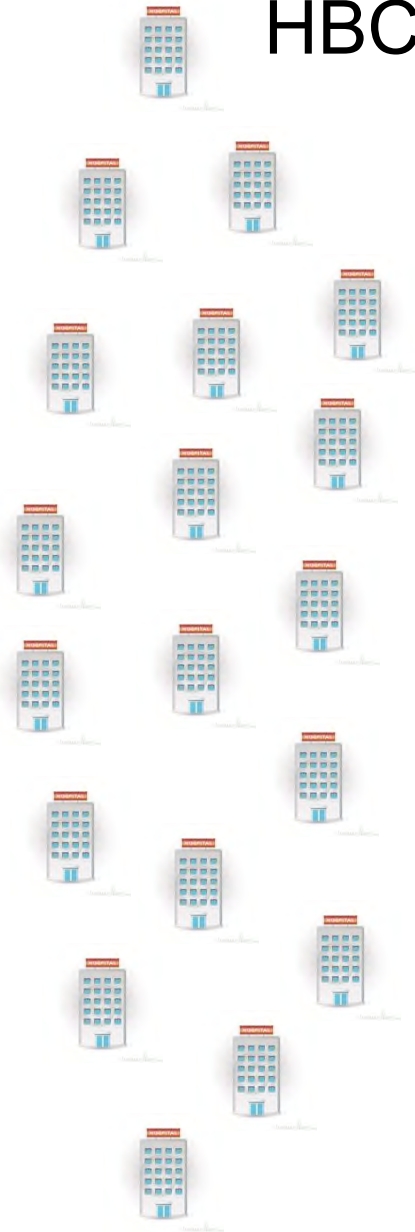
HBCIS

Community



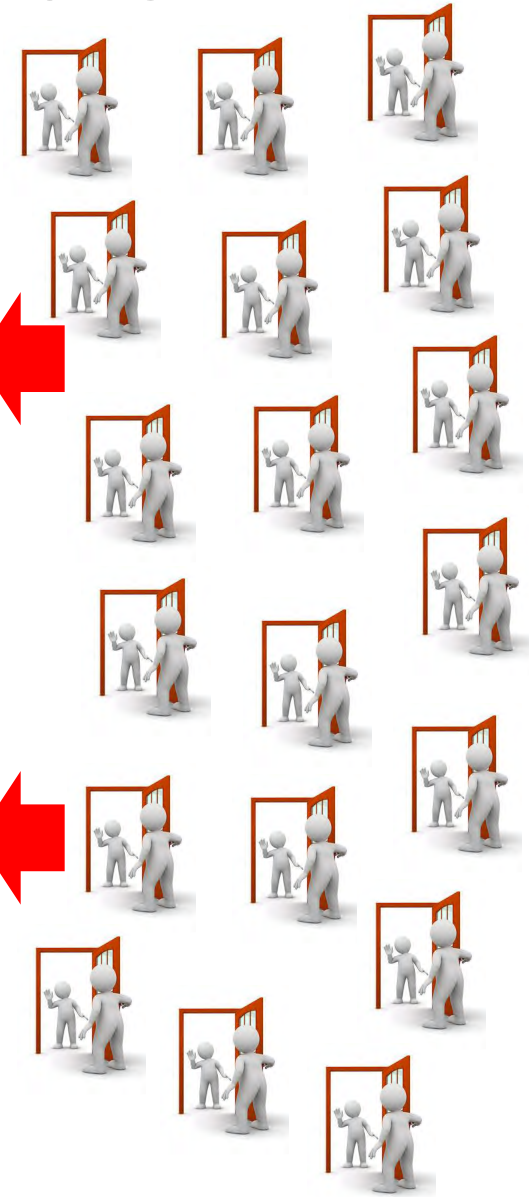
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QHAPDC

CESA



Link file



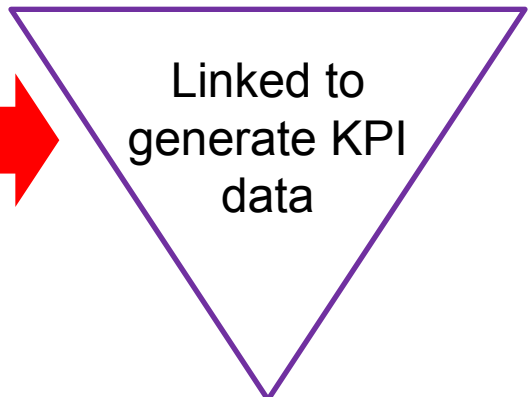
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KPI Reports



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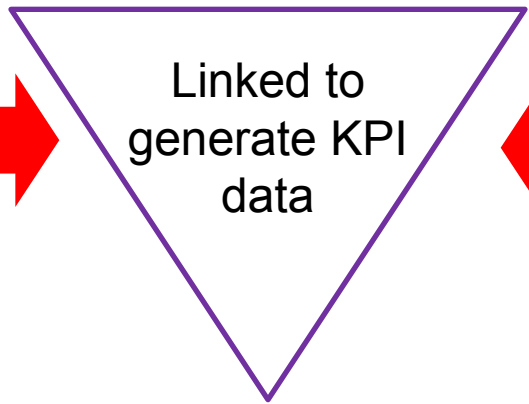


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Linked to generate KPI data



KPI Reports



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IMHDRR



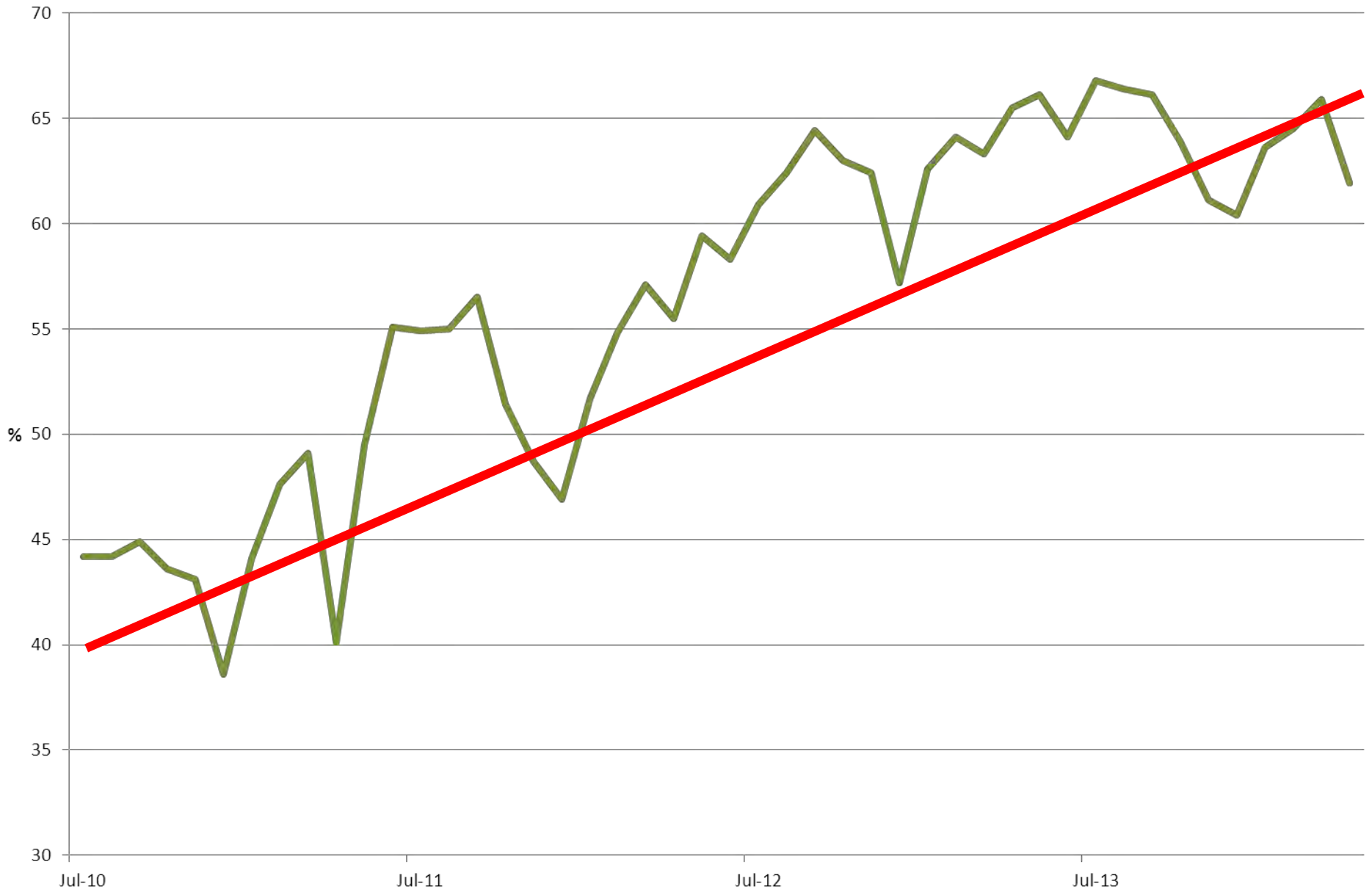
MHIPA



CIMHA

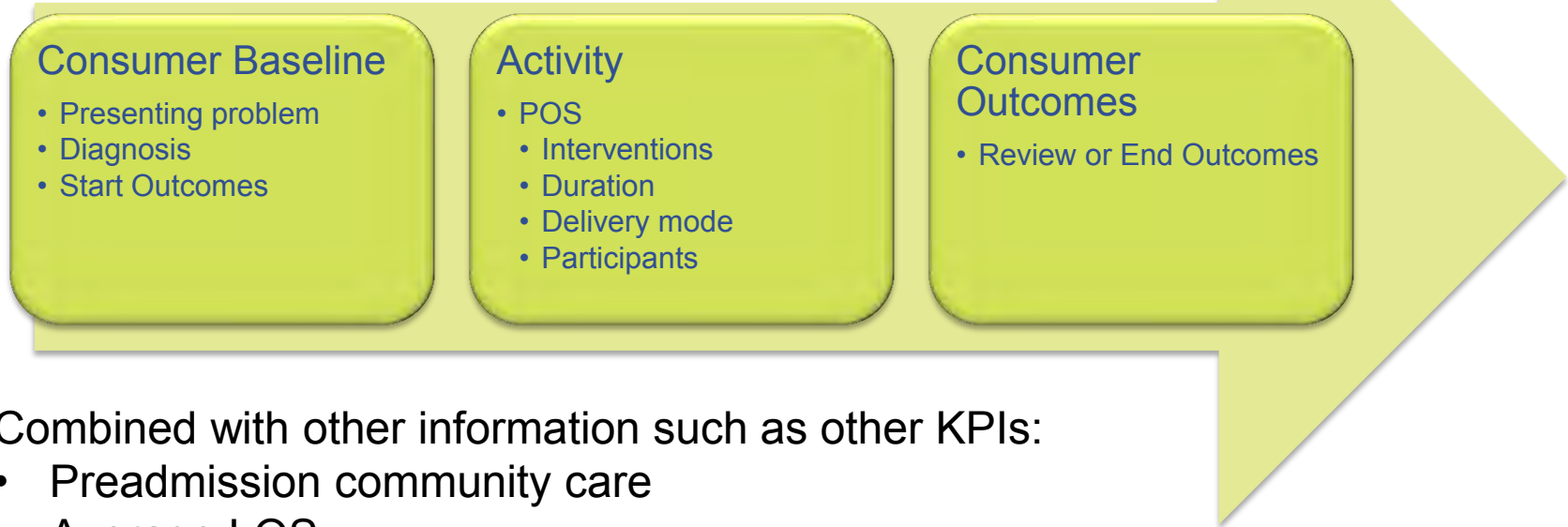


Statewide Rate of Post-discharge Community Follow-up



Linking clinicians and information

Consumer over time



Combined with other information such as other KPIs:

- Preadmission community care
- Average LOS
- Rate of Seclusion
- 28 Day Readmission Rate
- Change in outcomes

Data linking is bright for mental health in the future

- IMHARR will enable potential for regular and routine data linking with other sources
 - QHAPDC
 - EDIS
 - Pharmacy
 - iEMR
 - Mortality data
 - Population data

Questions

