National Healthcare Agreement: PI 28-Public sector community mental health services, 2012 QS

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Identifying and definitional attributes

Metadata item type:	Data Quality Statement
METEOR identifier:	500433
Registration status:	[Health,](#) Retired 14/01/2015

Data quality

Data quality statement summary:

- The National Community Mental Health Care Database is a near-comprehensive collection of data on service contacts provided by specialised mental health services for patients/clients of all public sector community mental health services in Australia.
- There is some variation in the types of service contacts included across jurisdictions.
- The Indigenous status data should be interpreted with caution due to the varying and, in some instances, unknown quality of Indigenous identification across jurisdictions.
- Data are reported by the State or Territory that delivered the service and will include people receiving services in one jurisdiction who reside in another. These cross-border flows are particularly relevant in interpreting ACT data.

Institutional environment:

The Australian Institute of Health and Welfare (AIHW) has calculated this indicator. The AIHW is an independent statutory authority within the Health and Ageing portfolio, which is accountable to the Parliament of Australia through the Minister. For further information see the AIHW website.

The data were supplied to the AIHW by State and Territory health authorities. The State and Territory health authorities receive these data from public sector community mental health services. States and territories use these data for service planning, monitoring and internal and public reporting.

Community mental health services may be required to provide data to states and territories through a variety of administrative arrangements, contractual requirements or legislation.

States and territories supplied these data under the terms of the National Health Information Agreement (see link).

www.aihw.gov.au/WorkArea/DownloadAsset.aspx?id=6442472807&libID=6442472788

Timeliness:

The reference period for the Community Mental Health Care (CMHC) National Minimum Data Set (NMDS) data is 2009-10.

Accessibility:

The AIHW produces the annual series *Mental health services in Australia* (available electronically on the AIHW website).

Interpretability:

Supporting information on the quality and use of the National Community Mental Health Care Database (NCMHCD) are published annually in *Mental health services in Australia* (Section 4), which is available electronically on the AIHW website. Supporting information includes discussion of the quality of Indigenous data, the quality of principal diagnosis data, and estimates of the number of patients. Metadata information for the CMHC NMDS is published in the AIHW's online metadata repository (METeOR) and the *National health data dictionary*.

Relevance:	The CMHC NMDS specification defines a mental health service contact as the provision of a 'clinically significant service' by a specialised mental health service provider. The scope of the CMHC NMDS is service contacts provided by specialised mental health services in the community for patients/clients, other than those admitted to psychiatric hospitals or designated psychiatric units in acute care hospitals, and those resident in 24-hour staffed specialised residential mental health services, i.e. the scope of the CMHC NMDS is non-admitted, non-residential care.
	There is some variation in the types of service contacts included across jurisdictions. For example, some jurisdictions include written correspondence as service contacts while others do not.
	Tasmania and the Northern Territory estimates that there could be a deficit of between 25–35 per cent of service contact records, while coverage for the remainder of the jurisdictions is estimated to be between 83–100 per cent.
	The numerator includes people who receive a service in one jurisdiction but normally reside in another. There will be some mismatch between numerator and denominator in areas with cross-border flows.
Accuracy:	Inaccurate responses may occur in all data provided to the AIHW, and the AIHW does not have direct access to jurisdictional records to determine the accuracy of data provided. However, routine data quality checks are conducted by the states and territories prior to submission to the AIHW. The AIHW then undertakes extensive validations on receipt of data. Data are checked for valid values, logical consistency and historical consistency. Potential errors are queried with jurisdictions, and corrections and resubmissions may be made in response to these edit queries. The AIHW does not adjust data to account for possible data errors.
	These data are subject to a quality process to examine possible inclusion of some duplicate counts. Based on preliminary analysis of Victorian data, over-recording is estimated to account for less than 5 per cent of total.
	The Indigenous status data should be interpreted with caution due to the varying and, in some instances, unknown quality of Indigenous identification across jurisdictions. Indigenous status is missing for 9 per cent of contacts.
	Cells have been suppressed to protect confidentiality (where the presentation could identify a patient or a single service provider), where rates are likely to be highly volatile (for example, the denominator is very small). The following rules were applied:

- Rates were suppressed where the denominator was less than 1,000 or where the rates appear misleading (for example, because of cross border flows).

Coherence:	There has been no change to the methodology used to collect the data in 2009-10 in most jurisdictions. Data for all jurisdictions, except Queensland, are comparable to 2008-09.
	During 2008-09, Queensland introduced a new state-wide clinical information system. Consequently, data for the 2008-09 reference period has been sourced from both the legacy applications and the new information system. Whilst the new system provided an improved mechanism for the capture of clinical, legislative and activity data for mental health, there were a number of implementation issues which impacted on the entry of data. In addition, the underpinning data model is a modification from the model implemented in the legacy applications and effectively sets a new baseline for reporting from 2009-10.
	The data used in this indicator are routinely published in the AIHW publication *Mental health services in Australia*. However, there may be some differences in the calculated rates in that publication due to the use of different estimated resident populations (ERPs) other than June 2009 ERPs used for this indicator.

Relational attributes

Related metadata references:	Supersedes [National Healthcare Agreement: PI 28: Public sector community mental health services, 2011 QS](#)
	[Health](#), Superseded 04/12/2012
Indicators linked to this Data Quality statement:	[National Healthcare Agreement: PI 28-Public sector community mental health services, 2012](#)
	[Health](#), Retired 25/06/2013