

National Healthcare Agreement: PI 25-Rate of community follow up within first seven days of discharge from a psychiatric admission, 2013 QS

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Identifying and definitional attributes

Metadata item type:	Data Quality Statement
METEOR identifier:	502525
Registration status:	Health , Superseded 14/01/2015

Data quality

Data quality statement summary:	<ul style="list-style-type: none">• States and territories vary in their capacity to accurately track post-discharge follow up between hospital and community service organisations, due to the lack of unique patient identifiers or data matching systems.• For National Healthcare Agreement (NHA) 2013 reporting, only disaggregation by state and territory is reported, with advice on technical issues associated with additional disaggregations to be sought for future reporting.
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Institutional environment:	<p>The tables for this indicator were prepared by the Department of Health and Ageing (DoHA) and quality-assessed by the Australian Institute of Health and Welfare (AIHW). AIHW drafted the initial data quality statement (including providing input about the methodology used to extract the data and any data anomalies) in consultation with DoHA. The AIHW did not have the relevant datasets required to independently verify the data tables for this indicator. For further information see the AIHW website.</p>
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The data were supplied to DoHA by state and territory health authorities. The state and territory health authorities receive these data from public sector community mental health services and public hospitals. States and territories use these data for service planning, monitoring and internal and public reporting.

Community mental health services and public hospitals 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 for publication in the *National mental health report 2013*, *COAG national action plan on mental health—progress report 2010–11*, and *Report on government services 2013*.

Timeliness:	The reference periods for these data are 2007–08, 2008–09, 2009–10 and 2010–11.
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Accessibility:	Council of Australian Governments (COAG) national action plan on mental health progress reports available at:
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<<http://www.coag.gov.au>>

Report on government services available at:

<<http://www.pc.gov.au/gsp/rogs>>

National mental health report available at:

<<http://www.health.gov.au/internet/main/publishing.nsf/Content/mental-data>>

Interpretability:	Information will be available in the forthcoming <i>COAG national action plan on mental health—progress report 2010–11</i> .
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Relevance:	<p>Estimates are based on all 'in scope' separations from state and territory psychiatric acute inpatient units, where 'in scope' is defined as those separations for which it is meaningful to examine community follow-up rates. The following separations were excluded: same day separations; overnight separations that occur through discharge/transfer to another hospital; statistical discharge – type change; left against medical advice/discharge at own risk and death</p> <p>Data for all years reflect full financial year activity – that is, all in scope separations from public sector acute psychiatric units between the period 1 July and 30 June for each financial year.</p> <p>Community mental health contacts counted for determining whether follow-up occurred are restricted to those in which the consumer participated. These may be face-to-face or 'indirect' (e.g., by telephone), but not contacts delivered 'on behalf of the client' in which they did not participate, with the exception of the Northern Territory which includes all contacts, but advised that the impact on the indicator is believed to be marginal. Contacts made on the day of discharge are also excluded for all jurisdictions.</p> <p>Only community mental health contacts made by state and territory public mental health services are included. Where responsibility for clinical follow-up is managed outside the state/territory mental health system (e.g., by private psychiatrists, general practitioners), these contacts are not included.</p> <p>States and territories vary in their capacity to accurately track post-discharge follow up between hospital and community service organisations, due to the lack of unique patient identifiers or data matching systems. Two jurisdictions—Tasmania and South Australia—indicated that the data submitted were not based on unique patient identifier or data matching approaches. This factor can contribute to an appearance of lower follow-up rates for these jurisdictions.</p> <p>For 2013 NHA reporting, only disaggregation by state and territory is reported, with advice on technical issues associated with additional disaggregations to be sought from the Mental Health Information Strategy Subcommittee (MHISS) and National Mental Health Performance Subcommittee (NMHPSC) for future reports.</p>
Accuracy:	<p>State and territory jurisdictions differ in their capacity to accurately track post-discharge follow up between hospital and community service organisations (see Relevance section above for further information).</p>
Coherence:	<p>Specifications for this indicator were revised for the National Healthcare Agreement to align with specifications for the nationally agreed key performance indicators for public mental health services. Specifically, the revised indicator focuses on follow up care for people discharged from acute psychiatric units only, rather than discharges from all psychiatric units. To align the indicator with the national specifications, revised data for all years were re-submitted by all states and territories so the indicator is comparable across the reported reference periods.</p> <p>This indicator is currently reported in progress reports of the <i>COAG national action plan on mental health</i>, and the <i>Report on government services</i> (sourced from the COAG report). It is also equivalent to the Key Performance Indicators for Australian Public Mental Health Services: MHS PI 12—Post-discharge community care (which this new indicator is based on) and the Fourth National Mental Health Plan: NMHP PI 16—Rates of post-discharge community care (which is expected be reported in the National mental health report in June 2013 and revised to match MHS PI 12)).</p>

Relational attributes

Related metadata references:	<p>Has been superseded by National Healthcare Agreement: PI 25-Rate of community follow up within first seven days of discharge from a psychiatric admission, 2014 QS Health, Superseded 14/01/2015</p>
Indicators linked to this Data Quality statement:	<p>National Healthcare Agreement: PI 25-Rate of community follow up within first seven days of discharge from a psychiatric admission, 2013 Health, Superseded 30/04/2014</p>

