

KPIs for Australian Public Mental Health Services: PI 05 – Average cost per acute admitted patient day, 2015–2017

Exported from METEOR (AIHW's Metadata Online Registry)

© Australian Institute of Health and Welfare 2024

This product, excluding the AIHW logo, Commonwealth Coat of Arms and any material owned by a third party or protected by a trademark, has been released under a Creative Commons BY 4.0 (CC BY 4.0) licence. Excluded material owned by third parties may include, for example, design and layout, images obtained under licence from third parties and signatures. We have made all reasonable efforts to identify and label material owned by third parties.

You may distribute, remix and build on this website's material but must attribute the AIHW as the copyright holder, in line with our attribution policy. The full terms and conditions of this licence are available at <https://creativecommons.org/licenses/by/4.0/>.

Enquiries relating to copyright should be addressed to info@aihw.gov.au.

Enquiries or comments on the METEOR metadata or download should be directed to the METEOR team at meteor@aihw.gov.au.

KPIs for Australian Public Mental Health Services:

PI 05 – Average cost per acute admitted patient day, 2015–2017

Identifying and definitional attributes

| | |
|-----------------------------|---|
| Metadata item type: | Indicator |
| Indicator type: | Indicator |
| Short name: | MHS PI05: Average cost per acute admitted patient day, 2015–2017 |
| METEOR identifier: | 583849 |
| Registration status: | Health , Superseded 13/01/2021 |
| Description: | Average cost of patient day within acute psychiatric inpatient units managed by the mental health service organisation. |

NOTE: This indicator is related to MHS PI05J: Average cost per acute admitted patient day (Jurisdictional level version). There are no technical differences in the calculation methodologies between the Service level version and the Jurisdictional level version of this indicator.

| | |
|-------------------|---|
| Rationale: | <ul style="list-style-type: none">• Efficient functioning of public acute psychiatric inpatient units is critical to ensuring finite funds are used effectively to deliver maximum community benefit.• Unit costs are a core feature of management level indicators in all industries. They are required to measure how well an organisation uses its resources in producing services and are fundamental to value for money judgements.• Acute psychiatric inpatient units account for around three quarters of the total costs of specialised mental health admitted patient care and around a third of overall specialised mental health service costs.• 'Admitted patient day' is the 'intermediate product' for acute inpatient episodes and can be the focus activity aimed at improvements in technical efficiency. |
|-------------------|---|

| | |
|-----------------------|---|
| Indicator set: | Key Performance Indicators for Australian Public Mental Health Services (Service level version) (2015–2017) Health , Superseded 13/01/2021 |
|-----------------------|---|

Collection and usage attributes

| | |
|---------------------------------|--|
| Computation description: | Coverage/Scope: All public mental health service organisations acute psychiatric inpatient units. Methodology: <ul style="list-style-type: none">• Recurrent costs include costs directly attributable to the acute psychiatric inpatient unit(s) plus a proportional share of overhead costs (indirect expenditure). Cost data for this indicator are based on gross recurrent expenditure as compiled by State/Territory data providers according to the specifications of the Mental Health Establishments National Minimum Data Set. As such, it is subject to the concepts, definitions and costing methodology developed for the NMDS.• Categorisation of the admitted patient unit is based on the principal purpose(s) of the program rather than the classification of individual consumers. |
| Computation: | Numerator ÷ Denominator |
| Numerator: | Total recurrent expenditure within the mental health service organisation's acute psychiatric inpatient unit(s) during the reference period. |

| | |
|------------------------|---|
| Denominator: | Number of patient days occurring within the mental health service organisation's acute psychiatric inpatient unit(s) during the reference period. |
| Disaggregation: | Service variables: Target population; disorder specific services Consumer attributes: Nil |

Representational attributes

| | |
|------------------------------|-----------------|
| Representation class: | Mean (average) |
| Data type: | Monetary amount |
| Unit of measure: | Currency |

Indicator conceptual framework

| | |
|----------------------------------|---------------------------|
| Framework and dimensions: | Efficient |
|----------------------------------|---------------------------|

Accountability attributes

| | |
|---|--|
| Reporting requirements: | Australian Institute of Health and Welfare |
| Organisation responsible for providing data: | Australian Institute of Health and Welfare |
| Accountability: | Australian Institute of Health and Welfare |
| Benchmark: | Levels at which indicator can be useful for benchmarking: <ul style="list-style-type: none"> • service unit • mental health service organisation • regional group of services • state/territory. |

| | |
|--|--|
| Further data development / collection required: | The indicator can be accurately constructed using the Mental Health Establishments NMDS. |
|--|--|

| | |
|------------------------------|--|
| Other issues caveats: | <p>Casemix adjustment is needed to interpret variation between organisations – to distinguish consumer and provider factors.</p> <p>Patient day costs may be affected by provider factors beyond management control (for example, high fixed costs in institutions during downsizing, structural or design problems with units that need to be countered through higher rostering levels, etc.).</p> <p>Costing methodologies are relatively underdeveloped in within the mental health sector, and vary across organisations, impacting on the quality of this indicator. Further work is required to achieve consistency in costing methodologies.</p> |
|------------------------------|--|

Source and reference attributes

| | |
|---------------------------------|---|
| Submitting organisation: | Australian Institute of Health and Welfare |
| Reference documents: | Key Performance Indicators for Australian Public Mental Health Services, Third edition (2014) |

Relational attributes

| | |
|-------------------------------------|--|
| Related metadata references: | Has been superseded by KPIs for Australian Public Mental Health Services: PI 05 – Average cost per acute mental health admitted patient day, 2018 (Service level) Health , Superseded 13/01/2021 |
|-------------------------------------|--|