

# KPIs for Australian Public Mental Health Services: PI 07J – Average cost per community treatment day, 2015

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# KPIs for Australian Public Mental Health Services: PI 07J – Average cost per community treatment day, 2015

## Identifying and definitional attributes

<b>Metadata item type:</b>	Indicator
<b>Indicator type:</b>	Indicator
<b>Short name:</b>	MHS PI07J: Average cost per community treatment day, 2015
<b>METEOR identifier:</b>	597098
<b>Registration status:</b>	<a href="#">Health</a> , Superseded 11/05/2016
<b>Description:</b>	<p>Average cost per community treatment day provided by state/territory <a href="#">specialised community (also known as ambulatory) mental health care service unit(s)</a>.</p> <p><b>Note: This specification has been adapted from the indicator MHS PI 07: Average cost per community treatment day, 2015 (Service level version) using terminology consistent with the National Health Data Dictionary. There are technical differences in the calculation methodologies between the Service level version and the Jurisdictional level version of this indicator due to different exclusions in the methodology of this indicator. Caution should be taken to ensure the correct methodology is followed.</b></p>
<b>Rationale:</b>	<p>Efficient functioning of public community mental health services is critical to ensure that finite funds are used effectively to deliver maximum community benefit.</p> <p>Unit costs are a core feature of management-level indicators in all industries and are necessary to understand how well an organisation uses its resources in producing services. They can be fundamental to value for money judgments.</p> <p>Previous estimates of unit costs in community care have been compromised by inadequate product definition. Most commonly, estimates have been based on average cost per occasion of service, and provide little indication of the overall costs of care.</p> <p>Nationally agreed definition of treatment episodes in the community have not yet been developed. In the meantime, community treatment day is used as valid intermediate product for comparing efficiency, noting other options are available.</p>
<b>Indicator set:</b>	<p><a href="#">Key Performance Indicators for Australian Public Mental Health Services (Jurisdictional level version) (2015)</a> <a href="#">Health</a>, Superseded 11/05/2016</p>

## Collection and usage attributes

**Computation description:** Coverage/Scope:

State/territory specialised community mental health care service unit(s) in scope for reporting as defined by the Mental Health Establishments National Minimum Data Set (expenditure data).

State/territory specialised community mental health care service unit(s) in scope for reporting as defined by the Community Mental Health Care National Minimum Data Set (treatment days data).

The following expenditure of community mental health care service units are excluded:

- A share of expenditure associated with delivery of care to non-uniquely identified people.

The following activity of community mental health care services are excluded:

- All activity associated with non-uniquely identified people.

Methodology:

- Reference period for 2015 performance reporting: 2012–13
- Recurrent costs include costs directly attributable to the community mental health care treatment day plus a proportional share of overhead costs. Cost data for this indicator is 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.
- Expenditure is adjusted for the proportion of non-uniquely identifiable people.

**Computation:**

Numerator ÷ Denominator

**Numerator:**

Total state/territory recurrent expenditure on ambulatory mental health care services within the reference period.

**Numerator data elements:**

<p><b>Data Element / Data Set</b></p> <p>Total apportioned expenditure at Ambulatory service unit level (adjusted)</p> <p><b>NMDS/DSS</b></p> <p>(derived from) <a href="#">Mental Health Establishments NMDS</a></p>
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**Denominator:**

Total number of community mental health care treatment days provided by state/territory ambulatory mental health care services within the reference period.

**Denominator data elements:**

<p><b>Data Element / Data Set</b></p> <p>Specialised mental health service—number of community mental health care treatment days</p> <p><b>NMDS/DSS</b></p> <p>(derived from) <a href="#">Community Mental Health Care NMDS</a></p>
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<p><b>Data Element / Data Set</b></p> <p><a href="#">Person—unique identifier used indicator, yes/no code N</a></p> <p><b>NMDS / DSS</b></p> <p><a href="#">Community mental health care NMDS 2013-14</a></p>
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**Disaggregation:** Service variables: Nil  
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:** State/territory level  
**Further data development / collection required:** This indicator can be accurately constructed using the Mental Health Establishments NMDS and the Community Mental Health Care NMDS.  
**Other issues caveats:** Contact duration data is needed for a more sophisticated cost modelling methodology.  
Casemix adjustment is needed to interpret variation between organisations to distinguish consumer and provider factors.  
Further development of national funding models, including episode-based or casemix models will enable more meaningful measurement.  
There is a need for considerable development of costing within mental health (for example, the inclusion/exclusion of teaching and research expenditure, costing according to actual service use, etc.).  
Accurate reporting at levels above that of mental health service organisation requires unique state-wide patient identifiers which are not currently available in all jurisdictions.

## 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: PI07J – Average cost per community treatment day, 2016](#)  
[Health](#), Superseded 14/06/2017