

KPIs for Australian Public Mental Health Services: PI 09J – Mental health new client index, 2022

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 09J – Mental health new client index, 2022

Identifying and definitional attributes

Metadata item type:	Indicator
Indicator type:	Indicator
Short name:	MHS PI 09J: Mental health new client index, 2022
METEOR identifier:	753261
Registration status:	Health , Superseded 06/09/2023
Description:	The percentage of new clients under the care of state/territory specialised mental health services. NOTE: This specification has been adapted from the indicator <i>Mental health new client index, 2021– (Service level)</i> using terminology consistent with the National Health Data Dictionary. There are no technical differences in the calculation methodologies between the Service level version and the Jurisdictional level version of this indicator.
Rationale:	• Access to services by persons requiring care is a key issue and there is concern that the public mental health service system is inadequately responding to new people requiring care. • There is concern that public sector mental health services invest a disproportionate level of resources in dealing with existing clients and too little in responding to the needs of new clients as they present. • Existing population treatment rates are relatively low.
Indicator set:	Key Performance Indicators for Australian Public Mental Health Services (Jurisdictional level version) (2022) Health, Superseded 06/09/2023

Collection and usage attributes

Computation description: Coverage/Scope:

State/territory public specialised mental health services.

Methodology:

Reference period for 2022 performance reporting: 2020–21

- Tracking the client's service use back from the date of first contact in the reference period should be calculated as the 5 years preceding the date of first contact rather than on a calendar or financial year basis.
- Client counts should be unique at the state/territory level.

Requires a count of individuals receiving services provided by state/territory mental health services within the reference period. The preferred standard for reporting this data is for person counts to be based on unique enumeration of individuals receiving care within the year. That is, consumers who received services in the reference period in more than one service setting, or by more than one specialised mental health service organisation, should only be counted once. However, in developing specifications for this indicator, it has been recognised that states and territories vary significantly in the extent to which persons can be counted uniquely at the jurisdiction level, the details of which are explored in the data quality statement for this indicator.

No additional service utilisation thresholds have been set for this indicator. This approach has been taken to allow:

- 'assessment only' cases to be included (i.e. individuals receiving only one service contact) because these are regarded as a significant and valid service provided by specialist mental health services; and
- all service contacts to be included in defining whether a person receives a service, including those delivered 'on behalf' of the consumer i.e. where the consumer does not directly participate. This approach has been taken to ensure that the role of state and territory mental health services in providing back up as tertiary specialist services to other health providers is recognised.

Computation:

$(\text{Numerator} \div \text{Denominator}) \times 100$

Numerator:

Number of new consumers who received services from state/territory public specialised mental health services within the reference period.

Numerator data elements:

Data Element / Data Set

Specialised mental health service—number of new consumers receiving services from specialised public mental health care services

Data Sources

[State/territory community mental health care data](#) 2020–21

[State/territory admitted patient data](#) 2020–21

Guide for use

A new consumer is defined as a person who has not been seen in the 5 years preceding the first contact with a state/territory public specialised mental health service in the reference period.

Denominator:

Number of individuals recorded on jurisdictional mental health information systems as receiving one or more service events from state/territory public mental health services (including admitted patient, ambulatory and residential services) within the reference period.

Denominator data elements:

Data Element / Data Set

Specialised mental health service—number of consumers receiving services from specialised public mental health care services

Data Sources

[State/territory community mental health care data](#) 2020–21

[State/territory admitted patient data](#) 2020–21

Guide for use

Data source type: Administrative by-product

Disaggregation:

Service variables: nil.

Consumer attributes: age, sex, Socio-Economic Indexes for Areas (SEIFA) decile, remoteness area, Indigenous status.

Disaggregated data excludes missing or not reported data.

All disaggregated data are to be calculated as at the first service event for the reporting period, that is, any in-scope admission, residential episode or service contact, even if an ongoing event is underway at the start of the reporting period. In cases where a null value is returned, the first valid result is to be used.

Disaggregation data elements:

Data Element / Data Set

Person—age

Data Sources

[State/territory community mental health care data](#) 2020–21

[State/territory admitted patient data](#) 2020–21

Data Element / Data Set

Person—area of usual residence, statistical area level 2 (SA2) code

Data Sources

[State/territory community mental health care data](#) 2020–21

[State/territory admitted patient data](#) 2020–21

Guide for use

Used for disaggregation by remoteness and SEIFA

Data Element / Data Set

Person—Indigenous status

Data Sources

[State/territory community mental health care data](#) 2020–21

[State/territory admitted patient data](#) 2020–21

Data Element / Data Set

Person—sex

Data Sources

[State/territory community mental health care data](#) 2020–21

[State/territory admitted patient data](#) 2020–21

Representational attributes

Representation class: Percentage

Data type: Real

Unit of measure: Person

Format: N[NN].N

Indicator conceptual framework

Framework and dimensions: [Accessibility](#)

Accountability attributes

Reporting requirements:	National Health Reform Agreement
Organisation responsible for providing data:	State/territory health departments
Accountability:	Australian Institute of Health and Welfare
Benchmark:	State/territory level
Further data development / collection required:	This indicator cannot be accurately constructed using the mental health National minimum data sets because they do not include unique patient identifiers that allow links across data sets and financial reporting years.

There is no proxy solution available. Construction of this indicator at a national level requires separate indicator data to be provided individually by states and territories.

Development of state-wide unique patient identifiers within all mental health NMDSs is needed to improve this capacity.

Other issues caveats:	• This indicator presents complexities at the analysis stage. For example, there are several approaches to defining 'new client' that depend on how the following issues are resolved: * Level of the mental health system at which 'newness' is defined—consumers new to a particular organisation may be existing consumers of other organisations. Counts of new consumers at the state/territory level would certainly yield lower estimates than those derived from organisation-level counts. * Diagnosis criteria for defining 'newness'—a consumer may present with a new condition, although they have received previous treatment for a different condition. • To date, the approach has been to specify an initial measure for implementation with a view to further refinement following detailed work to address the complexities associated with the definition of a new clients and the possible implementation of unique state-wide patient identifiers within all jurisdictions. • This work does not take into account the activities of private mental health services, primary mental health care or the specialist private mental health sector.
------------------------------	--

When data for this indicator are requested, jurisdictions are required to answer whether a state-wide unique client identifier system is in place, or some comparable approach has been used in the data analysis to allow tracking of service utilisation by an individual consumer across all public specialised mental health services in the jurisdiction. Collection of this information is aimed at assessing the degree of consistency between jurisdictions in data reported, the result of which are explored in the data quality statement.

Source and reference attributes

Submitting organisation:	Australian Institute of Health and Welfare
Reference documents:	National Mental Health Performance Subcommittee (NMHPSC) 2013. Key Performance Indicators for Australian Public Mental Health Services, 3rd edn. Canberra: NMHPSC.

Relational attributes

Related metadata references:	Supersedes KPIs for Australian Public Mental Health Services: PI 09J – Mental health new client index, 2021 Health , Superseded 16/09/2022
	Has been superseded by KPIs for Australian Public Mental Health Services: PI 09J – Mental health new client index, 2023 Health , Superseded 29/05/2024