

National Outcomes and Casemix Collection NBEDS 2023-24

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National Outcomes and Casemix Collection NBEDS 2023-24

Identifying and definitional attributes

Metadata item type:	Data Set Specification
METEOR identifier:	757052
Registration status:	Health , Superseded 06/12/2023
DSS type:	Data Set Specification (DSS)
Scope:	The purpose of the National Outcomes and Casemix Collection (NOCC) national best endeavours data set (NBEDS) is to collect data on the mental health-related treatment of consumers of public specialised mental health services, and information on whether consumers improve following mental health care. A set of clinical measures are used to gather information about clinical mental health status and functioning. Measures can be completed by: • clinicians about the consumer (known as clinician-rated), • the consumer about themselves (consumer-rated), and • families and carers about the consumer (carer-rated). Casemix information, describing the cohort of users of this service, such as mental health legal status, is also collected. All consumers who receive clinical care in public specialised mental health services should be included in the NOCC, including psychiatric inpatient, residential and ambulatory (non-admitted) settings.

Collection and usage attributes

Statistical unit:	Collection occasion
Guide for use:	This NBEDS comprises the National Outcomes and Casemix Collection NMDS 2023-24 and additional data items to represent the entire data collection. The data for NOCC are collected differently across states and territories and collection of some data items is either optional or conditional on age, setting and occasion type. As such, the NOCC is split into an NMDS for mandatory items and this NBEDS for items not collected consistently across all jurisdictions. The data set specifications are used in conjunction to report total outcomes and casemix data. Outcome measures attempt to determine whether a change has occurred for a consumer as a result of mental health care and to assess the type and magnitude of that change. By using a range of outcome measures, consumers and clinicians can work together to map the journey of recovery over time. The NOCC measures contribute to the development of clinical practice, aiming to improve the quality of care for consumers of Australia's public sector mental health services. Outcome measures can assist consumers in considering options for their care and treatment and support the development of a therapeutic relationship between the clinician and the consumer. The measures can also be used by clinicians to monitor the progress of the consumer, evaluate the effectiveness of treatments, and thereby provide information that will assist decisions about clinical practices. The outcome measures can also be used by team leaders and service managers to better understand the needs of consumers, to plan for the allocation of resources, and to identify where service improvements are required. The clinician- and consumer-rated measures used in the NOCC are listed below: • Health of the Nation Outcome Scales (HoNOS); • Health of the Nation Outcome Scales for Children and Adolescents (HoNOSCA); • Health of the Nation Outcome Scales 65+ (HoNOS65+); • Life Skills Profile 16 (LSP-16);

- Resource Utilisation Groups – Activities of Daily Living Scale (RUG-ADL);
- Children’s Global Assessment Scale (CGAS);
- Mental Health Inventory 38 (MHI-38);
- Behavior and Symptom Identification Scale 32 (BASIS-32);
- K10+ (K10+);
- Strengths and Difficulties Questionnaire (SDQ); and
- Factors Influencing Health Status (FIHS)

Casemix classifications provide a consistent method of classifying types of consumers, their treatment and associated outcomes. In popular usage, casemix refers to the mix of types of consumers treated by a hospital or other health care facility (Eagar and Hindle 1994). NOCC casemix data describes the various groupings of the specialised mental health service treatments based on the type and mix of the consumers treated, including the expected outcome of treatment (e.g. improvement or maintenance), grouping by diagnostic cohort (e.g. outcomes for people depending on their mental health diagnosis) and whether or not the consumer is receiving treatment voluntarily. Casemix measures collected for the NOCC are:

- Mental Health Legal Status
- Phase of Care
- Primary Diagnosis
- Additional Diagnosis

	Age Group			Purpose	
	Child & Adolescent	Adults	Older People	Outcomes Evaluation	Casemix Classification
Clinical measurement scales					
Health of the Nation Outcome Scales (HoNOS)		•		•	•
Health of the Nation Outcome Scales for Older People (HoNOS 65+)			•	•	•
Health of the Nation Outcome Scales for Children and Adolescents (HoNOSCA)	•			•	•
Life Skills Profile (LSP-16)		•	•	•	•
Resource Utilisation Groups – Activities of Daily Living Scale (RUG-ADL)			•		•
Children's Global Assessment Scale (CGAS)	•				•
Factors Influencing Health Status (FIHS)	•			○	•
Other clinical data					
Mental Health Legal Status	•	•	•	○	•
Principal and Additional diagnosis	•	•	•	○	•
Phase of Care (PoC)	•	•	•	○	•
Consumer self-report					
Kessler 10 (K10+), Behavior and Symptom Identification Scales (BASIS-32), or Mental Health Inventory (MHI-38)		•	•	•	
Strengths and Difficulties Questionnaire (SDQ, all versions)	•			•	

More detailed information about each measure can be found in [Mental Health National Outcomes and Casemix Collection: Overview of Clinician-Rated and Consumer Self-Report Measures V1.50](#) (Australian Mental Health Outcomes and Classifications Network, 2021).

These measures are collected by services according to a set of “protocols” - at specified times and points in service delivery. These protocols are described in [Mental Health National Outcomes and Casemix Collection: Technical specification of State and Territory reporting requirements. Version: 2.10](#) (Australian Mental Health Outcomes and Classifications Network, 2022).

Collection methods:

The NOCC protocol defines the minimum requirements and should not be interpreted as confining participating States and Territories to those requirements. Additionally, local services may elect to collect additional measures or to increase

the frequency of ratings.

Casemix requirements need key data to be collected only once during each [service event](#) to allow the episode to be adequately described and classified. From the casemix perspective, the only issue is to ensure that the information is collected at the most appropriate point within the overall episode of care.

Measurement of consumer outcomes by definition presumes a comparison over time and requires data to be collected on at least two sequential occasions in order to allow assessment of change in the consumer's health status.

Measures can be consumer-rated or clinician-rated and should be collected using a matrix of collection occasion, setting and age group:

Episode Service Setting	INPATIENT			COMMUNITY RESIDENTIAL			AMBULATORY		
Collection Occasion	A	R	D	A	R	D	A	R	D ^(2,3)
Children and Adolescents									
HoNOSCA ⁽⁴⁾	●	●	●	●	●	●	●	●	●
CGAS	●	●	×	●	●	×	●	●	×
FIHS	×	●	●	×	●	●	×	●	●
Parent / Consumer rated (SDQ) ^(5, 6)	●	●	●	●	●	●	●	●	●
Principal and Additional Diagnoses	×	●	●	×	●	●	×	●	●
Mental Health Legal Status	×	●	●	×	●	●	×	●	●
Phase of Care	●	●	×	●	●	×	●	●	×
Adults									
HoNOS ⁽⁴⁾	●	●	●	●	●	●	●	●	●
LSP-16	×	×	×	●	●	●	×	●	●
Consumer rated (BASIS-32, K10, MHI-38 ^{(6) (7)})	●	●	●	●	●	●	●	●	●
Principal and Additional Diagnoses	×	●	●	×	●	●	×	●	●
Mental Health Legal Status	×	●	●	×	●	●	×	●	●
Phase of Care	●	●	×	●	●	×	●	●	×
Older persons									
HoNOS 65+ ⁽⁴⁾	●	●	●	●	●	●	●	●	●
LSP-16	×	×	×	●	●	●	×	●	●
RUG-ADL	●	●	×	●	●	×	×	×	×
Consumer rated (BASIS-32, K10, MHI-38 ^{(6) (7)})	●	●	●	●	●	●	●	●	●
Principal and Additional Diagnoses	×	●	●	×	●	●	×	●	●
Mental Health Legal Status	×	●	●	×	●	●	×	●	●
Phase of Care	●	●	×	●	●	×	●	●	×
Abbreviations and Symbols									
A	Admission to Mental Health Care			●	Reporting of data on this occasion is mandatory				
R	Review of Mental Health Care			×	No reporting requirements apply				
D	Discharge from Mental Health Care								

Consumer-rated measures are collected using one of 3 psychometrically tested tools:

- Behaviour and Symptom Identification Scale (BASIS-32)
- Mental Health Inventory 38 (MHI-38)
- K10 Screening Scale for Psychological Distress (K10+)

Jurisdictions around Australia differ in their selection of a consumer-rated measure, as shown in the table below:

Jurisdiction	Measure
Victoria	BASIS-32
New South Wales	K10+
Tasmania	BASIS-32
Australian Capital Territory	BASIS 32
Northern Territory	K10+
South Australia	K10+
Western Australia	K10+
Queensland	MHI-38

Implementation start date: 01/07/2023

Implementation end date: 30/06/2024

Comments: See [NOCC collection protocol](#) (Australian Mental Health Outcomes and Classifications Network, 2022) for additional guidance.

Glossary terms that are relevant to this national best endeavours data set are included here.

[Admission](#)

[Admitted patient mental health care service](#)

[Ambulatory care](#)

[Ambulatory mental health care service](#)

[Brief ambulatory episode of mental health care](#)

[Gender](#)

[Geographic indicator](#)

[Mental health care](#)

[Mental health consumer](#)

[Mental health phase of care](#)

[Resident](#)

[Residential mental health care service](#)

[Resource Utilisation Groups—Activities of Daily Living](#)

[Separation](#)

[Sex](#)

Source and reference attributes

Submitting organisation: Australian Institute of Health and Welfare

- Reference documents:**
- Australian Mental Health Outcomes and Classification Network 2022. Mental Health National Outcomes and Casemix Collection: Technical specification of State and Territory reporting requirements, Version 2.10. Viewed 25 July 2022 <https://docs.validator.com.au/nocc/02.10/>
- Australian Mental Health Outcomes and Classification Network 2021. Mental Health National Outcomes and Casemix Collection: Overview of Clinician-Rated and Consumer Self-Report Measures V.2.10. Viewed 25 July 2022 https://www.amhcn.org/sites/default/files/publication_files/nocc_clinician_and_self-report_measures_overview_v2.1_20210913_1.pdf
- Eagar K and Hindle D (1994). *Casemix in Australia: an overview*. The National Casemix Education Series No.2. Canberra: Department of Human Services and Health.

Relational attributes

- Related metadata references:**
- Has been superseded by [National Outcomes and Casemix Collection NBEDS 2024-25](#)
[Health](#), Standard 06/12/2023
- See also [National Outcomes and Casemix Collection 2021–2022; National Outcomes and Casemix Database, 2023; Quality Statement](#)
[AIHW Data Quality Statements](#), Standard 12/10/2023
- See also [National Outcomes and Casemix Collection NMDS 2023-24](#)
[Health](#), Superseded 06/12/2023

Metadata items in this Data Set Specification

Seq No.	Metadata item	Obligation	Max occurs
1	National Outcomes and Casemix Collection NMDS 2023-24	Mandatory	1
-	Address—statistical area, level 2 (SA2) code (ASGS Edition 3) N(9)	Mandatory	1
<i>DSS specific information:</i>			
For the National Outcomes and Casemix Collection (NOCC) NMDS, this data element is collecting address information of the service provider.			
-	Collection occasion—collection reason, healthcare code N(N)	Mandatory	1
-	Collection occasion—identifier, X[X(29)]	Mandatory	1

Seq No.	Metadata item	Obligation	Max occurs
-	Collection occasion—reference date, DDMMYYYY	Mandatory	1
	DSS specific information: For use in the National Outcomes and Casemix Collection (NOCC), this is the reference date for all data collected at any given collection occasion defined as the date on which the collection occasion (admission, review, or discharge) occurred. The collection occasion date should be distinguished from the actual date of completion of individual measures that are required at the specific occasion. In practice, the various measures may be completed by clinicians and consumers over several days. For national reporting and statistical purposes, a single date is required which ties all the standardised measures and other data items together in a single collection occasion. The actual collection dates of the individual data items and standard measures may be collected locally but is not required in the national reporting extract. For data collected at the beginning of an episode of mental health care, the collection occasion date is referred to as the admission date. For data collected at end of an episode of mental health care, the collection occasion date is referred to as the discharge date. For data collected at review during an ongoing episode of mental health care, the collection occasion date is referred to as the review date. A special requirement applies in the case of inpatient episodes to facilitate record matching with corresponding records collected under the Admitted patient care NMDS 2023–24. For admission to inpatient episodes, the collection occasion date should be the date of admission as recorded in the NMDS data set. For discharge from inpatient episodes, the collection occasion date should be the date of separation as recorded in the NMDS data set.		
-	Episode of care—additional diagnosis, code (ICD-10-AM Twelfth edition) ANN{.N[N]}	Conditional	99
	Conditional obligation: This data element is only to be reported if the collection occasion results in more than one diagnosis code being allocated.		
-	Episode of care—mental health legal status, code N	Mandatory	1
-	Episode of care—principal diagnosis, code (ICD-10-AM Twelfth edition) ANN{.N[N]}	Mandatory	1
-	Episode of mental health care—service delivery setting, code N	Mandatory	1
	DSS specific information: For the National Outcomes and Casemix Collection (NOCC), this data element is intended to describe the setting in which care took place, regardless of the formal designation of that service unit type. It does not have to correspond to the service unit type (Specialised mental health service organisation—service delivery setting, code N) data element reported on the collection occasion record. The service unit type item is an attribute of the service unit, and this data element is an attribute of the episode of mental health care.		
-	Establishment—Australian state/territory identifier, code N	Mandatory	1
-	Establishment—region identifier, X[X]	Mandatory	1
-	Establishment—region name, text XXX[X(57)]	Mandatory	1

Seq No.	Metadata item	Obligation	Max occurs
-	Establishment—sector, code N	Mandatory	1
-	Establishment—service unit cluster identifier, XXXXX	Conditional	1
Conditional obligation: For use in the National Outcomes and Casemix Collection (NOCC), this data element applies when the service provision setting is Ambulatory mental health care service or Residential mental health care service. Data must be collected for either this data element or Hospital—hospital identifier, XXXXX. DSS specific information: For use in the National Outcomes and Casemix Collection (NOCC), for admitted patient service units, the hospital cluster identifier should be identical to that used to identify the hospital to which the service unit belongs. For ambulatory and residential services units, where there is no service unit cluster, the hospital cluster identifier is to be reported as "00000" and the hospital cluster name would use the relevant organisation name.			
-	Establishment—service unit cluster name, text XXX[X(97)]	Conditional	1
Conditional obligation: For use in the National Outcomes and Casemix Collection (NOCC), this data element applies when the service provision setting is Ambulatory mental health care service or Residential mental health care service. Data must be collected for either this data element or Hospital—hospital name, text XXX[X(97)]. DSS specific information: For use in the National Outcomes and Casemix Collection (NOCC), this data element collects the common name used to identify the service unit. For admitted patient service units, the hospital cluster name should be identical to that used to identify the hospital to which the service unit belongs. For ambulatory and residential services units, where there is no service unit cluster, the hospital cluster name would use the relevant organisation name.			
-	Hospital—hospital identifier, XXXXX	Conditional	1
Conditional obligation: For use in the National Outcomes and Casemix Collection (NOCC), this data element applies when the service provision setting is Admitted patient mental health care service. Data must be collected for either this data element or Establishment—service unit cluster identifier, XXXXX. DSS specific information: For use in the National Outcomes and Casemix Collection (NOCC), for admitted patient service units, the hospital cluster identifier should be identical to that used to identify the hospital to which the service unit belongs. For ambulatory and residential services units, where there is no service unit cluster, the hospital identifier is to be reported as "00000" and the hospital cluster would use the relevant organisation name.			

Seq No.	Metadata item	Obligation	Max occurs
-	Hospital—hospital name, text XXX[X(97)]	Conditional	1
	Conditional obligation: For use in the National Outcomes and Casemix Collection (NOCC), this data element applies when the service provision setting is Admitted patient mental health care service. Data must be collected for either this data element or Establishment—service unit cluster name, text XXX[X(97)]. DSS specific information: For use in the National Outcomes and Casemix Collection (NOCC), this data element collects the common name used to identify the service unit. For admitted patient service units, the hospital cluster name should be identical to that used to identify the hospital to which the service unit belongs. For ambulatory and residential services units, where there is no service unit cluster, the hospital cluster name would use the relevant organisation name.		
-	Person—age range, age group code N	Mandatory	1
-	Person—area of usual residence, statistical area level 2 (SA2) code (ASGS Edition 3) N(9)	Mandatory	1
-	Person—country of birth, code (SACC 2016) NNNN	Mandatory	1
-	Person—date of birth, DDMMYYYY	Mandatory	1
-	Person—Indigenous status, code N	Mandatory	1
-	Person—person identifier, XXXXXX[X(14)]	Mandatory	1
-	Person—sex, code X	Mandatory	1
-	Specialised mental health service organisation—organisation identifier, XXXX	Mandatory	1
	DSS specific information: For use in the National Outcomes and Casemix Collection (NOCC), this organisation identifier should map to the identifiers used in data reported for the Mental health establishments NMDS 2023–24.		
-	Specialised mental health service organisation—organisation name, text XXX[X(97)]	Mandatory	1
	DSS specific information: For use in the National Outcomes and Casemix Collection (NOCC), this organisation name should map to the identifiers used in data reported for the Mental health establishments NMDS 2023–24.		

Seq No.	Metadata item	Obligation	Max occurs
-	Specialised mental health service organisation—service delivery setting, code N <i>DSS specific information:</i> For use in the National Outcomes and Casemix Collection (NOCC), this data element describes the service setting in which care is most typically provided by the service unit. It does not have to correspond to the episode of service setting (Episode of mental health care—service delivery setting, specialised mental health service setting code N) data element reported on the collection occasion record. The service unit type item is an attribute of the service unit, and the episode of service setting data element is an attribute of the episode of mental health care.	Mandatory	1
-	Specialised mental health service—admitted patient care program type, code N <i>Conditional obligation:</i> For the National Outcomes and Casemix Collection (NOCC), complete where service delivery setting (Specialised mental health service organisation—service delivery setting, code N (aihw.gov.au)) is CODE 1 " admitted patient stay ". <i>DSS specific information:</i> For the National Outcomes and Casemix Collection (NOCC), additional supplementary values are available for use: 8: Not applicable 9: Not available	Conditional	1

- [Specialised mental health service—admitted patient service unit identifier, XXXXXX](#)

Conditional 1

Conditional obligation:

For use in the National Outcomes and Casemix Collection (NOCC), this data element applies when the service provision setting is [Admitted patient mental health care service](#).

Data must be collected for either this data element or one of [Specialised mental health service—ambulatory service unit identifier, XXXXXX](#) or [Specialised mental health service—residential service unit identifier, XXXXXX](#).

DSS specific information:

For the National Outcomes and Casemix Collection (NOCC), admitted patient service units should be differentiated by target population (general, older persons, child and adolescent, youth, and forensic) and program type (acute vs other). For example, if a hospital had separate wards for child and adolescent and general adult populations, these should be reported as separate service units. Similarly, if the hospital provided separate wards for older persons acute and older person other program types, this would require separate service units to be identified (that is, defined by the program type as well as the target population). The overarching principle is that the same service unit identification policy must be applied to the admitted patient service units data reported under the NOCC and the [Mental health establishments NMDS 2023–24](#).

States and territories should ensure that the service unit identifiers are unique across all service unit types (i.e., admitted patient, ambulatory care, residential care services). Identifiers used to supply data to NOCC in respect of a particular service unit should be stable over time - that is, unless there has been a significant change to the unit, the same identifier should be used from year to year of reporting.

The service unit identifier is reported at each collection occasion.

Ideally, where a mental health service provides mixed service types (e.g., overnight inpatient care as well as ambulatory care), each component will be defined as a separate service unit and assigned a unique service unit identifier.

- [Specialised mental health service—admitted patient service unit name, text XXX\[X\(97\)\]](#)

Conditional 1

Conditional obligation:

For use in the National Outcomes and Casemix Collection (NOCC), this data element applies when the service provision setting is [admitted patient mental health care service](#).

Data must be collected for either this data element or one of [Specialised mental health service—ambulatory service unit name, text XXX\[X\(97\)\]](#) or [Specialised mental health service—residential service unit name, text XXX\[X\(97\)\]](#).

DSS specific information:

For the National Outcomes and Casemix Collection (NOCC), admitted patient service units should be differentiated by target population (general, older persons, child and adolescent, youth, and forensic) and program type (acute vs other). For example, if a hospital had separate wards for child and adolescent and general adult populations, these should be reported as separate service units. Similarly, if the hospital provided separate wards for older persons acute and older person other program types, this would require separate service units to be identified (i.e., defined by the program type as well as the target population). The overarching principle is that the same service unit identification policy must be applied to the admitted patient service units' data reported under the NOCC and the [Mental health establishments NMDS 2023–24](#).

The service unit name is reported at each collection occasion.

Ideally, where a mental health service provides mixed service types (e.g., overnight inpatient care as well as ambulatory care), each component will be defined as a separate service unit.

- [Specialised mental health service—ambulatory service unit identifier, XXXXXX](#)

Conditional 1

Conditional obligation:

For use in the National Outcomes and Casemix Collection (NOCC), this data element applies when the service provision setting is [Ambulatory mental health care service](#).

Data must be collected for either this data element or one of [Specialised mental health service—admitted patient service unit identifier, XXXXXX](#) or [Specialised mental health service—residential service unit identifier, XXXXXX](#).

DSS specific information:

For the National Outcomes and Casemix Collection (NOCC), ambulatory service units should be differentiated by target population (general, older persons, child and adolescent, youth, and forensic). Where an organisation provides multiple teams serving the same target population, these may be grouped and reported as a single service unit or identified as individual service unit in their own right. Where possible, it is also desirable that residential service units identified in NOCC data correspond directly on a one-to-one basis to those reported in the [Community mental health care NMDS 2023–24](#).

States and territories should ensure that the service unit identifiers are unique across all service unit types (i.e., admitted patient, ambulatory care, residential care services). Identifiers used to supply data to NOCC in respect of a particular service unit should be stable over time - that is, unless there has been a significant change to the unit, the same identifier should be used from year to year of reporting.

The service unit identifier is reported at each collection occasion.

Ideally, where a mental health service provides mixed service types (e.g., overnight inpatient care as well as ambulatory care), each component will be defined as a separate service unit and assigned a unique service unit identifier.

- [Specialised mental health service—ambulatory service unit name, text XXX\[X\(97\)\]](#)

Conditional 1

Conditional obligation:

For use in the National Outcomes and Casemix Collection (NOCC), this data element applies when the service provision setting is [Ambulatory mental health care service](#).

Data must be collected for either this data element or one of [Specialised mental health service—admitted patient service unit name, text XXX\[X\(97\)\]](#) or [Specialised mental health service—residential service unit name, text XXX\[X\(97\)\]](#).

DSS specific information:

For use in the National Outcomes and Casemix Collection (NOCC), ambulatory service units should be differentiated by target population (general, older persons, child and adolescent, youth, and forensic). Where an organisation provides multiple teams serving the same target population, these may be grouped and reported as a single service unit or identified as individual service units in their own right. Where possible, it is also desirable that residential service units identified in NOCC data correspond directly on a one-to-one basis to those reported in the [Community mental health care NMDS 2023–24](#).

Seq No.	Metadata item	Obligation	Max occurs
-	Specialised mental health service—co-location with acute care hospital, code N DSS specific information: For the National Outcomes and Casemix Collection (NOCC), additional supplementary values are available for use: 8: Not applicable	Mandatory	1
-	Specialised mental health service—residential service unit identifier, XXXXXX Conditional obligation: For use in the National Outcomes and Casemix Collection (NOCC), this data element applies when the service provision setting is Residential mental health care service. Data must be collected for either this data element or one of Specialised mental health service—admitted patient service unit identifier, XXXXXX or Specialised mental health service—ambulatory service unit identifier, XXXXXX. DSS specific information: For the National Outcomes and Casemix Collection (NOCC), residential service units should be differentiated by target population (general, older persons, child and adolescent, youth, and forensic). Where possible, it is also desirable that residential service units identified in NOCC data correspond directly on a one-to-one basis to those reported in the Residential mental health care NMDS 2023–24. States and territories should ensure that the service unit identifiers are unique across all service unit types (i.e., admitted patient, ambulatory care, residential care services). Identifiers used to supply data to NOCC in respect of a particular service unit should be stable over time - that is, unless there has been a significant change to the unit, the same identifier should be used from year to year of reporting. The service unit identifier is reported at each collection occasion. Ideally, where a mental health service provides mixed service types (e.g., overnight inpatient care as well as ambulatory care), each component will be defined as a separate service unit and assigned a unique service unit identifier.	Conditional	1

Seq No.	Metadata item	Obligation	Max occurs
-	Specialised mental health service—residential service unit name, text XXX[X(97)] Conditional obligation: For use in the National Outcomes and Casemix Collection (NOCC), this data element applies when the service provision setting is Residential mental health care service . Data must be collected for either this data element or one of Specialised mental health service—admitted patient service unit name, text XXX[X(97)] or Specialised mental health service—ambulatory service unit name, text XXX[X(97)] . DSS specific information: For use in the National Outcomes and Casemix Collection (NOCC), residential service units should be differentiated by target population (general, older persons, child and adolescent, youth, and forensic). Where possible, it is also desirable that residential service units identified in NOCC data correspond directly on a one-to-one basis to those reported in the Residential mental health care NMDS 2023–24 .	Conditional	1
-	Specialised mental health service—target population group, code N	Mandatory	1

- [K10 Screening Scale for Psychological Distress last 4 weeks cluster](#)

Conditional 3

Conditional obligation:

In the National Outcomes and Casemix Collection (NOCC) NBEDS, the K10 Screening Scale for Psychological Distress (last 4 weeks) (K10+) data element cluster should be collected where:

Setting: inpatient, residential or ambulatory

Occasion: admission, review, and discharge*

Age group: adults or older persons

* Discharge ratings for the K10+ are not required by the ambulatory service or the consumer respectively, when the reason for the closure of the ambulatory episode is transfer to a bed-based treatment service setting of that organisation (i.e., psychiatric inpatient or community residential service).

Discharge ratings for the K10+ are not required for [brief ambulatory episode of mental health care](#) where the number of days between admission to and discharge from the episode of care is 14 days or less duration.

Consumers will be offered to complete the K10+ at the specified Collection occasion but completion by the consumer is not mandatory. There are circumstances where offering such measures will not be appropriate and special considerations apply to the collection of consumer rated measures.

For more information on setting, occasion, or age groups, see the Mental Health National Outcomes and Casemix Collection, Technical specification of State and Territory reporting requirements <https://docs.validator.com.au/nocc/02.10/> (Australian Mental Health Outcomes and Classifications Network, 2022).

DSS specific information:

For the National Outcomes and Casemix Collection (NOCC), this cluster is used to represent questions 1-14 of the Kessler Psychological Distress Scale (last 4 weeks) (K10+) where consumers answer questions about feelings, behaviours, and activities over a rating period. This cluster applies once every time the survey is administered.

The rating period for the K10+ is the "previous 4 weeks".

- 1 [Person—self-assessed mental health status, K10 score code N](#)

Mandatory 10

DSS specific information:

This data element collects data on a person's non-specific psycho-social distress based on ten questions about the level of nervousness, agitation, psychological fatigue, and depression in the relevant rating period.

This data element represents questions 1-10 in the K10+ and should be used 10 times - once each per question.

- 2
- [Person—period of time unable to function, total days NN](#)

Conditional 1

Conditional obligation:

Conditional on there being no CODE 1, “none of the time” responses to [Person—self-assessed mental health status, symptom frequency scale code N](#), recording questions 1-10 of the K10+ survey.

DSS specific information:

This data element collects data on the length of time a person was totally unable to function specifically because of their feelings.

This data element represents question 11 in the K10+ survey and asks:

11. In the past four weeks, how many days were you totally unable to work, study or manage your day-to-day activities because of these feelings?

Permitted values include: 00-28 for 0-28 days

i.e., single digits should be expressed with a leading zero.

Supplementary values include: 99 for Not stated/missing.

- 3
- [Person—period partially unable to function, total days NN](#)

Conditional 1

Conditional obligation:

Conditional on there being no CODE 1, “none of the time” responses to [Person—self-assessed mental health status, symptom frequency scale code N](#), recording questions 1-10 of the K10+ survey.

DSS specific information:

This data element collects data on the length of time a person was partially unable to function specifically because of their feelings.

This data element represents question 12 of the K10+ survey and asks:

12. [Aside from those days], in the past 4 weeks, how many days were you able to work or study or manage your day-to-day activities, but had to cut down on what you did because of these feelings?

Permissible values include: 00-28 for 0-28 days

i.e., single digits should be expressed with a leading zero.

Supplementary values include: 99 for Not stated/missing.

Seq No.	Metadata item	Obligation	Max occurs
4	Person—number of visits to doctor or health professional, total NN Conditional obligation: Conditional on there being no CODE 1, “none of the time” responses to Person—self-assessed mental health status, symptom frequency scale code N, recording questions 1-10 of the K10+ survey. DSS specific information: This data element collects a count of the total number of visits a person has made to a doctor or health professional regarding their feelings in the last 4 weeks. This data element represents question 13 of the K10+ survey and asks: 13. In the past 4 weeks, how many times have you seen a doctor or any other health professional about these feelings? Permissible values include: 00-89 for 0-89 visits i.e., single digits should be expressed with a leading zero. Supplementary values include: 99 for Not stated/missing.	Conditional	1
5	Person—effect of physical health problems on feelings rating, symptom frequency scale code N Conditional obligation: Conditional on there being no CODE 1, “none of the time” responses to Person—self-assessed mental health status, symptom frequency scale code N, recording questions 1-10 of the K10+ survey. DSS specific information: This data element collects data on how often a person's physical health problems were the primary contributor to their feelings. This data element represents question 14 on the K10+ survey and asks: 14. In the past 4 weeks, how often have physical health problems been the main cause of these feelings? Permissible values include: 00-89 for 0-89 visits i.e., single digits should be expressed with a leading zero. Supplementary values include: 99 for Not stated/missing.	Conditional	1

- [Strengths and Difficulties Questionnaire cluster](#)

Conditional 3

Conditional obligation:

In the National Outcomes and Casemix Collection (NOCC) NBEDS, this data element cluster, representing Strengths and Difficulties Questionnaire (SDQ), should be collected where:

Setting: inpatient, residential or ambulatory

Occasion: admission, review, and discharge*

Age group: adults or older persons

* Discharge ratings for the SDQ are not required by the ambulatory service or the consumer respectively, when the reason for the closure of the ambulatory episode is transfer to a bed-based treatment service setting of that organisation (i.e., psychiatric inpatient or community residential service).

Discharge ratings for the SDQ are not required for [brief ambulatory episode of mental health care](#) where the number of days between admission to and discharge from the episode of care is 14 days or less duration.

Consumers will be offered to complete the SDQ at the specified collection occasion but completion by the consumer is not mandatory. There are circumstances where offering such measures will not be appropriate and special considerations apply to the collection of consumer rated measures.

For more information on setting, occasion, or age groups, see the Mental Health National Outcomes and Casemix Collection, Technical specification of State and Territory reporting requirements <https://docs.validator.com.au/nocc/02.10/> (Australian Mental Health Outcomes and Classifications Network, 2022).

DSS specific information:

There are six versions (parent-report and youth-self report) of the Strengths and Difficulties Questionnaire (SDQ) currently specified for National Outcomes and Casemix Collection (NOCC) reporting, with an additional four versions (teacher-report) that may be of use at the clinical level.

The “1” versions are administered on [Admission](#) and are rated on the basis of the preceding 6 months. The “2” follow up versions are administered on review and discharge and are rated on the basis of the previous 1 month period. The versions specified for NOCC reporting are:

- PC1 – Parent Report Measure for children aged 4-10 years, Baseline version, Australian Version 1
- PC2 – Parent Report Measure for children aged 4-10 years, Follow up version, Australian Version 1
- PY1 – Parent Report Measure for children aged 11-17 years, Baseline version, Australian Version 1
- PY2 – Parent Report Measure for children aged 11-17 years, Follow up version, Australian Version 1
- YR1 – Youth Self-report Measure, 11-17 years, Baseline version, Australian Version 1
- YR2 – Youth Self-report Measure, 11-17 years, Follow up version, Australian Version 1

Please note that the item numbering in the SDQ versions is deliberately non sequential because it covers all items in all versions, both to indicate item equivalence across versions and to assist data entry, especially of translated versions.

Seq No.	Metadata item	Obligation	Max occurs
1	Person—presence of behaviour, statement truth rating code N DSS specific information: This data element is collected 25 times, and collects data for mental health assessment, evaluation or screening of persons 4-17 years old. This data element represents the core Strengths and Difficulties Questionnaire (SDQ) survey questions, which are questions 1-25 and which are used in every version of the questionnaire, and ask if the person is: 1. Considerate of other people's feelings 2. Restless, overactive, cannot stay still for long 3. Often complains of headaches, stomach-aches, or sickness 4. Shares readily with other children, for example toys, treats, pencils 5. Often loses temper 6. Rather solitary, prefers to play alone 7. Generally well behaved, usually does what adults request 8. Many worries or often seems worried 9. Helpful if someone is hurt, upset or feeling ill 10. Constantly fidgeting or squirming 11. Has at least one good friend 12. Often fights with other children or bullies them 13. Often unhappy, depressed or tearful 14. Generally liked by other children 15. Easily distracted, concentration wanders 16. Nervous or clingy in new situations, easily loses confidence 17. Kind to younger children 18. Often lies or cheats 19. Picked on or bullied by other children 20. Often volunteers to help others (parents, teachers, other children) 21. Thinks things out before acting 22. Steals from home, school or elsewhere 23. Gets along better with adults than with other children 24. Many fears, easily scared 25. Good attention span, sees chores or homework through to the end	Mandatory	25
2	Person—assessment of overall functionality, 4-point difficulty scale code N Conditional obligation: If CODE 0 "no difficulties" is entered, please further complete Person—period of difficulties experienced, time scale code N with CODE 8 "not applicable"; if CODES 1-3 are entered use permissible values provided. If CODE 0 "no difficulties" is entered, please further complete Person—rating of difficulties experienced, 4 point magnitude scale code N with CODE 8 "not applicable"; if codes 1-3 are entered use permissible values provided. DSS specific information: This data element is collected 1 time, and collects data for mental health assessment, evaluation or screening of persons 4-17 years old. This data element represents question 26 on the Strengths and Difficulties Questionnaire (SDQ) survey, which asks: 26. Overall, do you think that the individual has difficulties in any of the following areas: emotions, concentration, behaviour or being able to get along with other people?	Mandatory	1

3 [Person—period of difficulties experienced, time scale code N](#)

Conditional 1

Conditional obligation:

Use of this data element is conditional on the version of the Strengths and Difficulties Questionnaire (SDQ) ([Collection occasion—survey version, mental health code XX\[XXX\]](#)) being used. It should only be used when the version is one of:

- PC1 – Parent Report Measure for children aged 4-10 years, Baseline version, Australian Version 1
- PY1 – Parent Report Measure for children aged 11-17 years, Baseline version, Australian Version 1
- YR1 – Youth Self-report Measure, 11-17 years, Baseline version, Australian Version 1

If CODE 0 "no difficulties" is entered for [Person—assessment of overall functionality, 4-point difficulty scale code N](#), further complete this item with CODE 8 "not applicable".

If CODES 1-3 are entered for [Person—assessment of overall functionality, 4-point difficulty scale code N](#), further complete this item using permissible values provided.

DSS specific information:

This data element is collected 1 time, and collects data for mental health assessment, evaluation or screening of persons 4-17 years old.

This data element represents question 27 of the Strengths and Difficulties Questionnaire (SDQ) survey, which asks:

27. How long has the individual been having difficulties?

Seq No.	Metadata item	Obligation	Max occurs
4	Person—rating of difficulties experienced, 4-point magnitude scale code N Conditional obligation: If CODE 0 "no difficulties" is entered for question 27 (Person—assessment of overall functionality, 4 point difficulty scale code N), further complete this item with CODE 8 "not applicable". If CODES 1-3 are entered for question 27 (Person—assessment of overall functionality, 4 point difficulty scale code N), further complete this item using permissible values provided. DSS specific information: This data element is collected 6 times, and collects data for mental health assessment, evaluation or screening of persons 4-17 years old. This data element represents questions 28-33 of the Strengths and Difficulties Questionnaire (SDQ) survey, which ask: 28. Do the difficulties upset or distress the individual? Do the difficulties interfere with everyday life in the following areas: 29. Home life 30. Friendships 31. Classroom learning 32. Leisure activities 33. Do the difficulties put a burden on the individual or the family as a whole?	Conditional	6
5	Person—effect of service on overall well-being, rating of change code N Conditional obligation: Use of this data element is conditional on the version of the Strengths and Difficulties Questionnaire (SDQ) (Collection occasion—survey version, mental health code XX[XXX]) being used. It should only be used when the version is one of: • PC2 – Parent Report Measure for children aged 4-10 years, Follow up version, Australian Version 1 • PY2 – Parent Report Measure for children aged 11-17 years, Follow up version, Australian Version 1 • YR2 – Youth Self-report Measure, 11-17 years, Follow up version, Australian Version 1 DSS specific information: This data element is collected once, and collects data for mental health assessment, evaluation or screening of persons 4-17 years old. This data element represents question 34 of the Strengths and Difficulties Questionnaire (SDQ) survey, which asks: 34. Since coming to the service, are the individual's problems: ...	Conditional	1

6 [Person—usefulness of service, 4-point magnitude scale code N](#)

Conditional 1

Conditional obligation:

Use of this data element is conditional on the version of the Strengths and Difficulties Questionnaire (SDQ) ([Collection occasion—survey version, mental health code XX\[XXX\]](#)) being used. It should only be used when the version is one of:

- PC2 – Parent Report Measure for children aged 4-10 years, Follow up version, Australian Version 1
- PY2 – Parent Report Measure for children aged 11-17 years, Follow up version, Australian Version 1
- YR2 – Youth Self-report Measure, 11-17 years, Follow up version, Australian Version 1

DSS specific information:

This data element is collected once, and collects data for mental health assessment, evaluation or screening of persons 4-17 years old.

This data element represents question 35 of the Strengths and Difficulties Questionnaire (SDQ) survey, which asks:

35. Has coming to the service been helpful in other ways, e.g., providing information or making the problems more bearable?

7 [Person—complaints about behaviour, 3-point magnitude scale code N](#)

Conditional 3

Conditional obligation:

Use of this data element is conditional on the version of the Strengths and Difficulties Questionnaire (SDQ) ([Collection occasion—survey version, mental health code XX\[XXX\]](#)) being used.

Questions 36-38 apply to versions:

- PC1 – Parent Report Measure for children aged 4-10 years, Baseline version, Australian Version 1
- PY1 – Parent Report Measure for children aged 11-17 years, Baseline version, Australian Version 1

Questions 39-42 apply to version:

- YR1 – Youth Self-report Measure, 11-17 years, Baseline version, Australian Version 1.

DSS specific information:

This data element is collected 3 times, and collects data for mental health assessment, evaluation or screening of persons 4-17 years old.

This data element represents questions 36-42 of the Strengths and Difficulties Questionnaire (SDQ) survey, which ask:

36. Have teachers complained of: fidgetiness, restlessness or overactivity?

37. Have teachers complained of: poor concentration or being easily distracted?

38. Have teachers complained of: acting without thinking, frequently butting in, or not waiting for the individual's turn?

39. Has family complained of having problems with overactivity or poor concentration?

40. Do teachers complain about problems with overactivity or poor concentration?

41. Does family complain about the individual being awkward or troublesome?

42. Do teachers complain about the individual being awkward or troublesome?

Seq No.	Metadata item	Obligation	Max occurs
-	Collection occasion—measure completion status, mental health code N	Conditional	99
	Conditional obligation: Use of this data element is conditional on the measure being collected. It should be used concurrently with collection of the following measures: • Behavior and Symptom Identification Scale (BASIS-32) Person—Behavior and Symptom Identification Scale rating, 5-point difficulty rating scale code N • Mental Health Inventory (MHI-38) Person—self-assessed mental health status, score code N • Kessler Psychological Distress Scale (K10) Person—self-assessed mental health status, symptom frequency scale code N • Kessler Psychological Distress Scale (K10+) Kessler Psychological Distress Scale (last 4 weeks) cluster • Strengths and Difficulties Questionnaire (SDQ) Strengths and Difficulties Questionnaire cluster For more information on setting, occasion, or age groups, see the Mental Health National Outcomes and Casemix Collection, Technical specification of State and Territory reporting requirements https://docs.validator.com.au/nocc/02.10/ (Australian Mental Health Outcomes and Classifications Network, 2022).		
-	Collection occasion—survey version, mental health code XX[XXX]	Mandatory	99
	Conditional obligation: This data element is used in conjunction with all of the clinician- and consumer-rated measures collected in in the National Outcomes and Casemix Collection (NOCC). See data element guide for use for further details.		
-	Episode of care—FIHS psychosocial complications indicator, yes/no/unable to rate/not stated code N	Conditional	14
	Conditional obligation: In the National Outcomes and Casemix Collection (NOCC) NBEDS, this data element should be collected where: Setting: inpatient, residential or ambulatory Occasion: review and discharge* Age group: child and adolescent * Discharge ratings for the Factors Influencing Health Status (FIHS) are not required by the ambulatory service or the consumer respectively, when the reason for the closure of the ambulatory episode is transfer to a bed-based treatment service setting of that organisation (i.e., psychiatric inpatient or community residential service). Discharge ratings for the FIHS are not required for brief ambulatory episode of mental health care where the number of days between admission to and discharge from the episode of care is 14 days or less duration. For more information on setting, occasion, or age groups, see the Mental Health National Outcomes and Casemix Collection, Technical specification of State and Territory reporting requirements https://docs.validator.com.au/nocc/02.10/ (Australian Mental Health Outcomes and Classifications Network, 2022).		
-	Episode of care—mental health phase of care, code N	Optional	1

Seq No.	Metadata item	Obligation	Max occurs
-	Episode of mental health care—identifier, X(36)	Optional	1
-	Person—level of difficulty with activities in a life area, abbreviated Life Skills Profile score code N	Conditional	48

Conditional obligation:

In the National Outcomes and Casemix Collection (NOCC) NBEDS, this data element should be collected where:

Setting: residential and ambulatory

Occasion:

- For residential setting: admission, review, and discharge
- For ambulatory setting: review, and discharge*

Age group: adults or older persons

* Discharge ratings for the Life Skills Profile (LSP-16) are not required by the ambulatory service or the consumer respectively, when the reason for the closure of the ambulatory episode is transfer to a bed-based treatment service setting of that organisation (i.e., psychiatric inpatient or community residential service).

Discharge ratings for the LSP-16 are not required for [brief ambulatory episode of mental health care](#), where the number of days between admission to and discharge from the episode of care is 14 days or less duration.

For more information on setting, occasion, or age groups, see the [NOCC collection protocol](#) (Australian Mental Health Outcomes and Classifications Network, 2022).

Seq No.	Metadata item	Obligation	Max occurs
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- | | | | |
|---|--|-------------|---|
| - | Person—level of functional independence, Resource Utilisation Groups - Activities of Daily Living score code N | Conditional | 8 |
|---|--|-------------|---|

Conditional obligation:

In the National Outcomes and Casemix Collection (NOCC) NBEDS, this data element should be collected where:

Setting: inpatient and residential

Occasion: admission and review

Age group: older persons

For more information on setting, occasion, or age groups, see the [NOCC collection protocol](#) (Australian Mental Health Outcomes and Classifications Network, 2022).

DSS specific information:

For use in the NOCC, the following labels apply:

RUG-ADL item numbers 1, 2 & 3

- 1: Independent or supervision only
- 3: Limited physical assistance
- 4: Other than 2 - person physical assistance
- 5: 2 - person physical assistance
- 7: Unable to rate (insufficient information)
- 9: Not stated / Missing

RUG-ADL item number 4

- 1: Independent or supervision only
- 2: Limited assistance
- 3: Extensive assistance / Total dependence / Tube fed
- 7: Unable to rate (insufficient information)
- 9: Not stated / Missing

Seq No.	Metadata item	Obligation	Max occurs
-	Person—level of psychiatric symptom severity, Children's Global Assessment Scale score code N[NN] Conditional obligation: In the National Outcomes and Casemix Collection (NOCC) NBEDS, this data element should be collected where: Setting: inpatient, residential or ambulatory Occasion: admission and review Age group: child and adolescent For more information on setting, occasion, or age groups, see the Mental Health National Outcomes and Casemix Collection, Technical specification of State and Territory reporting requirements https://docs.validator.com.au/nocc/02.10/ (Australian Mental Health Outcomes and Classifications Network, 2022).	Conditional	2
-	Person—level of psychiatric symptom severity, Health of the Nation Outcome Scale for Children and Adolescents score code N Conditional obligation: In the National Outcomes and Casemix Collection (NOCC) NBEDS, this data element should be collected where: Setting: inpatient, residential or ambulatory Occasion: admission, review, and discharge* Age group: child and adolescent * Discharge ratings for the Health of the Nation Outcome Scale Child and Adolescent (HoNOSCA) are not required by the ambulatory service or the consumer respectively, when the reason for the closure of the ambulatory episode is transfer to a bed-based treatment service setting of that organisation (i.e., psychiatric inpatient or community residential service). Where possible, the HoNOSCA ratings for admission in the inpatient unit or the community residential care setting are reported as the consumer's discharge ratings from the ambulatory episode. Discharge ratings for the HoNOSCA are not required for brief ambulatory episode of mental health care where the number of days between admission to and discharge from the episode of care is 14 days or less duration. Discharge ratings for the HoNOSCA are not required for inpatient episodes of 3 days or less duration. For more information on setting, occasion, or age groups, see the NOCC collection protocol (Australian Mental Health Outcomes and Classifications Network, 2022).	Conditional	45

Seq No.	Metadata item	Obligation	Max occurs
-	Person—level of psychiatric symptom severity, Health of the Nation Outcome Scale other type code A Conditional obligation: In the National Outcomes and Casemix Collection (NOCC) NBEDS, this data element should be collected where: Setting: inpatient, residential or ambulatory Occasion: admission, review, and discharge* Age group: adults or older persons * Discharge ratings for the Health of the Nation Outcome Scale (HoNOS) are not required by the ambulatory service or the consumer respectively, when the reason for the closure of the ambulatory episode is transfer to a bed-based treatment service setting of that organisation (i.e., psychiatric inpatient or community residential service). Where possible, the HoNOS ratings for admission in the inpatient unit or the community residential care setting are reported as the consumer's discharge ratings from the ambulatory episode. Discharge ratings for the HoNOS are not required for brief ambulatory episode of mental health care, where the number of days between admission to and discharge from the episode of care is 14 days or less duration. Discharge ratings for the HoNOS are not required for inpatient episodes of 3 days or less duration. For more information on setting, occasion, or age groups, see the NOCC collection protocol (Australian Mental Health Outcomes and Classifications Network, 2022). DSS specific information: This item is used in conjunction with Person—level of psychiatric symptom severity, Health of the Nation Outcome Scale score code N. It records supplementary information about types of mental or behavioural problems.	Conditional	3

Seq No.	Metadata item	Obligation	Max occurs
-	Person—level of psychiatric symptom severity, Health of the Nation Outcome Scale score code N	Conditional	36
Conditional obligation:			
In the National Outcomes and Casemix Collection (NOCC) NBEDS, this data element should be collected where:			
Setting: inpatient, residential or ambulatory			
Occasion: admission, review, and discharge*			
Age group: adults or older persons			
* Discharge ratings for the Health of the Nation Outcome Scale (HoNOS) are not required by the ambulatory service or the consumer respectively, when the reason for the closure of the ambulatory episode is transfer to a bed-based treatment service setting of that organisation (i.e., psychiatric inpatient or community residential service). Where possible, the HoNOS ratings for admission in the inpatient unit or the community residential care setting are reported as the consumer's discharge ratings from the ambulatory episode. Discharge ratings for the HoNOS are not required for brief ambulatory episode of mental health care, where the number of days between admission to and discharge from the episode of care is 14 days or less duration. Discharge ratings for the HoNOS are not required for inpatient episodes of 3 days or less duration. For more information on setting, occasion, or age groups, see the NOCC collection protocol (Australian Mental Health Outcomes and Classifications Network, 2022).			

- [Person—self-assessed mental health status, BASIS-32 score code N](#)

Conditional 96

Conditional obligation:

In the National Outcomes and Casemix Collection (NOCC) NBEDS, this data element should be collected where:

Setting: inpatient, residential or ambulatory

Occasion: admission, review, and discharge*

Age group: adults or older persons

* Discharge ratings for the Behavior and Symptom Identification Scale (BASIS-32) are not required by the ambulatory service or the consumer respectively, when the reason for the closure of the ambulatory episode is transfer to a bed-based treatment service setting of that organisation (i.e., psychiatric inpatient or community residential service).

Discharge ratings for the BASIS-32 are not required for [brief ambulatory episode of mental health care](#) where the number of days between admission to and discharge from the episode of care is 14 days or less duration.

Consumers will be offered to complete the BASIS-32 at the specified Collection occasion but completion by the consumer is not mandatory. There are circumstances where offering such measures will not be appropriate and special considerations apply to the collection of consumer rated measures.

For more information on setting, occasion, or age groups, see the Mental Health National Outcomes and Casemix Collection, Technical specification of State and Territory reporting requirements <https://docs.validator.com.au/nocc/02.10/> (Australian Mental Health Outcomes and Classifications Network, 2022).

DSS specific information:

For the National Outcomes and Casemix Collection (NOCC), this data element is used to represent questions 1-32 the Behavior and Symptom Identification Scale (BASIS-32) where consumers answer questions about their difficulties over a rating period with a single allowable response for each question. This data element is re-used 32 times to represent all questions in the measure.

The rating period for the BASIS-32 is the "past two weeks" in order to align the measure with clinician-rated measures and facilitate comparison.

- [Person—self-assessed mental health status, K10 score code N](#)

Conditional 30

Conditional obligation:

In the National Outcomes and Casemix Collection (NOCC) NBEDS, this data element, representing the K10 Screening Scale for Psychological Distress (K10), should be collected where:

Setting: inpatient, residential or ambulatory

Occasion: admission, review, and discharge*

Age group: adults or older persons

* Discharge ratings for the K10 are not required by the ambulatory service or the consumer respectively, when the reason for the closure of the ambulatory episode is transfer to a bed-based treatment service setting of that organisation (i.e., psychiatric inpatient or community residential service).

Discharge ratings for the K10 are not required for [brief ambulatory episode of mental health care](#) where the number of days between admission to and discharge from the episode of care is 14 days or less duration.

Consumers will be offered to complete the K10 at the specified Collection occasion but completion by the consumer is not mandatory. There are circumstances where offering such measures will not be appropriate and special considerations apply to the collection of consumer rated measures.

For more information on setting, occasion, or age groups, see the Mental Health National Outcomes and Casemix Collection, Technical specification of State and Territory reporting requirements <https://docs.validator.com.au/nocc/02.10/> (Australian Mental Health Outcomes and Classifications Network, 2022).

DSS specific information:

For the National Outcomes and Casemix Collection (NOCC), this data element is used to represent questions 1-10 of the K10 Screening Scale for Psychological Distress (K10) where consumers answer questions about psycho-social distress over the rating period with a single allowable response for each question. This data element is re-used 10 times to represent all questions in the measure.

For use in the National Outcomes and Casemix Collection, this data element can be used singly for the rating period called "last 3 days" (K10L3D). That rating period is for use in inpatient settings where the [service event](#) is of less than 3 days duration.

This data element can also be used as part of a K10 cluster which has a rating period of "previous 4 weeks". That [K10 Screening Scale for Psychological Distress last 4 weeks cluster](#) (K10+ or K10+LM).

- [Person—self-assessed mental health status, MHI-38 score code N](#)

Conditional 74

Conditional obligation:

In the National Outcomes and Casemix Collection (NOCC) NBEDS, this data element should be collected where:

Setting: inpatient, residential or ambulatory

Occasion: admission, review, and discharge*

Age group: adults or older persons

* Discharge ratings for the Mental Health Inventory (MHI-38) are not required by the ambulatory service or the consumer respectively, when the reason for the closure of the ambulatory episode is transfer to a bed-based treatment service setting of that organisation (i.e., psychiatric inpatient or community residential service).

Discharge ratings for the MHI-38 are not required for [brief ambulatory episode of mental health care](#) where the number of days between admission to and discharge from the episode of care is 14 days or less duration.

Consumers will be offered to complete MHI-38 at the specified Collection occasion but completion by the consumer is not mandatory. There are circumstances where offering such measures will not be appropriate and special considerations apply to the collection of consumer rated measures.

For more information on setting, occasion, or age groups, see the Mental Health National Outcomes and Casemix Collection, Technical specification of State and Territory reporting requirements <https://docs.validator.com.au/nocc/02.10/> (Australian Mental Health Outcomes and Classifications Network, 2022).

DSS specific information:

For the National Outcomes and Casemix Collection (NOCC), this data element is used to represent questions 1-38 of the Mental Health Inventory (MHI-38) survey instrument. Questions are asked of the consumer about the rating period, with a single allowable response for each question. This data element is re-used 38 times to represent all questions in the measure.

The rating period for the MHI-38 is the past month.