

KPIs for Australian Public Mental Health Services: PI 17bJ – Involuntary patient days, 2024

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KPIs for Australian Public Mental Health Services: PI 17bJ – Involuntary patient days, 2024

Identifying and definitional attributes

Metadata item type:	Indicator
Indicator type:	Indicator
Short name:	MHS PI 17bJ: Involuntary patient days, 2024
METEOR identifier:	783673
Registration status:	Health , Standard 29/05/2024
Description:	The percentage of admitted patient specialised mental health care patient days where the consumer has a mental health legal status of 'involuntary'.
Rationale:	<ul style="list-style-type: none">• Every jurisdiction in Australia has legislation to enable people with mental illness to be treated involuntarily under certain conditions. This means treatment for mental illness, including medication, restraint, seclusion and therapeutic interventions, can be provided without the individual's consent, either in hospital or in the community.• Monitoring the frequency and proportion of patient care provided on an involuntary basis are important steps in understanding the use of restrictive practices in Australian public hospitals.
Indicator set:	Key Performance Indicators for Australian Public Mental Health Services (Jurisdictional level version) (2024) Health , Standard 29/05/2024

Collection and usage attributes

Computation description: Coverage/Scope:

State/territory public admitted patient mental health service units. Only public hospitals are in scope for this indicator.

Methodology:

- Reference period for 2024 performance reporting: 2022–23.
- Patient days are for all separations that ended within the reference period.
- Patient days should be reported as whole numbers. A stay that continues past midnight is counted as 1 day, with 1 day added each time midnight is passed.
 - Overnight episodes: Total patient days is a count of the number of nights for the person's length of stay—that is, the number of nights where the person is admitted as at midnight—minus any leave days. Involuntary patient days are a count of the number of nights where the person has had a mental health legal status of involuntary at any time before midnight.
 - Where a person has a mental health legal status of involuntary at midnight, count as 1 involuntary patient day. Where a person has a mental health legal status of voluntary at midnight and has had a part-day of involuntary treatment, count as 1 involuntary patient day.
 - Involuntary care on the day of separation is not counted, except for same-day episodes.
 - Same-day episodes: Where a person is admitted and separated on the same date, count as 1 full patient day. If the person was involuntary for any part of a same-day episode, count as 1 involuntary patient day.
- [Mental health legal status](#) is defined for this indicator as: 'Whether a person is treated on an involuntary basis under the relevant state or territory mental health legislation'.
- Involuntary patients are persons who are compulsorily treated in hospital or in the community under relevant state and territory legislation for the purpose of assessment or provision of appropriate treatment or care. All types of treatment orders are in scope for this indicator, regardless of the setting of the treatment order. For example, admitted patients who are under a community treatment order are in scope for the numerator of this indicator.

Computation: (Numerator ÷ Denominator) x 100

Numerator: [Number of psychiatric care days](#) where patients have a mental health legal status of 'Involuntary'.

Numerator data elements:

Data Element / Data Set

Specialised mental health service—number of psychiatric care days where patients have a mental health legal status of 'Involuntary'

Data Source

[State/territory admitted patient data](#)

Denominator: Total [number of psychiatric care days](#) for admitted patient mental health care services.

Denominator data elements:

Data Element / Data Set

Specialised mental health service—total number of psychiatric care days

Data Source

[State/territory admitted patient data](#)

Disaggregation: Service variables: acute/non-acute units, and target population.

Consumer attributes: age, sex, and Indigenous status.

Disaggregated data excludes missing or not reported data.

Data Element / Data Set

Disaggregation data elements:

Data Element / Data Set

Admitted mental health service—admitted patient care program type

Data Source

[State/territory admitted patient data](#)

Guide for use

Data source type: Administrative by-product data

Data Element / Data Set

Admitted mental health service—target population

Data Source

[State/territory admitted patient data](#)

Guide for use

Data source type: Administrative by-product data

Target population refers to the [target population](#) of the service unit.

Data Element / Data Set

Person—age

Data Source

[State/territory admitted patient data](#)

Guide for use

Data source type: Administrative by-product data

Data Element / Data Set

Person—Indigenous status

Data Source

[State/territory admitted patient data](#)

Guide for use

Data source type: Administrative by-product data

Data Element / Data Set

Person—sex

Data Source

[State/territory admitted patient data](#)

Guide for use

Data source type: Administrative by-product data

Comments: Most recent data available for reporting: 2022–23. This indicator refers to the inpatient setting only.

Representational attributes

Representation class: Percentage
Data type: Real
Unit of measure: Day
Format: N[NN].N

Indicator conceptual framework

Framework and dimensions: [Safety](#)

Data source attributes

Data sources:

Data Source

[State/territory admitted patient data](#)

Frequency

Annual

Data custodian

State/territory health authorities

Accountability attributes

Reporting requirements: National Health Reform Agreement

Organisation responsible for providing data: State/territory health departments

Accountability: Australian Institute of Health and Welfare

Other issues caveats: The use of involuntary treatment is governed by either legislation (a Mental Health Act or equivalent) or mandatory policy within each state and territory. The definitions used within the legislation and policies vary between jurisdictions including, but not limited to, forensic-related legislation that applies to admitted patient mental health services. These variations should be recognised in the interpretation of the indicator.

Source and reference attributes

Submitting organisation: Australian Institute of Health and Welfare

Reference documents: CHC (Council of Australian Governments Health Council) (2018). The Fifth National Mental Health and Suicide Prevention Plan. Canberra: Commonwealth of Australia.

Relational attributes

Related metadata references: Supersedes [KPIs for Australian Public Mental Health Services: PI 17bJ – Involuntary patient days, 2023](#)
[Health](#), Superseded 29/05/2024

See also [KPIs for Australian Public Mental Health Services: PI 17aJ – Involuntary hospital treatment, 2024](#)
[Health](#), Standard 29/05/2024