KPIs for Australian Public Mental Health Services: PI 15J – Rate of seclusion, 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 BY4.0 (CC BY4.0) 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 15J – Rate of seclusion, 2017

Identifying and definitional attributes

Metadata item type:	Indicator
Indicator type:	Indicator
Short name:	MHS PI 15J: Rate of seclusion, 2017
METEOR identifier:	663842
Registration status:	Health!, Standard 14/06/2017
Description:	Number of seclusion events per 1,000 patient days within public acute admitted patient specialised mental health service units.
	NOTE: This specification has been adapted from the indicator <u>MHS PI 15: Rate of seclusion, 2015</u> (Service level version) using terminology consistent with the National Health Data Dictionary. There are technical differences in the scope of services between the Service level version and the Jurisdictional level version of this indicator. Caution should be taken to ensure the correct methodology is followed.
Rationale:	 The reduction, and where possible, elimination of seclusion in mental health services has been identified as a priority in the publication National safety priorities in mental health: a national plan for reducing harm. High levels of seclusion are widely regarded as inappropriate treatment, and may point to inadequacies in the functioning of the overall systems and risks to the safety of consumers receiving mental health care. The use of seclusion in public sector mental health service organisations is regulated under legislation and/or policy of each jurisdiction.
Indicator set:	Key Performance Indicators for Australian Public Mental Health Services (Jurisdictional level version) (2017) Health!, Standard 14/06/2017

Collection and usage attributes

Computation description:	Coverage/Scope:	
	State/territory public acute admitted patient mental health service units in-scope for reporting in accordance with the Mental health seclusion and restraint National best endeavours data set.	
	• Services where seclusion is not an authorised practice under relevant mental health legislation and/or policy (such as non-gazetted admitted patient units that are not authorised to admit consumers on an involuntary basis) should be excluded (from numerator and denominator).	
	Methodology:	
	Reference period for 2017 performance reporting: 2016–17	
	 Seclusion and restraint data are compiled by state/territory data providers according to the specifications of the Mental health seclusion and restraint National best endeavours data set. As such, data are subject to the concepts and definitions developed for the data set. For the purpose of this indicator, when a mental health service organisation has more than one unit of a particular admitted patient care program, those units should be combined. 	
Computation:	(Numerator ÷ Denominator) x 1,000	
Numerator:	Total number of seclusion events	

Numerator data elements:	Data Element / Data Set
	Specialised mental health service—number of seclusion events, total number N[NNN] NMDS / DSS Mental health seclusion and restraint NBEDS 2015-
Denominator:	Total number of accrued mental health care days.
Denominator data	Data Element / Data Set
elements:	Establishment—accrued mental health care days, total N[N(7)]
	NMDS / DSS
	Mental health seclusion and restraint NBEDS 2015-
Disaggregation:	Service variables: Target population, remoteness
	Consumer attributes: Nil
Disaggregation data	Data Element / Data Set
elements:	
	Address—statistical area, level 2 (SA2) code (ASGS 2011) N(9)
	NMDS / DSS
	Mental health seclusion and restraint NBEDS 2015-

-Data Element / Data Set-

Specialised mental health service-target population group, code N

NMDS / DSS

Mental health seclusion and restraint NBEDS 2015-

Representational attributes

Representation class:	Rate
Data type:	Real
Unit of measure:	Episode
Format:	N[NN].N

Indicator conceptual framework

Framework and	<u>Safe</u>
dimensions:	

Appropriate

Accountability attributes

Benchmark: State/territory level

Further data development / collection required:	To construct this indicator at a national level requires separate indicator data to be provided individually by states and territories.
	National collection of seclusion and restraint data is being progressed through the establishment of the Mental Health Seclusion and Restraint National best endeavours data set, with data supplied by state/territories via an ongoing agreement facilitated by the Safety and Quality Partnership Standing Committee, which is a subcommittee, of the Mental Health, Drug and Alcohol Principal Committee (MHDAPC).
Other issues caveats:	 The use of seclusion 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 slightly between jurisdictions. These variations should be recognised in the interpretation of the indicator. The duration of seclusion is an essential piece of information to align with an indicator of the rate or frequency of seclusion as it provides a better understanding of an organisation's performance in relation to seclusion use and management. However, the capacity to collect information regarding duration of seclusion episodes varies substantially across jurisdictions. Work continues at a national level that will facilitate the development of a meaningful indicator of duration as it is likely to be easily skewed by outliers.

Source and reference attributes

 Submitting organisation:
 Australian Institute of Health and Welfare on behalf of the National Mental Health Performance Subcommittee

 Reference documents:
 National Mental Health Performance Subcommittee 2013. Key Performance Indicators for Australian Public Mental Health Services, 3rd edn. Canberra: NMHPC.

 National Mental Health Working Group (2005) National safety priorities in mental health: a national plan for reducing harm, Health Priorities and Suicide Prevention Branch, Department of Health and Ageing, Commonwealth of Australia, Canberra.

Relational attributes

 Related metadata
 Supersedes KPIs for Australian Public Mental Health Services: PI 15J – Rate of seclusion, 2016

 Health!, Superseded 14/06/2017

 Has been superseded by KPIs for Australian Public Mental Health Services: PI 15J – Seclusion rate, 2018

Health!, Superseded 16/02/2021