KPIs for Australian Public Mental Health Services: PI 07 – Average cost per community mental health treatment day, 2020– (Service level)



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KPIs for Australian Public Mental Health Services: Pl 07 – Average cost per community mental health treatment day, 2020– (Service level)

Identifying and definitional attributes

Metadata item type: Indicator Indicator type: Indicator

Short name: MHS PI 07: Average cost per community mental health treatment day, 2020–

(Service level)

METEOR identifier: 725505

Registration status: Health!, Standard 13/01/2021

Description: The average cost per community treatment day provided by the organisation's

ambulatory mental health care services.

NOTE: This indicator is related to *Average cost per community mental health treatment day (Jurisdictional level)*. 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.

Rationale: Efficient functioning of public community mental health services is critical to ensure

that finite funds are used effectively to deliver maximum community benefit.

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.

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.

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A nationally agreed definition of treatment episodes in the community has not yet been developed. In the meantime, community treatment day is used as a valid intermediate product for comparing efficiency. Noting other options are available.

Indicator set: Key Performance Indicators for Australian Public Mental Health Services (Service

level version) (2020-)

Health!, Standard 13/01/2021

Collection and usage attributes

Computation description: Coverage/Scope:

All public mental health service organisations' ambulatory mental health care

services.

Methodology:

Recurrent costs include costs directly attributable to the community treatment day plus a proportional share of overhead costs. Cost data for this indicator is based on gross recurrent expenditure as compiled by Health Departments according to the specifications of the Mental Health Establishments National Minimum Data Set (NMDS). As such, it is subject to the concepts, definitions and costing methodology

developed for the NMDS.

Computation: Numerator ÷ Denominator

Numerator: Total of the mental health service organisation's recurrent expenditure on

ambulatory mental health care services within the reference period.

Denominator: Total number of community treatment days provided by the organisation's

ambulatory mental health care services within the reference period.

Disaggregation: Service variables: target population

Consumer attributes: nil

Representational attributes

Representation class: Mean (average) Data type: Monetary amount

Unit of measure: Currency Format: N[NNN]

Indicator conceptual framework

Framework and dimensions:

Efficiency and sustainability

Accountability attributes

Benchmark: Levels at which the indicator can be useful for benchmarking:

· service unit

mental health service organisation

· regional group of services

state/territory.

collection required:

Further data development / 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 and costing

according to actual service use).

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

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

Performance Subcommittee

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 07 - Average

cost per community mental health treatment day, 2019 (Service level)

Health!, Superseded 16/02/2021

Has been superseded by KPIs for Australian Public Mental Health Services: PI 07 - Average cost per community mental health treatment day, 2021- (Service level)

Health!, Standard 17/12/2021