KPIs for Australian Public Mental Health Services: PI 04 – Average length of acute mental health inpatient stay, 2021– (Service level)

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 04 – Average length of acute mental health inpatient stay, 2021– (Service level)

|  |  |
| --- | --- |
| Identifying and definitional attributes | |
| Metadata item type: | Indicator |
| Indicator type: | Indicator |
| Short name: | MHS PI 04: Average length of acute mental health inpatient stay, 2021– (Service level) |
| METEOR identifier: | 742471 |
| Registration status: | [Health!](https://meteor-uat.aihw.gov.au/RegistrationAuthority/14), Standard 17/12/2021 |
| Description: | The average length of stay of in-scope overnight separations from acute psychiatric inpatient units managed by the mental health service organisation.  **NOTE:** This indicator is related to *Average length of acute mental health inpatient stay (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 available data sources to construct this indicator. Caution should be taken to ensure the correct methodology is followed. |
| Rationale: | Length of stay is a key driver of variation in admitted patient day costs and reflects differences between mental health service organisations in practice and casemix, or both. The aim of this indicator is to better understand the factors underlying variation (such as costs) as well as providing a basis for utilisation review. For example, it allows for the assessment of services provided to particular consumer groups against clinical protocols developed for those groups. |
| Indicator set: | [Key Performance Indicators for Australian Public Mental Health Services (Service level version) (2021–)](https://meteor-uat.aihw.gov.au/content/742456)  [Health!](https://meteor-uat.aihw.gov.au/RegistrationAuthority/14), Standard 17/12/2021 |

|  |  |
| --- | --- |
| Collection and usage attributes | |
| Computation description: | Coverage/Scope:  All public mental health service organisations acute psychiatric inpatient units.  The following separation and associated patient days are excluded:   * same day separations.   For jurisdictional level reporting the following separation and associated patient days are excluded:   * forensic services.   Methodology:   * Length of stay is measured in patient days. * Length of an overnight patient stay is calculated by subtracting the admission date from the date of separation and deducting total leave days. * 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. * The categorisation of the admitted patient unit is based on the principal purpose(s) of the admitted patient care program rather than the classification of individual consumers. |
| Computation: | Numerator ÷ Denominator |
| Numerator: | Number of patient days in the mental health service organisation’s acute psychiatric inpatient unit(s) accounted for by in-scope overnight separations during the reference period. |
| Denominator: | Number of in-scope overnight separations from the mental health service organisation’s acute psychiatric inpatient unit(s) occurring within the reference period. |
| Disaggregation: | Service variables: target population, disorder specific services.  Consumer attributes: diagnosis, age, Socio-Economic Indexes for Areas (SEIFA), remoteness, Indigenous status, involuntary status. |
| Comments: | * Casemix adjustment is needed to interpret variation between organisations – to distinguish consumer and provider factors. * Leave presents special complexities in the mental health area and further work is required to ensure that it does not distort this indicator. |
| Representational attributes | |
| Representation class: | Mean (average) |
| Data type: | Real |
| Unit of measure: | Time (e.g. days, hours) |
| Format: | N[NN].N |
| Indicator conceptual framework | |
| Framework and dimensions: | [Efficiency and sustainability](https://meteor-uat.aihw.gov.au/content/721208) |
| Accountability attributes | |
| Benchmark: | Levels at which the indicator can be useful for benchmarking:   * service unit * mental health service organisation * regional group services * state/territory. |
| 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 (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 04 – Average length of acute mental health inpatient stay, 2020– (Service level)](https://meteor-uat.aihw.gov.au/content/725507)  [Health!](https://meteor-uat.aihw.gov.au/RegistrationAuthority/14), Standard 13/01/2021 |