

OPERATIONAL CIRCULAR

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Subject: MANDATORY DATA COLLECTION AND RECORDING REQUIREMENTS FOR PUBLIC MENTAL HEALTH SERVICES

1. Purpose

This operational circular describes the mandatory data collection and recording requirements for all public mental health services in Western Australia. Public mental health services include:

- Public psychiatric hospitals and designated psychiatric units in general hospitals.
- Mental Health Community-based residential services.
- Ambulatory mental health services which include outpatient mental health services in hospitals and community based mental health services.

This circular should be read in conjunction with Operational Circulars:

- Access to the Mental Health Clinical Information System PSOLIS – OP 1914/05
- Ambulatory (Community) Mental Health Data Collection – OP 1916/05

2. Background

In 1992, Australian Health Ministers endorsed the National Mental Health Strategy. An important factor contributing to the Strategy was recognition of the lack of quality information and the absence of a consistent data collection for mental health. The Strategy gave priority to improving the quality and availability of mental health data and this commitment requires all States and Territories in Australia to provide “agreed data” to the Australian Government. The provision of the agreed data is mandatory under both the Australian Health Care Agreement and the supplementary Information Development Funding Agreements.

3. Mandatory Data Collections

There are currently three mandatory data collections that all public mental health services (MHS) in Australia contribute to, as follows:

A. National Survey of Mental Health Services (The Survey)

As part of the commitment to improve the quality and availability of mental health data, Health Ministers in Australia agreed to establish a system for annual reporting of progress in achieving the Strategy’s reform objectives. The Survey is an annual collection of establishment level data from publicly funded mental health services. The Survey collects information on expenditure, staffing, service types, activity level and consumer and carer involvement at a service level.

The Office of Mental Health coordinates and validates the Survey in collaboration with the Heads (Managers and Directors) of MHS. The Survey is not referred to any further in this Operational Circular.

B. National Minimum Data Sets (NMDS) - Mental Health Care

A NMDS is a core set of data elements agreed by the National Health Information Management Group for mandatory collection and reporting at the national level. A NMDS is contingent upon a national agreement to collect uniform information and supply it as part of the national collection, but does not preclude agencies and service providers from collecting additional data to meet their specific needs. The National Health Data Dictionary (NHDD) is the authoritative source of health data definitions used in Australia where national consistency is required.

The NMDS Mental Health Care comprises the following data sets:

- NMDS Admitted Patient Mental Health Care (including establishment and patient record level data).
- NMDS Community Mental Health Care (patient record level data).
- NMDS Community Mental Health Establishments.

A fourth NMDS Residential Mental Health Care is currently in the developmental phase and is due for introduction in 2004-05.

C. The National Outcome and Casemix Collection (NOCC)

The NOCC is the most recently introduced mandatory data collection in all jurisdictions in Australia. In June 1999, the Australian Health Ministers Advisory Council National Mental Health Working Group agreed to a plan that committed all States and Territories to:

- The introduction of routine consumer outcomes assessments using nationally agreed clinical assessment tools and a consumer self-report instrument.
- The further development of a casemix classification for mental health as a clinical and management information tool.
- The national analysis of data for development of 'service quality' benchmarks.¹

The NOCC has been designed to supplement the two record level data collections of the NMDS Mental Health Care. Both NOCC and NMDS collections cover the same health events. The NOCC is more clinically focussed and importantly collects information on the outcomes of care.

4. Mandatory Recording Requirements – NMDS and NOCC

NMDS:

The Health Information Centre (HIC), Department of Health (DoH) receives data recorded by MHS into TOPAS, HCARE and PSOLIS for the provision of nationally agreed mandatory data to the Australian and State Government statutory authorities. This process will continue in the same way, as PSOLIS (the replacement for LAMHIS) has been developed to be fully compliant with all the requirements of the NMDS. All mandatory data fields in PSOLIS have an asterisk (*) attached to them and no further progress through the system will be permitted until information is recorded in these data fields.

¹ For further details, see the *Mental Health Information Development: National Information Priorities and Strategies under the Second National Mental Health Plan 1998-2003*. Commonwealth Department of Health & Aged Care, Canberra, June 1999

The current National Health Data Dictionary (NHDD) contains details on the nationally agreed mandatory data items for admitted and non-admitted mental health care and can be accessed through the Australian Institute of Health and Welfare (AIHW) website <http://www.aihw.gov.au/> under Publications.

Mental health inpatient services that are currently using TOPAS should continue to do so for admission and discharge details and this information is automatically copied into PSOLIS via the TOPAS to PSOLIS interface. Together with other specific fields that need to be entered directly into PSOLIS, this will comprise the complete record and NMDS data will be extracted from this record as has been done previously. In the current version of PSOLIS, the additional 'site specific' admission fields that need to be entered directly into PSOLIS are:

- Source of referral – Transport;
- Care type changes;
- Payment classification; and
- Insurance status.

The only additional discharge field to be entered directly into PSOLIS when discharge to another hospital or institution is selected in TOPAS is 'Discharged to'.

Ambulatory (non-admitted) service provision by MHS are known as 'service events' in PSOLIS. Please refer to the Ambulatory (Community) Mental Health Data Collection Operational Circular for definitions of and business rules governing service events, service event items and occasions of service.

More information on the NMDS can be accessed through the AIHW website: http://www.aihw.gov.au/pls/nhik/nhik_agreements.agreements_search.

NOCC:

The document National Outcomes and Casemix Collection: Technical Specification of State and Territory Reporting Requirements for the Outcomes and Casemix Components of Agreed data under National Mental Health Information Development Funding Agreements details the scope of requirements covering all public mental health services. It includes all the mandatory instruments for collection by the States and Territories of Australia. For the current version of the NOCC Technical Specifications document please go to the website address <http://www.mhidp.health.wa.gov.au/one/index.asp> and click on 'About outcome measurement' or 'Useful Resources' and select further reading.

Clinical and administrative staff members in public MHS are required to record data collected in compliance with the NOCC protocol into PSOLIS. There is no requirement for a hard copy of All NOCC outcome measures that are recorded electronically in PSOLIS to be stored in clinical medical record files. However, the hard copies of the consumer self-reports including the Mental Health Inventory (MHI), the Strengths and Difficulties Questionnaire (SDQ), and the Kessler 10 should be placed in the medical record. In addition, a hard copy of the summary graphs and/or summary reports generated by PSOLIS is to be stored in the appropriate section of the medical record. Care should be taken not to add paper forms to the medical record unless it is clinically warranted.

For general policies and procedures regarding retention and disposal of records, refer to "The Patient Information Retention and Disposal Schedule Version 2, 2000" which can be accessed through the DoH website: http://www.intranet.health.wa.gov.au/Records/archives-gda_patient.cfm

The accurate entry of all data collected after completing outcome measures is a critical success factor for the NOCC. This will enable clinicians to make:

- Meaningful interpretation of change scores - Where clients and clinicians will be able to determine if and how client outcomes as measured by the instruments change over a period of time.
- Cross sectional comparisons - Where outcomes for clients with the same case complexity and diagnosis can be compared.

A table outlining the mandatory data to be collected at each Collection Occasion within each Mental Health Service Setting, for consumers in each Age Group is shown below.

Mandatory Instruments for the NOCC

<i>Mental Health Service Setting</i>	INPATIENT			COMMUNITY RESIDENTIAL Whitby & Hampton Rd			AMBULATORY (Community Mental Health)		
	<i>Collection Occasion</i>	A	R	D	A	R	D	A	R
Children and Adolescents				NIL IN WA					
HoNOSCA	●	●	●				●	●	●
CGAS	●	●	✘				●	●	✘
FIHS	✘	●	●				✘	●	●
Principal and Additional Diagnoses	✘	●	●				✘	●	●
Mental Health Legal Status	✘	●	●				✘	●	●
Adults				Hampton Rd only					
HoNOS	●	●	●	●	●	●	●	●	●
LSP-16	✘	✘	✘	●	●	●	✘	●	●
Consumer self-report-K10+	✘	✘	✘	●	●	●	●	●	●
Principal and Additional Diagnoses	✘	●	●	✘	●	●	✘	●	●
Focus of Care	✘	✘	✘	✘	✘	✘	✘	●	●
Mental Health Legal Status	✘	●	●	✘	●	●	✘	●	●
Older persons				NIL IN WA					
HoNOS 65+	●	●	●				●	●	●
LSP-16	✘	✘	✘				✘	●	●
RUG-ADL	●	●	✘				✘	✘	✘
Consumer self-report-K10+	✘	✘	✘				●	●	●
Principal and Additional Diagnoses	✘	●	●				✘	●	●
Focus of Care	✘	✘	✘				✘	●	●
Mental Health Legal Status	✘	●	●				✘	●	●

Abbreviations and Symbols

- A** Admission to Mental Health Care
- R** Review of Mental Health Care
- D** Discharge from Mental Health Care
- Collection of data on this occasion is mandatory

Mandatory collection occasions for the NOCC

Movement between Inpatient and Community (Ambulatory) Settings

A mandatory NOCC collection occasion occurs when a client moves from one service setting to another, for example, community to inpatient or inpatient to community.

Transfer of care between two different Mental Health Service Organisations

A mandatory NOCC collection occasion occurs when a client is transferred from one MHS organisation to another. The following are some examples of transfers between two different MHS organisations:

- Alma Street inpatient service setting to Graylands Hospital.
- Kalgoorlie inpatient service setting to Graylands Hospital.
- PARK Community service setting to Alma Street inpatient.

If a client moves from a community service setting from one MHS Organisation (e.g. Kalgoorlie) to another MHS Organisation (e.g. Graylands) and they have not been discharged from the community service (the intention is that they will return after a period of hospitalisation), a '**Review – other**' collection is to be completed. This will capture the change in the mental status of the client that led to the hospitalisation. When the client returns to the community service another '**Review - other**' collection is to be completed.

For more information on MHS organisations, refer to the PSOLIS User Manual available: <http://tst.psolis.health.wa.gov.au/docs.asp>

5. Monitoring and Reporting

NMDS:

Following receipt of the mandatory NMDS data recorded by MHS, the HIC validates the data with respect to data quality issues and liaises with MHS as required prior to forwarding de-identified data extracts to the Australian Government.

NOCC:

Following receipt of the mandatory NOCC data recorded by MHS, the HIC in collaboration with the OMH will validate the data received with respect to compliance and data quality issues and liaise with MHS as required prior to forwarding de-identified data extracts to the Australian Government.

6. Timelines

It is the responsibility of the Heads of MHS to ensure the accurate and timely entry of mandatory data. The NOCC Technical Specifications referred to in 4 above sets out the timeframe for collection and recording of data.

7. Date effective

The effective date for MHS to implement this operational circular is the date of issue.

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