National Mental Health Benchmarking Project

An Australian Government funded initiative

COMPARATIVE INDICATORS

3-year time series 2004-05 to 2006-07

Adult Mental Health Services Forum

Version 1.0 Summary for Public Release

Australian Mental Health Outcomes and Classification Network
November 2008

This document was prepared from a more detailed version developed for restricted use by organisations participating in the National Mental Health Benchmarking Project. By agreement of all organisations, this version of the indicators has been prepared for wider use and unrestricted distribution. All identifying details and source data tables have been removed from this version.

AMHOCN

"Sharing Information to Improve Outcomes"

What this package contains

This document is organised into three parts.

PART A - Summary table and charts of the 13 national KPIs **(Pages 4 - 10)**

This part presents the national KPIs for each of the organisations in tabular and graphical format.
All KPIs are derived from the most recent data submitted by each organisation and constructed according to the specifications and definitions described in National Mental Health Benchmarking Project Manual.

PART B - Selected indicators grouped by themes **(Pages 11 - 43)**

This part groups the national KPIs, plus a number of supplementary indicators, into nine themes.

1. Comparative resources available to the organisation
2. Efficiency in use of resources
3. Productivity and activity of ambulatory services
4. Continuity of care
5. Access to ambulatory care
6. Access to acute inpatient care
7. Capability
8. Acute Inpatient casemix - (a) Diagnosis and (b) HoNOS at admission
9. Ambulatory care casemix - (a) Diagnosis and (b) HoNOS

The themes were selected only on the basis of what is feasible from the available data. They were not intended to restrict participating organisations to the eight categories, nor pre-empt where organisations focused their benchmarking effort.

All supplementary indicators are derived from source data submitted by organisations in their KPI workbooks. These details are not included in this public release version of the document. Details on how the supplementary indicators are constructed are however provided at the end of this Part of the document (pages 35-43).

PART C - Source data tables

Omitted from this public release version.

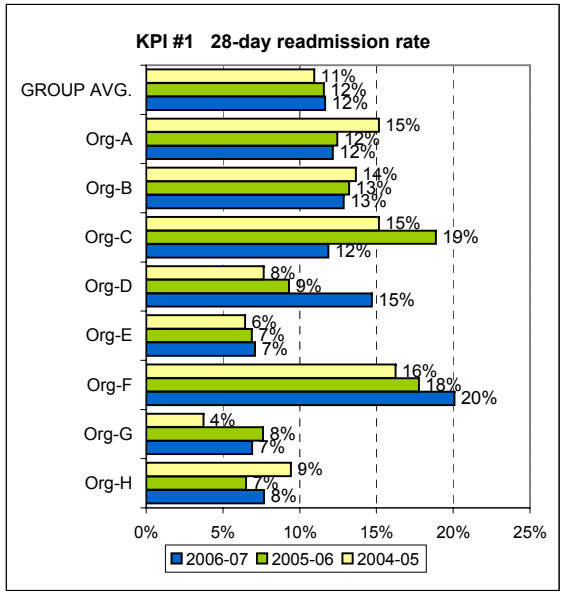
Version history

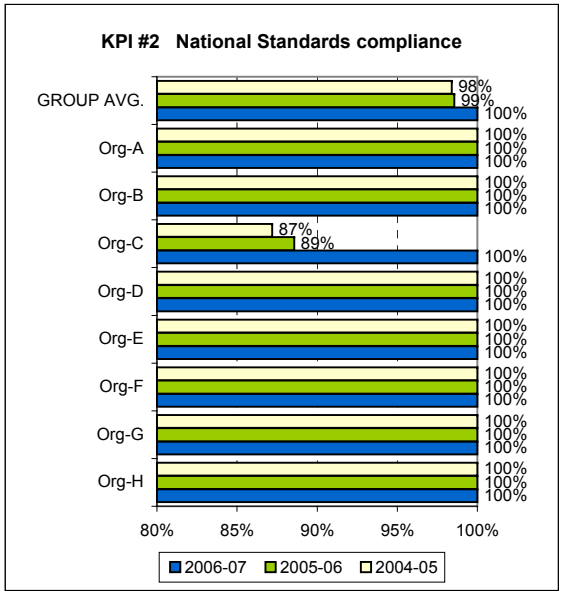
Version	Preparation date	Details
01	13-Nov-08	First public release version, using final validated data as signed off by participating organisations.

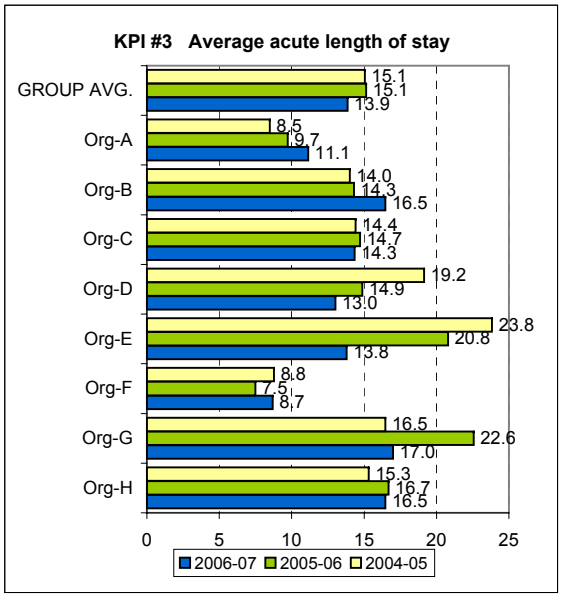
PART A

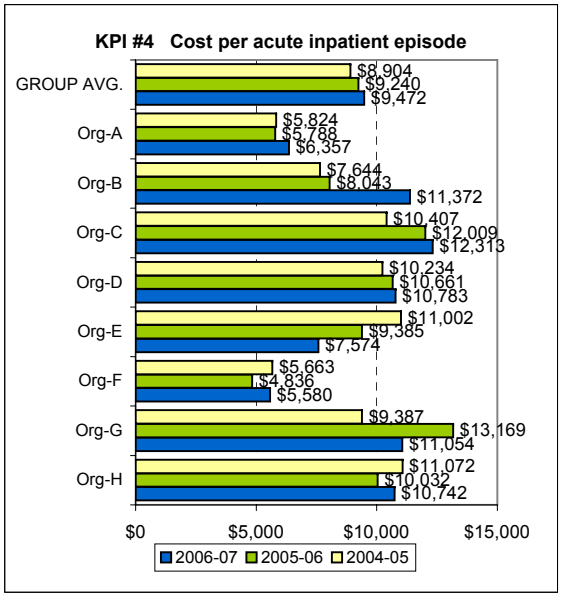
Summary table and charts of the 13 national KPIs

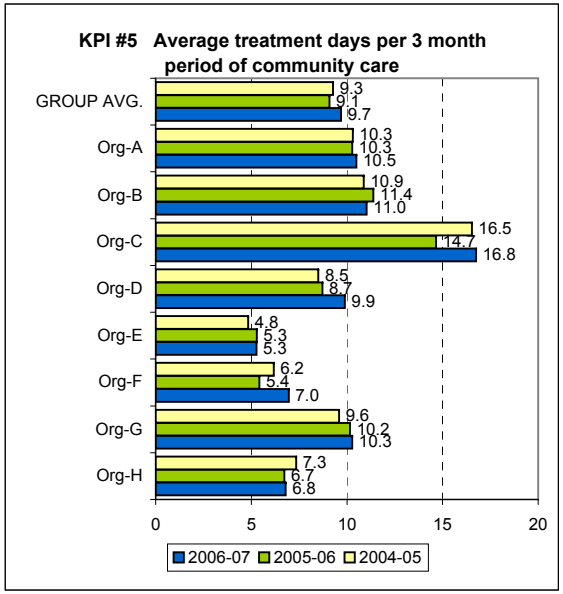
The 13 NATIONAL KPIs IN NUMERICAL ORDER: 3-year trends

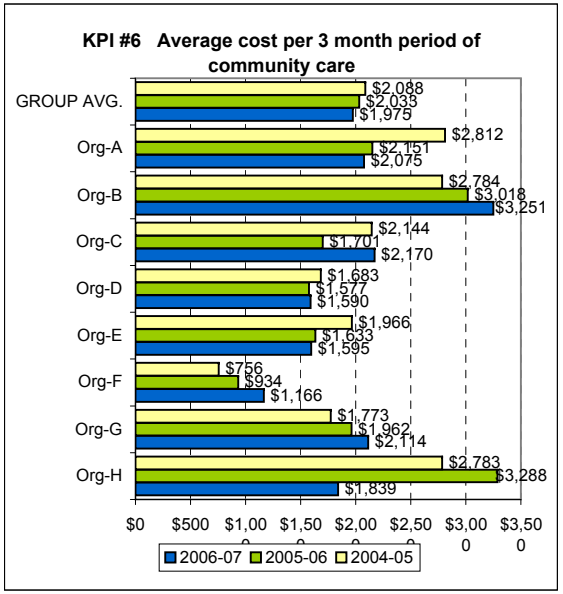












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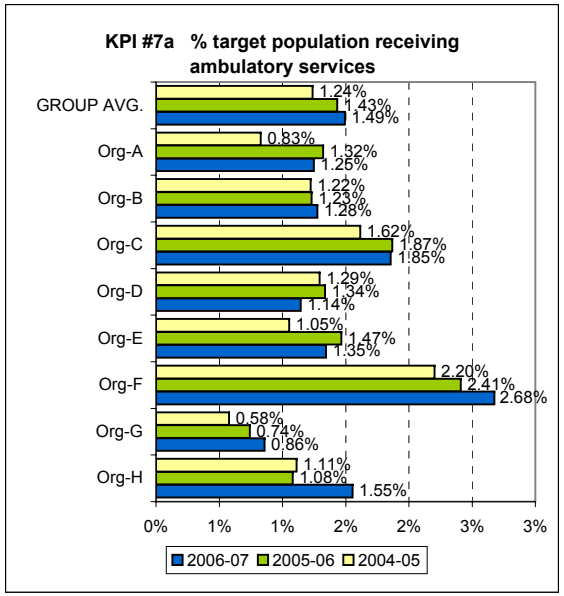

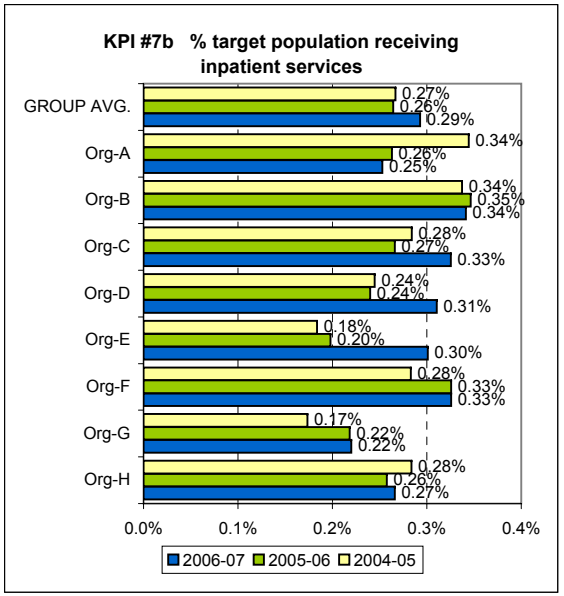

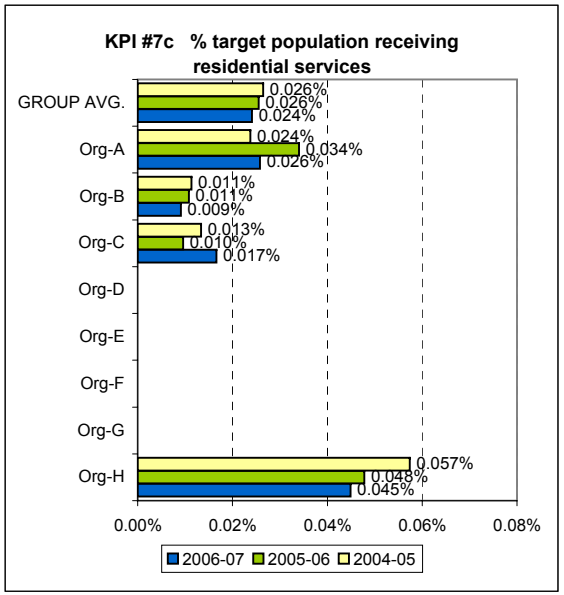

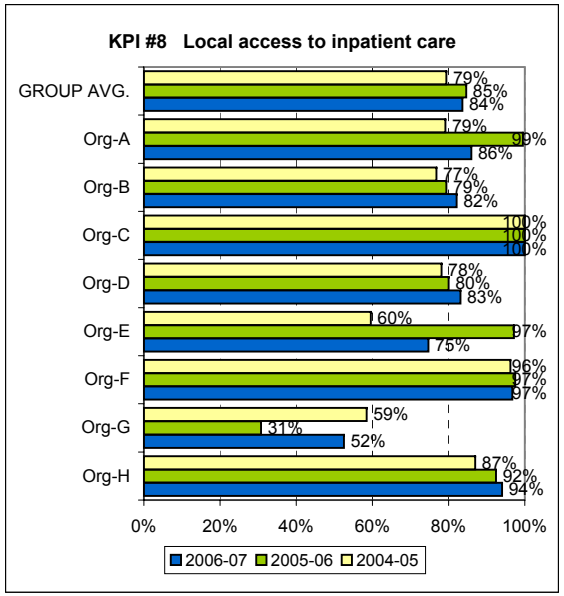

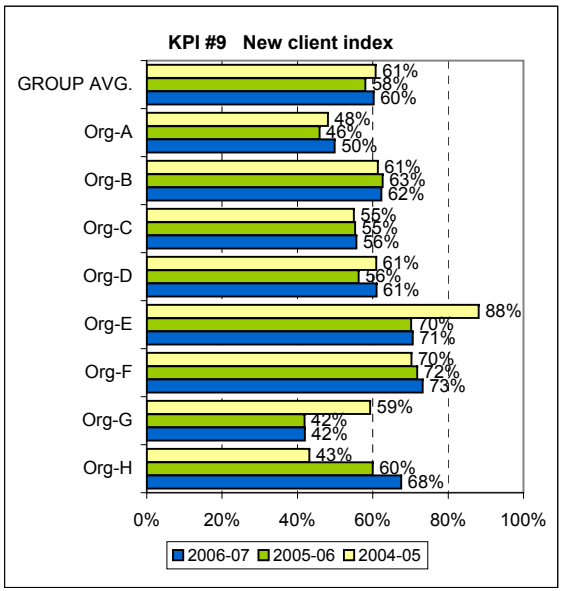

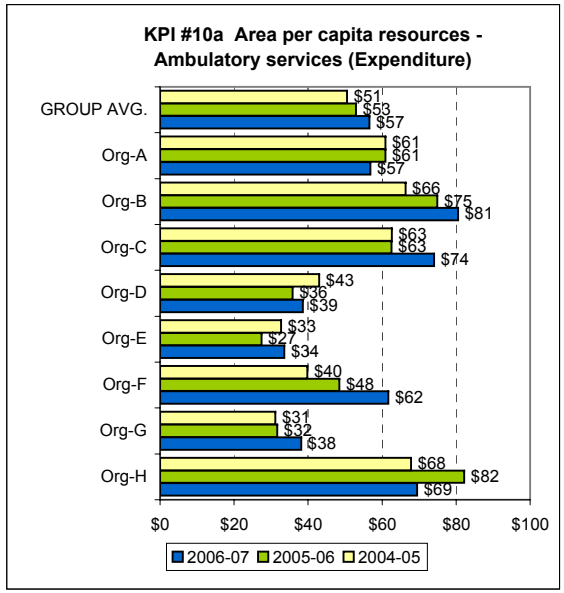

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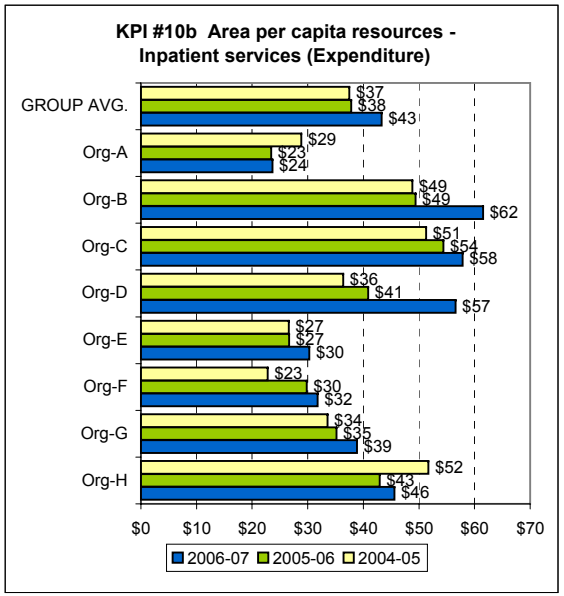

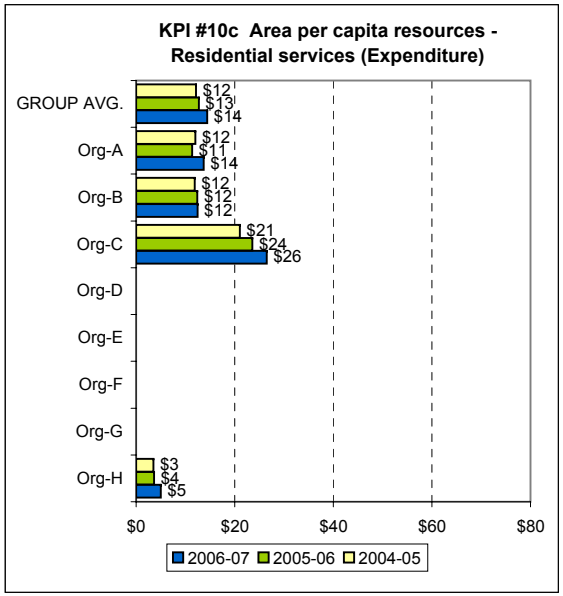

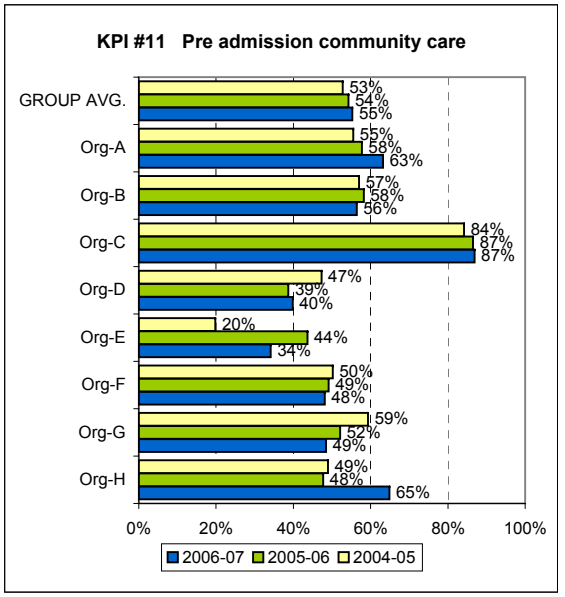

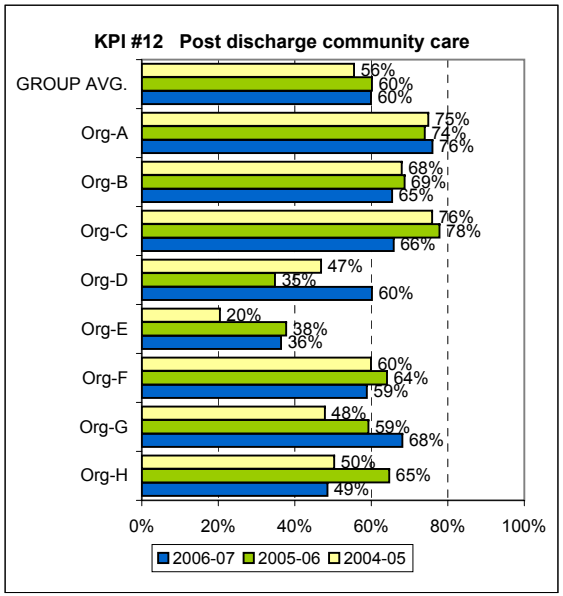

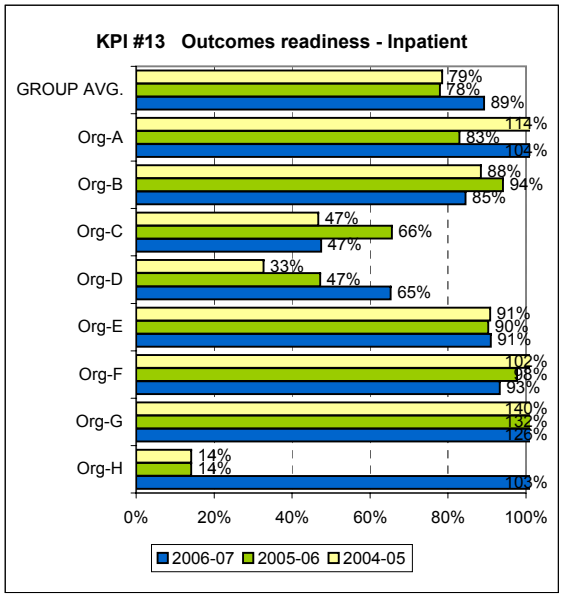

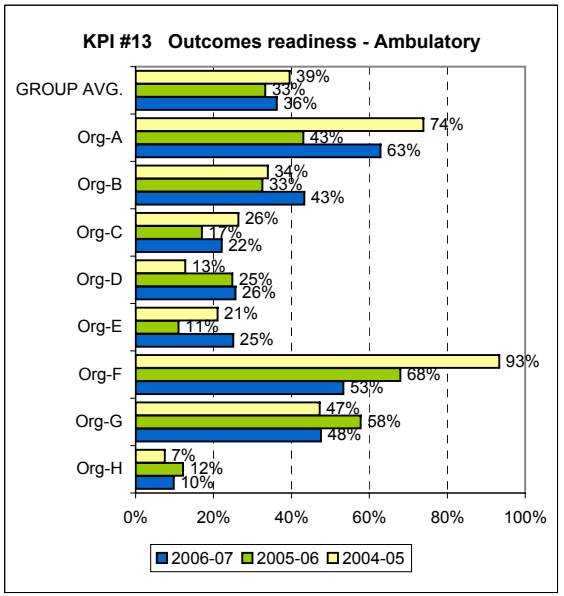

KPI Summary Table

NOTE: The indicators shown below are based on the calculation approach described in the Technical Specifications document and do not show any of the alternative approaches developed for several of the indicators.

			ADULT MENTAL HEALTH SERVICES - 3 year trends								
			Org-H	Org-G	Org-F	Org-E	Org-D	Org-C	Org-B	Org-A	GROUP AVG.
KPI #1	**28-day readmissions**	2004-05	9%	4%	16%	6%	8%	15%	14%	15%	11%
		2005-06	7%	8%	18%	7%	9%	19%	13%	12%	12%
		2006-07	8%	7%	20%	7%	15%	12%	13%	12%	12%
KPI #2	**National Standards compliance (Level 1)**	2004-05	100%	100%	100%	100%	100%	87%	100%	100%	98%
		2005-06	100%	100%	100%	100%	100%	89%	100%	100%	99%
		2006-07	100%	100%	100%	100%	100%	100%	100%	100%	100%
KPI #3	**Average acute LOS**	2004-05	15.3	16.5	8.8	23.8	19.2	14.4	14.0	8.5	15.1
		2005-06	16.7	22.6	7.5	20.8	14.9	14.7	14.3	9.7	15.1
		2006-07	16.5	17.0	8.7	13.8	13.0	14.3	16.5	11.1	13.9
KPI #4	**Average acute episode cost**	2004-05	$11,072	$9,387	$5,663	$11,002	$10,234	$10,407	$7,644	$5,824	$8,904
		2005-06	$10,032	$13,169	$4,836	$9,385	$10,661	$12,009	$8,043	$5,788	$9,240
		2006-07	$10,742	$11,054	$5,580	$7,574	$10,783	$12,313	$11,372	$6,357	$9,472
KPI #5	**Treatment days per 3-month community care period**	2004-05	7.3	9.6	6.2	4.8	8.5	16.5	10.9	10.3	9.3
		2005-06	6.7	10.2	5.4	5.3	8.7	14.7	11.4	10.3	9.1
		2006-07	6.8	10.3	7.0	5.3	9.9	16.8	11.0	10.5	9.7
KPI #6	**Cost per 3-month community care period**	2004-05	$2,783	$1,773	$756	$1,966	$1,683	$2,144	$2,784	$2,812	$2,088
		2005-06	$3,288	$1,962	$934	$1,633	$1,577	$1,701	$3,018	$2,151	$2,033
		2006-07	$1,839	$2,114	$1,166	$1,595	$1,590	$2,170	$3,251	$2,075	$1,975

KPI Summary Table

NOTE: The indicators shown below are based on the calculation approach described in the Technical Specifications document and do not show any of the alternative approaches developed for several of the indicators.

			ADULT MENTAL HEALTH SERVICES - 3 year trends								
			Org-H	Org-G	Org-F	Org-E	Org-D	Org-C	Org-B	Org-A	GROUP AVG.
KPI #7	% target population receiving ambulatory services	2004-05	1.1%	0.6%	2.2%	1.1%	1.3%	1.6%	1.2%	0.8%	1.2%
		2005-06	1.1%	0.7%	2.4%	1.5%	1.3%	1.9%	1.2%	1.3%	1.4%
		2006-07	1.6%	0.9%	2.7%	1.3%	1.1%	1.9%	1.3%	1.2%	1.5%
	% target population receiving inpatient services	2004-05	0.3%	0.2%	0.3%	0.2%	0.2%	0.3%	0.3%	0.3%	0.3%
		2005-06	0.3%	0.2%	0.3%	0.2%	0.2%	0.3%	0.3%	0.3%	0.3%
		2006-07	0.3%	0.2%	0.3%	0.3%	0.3%	0.3%	0.3%	0.3%	0.3%
	% target population receiving residential services	2004-05	0.06%					0.01%	0.01%	0.02%	0.03%
		2005-06	0.05%					0.01%	0.01%	0.03%	0.03%
		2006-07	0.04%					0.02%	0.01%	0.03%	0.02%
KPI #8	Local access to inpatient care	2004-05	87%	59%	96%	60%	78%	100%	77%	79%	79%
		2005-06	92%	31%	97%	97%	80%	100%	79%	99%	85%
		2006-07	94%	52%	97%	75%	83%	100%	82%	86%	84%
KPI #9	New client index	2004-05	43%	59%	70%	88%	61%	55%	61%	48%	61%
		2005-06	60%	42%	72%	70%	56%	55%	63%	46%	58%
		2006-07	68%	42%	73%	71%	61%	56%	62%	50%	60%
KPI #10	Area per capita resources - Ambulatory services	2004-05	$68	$31	$40	$33	$43	$63	$66	$61	$51
		2005-06	$82	$32	$48	$27	$36	$63	$75	$61	$53
		2006-07	$69	$38	$62	$34	$39	$74	$81	$57	$57

KPI Summary Table

NOTE: The indicators shown below are based on the calculation approach described in the Technical Specifications document and do not show any of the alternative approaches developed for several of the indicators.

			ADULT MENTAL HEALTH SERVICES - 3 year trends								
			Org-H	Org-G	Org-F	Org-E	Org-D	Org-C	Org-B	Org-A	GROUP AVG.
	Area per capita resources - Inpatient services	2004-05	$52	$34	$23	$27	$36	$51	$49	$29	$37
		2005-06	$43	$35	$30	$27	$41	$54	$49	$23	$38
		2006-07	$46	$39	$32	$30	$57	$58	$62	$24	$43
	Area per capita resources - Residential services	2004-05	$3					$21	$12	$12	$12
		2005-06	$4					$24	$12	$11	$13
		2006-07	$5					$26	$12	$14	$14
KPI #11	**Pre admission community care**	2004-05	49%	59%	50%	20%	47%	84%	57%	55%	53%
		2005-06	48%	52%	49%	44%	39%	87%	58%	58%	54%
		2006-07	65%	49%	48%	34%	40%	87%	56%	63%	55%
KPI #12	**Post discharge community care**	2004-05	50%	48%	60%	20%	47%	76%	68%	75%	56%
		2005-06	65%	59%	64%	38%	35%	78%	69%	74%	60%
		2006-07	49%	68%	59%	36%	60%	66%	65%	76%	60%
KPI #13	**Outcomes readiness - inpatient services**	2004-05	14%	140%	102%	91%	33%	47%	88%	114%	79%
		2005-06	14%	132%	98%	90%	47%	66%	94%	83%	78%
		2006-07	103%	126%	93%	91%	65%	47%	85%	104%	89%
	Outcomes readiness - ambulatory services	2004-05	7%	47%	93%	21%	13%	26%	34%	74%	39%
		2005-06	12%	58%	68%	11%	25%	17%	33%	43%	33%
		2006-07	10%	48%	53%	25%	26%	22%	43%	63%	36%

PART B

Selected indicators grouped by themes

1. Comparative resources available to the organisation
2. Efficiency in use of resources
3. Productivity and activity of ambulatory services
4. Continuity of care
5. Access to ambulatory care
6. Access to acute inpatient care
7. Capability
8. Acute Inpatient casemix - (a) Diagnosis and (b) HoNOS at admission
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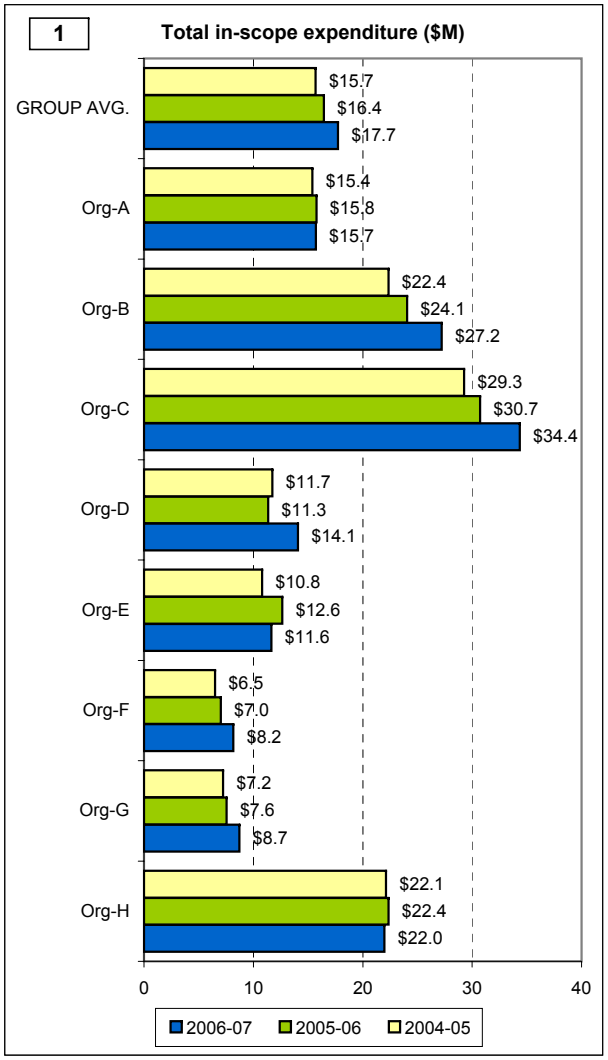
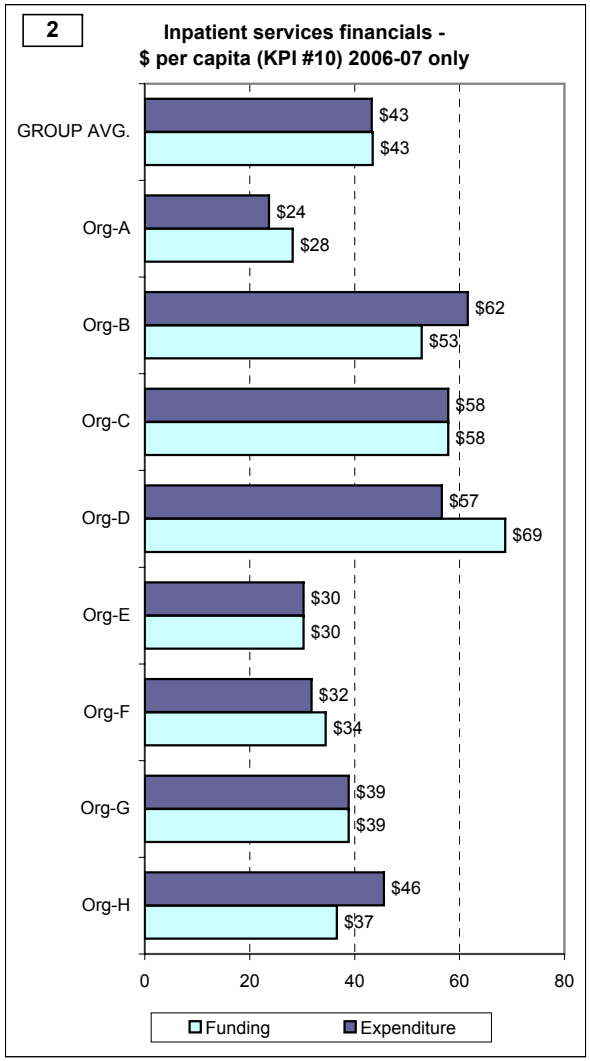
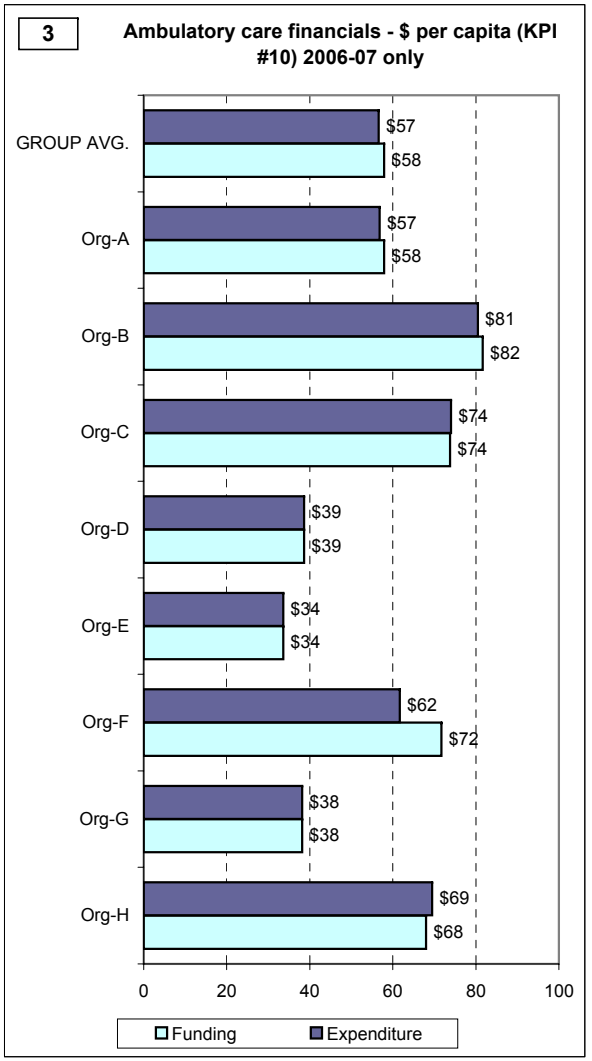
THEME 1: Comparative resources available to the organisation







THEME 1: Comparative resources available to the organisation (cont'd)

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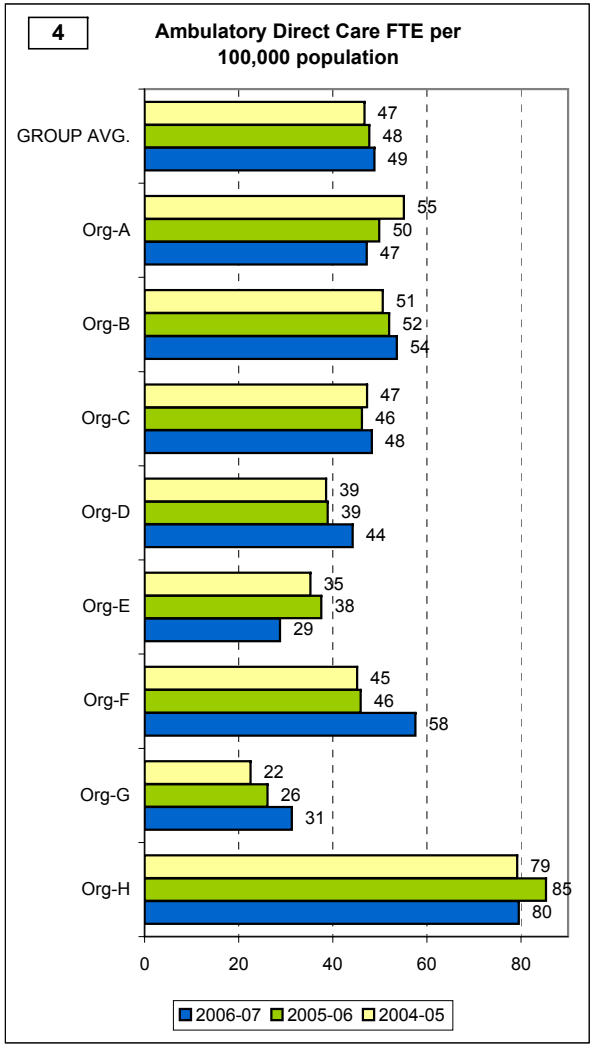

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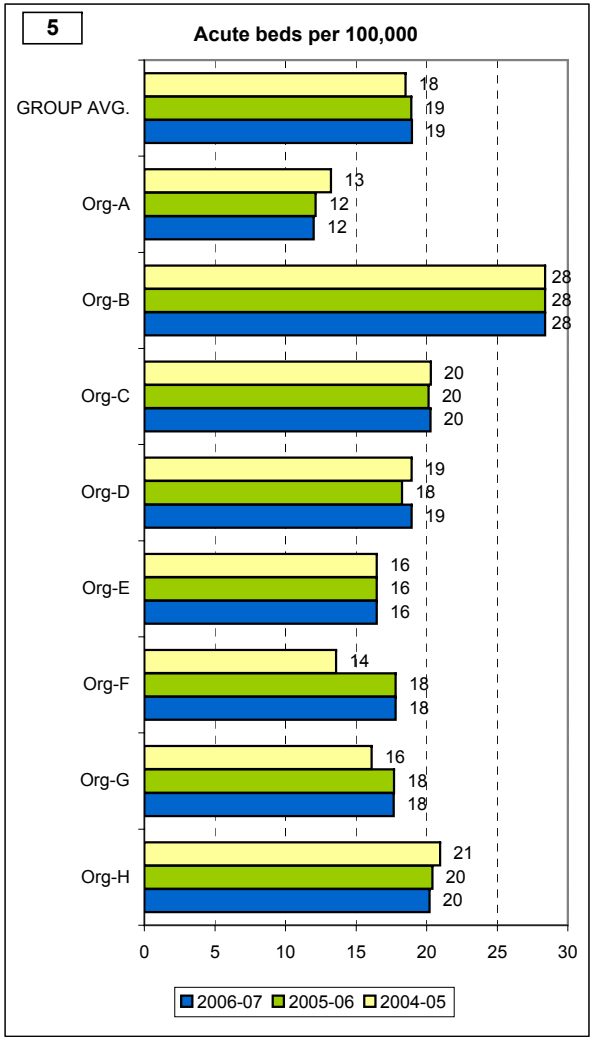

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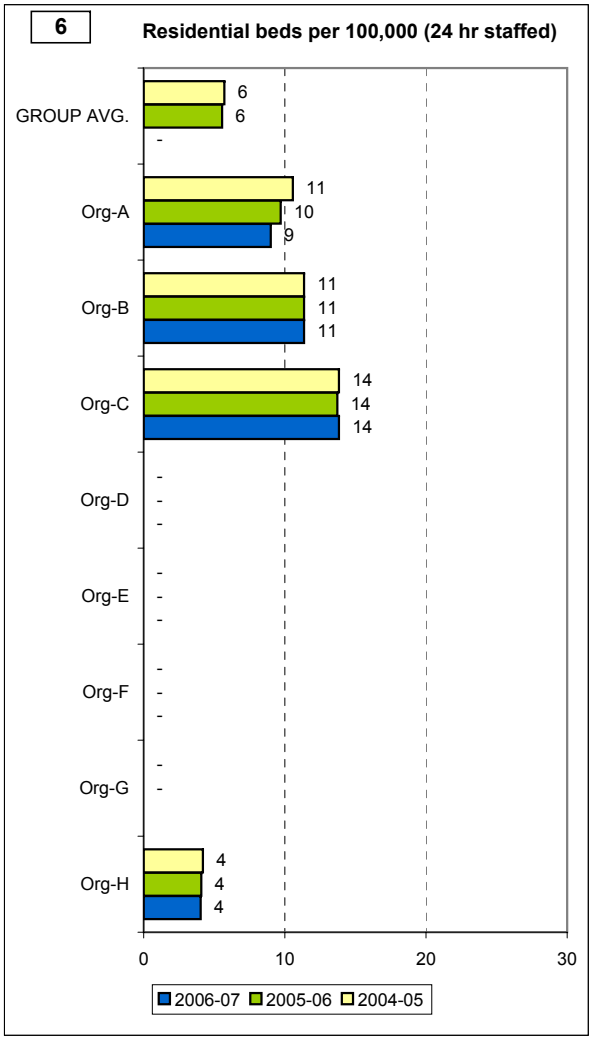
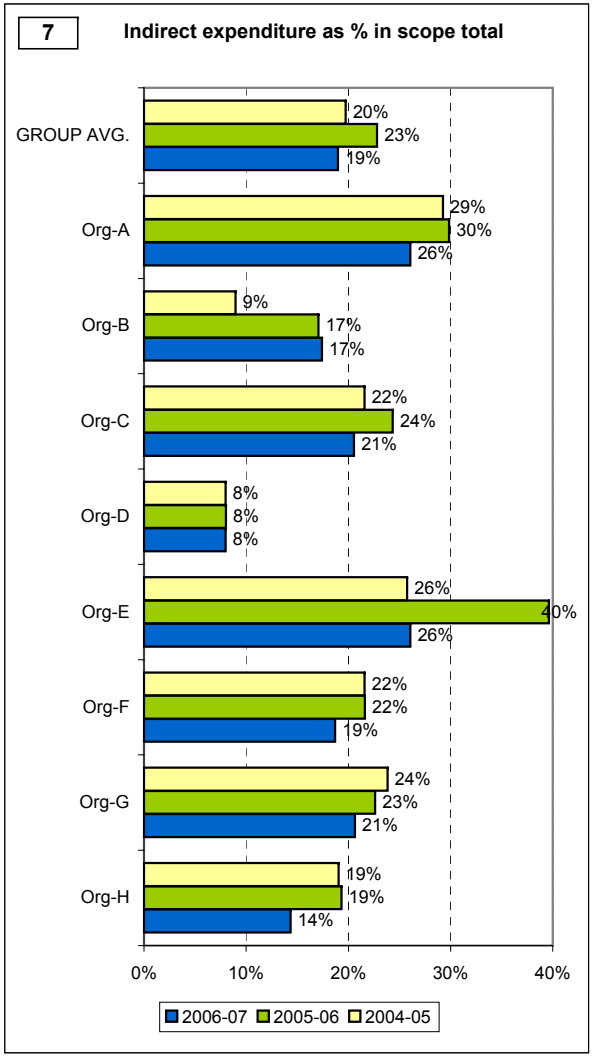
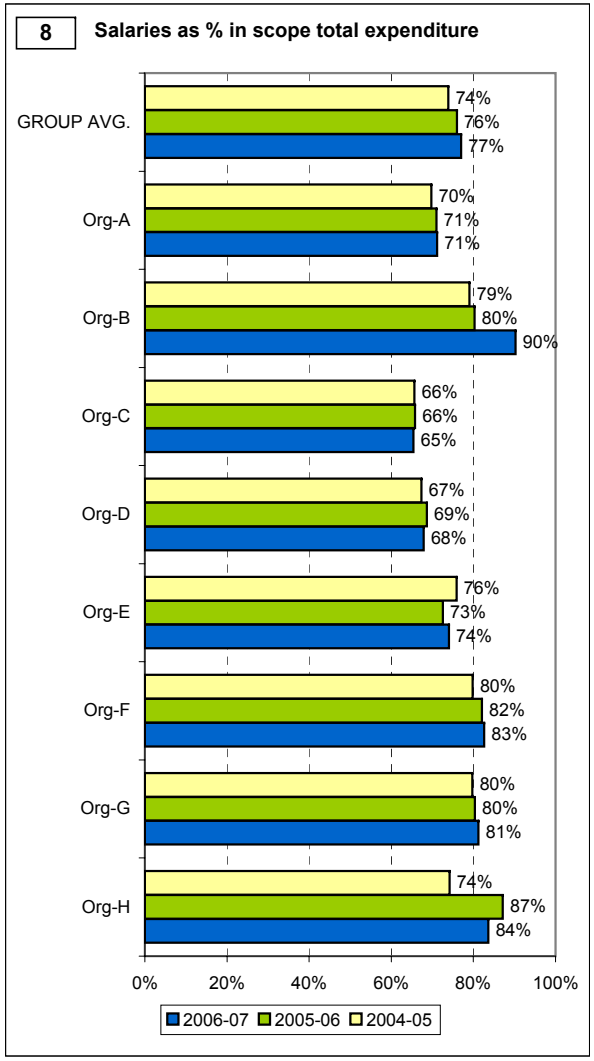
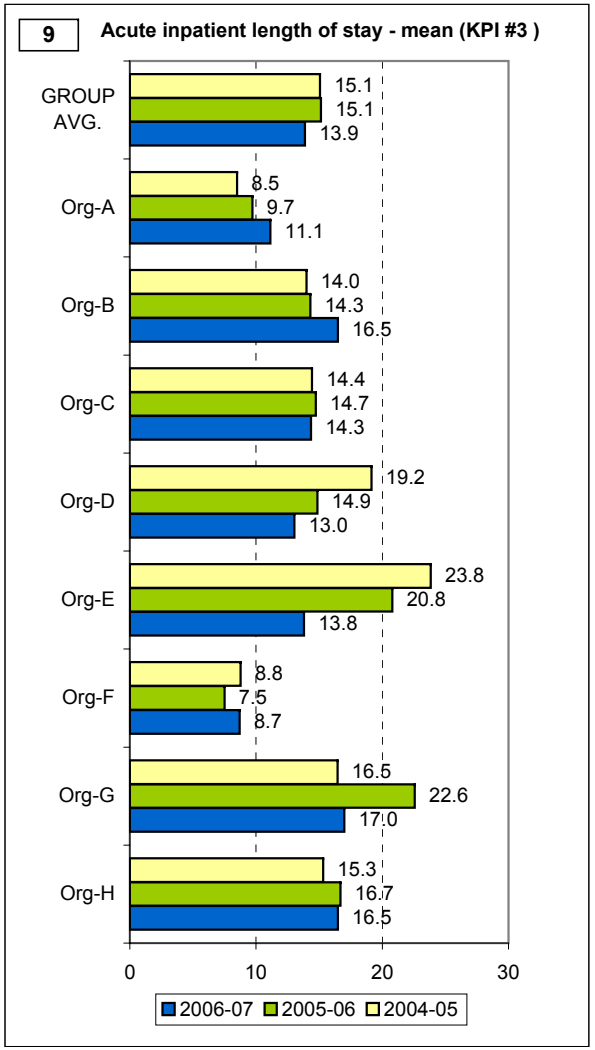


THEME 2: Efficiency in use of resources

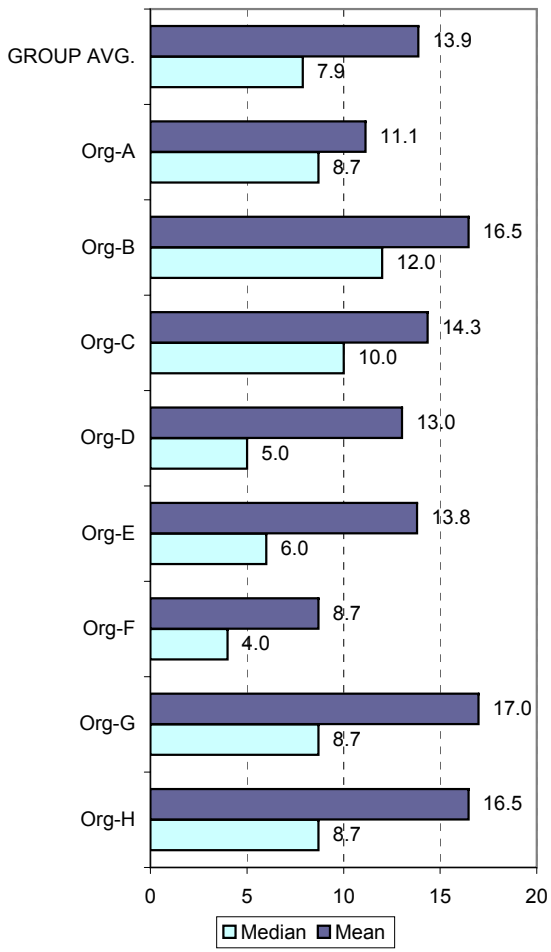




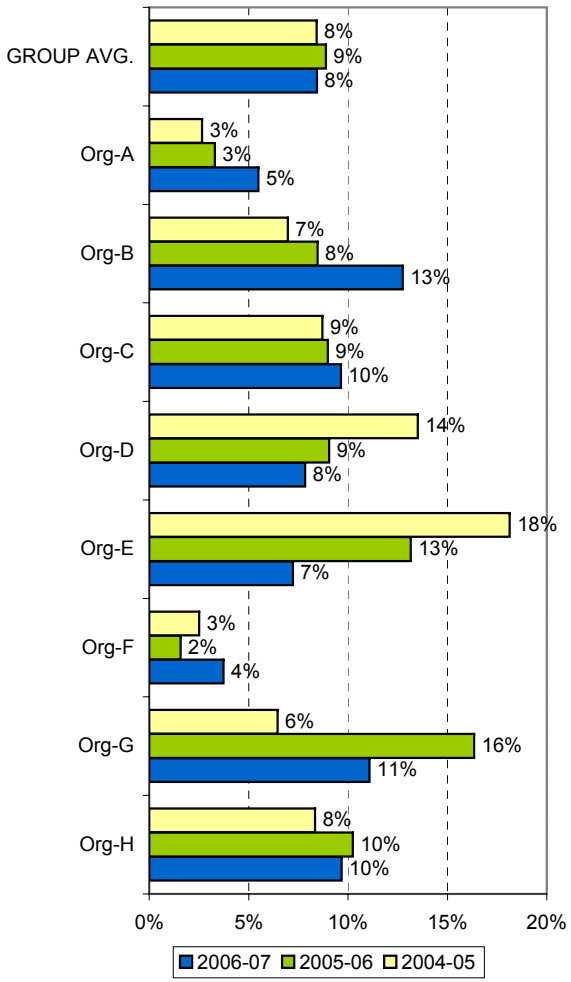


THEME 2: Efficiency in use of resources (cont'd)

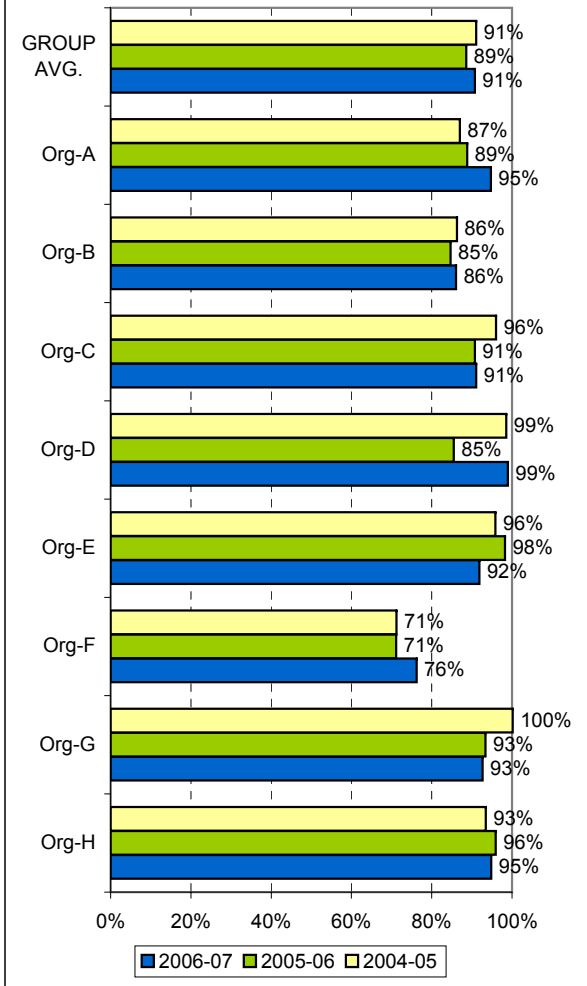
9a Acute inpatient length of stay - Mean and Median compared 2006-07



10 Acute inpatient LOS outliers (>35 days)

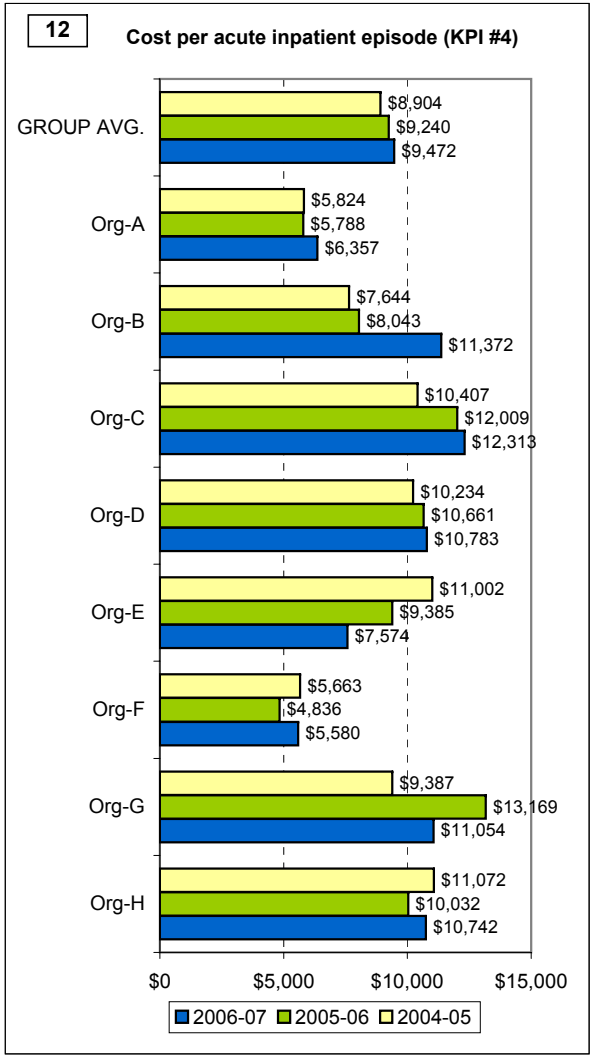


11 Acute unit (s) - Derived occupancy

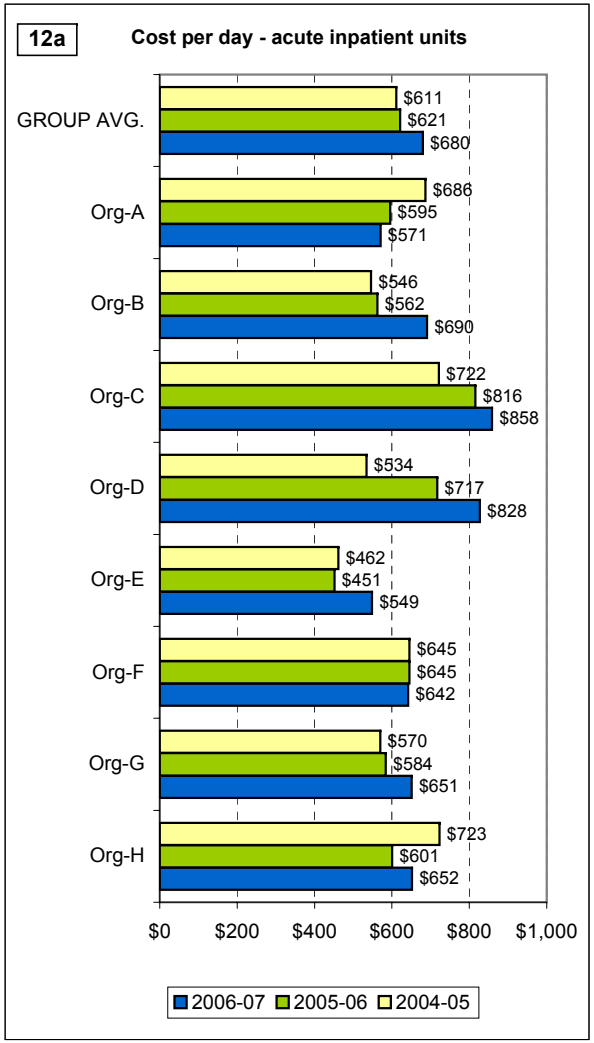


THEME 2: Efficiency in use of resources (cont'd)

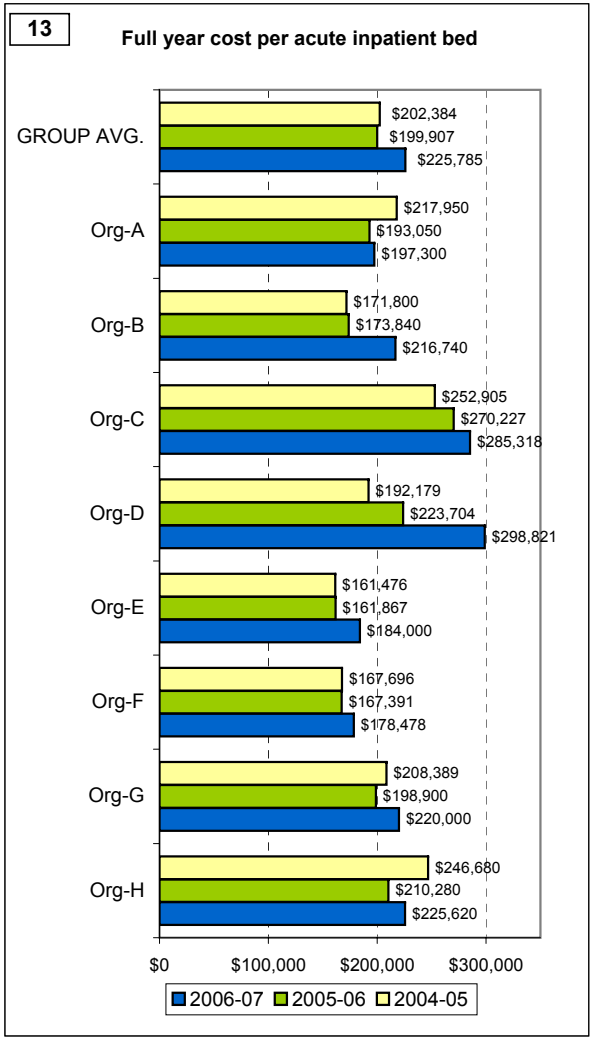
12 Cost per acute inpatient episode (KPI #4)



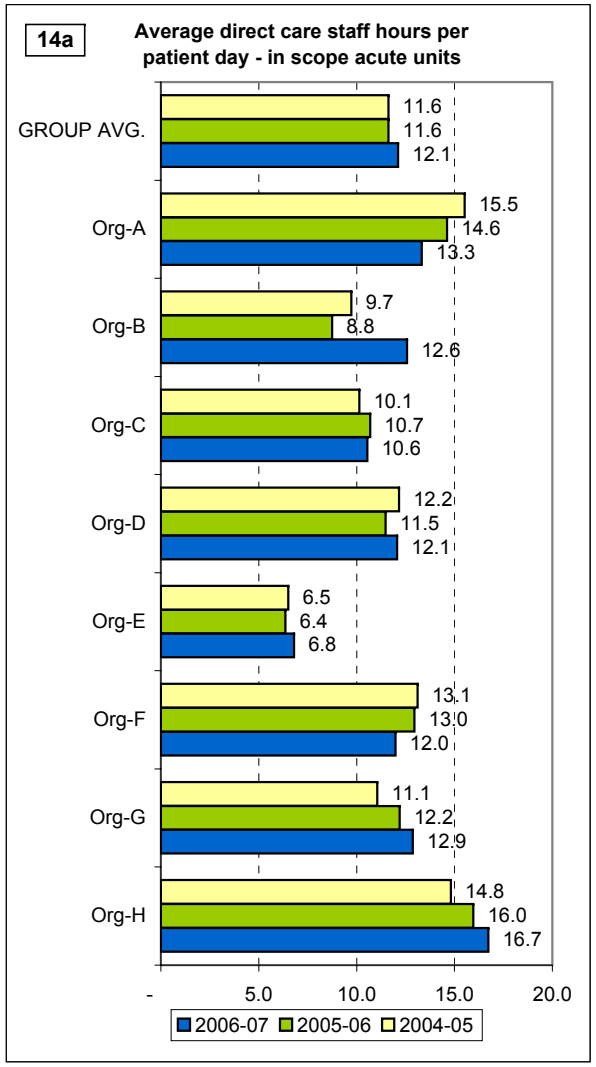
12a Cost per day - acute inpatient units

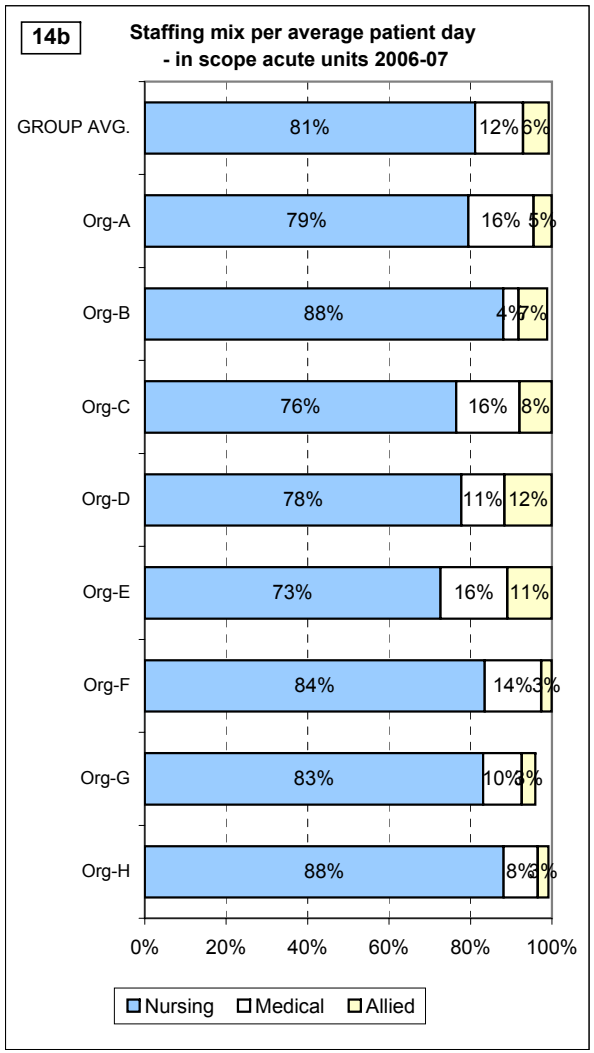


13 Full year cost per acute inpatient bed



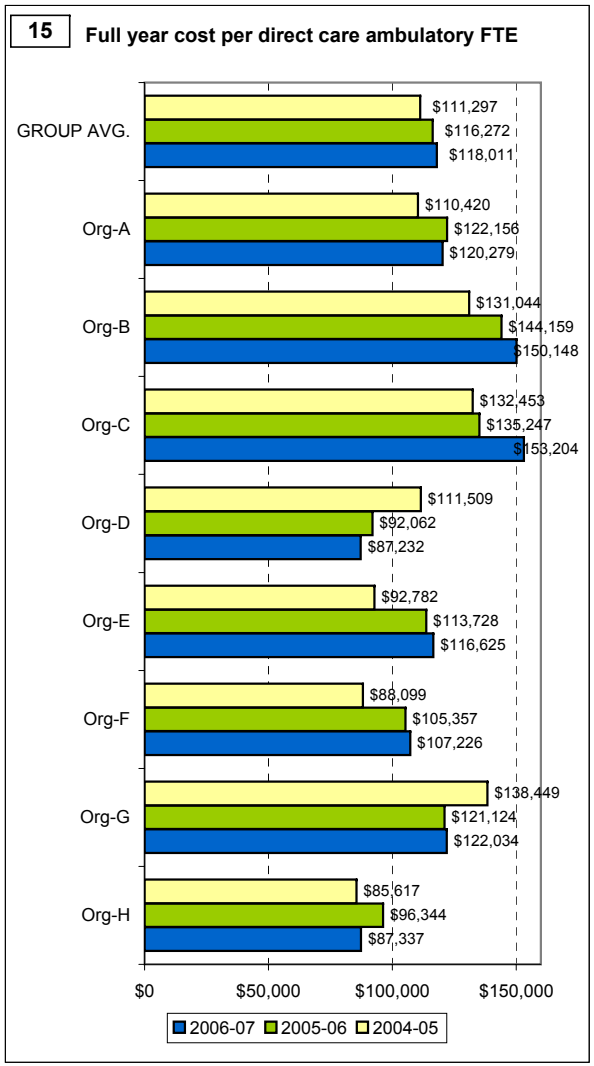
THEME 2: Efficiency in use of resources (cont'd)



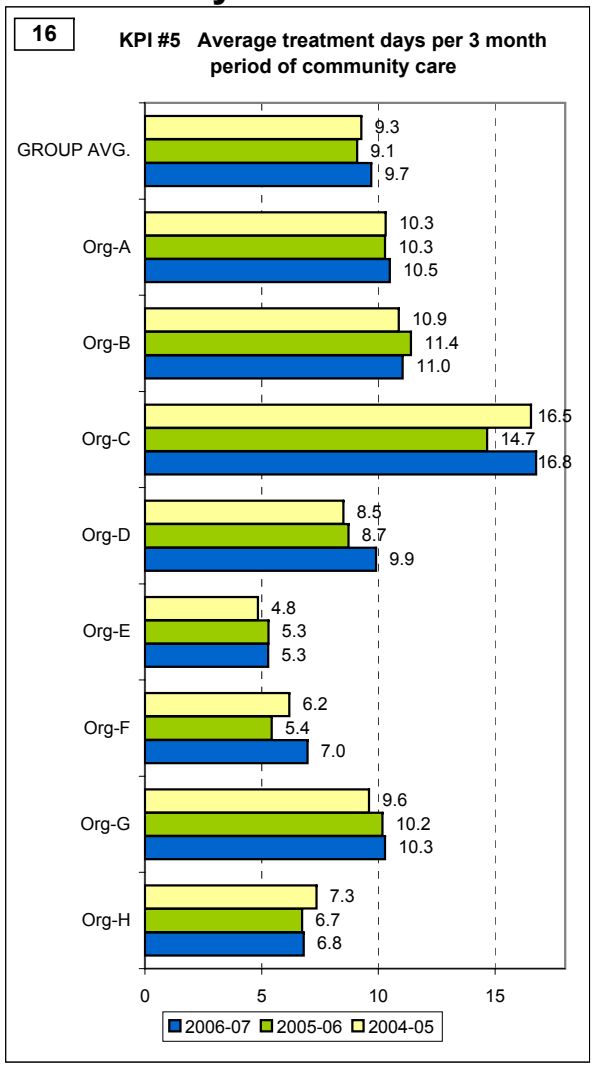


THEME 2: Efficiency in use of resources (cont'd)

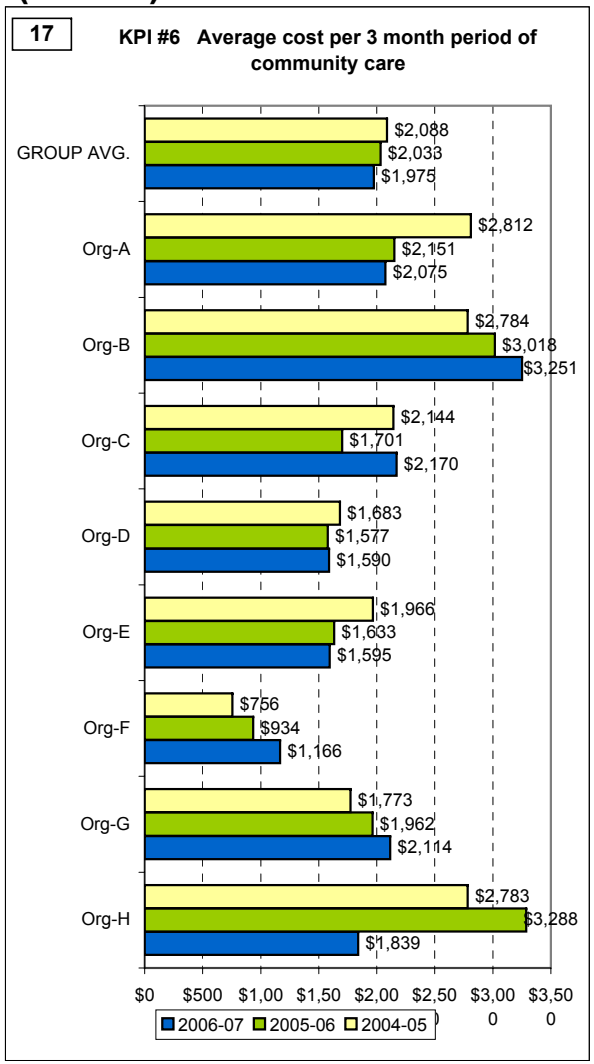
15 **Full year cost per direct care ambulatory FTE**



16 **KPI #5 Average treatment days per 3 month period of community care**

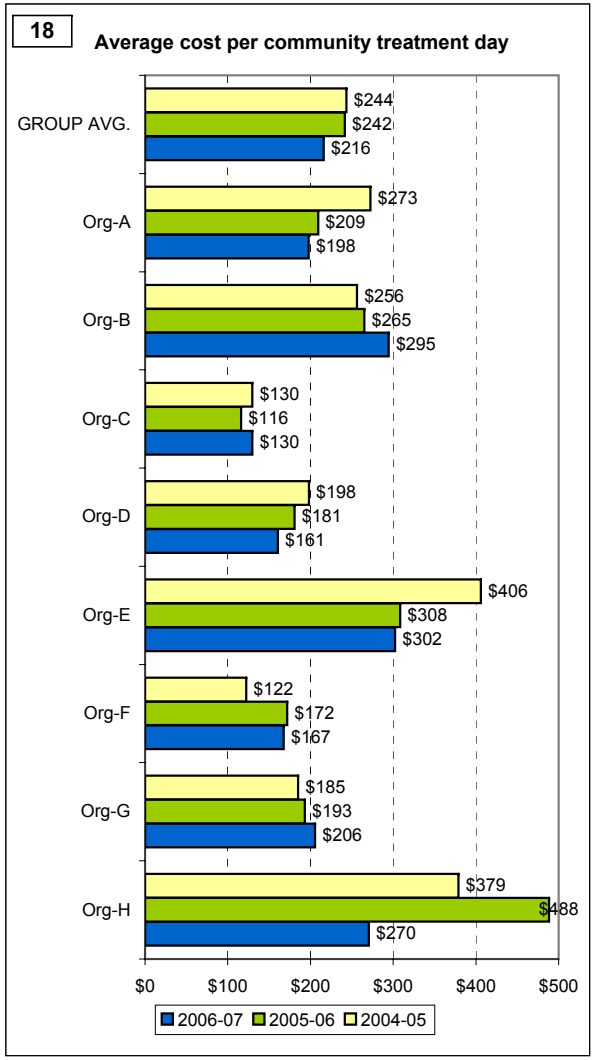


17 **KPI #6 Average cost per 3 month period of community care**

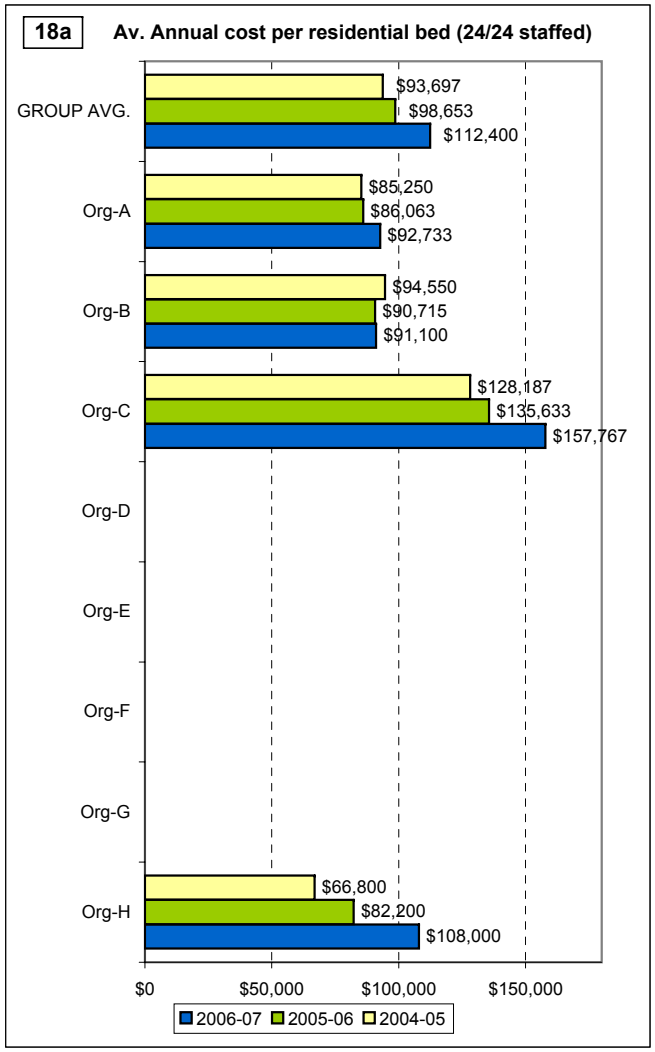


THEME 2: Efficiency in use of resources (cont'd)

18 Average cost per community treatment day

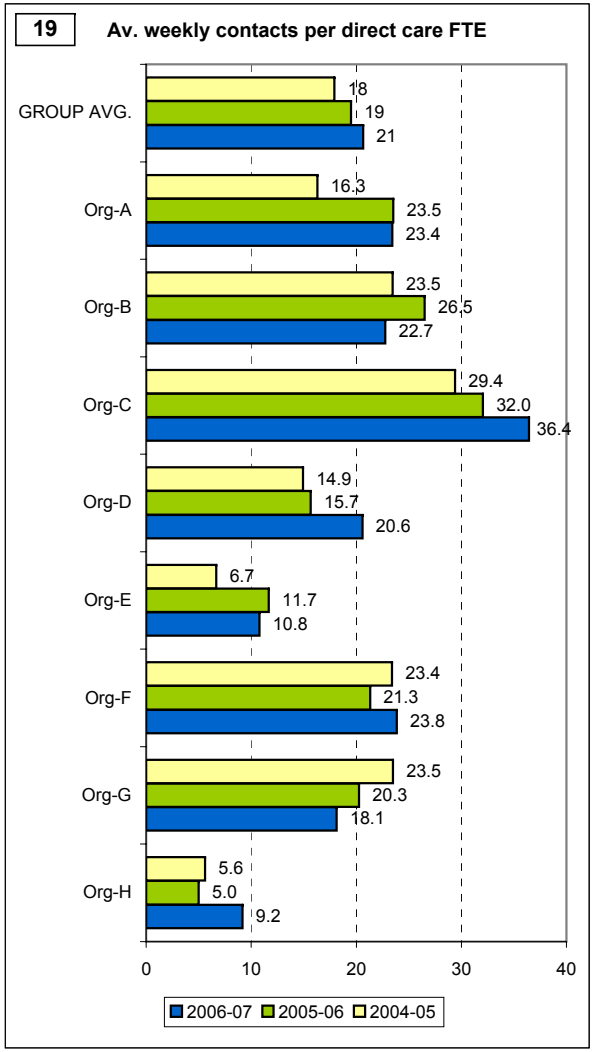


18a Av. Annual cost per residential bed (24/24 staffed)

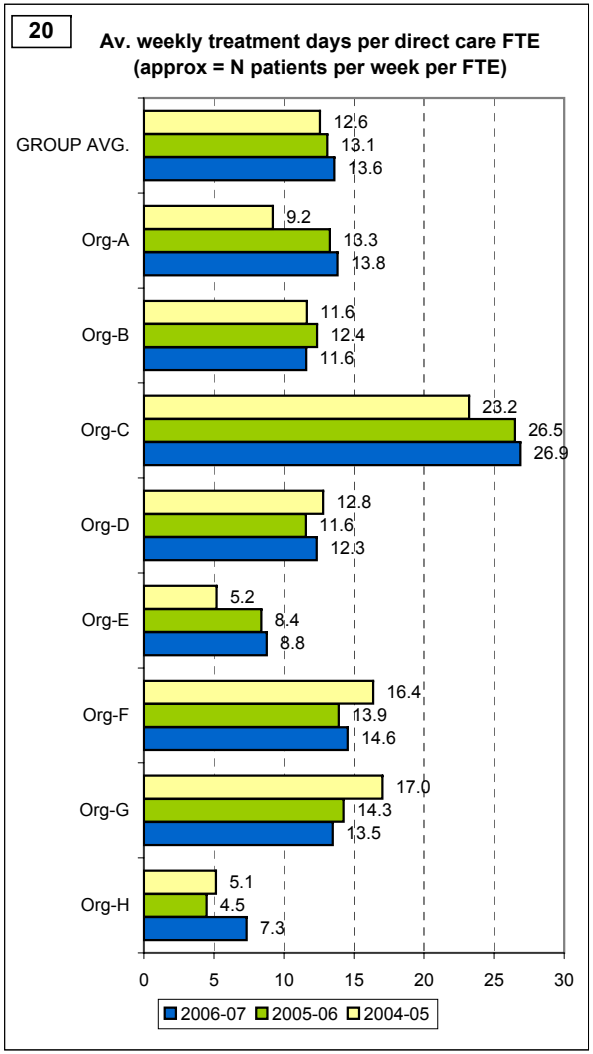


THEME 3: Productivity and activity of ambulatory services

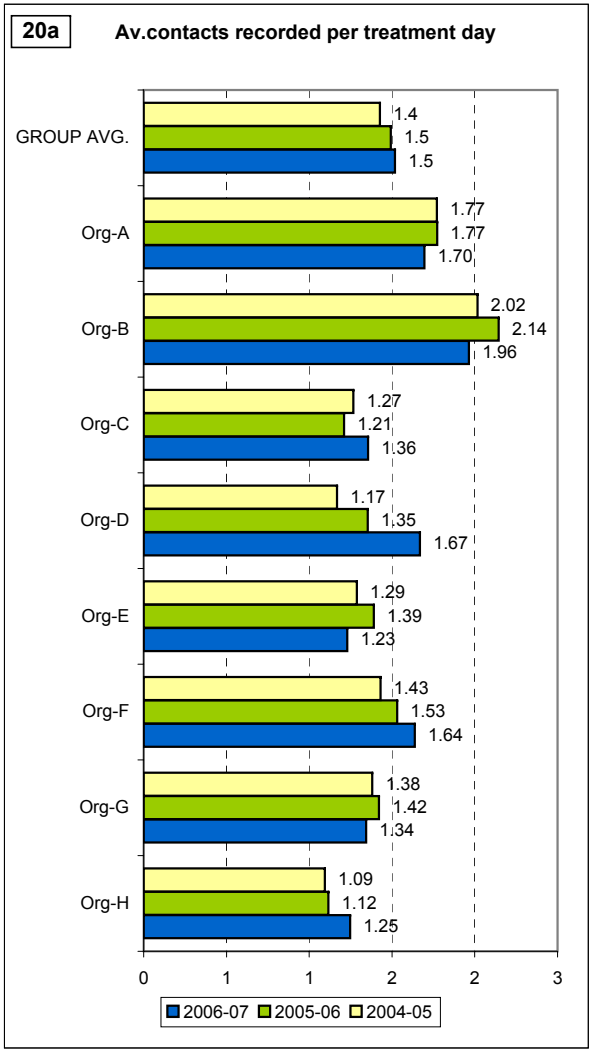
19 Av. weekly contacts per direct care FTE



20 Av. weekly treatment days per direct care FTE (approx = N patients per week per FTE)



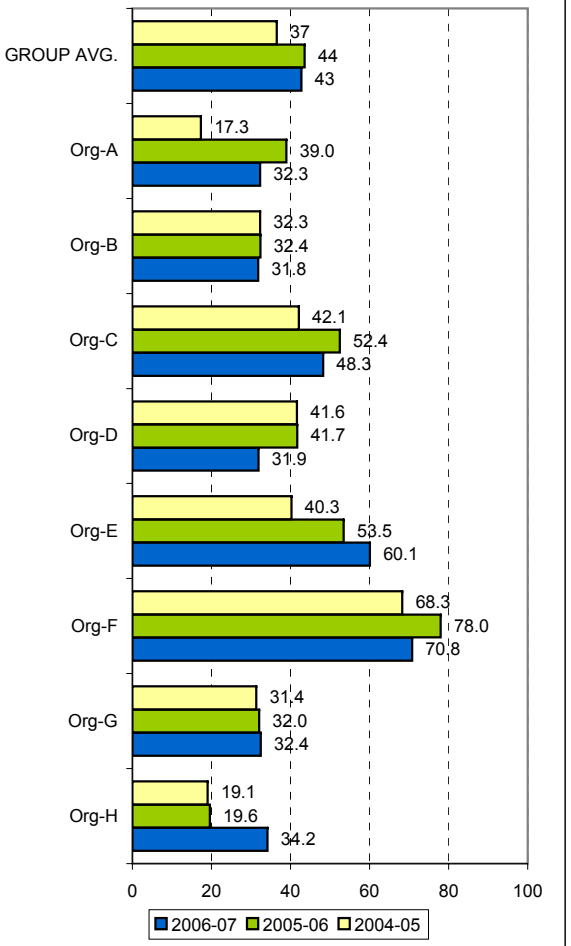
20a Av.contacts recorded per treatment day



THEME 3: Productivity and activity of ambulatory services

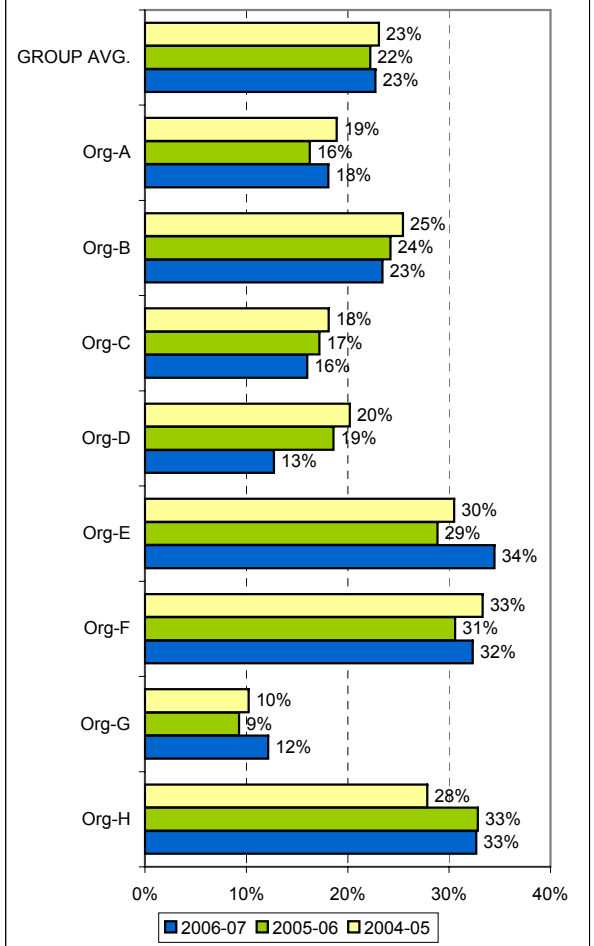
21

Av. number of people seen per year per ambulatory services direct care FTE



22

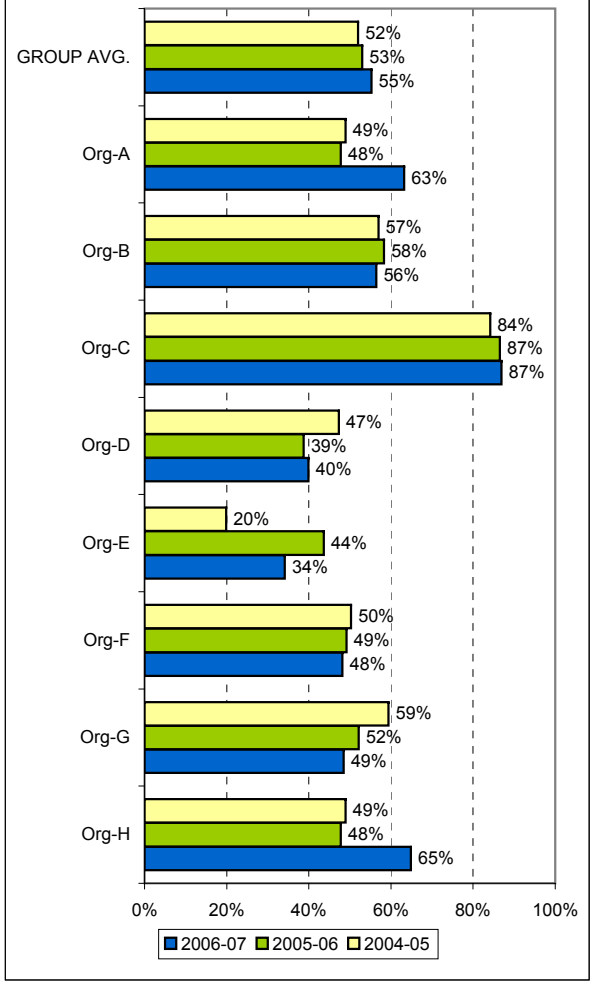
' Assessment only' episodes (1 treatment day) as percent of total 3 month episodes



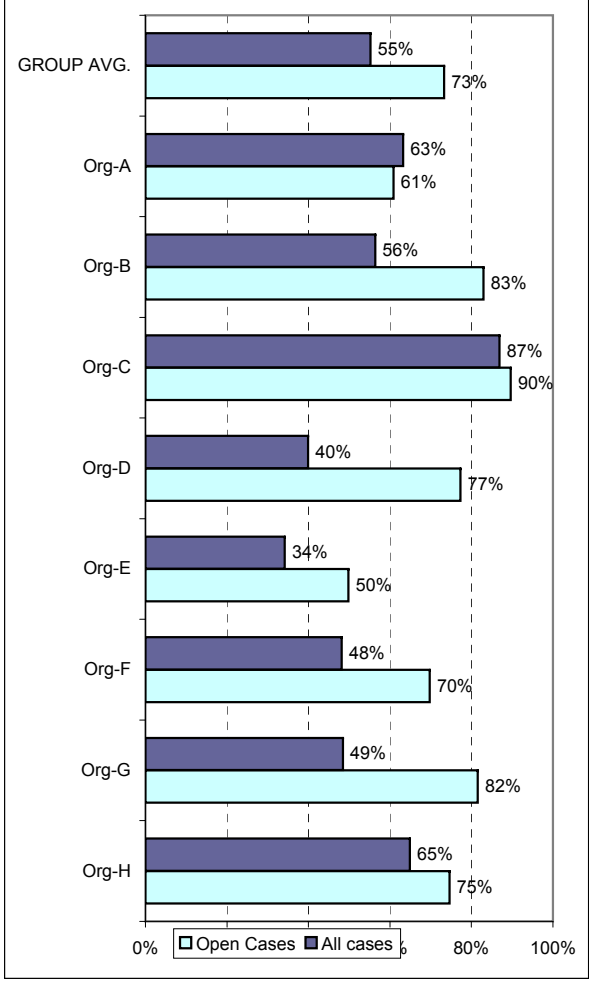
Theme Charts

THEME 4: Continuity of care

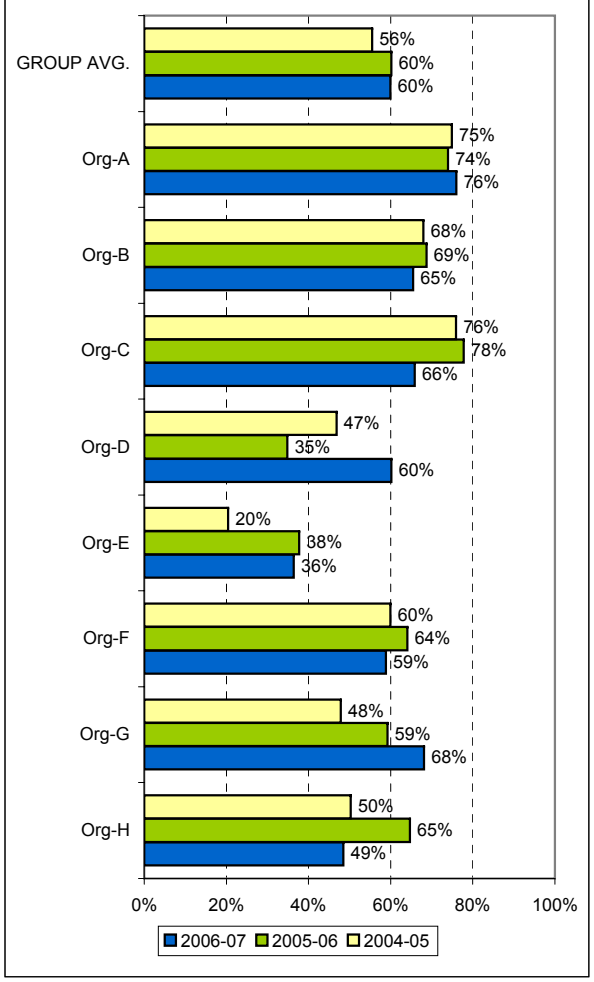
23 **KPI #11 Pre admission community care**



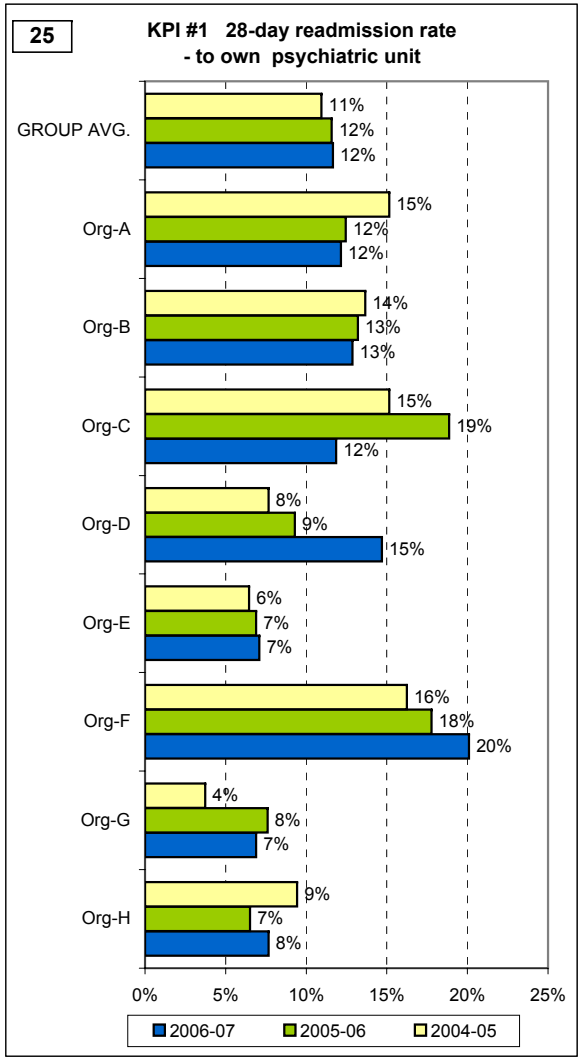
23a **KPI #11 alternative: 2006-07 Pre admission community care - Open cases vs all cases**

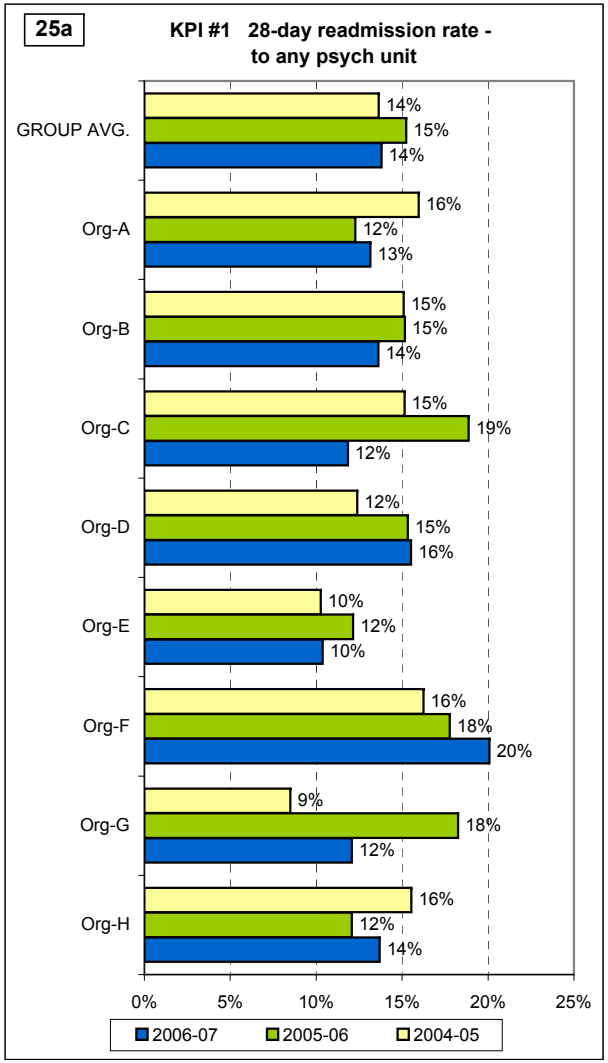


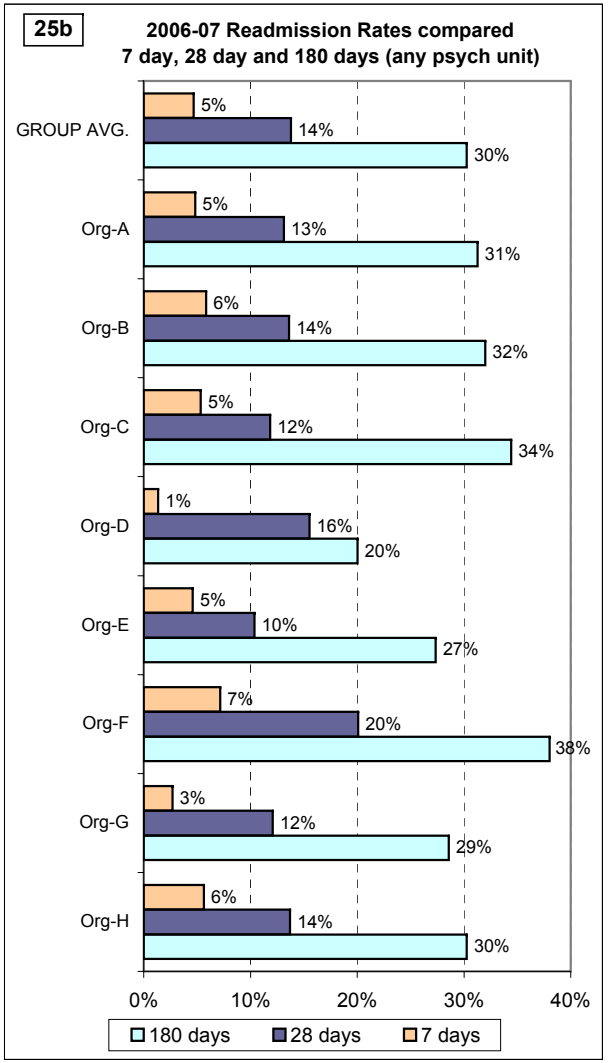
24 **KPI #12 Post discharge community care (Note - change of definition for 2006-07)**



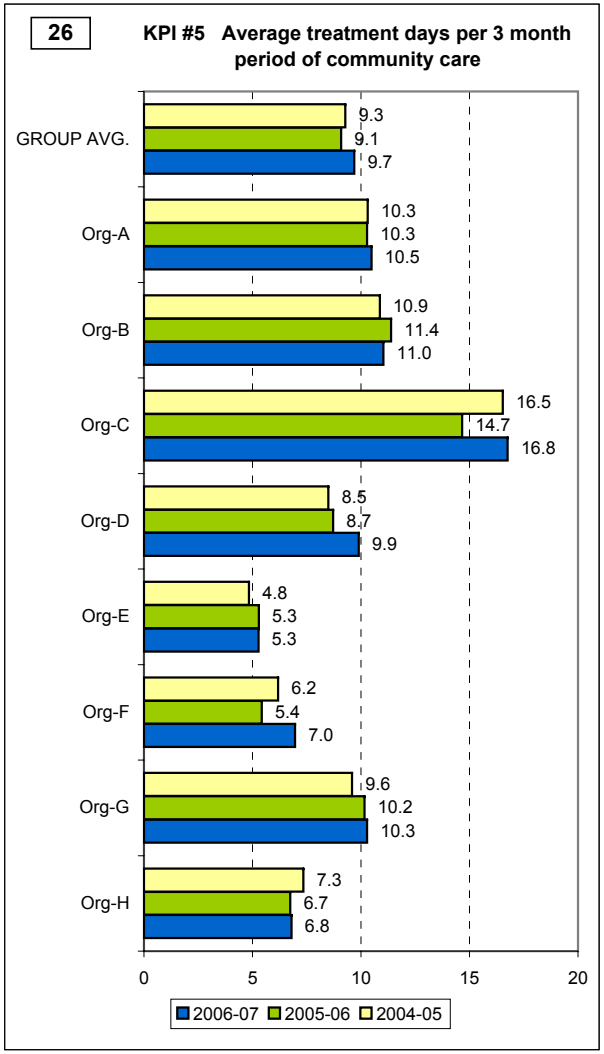
THEME 4: Continuity of care (cont'd)

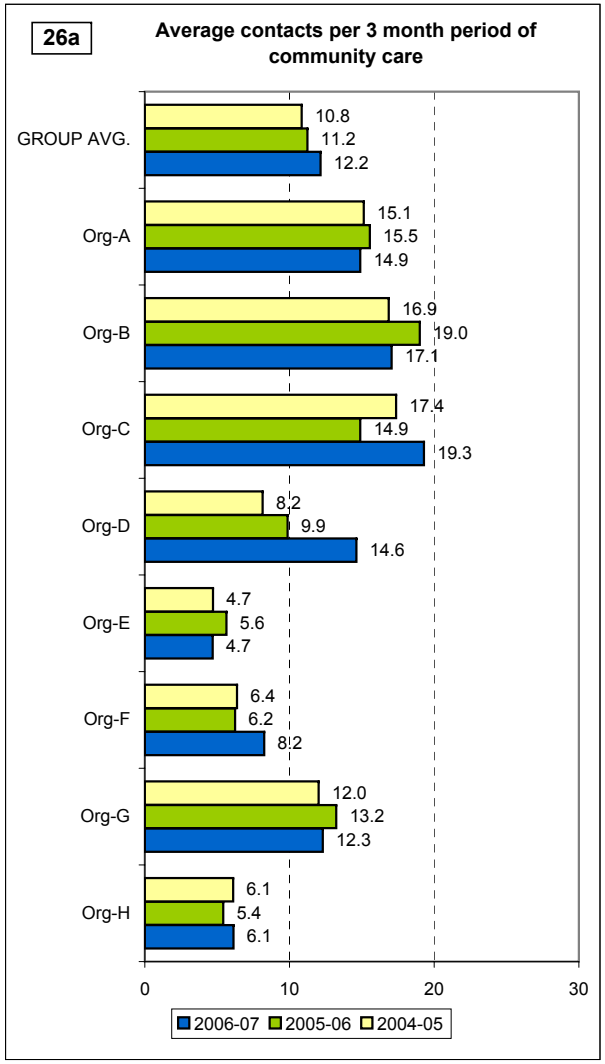






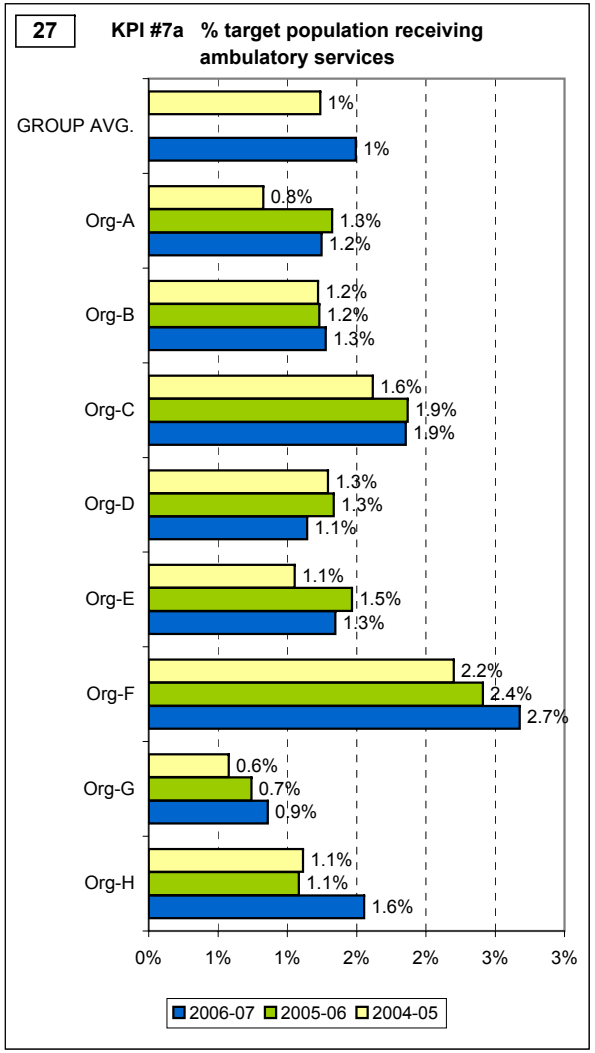
THEME 4: Continuity of care (cont'd)



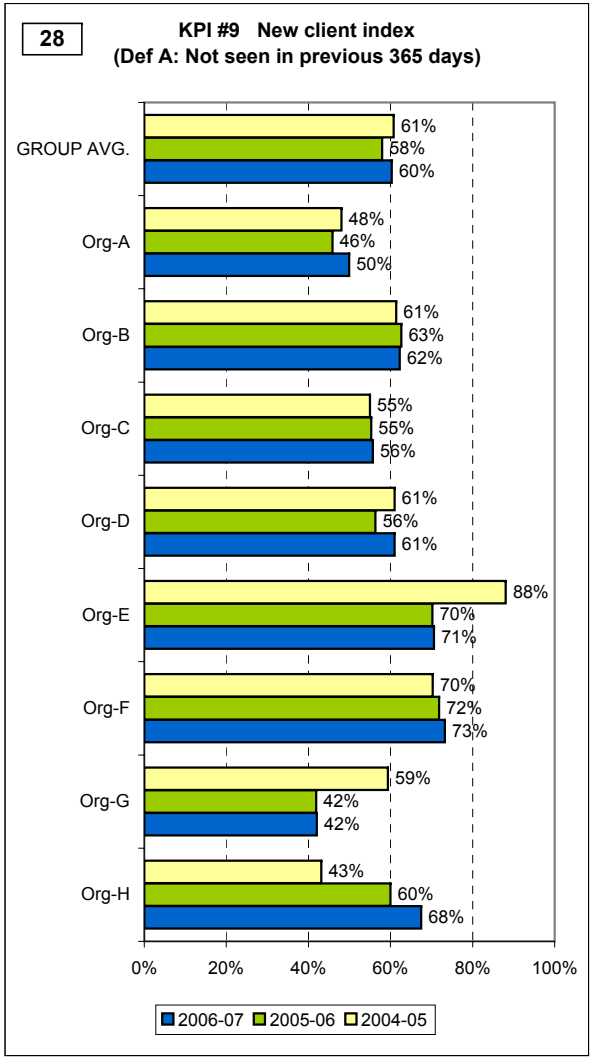


THEME 5: Access to ambulatory care

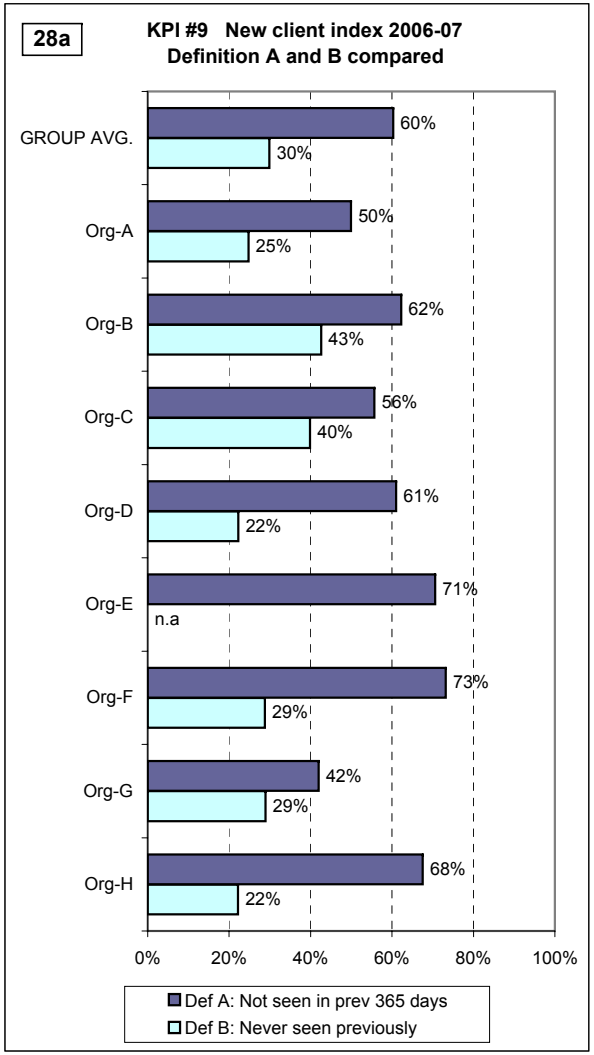
27 KPI #7a % target population receiving ambulatory services



28 KPI #9 New client index (Def A: Not seen in previous 365 days)

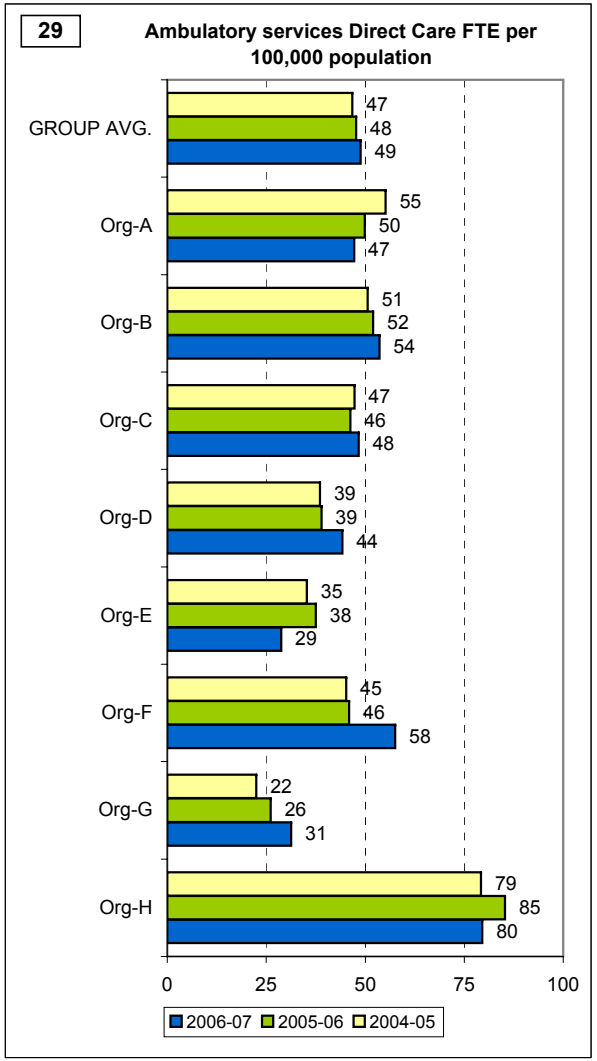


28a KPI #9 New client index 2006-07 Definition A and B compared

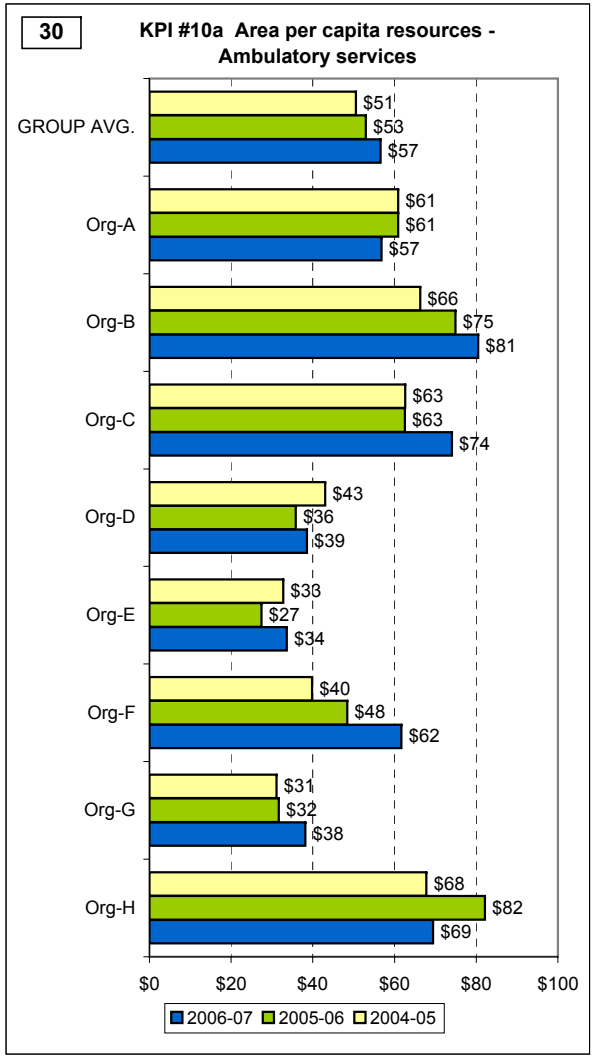


THEME 5: Access to ambulatory care (cont'd)

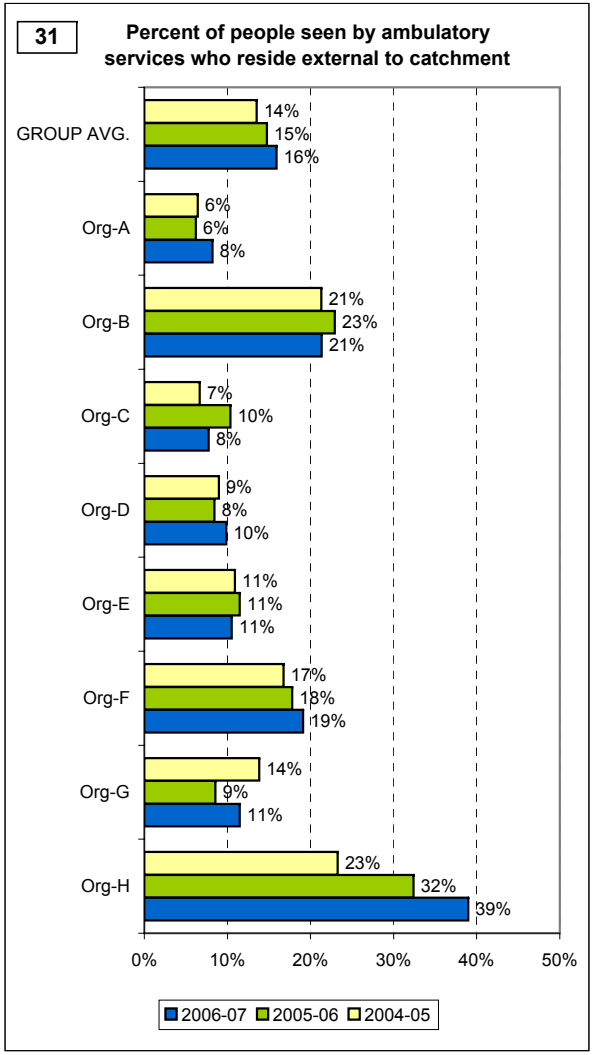
29



30

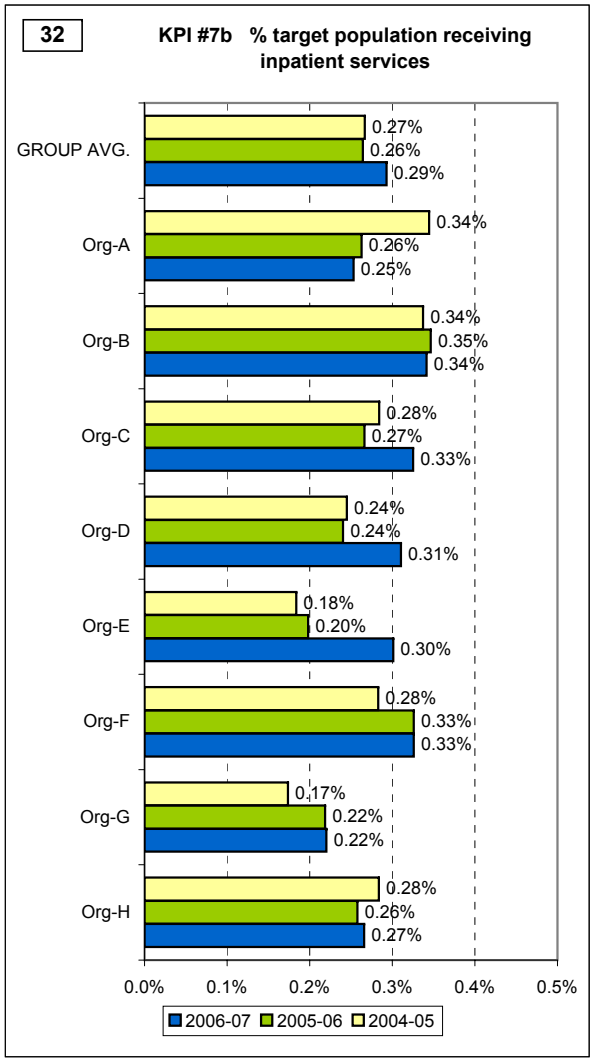


31

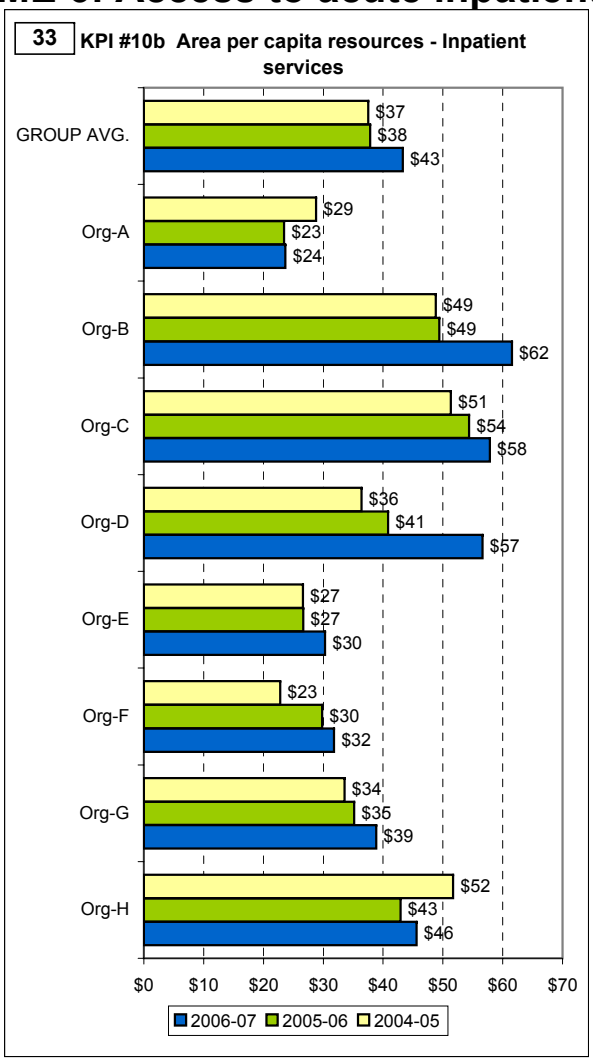


THEME 6: Access to acute inpatient care

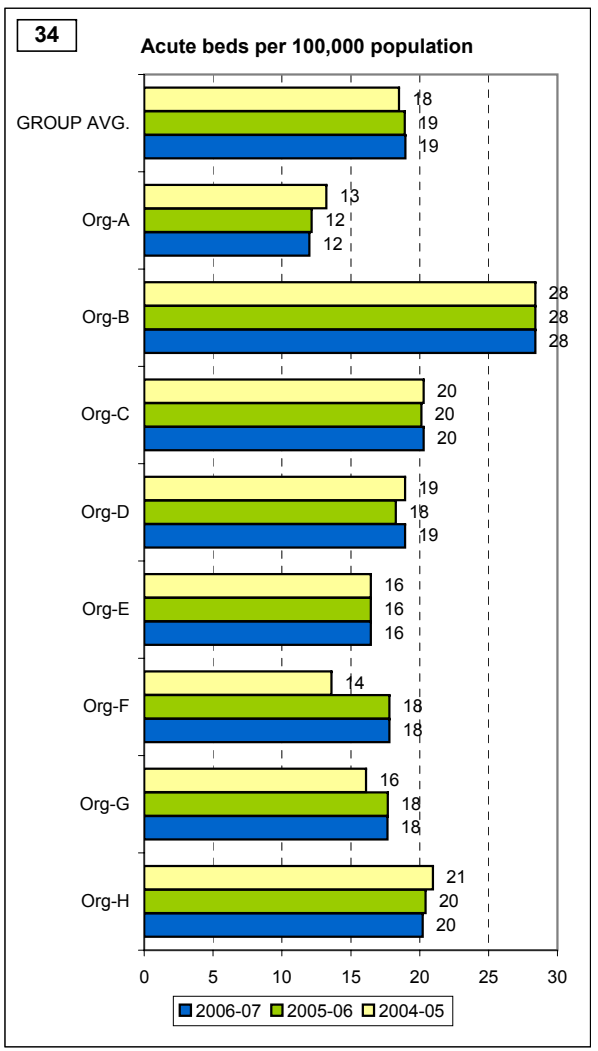
32 KPI #7b % target population receiving inpatient services



33 KPI #10b Area per capita resources - Inpatient services



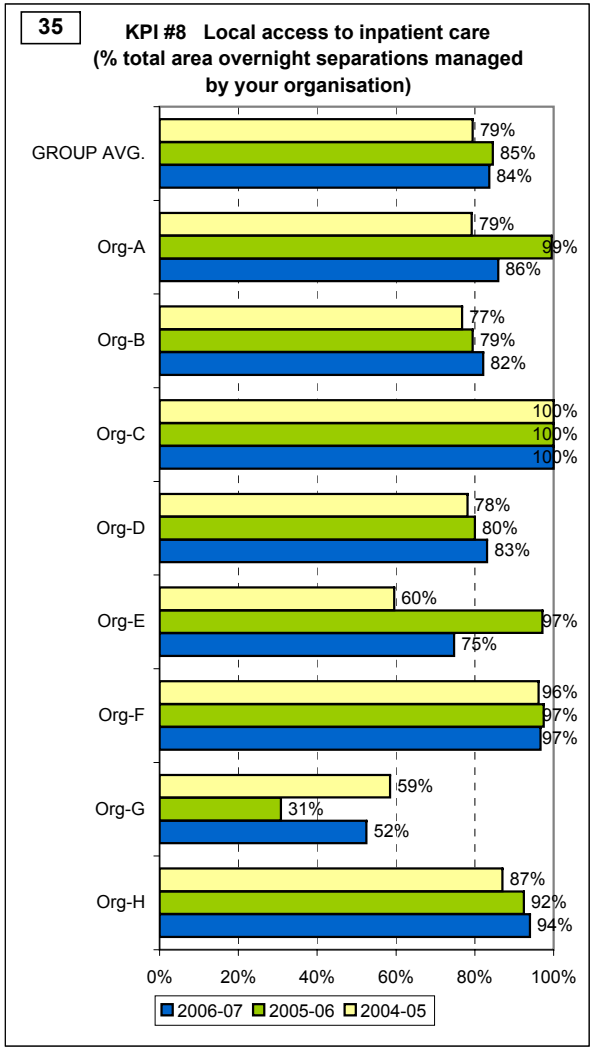
34 Acute beds per 100,000 population



THEME 6: Access to acute inpatient care (cont'd)

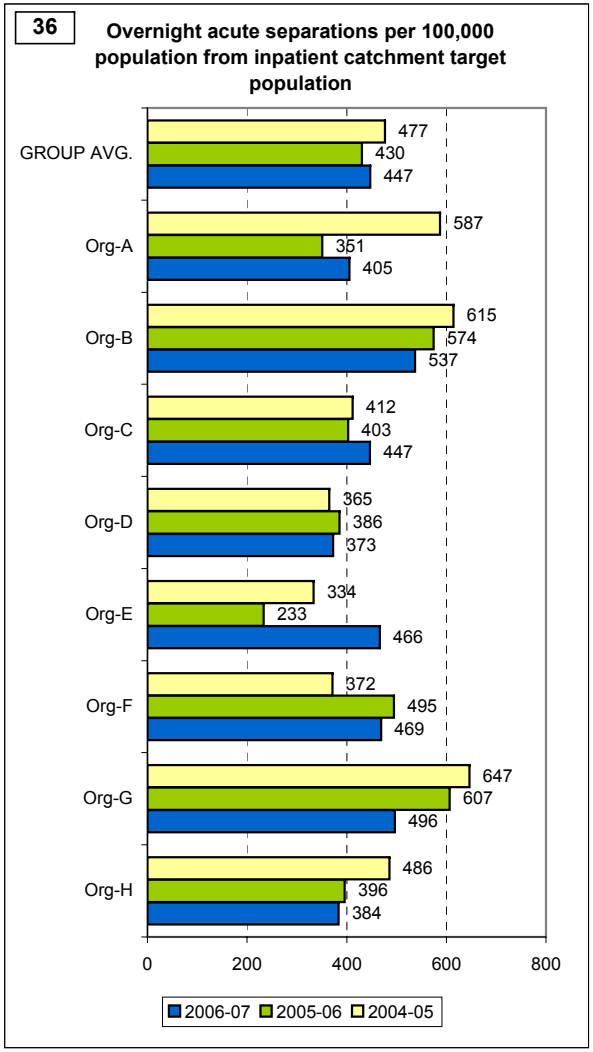
35

KPI #8 Local access to inpatient care (% total area overnight separations managed by your organisation)



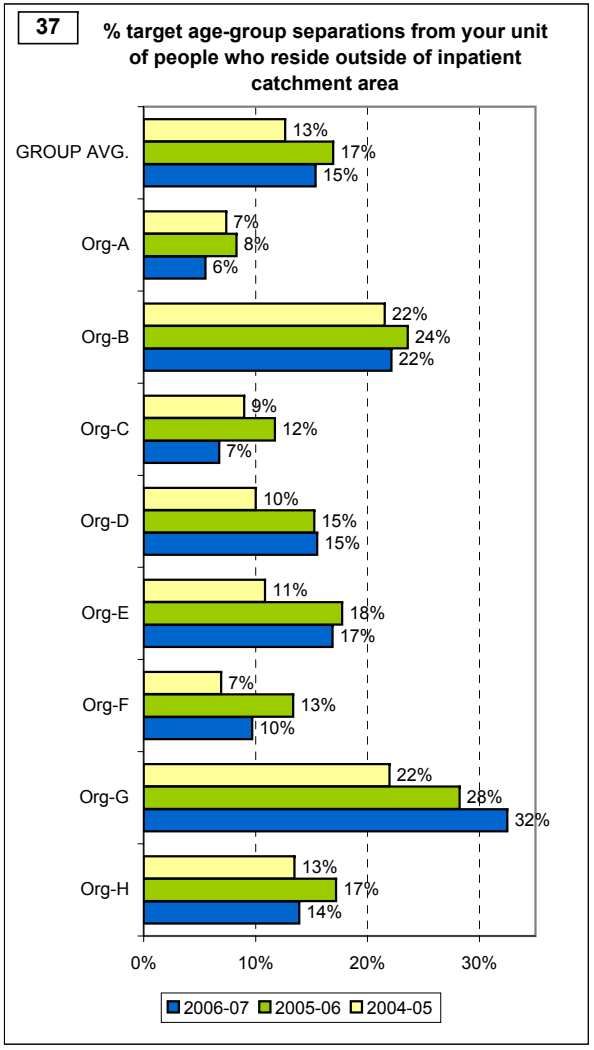
36

Overnight acute separations per 100,000 population from inpatient catchment target population



37

% target age-group separations from your unit of people who reside outside of inpatient catchment area

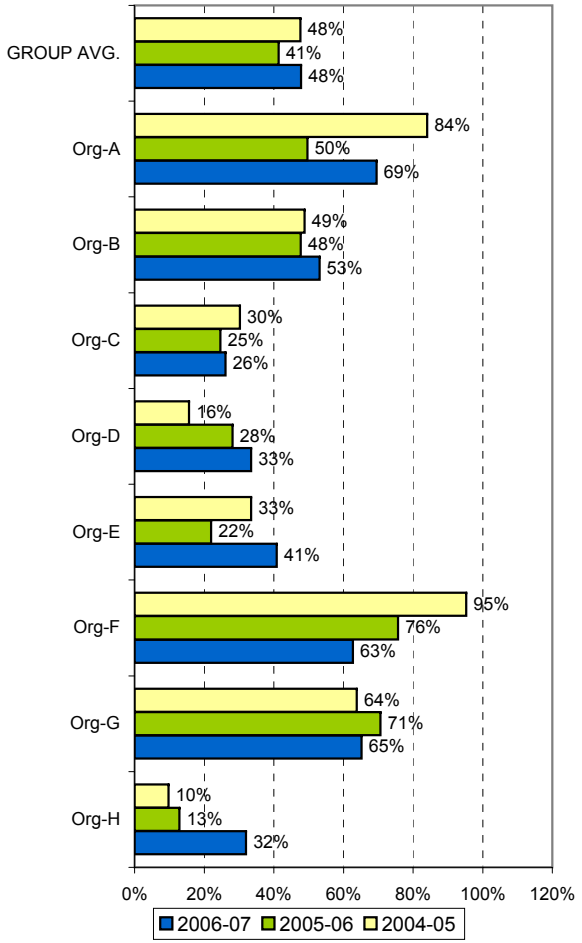


Theme Charts

THEME 7: Capability

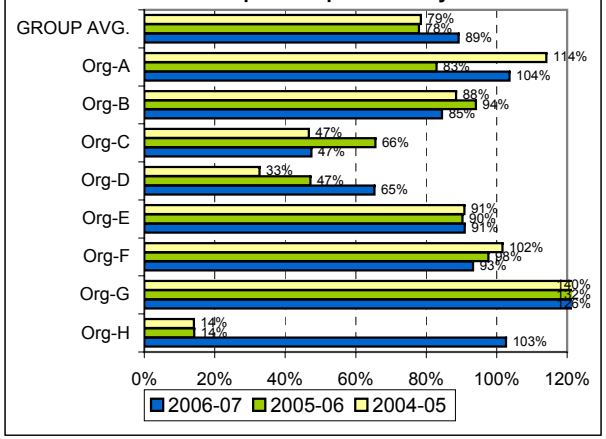
38a

KPI #13 Outcomes readiness
% episodes with outcomes completed (HoNOS)



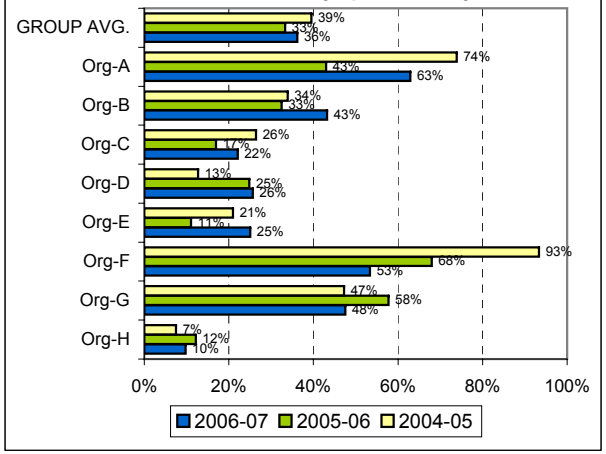
38b

KPI #13 Outcomes readiness
Inpatient episodes only



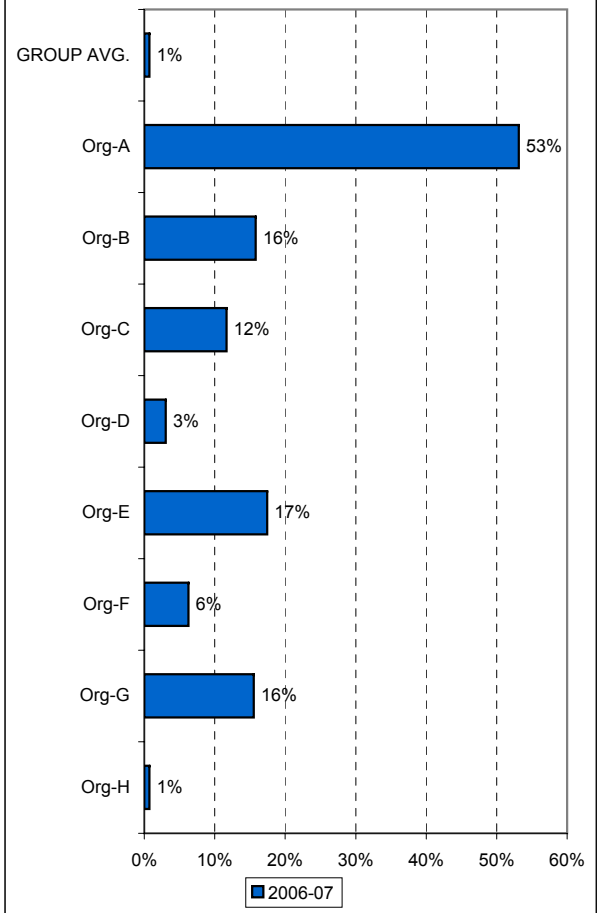
38c

KPI #13 Outcomes readiness
Ambulatory episodes only



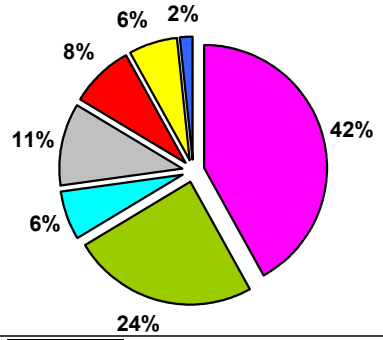
38d

Alternative KPI #13 Outcomes readiness
% ambulatory episodes with completed
consumer self rated measures 2006-07

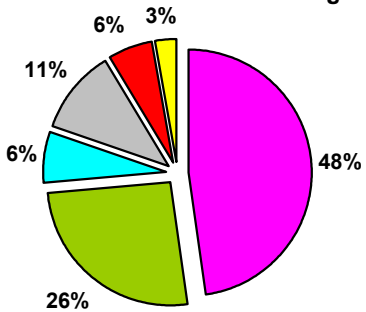


THEME 8: Acute Inpatient casemix- (a) Diagnosis profile 2006-07

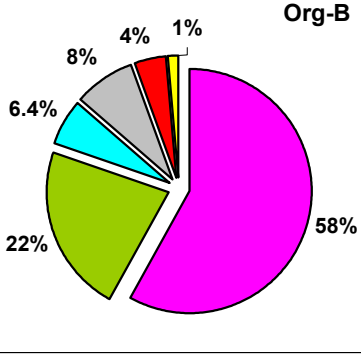
39a GROUP AVERAGE



39b Org-A

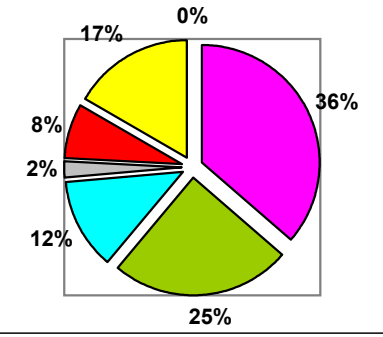


39c Org-B

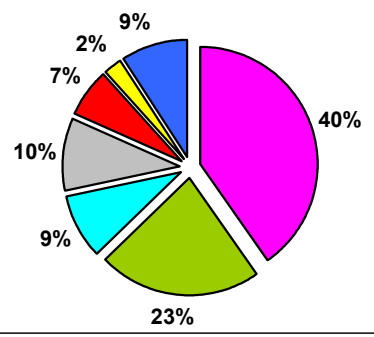


Schizophrenia and related | Mood disorders | Personality Disorders | Neurotic, Stress, Somataform disorders
Substance abuse | Other | Missing Diagnosis

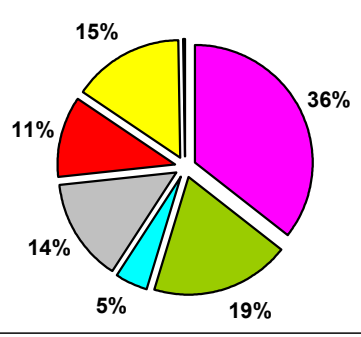
39d Org-C



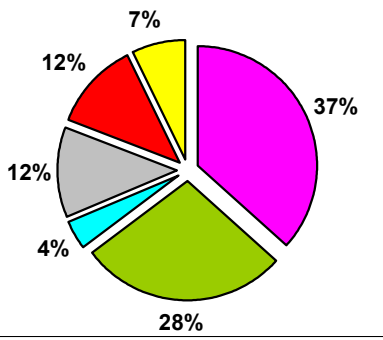
39e Org-D



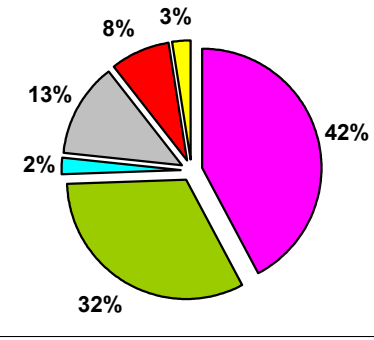
39f Org-E



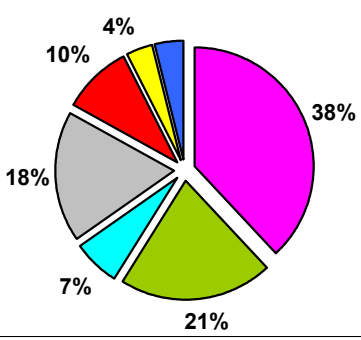
39g Org-F



39h Org-G



39i Org-H

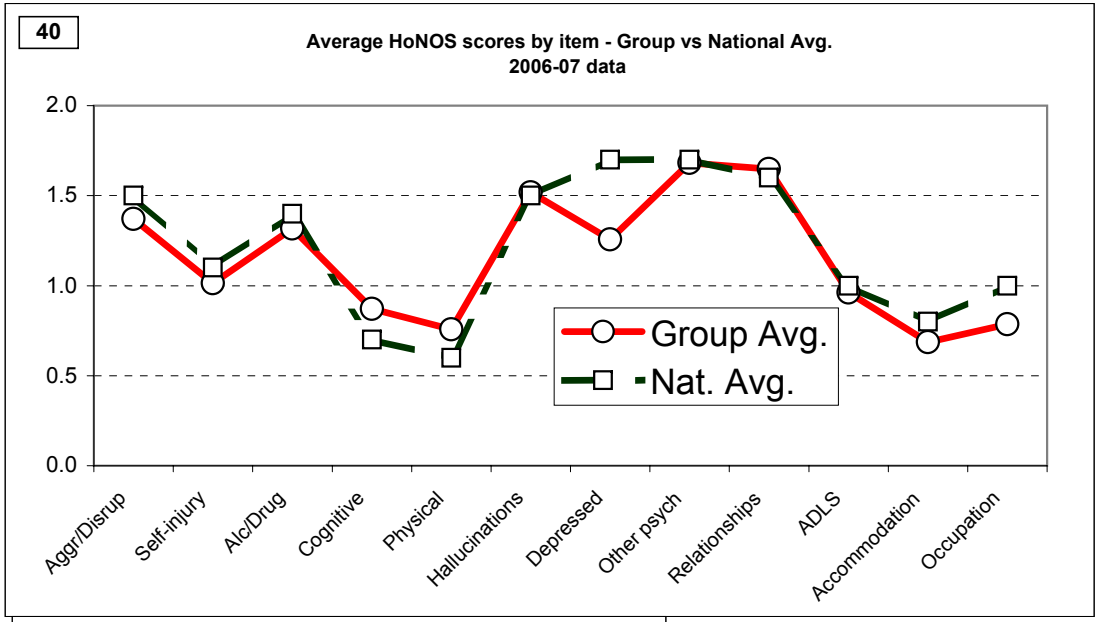


39J **Percentage overnight separations included in the data:**

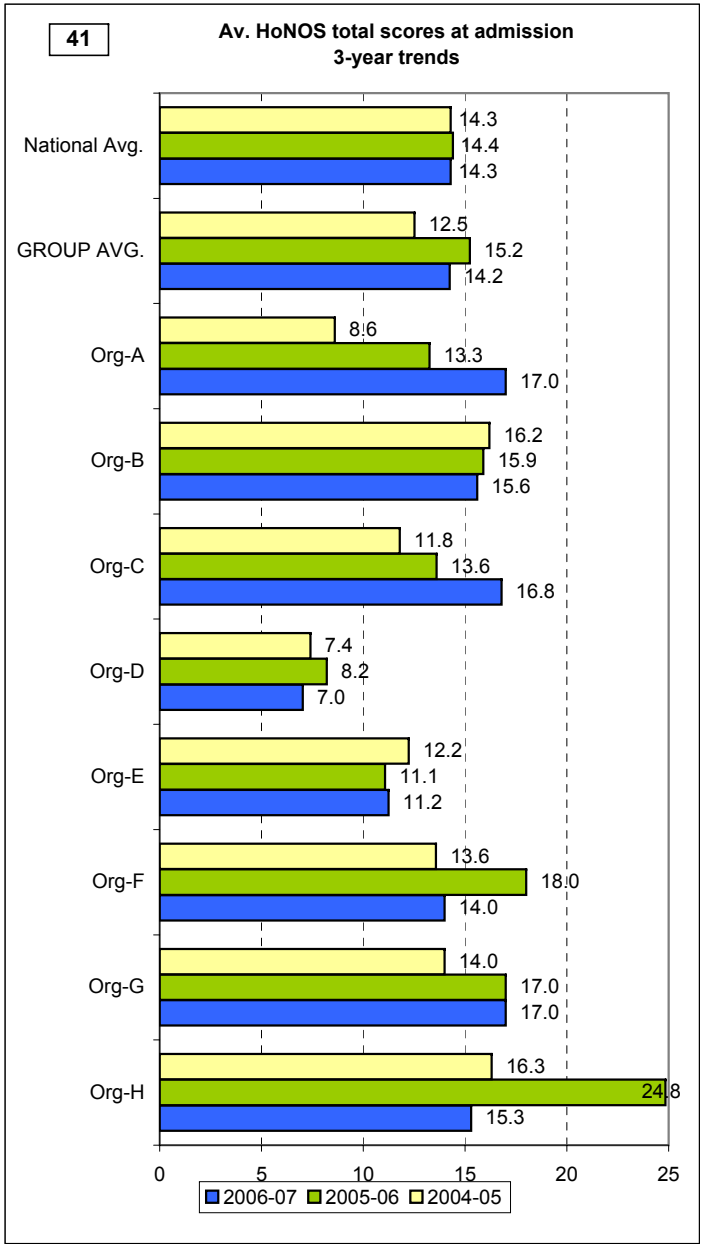
Group average	100%	Org-A	100%	Org-B	100%	Org-C	100%	Org-D	100%
		Org-E	100%	Org-F	100%	Org-G	100%	Org-H	100%

THEME 8: Acute Inpatient casemix - (b) HoNOS at admission

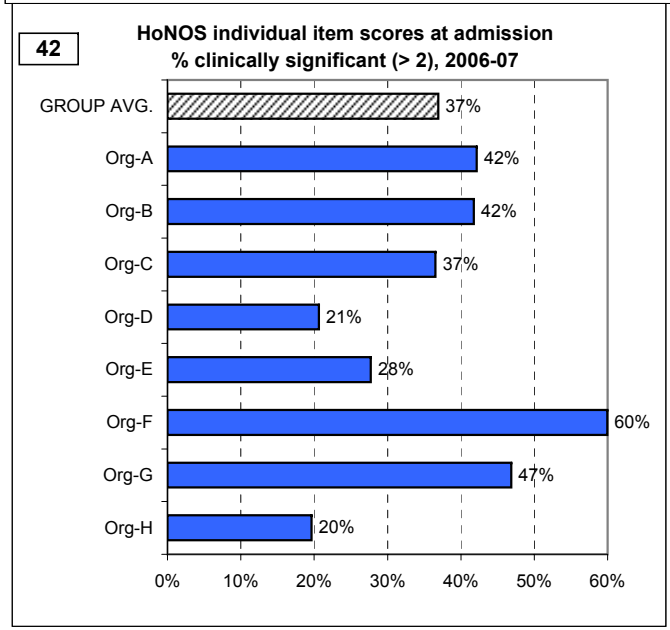
40



41



42



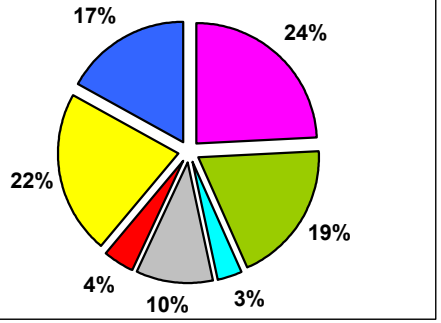
43

Percentage overnight separations with HoNOS Admission, 2006-07 data:

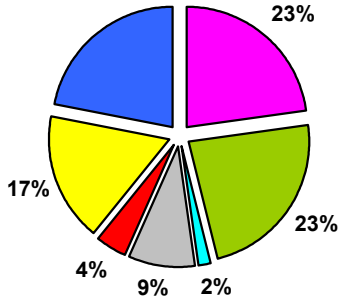
Group average	86%	Org-A	75%	Org-B	91%	Org-C	67%	Org-D	81%
		Org-E	96%	Org-F	99%	Org-G	77%	Org-H	99%

THEME 9: Ambulatory care casemix - (a) Diagnosis profile 2006-07

44a GROUP AVERAGE



44b Org-A



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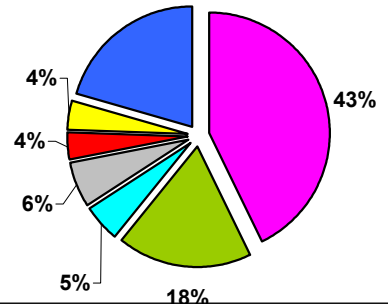
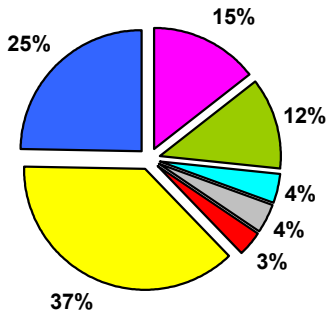
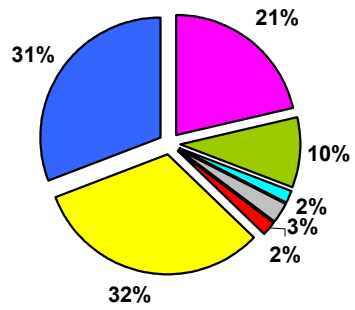


Schizophrenia and related | Mood disorders | Personality Disorders | Neurotic, Stress, Somataform disorders
Substance abuse | Other | Missing Diagnosis

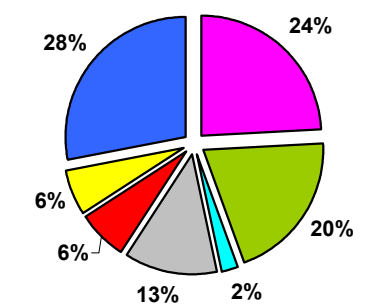
44d Org-C



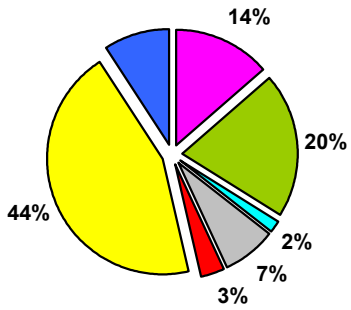
44e Org-D



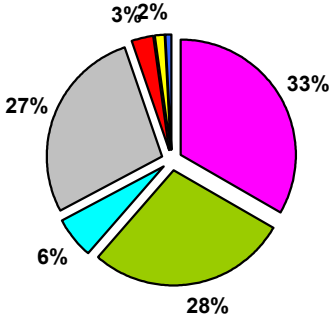
44f Org-E



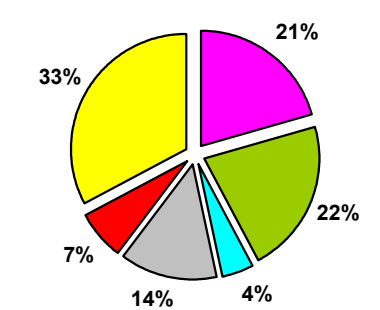
44g Org-F



44h Org-G



44i Org-H

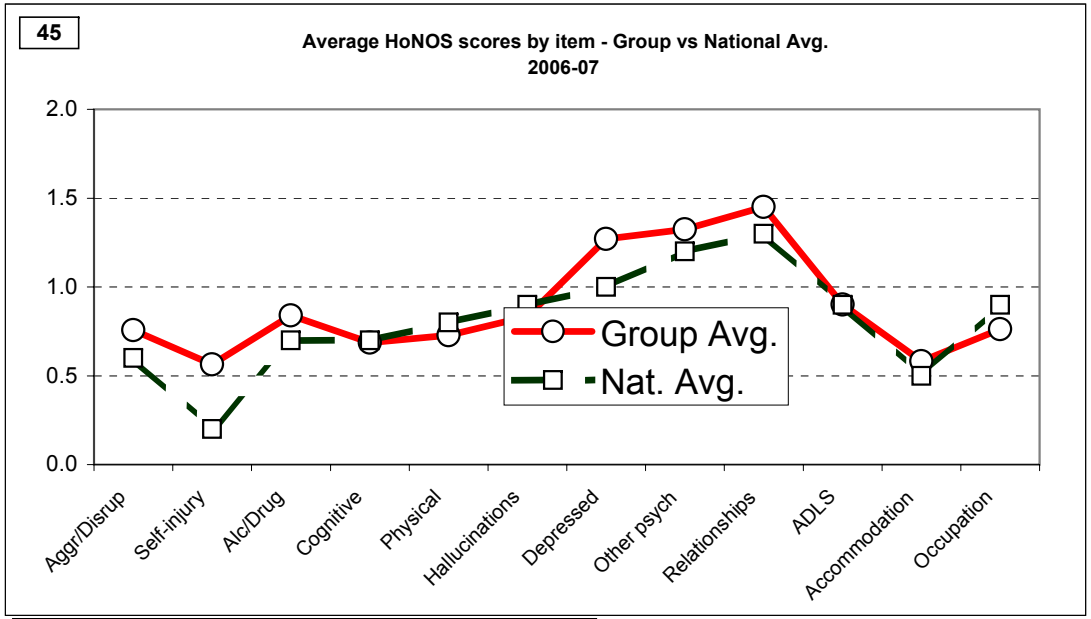


44j **Percentage of total persons seen in community included in diagnostic data:**

Group average	93%	Org-A	90%	Org-B	57%	Org-C	100%	Org-D	100%		
		Org-E	100%	Org-F	100%	Org-G	100%	Org-H	100%		

THEME 9: Ambulatory care casemix - (a) HoNOS

45



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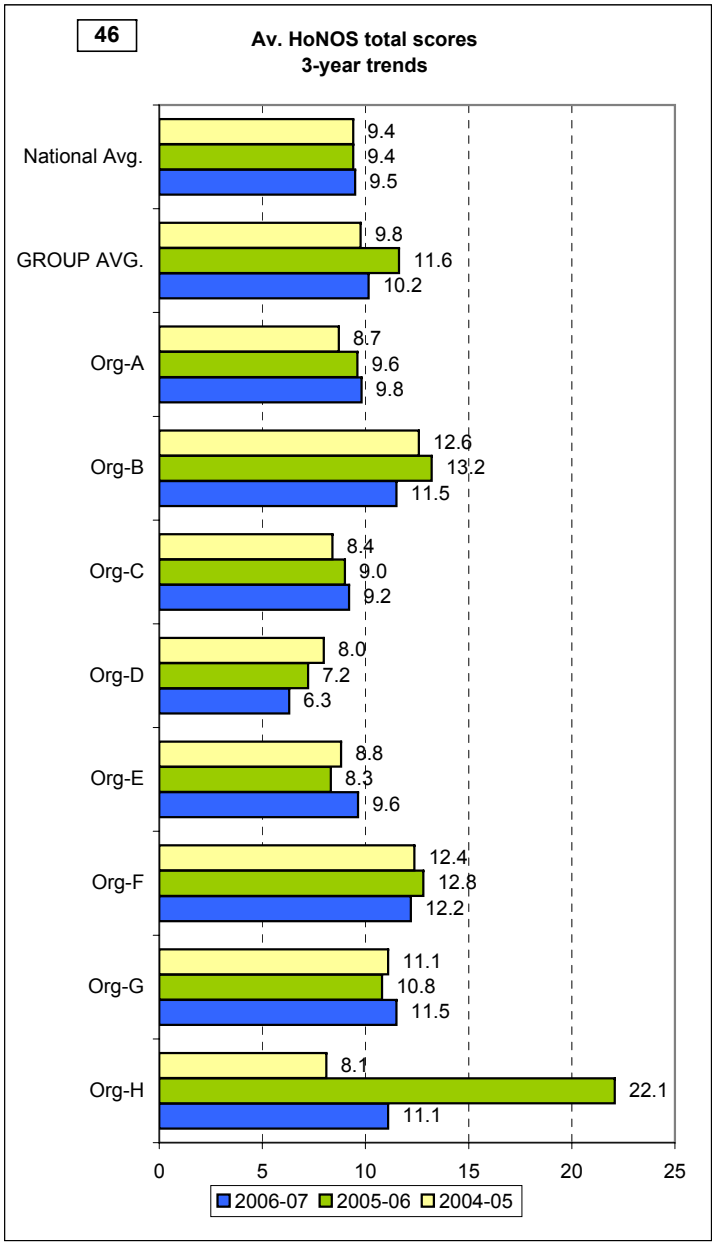

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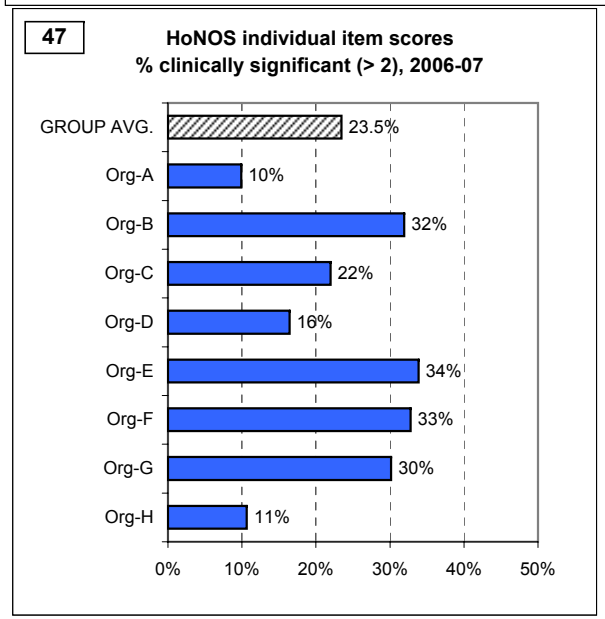
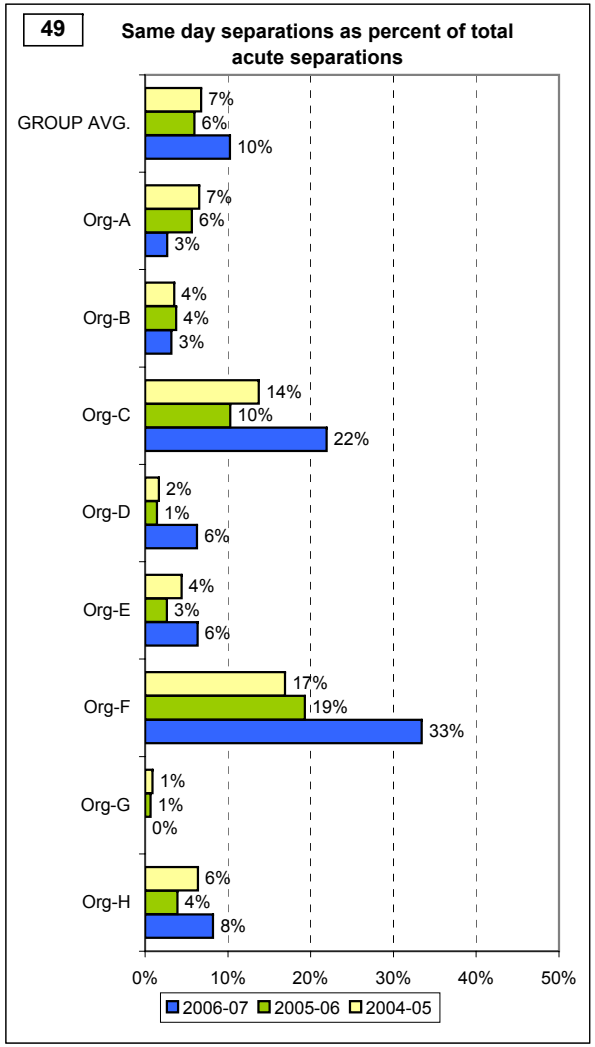


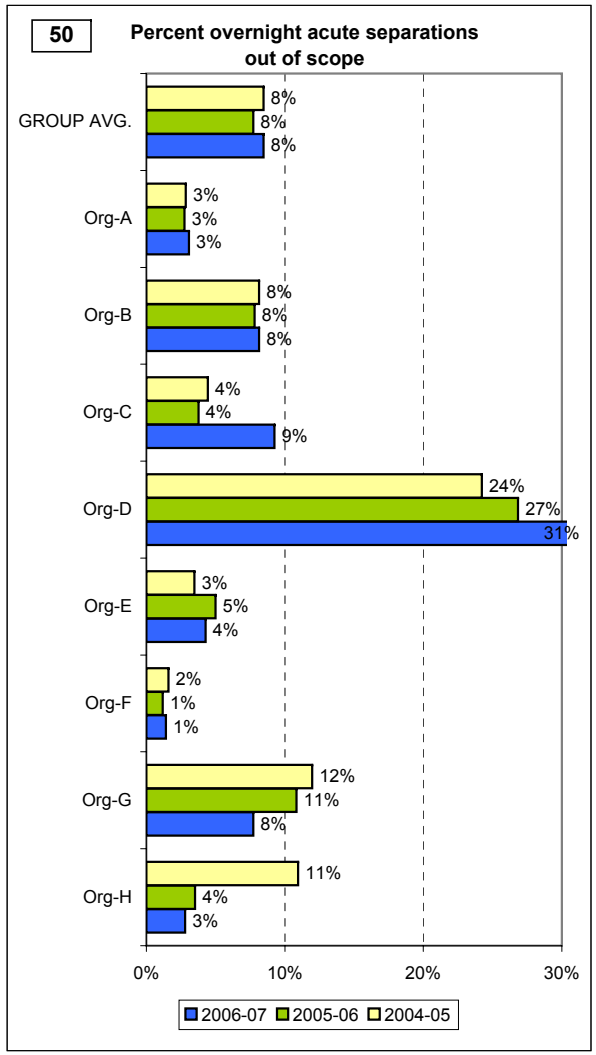
48

Percentage of total persons seen in community included in HoNOS, 2006-07 data:

Group average	38%	Org-A	84%	Org-B	24%	Org-C	13%	Org-D	56%
		Org-E	20%	Org-F	40%	Org-G	58%	Org-H	6%

Ungrouped supplementary indicators





Details on how the supplementary indicators were constructed

All reference numbers link to the numbers in boxes within the indicator charts in 'Theme Charts'

Ref		Numerator	Denominator	Notes
	THEME 1: Comparative resources available to the organisation			
1	Total in-scope expenditure ($M)			Simply adds all in scope expenditure reported and converts to millions
2	Inpatient services financials - $ per capita	Total expenditure/funding reported for in scope inpatient services (acute and non acute)	Total catchment population for in scope acute inpatient services	Indicator shows differential between funding and expenditure
3	Ambulatory services financials - $ per capita	Total expenditure/funding reported for in scope ambulatory services	Total catchment population for in scope ambulatory services	Indicator shows the difference between funding and expenditure
4	Ambulatory services Direct Care FTE per 100,000 population	Number of ambulatory services direct care FTE	Total catchment population for in scope ambulatory services	
5	Acute beds per 100,000 population	Number of in scope acute inpatient beds	Total catchment population for in scope acute inpatient services	
6	Residential beds per 100,000 population	Number of in scope residential beds	Total catchment population for in scope residential services	
	THEME 2: Efficiency in use of resources			
7	Indirect expenditure as % in scope total	Total indirect expenditure reported for all in scope services	Total expenditure reported for all in scope services	Indicator is intended to assess the extent to which organisations are comparable in what is included in the overall reported expenditure
8	Salaries as % in scope total expenditure	Total salaries and wages expenditure reported for all in scope services	Total expenditure reported for all in scope services	Indicator is intended to assess the extent to which organisations are comparable in what is included in the overall reported expenditure
9	Acute inpatient length of stay (KPI #3)			Constructed as per KPI #3 - see Technical Specifications
9a	Acute inpatient length of stay - Mean and Median compared 2006-07			Medians are as calculated and reported by organisations

Details on how the supplementary indicators were constructed

All reference numbers link to the numbers in boxes within the indicator charts in 'Theme Charts'

Ref		Numerator	Denominator	Notes
10	Acute inpatient LOS outliers (>35 days)	Number of in scope overnight separations with length of stay >35 days, reported at KPI #3	Number of in scope overnight separations, reported at KPI #1	
11	Acute unit(s) - Derived occupancy	Total accrued mental health care days reported for in scope acute units, reported at KPI #4	Number of beds reported for in scope acute inpatient units x 365	
12	Cost per acute inpatient episode (KPI #4)			Constructed as per KPI #4 - see Technical Specifications
12A	Cost per day - acute inpatient units	Total expenditure reported for in scope acute units	Total acrrued mental health care days reported for in scope acute units, reported at KPI #4	
13	Full year cost per acute inpatient bed	Total expenditure reported for in scope acute units	Number of in scope acute inpatient beds	
14A	Average direct care staff hours per patient day - in scope acute units	Total acrrued mental health care days reported for in scope acute units, reported at KPI #4	Total direct care staffing hours for in-scope acute inpatient units, reported on Org Service Profile	Indicator shows the different staffing levels for acute units and is intended to assist in understanding variation in patient day costs
14B	Staffing mix per average patient day in scope acute units	For each of the three main groups (Nursing, Medical, Allied Health), total hours is expressed as a percentage of total direct care staffing hours reported for in-scope acute units		Indicator shows the different staffing mix for acute units
15	Full year cost per direct care ambulatory FTE	Total expenditure reported for in scope ambulatory services	Number of ambulatory services direct care FTE	Not equivalent to average salaries - because costs are total and include non salary and indirect
16	KPI #5 Average treatment days per 3 month period of community care			Constructed as per KPI #5 - see Technical Specifications
17	KPI #6 Average cost per 3 month period of community care			Constructed as per KPI #6 - see Technical Specifications
18	Average cost per community treatment day	Total expenditure/funding reported for in scope ambulatory services	Total number of treatment days, reported at KPI #5	
18a	Av. Annual cost per residential bed	Total expenditure reported for in scope residential units	Number of in scope residential beds	

Details on how the supplementary indicators were constructed

All reference numbers link to the numbers in boxes within the indicator charts in 'Theme Charts'

Ref		Numerator	Denominator	Notes
	THEME 3: Productivity and activity of ambulatory services			
		Numerator	**Denominator**	**Notes**
19	Av. weekly contacts per direct care FTE	Total service contacts, reported at KPI #5	Total direct care ambulatory FTE x 44	Assumes 44 working weeks per direct care FTE
20	Av. weekly treatment days per direct care FTE (approx = N patients per week per FTE)	Total treatment days, reported at KPI #5	Total direct care ambulatory FTE x 44	Assumes 44 working weeks per direct care FTE. NOTE: This indicator approximates av. number of consumers seen per week per direct care FTE
20a	Av.contacts recorded per treatment day	Total service contacts, reported at KPI #5	Total treatment days reported at KPI #5	No differentiation made between 'assessment only' and other treatment days
21	Av. number of seen people per years per ambulatory services direct care FTE	Number of people receiving one or more contacts from in scope ambulatory service teams, reported at KPI #7	Total direct care ambulatory FTE	
22	' Assessment only' episodes (1 treatment day) as percent of total 3 month episodes	Number of consumers receiving one treatment day only, reported at KPI #5	Total 3-month periods of care, reported at KPI #5	
	THEME 4: Continuity of care			
23	KPI #11 Pre admission community care			Constructed as per KPI #11 - see Technical Specifications
23a	KPI #11 alternative: 2006-07 Pre admission community care - Open cases vs all cases	The number of admissions reported at KPI #11 who were 'Open Cases' in the period immediately preceding the date of admission. It is recognised that benchmarking organisations have varying definitions of 'open cases'. However, an open case refers to an individual who is in active community care.	Constructed as per KPI #11 - see Technical Specifications	

Details on how the supplementary indicators were constructed

All reference numbers link to the numbers in boxes within the indicator charts in 'Theme Charts'

Ref		Numerator	Denominator	Notes
24	KPI #12 Post discharge community care			Constructed as per KPI #12 - see Technical Specifications. NOTE: for 2006-07, defintion changed to count only those post discharge contacts in which the client directly participated
25	KPI #1 28-day readmission rate - - to own psych unit			Constructed as per KPI #1 - see Technical Specifications
25A	KPI #1 28-day readmission rate - - to any psych unit	Constructed as per KPI #1 - see Technical Specifications, except readmissions based on new data submitted on readmissions to any psychiatric unit		This provides a better estimate of the 'real' readmission rates for people discharged from acute inpatient units
25b	2006-07 Readmission Rates compared - 7 day, 28 day and 180 days (any psych unit)	For 28 day readmits - as per Supp Ind 25A For 7-day and 180-day readmits: Based on data submitted by organisations, for readmissions to any psych unit within the defined period	Constructed as per Supp Ind 25A	
26	KPI #5 Average treatment days per 3 month period of community care			Constructed as per KPI #5 - see Technical Specifications
26a	Average contacts per 3 month period of community care	Total service contacts, reported at KPI #5	Total 3-month periods of care, reported at KPI #5	No differentiation made between 'assessment only' and other treatment days
	THEME 5: Access to ambulatory care			
27	KPI #7a % target population receiving ambulatory services			Constructed as per KPI #7 - see Technical Specifications
28	KPI #9 New client index (Def A: Not seen in previous 365 days)			Constructed as per KPI #9 - see Technical Specifications

Details on how the supplementary indicators were constructed

All reference numbers link to the numbers in boxes within the indicator charts in 'Theme Charts'

Ref		Numerator	Denominator	Notes
28a	KPI #9 New client index 2006-07: Definition A and B compared	Definition A as per #28. Definition B counts a client as 'new' only if there is no record of the person having received any service from the organisation's mental health services, at any time		
29	Ambulatory services Direct Care FTE per 100,000 population	Number of ambulatory services direct care FTE	Total catchment population for in scope ambulatory services	Same as reference 4 above
30	KPI #10a Area per capita resources - Ambulatory services			Constructed as per KPI #10 - see Technical Specifications
31	Percent of people seen by ambulatory services who reside external to catchment	Number of people receiving one or more contacts from in-scope ambulatory services who reside external to catchment area, reported at KPI #7	Total number of people receiving one or more contacts from in scope ambulatory service teams, reported at KPI #7	
	THEME 6: Access to acute inpatient care			
32	KPI #7b % target population receiving inpatient services			Constructed as per KPI #7 - see Technical Specifications
33	KPI #10b Area per capita resources - Inpatient services			Constructed as per KPI #10 - see Technical Specifications
34	Acute beds per 100,000 population	Number of in scope acute inpatient beds	Total catchment population for in scope acute inpatient services	Same as reference 5 above
35	KPI #8 Local access to inpatient care (% total area overnight separations managed by your organisation)			Constructed as per KPI #8 - see Technical Specifications
36	Overnight acute separations per 100,000 population from inpatient catchment target population	Total overnight separations by persons in age-specific target population from the organisation catchment, reported at KPI #8	Acute inpatient services age-specific Area catchment population at December 2004, reported at KPI #7	Numerator includes separations from all inpatient services including those not managed by the organisation

Details on how the supplementary indicators were constructed

All reference numbers link to the numbers in boxes within the indicator charts in 'Theme Charts'

Ref		Numerator	Denominator	Notes
37	% target age-group separations from your unit of people who reside outside of inpatient catchment area	Number of target age-group separations from your unit of people who reside outside of inpatient catchment area, reported at KPI #8	Number of separations by target age-group from your unit, reported at KPI #8	
	THEME 7: Capability			
38a	KPI #13 Outcomes readiness - % episodes with outcomes completed (HoNOS)			Constructed as per KPI #13 - see Technical Specifications
38b	KPI #13 Outcomes readiness - Inpatient episodes only			Constructed as per KPI #13 - see Technical Specifications
38c	KPI #13 Outcomes readiness - Ambulatory episodes only			Constructed as per KPI #13 - see Technical Specifications
38d	Alternative KPI #13 Outcomes readiness - % ambulatory episodes with completed consumer self rated measures 2006-07	Constructed as per KPI #13 for ambulatory episodes (see Technical Specifications), with the following variation: Numerator = the number of NOCC Ambulatory Care Setting Collection Occasions recorded in 2006-07 that have a valid consumer self-report measure. Validity of measures defined by: K10 - a minimum of 9 items of items 1-10 must have a valid score; For BASIS-32 - a minimum of 24 of the items must have a valid score (Note that items 2, 3 & 4 only count as one item. For MHI - a minimum of 30 items must have a valid score		
	THEME 8: Acute Inpatient casemix - (a) Diagnosis			
39a to 39i		Based on diagnostic data submitted by organisations covering separations from in-scope acute inpatient units. For each of the main diagnostic groups, number of separations is expressed as a percentage of total separations.		New data submitted to allow comparison of acute inpatient profiles

Details on how the supplementary indicators were constructed

All reference numbers link to the numbers in boxes within the indicator charts in 'Theme Charts'

Ref		Numerator	Denominator	Notes
39j	Percentage overnight separations included in the data	Total separations reported with a diagnosis	Total overnight separations from in scope acute units as reported at KPI #1	This indicator shows the coverage of diagnostic data submitted by each organisation and provides information about the extent to which the diagnostic profile is representative of total acute inpatient separations for the organisation
	THEME 8: Acute Inpatient casemix - (b) HoNOS at admission			
40	Average HONOS scores by item - Group vs National Avg.	New data as submitted by organisations. Group average is average of benchmarking participants. National data taken from AMHOCN Decision Support Tool, and provides average HoNOS scores for adult admissions to inpatient care during 2006-07 (n = 44,251 cases)		New data submitted to allow comparison of acute inpatient profiles
41	Av. HoNOS total scores at admission - 3-year trends	Data as submitted by organisations. National data taken from AMHOCN Decision Support Tool, as described above)		New data submitted to allow comparison of acute inpatient profiles
42	HoNOS scores at admission - % clinically significant	Number of HoNOS items with a score > 2, summed across all 12 scales for all admissions	(Total number of separations included in sample) x 12	New data submitted to allow comparison of acute inpatient profiles. This indicator provides an alternative to Total HoNOS score as an overall measure of casemix severity
43	Percentage overnight separations with HoNOS Admission data	Total separations reported with HoNOS admission data	Total overnight separations from in scope acute units as reported at KPI #1	This indicator shows the coverage of HoNOS data submitted by each organisation and provides information about the extent to which the HoNOS profile is representative of total acute inpatient separations for the organisation

Details on how the supplementary indicators were constructed

All reference numbers link to the numbers in boxes within the indicator charts in 'Theme Charts'

Ref		Numerator	Denominator	Notes
	THEME 9: Ambulatory care casemix - (a) Diagnosis			
44a to 44i		Based on diagnostic data submitted by organisations covering consumers seen by in-scope ambulatory care teams. For each of the main diagnostic groups, number of consumers is expressed as a percentage of total consumers reported with a diagnosis.		New data submitted to allow comparison ambulatory care consumer profiles
44j	Percentage of total persons seen in community included in diagnostic data	Total consumers reported with a diagnosis	Total consumers receiving one or more contacts by in-scope ambulatory care teams, as reported at KPI #7	This indicator shows the coverage of diagnostic data submitted by each organisation and provides information about the extent to which the diagnostic profile is representative of total consumers seen in ambulatory care by the organisation.
	THEME 9: Ambulatory care casemix - (a) HoNOS			
45	Average HONOS scores by item - Group vs National Avg.	New data as submitted by organisations. Group average is average of benchmarking participants. National data taken from AMHOCN Decision Support Tool, and provides average HoNOS scores for adult consumers seen in ambulatoryservices during 2006-07, **at Review** (n = 67,221 cases)		New data submitted to allow comparison of ambulatory care profiles
46	Av. HoNOS total scores	New data as submitted by organisations. National data taken from AMHOCN Decision Support Tool, as described above)		New data submitted to allow comparison of ambulatory care profiles
47	HoNOS scores - % clinically significant	Number of HoNOS items with a score > 2, summed across all 12 scales for all consumers	(Total number of consumers included in sample) x 12	New data submitted to allow comparison of ambulatory care profiles. This indicator provides an alternative to Total HoNOS score as an overall measure of casemix severity

Details on how the supplementary indicators were constructed

All reference numbers link to the numbers in boxes within the indicator charts in 'Theme Charts'

Ref		Numerator	Denominator	Notes
48	Percentage of total persons seen in community included in HoNOS data	Total consumers reported with HoNOS data	Total consumers receiving one or more contacts by in-scope ambulatory care teams, as reported at KPI #7	This indicator shows the coverage of HoNOS data submitted by each organisation and provides information about the extent to which the HoNOS profile is representative of total consumers seen in ambulatory care by the organisation.
	Ungrouped supplementary indicators			
49	Same day separations as percent of total acute separations			
50	Percent overnight acute separations out of scope			