**Mental Health and Addiction Mental Health Services –**

**Data Definitions and Descriptions**

**Log of Updates**

**Updated February 2015** by: Sector Capability and Implementation, Mental Health Service Improvement Ministry of Health. Reference to PRIMHD codes removed. PRIMHD data should be reported in line with the PRIMHD code set and agreed in PRIMHD mapping documents.

Updated March 2013 by: National Collections and Reporting Information Group and Sector Capability and Implementation, Mental Health Service Improvement Ministry of Health.

| Definition | **Description** |
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| Admissions | The number of people admitted to the residential/inpatient service during the reporting period.  The number of unique clients who have had an inpatient admission within the reporting period. Admission = first activity start date within the referral. |
| Available Beds | The total number of resourced beds usually available in the facility.  NB: This is usually the number of beds funded/resourced and does not mean that the bed is unoccupied. |
| Available Bed Days | Total number of inpatient beds that are available to be occupied during the period multiplied by the number of days they are available during that period. This would normally be the number of available beds from above multiplied by the number of days in the period. Example: Number of resourced beds x Number of days in the period. |
| Available Budget | The total budget available during the reporting period for the service. |
| Average Length of Stay | Inpatient/Accommodation/Housing- The average number of days between first admission and final discharge for all people “discharged” from the service during the period. If there have been no discharges in the period please enter “N/A”. You will only be able to measure this when you have had a client exit your service during this period. Community Services - The average number of days between first contact and final contact for all people “discharged” from the service during the period. Where this cannot be measured, record “not measured”. This is calculated as the sum of the total number of calendar days for each client between first contact/admission and final contact/discharge during the reporting period, divided by the total number of clients who have been “discharged” during the reporting period. Each day should be counted even if the service was unavailable e.g. public holidays and weekends. The first and last day should be counted.  Example: Two clients are discharged, one after 22 days and one after 87 days. Add the days together and then divide by the number of clients discharged – this gives you the average length of stay.  22 + 87 = 109 (days in service) ÷ 2 (clients discharged) = 54.5 days  The average length of stay (ALOS) for clients who have had an inpatient or community discharge within the reporting period. Discharge = last activity end date of the referral. Admission = first activity start date within the referral whether it is in the reporting period or not. |
| Average Length of Time on Waiting List | The Average number of days that people currently on waiting lists for Methadone Treatment Programmes have spent on the waiting list. Count on the last day of the reporting period.  The sum of the total number of days between referral and to waiting list and the last day of the reporting period divided by the total number of clients on the waiting list. |
| **Bed Days** | Total number of beds that are available and occupied each day in a community residential facility during the reporting period. |
| **Clinical FTE** | This is a full time equivalent (see definition of “FTE”) staff member with a health professional qualification (including senior medical staff) who directly delivers clinical/therapeutic services to Mental Health consumers. Exclude time that is formally devoted to administrative or management functions (e.g. half-time coordination of a community team). |
| **Completed Support Needs Assessments** | The total number of completed support needs assessments during the period. The assessment process is to meet the “Standards for Needs Assessment for People with Disabilities”. All visits and contacts required as part of the Support Needs Assessment are included and are not counted elsewhere. |
| **Consultation/Liaison Contacts** | A planned discussion (over the phone or face-to-face) with a health professional from outside the service or a professional from another agency, for the purpose of providing specialist advice in relation to a particular person (who is not a current client of the service) with a mental health problem.  Count of all clients with anactivity type code of T08 within the reporting period. |
| **Consultation/Liaison Training Sessions** | Number of education or training sessions provided for people working outside of the service (e.g. GPs, Iwi Organisations, School Guidance Counsellors, Police). |
| **Current Client** | Any person who is currently receiving assessment, treatment/therapy or support from a service, where the person has been seen by the service within the past three months. Exclude people who have been seen by the service within the past three months but have since been discharged from the service. For inpatient services, this will be the number of people currently in an inpatient in the service, or on trial leave for less than ten days where a bed has been kept available. |
| **Day** | A day is a 24 hour period beginning immediately after midnight and ending at midnight |
| **Day Attendances** | Total number of attendances by non-inpatient consumers at a day programme for assessment, treatment or therapy related to a mental health diagnosis. Count each consumer attendance at the service only once in a day. Attendance of couple, family, or group, only one of whom is a mental health consumer is one attendance.  Count of all clients with an activity type code of T23 within the reporting period. Each client to be counted only once per day. |
| **“Day Places” Available** | For each day programme offered, multiply the number of places available by the number of days they were available in the period. |
| **Day Programme** | A treatment /therapy /skills development programme provided for greater than 3 hours and less than 24 hours. |
| **Expenditure (Promotion/Prevention)** | The total sum of money spent on this service during the reporting period. |
| **Expenditure with a breakdown of service utilisation**  **(Community Acute/ Respite Services)** | The total sum of money spent on this service during the reporting period. Each service will be required to report details of the types and volumes of services utilised during the reporting period.  The content of these reports is to be negotiated between the funder and each service provider. |
| **Face-to-face Contacts (Groups)** | Face-to-face contact between an individual/family and one or more mental health professionals in a group session (Refer to Definition of Terms). Count one contact for each client attending the group session (i.e. group session with four clients would be counted as four contacts).  Clients counted once only, regardless of numbers of clinicians involved in the activity. Attendance of clients’ carer/significant other/whanau not included in the count. |
| **First Face-to-face Contacts (Individual /Family)** | Initial face-to-face contact between an individual/family and a mental health professional regarding an episode of mental illness, a mental health problem or set of problems. The contact is the first assessment contact for this episode or problem, with an individual who is not a current client (refer to definition) of the service in question at the time the referral was received. |
| **Follow-up Face-to-face Contacts (Individual /Family)** | All face-to-face contacts between an individual/family and mental health professional which occur after the initial face-to-face contact for this episode, problem or related problems. |
| **FTE** | This is a full time equivalent employee (40 hours per week), and is calculated as the total number of hours employed per week (to a maximum of 40 hours per week), divided by 40.  For example, where one staff member works 40 hours per week and another works 10 hours per week, the calculation would be:  40/40 + 10/40 = 50/40 = 1.25 FTEs  Please note that where an employee (e.g. a consultant psychiatrist) has been job-sized as being employed for more than 1.0 FTE (e.g. employed as 1.2 FTE for undertaking additional management duties), only 1.0 FTE is to be recorded. |
| **General Hospital Beds** | The total number of General Hospital beds in the region on the last day of the period. Count occupied and unoccupied beds. |
| **Group Session** | A group session is a psychotherapy/skill development/education programme designed for more than two individuals which lasts between one and three hours. |
| **Group Session Delivered** | The total number of group sessions provided during the period. |
| **Hui Held** | The total number of Hui held during the period. |
| **Hui Narrative Report** | Number of trainees supported/individual training packages developed. |
| **Hui Participants** | The total number of attendees participating in Hui held during the period. |
| **Hui Narrative Report (Details of each Hui)** | A summarised report of each Hui held during the period, the report should include:   * Details of attendees origin e.g. HHS, NGO, family/whanau * Location of Hui * Topics of discussion |
| **Inpatient Admissions** | The number of people admitted to the inpatient service during the period. |
| **Involuntary Discharges Commenced** | The number of clients who have ended involvement with the service during the period, where the decision to end involvement was not made by either the service or the client, e.g. justice or prison involvement. |
| **Kaumatua & Taua (Kuia) FTE Staff** | Report the total number of FTE Kaumatua and Taua employed by the service. Kaumatua and Taua FTEs are defined as full-time equivalent (see definition of FTE) staff, who are specifically employed to provide guidance and support to the mental health service. Only include those people employed in a specified Kaumatua and Taua position. Exclude time that is formally devoted to administrative or management functions (e.g. half-time coordination of a community team). |
| **Longest Time on Waiting List** | The most days that any one person on the waiting list has spent on that waiting list. Count on the last day of the reporting period. |
| **Maori Advisory FTE staff** | Report the total number of FTE (see definition of FTE) Maori Advisory staff (who may or may not hold a professional qualification). Exclude time that is formally devoted to administrative or management functions (e.g. half-time coordination of a community team). |
| **Maori Training Posts FTE staff** | Report the total number of FTE (see definition of FTE) staff specifically employed in Maori Training Posts. Exclude time that is formally devoted to administrative or management functions (e.g. half-time coordination of a community team). |
| **Methadone Places Available** | The number of places available on Methadone Treatment Programmes at one point in time in the period, if the number of people so treated were constant during the period. (Include both GP and Specialist Alcohol and Drug Services.) |
| **Monthly Expenditure for Flexi-Fund with a breakdown of information re: utilisation** | A report which provides summary level information regarding utilisation of the Regional Co-ordination Service flexi-fund. This report will provide the following information regarding each individual support package purchased: the type of support purchased, the number of days the support was provided and the cost per day. |
| **Number of FTE staff (Senior Medical)** | Report the total number of FTE Senior Medical (SMO) staff employed in the service. Senior Medical FTEs are defined as a full-time equivalent (see definition of FTE) staff who have face-to-face contact in a medical or therapeutic role with clients and who are Registered Medical Practitioners and hold a current practising certificate. Exclude time that is formally devoted to administrative or management functions (e.g. half-time coordination of a community team). For recording purposes exclude vacant positions. |
| **Number of FTE staff (Junior Medical)** | Report the total number of FTE Junior Medical staff employed in the service. Junior Medical FTEs are defined as a full-time equivalent (see definition of FTE) staff who have face-to-face contact in a medical or therapeutic role with clients and who are Registered Medical Practitioners and hold a current practising certificate. Exclude time that is formally devoted to administrative or management functions (e.g. half-time coordination of a community team). For recording purposes exclude vacant positions. |
| **Number of FTE staff (Nursing and Allied)** | Report the total number of FTE Nursing and allied staff employed in the service. Nursing and allied staff FTEs are defined as a full-time equivalent (see definition of FTE) staff who have face-to-face contact in a medical or therapeutic role with clients and who are Registered Practitioners and hold a current practising certificate or affiliation with a professional body. Exclude time that is formally devoted to administrative or management functions (e.g. half-time coordination of a community team). For recording purposes exclude vacant positions. |
| **Number of FTE staff (Cultural)** | Report the total number of FTE staff employed in cultural specific roles in the service. Cultural staff FTEs are defined as a full-time equivalent (see definition of FTE) staff who have face-to-face contact in a therapeutic or support role with clients and who maybe Registered Practitioners and hold a current practising certificate or registered or regulated by a health or social service professional body and or have demonstrated cultural competencies. Exclude time that is formally devoted to administrative or management functions (e.g. half-time coordination of a community team). For recording purposes exclude vacant positions. |
| **Number of FTE staff (Maori Mental Health Worker)** | Report the total number of FTE Maori Mental Health Workers employed for the service. A Maori Mental Health FTE is defined as full-time equivalent (see definition of FTE) staff member employed specifically to deliver Maori Mental Health services to consumers, whanau or iwi. Only include those people employed in a specific Maori Mental Health position and not Maori staff employed in other clinical positions. Exclude time that is formally devoted to administrative or management functions (e.g. half-time coordination of a community team). For recording purposes exclude vacant positions. |
| **Number of FTE staff (Medical)** | Report the total number of FTE Medical staff employed in the service. Medical FTEs are defined as a full-time equivalent (see definition of FTE) staff who have face-to-face contact in a medical or therapeutic role with clients and who are Registered Medical Practitioners and hold a current practising certificate. Exclude time that is formally devoted to administrative or management functions (e.g. half-time coordination of a community team). For recording purposes exclude vacant positions. |
| **Number of FTE staff (Nursing)** | Report the total number of FTE Nursing staff employed in the service. Nursing FTEs are defined as full-time equivalent (see definition of FTE) staff who have face-to-face contact in a nursing or therapeutic role with clients and who hold a current practising certificates, Exclude time that is formally devoted to administrative or management functions (e.g. half-time coordination of a community team). For recording purposes exclude vacant positions. |
| **Number of FTE staff (Occupational Therapy)** | Report the total number of FTE Occupational Therapy staff employed in the service. Occupational Therapy FTEs are defined as full-time equivalent (see definition of FTE) staff who have face-to-face contact in a occupational therapy or therapeutic/supportive role with clients and are currently registered as Occupational Therapist. Exclude time that is formally devoted to administrative or management functions (e.g. half-time coordination of a community team). For recording purposes exclude vacant positions. |
| **Number of FTE staff (Other)** | Report the total number of FTEs (see definition of FTE) for the service for “other staff”. “Other Staff” include any staff member involved in direct delivery of services to consumers other than medical nursing, psychology, occupational therapy, social work or Maori mental health worker. Exclude time that is formally devoted to administrative or management functions (e.g. half-time coordination of a community team). For recording purposes exclude vacant positions. |
| **Number of FTE staff (Peer support)** | Report the total number of FTE staff employed in specific peer support roles in the service. Peer support staff FTEs are defined as a full-time equivalent (see definition of FTE) staff who have face-to-face contact in a therapeutic or support role with clients and who maybe Registered Practitioners and hold a current practising certificate or registered with and regulated by a health or social service professional body or received a recognised qualification and or training in Peer Support. Exclude time that is formally devoted to administrative or management functions (e.g. half-time coordination of a community team). For recording purposes exclude vacant positions. |
| **Number of FTE staff (Psychology)** | Report the total number of FTE Psychology staff employed in the service. Psychology FTEs are defined as full-time (see definition of FTE) staff who have face-to-face contact in a psychology or therapeutic role with clients and are currently registered as psychologists. Exclude time that is formally devoted to administrative or management functions (e.g. half-time coordination of a community team). For recording purposes exclude vacant positions. |
| **Number of FTE staff (Social Work)** | Report the total number of FTE Social Work staff employed in the service. Social Work FTEs are defined as full-time equivalent (see definition of FTE) who have face-to-face contact in a social work or therapeutic/supportive role with clients and hold a social work qualification. Exclude time that is formally devoted to administrative or management functions (e.g. half-time coordination of a community team). For recording purposes exclude vacant positions. |
| **Non-Clinical FTE** | This is a full time equivalent (see definition of FTE) staff member without a health professional qualification who directly delivers clinical/therapeutic services to Mental Health consumers. Exclude time that is formally devoted to administrative or management functions (e.g. half-time coordination of a community team). For recording purposes exclude vacant positions. |
| **Occupied Bed Days** | Sum of number of beds that are occupied each day during the period. For reporting purposes, count beds occupied as at 12 midnight each day. Do not count beds reserved for people on formal leave.  Formal leave is defined in practice as any planned leave where a person is not physically in the inpatient or residential facility. That is, a bed would not be counted as occupied if the person was on pre-discharge leave, away visiting friends or relations for a period of time, on respite care or transferred to another service temporarily.  Example: You have 7 beds but only 6 are occupied, therefore it would be 6 (beds) x No of days in period = Occupied Bed Days. |
| **Occupied Bed Night** | Sum of number of beds that are occupied each midnight. For reporting purposes, count beds occupied as at 12 midnight each night. Do not count beds reserved for people on formal leave or unoccupied at midnight.  Formal leave is defined in practice as any planned leave where a person is not physically in the inpatient or residential facility. That is, a bed would not be counted as occupied if the person was on pre-discharge leave, away visiting friends or relations for a period of time, on respite care or transferred to another service temporarily.  Example: You have 7 beds but only 6 are occupied at midnight, therefore it would be 6 (beds) x No of days in period = Occupied Bed Nights. |
| **People Currently on Waiting List** | The total number of people who have been assessed as eligible for receiving methadone treatment services and are waiting to begin the programme. Report the number on the waiting list on the last day of the reporting period. |
| **People Receiving Methadone (GP prescribing on Specialist Service Authority)** | The total number of people receiving methadone prescribed by GPs under specialist service authority while receiving case management from specialist Alcohol and Drug services on the last day of the working period. |
| **People Receiving Methadone (GP Case Management)** | The total number of people receiving methadone under GP case management on the last day of the working period. |
| **People Receiving Methadone (Specialist Service Case Management)** | The total number of people receiving methadone treatment under specialist Alcohol and Drug service case management on the last day of the reporting period. (Exclude GP prescribing and GP methadone case management.) |
| **People Referred Back from GP** | Number of people referred to a specialist methadone service by a GP in circumstances where the GP has previously been responsible for providing methadone treatment services to that person. i.e. Where the GP has been the “case manager” and requests a specialist methadone service take over this role. |
| **People Supported by this Service at the End of the Period/Month (by NZ Maori, Pacific Island, Other)** | The number of current clients (individuals or families) currently receiving services. For definition of “current client”, see above.  Although a client may identify as more than one ethnicity, for reporting purposes count them only once. You should prioritise by the Ministry of Health standards i.e. NZ Maori, Pacific Island and Other.  Example: A client identifies as NZ Maori and Pacific Island. You should count this person only once. They should be reported as NZ Maori. If a client does not identify as any ethnicity then you should enter in Other. |
| **People Supported by this Service during the Period/Month (by NZ Maori, Pacific Island, Other)** | Where provider can count Service users individually, this figure should be the total number of people who have been current clients during the period. Count only once those people who have been discharged and re-entered the service during the period or who have used multiple services.  Where the provider cannot count Service users once only for recurrent service use or for use of multiple services, record “not measured”.  Although a client may identify as more than one ethnicity, for reporting purposes count them only once. You should prioritise by the Ministry of Health standards i.e. NZ Maori, Pacific Island and Other.  Example: A client identifies as NZ Maori and Pacific Island. You should count this person only once. They should be reported as NZ Maori. If a client does not identify as any ethnicity then you should enter in Other. |
| **Planned Discharges** | The number of clients who have finished their involvement with the service during the period where the decision to finish involvement with the service was reached by mutual agreement between the client and the service. |
| **Programmes Delivered** | The total number of mental health promotion programmes delivered during the period. |
| **Re-admissions** | The total number of consumers re-admitted to an inpatient mental health service within twenty eight days of previous discharge, where:   * the readmission was not planned at the time of discharge; and * the readmission is to the same service.   Count those consumers who are on trial leave for 10 days or more who returned prior to their planned re-admission date. |
| **Senior Medical FTE** | This is a full time equivalent (see definition of FTE) senior medical staff member (including DAMHS, but excluding Registrars and House Surgeons) involved in the direct delivery of services to Mental Health consumers. Exclude time that is formally devoted to administrative or management functions (e.g. half-time coordination of a community team). |
| **Suicides of Current Clients** | The number of suicides of current clients during reporting period. Count only once for users of multiple services. |
| **Transfers to an Inpatient Unit/Off Site Respite** | The total number of people transferred from an accommodation service to a mental health inpatient unit or crisis respite service during the reporting period. |
| **Unplanned Discharges - Self Initiated** | The number of clients who have ended involvement with the service during the period, where the decision to end involvement was made by the client before the planned therapy/treatment was completed. |
| **Unplanned Discharges - Service Initiated** | The number of clients who have ended involvement with the service during the period, where the decision to end involvement was made by the service before the planned therapy/treatment was completed. |