



Victorian
Agency for
**Health
Information**

Mental health, alcohol and other drug treatment services in Victoria

January 2022



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Foreword

The Victorian Government is committed to implementing all recommendations outlined in the Royal Commission's Final report into the Mental Health System.

It is important to understand the current context for Victorians and the impacts on their mental health to inform how we can respond and support all Victorians experiencing mental illness or psychological distress, including their carers, families and supporters and members of the workforce.

The following report presents information about a range of different services. We acknowledge that some consumers, carers and community members may find this data distressing. You may want to consider how and when you read this report.

If you find content in this report distressing, or if you or a loved one need support, the following support services are available:

- If you are not in immediate danger but you need help, call **NURSE-ON-CALL** on **1300 60 60 24**.
- For crisis support, contact **Lifeline** on **13 11 14**.
- For phone-based support contact **Beyond Blue** on **1300 224 636**.
- If you are looking for a mental health service, visit **betterhealth.vic.gov.au**.
- **For situations that are harmful or life-threatening, contact emergency services immediately on Triple Zero (000).**

About the report

This report has been prepared by the Victorian Agency for Health Information (VAHI) to provide the Victorian community with regular information on system activity regarding publicly-funded mental health (MH) and alcohol and other drug (AoD) treatment services in Victoria.

The data in this report contains information about emergency department (ED), ambulance, triage, community-based and bed-based mental health services, as well as Victoria's publicly-funded AoD treatment services. The report details service activity across adult, older persons, child youth and adolescent (CAMHS/CYMHS) populations. It provides moving averages of activity measures over the past four weeks for 2021, with comparisons against the same period for 2018–2020 to highlight changes over time.

The transparency of health service activity data to members of the Victorian community delivers on the commitment of the Victorian Government to providing publicly available information.

Data presented in this report complements other publicly available data on the performance of Victorian mental health services available via the Department of Health website - <https://www2.health.vic.gov.au/mental-health/research-and-reporting/mental-health-performance-reports>.

For further information, or to provide feedback on this report, please email vahi@vahi.vic.gov.au.

About the data

This report includes the latest available 4-week moving averages, along with same period in 2018 (where available), 2019 (SP2019) and 2020 (SP2020) comparisons. Recent data is interim and may be subject to change as services correct and update their submissions.

Data used to calculate the measures in this report were sourced from the following collections.

- Ambulance Victoria data
- Client Management Interface / Operational Data Store (CMI/ODS)*
- Mental Health Triage Minimum Dataset
- Victorian Alcohol and Drug Collection (VADC)
- Victorian Emergency Minimum Dataset (VEMD)

For technical specifications of measures presented in this report, please email vahi@vahi.vic.gov.au.

About VAHI

VAHI is a division of the Department of Health, dedicated to delivering trusted information to inform better decisions that improve the health and wellbeing of Victorians.

VAHI contributes to the Department's ambitious system reform agenda in many ways:

- Analysing and sharing information across the Victorian health system to ensure services have an accurate picture of their quality and safety.
- Monitoring and reporting on public and private services that impact on health, wellbeing, quality and safety to stimulate and inform improvements, increase transparency and accountability, and inform the community.
- Collecting and analysing information about the health status of Victorians to inform policy development and planning, and to give a complete picture of health in Victoria.

For more information about VAHI, visit www.bettersafecare.vic.gov.au.

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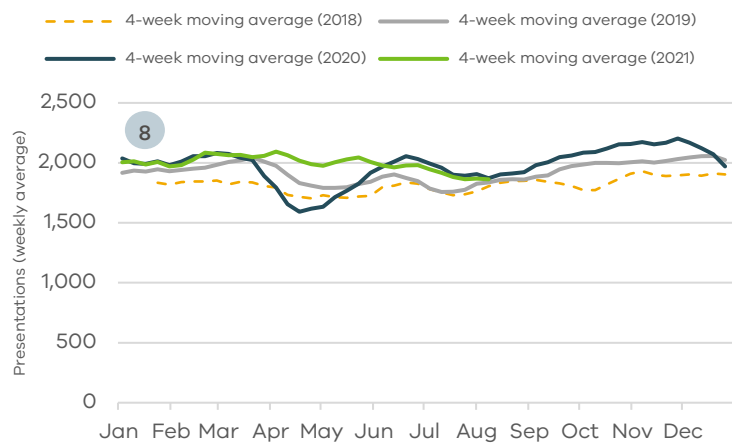
Interpreting charts in this report

1 Number of mental health-related ED presentations

Measure presents the moving average number of emergency department presentations per week. Reported by departure date.

Excludes Type of Visit Code '19' (COVID-19 Assessment Clinic), and Triage Category '6' (Dead on Arrival).

2 Source: VEMD.
Date extracted: 16 August 2021.



3 Latest 4-week avg.: (8 August 2021)	1,863	4 SP2019:	1,836	6 Change:	27
		5 SP2020:	1,871	7 Change:	-8

- 1 Measure name, description, inclusions and exclusions.
- 2 Data source collection and date extracted from the source collection. Health services may update data regularly. For this reason, there may be differences in reported data between previous and future reports as data are not static.
- 3 Latest 4-week average as at the date specified.
- 4 Average over the same 4-week period in 2019 (SP2019).
- 5 Average over the same 4-week period in 2020 (SP2020).
- 6 Change in reported/observed numbers between the latest 4-week average and the same 4-week period in 2019.
- 7 Change in reported/observed numbers between the latest 4-week average and the same 4-week period in 2020.
- 8 Data presented in each chart are expressed as a '4-week moving average'. These are based on the calculated average of each week's reported/observed numbers across a 4-week period. Presenting data as a moving average can smooth out short-term fluctuations in order to more clearly present longer-term patterns.

Emergency department presentations

Mental health-related ED presentations

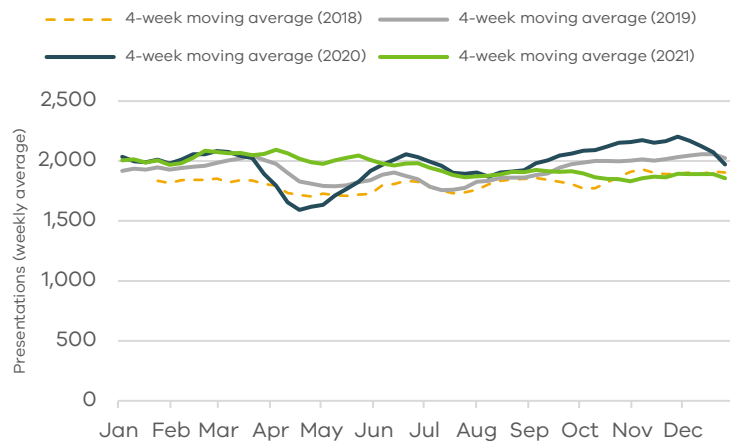
Number of mental health-related ED presentations

Measure presents the moving average number of emergency department presentations per week. Reported by departure date.

Excludes type of visit code '19' (COVID-19 assessment clinic), and triage category '6' (dead on arrival).

Source: VEMD.

Date extracted: 25 January 2022.



Latest 4-week avg.: (26 December 2021)	1,856	SP2019:	2,024	Change:	-168
		SP2020:	1,971	Change:	-115

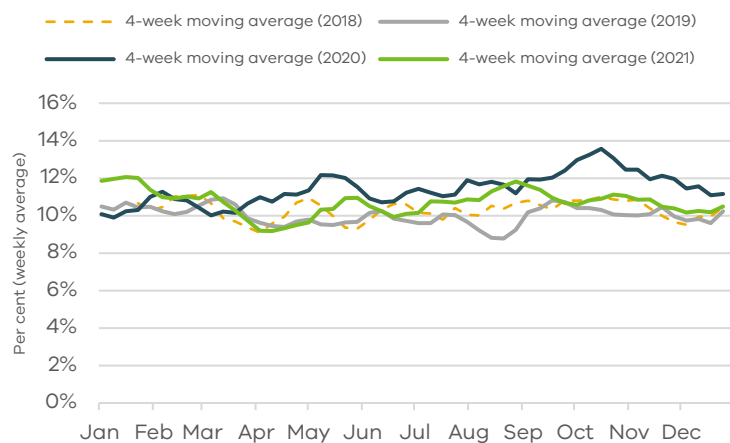
Percentage of mental health-related ED presentations where the patient re-presented to the same campus within 48 hours

Measure presents the moving average percentage of mental health-related emergency department presentations per week where the patient re-presented to the same campus within 48 hours.

Excludes type of visit code '19' (COVID-19 assessment clinic), and triage category '6' (dead on arrival).

Source: VEMD.

Date extracted: 25 January 2022.



Latest 4-week avg.: (25 December 2021)	10.5%	SP2019:	10.2%	Change:	0.3%
		SP2020:	11.2%	Change:	-0.7%

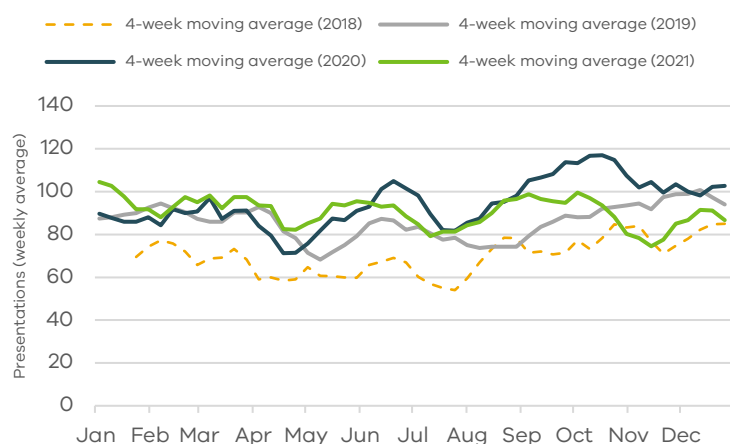
Number of mental health-related ED presentations, Aboriginal and Torres Strait Islander people

Measure presents the moving average number of mental health-related ED presentations per week where the patient identified as Aboriginal and/or Torres Strait Islander. Reported by departure date.

Excludes type of visit code '19' (COVID-19 assessment clinic), and triage category '6' (dead on arrival).

Source: VEMD.

Date extracted: 25 January 2022.



Latest 4-week avg.: (26 December 2021)	86.8	SP2019:	94.0	Change:	-7.2
		SP2020:	102.8	Change:	-16.0

Emergency department presentations

Mental health-related ED presentations

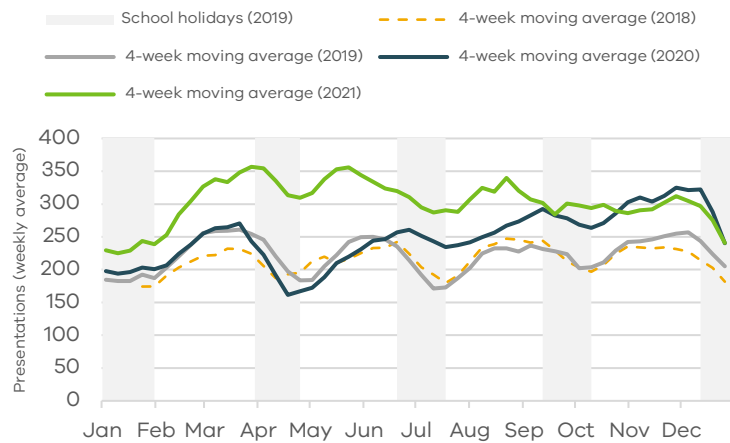
Number of mental health-related ED presentations, ages 0-17

Measure presents the moving average number of mental health-related ED presentations per week where the patient was aged under 18 years. Reported by departure date.

Excludes type of visit code '19' (COVID-19 assessment clinic), and triage category '6' (dead on arrival).

Source: VEMD.

Date extracted: 25 January 2022.



Latest 4-week avg.: 241 (26 December 2021)	SP2019: 205	Change: 36
	SP2020: 240	Change: 1

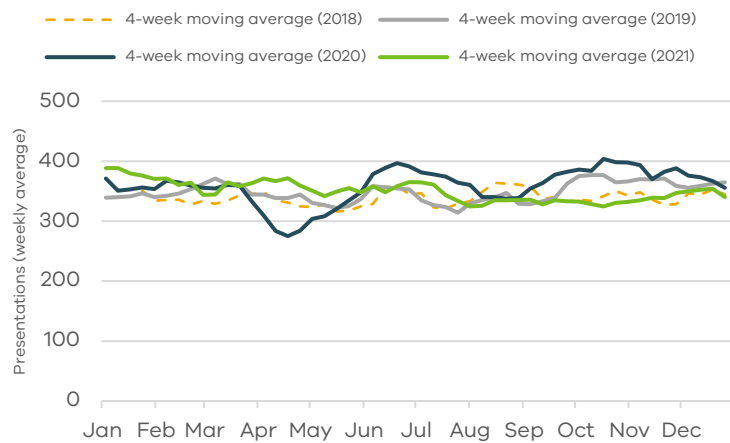
Number of mental health-related ED presentations, ages 18-24

Measure presents the moving average number of mental health-related ED presentations per week where the patient was aged 18 – 24 years. Reported by departure date.

Excludes type of visit code '19' (COVID-19 assessment clinic), and triage category '6' (dead on arrival).

Source: VEMD.

Date extracted: 25 January 2022.



Latest 4-week avg.: 340 (26 December 2021)	SP2019: 365	Change: -25
	SP2020: 356	Change: -16

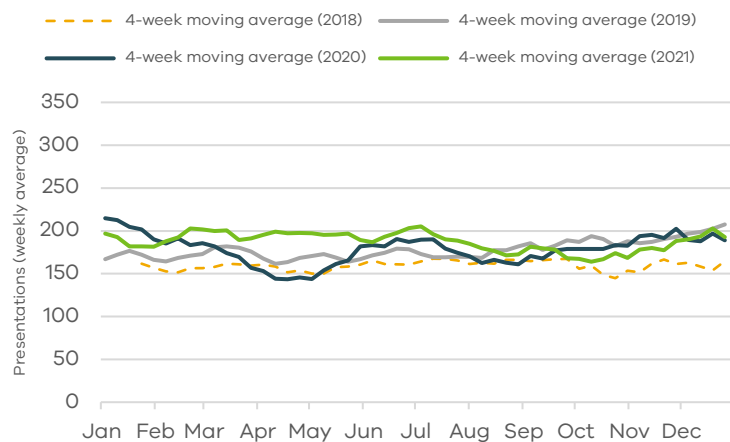
Number of mental health-related ED presentations, ages 65+

Measure presents the moving average number of mental health-related ED presentations per week where the patient was aged 65 years and over. Reported by departure date.

Excludes type of visit code '19' (COVID-19 assessment clinic), and triage category '6' (dead on arrival).

Source: VEMD.

Date extracted: 25 January 2022.



Latest 4-week avg.: 193 (26 December 2021)	SP2019: 208	Change: -15
	SP2020: 189	Change: 4

Emergency department presentations

Mental health-related ED presentations

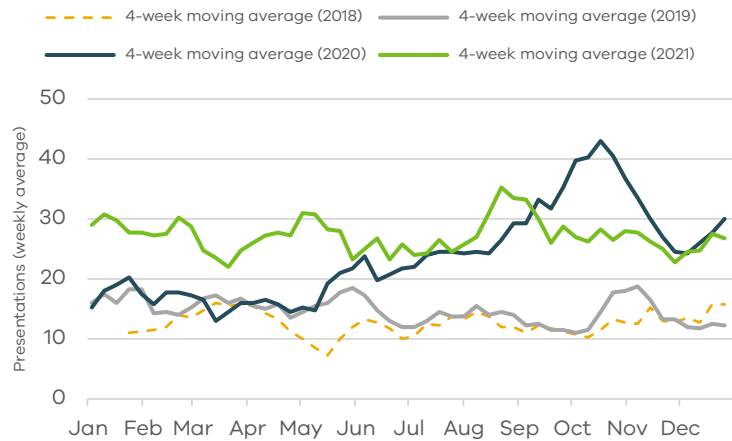
Number of eating disorder-related ED presentations, all ages

Measure presents the moving average number of eating disorder-related ED presentations per week. An eating disorder-related ED presentation includes those with a primary or other diagnosis of ICD-10AM F500-F509. Reported by departure date.

Excludes type of visit code '19' (COVID-19 assessment clinic), and triage category '6' (dead on arrival).

Source: VEMD.

Date extracted: 25 January 2022.



Latest 4-week avg.:	26.8	SP2019:	12.3	Change:	14.5
(26 December 2021)		SP2020:	30.0	Change:	-3.2

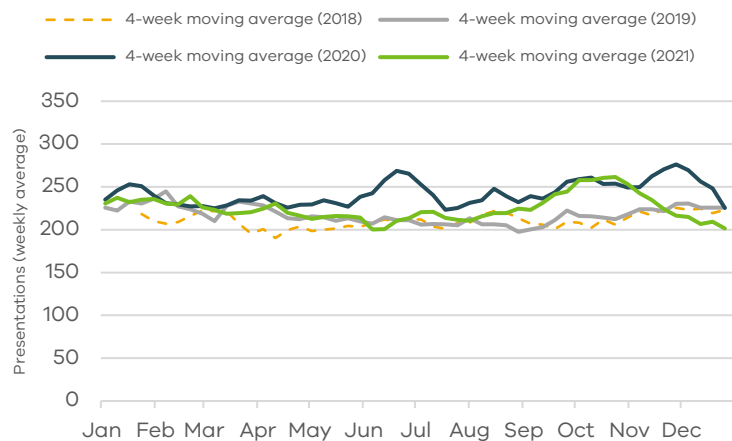
Number of anxiety disorder-related ED presentations, all ages

Measure presents the moving average number of anxiety disorder-related ED presentations per week. Measure includes those with a primary or other diagnosis of ICD-10AM F418, F419, F445 or F449. Reported by departure date.

Excludes type of visit code '19' (COVID-19 assessment clinic), and triage category '6' (dead on arrival).

Source: VEMD.

Date extracted: 25 January 2022.



Latest 4-week avg.:	201	SP2019:	226	Change:	-25
(26 December 2021)		SP2020:	225	Change:	-24

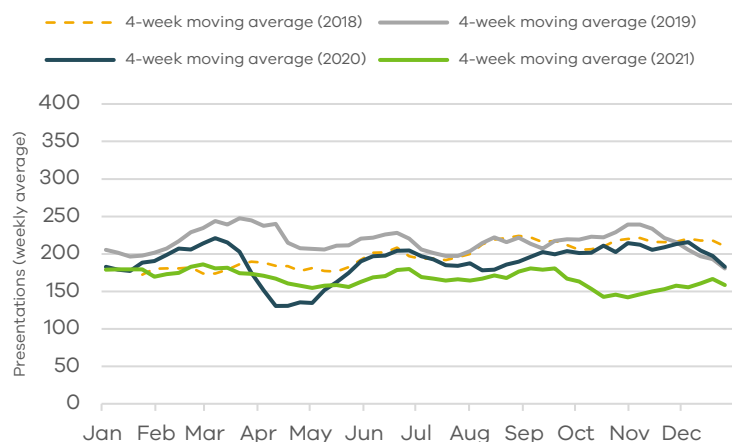
Number of mood disorder-related ED presentations, all ages

Measure presents the moving average number of anxiety-related ED presentations per week. Measure includes those with a primary or other diagnosis of ICD-10AM F30-F39. Reported by departure date.

Excludes type of visit code '19' (COVID-19 assessment clinic), and triage category '6' (dead on arrival).

Source: VEMD.

Date extracted: 25 January 2022.



Latest 4-week avg.:	158	SP2019:	181	Change:	-23
(26 December 2021)		SP2020:	183	Change:	-25

Emergency department presentations

Mental health-related ED presentations

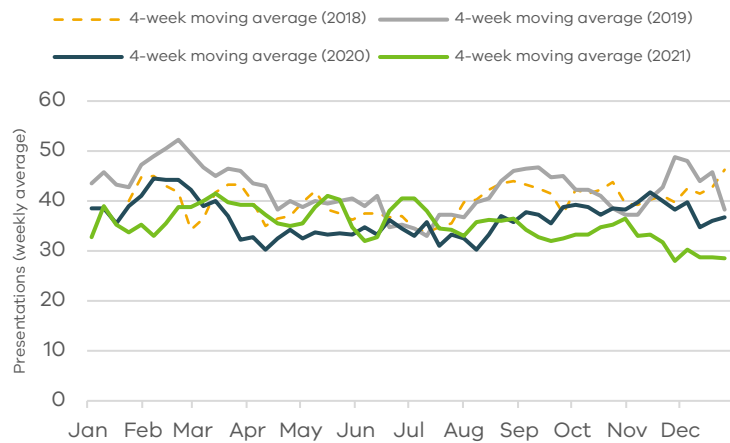
Number of stress and adjustment disorder-related ED presentations, all ages

Measure presents the moving average number of stress and adjustment disorder-related ED presentations per week. Measure includes those with a primary or other diagnosis of ICD-10AM F431-F439. Reported by departure date.

Excludes type of visit code '19' (COVID-19 assessment clinic), and triage category '6' (dead on arrival).

Source: VEMD.

Date extracted: 25 January 2022.



Latest 4-week avg.:	28.5	SP2019:	38.3	Change:	-9.8
	(26 December 2021)				
		SP2020:	36.8	Change:	-8.3

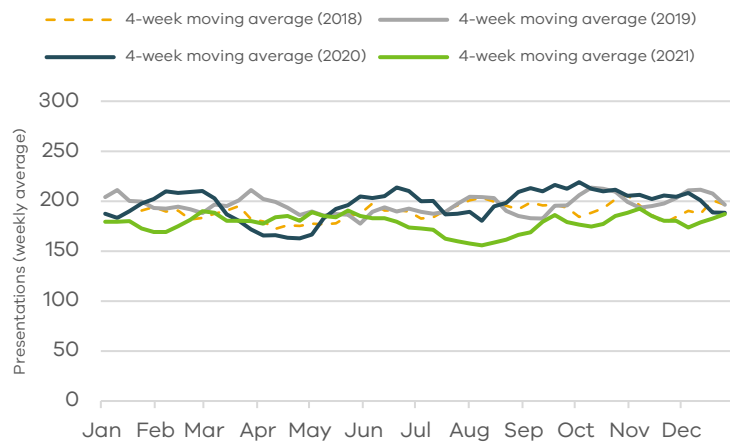
Number of schizophrenia, paranoia and acute psychotic disorder-related ED presentations, all ages

Measure presents the moving average number of schizophrenia, paranoia and acute psychotic disorder-related ED presentations per week. Measure includes those with a primary or other diagnosis of ICD-10AM F20-F29. Reported by departure date.

Excludes type of visit code '19' (COVID-19 assessment clinic), and triage category '6' (dead on arrival).

Source: VEMD.

Date extracted: 25 January 2022.



Latest 4-week avg.:	187	SP2019:	197	Change:	-10
	(26 December 2021)				
		SP2020:	188	Change:	-1

Emergency department presentations

Mental health-related ED presentations

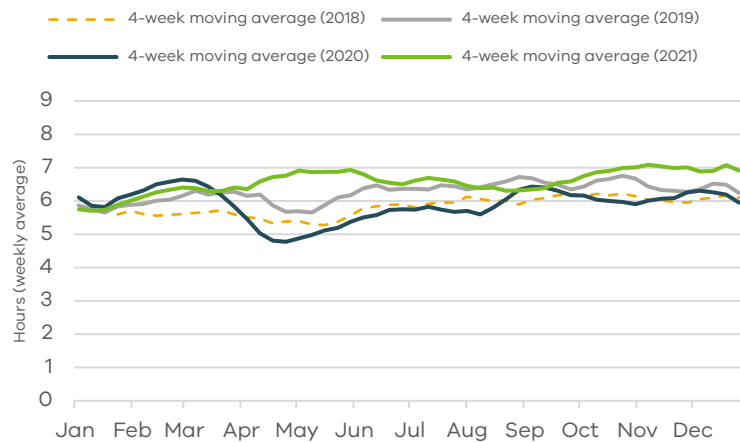
Average length of stay (hours) of mental health-related ED presentations

Measure presents the moving average length of stay (in hours) per week for mental health-related ED presentations. Reported by departure date.

Excludes type of visit code '19' (COVID-19 assessment clinic), and triage category '6' (dead on arrival).

Source: VEMD.

Date extracted: 25 January 2022.



Latest 4-week avg.: 6.9 (26 December 2021) **SP2019:** 6.2 **Change:** 0.7
SP2020: 6.0 **Change:** 0.9

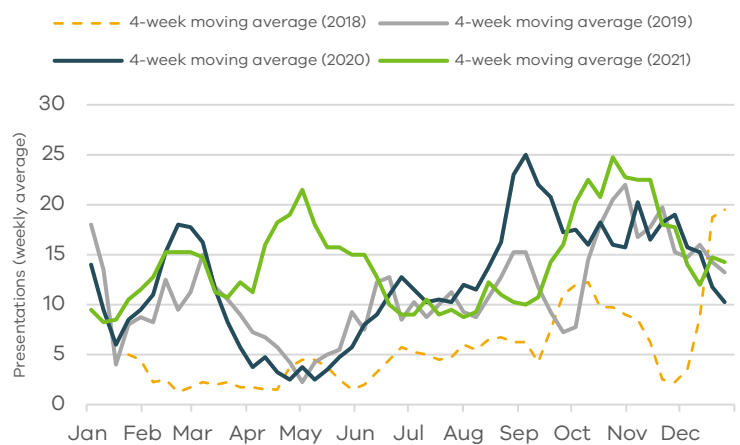
Number of mental health-related ED presentations exceeding a 24-hour length of stay

Measure presents the moving average number of mental health-related ED presentations per week with a length of stay exceeding 24 hours. Reported by departure date.

Excludes type of visit code '19' (COVID-19 assessment clinic), and triage category '6' (dead on arrival).

Source: VEMD.

Date extracted: 25 January 2022.



Latest 4-week avg.: 14.3 (26 December 2021) **SP2019:** 13.3 **Change:** 1.0
SP2020: 10.3 **Change:** 4.0

Emergency department presentations

Intentional self-harm and suicidal ideation ED presentations

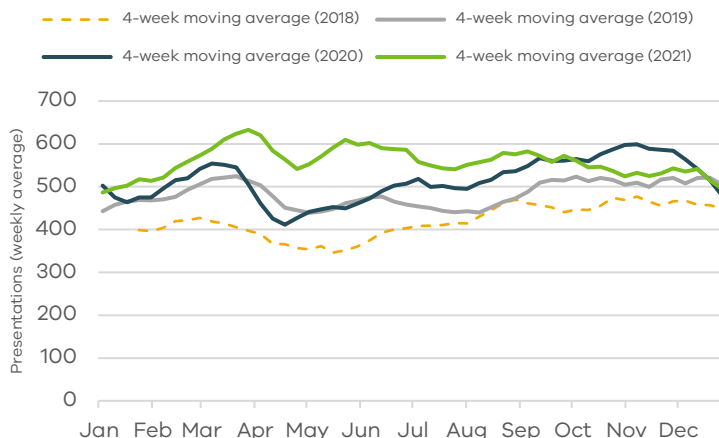
Number of intentional self-harm and suicidal ideation ED presentations, all ages

Measure presents the moving average number of emergency department presentations per week with recorded intentional self-harm and/or suicidal ideation. Reported by departure date.

Excludes type of visit code '19' (COVID-19 assessment clinic), and triage category '6' (dead on arrival).

Source: VEMD.

Date extracted: 25 January 2022.



Latest 4-week avg.:	496	SP2019:	505	Change:	-9
	(26 December 2021)	SP2020:	480	Change:	16

Number of intentional self-harm and suicidal ideation ED presentations, by triage category

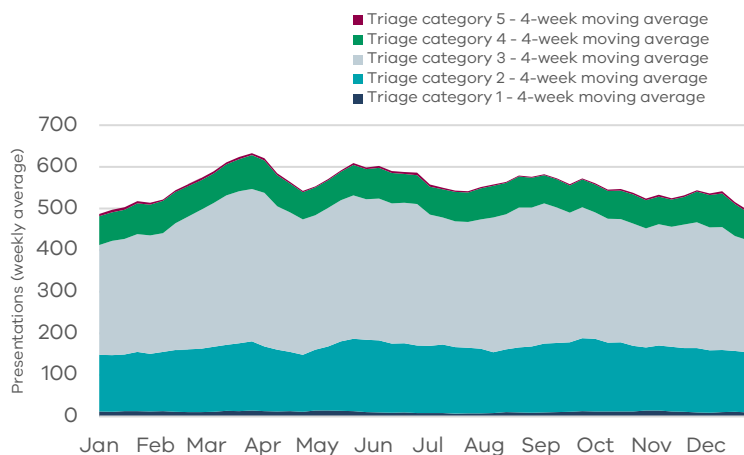
Measure presents the moving average number of intentional self-harm and suicidal ideation ED presentations per week by triage categories:

1. Resuscitation
2. Emergency
3. Urgent
4. Semi-urgent
5. Non-urgent

Excludes type of visit code '19' (COVID-19 assessment clinic), and triage category '6' (dead on arrival).

Source: VEMD.

Date extracted: 25 January 2022.



Latest 4-week avg.:	496
	(26 December 2021)

Number of intentional self-harm and suicidal ideation ED presentations, triage categories '1' and '2'

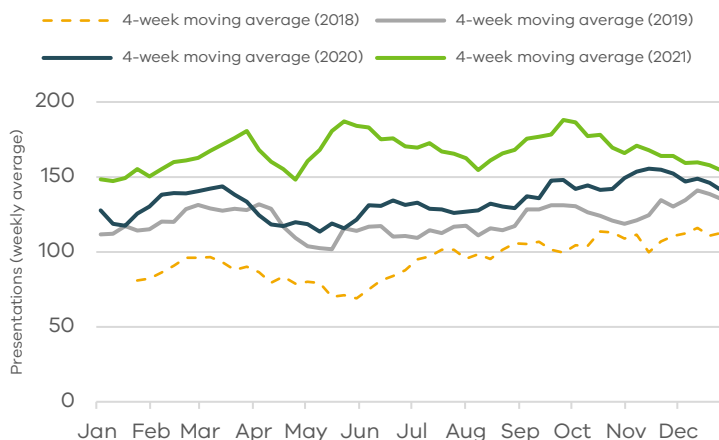
Measure presents the moving average number of intentional self-harm and suicidal ideation ED presentations per week by triage categories:

1. Resuscitation
2. Emergency

Excludes type of visit code '19' (COVID-19 assessment clinic), and triage category '6' (dead on arrival).

Source: VEMD.

Date extracted: 25 January 2022.



Latest 4-week avg.:	154	SP2019:	135	Change:	19
	(26 December 2021)	SP2020:	141	Change:	13

Emergency department presentations

Intentional self-harm and suicidal ideation ED presentations

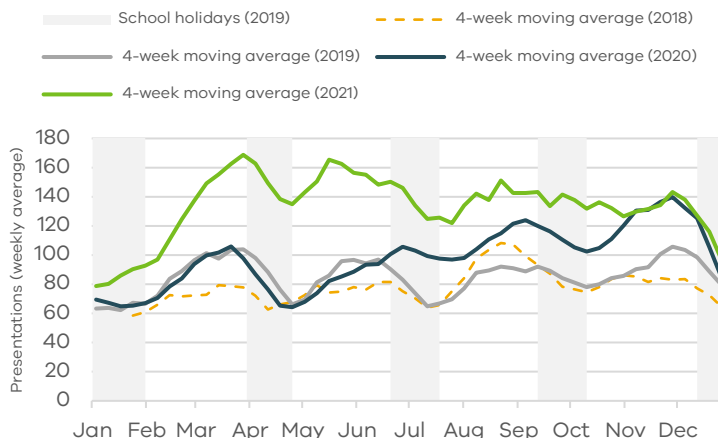
Number of intentional self-harm and suicidal ideation ED presentations, ages 0-17

Measure presents the moving average number of emergency department presentations per week with recorded intentional self-harm and/or suicidal ideation where the patient was aged under 18 years. Reported by departure date.

Excludes type of visit code '19' (COVID-19 assessment clinic), and triage category '6' (dead on arrival).

Source: VEMD.

Date extracted: 25 January 2022.



Latest 4-week avg.:	96.5	SP2019:	79.3	Change:	17.2
	(26 December 2021)				
		SP2020:	84.3	Change:	12.2

Number of intentional self-harm and suicidal ideation ED presentations, ages 0-17, by triage category

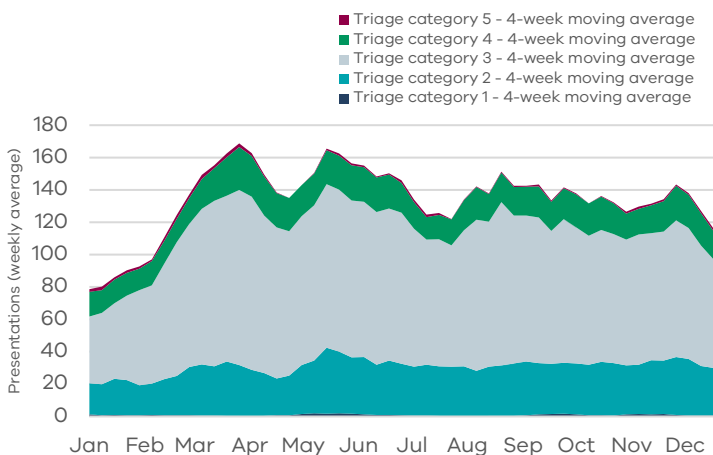
Measure presents the moving average number of intentional self-harm and suicidal ideation ED presentations per week where the patient was aged under 18 years, by triage categories:

1. Resuscitation
2. Emergency
3. Urgent
4. Semi-urgent
5. Non-urgent

Excludes type of visit code '19' (COVID-19 assessment clinic), and triage category '6' (dead on arrival).

Source: VEMD.

Date extracted: 25 January 2022.



Latest 4-week avg.:	96.5
	(26 December 2021)

Number of intentional self-harm and suicidal ideation ED presentations, ages 0-17, triage categories '1' and '2'

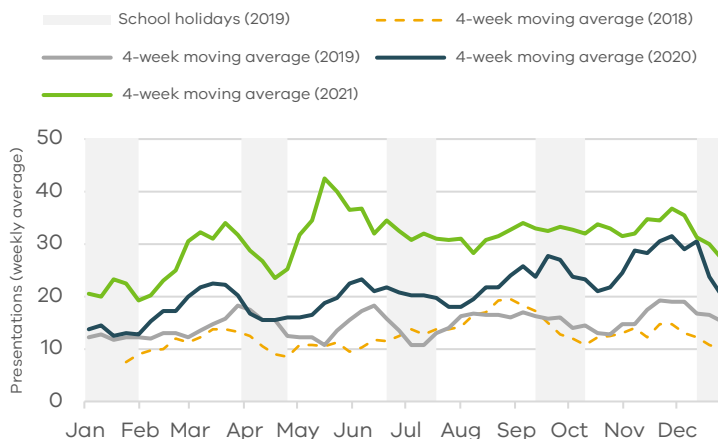
Measure presents the moving average number of intentional self-harm and suicidal ideation ED presentations per week where the patient was aged under 18 years, by triage categories:

1. Resuscitation
2. Emergency

Excludes type of visit code '19' (COVID-19 assessment clinic), and triage category '6' (dead on arrival).

Source: VEMD.

Date extracted: 25 January 2022.



Latest 4-week avg.:	27.3	SP2019:	15.3	Change:	12.0
	(26 December 2021)				
		SP2020:	20.3	Change:	7.0

Emergency department presentations

Intentional self-harm and suicidal ideation ED presentations

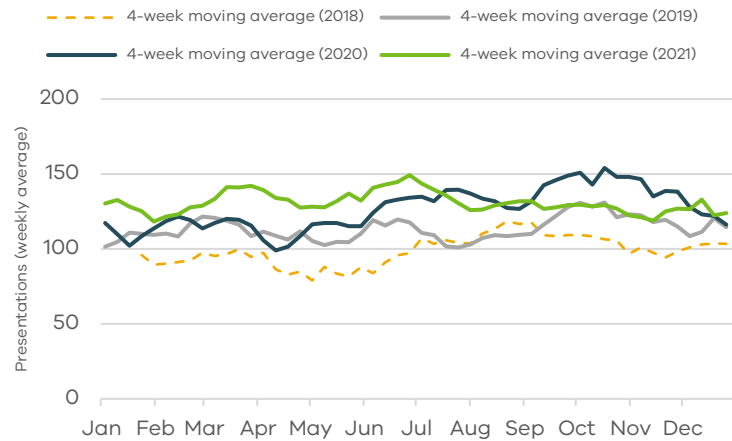
Number of intentional self-harm and suicidal ideation ED presentations, ages 18 – 24 years

Measure presents the moving average number of intentional self-harm and suicidal ideation ED presentations per week where the patient was aged 18 – 24 years.

Excludes type of visit code '19' (COVID-19 assessment clinic), and triage category '6' (dead on arrival).

Source: VEMD.

Date extracted: 25 January 2022.



Latest 4-week avg.:	124	SP2019:	115	Change:	9
(26 December 2021)		SP2020:	116	Change:	8

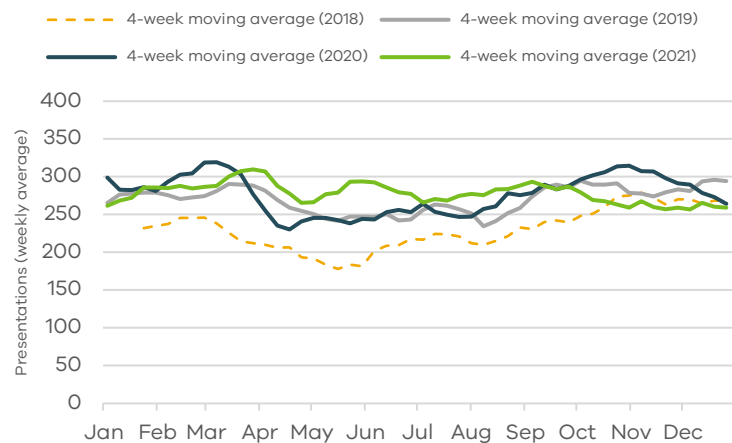
Number of intentional self-harm and suicidal ideation ED presentations, ages 25 – 64 years

Measure presents the moving average number of intentional self-harm and suicidal ideation ED presentations per week where the patient was aged 25 – 64 years.

Excludes type of visit code '19' (COVID-19 assessment clinic), and triage category '6' (dead on arrival).

Source: VEMD.

Date extracted: 25 January 2022.



Latest 4-week avg.:	259	SP2019:	294	Change:	-35
(26 December 2021)		SP2020:	264	Change:	-5

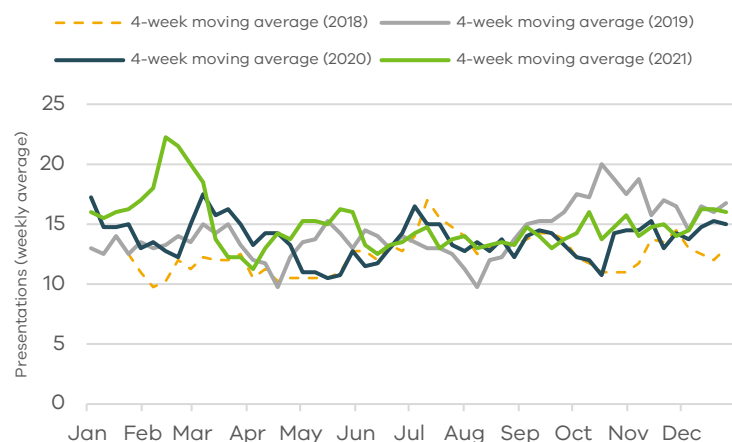
Number of intentional self-harm and suicidal ideation ED presentations, ages 65+ years

Measure presents the moving average number of intentional self-harm and suicidal ideation ED presentations per week where the patient was aged 65 years and over.

Excludes type of visit code '19' (COVID-19 assessment clinic), and triage category '6' (dead on arrival).

Source: VEMD.

Date extracted: 25 January 2022.



Latest 4-week avg.:	16.0	SP2019:	16.8	Change:	-0.8
(26 December 2021)		SP2020:	15.0	Change:	1.0

Emergency department presentations

Alcohol and other drug-related ED presentations

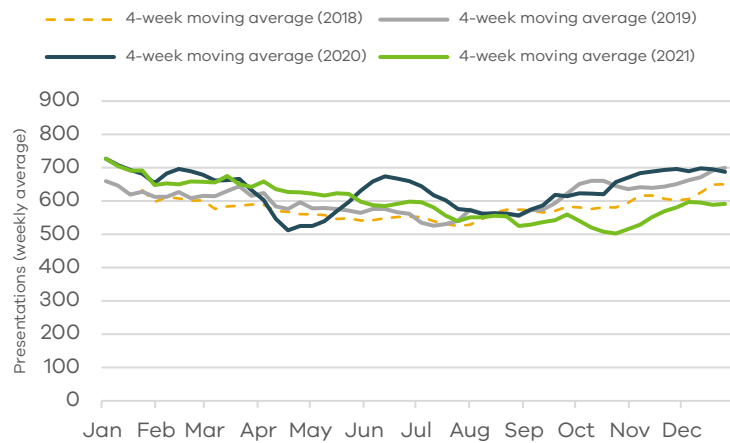
Number of alcohol and other drug-related ED presentations

Measure presents the moving average number of ED presentations per week with an acute AoD-related primary or other diagnosis, or where the patient was referred to an AoD service on departure (including counselling, residential withdrawal, rehabilitation and supported accommodation). Reported by departure date.

Excludes type of visit code '19' (COVID-19 assessment clinic), and triage category '6' (dead on arrival).

Source: VEMD.

Date extracted: 25 January 2022.



Latest 4-week avg.:	592	SP2019:	700	Change:	-108
(26 December 2021)		SP2020:	687	Change:	-95

Number of alcohol and other drug-related ED presentations, by triage category

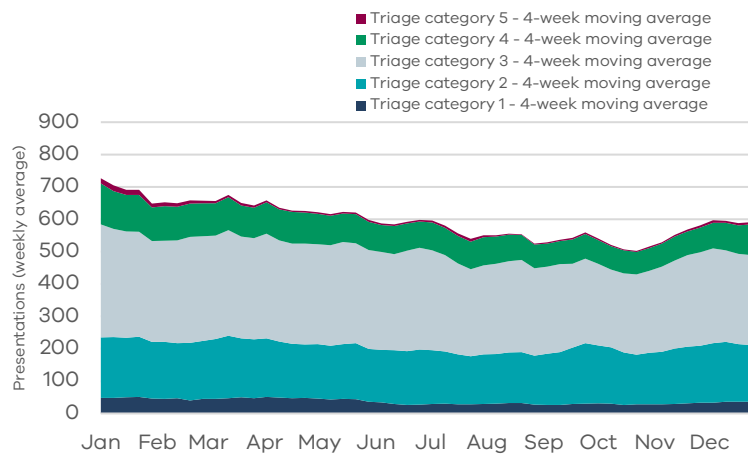
Measure presents the moving average number of acute AoD-related ED presentations per week by triage categories:

1. Resuscitation
2. Emergency
3. Urgent
4. Semi-urgent
5. Non-urgent

Excludes type of visit code '19' (COVID-19 assessment clinic), and triage category '6' (dead on arrival).

Source: VEMD.

Date extracted: 25 January 2022.



Latest 4-week avg.:	592
(26 December 2021)	

Number of alcohol and other drug-related ED presentations, triage categories '1' and '2'

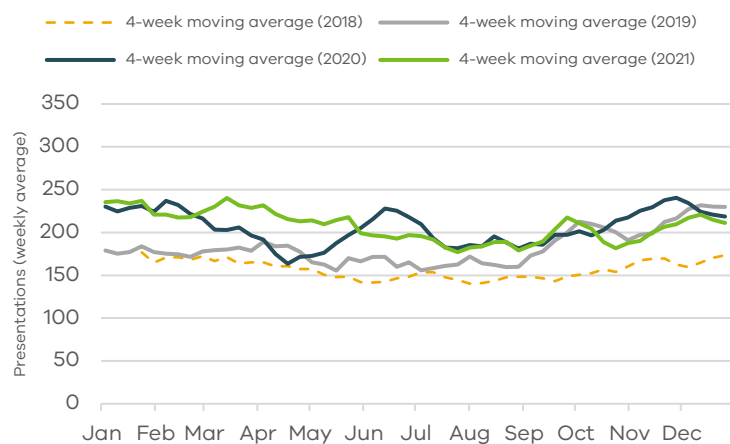
Measure presents the moving average number of acute AoD-related ED presentations per week by triage categories:

1. Resuscitation
2. Emergency

Excludes type of visit code '19' (COVID-19 assessment clinic), and triage category '6' (dead on arrival).

Source: VEMD.

Date extracted: 25 January 2022.



Latest 4-week avg.:	211	SP2019:	230	Change:	-19
(26 December 2021)		SP2020:	219	Change:	-8

Emergency department presentations

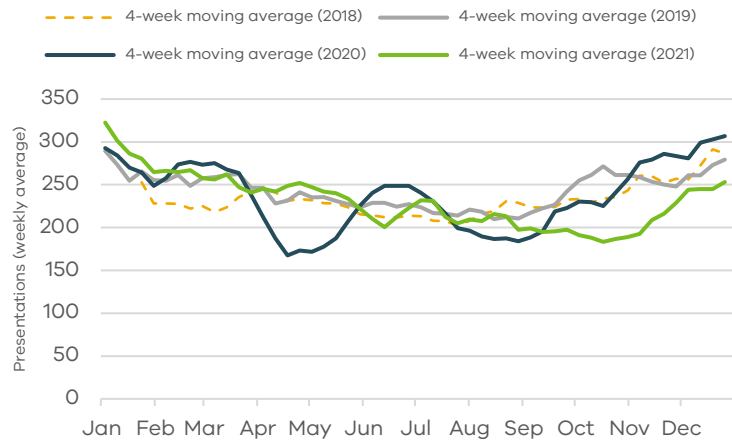
Alcohol-related ED presentations

Number of alcohol-related ED presentations

Measure presents the moving average number of ED presentations per week with a primary or other diagnosis reflecting an acute condition or manifestation of alcohol use or dependence. Reported by departure date. Excludes type of visit code '19' (COVID-19 assessment clinic), and triage category '6' (dead on arrival).

Source: VEMD.

Date extracted: 25 January 2022.



Latest 4-week avg.: 253 (26 December 2021)	SP2019: 279	Change: -26
	SP2020: 307	Change: -54

Number of alcohol-related ED presentations, by triage category

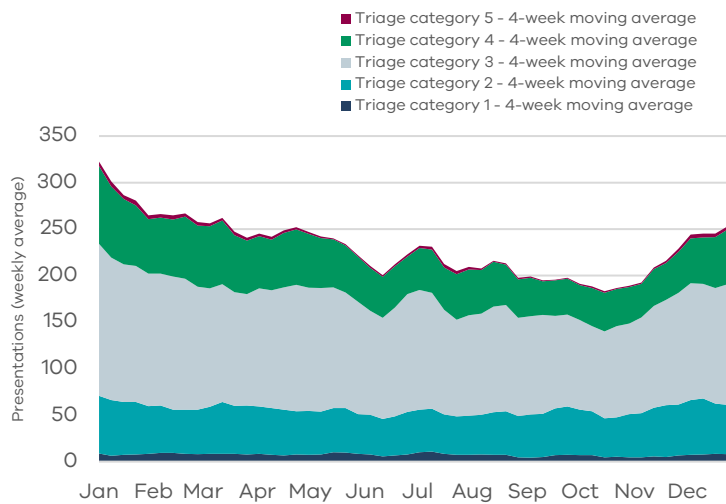
Measure presents the moving average number of ED presentations per week with an acute condition or manifestation of alcohol use or dependence, by triage categories:

1. Resuscitation
2. Emergency
3. Urgent
4. Semi-urgent
5. Non-urgent

Excludes type of visit code '19' (COVID-19 assessment clinic), and triage category '6' (dead on arrival).

Source: VEMD.

Date extracted: 25 January 2022.



Latest 4-week avg.: 253 (26 December 2021)

Number of alcohol-related ED presentations, triage categories '1' and '2'

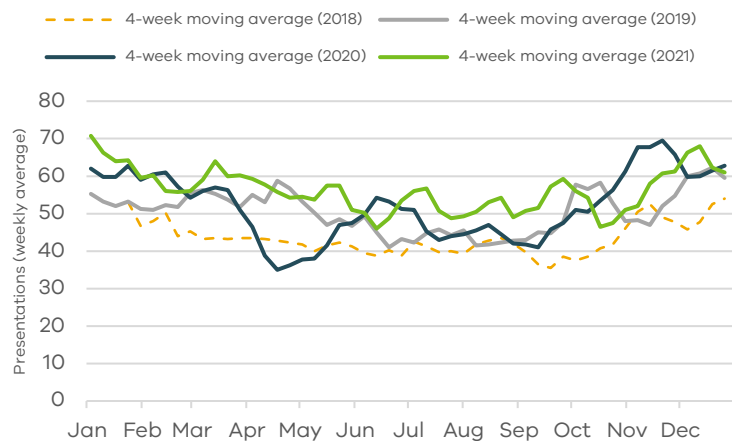
Measure presents the moving average number of ED presentations per week with an acute condition or manifestation of alcohol use or dependence, by triage categories:

1. Resuscitation
2. Emergency

Excludes type of visit code '19' (COVID-19 assessment clinic), and triage category '6' (dead on arrival).

Source: VEMD.

Date extracted: 25 January 2022.



Latest 4-week avg.: 61.0 (26 December 2021)	SP2019: 59.5	Change: 1.5
	SP2020: 62.8	Change: -1.8

Emergency department presentations

Drugs of dependence and illicit drug-related ED presentations

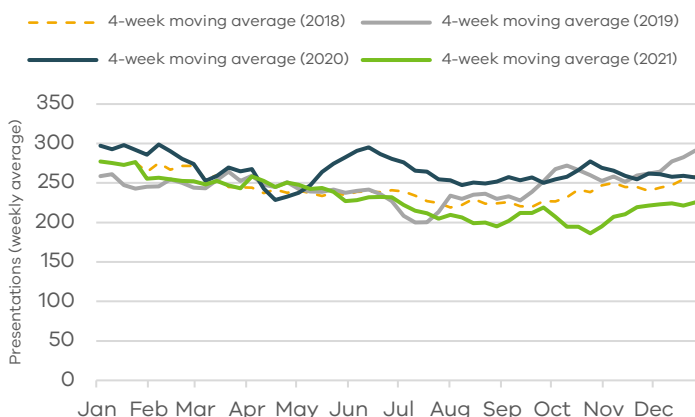
Number of drugs of dependence and illicit drug-related ED presentations

Measure presents the moving average number of ED presentations per week with a primary or other diagnosis reflecting an acute condition or manifestation of use or dependence of an illicit substance, or drugs with a recognised potential for misuse, abuse and dependence. Reported by departure date.

Excludes type of visit code '19' (COVID-19 assessment clinic), and triage category '6' (dead on arrival).

Source: VEMD.

Date extracted: 25 January 2022.



Latest 4-week avg.: 225 (26 December 2021) **SP2019:** 291 **Change:** -66

SP2020: 257 **Change:** -32

Number of drugs of dependence and illicit drug-related ED presentations, by triage category

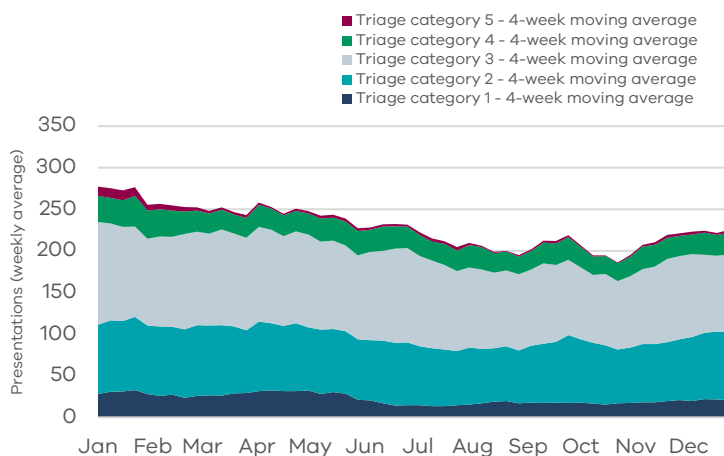
Measure presents the moving average number of ED presentations per week with a primary or other diagnosis reflecting an acute condition or manifestation of use or dependence of an illicit substance, or drugs with a recognised potential for misuse, abuse and dependence by triage categories:

1. Resuscitation
2. Emergency
3. Urgent
4. Semi-urgent
5. Non-urgent

Excludes type of visit code '19' (COVID-19 assessment clinic), and triage category '6' (dead on arrival).

Source: VEMD.

Date extracted: 25 January 2022.



Latest 4-week avg.: 225 (26 December 2021)

Number of drugs of dependence and illicit drug-related ED presentations, triage categories '1' and '2'

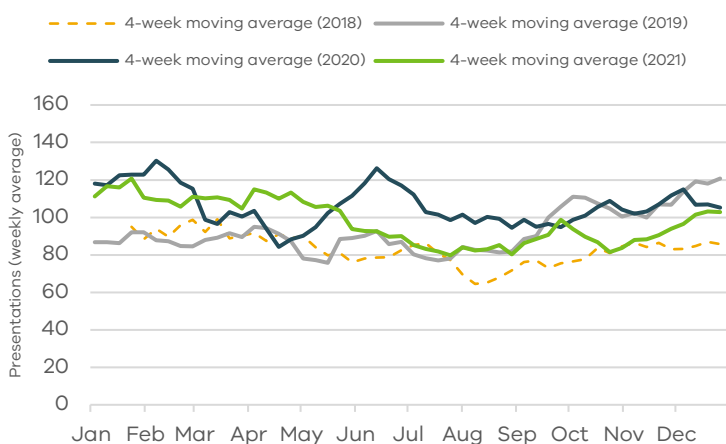
Measure presents the moving average number of ED presentations per week with a primary or other diagnosis reflecting an acute condition or manifestation of use or dependence of an illicit substance, or drugs with a recognised potential for misuse, abuse and dependence by triage categories:

1. Resuscitation
2. Emergency

Excludes type of visit code '19' (COVID-19 assessment clinic), and triage category '6' (dead on arrival).

Source: VEMD.

Date extracted: 25 January 2022.



Latest 4-week avg.: 102.8 (26 December 2021) **SP2019:** 120.8 **Change:** -18.0

SP2020: 105.3 **Change:** -2.5

Ambulance Victoria

Mental health-related ambulance cases

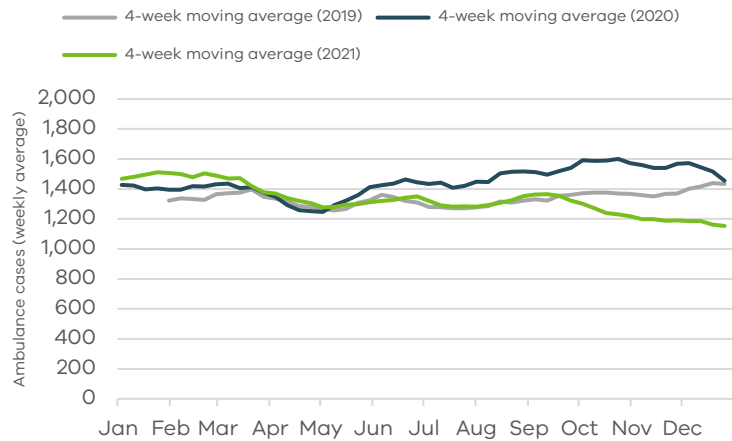
Number of mental health-related ambulance cases

Measure presents the moving average number of ambulance cases per week where the clinical information captured within the patient care record indicated the case was mental health related.

'Ambulance cases' refer to emergency and non-emergency occasions where Ambulance Victoria has attended to a patient at a scene and filled out a patient care record.

Source: Ambulance Victoria.

Date extracted: 25 January 2022.



Latest 4-week avg.: (26 December 2021)	1,153	SP2019:	1,433	Change:	-280
		SP2020:	1,456	Change:	-303

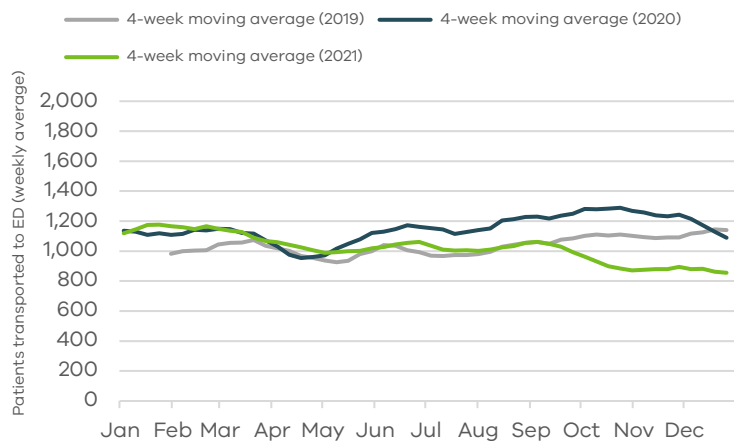
Number of ambulance patients transported to ED which were mental health-related

Measure presents the moving average number of ambulance patients per week transported to a hospital ED where the clinical information captured within the patient care record indicated the case was mental health related.

A hospital ED is defined as one of the 40 healthcare providers with the greatest number of ambulance arrivals in Victoria.

Source: Ambulance Victoria.

Date extracted: 25 January 2022.



Latest 4-week avg.: (26 December 2021)	856	SP2019:	1,141	Change:	-285
		SP2020:	1,089	Change:	-233

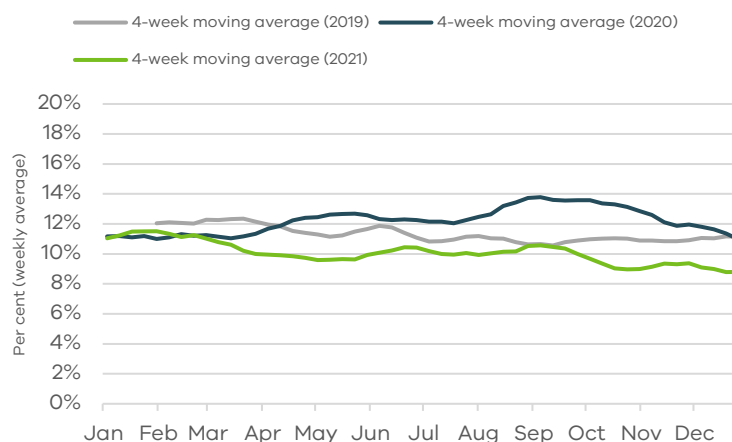
Percentage of ambulance patients transported to ED which were mental health-related

Measure presents the moving average percentage of total ambulance patients per week transported to a hospital ED for mental health related reasons.

A hospital ED is defined as one of the 40 healthcare providers with the greatest number of ambulance arrivals in Victoria.

Source: Ambulance Victoria.

Date extracted: 25 January 2022.



Latest 4-week avg.: (26 December 2021)	8.8%	SP2019:	11.1%	Change:	-2.3%
		SP2020:	11.0%	Change:	-2.2%

Ambulance Victoria

Alcohol and other drug-related ambulance cases

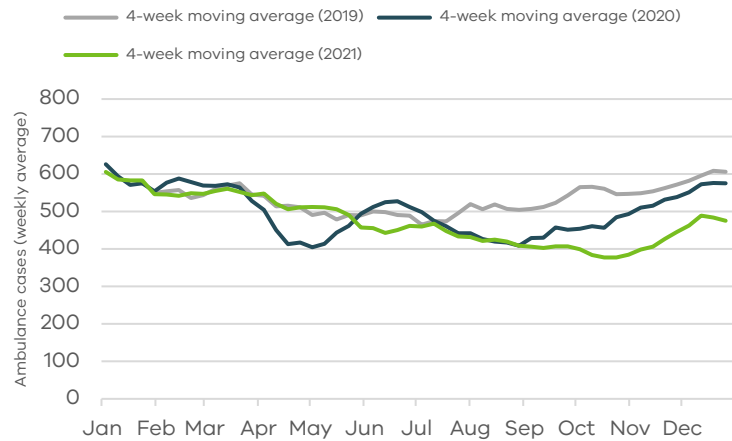
Number of AoD-related ambulance cases

Measure presents the moving average number of ambulance cases per week where a drug and/or alcohol category was recorded as the final primary assessment by a treating paramedic.

'Ambulance cases' refer to emergency and non-emergency occasions where Ambulance Victoria has attended to a patient at a scene and filled out a patient care record.

Source: Ambulance Victoria.

Date extracted: 25 January 2022.



Latest 4-week avg.: 475 (26 December 2021) **SP2019:** 606 **Change:** -131
SP2020: 575 **Change:** -100

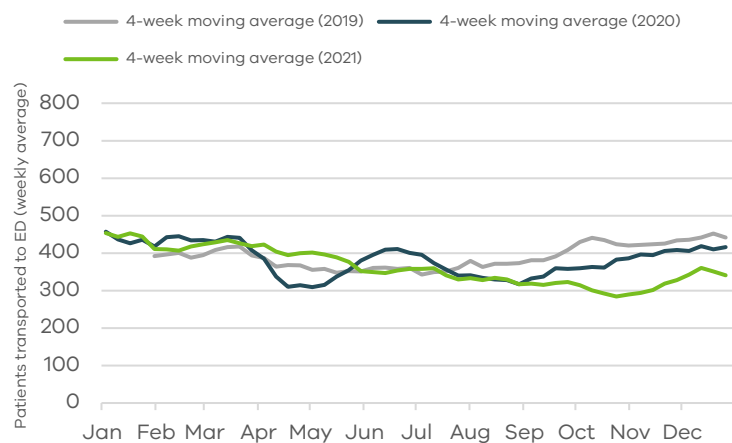
Number of ambulance patients transported to ED which were AoD-related

Measure presents the moving average number of ambulance patients per week transported to a hospital emergency department where a drug and/or alcohol category was recorded as the final primary assessment by a treating paramedic.

A hospital emergency department is defined as one of the 40 healthcare providers with the greatest number of ambulance arrivals in Victoria.

Source: Ambulance Victoria.

Date extracted: 25 January 2022.



Latest 4-week avg.: 341 (26 December 2021) **SP2019:** 441 **Change:** -100
SP2020: 416 **Change:** -75

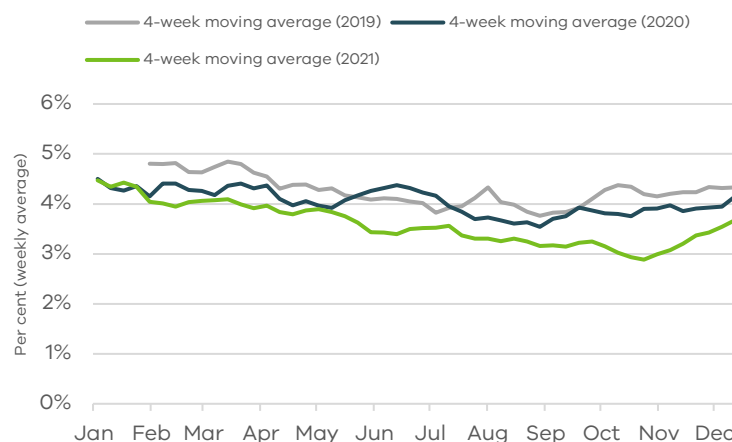
Percentage of ambulance patients transported to ED which were AoD-related

Measure presents the moving average percentage of total ambulance patients per week transported to a hospital ED for AoD-related reasons.

A hospital ED is defined as one of the 40 healthcare providers with the greatest number of ambulance arrivals in Victoria.

Source: Ambulance Victoria.

Date extracted: 25 January 2022.



Latest 4-week avg.: 3.5% (26 December 2021) **SP2019:** 4.3% **Change:** -0.8%
SP2020: 4.2% **Change:** -0.7%

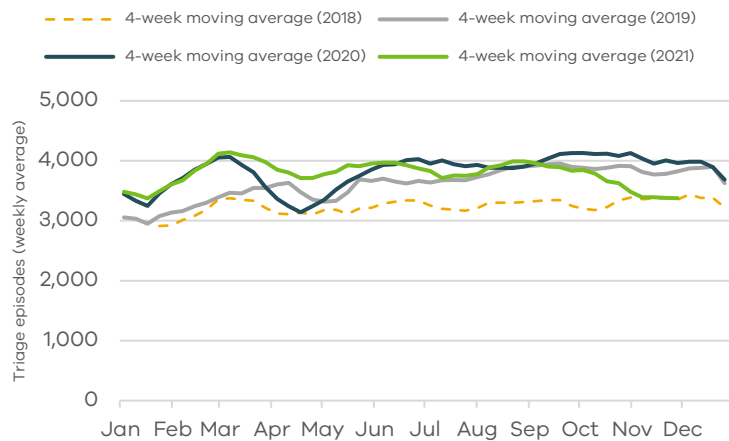
Mental health triage services

Number of mental health triage episodes

Measure presents the moving average number of mental health triage contacts per week resulting in a triage scale being assigned.

Refer to *Triage scale – mental health service guidelines* for detailed information on the mental health triage process and triage codes.

Source: Mental Health Triage MDS.
Date extracted: 25 January 2022.



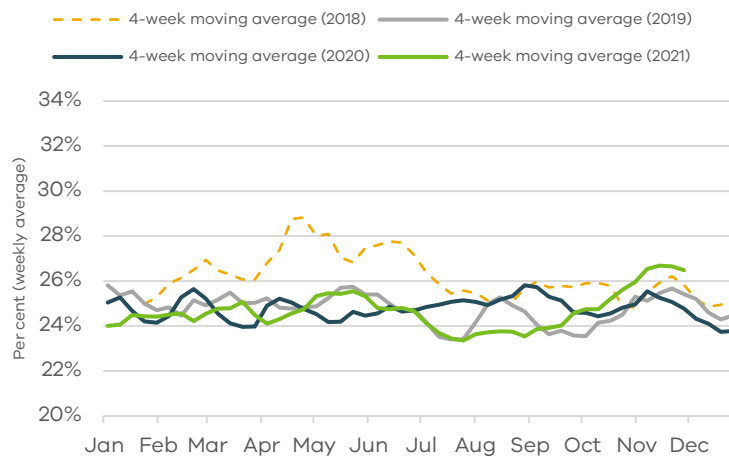
Latest 4-week avg.: 3,375 (28 November 2021) **SP2019:** 3,823 **Change:** -448
SP2020: 3,963 **Change:** -588

Percentage of mental health triage episodes where the service recipient is a parent, family, carer or other

Measure presents the moving average percentage of mental health triage contacts per week where the service recipient is a parent, family member, carer or other recipient.

Refer to *Triage scale – mental health service guidelines* for detailed information on the mental health triage process and triage codes.

Source: Mental Health Triage MDS.
Date extracted: 25 January 2022.



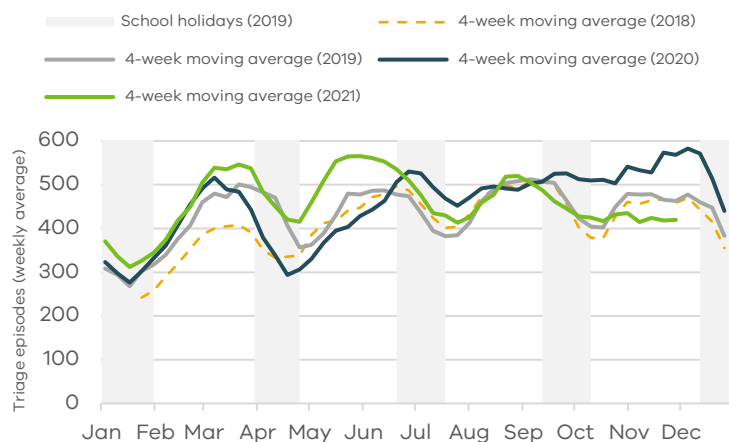
Latest 4-week avg.: 26.5% (28 November 2021) **SP2019:** 25.4% **Change:** 1.1%
SP2020: 24.8% **Change:** 1.7%

Number of mental health triage episodes (CAMHS/CYMHS)

Measure presents the moving average number of mental health triage contacts per week resulting in a triage scale being assigned with an assigned child and youth (CAMHS/CYMHS) program type at intake.

Refer to *Triage scale – mental health service guidelines* for detailed information on the mental health triage process and triage codes.

Source: Mental Health Triage MDS.
Date extracted: 25 January 2022.



Latest 4-week avg.: 420 (28 November 2021) **SP2019:** 463 **Change:** -43
SP2020: 569 **Change:** -149

Mental health triage services

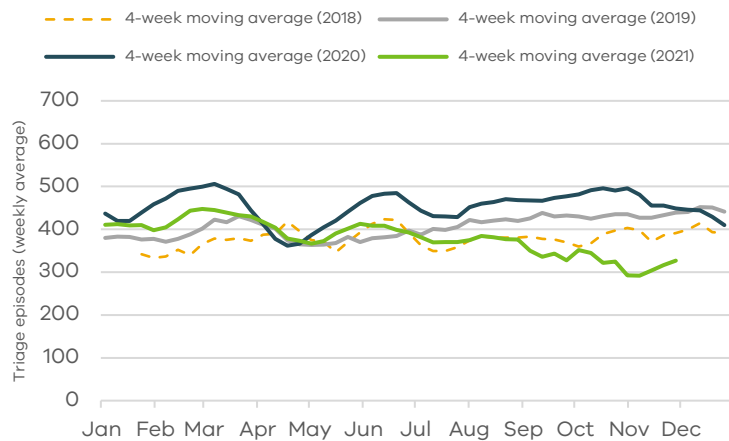
Number of mental health triage episodes, triage codes 'A' and 'B'

Measure presents the moving average number of mental health triage contacts per week with an assigned triage code:

- A. Emergency services response
- B. Crisis mental health response.

Refer to *Triage scale – mental health service guidelines* for detailed information on the mental health triage process and triage codes.

Source: Mental Health Triage MDS.
Date extracted: 25 January 2022.



Latest 4-week avg.: 327 (28 November 2021) **SP2019:** 439 **Change:** -112
SP2020: 449 **Change:** -122

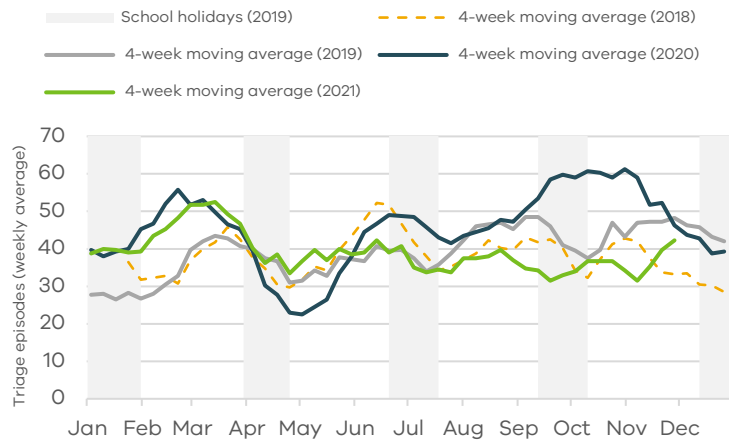
Number of mental health triage episodes, triage codes 'A' and 'B' (CAMHS/CYMHS)

Measure presents the moving average number of mental health triage contacts per week with a CAMHS/CYMHS program type at intake, and with an assigned triage code:

- A. Emergency services response
- B. Crisis mental health response.

Refer to *Triage scale – mental health service guidelines* for detailed information on the mental health triage process and triage codes.

Source: Mental Health Triage MDS.
Date extracted: 25 January 2022.



Latest 4-week avg.: 42.3 (28 November 2021) **SP2019:** 48.3 **Change:** -6.0
SP2020: 46.3 **Change:** -4.0

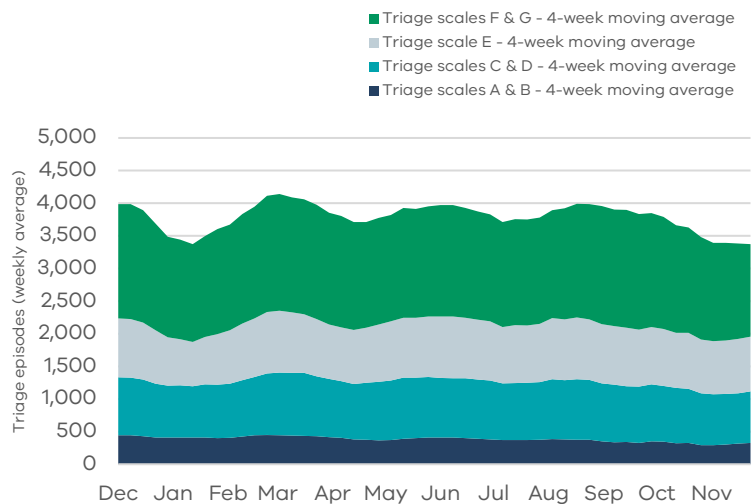
Number of mental health triage episodes, by triage code

Measure reports the moving average number of mental health triage contacts resulting in a triage scale being assigned, by mental health triage codes:

- A. Emergency services response
- B. Crisis mental health response
- C. Urgent mental health response
- D. Semi-urgent mental health response
- E. Non-urgent mental health response
- F. Referral to contact a service provider
- G. Advice only or more info needed.

Refer to *Triage scale – mental health service guidelines* for detailed information on the mental health triage process and triage codes.

Source: Mental Health Triage MDS.
Date extracted: 25 January 2022.



Latest 4-week avg.: 3,375 (28 November 2021)

Clinical mental health care

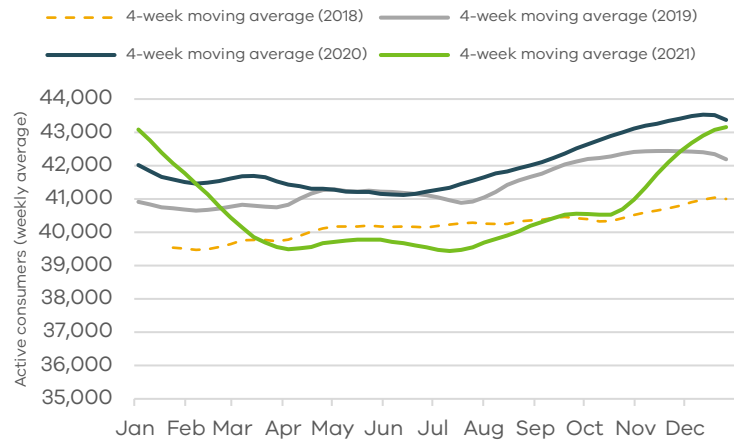
Consumers accessing clinical care

Number of 'active' mental health consumers*

Measure presents the moving average number of consumers per week in an open acute/subacute inpatient or residential episode, or those with a recorded ambulatory contact within the preceding 90 days.

Source: CMI/ODS.

Date extracted: 21 January 2022.



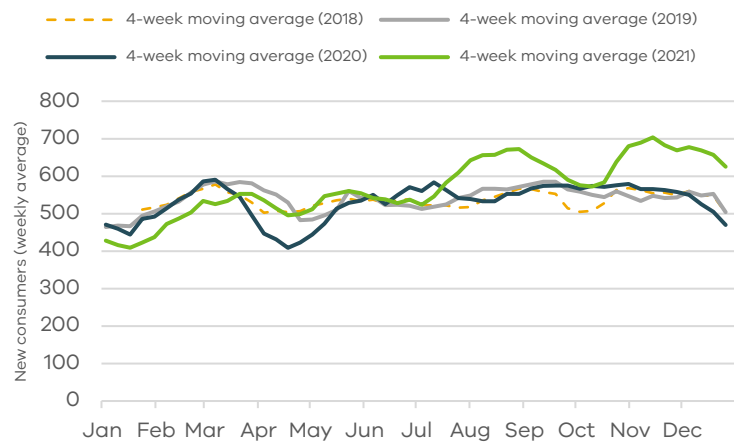
Latest 4-week avg.: 43,157 (26 December 2021) **SP2019:** 42,193 **Change:** 964
SP2020: 43,374 **Change:** -217

Number of 'new' mental health consumers*

Measure presents the moving average number of consumers per week in an open acute/subacute inpatient or residential episode, or those with a recorded ambulatory contact within the preceding 90 days, who have not previously accessed clinical mental health services in the last five years.

Source: CMI/ODS.

Date extracted: 21 January 2022.



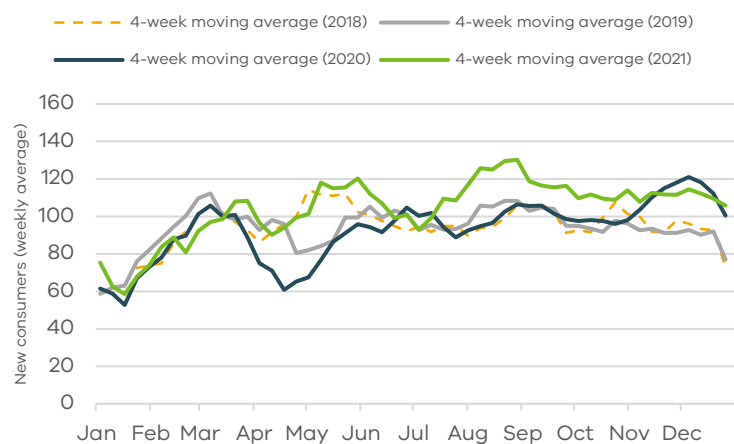
Latest 4-week avg.: 626 (26 December 2021) **SP2019:** 504 **Change:** 122
SP2020: 470 **Change:** 156

Number of 'new' CAMHS/CYMHS mental health consumers*

Measure presents the moving average number of consumers per week in an open CAMHS/CYMHS acute/subacute inpatient or residential episode, or those with a recorded ambulatory contact within the preceding 90 days, who have not previously accessed clinical mental health services in the last five years.

Source: CMI/ODS.

Date extracted: 21 January 2022.



Latest 4-week avg.: 105.8 (26 December 2021) **SP2019:** 77.0 **Change:** 28.8
SP2020: 100.5 **Change:** 5.3

Clinical mental health care

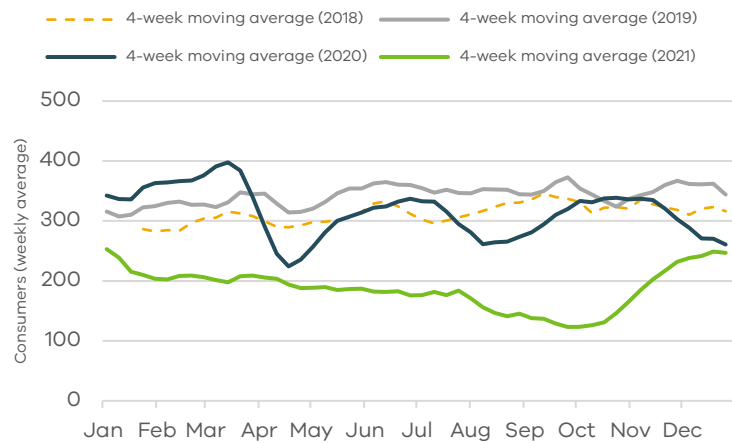
Crisis outreach in consumers' own environment (face-to-face or videoconference)

Number of consumers receiving assessment and treatment in their own environment by adult CATT, ACIS or MHaP response services via direct face-to-face or videoconference contact*

Measure presents the moving average number of consumers per week receiving direct (face-to-face) or videoconference contacts from an adult Crisis and Assessment Team (CATT), an adult Acute Community Intervention Service (ACIS) response team or a Mental Health and Police Response (MHaP) response.

Source: CMI/ODS.

Date extracted: 21 January 2022.



Latest 4-week avg.: 247
(26 December 2021)

SP2019: 344

Change: -97

SP2020: 261

Change: -14

Bed-based clinical mental health care

Admissions to acute units

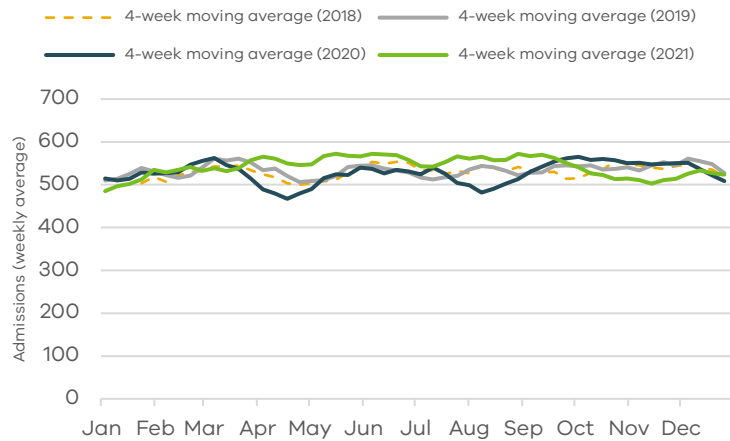
Number of admissions to an acute mental health inpatient unit – all settings

Measure presents the moving average number of admissions per week to all acute inpatient units, including within adult, older persons, child and adolescent, forensic mental health and specialist settings.

At an individual unit level, this measure is based on the originating inpatient unit. Consumers may be subsequently transferred to other units at the same campus during the same admitted episode. Includes same day stays.

Source: CMI/ODS.

Date extracted: 21 January 2022.



Latest 4-week avg.:	524	SP2019:	528	Change:	-4
	(26 December 2021)				
		SP2020:	509	Change:	15

Number of admissions to a CAMHS acute inpatient unit

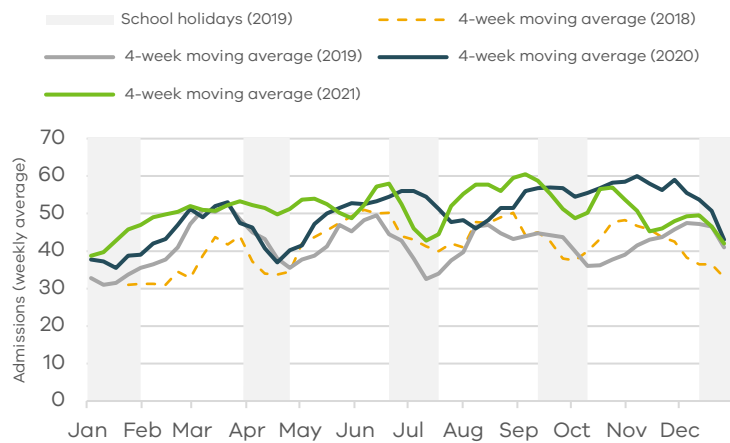
Measure presents the moving average number of admissions per week to the following acute inpatient units:

1. Statewide child acute units
2. Adolescent acute units
3. Specialist adolescent acute beds in regional Victoria.

At an individual unit level, this measure is based on the originating inpatient unit. Consumers may be subsequently transferred to other units at the same campus during the same admitted episode. Includes same day stays.

Source: CMI/ODS.

Date extracted: 21 January 2022.



Latest 4-week avg.:	42.0	SP2019:	41.0	Change:	1.0
	(26 December 2021)				
		SP2020:	43.0	Change:	-1.0

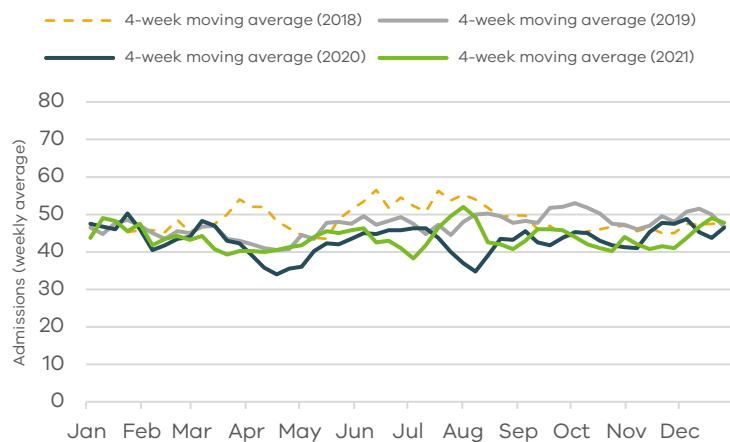
Number of admissions to an aged acute inpatient unit

Measure presents the moving average number of admissions per week to an aged acute inpatient unit.

At an individual unit level, this measure is based on the originating inpatient unit. Consumers may be subsequently transferred to other units at the same campus during the same admitted episode. Includes same day stays.

Source: CMI/ODS.

Date extracted: 21 January 2022.



Latest 4-week avg.:	47.8	SP2019:	46.8	Change:	1.0
	(26 December 2021)				
		SP2020:	46.5	Change:	1.3

Bed-based clinical mental health care

Admissions to youth prevention and recovery care (PARC) units

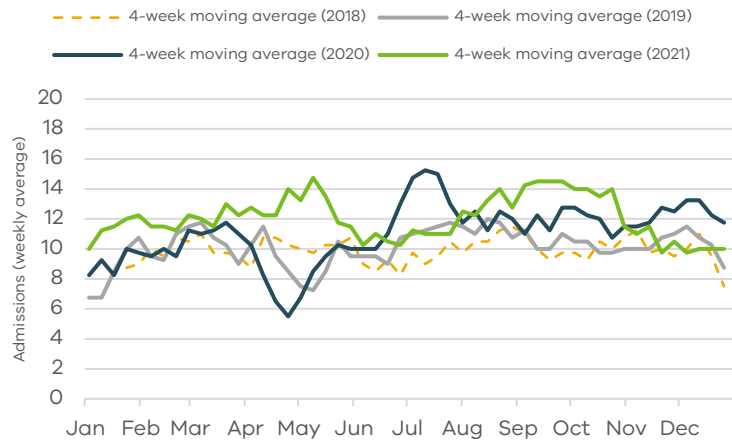
Number of admissions to a youth prevention and recovery care (PARC) unit

Measure presents the moving average number of admissions per week to a youth PARC unit.

Includes same day stays.

Source: CMI/ODS.

Date extracted: 21 January 2022.



Latest 4-week avg.:	10.0	SP2019:	8.8	Change:	1.2
(26 December 2021)		SP2020:	11.8	Change:	-1.8

Bed-based clinical mental health care

Bed occupancy

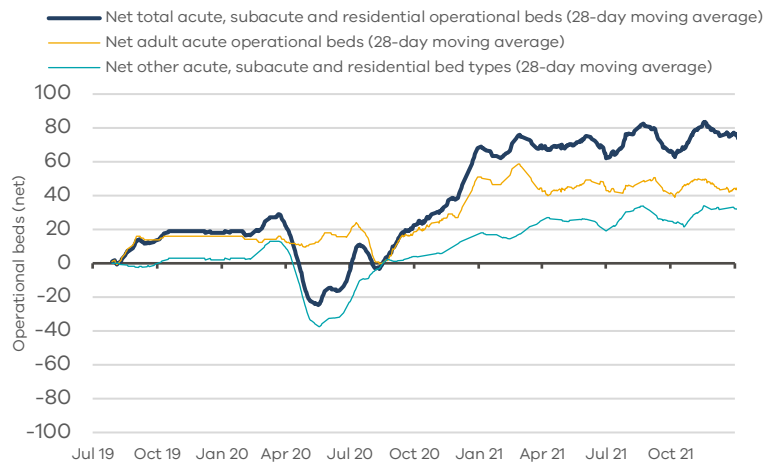
Net operational bed capacity

Measure presents the 28-day moving average number of net operational beds within acute, subacute and residential mental health settings since 1 July 2019.

Adult acute beds include the Orygen inpatient unit at Footscray.

Source: CMI/ODS.

Date extracted: 21 January 2022.



Latest 4-week avg: +76 beds
(26 December 2021)

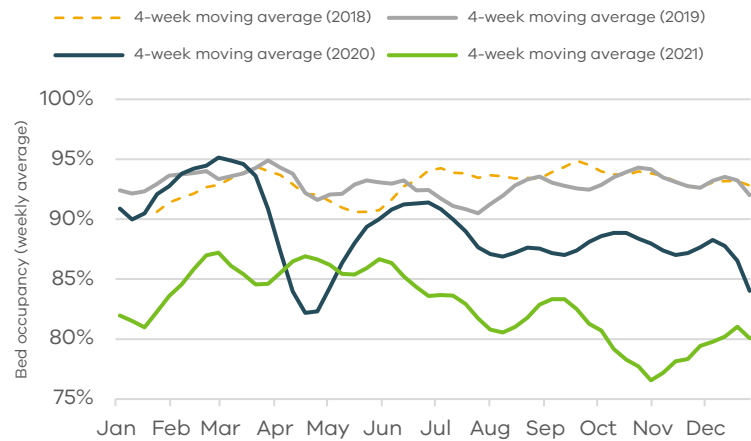
Bed occupancy, excluding leave – adult acute

Measure presents the moving average bed occupancy rate per week within adult acute inpatient units, excluding leave.

Includes the Orygen inpatient unit at Footscray.

Source: CMI/ODS.

Date extracted: 21 January 2022.



Latest 4-week avg.: 80.1% (26 December 2021) **SP2019: 92.0%** **Change: -11.9%**
SP2020: 84.0% **Change: -3.9%**

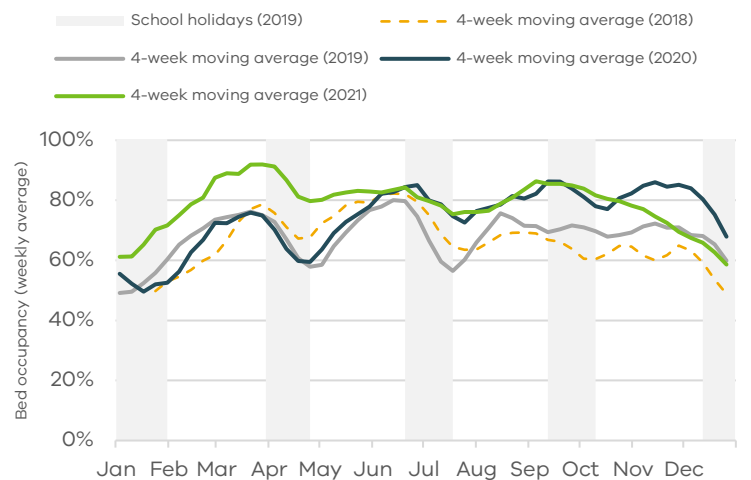
Bed occupancy, excluding leave – adolescent acute

Measure presents the moving average bed occupancy rate per week within the adolescent acute inpatient units, excluding leave.

Excludes specialist adolescent acute beds in regional Victoria.

Source: CMI/ODS.

Date extracted: 21 January 2022.



Latest 4-week avg.: 58.6% (26 December 2021) **SP2019: 59.9%** **Change: -1.3%**
SP2020: 67.9% **Change: -9.3%**

Bed-based clinical mental health care Clinician-reported outcomes (HoNOS)

Average clinician-reported outcomes (HoNOS) at admission to an inpatient unit – adult acute*

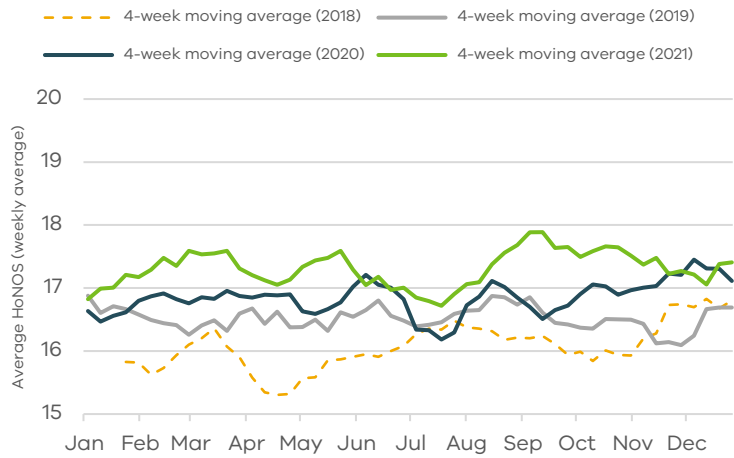
Measure presents the moving average total HoNOS score per week collected at inpatient episode start, excluding invalid HoNOS scores (more than two times rated as '9'). Includes Orygen.

HoNOS reports symptom severity using 12 scales scored from '0' (no problem or issue identified) to '4' (severe problem). Dates used in measure calculation are based on HoNOS completion date.

HoNOS is required to be collected at admission, however not all result in a recorded valid HoNOS score. Interpret with caution.

Source: CMI/ODS.

Date extracted: 21 January 2022.



Latest 4-week avg.: 17.4 (26 December 2021) **SP2019:** 16.7 **Change:** 0.7
SP2020: 17.1 **Change:** 0.3

Average clinician-reported outcomes (HoNOS) at admission to an inpatient unit – adolescent acute*

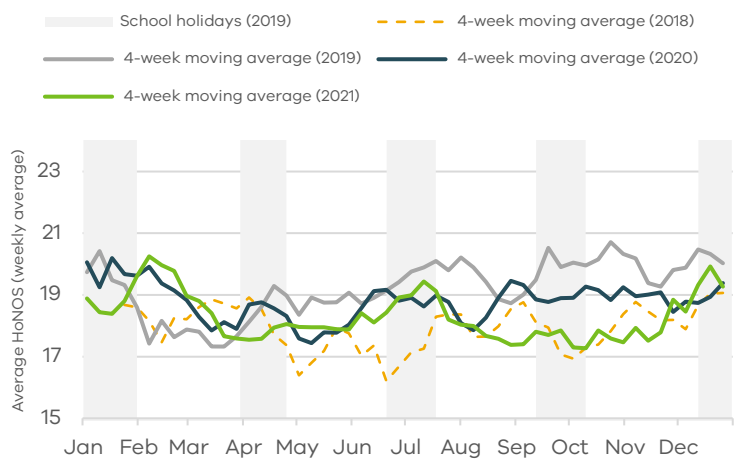
Measure presents the moving average total HoNOS score per week collected at inpatient episode start, excluding invalid HoNOS scores (more than two times rated as '9') within adolescent acute units.

Excludes specialist adolescent acute beds in regional Victoria.

HoNOS is required to be collected at admission, however not all result in a recorded valid HoNOS score. Interpret with caution.

Source: CMI/ODS.

Date extracted: 21 January 2022.



Latest 4-week avg.: 19.3 (26 December 2021) **SP2019:** 20.0 **Change:** -0.7
SP2020: 19.4 **Change:** -0.1

Average clinician-reported outcomes (HoNOS) at admission to an inpatient unit – specialist CAMHS*

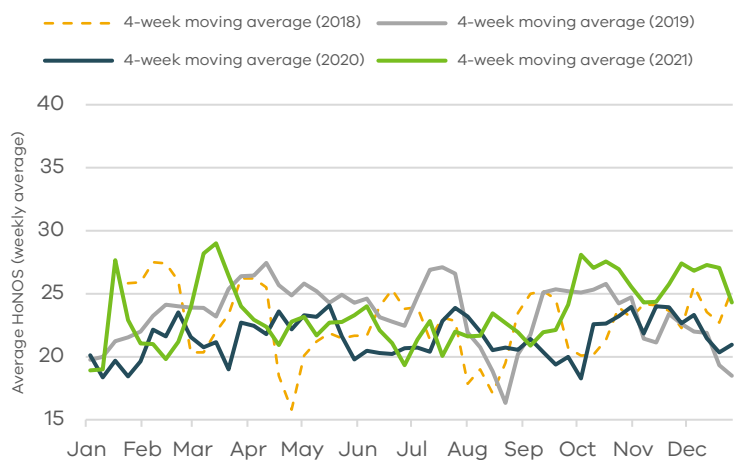
Measure presents the moving average total HoNOS score per week collected at inpatient episode start, excluding invalid HoNOS scores (more than two times rated as '9') within:

1. Statewide child acute units
2. Specialist adolescent acute beds in regional Victoria.

HoNOS is required to be collected at admission, however not all result in a recorded valid HoNOS score. High variability observed due to small numbers. Interpret with caution.

Source: CMI/ODS.

Date extracted: 21 January 2022.



Latest 4-week avg.: 24.3 (26 December 2021) **SP2019:** 18.5 **Change:** 5.8
SP2020: 20.9 **Change:** 3.4

Bed-based clinical mental health care

Readmissions

Percentage of separations from an inpatient unit re-admitted within seven days – adult acute

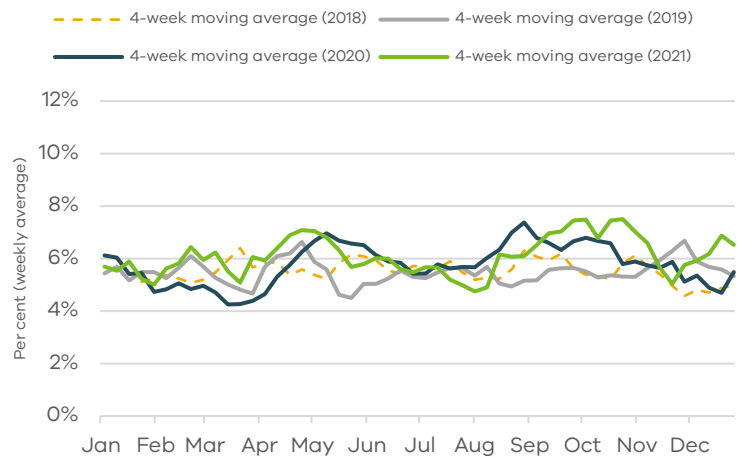
Measure reports the moving average percentage of separations per week from an adult acute inpatient unit re-admitted to any inpatient unit within seven days. Separation date lagged by seven days.

Includes separations from the Orygen inpatient unit at Footscray.

Excludes separations where the consumer was transferred to another inpatient unit, same day stays, and overnight ECT admissions where ECT occurred on the day of separation.

Source: CMI/ODS.

Date extracted: 21 January 2022.



Latest 4-week avg.: 6.5% (26 December 2021) **SP2019:** 5.3% **Change:** 1.2%

SP2020: 5.5% **Change:** 1.0%

Percentage of separations from an inpatient unit re-admitted within 28 days – adult acute

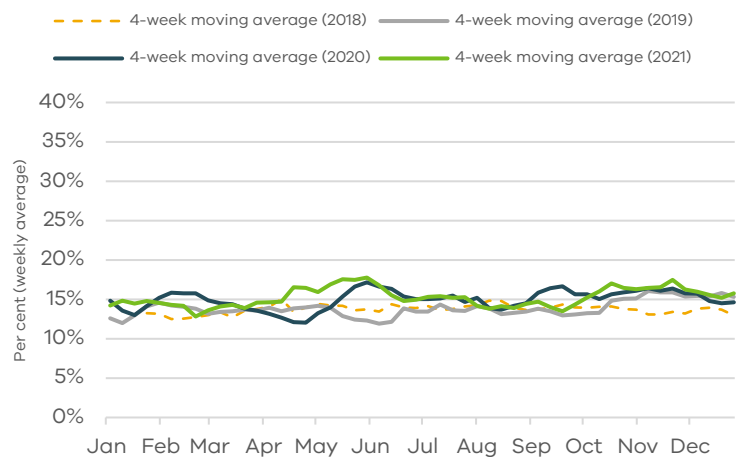
Measure reports the moving average percentage of separations per week from an adult acute inpatient unit re-admitted to any inpatient unit within 28 days. Separation date lagged by one month.

Includes separations from the Orygen inpatient unit at Footscray.

Excludes separations where the consumer was transferred to another inpatient unit, same day stays, and overnight ECT admissions where ECT occurred on the day of separation.

Source: CMI/ODS.

Date extracted: 21 January 2022.



Latest 4-week avg.: 15.8% (26 December 2021) **SP2019:** 15.3% **Change:** 0.5%

SP2020: 14.6% **Change:** 1.2%

Percentage of separations from an inpatient unit re-admitted within 91 days – adult acute

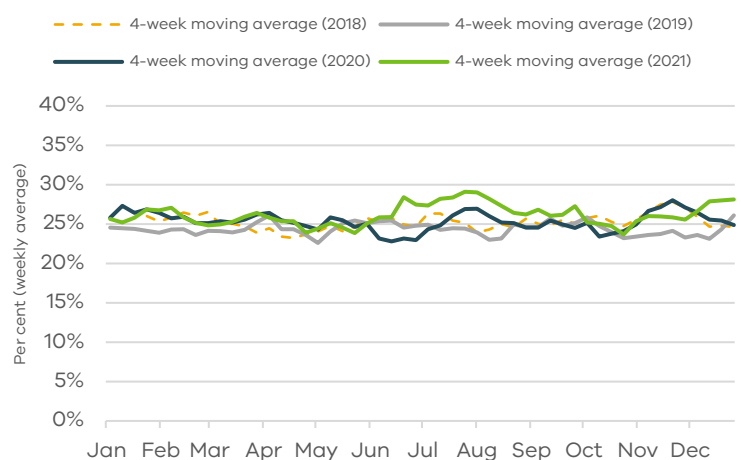
Measure reports the moving average percentage of separations per week from an adult acute inpatient unit re-admitted to any inpatient unit within 91 days. Separation date lagged by 13 weeks.

Includes separations from the Orygen inpatient unit at Footscray.

Excludes separations where the consumer was transferred to another inpatient unit, same day stays, and overnight ECT admissions where ECT occurred on the day of separation.

Source: CMI/ODS.

Date extracted: 21 January 2022.



Latest 4-week avg.: 28.1% (26 December 2021) **SP2019:** 26.1% **Change:** 2.0%

SP2020: 24.9% **Change:** 3.2%

Bed-based clinical mental health care

Readmissions

Percentage of separations from an inpatient unit re-admitted within seven days – CAMHS acute

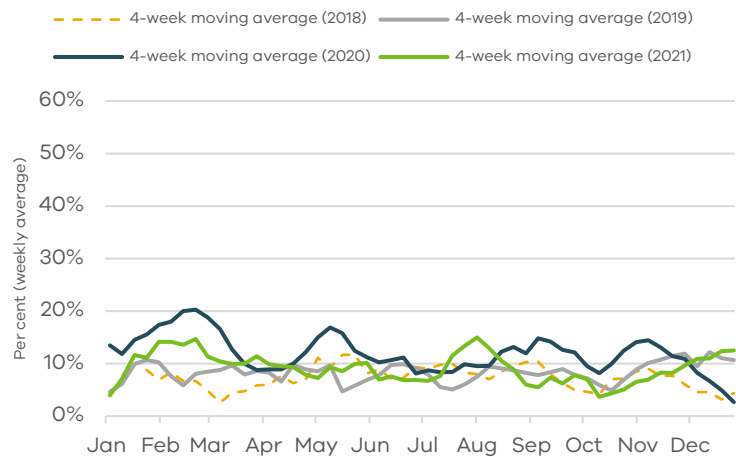
Measure reports the moving average percentage of separations per week from a CAMHS acute inpatient unit re-admitted to any inpatient unit within seven days. Separation date lagged by seven days.

Includes separations from adolescent acute, statewide child acute and specialist adolescent acute beds in regional Victoria.

Excludes separations where the consumer was transferred to another inpatient unit, same day stays, and overnight ECT admissions where ECT occurred on the day of separation.

Source: CMI/ODS.

Date extracted: 21 January 2022.



Latest 4-week avg.: 12.5% (26 December 2021) **SP2019:** 10.6% **Change:** 1.9%
SP2020: 2.7% **Change:** 9.8%

Percentage of separations from an inpatient unit re-admitted within 28 days – CAMHS acute

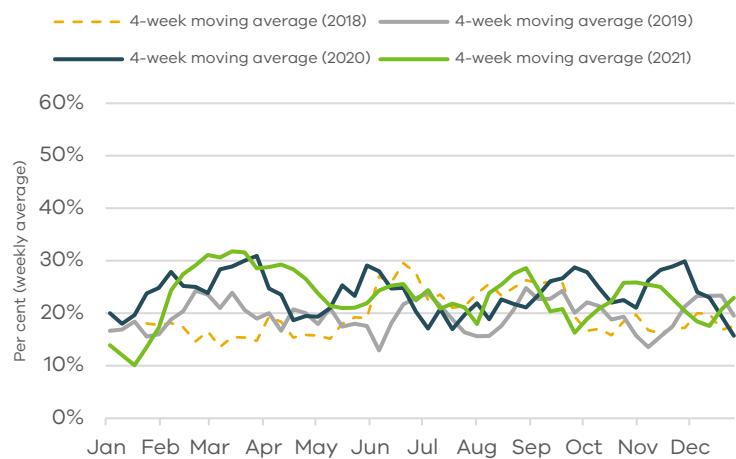
Measure reports the moving average percentage of separations per week from a CAMHS acute inpatient unit re-admitted to any inpatient unit within 28 days. Separation date lagged by one month.

Includes separations from adolescent acute, statewide child acute and specialist adolescent acute beds in regional Victoria.

Excludes separations where the consumer was transferred to another inpatient unit, same day stays, and overnight ECT admissions where ECT occurred on the day of separation.

Source: CMI/ODS.

Date extracted: 21 January 2022.



Latest 4-week avg.: 23.0% (26 December 2021) **SP2019:** 19.5% **Change:** 3.5%
SP2020: 15.7% **Change:** 7.3%

Percentage of separations from an inpatient unit re-admitted within 91 days – CAMHS acute

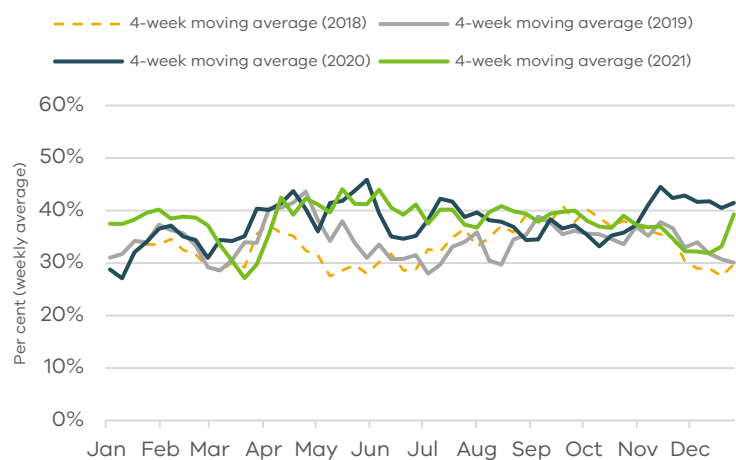
Measure reports the moving average percentage of separations per week from a CAMHS acute inpatient unit re-admitted to any inpatient unit within 91 days. Separation date lagged by 13 weeks.

Includes separations from adolescent acute, statewide child acute and specialist adolescent acute beds in regional Victoria.

Excludes separations where the consumer was transferred to another inpatient unit, same day stays, and overnight ECT admissions where ECT occurred on the day of separation.

Source: CMI/ODS.

Date extracted: 21 January 2022.



Latest 4-week avg.: 39.2% (26 December 2021) **SP2019:** 30.1% **Change:** 9.1%
SP2020: 41.4% **Change:** -2.2%

Bed-based clinical mental health care

Readmissions

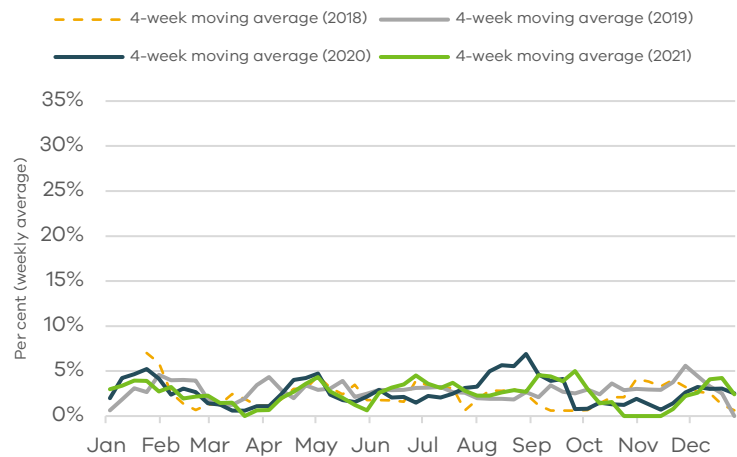
Percentage of separations from an inpatient unit re-admitted within seven days – aged acute

Measure reports the moving average percentage of separations per week from an aged acute inpatient unit re-admitted to any inpatient unit within seven days. Separation date lagged by seven days.

Excludes separations where the consumer was transferred to another inpatient unit, same day stays, and overnight ECT admissions where ECT occurred on the day of separation.

Source: CMI/ODS.

Date extracted: 21 January 2022.



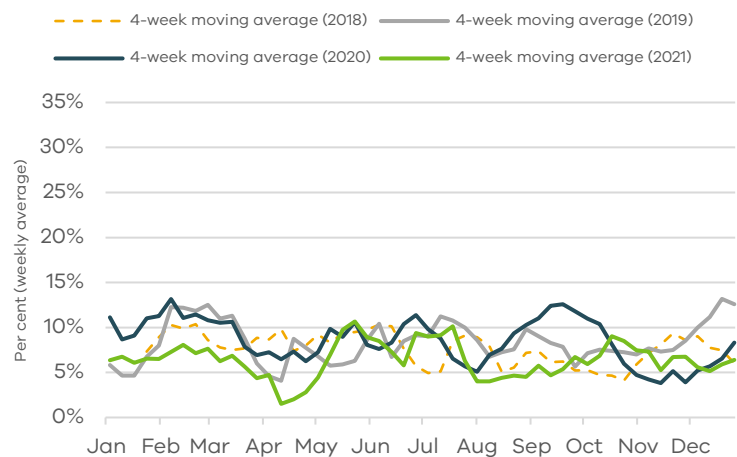
Percentage of separations from an inpatient unit re-admitted within 28 days – aged acute

Measure reports the moving average percentage of separations per week from an aged acute inpatient unit re-admitted to any inpatient unit within 28 days. Separation date lagged by one month.

Excludes separations where the consumer was transferred to another inpatient unit, same day stays, and overnight ECT admissions where ECT occurred on the day of separation.

Source: CMI/ODS.

Date extracted: 21 January 2022.



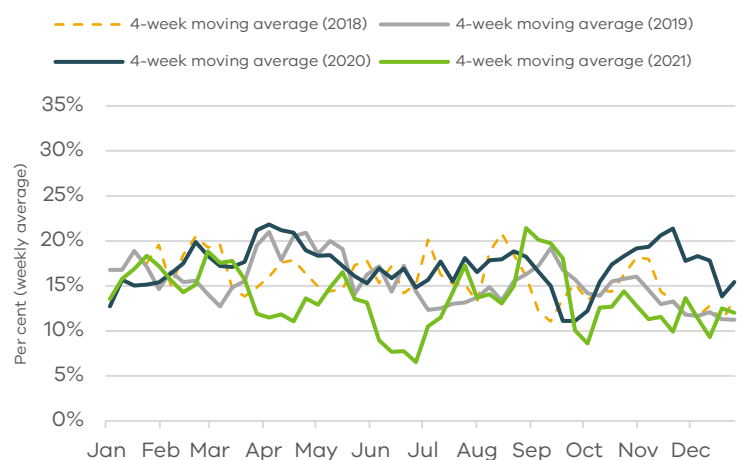
Percentage of separations from an inpatient unit re-admitted within 91 days – aged acute

Measure reports the moving average percentage of separations per week from an aged acute inpatient unit re-admitted to any inpatient unit within 91 days. Separation date lagged by 13 weeks.

Excludes separations where the consumer was transferred to another inpatient unit, same day stays, and overnight ECT admissions where ECT occurred on the day of separation.

Source: CMI/ODS.

Date extracted: 21 January 2022.



Community-based clinical mental health care

Ambulatory service contacts

Number of ambulatory service contacts*

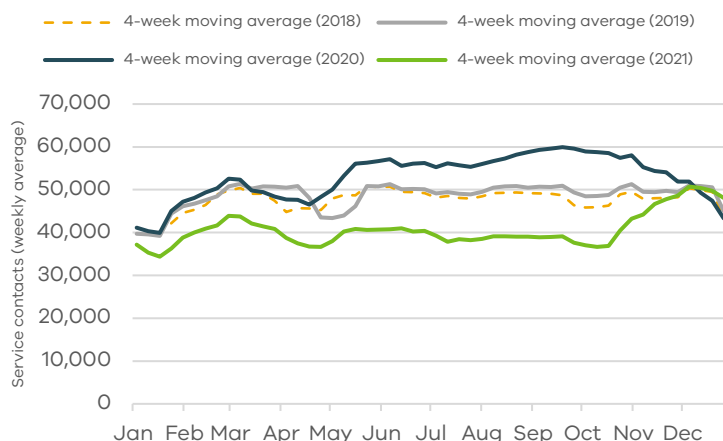
Measure presents the moving average number of ambulatory service contacts per week for the following contact types:

- A: Registered consumer contact
- B: Un-registered consumer contact
- C: Community contact
- E: Case contact.

Service contacts are defined as contacts adjusted for group session contacts.

Source: CMI/ODS.

Date extracted: 21 January 2022.



Latest 4-week avg.: 48,103 (26 December 2021) **SP2019:** 44,995 **Change:** 3,108
SP2020: 43,297 **Change:** 4,806

Number of ambulatory service hours*

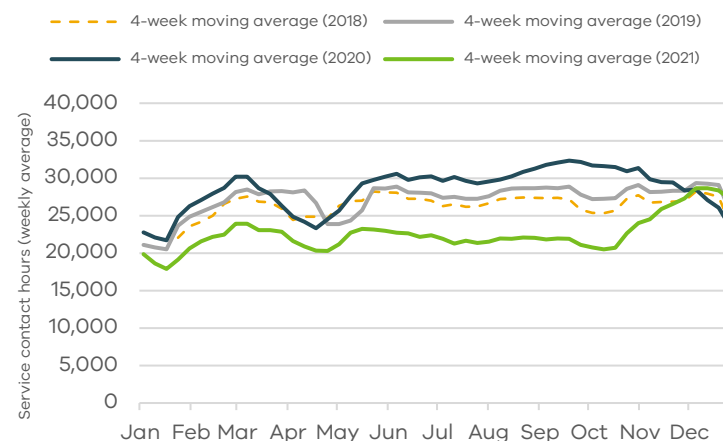
Measure presents the moving average number of ambulatory service hours per week for the following contact types:

- A: Registered consumer contact
- B: Un-registered consumer contact
- C: Community contact
- E: Case contact.

Service hours are adjusted for group session contacts.

Source: CMI/ODS.

Date extracted: 21 January 2022.



Latest 4-week avg.: 27,182 (26 December 2021) **SP2019:** 25,480 **Change:** 1,702
SP2020: 23,490 **Change:** 3,692

Number of ambulatory service hours, by modality*

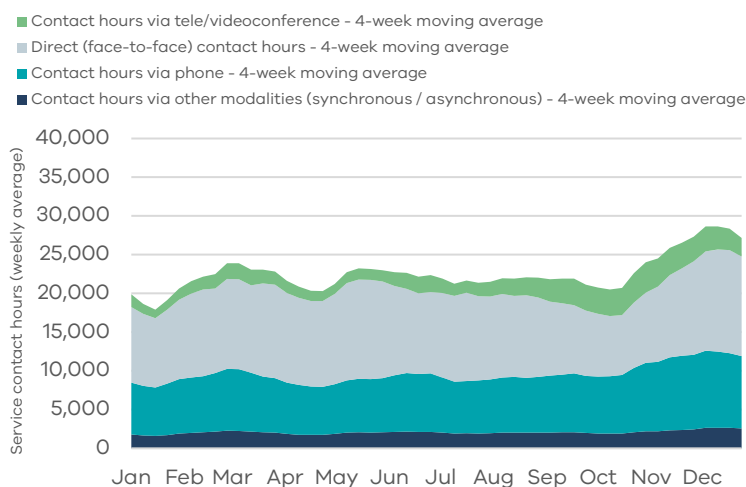
Measure presents the moving average number of ambulatory service contact hours per week for the following contact types (by modality):

- A: Registered consumer contact
- B: Un-registered consumer contact
- C: Community contact
- E: Case contact.

Service contacts are defined as contacts adjusted for group session contacts.

Source: CMI/ODS.

Date extracted: 21 January 2022.



Latest 4-week avg.: 27,182 (26 December 2021)

Community-based clinical mental health care

Ambulatory service contacts

Number of ambulatory service contacts – adult*

Measure presents the moving average number of ambulatory service contacts per week by adult ambulatory mental health services for the following contact types:

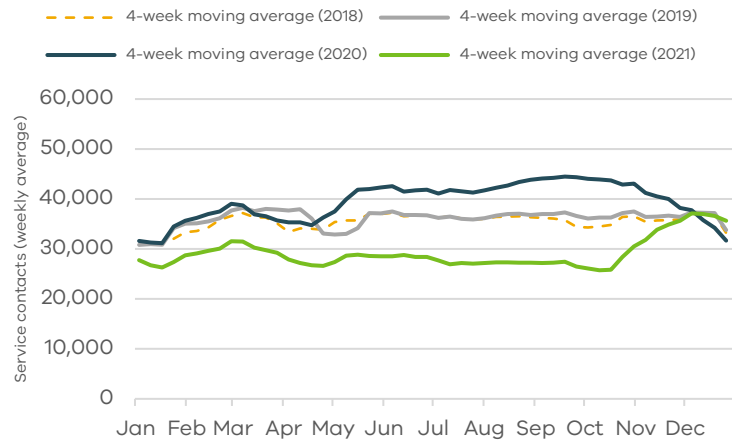
- A: Registered consumer contact
- B: Un-registered consumer contact
- C: Community contact
- E: Case contact.

Includes Orygen.

Service contacts are defined as contacts adjusted for group session contacts.

Source: CMI/ODS.

Date extracted: 21 January 2022.



Latest 4-week avg.: 35,659 (26 December 2021) **SP2019:** 33,801 **Change:** 1,858
SP2020: 31,691 **Change:** 3,968

Number of ambulatory service hours – adult*

Measure presents the moving average number of ambulatory service hours per week by adult ambulatory mental health services for the following contact types:

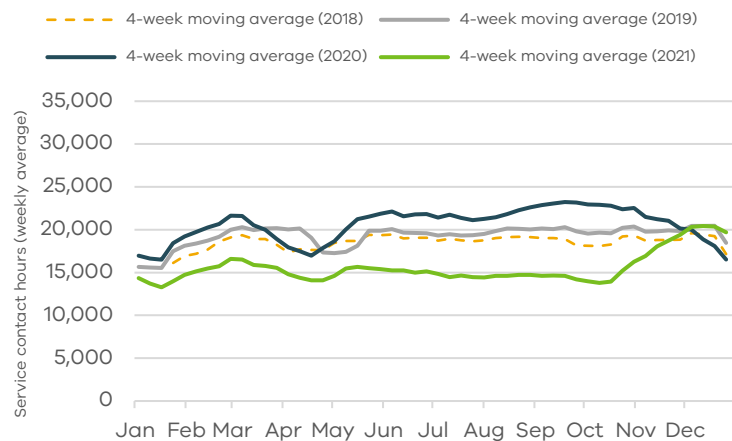
- A: Registered consumer contact
- B: Un-registered consumer contact
- C: Community contact
- E: Case contact.

Includes Orygen.

Service hours are adjusted for group session contacts.

Source: CMI/ODS.

Date extracted: 21 January 2022.



Latest 4-week avg.: 19,697 (26 December 2021) **SP2019:** 18,457 **Change:** 1,240
SP2020: 16,520 **Change:** 3,177

Number of ambulatory service hours, by modality – adult*

Measure presents the moving average number of ambulatory service contact hours per week by adult ambulatory mental health services for the following contact types (by modality):

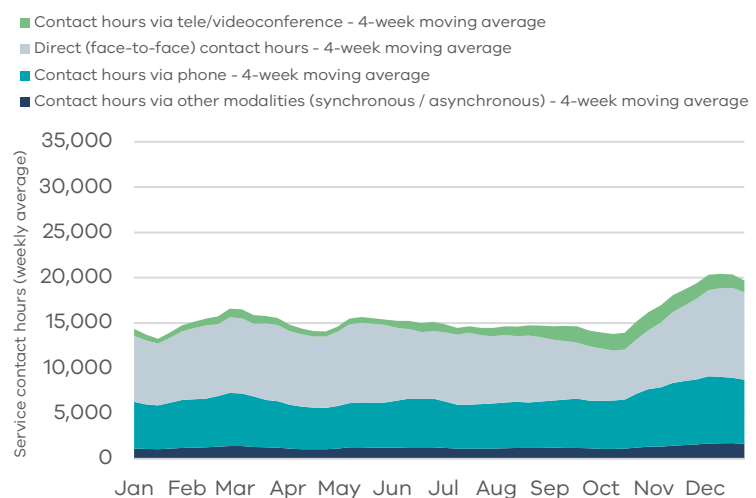
- A: Registered consumer contact
- B: Un-registered consumer contact
- C: Community contact
- E: Case contact.

Includes Orygen.

Service contacts are defined as contacts adjusted for group session contacts.

Source: CMI/ODS.

Date extracted: 21 January 2022.



Latest 4-week avg.: 19,697 (26 December 2021)

Community-based clinical mental health care

Ambulatory service contacts

Number of ambulatory service contacts – CAMHS/CYMHS*

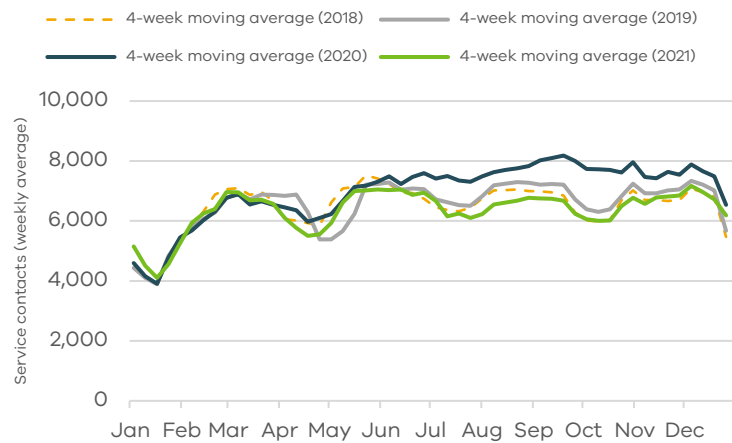
Measure presents the moving average number of ambulatory service contacts per week by CAMHS/CYMHS ambulatory mental health services for the following contact types:

- A: Registered consumer contact
- B: Un-registered consumer contact
- C: Community contact
- E: Case contact.

Service contacts are defined as contacts adjusted for group session contacts.

Source: CMI/ODS.

Date extracted: 21 January 2022.



Latest 4-week avg.: 6,189 (26 December 2021) **SP2019:** 5,675 **Change:** 514
SP2020: 6,541 **Change:** -352

Number of ambulatory service hours – CAMHS/CYMHS*

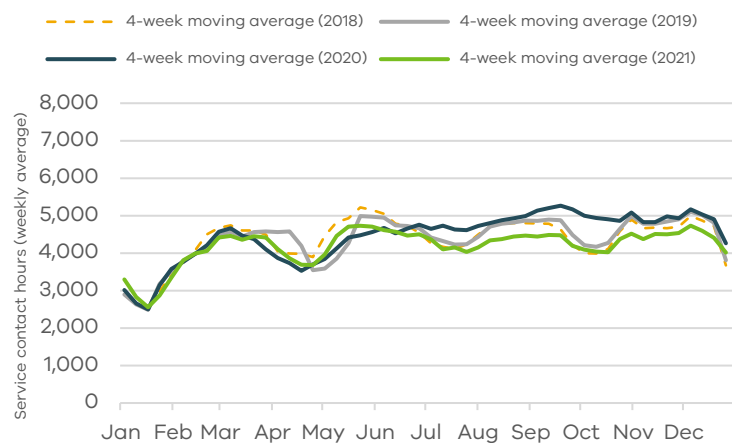
Measure presents the moving average number of ambulatory service hours per week by CAMHS/CYMHS ambulatory mental health services for the following contact types:

- A: Registered consumer contact
- B: Un-registered consumer contact
- C: Community contact
- E: Case contact.

Service hours are adjusted for group session contacts.

Source: CMI/ODS.

Date extracted: 21 January 2022.



Latest 4-week avg.: 4,017 (26 December 2021) **SP2019:** 3,806 **Change:** 211
SP2020: 4,264 **Change:** -247

Number of ambulatory service hours, by modality – CAMHS/CYMHS*

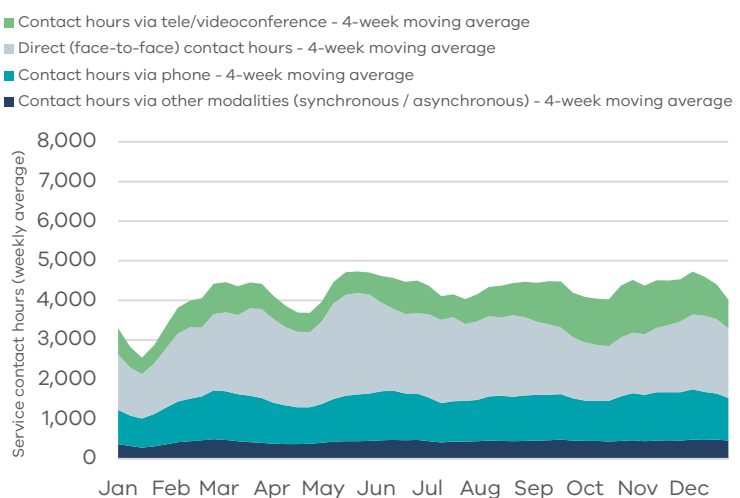
Measure presents the moving average number of ambulatory service contact hours per week by CAMHS/CYMHS ambulatory mental health services for the following contact types (by modality):

- A: Registered consumer contact
- B: Un-registered consumer contact
- C: Community contact
- E: Case contact.

Service contacts are defined as contacts adjusted for group session contacts.

Source: CMI/ODS.

Date extracted: 21 January 2022.



Latest 4-week avg.: 4,017 (26 December 2021)

Community-based clinical mental health care

Ambulatory service contacts

Number of ambulatory service contacts – aged*

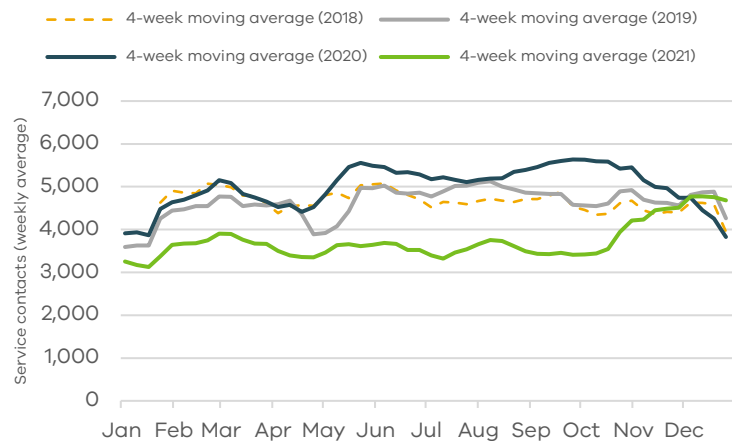
Measure presents the moving average number of ambulatory service contacts per week by aged ambulatory mental health services for the following contact types:

- A: Registered consumer contact
- B: Un-registered consumer contact
- C: Community contact
- E: Case contact.

Service contacts are defined as contacts adjusted for group session contacts.

Source: CMI/ODS.

Date extracted: 21 January 2022.



Latest 4-week avg.: 4,683 (26 December 2021) **SP2019:** 4,264 **Change:** 419
SP2020: 3,826 **Change:** 857

4,264 Number of ambulatory service hours – aged*

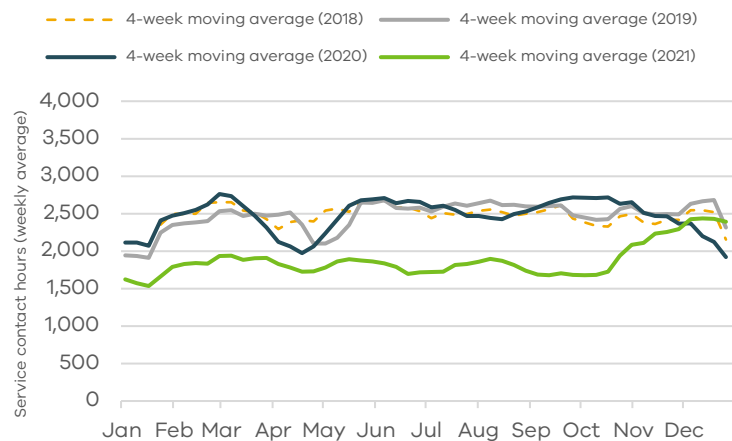
Measure presents the moving average number of ambulatory service hours per week by aged ambulatory mental health services for the following contact types:

- A: Registered consumer contact
- B: Un-registered consumer contact
- C: Community contact
- E: Case contact.

Service hours are adjusted for group session contacts.

Source: CMI/ODS.

Date extracted: 21 January 2022.



Latest 4-week avg.: 2,393 (26 December 2021) **SP2019:** 2,316 **Change:** 77
SP2020: 1,920 **Change:** 473

Number of ambulatory service hours, by modality – aged*

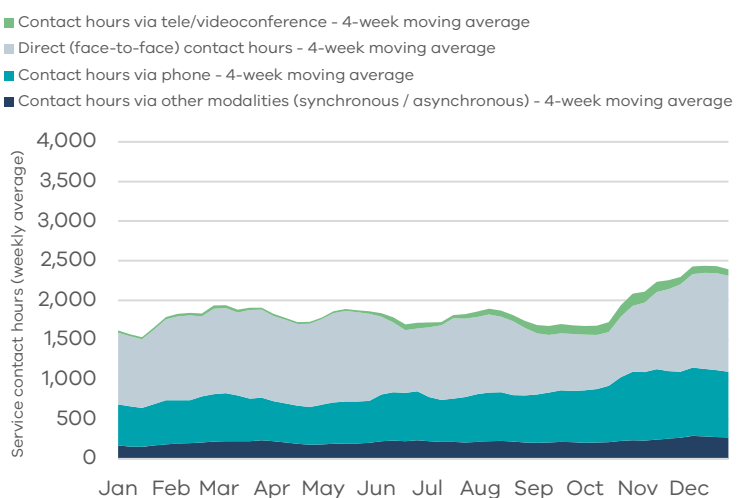
Measure presents the moving average number of ambulatory service contact hours per week by aged ambulatory mental health services for the following contact types (by modality):

- A: Registered consumer contact
- B: Un-registered consumer contact
- C: Community contact
- E: Case contact.

Service contacts are defined as contacts adjusted for group session contacts.

Source: CMI/ODS.

Date extracted: 21 January 2022.



Latest 4-week avg.: 2,393 (26 December 2021)

Community-based clinical mental health care

Ambulatory service contacts

Number of direct (face-to-face) ambulatory service contacts*

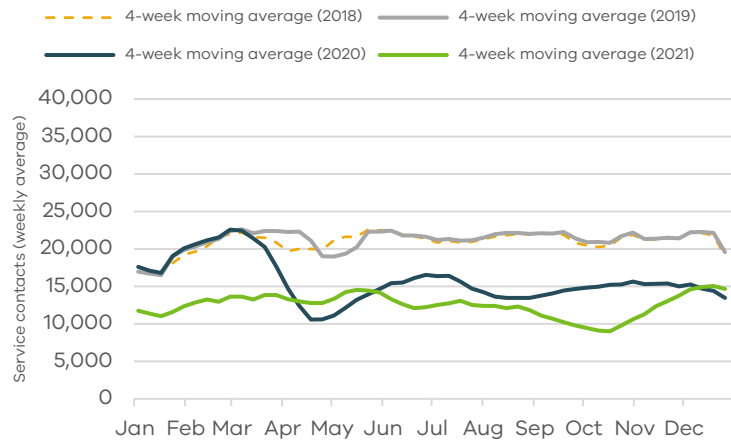
Measure presents the moving average number of ambulatory service contacts per week for the following contact types (with a direct face-to-face contact):

- A: Registered consumer contact
- B: Un-registered consumer contact
- C: Community contact
- E: Case contact.

Service contacts are defined as contacts adjusted for group session contacts.

Source: CMI/ODS.

Date extracted: 21 January 2022.



Latest 4-week avg.:	14,669	SP2019:	19,564	Change:	-4,895
	(26 December 2021)				
		SP2020:	13,453	Change:	1,216

Number of ambulatory service contacts by telephone*

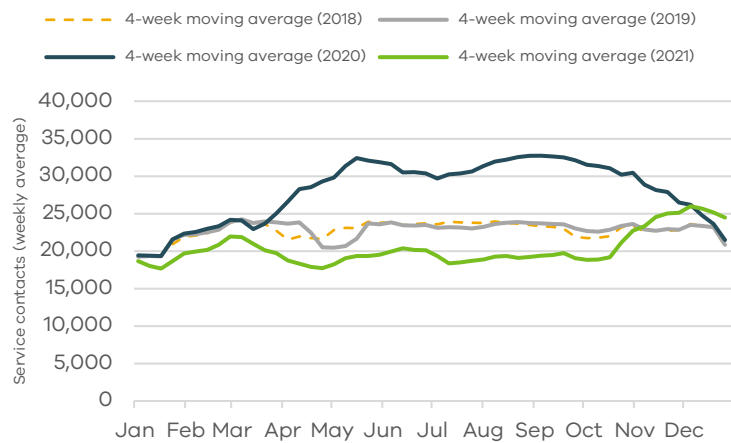
Measure presents the moving average number of ambulatory service contacts per week for the following contact types (with a telephone contact):

- A: Registered consumer contact
- B: Un-registered consumer contact
- C: Community contact
- E: Case contact.

Service contacts are defined as contacts adjusted for group session contacts.

Source: CMI/ODS.

Date extracted: 21 January 2022.



Latest 4-week avg.:	24,481	SP2019:	20,862	Change:	3,619
	(26 December 2021)				
		SP2020:	21,471	Change:	3,010

Number of ambulatory service contacts by videoconference / teleconference*

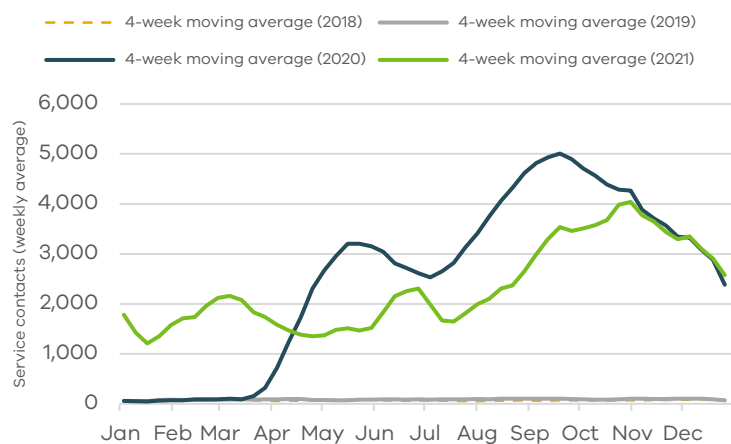
Measure presents the moving average number of ambulatory service contacts per week for the following contact types (with a videoconference / teleconference contact):

- A: Registered consumer contact
- B: Un-registered consumer contact
- C: Community contact
- E: Case contact.

Service contacts are defined as contacts adjusted for group session contacts.

Source: CMI/ODS.

Date extracted: 21 January 2022.



Latest 4-week avg.:	2,574	SP2019:	67	Change:	2,507
	(26 December 2021)				
		SP2020:	2,381	Change:	193

Community-based clinical mental health care Clinician-reported outcomes (HoNOS)

Average clinician-reported outcomes (HoNOS) at community case start – adult*

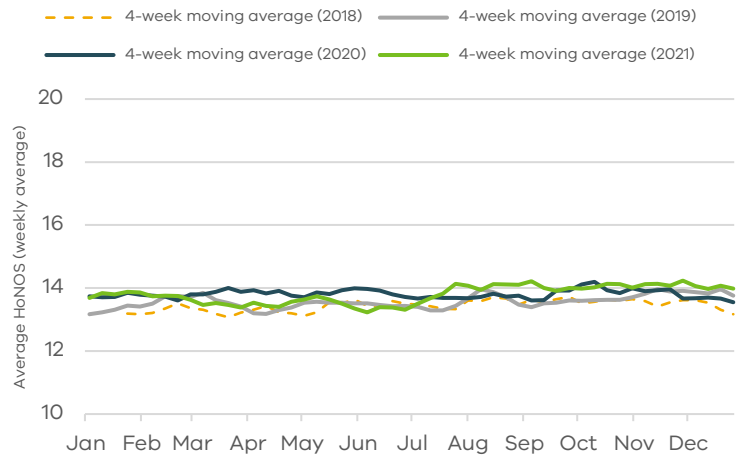
Measure presents the moving average total HoNOS score per week collected at an adult community case commencement, excluding invalid scores (more than two times rated as '9'). Includes Orygen.

HoNOS reports symptom severity using 12 scales scored from '0' (no problem or issue identified) to '4' (severe problem). Dates used in measure calculation are based on HoNOS completion date.

HoNOS is required to be collected at community case start, however not all result in a recorded valid HoNOS score. Interpret with caution.

Source: CMI/ODS.

Date extracted: 21 January 2022.



Latest 4-week avg.: 14.0 (26 December 2021) **SP2019:** 13.8 **Change:** 0.2
SP2020: 13.5 **Change:** 0.5

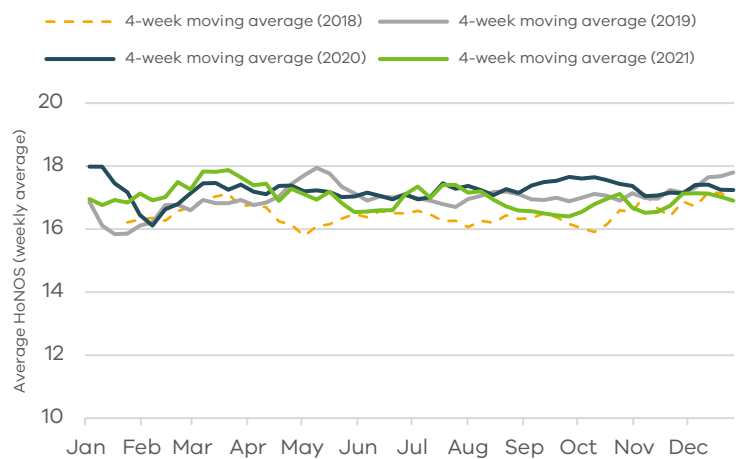
Average clinician-reported outcomes (HoNOS) at community case start – CAMHS/CYMHS*

Measure presents the moving average total HoNOS score per week collected at a CAMHS/CYMHS community case commencement, excluding invalid scores (more than two times rated as '9').

HoNOS is required to be collected at community case start, however not all result in a recorded valid HoNOS score. Interpret with caution.

Source: CMI/ODS.

Date extracted: 21 January 2022.



Latest 4-week avg.: 16.9 (26 December 2021) **SP2019:** 17.8 **Change:** -0.9
SP2020: 17.2 **Change:** -0.3

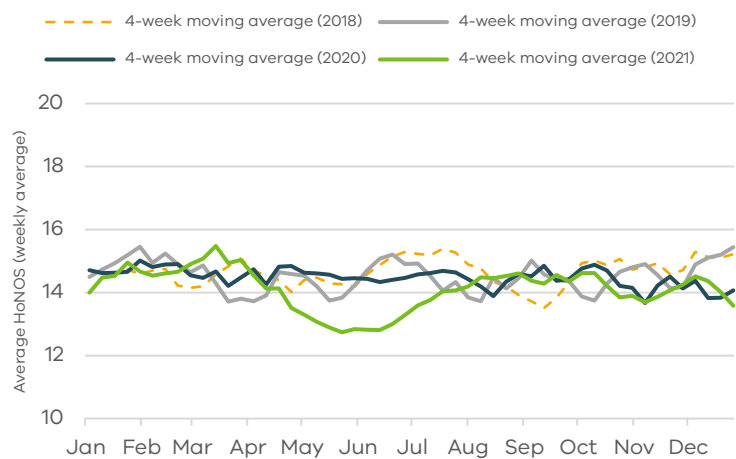
Average clinician-reported outcomes (HoNOS) at community case start – aged*

Measure presents the moving average total HoNOS score per week collected at an aged community case commencement, excluding invalid scores (more than two times rated as '9').

HoNOS is required to be collected at community case start, however not all result in a recorded valid HoNOS score. Interpret with caution.

Source: CMI/ODS.

Date extracted: 21 January 2022.



Latest 4-week avg.: 13.6 (26 December 2021) **SP2019:** 15.4 **Change:** -1.8
SP2020: 14.1 **Change:** -0.5

Community-based clinical mental health care

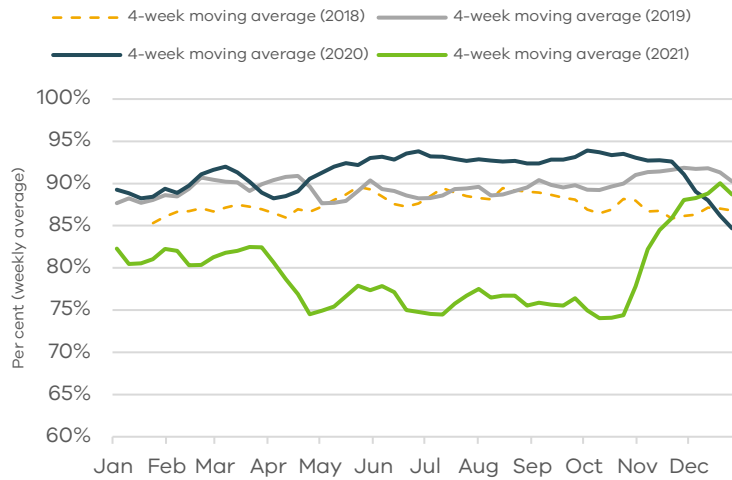
Community care post-separation from an acute inpatient unit

Percentage of separations from an inpatient unit where the consumer received an ambulatory service contact within 7 days – adult acute*

Measure presents the moving average percentage of separations per week from an adult acute inpatient unit where the consumer received an ambulatory service contact within seven days. Separation date lagged by seven days. Includes separations from the Orygen inpatient unit at Footscray.

Source: CMI/ODS.

Date extracted: 21 January 2022.



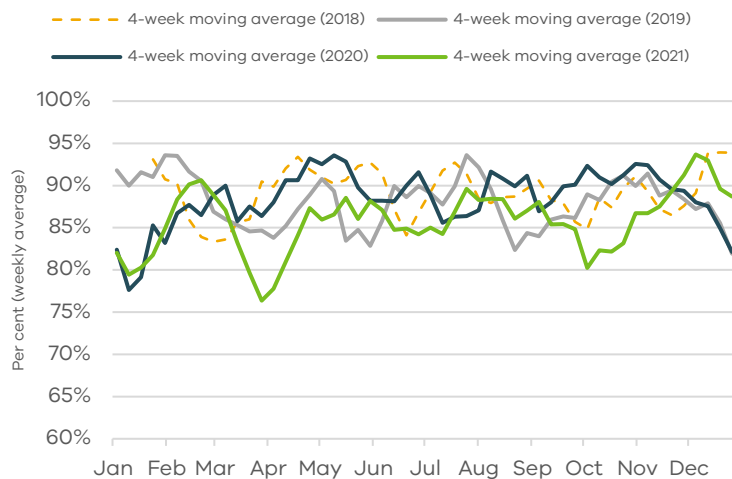
Latest 4-week avg.: (26 December 2021)	88.7%	SP2019:	90.2%	Change:	-1.5%
		SP2020:	84.7%	Change:	4.0%

Percentage of separations from an inpatient unit where the consumer received an ambulatory service contact within 7 days – CAMHS acute*

Measure presents the moving average percentage of separations per week from a CAMHS acute inpatient unit where the consumer received an ambulatory service contact within seven days. Separation date lagged by seven days. Includes separations from adolescent acute, statewide child acute and specialist adolescent acute beds in regional Victoria.

Source: CMI/ODS.

Date extracted: 21 January 2022.



Latest 4-week avg.: (26 December 2021)	88.7%	SP2019:	81.9%	Change:	6.8%
		SP2020:	82.1%	Change:	6.6%

Community-based clinical mental health care

Eating disorder programs (CAMHS/CYMHS)

Number of consumers receiving a contact from a CAMHS/CYMHS ambulatory service – eating disorders*†

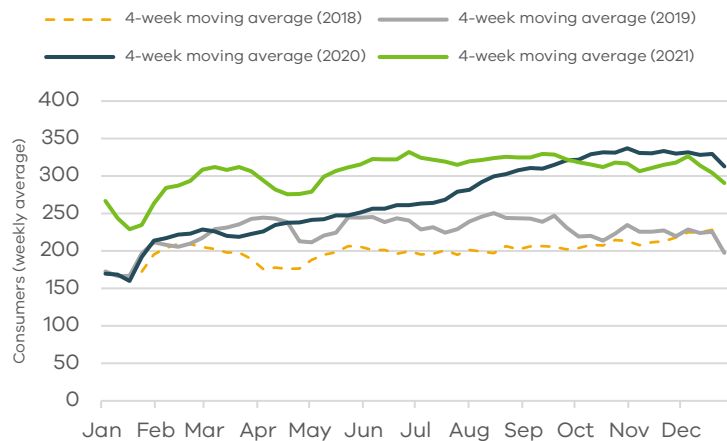
Measure reports the moving average number of consumers per week receiving an ambulatory service contact from a CAMHS/CYMHS eating disorder program, or where a consumer had a reported eating disorder diagnosis. Includes the following contact types:

- A: Registered consumer contact
- E: Case contact.

Service contacts are defined as contacts adjusted for group session contacts.

Source: CMI/ODS.

Date extracted: 21 January 2022.



Latest 4-week avg.:	291	SP2019:	197	Change:	94
	(26 December 2021)				
		SP2020:	313	Change:	-22

Number of CAMHS/CYMHS ambulatory service contacts – eating disorders*†

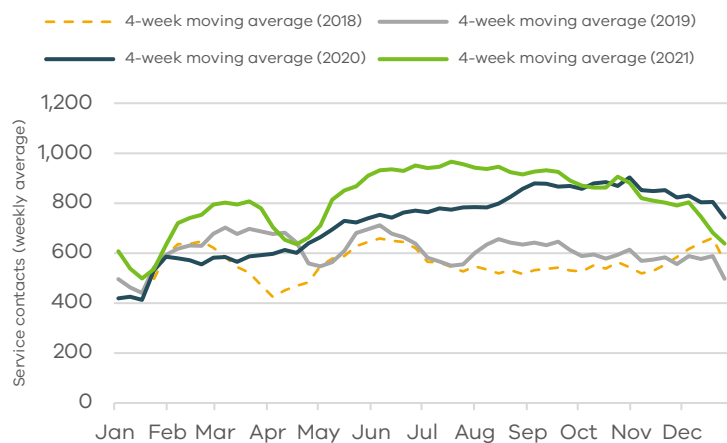
Measure reports the moving average number of ambulatory service contacts per week from a CAMHS/CYMHS eating disorder program, or where a consumer had a reported eating disorder diagnosis. Includes the following contact types:

- A: Registered consumer contact
- E: Case contact.

Service contacts are defined as contacts adjusted for group session contacts.

Source: CMI/ODS.

Date extracted: 21 January 2022.



Latest 4-week avg.:	638	SP2019:	498	Change:	140
	(26 December 2021)				
		SP2020:	742	Change:	-104

Number of CAMHS/CYMHS ambulatory service contact hours – eating disorders*†

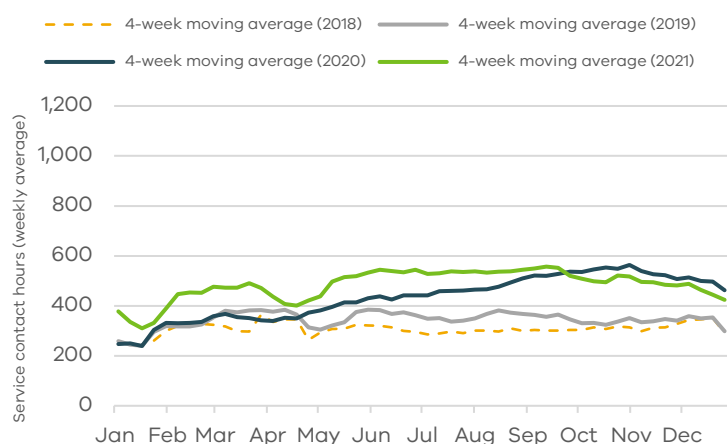
Measure reports the moving average number of ambulatory service contact hours per week from a CAMHS/CYMHS eating disorder program, or where a consumer had a reported eating disorder diagnosis. Includes the following contact types:

- A: Registered consumer contact
- E: Case contact.

Service hours are adjusted for group session contacts.

Source: CMI/ODS.

Date extracted: 21 January 2022.



Latest 4-week avg.:	424	SP2019:	298	Change:	126
	(26 December 2021)				
		SP2020:	462	Change:	-38

Community-based clinical mental health care

Perinatal emotional health program (PEHP)

Number of consumers receiving a contact from a funded perinatal emotional health program (PEHP)*

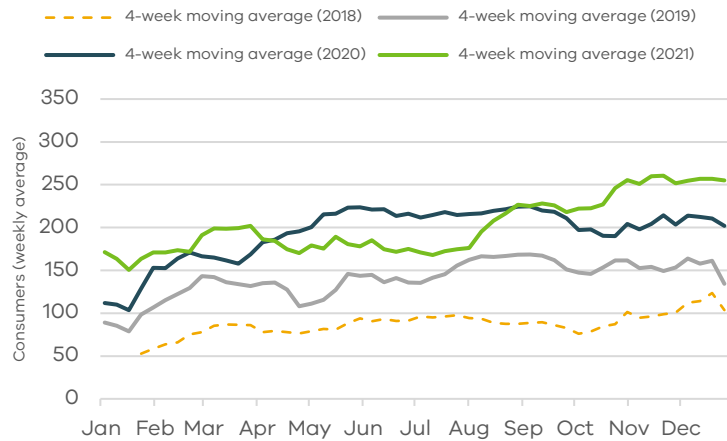
Measure reports the moving average number of consumers per week receiving an ambulatory service contact from a funded perinatal emotional health program. Includes the following contact types:

- A: Registered consumer contact
- E: Case contact.

Service contacts are defined as contacts adjusted for group session contacts.

Source: CMI/ODS.

Date extracted: 21 January 2022.



Latest 4-week avg.: 255 (26 December 2021) **SP2019:** 134 **Change:** 121
SP2020: 202 **Change:** 53

Number of ambulatory service contacts – PEHP*

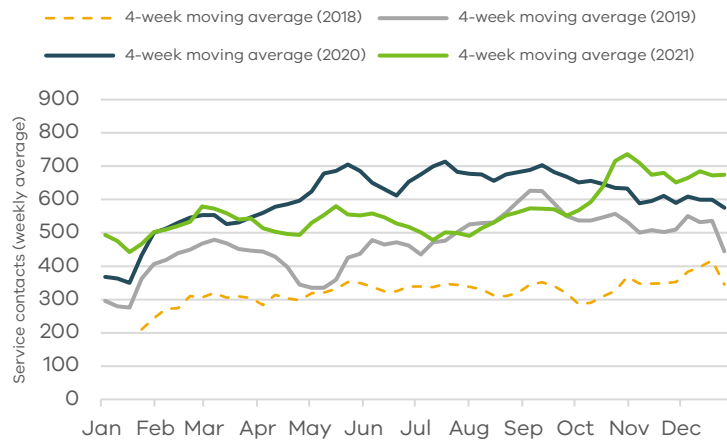
Measure reports the moving average number of ambulatory service contacts per week from a funded perinatal emotional health program. Includes the following contact types:

- A: Registered consumer contact
- B: Un-registered consumer contact
- C: Community contact
- E: Case contact.

Service contacts are defined as contacts adjusted for group session contacts.

Source: CMI/ODS.

Date extracted: 21 January 2022.



Latest 4-week avg.: 675 (26 December 2021) **SP2019:** 445 **Change:** 230
SP2020: 576 **Change:** 99

Number of ambulatory service contact hours – PEHP*

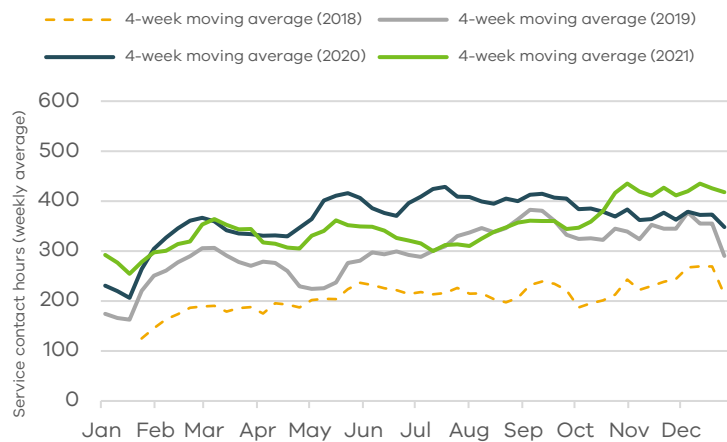
Measure reports the moving average number of ambulatory service contact hours per week from a funded perinatal emotional health program. Includes the following contact types:

- A: Registered consumer contact
- B: Un-registered consumer contact
- C: Community contact
- E: Case contact.

Service hours are adjusted for group session contacts.

Source: CMI/ODS.

Date extracted: 21 January 2022.



Latest 4-week avg.: 418 (26 December 2021) **SP2019:** 290 **Change:** 128
SP2020: 348 **Change:** 70

Alcohol and other drug treatment services

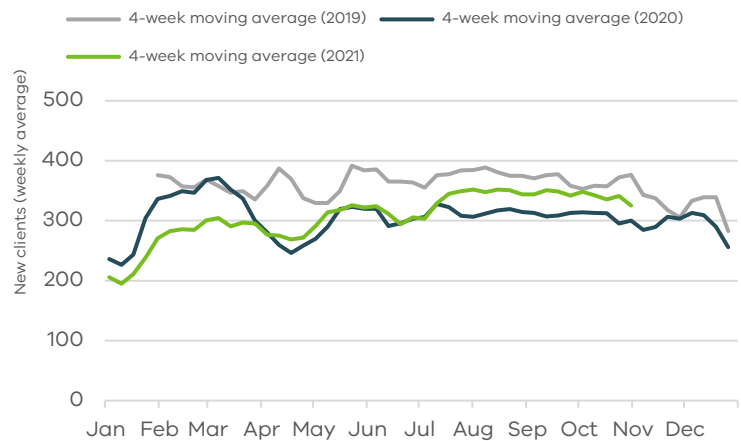
Number of new clients accessing alcohol and other drug treatment services*

Measure presents the moving average number of active clients per week accessing AoD treatment services who had not accessed AoD treatment services within the last five years.

This measure is sourced from the Victorian Alcohol and Drug Collection (VADC) which was established during 2018-19. Data quality and completeness issues have been observed during its establishment. Interpret with caution.

Source: VADC.

Date extracted: 25 January 2022.



Latest 4-week avg.:	325	SP2019:	377	Change:	-52
	(31 October 2021)				
		SP2020:	300	Change:	25

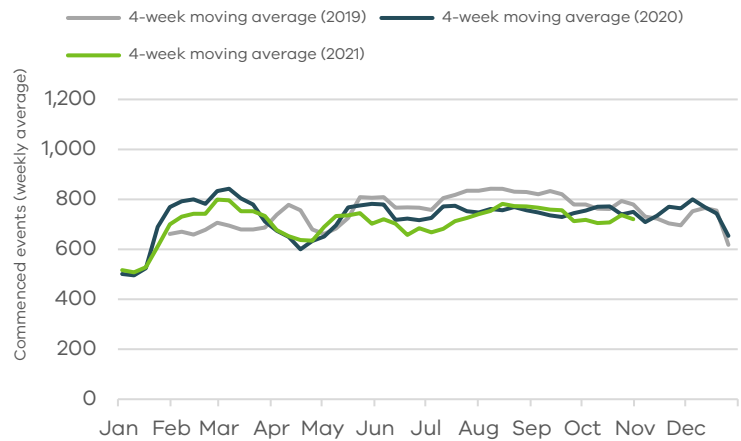
Number of commenced intake and comprehensive assessment events*

Measure presents the moving average number of commenced intake and comprehensive assessment events per week. Intake and assessment events are used to determine whether a client seeking help for drug use requires treatment and which treatment type they should receive.

This measure is sourced from the Victorian Alcohol and Drug Collection (VADC) which was established during 2018-19. Data quality and completeness issues have been observed during its establishment. Interpret with caution.

Source: VADC.

Date extracted: 25 January 2022.



Latest 4-week avg.:	720	SP2019:	780	Change:	-60
	(31 October 2021)				
		SP2020:	750	Change:	-30

Alcohol and other drug treatment services

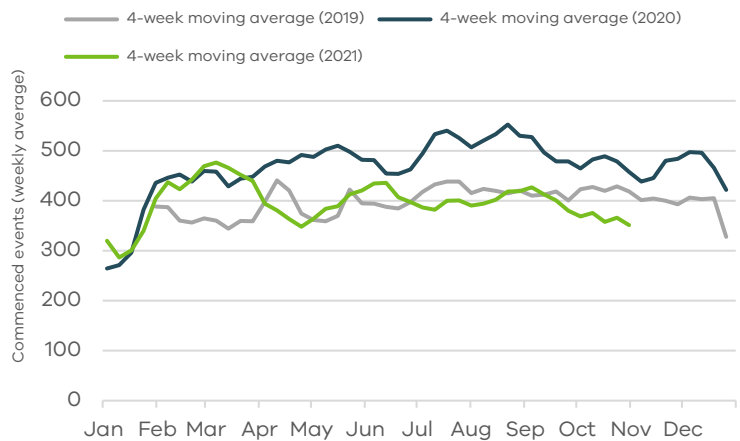
Number of commenced AoD community counselling events*

Measure presents the moving average number of commenced counselling events per week. Counselling is the primary community-based AoD treatment option.

This measure is sourced from the Victorian Alcohol and Drug Collection (VADC) which was established during 2018-19. Data quality and completeness issues have been observed during its establishment. Interpret with caution.

Source: VADC.

Date extracted: 25 January 2022.



Latest 4-week avg.: 351 (31 October 2021)	SP2019: 418	Change: -67
	SP2020: 458	Change: -107

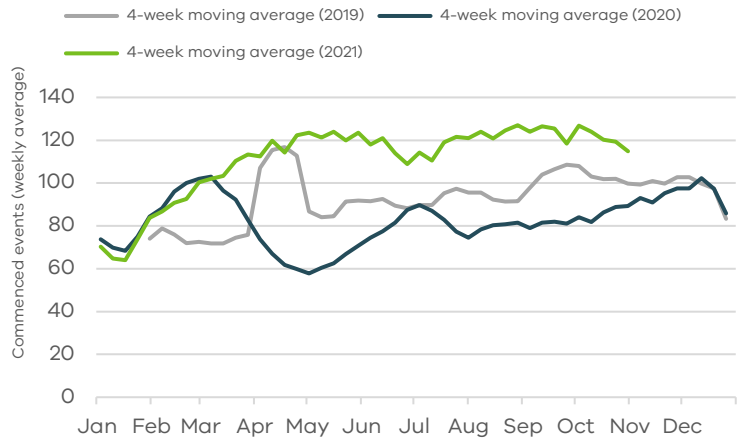
Number of commenced residential withdrawal treatment events*

Measure presents the moving average number of commenced residential withdrawal treatment events per week. Residential withdrawal treatment supports complex clients to safely withdraw from substance dependence in a medically supervised setting.

This measure is sourced from the Victorian Alcohol and Drug Collection (VADC) which was established during 2018-19. Data quality and completeness issues have been observed during its establishment. Interpret with caution.

Source: VADC.

Date extracted: 25 January 2022.



Latest 4-week avg.: 114.8 (31 October 2021)	SP2019: 99.8	Change: 15.0
	SP2020: 89.3	Change: 25.5

Alcohol and other drug treatment services

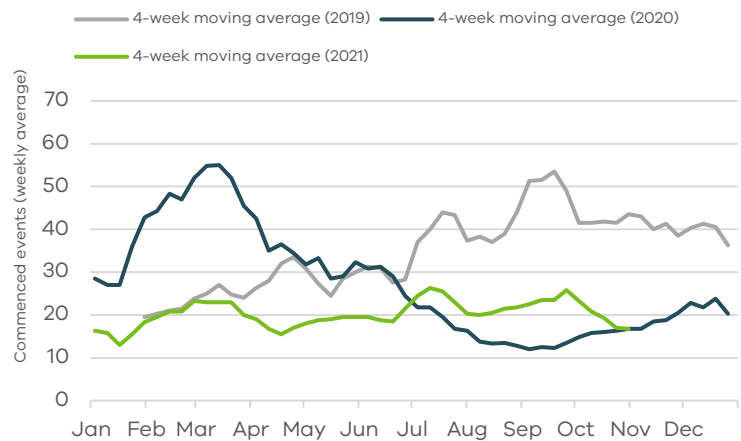
Number of commenced residential rehabilitation treatment events*

Measure presents the moving average number of commenced residential rehabilitation treatment events per week.

This measure is sourced from the Victorian Alcohol and Drug Collection (VADC) which was established during 2018-19. Data quality and completeness issues have been observed during its establishment. Interpret with caution.

Source: VADC.

Date extracted: 25 January 2022.



Latest 4-week avg.:	16.8	SP2019:	43.5	Change:	-26.7
	(31 October 2021)				
		SP2020:	16.8	Change:	0.0

Average Kessler Psychological Distress Scale (K10) scores at assessment*

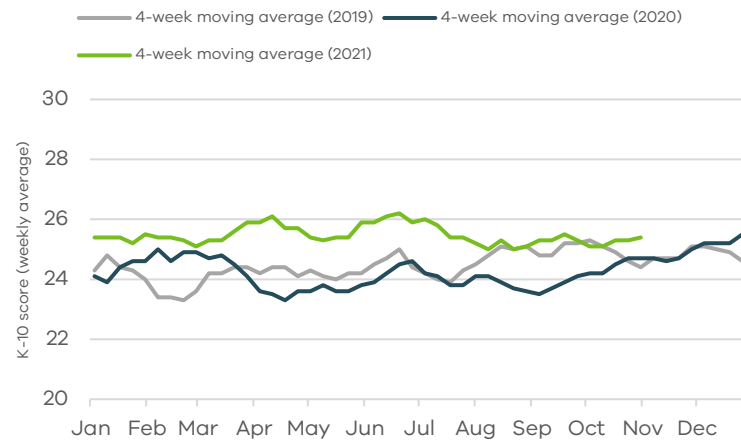
Measure presents the moving average K10 scores per week at assessment.

The K10 scale is a client-reported outcome measurement scale which measures psychological distress based on 10 questions about anxiety and depressive symptoms experienced in the last four weeks. Higher scores are indicative of greater psychological distress at the time of seeking treatment for AoD use.

This measure is sourced from the Victorian Alcohol and Drug Collection (VADC) which was established during 2018-19. Data quality and completeness issues have been observed during its establishment. Interpret with caution.

Source: VADC.

Date extracted: 25 January 2022.



Latest 4-week avg.:	25.4	SP2019:	24.4	Change:	1.0
	(31 October 2021)				
		SP2020:	24.7	Change:	0.7

Notes and caveats

* Data from November 2020 were affected by protected industrial activity, impacting the collection of non-clinical and administrative data and recording of ambulatory mental health service activity and consumer outcome measures. This industrial activity began in November 2020 and was resolved by November 2021. Affected data reported during this period should be interpreted with caution.

† An ambulatory contact is flagged as being eating disorder-related where either:

1. an eating disorder diagnosis is entered in the community at the treating campus and a contact is reported by that same campus in the period from the date of diagnosis to:
 - a. one year post diagnosis date, or
 - b. the date at which a new diagnosis is entered in the community by the campus that is not eating disorder-related (whichever occurs first); or
2. the contact is reported against an eating disorder-specific program type.