

Data & Reporting Guidelines for Commissioned Service Providers

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HNECC PHN ACKNOWLEDGES THE TRADITIONAL OWNERS & CUSTODIANS OF TH LAND THAT WE LIVE & WORK ON AS THE FIRST PEOPLE OF THIS COUNTRY.



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INTRODUCTION

Introducing the **Data and Reporting Guidelines**

- New document to provide guidance to commissioned service providers on their data and reporting responsibilities
- HNECC PHN has responded to feedback to reduce the reporting burden for providers
- The document aims to outline the main responsibilities of providers in line with this
- It is a 'live' document, held in review
- Main section is very general, covering common data and reporting aspects for all providers – not just mental health
- Appendices detail more specific areas
 - At this stage just one Appendix: PMHC MDS



PRIMARY HEALTH NETWORK

HNECC PHN Commissioned Services

DATA AND REPORTING GUIDELINES
1 JULY 2023



WHY DATA?

The PHN uses data for a variety of purposes:

- Monitor service activity
- Monitor service performance, including against identified indicators
- Generate reports that support discussion between the PHN and providers
- Support service design and planning
 - Demographics who is accessing services
 - To identify future services needed, populations not being serviced
- Meeting PHN obligations to provide data and reports to the Department – including on the performance of commissioned services



MAIN CHANGES

Reduced use of Folio to monitor activity and performance:

- If a program enters data into a standardised dataset, such as the PMHC MDS, where possible this will be used to determine activity level and any other deliverables that are relevant.
- Folio will only be used where the dataset cannot provide information. In these cases, a reduced checklist will still be asked for

Increased use of PMHC MDS to monitor activity and performance:

- Data entered into the PMHC MDS will be used to determine service level and performance against some indicators
- This will include:
 - service level deliverables client and/or session numbers
 - other KPIs





Primary Mental Health Care
Minimum Data Set

MAIN CHANGES

Introduction of YES PHN survey:

 The YES PHN survey will be used to collect patient experience measures. These will be issued to clients through a 3rd party organisation, Cemplicity, who providers will send a list of clients to have completed service Your Experience of Service Primary Health Network (YES PHN) Survey

This will be used for the PREM QKPIs

Refined QKPIs

- As above, the YES PHN survey will be used for the PREM QKPIs
- Three of the QKPIs will reflect the DoHAC Program Performance and Quality Framework measures
 - Culturally appropriate services same as previous QKPI
 - Matching outcome measures modification of existing QKPI
 - Suicide risk new replaces all wait time QKPIs

Key Performance Indicators (KPIs)	Quarterly Threshold
Percentage of clients offered an opportunity to complete the Your Experience of Service Primary Health Network Survey (YES PHN Survey) (PREM)	50%
Percentage of Practitioners (including sub-contractors) delivering culturally safe services as per PMHC-MDS definition (refer to Definitions – Schedule B)	100%**
Percentage of client referrals that identify a suicide risk and are followed up within 7 days of receiving the referral	100%**
Percentage of completed PROMs (K10/5) on entry to the program (baseline) matched with a repeated PROM (K5/10) on exit from the program	70%**

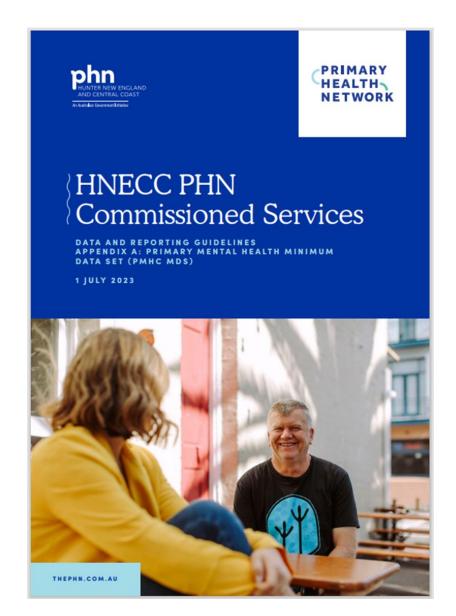
^{**} as per Commonwealth KPI outlined in the PHN Quality & Performance Framework

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APPENDIX A: PRIMARY MENTAL HEALTH CARE MINIMUM DATA SET (PMHC MDS)

The first Appendix (Appendix A) presents details on the Primary Mental Health Care Minimum Data Set (PMHC MDS)

- Specifically designed for HNECC PHN mental health commissioned service providers who enter data into the PMHC MDS
- It complements, rather than replaces, the existing documentation on the PMHC MDS
- It highlights critical elements and some things that are specific to HNECC PHN
- First point of call for all technical enquiries is still the PMHC Helpdesk (managed by Logicly – formerly Strategic Data): support@pmhc-mds.com



PMHC MDS AS A DATA PLATFORM

What is entered into the PMHC MDS?

All data related to PHN-funded mental health services.

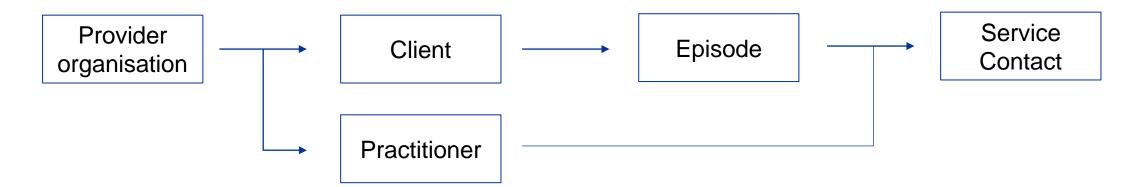
Who must enter the data?

All commissioned service providers must enter data for all services provided that are funded by the PHN.

Which activity should be recorded?

All activity recorded by providers that would normally warrant a dated entry in the clinical record of the client.

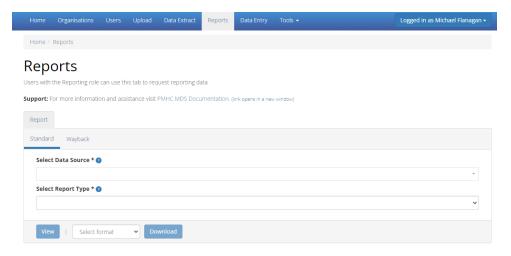
Basic Data Model



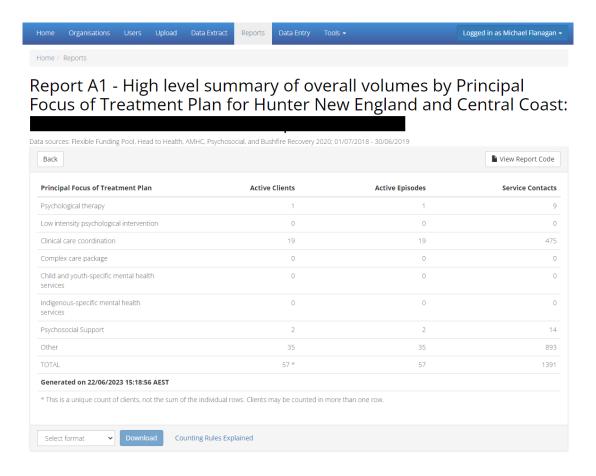
PMHC MDS REPORTS

Reports

There are a range of Reports on the PMHC MDS portal. Only provided at Organisation level (Path). But can categorise by Principal Focus



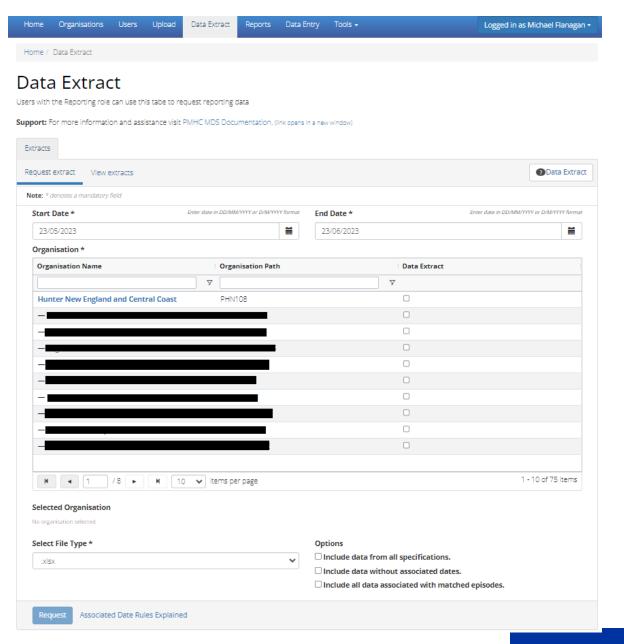
- Useful report
 - A1: High level summary of overall volumes this will indicate your service level: Clients, Episodes, Service Contacts



PMHC MDS EXTRACTS

Extracts

- You can also take a Data Extract that will show you all the data you have entered for a period
- Download an Excel file (or zipped .csv) in worksheets that mirror the various record files.
- Only data for the period selected, so will show all your service contacts for a period
 - unless you select one of the Options at the bottom, explained here



MANAGING THE PMHC MDS

Organisations managing their users:

- Provider organisations are best placed to manage their access to the PMHC MDS. And specifically who in the organisation can have what access
- To this end HNECC PHN will set up a User Manager role for a person or persons at an organisation. This person/s can then add and remove users within the organisation

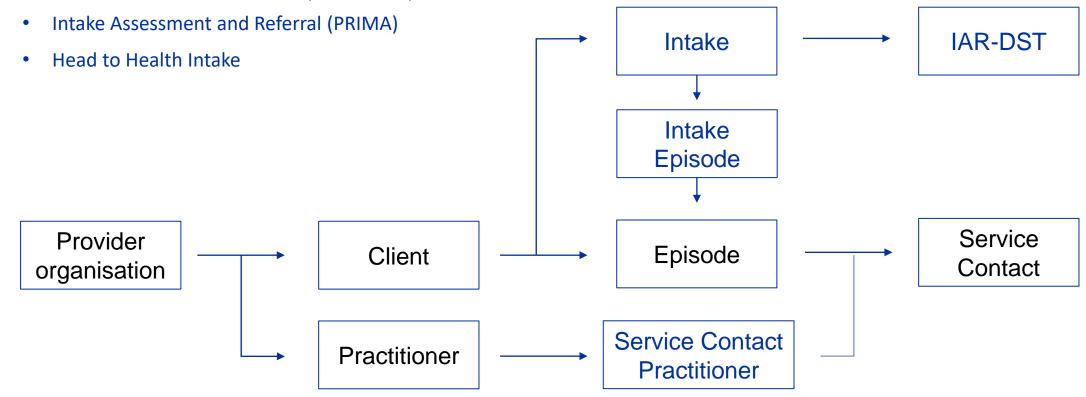
Alignment of PMHC MDS Episodes to HNECC PHN Contracts

- Many organisations have multiple contracts with HNECC PHN. We need a way of allocating episodes from the PMHC MDS to our contracts
- Some ways of doing this
 - Episode Keys and/or Client Keys start with a particular prefix or containing a particular string
 - Use the Episode Tags field to indicate a program or HNECC PHN Contract SERV number
 - Have a separate Organisation Path set up for different contracts
- I already have this for most providers, but if not your Commissioning Coordinator may contact you about this.

PMHC MDS FULL DATA MODEL

Full Data Model

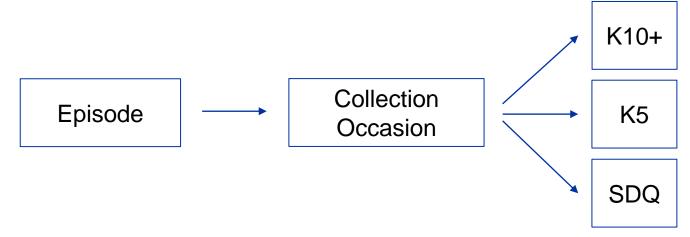
- New Version 4.0 data specification was introduced in last year, compulsory from February 2023
- Includes new Intake records. Only mandatory for:



PMHC MDS OUTCOME MEASURES

Outcome measures

- As well as service contacts, the other requirement of data entered into the PMHC MDS are outcome measures
- Three types of outcome measures:
 - Kessler 10 (K10) for adults
 - K5 for Aboriginal and/or Torres Strait Islander clients
 - SDQ for children and youth clients (these clients may do K10 instead)
- At a minimum, outcome measures should be collected at the start and end of an episode. More on this later
- Outcome measures are connected to an Episode, via a Collection Occasion



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NEW DELIVERABLES

New Key Performance Indicators:

- Some new or renewing contracts may have these new KPIs in the contracts
- The bottom three relate directly to Program Performance and Quality Framework indicators, that are automatically reported to DoHAC through the PMHC MDS
- You can track your progress in Reports, as indicated below. Only at Organisation (Path) level
- The PHN will also track and report in quarterly dashboards

Key Performance Indicators (KPIs)	Quarterly Threshold
Percentage of clients offered an opportunity to complete	
the Your Experience of Service Primary Health Network	50%
Survey (YES PHN Survey) (PREM)	
Percentage of Practitioners (including sub-contractors)	100%**
delivering culturally safe services as per PMHC-MDS	100 %
definition (refer to Definitions – Schedule B)	
Percentage of client referrals that identify a suicide risk	100%**
and are followed up within 7 days of receiving the referral	
Percentage of completed PROMs (K10/5) on entry to the	700/++
program (baseline) matched with a repeated PROM	70%**
(K5/10) on exit from the program	

^{**} as per Commonwealth KPI outlined in the PHN Quality & Performance Framework

PMHC MDS Report

App-2

App-3

Out-3

PP&QF INDICATORS

Culturally safe services to Indigenous population (App-2):

- This measures the number of service contacts provided to Aboriginal and/or Torres Strait Islander clients that are culturally safe as defined by the PMHC MDS.
- The definition a service is considered culturally safe if it is provided by a practitioner who:
 - Is of Aboriginal and/or Torres Strait Islander origin; or
 - Has completed a recognised training program in the delivery of culturally safe services to Aboriginal and Torres
 Strait Islander peoples
- There is a field in the Practitioner record that indicates whether the practitioner has completed a training course

Follow-up of clients where suicide risk was a factor noted in the referral (App-3):

- Where suicide risk is noted as a factor in the referral of a client, this should be noted in the Suicide Referral Flag field in the Episode record
- These clients need to have a service contact recorded in the PMHC MDS within 7 days of the referral.
 - The contact needs to involve the client

PP&QF INDICATORS

Completion of Outcome Measures (Out-3):

- This measures the proportion of episodes that have an outcome measure at the Start and the End of an episode
- Importantly, the two Collection Occasions must have their **Reason for Collection** as Episode Start and Episode End

HOWEVER

- This only applies to episodes which have **Completion Status** 1: Episode closed treatment concluded
- If you are unable to get an Episode End outcome measure (or any) then you have the option of using one of the other options for Completion Status administrative closures of which there are 5 options (2-6)
 - These episodes will be excluded from the calculation of the KPI

HNECC PHN SPECIFIC INFORMATION

Guidance on fields:

- Sub-Appendices
 - Quick Reference Guide concentrating on
 - Program Type
 - Principal Focus of Treatment
 - Funding source
 - HNECC PHN specific information a more detailed look at some fields and their options
 - Complete listing of the fields and options and whether or not they are mandatory

USEFUL LINKS

The PMHC MDS **User Documentation** is found here:

https://docs.pmhc-mds.com/projects/user-documentation/en/latest/

• This provides relevant information for users of the system, eg how to Upload data (section 4), how to use the portal for direct Data Entry (section 5) use Reports (section 6) how to get a Data Extract (section 7)

The PMHC MDS **Data Specification** is found here:

https://docs.pmhc-mds.com/projects/data-specification/en/latest/index.html

This provides a full listing of all the data items, their options and how they interact

The PMHC Helpdesk for all technical questions:

support @pmhc-mds.com

Questions?



