Reporting Mental Health Performance across Canadian Provinces

The value of reporting valid and reliable performance indicators for Canadian mental health services has been widely acknowledged. Health indicators support health authorities and facilities as they monitor the health of their populations and track how well their health systems function. Relevant, accurate and timely performance information is critical for improving performance of health systems. In Canada, the data capacity of national organizations has improved and data reporting activity has increased due to calls for better accountability in cost and quality of care. However, according to the Health Council of Canada (2011-2012)

“despite this enhanced activity in health data reporting, we have made only limited steps towards achieving better accountability for health care spending and performance.”

National organizations such as the Canadian Institute for Health Information (CIHI), the Public Health Agency of Canada (PHAC) and the Mental Health Commission of Canada (MHCC) have undertaken individual projects addressing specific facets of mental health indicator development or reporting. Furthermore, the Mental Health Commission has identified data collection and reporting as a key priority in their national strategy.

In general, efforts have been directed towards national-level health indicators, whereas mental health policy and practice are governed primarily at the provincial/territorial level. There has also been a lack of pan-Canadian collaboration, which has caused duplication, frustration and “indicator chaos.”

People all over Canada are doing good work in improving clinical and community mental health care. However, there remains a pressing need to create and report on a relevant set of mental health performance measures that could be used within and across Canadian provinces and territories. In an effort to address this gap, the Graham Boeckh Foundation and its partners have sponsored the Centre for Applied Research in Mental Health and Addiction (CARMHA) to lead a pan-Canadian initiative in mental health performance measurement.

WHAT ARE HEALTH INDICATORS?

The following information comes from the Health Council of Canada’s, A Citizen’s Guide to Health Indicators, 2011.

Health indicators are summary measures of health and the factors that affect health. They are numbers and statistics that can provide a basis for comparison. They let you measure, monitor, and compare important factors that influence the health of Canadians and the health care system.

Health indicators can help decision-makers to:

- Understand and respond to health issues and trends
- Monitor and improve the health care system
- Make decisions about health policies based on good evidence
- Become informed about the quality of health care and health policies
The Team

The project will be led by Dr. Elliot Goldner, Professor and Associate Dean, Research, at the Faculty of Health Sciences, Simon Fraser University. Dr. Goldner is the Director of CARMHA, an internationally recognized research centre conducting health policy and services research related to mental health and substance use. Alongside CARMHA, Dr. Goldner has assembled an alliance of key research agencies to host the project: the Institute for Clinical Evaluative Sciences and Centre for Addiction and Mental Health in Ontario; l’Institut Universitaire en Santé Mentale de Montréal and the Douglas Mental Health Research Centre in Quebec; the Manitoba Centre for Health Policy at the University of Manitoba; the University of Calgary and Alberta Health Services in Alberta. The Canadian Institute for Health Information (CIHI) will also be a core project partner. CIHI is an independent national organization with a wealth of experience in health system performance reporting.

Project Overview

The overall objective of the project is to create and report on five to ten important mental health indicators that can be compared across five Canadian provinces: Quebec, Ontario, Manitoba, Alberta and British Columbia. The five provinces have been selected because they all have comparable province-level data on mental health services. These provinces, when taken together, provide services to a large, diverse, and representative proportion of the Canadian population. The results of the project are likely to be relevant to other provinces and territories and, as an important demonstration project of mental health system performance measurement, will support their efforts to capture meaningful and commensurable data that may be added to this initiative in the future.

The project will utilize data currently collected in electronic databases by a number of provinces to create a group of indicators that are comparable. That is, the same definitions will be used to calculate and report on the specific indicators. The project will have the benefit of being built on preliminary work done by a number of the individual researchers in the team who have worked with datasets in their respective provinces. Examples of potential indicators include:

- **First contact mental health/addiction emergency visits.** This indicator would identify the number of people who are visiting emergency rooms for issues related to mental health/addiction whose visits are not preceded by previous ambulatory contact.

- **Mortality of people with mental disorders.** Mortality rate is a measure of the number of deaths in a particular population, scaled to the size of that population. It is known that standardized mortality rates are unacceptably high for groups of people with mental disorders.

- **Suicide rates among people with mental disorders.** Suicide rates would be examined amongst various subgroups (e.g., age, sex, geographic sub-regions, neighbourhood income) to help focus efforts at service improvement.

- **Rates of suicide attempts.** Suicide attempts constitute the most important risk factor for completed suicide. Rates of suicide attempts would also be examined amongst various
subgroups (e.g., age, sex, geographic sub-regions, neighbourhood income) to help focus efforts at service improvement addressing suicide prevention.

- **Access to a regular family physician.** Receipt of primary healthcare is an important facet of care for individuals with mental disorders.
- **Physician follow-up after hospital treatment.** This indicator would determine the proportion of patients who receive timely follow-up (within designated time windows) by physicians.
- **Receipt of treatment commensurate with clinical guidelines.** Clinical guidelines have been developed for the treatment of various mental disorders (e.g., depressive disorders, schizophrenic disorder). This indicator would determine the proportion of individuals who have received treatment that is commensurate with such clinical guidelines in various jurisdictions.

It should be noted that we cannot yet specify exactly which indicators are possible to report since we will need to investigate which indicators can be created that are comparable across provinces based on data and data linkage capacity across provinces. Members of the research team located in each of the five provinces will obtain the data and work together as a group to develop comparable indicators that could be reported meaningfully.

**Significance**

This project will create opportunities for performance comparisons among health authorities and across provinces, thus providing for a better understanding of issues important to users of mental health services and identify performance gaps to inform quality improvement. This project represents a crucial step forward in the provision of meaningful information that will help to guide sound policy and funding decisions for mental health services in Canada. To our knowledge, it will be the first project to have reported extensive data on the performance of mental health services in multiple provinces in Canada.

**Project Sponsors**

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- Echo Foundation
- Graham Boeckh Foundation
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**References**

