



# Provider Reports & Metrics

Mental Health & Addictions Provincial Data Set January, 2024

#### **CONTENTS**

PROVIDER REPORTS & METRICS	1
Purpose & scope	2
Notes	2
Reporting period	2
Unique clients	2
Anonymous clients	2
Indigenous clients	3
Optional data elements & 'Not Specified' values	3
1. Active Client Count Report	4
Background & context	4
Definitions & Descriptive Measures	5

## Purpose & scope

The purpose of the Provider Reports is to offer health service providers (HSP) a high-level summary of currently active clients, including breakdowns by service, program, and sociodemographic characteristics.

#### **Notes**

#### Reporting period

Health service providers initiated their submissions to the PDS at varying times, starting from September 2022 up to the present. Data received by OH includes all client/client activity at the time the data submission to PDS began. If a site began submitting data on October 1, 2022, all active clients as of this date would be submitted to PDS and received by OH. Reports can then be filtered to include only a subset of this overall time period; this is the "reporting period."

#### Unique clients

Unique client counts are based on "Medical Record Number" or MRN (DE02.001). Health card number is currently only available for ~40% of client records submitted, whereas MRN is available for all clients. <u>All references to "unique clients" in the following metrics and reports refer to the count of unique medical record numbers returned by a particular report.</u>

#### Anonymous clients

Data from anonymous and non-registered clients are currently being filtered out by vendor systems. In addition, if records in a bundle fail to pass through the HL7 FHIR data submission channel, OH will not receive these data and they will not be presented in the report.



#### Indigenous clients

Indigenous clients are not included in MHA-PDS 1.0. Ontario Health is developing internal Indigenous data governance processes to provide direction, accountability, and a standardized approach to appropriate Indigenous data use at Ontario Health. These processes will ensure that projects recognize the sovereignty of Indigenous data and adhere to the recommended process for respectful engagement with Indigenous partners. Records with an indigenous identity included in the "Ethnicity" (DE04.002) field are not submitted to Ontario Health, and as such should be considered filtered out of the following metrics and reports. Other data elements that may indicate a client might be Indigenous will be remapped to "other" upon submission to Ontario Health for fields such as language or spirituality.

#### Optional data elements & 'Not Specified' values

The value 'Not Specified' indicates that client information has not been provided for the specified data element (received in the MHA-PDS 1.0 as null values). There may be a high proportion of 'Not specified' for any data elements that are not mandatory. The values 'Unknown', 'Unknown (qualifier value)', or 'Do not know' have been provided as valid responses to data elements and are thus reflected in the following reports and metrics.

Incomplete SDoH data (e.g., ethnicity) will not cause the record to be excluded in the data pull by OH.





# 1. Active Client Count Report

#### Background & context

This report is designed to represent clients who are actively enrolled in an MHA program/service or who have received MHA services through a health service provider without being enrolled in a program/service.

All clients in this count can be captured in one of three categories:

- 1. Clients actively enrolled who have not received MHA services: These clients are enrolled in an MHA program/service but have not received any MHA services. They may be waiting for an assessment, therapy session, or case management meeting. Their enrollment demonstrates their intention to engage with MHA services, making them eligible for inclusion in the active clinical counts.
- 2. Clients actively enrolled who have received at least one MHA service: These clients are enrolled in an MHA program/service and have received one or more MHA services, such as an assessment, therapy session, or case management meetings. Their enrollment and active engagement with MHA service makes them eligible for inclusion in the active clinical counts.
- 3. **Clients not actively enrolled who have received at least one MHA service:** These clients are not formally enrolled in an MHA program/service but received one or more MHA services, such as support through a walk-in clinic, crisis support hotline, or other community-based services. Their active engagement with the MHA system through these health service events makes them eligible for inclusion in the active clinical counts.

The count of active clients includes all clients who were active at the time of reporting – this includes both new clients and clients who were already active.

Other clients, such as those with only a referral date are not part of the inclusion criteria for counting active clients in this report. In the scenario where a client only has a referral date but no enrollment or health service encounter date, they would not be included in the active clinical count.

### **Definitions & Descriptive Measures**

Name	Chart type	Description	Calculation		
(1) Active Clinical Counts as of [Reporting Period]	Active Clients as of [reporting period]	Total number of unique clients who are either actively enrolled in an MHA program/service on or before the end of the reporting period or have received MHA services during the reporting period. For clients with a termination date, they are deemed active during the reporting period if their termination date falls outside of that period.	Count number of unique clients where:  (The client has a "Service Enrollment Date" (DE06.009) that is on or before the Reporting Period End Date AND The client has a "Service Termination Date" (DE06.010) that is on or after the Reporting Period Start Date, or the "Service Termination Date" is Empty.)  OR  (The client has at least one health service event with an "Encounter Date" (DE10.004) within the [Reporting Period])		
(2) Active Clinical Counts by Month	Active Clinical Counts by Month  Active Clinical Counts by Month  758 783 785 789 817  700 670 693  717  500 2022-07 2022-08 2022-09 2022-10 2022-11 2022-12 2023-01 2023-02 2023-03 2023-04 2023-05	Number of unique clients who are either actively enrolled in an MHA program/service or have received MHA services in a particular month. For clients with a termination date, they are deemed active during the reporting month if their termination date falls outside of that month.	Count number of clients within each [Month] of the [Reporting Period] where:  (The client has a "Service Enrollment Date" (DE06.009) that is within the [Month] AND The client's "Service Termination Date" (DE06.010) is empty or after [Month])  OR  (The client has at least one health service event with an "Encounter Date" (DE10.004) within the [Month])  The count, as calculated above, for each [Month] is then summarized in a line chart.		
(3) Top 5 Functional Centres by	Veritcal bar graph	Number of active clients attributed to the most frequently reported functional centres up to five for HSPs that provide services in more than five functional centres. Sum of clients in all	Count the number of clients who have an Episode of Care associated with each "Functional Centre Code" (DE09.003). Clients can be counted more than once if they have multiple Episodes of Care.		





















