Table 3.3: Example approach to outcomes and indicators across the individual and population levels

Mental health and wellbeing outcomes

What outcomes are meaningful to consumers, families, carers and supporters, service providers, the workforce and the Victorian community? How should the mental health and wellbeing system collectively maximise individual outcomes?

Indicators

What information can be used to measure mental health and wellbeing outcomes¹⁰³

Individual shortmedium-term outcomes

Short-term outcomes relate to individual experiences of services (reported by consumers, families, carers and supporters or the workforce), as well as changes in mental health and wellbeing for consumers, such as physical health changes, resulting from interventions (within or across models of care).

Examples include rates of emergency department access, clinical outcomes before and after treatment, care and support, family, carer and supporter satisfaction with services, including measuring people's sense of agency and engagement.

Individual medium-longterm outcomes

Measuring mental health and wellbeing outcomes in the medium—long term is important and should include clinical and consumer-reported outcomes. Further, medium—long-term outcomes will include factors that affect a person's longer term mental health and wellbeing outcomes and include housing, employment, education, social connectedness and substance use or addiction.

Examples include service delivery and associated wellbeing outcomes, including related government areas (employment, financial and legal assistance, alcohol and other drug services). These indicators must include consideration of whether gains in wellbeing are sustainable and whether they endure after the service has ceased.

Population outcomes

Population outcomes are designed to measure the mental health and wellbeing of all Victorians. This includes people who are not currently accessing, and those trying to access, mental health or wellbeing services. Population outcomes can measure things such as community resilience including after large-scale adverse events such as bushfires. Measuring population wellbeing outcomes should include a broad range of factors that support wellbeing such as housing, employment, financial inclusion, income, educational attainment, social and community connectedness and personal safety. Some population outcomes will be measured at the national level—for example, through the National Mental Health and Wellbeing Survey.

Examples of population indicators can include: quality of life; psychological distress in the community; statewide suicide rates; community resilience and recovery rates after community trauma (such as bushfires); rates of homelessness; rates of employment; education attainment rates; crime rates; community perceptions of safety surveys; family violence rates; rates of family breakdown including child protection; financial exclusion and income disparity.