

Consumer perspectives of Mental Health Care

Monitoring mental health consumer and carer experiences of service has been a long-term goal of the National Mental Health Strategy. This section presents information about consumer-rated experiences of care in public [specialised mental health services](#) using the nationally developed Your Experience of Service (YES) survey. The YES survey aims to help Australian mental health services and consumers work together to build better services. The project was a national initiative funded by the Australian Government Department of Health and managed by the Victorian Department of Health and Human Services in conjunction with the Mental Health Information Strategy Standing Committee (MHISSC). Implementation of the YES survey and national reporting of the data is a key action under the Fifth National Mental Health and Suicide Prevention Plan (CHC 2017).

Currently 3 jurisdictions—New South Wales, Queensland and Victoria —have implemented the YES survey and are contributing to the [Your Experience of Service National Best Endeavours Data Set \(NBEDS\)](#). In New South Wales, consumers are offered the YES survey during every hospital stay or community episode of care. In Queensland and Victoria, consumers are offered the YES during a particular time of the year. In 2019, Queensland services offered the survey over a period of six weeks, and Victoria offered the survey over three months. Comparisons between jurisdictions with different methods should therefore be made with caution. The [data source](#) section provides more detailed information on the development of the YES survey, participating states and territories, and other aspects of the YES data supply.

It is anticipated that this section will expand as YES survey data become available from additional jurisdictions.

Data downloads:

Excel: Consumer perspectives of Mental Health Care tables 2018–19

PDF: Consumer perspectives of Mental Health Care section 2018–19

This section was last updated in October 2020.

Key points

- To date New South Wales, Queensland and Victoria have implemented the YES survey to monitor mental health consumers' experiences of care.
- **31,282** consumer-rated experience of service surveys were collected from 86 mental health service organisations in 2018–19.
- In admitted care in 2018–19, **70.1%** of respondents in NSW, **53.0%** in Vic and **53.7%** in Qld, reported a positive experience of service.

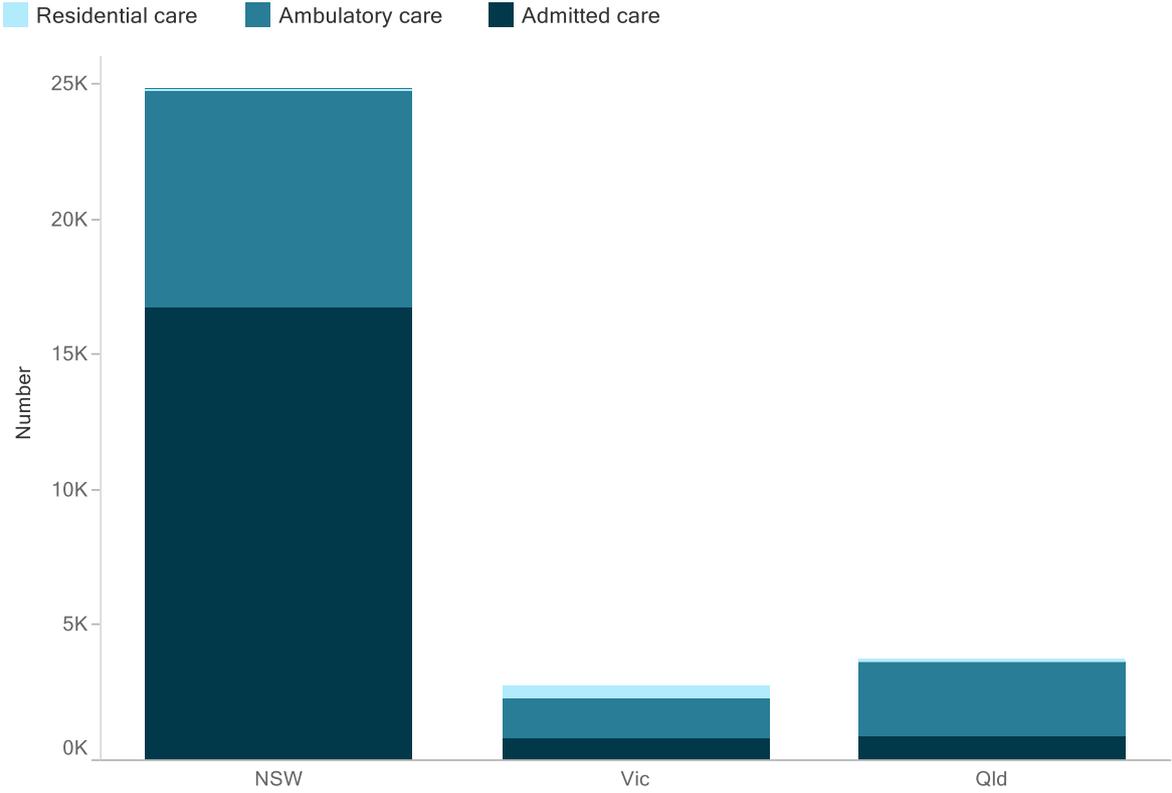
- **86.4%** of respondents in NSW, **74.8%** in Vic and **78.1%** in Qld rated the care they received as 'Good', 'Very good' or 'Excellent'.
- In ambulatory (non-admitted) care in 2018–19, **80.9%** of respondents in Qld, **78.7%** in NSW and **76.5%** in Vic, reported a positive experience of service. **91.7%** of respondents in Qld, **88.7%** in NSW and **88.1%** in Vic rated the care they received as 'Good', 'Very good' or 'Excellent'.
- In residential care in 2018–19, **85.6%** of respondents in Qld and **81.8%** in Vic, reported a positive experience of service. **95.0%** of respondents in Qld and **93.0%** in Vic rated the care they received as 'Good', 'Very good' or 'Excellent'.
- In admitted and ambulatory care, a higher proportion of respondents with *Voluntary legal status* reported positive experience of service than respondents with *Involuntary legal status*.

Returned surveys

A total of 31,282 YES surveys were returned in 2018–19 (Figure CP.1). New South Wales had the largest number of returned surveys (24,775) followed by Queensland (3,747) and Victoria (2,760). Compared to 2015–16, the number of returned YES surveys has increased in all jurisdictions (Figure CP.2). Note that in New South Wales consumers are offered the survey at the end of each episode of care, while in Victoria and Queensland consumers are encouraged to complete the survey at a particular time in the year (the [data source](#) section provides more detailed information on each state's methodology).

The majority of surveys were received from consumers in [admitted](#) and [ambulatory](#) (non-admitted) care settings (18,465 and 12,214 surveys, respectively) with a smaller number received from consumers in [residential care](#) (603). This is consistent with the lower number of consumers accessing residential care services observed in relevant data collections (reported in the section '[Specialised mental health care facilities](#)' of *Mental health services in Australia*). New South Wales did not report any surveys being received from consumers in residential care in 2018–19 and Queensland did not report residential mental health services prior to 2017–18. Note that an individual consumer may have completed the survey more than once in the reporting period.

Figure CP.1: Received YES surveys by service setting and state, 2018-19



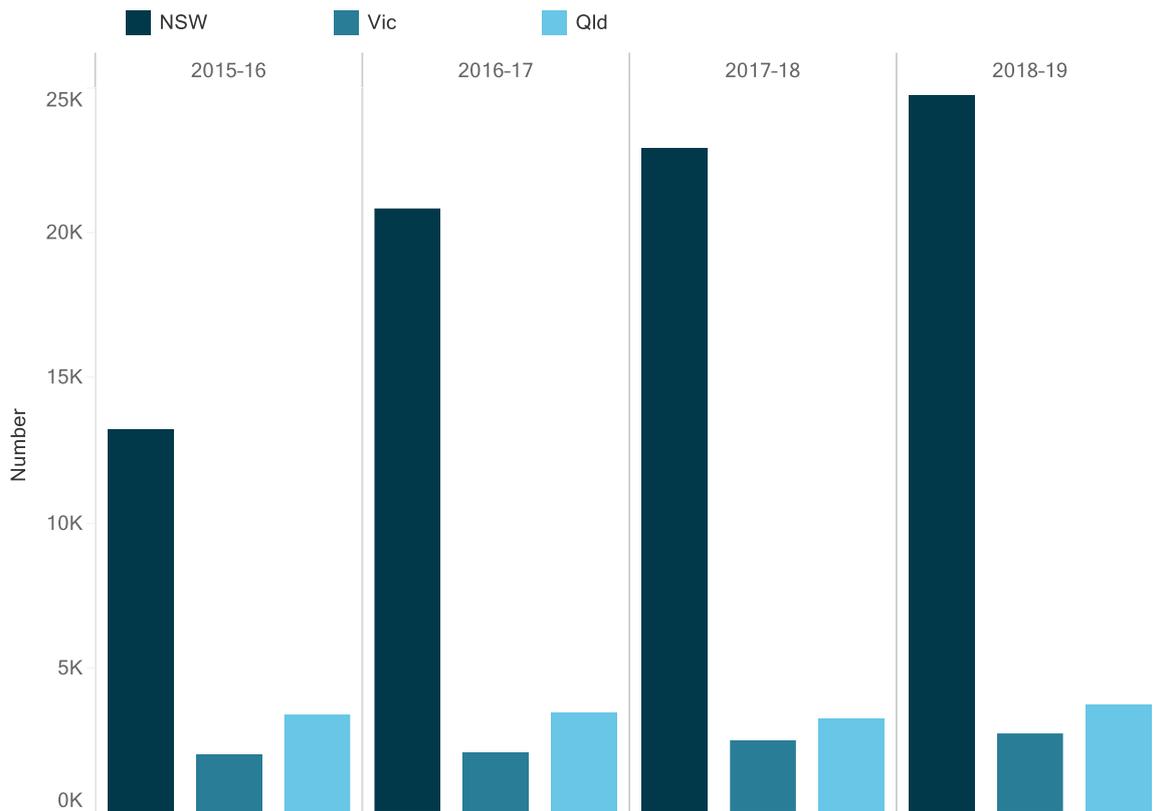
Source: Your Experience of Service survey; Table CP.1.

Note:

1. An individual consumer may have completed the survey more than once in the reporting period.

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Figure CP.2: Received YES surveys, by state, 2015-16 to 2018-19



Source: Your Experience of Service survey; Table CP.1

Note:

1. An individual consumer may have completed the survey more than once in the reporting period.

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In ambulatory care settings, 6.1% of the returned YES surveys were from consumers who received care for a period of 1 day to 2 weeks and 54.5% from consumers who received care for more than 6 months. This is in contrast to other settings where consumers typically received care for shorter periods—in residential care, 35.0% of surveys were from consumers who received care for 1 day to 2 weeks and 21.4% for more than 6 months; in admitted care, 51.1% were for 1 day to 2 weeks and 9.2% for more than 6 months.

Consumers in admitted care

Demographics

18,465 admitted care consumers responded to the YES survey in 2018–19. The highest number of responses was from consumers aged 25–34 years (3,508 or 21.7%), followed

by consumers aged 35–44 (3,163 or 19.6%) and 45–54 (2,932 or 18.1%). This is consistent with the observed demographic patterns for these data collections. More responses were received from male (50.9%) than female (48.0%) consumers and 184 responses were from consumers who identified as 'Other' gender (1.1%).

Aboriginal and Torres Strait Islander consumers returned 1,894 surveys (11.4%) and non-Indigenous Australians returned 14,774 (88.6%). There were an additional 1,797 surveys returned where Indigenous status of the respondent was not stated or not recorded.

[Mental health legal status](#) refers to whether or not a person was provided care under the relevant state or territory mental health legislation compulsory treatment provisions. Of admitted care respondents, 6,271 (46.7%) had an *Involuntary* status.

Consumers' ratings of care

The YES survey question, '*Overall, how would you rate your experience of care with this service in the last 3 months?*' provides an overall indication of a respondent's experience of care. In each state in 2018–19, a higher proportion of respondents in admitted care rated the care they received as 'Excellent' than 'Very Good', 'Good', 'Fair' or 'Poor' (Figure CP.3).

In New South Wales, 86.4% of respondents in admitted care rated the care they received as 'Good', 'Very Good', or 'Excellent'; 74.8% of respondents gave these ratings in Victoria, and 78.1% in Queensland.

Figure CP.3: Consumer ratings of care, admitted care, 2018-19



Source: Experience of Service survey; Table CP.4.

Note

1. An individual consumer may have completed the survey more than once in the reporting period.
2. Response to question, 'Overall, how would you rate your experience of care with this service in the last 3 months?'

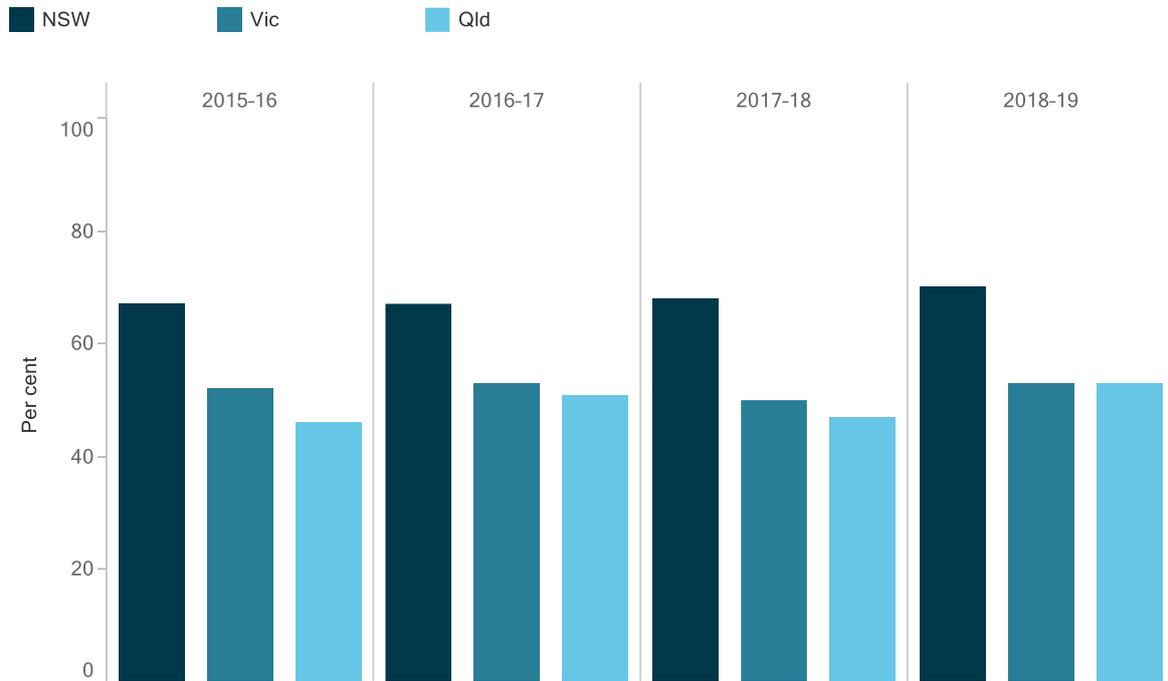
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Consumers' experiences of service

A nationally agreed overall score out of 100 has been developed to reflect each respondent's 'experience of service' across 22 questions in the YES survey (Further information on the score methodology can be found in the [data source](#) section). A score of 80 or above indicates a positive experience of service.

Using this measure, New South Wales had the highest proportion of respondents in admitted care with a positive experience of service (70.1%), followed by Queensland (53.7%) and Victoria (53.0%) (Figure CP.4).

Figure CP.4: Consumers in admitted care with a positive experience of service, by state, 2015-16 to 2018-19



Source: Your Experience of Service survey; Table CP.5.

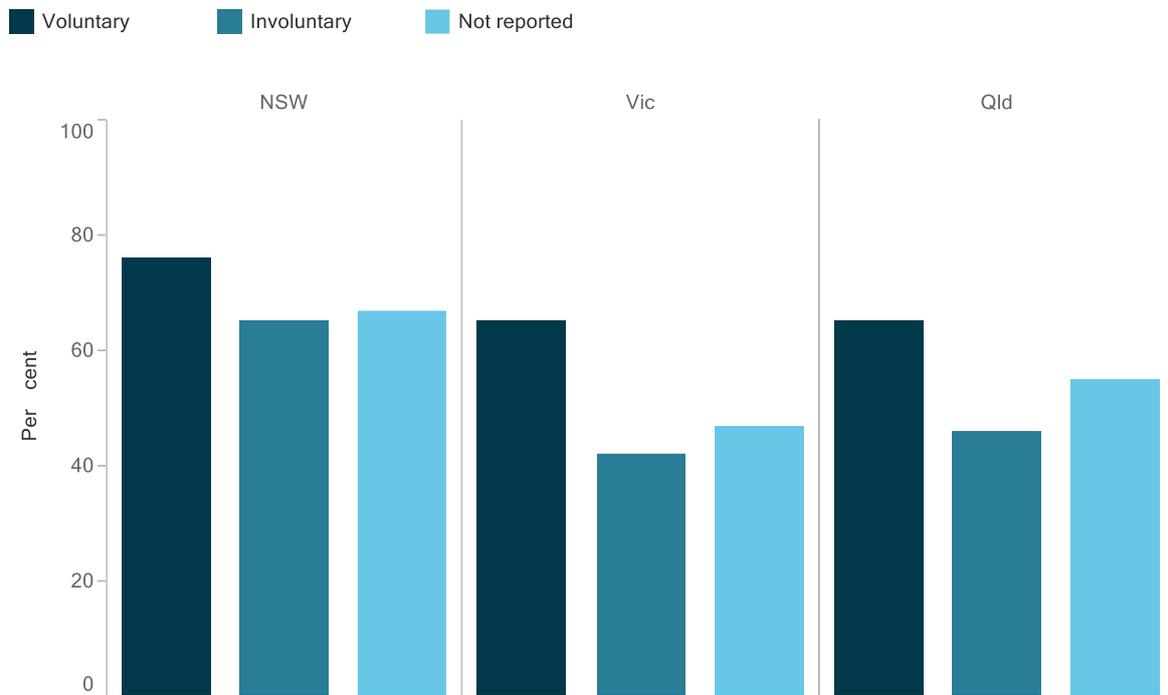
Note:

1. An experience of service score of 80 and above (out of 100) indicates a positive experience.
2. The experience of service score is the average of survey questions 1-22 multiplied by 20.
3. An individual consumer may have completed the survey more than once in the reporting period.

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In 2018–19, the proportion of respondents in admitted care with a positive experience of service score was higher for respondents with *Voluntary* mental health legal status than *Involuntary* status and mental health legal status *Not recorded*. For example, in New South Wales 76.3% of *Voluntary* status respondents, 65.1% of *Involuntary* status respondents, and 67.0% with status *Not recorded*, rated their experience of service positively. A similar pattern was observed for the other two states (Figure CP.5).

Figure CP.5: Consumers in admitted care with a positive experience of service, by state and mental health legal status, 2018-19



Source: Your Experience of Service survey; Table CP.6.

Note:

1. An experience of service score of 80 and above (out of 100) indicates a positive experience.
2. The experience of service score is the average of survey questions 1-22 multiplied by 20.
3. An individual consumer may have completed the survey more than once in the reporting period.

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For all 3 states, the proportion of Indigenous respondents in admitted care who generated a positive experience of service score was lower than the proportion for non-Indigenous Australians. New South Wales had the highest proportions, with 68.5% of Indigenous respondents and 70.8% of non-Indigenous respondents rating their experience of service positively. In Victoria, 44.4% of Indigenous respondents and 55.6% of non-Indigenous respondents rated a positive experience of service. In Queensland, 56.3% of Indigenous respondents and 53.2% of non-Indigenous respondents rated their experience of service positively.

Consumers in ambulatory care

Demographics

12,214 ambulatory (non-admitted) care consumers responded to the YES survey in 2018-19. The highest number of responses was from consumers aged 45-54 years

(1,953 or 17.5%), followed by consumers aged 35–44 (1,949 or 17.4%) and 25–34 (1,776 or 15.9%). More responses were received from female (51.7%) than male (47.5%) consumers and 93 responses were from consumers who identified as 'Other' gender (0.8%).

Indigenous Australians returned 1,063 surveys (9.4%) and non-Indigenous Australians returned 10,272 (90.6%). There were an additional 879 surveys returned where Indigenous status of the respondent was not stated or not recorded.

[Mental health legal status](#) refers to whether or not a person was provided care under the relevant state or territory mental health legislation compulsory treatment provisions. Of ambulatory care respondents, there were 2,142 (23.2%) with *Involuntary* status.

Consumers' ratings of care

The YES survey question, '*Overall, how would you rate your experience of care with this service in the last 3 months?*', provides a rating of experience of care. In 2018–19, a higher proportion of respondents in ambulatory care rated their care as 'Excellent' than 'Very Good', 'Good', 'Fair' or 'Poor' (Figure CP.6).

In Queensland, 91.7% of respondents in ambulatory care rated the care they received as 'Good', 'Very Good', or 'Excellent'; 88.7% of respondents gave these ratings in New South Wales, and 88.1% in Victoria. These proportions are higher than those observed for admitted care respondents.

Figure CP.6: Consumer ratings of care, ambulatory care, 2018-19



Source: Your Experience of Service survey; Table CP.4.

Note:

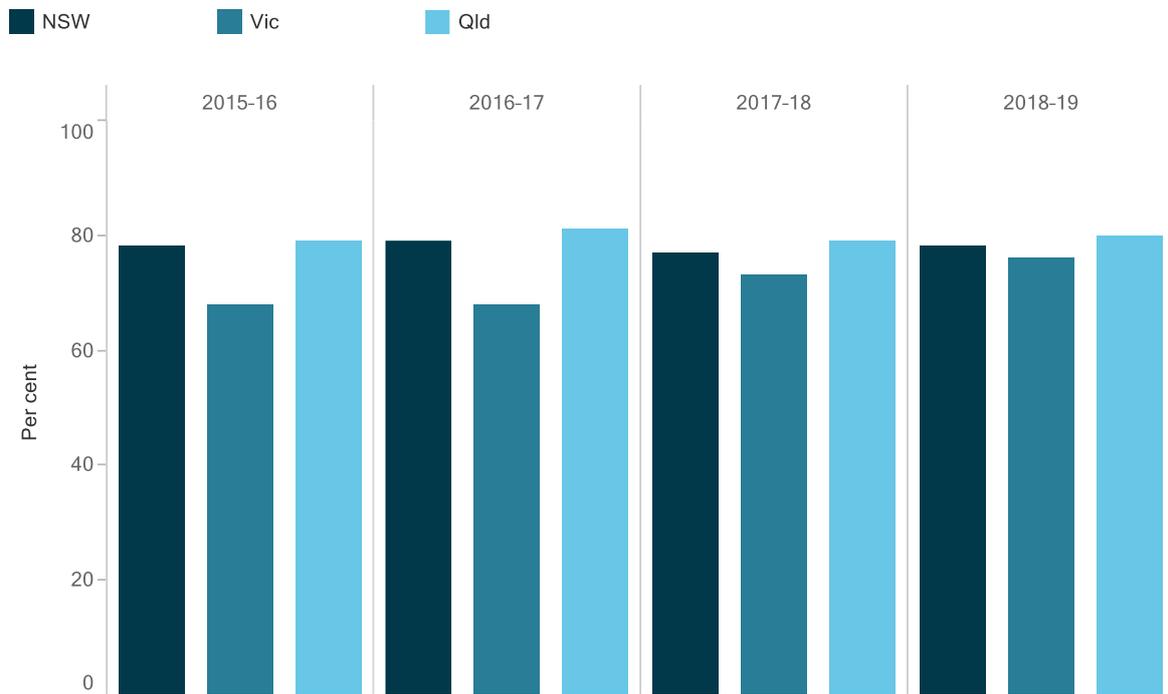
1. An individual consumer may have completed the survey more than once in the reporting period.
2. Response to question, 'Overall, how would you rate your experience of care with this service in the last 3 months?'

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Consumers' experiences of service

Using the nationally agreed overall score, Queensland had the highest proportion of consumers in ambulatory care with a positive experience of service (80.9%), followed by New South Wales (78.7%) and Victoria (76.5%) (Figure CP.7). These proportions are higher than those for admitted care respondents.

Figure CP.7: Consumers in ambulatory care with a positive experience of service, by state, 2015-16 to 2018-19



Source: Your Experience of Service survey; Table CP.5.

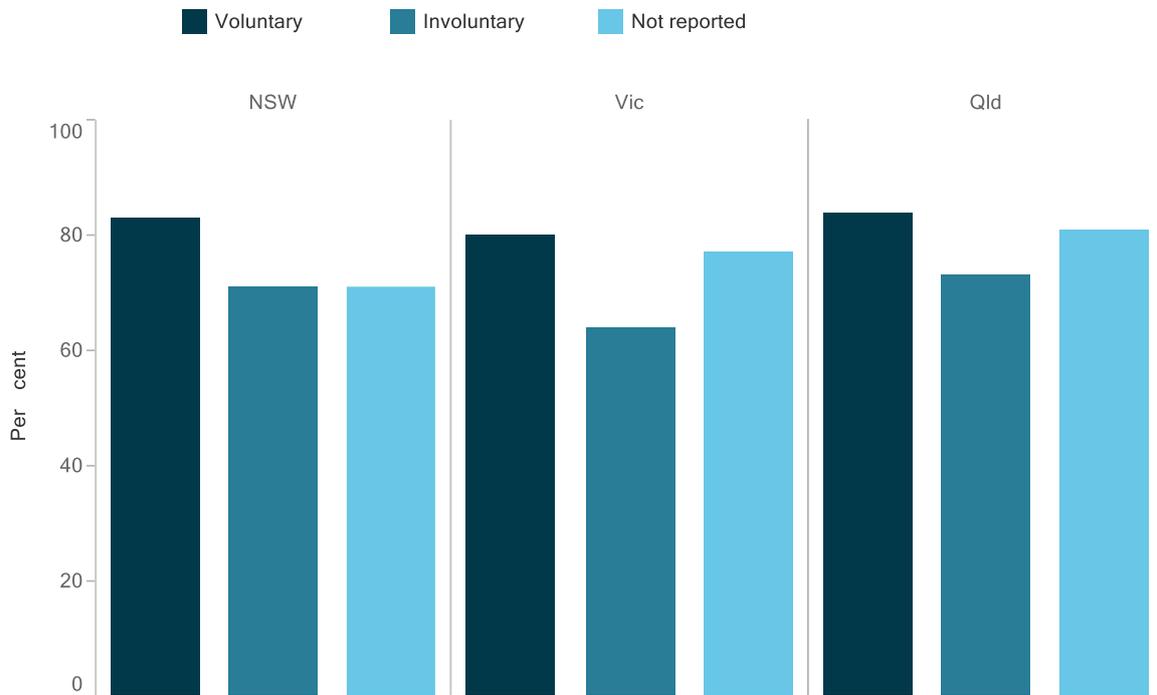
Note:

1. An experience of service score of 80 and above (out of 100) indicates a positive experience.
2. The experience of service score is the average of survey questions 1-22 multiplied by 20.
3. An individual consumer may have completed the survey more than once in the reporting period.

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The proportion of respondents in ambulatory care with a positive experience of service score was higher for respondents with *Voluntary mental health legal status* than *Involuntary status* and mental health legal status *Not recorded*. For example in Victoria, 80.5% of respondents with *Voluntary* status, 64.1% with *Involuntary* status, and 77.7% with status *Not recorded*, rated their experience of service positively. This pattern was observed for all states (Figure CP.8).

Figure CP.8: Consumers in ambulatory care with a positive experience of service, by state and mental health legal status, 2018-19



Source: Your Experience of Service survey; Table CP.7.

Note:

1. An experience of service score of 80 and above (out of 100) indicates a positive experience.
2. The experience of service score is the average of survey questions 1-22 multiplied by 20.
3. An individual consumer may have completed the survey more than once in the reporting period.

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In 2018–19, the proportion of Indigenous respondents in ambulatory care who had a positive experience of service was lower than for non-Indigenous respondents. Queensland respondents had the highest proportions, with 81.5% of non-Indigenous respondents and 79.1% of Indigenous respondents rating their experience of service positively; in New South Wales the proportions were 79.4% of non-Indigenous and 72.0% of Indigenous respondents. In Victoria, 76.6% of non-Indigenous respondents and 72.7% of Indigenous respondents rated their experience of service positively.

Consumers in residential care

Demographics

Of the three jurisdictions which contribute to the YES NBEDS, two reported surveys received from consumers in residential care in 2018–19. In Queensland and Victoria, 603 residential care consumers responded to the YES survey in 2018–19. New South Wales

did not report any surveys received from consumers in residential care. The highest number of responses was from consumers aged 25–34 (135 or 24.3%) followed by 35–44 (132 or 23.7%) and 45–54 (124 or 22.3%). More responses were received from female (51.1%) than male (47.5%) consumers and 8 responses were from consumers who identified as 'Other' gender (1.4%).

Indigenous Australians returned 36 surveys (6.5%) and non-Indigenous Australians returned 515 (93.5%). There were an additional 52 surveys returned where Indigenous status of the respondent was not stated or not recorded.

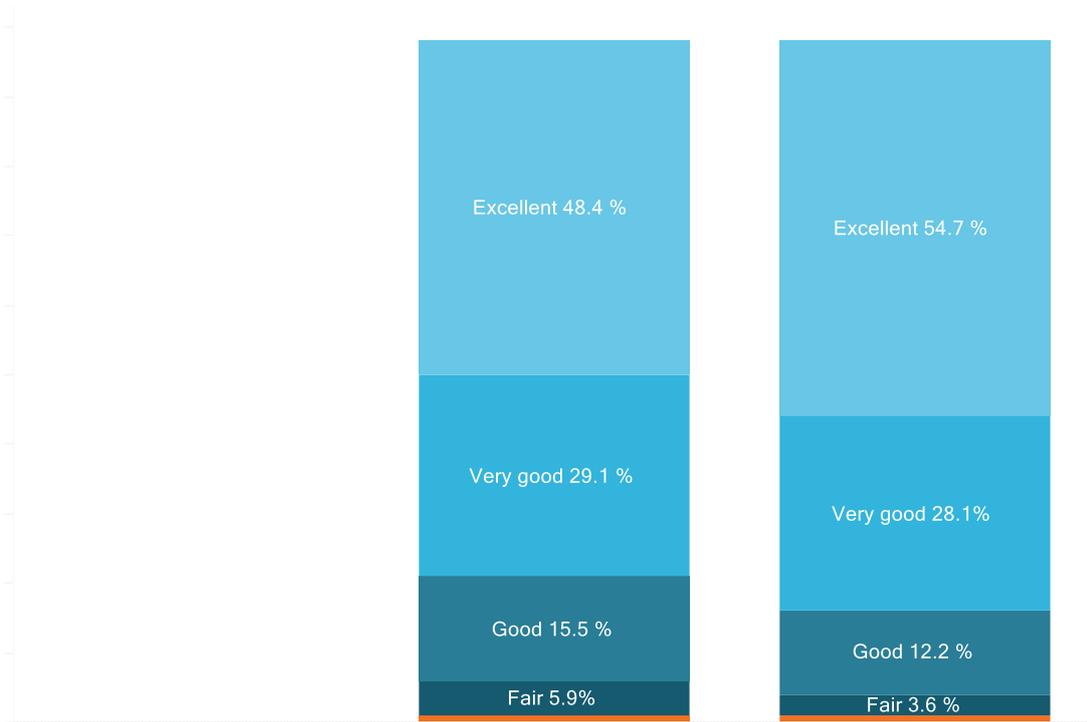
Mental health legal status refers to whether or not a person was provided care under the relevant state or territory mental health legislation compulsory treatment provisions. Of residential care respondents, there were 131 (27.5%) with *Involuntary* status.

Consumers' ratings of care

The YES survey question, '*Overall, how would you rate your experience of care with this service in the last 3 months?*', provides a rating of experience of care. In 2018–19, a higher number of respondents in residential care rated their care as 'Excellent' than 'Very Good', 'Good', 'Fair' or 'Poor' (Figure CP.9).

In Victoria, 93.0% of respondents in residential care rated the care they received as 'Good', 'Very Good', or 'Excellent' while 95.0% of respondents gave these ratings in Queensland. These proportions are higher than those observed for admitted and ambulatory care respondents.

Figure CP.9: Consumer ratings of care, residential care, 2018-19



Source: Your Experience of Service survey; Table CP.4.

Note:

1. An individual consumer may have completed the survey more than once in the reporting period.

2. Response to question, 'Overall, how would you rate your experience of care with this service in the last 3 months?'

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Consumers' experiences of service

Using the nationally agreed overall score, Queensland had the highest proportion of consumers in residential care with a positive experience of service (85.6%), followed by Victoria (81.8%). For Queensland and Victoria, a higher proportion of consumers in residential care rated their service positively compared with consumers in admitted and ambulatory (non-admitted) care.

Data source

Your Experience of Service survey instrument

There has been an increased focus by states and territories on strengthening and coordinating efforts to collect patient reported measures (AIHW 2018). The Your Experience of Service (YES) survey has been developed primarily for use in public [specialised mental health services](#).

Monitoring mental health consumer and carer experiences of service has been a long-term goal of the National Mental Health Strategy. In 2010, under the Fourth National Mental Health Plan (Commonwealth of Australia 2009), the Australian Government Department of Health funded the National Consumer Experiences of Care project to develop a survey for use in public mental health services (Victorian DHHS 2013). This project resulted in the development of the YES survey, which was finalised in 2014. The YES survey instrument was developed by the Victorian Department of Health under the auspices of the Mental Health Information Strategy Standing Committee (MHISSC).

The [YES NBEDS](#) was subsequently developed by MHISSC in conjunction with AIHW to collect and monitor consumers' experiences of service over time. Jurisdictions agree to provide data to the YES NBEDS through their state/territory representative on MHISSC.

A measure of carer experiences has also been developed. The Mental Health Carer Experience Survey (MHCES) aims to measure the experiences of carers, such as family members, partners or friends of people who access mental health services.

New South Wales implemented the survey in 2018 and Queensland implemented the survey in 2019 (NSW Ministry of Health 2019; Queensland Health 2020). Victoria plans to implement this survey from 2020 (Victorian DHHS 2019).

Participating states and territories

In 2018–19, three states administered and provided data to the YES NBEDS.

In New South Wales, 49 organisations administered the YES survey through specialised mental health service units. New South Wales has publicly reported their YES survey data since 2015–16 (NSW Ministry of Health, 2017a, 2017b, 2018, 2019).

In Victoria, 17 organisations administered the YES survey through specialised mental health service units. Victoria has publicly reported their YES survey data in their Annual Mental Health Services Report since 2016–17, including information on their early 2016 (for the 2015–16 reporting period) survey (Victorian DHHS 2017, 2018, 2019).

In Queensland, 20 organisations administered the YES survey through specialised mental health service units. Queensland has publicly reported YES survey data for the collection periods in 2015, 2016, 2017 and 2019 (Queensland Health 2016, 2017a, 2017b, 2020).

Each state has chosen a method of administration that best suits their local needs. New South Wales has adopted a “continuous” method, where people are offered the YES during every hospital stay or community episode of care. By contrast, Victoria and Queensland have adopted a “snapshot” approach where people are encouraged to complete the YES over a particular time of the year. In Victoria, consumers were offered the YES over a three month period in 2018 and 2019 (and a two month period in 2016 and 2017). In Queensland, consumers were offered the YES over a four week period (six weeks for services in rural areas) for collection from 2015 to 2017, and over a six week period in 2019.

Table 1: Number of services which administered the YES survey in participating states and territories, 2015–16 to 2018–19

	2015–16	2016–17	2017–18	2018–19
NSW	43	44	49	49
Vic	17	17	16	17
Qld	18	20	20	20
Total	78	81	85	86

Data source: YES survey data

YES survey questions

The YES survey comprises 26 questions about a mental health consumer’s perceptions of their treatment and the care they received. Respondents answer each question using the following response scales:

- For questions 1–17, respondents indicate how often the service did a range of things during their care (1—Never, 2—Rarely, 3—Sometimes, 4—Usually, 5—Always). Examples include: ‘You felt welcome at this service’, ‘Staff showed hopefulness for your future’, and ‘Your opinions about the involvement of family or friends in your care were respected’.
- For questions 18–26, respondents indicate how well the service performed during their care (1—Poor, 2—Fair, 3—Good, 4—Very Good, 5—Excellent). Examples include: ‘Explanation of your rights and responsibilities’, ‘Access to peer support’, and ‘The effect the service had on your overall well-being’.

Experience of service score

MHISSC developed a nationally agreed scoring methodology to reflect each respondent's experience of service across 22 questions in the YES survey.

The experience of service score for each respondent is equal to the average response of questions 1–22 multiplied by 20. The resulting overall score converts the individual question responses into a score out of 100.

The proportion of respondents with an experience of service score over 80 on the YES measure was agreed by MHISSC as the metric (indicator) to be used for monitoring consumer experience of service under the Fifth National Mental Health and Suicide Prevention Plan (CHC 2017).

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Key concepts

Consumer perspective of mental health care

Key Concept	Description
Admitted care	A specialised mental health service that provides overnight care in a psychiatric hospital or a specialised mental health unit in an acute hospital. Psychiatric hospitals and specialised mental health units in acute hospitals are establishments devoted primarily to the treatment and care of admitted patients with psychiatric, mental or behavioural disorders. These services are staffed by health professionals with specialist mental health qualifications or training and have as their principal function the treatment and care of patients affected by mental disorder/illness.
Ambulatory care	A specialised mental health service that provides services to people who are not currently admitted to a mental health admitted or residential service. Services are delivered by health professionals with specialist mental health qualifications or training. Ambulatory mental health services include: <ul style="list-style-type: none"> • community-based crisis assessment and treatment teams; • day programs; • mental health outpatient clinics provided by either hospital or community-based services; • child and adolescent outpatient and community teams; • social and living skills programs; • psychogeriatric assessment services;

	<ul style="list-style-type: none"> • hospital-based consultation-liaison and in-reach services to admitted patients in non-psychiatric and hospital emergency settings; • ambulatory-equivalent same day separations; • home based treatment services; and • hospital based outreach services.
Mental health legal status	<p>Whether a person was provided care under relevant state or territory mental health legislation compulsory treatment provisions.</p> <p>The state and territory mental health acts and regulations provide the legislative guidance that safeguards the rights and governs the care of patients with mental illness in admitted patient care, residential care and community-based services. The legislation varies between the state and territory jurisdictions but all contain provisions for the assessment, admission and treatment of patients on an involuntary basis.</p> <p>A person with involuntary status received care under compulsory treatment provisions.</p> <p>A person with voluntary status received care that was not under compulsory treatment provisions.</p>
Residential care	<p>A service that is considered by the state, territory or Australian Government funding authorities as a service that:</p> <ul style="list-style-type: none"> • has the workforce capacity to provide specialised mental health services; and • employs suitably trained mental health staff to provide rehabilitation, treatment or extended care on-site: <ul style="list-style-type: none"> ○ to consumers residing on an overnight basis; ○ in a domestic-like environment; and • encourages the consumer to take responsibility for their daily living activities. <p>These services include those that employ mental health trained staff on-site 24 hours per day and other services with less intensive staffing (but the trained staff must be on site for a minimum of 6 hours a day and at least 50 hours per week).</p> <p>Suitably trained residential mental health care staff may include:</p> <ul style="list-style-type: none"> • individuals with Vocational Education and Training (VET) qualifications in community services, mental health or disability sectors;

	<ul style="list-style-type: none"> • individuals with tertiary qualifications in medicine, social work, psychology, occupational therapy, counselling, nursing or social sciences; and • individuals with experience in mental health or disability relevant to providing mental health consumers with appropriate services.
Specialised mental health services	<p>Specialised mental health services are those with a primary function to provide treatment, rehabilitation or community support targeted towards people with a mental disorder or psychiatric disability. These activities are delivered from a service or facility that is readily identifiable as both 'specialised' and 'serving a mental health care function'.</p> <p>A service is not defined as a specialised mental health service solely because its clients include people affected by a mental disorder or psychiatric disability.</p> <p>The definition excludes specialist drug and alcohol services and services for people with intellectual disabilities, except where they are specifically established to assist people affected by a mental disorder who also have drug and alcohol related disorders or intellectual disability.</p> <p>The services can be sub-units of hospitals that are not, themselves, specialised mental health establishments (for example designated psychiatric units and wards, outpatient clinics etc).</p>
Your Experience of Service National Best Endeavours Data Set (YES NBEDS)	<p>The YES NBEDS is Data Set Specification that describes the YES survey questions and defines coding for responses. The scope of YES NBEDS is state and territory public sector specialised mental health services. Specific information for each data element can be found in the YES NBEDS entry on the Meteor website.</p>