Lebanese Republic
Ministry of Public Health

MHPSS Indicators v1.0

The Mental Health and Psycho Social (MHPSS) indicators are designed as a minimum set of indicators to monitor the access and some quality components of the available MHPSS services. It focuses on the provision of the main MHPSS activities with follow-up on specific vulnerable categories of the population (suicide risk, psychosis, referral to hospitals...) in addition to staff training and staff care.

These indicators were designed based on available indicators shared by the different organizations participating in the MHPSS task force in addition to local and international stakeholders and experts feedback. The PSS indicators were selected from indicators already in use by the child protection sector, to increase the reporting on these indicators.

The main purposes of these indicators are:

1/for persons with mental health disorders

- To monitor the access to doctors trained on Mental Health Gap Action Program (mhGAP), psychologists and psychiatrists
- To monitor the trend of mental health diagnosis
- To follow-up on specific vulnerable groups and decrease risk of relapses and suicide
- To empower the persons with mental health disorders and their caregivers

2/for persons benefiting from psychosocial activities

- To increase reporting on some Child Protection (CP) indicators related to PSS activities

4/for staff

- To increase the number of staff trained on evidence based mental health interventions
- To increase the number of staff benefiting from staff care activities

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A/Definitions

Term	Definition
New person with mental health disorder	Person with a mental health disorder coming for the first time to the facility for this specific mental health disorder
Person on **follow-up** with mental health disorder	Person not being formally discharged from the facility for a mental health episode and interacting with the mental health service of the facility at least once within the last 3 months
Mental health **diagnosis**	Mental health diagnosis is based on International Classification of Disease ICD10
Discharged person	The person with mental health disorder is considered officially discharged for this mental health episode when it is formally agreed with the person that there will not be any interaction with the facility
Defaulter person with psychosis	A defaulter person with psychosis is a person with psychosis not officially discharged and not interacting with the facility even once within the last 3 months (either by phone or home visit or for medications or for consultation…)
Suicide risks	As per mhGAP suicide risks criteria[1]
Staff	Staff is any staff working with the Non-Governmental Organization (NGO)
Clinical staff	Clinical staff are the staff working in a facility to provide MHPSS and include the social worker and the case manager
Number of girls and boys benefitting from **structured community-based** child protection, PSS and life skills programmes (definition as per CP indicators)	Objective: Increase the capacity and awareness of children to negotiate risks and know where to go for help; Target group: Vulnerable children and adolescents aged 6 to 17. The focus is on out-of-school children and children who do not have access to routine, structured activities; Delivery modality: Through NGO partners including CBOs (Community Based Organizations). These will then build the capacities of community volunteer structures/groups to participate and eventually deliver the package listed below with the continued support and supervision from NGOs/CBOs and within defined/clear Terms of Reference regarding division of labour; Package: Includes culturally appropriate activities with PSS and protection objectives that follow structured, age-appropriate curriculum. The core competencies addressed through psychosocial support curricula include: Interpersonal communication; Coping and problem solving skills; Setting goals for the future; Conflict resolution/social cohesion; Relationships with peers and adults; Dealing with emotions, stress management; Participation and decision making; Personal safety; Awareness on child protection/GBV risks, child rights and gender equality; This may include Gender-Based Violence (GBV) curricula; Duration: Should be open to children as long as they need to attend. Minimum number of hours is 15. Referral: Through activities, should identify children in need of focused PSS or case management or specialized services
Number of caregivers benefitting from **caregivers programmes** and parenting support groups (definition as per CP indicators)	Objective: Increase the capacity and awareness of caregivers to promote psychosocial wellbeing. Upon completion of the sessions, caregivers are encouraged to form self-sustaining support groups; Target Group: Caregivers of vulnerable and high risk children; Delivery modality: through trained NGO staff; Package: Structured parenting/caregivers programs that follow a curriculum and cover topics such as: The impact of parents' stress on children; Coping and healing strategies; Child development; Empathetic parenting; Positive discipline; Non-discrimination; Communicating with children; Providing support to children with psychosocial needs; Duration: Minimum number of hours is 15. Referral: Caregivers of children benefiting from case management, structured and focused PSS should be referred to parenting skills program
Complaint/redress mechanism	Complaint/redress mechanism is a mechanism set by the NGO to ensure that complaints from MHPSS beneficiaries are promptly received, reviewed and addressed by the related responsible at the NGO to improve the MHPSS services

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[1] WHO mhGAP intervention guide 2.0 is available at http://www.who.int/mental_health/mhgap/mhGAP_intervention_guide_02/en/

B/MHPSS Indicators – monthly reporting

Organization name:				
Reporting period:	From: / /		To / /	
Facility	Name:		Phone number:	
	Governorate:		Address:	
Focal person	Name:		Position	
	Phone number		Email	

B1/Mental Health indicators

B1.1-Number of CONSULTATIONS by type of consultation, sex and nationality

Total number of CONSULTATIONS by doctor trained on mhGAP	For male	For female
Displaced Syrians		
Palestinian Refugees from Syria (PRS)		
Palestinian Refugees from Lebanon (PRL)		
Lebanese		
Other		
Total		

Total number of CONSULTATIONS by psychologist	For male	For female
Displaced Syrians		
Palestinian Refugees from Syria (PRS)		
Palestinian Refugees from Lebanon (PRL)		
Lebanese		
Other		
Total		

Total number of CONSULTATIONS by psychiatrist	For male	For female
Displaced Syrians		
Palestinian Refugees from Syria (PRS)		
Palestinian Refugees from Lebanon (PRL)		
Lebanese		
Other		
Total		

B1.2- Number of PERSONS by nationality or mental health diagnosis and follow-up status

Number of PERSONS seen by doctor trained on mhGAP or by psychologist or by psychiatrist	New	On follow-up
Displaced Syrians		
Palestinian Refugees from Syria (PRS)		
Palestinian Refugees from Lebanon (PRL)		
Lebanese		
Other		
Total		

Number of PERSONS seen by doctor trained on mhGAP or by psychologist or by psychiatrist	New	On follow-up
Anxiety		
Depression		
Bipolar disorders		
Psychosis		
Developmental disorders		
Other mental health disorders		
Total		

B1.3- Number of CONSULTATIONS provided to new persons with mental health disorders by type of consultation and age category

Number of CONSULTATIONS for NEW persons with mental health disorders	≤18y	19y-59y	≥60y
By doctor trained on mhGAP			
By psychiatrist			
By psychologist			

B1.4- Status of ADMISSION for persons referred by the facility for psychiatric admission

	Number of persons referred by the facility for PSYCHIATRIC ADMISSION
On waiting list ≥ 2weeks	
Admitted < 48h	
Admitted between 48h and 2 weeks	
Admitted ≥ 2 weeks	

B1.5-Status of follow-up by the referring facility AFTER DISCHARGE FROM HOSPITAL

	Number of persons
Followed within 72h of hospital discharge	
Followed after 72h of hospital discharge	
Not followed after hospital discharge	
Still admitted	

B1.6-Number of persons with other SPECIFIC VULNERABILITY or DISCHARGED FROM THE FACILITY

	Number of persons
Persons with current suicide risks	
Persons with substance use disorders	

Reason for discharge	Number of persons discharged from the facility
No need for treatment	
End of treatment	
Person/family refusal	
Person continued treatment in another facility	
Defaulter person with psychosis	
Other	

B2/Psycho Social indicators

(Selected from Child Protection indicators related to PSS activities)

(to be reported to Child Protection sector via **activity info**)

	Number of persons
Boys benefitting from structured community-based child protection, PSS and life skills programmes	
Girls benefitting from structured community-based child protection, PSS and life skills programmes	
Caregivers benefitting from caregivers programmes and parenting support groups	

C/MHPSS Indicators – bi-annual reporting

Organization name:		
Reporting period:	From: / /	To / /
Facility	Name:	Phone number:
	Governorate:	Address:
Focal person	Name:	Position
	Phone number	Email

C1/Staff indicators

C1.1 - Number of staff trained on specific evidence-based mental health interventions

	Number of CLINICAL staff trained
Psychologist First Aid (PFA)	
Crisis management protocol	
Mental Health Gap Action Program(mhGAP)	
Recovery model	
Interpersonal Psychotherapy (IPT)	
Cognitive Behavioral Therapy (CBT)	
Substance use brief interventions	
Eye Movement Desensitization and Reprocessing (EMDR)	
Parental skills	
Social skills enhancement	
Other (specify)	
Total	

	Number of FRONTLINER staff trained
Psychologist First Aid (PFA)	
Crisis management protocol	
Other (specify)	
Total	

C1.2 Staff care activities

	Number of staff
Number of staff working with the NGO and benefiting from staff care activities	
Total number of staff working with the NGO	

C2/Satisfaction survey and complaint/redress mechanism

	Yes	No
Availability of satisfaction survey		
A copy of the satisfaction form is shared with the NMHP (where available)		
Availability of complaint/redress mechanism		
A copy of the protocol for the average number of days to solve the complaint per type of complaints is shared with the NMHP (where available)		