

Acute readmissions to hospital

HQMNZ ID: HQM16.6.29.954

Outcome

Reducing unplanned acute admissions can therefore be interpreted as an indication of improving quality of care, in the hospital and/or primary care, ensuring that people receive better health and disability services

Measure

Acute readmissions to hospital (Inpatient population, all age groups, 65+, 75+ years)

Type

Contributory measure

Relationship(s) to other frameworks

This measure is the same as 'OS8 Reducing Acute Readmissions to Hospital' in the DHB non-financial monitoring framework and performance measures

Ministry of Health. 2015. DHB Non-financial monitoring framework and performance measures – Sept 2015. Wellington: Ministry of Health Framework available at: www.health.govt.nz

Rationale

An unplanned acute hospital readmission may often (though not always) occur as a result of the care provided to the patient by the health system. Reducing unplanned acute admissions can therefore be interpreted as an indication of improving quality of care, in the hospital and/or primary care, ensuring that people receive better health and disability services. Through the intermediate outcome that people receive better health and disability services, the measure contributes to the high level outcome of New Zealanders living longer, healthier and more independent lives while receiving better care closer to home.

The following actions and activities are examples of initiatives that have a proven impact on this measure:

- Focus on effective management of long term conditions
- Process mapping and redesign of patient pathways, particularly to improve primary care access to services to diagnose and treat people in the community
- Initiatives to improve hospital discharge processes
- Appropriate integration between secondary and primary services to ensure continuity of care for patients.

Eligible population

Inpatient population

Measure status

Active

Numerator

Total number of acute readmission events per DHB of domicile per year

Denominator

Inpatient discharged events

National target

-

Local target

Milestones to be decided by Alliance

Data Sources

- National Minimum Dataset, Ministry of Health

Data extracted from data sources

- Financial years data from the NMDS

Data availability

Data will be released by the Ministry of Health quarterly

Measure calculation process

The following admissions are excluded:

- Where the admissions is non-casemix
- Where the admission is for palliative care
- Where the DHB of service is unknown
- Where the admission is a short ED event
- Where DHB of domicile is overseas or error

The following readmissions are excluded:

- Where the readmission is non-acute
- Where the readmission is more than 28 days from the previous admission
- Where the readmission is within 24 hours and has a transfer flag
- Where the readmission matches a list of planned readmissions
- Where the readmission is a statistical readmission
- Where any previous admission ended in patient's death

Readmissions are grouped by the DHB of service. Where the admission and readmission occur in different DHBs, the readmission is counted toward the first DHB.

OS8 provides both standardised and unstandardized acute readmission to hospital rates for each DHB. The standardised rate is calculated using a regression method, and is designed to control for differences in admissions to DHBs, i.e. ethnicity, age, complexity. The formula used to calculate it is:

Relationship(s) to other measures

Measure development notes

This measure is currently under review. Redevelopment of the model is due to be completed this year (2016).