National Healthcare Agreement: P22-Selected potentially preventable hospitalisations, 2010

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National Healthcare Agreement: P22-Selected potentially preventable hospitalisations, 2010

Identifying and definitional attributes

Metadata item type: Indicator Indicator type: Indicator

Short name: Selected potentially preventable hospitalisations, 2010

METEOR identifier: 394719

Registration status: Health!, Superseded 08/06/2011

Description: Admissions to hospital that could have potentially been prevented through the

provision of appropriate non-hospital health services.

Indicator set: National Healthcare Agreement (2010)

Health!, Superseded 08/06/2011

Outcome area: Primary and Community Health

Health!, Standard 07/07/2010

Data quality statement: National Healthcare Agreement: P22-Selected potentially preventable

hospitalisations, 2010 QS

Health!, Superseded 08/06/2011

Collection and usage attributes

Computation description: See Appendix 1 of Australian hospital statistics 2007–08 for ICD-10-AM codes in

scope for each category of potentially preventable hospitalisations.

Rates are directly age-standardised to the Australian population as at 30 June

2001.

Computation: 100,000 x (Numerator ÷ Denominator)

Calculated separately for each of the 3 subcategories, and as a single measure.

Presented per 100,000.

Numerator: Number of potentially preventable hospitalisations, divided into three groups:

vaccine-preventable conditions (e.g. tetanus, measles, mumps, rubella)

• acute conditions (e.g. ear, nose and throat infections, dehydration/gastroenteritis)

• chronic conditions (e.g. diabetes complications, asthma, angina, hypertension,

congestive heart failure and chronic obstructive pulmonary disease)

Numerator data elements:

Data Element / Data Set-

Episode of admitted patient care—admission date, DDMMYYYY

Data Source

National Hospital Morbidity Database (NHMD)

Guide for use

Data source type: Administrative by-product data

Data Element / Data Set-

Episode of care—additional diagnosis, code (ICD-10-AM 5th edn) ANN{.N[N]}

Data Source

National Hospital Morbidity Database (NHMD)

Guide for use

Data source type: Administrative by-product data

Data Element / Data Set-

Episode of care—principal diagnosis, code (ICD-10-AM 5th edn) ANN{.N[N]}

Data Source

National Hospital Morbidity Database (NHMD)

Guide for use

Data source type: Administrative by-product data

Data Element / Data Set-

Episode of admitted patient care—condition onset flag, code N

Data Source

National Hospital Morbidity Database (NHMD)

Guide for use

Data source type: Administrative by-product data

Denominator:

Total population

Denominator data elements:

Data Element / Data Set-

Person—estimated resident population of Australia

Data Source

ABS Estimated resident population (total population)

Guide for use

Data source type: Census-based plus administrative by-product data

Data Element / Data Set-

Person—estimated resident population of Australia

Data Source

ABS Indigenous experimental estimates and projections (2001 Census-based)

Guide for use

Data source type: Census-based plus administrative by-product data

Disaggregation data elements:

Data Element / Data Set

Person-Indigenous status, code N

Data Source

National Hospital Morbidity Database (NHMD)

Guide for use

Data source type: Administrative by-product data

Data Element / Data Set-

Person—area of usual residence, geographical location code (ASGC 2006) NNNNN

Data Source

National Hospital Morbidity Database (NHMD)

Guide for use

Data source type: Administrative by-product data

Used for disaggregation by state/territory, remoteness area and SEIFA of

residence

Specified Disaggregation: Nationally and by state/territory: by Indigenous status,

remoteness area and SEIFA of residence.

Available Disaggregation: Nationally and by state/territory: by Indigenous status,

remoteness area and SEIFA of residence.

Most recent data available for 2010 CRC baseline report: 2007-08

Data for 2008-09 will be available by June 2010.

Representational attributes

Representation class: Rate

Data type: Real

Unit of measure: Episode

Comments:

Format: NN[NN].N

Indicator conceptual framework

Framework and dimensions:

Accessibility

Effectiveness

Safety

Data source attributes

Data sources:

Data Source

ABS Estimated resident population (total population)

Frequency

Quarterly

Data quality statement

ABS Estimated resident population (total population), QS

Data custodian

Australian Bureau of Statistics

Data Source

National Hospital Morbidity Database (NHMD)

Frequency

Annual

Data custodian

Australian Institute of Health and Welfare

Data Source

ABS Indigenous experimental estimates and projections (2001 Censusbased)

Frequency

Periodic

Data quality statement

ABS Indigenous experimental estimates and projections, QS

Data custodian

Australian Bureau of Statistics

Accountability attributes

Organisation responsible for providing data:

Australian Institute of Health and Welfare

Benchmark: Related National Partnership Agreement benchmark/target:

National Healthcare Agreement

By 2014–15, improve the provision of primary care and reduce the proportion of potentially preventable hospitalisations by 7.6 per cent over the 2006–07 baseline to 8.5 per cent of total hospital admissions.

Further data development / collection required:

Specification: Long-term

The Coding Standards Advisory Committee (CSAC) and the National Centre for Classification in Health (NCCH) are currently reviewing the coding of conditions in scope, including diabetes in the context of the revised coding standard for additional diagnoses. The coding of diabetes varies by jurisdiction and has also varied over time. The indicator can be recalculated in future to allow retrospective trend analysis if changes are made to included codes.

Specification of potentially preventable hospitalisations should be reviewed to ensure it reflects current needs, and is standardised across Australia.

Work is required to improve the identification of Indigenous Australians within this data.

Other issues caveats:

Disaggregations within individual jurisdictions are subject to data quality considerations.

Some disaggregations may result in numbers too small for publication.

Potentially preventable hospitalisations are called 'ambulatory care sensitive hospitalisations' in some jurisdictions.

The quality of Indigenous status data is not considered to be adequate for analysis purposes for the ACT and Tasmania.

Different practices across jurisdictions in the way additional diagnoses are reported (around diabetes/dialysis) can affect the comparability of this indicator across jurisdictions. The data quality statement should reflect variations in the coding of diabetes in hospital data.

Relational attributes

Related metadata references:

Has been superseded by National Healthcare Agreement: PI 22-Selected potentially preventable hospitalisations, 2011

Health!, Superseded 31/10/2011

See also <u>National Healthcare Agreement: P09-Immunisation rates for vaccines in</u> the national schedule, 2010

Health!, Superseded 08/06/2011

See also National Healthcare Agreement: P17-Proportion of diabetics with HbA1c below 7%, 2010

Health!, Superseded 08/06/2011

See also National Healthcare Agreement: P20-Potentially avoidable deaths, 2010 Health!, Superseded 08/06/2011

See also <u>National Healthcare Agreement: P30-Proportion of people with diabetes</u> who have a GP annual cycle of care, 2010

Health!, Superseded 08/06/2011

See also National Healthcare Agreement: P31-Proportion of people with asthma with a written asthma plan, 2010

Health!, Superseded 08/06/2011

See also National Healthcare Agreement: P43-Unplanned/unexpected readmissions within 28 days of selected surgical admissions, 2010

Health!, Superseded 08/06/2011

See also National Healthcare Agreement: P45-Rates of services: Overnight separations, 2010

Health!, Superseded 08/06/2011

See also National Healthcare Agreement: P47-Rates of services: Non-acute care separations, 2010

Health!, Superseded 08/06/2011

See also <u>National Indigenous Reform Agreement: P03-Hospitalisation rates by principal diagnosis, 2010</u>

Community Services (retired), Superseded 04/04/2011