

National Partnership Agreement on Improving Public Hospital Services: Unplanned re-attendances to the emergency department within 48 hours of previous attendances

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National Partnership Agreement on Improving Public Hospital Services: Unplanned re-attendances to the emergency department within 48 hours of previous attendances

Identifying and definitional attributes

Metadata item type:	Indicator
Indicator type:	Indicator
Short name:	Unplanned re-attendances to the emergency department within 48 hours of previous attendances
Synonymous names:	48 hour unplanned ED re-attendances
METEOR identifier:	489424
Registration status:	Health , Standard 07/08/2014
Description:	The number and percentage of presentations to public hospital emergency departments that are followed by unplanned re-attendances to the same emergency department within 48 hours.
Indicator set:	Performance Indicators for the National Partnership Agreement on Improving Public Hospital Services Health , Standard 21/11/2013

Collection and usage attributes

Computation description: The scope of this indicator is all hospitals reporting to the Non-admitted patient emergency department care (NAPEDC) NMDS (Peer Groups A, B and other) as at August 2011, when the National Health Reform Agreement - National Partnership Agreement on Improving Public Hospital Services (NPA IPHS) was signed. For the duration of the NPA IPHS, hospitals that have not previously reported to the NAPEDC NMDS can come into scope, subject to agreement between the jurisdiction and the Commonwealth. This includes emergency departments located in publicly funded privately operated hospitals.

Initial presentations: An 'initial presentation' is an emergency department presentation that **may** be followed by an unplanned re-attendance occurring ≤ 48 hours later (i.e. $\leq 2,880$ minutes later) by the same patient.

Initial presentations that are out-of-scope for the indicator calculation are:

- Presentations with a [Type of visit to emergency department](#) of *Patient in transit* or *Dead on arrival*
- Presentations with an [Episode end status](#) of *Admitted to this hospital, Service episode complete—referred to another hospital, Died in emergency department* or *Dead on arrival*

The reference period for initial presentations commences 48 hours prior to the start of the quarter and concludes 48 hours prior to the end of the quarter.

Subsequent presentations: A 'subsequent presentation' is an emergency department presentation occurring ≤ 48 hours (i.e. $\leq 2,880$ minutes) after an emergency department presentation by the same patient (referred to as the initial presentation).

Subsequent presentations that are out-of-scope for the indicator calculation are:

- Presentations with a Type of visit to emergency department of *Return visit, planned, Pre-arranged admission* or *Patient in transit*

The reference period for subsequent presentations commences 48 hours prior to the start of the quarter and concludes with the end of the quarter.

For the indicator calculation: subtract the [Emergency department physical departure date](#) and [Emergency department physical departure time](#) of the initial presentation from the [Date patient presents](#) and [Time patient presents](#) of the subsequent presentation.

Numerator: The number of in-scope initial presentations that **are** followed by an in-scope subsequent presentation.

The numerator uses the [Person identifier](#) to match initial and subsequent presentations at a single patient level. An initial presentation is linked to the first in-scope subsequent presentation only. An individual presentation may be counted as both an initial presentation (if it meets the requirements of an in-scope initial presentation) and as a subsequent presentation (if it meets the requirements of an in-scope subsequent presentation).

Denominator: The total number of in-scope initial presentations.

As per Figure 1 below, the reference periods are framed around the date of the initial presentation; the timing of the initial presentation determines the quarter against which the resulting data are reported. The indicator will count the number of initial presentations that are followed by an in-scope subsequent presentation. For example, an initial presentation occurring between 30 December and 29 March followed by an in-scope subsequent presentation occurring between 30 December and 31 March is to be counted in the January-March quarter for the purposes of this indicator.

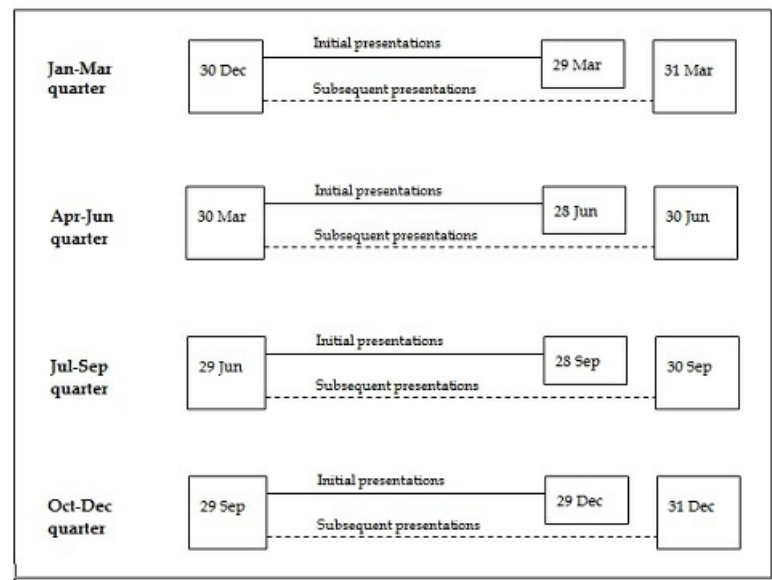


Figure 1: Quarterly reference periods for initial and subsequent presentations

Invalid records are to be excluded, and are records for which:

- Physical departure date or time is missing (for initial presentations only)
- Presentation date or time is missing (for subsequent presentations only)
- Type of visit to emergency department is missing
- Episode end status is missing (for initial presentations only)

Analysis is by state and territory and hospital, based on location of service.

Presented as a number and percentage.

Computation:

$$100 \times (\text{Numerator} \div \text{Denominator})$$

Numerator:

The number of in-scope emergency department presentations that are followed by an unplanned re-attendance to the same emergency department within ≤ 48 hours (i.e. $\leq 2,880$ minutes).

Numerator data elements:

Data Element / Data Set
Person—person identifier.XXXXXX[X(14)]

Data Source

[National Emergency Access Target data](#)

NMDS / DSS

[Non-admitted patient emergency department care NMDS 2012-13](#)

Data Element / Data Set

[Emergency department stay—presentation date, DDMMYYYY](#)

Data Source

[National Emergency Access Target data](#)

NMDS / DSS

[Non-admitted patient emergency department care NMDS 2012-13](#)

Data Element / Data Set

[Emergency department stay—presentation time, hhmm](#)

Data Source

[National Emergency Access Target data](#)

NMDS / DSS

[Non-admitted patient emergency department care NMDS 2012-13](#)

Data Element / Data Set

[Non-admitted patient emergency department service episode—episode end status, code N](#)

Data Source

[National Emergency Access Target data](#)

NMDS / DSS

[Non-admitted patient emergency department care NMDS 2012-13](#)

Data Element / Data Set

[Emergency department stay—type of visit to emergency department, code N](#)

Data Source

[National Emergency Access Target data](#)

NMDS / DSS

[Non-admitted patient emergency department care NMDS 2012-13](#)

Data Element / Data Set

[Emergency department stay—physical departure date, DDMMYYYY](#)

Data Source

[National Emergency Access Target data](#)

NMDS / DSS

[Non-admitted patient emergency department care NMDS 2012-13](#)

Data Element / Data Set

[Emergency department stay—physical departure time, hhmm](#)

Data Source

[National Emergency Access Target data](#)

NMDS / DSS

[Non-admitted patient emergency department care NMDS 2012-13](#)

Denominator:

The number of in-scope emergency department presentations.

Denominator data elements:

Data Element / Data Set

[Non-admitted patient emergency department service episode—episode end status, code N](#)

Data Source

[National Emergency Access Target data](#)

NMDS / DSS

[Non-admitted patient emergency department care NMDS 2012-13](#)

Data Element / Data Set

[Emergency department stay—type of visit to emergency department, code N](#)

Data Source

[National Emergency Access Target data](#)

NMDS / DSS

[Non-admitted patient emergency department care NMDS 2012-13](#)

Data Element / Data Set

[Emergency department stay—physical departure date, DDMMYYYY](#)

Data Source

[National Emergency Access Target data](#)

NMDS / DSS

[Non-admitted patient emergency department care NMDS 2012-13](#)

Data Element / Data Set

[Emergency department stay—physical departure time, hhmm](#)

Data Source

[National Emergency Access Target data](#)

NMDS / DSS

[Non-admitted patient emergency department care NMDS 2012-13](#)

Disaggregation:

Disaggregation is by state/territory and hospital

Disaggregation data elements:**Data Element / Data Set**[Establishment—organisation identifier \(Australian\), NNX\[X\]NNNNN](#)**Data Source**[National Emergency Access Target data](#)**NMDS / DSS**[Non-admitted patient emergency department care NMDS 2012-13](#)**Comments:**

The NPA IPHS stipulates a performance indicator measuring unplanned re-attendances to emergency departments. The NAPEDC NMDS uses the term '[presentation](#)' to describe an attendance at an emergency department. In this indicator, the term 'attendance' has been interpreted as 'presentation' to align with the NAPEDC NMDS terminology.

The lack of presenting problem/diagnosis data in the NAPEDC NMDS reduces the ability to identify whether an unplanned re-attendance is for a problem related to the previous presentation. This will result in over-reporting of unplanned re-attendances.

In most states and territories, the [Person identifier](#) is unique to a hospital and cannot be used to identify individual patients who present to more than one hospital. Therefore this indicator is based on initial and subsequent presentations to the same hospital. This will result in an undercount of unplanned re-attendances.

Representational attributes

Representation class:	Percentage
Data type:	Real
Unit of measure:	Service event
Format:	NN[N]

Data source attributes

Data sources:**Data Source**[National Emergency Access Target data](#)**Frequency**

Quarterly

Data custodian

Department of Health and Ageing; Australian Institute of Health and Welfare

Accountability attributes

Reporting requirements:	National Partnership Agreement on Improving Public Hospital Services
Organisation responsible for providing data:	Australian Institute of Health and Welfare; Department of Health and Ageing

Source and reference attributes

Submitting organisation:	National Health Information Standards and Statistics Committee - Emergency Data Development Working Group
Reference documents:	Standing Council on Federal Financial Relations. National Partnership Agreement on Improving Public Hospital Services. Standing Council on Federal Financial Relations, Canberra. Viewed 15 April 2013, http://www.federalfinancialrelations.gov.au/content/npa/health_reform/national-workforce-reform/national_partnership.pdf

