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# National Indigenous Reform Agreement: PI 11-Child under 5 hospitalisation rates by principal diagnosis, 2011

# Identifying and definitional attributes

Metadata item type: Indicator Indicator type: Indicator

**Short name:** PI 11-Child under 5 hospitalisation rates by principal diagnosis, 2011

METEOR identifier: 425764

**Registration status:** <u>Indigenous</u>, Superseded 01/07/2012

**Description:** Hospital separation rates for children aged under five years by Indigenous status.

Rationale: Monitoring hospitalisation rates for different diseases so that it is understood which

diseases are major contributors to morbidity among Indigenous children and where programs are succeeding and where they are not will assist in achieving the closing

the gap targets.

Indicator set: National Indigenous Reform Agreement (2011)

Indigenous, Superseded 01/07/2012

Outcome area: Indigenous children have the same health outcomes as other Australian children

Indigenous, Standard 21/07/2010

## Collection and usage attributes

**Population group age to:** Children aged under 5 years.

#### Computation description:

Rate ratios and rate differences are calculated for Indigenous:non-Indigenous.

Presentation: Per 1,000 persons.; percentage; and causes listed from highest to lowest percentage.

#### Definitions:

Leading principal diagnoses (and ICD-10-AM codes) are:

- Diseases of the respiratory system (J00-J99)
- Certain conditions originating in the perinatal period (P00-P96)
- · Certain infectious and parasitic diseases (A00-B99)
- Injury and poisoning and certain other consequences of external causes (S00-T98)
- Symptoms, signs and abnormal clinical and laboratory findings n.e.c. (R00-R99)
- Diseases of the digestive system (K00-K93)
- Diseases of the skin and subcutaneous tissue (L00-L99)
- Congenital malformations, deformations and chromosomal abnormalities (Q00-Q99)
- Diseases of the ear and mastoid process (H60-H95)
- Contact with health services (Z00-Z99)
- Diseases of the genitourinary system (N00-N99)
- Diseases of the nervous system (G00-G99)
- Other
- Total hospitalisations

#### Computation:

Crude percentage: number of separations by principal diagnosis divided by total separations.

Rate: 1,000 x (Numerator ÷ Denominator).

#### **Numerator:**

Number of hospital separations for children aged under five years by leading principal diagnosis.

#### Numerator data elements:

#### Data Element / Data Set

Episode of admitted patient care—admission date, DDMMYYYY

**Data Source** 

National Hospital Morbidity Database (NHMD)

NMDS / DSS

Admitted patient care NMDS 2008-09

Guide for use

Data source type: Administrative by-product data

#### Data Element / Data Set

Episode of admitted patient care—separation date, DDMMYYYY

**Data Source** 

National Hospital Morbidity Database (NHMD)

NMDS / DSS

Admitted patient care NMDS 2008-09

Guide for use

Data source type: Administrative by-product data

#### Data Element / Data Set-

Person—date of birth, DDMMYYYY

**Data Source** 

National Hospital Morbidity Database (NHMD)

NMDS / DSS

Admitted patient care NMDS 2008-09

Guide for use

Data source type: Administrative by-product data

#### Data Element / Data Set-

Episode of care—principal diagnosis, code (ICD-10-AM 6th edn) ANN{.N[N]}

**Data Source** 

National Hospital Morbidity Database (NHMD)

NMDS / DSS

Admitted patient care NMDS 2008-09

Guide for use

Data source type: Administrative by-product data

**Denominator:** 

Total population of children aged under five years.

# Denominator data elements:

#### Data Element / Data Set

Person—age, total years N[NN]

#### **Data Source**

ABS Estimated resident population (total population)

#### Guide for use

Data source type: ERP is derived from Census, PES and assumptions on future fertility, mortality, net migration etc.

#### Data Element / Data Set

Person—age, total years N[NN]

#### **Data Source**

ABS Indigenous experimental estimates and projections (2001 Censusbased)

#### Guide for use

Data source type: ERP is derived from Census, PES and assumptions on future fertility, mortality, net migration etc.

#### Data Element / Data Set

Person—estimated resident population of Australia, total people N[N(7)]

#### **Data Source**

ABS Estimated resident population (total population)

#### Guide for use

Data source type: Estimated resident population (ERP) is derived from Census, post-enumeration survey (PES) and assumptions on future fertility, mortality, net migration etc.

#### Data Element / Data Set

Person—estimated resident population of Australia, total people N[N(7)]

#### **Data Source**

ABS Indigenous experimental estimates and projections (2001 Censusbased)

#### Guide for use

Data source type: ERP is derived from Census, PES and assumptions on future fertility, mortality, net migration etc.

#### Disaggregation:

National and State and Territory by Indigenous status, by Principal diagnosis at the ICD-10-AM chapter level.

# 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

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

**Data Source** 

National Hospital Morbidity Database (NHMD)

Guide for use

Data source type: Administrative by-product data

#### Comments:

Most recent data available for 2011 CRC report is 2008-09.

Aggregated data (2007-08 to 2008-09) will be reported for the current reporting period.

Single year data (2007-08, 2008-09) will be reported for time series (national for total hospitalisations and for leading principal diagnoses; state/territory for total hospitalisations and for top six leading principal diagnoses (ICD-10-AM 6th edition chapter level)).

National disaggregation by Indigenous status will be based on data only from jurisdictions for which the quality of Indigenous identification is considered acceptable.

At this stage, only selected state/territories are considered of accepted quality for reporting hospitalisations of Indigenous persons: NSW, Vic, Qld, WA, SA & NT public hospitals. Tas/ACT data should be reported with caveats. National rates should include these six states and territories only.

Disaggregation by Indigenous status is to be reported using 2 years combined data for the current reporting period. Single year data is to be reported for time series.

Baseline year for this indicator is 2008; target year is 2018.

# Representational attributes

Representation class: Rate

Data type: Real

Unit of measure: Person

Format: N[NN].N

### Indicator conceptual framework

Framework and dimensions:

**Health Conditions** 

## 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**

Reporting requirements: National Indigenous Reform Agreement. Organisation responsible

for providing data:

Australian Institute of Health and Welfare.

Further data development / Specification: Long-term. collection required:

# Relational attributes

Related metadata references:

Supersedes National Indigenous Reform Agreement: P11-Child under 5 hospitalisation rates by principal diagnosis, 2010

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

Has been superseded by National Indigenous Reform Agreement: PI 11-Child under 5 hospitalisation rates by principal diagnosis, 2012 Indigenous, Superseded 13/06/2013