potentially preventable hospitalisations, 2012	
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# National Healthcare Agreement: Pl 22-Selected potentially preventable hospitalisations, 2012

### Identifying and definitional attributes

Metadata item type: Indicator

Indicator type: Progress measure

Short name: PI 22-Selected potentially preventable hospitalisations, 2012

**METEOR** identifier: 443687

Registration status: Health, Superseded 25/06/2013

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

provision of appropriate non-hospital health services.

Indicator set: National Healthcare Agreement (2012)

Health, Superseded 25/06/2013

Outcome area: Primary and Community Health

Health, Standard 07/07/2010

Data quality statement: National Healthcare Agreement: PI 22-Selected potentially preventable

hospitalisations, 2012 QS

Health, Superseded 14/01/2015

## Collection and usage attributes

Computation description: Table 22 A: ICD-10-AM codes used for identifying potentially preventable

hospitalisations

**ICD-10-AM codes** Category

Vaccine-preventable

Influenza and J10, J11, J13, J14, J15.3, J15.4, J15.7,

J15.9, J16.8, J18.1, J18.8 in any diagnosis pneumonia field, excludes cases with additional

diagnosis of D57 (sickle-cell disorders) and

people under 2 months

Other vaccine-A35, A36, A37, A80, B05, B06, B16.1, preventable conditions

B16.9, B18.0, B18.1, B26, G00.0, M01.4 in any

diagnosis field

Chronic

Asthma J45, J46 as principal diagnosis only

## Category **ICD-10-AM codes** Congestive cardiac 150, 111.0, J81 as principal diagnosis only, failure exclude cases with the following procedure codes: 33172-00, 35304-00, 35305-00, 35310-02, 35310-00, 38281-11, 38281-07, 38278-01, 38278-00, 38281-02, 38281-01, 38281-00, 38256-00, 38278-03, 38284-00, 38284-02, 38521-09, 38270-01, 38456-19, 38456-15, 38456-12, 38456-11, 38456-10, 38456-07, 38456-01, 38470-00, 38475-00, 38480-02, 38480-01, 38480-00, 38488-06, 38488-04, 38489-04, 38488-02, 38489-03, 38487-00, 38489-02, 38488-00, 38489-00, 38490-00, 38493-00, 38497-04, 38497-03, 38497-02, 38497-01, 38497-00, 38500-00, 38503-00, 38505-00, 38521-04, 38606-00, 38612-00, 38615-00, 38653-00, 38700-02, 38700-00, 38739-00, 38742-02, 38742-00, 38745-00, 38751-02, 38751-00, 38757-02, 38757-01, 38757-00, 90204-00, 90205-00, 90219-00, 90224-00, 90214-00, 90214-02. Diabetes complications E10-E14.9 as principal diagnoses and E10-E14.9 as additional diagnoses where the principal diagnosis was: hypersmolarity (E87.0) acidosis (E87.2) transient ischaemic attack (G45) nerve disorders and neuropathies (G50– G64) cataracts and lens disorders (H25-H28) retinal disorders (H30-H36) glaucoma (H40-H42) myocardial infarction (I21-I22) other coronary heart diseases (I20, I23-125) heart failure (I50) stroke and sequelae (160-164, 169.0-169.4peripheral vascular disease (I70-I74) gingivitis and periodontal disease (K05) kidney diseases (N00-N29) [including stage renal disease (N17-N19)] endrenal dialysis (Z49) COPD J20, J41, J42, J43, J44, J47 as principal diagnosis only, J20 only with additional diagnoses of J41, J42, J43, J44, J47 I20, I24.0, I24.8, I24.9 as principal diagnosis Angina only, exclude cases with procedure codes not

in blocks [1820] to [2016]

Category ICD-10-AM codes

Iron deficiency anaemia D50.1, D50.8, D50.9 as principal diagnosis

only.

Hypertension I10, I11.9 as principal diagnosis only, exclude

cases with procedure codes according to the

list of procedures excluded from the Congestive cardiac failure category above.

Nutritional deficiencies E40, E41, E42, E43, E55.0, E64.3 as

principal diagnosis only.

Rheumatic heart

disease

100 to 109 as principal diagnosis only. (Note:

includes acute rheumatic fever)

Acute

Dehydration and gastroenteritis

A09.9, E86, K52.2, K52.8, K52.9 as principal

diagnosis only.

Pyelonephritis N10, N11, N12, N13.6, N39.0 as principal

diagnosis only.

Perforated/bleeding

ulcer

K25.0, K25.1, K25.2, K25.4, K25.5, K25.6, K26.0, K26.1, K26.2, K26.4, K26.5, K26.6, K27.0, K27.1, K27.2, K27.4, K27.5, K27.6, K28.0, K28.1, K28.2, K28.4, K28.5, K28.6 as

principal diagnosis only.

Cellulitis L03, L04, L08, L88, L98.0, L98.3 as principal

diagnosis only, exclude cases with any procedure except those in blocks 1820 to 2016 or if procedure is 30216-02, 30676-00, 30223-02, 30064-00, 34527-01, 34527-00, 90661-00 and this is the only listed procedure

Pelvic inflammatory

disease

N70, N73, N74 as principal diagnosis only.

Ear, nose and throat

infections

H66, H67, J02, J03, J06, J31.2 as principal

diagnosis only.

Dental conditions K02, K03, K04, K05, K06, K08, K09.8,

K09.9, K12, K13 as principal diagnosis only.

Appendicitis with generalised peritonitis

K35.0 in any diagnosis field

Convulsions and

epilepsy

G40, G41, O15, R56 as principal diagnosis

only

Gangrene R02 in any diagnosis field

Rates directly age-standardised to the 2001 Australian population.

Analysis by state and territory, remoteness and SEIFA Index of Relative Socioeconomic Disadvantage (IRSD) is based on usual residence of person.

Presented as a number per 100,000 population.

**Computation:** 100,000 x (Numerator ÷ Denominator)

Calculated separately for each of the 3 computations:

- 1. As per specification
- 2. With diabetes complications (all diagnoses) and dehydration gastroenteritis excluded (COAG Reform Council supplementary data).
- 3. With diabetes complications (additional diagnoses only) and dehydration gastroenteritis excluded (COAG Reform Council supplementary data).

#### **Numerator:**

Number of potentially preventable hospitalisations, divided into three groups and total:

- 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, asthma, angina, hypertension, congestive heart failure and chronic obstructive pulmonary disease)
- all potentially preventable hospitalisations

#### 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 2009-10

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)

NMDS / DSS

Admitted patient care NMDS 2009-10

Guide for use

Data source type: Administrative by-product data

#### Data Element / Data Set-

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

**Data Source** 

National Hospital Morbidity Database (NHMD)

NMDS / DSS

Admitted patient care NMDS 2009-10

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 2009-10

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 Censusbased)

#### Guide for use

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

### Disaggregation:

2009–10—Nationally (by three groups and total) by SEIFA Index of Relative Socioeconomic Disadvantage (IRSD) deciles

2007–08 and 2008–09 (for computation 2 and 3) and 2009–10—State and territory (by three groups and total), by:

- · Indigenous status
- remoteness (Australian Standard Geographical Classification Remoteness Structure)
- SEIFA IRSD quintiles

Some disaggregation may result in numbers too small for publication. National disaggregation by Indigenous status will be based on data only from jurisdictions for which the quality of Indigenous identification is considered acceptable.

# Disaggregation data elements:

#### Data Element / Data Set-

Person—Indigenous status, code N

**Data Source** 

National Hospital Morbidity Database (NHMD)

NMDS / DSS

Admitted patient care NMDS 2009-10

Guide for use

Data source type: Administrative by-product data

#### Data Element / Data Set-

Person—area of usual residence, geographical location code (ASGC 2008) NNNNN

**Data Source** 

National Hospital Morbidity Database (NHMD)

NMDS / DSS

Admitted patient care NMDS 2009-10

Guide for use

Data source type: Administrative by-product data

Used for disaggregation by state/territory, remoteness and SEIFA IRSD

Comments:

Most recent data available for 2012 CRC report: 2009-10.

The scope of the National Hospital Morbidity Database (NHMD) is episodes of care for admitted patients in essentially all hospitals in Australia, including public and private acute and psychiatric hospitals, free-standing day hospital facilities, alcohol and drug treatment hospitals and dental hospitals.

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

## Representational attributes

Representation class: Rate

Data type: Real

Unit of measure: Episode

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:

National Healthcare Agreement: PB 07-By 2014-15, improve the provision of primary care and reduce the proportion of potentially preventable hospital admissions by 7.6 per cent over the 2006-07 baseline to 8.5 per cent of total hospital admissions, 2012

National Healthcare Agreement:

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

Further data development / collection required:

Further data development / Specification: Long-term

collection required:

### Relational attributes

# Related metadata references:

Supersedes <u>National Healthcare Agreement: PI 22-Selected potentially preventable hospitalisations, 2011</u>

Health, Superseded 31/10/2011

Has been superseded by <u>National Healthcare Agreement: PI 18-Selected</u> potentially preventable hospitalisations, 2013

Health, Superseded 30/04/2014

See also National Healthcare Agreement: PB 07-By 2014-15, improve the provision of primary care and reduce the proportion of potentially preventable hospital admissions by 7.6 per cent over the 2006-07 baseline to 8.5 per cent of total hospital admissions, 2012

Health, Superseded 25/06/2013

See also National Healthcare Agreement: P109-Immunisation rates for vaccines in the national schedule, 2012

Health, Retired 25/06/2013

See also National Healthcare Agreement: PI 17-Proportion of people with diabetes with HbA1c below 7%, 2012

Health, Superseded 25/06/2013

See also National Healthcare Agreement: PI 20-Potentially avoidable deaths, 2012 Health, Superseded 25/06/2013

See also National Healthcare Agreement: PI 24-GP-type services, 2012 Health, Retired 25/06/2013

See also National Healthcare Agreement: PI 31-Proportion of people with asthma with a written asthma plan, 2012

Health, Retired 25/06/2013

See also National Healthcare Agreement: PI 43-Unplanned/unexpected readmissions within 28 days of selected surgical episodes of care, 2012 Health, Superseded 25/06/2013

See also National Healthcare Agreement: P145-Rates of services: Overnight separations, 2012

Health, Retired 25/06/2013

See also <u>National Healthcare Agreement: PI 47-Rates of services: Non-acute care separations, 2012</u>

Health, Retired 25/06/2013

See also <u>National Indigenous Reform Agreement: PI 03-Hospitalisation rates by principal diagnosis, 2012</u>

Indigenous, Superseded 13/06/2013