National Healthcare Agreement: PI 23–Unplanned hospital readmission rates, 2022

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National Healthcare Agreement: PI 23–Unplanned hospital readmission rates, 2022

Identifying and definitional attributes

Metadata item type: Indicator

Indicator type: Progress measure

Short name: PI 23–Unplanned hospital readmission rates, 2022

METEOR identifier: 742756

Registration status: Health, Standard 24/09/2021

Description: Unplanned and unexpected hospital readmissions to the same public hospitals within 28 days for selected surgical procedures.

Indicator set: National Healthcare Agreement (2022)
Health, Standard 24/09/2021

Outcome area: Hospital and Related Care
Health, Standard 07/07/2010
National Health Performance Authority (retired), Retired 01/07/2016

Collection and usage attributes

Computation description: Unplanned/unexpected hospital readmissions are those readmissions where the principal diagnosis indicates an adverse event.

Principal diagnoses codes

A principal diagnosis for the readmission has one of the following ICD-10-AM (11th edn.) codes: T80–T88, E89, G97, H59, H95, I97, J95, K91, M96 or N99.

T80 Complications following infusion, transfusion and therapeutic injection
T81 Complications of procedures, not elsewhere classified
T82 Complications of cardiac and vascular prosthetic devices, implants and grafts
T83 Complications of genitourinary prosthetic devices, implants and grafts
T84 Complications of internal orthopaedic prosthetic devices, implants and grafts
T85 Complications of other internal prosthetic devices, implants and grafts
T86 Failure and rejection of transplanted organs and tissues
T87 Complications peculiar to reattachment and amputation
T88 Other complications of surgical and medical care, not elsewhere classified
E89 Intraoperative and postprocedural disorders of endocrine and metabolic system, not elsewhere classified
G97 Intraoperative and postprocedural disorders of nervous system, not elsewhere classified
H59 Intraoperative and postprocedural disorders of eye and adnexa, not elsewhere classified
H95 Intraoperative and postprocedural disorders of ear and mastoid process, not elsewhere classified
I97 Intraoperative and postprocedural disorders of circulatory system, not elsewhere classified
J95 Intraoperative and postprocedural disorders of respiratory system, not elsewhere classified

K91 Intraoperative and postprocedural disorders of digestive system, not elsewhere classified
M96 Intraoperative and postprocedural disorders of musculoskeletal system, not elsewhere classified
N99 Intraoperative and postprocedural disorders of genitourinary system, not elsewhere classified

Procedure codes

Number of separations in which one of the following surgical procedures was undertaken: knee replacement, hip replacement, tonsillectomy and adenoidectomy, hysterectomy, prostatectomy, cataract surgery, or appendicectomy.

The following is a list of the specific Australian Classification of Health Interventions (11th edn) procedure codes which are included in the specifications for each of the selected surgical procedures.

Procedure	Procedure Codes	Description
Knee replacement	49518–00	Total arthroplasty of knee, unilateral
	49519–00	Total arthroplasty of knee, bilateral
	49521–02	Total arthroplasty of knee with bone graft to tibia, unilateral
	49521–00	Total arthroplasty of knee with bone graft to femur, unilateral
	49524–00	Total arthroplasty of knee with bone graft to femur and tibia, unilateral
Hip replacement	49318–00	Total arthroplasty of hip, unilateral
	49319–00	Total arthroplasty of hip, bilateral
Tonsillectomy and adenoidectomy	41789–00	Tonsillectomy without adenoidectomy
	41789–01	Tonsillectomy with adenoidectomy
	41801–00	Adenoidectomy without tonsillectomy
Hysterectomy	35653–01	Total abdominal hysterectomy
	35653-00	Subtotal abdominal hysterectomy
	35653-05	Laparoscopic subtotal abdominal hysterectomy
	35657–00	Vaginal hysterectomy
	35750-00	Laparoscopically assisted vaginal hysterectomy
	35667–00	Radical abdominal hysterectomy
	35653-07	Laparoscopic total abdominal hysterectomy
	35667–01	Radical vaginal hysterectomy
	90443–00	Other excision of uterus
Prostatectomy	37200–03	Suprapubic prostatectomy
	37200–04	Retropubic prostatectomy
	37224–00	Endoscopic destruction procedures on prostate
	37224–03	Endoscopic resection of prostate
	90407–00	Excision of other lesion of prostate
	90408–00	Destruction procedures on prostate

	90408–02	Other closed destruction procedures on prostate
	37209–01	Laparoscopic radical prostatectomy
	37210–01	Laparoscopic radical prostatectomy with bladder neck reconstruction
	37211–01	Laparoscopic radical prostatectomy with bladder neck reconstruction and pelvic lymphadenectomy
	37209–00	Radical prostatectomy
	37210–00	Radical prostatectomy with bladder neck reconstruction
	37211–00	Radical prostatectomy with bladder neck reconstruction and pelvic lymphadenectomy
	37200–05	Other open prostatectomy
	37203–06	Other closed prostatectomy
Cataract surgery	42698–05	Other extraction of crystalline lens
	42698–06	Intracapsular extraction of crystalline lens
	42698–07	Phacoemulsification of crystalline lens
	42698–08	Other extracapsular extraction of crystalline lens
	42731–01	Extraction of crystalline lens with removal of vitreous
Appendicectomy	30571–00	Appendicectomy
	30572–00	Laparoscopic appendicectomy

Limited to public hospitals.

Denominator limited to separations with a separation date between 1 July and 19 May in the reference year.

Denominator excludes separations where the patient died in hospital.

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

Analysis by remoteness and Socio-Economic Indexes for Areas (SEIFA) Index of Relative Socio-Economic Disadvantage (IRSD) is based on usual residence of the person.

Presented per 1,000 separations.

Computation:

1,000 x (Numerator ÷ Denominator)

Calculated separately for each of the specified procedures

Numerator:

Number of separations for public hospitals which meet all of the following criteria:

- The separation is a readmission to the same hospital following a separation in which one of the following procedures was performed: knee replacement, hip replacement, tonsillectomy and adenoidectomy, hysterectomy, prostatectomy, cataract surgery, or appendicectomy (see procedure codes in *Computation description*).
- The readmission occurs within 28 days of the previous date of separation.
- A principal diagnosis for the readmission has one of the following ICD-10-AM codes: T80–T88, E89, G97, H59, H95, I97, J95, K91, M96 or N99.

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 2019-20

Guide for use

Data source type: Administrative by-product data

Data Element / Data Set

Establishment—organisation identifier (state/territory), NNNNN

Data Source

National Hospital Morbidity Database (NHMD)

NMDS / DSS

Admitted patient care NMDS 2019-20

Guide for use

Data source type: Administrative by-product data

Data Element / Data Set

Establishment—sector, code N

Data Source

National Hospital Morbidity Database (NHMD)

NMDS / DSS

Admitted patient care NMDS 2018-19

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 2019-20

Guide for use

Data source type: Administrative by-product data

Data Element / Data Set

Person—person identifier, XXXXXX[X(14)]

Data Source

National Hospital Morbidity Database (NHMD)

NMDS / DSS

Admitted patient care NMDS 2019-20

Guide for use

Data source type: Administrative by-product data

Data Element / Data Set

Episode of admitted patient care—procedure, code (ACHI 11th edn) NNNNN-NN

Data Source

National Hospital Morbidity Database (NHMD)

NMDS / DSS

Admitted patient care NMDS 2019-20

Guide for use

Data source type: Administrative by-product data

Denominator:

Number of separations in which one of the following surgical procedures was undertaken: knee replacement, hip replacement, tonsillectomy and adenoidectomy, hysterectomy, prostatectomy, cataract surgery, appendicectomy.

Denominator 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 2019-20

Guide for use

Data source type: Administrative by-product data

Data Element / Data Set

Establishment—organisation identifier (state/territory), NNNNN

Data Source

National Hospital Morbidity Database (NHMD)

NMDS / DSS

Admitted patient care NMDS 2019-20

Guide for use

Data source type: Administrative by-product data

Data Element / Data Set

Establishment—sector, code N

Data Source

National Hospital Morbidity Database (NHMD)

NMDS / DSS

Admitted patient care NMDS 2019-20

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 2019-20

Guide for use

Data source type: Administrative by-product data

Data Element / Data Set

Episode of admitted patient care—procedure, code (ACHI 11th edn) NNNNN-NN

Data Source

National Hospital Morbidity Database (NHMD)

NMDS / DSS

Admitted patient care NMDS 2019-20

Guide for use

Data source type: Administrative by-product data

Disaggregation:

2019–20—Nationally, by specified procedures, by:

- peer group
- Indigenous status
- remoteness (Australian Statistical Geography Standard (ASGS) 2016 Remoteness Structure)
- 2016 SEIFA IRSD quintiles.

2019–20—State and territory, by specified procedures.

Disaggregation by peer group used the peer group classification as described in the AIHW publication *Australian hospital peer groups*.

Some disaggregations may result in numbers too small for publication.

Disaggregation data elements:

Data Element / Data Set

Establishment—Australian state/territory identifier, code N

Data Source

National Hospital Morbidity Database (NHMD)

NMDS / DSS

Admitted patient care NMDS 2019-20

Guide for use

Data source type: Administrative by-product data

Data Element / Data Set

Establishment—organisation identifier (state/territory), NNNNN

Data Source

National Hospital Morbidity Database (NHMD)

NMDS / DSS

Admitted patient care NMDS 2019-20

Guide for use

Data source type: Administrative by-product data

Used to derive hospital peer group

Data Element / Data Set

Person—Indigenous status, code N

Data Source

National Hospital Morbidity Database (NHMD)

NMDS / DSS

Admitted patient care NMDS 2019-20

Guide for use

Data source type: Administrative by-product data

Data Element / Data Set

Person—area of usual residence, statistical area level 2 (SA2) code (ASGS 2016) N(9)

Data Source

National Hospital Morbidity Database (NHMD)

NMDS / DSS

Admitted patient care NMDS 2019-20

Guide for use

Data source type: Administrative by-product data
Used for disaggregation by remoteness and SEIFA IRSD

Data Element / Data Set

Episode of admitted patient care—procedure, code (ACHI 11th edn) NNNNN-NN

Data Source

National Hospital Morbidity Database (NHMD)

NMDS / DSS

Admitted patient care NMDS 2019-20

Guide for use

Data source type: Administrative by-product data

Comments: Most recent data available for 2022 National Healthcare Agreement performance reporting: 2019–20.

The scope of the 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.

For 2019–20 data, the 2016 SEIFA IRSD quintile and decile data will be produced using the Australian Statistical Geography Standard 2016 geographical unit of Statistical Area Level 2.

Note that for the 2016 and previous reports, disaggregations by public hospital peer group for this indicator were calculated using the peer group classification method as reported in *Australian hospital statistics 2010–11*.

Representational attributes

Representation class: Rate

Data type: Real

Unit of measure: Person

Format: N[NN].N

Indicator conceptual framework

Framework and dimensions: Effectiveness

Safety

Accessibility

Data source attributes

Data sources:

Data Source

National Hospital Morbidity Database (NHMD)

Frequency

Annual

Data custodian

Australian Institute of Health and Welfare

Accountability attributes

Reporting requirements: National Healthcare Agreement

Organisation responsible for providing data: Australian Institute of Health and Welfare

Further data development / collection required: Specification: Substantial work required, the measure requires significant work to be undertaken.

Source and reference attributes

Reference documents: AIHW (Australian Institute of Health and Welfare) 2012. *Australian hospital statistics 2010–11*. Health services series no. 43. Cat. no. HSE 117. Canberra: AIHW. Viewed 28 May 2020, https://www.aihw.gov.au/reports/hospitals/australian-hospital-statistics-2010-11/contents/table-of-contents

AIHW 2015. *Australian hospital peer groups*. Health services series no. 66. Cat. no. HSE 170. Canberra: AIHW. Viewed 28 May 2020, https://www.aihw.gov.au/reports/hospitals/australian-hospital-peer-groups/contents/table-of-contents

Relational attributes

Related metadata references:

Supersedes National Healthcare Agreement: PI 23–Unplanned hospital readmission rates, 2021
Health, Standard 19/11/2020

See also Australian Health Performance Framework: PI 2.1.4–Selected potentially preventable hospitalisations, 2020
Health, Standard 01/12/2020

See also Australian Health Performance Framework: PI 2.1.6–Potentially avoidable deaths, 2020
Health, Superseded 31/03/2023

See also Australian Health Performance Framework: PI 2.1.6–Potentially avoidable deaths, 2021
Health, Superseded 02/02/2024

See also Australian Health Performance Framework: PI 2.2.1–Adverse events treated in hospitals, 2020
Health, Standard 13/10/2021

See also Australian Health Performance Framework: PI 2.4.1–Unplanned hospital readmission rates, 2020
Health, Standard 13/10/2021

See also National Healthcare Agreement: PI 16–Potentially avoidable deaths, 2022
Health, Standard 24/09/2021

See also National Healthcare Agreement: PI 18–Selected potentially preventable hospitalisations, 2021
Health, Standard 16/09/2020

See also National Healthcare Agreement: PI 18–Selected potentially preventable hospitalisations, 2022
Health, Standard 24/09/2021

See also National Healthcare Agreement: PI 22–Healthcare associated infections: Staphylococcus aureus bacteraemia, 2022
Health, Standard 24/09/2021