

# Hospital readmission rates for a mental illness or an addiction QIP (Retired)

## Alternate Name\*

Hospital readmission rates for a mental illness or an addiction QIP

## INDICATOR DESCRIPTION

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### Description\*

Rate of psychiatric (mental health and addiction) discharges that are followed within 30 days by another mental health and addiction admission.

### Indicator Status\*

Active

### HQO Reporting tool/product

Quality Improvement Plans (QIPs)

### Dimension\*

Effective

### Type\*

Outcome

## DEFINITION AND SOURCE INFORMATION

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### Unit of Measurement\*

Rate per 100 discharges

### Calculation Methods\*

Readmission rate is calculated as the number of patients readmitted within 30 days of discharge divided by the number of patients discharged during the study period. OMHRS and CIHI/DAD databases are used to identify index as well as subsequent hospitalizations for mental health and addictions.

### Numerator including inclusion/exclusion\*

Number of individuals with any MH&A hospital readmissions\* within (&le;) 30 days following the incident hospital discharge in the reporting period.

For any MHA hospital discharge (denominator), calculate the following readmissions (numerator):

1. Any MHA Admission during follow-up period:
  - DAD ICD-10-CA Dx10Code1: F04 to F99,
  - or OMHRS DSM-IV: Any hospital admission (including missing diagnosis except for DSM-IV 290.x. 294.x in AXIS1\_DSM4CODE\_DISCH1)

*Exclusions:*

- Patients without a valid health insurance number
- Patients without an Ontario residence
- Gender not recorded as male or female
- Age < 15 or Age > 105
- Invalid date of birth, admission date/time, discharge date/time
- Individuals who die within 30 days of discharge (based on RPDB) before a follow-up or outcome occurs (i.e. a person dies before they have been readmitted or is readmitted but dies before they are discharged)
- Any non-MH&A hospital readmissions\*

**Notes:**

- Separately report the number of individuals who died and re-admitted during the follow-up period overall in all years.
- Calculate within (&le;) 30 days acute care re-admission proportion following the index MH&A hospital discharge date (i.e. Count only one visit per IKN per 30 day follow-up period).
- \*Reason for re-admission can be for a different MH&A reason than the initial MH&A diagnosis.

Incident discharges are restricted to calendar years but 30 day follow-up for readmission can cross over into the next calendar year.

**Denominator including inclusion/exclusion\***

Total number of incident MH&A hospital discharges in the reporting period.

Incident = 1st event in a calendar period without any look-back for past events (If multiple hospital visits in CY, use first). Keep only one discharge person per year.

MH&A Hospital Discharges:

From DAD var DX10CODE1 with any of the following ICD-10-CA codes: F04 to F99

From OMHRS:

- If var AXIS1\_DSM4CODE\_DISCH1 complete\* use AXIS1\_DSM4CODE\_DISCH1
- No, use PROV DX1

\*Complete = listed diagnosis from below present

Exclude OMHRS admissions if AXIS1\_DSM4CODE\_DISCH1 in: (290.x OR 294.x)

Include visits with suspect diagnoses (suspect = T).

With any of the following DSM-IV codes/provisional diagnoses:

- Overall MHA
  - ICD-10-CA: F04 to F99

- DSM-IV: Any (including missing diagnoses, excluding 290.x. 294.x in AXIS1\_DSM4CODE\_DISCH1 which are dementia codes)

\*\* MH&A diagnostic categories represent reason for the incident hospital discharge.

Disposition of hospital discharge:

- From DAD where var DISCHDISP = 2,3,4,5,6,12
- From OMHRS where var DISCHREASON = 1,5,6,7,8
- Exclude discharges with a DAD/OMHRS record within 1 day (i.e. are not a true discharge and are a transfer).

Note: re-hospitalizations (numerator) do not have to result in discharge home

Hospitalizations should be constructed as episodes using the following steps:

1. i) Pull all DAD and OMHRS records between the specified calendar years (CY) being examined for this indicator with an ICD-10-CA primary discharge diagnosis of F04 to F99 or DSM-IV codes, excluding 290.x and 294.x
  - Identify the IKNs found for these records
2. For **only the IKNs identified in the previous step**, pull all DAD records from 1988 onwards and all OMHRS records for all diagnoses, i.e. not only mental health diagnoses, and create episodes by adjoining OMHRS/DAD records that overlap within (+/-) 1 day. These will be considered part of a single episode.
3. Use discharge diagnoses and other variables from the final discharge of the episode
  - Note, if 2 or more records have the same discharge date as the discharge date of the episode, use an OMHRS discharge diagnoses, if applicable (i.e. if one record is DAD and one is OMHRS, take the OMHRS diagnoses)

*Inclusions:*

- 15 - 105 years i.e. Age >=15 and Age <=105 (other stratifications)

*Exclusions:*

- Patients without a valid health insurance number
- Patients without an Ontario residence
- Gender not recorded as male or female
- Age < 15 or Age > 105
- Invalid date of birth, admission date/time, discharge date/time
- Individuals who die within 30 days of discharge (based on RPDB) before a follow-up or outcome occurs (i.e. a person dies before they have been readmitted or is readmitted but dies before they are discharged)

Note: If OMHRS records occurs within 24 hours of discharge/admission from institution then this should be considered as part of the same episode of care.

### Adjustment (risk, age/sex standardization)- detailed

None

### Data Source

Ontario Mental Health Reporting System (OMHRS)

Registered Persons Database (RPDB)

Discharge Abstract Database (DAD)

#### Data provided to HQO by

Ministry of Health and Long-Term Care (MOHLTC)

## OTHER RELEVANT INFORMATION

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### Caveats and Limitations

Individuals admitted to hospital can have more than one condition at a given time and hospitalization data does not represent the number of mental illnesses that led to the hospitalization.

### Comments Detailed

This indicator is slightly different from Public Reporting. Public reporting version is retrospective look of this indicator, QIP version of this indicator is for coming year. This indicator was retired for QIP 2019/20(due to significant methodology change). A revised version of indicator has been available in Indicator Library.

## TAGS

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### TAGS\*

Acute Care/Hospital

Outcome

Mental Health and Addiction

Effective

Ontario Mental Health Reporting System (OMHRS)

Registered Persons Database (RPDB)

Discharge Abstract Database (DAD)

## PUBLISH

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### PUBLISH DATETIME\*

20/03/2019 13:26:00