

Risk-adjusted 30-day all-cause readmission rate for patients with congestive heart failure (quality based procedures cohort) (Retired)

Alternate Name*

Risk-adjusted 30-day all-cause readmission rate for patients with congestive heart failure (quality based procedures cohort)

INDICATOR DESCRIPTION

Description*

The measuring unit of this indicator is an admission for congestive heart failure (CHF), as defined for quality-based procedures (QBP). Results are expressed as the risk-adjusted all-cause 30 day non-elective readmission rate among patients admitted to Ontario acute care facilities.

Indicator Status*

Retired

HQO Reporting tool/product

Quality Improvement Plans (QIPs)

Dimension*

Effective

Type*

Outcome

DEFINITION AND SOURCE INFORMATION

Unit of Measurement*

Rate

Calculation Methods*

The rate is calculated as: numerator divided by denominator

Numerator including inclusion/exclusion*

Number of admitted patients with congestive heart failure discharged with a readmission within 30 days.

Denominator including inclusion/exclusion*

Total number of congestive heart failure index discharges from hospital

Inclusions:

- Ontario residents with a valid health card number
- Age \geq 20 years
- Most responsible diagnosis of congestive heart failure

Exclusions:

- Surgical cases
- Records with missing admission or discharge dates
- Records where patient had an acute transfer out, or where discharge disposition is sign out or death

Adjustment (risk, age/sex standardization)- detailed

Age, gender, Charlson co-morbidity index, case mix, previous inpatient admissions within 30, 60 or 90 days as a general proxy for patient complexity, calendar year

Data Source

Discharge Abstract Database (DAD)

Data provided to HQO by

Ministry of Health and Long-Term Care (MOHLTC)

OTHER RELEVANT INFORMATION

Comments Detailed

This is a QIP priority indicator for 2018/19. QIP Current performance reporting period: January 2016 - December 2016
How to access the data: To access your organization's data for the reporting period, refer to Health Quality Ontario's QIP Navigator. Data will be available in February 2018. This indicator provides an opportunity to incorporate QBP indicators into the QIP for specific QBP Cohorts. The expectation is that hospitals will consider including within their QIP one of the QBP readmission indicators, but hospitals are not expected to include all three. Organizations are encouraged to consider QBP process measures and change ideas to reduce readmissions for one of these select groups. QBP Baseline Reports are accessible through the password-protected Health Data Branch web portal: <https://hsimi.on.ca/hdbportal/>. This indicator was retired in the 2019/20 QIP.

TAGS

TAGS*

Acute Care/Hospital

Outcome

Readmission

Effective

Discharge Abstract Database (DAD)

PUBLISH

PUBLISH DATETIME*

05/03/2019 17:45:00