

# Risk-adjusted 30-day all-cause readmission rate for patients with stroke (quality based procedure cohort) (Retired)

## Alternate Name\*

Risk-adjusted 30-day all-cause readmission rate for patients with stroke (quality based procedure cohort)

## INDICATOR DESCRIPTION

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### Description\*

The measuring unit of this indicator is an admission for stroke, as defined for the QBP. The result is risk-adjusted all-cause 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

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### Unit of Measurement\*

Rate

### Calculation Methods\*

This rate is calculated as: numerator divided by denominator.

### Numerator including inclusion/exclusion\*

Number of admitted patients with stroke discharged with a readmission within 30 days.

### Denominator including inclusion/exclusion\*

Total number of stroke index discharges from hospital.

*Inclusions:*

- Ontario residents with a valid health card number
- Age  $\geq$  18 years
- Most responsible diagnosis of stroke or transient ischemic attack

*Exclusions:*

- Most responsible diagnosis of transient global amnesia or cerebral infarction due to cerebral venous thrombosis
- Records with stroke as a post-admit complication
- Missing admission date, discharge date or age
- 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, Pre-admit co-morbidities, secondary co-morbidities and any service transfer diagnoses, case mix, calendar year.

**Data Source**

Discharge Abstract Database (DAD)

**Data provided to HQO by**

Ministry of Health and Long-Term Care (MOHLTC)

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**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: 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.

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**TAGS**

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Acute Care/Hospital

Outcome

Readmission

Effective

Discharge Abstract Database (DAD)

## PUBLISH

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### PUBLISH DATETIME\*

05/03/2019 17:45:00