

# Hospital readmission rate for primary care patient population QIP

## Alternate Name\*

Hospital readmission rate for primary care patient population within 30 days QIP

## INDICATOR DESCRIPTION

---

### Description\*

Percentage of patients who were discharged in a given period for a condition within selected HBAM Inpatient Grouper HIGs and had a non-elective hospital readmission within 30 days of discharge, by primary care practice model.

Readmission for patients with an acute inpatient hospital stay for:

- Acute Myocardial Infarction
- Cardiac conditions (excluding heart attack)
- Congestive heart failure
- Chronic obstructive pulmonary disease
- Pneumonia
- Diabetes
- Stroke
- Gastrointestinal disease

who after discharge have a subsequent non-elective readmission within 30 days

### HQO Reporting tool/product

Quality Improvement Plans (QIPs)

### Dimension\*

Effective

### Type\*

Outcome

## DEFINITION AND SOURCE INFORMATION

---

### Unit of Measurement\*

Hospital readmission rate  
for primary care patient  
population QIP

<http://indicatorlibrary.hqontario.ca/Indicator/Summary/Hospital-readmission-rate-primary-care-patient-QIP/EN>

Percentage

#### Calculation Methods\*

The percentage is calculated as: numerator divided by denominator times 100.

#### Numerator (short description i.e. not inclusions/exclusions)\*

Total number of rostered patients with a hospital readmission in a given time period within 30 days after a discharge for selected HIGs.

#### Denominator (short description i.e. not inclusions/exclusions)\*

Total number of rostered patients who were discharged for a selected condition (based on HIG) in a given time period.

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

None

#### Data Source

Client Agency Program Data (CAPE)

Corporate Provider Database (CPDB)

Discharge Abstract Database (DAD)

#### Data provided to HQO by

In-house data collection

#### Reported Levels of comparability /stratifications (defined)

Time

Institution

Region

## OTHER RELEVANT INFORMATION

---

#### Caveats and Limitations

All numbers used for calculations are as reported by hospitals. The information is from each hospital and the assignment to a LHIN is based on the postal code of the primary care group practice primary address. Cells based on counts between 1 and 5 have to be suppressed.

#### Comments Summary

This is a QIP additional indicator for 2017/18. QIP Current performance reporting period: April - March the following year

## TAGS

---

#### TAGS\*

Primary Care

Outcome

Readmission

Effective

Client Agency Program Data (CAPE)

Corporate Provider Database (CPDB)

Discharge Abstract Database (DAD)

## PUBLISH

---

### PUBLISH DATETIME\*

22/12/2016 10:48:00