MENTAL HEALTH INDICATORS: WITHIN 30-DAY HOSPITAL RE-ADMISSION

OECD HCQI Expert Meeting

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Data are collected in two different ways:

- The *first group* of indicators refers to the **average re-admissions per patient** (as collected in the last HCQI data collection), and

- the *second group* of indicators refers to the **proportion of patients with within 30-day re-admission**.
Index admission is the first admission in a calendar year presenting the codes for the relevant condition (either schizophrenia or bipolar disorder) as principal diagnosis or as one of the first two listed secondary diagnosis.
Total number of re-admissions with a mental condition code (ICD-10 codes F10-F69 and F90-99) as principal diagnosis or as one of the first two listed secondary diagnosis within 30 days from discharge from the index admission.
Counting within 30-day re-admissions

- In the case of **patients being re-admitted more than once** after the index admission in the same calendar year, each of the re-admissions occurring within 30 days with a mental condition code (ICD-10 codes F10-F69 and F90-99) from a previous admission, regardless of whether this last has been already considered a re-admission, is counted.

  In the example above, all 5 Reas (readmissions) are counted as within 30-day re-admissions.
Total number of patients with at least one re-admission with a mental condition code (ICD-10 codes F10-F69 and F90-99) as principal diagnosis or as one of the first two listed secondary diagnosis within 30 days from discharge from the index admission. If the patient has been re-admitted more than once within 30 days, it counts for only one patient.
Denominator and exclusions: both groups of indicators

• Denominator:
  Total number of index admissions

• Exclusions from both numerator and denominator:
  – Same day separations (less than 24 hours),
  – Transfers, and
  – Patients who died during the calendar year.
Supplementary data

• Following **supplementary data** are requested:
  – Provision of inpatient mental care by type of facilities, and
  – Data coverage by type of facilities.

• Average length of stay is also asked to explore a potential relationship with re-admissions at the national level.
OUTLINE OF PRESENTATION

• Overview of “Mental Health Systems in OECD Countries” project

• Present definitions of 2 new and 1 previously piloted indicators

• Discussion
Forthcoming mental health publication

• Published mid-2013

• Outline of chapters:
  – Summary and recommendations
  – Quality and outcomes of mental health care
  – Costs and expenditures of mental health care
  – Organisation, payment and performance of specialist care provision.
  – Integrating mental health into primary care
  – Governance of the mental health care system
Quality and outcomes of mental health care

- Rejuvenation of HCQI mental health expert sub-group

- Benchmarking group
  - Discuss and share data on potential new HCQI indicators
  - Examined feasibility of collecting data whose definitions we’re presenting today along with others (e.g. involuntary admissions, coercive measures, primary care, overall mortality)
  - Bring together work of other international initiatives in this area
1.a) In-patient suicides among people hospitalised for a mental disorder

**Numerator:** Total number of patient (ages 15+) discharges coded as suicide (ICD-10 codes: X60-X84) in the reference year with a primary diagnosis or first two listed secondary diagnoses (upon admission) coded as mental and behavioural disorders (ICD-10 codes F10-F69 AND F90-99)

**Denominator:** Total number of patient (ages 15+) discharges with a principal diagnosis or first two listed secondary diagnoses defined as all mental health and behavioural disorders (ICD-10 codes F10-F69 and F90-99)
1.b) In-patient suicides among people hospitalised for bipolar and schizophrenia disorders

- **Numerator:** Total number of patient (ages 15+) discharges coded as suicide (ICD-10 codes: X60-X84) in the reference year with a primary diagnosis or first two listed diagnoses (upon admission) coded as schizophrenia (ICD-10 codes F20-F25.9) and bipolar (ICD-10 code F31) disorders.

- **Denominator:** Total number of patient (ages 15+) discharges with a principal diagnosis or first two listed secondary diagnoses defined as schizophrenia (ICD-10 codes F20-F25.9) and bipolar (ICD-10 code F31) disorders.
2.a) Deaths after discharge from suicide among people hospitalised for a mental disorder

- **Numerator:** Total number of patients (ages 15+) that commit suicide (ICD-10 codes X60-X84) after discharge in the reference year with a principal diagnosis or first two listed secondary diagnoses (ICD-10 codes F10-F69 and F90-F99)

- **Denominator:** Total number of patients (ages 15+) discharged in a reference year with a principal diagnosis or first two listed secondary diagnoses (ICD-10 codes F10-F69 and F90-F99)
2. b) Deaths after discharge from suicide among people hospitalized for schizophrenia and bipolar disorders

- **Numerator:** Total number of patients (ages 15+) that commit suicide (ICD-10 codes X60-X84) after discharge in the reference year with a principal diagnosis or first two listed secondary diagnoses defined as schizophrenia (ICD-10 codes F20-F20-25.9) and bipolar (ICD-10 code F31) disorders

- **Denominator:** Total number of patients (ages 15+) discharged in a reference year with a principal diagnosis or first two listed secondary diagnoses defined as schizophrenia (ICD-10 codes F20-F20-25.9) and bipolar (ICD-10 code F31) disorders
Excess mortality for patients with bipolar disorder

- **Numerator**: Standardised “all cause” mortality rate for persons under 75 years old with diagnosis of bipolar disorder (ICD-10 code F31) during a 12-month reporting period

- **Denominator**: Standardised “all cause” mortality rate for persons under 75 years old during a 12-month reporting period
Excess mortality for patients with schizophrenia disorder

- **Numerator**: Standardised “all cause” mortality rate for persons under 75 years old with diagnosis of schizophrenia during a 12-month reporting period (ICD-10 codes F20-F20-25.9)

- **Denominator**: Standardised “all cause” mortality rate for persons under 75 years old during a 12-month reporting period
Experts are invited to:

• COMMENT on the indicators presented