## **Calvary Mater Newcastle:** Activity profiles, potentially avoidable admissions for COPD and CHF July 2009 to June 2010

		Same period last year	Change since one year ago
Total hospitalisations <sup>1</sup>	12,645	12,699	0%
Select medical hospitalisations <sup>2</sup>	8,099	8,119	0%
Total potentially preventable hospitalisations <sup>3</sup>	1,508	1,436	5%
Chronic Obstructive Pulmonary Disease (COPD) admissions <sup>4</sup>	288	295	-2%
Congestive Heart Failure (CHF) admissions <sup>4</sup>	208	214	-3%

#### Rates per 1,000 select medical hospitalisations<sup>5</sup>

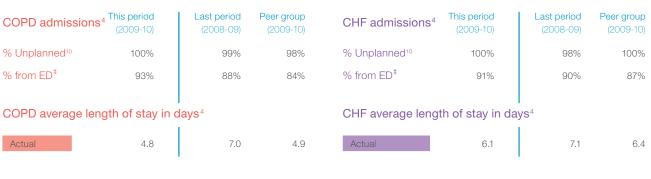
	<b>This period</b> (2009-10)		e <b>er group</b> (2009-10)	$CHF^4$	<b>This period</b> (2009-10)	Last period (2008-09)	Peer group (2009-10)
Actual	35.5	36.1	32.7	Actual	25.7	26.5	22.5
Standardised	31.6	53.8†	31.9	Standardised	22.1	24.0	21.9
95% CI	(27.7 - 35.8)	(21.4 - 89.0) (28.	.1 - 36.1)	95% CI	(18.9 - 25.5)	(20.4 - 28.0)	(18.8 - 25.4)

# **Calvary Mater Newcastle:** Patient profiles, potentially avoidable admissions for COPD and CHF July 2009 to June 2010

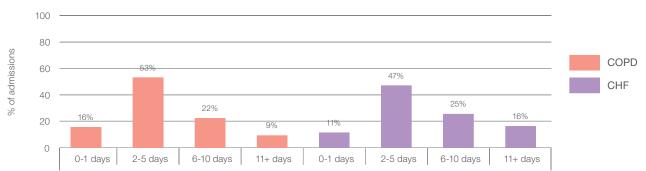


### **Calvary Mater Newcastle:** Hospital stay profiles, potentially avoidable admissions for COPD and CHF

July 2009 to June 2010

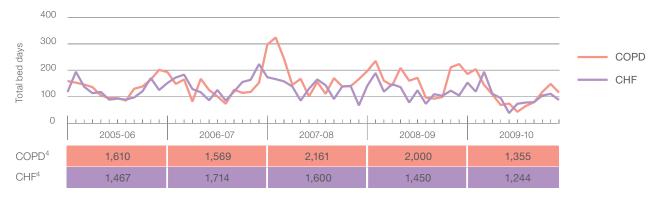


Length of stay profiles



#### Calvary Mater Newcastle: Total bed days, potentially avoidable admissions for COPD and CHF

July 2005 to June 2010 (monthly)



- (\*) Suppressed: relative standard error  $\ge$  40%. (†) Interpret with caution:  $30\% \le$  relative standard error < 40%.
- 1. A hospitalisation corresponds to one 'episode of care'. A single patient can have multiple hospitalisations in the time period.
- 2. Excludes hospitalisations for renal dialysis, obstetrics, psychiatry, and all surgery.
- 3. Potentially preventable hospitalisations as defined in: The health of the people of NSW Report of the Chief Health Officer 2010.
- 4. For criteria used for COPD / CHF admissions, see *Technical Supplement* at www.bhi.nsw.gov.au
- 5. Rates are directly standardised to the NSW admitted patient population 2009-10 on the basis of age, sex, and socioeconomic status.
- 6. Index of Relative Social Disadvantage (IRSD), as defined by the Australian Bureau of Statistics.
- 7. Smoking status as recorded on admission: termed *current* if patient smoked tobacco within last month; *previous* if patient smoked tobacco in the past but excluding last month.
- 8. We use the term Aboriginal, rather than Aboriginal and Torres Strait Islander in line with NSW Health usage, which recognises that Aboriginal people are the original inhabitants of NSW.
- 9. Postcode of usual residence at time of admission classified as outer regional or remote.
- **10.** Admissions with emergency status of 'non-emergency / planned'.
- Note: Only records with valid and non-missing data are included in each analysis.

Note: Length of stay and total bed days calculated on 'acute' episodes only (comprising 98.7% COPD and 97.4% CHF PAAs). Note: Additional detail and definitions can be found in the Bureau's *Technical Supplement* at www.bhi.nsw.gov.au

Source: Admitted Patient Data Collection. Health Information Exchange, NSW Health. Data extracted on 28 February 2011.

(<sup>‡</sup>) Emergency Department