

Detailed Mortality Comparisons Report

Key benefits

- ❑ *Keeping your patients safe*
- ❑ *Track excess mortality for nights and weekends*
- ❑ *Access to support with our expert analysts*
- ❑ *Investigate down to the patient level*

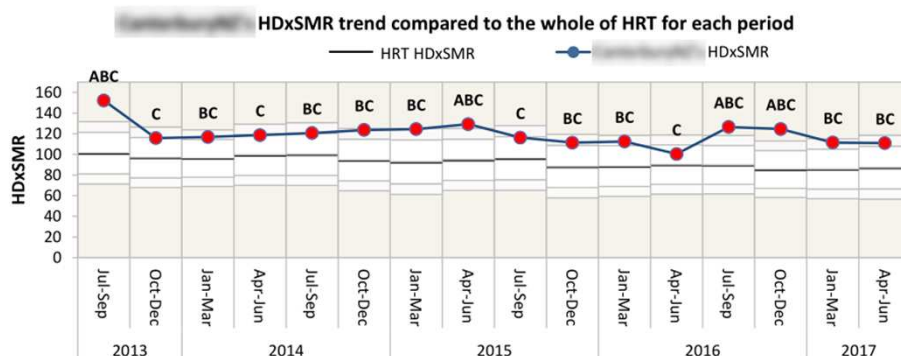
What you need to do

- ❑ *Designate a mortality data liaison person to act as contact for questions and follow-up*
- ❑ *Review the reports to learn where improvement is needed, and provide feedback on ways to improve reporting*
- ❑ *Upload data quarterly by the assigned deadlines*

Mortality Data Analysis

The Health Roundtable provides quarterly updates on the in-hospital standardised mortality rate (HSMR) for each member health service. The approach is consistent with that used by governments in England, Canada and Australia, but is standardised on the extensive multi-year database of our own member hospitals. Our mortality analysis is based on a period of data containing over 9 million patient care episodes and around 100 thousand deaths.

A new methodology was introduced in late 2016 that uses a more detailed analysis of diagnoses to determine risk of death. This new HDxSMR (Hospital Diagnosis Standardised Mortality Ratio) is based on a model with improved predictive accuracy, better adjusting for differences between patients. You can use our updated episode viewer to see the risk calculation in action with a diagnosis by diagnosis breakdown at the individual patient level.



HDxSMR breakdown by ICD10 chapter of principal diagnosis

Jul 2016 - Jun 2017

The graphic indicates the degree to which the ratio of your SMR to the target SMR is different to 1. The estimate of standard deviation takes into account possible variation in the target SMR as well as your own SMR.

Chapter	Episodes	Deaths	Expected deaths	SMR	HRT SMR	NSW SMR	Compared to HRT SMR	Compared to NSW SMR	Quarterly trend
1 Infectious and Parasitic Diseases	814	32	52.7	0.61	0.76	0.73			
2 Neoplasms	2,561	70	49.8	1.41	0.99	1.01			
3 Blood Diseases	1,609	5	2.7	1.85	0.77	0.70			
4 Endocrine, Nutritional Metabolic	328	3	4.5	0.66	0.89	0.81			
5 Mental & Behavioural Disorders	1,588	4	10.8	0.37	0.86	0.72			
6 Diseases of Nervous System	1,746	5	6.6	0.75	0.71	0.66			
7 Diseases of Eye and Adnexa	226	0	0.1	0.00	0.20	0.09	n/a	n/a	
8 Diseases of Ear and Mastoid	165	1	1.0	0.99	0.12	0.11			
9 Diseases of Circulatory System	4,054	81	118.6	0.68	0.95	0.84			
10 Diseases of Respiratory System	1,761	59	88.1	0.67	0.89	0.78			
11 Diseases of Digestive System	3,039	28	34.8	0.81	0.89	0.82			

Episode Viewer

Episode number:	Code	Position	DorP	Onset	CHADx v5.0	Description
URNUM:	A419	1	D	2	4.01	Sepsis, unspecified
Sex:	M	S398	2	D	2	3.03 Other specified injuries of abdomen, lower back and pelvis
Age in years:	65	T138	3	D	2	3.03 Other specified injuries of lower limb, level unspecified
Age in months:	-	W188	4	E	2	- Other specified fall on same level
Age in days:	-	Y929	5	E	2	- Unspecified place of occurrence
Ethnicity:	Maori	U732	6	D	2	- Resting, sleeping, eating or other vital activities
Admit date:	Wed 28/01/2015 9:04	I959	7	D	1	5.06 Hypotension, unspecified
Discharge date:	Thu 29/01/2015 6:05	R000	8	D	1	5.03 Tachycardia, unspecified
Procedure date:	Wed 28/01/2015 0:00	E1171	9	D	2	- Type 2 diabetes mellitus with multiple microvascular and
Discharge unit:	Intensivist Medicine - ICU	E1122	10	D	2	- Type 2 diabetes mellitus with established diabetic nephr
AR-DRG 7.0:	T60A SEPTICAEMIA + CCC	N185	11	D	2	- Chronic kidney disease, stage 5
		I10	12	D	2	- Essential (primary) hypertension
Principal diagnosis:	A419	E1131	13	D	2	- Type 2 diabetes mellitus with background retinopathy

ENQUIRIES

General Manager

Australia +61 2 8041 1421

New Zealand +64 9 889 2551

General.Manager@healthroundtable.org