Toronto Central LHIN Quality Indicators: Preliminary Results from the CSS Small Dot Indicators

May 27, 2013
Presentation at CSS Sector Table

Today's Objectives

- Update on Quality indicators data collection and reporting to date

- Share some results from the System level report

- Share results from CSS Sector

- Next steps for data collection and analysis

- Solicit feedback on:

  - Results and interpretation of indicators

  - Strategies that can be employed by CSS agencies and sector as a whole to improve performance of the indicators

Big Dot System Indicators

⭐ 1. Inpatient readmissions within 30 days of discharge for selected CMGs (Stroke, COPD, CHF, Cardiac CMGs, Pneumonia, Diabetes, GI, Asthma, MH, and Addictions)

⭐ 2. Repeat unscheduled ED use within 30 days for any reason (may focus on CTAS 4 & 5)

⭐ 3. Patient experience and communication of discharge information to patients (e.g. danger signals to watch after going home, purpose of medications, how to take medications, side effects of meds, when to resume usual activities after inpatient stay, who to call if they need help) (*NRC Picker and other surveys*)

4. 90th Percentile decision time (Number of days from the date that the referral is sent to final response (Accept, Deny)). (Acute/Rehab/CCC/LTC/CCAC/CSS/CMHA) (*RM&R and other databases)*

5. 90th Percentile waiting time from acceptance to admission (Acute/Rehab/CCC/LTC/CCAC/CSS/CMHA) (*RM&R and other databases*)

⭐ 6. Percent of patients with complex high care needs identified that are targeted/receiving appropriate care (e.g. intensive case management (*Developmental*)

⭐ Align with Health Links indicators

3

CSS Indicator Status

System (Big Dot) Indicator	Sector Specific (Small Dot) Indicator	Status
1) Inpatient Readmissions within 30 Days for selected CMGs CMGs: (Stroke), COPD, CHF, Cardiac CMGs, Pneumonia, Diabetes, GI, Asthma, Mental Health, and Addictions	1a) Percent of CSS Clients Discharged From Hospital Who Are Readmitted Within 30 Days for Any Reason	Q3 2012/13 (Manual tracking)
	1b) Average Number of Readmissions for CSS Clients Discharged from Hospital Who are Readmitted Within 30 Days for Any Reason	Q3 2012/13 (Manual tracking)
2) Repeat Unplanned Emergency Visits within 30 Days for any Condition	2a) Percent of CSS Clients with Repeat Unscheduled Emergency Department (ED) Visits Within 30 Days for Any Reason	Q3 2012/13 (Manual tracking)
	2b) Average Number of Repeat Unscheduled Emergency Department (ED) Visits for CSS Clients Within 30 Days for Any Reason	
3) Patient experience and communication of discharge information to patients (NRC Picker and other surveys)	3a) Percent of CSS Clients Who Had Care Plans Developed With Information from Discharge Communications	Q3 2012/13 (Manual tracking)
	3b) Percent of Clients Receiving CSS Services Who Transition to Hospital With Relevant Care Information	Q3 2012/13 (Manual tracking)
4) 90th Percentile Decision Time – For Patients Leaving the Hospital to the Community or Another Sector (Acute/Rehab/CCC/CCAC/LTCH /Convalescent/CSS/CMHA) (RM&R and others)	4 - Average Decision Time for patients leaving the hospital to the community	Q3 2012/13 (RMR)
5) 90th Percentile Admission wait time (for Acute/Rehab/CCC/LTCH /CMHA); Assessment Time (for CCAC/CSS)(RM&R and others)	5a – Average Assessment Time	Q3 2012/13 (RMR)
	5b – Wait Time for CSS Services (developmental)	Not available
6) Appropriate Care for complex populations	6 - Appropriate management of CSS clients with complex high care needs (*developmental*)	Not available

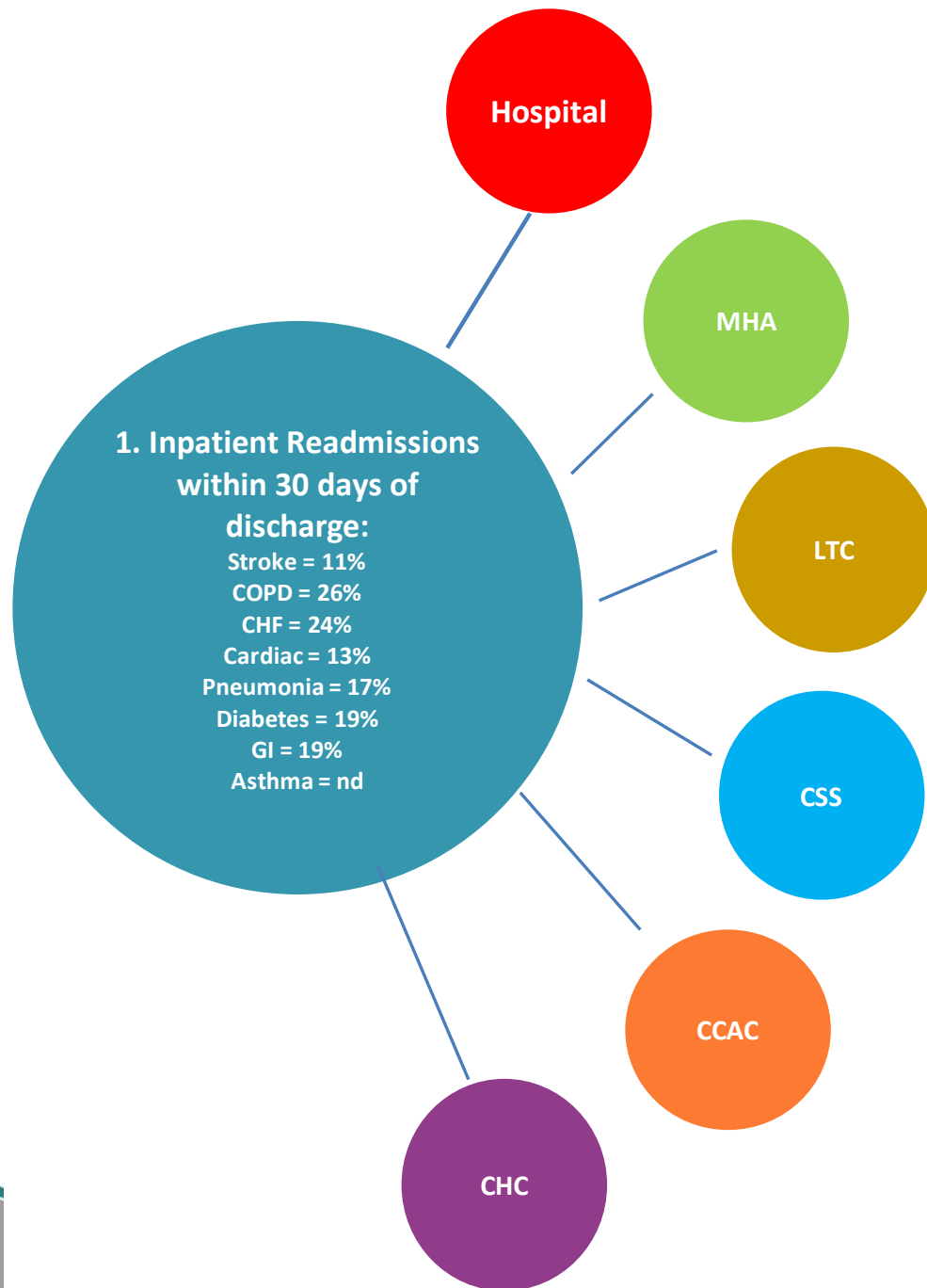# Indicator Reporting Process

2 Types of Reports

1. System level report
   - Overall big dot indicator performance (summary table and charts showing trends)
   - Big dot and sector specific indicator results with ranges showing variation in sectors
   - Highlights from sector specific indicators

2. Sector specific reports
   - Summary of performance for small dots (and some big dots)
   - Detailed graphs for performance for most recent period
   - Graphs by provider showing trends
   - More detailed breakdown of indicators

Big Dot Indicator		Current Period	Current Period Results	Trend	Minimum (HSP level)	Maximum (HSP level)	Ontario	Target
Big Dot 1: Inpatient Readmissions within 30 days for selected CMGs	Cardiovascular	Q1 2012/13	11%	↓	11%	14%		11%
	Congestive heart failure	Q1 2012/13	24%	↓	17%	31%		18%
	Chronic obstructive pulmonary disease	Q1 2012/13	25%	↑	22%	35%		19%
	Cerebrovascular accident	Q1 2012/13	10%	↔	0%	14%		8%
	Diabetes mellitus	Q1 2012/13	16%	↓	0%	24%		12%
	Gastrointestinal	Q1 2012/13	20%	↔	15%	25%		17%
	Pneumonia	Q1 2012/13	17%	↓	13%	20%		13%
	Total	Q1 2012/13	19%	↔				16%
Big Dot 2: Repeat Unscheduled ED use within 30 days for any reason	Mental Health	Q1 2012/13	25%	↓	11%	48%	18%	
	Substance Abuse	Q1 2012/13	38%	↓	0%	67%	30%	
	All	data not currently available						
Big Dot 3: Patient experience and communication of discharge information to patients	**Inpatient:** Did they tell you what danger signals re: illness/operation to watch for?	Q1-Q3 2012/13	64.0%		na	na	59%	
	Emergency: Were you told what danger signals re: illness/injury to watch out for?	Q1-Q3 2012/13	48.0%		na	na	61%	
	Rehab: I was given adequate information about how to monitor my condition for problems and danger signals.	2010/11	62.0%		na	na		
Big Dot 4: 90th Percentile Decision Time	Rehab/CCC	Q3 2012/13	6.25	↑	3	10		
	In home services		nd					
	LTC	Q3 2012/13	14	↑	2	244		
	CSS services (Response time)	Q3 2012/13	3	↓	1	14		
Big Dot 5: 90th Percentile Waiting Time from acceptance to admission	Rehab/CCC	Q3 2012/13	8	↓	5	14		
	In home services		nd					
	LTC	Q3 2012/13	231	↓	22	848		
	CSS services (Assessment time)	Q3 2012/13	9	↔	1	20		
Big Dot 6: Percent of patients with complex high care needs identified that are targeted/receiving appropriate care		data not currently available						

Hospital

MHA

LTC

CSS

CCAC

CHC

1. Inpatient Readmissions within 30 days of discharge:
Stroke = 11%
COPD = 26%
CHF = 24%
Cardiac = 13%
Pneumonia = 17%
Diabetes = 19%
GI = 19%
Asthma = nd

1a) Percent of patients with full medication reconciliation completed at discharge from any hospital to another setting — 89% 46 - 100%
1b) Percent of patients with a completed discharge summary upon discharge from hospital — developmental

1a) Rate of unplanned ED visits for frequent users from Tronto Community Addictions (TCAT) project clients — nd
1b) Rate of unplanned ED visits for frequent users of Addictions Supportive Housing (ASH) project clients — nd

1a) Number and percent of LTC residents with acute inpatient hospital admission by reason for admission — nd
1b) Percentage of inpatient hospital readmissions within 30 days for LTC residents — nd

1a) CSS clients discharged from hospital who are readmitted within 30 days for any reason
- Supportive Housing — 16% 0 -100%
- Enhanced Adult Day Programs — 10% 0 - 17%
1b) Average number of readmissions
- Supportive Housing — 1 0 -3
- Enhanced Adult Day Programs — 1 0 -1

1) Percent of CCAC clients admitted to CCAC from an acute hospital who have a readmission within 30 days of CCAC admission — 18%

1a) Percentage of CHC clients who were able to see their Health Care Provider on the same or next day the last time they were sick or needed medical attention — nd
1b) Inpatient readmissions for CHC clients wihtin 30 days of discharge from hospital — nd

Process of CSS data collection and validation to date

- CSS indicators are currently for selected sectors: Supportive Housing, Enhanced Adult Day Program, and agencies participating in RMR (CNAP)

- Have been receiving RMR data, and working with CSS Sector Subgroup and RMR team to refine indicators and address issues identified

- Excel data entry developed and sent to agencies to collect new data (ED visits, admissions, use of communication information)

- Sent out first Survey Monkey template in February 2013 to collect manually extracted data

- Have been streamlining data collection process – contacted individual agencies to address issues, revised Survey Monkey template, revised process of sending out template, currently revising data entry template.

Theme 1: Appropriate Access to Care – Focus on avoidable time in hospital summary

Readmissions, Q3 2012/13

- Total of 132 inpatient admissions for SH clients and 11 for eADP clients. Wide variation by agency, ranging from 0-32 (SH) and 1-6 (eADP).

- Overall, there was 20% rate of readmissions for SH clients (range 0%-100%) and 17% for eADP clients (range 0-17%).

Repeat ED use, Q3 2012/13

- Total of 159 ED visits for SH clients and 11 for eADP. Wide variation by agency, ranging from 0-42 (SH) and 2-7 (eADP).

- Overall, there was 39% rate of repeat ED visits or SH clients (range 0%-100%) and a 11% for eADP clients (range 0-14%).

Reflections/Interpretation

Variation in # of clients visiting ED and being admitted could partly be explained by the # and types/acuity of clients served by different agencies. However, we need to better understand the causes in variation in rates of repeat ED visits and inpatient readmissions among CSS agencies.

Issues/Data limitations:

- Not all agencies reported data for this first round
- Some rates are not stable due to small numbers of clients reported for ED and admission
- Possible underestimation of the problem since agencies may not be aware of some clients' hospital use

9

1a) % of CSS Clients (unique) discharged from hospital who are readmitted within 30 days for any reason (Supportive Housing), Q3 2012/13
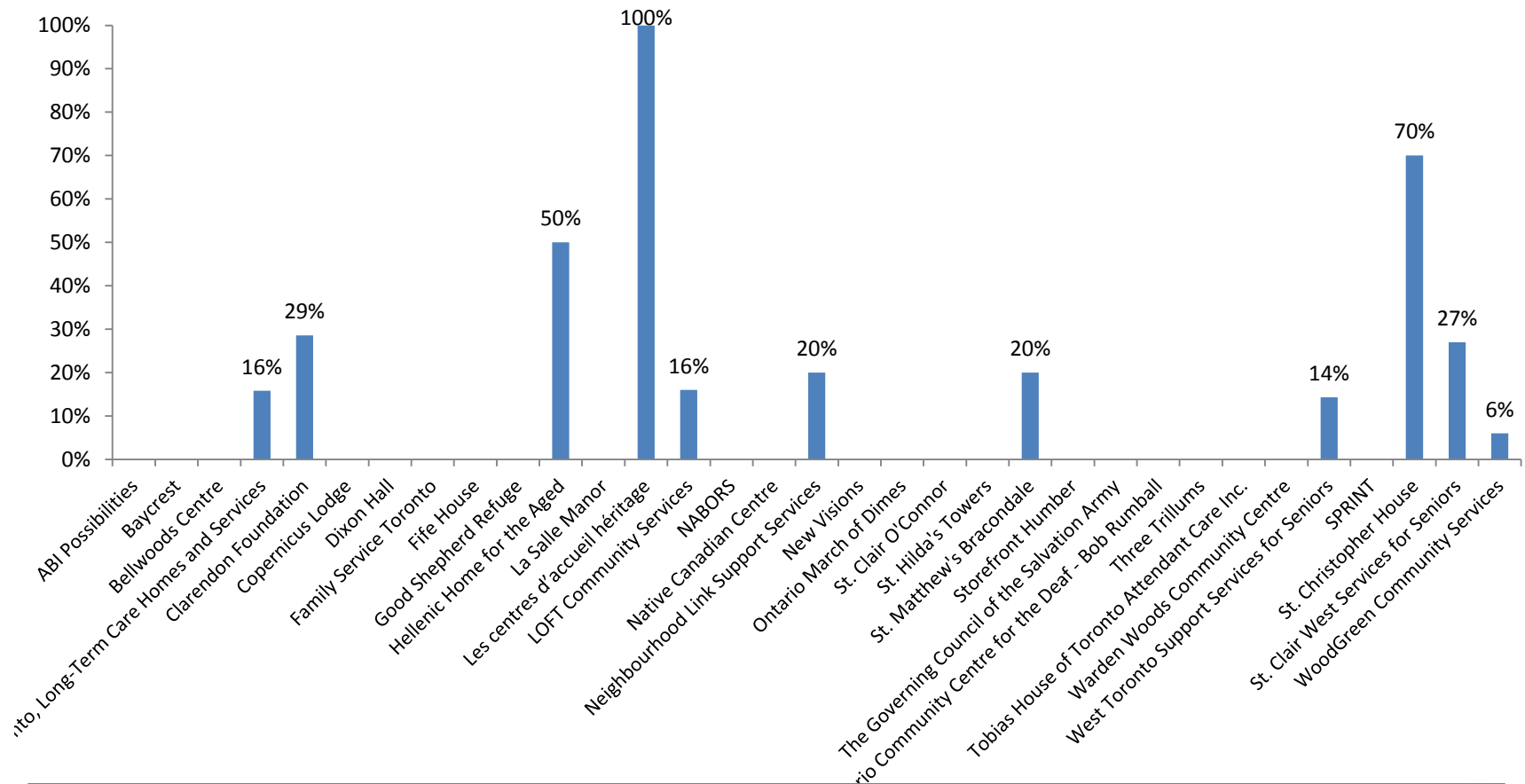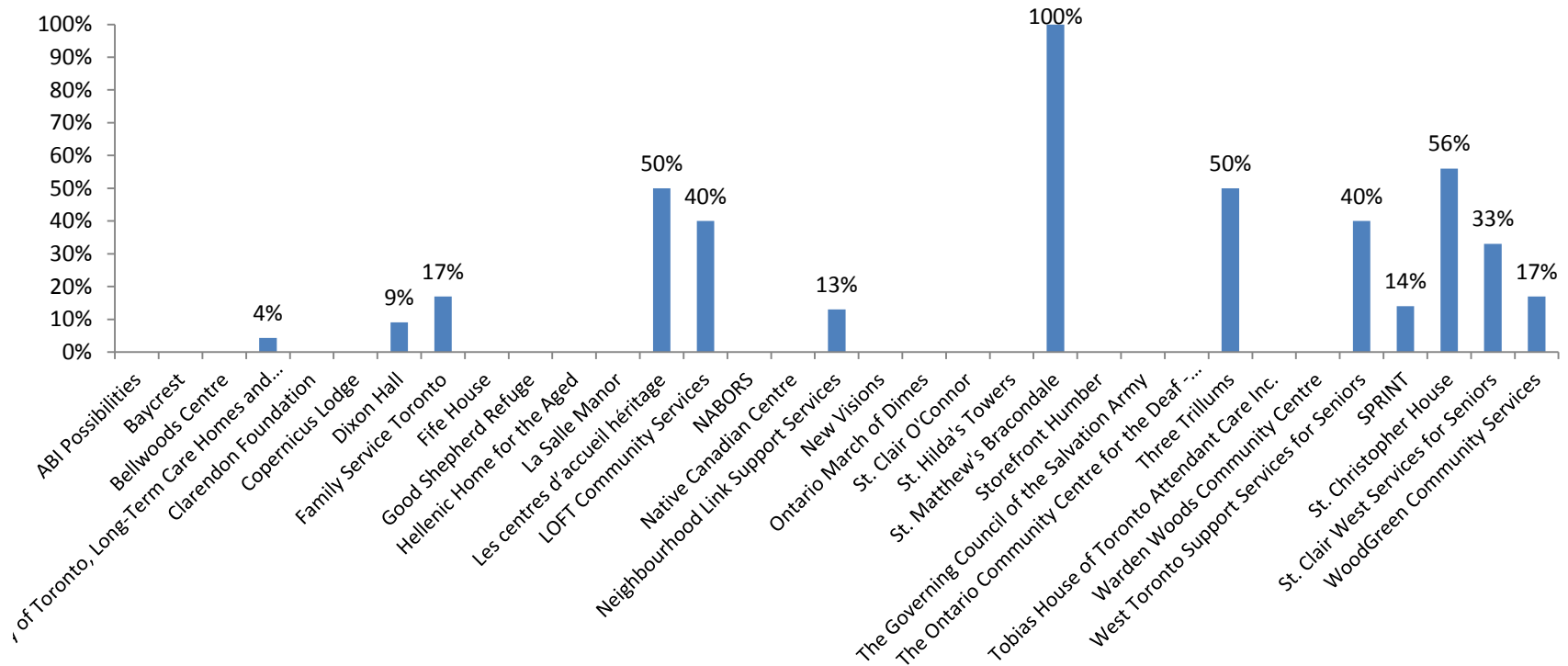

Note: High or low percentages may be attributable to low client volumes.
Interpretation: Overall 20% of the 132 SH clients admitted to hospital were readmitted within 30 days. Readmission rates varied considerably by agency, from 0-100%.

The average number of readmissions for different agencies ranged from 0-3.3 over the quarter period. (results not shown)

2a) % of CSS Clients with Repeat Unscheduled Emergency Department (ED) Visits Within 30 Days for Any Reason (SH) – Q3 2012/13

Note: High or low percentages may be attributable to low client volumes

Interpretation: Within the quarter, 159 supportive housing clients visited the ED and of these, 39% had a repeat visit within 30 days. The percentage of CSS clients with Repeat Unscheduled ED visits within 30 days ranged from 0% to 100%.

The average number of repeat unscheduled ED visits within 30 days ranged from 0 to 9 visits over the quarter period. *(results not shown)*

Theme 2: Transitions of Care – Focus on Patient Experience – Communication/Information Transfer During Transition

Care Plans developed with information from Discharge communications:

- Only a few clients discharged from hospital had written discharge communications. However, of the 49 SH clients who were discharged from hospital with written discharge communication, the majority had care plans developed that incorporated this information

Clients who transition to hospital with relevant care information

- Of the SH clients who were transferred to hospital by EMS, 64% had relevant care information. There was some variation among agencies, ranging from 0% - 100%.

Reflections/Interpretation

More work still needs to be done regarding communication of information between hospitals and CSS agencies for clients transitioning between these two sectors. Hospitals should be encouraged to provide CSS agencies with discharge information for their clients. CSS agencies can continue to work to increase the numbers of clients who go to the ED/hospital with the relevant information.

Issues/Data limitations:

- Not all agencies reported this data for this first round
- Some rates are not stable due to small numbers of clients reported for ED and admission
- Possible underestimation of the problem since agencies may not be aware when some of their clients are transferred to or return from hospital

3a) Percent of CSS Clients Who Had Care Plans Developed With Information from Discharge Communications (SH), Q3 2012/13
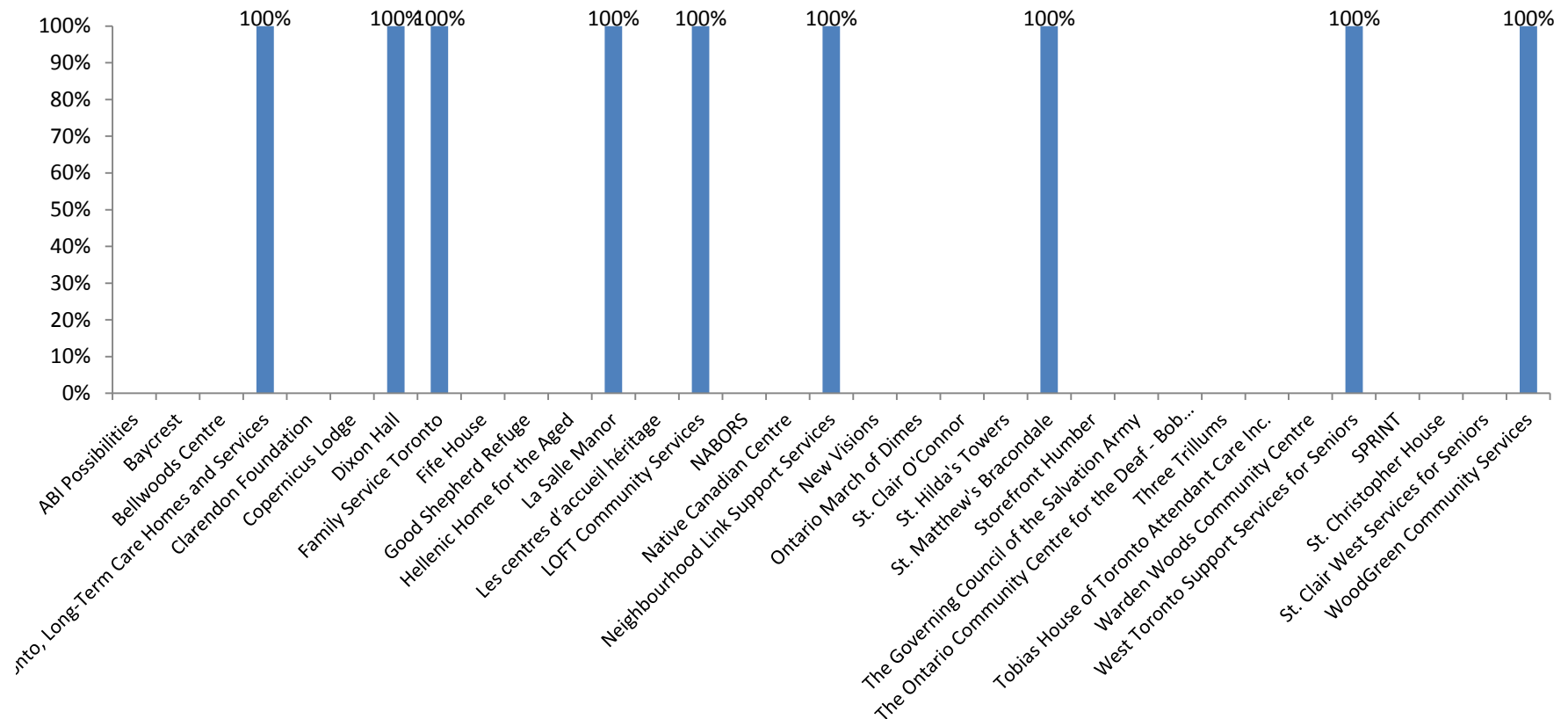
Interpretation: Only a few clients discharged from hospital had written discharge communications. However, of the 49 SH clients who were discharged from hospital with written discharge communication, the majority had care plans developed that incorporated this information.

Note: Indicator does not capture information for those agencies that may have received verbal communication from hospitals. There is also a risk that some client's who receive information from hospital do not pass it on to their CSS agency.

3b) Percent of Clients Receiving CSS Services Who Transition to Hospital With Relevant Care Information (SH)
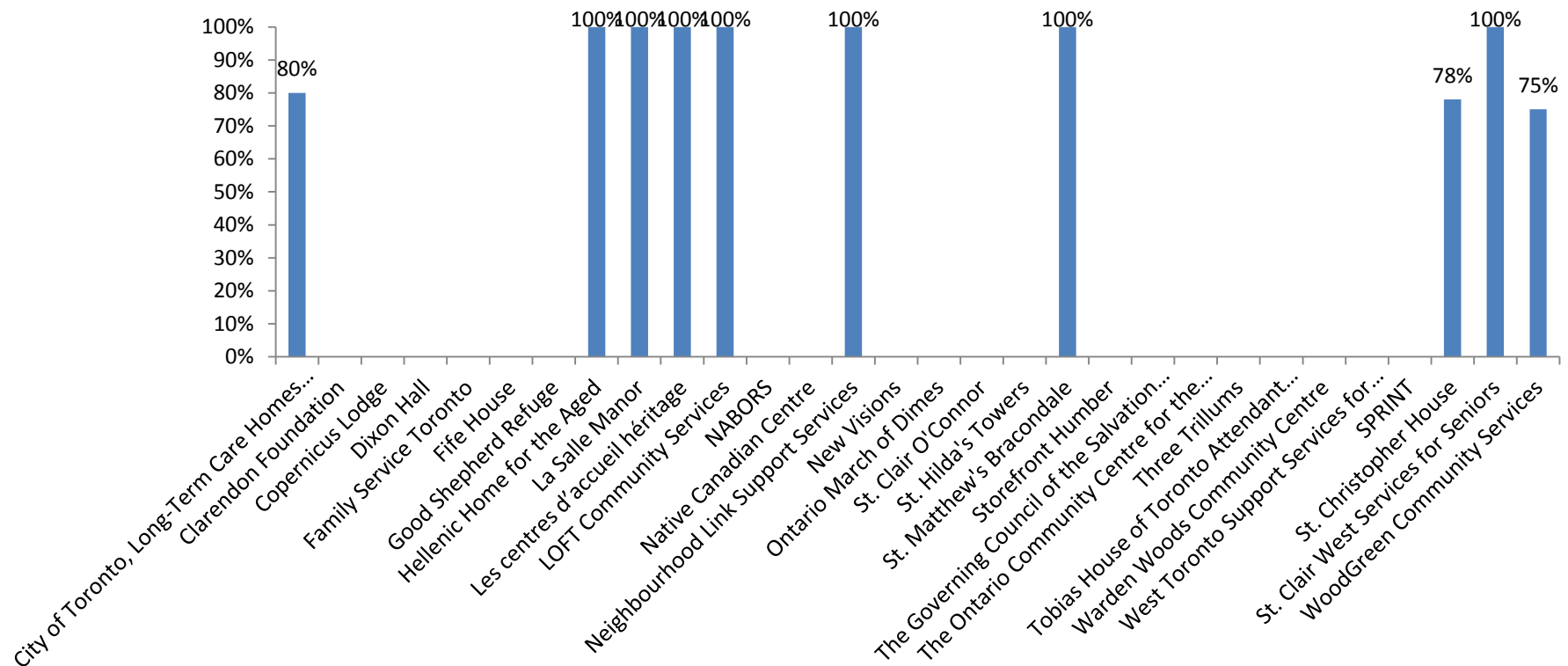
Note: Inflated percentages results may be due to low client volumes. Also, some agencies may not be aware when some of their clients are transferred to hospital.

Interpretation: Of the SH clients who were transferred to hospital by EMS, 64% had relevant care information. There was some variation among agencies, ranging from 0% - 100%.

Theme 2: Transitions of Care – Focus on Patient Experience – Timeliness of hand-off and Wait Time from Referral to Next Service

Response Time, Q3 2012/13

- The 90th percentile response time for the 618 referrals in Q3 was 3 days, with a range between 1 and 14 days. The variation in response time among the CSS agencies was not related to the number of referrals received by the agencies.

Wait Time, Q3 2012/13

- The 90th percentile wait time for the 317 clients admitted to CSS agencies in Q3 was 9 days with a range between 1 and 20 days. There was considerable variation in wait time among CSS agencies that was not related to the number of clients admitted.
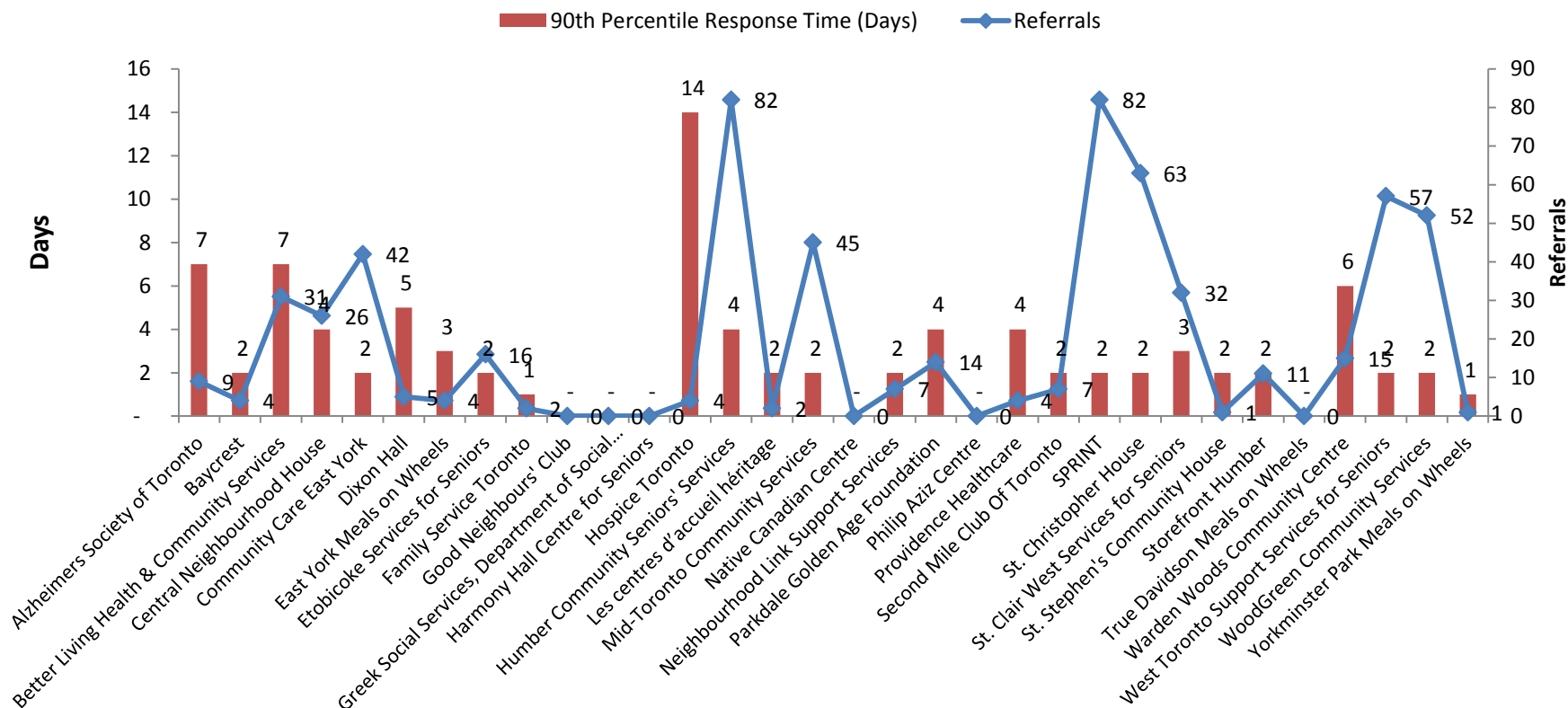
Reflections/Interpretation

- There is a need to better understand the causes in variation in response times and wait times for the various CSS agencies.

Issues/Data limitations:

- There may be data quality issues affecting the accuracy of RMR data. However, these are being worked out with the RMR team.

4a) 90th Percentile Response Time in Days for individuals referred to Community Support Services (CSS), Q3 2012/13

Note: This indicator includes all 32 CNAP RM&R agencies.
Interpretation: The 90th percentile response time for the 618 referrals in Q3 was 3 days with a range between 1 and 14 days. There was considerable variation in response time among the CSS agencies.

5a) 90th Percentile Assessment Time in Days for individuals referred to Community Support Services, Q3 2012/13
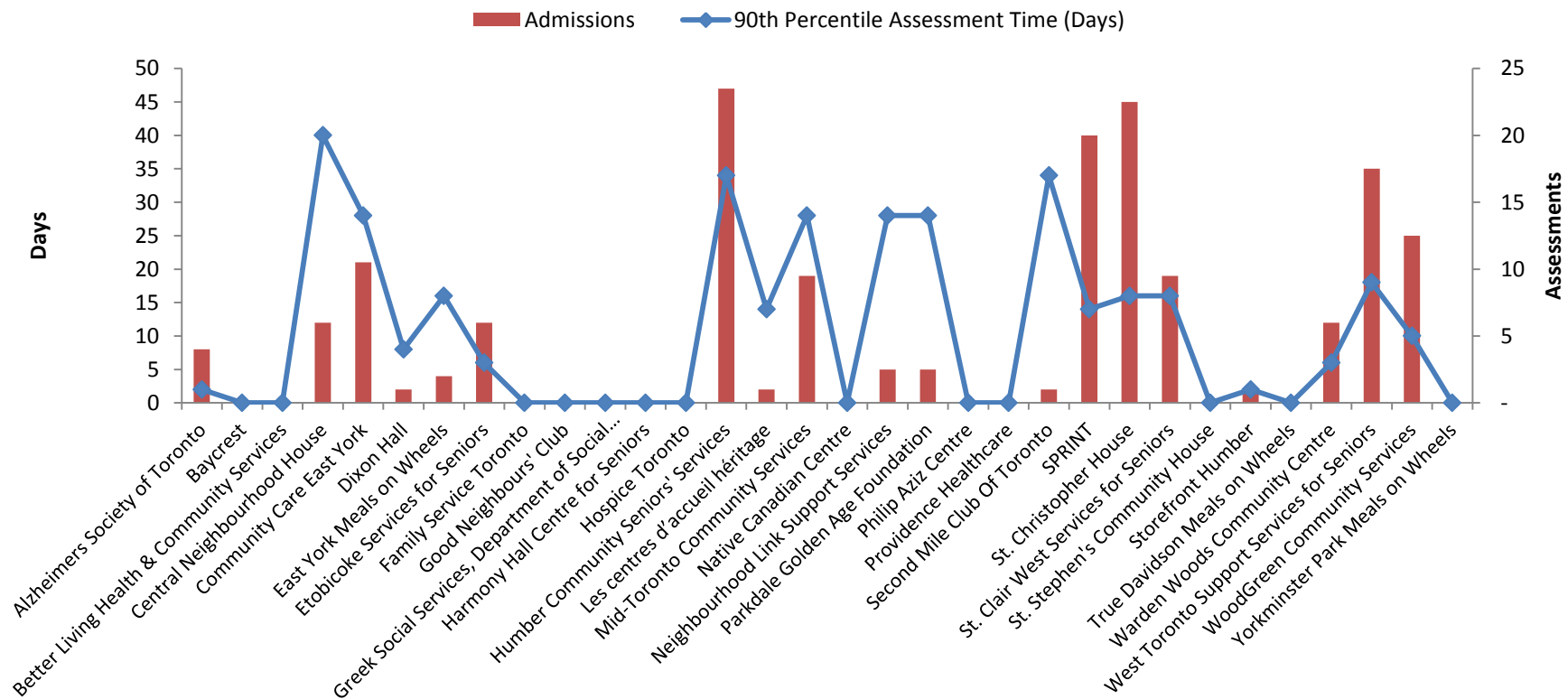
Note: This indicator Includes all 32 CNAP RM&R services.

Interpretation: The 90th percentile wait time for the 317 clients admitted to CSS agencies in Q3 was 9 days with a range between 1 and 20 days. There was considerable variation in response time among CSS agencies.

Next Steps for the Quality Initiative

- Quarterly data collection will continue, Q4 2012/13, Survey monkey templates to be sent out soon.

- The CSS Quality Subgroup will continue to review the quarterly results and advise on interpretation and improvement initiatives, applying an equity lens to indicators, and eventually setting targets and benchmarks for the quality indicators

- Additional data analysis is underway to better understand our indicators and their inter-relations.

- The same process will be applied for other sectors.

- Patient experience – currently a common client experience questionnaire is being developed for the CSS sector

Questions for Discussion

1. What might this variation in indicator results be indicating?

2. What strategies can be employed in the different CSS agencies, and within the sector as a whole, to improve performance of the indicators (e.g. to reduce avoidable ED visits and readmissions, reduce response and wait time for clients waiting for community support services)?