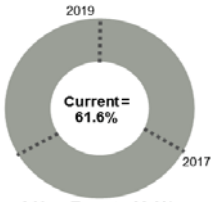
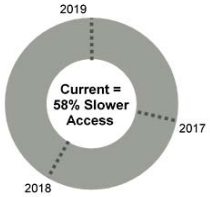
South West LHIN — Report on Performance Scorecard

Self-Reported Health Status



3-Year Target = 63.0%

Faster Access to Care in the Community



3-Year Target = 19% Faster Access

Satisfaction with Health Care in the Community

3-Year Target = 92.0%

Value Realized by Reducing Hospital Visits and Days

3-Year Target = $11.7M Realized

	PRIMARY HEALTH CARE	Baseline	Target	15/16 Q3	15/16 Q4	16/17 Q1	16/17 Q2	16/17 Q3	16/17 Q4	17/18 Q1	Provincial Performance	LHIN Rank
1	*Percentage of Adults Who Were Able to See a Primary Care Provider on the Same Day or Next Day When They Were Sick*	38.6%	40.0%	38.6%	32.9%	32.4%	29.3%	28.0%	33.3%	-	42.4%	11
2	***Rate of Emergency Visits for Conditions Best Managed Elsewhere***	10.5	9.2	10.7	12.5	10.4	8.2	11.1	12.2	-	4.8	13
3	**Percentage of Acute Care Patients Who Have Had a Follow-Up With a Physician Within 7 Days of Discharge**	41.3%	50.0%	42.7%	40.8%	44.5%	42.6%	42.3%	-	-	46.5%	11

	HOME, LONG-TERM CARE AND COMMUNITY CARE	Baseline	Target	15/16 Q3	15/16 Q4	16/17 Q1	16/17 Q2	16/17 Q3	16/17 Q4	17/18 Q1	Provincial Performance	LHIN Rank
4	***Percentage of Home Care Clients With Complex Needs Who Received Their Personal Support Visit Within 5 Days of the Date That They Were Authorized for Personal Support Services***	88.8%	95.0%	87.4%	88.4%	90.9%	87.9%	85.2%	89.7%	-	81.3%	3
5	**Percentage of Home Care Clients Who Received Their Nursing Visit Within 5 Days of the Date They Were Authorized for Nursing Services***	93.1%	95.0%	92.7%	92.9%	92.2%	92.1%	91.8%	92.3%	-	94.3%	13
6	**90th Percentile Wait Time From Community for In-Home Services: Application From Community Setting to First Service (Excluding Case Management)***	21 days	21 days	21	21	22	24	21	22	27	28	6
7	Percentage of Home Care Clients With an Unplanned, Less Urgent Emergency Department Visit Within the First 30 Days of Discharge From Hospital*	8.8%	7.5%	8.1%	6.5%	8.0%	8.6%	-	-	-	7.2%	10
8	**Alternate Level of Care (ALC) Rate**[+]	11.1%	12.7%	11.4%	11.9%	12.4%	12.7%	11.3%	10.2%	12.0%	15.0%	4
9	**Percentage of Alternate Level of Care (ALC) Days**	8.9%	9.5%	9.5%	10.6%	8.8%	11.8%	10.7%	10.2%	-	16.9%	2

	PREVENTING AND MANAGING CHRONIC CONDITIONS	Baseline	Target	15/16 Q3	15/16 Q4	16/17 Q1	16/17 Q2	16/17 Q3	16/17 Q4	17/18 Q1	Provincial Performance	LHIN Rank
10	***Hospitalization Rate for Ambulatory Care Sensitive Conditions***	97.0	90.0	100.4	115.6	106.3	89.0	105.4	115.2	-	87.4	10
11	**Readmissions Within 30 Days for Selected HBAM Inpatient Grouper (HIG) Conditions**	16.6%	15.5%	17.8%	17.1%	17.1%	17.6%	16.7%	-	-	16.6%	9

	MENTAL HEALTH AND ADDICTION SERVICES	Baseline	Target	15/16 Q3	15/16 Q4	16/17 Q1	16/17 Q2	16/17 Q3	16/17 Q4	17/18 Q1	Provincial Performance	LHIN Rank
12	*Average Wait Time for Mental Health Case Management*	29 days	21 days	28	29	26	27	34	32	39	46	6
13	**Repeat Unscheduled Emergency Visits Within 30 Days for Mental Health Conditions**	17.6%	16.3%	18.0%	17.8%	17.9%	18.9%	18.6%	18.1%	-	20.3%	6
14	**Repeat Unscheduled Emergency Visits Within 30 Days for Substance Abuse Conditions**	23.7%	22.4%	23.7%	22.4%	26.4%	26.3%	23.2%	22.5%	-	31.2%	4
15	Mental Health and Substance Abuse Hospitalization Rate	14.8	12.6	15.6	15.5	17.0	16.1	15.2	15.3	-	12.0	13

	HOSPITAL-BASED CARE	Baseline	Target	15/16 Q3	15/16 Q4	16/17 Q1	16/17 Q2	16/17 Q3	16/17 Q4	17/18 Q1	Provincial Performance	LHIN Rank
16	**90th Percentile Emergency Department (ED) Length of Stay for Complex Patients**	8.0 hours	8.0 hours	7.4	8.0	7.4	7.5	7.9	8.0	8.2	10.3	1
17	**90th Percentile Emergency Department (ED) Length of Stay for Minor/Uncomplicated Patients**	3.6 hours	4.0 hours	3.5	3.8	3.6	3.6	3.6	3.8	3.8	4.2	4
18	Percentage of Priority 2, 3 and 4 Cases Completed Within Access Target for CT Scan	74.0%	90.0%	83.0%	83.7%	80.3%	84.0%	87.0%	87.0%	81.3%	84.4%	2
19	Percentage of Priority 2, 3 and 4 Cases Completed Within Access Target for MRI Scan	33.0%	90.0%	29.7%	37.7%	34.4%	40.0%	54.2%	53.0%	60.9%	67.6%	3
20	**Percentage of Priority 2, 3 and 4 Cases Completed Within Access Target for Hip Replacement**	73.0%	90.0%	73.0%	68.0%	58.0%	46.0%	56.8%	41.0%	49.5%	78.6%	14
21	**Percentage of Priority 2, 3 and 4 Cases Completed Within Access Target for Knee Replacement**	72.0%	90.0%	70.0%	70.0%	59.0%	41.0%	44.3%	46.0%	47.5%	74.2%	12
22	Health Based Allocation Model (HBAM) Variance	5.5%	3.3%	5.2%		-					-	-
23	Hospital Standardized Mortality Ratio (HSMR)	95	82-87	93	100	90	82	87	94	88	85	7

	REHABILITATIVE SERVICES	Baseline	Target	15/16 Q3	15/16 Q4	16/17 Q1	16/17 Q2	16/17 Q3	16/17 Q4	17/18 Q1	Provincial Performance	LHIN Rank
24	Length of Stay Efficiency for Inpatient Rehabilitation	0.93	1.06	0.98	0.98	1.07	1.08	1.09	1.15	-	1.26	9

	HOSPICE PALLIATIVE CARE	Baseline	Target	15/16 Q3	15/16 Q4	16/17 Q1	16/17 Q2	16/17 Q3	16/17 Q4	17/18 Q1	Provincial Performance	LHIN Rank
25	**Percentage of Palliative Care Patients Discharged From Hospital With Home Support**	82.3%	95.0%	83.6%	81.4%	82.9%	78.3%	83.1%	87.3%	-	86.0%	7

Italicized items are Big Dot components
Bolded items are 2017/18 MLAA indicators
* 2017/18 Quality Improvement Plan (QIP) indicators

LEGEND		
Achieved Target	Within 10% of Target	> 10% From Target

*** LHIN ALC rate in Q1 17/18:**
- June data is unavailable
- London Health Sciences Centre only submitted acute data of April

Quarter 1, 2017/18

Shading reflects evaluation against target during the IHSP time period assessed; current targets may differ from those previously applied

South West LHIN

Home and Community Care Report on Performance

HOME, LONG-TERM CARE AND COMMUNITY CARE (Service Delivery Measures)

	SAFETY	Baseline	Target	15/16 Q3	15/16 Q4	16/17 Q1	16/17 Q2	16/17 Q3	16/17 Q4	17/18 Q1	Provincial Performance	LHIN Rank
26	Falls: Percentage of Adult Long-Stay Home Care Patients Who Record a Fall on Their Follow-Up (RAI-HC) Assessment*	38.8%	34.0%	36.9%	38.1%	36.2%	39.7%	38.7%	40.5%	40.1%	39.4%	8
27	Percentage of Long-Stay Home Care Patients That Have Had Medication Reconciliation/Management Within the Last 180 Days	69.0%	80.0%	73.0%	71.0%	71.0%	68.0%	71.0%	67.0%	69.0%	-	-
28	Missed Care: Overall Percentage of Missed Care Visits From South West LHIN Providers	0.32%	0.05%	0.25%	0.33%	0.20%	0.32%	0.40%	0.34%	0.36%	-	-

	EFFECTIVENESS	Baseline	Target	15/16 Q3	15/16 Q4	16/17 Q1	16/17 Q2	16/17 Q3	16/17 Q4	17/18 Q1	Provincial Performance	LHIN Rank
29	Percentage of Home Care Clients With an Unplanned, Less Urgent Emergency Department Visit Within the First 30 Days of Discharge From Hospital*	8.8%	7.5%	8.1%	6.5%	8.0%	8.6%	-	-	-	7.2%	10
30	Percentage of Home Care Clients who Experienced an Unplanned Readmission to Hospital Within 30 Days of Discharge From Hospital*	17.1%	16.5%	18.5%	17.0%	16.1%	16.7%	-	-	-	18.2%	4
31	Number of Care Conferences	3,431	3,500	3,563		3,298				-	-	-
32	Complex Patients: Patients with MAPLe Scores High/Very High Living in the Community Supported by LHIN Home and Community Care	57.1%	55.0%	56.3%	56.6%	56.4%	57.2%	57.3%	57.4%	57.2%	54.5%	2
33	Home First Impact: Estimated Number of Hospital Days Saved	201,226	207,000	193,822		208,629				-	-	-
34	Health Links: Total Number of Patients Supported by Coordinated Care Plans (CCP)	237	339	N/A	N/A	179	285	246	399	286	-	-

	ACCESSIBLE	Baseline	Target	15/16 Q3	15/16 Q4	16/17 Q1	16/17 Q2	16/17 Q3	16/17 Q4	17/18 Q1	Provincial Performance	LHIN Rank
35	***Percentage of Home Care Clients With Complex Needs Who Received Their Personal Support Visit Within 5 Days of the Date That They Were Authorized for Personal Support Services****	88.8%	95.0%	87.4%	88.4%	90.9%	87.9%	85.2%	89.7%	-	81.3%	3
36	**Percentage of Home Care Clients Who Received Their Nursing Visit Within 5 Days of the Date They Were Authorized for Nursing Services***	93.1%	95.0%	92.7%	92.9%	92.2%	92.1%	91.8%	92.3%	-	93.8%	13
37	**Wait Time - Discharge to Initiation: 90th Percentile Wait Time From Hospital Discharge to Service Initiation (Hospital Setting)**	8 days	7 days	7	8	8	8	8	7	-	7	7
38	**90th Percentile Wait Time From Community for In-Home Services: Application From Community Setting to First Service (Excluding Case Management)**	21 days	21 days	21	21	22	24	21	22	27	28	6
39	Percent of Palliative /End of Life Patients who Died in their Preferred Place of Death*	64.0%	70.0%	60.6%	58.9%	59.9%	64.6%	66.3%	66.8%	65.3%	64.47%	7
40	Adult Day Program Occupancy	94.0%	90.0%	93.0%	92.0%	94.0%	94.0%	95.0%	92.0%	96.0%	-	-

	PATIENT-CENTERED	Baseline	Target	15/16 Q3	15/16 Q4	16/17 Q1	16/17 Q2	16/17 Q3	16/17 Q4	17/18 Q1	Provincial Performance	LHIN Rank
41	Patient and Caregiver Overall Rating of South West LHIN Services*	93.6%	95.0%	93.6%		93.5%				-	92.2%	-
42	Patient and Caregiver Overall Rating of Facilitation of Care by Care Coordinator	93.4%	95.0%	93.6%		93.1%				-	92.2%	-
43	Patient and Caregiver Overall Satisfaction With Connection to Community Services	80.7%	80.0%	81.4%		79.9%				-	77.8%	-
44	Patient and Caregiver Complaints per 1,000 Patients - South West LHIN	3.21	TBD	3.34	3.62	3.76	3.21	2.80	3.06	3.83	-	-
45	Patient and Caregiver Complaints per 1,000 Patients - Provider	3.92	TBD	5.29	3.75	5.44	5.22	2.37	2.63	3.41	-	-

Italicized items are Big Dot components
Bolded items are 2017/18 MLAA indicators
***** 2017/18 Quality Improvement Plan (QIP) indicators
- lagged data/not available

LEGEND		
Achieved Target	Within 10% of Target	> 10% From Target

Quarter 1, 2017/18

Shading reflects evaluation against target during the IHSP time period assessed; current targets may differ from those previously applied