

Indicator recommendations for public reporting in the fall 2009 by OHQC Attributes

Effectiveness

People should receive care that works and is based on the best available scientific information.

Theme	Indicator selected for development	Numerator/denominator	Adjustment	Data source	Future development	Reporting level
Maintaining or improving bladder/bowel function	Incidence of worsening of bladder incontinence <i>(based on last 14 days)</i>	Numerator: Number of residents with worsening bladder incontinence over 90 days compared to previous assessment Denominator: All residents on most recent assessment and a prior assessment	Fully adjusted model; algorithm from John Morris	MDS:CIHI		In Nov.09, this will be reported at facility level for MDS early adopters who volunteer.
Providing appropriate mental health care	Prevalence of depression without anti-depressant therapy <i>(based on last 7 days)</i>	Numerator: Number of residents with at least 3 symptoms of depression on most recent assessment who are not receiving anti-depressant therapy Denominator: All residents on most recent assessment	None	MDS:CIHI		Nov 09: report at provincial level; examine for later use at facility level
	Prevalence of anti-anxiety/hypnotic drug use <i>(based on last 7 days)</i>	Numerator: Number of residents who received anti-anxiety or hypnotics on most recent assessment Denominator: All residents on most recent assessment, except those with psychotic or related conditions	None	MDS:CIHI		Nov 09: report at provincial level; examine for later use at facility level
	Incidence of worsening depression <i>(based on last 30 days)</i>	Numerator: Number of residents whose Depression Rating Scale (DRS) increased in the last 30 days based most recent assessment and prior assessment. Denominator: All residents on most recent assessment and a prior assessment	None	MDS:CIHI		Nov 09: report at provincial level; examine for later use at facility level
Maintaining cognitive functioning	Incidence of residents whose cognitive functioning improved since last assessment	Numerator: Number of residents whose cognitive functioning improved on most recent assessment Denominator: Number of residents in the facility on most recent assessment	Fully adjusted model; CIHI algorithm	MDS:CIHI		Nov 09: report at provincial level; examine for later use at facility level
	Incidence of residents whose cognitive functioning declined since last assessment	Numerator: Number residents whose cognitive functioning declined on most recent assessment Denominator: Number residents in the facility on most recent assessment	Fully adjusted model; CIHI algorithm	MDS:CIHI		Nov 09: report at provincial level; examine for later use at facility level

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Maintaining appropriate weight	Prevalence of weight loss (based on last 10 days and 6 months)	Numerator: : Number of residents with weight loss of 5% or more in last 30 days or 10% or more in last 6 months on most recent assessment Denominator: All residents in home on most recent assessment (excluding planned weight loss, end stage palliative and hospice)	None	MDS:CIHI		Nov 09: report at provincial level; examine for later use at facility level
	Incidence of worsening function in daily activities using the long form (global measure including eating, moving in bed, locomotion, dressing and personal hygiene etc) based on last 7 days	Numerator: Number of residents with worsened ADL (eating, moving in bed, locomotion, dressing and personally hygiene) based on the full form (global measure) on most recent assessment Denominator: All residents who have most recent and previous assessments (excluding those who cannot decline because they are already totally dependent or who were comatose on the previous assessment) on most recent assessment and a prior assessment	Fully adjusted (RUGS CMI)	MDS long form:CIHI		Nov 09: report at provincial level; examine for later use at facility level
Preservation of ADL	Incidence of residents with some worsening of ADL using the mid-loss (locomotion, transfer and walk in corridor)	Numerator: Number of residents with worsened locomotion, transfer and walk in corridor ability (medium loss ADL) on most recent assessment Denominator: All residents in home on most recent assessment	No adjustment	MDS:CIHI		
	Prevalence of moderate to severe pain (based on last 7 days)	Numerator: Number of residents who had daily moderate or severe pain on most recent assessment Denominator: All residents with most recent assessment excluding those who can not report on most recent assessment	One point change in the MDS pain scale Fully adjusted – check with CIHI	MDS:CIHI		Nov 09: report at provincial level; examine for later use at facility level
Providing appropriate pain control	Incidence of worsening pain (based on last 7 days)	Numerator: Number of residents who had worse pain on most recent assessment compared to previous assessment Denominator: All residents on most recent assessment and a prior assessment	One point change in the MDS pain scale Fully adjusted – check with CIHI	MDS:CIHI		Nov 09: report at provincial level; examine for later use at facility level

Safety

People should not be harmed by an accident or mistakes when they receive care.

Theme	Indicator selected for development	Numerator/denominator	Adjustment	Data Source	Future Development	Reporting
Avoidance of infection	Prevalence of indwelling catheters <i>(based on last 14 days)</i>	Numerator: Number residents with indwelling catheter on most recent assessment Denominator: All residents in home on most recent assessment	Risk adjusted	MDS:CIHI	Panel did not address this theme specifically, but agreed on these two measures as being important to include along with bladder function	Nov 09: report at provincial level; examine for later use at facility level
	Prevalence of urinary tract infections <i>(based on last 30 days)</i>	Numerator: Number of residents with urinary tract infection on most recent assessment Denominator: All residents on most recent assessment	Risk adjusted	MDS:CIHI		Nov 09: report at provincial level; examine for later use at facility level
Avoidance of pressure ulcers	Prevalence of worsening pressure ulcers (stage 2 to 4)	Numerator: Number of residents with pressure ulcers(stage 2 to 4) that fail to improve over the quarter Denominator: All residents on most recent assessment and a valid prior assessment	Use current hi/low stratification from CIHI. Transition to interRai risk adjustment once CIHI implements in2010-11	MDS:CIHI	Adjusted for hospital transfers	In Nov.09, this will be reported at facility level for MDS early adopters who volunteer.
	Incidence of stage 2-4 pressure ulcers	Numerator: Number of residents with new stage 2 to 4 pressure ulcers over quarter Denominator: All residents on most recent assessment	TBD	MDS:CIHI		In Nov.09, this will be reported at facility level for MDS early adopters who volunteer.
Avoidance of falls	Incidence of fall in the past 30 days prior to assessment	Numerator: Number of residents who had falls in the last 30 days on most recent assessment Denominator: All residents on most recent assessment (excluding admission assessment and those who went to the hospital)	Fully adjusted model; excludes initial assessment	MDS:CIHI		In Nov.09, this will be reported at facility level for MDS early adopters who volunteer.
	Emergency dept visits for falls per 100 resident years by LHIN	Numerator: Number of residents who went to emergency departments for falls Denominator: Number of residents in long term care homes in a year	Age and sex adjusted	NACRS: ICES		
Avoidance of use of restraints	Prevalence of daily physical restraint <i>(based on last 7 days)</i>	Numerator: Number residents who were physically restrained daily on the most recent assessment (including: trunk, limb, chair prevents rising) Denominator: Number residents in facility on most recent assessment	No adjustment	MDS:CIHI		Nov 09: report at provincial level; examine for later use at facility level
	Prevalence of restraints use at least once over past 7 days	Numerator: Number residents restrained at least once over the past 7 days (using the quarterly	No adjustment	MDS:CIHI		

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		assessment) on most recent assessment Denominator: Number residents in facility in last 7 days on most recent assessment				
Avoidance of potentially inappropriate prescribing	Prevalence of antipsychotic drug use in the absence of psychotic and related conditions (schizophrenia or other psychosis) <i>(based on last 7 days)</i>	Numerator: Number residents who had been prescribed antipsychotic at least once over 7 days who haven't been dx with schizophrenia or other psychosis Denominator: All residents on most recent assessment except those with psychotic or related conditions	Fully adjusted model	MDS for now and moving to ODB (2009 CIHI)	Use indicator developed by ICES Indicator that includes information about people with conditions who have been prescribed inappropriately	Nov 09: report at provincial level; examine for later use at facility level
	Prevalence of residents who have been prescribed one of Beers drugs (to be avoided in elderly) in the year (long acting)	The Beers drug list will be based on the CIHI most recent items and the AHRQ's list of "Never" use drugs	To be determined	MDS for now and moving to ODB:ICES	Patterns of Beers list prescribing by facility; ODB information; Enables comparison to other provinces	Nov 09: report at provincial level; examine for later use at facility level
Avoidance of abuse	Prevalence of behavioural symptoms affecting others (verbal, physical, socially inappropriate)	Numerator: Number residents with behavioural symptoms affecting others on most recent assessment Denominator: Number residents in the home on most recent assessment	No adjustment	MDS:CIHI		Nov 09: Provincial level – manage the messages; examine for later use at facility level
	Incidence of worsening resident behaviour <i>(based on last 7 days)</i>	Numerator: Number residents whose behaviour was worse than previous assessment Denominator: All residents on most recent assessment and a prior assessment	Fully risk adjusted	MDS:CIHI		Nov 09: report at provincial level; examine for later use at facility level
Avoidable ED visits	Potentially avoidable ED visits by facility	According to Gary Teare's methodology	No adjustment	NACRS:ICES		Nov 09: report at provincial level TENTATIVE (if not 2010 provincial); examine for later use at facility level
	Low acuity (unnecessary) ED visits by LHIN	According to Mike Schull's methodology (CIHI uses this one)	No adjustment	NACRS:ICES		
Adherence to regulatory standards	Number of regulations not adhered to annually	Link to MOHLTC website				
	Number of verified complaints per home	Link to MOHLTC website				

Resident Centred

Healthcare providers should offer services in a way that is sensitive to an individual's needs and preferences.

Theme	Indicator selected for development	Question from Ontario LTC Survey [U of T study, Appendix C)	Reporting to	Reporting
Staff responsiveness to concerns	Responses from residents and families who completed the Ontario Long term Care Survey	Do staff members promptly answers your call?	Public	Nov 09: report at provincial level; Based on 30 homes in province
Encouraged to participate in decisions involving care as much as wanted		Are you encouraged to participate in decisions?		
Enough and meaningful activities		Are there enough activities during the week and weekend?		
Feel free to speak up/not afraid staff will punish resident		Do you feel free to speak up when you are unhappy?		
Overall quality of care/services in the home		Would you recommend this home to others?		
Residents feel at home		Do you feel at home?		

Appropriate Access

People should be able to get the right care at the right time in the right setting by the right healthcare provider.

Theme	Indicator selected for development	Numerator/denominator	Adjustment	Data Source	Future Development	Reporting
Appropriate access to Long term Care homes	Median days to placement from acute care, community and overall to long term care homes	Median number of days	None	MOHLTC		Provincial & LHIN level

Appropriately resourced

The health system should have enough qualified providers, funding, information, equipment, supplies and facilities to look after people's health needs.

Theme	Indicator selected for development	Numerator/denominator	Adjustment	Data Source	Future Development	Reporting
Staff satisfaction	To be confirmed			[one-time study by U of T)	To be determined from W.Wodchis study	Nov 09 by province -- Require implementation of standardized surveying across all homes to be able to report this at facility level in the future.
Healthy work environments	To be confirmed				To be determined from G.Lowe study	Not for 2009
Worker injury rates	Lost time injury and non lost time injury combined			WSIB		