South West LHIN

# HAPS Regional Meeting

South Meeting 1, November 30, 2016

Ontario
Local Health Integration Network

## Objectives & Overview

1. Improve both LHIN and providers' understanding of Hospital Accountability Planning Submissions (HAPS) service, financial and performance elements

2. Enhance discussion between Hospital, CCAC and LHIN

PART 1—Hospital Presentation

- Budgeting Process and Assumptions
- Highlight key issues, risks and mitigation strategies
  - Service Delivery
  - Financial Implications
  - Performance Commitments and Challenges

PART 2—Group discussion

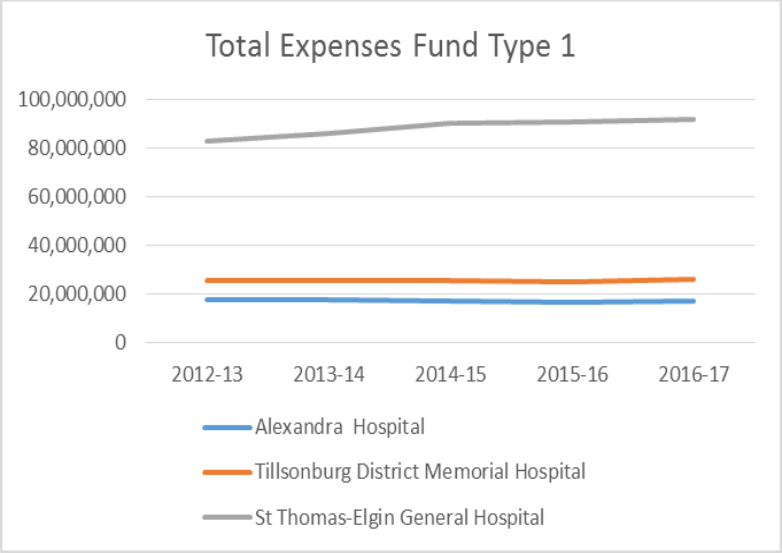
A) Opportunities for better collaboration among HSPs to support sharing of risk, collaboration on common performance challenges including confirmation of regional mitigation strategies (to be reflected in HAPS by January, 2017)

B) Ensuring optimal leveraging of key strategies already underway (not net new) including Health Links etc. to support improved performance

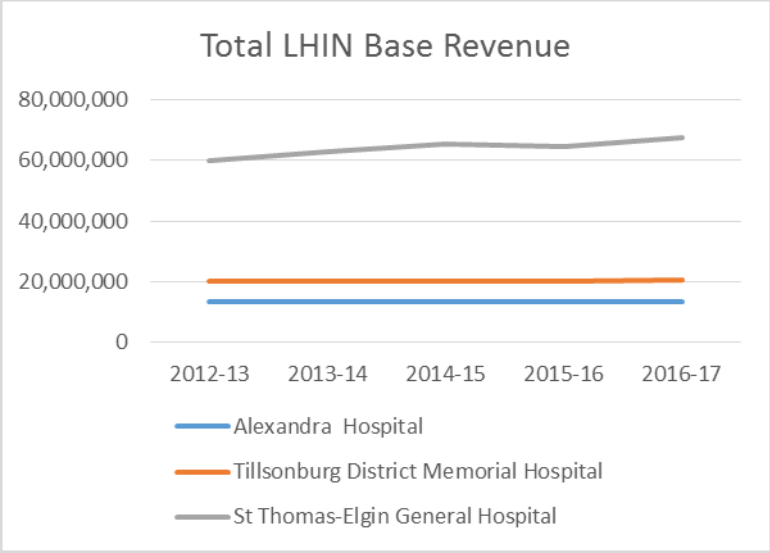
## Hospital Trends: Operational, Financial, Performance

- The purpose of this slide deck is to provide a multi-year context to better understand the 2017/18 HAPS operational, financial and performance challenges and opportunities.
- The information used in the following graphs was sourced from the Ontario cost Distribution Methodology 10 years tables and SRI year-end reports
- Please note that the trend lines are altered by program transfers and new funding (e.g. PCOP)

# LHIN Base Funding and Fund Type 1 Total Expenditure

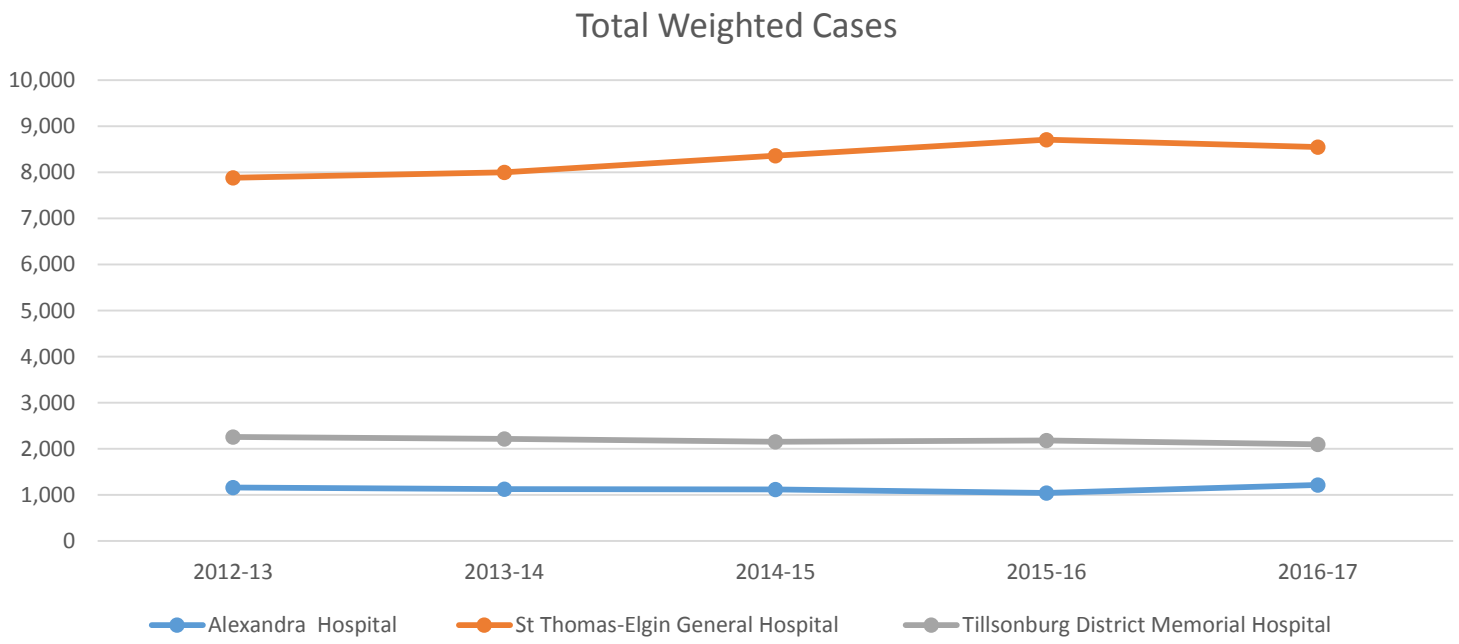



| | 5 Year Change |
|---|---|
| Alexandra Hospital | -2.8% |
| Tillsonburg District Memorial Hospital | 0.9% |
| St Thomas-Elgin General Hospital | 10.9% |



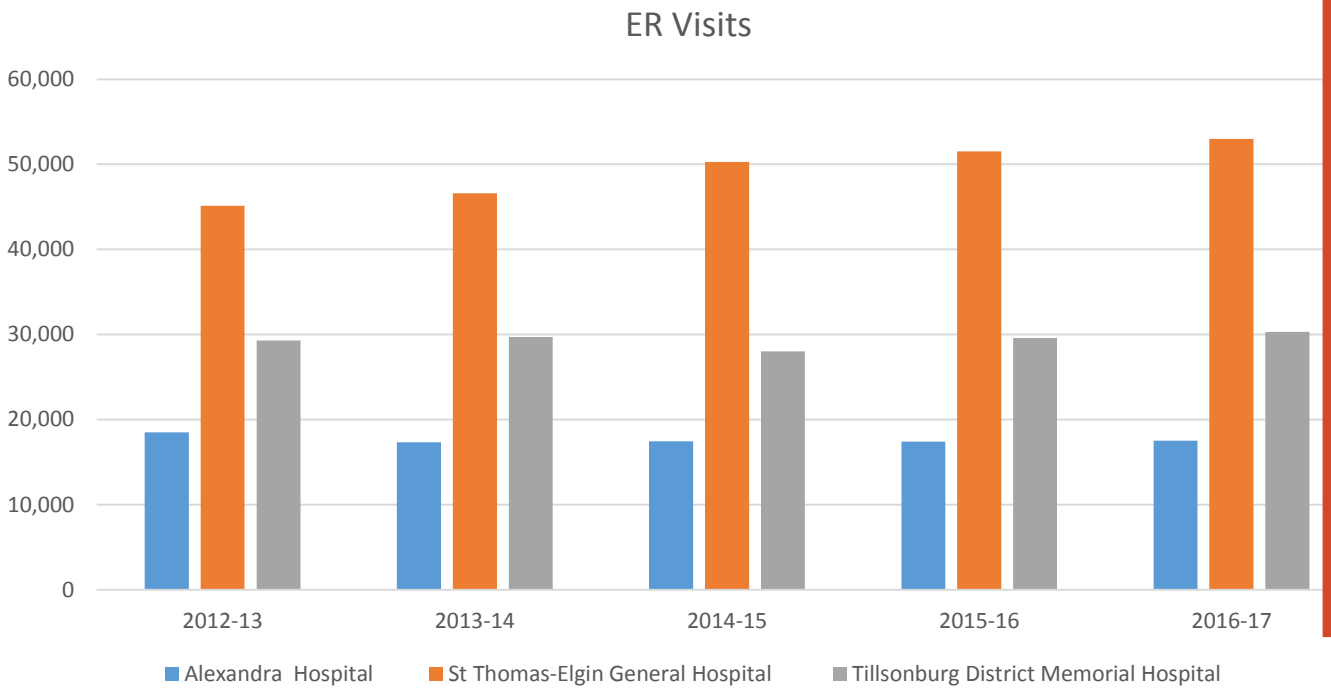

| | 5 Year Change |
|---|---|
| Alexandra Hospital | 1.0% |
| Tillsonburg District Memorial Hospital | 2.7% |
| St Thomas-Elgin General Hospital | 12.7% |

# Activity – Total Weighted Cases




| | 5 Year Change |
|---|---|
| Alexandra Hospital | 4.6% |
| St Thomas-Elgin General Hospital | 8.4% |
| Tillsonburg District Memorial Hospital | -7.0% |

# ER – Activity and Performance Highlights




*Since 2012-13,* 90th percentile wait times for admitted patients have improved by:

- 7.8% to 7.1 hours (St. Thomas)
- 32.1% to 16.7 hours (Tillsonburg)

| | 5 Year Change - Visits | 4 Year Change - ER Weighted Cases |
|---|---|---|
| Alexandra Hospital | -5.2% | 7.8% |
| St Thomas-Elgin General Hospital | 17.5% | 19.0% |
| Tillsonburg District Memorial Hospital | 3.4% | 6.6% |

# HBAM Expected Unit Cost Benchmark Performance

| STEGH | AIP & DS | | ER | | Rehab | | CCC | |
|---|---|---|---|---|---|---|---|---|
| Year | Actual | HBAM Expected | Actual | HBAM Expected | Actual | HBAM Expected | Actual | HBAM Expected |
| 2012/13 | 5,499 | 5,321 | 5,915 | 5,572 | 11,402 | 13,508 | 547 | 548 |
| 2013/14 | 5,466 | 5,355 | 4,853 | 5,659 | 12,096 | 12,707 | 637 | 573 |
| 2014/15 | 5,391 | 5,262 | 4,359 | 5,589 | 14,861 | 13,520 | 564 | 602 |
| 2015/16 | 5,055 | 5,293 | 4,408 | 5,625 | 14,115 | 12,703 | 581 | 567 |

# LHIN Ranking—MLAA Performance Measures for 2016/17 Q2

| | Home & Community | | | System Integration & Access | | | | | | Health & Wellness | | Sustainability & Quality | | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| | In-Home Services | | | ERLOS | | Surgical & Diagnostic Wait Times | | | | Repeat ED Visits | | Wasted Bed Days | | Readmis-sions |
| LHIN Rank | PSW | Nursing | CCAC | Complex | Minor | MRI | CT | Hip | Knee | MH | SA | %ALC | ALC Rate | |
| 1 | ESC | CE | WW | WW | C | SE | NW | C | C | WW | C | CW | CW | WW |
| 2 | CE | MH | CW | SW | SW | C | CE | CE | TC | NW | CHMP | SW | WW | ESC |
| 3 | HNHB | CW | SW | NE | MH | CE | CW | CHMP | CE | MH | CE | WW | TC | MH |
| 4 | MH | HNHB | SE | ESC | CW | NW | ESC | TC | CHMP | NSM | ESC | ESC | SW | CHMP |
| 5 | SW | ESC | ESC | SE | NE | NE | SW | NE | NE | CHMP | SE | TC | CHMP | CW |
| 6 | CW | C | TC | NSM | CE | SW | WW | NW | NW | SW | SW | CHMP | MH | C |
| 7 | TC | NW | NW | NW | WW | CW | NE | ESC | ESC | NE | NE | MH | HNHB | HNHB |
| 8 | SE | NE | HNHB | C | ESC | CHMP | SE | HNHB | NSM | ESC | NSM | C | NSM | NE |
| 9 | NE | TC | CHMP | MH | NW | HNHB | CHMP | CW | HNHB | C | MH | SE | ESC | NW |
| 10 | WW | SE | MH | CE | NSM | ESC | C | NSM | CW | HNHB | WW | HNHB | C | NSM |
| 11 | CHMP | WW | NE | CHMP | TC | TC | NSM | SE | SE | CE | HNHB | CE | SE | SW |
| 12 | NSM | CHMP | CE | CW | SE | WW | TC | MH | MH | SE | CW | NSM | NE | CE |
| 13 | C | NSM | NSM | TC | HNHB | MH | MH | WW | WW | CW | TC | NW | CE | TC |
| 14 | NW | SW | C | HNHB | CHMP | NSM | HNHB | SW | SW | TC | NW | NE | NW | SE |
| Period: | Q1 16/17 | Q1 16/17 | Q1 16/17 | Q2 16/17 | Q2 16/17 | Q2 16/17 | Q2 16/17 | Q2 16/17 | Q2 16/17 | Q1 16/17 | Q1 16/17 | Q1 16/17 | Q2 16/17 | Q4 15/16 |
| ON | 87.43% | 94.75% | 30 | 10.13 | 4.15 | 38% | 75% | 78% | 75% | 20.24% | 33.75% | 14.22% | 15.32% | 16.57% |
| SW LHIN | 90.91% | 92.17% | 22 | 7.53 | 3.53 | 40.3% | 84.1% | 46.0% | 40.8% | 17.90% | 26.44% | 8.78% | 12.73% | 17.12% |

*2016 Fall Cycle Performance Rankings by LHIN of all MLAA Indicators (data as of 10 Nov 2016)*

# Performance Trends & Challenges Observed**COULD ADD Visuals to APPENDIX WITH Q2 DATA after Analyzing Performance MEETING

- ED: - most hospitals below 8h and 4h targets—improvements observed

- Hip & Knee - rank =14th of 14 LHINs
  - targets are less aggressive than 2016/17
  - no site achieving LHIN target of 90% (except WGH for Knees)

- MRI - slightly better than provincial average, but well short of 90% target
  - HSAA targets well short of 90%, improve by ~5% or narrow gap between actual and peers (weak performing)

- CT - slightly better than provincial average and approaching 90% target
  - HSAA targets to continue good performance or improve by ~5%

- ALC - ranked near top, but observing declining performance overall and for specific hospitals
  - HSAA targets to improve towards LHIN target or peer (if worse than 12.7%)

- Readmissions - rank = 11th of 14 LHINs *(readmissions to ANY facility—slightly different measure)*
  - HSAA targets aiming for improvement towards/within own expected rate

# HOSPITAL PRESENTATIONS

a. **Budgeting Process and Assumptions**

b**. Highlight key issues, risks and mitigation strategies** in each of the following areas:

i. **Service Delivery** - planned service/program changes built in the HAPS (Hospital), or CAPS (CCAC) including risks, and impacts to the region and partnering organizations due to planned service changes. Also important to highlight any near-future service changes that are not built in the F17/18 submission – changes in capital or operations

ii. **Financial Implications** – FY17/18 financial situation.

iii. **Performance Commitments and Challenges** – Key performance commitments, with consideration of:

- Persistent challenges in meeting performance target(s)
- New/anticipated challenges in meeting proposed 2017/18 performance target(s)
- Unique factors/considerations in comparing to peer organizations (for target setting)
- Initiatives undertaken to-date a) by hospital and b) in collaboration with community partners to improve performance
- What is needed to realize improvement

## GROUP DISCUSSION

A) Opportunities for better collaboration among HSPs to support sharing of risk, collaboration on common performance challenges including confirmation of regional mitigation strategies (to be reflected in HAPS by January, 2017)

B) Ensuring optimal leveraging of key strategies already underway (not net new) including Health Links etc. to support improved performance

## Next Steps & Timelines

- Reflect on the discussion and regional risk mitigation conversations and ensure that this feedback is updated in the HAPS by January, 2017

- The draft performance targets will be reviewed based on regional meeting discussions and the final proposed numbers will be shared in December.

- H-SAA schedules will be sent for hospital review and approval late January

# Appendix ONLY

# LHIN Ranking—MLAA Monitoring/Developmental Measures for 2016/17 Q2

| | CCAC Wait Times | | Primary Care | | | Surgical Wait Times | | | Palliative | Experience |
|---|---|---|---|---|---|---|---|---|---|---|
| Rank | Home-LTC | Hosp-LTC | ED visits | Hospitali-zation | MD follow-up | Cancer | Cardiac | Cataract | Home Support | Satisfac-tion |
| 1 | NE | **SW** | CW | C | CW | C | NE | CE | MH | TC |
| 2 | **SW** | WW | MH | MH | C | NE | SE | C | CW | **SW** |
| 3 | HNHB | SE | TC | TC | MH | CE | WW | CW | WW | CHMP |
| 4 | ESC | ESC | C | CW | TC | CHMP | **SW** | NE | NSM | CE |
| 5 | WW | C | WW | WW | HNHB | WW | C | NW | HNHB | WW |
| 6 | MH | HNHB | CE | CHMP | CE | TC | HNHB | ESC | CHMP | HNHB |
| 7 | SE | MH | HNHB | CE | WW | NSM | MH | CHMP | SE | NSM |
| 8 | NSM | NE | CHMP | NSM | NSM | **SW** | TC | HNHB | CE | C |
| 9 | CW | CW | ESC | HNHB | ESC | SE | CHMP | **SW** | **SW** | SE |
| 10 | C | CE | NSM | ESC | SE | CW | | TC | TC | MH |
| 11 | CE | CHMP | SE | **SW** | CHMP | MH | | MH | C | CW |
| 12 | CHMP | NSM | NW | SE | **SW** | ESC | | WW | NE | ESC |
| 13 | NW | NW | **SW** | NE | NE | HNHB | | NSM | ESC | NE |
| 14 | TC | TC | NE | NW | NW | NW | | SE | NW | NW |
| | Q4 15/16 | Q1 16/17 | Q1 16/17 | Q1 16/17 | Q4 15/16 | Q2 16/17 | Q2 16/17 | Q2 16/17 | Q4 15/16 | Jul 2015 - Jun 2016 |

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