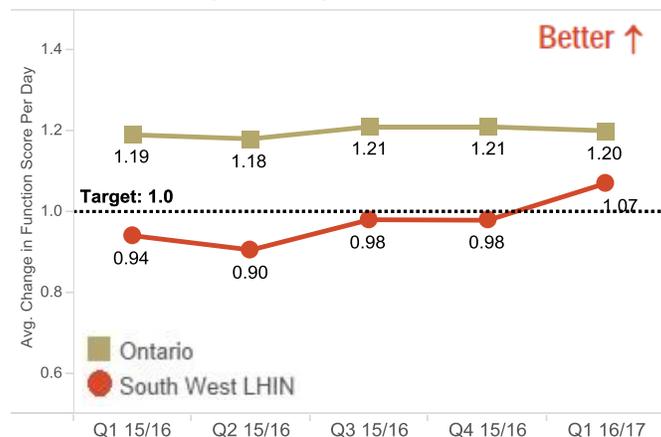


How Will We Know We Have Been Successful?

- More people able to access rehabilitative services to maximize recovery

How Are We Doing?

#24. Length of Stay Efficiency for Inpatient Rehabilitation: Average Change in Physical Function and Independence Per Day of Client Participation in Inpatient Rehabilitation



- The South West LHIN length of stay efficiency has improved by 20% since Q2 15/16, and the LHIN currently ranks 10th in the province. Clients of inpatient rehabilitation in the South West LHIN experience less improvement in their Functional Independence Measure (FIM) scores per day than the provincial average.
- Among the top three high-volume Rehabilitation Client Groups, the South West LHIN ranked 6th for Stroke, 8th for Medically Complex, and 7th for Orthopedic Conditions.
- The main driver of the low efficiency for Orthopedics is related to both a higher than average length of stay (LOS) and a lower average FIM score change. The LOS efficiency for Stroke is attributed to its lower than average FIM score change.

What Is Impacting Performance?

Initiating & Planning: **a) Assess and Restore** - Capacity building to develop expertise and skill in the treatment of frail seniors and early identification of patients for direct referral to support improved recovery. **b) Evidence-Informed Rehab Capacity Planning** - Developing a model of care that will support a patient's rehabilitative journey across the continuum, including recommendations to improve prevention, Acute Care rehabilitation, and community programs. **c) Post-Hospital Stroke Planning** - Creating directional recommendations within community-based care to support inpatient services and transitions of care.

Executing: **a) Senior Friendly Hospital** - Improvements in services for seniors that will result in a better rehabilitative journey. **b) Quality-Based Procedures Implementation** - Stroke, Hip and Knee best practices are being implemented which positively impact LOS efficiency. **c) Coordinated Access** - Ensure rehabilitation resources are accessed by patients who benefit from that level of care. **d) Stroke Realignment** - Realigning stroke care from 28 facilities to seven to improve acute and rehabilitative outcomes for stroke survivors. **e) Provincial Bedded Definitions Framework** - Standardizing Rehabilitation and Complex Continuing Care (CCC) bed terminology, eligibility criteria and resources to improve access to the right care and support system-level planning.

Monitoring & Closing: **a) LOS Efficiency** - Included in the South West LHIN Rehabilitative Care Committee dashboard for discussion.

Potential Future Opportunities and Considerations:

- LOS efficiency is being used to engage Health Service Providers in quality improvement discussions.
- Develop and support a rehabilitative approach within Acute Care settings to prevent functional decline and reduce Rehabilitation, CCC, and Long-Term Care referrals.