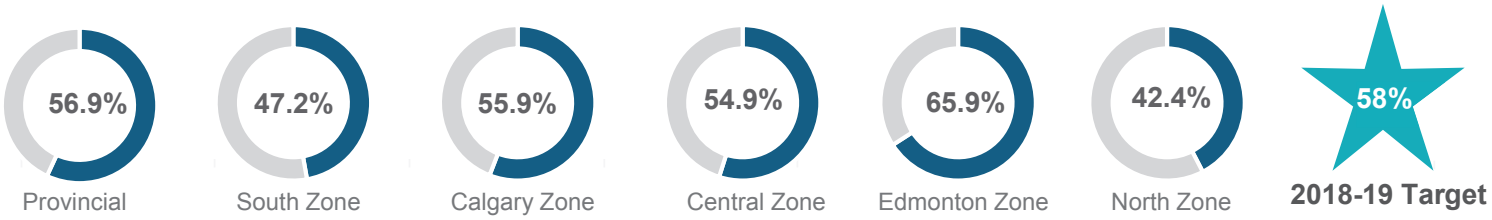
PEOPLE PLACED IN CONTINUING CARE WITHIN 30 DAYS

This measure monitors the percentage of people who are quickly moved from hospitals and communities into community-based continuing care. The higher the percentage the better, as it demonstrates capacity is available for long-term care or designated supportive living (levels 3, 4, and 4-dementia).

Percentage Placed in Continuing Care within 30 Days, Q2YTD 2018-19



Percentage Placed in Continuing Care within 30 Days Trend

Zone Name	2013-14	2014-15	2015-16	2016-17	2017-18	Q2YTD 2017-18	Q2YTD 2018-19	Trend	2018-19 Target
Provincial	**69.2%**	**59.9%**	**59.6%**	**56.1%**	**51.8%**	**51.2%**	**56.9%**	⇧	**58%**
South Zone	77.2%	59.5%	47.6%	45.9%	43.3%	46.0%	47.2%	⇨	58%
Calgary Zone	72.0%	57.1%	58.4%	57.4%	58.7%	57.4%	55.9%	⇨	58%
Central Zone	40.7%	54.6%	61.5%	60.3%	54.6%	55.8%	54.9%	⇨	58%
Edmonton Zone	78.4%	66.2%	64.5%	55.8%	48.7%	45.6%	65.9%	☆	58%
North Zone	62.8%	58.8%	58.7%	57.5%	43.9%	44.3%	42.4%	⇩	58%

Trend Legend: ☆Target Achieved ⇧Improvement ⇨Stable: ≤3% relative change compared to the same period last year ⇩Area requires additional focus

Total Clients Placed

Zone	2015-16	2016-17	2017-18	Q2YTD 2017-18	Q2YTD 2018-19
Provincial	**7,879**	**7,963**	**7,927**	**3,877**	**3,958**
South Zone	887	925	905	420	430
Calgary Zone	2,722	2,438	2,632	1,346	1,302
Central Zone	1,060	1,352	1,236	607	616
Edmonton Zone	2,506	2,575	2,388	1,109	1,280
North Zone	704	673	766	395	330

Source: AHS Seniors Health Continuing Care Living Options Report, as of October 17, 2018.

OBJECTIVE 1: MAKE THE TRANSITION FROM HOSPITAL TO COMMUNITY-BASED CARE OPTIONS MORE SEAMLESS.

WHY THIS IS IMPORTANT

Increasing the number of home care services and community-based options reduces demand for hospital beds, improves the flow in hospitals and emergency departments and enhances quality of life.

AHS has two performance measures to assess how quickly patients are moved from hospitals into community-based care.

AHS PERFORMANCE MEASURE

People Placed in Continuing Care within 30 Days is defined as the percentage of clients admitted to a Continuing Care Living Option (i.e., designated supportive living levels 3, 4, and 4-dementia or long-term care) within 30 days of the assessed and approved date the client is placed on the waitlist.

UNDERSTANDING THE MEASURE

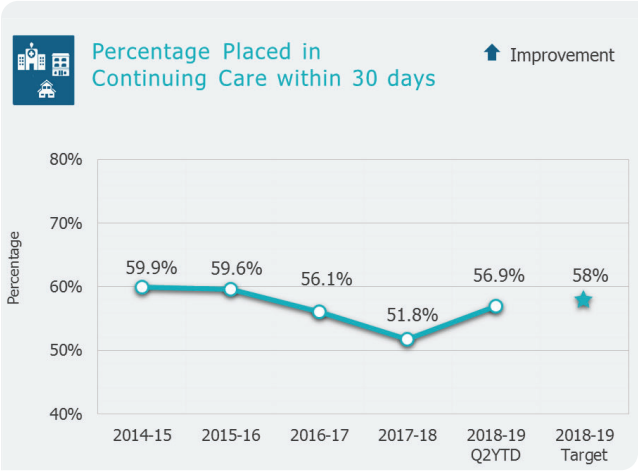
Timely and appropriate access to Continuing Care Living Options is a major issue in Alberta. By improving access to a few key areas, AHS will be able to improve flow throughout the system, provide more appropriate care, decrease wait times and deliver care in a more cost-effective manner. Timely placement can also reduce the stress and burden on clients and family members.

AHS wants to offer seniors and persons with disabilities more options for quality accommodations that suit their health care service needs and lifestyles.

This measure monitors the percentage of people who are quickly moved from hospitals and communities into community-based continuing care settings. The higher the percentage the better, as it demonstrates capacity is available for long-term care or designated supportive living (levels 3, 4, and 4-dementia).

HOW ARE WE DOING

2018-19 Q2YTD results indicate that this measure improved from the same period as last year (56.9% 2018-19 Q2YTD compared to 51.2% in 2017-18 Q2YTD).



Source: Meditech and Stratahealth Pathways

WHAT WE ARE DOING

In the first six months of 2018-19, AHS has opened 1,031 new continuing care beds. In Q2, AHS opened 477 new continuing care beds, which is more than the 2017-18 fiscal year total. Since 2010, AHS has opened 7,227 new beds to support individuals who need community-based care and supports (including palliative).

AHS opened three new continuing care facilities in Q2:

- MacLeod Pioneer Lodge (re-opened, South Zone)
- Bethany Riverview (Calgary Zone)
- Points West Living Wetaskiwin (Central Zone)
- Bar V Nook Supportive Living (North Zone)

For 2018-19 Q2YTD, the average wait time for continuing care placement from acute/sub-acute care was 50 days compared to 51 days for the same period last year. The number of people waiting in acute/sub-acute care is 622 as of September 30, 2018 compared with 896 people waiting last year; a 31% improvement over last year.

For 2018-19 Q2YTD, there were 3,958 people placed into continuing care from acute/sub-acute care and community compared to 3,877 people for the same period last year. Of this, 38% of clients were placed from the community.

It is important to note that not all of these patients are waiting in an acute care hospital bed. Many are staying in transition beds, sub-acute beds, restorative/ rehabilitation care beds, and rural hospitals where system flow pressures and patient acuity are not as intense.

AHS PERFORMANCE MEASURE

Percentage of Alternate Level of Care Patient Days is defined as the percentage of all hospital inpatient days when a patient no longer requires the intensity of care provided in a hospital setting and the patient's care could be provided in an alternate setting. This is referred to as alternate level of care (ALC).

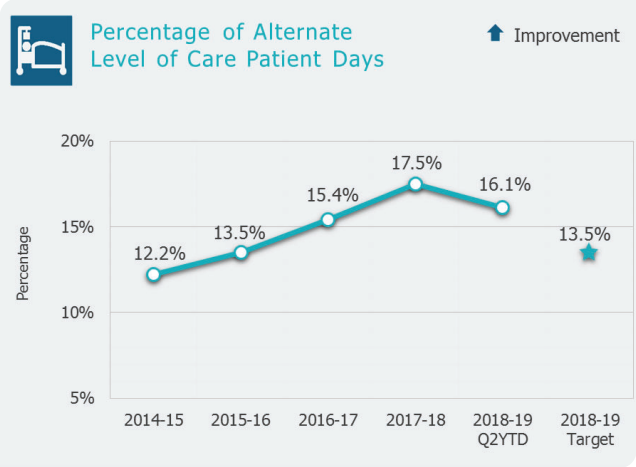
UNDERSTANDING THE MEASURE

Hospital beds are being occupied by patients who no longer need acute care services while they wait to be discharged to a more appropriate setting. These hospital days are captured in hospitalization data as patients are waiting for an alternate level of care.

If the percentage of ALC days is high, there may be a need to focus on ensuring timely accessibility to options for ALC patients. Therefore, the lower the percentage the better.

HOW WE ARE DOING

2018-19 Q2YTD results indicate that this measure improved from the same period as last year (16.1% in 2018-19 Q2YTD compared to 17.3% in 2017-18 Q2YTD).



Source: Discharge Abstract Database (DAD) - AHS Provincial

WHAT WE ARE DOING

Enhancing Care in the Community (ECC) is the roadmap for improving community-based care and services and reducing reliance on acute care services. The goal of ECC is to ensure that Albertans receive high quality care while we shift the focus of our current hospital-based care system to a community-based care focus. This way, we can provide patient-centred care within local communities, keeping Albertans out of hospital when not required. This, in turn, frees up beds for those who really need them.

Program Goal	Q2 Update
Expansion of Home Care Services and Palliative Care Services	
To enable people to live their homes for longer.	Approx. 85% of planned staff have been hired. Home care referrals and services provided have increased in Q2 by 24%.
Palliative Care Services	Approx. 30% of planned staff have been hired. A number of palliative education sessions have been completed with continuing care staff; many related to symptom management and hospice care.
Emergency Medical Services Programs (Community Paramedic Teams, and Assess, Treat and Refer processes)	
To offer treatments and services in the community to reduce use of emergency department and acute care services.	Approx. 90% of planned staff have been hired and training continues. Rural Community Response Teams (CRT) are active in North, Central and South zones with approximately 3,000 patient events in 2018-19.
Virtual Hospital in Edmonton Zone	
To deliver specialized transitional care by moving patients from hospital to community.	Program service model components have been validated and socialized. There are 22 patients enrolled in the program with multiple health issues who are being supported with extended social, medical, pharmacological and system-wide case management in their homes.
Complex Care Hub at Rockyview General Hospital in Calgary	
To provide Hospital-at-Home-like program (inpatient admission, case management and collaboration with patient's health home).	54 clients have been receiving service within the program in 2018-19. All patients have complex care plans. The team has engaged with all acute care lab sites for Community Paramedics to drop off client specimens at all sites to reduce travel time.
Enhanced Respite Day Programs in North Zone	
To offer enhanced home care service options (including respite) to community clients.	Approx. 15% of planned staff have been hired. Active recruitment continues. Delivered two front line education sessions.
Calgary Rural Palliative In-Home	
To increase equitable access for clients to palliative home care services in rural areas.	The program has served 38 new clients this fiscal year (173 total year to date client days). The program continues to authorize new rural clients and support current clients.
Intensive Home Care	
To support clients in their homes while awaiting an alternate level of care.	Approx. 70% of planned staff have been hired. Focus is on creating awareness of programs and developing education resources.
Community Support Teams	
To support complex patients that require extensive interventions.	Approx. 70% of planned staff have been hired. Programs are training staff on complex behaviors, identifying supporting resources and compiling resources for sites. The program is providing home care services to an increased number of clients waiting in the community for ALC assessments. Seniors Assess and Treat team processes have been developed and are working toward implementation.

AHS continues to provide Dementia Advice through Health Link 811 affording Albertans equitable access to dementia supports across the province. The total number of referrals in Q2 2018-19 increased by more than 40% compared to Q2 last year.