PERCENTAGE OF ALTERNATE LEVEL OF CARE PATIENT DAYS

Measure Definition:

The percentage of acute care days occupied by patients waiting for discharge to a more appropriate care setting.

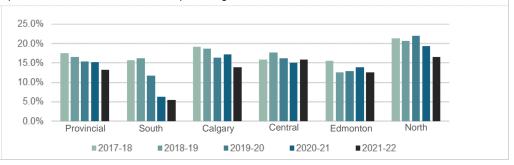
Why It's Important:

If the percentage of ALC days is high, there may be a need to focus on timely access to appropriate levels of care for ALC patients. Discharging patients who are no longer acutely ill or no longer need hospital care would free up space for acutely ill patients, as well as ensure discharged patients receive the care they need. For example, patients may be waiting for placement into long-term care or other community-based care, and there may be a need to focus on timelier placement. Therefore, the lower the percentage the better.

Performance Summary:

13.3% Provincial 2021-22

Result: **Improved** (Compared to the same period last year)



Percentage of ALC Patient Days - Trend

Zone	Site Name	2017-18	2018-19	2019-20	2020-21	2021-22	Result
Provincial	Provincial	17.5%	16.5%	15.4%	15.2%	13.3%	Improved
South	South Zone	15.7%	16.3%	11.8%	6.4%	5.5%	Improved
Zone	Chinook Regional Hospital	12.3%	17.3%	10.1%	4.9%	5.3%	Deteriorated
	Medicine Hat Regional Hospital	22.0%	13.4%	14.6%	8.9%	6.2%	Improved
	Other South Hospitals	11.6%	18.1%	11.6%	5.9%	5.0%	Improved
Calgary	Calgary Zone	19.2%	18.8%	16.4%	17.2%	13.9%	Improved
Zone	Alberta Children's Hospital	2.0%	4.4%	0.9%	2.8%	0.2%	Improved
	Foothills Medical Centre	19.2%	18.8%	16.8%	16.9%	13.3%	Improved
	Peter Lougheed Centre	14.4%	15.6%	13.5%	14.9%	12.4%	Improved
	Rockyview General Hospital	26.0%	23.2%	21.4%	22.0%	18.9%	Improved
	South Health Campus	19.6%	19.5%	14.3%	16.2%	9.6%	Improved
	Other Calgary Hospitals	21.9%	23.6%	22.2%	22.6%	23.0%	Stable
Central	Central Zone	15.9%	17.8%	16.3%	15.1%	16.0%	Deteriorated
Zone	Red Deer Regional Hospital Centre	12.2%	13.5%	8.0%	6.1%	5.8%	Improved
	Other Central Hospitals	18.3%	20.7%	21.6%	21.0%	22.2%	Deteriorated
Edmonton	Edmonton Zone	15.6%	12.7%	13.0%	14.0%	12.6%	Improved
Zone	Grey Nuns Community Hospital	10.8%	9.3%	9.3%	9.3%	8.0%	Improved
	Misericordia Community Hospital	17.4%	17.2%	15.2%	19.5%	17.2%	Improved
	Royal Alexandra Hospital	18.7%	14.8%	14.8%	15.4%	14.5%	Improved
	Stollery Children's Hospital	0.2%	0.1%	0.3%	0.1%	0.1%	Stable
	Sturgeon Community Hospital	22.5%	19.2%	15.9%	14.5%	9.2%	Improved
	University of Alberta Hospital	15.2%	10.3%	11.8%	13.6%	11.6%	Improved
	Other Edmonton Hospitals	14.4%	14.9%	19.7%	20.8%	22.6%	Deteriorated
North	North Zone	21.3%	20.7%	22.0%	19.4%	16.5%	Improved
Zone	Grande Prairie Regional Hospital	26.0%	19.3%	16.3%	15.4%	9.2%	Improved
	Northern Lights Regional Health Centre	8.0%	17.0%	15.1%	21.5%	17.3%	Improved
	Other North Hospitals	21.8%	21.9%	25.1%	20.4%	18.9%	Improved

Total ALC Discharges

Zone	2017-18	2018-19	2019-20	2020-21	2021-22
Provincial	17,099	15,573	16,175	14,604	15,397
South Zone	663	746	549	453	482
Calgary Zone	6,232	6,525	6,806	5,859	5,877
Central Zone	1,418	1,427	1,516	1,299	1,476
Edmonton Zone	7,709	5,947	6,191	5,976	6,573
North Zone	1,077	928	1,113	1,017	989

Source: AHS Provincial Discharge Abstract Database (DAD), as of April 29, 2022. Notes:

Results may change due to data updates in the source information system or revisions to the measure's inclusion and exclusion criteria.

Historical data from the Queen Elizabeth II Hospital is now reported under the Grande Prairie Regional Hospital.

Results are reported as "improved" if there is a 3% or greater relative change in a desirable direction when compared to the same time period last year; "deteriorated" if the 3% or greater relative change is in an undesirable direction; otherwise results are reported as "stable".

Goal 1: Improve the Experiences of Patients and Families

Objective 1: Expand community-based and home care options in the most appropriate setting.

To provide excellent healthcare experiences and to meet the needs of Alberta's growing and aging population, AHS strives to provide Albertans with care where they want it most— in their homes and communities.

Actions and Achievements

Enhance community-based care

- In 2021-22, AHS implemented the Sensory
 Therapeutic Enhancement Project (STEP)
 in North Zone which addresses behavioural
 and psychological symptoms of dementia by
 promoting safe and enriching care settings
 where social, psychological, cognitive,
 emotional and recreational care needs can be
 met.
- A new service model for outpatient and community physiotherapy was implemented in Calgary and Edmonton Zones. As of March 31, 2022, 128 contracted sites have implemented these standardized services.
- In 2021-22, Mobile Integrated Health and community paramedics expanded the in-home blood transfusions program to communities in the South Zone. Receiving transfusions at home improved quality of life and comfort for patients, and reduced exposure to other illnesses such as COVID-19.
- In January 2022, AHS announced a comprehensive Emergency Medical Services (EMS) 10-point plan that aims to ensure the most critical patients receive timely care and that services remain available and safe for all

Albertans. The plan focuses on immediate actions to create capacity within the EMS system, including hiring additional paramedics, transferring low-priority calls to other agencies, stopping the automatic dispatch of ambulances to motor vehicle collisions without injuries and implementation of an "hours of work" project to help ease fatigue. A ministerial-appointed provincial advisory committee is also developing recommendations to address system pressures.

Develop long-term care and designated supportive living spaces in the community

- In 2021-22, AHS opened 387 net new continuing care beds to support individuals who need community-based care and supports. AHS also opened six new continuing care facilities across the province.
- Ward rooms with three or more residents have been eliminated at continuing care sites across the province.
- AHS added surge capacity to address the shortage of continuing care capacity and decrease the number of individuals waiting in acute care for long-term care and designated supportive living during the pandemic. As of March 31, 2022, all temporary surge beds in continuing care have been closed.

Increase capacity for home care supports

 AHS is working with AH and Alberta Seniors and Housing to develop and implement collaborative referral and service delivery approaches to address the clinical and support needs of seniors living in the community. This program increases collaboration between

- hospitals, primary care networks, home care and social services to allow seniors to remain in their homes as long as possible, reduces caregiver burnout and improves overall quality of life. In 2021-22, a pilot project was implemented in Calgary Zone for patients discharged from the Foothills Medical Centre, leveraging support from local not-for-profit organizations such as The Way In Network and Carya.
- The Rural Palliative Care In-Home Funding Program supports the provision of end-of-life care in rural and remote areas so clients can remain at home instead of being admitted to hospital. In 2021-22, 179 clients were served by the program allowing 63 per cent to pass away in the comfort of their own home.

Strengthen the patient complaints process

Working with Alberta Health and the Health
 Quality Council of Alberta, AHS initiated
 improvement activities that will enhance
 the patient complaints process, including
 competency development and capacity building for concern management. In 2021-22,
 no investigations were opened by the Alberta
 Ombudsman to review administrative fairness,
 which indicates that AHS is appropriately
 managing concerns in accordance with
 the Patient Concerns Resolution Process
 Regulation (Alberta Regulation 2016/28).
 Additional information on patient concerns can
 be found in the Appendix.

Performance Results Summary

Percentage Placed in Continuing Care Within 30 Days

2017-18	2018-19	2019-20	2020-21	2021-22
51.8%	57.9%	60.0%	61.3%	65.6%

Source: AHS Seniors Health Continuing Care Living Options Report, as of April 22, 2022.

- This measure monitors the percentage
 of people who move from hospitals and
 communities into community-based continuing
 care settings. The higher the percentage the
 better, as it demonstrates availability of long term care or designated supportive living beds.
- As of Q4YTD (year-to-date), the percentage placed in continuing care within 30 days (65.6%) improved by seven per cent compared to the same period last year (61.3%).

Percentage of Alternate Level of Care (ALC) Patient Days

2017-18	2018-19	2019-20	2020-21	2021-22
17.5%	16.5%	15.4%	15.2%	13.3%

Source: AHS Provincial Discharge Abstract Database (DAD), as of April 29, 2022.

- This measure monitors the number of days a
 hospital bed is occupied by a patient who no
 longer needs acute care services while they
 wait to be discharged to a more appropriate
 care setting (called ALC days). The lower the
 percentage the better, as it demonstrates
 system capacity that meets population needs
 and suggests appropriate care transitions.
- As of Q4YTD, the percentage of ALC days (13.3%) improved by 13 per cent compared to the same period last year (15.2%).
- Using a similar definition, Alberta ranked 3rd among nine provinces for the lowest percentage of alternate level of care days (AB = 15.2%; Canada = 16.7%; Best Performing Province = 12.2%) (CIHI, 2020-21)*.

^{*} Parts of this material are based on data and information provided by the Canadian Institute for Health Information (CIHI). However, the analyses, conclusions, opinions and statements expressed herein are those of the author and not necessarily those of CIHI.