

Communiqué to NE LHIN Hospital Chiefs of Staff – Quality Based Procedures (QBPs)

June 2015

QBPs for Hip Fractures and Joint Replacements

Recently, the NE LHIN and your CEO received QBP indicators for hip fractures and joint replacements. These indicators include the years 2011, 2012 and 2013, comparing individual hospitals against regional and provincial averages. While progress has been made, data shows more work needs to be done to better meet targets ([see detailed information in Excel](#)). Note that the majority of data highlighted within this one-page summary is from 2013; 2014 data will be available in early fall.

The Valued Role of the NE LHIN Local Partnership Group

The Partnership Group, co-chaired by NE LHIN Senior Director Kate Fyfe and Tiz Silveri of the North Bay Regional Health Centre, is looking at the implications of Health System Funding Reform across our LHIN. Part of the Group's role is to work with a subcommittee that examines performance indicators associated with QBPs. The group meets quarterly and reviews data, including the set before you, as part of its efforts to ensure best quality care practices are used throughout the region. Membership is representative of hospitals across the North East.

Baseline Results for Joint Replacement QBP Indicators

- With an average of 136 days, patients in the NE LHIN **wait less for a surgical consult** compared to the Ontario experience. This ranges from 69 days at the West Parry Sound Health Centre (WPSHC) to 181 days at the Sault Area Hospital (SAH).
- However, patients in the North East **wait longer for surgery** (258 days) compared to Ontario (210).
- More patients have access to **neuraxial anesthesia** (90% vs 85%).
- **Overall, patient length of stay** in hospital is under target in the North East at 3.7 days, compared to the target of 4.4.
- **Most patients (95%) are discharged home**, higher than the provincial average of 91%.
- **More patients (51%) are discharged home with supports**, compared to 40% provincially.
- **A high percentage of patients have access to a post-operative** visit within 12 weeks at 97%.
- **There is a slightly higher 30-day readmission** rate in the North East, ranging from 2% to 6%.

Baseline Results for Hip Fracture QBP Indicators

- Overall, the North East is not meeting its 48-hour target for 90th percentile wait times for **hip fracture surgery**. The NE LHIN came in at about 80 hours, higher than the provincial average of 67 hours. Our best performing hospital was Health Science North (HSN) at 60 hours.
- Overall, **71% of hip fracture patients received surgery within 48 hours**. In 2013, the best performing hospital was HSN at 79%, surpassing the provincial average of 77% (but still shy of the target of 90%).
- **More anesthesia** was used in the North East at 63%, compared to the rest of the province at 57%.
- **ALC days** as the percentage of total hospital days was higher in the North East compared to the rest of the province. There is a wide variation from 0% at the North Bay Regional Health Centre to 63% at the WPSHC.
- Overall, 21% of hip fracture surgery patients are **discharged to rehab** in the North East, compared to 33% in Ontario. Again, there is a wide variation with 10% at the Timmins and District Hospital and 39% at the SAH.
- We had **more people discharged home with supports** at 19%, compared to 16% for the province.
- Almost 70% of hip fracture patients were seen by a **primary care provider**, comparable to the provincial average. The variation ranged from 44% at the SAH to 100% at Manitoulin Health Centre.
- **Readmit rates are lower** in the North East than in Ontario as a whole.
- **30-day mortality rates are higher** (9% vs 7%).

For more information on Quality Based Procedures, visit www.nelhin.on.ca or call 1-866-906-5446