

ONTARIO STROKE REPORT CARD, 2015/16: SOUTH EAST LOCAL HEALTH INTEGRATION NETWORK

Poor performance¹

Acceptable performance²

Exemplary performance³

Data not available or benchmark not available

Indicator No.	Care Continuum Category	Indicator ⁴	LHIN FY 2015/16 (2014/15)	Variance Within LHIN ⁵ (Min–Max)	Provincial Benchmark ⁶	High Performers ⁷	
						Sub-LHIN/Facility	LHIN
1	Public awareness and patient education	Proportion of stroke/TIA patients who arrived at the ED by ambulance.	57.8% (59.2%)	41.9–73.1%	65.3%	Essex Sub-LHIN	1, 4
2	Prevention of stroke	Annual age- and sex-adjusted inpatient admission rate for stroke/TIA (per 1,000 population).	1.6 (1.5)	1.3–2.2	1.1	Ottawa Centre Sub-LHIN	8, 11
3 ⁵	Prevention of stroke	Risk-adjusted stroke/TIA mortality rate at 30 days (per 100 patients).	11.6 (14.2)	0.0–22.9	–	–	11
4	Prevention of stroke	Proportion of ischemic stroke/TIA inpatients aged 65 and older with atrial fibrillation who filled a prescription for anticoagulant therapy within 90 days of discharge from acute care.	72.3% (65.9%)	62.5–100%	85.5%	South West York Region Sub-LHIN	None
5	Prevention of stroke	Proportion of ischemic stroke inpatients who received carotid imaging.	79.3% (77.2%)	28.6–89.8%	91.7%	Bluewater Health, Sarnia	7, 1
6	Acute stroke management	Median door-to-needle time among patients who received acute thrombolytic therapy (tPA) (minutes).	52.0 (56.0)	44.5–68.0	33.0	Hamilton Health Sciences Corp., General	None
7 ⁵	Acute stroke management	Proportion of ischemic stroke patients who received acute thrombolytic therapy (tPA).	12.5% (13.2%)	0.0–28.2%	17.7%	Hamilton Outer Core Sub-LHIN	11, 4
8 ⁵	Acute stroke management	Proportion of stroke/TIA patients treated on a stroke unit ⁸ at any time during their inpatient stay.	72.6% (68.0%)	19.0–86.0%	78.7%	Thunder Bay City Sub-LHIN	3
9	Prevention of stroke	Proportion of ischemic stroke/TIA patients discharged from the ED and referred to secondary prevention services.	76.8% (59.5%)	22.2–96.2%	94.4%	London Health Sciences Centre, University Hospital	None
10 ⁵	Acute stroke management	Proportion of ALC days to total length of stay in acute care.	23.5% (21.6%)	0.0–65.6%	8.2%	Bluewater Health, Sarnia	None
11 ⁵	Acute stroke management	Proportion of acute stroke (excluding TIA) patients discharged from acute care and admitted to inpatient rehabilitation.	30.2% (27.8%)	5.0–78.6%	47.8%	Chatham-Kent Sub-LHIN	1
12 ⁵	Stroke rehabilitation	Proportion of acute stroke (excluding TIA) patients with mild disability (AlphaFIM > 80) discharged home.	75.0% (78.9%)	68.4–75.6%	–	–	14, 12
13 ⁵	Stroke rehabilitation	Median number of days between stroke (excluding TIA) onset and admission to stroke inpatient rehabilitation.	8.0 (8.0)	5.0–13.0	5.0	Southlake Regional Health Centre	None
14 ⁵	Stroke rehabilitation	Median number of minutes per day of direct therapy received by inpatient stroke rehabilitation patients.	74.9 (–)	62.1–88.3	–	–	3, 8
15 ⁵	Stroke rehabilitation	Proportion of inpatient stroke rehabilitation patients achieving RPG active length of stay target.	42.8% (46.6%)	35.0–49.0%	82.0%	St. Joseph's Health Centre, Guelph	3
16	Stroke rehabilitation	Median FIM efficiency for moderate stroke in inpatient rehabilitation.	0.8 (0.8)	0.7–1.0	1.5	St. Joseph's Health Centre, Guelph	12, 3
17	Stroke rehabilitation	Mean number of CCAC visits provided to stroke patients on discharge from inpatient acute care or inpatient rehabilitation in 2014/15–2015/16.	13.3 (14.1)	–	12.4	Waterloo Wellington CCAC	3, 10
18 ⁵	Stroke rehabilitation	Proportion of patients admitted to inpatient rehabilitation with severe stroke (RPG 1100 or 1110).	44.7% (42.0%)	39.3–46.9%	58.7%	St. Joseph's Health Centre, Guelph	None
19 ⁵	Reintegration	Proportion of stroke/TIA patients discharged from acute care to LTC/CCC (excluding patients originating from LTC/CCC).	5.2% (5.9%)	0.0–21.1%	2.0%	Urban Guelph Sub-LHIN	None
20 ⁵	Reintegration	Age- and sex-adjusted readmission rate at 30 days for patients with stroke/TIA for all diagnoses (per 100 patients).	6.7 (7.0)	0.0–12.8	–	–	None

¹ Performance below the 50th percentile.

² Performance at or above the 50th percentile and greater than 5% absolute/relative difference from the benchmark.

³ Benchmark achieved or performance within 5% absolute/relative difference from the benchmark.

⁴ Facility-based analysis (excluding indicators 1, 2, 4, 7, 8, 11 and 19) for patients aged 18–108. Indicators are based on CIHI data. Low rates are desired for indicators 2, 3, 6, 10, 13, 19 and 20.

⁵ Excludes sub-LHINs or facilities with fewer than six patients.

⁶ Top benchmark achieved between 2013/14 and 2015/16. Benchmarks were calculated using the ABC methodology (Weissman et al. *J Eval Clin Pract* 1999; 5(3):269–81) on sub-LHIN or facility data.

⁷ Sub-LHIN/Facility: Highest performer among acute care institutions treating more than 100 stroke patients per year, rehabilitation facilities admitting more than 64 stroke patients per year, or sub-LHINs with at least 30 stroke patients per year. LHIN: Top two with exemplary performance.

⁸ The revised definition was developed with the consensus of Ontario Stroke Network regional directors (February 2014). There were 14 stroke units in 2012/13, 16 in 2013/14, 21 in 2014/15, and 28 in 2015/16.

Hospital Service Accountability Agreement indicator, 2015/16

– Data not available ⁵ Contributes to QBP performance

STROKE PROGRESS REPORT: SOUTH EAST LOCAL HEALTH INTEGRATION NETWORK

2015/16 COMPARED TO 2012/13–2014/15

Progressing well¹

Progressing²

Not progressing³

Data not available

Indicator No.	Care Continuum Category	Indicator ⁴	LHIN FY 2015/16 (Previous 3-Year Average)	Variance Within LHIN ⁵ 2015/16 (2012/13)		Greatest Improvement ⁶	
				Min	Max	Sub-LHIN/Facility	LHIN
1	Public awareness and patient education	Proportion of stroke/TIA patients who arrived at the ED by ambulance.	57.8% (59.1%)	41.9% (28.6%)	73.1% (71.2%)	Woodbridge (Vaughan) Sub-LHIN	None
2	Prevention of stroke	Annual age- and sex-adjusted inpatient admission rate for stroke/TIA (per 1,000 population).	1.6 (1.4)	1.3 (0.8)	2.2 (2.0)	Thunder Bay District Sub-LHIN	8
3 [§]	Prevention of stroke	Risk-adjusted ⁷ stroke/TIA mortality rate at 30 days (per 100 patients).	12.3 (16.6)	0.0 (14.1)	21.8 (27.4)	–	10, 11
4	Prevention of stroke	Proportion of ischemic stroke/TIA inpatients aged 65 and older with atrial fibrillation who filled a prescription for anticoagulant therapy within 90 days of discharge from acute care.	72.3% (66.0%)	62.5% (16.7%)	100% (67.9%)	Chatham Kent Sub-LHIN	9, 4
5	Prevention of stroke	Proportion of ischemic stroke inpatients who received carotid imaging.	79.3% (73.0%)	28.6% (37.5%)	89.8% (100%)	North Bay Regional Health Centre	2, 1
6	Acute stroke management	Median door-to-needle time among patients who received acute thrombolytic therapy (tPA) (minutes).	52.0 (56.0)	44.5 (62.5)	68.0 (67.0)	University Health Network	6, 7
7 [§]	Acute stroke management	Proportion of ischemic stroke patients who received acute thrombolytic therapy (tPA).	12.5% (14.2%)	0.0% (0.0%)	28.2% (29.4%)	Timiskaming Sub-LHIN	4, 11
8 [§]	Acute stroke management	Proportion of stroke/TIA patients treated on a stroke unit ⁸ at any time during their inpatient stay.	72.6% (49.8%)	19.0% (2.5%)	86.0% (83.2%)	Belleville Sub-LHIN	14, 2
9	Prevention of stroke	Proportion of ischemic stroke/TIA patients discharged from the ED and referred to secondary prevention services.	76.8% (–)	22.2% (–)	96.2% (–)	–	–
10 [§]	Acute stroke management	Proportion of ALC days to total length of stay in acute care.	23.5% (21.7%)	0.0% (0.0%)	65.6% (31.4%)	Rouge Valley Health System, Ajax	5, 3
11 [§]	Acute stroke management	Proportion of acute stroke (excluding TIA) patients discharged from acute care and admitted to inpatient rehabilitation.	30.2% (29.4%)	5.0% (7.4%)	78.6% (54.5%)	Central York Region Sub-LHIN	8, 3
12 [§]	Stroke rehabilitation	Proportion of acute stroke (excluding TIA) patients with mild disability (AlphaFIM > 80) discharged home.	75.0% (–)	68.4% (–)	75.6% (–)	–	–
13 [§]	Stroke rehabilitation	Median number of days between stroke (excluding TIA) onset and admission to stroke inpatient rehabilitation.	8.0 (10.0)	5.0 (6.0)	13.0 (17.0)	William Osler Health System, Brampton	5, 8, 10
14 [§]	Stroke rehabilitation	Median number of minutes per day of direct therapy received by inpatient stroke rehabilitation patients.	74.9 (–)	62.1 (–)	88.3 (–)	–	–
15 [§]	Stroke rehabilitation	Proportion of inpatient stroke rehabilitation patients achieving RPG active length of stay target.	42.8% (44.4%)	35.0% (19.0%)	49.0% (59.1%)	Hotel Dieu Shaver	3, 5
16	Stroke rehabilitation	Median FIM efficiency for moderate stroke in inpatient rehabilitation.	0.8 (0.8)	0.7 (0.5)	1.0 (1.0)	Grand River Hospital Corp., Freeport	3, 12
17	Stroke rehabilitation	Mean number of CCAC visits provided to stroke patients on discharge from inpatient acute care or inpatient rehabilitation in 2014/15–2015/16.	13.3 (14.2)	–	–	Waterloo Wellington CCAC	3, 6
18 [§]	Stroke rehabilitation	Proportion of patients admitted to inpatient rehabilitation with severe stroke (RPG 1100 or 1110).	44.7% (46.0%)	39.3% (44.4%)	46.9% (56.5%)	Providence Healthcare	7
19 [§]	Reintegration	Proportion of stroke/TIA patients discharged from acute care to LTC/CCC (excluding patients originating from LTC/CCC).	5.2% (8.9%)	0.0% (0.0%)	21.1% (20.3%)	Belleville Sub-LHIN	10, 1
20 [§]	Reintegration	Age- and sex-adjusted ⁷ readmission rate at 30 days for patients with stroke/TIA for all diagnoses (per 100 patients).	7.0 (7.8)	0.0 (3.9)	13.2 (13.0)	–	None

Hospital Service Accountability Agreement indicator, 2015/16

– Data not available [§] Contributes to QBP performance

¹ Statistically significant improvement.

² Performance improving but not statistically significant.

³ No change or performance decline.

⁴ Facility-based analysis (excluding indicators 1, 2, 4, 7, 8, 11 and 19) for patients aged 18–108. Indicators are based on CIHI data. Low rates are desired for indicators 2, 3, 6, 10, 13, 19 and 20.

⁵ Excludes sub-LHINs or facilities with fewer than six patients.

⁶ Sub-LHIN/Facility: Greatest improvement from 2012/13 among acute care institutions treating more than 100 stroke patients per year, rehabilitation facilities admitting more than 64 stroke patients per year, or sub-LHINs with at least 30 stroke patients per year. LHIN: Top two with greatest statistically significant improvement from 2012/13.

⁷ The 2012/13–2015/16 LHIN rate is used in calculating the LHIN risk-adjusted rate.

⁸ The revised definition was developed with the consensus of Ontario Stroke Network regional directors (February 2014). There were 14 stroke units in 2012/13, 16 in 2013/14, 21 in 2014/15, and 28 in 2015/16.

ONTARIO STROKE REPORT CARD, 2015/16

Progressing well¹

Progressing²

Not progressing³

Limited data

Indicator No.	Care Continuum Category	Indicator ⁴	Ontario FY 2015/16 (2014/15)	Variance Across LHINs (Min–Max)	Provincial Benchmark ⁵	High Performers ⁶	
						Sub-LHIN/Facility	LHIN
1	Public awareness and patient education	Proportion of stroke/TIA patients who arrived at the ED by ambulance.	58.0% (58.0%)	48.2–62.7%	65.3%	Essex Sub-LHIN	1, 4
2	Prevention of stroke	Annual age- and sex-adjusted inpatient admission rate for stroke/TIA (per 1,000 population).	1.3 (1.3)	1.1–1.9	1.1	Ottawa Centre Sub-LHIN	8, 11
3 ⁵	Prevention of stroke	Risk-adjusted stroke/TIA mortality rate at 30 days (per 100 patients).	11.1 (10.6)	9.8–15.2	–	–	11
4	Prevention of stroke	Proportion of ischemic stroke/TIA inpatients aged 65 and older with atrial fibrillation who filled a prescription for anticoagulant therapy within 90 days of discharge from acute care.	74.2% (72.6%)	66.9–79.6%	85.5%	South West York Region Sub-LHIN	None
5	Prevention of stroke	Proportion of ischemic stroke inpatients who received carotid imaging.	81.8% (79.0%)	72.5–88.6%	91.7%	Bluewater Health, Sarnia	7, 1
6	Acute stroke management	Median door-to-needle time among patients who received acute thrombolytic therapy (tPA) (minutes).	50.0 (52.0)	36.5–72.0	33.0	Hamilton Health Sciences Corp - General	None
7 ⁵	Acute stroke management	Proportion of ischemic stroke patients who received acute thrombolytic therapy (tPA).	12.4% (11.9%)	9.0–15.0%	17.7%	Hamilton Outer Core Sub-LHIN	11, 4
8 ⁵	Acute stroke management	Proportion of stroke/TIA patients treated on a stroke unit ⁷ at any time during their inpatient stay.	43.3% (32.5%)	2.6–80.6%	78.7%	Thunder Bay City Sub-LHIN	3
9	Prevention of stroke	Proportion of ischemic stroke/TIA patients discharged from the ED and referred to secondary prevention services.	73.9% (70.3%)	38.0–87.6%	94.4%	London Health Sciences Centre - University Hospital	None
10 ⁵	Acute stroke management	Proportion of ALC days to total length of stay in acute care.	26.8% (26.0%)	14.4–42.8%	8.2%	Bluewater Health, Sarnia	None
11 ⁵	Acute stroke management	Proportion of acute stroke (excluding TIA) patients discharged from acute care and admitted to inpatient rehabilitation.	35.5% (35.5%)	20.9–45.3%	47.8%	Chatham-Kent Sub-LHIN	1
12 ⁵	Stroke rehabilitation	Proportion of acute stroke (excluding TIA) patients with mild disability (AlphaFIM > 80) discharged home.	71.7% (71.5%)	58.9–83.9%	–	–	14, 12
13 ⁵	Stroke rehabilitation	Median number of days between stroke (excluding TIA) onset and admission to stroke inpatient rehabilitation.	8.0 (9.0)	6.0–15.0	5.0	Southlake Regional Health Centre	None
14 ⁵	Stroke rehabilitation	Median number of minutes per day of direct therapy received by inpatient stroke rehabilitation patients.	62.6 (–)	15.3–88.8	–	–	3, 8
15 ⁵	Stroke rehabilitation	Proportion of inpatient stroke rehabilitation patients achieving RPG active length of stay target.	63.3% (57.2%)	37.9–84.0%	82.0%	St. Joseph's Health Centre, Guelph	3
16	Stroke rehabilitation	Median FIM efficiency for moderate stroke in inpatient rehabilitation.	1.1 (1.0)	0.7–1.9	1.5	St. Joseph's Health Centre, Guelph	12, 3
17	Stroke rehabilitation	Mean number of CCAC visits provided to stroke patients on discharge from inpatient acute care or inpatient rehabilitation in 2014/15–2015/16.	8.2 (7.3)	5.3–15.0	12.4	Waterloo Wellington CCAC	3, 10
18 ⁵	Stroke rehabilitation	Proportion of patients admitted to inpatient rehabilitation with severe stroke (RPG 1100 or 1110).	40.8% (41.3%)	31.1–51.2%	58.7%	St. Joseph's Health Centre, Guelph	None
19 ⁵	Reintegration	Proportion of stroke/TIA patients discharged from acute care to LTC/CCC (excluding patients originating from LTC/CCC).	6.4% (7.0%)	3.4–9.3%	2.0%	Urban Guelph Sub-LHIN	None
20 ⁵	Reintegration	Age- and sex-adjusted readmission rate at 30 days for patients with stroke/TIA for all diagnoses (per 100 patients).	7.1 (8.0)	6.6–8.5	–	–	None

Hospital Service Accountability Agreement indicator, 2015/16

– Data not available ⁵ Contributes to QBP performance

¹ Performance below the 50th percentile.

² Performance at or above the 50th percentile and greater than 5% absolute/relative difference from the benchmark.

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⁶ Sub-LHIN/Facility: Highest performer among acute care institutions treating more than 100 stroke patients per year, rehabilitation facilities admitting more than 64 stroke patients per year, or sub-LHINs with at least 30 stroke patients per year. LHIN: Top two with exemplary performance.

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Local Health Integration Networks (LHINs)

1 Erie St. Clair	4 Hamilton Niagara Haldimand Brant	7 Toronto Central	10 South East	13 North East
2 South West	5 Central West	8 Central	11 Champlain	14 North West
3 Waterloo Wellington	6 Mississauga Halton	9 Central East	12 North Simcoe Muskoka	