

ONTARIO STROKE REPORT CARD, 2013/14: SOUTH EAST LOCAL HEALTH INTEGRATION NETWORK

Indicator No.	Care Continuum Category	Indicator ⁴			Provincial Benchmark ⁶	High Performer ⁷	
			Poor performance ¹	Acceptable performance ²		Sub-LHIN/Facility	LHIN
			LHIN FY 2013/14 (2012/13)	Variance Within LHIN ⁵ (Min–Max)			
1	Public awareness and patient education	Proportion of stroke/TIA patients who arrived at the ED by ambulance.	61.5% (56.9%)	46.4–76.9%	64.8% (64.0%)	Essex Sub-LHIN	1, 10
2	Prevention of stroke	Annual age- and sex-adjusted inpatient admission rate for stroke/TIA (per 1,000 population).	1.3 (1.3)	1.1–2.0	1.1 (1.1)	Flamborough and East Sub-LHINs	11, 8, 9
3 [§]	Prevention of stroke	Risk-adjusted stroke/TIA mortality rate at 30 days (per 100 patients).	16.0 (15.6)	0.0–31.8	–	–	7
4	Prevention of stroke	Proportion of ischemic stroke/TIA patients with atrial fibrillation prescribed or recommended anticoagulant therapy on discharge from acute care (excluding those with contraindications).	– (81.3% [†])	–	– (87.4% [†])	William Osler Health System, Etobicoke	14
5	Prevention of stroke	Proportion of ischemic stroke inpatients without atrial fibrillation who received carotid imaging.	74.0% (70.9%)	41.7–85.4%	90.8% (88.5%)	Thunder Bay Regional Health Sciences Centre	5, 6
6	Acute stroke management	Median door-to-needle time among patients who received acute thrombolytic therapy (tPA). (minutes)	50.0 (53.0 [†])	47.0–67.0	33.0 (48.0 [†])	Niagara Health System, Greater Niagara	4
7 [§]	Acute stroke management	Proportion of ischemic stroke patients who received acute thrombolytic therapy (tPA).	14.1% (15.2%)	0.0–28.6%	17.0% (17.0%)	East Niagara Sub-LHIN	10, 11, 14
8 [§]	Acute stroke management	Proportion of stroke/TIA patients treated on a stroke unit ⁸ at any time during their inpatient stay.	38.5% (38.5%)	2.6–79.0%	62.7% (61.4%)	Urban Guelph Sub-LHIN	3
9	Acute stroke management	Proportion of stroke (excluding TIA) patients with a documented initial dysphagia screening performed during admission to acute care.	– (56.9% [†])	–	– (87.5% [†])	Grey Bruce Health Services, Owen Sound	None
10 [§]	Acute stroke management	Proportion of ALC days to total length of stay in acute care.	18.8% (24.7%)	0.0–42.0%	11.7% (12.4%)	Grey Bruce Health Services, Owen Sound	None
11 [§]	Acute stroke management	Proportion of acute stroke (excluding TIA) patients discharged from acute care and admitted to inpatient rehabilitation.	28.1% (28.1%)	2.8–45.8%	46.3% (44.3%)	Lambton Sub-LHIN	None
12	Stroke rehabilitation	Proportion of stroke (excluding TIA) patients discharged from acute care who received a referral for outpatient rehabilitation.	– (4.2% [†])	–	– (12.8% [†])	Thunder Bay City Sub-LHIN	14, 3
13 [§]	Stroke rehabilitation	Median number of days between stroke (excluding TIA) onset and admission to stroke inpatient rehabilitation.	10.0 (12.0)	7.0–15.0	5.0 (6.0)	Southlake Regional Health Centre and Bluewater Health, Sarnia	None
14	Stroke rehabilitation	Mean number of minutes per day of direct therapy that inpatient stroke rehabilitation patients received.	–	–	–	–	–
15 [§]	Stroke rehabilitation	Proportion of inpatient stroke rehabilitation patients achieving RPG active length of stay target.	46.6% (43.2%)	26.3–68.2%	76.6% (73.1%)	Bruyère Continuing Care Inc.	None
16	Stroke rehabilitation	Median FIM efficiency for moderate stroke in inpatient rehabilitation.	0.9 (0.8)	0.7–1.0	1.3 (1.2)	Royal Victoria Regional Health Centre	12, 1, 9
17	Stroke rehabilitation	Mean number of CCAC visits provided to stroke/TIA patients in 2012/13 and 2013/14.	12.1 (12.1)	–	8.2 (8.5)	South East CCAC	10, 12
18	Stroke rehabilitation	Proportion of patients admitted to inpatient rehabilitation with severe strokes (RPG = 1100 or 1110).	43.5% (45.5%)	31.8–47.4%	57.3% (49.0%)	Stratford General Hospital	8
19 [§]	Reintegration	Proportion of stroke/TIA patients discharged from acute care to LTC/CCC (excluding patients originating from LTC/CCC).	9.1% (12.1%)	0.0–18.9%	2.8% (2.8%)	Barrie and Area Sub-LHIN	None
20 [§]	Reintegration	Age- and sex-adjusted readmission rate at 30 days for patients with stroke/TIA for all diagnoses (per 100 patients).	7.4 (8.4)	3.2–10.5	–	–	1

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, 7, 8, 11, 12 and 19) for patients aged 18–108. Indicators are based on CIHI data unless otherwise specified. Low rates are desired for indicators 2, 3, 6, 10, 13, 19 and 20.

⁵ Interpret with caution as the minimum or maximum values may be based on fewer than six patients.

⁶ Benchmarks were calculated using the ABC methodology (Weissman et al. *J Eval Clin Pract.* 1999; 5(3):269–81) on facility/sub-LHIN data; the 2012/13 benchmarks are displayed in brackets.

⁷ High performers include acute care institutions treating more than 100 stroke patients per year, rehabilitation facilities admitting more than 52 stroke patients per year, or sub-LHINs with at least 30 stroke patients per year.

⁸ Revised definition obtained through consensus with Ontario Stroke Network regional directors (February 2014). In 2012/13 there were 14 stroke units, in 2013/14 there were 16 stroke units.

⁹ Based on 2012/13 Ontario Stroke Audit data.

Hospital Service Accountability Agreement indicators, 2010/11

– Data not available n/a = Not applicable § = Contribute to QBP performance

STROKE PROGRESS REPORT: SOUTH EAST LOCAL HEALTH INTEGRATION NETWORK

2013/14 COMPARED TO 2010/11 – 2012/13

Progressing well¹

Progressing²

Not Progressing³

Data not available

Indicator No.	Care Continuum Category	Indicator ⁴	LHIN FY 2013/14 (previous 3-year average)	Variance Within LHIN ⁵ (Min–Max)	Provincial Benchmark ⁶	High Performer ⁷	
						Sub-LHIN/Facility	LHIN
1	Public awareness and patient education	Proportion of stroke/TIA patients who arrived at the ED by ambulance.	61.5% (59.4%)	46.4–76.9%	64.8% (64.0%)	Essex Sub-LHIN	1, 10
2	Prevention of stroke	Annual age- and sex-adjusted inpatient admission rate for stroke/TIA (per 1,000 population).	1.3 (1.3)	1.1–2.0	1.1 (1.1)	Flamborough and East Sub-LHINs	11, 8, 9
3 [§]	Prevention of stroke	Risk-adjusted stroke/TIA mortality rate at 30 days (per 100 patients).	16.0 (15.6)	0.0–31.8	–	–	7
4	Prevention of stroke	Proportion of ischemic stroke/TIA patients with atrial fibrillation prescribed or recommended anticoagulant therapy on discharge from acute care (excluding those with contraindications).	– (79.7% [†])	–	– (87.4% [†])	William Osler Health System, Etobicoke	14
5	Prevention of stroke	Proportion of ischemic stroke inpatients without atrial fibrillation who received carotid imaging.	74.0% (69.2%)	41.7–85.4%	90.8% (88.5%)	Thunder Bay Regional Health Sciences Centre	5, 6
6	Acute stroke management	Median door-to-needle time among patients who received acute thrombolytic therapy (tPA). (minutes)	50.0 (47.0 [†])	47.0–67.0	33.0 (48.0 [†])	Niagara Health System, Greater Niagara	4
7 [§]	Acute stroke management	Proportion of ischemic stroke patients who received acute thrombolytic therapy (tPA).	14.1% (14.4% [†])	0.0–28.6%	17.0% (17.0%)	East Niagara Sub-LHIN	10, 11, 14
8 [§]	Acute stroke management	Proportion of stroke/TIA patients treated on a stroke unit ⁸ at any time during their inpatient stay.	38.5% (38.5%)	2.6–79.0%	62.7% (61.4%)	Urban Guelph Sub-LHIN	3
9	Acute stroke management	Proportion of stroke (excluding TIA) patients with a documented initial dysphagia screening performed during admission to acute care.	– (59.2% [†])	–	– (87.5% [†])	Grey Bruce Health Services, Owen Sound	None
10 [§]	Acute stroke management	Proportion of ALC days to total length of stay in acute care.	18.8% (26.8%)	0.0–42.0%	11.7% (12.4%)	Grey Bruce Health Services, Owen Sound	None
11 [§]	Acute stroke management	Proportion of acute stroke (excluding TIA) patients discharged from acute care and admitted to inpatient rehabilitation.	28.1% (29.8%)	2.8–45.8%	46.3% (44.3%)	Lambton Sub-LHIN	None
12	Stroke rehabilitation	Proportion of stroke (excluding TIA) patients discharged from acute care who received a referral for outpatient rehabilitation.	– (5.6% [†])	–	– (12.8% [†])	Thunder Bay City Sub-LHIN	14, 3
13 [§]	Stroke rehabilitation	Median number of days between stroke (excluding TIA) onset and admission to stroke inpatient rehabilitation.	10.0 (12.0)	7.0–15.0	5.0 (6.0)	Southlake Regional Health Centre and Bluewater Health, Sarnia	None
14	Stroke rehabilitation	Mean number of minutes per day of direct therapy that inpatient stroke rehabilitation patients received.	–	–	–	–	–
15 [§]	Stroke rehabilitation	Proportion of inpatient stroke rehabilitation patients achieving RPG active length of stay target.	46.6% (37.8%)	26.3–68.2%	76.6% (73.1%)	Bruyère Continuing Care Inc.	None
16	Stroke rehabilitation	Median FIM efficiency for moderate stroke in inpatient rehabilitation.	0.9 (0.8)	0.7–1.0	1.3 (1.2)	Royal Victoria Regional Health Centre	12, 1, 9
17	Stroke rehabilitation	Mean number of CCAC visits provided to stroke/TIA patients in 2012/13 and 2013/14.	12.1 (11.3)	–	8.2 (8.5)	South East CCAC	10, 12
18	Stroke rehabilitation	Proportion of patients admitted to inpatient rehabilitation with severe strokes (RPG = 1100 or 1110).	43.5% (40.7%)	31.8–47.4%	57.3% (49.0%)	Stratford General Hospital	8
19 [§]	Reintegration	Proportion of stroke/TIA patients discharged from acute care to LTC/CCC (excluding patients originating from LTC/CCC).	9.1% (10.9%)	0.0–18.9%	2.8% (2.8%)	Barrie and Area Sub-LHIN	None
20 [§]	Reintegration	Age- and sex-adjusted readmission rate at 30 days for patients with stroke/TIA for all diagnoses (per 100 patients).	7.4 (8.3)	3.2–10.5	–	–	1

¹ Statistically significant improvement.

² Improving performance but not statistically significant.

³ No change or performance decline.

⁴ Facility-based analysis (excluding indicators 1, 2, 7, 8, 11, 12 and 19) for patients aged 18–108. Indicators are based on CIHI data unless otherwise specified. Low rates are desired for indicators 2, 3, 6, 10, 13, 19 and 20.

⁵ Interpret with caution as the minimum or maximum values may be based on fewer than six patients.

⁶ Benchmarks were calculated using the ABC methodology (Weissman et al. *J Eval Clin Pract.* 1999; 5(3):269–81) on facility/sub-LHIN data; the 2012/13 benchmarks are displayed in brackets.

⁷ High performers include acute care institutions treating more than 100 stroke patients per year, rehabilitation facilities admitting more than 52 stroke patients per year, or sub-LHINs with at least 30 stroke patients per year.

⁸ Revised definition obtained through consensus with Ontario Stroke Network regional directors (February 2014). In 2012/13 there were 14 stroke units, in 2013/14 there were 16 stroke units.

⁹ Based on Ontario Stroke Audit data (2008/09, 2010/11 and 2012/13). The 2012/13 benchmark for indicators 4, 6, 9 and 12 were calculated using 2012/13 Ontario Stroke Audit data.

Hospital Service Accountability Agreement indicators, 2010/11

– Data not available n/a = Not applicable [§] = Contribute to QBP performance

ONTARIO STROKE REPORT CARD, 2013/14

Progressing well¹

Progressing²

Not progressing³

Data not available

Indicator No.	Care Continuum Category	Indicator ⁴	Ontario FY 2013/14 (2012/13)	Variance Across LHINs (Min–Max)	Provincial Benchmark ⁵	High Performer ⁶	
						Sub-LHIN/Facility	LHIN
1	Public awareness and patient education	Proportion of stroke/TIA patients who arrived at the ED by ambulance.	58.7% (57.6%)	48.7–62.2%	64.8% (64.0%)	Essex Sub-LHIN	1, 10
2	Prevention of stroke	Annual age- and sex-adjusted inpatient admission rate for stroke/TIA (per 1,000 population).	1.3 (1.3)	1.0–1.8	1.1 (1.1)	Flamborough and East Sub-LHINs	11, 8, 9
3 [§]	Prevention of stroke	Risk-adjusted stroke/TIA mortality rate at 30 days (per 100 patients).	11.7 (11.8)	10.3–16.0	–	–	7
4	Prevention of stroke	Proportion of ischemic stroke/TIA patients with atrial fibrillation prescribed or recommended anticoagulant therapy on discharge from acute care (excluding those with contraindications).	– (76.3% [†])	–	– (87.4% [†])	William Osler Health System, Etobicoke	14
5	Prevention of stroke	Proportion of ischemic stroke inpatients without atrial fibrillation who received carotid imaging.	79.2% (74.6%)	72.9–87.7%	90.8% (88.5%)	Thunder Bay Regional Health Sciences Centre	5, 6
6	Acute stroke management	Median door-to-needle time among patients who received acute thrombolytic therapy (tPA) (minutes).	57.0 (62.5 [†])	32.0–85.0	33.0 (48.0 [†])	Niagara Health System, Greater Niagara	4
7 [§]	Acute stroke management	Proportion of ischemic stroke patients who received acute thrombolytic therapy (tPA).	11.9% (11.2%)	8.7–14.1%	17.0% (17.0%)	East Niagara Sub-LHIN	10, 11, 14
8 [§]	Acute stroke management	Proportion of stroke/TIA patients treated on a stroke unit ⁷ at any time during their inpatient stay.	28.2% (25.7%)	0.0–66.3%	62.7% (61.4%)	Urban Guelph Sub-LHIN	3
9	Acute stroke management	Proportion of stroke (excluding TIA) patients with a documented initial dysphagia screening performed during admission to acute care.	– (67.2% [†])	–	– (87.5% [†])	Grey Bruce Health Services, Owen Sound	None
10 [§]	Acute stroke management	Proportion of ALC days to total length of stay in acute care.	28.4% (27.7%)	18.8–34.8%	11.7% (12.4%)	Grey Bruce Health Services, Owen Sound	None
11 [§]	Acute stroke management	Proportion of acute stroke (excluding TIA) patients discharged from acute care and admitted to inpatient rehabilitation.	34.2% (32.6%)	27.9–39.7%	46.3% (44.3%)	Lambton Sub-LHIN	None
12	Stroke rehabilitation	Proportion of stroke (excluding TIA) patients discharged from acute care who received a referral for outpatient rehabilitation.	– (6.8% [†])	–	– (12.8% [†])	Thunder Bay City Sub-LHIN	14, 3
13 [§]	Stroke rehabilitation	Median number of days between stroke (excluding TIA) onset and admission to stroke inpatient rehabilitation.	9.0 (10.0)	6.0–16.0	5.0 (6.0)	Southlake Regional Health Centre and Bluewater Health, Sarnia	None
14	Stroke rehabilitation	Mean number of minutes per day of direct therapy that inpatient stroke rehabilitation patients received.	–	–	–	–	–
15 [§]	Stroke rehabilitation	Proportion of inpatient stroke rehabilitation patients achieving RPG active length of stay target.	53.2% (45.0%)	18.9–68.6%	76.6% (73.1%)	Bruyère Continuing Care Inc.	None
16	Stroke rehabilitation	Median FIM efficiency for moderate stroke in inpatient rehabilitation.	0.9 (0.9)	0.6–1.4	1.3 (1.2)	Royal Victoria Regional Health Centre	12, 1, 9
17	Stroke rehabilitation	Mean number of CCAC visits provided to stroke/TIA patients in 2012/13 and 2013/14.	5.6 (5.8)	4.4–12.1	8.2 (8.5)	South East CCAC	10, 12
18	Stroke rehabilitation	Proportion of patients admitted to inpatient rehabilitation with severe strokes (RPG = 1100 or 1110).	37.6% (34.5%)	27.7–52.7%	57.3% (49.0%)	Stratford General Hospital	8
19 [§]	Reintegration	Proportion of stroke/TIA patients discharged from acute care to LTC/CCC (excluding patients originating from LTC/CCC).	7.8% (7.9%)	3.1–11.6%	2.8% (2.8%)	Barrie and Area Sub-LHIN	None
20 [§]	Reintegration	Age- and sex-adjusted readmission rate at 30 days for patients with stroke/TIA for all diagnoses (per 100 patients).	7.7 (7.9)	5.6–9.4	–	–	1

¹ Statistically significant improvement from previous 3-year average.

² Performance improving but not statistically significant from previous 3-year average.

³ No change or performance decline from previous 3-year average.

⁴ Facility-based analysis (excluding indicators 1, 2, 7, 8, 11, 12 and 19) for patients aged 18–108. Indicators are based on CIHI data unless otherwise specified. Low rates are desired for indicators 2, 3, 6, 10, 13, 19 and 20.

⁵ Benchmarks were calculated using the ABC methodology (Weissman et al. *J Eval Clin Pract.* 1999; 5(3):269–81) on facility/sub-LHIN data; the 2012/13 benchmarks are displayed in brackets.

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⁸ Based on 2012/13 Ontario Stroke Audit data.

Hospital Service Accountability Agreement indicators, 2010/11

– Data not available n/a = Not applicable [§] = Contribute to QBP performance

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	