

Falls in long stay home care patients (retired)

Alternate Name*

Percentage of long stay home care patients who fell in the last 90 days

INDICATOR DESCRIPTION

Description*

This indicator measures the percentage of long-stay home care patients who say they have fallen in the last 90 days. A lower percentage is better.

Indicator Status*

Retired

HQO Reporting tool/product

Public reporting

Dimension*

Safe

Type*

Outcome

DEFINITION AND SOURCE INFORMATION

Unit of Measurement*

Percentage

Calculation Methods*

The unadjusted indicator is calculated as: numerator divided by the denominator times 100.

Numerator including inclusion/exclusion*

Number of long-stay home care patients who record a fall in the last 90 days.

Denominator including inclusion/exclusion*

Number of all eligible long-stay home care patients.

Exclusion Criteria:

- Patients totally dependent in bed mobility

General Exclusion Criteria:

To prevent capturing outcomes that result from the care received outside of the home care settings, assessments are excluded according to the following criteria:

- if case open date is missing and Reason for Assessment is "Initial Assessment"
- if the assessment took place within 60 days of when the referral was first received/case open date
- if the assessment was completed in a hospital setting

Adjustment (risk, age/sex standardization)- detailed

The indicator is risk-adjusted. Adjustment factors:

- Age 55 years or older (<55 vs 55+)
- Reduced physical activity in last 3 days (H6b = 1 vs 0)
- Unsteady gait (k6a=1 vs 0)
- Diagnosis of arthritis (J1m = 1,2 vs 0)
- Cognitive impairment (CPS score) (CPS score = 3,4,5,6 vs 0,1,2)

Data Source

Home Care Reporting System (HCRS)

Data provided to HQO by

Canadian Institute for Health Information (CIHI)

Reported Levels of comparability /stratifications (defined)

Province

Region

RESULT UPDATES

Indicator Results

[Click here to view Health Quality Ontario results for this indicator](#)

OTHER RELEVANT INFORMATION

Caveats and Limitations

1) The underlying denominator changes each year as the characteristics of the home care population change; therefore, careful interpretation of trends over time is required since any change may be the result of a combination of changes in the underlying population as well as the resource utilization of the patients being served and the performance of the service providers and CCACs. Risk adjustment may not be able to compensate for all of these changes. 2) Jurisdictions differ in their requirements for RAI-HC assessment frequency, in the process that the data go through for production, and in the regions assessed; therefore, comparison of Ontario results to other jurisdictions should only be made with these limitations noted. 3) Only long-stay home care patients receive RAI-HC assessments and are included in the HCRS database (i.e., clients who require care for more than 60 days of continuous service). These long-stay patients represent approximately half of home care clients. The other half of patients are short-stay patients who require short-term service while they recover from injury or surgery.

Comments Detailed

Data are based on information from mandatory Resident Assessment Instrument - Home Care (RAI-HC) assessments. The RAI-HC is a standardized assessment that is completed for long-stay home care patients (those requiring services for at least 60 consecutive days). Assessments are completed at authorization for home care services and at least once every 6 months thereafter. According to the Data Quality Documentation, Home Care Reporting System, 2011-2012, RAI-HC has undergone significant international reliability and validity testing that confirms it has high reliability and validity. Furthermore, the HCRS data have been evaluated and found to be of generally high quality and exhibit expected patterns of consistency both within and across assessment records. Refer to Home Care Reporting System (HCRS) RAI-HC Output Specifications 2016-2017 for further detail on indicator calculation.

Footnotes

The term "patient" is used in public reporting to denote an individual who received home care services. In QIPs, the term "client" is used. Both terms refer to the same home care recipients.

TAGS

TAGS*

Home Care
Outcome
Patient Safety and Never Events
Safe
Home Care Reporting System (HCRS)

PUBLISH

PUBLISH DATETIME*

15/02/2019 16:34:00