

# Home Care Clients' Decreased Ability to Perform Daily Activities

#### Alternate Name\*

Home care clients whose ability to perform daily activities has decreased

#### **INDICATOR DESCRIPTION**

#### **Description\***

This is the percentage of clients, of all ages, receiving publicly funded home care services for at least 60 days, whose ability to perform daily activities (such as eating and bathing) decreased over the last six months. A lower percentage of clients is better. Update

# **Select Location:**

Select Area by City Select Area by Postal Code Select Area by Region Search by hospital name <u>Clear search</u> Search by city <u>Clear search</u> Search by postal code <u>Clear search</u> SEARCH

#### **Indicator Status\***

Active

#### HQO Reporting tool/product

On-Line Public Reporting

#### **Dimension\***

Effective

Safe

#### Type\*

Outcome

## **DEFINITION AND SOURCE INFORMATION**

#### Unit of Measurement\*

Percentage

#### **Calculation Methods\***

Numerator divided by the denominator times 100.

#### Numerator including inclusion/exclusion\*

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The number of long-stay home care clients whose status in Activities of Daily Living (ADL) (bathing, personal hygiene and locomotion) functioning was higher in their prior assessment that their target assessment. The following data elements are used: H2e Dressing Upper Body H2f Dressing Lower Body H2g Eating H2h Toilet Use; H2i Personal Hygiene; H2j Bathing.

#### **Denominator including inclusion/exclusion\***

Number of home care patients with at least two consecutive assessments.

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

This indicator is risk adjusted. Adjustment Factors: Age ge 65, 12 Months or less between Assessments, Clinical Risk, Meal Prep Difficulty, Difficulty housework, Difficulty bathing, Falls, Unsteady gait, Admitted Hospitals, CPS, Number of Months between Assessments, ADL Hierarchy 2+, Age ge 80, Institutional Risk, ADL Hierarchy 3+

#### Data Source

Home Care Reporting System (HCRS)

#### Data provided to HQO by

Canadian Institute for Health Information (CIHI)

#### Reported Levels of comparability /stratifications (defined)

Time

Region

### **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 results of a combination of changes in the underlying population as well as the resource utilization of the clients being served and the performance of the service providers and LHINs. 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 limitations noted. 3) Only long-stay home care clients 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 clients represent approximately half of home care clients. The other half of clients are short-stay clients who require short-term service while they recover from injury or surgery.

#### **Comments Detailed**

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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 clients (those requiring services for at least 60 consecutive days). Assessments are completed at authorization for home care services and at least once every six 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 Home Care Reporting System (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 "client" is used in public reporting to denote an individual who received home care services. Other organizations may use the term "patient". Both terms refer to the same home care recipients.

## TAGS

#### TAGS\*

Home Care

Outcome

Patient Safety and Never Events

Effective

Safe

Home Care Reporting System (HCRS)

# PUBLISH

#### **PUBLISH DATETIME\***

10/01/2019 13:37:00