

Appendix C- April 2018 Schedule 4 Client Service Contract Performance Indicators

Indicator	Definition
Referral Acceptance Rate	<p>Measures the number of requests to provide visit and/or hourly service to new clients (referrals) accepted by the service provider within the specified response timeframe</p> <p><u>Numerator:</u> Number of visit referrals accepted in a month (both urgent and non-urgent), multiplied by 100 OR Number of hourly referrals accepted in a month (both urgent and non-urgent), multiplied by 100.</p> <p><u>Denominator:</u> Number of visit referrals offered in the same month (both urgent and non-urgent) OR Number of hourly referrals offered in the same month (both urgent and non-urgent).</p>
Overall Satisfaction	<p>% of respondents who rate the services provided by their service provider as very good or excellent</p> <p><u>Numerator:</u> Number of respondents who rated 4 or 5 (Very Good or Excellent) when asked the question: Overall how would you rate the [Service_Provided_Name] provided by [ServiceProvided_Org]?</p> <p><u>Denominator:</u> Total number of respondents for whom a response was reported on the question: Overall how would you rate the [Service_Provided_Name] provided by [ServiceProvided_Org]?</p>
Satisfaction with Continuity	<p>Total score as a percentage of total possible score on the question: Has receiving [SERVICE NAME] from different [PROFESSIONAL NAMES] caused any problems for the quality of care [YOU RECEIVE/YOU RECEIVED/NAME RECEIVES/ NAME RECEIVED]?</p> <p><u>Numerator:</u> Number of respondents who rated “Never”, “Sometimes”, “Often” or “Always” (where Never = 4, Sometimes = 3, Often = 2 and Always = 1) when asked the question: Has receiving [SERVICE NAME] from different [PROFESSIONAL NAMES] caused any problems for the quality of care [YOU RECEIVE/YOU RECEIVED/NAME RECEIVES/ NAME RECEIVED]?</p> <p><u>Denominator:</u> Total possible score (4 times the number of respondents answering the question)</p>

Indicator	Definition
Patient Centred Care Appointments (KPI 3)	<p>Number of respondents who rated “Always” in response to each of the following three questions: i) Were visits from [SERVICE PROVIDER] arranged at a convenient time? li) In the last two months of care, how often did [SERVICE PROVIDER] arrive on time? iii) How often did this agency or [SERVICE PROVIDER] keep you informed about when [SERVICE PROVIDER] would arrive?</p> <p><u>Numerator:</u> Number of respondents who rated “Always” in response to each of the following three questions: : i) Were visits from [SERVICE PROVIDER] arranged at a convenient time? li) In the last two months of care, how often did [SERVICE PROVIDER] arrive on time? iii) How often did this agency or [SERVICE PROVIDER] keep you informed about when [SERVICE PROVIDER] would arrive?</p> <p><u>Denominator:</u> Total number of respondents answering all three questions.</p>
30 Day Readmission Rate	<p>Readmission rates within 30 days for the same condition</p> <p><u>Numerator:</u> number of clients on the pathway who were discharged and then readmitted within 30 days</p> <p><u>Denominator:</u> number of clients on the pathway who were discharged</p>
Final Outcomes Achieved	<p>% of final outcomes achieved according to the pathway</p> <p><u>Numerator:</u> number of clients on the pathway who have reached the final interval and have achieved all outcomes on the final pathway interval</p> <p><u>Denominator:</u> number of clients on the pathway who have reached the final pathway interval</p>
Outcomes Achieved by Day X	<p>% of final outcomes achieved by day x threshold</p> <p><u>Numerator:</u> number of clients on the pathway who have reached the day X threshold and have achieved all outcomes on the final pathway interval</p> <p><u>Denominator:</u> number of clients on the pathway who have reached the day X threshold</p>

Indicator	Definition
Discharge Reports	<p>Measures the rate of discharge reports received by the CCAC</p> <p><u>Calculation:</u> (# times that the service provider has submitted a discharge report on or before the applicable deadline in a month/# of discharge reports that should have been submitted in that month) X 100</p>
Missed Care	<p>“Missed Care” means any scheduled Fixed Period Visit or Hourly Visit to a Patient, authorized by the CCAC as part of the Patient Care Plan, that has been accepted by the Service Provider but that the Service Provider fails to attend and fails to reschedule the visit time to the satisfaction of the Patient in accordance with the Patient Care Plan and includes a Fixed Period Visit or Hourly Visit required by the Patient Care Plan that the Service Provider originally accepts and then subsequently informs the CCAC that it is unable to carry out;”</p> <p>“For clarity, for the purposes of the definition of Missed Care, a Fixed Period Visit or Hourly Visit requested by the CCAC for a specific time represents a requirement of the Patient Care Plan and if such time specific Fixed Period Visit or Hourly Visit is not delivered at the specified time, it shall be considered Missed Care for the purposes of this Agreement, regardless of whether a Patient has accepted the delivery of Services at a different time as an alternative to the specified time.”</p> <p><u>Numerator:</u> Any visit (fixed period or hourly visit) to a Client, authorized by the CCAC as part of the Patient Care Plan, that the Service Provider fails to attend and is unable to reschedule in accordance with the Patient Care Plan.</p> <p><u>Denominator:</u> All visits (fixed period visits or hourly visits) delivered plus the number of visits (fixed period visits or hourly visits) that are not delivered in accordance with the Patient Care Plan.</p>

Indicator	Definition
5 Day Wait Time – Personal Support – by Patient Available Date	<p data-bbox="570 233 1333 331">% of complex patients who received their first personal support service within 5 days of the date the patient is available to receive service.</p> <p data-bbox="570 380 711 405"><u>Numerator:</u></p> <p data-bbox="570 411 1344 583"># of complex Patients (as designated by the CCAC) who receive their first Fixed Period Visit or Hourly Visit of Personal Support and Homemaking Services for the first Referral for Personal Support and Homemaking Services no later than 5 days following the Patient Available Date in a month.</p> <p data-bbox="570 632 737 657"><u>Denominator:</u></p> <p data-bbox="570 663 1317 762"># of complex Patients (as designated by the CCAC) for whom a first Referral for Personal Support and Homemaking Service is made within the same month.</p>
5 Day Wait Time – Nursing – by Patient Available Date	<p data-bbox="570 852 1333 919">% of all patients who received their first nursing service within 5 days of the date the patient is available to receive service.</p> <p data-bbox="570 968 711 993"><u>Numerator:</u></p> <p data-bbox="570 999 1263 1129"># of Patients who receive their first Fixed Period Visit or Hourly Visit of Nursing Services for the first Referral for Nursing Services no later than 5 days following the Patient Available Date in a month.</p> <p data-bbox="570 1178 737 1203"><u>Denominator:</u></p> <p data-bbox="570 1209 1300 1276"># of Patients for whom a first Referral for Nursing Services is made in the same month.</p>