**Wait time from hospital discharge to service initiation**

*Resource for Indicator Standards (RIS)*

*Health Analytics Branch, Ministry of Health and Long-Term Care*

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**Indicator description**

**RIS indicator name**

Wait time from hospital discharge to service initiation

**Other names for this indicator**

- Wait time from hospital discharge to service initiation (hospital clients) (90th and 50th percentile)
- 90th percentile wait time (in days) from application to initiation of home care services - hospital applicants

**Indicator description**

Number of days from the hospital discharge date to the first non-case management (CM) service for clients whose referral source was hospital.

Both 90th and 50th percentiles are calculated for the Multi-Sector Service Accountability Agreement (MSAA).

The 90th (or 50th) percentile is the point at which 90% (or 50%) of the clients received their service while the other 10% (or 50%) waited longer. The 90th (or 50th) percentile wait time is an actual wait time of a client and is not estimated.

**Accountability agreement(s) or ministry initiative(s) the indicator supports**

- Multi-Sector Service Accountability Agreement (MSAA), 2014-2017
- The Quarterly

**Numerator**

**Data source**

Discharge Abstract Database (DAD), Canadian Institute for Health Information (CIHI)
Inclusion/exclusion criteria

Includes:
1. In-Home Program includes requested programs being In-Home (01); in Adult Day Care (05); or in Supportive Housing (06);
2. Eligible clients: Assessment Outcome EQUAL TO (12) Eligible client admitted to in-home services; (15) Eligible for Long-term care (LTC); or (16) Eligible in-home plus other services;
3. Hospital clients (based on Step 3 of Calculation below);
4. Clients present in both DAD and HCD Datasets.

Excludes:
1. Community referrals:
   a. School, LTC placement and Other Programs;
   b. Home care episodes with calculated wait time less than 0 or greater than 365 days.
2. Episodes with only a case management service.

Calculation

Steps:
1. Select service date for the time period of interest.
2. Identify client eligibility for home care (refer to inclusion criteria for details).
3. Determine if the application was from community or hospital using the Intake Referral Source:
   a. Hospital – referrals with Intake Referral Source equal to:
   b. GENERAL HOSPITAL - OUTPATIENT
   c. GENERAL HOSPITAL - INPATIENT
   d. SPECIALTY HOSPITAL - OUTPATIENT
   e. SPECIALTY HOSPITAL – INPATIENT
   f. Community – All other Intake Referral Sources.
4. Link service record (HCD) to Hospital Discharge Record (DAD) using the following criteria:
   a. Health Card number match,
   b. HCD application date was between DAD admission & discharge date,
   c. HCD discharge date is greater than DAD discharge date or missing (active case).
5. Calculate number of days between DAD discharge date and first non-case management Community Care Access Centre (CCAC) service date. Apply the following boundaries:
   a. Lower Boundaries: Greater than or equal to zero
   b. Upper Boundaries: Less than or equal to 365 days.
6. Calculate the 90th (or 50th) percentile for the number of days between the discharge date and the first non-case management CCAC service date.
Denominator

**Data source**
N/A

**Inclusion/exclusion criteria**
- **Includes:**
  N/A
- **Excludes:**
  N/A

**Calculation**
- **Steps:**
  N/A

Timing and geography

**Timing/frequency of release**
How often and when data are being released (e.g., be as specific as possible…data are released annually in mid-May)
- Ministry of Health and Long-term Care (MOHLTC) receives HCD data quarterly, ~6 weeks after end of quarter. MOHLTC receives Hospital DAD data quarterly, ~20 weeks after end of quarter.

**Trending**

**Years available for trending**
- Data are available from fiscal year (FY) 07/08 (post CCAC realignment).

**Levels of comparability**

**Levels of geography for comparison**
- Data are available at the level of the CCAC and province.

Additional information

**Limitations**
Specific limitations
There could be wait lists in place in some CCACs which would affect the number of days since the clients will not be counted until the service is delivered.

Each case is reported under the fiscal year and quarter in which the client received their first home care service. Approximately 3% of records per fiscal year are dropped due to invalid (less than zero) or implausible (over a year) wait times.

**Comments**

Additional information regarding the calculation, interpretation, data source, etc.

The re-alignment of the 42 CCACs to the 14 Local Health Integration Network (LHIN) CCACs took place as of January 1, 2007. From fiscal year 2007/08 and onward, complete years of data were reported under the new 14 CCAC boundaries.

**References**

Provide URLs of any key references (e.g., Diabetes in Canada, HTTP:// …)

N/A

**Contact information**

For more information about this indicator, please contact RIS@ontario.ca.

**Date RIS document created (YYYY-MM-DD)**

2012-12-07

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2016-02-17