

# **ALC Rate Methodology**

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## **Interpretation Note:**

Please be advised that the methodology for calculating the denominator of the ALC Rate will be updated effective December 1, 2022. This update will better reflect the intention of the ALC Rate as an indicator that represents the proportion of inpatient days in Acute and Post-Acute care beds that are spent designated ALC in a specific period. This includes patients who may be off-serviced in a different bed type compared to the inpatient service they had

## **Exclusions**

- 1. ALC cases discontinued due to 'Data Entry Error'.
- 2. ALC cases identified by the facility for exclusion.
- 3. ALC Days is excluded for the portion of the time when Inpatient Service = Discharge Destination for Post-Acute Care (\*Exception: Bloorview Rehab, CCC to CCC)

## **Methodology Notes**

- The day of ALC designation is counted as an ALC day but the date of discharge or discontinuation is not counted as an ALC day.
- For cases with an ALC designation date on the last day of a reporting period and no discharge/discontinuation date, then ALC days = 1.
- The ALC Rate indicator methodology makes the assumption that the Inpatient Service data element (as defined in the WTIS) is comparable to the Bed Type data element (as defined in the BCS).

#### Calculation

#### **Total ALC Days**

The total ALC days represents the number of ALC days contributed by patients designated ALC within the same reporting period as the Bed Census Summary data submitted. Inpatient service type is identified in the WTIS.

Acute ALC days = ALC days for Inpatient Services NS + SU + IC Post-Acute ALC days = ALC days for Inpatient Services CC + RB + MH

- CCC ALC days = ALC days for Inpatient Service CC
- Rehab ALC days = ALC days for Inpatient Service RB
- Mental Health ALC days = ALC days for Inpatient Service MH

## **Total ALC Days by Discharge Destination**

The total ALC days by discharge destination represents the number of ALC days contributed by patients designated ALC within the same reporting period as the Bed Census Summary data submitted who have waited for the discharge destination during the patient journey, irrespective of the current discharge destination.

## Denominator: Total Inpatient Days (October 2021 Data Onwards)

## **Data Source**

The data source used to calculate the total patient days in the ALC Rate Report is the Daily Bed Census Segmentation.

Ontario hospitals make daily data submissions to the Ministry of Health and Long Term Care via Daily Bed Census Segmentation (BCS) Application.

Acute Admission, Discharge and Death data is submitted as of 12:00 AM midnight. Data on the number of patients occupying a bed is submitted as of 11:00 AM.

ATC takes a data cut on a defined date from the application to use for the total patient days in the ALC Rate Report.

Reactivation Care Centres (RCC) are assigned unique Master Institution Number. Patient days in RCC beds are excluded based on Master Institution Number.

#### **Exclusions**

- 1. Patient days contributed by inpatients in the emergency department (Bed Type = Emergency (Emerg + PARR, Emergency + PARR)).
  - 2. Patient days contributed by newborns in bassinets and NICU bassinets.

#### Calculation

Acute Patient days = the total number of patient days occupying Acute including Mental Health Rehabilitation (GR) + Special Rehabilitation (SR) + Mental Health - Adult (MH) Beds

- CCC Patient days = the total number of patient days occupying Complex Continuing Care (CR) Beds
- Rehab Patient days = the total number of patient days occupying in General Rehabilitation (GR) +
   Special Rehabilitation (SR) Beds
- Mental Health Patient days = the total number of patient days occupying Mental Health Adult
   (MH) Beds

Denominator: Total Inpatient Days (July 2017 - September 2021 Data)

## **Data Source**

The data source used to calculate the total patient days in the ALC Rate Report is the Daily Bed Census Summary.

Ontario hospitals make daily data submissions to the Ministry of Health and Long Term Care via Daily Bed Census Summary (BCS) Application. Data submitted is a count of all patients occupying a bed as of 12:00 AM midnight.

ATC takes a data cut on a defined date from the application to use for the total patient days in the ALC Rate Report.

## **Exclusions**

- 1. Patient days contributed by inpatients in the emergency department (Bed Type = Emergency (Emerg + PARR, Emergency + PARR)).
- 2. Patient days contributed by newborns in bassinets and NICU bassinets.

## Calculation

Acute Patient days = the total number of patient days occupying Acute with Mental Health Children/Adolescent Rehabilitation (GR) + Special Rehabilitation (SR) + Mental Health - Adult (MH) Beds

- CCC Patient days = the total number of patient days occupying Complex Continuing Care (CR) Beds
  - Rehab Patient days = the total number of patient days occupying in General Rehabilitation (GR) +
- Special Rehabilitation (SR) Beds
  - Mental Health Patient days = the total number of patient days occupying Mental Health Adult
- (MH) Beds

## Denominator: Total Inpatient Days (July 2011 - May 2017 Data)

## **Data Source**

The data source used to calculate the total patient days in the ALC Rate Report is the Bed Census Summary (BCS) [previously the Daily Census Summary (DCS)].

Ontario hospitals make monthly data submissions to the ministry's Health Data Branch (HDB) Web Portal. ATC then takes a data cut from the Web Portal to use for the total patient days in the ALC Rate Report.

Parts of this material are based on data and information compiled and provided by MOHLTC. However, the analyses, conclusions, opinions and statements expressed herein are those of the author, and not necessarily those of MOHLTC.

Please refer to the BCS DQ Notes for more detailed information.

## **Exclusions**

1. Patient days contributed by inpatients in the emergency department (Bed Type = Emergency (Emerg + PARR, Emergency + PARR)).

2. Patient days contributed by newborns in bassinets and NICU bassinets.

## Calculation

The total patient days represents the total number of patient days contributed by inpatients within the specific reporting month/quarter. Bed type is identified in the BCS data submission. The column names as they appear in the BCS are indicated in brackets.

> Acute Patient days = the total number of patient days contributed by inpatients in Medical (MED) + Surgical (SURG) + Combined Medical & Surgical (CMS) + Intensive Care and Coronary Care (ICU) + Obstetrics (OBS) + Paediatric (PAE) + Child/Adolescent Mental Health (Children MH) + Acute Addiction (Addiction) + Pediatrics in Nursery (Paed Days in Nursery) + Newborns (Level 1 - General + Level 2 - Intermediate + Level 3 - ICU Neonatal + Not in Regular)

> Post-Acute Patient days = the total number of patient days contributed by inpatients in Chronic (Chronic) + General Rehabilitation (Gen. Rehab) + Special Rehabilitation (Spec. Rehab) + Acute Psych (Acute Psy) + Addiction (Addiction) + Forensic (Forensic) + Psychiatric Crisis Unit (Crisis Unit) + Longer Term Psychiatric (Long Term)

- CCC Patient days = the total number of patient days contributed by inpatients in Chronic (Chronic)
- Rehab Patient days = the total number of patient days contributed by inpatients in General Rehabilitation (Gen. Rehab) + Special Rehabilitation (Spec. Rehab)

Mental Health Patient days = the total number of patient days contributed by inpatients in Acute Psych (Acute Psy) + Addiction (Addiction) + Forensic (Forensic) + Psychiatric Crisis Unit (Crisis Unit) + Longer Term Psychiatric (Long Term)

## **Calculations**

ALC Rate (inpatient days) = Total number of ALC days in a given time period - X 100% Total number of inpatient days in the same time period

%Contribution by Discharge Total ALC days by Discharge Destination in a given time period X 100% Total number of inpatient days in the same time period Destination to ALC Rate =

## Forecasting/Trajectory

Forecasting with seasonal adjustments were done using Linear Exponential Smoothing (LES). Exponential smoothing improves on the simple moving average method by assigning exponentially decreasing weights on past observations over time. Recent observations are given relatively more weight in forecasting than the older observations (Undated, Engineering Statistics Handbook - link #3 below).

Please refer to the following links for description and detailed calculation methodology of Linear Exponential Smoothing.

- 1. http://people.duke.edu/~rnau/411outbd.htm
- 2. http://www.lums.lancs.ac.uk/files/mansci/18735.pdf
- 3. http://www.itl.nist.gov/div898/handbook/pmc/section4/pmc43.htm

Please note that link 1 has the step by step instruction on how to do LES and a downloadable template in excel.

The smoothing coefficient, which is required to forecast future LOS, was precalculated to minimize prediction errors.

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## **ALC Discharge by Disposition Methodology Notes**

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## **Interpretation Note:**

Data Source: Alternate Level of Care data in the Wait Time Information System (WTIS-ALC)

Current Fiscal Year Data Extraction Date: Jun 09, 2025 (ALC Data as of 11:59 PM on Jun 08, 2025)\*Please see Data Quality notes for data extraction dates for previous fiscal years.

## **Exclusions**

- ALC Cases discontinued for a reason of 'Data Entry Error'
- ALC Cases that were identified by the Facility for exclusion
   Discharge/Discontinuation Date)
- ALC cases having Inpatient Service=Discharge Destination for Post-Acute Care (Exception: Bloorview Rehab, CCC to CCC)

## Calculation Details:

Notes Regarding The Number of ALC Cases - Column E Open Cases ALC Cases designated or re-designated prior to the end of the reporting month, that are still open as of the last day of the reporting month.

## **Discharged Cases**

ALC cases discharged to an ALC discharge destination prior to the end of the reporting month.

#### **Discontinued Cases**

Cases that have been designated or re-designated ALC and whose status is no longer ALC at the end of the reporting period due to one of the following reasons:

Change in Destination Invalidates ALC Designation

Change in Medical Status

Data Entry Error

Death

Discharge Against Medical Advice

Transfer to Acute Care

Unplanned Repatriation

# Notes Regarding the ALC Wait for each Discharge Destination in the Patient Journey - Columns F through P

- 1. Any Discharge Destination segment in the Patient Journey having a calculated ALC length of stay of zero days is excluded in the ALC Wait analysis.
- 2. Total ALC Days: The total number of ALC days that patients waited (are waiting) for each Discharge Destination in the Patient Journey (stratified by their current or final Discharge Destination)
- 3. Average Wait: The total number of ALC Days that patients waited (are waiting) for each Discharge Destination in the Patient Journey divided by the total number of patients designated ALC who waited (are waiting) for each respective Discharge Destination (stratified by their current or final Discharge Destination)
- 4. Median Wait: The maximum number of ALC Days that half of patients (50%) waited (are waiting) for each Discharge Destination in Patient Journey (stratified by their current or final Discharge Destination).
- 5. 90th Percentile Wait: The maximum number of ALC Days that 90% of patients waited (are waiting) for each Discharge Destination in Patient Journey (stratified by their current or final Discharge Destination).

# Notes Regarding the Total (All Destinations Including TBD) Open Cases - ALC Wait Time

ALC Wait Time for open cases is defined as the time from ALC designation date to the last day of the reporting month, minus any ACE periods<sup>†</sup>.

\*\*Note: ALC wait time is attributed to the discharge destination listed for open ALC cases at the end of each reporting month.

## **Discharged Cases - ALC Wait Time**

ALC Wait Time for discharged cases is defined as the time from ALC designation date to the date of discharge to an ALC discharge destination, minus any ACE periods<sup>†</sup>.

\*\*Note: ALC wait time is attributed to the final discharge destination for discharged ALC cases.

#### **Discontinued Cases - ALC Wait Time**

ALC Wait Time for discontinued cases is defined as the time from ALC designation date to the discontinuation date, minus any ACE periods†.

\*\*Note: ALC wait time is attributed to the final discontinuation reason for discontinued ALC cases.

## **†Acute Care Episodes (ACE)**

An Acute Care Episodes (ACE) represents the period of time when the patient's condition has deteriorated and the designation of ALC is no longer appropriate.

A Waitlist Entry (WLE) may have one or more Acute Care Episodes (ACEs).

The start date of an Acute Care Episode is the discontinuation date where the reason for discontinuation is a change in medical status. The end date of an Acute Care Episode is the re-designation date.

Calculation: ACEs = Count (ACE 1 + ACE 2 + ... + ACE n), where If an ALC WLE does not have any ACEs, ACEs = 0

## Example Scenario to Interpret the Analysis - Discharged Cases in May 2013

There were 672 ALC cases discharged to LTC in May 2013 (Column E).

These 672 cases had a total of 46,687 ALC days from ALC designation date to discharge date. This includes ALC days for all discharge destinations and the default destination of TBD.

When we break out the ALC wait time by each discharge destination these 672 patients waited for, we see that only 39,260 (84%) were spent waiting for LTC.

The remaining ALC days were spent waiting for Home with CCAC services (3,044 days; 7%), Supervised or Assisted Living (950 days; 2%), and Rehab (236 days; 1%) as well as some discharged destinations that there are fewer patients (<10) discharged to (Complex Continuing Care, Home with Community, Home without Supports, Convalescent Care, Mental Health). The remaining days were TBD days.

The median wait time for discharge to LTC for these 672 cases was 34 days. However, when we look at the wait time for LTC only, we see the median wait time was 26 days.

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# **ALC MADD Methodology Notes**

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## **Data Source**

Data Source: WTIS-ALC Data Cut on June 09, 2025 (ALC Data as of 11:59 PM on June 08, 2025) \*Please see Data Quality notes for data extraction dates for previous fiscal years.

# **Interpretation Note**

During the data stabilization period, patients designated ALC and transferred to either Reactivated Care Centre (RCC) or Alternate Health Facilities (AHF) will be reported separately from regularly monthly performance reports. Therefore, the figures presented herein does not include the patient population designated ALC at RCC or AHF sites. Please see list of RCC and AHF sites below.

**RCC sites** - Humber River Hospital, North York General Hospital, Southlake, Markham Stouffville, Mackenzie Health, Sunnybrook Hospital, St Joseph's Health Center Toronto, Unity Health Toronto, Trillium Health Partner, and William Osler Health System

AHF sites - Queensway Carleton Hospital, Toronto East Health Network, St Joseph's Health Care System, Windsor Regional Hospital, Hamilton Health Sciences, Joseph Brant Hospital, Royal Victoria Regional Health Center, Bruyere Continuing Care, Timmins & District General Hospital, Quinte Healthcare Corporation, Chatham-Kent Health Alliance, Heath Sciences North, The Ottawa Hospital - West End Villa, The Ottawa Hospital - Bearbrook, and Hopital Montfort - Beacon Heights.

Please note that the number of beds associated with transitional care programs in hospital are not

## **Exclusions**

- ALC Cases discontinued for a reason of 'Data Entry Error'
- ALC Closed Cases having a calculated ALC length of stay of zero days (ALC Designation Date = ALC Discharge/Discontinued Date)
- ALC Cases in Post-Acute Care where Inpatient Service = Discharge Destination (same bed type)
- \*\*Exception: Bloorview Rehab CCC to CCC
- ALC Cases that were identified by the Facility for exclusion

## **Metrics**

## **Open Cases**

ALC Cases designated or re-designated prior to the end of the reporting month, that are still open as of the last day of the reporting month.

## **Open Cases - ALC Wait Time**

ALC Wait Time for open cases is defined as the time from ALC designation date to the last day of the reporting month, minus any ACE periods<sup>†</sup>.

\*\*Note: ALC wait time is attributed to the discharge destination listed for open ALC cases at the end of each reporting month.

## **Open Cases - Long Waiters**

Long waiters are defined as open ALC cases that have been waiting 30 days or longer since ALC designation date.

## **Discharged Cases**

ALC cases discharged to an ALC discharge destination prior to the end of the reporting month.

## **Discharged Cases - ALC Wait Time**

ALC Wait Time for discharged cases is defined as the time from ALC designation date to the date of discharge to an ALC discharge destination, minus any ACE periods<sup>†</sup>.

\*\*Note: ALC wait time is attributed to the final discharge destination for discharged ALC cases.

## **†Acute Care Episodes (ACE)**

An Acute Care Episodes (ACE) represents the period of time when the patient's condition has deteriorated and the designation of ALC is no longer appropriate.

A Waitlist Entry (WLE) may have one or more Acute Care Episodes (ACEs).

The start date of an Acute Care Episode is the discontinuation date where the reason for discontinuation is a change in medical status. The end date of an Acute Care Episode is the redesignation date.

Calculation: ACEs = Count (ACE 1 + ACE 2 + ... + ACE n), where If an ALC WLE does not have any ACEs, ACEs = 0

#### **ALC Wait Time Metrics**

90th Percentile: The maximum ALC wait time that 90% of cases have been waiting (open cases) or have waited (closed cases).

Median: The maximum ALC wait time that 50% of cases have been waiting (open cases) or have waited (closed cases).

Average: The total ALC wait time for all cases divided by the total number of ALC cases; this represents the average ALC wait time that cases have been waiting (open cases) or have waited (closed cases).

## **Calculations**

## Tabs: DD = MADD vs DD ≠ MADD and DD vs MADD

## **Open Cases**

% (DD = MADD) = (Volume of open cases where DD = MADD/ Total Open Cases)\*100%

% (DD ≠ MADD) = (Volume of open cases where DD ≠ MADD/ Total Open Cases) \*100%

#### **Discharged Cases**

% (DD = MADD) = (Volume of discharged cases where DD = MADD/ Total Discharged Cases)\*100%

% (DD ≠ MADD) = (Volume of discharged cases where DD ≠ MADD/ Total Discharged Cases) \*100%

## **Discontinued Cases due to Death**

% (DD = MADD) = (Volume of Discontinued Cases due to Death where DD = MADD/ Total Discontinued Cases due to Death)\*100%

% (DD ≠ MADD) = (Volume of Discontinued Cases due to Death where DD ≠ MADD/ Total Discontinued Cases due to Death) \*100%

## **Tab: Trend - MADD**

## **Open Cases**

% (DD = MADD) = (Volume of open cases where DD = MADD for the selected discharge destination/ Total Open Cases for the selected discharge destination)\*100%

% (DD ≠ MADD) = (Volume of open cases where DD ≠ MADD for the selected discharge destination/ Total Open Cases for the selected discharge destination)\*100%

# **ALC SNS Methodology**

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## **Data Source**

Data Source: WTIS-ALC Data Cut on Jun 09, 2025 (ALC Data as of 11:59 PM on Jun 08, 2025) \*Please see Data Quality notes for data extraction dates for previous fiscal years.

## **Interpretation Note**

During the data stabilization period, patients designated ALC and transferred to either Reactivated Care Centre (RCC) or Alternate Health Facilities (AHF) will be reported separately from regularly monthly performance reports. Therefore, the figures presented herein does not include the patient population designated ALC at RCC or AHF sites. Please see list of RCC and AHF sites below.

RCC sites - Humber River Hospital, North York General Hospital, Southlake, Markham Stouffville, Mackenzie Health, Sunnybrook Hospital, St Joseph's Health Center Toronto, Unity Health Toronto, Trillium Health Partner, and William Osler Health System

AHF sites - Queensway Carleton Hospital, Toronto East Health Network, St Joseph's Health Care System, Windsor Regional Hospital, Hamilton Health Sciences, Joseph Brant Hospital, Royal Victoria Regional Health Center, Bruyere Continuing Care, Timmins & District General Hospital, Quinte Healthcare Corporation, Chatham-Kent Health Alliance, Heath Sciences North, The Ottawa Hospital - West End Villa, The Ottawa Hospital - Bearbrook, Hopital Montfort - Beacon Heights, Salvation Army Toronto Grace Hlth Ctr - Tender Care Living Centre (Mcnicoll Manor) and Salvation Army Toronto Grace Hlth Ctr - Queens Estate Retirement Residence.

Please note that the number of beds associated with transitional care programs in hospital are not excluded from the figures within this report

## **Exclusions:**

- ALC Cases discontinued for a reason of 'Data Entry Error'
- ALC Closed Cases having a calculated ALC length of stay of zero days (ALC Designation Date = ALC Discharge/Discontinued Date)
- ALC Cases that were identified by the Facility for exclusion
- ALC Cases in Post-Acute Care where Inpatient Service = Discharge Destination (same bed type)
- \*\*Exception: Bloorview Rehab CCC to CCC

## **Open Cases**

ALC Cases designated or re-designated prior to the end of the reporting month, that are still open as of the last day of the reporting month.

## **Open Cases - ALC Wait Time**

ALC Wait Time for open cases is defined as the time from ALC designation date to the last day of the reporting month, minus any ACE periods†.

\*\*Note: ALC wait time is attributed to the discharge destination listed for open ALC cases at the end of each reporting month.

## **Discharged Cases**

ALC cases discharged to an ALC discharge destination prior to the end of the reporting month

## **Discharged Cases - ALC Wait Time**

ALC Wait Time for discharged cases is defined as the time from ALC designation date to the date of

\*\*Note: ALC wait time is attributed to the final discharge destination for discharged ALC cases.

## **†Acute Care Episodes (ACE)**

An Acute Care Episodes (ACE) represents the period of time when the patient's condition has deteriorated and the designation of ALC is no longer appropriate.

A Waitlist Entry (WLE) may have one or more Acute Care Episodes (ACEs).

The start date of an Acute Care Episode is the discontinuation date where the reason for discontinuation is a change in medical status. The end date of an Acute Care Episode is the re-designation date.

Calculation: ACEs = Count (ACE 1 + ACE 2 + ... + ACE n), where If an ALC WLE does not have any ACEs, ACEs = 0

## **Calculations**

## **Tab: SNS Barrier vs. Need**

DD = MADD

% (NO SNS REQUIREMENTS) = (Volume of Open Cases where DD = MADD and No SNS Requirements are indicated / Total Open Cases where DD = MADD) \*100%

% (SNS AS A NEED ONLY (AT LEAST ONE REPORTED; NO BARRIER) = (Volume of Open Cases where DD = MADD and SNS as a Need Only (No Barriers) is indicated/ Total Open Cases where DD = MADD)\*

100%

% (SNS AS A BARRIER (AT LEAST ONE REPORTED) = (Volume of Open Cases where DD = MADD and SNS as a Barrier (At Least One Reported) is indicated/ Total Open Cases where DD = MADD) \* 100%

## DD ≠ MADD

% (NO SNS REQUIREMENTS) = (Volume of Open Cases where DD ≠ MADD and No SNS Requirements are indicated / Total Open Cases where DD ≠ MADD) \*100%

% (SNS AS A NEED ONLY (AT LEAST ONE REPORTED; NO BARRIER) = (Volume of Open Cases where DD ≠ MADD and SNS as a Need Only (No Barriers) is indicated/ Total Open Cases where DD ≠ MADD)\* 100%

% (SNS AS A BARRIER (AT LEAST ONE REPORTED) = (Volume of Open Cases where DD ≠ MADD and SNS as a Barrier (At Least One Reported) is indicated/ Total Open Cases where DD ≠ MADD) \* 100%

## Tab: SNS Details

% by Specialized Needs and Supports (SNS) as a Need/Barrier=[Volume of Open Cases where SNS as a Need/Barrier(At Least One Report) is indicated for each discharge destination]/ Total Open Cases for each discharge destination) \*100%

Note: SNS at Category level is indicated when at least one of the Sub-Category level SNS is indicated. For example, one Open Case has both Behavioural - 1:1 Support Requirement and Behavioural - Unspecified Requirement indicated. The volume of open case with SNS as Behavioural - 1:1 Support (Sub-Category level), Behavioural - Unspecified (Sub-Category level), and Behavioural Requirement (Category level) is counted as 1 each.

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## **ALC Throughput Ratio Methodology**

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During the data stabilization period, patients designated ALC and transferred to either Reactivated Care Centre (RCC) or Alternate Health Facilities (AHF) will be reported separately from regularly monthly performance reports. Therefore, the figures presented herein does not include the patient population designated ALC at RCC or AHF sites. Please see list of RCC and AHF sites below.

RCC sites - Humber River Hospital, North York General Hospital, Southlake, Markham Stouffville, Mackenzie Health, Sunnybrook Hospital, St Joseph's Health Center Toronto, Unity Health Toronto, Trillium Health Partner, and William Osler Health System

AHF sites - Queensway Carleton Hospital, Toronto East Health Network, St Joseph's Health Care System, Windsor Regional Hospital, Hamilton Health Sciences, Joseph Brant Hospital, Royal Victoria Regional Health Center, Bruyere Continuing Care, Timmins & District General Hospital, Quinte Healthcare Corporation, Chatham-Kent Health Alliance and Heath Sciences North, West End Villa, Bearbrook

#### **Exclusions**

- ALC Cases discontinued for a reason of 'Data Entry Error'
- ALC Closed Cases having a calculated ALC length of stay of zero days (ALC Designation Date = ALC
- ALC Cases in Post-Acute Care where Inpatient Service = Discharge Destination (same bed type)
- ALC Cases that were identified by the Facility for exclusion

## Throughput Ratio - All Discharge Destinations combined (Includes TBD and Unknown):

- 1. Queue at Start of Reporting Period: The number of ALC cases on the waitlist (open) as of the start of the reporting period (not including the start date).
- 2. Volume of Newly Added Cases: The number of cases designated or re-designated ALC within the reporting period (inclusive of start and end dates). Please see additional notes below.
- 2.1. Volume of New ALC Designations: The number of cases newly designated ALC within the reporting period.
- 2.2. % Designated within X Days of Admission: Percentage of newly designated ALC within the reporting period designated within X days of admission
- 2.3. Volume of ALC Re-designations: The number of cases re-designated ALC within the reporting period.
- 3. Volume of Discharged Cases: The number of ALC cases discharged to an ALC discharge destination within the reporting period (inclusive of start and end dates). Please see additional notes below.
- 4. Number of Transfer-In Instances: The number of transfers from another site to the selected site. Please see additional notes below.
- 5. Number of Transfer-Out Instances: The number of transfers out of the selected site. Please see additional notes below.
- 6. Throughput Ratio = Volume of Discharged Cases / Volume of Newly added Cases.

## **Throughput Ratio - For Discharge Destination X:**

1. Queue at Start of Report Period: The number of ALC cases on the waitlist (open) as of the start of the reporting period (not including the start date) waiting for ALC discharge destination=X.

For example, the 'Queue at Start of Reporting Period' in December 2012 represents the number of ALC cases on the waitlist (open) as of (but not including) December 1, 2012 waiting for ALC discharge destination=X.

2. Volume of Newly Added Cases: The number of cases designated or re-designated ALC within the reporting period (inclusive of start and end dates) waiting for ALC discharge destination=X.

For example, the 'Volume of Newly Added Cases' in December 2012 represents the number of cases designated or re-designated ALC from December 1, 2012 to December 31, 2012 (inclusive) and waiting for ALC discharge destination=X.

3. Volume of Discharged Cases: The number of ALC cases discharged to ALC discharge destination=X within the reporting period (inclusive of start and end dates).

For example, the 'Volume of Discharged Cases' in December 2012 represents the number of cases discharged to ALC discharge destination=X from December 1, 2012 to December 31, 2012 (inclusive).

4. Throughput Ratio = Volume of Discharged Cases / Volume of Newly added Cases.

## **Throughput Ratio - Additional Notes**

1. ALC cases that are discontinued at the time of the data cut are excluded from all columns in the table. Please note there is one exception to the rule and is detailed below.

\*Exception: ALC cases that were discontinued due to 'Change in Medical Status' and have been redesignated ALC.

- 1.1. If an ALC case is discontinued due to a 'Change in Medical Status', this case is counted only if and when the case is re-designated ALC and still on the waitlist (open) or discharged to an ALC discharge destination (closed). For this example, the ALC case will be counted in the 'Volume of Newly Added Cases' metric in the month/quarter of re-designation. When the case is discharged, the ALC case will be counted in the 'Volume of Discharged Cases' metric in the month/quarter of discharge. While the ALC case remains on the waitlist following the re-designation month, it will be counted in the 'Queue at Start of Report Period' metric until it is discharged.
- 1.2. If an ALC case is discontinued due to 'Change in Medical Status', and then re-designated ALC, then discontinued again at the time of the data cut, the case is excluded. Only if and when the case is re-designated ALC and still on the waitlist (open) or discharged to an ALC discharge destination (closed) will this case by included again in the metrics.
- 2. For the metrics calculated by ALC discharge destination, ALC cases are attributed to the ALC discharge destination listed at the time of the most recent snapshot of the WTIS-ALC.

- 3. If a newly added ALC case was transferred from site A to site B within the reporting period, this newly added case will be counted as 1 under site A's volume of new ALC designations (original site where the patient was designated ALC).
- 4. If an ALC case was transferred from site A to site B and then later discharged from site B, this case will be counted as 1 under site B's discharged volume (site where the patient was discharged from).
- 5. An ALC case may be counted more than once for transfer in or transfer out.

## Designated ALC within 'x' days of admission - New ALC Designations (excludes re-designations)

- 1. Within 0 Days: The number of new ALC cases designated within 0 days of admission within the reporting period
- 2. Within 1 Day: The number of new ALC cases designated within 1 day of admission within the reporting period
- 3. Within 2 Days: The number of new ALC cases designated within 2 days of admission within the reporting period
- 4. Within 3 Days: The number of new ALC cases designated within 3 days of admission within the reporting period
- 5. Total WLE: The number of new ALC cases designated within the reporting period
- 6. % of 2 Days: Percentage of new ALC cases designated within 2 days of admission within the reporting period

# **ALC Trending Methodology**

Please do not use this information, either alone or with other information to identify an individual.

This includes attempting to decrypt information that is encrypted, attempting to identify an individual based on encrypted information and attempting to identify an individual based on prior knowledge.

The recipient of this report is not permitted to use the de-identified and/or aggregate information in this report, either alone or with other information, to identify an individual. This includes attempting to decrypt information that is encrypted, attempting to identify an individual based on unencrypted information and attempting to identify an individual based on prior knowledge.

## **Data Source**

Data Source: WTIS-ALC Data Cut on June 9, 2025 (ALC Data as of 11:59 PM on June 8, 2025) \*Please see Data Quality notes for data extraction dates for previous fiscal years.

## **Interpretation Note**

During the data stabilization period, patients designated ALC and transferred to either Reactivated Care Centre (RCC) or Alternate Health Facilities (AHF) will be reported separately from regularly monthly performance reports. Therefore, the figures presented herein does not include the patient population designated ALC at RCC or AHF sites. Please see list of RCC and AHF sites below.

RCC sites - Humber River Hospital, North York General Hospital, Southlake, Markham Stouffville, Mackenzie Health, Sunnybrook Hospital, St Joseph's Health Center Toronto, Unity Health Toronto, Trillium Health Partner, and William Osler Health System

AHF sites - Queensway Carleton Hospital, Toronto East Health Network, St Joseph's Health Care System, Windsor Regional Hospital, Hamilton Health Sciences, Joseph Brant Hospital, Royal Victoria Regional Health Center, Bruyere Continuing Care, Timmins & District General Hospital, Quinte Healthcare Corporation, Chatham-Kent Health Alliance and Heath Sciences North

#### **Exclusions**

- ALC Cases discontinued for a reason of 'Data Entry Error'
- ALC Closed Cases having a calculated ALC length of stay of zero days (ALC Designation Date = ALC Discharge/Discontinued Date)
- ALC Cases in Post-Acute Care where Inpatient Service = Discharge Destination (same bed type)
- \*\*Exception: Bloorview Rehab CCC to CCC
- ALC Cases that were identified by the Facility for exclusion

## **Metrics**

## **Open Cases**

ALC Cases designated or re-designated prior to the end of the reporting month, that are still open as of the last day of the reporting month.

## **Open Cases - ALC Wait Time**

ALC Wait Time for open cases is defined as the time from ALC designation date to the last day of the reporting month, minus any ACE periods†.

\*\*Note: ALC wait time is attributed to the discharge destination listed for open ALC cases at the end of each reporting month.

## **Open Cases - Long Waiters**

Long waiters are defined as open ALC cases that have been waiting 30 days or longer since ALC designation date.

## **Discharged Cases**

ALC cases discharged to an ALC discharge destination prior to the end of the reporting month.

## **Discharged Cases - ALC Wait Time**

ALC Wait Time for discharged cases is defined as the time from ALC designation date to the date of discharge to an ALC discharge destination, minus any ACE periods†.

\*\*Note: ALC wait time is attributed to the final discharge destination for discharged ALC cases.

## **Discontinued Cases**

Cases that have been designated or re-designated ALC and whose status is no longer ALC at the end of the reporting period due to one of the following reasons:

Change in Destination Invalidates ALC Designation
Change in Medical Status
Data Entry Error
Death
Discharge Against Medical Advice
Transfer to Acute Care
Unplanned Repatriation

## **Discontinued Cases - ALC Wait Time**

ALC Wait Time for discontinued cases is defined as the time from ALC designation date to the discontinuation date, minus any ACE periods†.

\*\*Note: ALC wait time is attributed to the final discontinuation reason for discontinued ALC cases.

## †Acute Care Episodes (ACE)

An Acute Care Episodes (ACE) represents the period of time when the patient's condition has deteriorated and the designation of ALC is no longer appropriate.

A Waitlist Entry (WLE) may have one or more Acute Care Episodes (ACEs).

The start date of an Acute Care Episode is the discontinuation date where the reason for discontinuation is a change in medical status. The end date of an Acute Care Episode is the re-designation date.

Calculation: ACEs = Count (ACE 1 + ACE 2 + ... + ACE n), where If an ALC WLE does not have any ACEs, ACEs = 0

#### **ALC Wait Time Metrics**

90th Percentile: The maximum ALC wait time that 90% of cases have been waiting (open cases) or have waited (closed cases).

Median: The maximum ALC wait time that 50% of cases have been waiting (open cases) or have waited (closed cases).

Average: The total ALC wait time for all cases divided by the total number of ALC cases; this represents the average ALC wait time that cases have been waiting (open cases) or have waited (closed cases).

# **ALC Wait Time Distribution Methodology**

The recipient of this report is not permitted to use the de-identified and/or aggregate information in this report, either alone or with other information, to identify an individual. This includes attempting to decrypt information that is encrypted, attempting to identify an individual based on unencrypted information and attempting to identify an individual based on prior knowledge.

## **Interpretation Note:**

During the data stabilization period, patients designated ALC and transferred to either Reactivated Care Centre (RCC) or Alternate Health Facilities (AHF) will be reported separately from regularly monthly performance reports. Therefore, the figures presented herein does not include the patient population designated ALC at RCC or AHF sites. Please see list of RCC and AHF sites below.

RCC sites - Humber River Hospital, North York General Hospital, Southlake, Markham Stouffville, Mackenzie Health, Sunnybrook Hospital, St Joseph's Health Center Toronto, Unity Health Toronto, Trillium Health Partner, and William Osler Health System

AHF sites - Queensway Carleton Hospital, Toronto East Health Network, St Joseph's Health Care System, Windsor Regional Hospital, Hamilton Health Sciences, Joseph Brant Hospital, Royal Victoria Regional Health Center, Bruyere Continuing Care, Timmins & District General Hospital, Quinte Healthcare Corporation, Chatham-Kent Health Alliance, Heath Sciences North, The Ottawa Hospital - West End Villa, The Ottawa Hospital - Bearbrook, Hopital Montfort - Beacon Heights, Salvation Army Toronto Grace Hlth Ctr - Tender Care Living Centre (Mcnicoll Manor) and Salvation Army Toronto Grace Hlth Ctr - Queens Estate Retirement Residence.

Please note that the number of beds associated with transitional care programs in hospital are not excluded from the figures within this report

#### Data Source

Data Source: WTIS-ALC Data Cut on Jun 09, 2025 (ALC Data as of 11:59 PM on Jun 08, 2025) \*Please see Data Quality notes for data extraction dates for previous fiscal years.

## **Exclusions**

ALC Cases discontinued for a reason of 'Data Entry Error'

- ALC Cases in Post-Acute Care where Inpatient Service = Discharge Destination (same bed type)
- \*\*Exception: Bloorview Rehab CCC to CCC
- ALC Cases that were identified by the Facility for exclusion
- Closed Cases with ALC Wait Time of 0 Days are excluded from reports.

#### Metrics

## **Open Cases**

ALC Cases designated or re-designated prior to the end of the reporting month, that are still open as of the last day of the reporting month.

## **Open Cases - ALC Wait Time**

ALC Wait Time for open cases is defined as the time from ALC designation date to the last day of the reporting month, minus any ACE periods†.

\*\*Note: ALC wait time is attributed to the discharge destination listed for open ALC cases at the end of each reporting month.

## **Discharged Cases**

ALC cases discharged to an ALC discharge destination prior to the end of the reporting month

## **Discharged Cases - ALC Wait Time**

ALC Wait Time for discharged cases is defined as the time from ALC designation date to the date of discharge to an ALC discharge destination, minus any ACE periods†.

\*\*Note: ALC wait time is attributed to the final discharge destination for discharged ALC cases.

## **Discharged Cases - ALC Wait Time**

ALC Wait Time for discharged cases is defined as the time from ALC designation date to the date of discharge to an ALC discharge destination, minus any ACE periods†.

\*\*Note:ALC wait time is attributed to the final discharge destination for discharged ALC cases

#### **Discontinued Cases**

Cases that have been designated or re-designated ALC and whose status is no longer ALC at the end of the reporting period due to one of the following reasons:

Change in Destination Invalidates ALC Designation
Change in Medical Status
Data Entry Error
Death
Discharge Against Medical Advice
Transfer to Acute Care
Unplanned Repatriation

## **Discontinued Cases - ALC Wait Time**

ALC Wait Time for discontinued cases is defined as the time from ALC designation date to the discontinuation date, minus any ACE periods†.

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## †Acute Care Episodes (ACE)

An Acute Care Episodes (ACE) represents the period of time when the patient's condition has deteriorated and the designation of ALC is no longer appropriate.

A Waitlist Entry (WLE) may have one or more Acute Care Episodes (ACEs).

The start date of an Acute Care Episode is the discontinuation date where the reason for discontinuation is a change in medical status. The end date of an Acute Care Episode is the re-designation date.

Calculation: ACEs = Count (ACE 1 + ACE 2 + ... + ACE n), where If an ALC WLE does not have any ACEs, ACEs = 0

## **ALC Wait Time Metrics**

90th Percentile: The maximum ALC wait time that 90% of cases have been waiting (open cases) or have waited (closed cases).

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