



ONTARIO
HOSPITAL
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Backgrounder

Document d'information

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HOSPITAL REPORT 2006: ACUTE CARE

Hospital Report 2006: Acute Care covers 95 per cent of acute care hospitalizations in 2004/05 and includes results for 95 out of 123 eligible hospitals that voluntarily participated in the report. Hospitals participate voluntarily in the report process because they see the potential for the project to lead to better health care.

The report on acute care looks at five areas: patient care, patient satisfaction, dealing with change, financial performance and condition, and women's health. It includes scores for a variety of indicators or measures in each of the five areas as well as a provincial average for each measure. Results are also reported by hospital type and Local Health Integration Network (LHIN) boundaries.

Some of the key findings from *Hospital Report 2006: Acute Care*:

Clinical Utilization and Outcomes (Patient care)

The average readmission rate for specific surgical procedures outlined in the report is 1.6 per cent and represents a positive reflection of low rates of complications or adverse events during hospitalization for procedures included in the report analysis.

Results continue to illustrate a trend towards laparoscopic procedures, which are generally considered more desirable as they are less invasive, use fewer resources and often provide better patient outcomes. For example, the rate of use of laparoscopic procedures to remove both ovaries increased from 41 per cent to 48.2 per cent between 2002 and 2005.

Patient Satisfaction (How patients feel about their care based on experience)

More than 95 per cent of patients said their overall hospital experience – including quality of care and services as well as confidence in health care providers – was excellent, very good or good. Sixty-six per cent of men and 60 per cent of women had overall impressions of care being excellent, while only 4 per cent of men and 5.5 per cent of women had “fair” or “poor” impressions. 15.8 per cent of respondents rated hospital communication as fair or poor.

System Integration and Change (Dealing with change)

As hospitals will now be operating within the LHINs, co-operation between hospitals and community health care providers is even more essential to improve patient care. The 2006 report shows an increase in the per cent of hospitals that are working with other health care providers to develop standardized processes for admission and discharge – for example there was a 6.5 per cent improvement in such processes with Community Care Access Centers, and a 12.9 per cent improvement with mental health facilities, from the 2005 report.

Report results suggest hospitals are enhancing patient safety practices. 89 per cent of Ontario hospitals report the use of organization-wide reporting policies related to adverse events. 68 per cent of hospitals have adopted patient safety as a strategic goal or priority as part of their organizational practices for creating a culture of patient safety. Many hospitals are implementing safety briefings, Leadership WalkRounds and the appointment and training of Safety Champions.

The report also found that considerable improvements from the 2005 report were made in the area of nursing retention, with hospitals implementing strategies such as general cost of living increases, wellness programs and mentorship programs.

Financial Performance and Condition

In 2004/05, Ontario acute care hospitals reported expenses in excess of revenues of \$32 million. Fifty-two hospitals reported expenses greater than revenues.

Women's Health Perspective

Based on 2004-05 data, the report shows that hospitals continue to perform more abdominal than vaginal hysterectomies even though the literature suggests that vaginal hysterectomies are associated with improved secondary outcomes. 2004/05 data reflects an increase in the number of abdominal hysterectomies from 03/04.

The report data indicates that there has been some improvement in the rate of access to angiography after a heart attack for both men and women; however, women admitted with a heart attack still have a significantly lower rate of access to coronary angiography during hospital care than men. 44.8 per cent of women accessed coronary angiography during their hospital stay, versus 53.9 per cent of men.

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