Evaluating the effect of a rehabilitation policy and service change on facility-level activity of daily living and fall quality indicators in Ontario long-term care homes

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BACKGROUND AND OBJECTIVES

• A new policy for publicly funded physical therapy (PT) in long-term care (LTC) was put in place in Ontario in August 2013
• PT was removed from OHIP (fee for service billing)
• Now LTC homes receive a block of funds per bed per year to provide PT
• There are now strict eligibility criteria (e.g., must have a SMART goal)

Objectives:

1) to describe and examine the proportion of residents receiving rehabilitation services, and facility-level activity of daily living (ADL) and falls quality indicators (QIs) before and after the policy change

2) to evaluate the effect of the policy change on facility-level ADL and falls QIs
METHODS

- retrospective, secondary data analysis
- Resident Assessment Instrument Minimum Data Set (RAI) for all LTC homes in Ontario, 2011-2015
- Linear mixed regression model
- 8 facility-level quality indicators were examined:

Activities of daily living

- Early-loss
- Mid-loss
- Late-loss

Falls

% residents who have fallen in past 30 days

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Residents receiving PT:
- Mean: 49.1 minutes, 2.9 days
- Median: 45.0 minutes, 3.0 days

Residents receiving PT:
- Mean: 44.2 minutes, 2.5 days
- Median: 45.0 minutes, 3.0 days

Fewer people are receiving PT after the policy change – but on average residents who receive PT, receive the same amount
<table>
<thead>
<tr>
<th>PT and interaction with policy change</th>
<th>Quality indicators – proportion of residents with:</th>
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</thead>
<tbody>
<tr>
<td></td>
<td>worse late loss ADLs</td>
</tr>
<tr>
<td>No PT</td>
<td>✓</td>
</tr>
<tr>
<td>PT for &lt; 45 minutes on &lt; 3 days</td>
<td>✓</td>
</tr>
<tr>
<td>PT for 45-150 minutes on 3-5 days</td>
<td>✓</td>
</tr>
<tr>
<td>PT for &gt; 150 minutes on &gt; 5 days</td>
<td>✓</td>
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</tbody>
</table>

✓ denotes significant (p<0.01) association with improved performance on the quality indicator; X denotes significant (p<0.01) association with worse performance on the quality indicator.

Note: models are adjusted for health region, facility size, income quintile, and rurality, and their interaction terms with the intervention.

The policy change with improved performance in 5 ADL QIs for homes that provide more time intense PT.

But, homes that now have a large proportion of residents who do not receive PT or receive time-limited PT perform worse of QIs measuring improvement of ADLs.

Check out our publication in the Health Services Research Journal for more information:


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