

APPENDIX TO THE 2020-25 STRATEGIC PLAN: DATA INSERT

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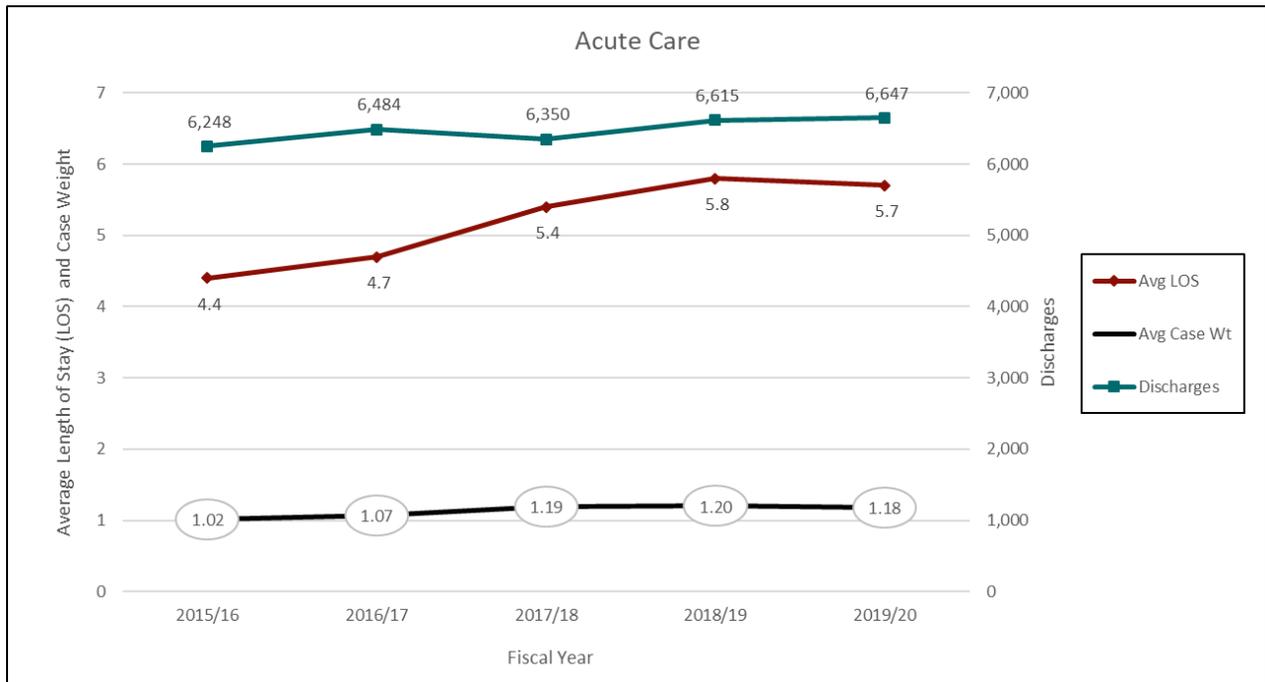
1. INPATIENT SERVICES

Woodstock Hospital provides acute inpatient services, as well as inpatient mental health and post-acute care in complex continuing care and inpatient rehabilitation.

A) ACUTE CARE

Inpatient acute services include medicine, surgery, obstetrics, and critical care. Acute care has seen a visit increase of 6% over the past 5 years with an average length of stay (LOS) increase of 1 day and average weight increase of 0.16. This indicates that the complexity of patients is increasing, resulting in more resource utilization and increased LOS.

In critical care, volumes have remained relatively stable over the past 5 years, but have also experienced an increase in average LOS.



Source: Med2020 WinRecs/ Canadian Institute for Health Information (CIHI)

On average, about 84% of Woodstock residents receive acute care at Woodstock Hospital; this has been consistent with past years. When looking at Oxford County residents, about 58% of acute care services are provided to these patients at Woodstock Hospital. While the percentage of services provided remains consistent at 58%, there has been a volume increase in acute inpatient care of 8%.

Woodstock Hospital provides a number of acute services for Oxford County residents, such as obstetrics, urology, otolaryngology and orthopedic surgery. While overall acute volumes

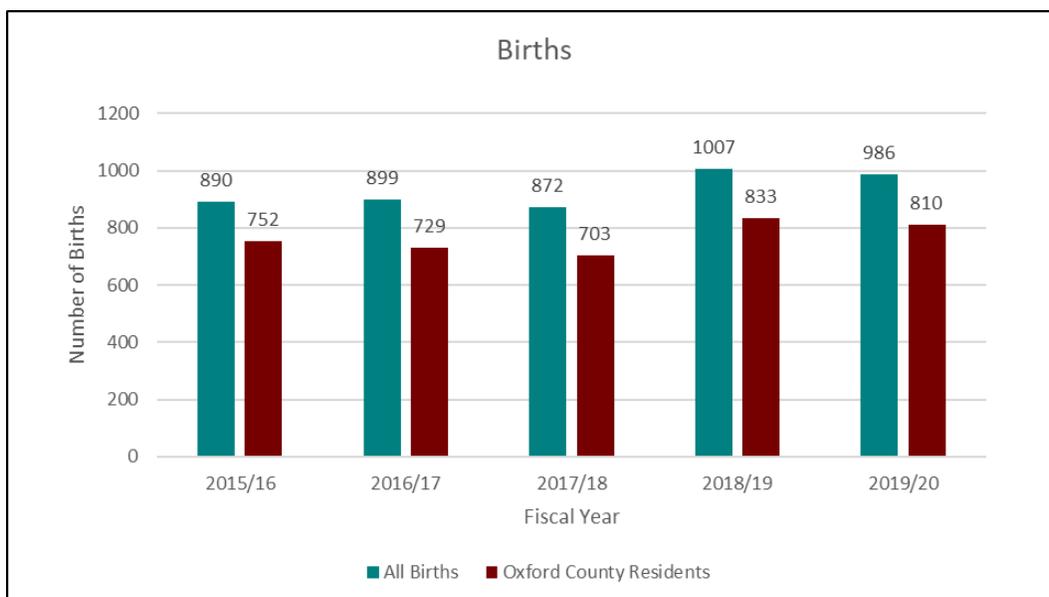
remained very similar over the past 5 years, there were increases in urology and small decreases in general surgery, internal medicine, and otolaryngology.

The acute inpatient services not offered by Woodstock Hospital that residents of Woodstock and Oxford County are receiving elsewhere remains the same as previous: cardiology, neurosurgery, thoracic surgery, cardiac surgery, neurology and vascular surgery (all with over 100 patients per year in Oxford County). For these services not offered at Woodstock Hospital, 83% of these patients receive care in London. Over the past 5 years, there have been increases in the volumes of Oxford County residents requiring some of these services, including vascular surgery, thoracic surgery, cardiac surgery, neurology, and hematology.

The demand for inpatient pediatric services continues to grow, with an increase over the past 5 years in number of inpatient admissions for Woodstock residents (49% increase) and Oxford County residents (32% increase). Approximately 77% of Woodstock patients and 70% of Oxford County patients receive their inpatient care in London.

I) OBSTETRICS

Over the past 5 years, obstetrics has seen an 11% increase in the number of births. On average, about 82% (range of 81-84% over the past 5 years) of births are to residents of Oxford County; other counties served by our obstetrics department include Haldimand-Norfolk, Brant, Elgin and Middlesex. Woodstock Hospital delivers approximately 62% of babies born to Oxford County residents, with some delivering in surrounding hospitals such as London, Stratford, Kitchener, Cambridge, Simcoe and Brantford. Approximately 9% of patients who deliver in London are due to specialty requirements or gestational age, such as the need for neonatal intensive care or a pediatrician.



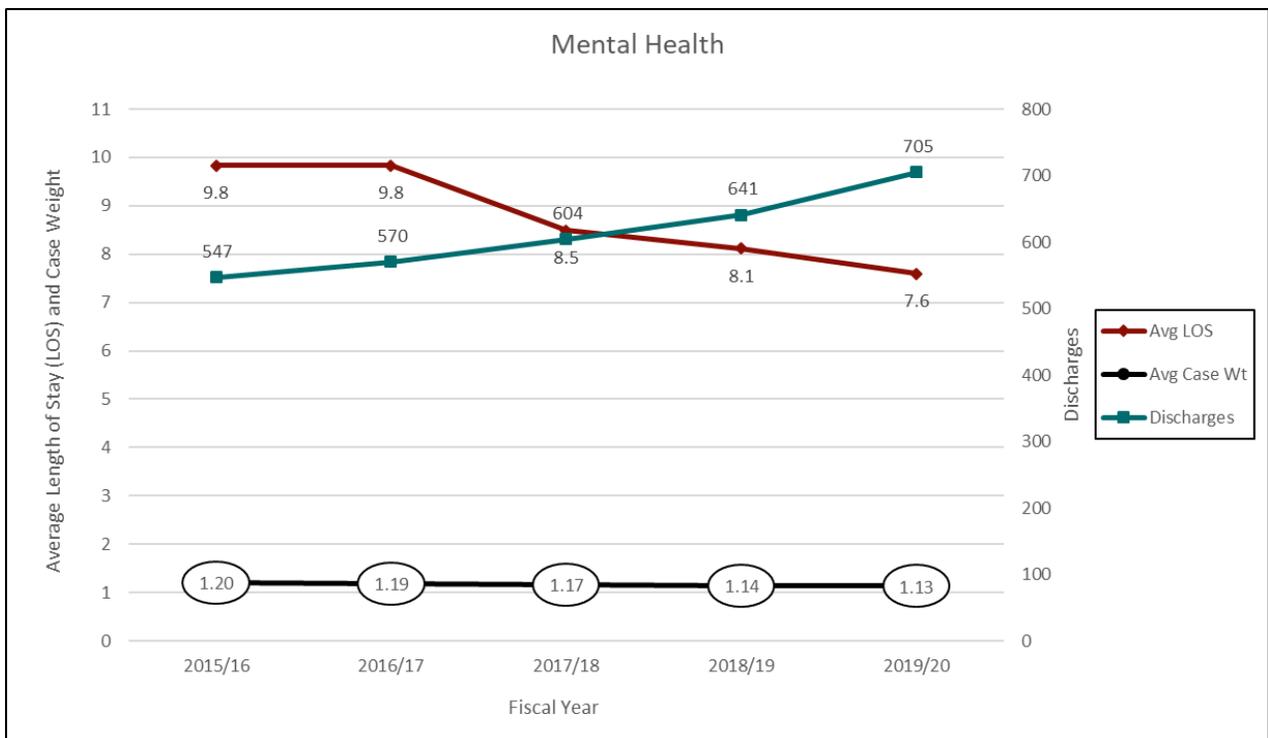
Source: Med2020 WinRecs

II) PALLIATIVE CARE

Palliative care and early identification of palliative care needs has been a focus of Woodstock Hospital over the past two years. There have been efforts placed on standardizing the palliative care referral process and shifting inpatient services from complex continuing care beds to acute beds in 2016/17. The Quality Indicator for Early Identification of Palliative Care Needs focuses on patients with Chronic Obstructive Pulmonary Disease (COPD) and Congestive Heart Failure (CHF). It shows an increase to 95% from 75% over the past 2 years and continues to be an area of focus for quality improvement.

B) MENTAL HEALTH

Inpatient mental health has seen a 29% increase in the number of admissions over the past 5 years. The average LOS has decreased from 9.8 to 7.6 days, allowing for more patients using the service. The average case weight has also been slowly decreasing, going from 1.20 to 1.13.



Source: TREAT/CIHI

The age group where the largest increase occurred was in the 25 to 44 year old group, with a 68% increase over 5 years. There was a 52% increase in the number of admissions for the 18 to 24 year old group, and there was a decrease in the number of admissions in the age groups under 17 and over 65.

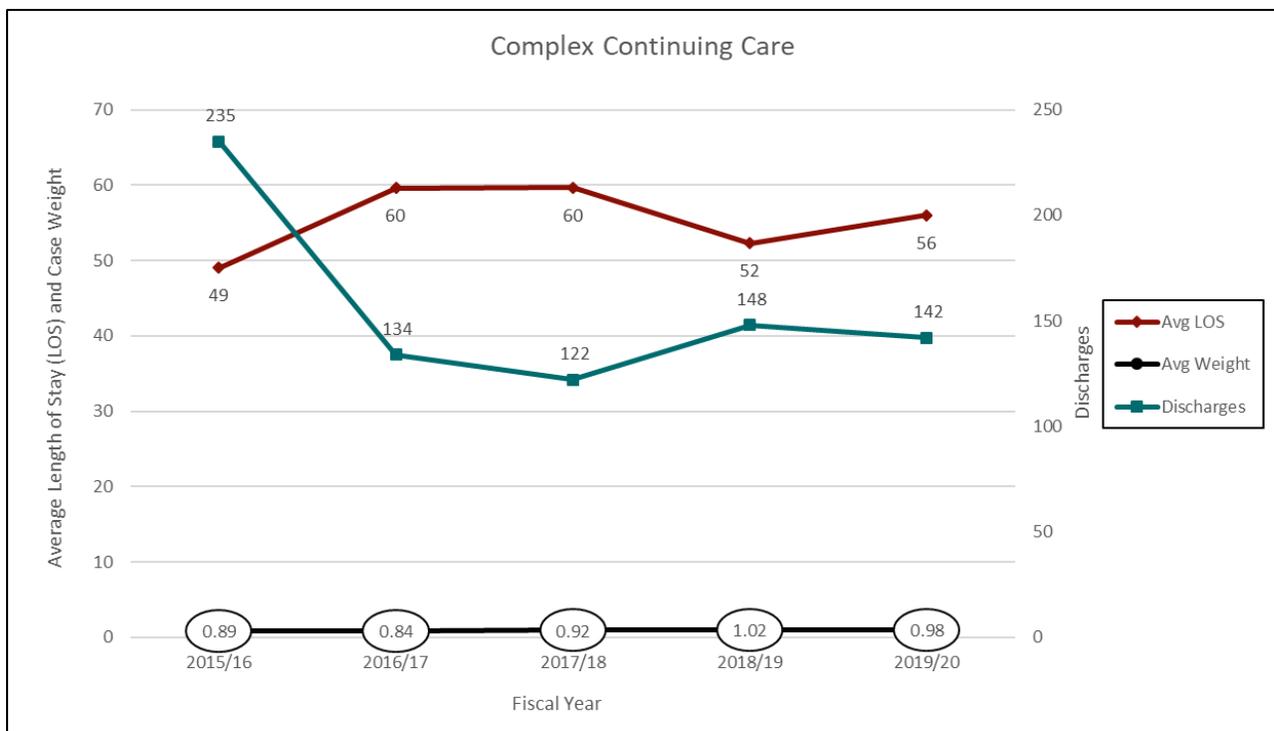
When looking at diagnoses, volume of anxiety disorders doubled in the 5 year time period whereas personality disorders tripled. While there were increases in all areas the top four diagnostic categories have remained consistent:

- Depressive disorders
- Substance-related and addictive disorders
- Schizophrenia spectrum and other psychotic disorders
- Bipolar and related disorders

Approximately 80% of Oxford County residents requiring inpatient health admissions are cared for at Woodstock Hospital. This has remained consistent over the 5 year time period despite the volume increase of 25% of admissions from Oxford County residents. The remaining Oxford County admissions are primarily to Homewood Health Centre in Guelph (17%), and some smaller volumes to London, St. Thomas, Stratford and Brantford.

C) COMPLEX CONTINUING CARE

In 2016/17, 12 complex continuing care beds co-located on a medical floor were converted to acute care beds. Prior to this time, palliative care patients were often placed in these complex continuing care beds but are now being cared for in acute beds. Since converting the beds and caring for only true complex continuing care patients in the dedicated beds, there has been an increase in the average LOS (from 50 to 55 days) and the average case weight (from 0.86 to 0.98) from the 5 years prior.

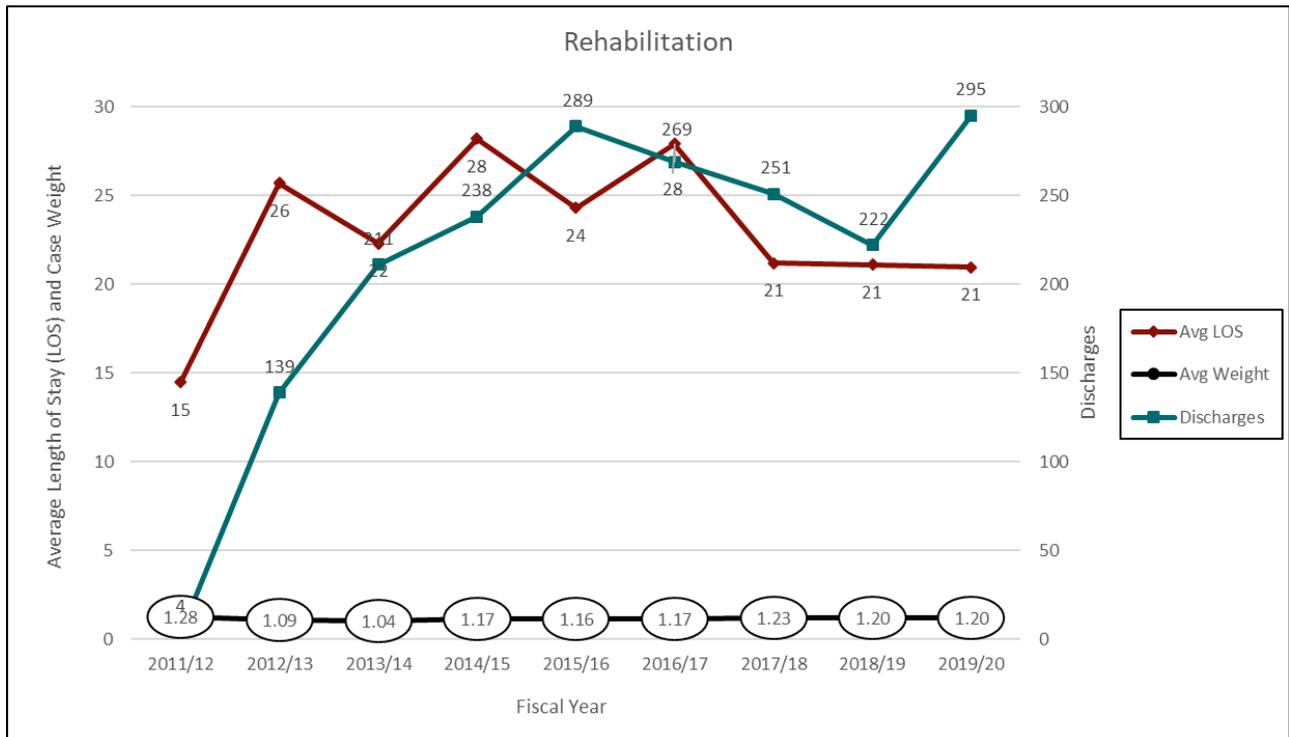


Source: TREAT/CIHI

All hospitals in Oxford County provide complex continuing care services. Approximately 89% of Oxford County residents are receiving complex continuing care in Oxford County hospitals; 57% receive care at Woodstock Hospital, 18% at Tillsonburg District Memorial Hospital and 14% at Alexandra Hospital Ingersoll.

D) REHABILITATION

Since the Rehabilitation unit opened in March 2012, we have seen gradual increases in LOS and average weight with some variation noted. We have recently seen the average LOS and average case weight stabilize.



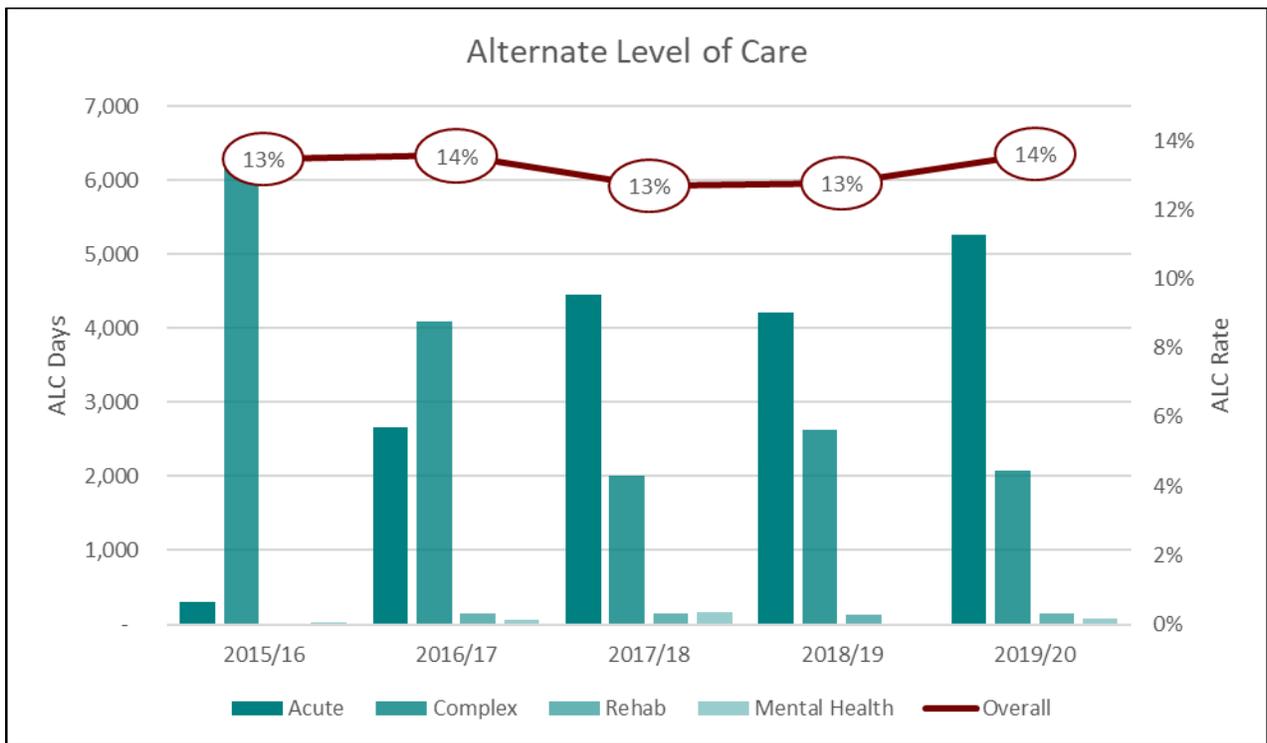
Source: TREAT/CIHI

Woodstock Hospital serves all of Oxford County for inpatient rehabilitation. Approximately 78% of Oxford County residents requiring inpatient rehabilitation receive their care at Woodstock Hospital. The remainder of patients typically receive care at St. Joseph's Health Care London - Parkwood and require specialty rehabilitation for services such as amputations, and brain and spinal cord injuries.

E) ALTERNATE LEVEL OF CARE

Alternate Level of Care (ALC) rates represent patients occupying a bed in a hospital that do not require the intensity of resources/services provided in an acute care setting. In 2019/2020, the ALC rate at Woodstock Hospital was 14%. There was an increase in ALC days of 14% over the past 5 years, despite the rate remaining consistent. There was a shift seen in ALC days from complex continuing care to acute care partly due to conversion of complex continuing care beds to acute beds, and changes in processes relating to admissions to complex continuing care.

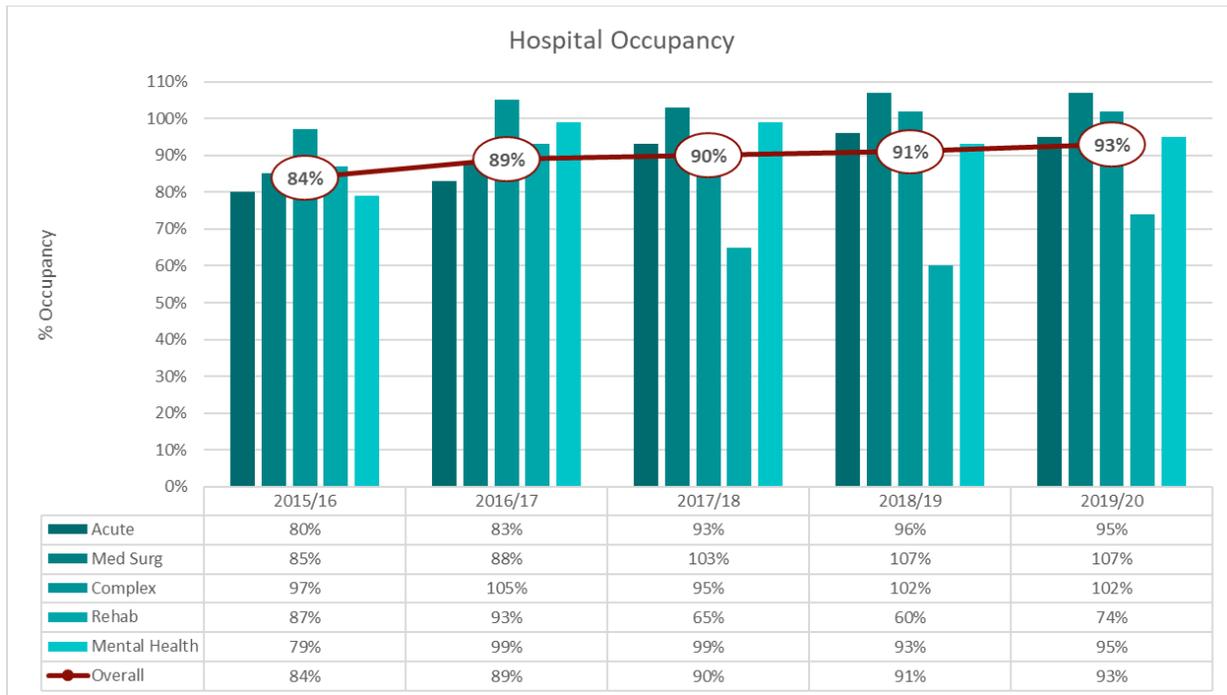
ALC days are most prevalent within acute and complex continuing care; the majority of these patients are waiting for placement in long-term care, while some acute patients are waiting for home care services. Some acute ALC patients do not meet the admission criteria for complex continuing care, and wait for long-term care placement in an acute bed.



Source: Woodstock Hospital Daily Bed Census

F) OCCUPANCY RATES

Overall hospital occupancy rates have been steadily increasing over the past 5 years. There have been increases in acute care, complex continuing care, and mental health over this period, with some fluctuation in rehabilitation. This is partly due to changes in rehabilitation admission criteria, and the ability and need to utilize these beds for medical overflow. Medical surgical occupancy has consistently been over 100% since 2017/18 and the need to accommodate these patients in different areas of the hospital continues.



Source: Woodstock Hospital Daily Bed Census

G) QUALITY BASED PROCEDURES

Quality Based Procedures (QBP) are a set of clinical quality groupings aimed to accelerate quality improvement and enhance system value; funding is provided on a per case basis. QBP funded volumes have remained largely unchanged since they were implemented in 2012/13. Woodstock Hospital funded volumes were based on historical data prior to the new hospital being built, and therefore do not incorporate the growth or increased demand for services that has been experienced. Each year the hospital assesses the wait list for procedures and determines the ability to allocate funds from the global budget towards additional procedures. Woodstock Hospital has consistently been providing supplementary funding to increase cases for total hip and total knee replacements.

Some changes to the QBPs over the past 5 years include:

- Stroke volume reduction due to mandate of District Stroke Centre diversion.
- Registered Nurse Flexible Sigmoidoscopy (RNFS) cancelled in 2017/18.
- Change in Endoscopy methodology resulted in a slight decrease in volumes with change in category distribution.
- Change in Knee Arthroscopy methodology and best practices resulted in a decrease in cases.
- Direct Anterior Hip Arthroplasty started in 2018/19 with 4 cases and increased in 2019/20 to 13 cases, which results in faster recovery time (strict criteria for eligibility).
- Hip and knee replacements moved to bundled care methodology in 2019/20, whereby the hospital receives payment for the full episode of care across multiple settings and providers, and is responsible for paying other providers across the care continuum.

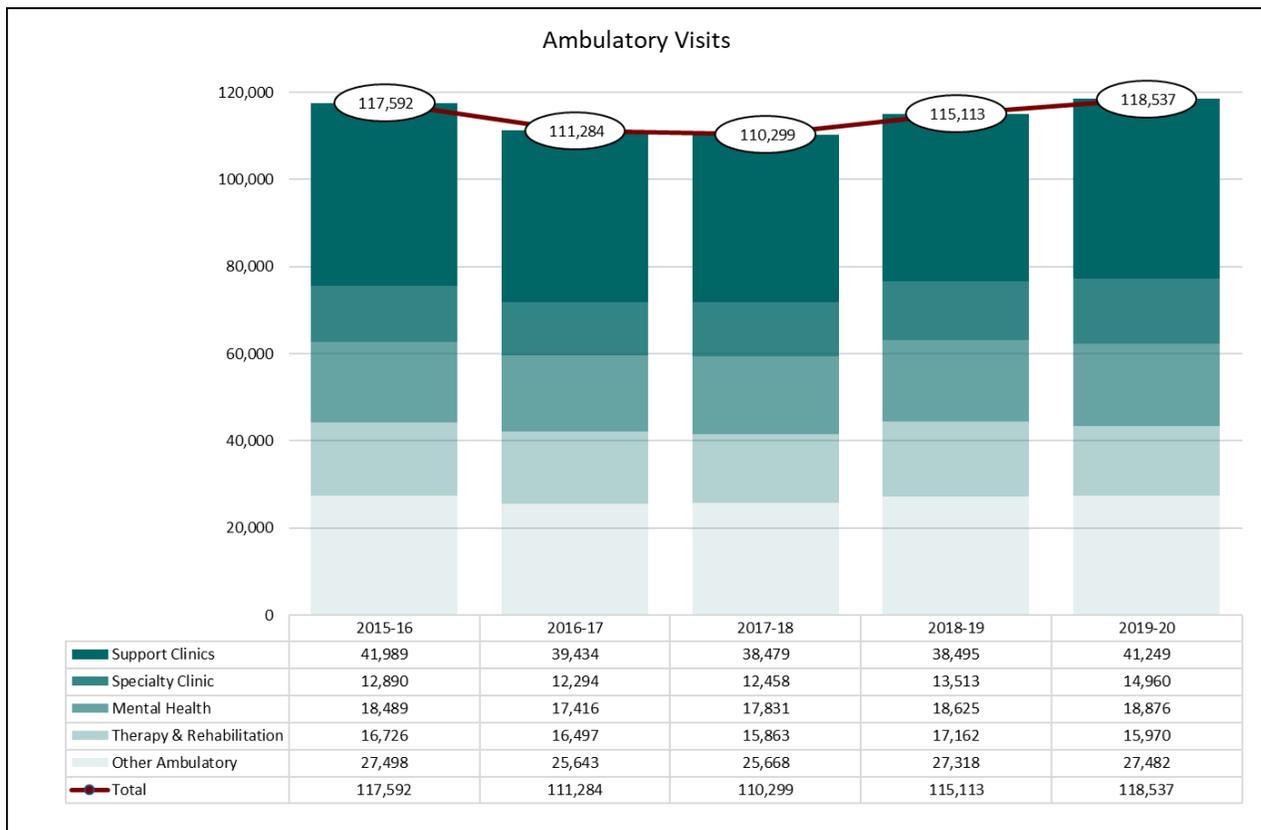
2. OUTPATIENT SERVICES/AMBULATORY CARE

A) OUTPATIENT CLINICS

Over the past 5 years, Woodstock Hospital has seen an increase in cases for a total of 118,537 cases. The highest increases have been in the pre-admission clinic, obstetrical triage, respiratory, and mental health. In the past 5 years, there has been a 2% increase in the mental health outpatient clinic. In 2017/18, mental health clinic types expanded to allow improved monitoring of specific areas of growth.

A Hospitalist Clinic was started in 2019/2020 for discharged inpatients without family physicians to divert emergency visits, and a Palliative Care Clinic was started in 2018/2019. Pediatric visits are increasing with a new Pediatrics Clinic and there was an increase in otolaryngology cases.

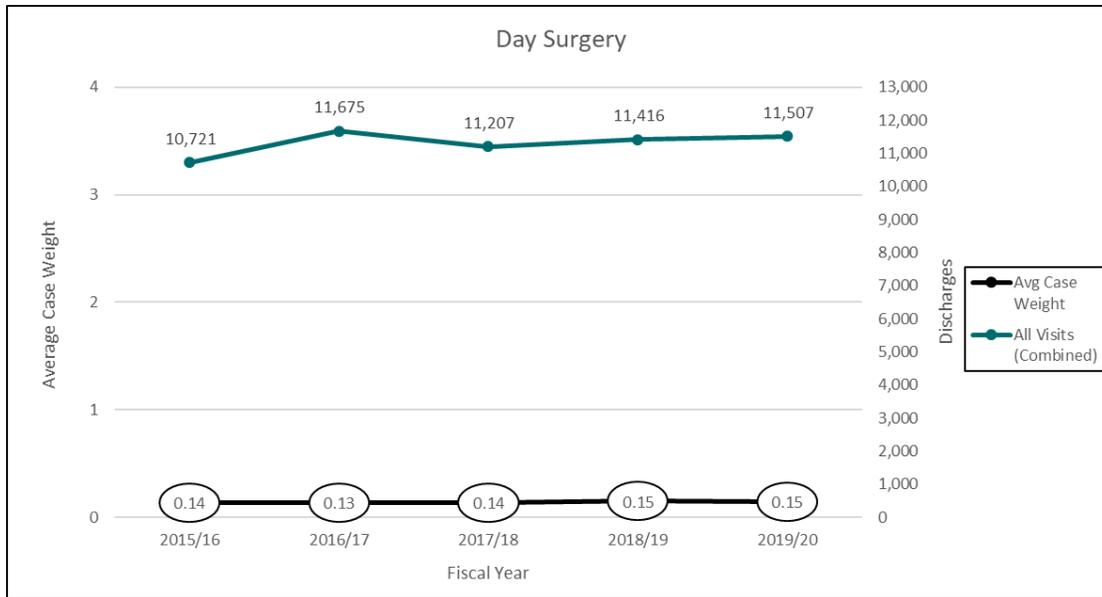
Over the past 5 years, there has been a 67% increase in telephone visits. This is primarily due to the pre-admission clinic; diabetes related follow-up calls and additional phone follow-ups. Videocare cases have also increased from 8 in 2015/16 to 36 cases in 2019/20. Due to measures taken to address COVID-19, the expectation is that virtual cases will continue to increase for 2020/21 and beyond.



Source: Cerner - Operational Performance - Research Report

B) DAY SURGERY

Day Surgery has seen an increase of 7% in cases over the past 5 years and a slight increase in weights. Woodstock Hospital provides 85% of day surgery services to Woodstock residents, with approximately 6% receiving care in London. For Oxford County residents, Woodstock Hospital provides 65% of all day surgery services.



Source: Med2020 WinRecs/ CIHI

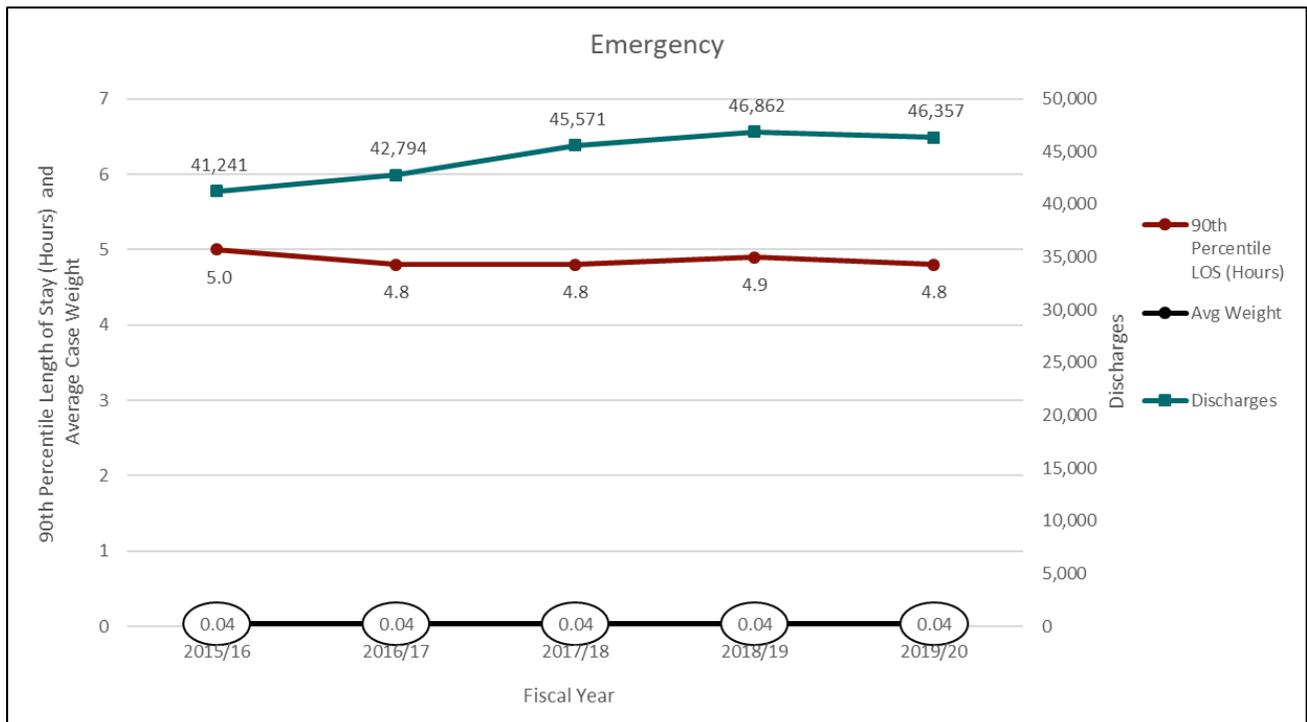
For Day Surgery, there has been a volume increase of 4% for Woodstock residents and 9% for Oxford County residents over the past 5 years. The growth over the past 5 years in both populations is attributed to increases in ophthalmology, urology, obstetrics and gynecology, and otolaryngology.

For services not offered at Woodstock Hospital, there has been a 13% increase in Oxford County volumes. The main areas of growth are neurosurgery, diagnostic radiology and oncology. There has also been an increase in number of pediatrics day surgery cases (115 annual cases), as Woodstock does not offer these services. The majority of pediatric cases (90%) receive services in London; the highest increase in pediatrics are gastroenterology, urology, and orthopedic services.

3. EMERGENCY SERVICES

A) VOLUMES

Over the past 5 years, Woodstock Hospital has seen an increase of 12% in cases for a total of 46,357 cases in 2019/2020. The average case weight has remained constant at 0.04, and the 90th percentile LOS has decreased from 5.0 to 4.8. The 90th percentile LOS measures the amount of time (in hours) in which 9 of 10 patients have completed their emergency department visits to go home or be admitted to hospital as an inpatient.

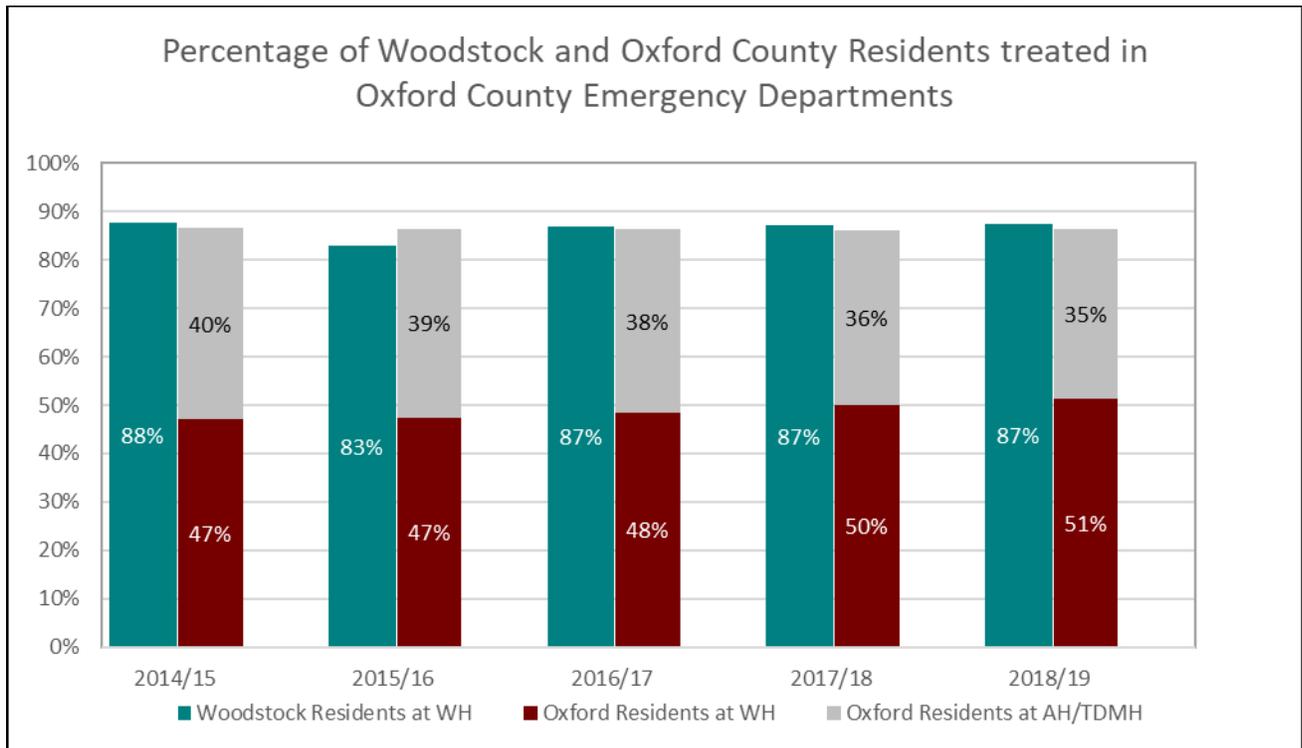


Source: Med2020 WinRecs

Over 5 years, Woodstock Hospital has seen a 12% increase of Woodstock residents receiving care at this hospital. This accounts for 87% of people from Woodstock being treated at Woodstock Hospital. A portion of those not coming to this hospital are likely due to specialty or tertiary care not offered at Woodstock; for example, pediatrics specialty services are only provided in London.

In 2015/2016, 90% of our emergency patients resided in Oxford County, but in 2019/2020 this decreased to 86%. However, there has been a volume increase of 13% of Oxford County residents at Woodstock Hospital Emergency over the past 5 years. There was an increase of patients from outside of Oxford County including Haldimand-Norfolk, Brant, Middlesex, Elgin, and Waterloo Region, most likely due to excellent wait times.

Woodstock Hospital sees 51% of Oxford residents for emergency services, an increase of 4% over 5 years. Of note, 35% of Oxford residents do go to either Alexandra Hospital Ingersoll or Tillsonburg District Memorial Hospital.



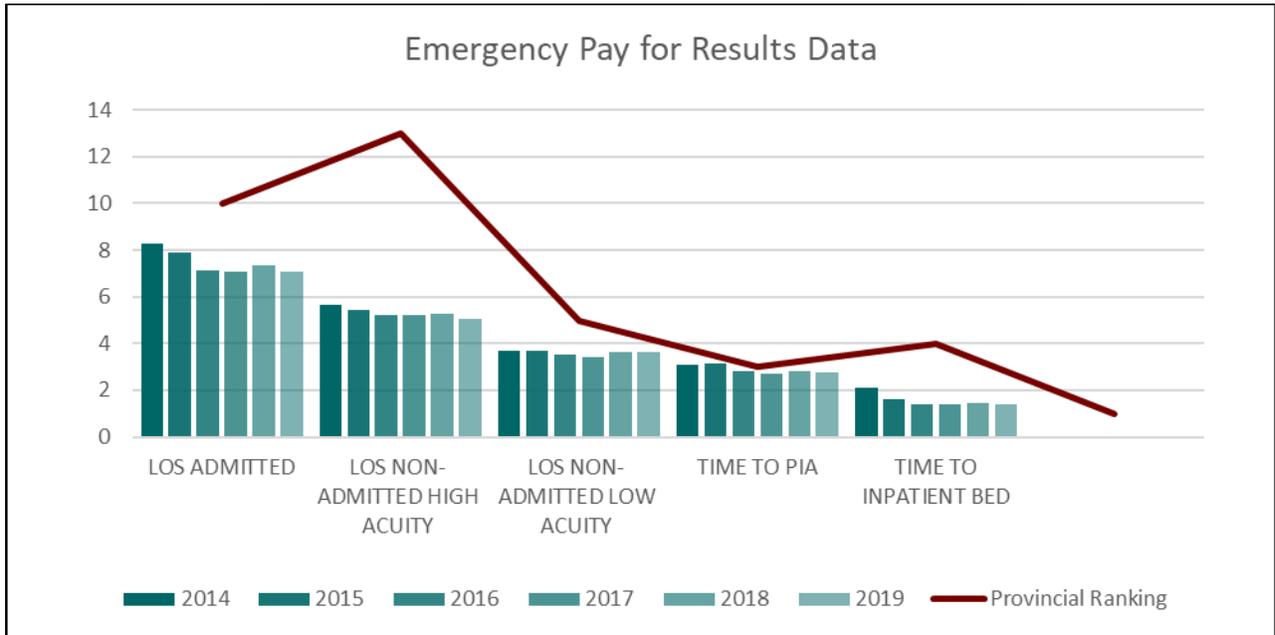
Source: Ontario Ministry of Health and Ministry of Long-Term Care: IntelliHealth ONTARIO.

B) PAY FOR RESULTS PERFORMANCE

Woodstock Hospital ranks first overall for emergency services wait time performance ranking out of 74 hospitals receiving pay for results funding. Our funding ranking is 29 out of 74 high-volume hospitals, adjusted based on volume distribution. Over the past 5 years we have improved our performance under every metric:

- LOS for Admitted patients decreased by 15% (ranked #1)
- LOS Non-admitted High Acuity decrease by 10% (ranked #2)
- LOS Non-admitted Low Acuity decrease by 1% (ranked #4)
- Time to Physician Initial Assessment (PIA) decreased by 11% (ranked #13)
- Time to Inpatient Bed (TTIB) decreased by 34% (ranked #2)
- Ambulance Offload Time decreased by 19% (ranked #9)

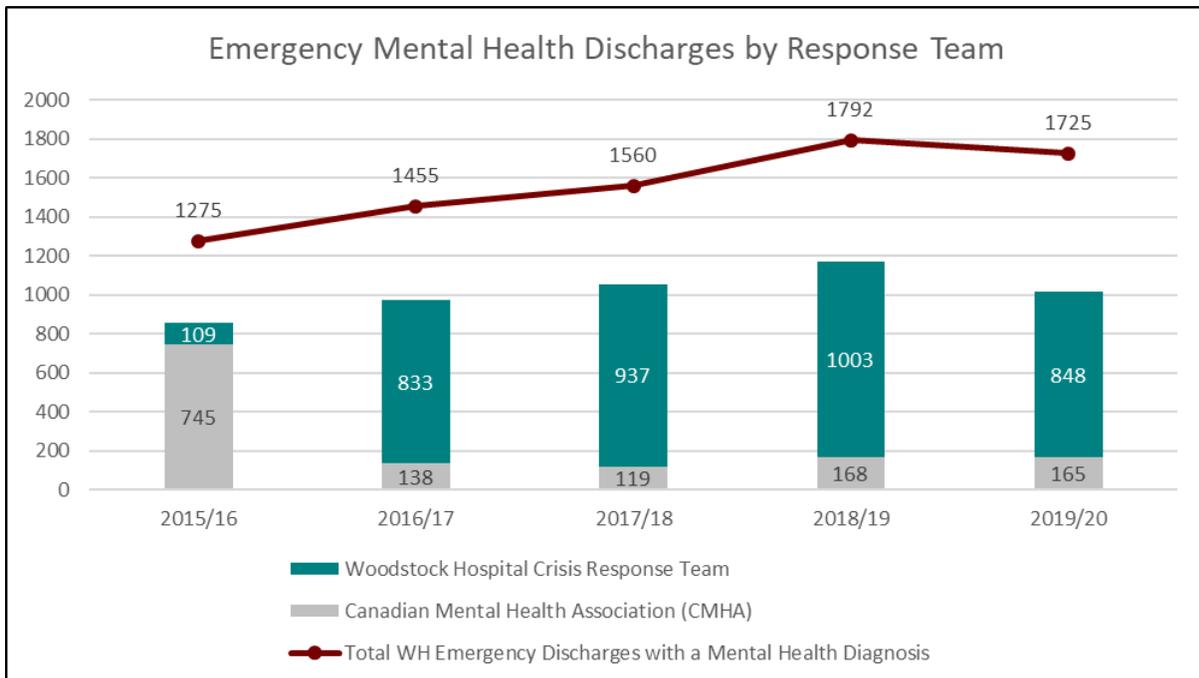
Reasons for this include relentless focus on quality improvement, investment in staff and digital platforms, as well as working collaboratively with community health partners, in particular Oxford County Paramedic Services.



Source: Ontario Health Cancer Care Ontario – ER Provincial Summary Reports

C) CRISIS RESPONSE TEAM – EMERGENCY

Mental health services have seen an increase of 450 Emergency cases over the past 5 years, which represents a 35% increase. In 2019/20, 59% of mental health emergency visits had an assessment by the Crisis Response Team or Canadian Mental Health Association (CMHA). This is an increase of 739 cases for the Crisis Response Team and a decrease of 580 for CMHA.



Source: Med2020 WinRecs

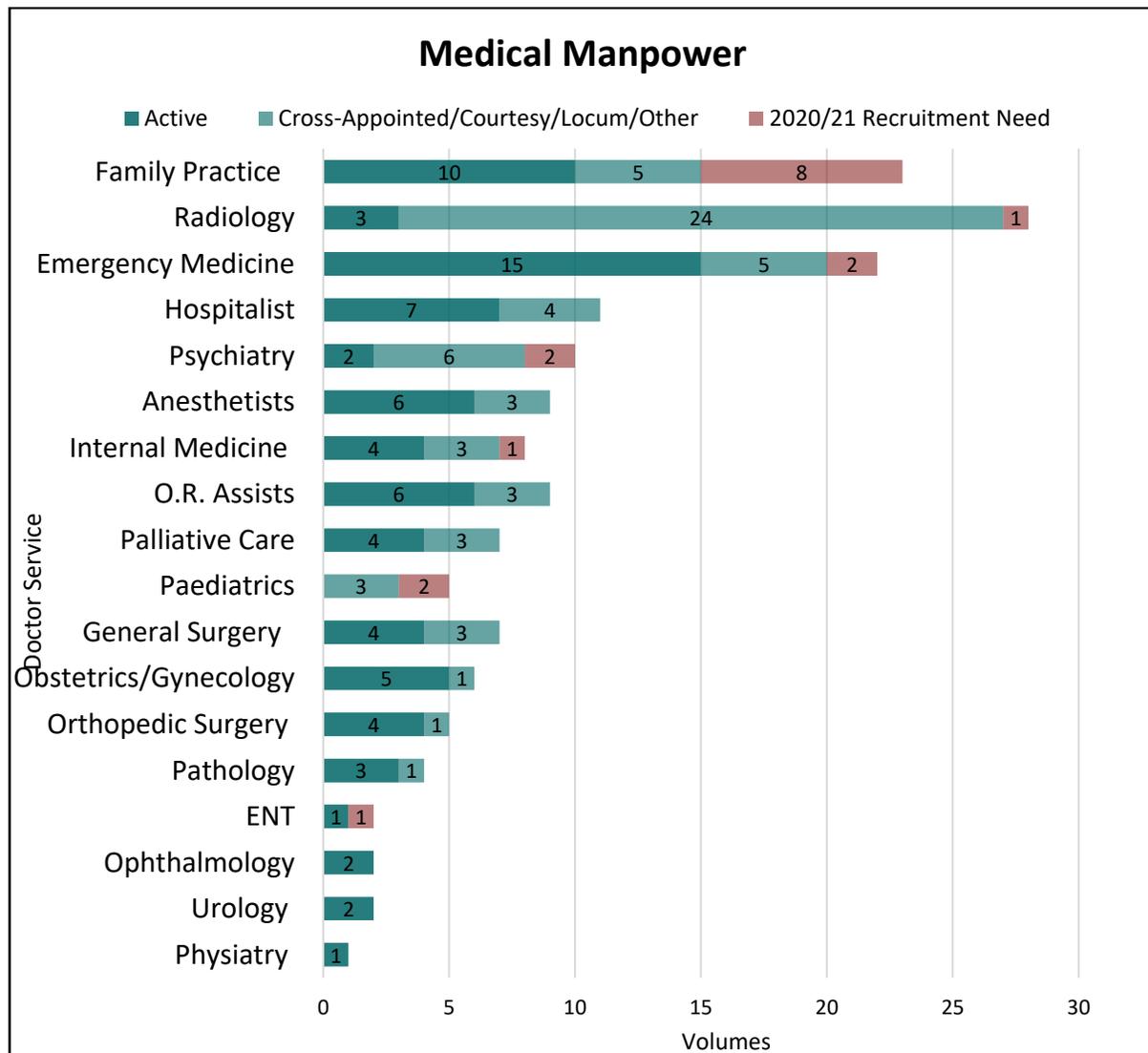
4. MEDICAL STAFF

A) HOSPITALIST PROGRAM

The Hospitalist program at Woodstock Hospital has grown since starting in January 2017. There has been a 13% increase (90th percentile) in patients cared for by a hospitalist from February 2017 to March 2020, excluding maternal/child health and surgical units.

B) MEDICAL MANPOWER

The recruitment of physicians continues to be a key focus for Woodstock Hospital to ensure the hospital continues to expand its services to meet the community needs. The table below highlights current and future physician recruitment needs, along with current levels of practitioners.



Source: Woodstock Hospital