

## Appendix

## I

# Glossary of Terms

**Source: From HSIP documents (Population Profile; Acute Utilization; Service Provider Profile)**

**Acuity:** The state of short term, intense symptomatology or pathology, as distinct from chronic. Many diseases have an acute phase and a chronic phase. This distinction is sometimes used in treatment.

**Age-Standardized Rate:** A summary rate which adjusts for variations in population age distributions over time and place. Mortality and hospitalization rates have been adjusted using the direct method and the 1991 Canadian population as the standard.

**ALC Alternate Level of Care):** When a patient who has completed the acute care phase of treatment occupies an acute care bed while awaiting placement elsewhere (long-term care home, rehabilitation, complex continuing care, home care, etc.).

**Angioplasty:** Angioplasty is a medical procedure in which a balloon is used to open narrowed or blocked blood vessels of the heart (coronary arteries).

**Average Length of Stay:** The number of patient days divided by the number of separations, reported in days.

**Bed Equivalents:** The approximate number of beds used annually based on patient days (ALC or other types) at benchmark occupancy rates (95% for these calculations).  $\text{Bed Equivalents} = \frac{\text{days}}{(\text{occupancy} * \text{days/year})}$

**Body Mass Index (BMI):** a measure of body weight adjusted for height which is correlated with body fat. To calculate BMI, divide weight in kilograms by height in metres squared. The International Standard for BMI is: <18.5 (underweight), 18.5-24.9 (acceptable weight, 25 – 29.9 (overweight) and 30 or higher (obese).

**Cardiac Surgery Cases:** A surgical procedure on the heart, in which the patient goes on cardiac bypass or the bypass pump is on standby. Does not include heart transplant cases.

**CDPM:** Chronic Disease Prevention and Management

**Client/Patient/Family** refers to any Patient, Client, Survivor, Resident, Consumer and other individuals who may potentially use health services and their family and/or care givers.

**CMG™ Case Mix Group (CMG™):** A methodology designed to aggregate hospital inpatients with similar diagnoses and treatment requirements. CMG is a registered trademark of the Canadian Institute for Health Information.

**Case Mix Group Complexity Age Category:** Categories refer to broad age groupings (<17 years, 18-69 years, 70+ years) that are associated with differing levels of treatment complexity and lengths of stay for specific CMGs.

**CCAC:** Community Care Access Centres provide a simplified service access point to home care and placement coordination services to long-term care facilities.

**CCC:** Complex Continuing Care relates to designated chronic care beds located in a hospital setting.

**CCS:** Community Support Services

**Census subdivision:** area that is a municipality or an area that is deemed to be equivalent to a municipality for statistical reporting purposes (e.g., as an Indian reserve or an unorganized territory). Municipal status is defined by laws in effect in each province and territory in Canada.

**Confidence Interval:** The interval with a given probability (here 95%) that the true value of a rate is contained within the interval.

**Confidence intervals:** indicate the degree of variability associated with an estimate. A 95% confidence interval indicates that estimates are accurate within the upper and lower confidence interval 19 times out of 20. Upper and lower bounds are shown as  $\pm$  values in tables and error bars in charts.

**Critical Mass:** A large enough population to warrant service.

**Crude Rate:** The number of events occurring in a specific time period, expressed per population. A crude rate is not adjusted for differences in population structure.

**CTC:** Children's Treatment Centres are community-based organizations that serve children with physical disabilities and multiple special needs.

**Detailed Planning and Action Teams:** Teams of providers, public and other partner representatives that will come together to work on integration priority action plans.

**Dialysis:** Dialysis, including chronic hemodialysis and acute hemodialysis, refers to the treatment of patients with chronic or acute end-stage renal disease.

**Direct Patient Care FTEs:** The non-management staff and hours associated with departments whose primary mandate is direct patient care. These hours should be primarily related to nursing, allied health, and other health care assistant staff.

**Dissemination areas (DAs):** the smallest standard geographic area for which census data are disseminated. DAs are composed of one or more neighbouring blocks, with a population of 400 to 700 persons.

**Early Wins:** These Initiatives have been identified as ones that are short term (three to six months) and will have impact upon implementation.

**ED:** Emergency Department

**EHR:** Electronic Health Record

**ELDCAP:** The Elderly Capital Assistance Program (ELDCAP) provides services to Long-Term Care residents in units that are collocated within hospitals in small northern communities. ELDCAP beds are subject to the Long-Term Care program requirements but are funded through a hospital's global budget. ELDCAP beds are also used to classify interim Long-Term Care beds opened temporarily in hospitals.

**Enabling Strategies:** These areas of focus have been identified as being fundamental to success for all integration priorities.

**FHT:** Family Health Team

**FLSA:** French Language Services Act

**FTE:** Full-time equivalent. A full-time equivalent is based on an individual working 1950 hours per year.

**Health Service Organizations** will be responsible to the Mississauga Halton LHIN including hospitals, Community Care Access Centre (CCAC), Community Support Services, Mental Health Agencies, Addictions Agencies and Long Term Care Homes.

**HHR:** Health Human Resources

**Hospitalization rate:** refers to the hospital separation rate for all hospital inpatients excluding newborns and stillbirths. A separation may be due to death, discharge home, or transfer to another facility.

**ICD Implants:** Implantable Cardiac Device implanted under the skin which will deliver an electrical charge to the heart in the event of sudden cardiac arrest.

**ICD-10:** refers to the International Classification of Diseases, 10<sup>th</sup> revision. The ICD is used to classify diseases and other health problems recorded on many types of health and vital records including death certificates and hospital records. ICD chapters are broad classifications which are subdivided into more specific conditions.

**IHSP:** Integrated Health Service Plan – this outlines the strategic direction for the Mississauga Halton LHIN for 2007 – 2010.

**IM/IT:** Information Management and Information Technology kilograms divided by height in meters squared. A BMI of 30 or more is classified as obese.

**Leverage:** An advantage used to influence people to get results.

**LHIN:** Local Health Integration Networks are not-for-profit corporations that will be responsible for planning, integrating and funding local health services in 14 different geographic areas of the province.

**LTC Homes:** Long-Term Care homes provide 24-hour nursing care and supervision within a secure setting.

**MIS:** The Management Information Systems (MIS) Guidelines are a national framework, developed by the Canadian Institute for

Health Information, for collecting and reporting financial and statistical data on health service organizations. In Ontario, these guidelines have been adopted and provincial standards established as the Ontario Health Care Reporting Standards (OHRS).

**MOHLTC:** Ministry of Health and Long-Term Care

**MRI Exam:** Magnetic Resonance Imaging exams provide a view inside the body and are used for diagnosis and treatment planning.

**Neonatology:** Care and treatment of newborn infants.

**Orphan patients:** Person who does not have a family physician in the community.

**Partners:** Includes Primary Health Care, Family Health Teams, Public Health Units, universities and colleges, other ministries and levels of government (ie: Housing, Environment, Education, Transportation, Judicial).

**Per Capita:** The amount per person

**Perinatal:** The period around the time of birth

**Postnatal:** After birth

**Post Partum:** The period after childbirth

**Prenatal:** Before birth

**Primary Level of Care:** Procedures or treatments that can be provided in any hospital setting by general practitioners or specialists.

**Priority Programs (also referred to as Protected Services):** The MOHLTC provides additional funds for specific tertiary or specialty services and essential medical/surgical procedures to designated hospitals for defined volumes based on critical mass, population need, and provincial priorities.

**Program Cluster Category (PCC):** Consists of Case Mix Groups (CMGs) aggregated into broad programs and reflects the main types of services received.

**Providers:** All health service providers including health professionals and workers providing care within their communities.

**Rapid Action Teams:** Teams of providers, providers, public and other partner representatives that will come together to work on short time frame priority action plans.

**Secondary Level of Care:** Surgical and other procedures provided by medical specialists, usually in larger community hospitals.

**Separation:** A completed case treated in a hospital resulting in any of the following: discharge home, transfer to another facility, death or sign out.

**Statistical significance:** an inference that a result is unlikely to have occurred due to chance alone.

**Statistical Significance:** The probability that a result is not likely to have occurred due to chance alone.

**Tertiary/Quaternary Level of Care:** Procedures or treatments provided to seriously ill patients that involve highly specialized, costly care most often provided in larger regional referral centres or teaching hospitals.

**Total Days of Stay:** Includes the acute and ALC portions of a hospital stay.