



Ontario Acquired Brain Injury (ABI) Dataset Project

South East Local Health Integration Network (LHIN)

Key Findings

Highlights:

Alternate Level of Care (ALC) Days, Length of Stay, Discharge Disposition of ABI Patients, Number of Episodes of Care, and LHIN Concordance



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- ❖ In 2009/10, the rate of TBI was 2.4 per 1000 and South East LHIN had the second highest rate of nTBI (2.2 per 1000). The rates in South East LHIN were higher than the provincial average (TBI – 1.8 per 1000, nTBI – 1.6 per 1000).

Alternate Level of Care (ALC) Days

- ❖ In 2009/10, 16% of TBI and 13% of nTBI acute care episodes had ALC days. From 2003/04 to 2009/10, the mean number of ALC days per ALC episode for TBI patients decreased from 56 to 16 days and from 27 to 15 days among nTBI patients. The mean in 2009/10 was also lower than the provincial average (TBI – 24 days, nTBI – 20 days).
- ❖ The majority of patients with ALC days were 65 years and older (TBI – 61%, nTBI – 71%). Among TBI patients, 31% had psychiatric comorbidities and among nTBI patients, 17% had psychiatric comorbidities. The percentage of nTBI patients with psychiatric comorbidities in the South East LHIN was lower than the percentage in Ontario (24%).

Emergency Department (ED) Visits

- ❖ Between 2003/04 and 2009/10, there were 7,843 TBI and 4,006 nTBI cases recorded in the ED. From 2007/08 to 2009/10, there were more TBI episodes than nTBI episodes. During this period, 36% of TBI ED visits occurred in the <18 years age group and 26% of nTBI ED visits occurred in the 35 – 54 years age group.
- ❖ The mean length of stay (LOS) in the ED among TBI patients increased from 3 to 9 hours and from 5 to 13 hours among nTBI from 2003/04 to 2009/10. The median LOS in 2009/10 was 3 hours for TBI patients and 5 hours for nTBI patients.
- ❖ From 2007/08 to 2009/10, the majority of TBI patients were discharged from the ED (79%) compared to 42% of nTBI patients. Among nTBI patients, 44% were admitted to acute care compared to 13% of TBI patients.

Acute Care Admissions

- ❖ Between 2003/04 and 2009/10, there were 1,479 TBI and 4,483 nTBI cases in acute care. From 2007/08 to 2009/10, there were more nTBI

than TBI episodes. During this period, 27% of TBI and nTBI admissions occurred in the 75+ years age group.

- ❖ The mean LOS in acute care among TBI patients decreased from 29 to 13 days and from 15 to 13 days among nTBI patients from 2003/04 to 2009/10. The median number of days among TBI patients in 2009/10 was 6 days and among nTBI patients, it was 7 days.
- ❖ Special care days is the sum of all days in all intensive care units. The mean number of special care days decreased from 7 to 6 days among TBI patients and increased from 5 to 6 days among nTBI patients from 2003/04 to 2009/10. The median number of special care days among TBI patients was 3 days and 2 days among nTBI patients.
- ❖ From 2007/08 to 2009/10, 54% of TBI patients were discharged home, 16% were transferred to long term care, and 13% died. Among nTBI patients, 37% were discharged home, 13% were transferred to long term care, and 25% died.
- ❖ The percentage of nTBI patients (7%) readmitted to acute care within one month was more than twice the percentage of TBI patients (3%) from 2007/08 to 2009/10.

Inpatient Rehabilitation

- ❖ Between 2003/04 to 2009/10, there were 484 cases coded with brain dysfunction in inpatient rehabilitation. From 2007/08 to 2009/10, 49% were aged 40 – 64 years.
- ❖ The mean LOS among patients with brain dysfunction in inpatient rehabilitation decreased from 62 to 54 days from 2003/04 to 2009/10. The median number of days in 2009/10 was 45 days, which was higher than the provincial median LOS in 2009/10 (38 days).

LHIN Concordance

- ❖ The percentage of episodes within the LHIN of patients' residence in 2009/10 was 93% in ED, 93% in acute care, and 88% in inpatient rehabilitation, which was higher than the percentage in Ontario (ED – 85%, acute care – 78%, inpatient rehabilitation – 61%).