

Patient-Centred Solutions to Addressing Alternate Level of Care

Briefing Note



Transitions of care (moving from one sector of the health care system to another) is a stressful time for patients, caregivers and providers². Sometimes this transition in care is delayed.³ Transition delays is a care quality issue experienced by hospitals worldwide⁴⁻¹². In Canada, this phenomenon is referred to as Alternate Level of Care (ALC)⁶. The Canadian Institute of Health Information reports that, in most provinces, the number of beds occupied by ALC patients exceeds 13% almost every day⁶. Hospitals with ALC issues are often operating at over 100% capacity with patients in hallways as they wait to be admitted or discharged¹³. “ALC patients” experience functional decline¹⁴⁻¹⁸, they and their family experience confusion and stress¹⁹⁻²¹ and resources are not optimized^{3, 6, 13, 22}. Even though ALC rates dropped in some hospitals during the first peak of COVID-19, ALC rates are higher than ever again²³⁻²⁶. Outbreaks in long-term care homes and concerns about the safety and quality of care within these settings creates an additional obstacle for safely transitioning people out of the hospital²⁷.

In Ontario, the government has declared a mission to end ‘hallway healthcare’ and has taken steps to modernize the delivery of care to better meet the needs of patients, caregivers (families, care partners, etc.) and care providers¹³.

The health care system can do a better job supporting our patients and caregivers

When people are given an ALC status, care usually decreases, as they wait¹. The majority of “ALC patients” are over the age of 75 years with ongoing chronic care needs⁷. This wait period exacerbates an already heightened risk of functional decline¹⁴⁻¹⁸, risk of falling and exposure to hospital borne infectious diseases^{11, 16, 20, 21, 28-30}. ALC is a time of uncertainty and stress for both patients and caregivers with few resources available to support their needs¹⁹⁻²¹.

The ALC challenge has been an ongoing issue in health care systems internationally despite ongoing attempts to address it⁴⁻¹². A 2017 ALC symposium hosted in Toronto brought together key stakeholder groups from across Canada, including patients, caregivers, care providers, policy planners, hospital administrators, and data developers to formulate an action plan to address the ALC problem³¹. Participants at this symposium noted that strategies to address ALC have been haphazard, poorly documented, reactive in nature, and seldom informed by the experiences and needs of patients, caregivers and care providers³¹.

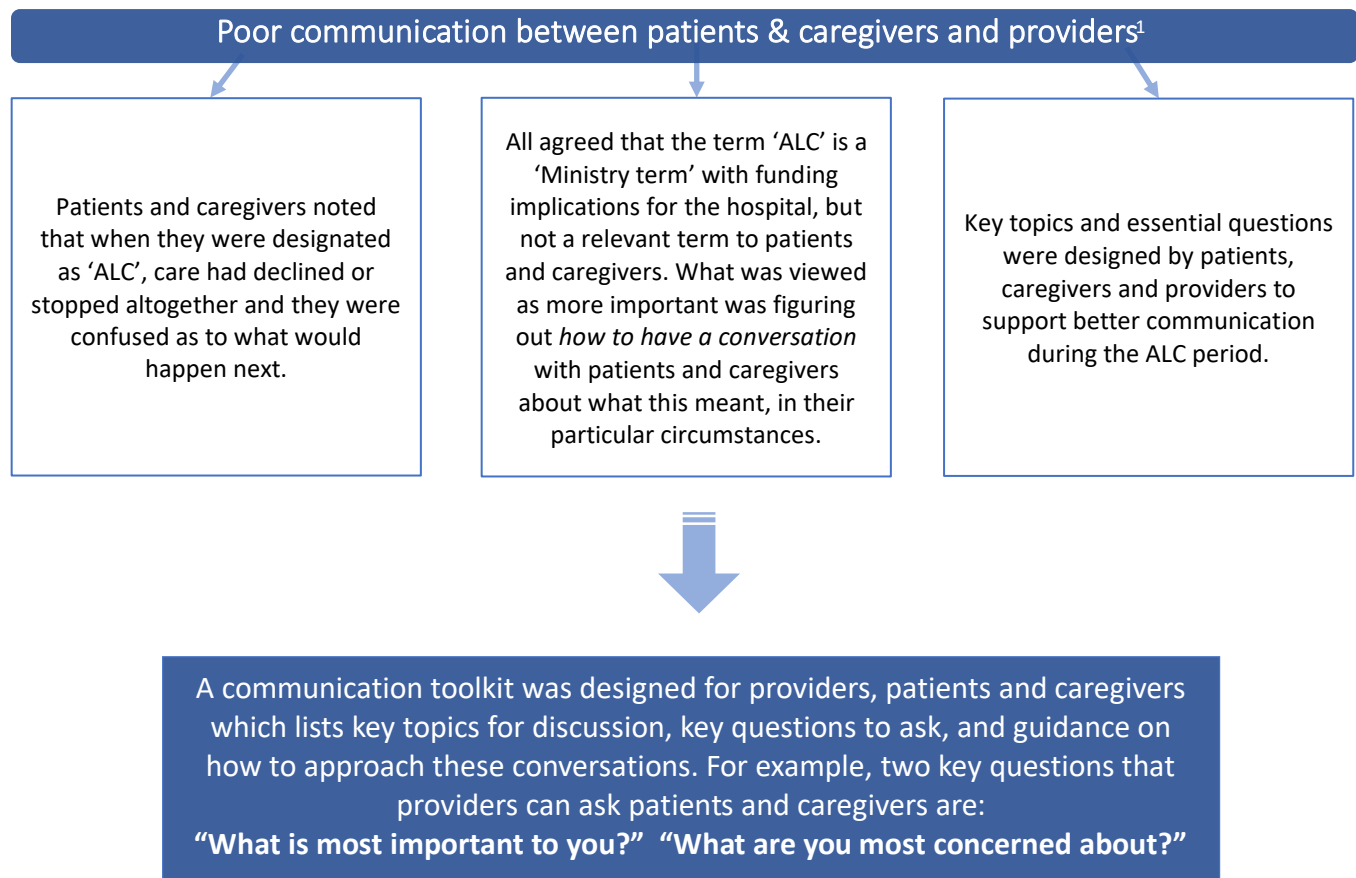
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Co-designing strategies to address ALC challenges with patients and caregivers

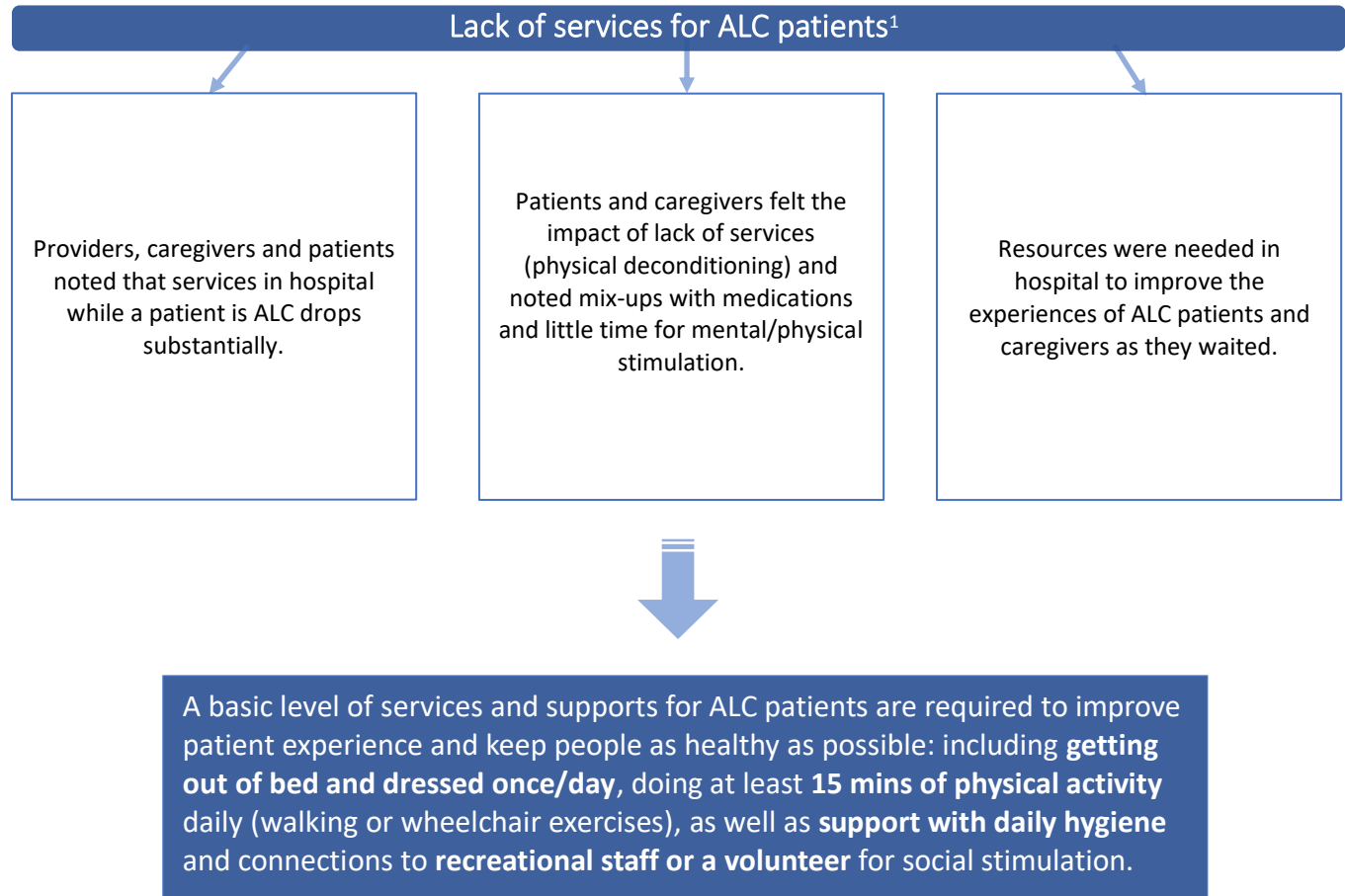
In response, a research project funded by the Canadian Institutes of Health Research (CIHR) Strategy for Patient Oriented Research (SPOR) and the Ontario SPOR Support Unit enabled a team of researchers to work with patients, caregivers and care providers to develop strategies to address ALC challenges¹. This project was spearheaded by *The ALC Patient and Caregiver Advisory Council*, comprised of seven dedicated patients and caregivers with current or recent ALC experience who work in partnership with a research team¹. In 2018 and 2019, *The ALC Patient and Caregiver Advisory Council* conducted a series of focus groups and co-design sessions with other patients, caregivers and providers in Toronto, Sudbury and Mississauga, Ontario to understand the ALC experiences of local patients, caregivers and providers and to devise practical and actionable strategies to address ALC challenges¹. While solutions to ALC requires a focus on prevention and enhanced community based infrastructure, we focused on small changes that can happen *in hospital* that can have significant impacts on patient experience and outcomes¹.

A Plan forward: An Alternate Level of Care Plan

The co-design work identified the following ALC challenges and proposed potential practical and actionable solutions:



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Working together to evaluate patient-centred solutions

In the next phase of co-design work, *the ALC Patient and Caregiver Advisory Council* plans to conduct a feasibility assessment of the communication toolkit and service additions/enhancements at acute care hospitals and evaluate the outcomes¹. This evaluation will inform improvements to the communication toolkit, in addition to providing insight on the impact of this intervention on the experiences of ALC patients, caregivers and providers along with costs and outcomes (including quality of life, ALC rates and readmissions to hospital). Implementing practical, patient-oriented solutions, such as communication toolkits along with continued services, is an important first-step to tackling the ALC challenge. Given ALC's systemic implications, the best way forward must address the concerns of those at the centre of this challenge—patients and caregivers, so we can support them to be at their best health at all stages of their journey.

For more details on our person centred ALC intervention please see our [recent publication](#).

Additional resources and information about our work can be found on our [website](#).

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References

1. Kuluski, K., et al., *An alternate level of care plan: Co-designing components of an intervention with patients, caregivers and providers to address delayed hospital discharge challenges*. Health Expect, 2020. **23**(5): p. 1155-1165.
2. Coleman, E.A., *Falling through the cracks: challenges and opportunities for improving transitional care for persons with continuous complex care needs*. J Am Geriatr Soc, 2003. **51**(4): p. 549-55.
3. Walker, D., *Caring For Our Aging Population and Addressing Alternate Level of Care*. . 2011: Toronto, ON.
4. Amy, C., et al., *Acute care alternate-level-of-care days due to delayed discharge for traumatic and non-traumatic brain injuries*. Healthc Policy, 2012. **7**(4): p. 41-55.
5. Costa, A.P., et al., *Acute care inpatients with long-term delayed-discharge: evidence from a Canadian health region*. BMC Health Serv Res, 2012. **12**: p. 172.
6. Sutherland, J.M. and R.T. Crump, *Alternative level of care: Canada's hospital beds, the evidence and options*. Healthc Policy, 2013. **9**(1): p. 26-34.
7. Costa, A.P. and J.P. Hirdes, *Clinical Characteristics and Service Needs of Alternate-Level-of-Care Patients Waiting for Long-Term Care in Ontario Hospitals*. Healthc Policy, 2010. **6**(1): p. 32-46.
8. Gaughan, J., H. Gravelle, and L.J.F.S. Siciliani, *Delayed discharges and hospital type: evidence from the English NHS*. 2017. **38**(3): p. 495-519.
9. Challis, D., et al., *An examination of factors influencing delayed discharge of older people from hospital*. Int J Geriatr Psychiatry, 2014. **29**(2): p. 160-8.
10. Tan, W.S., et al., *Factors associated with delayed discharges after inpatient stroke rehabilitation in Singapore*. Ann Acad Med Singap, 2010. **39**(6): p. 435-41.
11. Rojas-Garcia, A., et al., *Impact and experiences of delayed discharge: A mixed-studies systematic review*. Health Expect, 2018. **21**(1): p. 41-56.
12. McCloskey, R., P. Jarrett, and C. Stewart, *The Untold Story of Being Designated an Alternate Level of Care Patient*. Healthc Policy, 2015. **11**(1): p. 76-89.
13. *Hallway Health Care: A System Under Strain: 1st Interim Report from the Premier's Council on Improving Healthcare and Ending Hallway Medicine*. 2019; Available from: http://www.health.gov.on.ca/en/public/publications/premiers_council/docs/premiers_council_report.pdf.
14. Wilson, D.M., et al., *Examining waiting placement in hospital: utilization and the lived experience*. Glob J Health Sci, 2013. **6**(2): p. 12-22.
15. Swinkels, A. and T. Mitchell, *Delayed transfer from hospital to community settings: the older person's perspective*. Health Soc Care Community, 2009. **17**(1): p. 45-53.
16. McCloskey, R., et al., *Alternate level of care patients in hospitals: what does dementia have to do with this?* Can Geriatr J, 2014. **17**(3): p. 88-94.
17. Kortebein, P., et al., *Effect of 10 days of bed rest on skeletal muscle in healthy older adults*. JAMA, 2007. **297**(16): p. 1772-4.

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18. Bender, D. and P. Holyoke, *Why some patients who do not need hospitalization cannot leave: A case study of reviews in 6 Canadian hospitals*. Healthc Manage Forum, 2018. **31**(4): p. 121-125.
19. Cressman, G., et al., *Uncertainty and alternate level of care: a narrative study of the older patient and family caregiver experience*. Can J Nurs Res, 2013. **45**(4): p. 12-29.
20. Everall, A.C., et al., *Patient and caregiver experience with delayed discharge from a hospital setting: A scoping review*. Health Expect, 2019. **22**(5): p. 863-873.
21. Kuluski, K., J. Im, and M. McGeown, *"It's a waiting game" a qualitative study of the experience of carers of patients who require an alternate level of care*. BMC Health Serv Res, 2017. **17**(1): p. 318.
22. Burr, E. and S. Dickau, *Leading Practices in Alternate Level of Care (ALC) Avoidance: A Standardized Approach*. Healthc Q, 2017. **20**(2): p. 44-47.
23. Roberts, D., *Sudbury hospital to move ALC patients to hotel as first COVID-19 patient admitted*, in *Northern Ontario CTV News*. 2020: Sudbury, ON.
24. Sibbald, B., *What happened to the hospital patients who had "nowhere else to go"?* 2020.
25. Zeidler, M., *Thousands of hospital beds in B.C. cleared to make room for COVID-19*. 2020, in *CBC News*. 2020: British Columbia.
26. Howlett, K., *Ontario hospital scramble to open more beds as they brace for surge in coronavirus cases*, in *The Globe and Mail*. 2020: Ontario.
27. Grant, K. and T.H. T, *How shoring up hospitals for COVID-19 contributed to Canada's long-term care crisis*, in *The Globe and Mail*. 2020: Ontario.
28. Bai, A.D., et al., *Risk factors, costs and complications of delayed hospital discharge from internal medicine wards at a Canadian academic medical centre: retrospective cohort study*. BMC Health Serv Res, 2019. **19**(1): p. 935.
29. Barnable, A., et al., *Analysis of the Influencing Factors Associated With Being Designated Alternate Level of Care*. Home Health Care Management & Practice, 2014. **27**(1): p. 3-12.
30. Bo, M., et al., *Prevalence of and factors associated with prolonged length of stay in older hospitalized medical patients*. Geriatr Gerontol Int, 2016. **16**(3): p. 314-21.
31. Kuluski, K., et al., *Alternate Level of Measurement? Learning from ALC Experiences to Improve System Performance*, in *Redefining Health Care*. 2018.