

FOCUS ON HEALTHCARE: DESIGNATED SUPPORTIVE LIVING

Data Dictionary

May 2024

The Health Quality Council of Alberta is a provincial agency that brings together patients, families, and our partners from across healthcare and academia to inspire improvement in patient safety, person-centred care, and health service quality. We assess and study the healthcare system, identify effective practices, and engage with Albertans to gather information about their experiences. Our responsibilities are outlined in the *Health Quality Council of Alberta Act*.

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	IDENTIFYING INFORMATION	
Name:	Placement into preferred living option	
Short/Other Names:	n/a	
В	ACKGROUND, INTERPRETATION AND BENCHMARKS	
Description:	The percentage of designated supportive living (DSL) or long term care (LTC) residents that are placed into their most preferred living option.	
	Data is grouped and presented:	
	a) By location placed from (all, acute/subacute care, community)	
	b) By location placed to (long term care, designated supportive living)	
Rationale:	To provide information on how often individuals are placed into their most preferred (i.e., first choice) living option based on options that are able to meet a resident's assessed unmet needs.	
Interpretation:	A higher percentage is desirable.	
Target/Benchmark:	No benchmarks have been identified.	
	INDICATOR CALCULATION	
Calculation:	Percent of residents placed within their most preferred living option =	
	Total number of individuals placed into their most preferred DSL or LTC site Total number of individuals placed into DSL or LTC	
	Type of Measure: Percentage	
	Adjustment Applied: None	
Denominator:	The total number of individuals placed into a designated supportive living or long term care site, provincially, or in a given zone.	
Numerator:	The total number of individuals placed into their most preferred living option.	



DATA DETAILS	
Data Sources:	Alberta Health Services ¹ , ²
Reporting Frequency:	Quarterly
	First Available Year: 2018-19
	Last Available Year: 2022-23
Geographic Coverage:	The province of Alberta excluding the military and prisoners.
Reporting Levels:	Province, zone

 $^{^{1}}$ Documentation and data for this measure has been provided directly by Alberta Health Services (AHS). Credit regarding the data definition and appropriate calculations should be attributed to the AHS Analytics Team.

² While the HQCA used all reasonable efforts to ensure the accuracy, completeness, and reliability of the data used in this website, data continues to expand in scope and completeness. As such, the values reported may change over time.



	IDENTIFYING INFORMATION	
Name:	Placement into continuing care within 30 days	
Short/Other Names:	n/a	
В	ACKGROUND, INTERPRETATION AND BENCHMARKS	
Description:	The percentage of all residents placed into designated supportive living (DSL) or long term care (LTC) within 30 days of assessment.	
	Data is grouped and presented:	
	a) By location placed from (all, acute/subacute care, community)	
	b) By location placed to (long term care, designated supportive living)	
Rationale:	To provide information on timeliness of placement. This measure represents a measure of access to continuing care.	
Interpretation:	A higher percentage is desirable.	
Target/Benchmark:	No benchmarks have been identified.	
	INDICATOR CALCULATION	
Calculation:	Percent of residents placed within 30 days =	
	Number of individuals placed into DSL or LTC within 30 days of being assessed and placed on the waitlist Total number of individuals on the waitlist	
	Type of Measure: Percentage	
	Adjustment Applied: None	
Denominator:	The total number of individuals on the waitlist, provincially, or in a given zone.	
Numerator:	The total number of individuals placed into designated supportive living or long term care within 30 days of assessment and being placed on a waitlist.	
Exclusions:	Occasionally a bed is available within 30 days, but the individual may not be ready to move for a variety of reasons. This measure excludes waitlist holds and admission delays that can be attributed to the individual.	



DATA DETAILS	
Data Sources:	Alberta Health Services ³ , ⁴
Available Data Years:	Type of Year: Fiscal year [starts April 1, ends March 31]
	First Available Year: 2018-19
	Last Available Year: 2022-23
Geographic Coverage:	The province of Alberta excluding the military and prisoners.
Reporting Levels:	Province, zone

 $^{^3}$ Documentation and data for this measure has been provided directly by Alberta Health Services (AHS). Credit regarding the data definition and appropriate calculations should be attributed to the AHS Analytics Team.

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	IDENTIFYING INFORMATION
Name:	Emergency department visit frequency
Short/Other Names:	n/a
Вас	KGROUND, INTERPRETATION AND BENCHMARKS
Description:	The number of emergency department visits by designated supportive living (DSL) or long term care (LTC) residents, per 1,000 resident days.
	Data is grouped and presented according to setting: long term care, and designated supportive living - levels 4 [DSL4], and 4D [DSL4D].
Rationale:	To provide information on how often designated supportive living and long term care residents visit an emergency department/urgent care centre. This is a measure of the volume of visits.
Interpretation:	None
Target/Benchmark:	No benchmarks have been identified.
	INDICATOR CALCULATION
Calculation:	Number of visits per 1,000 resident days =
	(Total number of emergency department visits for DSL or LTC residents) Total number of resident days for DSL or LTC residents ×1000
	Type of Measure: Number per 1,000 resident days
	Adjustment Applied: None
Denominator:	The total number of resident bed days in designated supportive living or long term care, provincially, or in a given zone. As an example, one resident who lives in designated supportive living or long term care for an entire year is counted as 365 resident days. The number of resident days for each person is based upon their dates of admission and discharge at a given site in designated supportive living or long term care.
Numerator:	The total number of emergency department and urgent care centre visits for persons deemed to be a designated supportive living or long term care resident at the time of visit. Visits with an MIS_CODE beginning with "71310", "71513", or "71514" are included. Visits to an emergency department or urgent care centre on the day of admission to a designated supportive living or long term care site are not included.



DATA DETAILS	
Data Sources:	Alberta Health Services ⁵ , ⁶
	Alberta Continuing Care Information System (ACCIS)
	National Ambulatory Care Reporting System (NACRS)
Reporting Frequency:	Annually (by fiscal year [starts April 1, ends March 31])
	First Available Year: 2018-19
	Last Available Year: 2022-23
Geographic Coverage:	The province of Alberta excluding the military and prisoners.
Reporting Levels:	Province, zone

⁵ Documentation and data for this measure has been provided directly by Alberta Health Services (AHS). Credit regarding the data definition and appropriate calculations should be attributed to the AHS Analytics Team.

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	IDENTIFYING INFORMATION	
Name:	Return to emergency department	
Short/Other Names:	n/a	
В	ACKGROUND, INTERPRETATION AND BENCHMARKS	
Description:	The percent of designated supportive living (DSL) or long term care (LTC) residents that returned to the emergency department within 72 hours or 30 days of their initial or previous visit to the emergency department.	
	Data is grouped and presented according to setting: long term care, and designated supportive living - levels 4 [DSL4], and 4D [DSL4D].	
Rationale:	To provide information on how often individuals living in designated supportive living and long term care sites visit an emergency department, and then return for a second visit within 72 hours or 30 days.	
	Monitoring returns to the emergency department can help us to understand if residents in designated supportive living and long term care are getting the care they need at the right time and right location. For example, a return to the emergency department within 72 hours might indicate the resident:	
	Was not ready to be discharged or released from the emergency department,	
	 Has complex health needs and requires time-sensitive, specialized care (e.g., palliative or end of life care) that cannot be provided at the supportive living or long term care site, and/or 	
	 Experienced a new health-related issue that required immediate attention that could not be provided on-site. 	
	A return to the emergency department within 30 days might indicate:	
	A continued or rapid change in the health status of a resident or	
	■ The resident's complex health needs still require time-sensitive, specialized care (e.g., palliative or end of life care) that cannot be provided at the supportive living or long term care site.	
Interpretation:	A lower percentage is desirable.	
Target/Benchmark:	No benchmarks have been identified.	



INDICATOR CALCULATION			
Calculation:	Percent who revisit within 72 hours or 30 days =		
	Total number of emergency department \[\begin{align*} \text{Total number of emergency department} \\ \text{return visits for DSL or LTC residents in selected timeframe} \\ \text{Total number of initial emergency} \\ \text{department discharges for DSL or LTC residents} \end{align*} \times 100		
	Type of Measure: Percent		
	Adjustment Applied: None		
Denominator:	The total number of initial emergency department/urgent care centre discharges for designated supportive living or long term care residents. All eligible visits with an MIS_CODE beginning with "71310", "71513", or "71514" are included. Any visits which resulted in admission/transfer to hospital, death are excluded.		
Numerator:	The total number of emergency department and urgent care centre visits which occurred within 6 hours of initial discharge and 72 hours/30 days thereafter for designated supportive living or long term care residents. All visits with an MIS_CODE beginning with "71310", "71513", or "71514" are included.		
	DATA DETAILS		
Data Sources:	Alberta Health Services ⁷ , ⁸		
	Alberta Continuing Care Information System (ACCIS)		
	National Ambulatory Care Reporting System (NACRS)		
Reporting Frequency:	Annually (by fiscal year [starts April 1, ends March 31])		
	First Available Year: 2018-19		
	Last Available Year: 2022-23		
Geographic Coverage:	The province of Alberta excluding the military and prisoners.		
Reporting Levels:	Province, zone		

 $^{^7}$ Documentation and data for this measure has been provided directly by Alberta Health Services (AHS). Credit regarding the data definition and appropriate calculations should be attributed to the AHS Analytics Team.

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IDENTIFYING INFORMATION	
Name:	Admissions to hospital from the emergency department
Short/Other Names:	n/a
Вас	CKGROUND, INTERPRETATION AND BENCHMARKS
Description:	The percent of emergency department visits by designated supportive living (DSL) and long term care (LTC) residents, which resulted in admission/transfer to hospital.
	Data is grouped and presented according to continuing care setting: long term care, and designated supportive living - levels 4 [DSL4], and 4D [DSL4D]).
Rationale:	To provide information regarding what proportion of designated supportive living and long term care residents who visit an emergency department are admitted to hospital.
Interpretation:	None
Target/Benchmark:	No benchmarks have been identified.
	INDICATOR CALCULATION
Calculation:	Percentage admitted to hospital =
	Total number of hospital admissions from the emergency department for DSL or LTC residents Total number of emergency department visits for DSL or LTC residents
	Type of Measure: Percentage
	Adjustment Applied: None
Denominator:	The total number of emergency department visits for designated supportive living or long term care residents at the time of visit. Visits with an MIS_CODE beginning with "71310" are included. Visits to an emergency department on the day of admission to a continuing care facility are not included.
Numerator:	The total number of admissions to hospital for designated supportive living or long term care residents at the time of visit. Visits with an MIS_CODE beginning with "71310" are included. Admission/transfer to hospital is based on the following disposition codes in the emergency department dataset:



	06: Admit to reporting facility as inpatient to special care unit or OR from ambulatory care visit functional centre	
	07: Admit to reporting facility as an inpatient to another unit of the reporting facility from the ambulatory care visit functional centre	
	08: Transfer to another acute care facility directly from ambulatory care visit functional centre (includes transfer to another acute care facility with entry through ED)	
DATA DETAILS		
Data Sources:	Alberta Continuing Care Information System (ACCIS)	
	National Ambulatory Care Reporting System (NACRS)	
	Discharge Abstract Database (DAD)	
Reporting Frequency:	Annually (by fiscal year [starts April 1, ends March 31])	
	First Available Year: 2018-19	
	Last Available Year: 2022-23	
Geographic Coverage:	The province of Alberta excluding the military and prisoners.	
Reporting Levels:	Province, zone	



IDENTIFYING INFORMATION	
Name:	Readmission into acute care within 7 days
Short/Other Names:	n/a
В	ACKGROUND, INTERPRETATION AND BENCHMARKS
Description:	The percent of designated supportive living (DSL) or long term care (LTC) residents who returned home after a hospital stay, and who were readmitted to hospital within 7 days.
	Data is grouped and presented according to continuing care setting: long term care, and designated supportive living - levels 4 [DSL4], and 4D [DSL4D].
Rationale:	To provide information on how often designated supportive living or long term care residents are readmitted to hospital within 7 days after a hospital stay. This can be a measure of poor transitions in care, and/or a measure of illness among residents, or the emergence of a new health-related issue among residents who return from home following a hospital stay.
Interpretation:	A lower percentage is desirable.
Target/Benchmark:	No benchmarks have been identified.
	INDICATOR CALCULATION
Calculation:	Percent readmitted within 7 days = \[\begin{align*} \text{Total number of DSL or LTC residents with an unplanned readmission within 7 days} \\ \text{Total number of initial hospital discharges for DSL or LTC residents}} \end{align*} \times 100 \text{Type of Measure: Percent} \text{Adjustment Applied: None}
Denominator:	The total number of initial hospital discharges for designated supportive living or long term care residents. Any visits which resulted in transfer to another hospital, or death are excluded.
Numerator:	The total number of unplanned readmissions to hospital which occurred within 24 hours and 7 days of initial discharge for designated supportive living or long term care residents. All visits with an admission category of "U" (urgent) with an institution code beginning with "80" (Alberta acute care hospital) are included.



DATA DETAILS	
Data Sources:	Alberta Continuing Care Information System (ACCIS) Discharge Abstract Database (DAD)
Reporting Frequency:	Annually (by fiscal year [starts April 1, ends March 31]) First Available Year: 2018-19 Last Available Year: 2022-23
Geographic Coverage:	The province of Alberta excluding the military and prisoners.
Reporting Levels:	Province, zone



IDENTIFYING INFORMATION		
Name:	Location of death	
Short/Other Names:	n/a	
BACKGROUND, INTERPRETATION AND BENCHMARKS		
Description:	The percent of designated supportive living (DSL) or long term care (LTC) residents who died at a designated supportive living or long term care site, or in acute care.	
	Data is grouped and presented according to continuing care setting: long term care, and designated supportive living - levels 4 [DSL4], and 4D [DSL4D].	
Rationale:	To provide information on the location of death for designated supportive living and long term care residents. This measure only reports on the location of death and does not provide insights into the resident or loved ones' experience with end-of-life care.	
Interpretation:	None	
Target/Benchmark:	No benchmarks have been identified.	
INDICATOR CALCULATION		
	INDICATOR CALCULATION	
Calculation:	INDICATOR CALCULATION Percent of residents who died at continuing care site or in acute care =	
Calculation:		
Calculation:	Percent of residents who died at continuing care site or in acute care =	
Calculation:	Percent of residents who died at continuing care site or in acute care = \[\begin{align*} \text{Total number of resident deaths} \\ \text{in DSL or LTC/acute care} \\ \text{Total number of DSL or LTC resident deaths} \end{align*} \times 100	
Calculation: Denominator:	Percent of residents who died at continuing care site or in acute care = \[\begin{align*} \text{Total number of resident deaths} \\ \text{in DSL or LTC/acute care} \\ \text{Total number of DSL or LTC resident deaths} \end{align*} \text{ \text{\text{Total number of DSL or LTC resident deaths}}} \] \text{Type of Measure: Percent}	
	Percent of residents who died at continuing care site or in acute care = \[\begin{align*} \text{Total number of resident deaths} \\ \text{in DSL or LTC/acute care} \\ \text{Total number of DSL or LTC resident deaths} \end{align*} \text{*100} \] Type of Measure: Percent Adjustment Applied: None The total number of designated supportive living or long term care residents	
Denominator:	Percent of residents who died at continuing care site or in acute care = \[\begin{align*} \text{Total number of resident deaths} \\ \text{in DSL or LTC/acute care} \\ \text{Total number of DSL or LTC resident deaths} \end{align*} \times 100 \] Type of Measure: Percent Adjustment Applied: None The total number of designated supportive living or long term care residents who died according to the vital statistics dataset The total number of designated supportive living or long term care residents who died in a continuing care site or acute care based on place of death codes in the vital statistics dataset. The following place of death codes were included: 1: Hospital	
Denominator:	Percent of residents who died at continuing care site or in acute care = \[\begin{align*} \text{Total number of resident deaths} \\ \text{in DSL or LTC/acute care} \\ \text{Total number of DSL or LTC resident deaths} \end{align*} \text{x100} \] Type of Measure: Percent Adjustment Applied: None The total number of designated supportive living or long term care residents who died according to the vital statistics dataset The total number of designated supportive living or long term care residents who died in a continuing care site or acute care based on place of death codes in the vital statistics dataset. The following place of death codes were included: 1: Hospital 4: Auxiliary Hospital	
Denominator:	Percent of residents who died at continuing care site or in acute care = \[\begin{align*} \text{Total number of resident deaths} \\ \text{in DSL or LTC/acute care} \\ \text{Total number of DSL or LTC resident deaths} \end{align*} \text{×100} \] Type of Measure: Percent Adjustment Applied: None The total number of designated supportive living or long term care residents who died according to the vital statistics dataset The total number of designated supportive living or long term care residents who died in a continuing care site or acute care based on place of death codes in the vital statistics dataset. The following place of death codes were included: 1: Hospital	

LOCATION OF DEATH 13



Notes:	Sometimes the proportion of deaths occurring in an acute care or continuing care site does not equal 100% because some residents die outside of these locations. The following place of death codes exist in the vital statistics dataset but are not included in the numerator for this measure:
	2: At home
	3: En route
	6: Unknown
	7: Other

LOCATION OF DEATH 14



DATA DETAILS	
Data Sources:	Alberta Continuing Care Information System (ACCIS)
	Vital Statistics
Reporting Frequency:	Annually (by fiscal year [starts April 1, ends March 31])
	First Available Year: 2018-19
	Last Available Year: 2022-23
Geographic Coverage:	The province of Alberta excluding the military and prisoners.
Reporting Levels:	Province, zone

LOCATION OF DEATH 15



Name:	Resident experience with decision-making
Description:	How residents rated their involvement in decisions about their care.
Survey question:	Are you involved in making decisions about your care? (Such as planning your daily activities, choosing medical treatments or medication schedule) Yes, always Yes, sometimes No, hardly ever No, never Don't know Not applicable
Data Source:	2022-23 HQCA Designated Supportive Living Resident Experience Survey
Calculation:	Results are reported as the percentage of all valid responses, for each of the response options, as described above. For example, percentage reporting "yes, always" = \[\left(\frac{\text{Number of respondents stating "yes, always"}}{\text{Total number of valid responses}}\right) \times 100
Assumptions:	Responses from the "don't know" and "not applicable" categories were deemed non-valid responses that may bias the interpretation of information from the other response options and were therefore excluded from analysis.
Exclusions:	Eligible respondents include all residents living in a designative supportive living site. Eligibility to participate in the survey was based on both administrative information and consultation with on-site staff. The following individuals were excluded:
	 Residents living in personal care homes (SL1); group or family care homes or lodges (SL2); special care homes (including mental health support homes and long term care-only sites); SL4-dementia residents.
	Sites in which the majority of residents do not speak English (English was not the first language in the site).
	Residents who were too ill, in hospital, in palliative care, or had a condition that would be a barrier to participation.
	 Residents who lived in the site for less than one month or were a transitional residents.



	 Residents with a cognitive performance score (CPS) of 5 or 6 (severe impairment or very severe impairment).
	Residents who, from the on-site staff's perspective, would not be able to complete a paper survey on their own or with an interviewer for the following reasons:
	Moderate to severe cognitive impairment.
	o Language barrier.
	 Legally blind AND hard of hearing.
	 Resident posed a risk of harm to the interviewer.
	Residents with a missing Facility Identification Number.
Limitations:	Results are generalizable to the type of resident that was eligible to complete the survey. Sampling purposefully excludes residents with moderate to severe cognitive impairment, and thus the data collected does not represent the experiences of these residents.
	Sites differ in many ways, therefore the type of site and the types of services offered at the site should be considered in interpreting the results.



Name:	Resident experience with food
Description:	How residents rated the tastiness of their food.
Survey question:	Is the food here tasty? Yes, always Yes, sometimes No, hardly ever No, never Don't know Not applicable
Data Source:	2022-23 HQCA Designated Supportive Living Resident Experience Survey
Calculation:	Results are reported as the percentage of all valid responses, for each of the response options, as described above. For example, percentage reporting "yes, always" = \[\left(\frac{\text{Number of respondents stating "yes, always"}}{\text{Total number of valid responses}}\right) \times 100
Assumptions:	Responses from the "don't know" and "not applicable" categories were deemed non-valid responses that may bias the interpretation of information from the other response options and were therefore excluded from analysis.
Exclusions:	Eligible respondents include all residents living in a designative supportive living site. Eligibility to participate in the survey was based on both administrative information and consultation with on-site staff. The following individuals were excluded: Residents living in personal care homes (SL1); group or family care homes or lodges (SL2); special care homes (including mental health support homes and long term care-only sites); SL4-dementia residents. Sites in which the majority of residents do not speak English (English was not the first language in the site). Residents who were too ill, in hospital, in palliative care, or had a condition that would be a barrier to participation. Residents who lived in the site for less than one month or were a transitional residents.



	 Residents with a cognitive performance score (CPS) of 5 or 6 (severe impairment or very severe impairment). Residents who, from the on-site staff's perspective, would not be able to complete a paper survey on their own or with an interviewer for the following reasons:
	Moderate to severe cognitive impairment.
	o Language barrier.
	○ Legally blind AND hard of hearing.
	 Resident posed a risk of harm to the interviewer.
	Residents with a missing Facility Identification Number.
Limitations:	Results are generalizable to the type of resident that was eligible to complete the survey. Sampling purposefully excludes residents with moderate to severe cognitive impairment, and thus the data collected does not represent the experiences of these residents.
	Sites differ in many ways, therefore the type of site and the types of services offered at the site should be considered in interpreting the results.



Name:	Resident experience with getting their healthcare needs met
Description:	How residents rated whether their healthcare needs were being met.
Survey question:	Do you get your healthcare needs met? (For example, access to a doctor, physical therapists, occupational therapists, etc.) Yes, always Yes, sometimes No, hardly ever No, never Don't know Not applicable
Data Source:	2022-23 HQCA Designated Supportive Living Resident Experience Survey
Calculation:	Results are reported as the percentage of all valid responses, for each of the response options, as described above. For example, percentage reporting "yes, always" = \[\left(\frac{\text{Number of respondents stating "yes, always"}}{\text{Total number of valid responses}}\right) \times 100
Assumptions:	Responses from the "don't know" and "not applicable" categories were deemed non-valid responses that may bias the interpretation of information from the other response options and were therefore excluded from analysis.
Exclusions:	Eligible respondents include all residents living in a designative supportive living site. Eligibility to participate in the survey was based on both administrative information and consultation with on-site staff. The following individuals were excluded: Residents living in personal care homes (SL1); group or family care homes or lodges (SL2); special care homes (including mental health support homes and long term care-only sites); SL4-dementia residents. Sites in which the majority of residents do not speak English (English was not the first language in the site). Residents who were too ill, in hospital, in palliative care, or had a condition that would be a barrier to participation. Residents who lived in the site for less than one month or were a transitional residents.



	 Residents with a cognitive performance score (CPS) of 5 or 6 (severe impairment or very severe impairment).
	Residents who, from the on-site staff's perspective, would not be able to complete a paper survey on their own or with an interviewer for the following reasons:
	Moderate to severe cognitive impairment.
	o Language barrier.
	 Legally blind AND hard of hearing.
	 Resident posed a risk of harm to the interviewer.
	Residents with a missing Facility Identification Number.
Limitations:	Results are generalizable to the type of resident that was eligible to complete the survey. Sampling purposefully excludes residents with moderate to severe cognitive impairment, and thus the data collected does not represent the experiences of these residents.
	Sites differ in many ways, therefore the type of site and the types of services offered at the site should be considered in interpreting the results.



Name:	Resident experience with sharing concerns
Description:	How residents rated their comfort about speaking to those in charge about a problem.
Survey question:	Would you feel comfortable speaking to the people in charge about a problem? (A problem with the care and services that you receive here) Yes, always Yes, sometimes No, hardly ever Don't know Not applicable
Data Source:	2022-23 HQCA Designated Supportive Living Resident Experience Survey
Calculation:	Results are reported as the percentage of all valid responses, for each of the response options, as described above. For example, percentage reporting "yes, always" = \[\left(\frac{\text{Number of respondents stating "yes, always"}}{\text{Total number of valid responses}}\right) \times 100
Assumptions:	Responses from the "don't know" and "not applicable" categories were deemed non-valid responses that may bias the interpretation of information from the other response options and were therefore excluded from analysis.
Exclusions:	Eligible respondents include all residents living in a designative supportive living site. Eligibility to participate in the survey was based on both administrative information and consultation with on-site staff. The following individuals were excluded: Residents living in personal care homes (SL1); group or family care homes or lodges (SL2); special care homes (including mental health support homes and long term care-only sites); SL4-dementia residents. Sites in which the majority of residents do not speak English (English
	 was not the first language in the site). Residents who were too ill, in hospital, in palliative care, or had a condition that would be a barrier to participation. Residents who lived in the site for less than one month or were a transitional residents.



	 Residents with a cognitive performance score (CPS) of 5 or 6 (severe impairment or very severe impairment).
	Residents who, from the on-site staff's perspective, would not be able to complete a paper survey on their own or with an interviewer for the following reasons:
	 Moderate to severe cognitive impairment.
	○ Language barrier.
	 Legally blind AND hard of hearing.
	 Resident posed a risk of harm to the interviewer.
	 Residents with a missing Facility Identification Number.
Limitations:	Results are generalizable to the type of resident that was eligible to complete the survey. Sampling purposefully excludes residents with moderate to severe cognitive impairment, and thus the data collected does not represent the experiences of these residents.
	Sites differ in many ways, therefore the type of site and the types of services offered at the site should be considered in interpreting the results.



Name:	Resident experience with feeling safe
Description:	How residents rated feeling safe.
Survey question:	Do you feel safe here? Yes, always Yes, sometimes No, hardly ever No, never Don't know Not applicable
Data Source:	2022-23 HQCA Designated Supportive Living Resident Experience Survey
Calculation:	Results are reported as the percentage of all valid responses, for each of the response options, as described above. For example, percentage reporting "yes, always" = \[\left(\frac{\text{Number of respondents stating "yes, always"}}{\text{Total number of valid responses}}\right) \times 100
Assumptions:	Responses from the "don't know" and "not applicable" categories were deemed non-valid responses that may bias the interpretation of information from the other response options and were therefore excluded from analysis.
Exclusions:	Eligible respondents include all residents living in a designative supportive living site. Eligibility to participate in the survey was based on both administrative information and consultation with on-site staff. The following individuals were excluded: Residents living in personal care homes (SL1); group or family care homes or lodges (SL2); special care homes (including mental health support homes and long term care-only sites); SL4-dementia residents. Sites in which the majority of residents do not speak English (English was not the first language in the site).
	 Residents who were too ill, in hospital, in palliative care, or had a condition that would be a barrier to participation. Residents who lived in the site for less than one month or were a
	transitional residents. Residents with a cognitive performance score (CPS) of 5 or 6 (severe impairment or very severe impairment).



	Residents who, from the on-site staff's perspective, would not be able to complete a paper survey on their own or with an interviewer for the following reasons:
	 Moderate to severe cognitive impairment.
	o Language barrier.
	 Legally blind AND hard of hearing.
	 Resident posed a risk of harm to the interviewer.
	 Residents with a missing Facility Identification Number.
Limitations:	Results are generalizable to the type of resident that was eligible to complete the survey. Sampling purposefully excludes residents with moderate to severe cognitive impairment, and thus the data collected does not represent the experiences of these residents.
	Sites differ in many ways, therefore the type of site and the types of services offered at the site should be considered in interpreting the results.



Name:	Resident experience with independence
Description:	How residents rated whether staff encouraged them to do things they can do themselves.
Survey question:	Do the people who work here encourage you to do the things you are able to do yourself? Yes, always Yes, sometimes No, hardly ever Don't know Not applicable
Data Source:	2022-23 HQCA Designated Supportive Living Resident Experience Survey
Calculation:	Results are reported as the percentage of all valid responses, for each of the response options, as described above. For example, percentage reporting "yes, always" = \[\left(\frac{\text{Number of respondents stating "yes, always"}}{\text{Total number of valid responses}}\right) \times 100
Assumptions:	Responses from the "don't know" and "not applicable" categories were deemed non-valid responses that may bias the interpretation of information from the other response options and were therefore excluded from analysis.
Exclusions:	Eligible respondents include all residents living in a designative supportive living site. Eligibility to participate in the survey was based on both administrative information and consultation with on-site staff. The following individuals were excluded: Residents living in personal care homes (SL1); group or family care homes or lodges (SL2); special care homes (including mental health support homes and long term care-only sites); SL4-dementia residents. Sites in which the majority of residents do not speak English (English was not the first language in the site).
	 Residents who were too ill, in hospital, in palliative care, or had a condition that would be a barrier to participation. Residents who lived in the site for less than one month or were a transitional residents.



	 Residents with a cognitive performance score (CPS) of 5 or 6 (severe impairment or very severe impairment).
	Residents who, from the on-site staff's perspective, would not be able to complete a paper survey on their own or with an interviewer for the following reasons:
	Moderate to severe cognitive impairment.
	○ Language barrier.
	 Legally blind AND hard of hearing.
	 Resident posed a risk of harm to the interviewer.
	Residents with a missing Facility Identification Number.
Limitations:	Results are generalizable to the type of resident that was eligible to complete the survey. Sampling purposefully excludes residents with moderate to severe cognitive impairment, and thus the data collected does not represent the experiences of these residents.
	Sites differ in many ways, therefore the type of site and the types of services offered at the site should be considered in interpreting the results.



Name:	Resident experience with rules
Description:	How residents rated the reasonableness of rules.
Survey question:	Are the rules here reasonable? Yes, always Yes, sometimes No, hardly ever No, never Don't know Not applicable
Data Source:	2022-23 HQCA Designated Supportive Living Resident Experience Survey
Calculation:	Results are reported as the percentage of all valid responses, for each of the response options, as described above. For example, percentage reporting "yes, always" = \[\left(\frac{\text{Number of respondents stating "yes, always"}}{\text{Total number of valid responses}}\right) \times 100
Assumptions:	Responses from the "don't know" and "not applicable" categories were deemed non-valid responses that may bias the interpretation of information from the other response options and were therefore excluded from analysis.
Exclusions:	Eligible respondents include all residents living in a designative supportive living site. Eligibility to participate in the survey was based on both administrative information and consultation with on-site staff. The following individuals were excluded: Residents living in personal care homes (SL1); group or family care homes or lodges (SL2); special care homes (including mental health support homes and long term care-only sites); SL4-dementia residents. Sites in which the majority of residents do not speak English (English was not the first language in the site).
	 Residents who were too ill, in hospital, in palliative care, or had a condition that would be a barrier to participation. Residents who lived in the site for less than one month or were a transitional residents.
	 Residents with a cognitive performance score (CPS) of 5 or 6 (severe impairment or very severe impairment).



	Residents who, from the on-site staff's perspective, would not be able to complete a paper survey on their own or with an interviewer for the following reasons:
	Moderate to severe cognitive impairment.
	○ Language barrier.
	 Legally blind AND hard of hearing.
	 Resident posed a risk of harm to the interviewer.
	Residents with a missing Facility Identification Number.
Limitations:	Results are generalizable to the type of resident that was eligible to complete the survey. Sampling purposefully excludes residents with moderate to severe cognitive impairment, and thus the data collected does not represent the experiences of these residents.
	Sites differ in many ways, therefore the type of site and the types of services offered at the site should be considered in interpreting the results.



Name:	Resident experience with activities
Description	How residents rated their satisfaction with the activities offered at their site.
Survey question	Are you satisfied with the activities offered here? Yes, always Yes, sometimes No, hardly ever No, never Don't know Not applicable
Data Source	2022-23 HQCA Designated Supportive Living Resident Experience Survey
Calculation	Results are reported as the percentage of all valid responses, for each of the response options, as described above. For example, percentage reporting "yes, always" = \[\left(\frac{\text{Number of respondents stating "yes, always"}}{\text{Total number of valid responses}}\right) \times 100
Assumptions	Responses from the "don't know" and "not applicable" categories were deemed non-valid responses that may bias the interpretation of information from the other response options and were therefore excluded from analysis.
Exclusions	 Eligible respondents include all residents living in a designative supportive living site. Eligibility to participate in the survey was based on both administrative information and consultation with on-site staff. The following individuals were excluded: Residents living in personal care homes (SL1); group or family care homes or lodges (SL2); special care homes (including mental health support homes and long term care-only sites); SL4-dementia residents. Sites in which the majority of residents do not speak English (English was not the first language in the site). Residents who were too ill, in hospital, in palliative care, or had a condition that would be a barrier to participation.
	 Residents who lived in the site for less than one month or were a transitional residents. Residents with a cognitive performance score (CPS) of 5 or 6 (severe impairment or very severe impairment).



	Residents who, from the on-site staff's perspective, would not be able to complete a paper survey on their own or with an interviewer for the following reasons:
	 Moderate to severe cognitive impairment.
	○ Language barrier.
	○ Legally blind AND hard of hearing.
	 Resident posed a risk of harm to the interviewer.
	Residents with a missing Facility Identification Number.
Limitations	Results are generalizable to the type of resident that was eligible to complete the survey. Sampling purposefully excludes residents with moderate to severe cognitive impairment, and thus the data collected does not represent the experiences of these residents.
	Sites differ in many ways, therefore the type of site and the types of services offered at the site should be considered in interpreting the results.



Name:	Resident overall experience
Description:	How residents rated their overall experience with their home.
Survey question:	Using any number from 0-10, where 0 is the worst and 10 is the best Overall, what number would you use to rate your home?
	■ 0 (worst)
	- 1
	• 2
	• 3
	- 4
	• 5
	- 6
	• 7
	8
	9
	■ 10 (best)
Data Source:	2022-23 HQCA Designated Supportive Living Resident Experience Survey
Calculation:	Results are reported as the percentage of all valid responses, for each of the response options, as described above.
	For example, percentage reporting "10" =
	\left(\frac{\text{Number of respondents stating "10"}}{\text{Total number of valid responses}}\right) \times 100
Assumptions:	Responses from the "don't know" and "not applicable" categories were deemed non-valid responses that may bias the interpretation of information from the other response options and were therefore excluded from analysis.
Exclusions:	Eligible respondents include all residents living in a designative supportive living site. Eligibility to participate in the survey was based on both administrative information and consultation with on-site staff. The following individuals were excluded:
	 Residents living in personal care homes (SL1); group or family care homes or lodges (SL2); special care homes (including mental health support homes and long term care-only sites); SL4-dementia residents.
	 Sites in which the majority of residents do not speak English (English was not the first language in the site).



	Residents who were too ill, in hospital, in palliative care, or had a condition that would be a barrier to participation.
	Residents who lived in the site for less than one month or were a transitional residents.
	 Residents with a cognitive performance score (CPS) of 5 or 6 (severe impairment or very severe impairment).
	Residents who, from the on-site staff's perspective, would not be able to complete a paper survey on their own or with an interviewer for the following reasons:
	Moderate to severe cognitive impairment.
	○ Language barrier.
	○ Legally blind AND hard of hearing.
	 Resident posed a risk of harm to the interviewer.
	Residents with a missing Facility Identification Number.
Limitations:	Results are generalizable to the type of resident that was eligible to complete the survey. Sampling purposefully excludes residents with moderate to severe cognitive impairment, and thus the data collected does not represent the experiences of these residents.
	Sites differ in many ways, therefore the type of site and the types of

services offered at the site should be considered in interpreting the results.



Name:	Family experience with courtesy and respect
Description:	How family members rated how often staff treat their loved one with courtesy and respect.
Survey question:	In the last 3 months, how often did you see the nurses and aides treat your family member with courtesy and respect? Always Usually Sometimes Never
Data Source:	2022-23 HQCA Designated Supportive Living Family Experience Survey
Calculation:	Results are reported as the percentage of all valid responses, for each of the response options, as described above. For example, percentage reporting "always" = \[\left(\frac{\text{Number of respondents stating "always"}}{\text{Total number of valid responses}}\right) \times 100
Assumptions:	None.
Exclusions:	Eligible respondents include all family members that have a family member or friend living in a designated supportive living site, if contact information was available. General exclusion criteria for the HQCA Designated Supportive Living Family Experience Survey include:
	Contacts of new (< 1 month) or transitional residents.
	 Residents who had no contact person (family member), or whose contact person resided outside of Canada.
	Contacts of deceased residents or residents no longer living at the site.
	 Contacts of residents who were listed as a public guardian (i.e., non-family member or friend).
Limitations:	Results are generalizable to the type of respondent eligible to complete the survey, namely family members who have a loved one living in designated supportive living for at least one month.
	Sites differ in many ways, therefore the type of site and the types of services offered at the site should be considered in interpreting the results.



Name:	Family experience with decision-making
Description:	How family members rated their involvement in making decisions about their loved one's care.
Survey question:	In the last 3 months, how often were you involved as much as you wanted to be in the decisions about your family member's care? Always Usually Sometimes Never
Data Source:	2022-23 HQCA Designated Supportive Living Family Experience Survey
Calculation:	Results are reported as the percentage of all valid responses, for each of the response options, as described above. For example, percentage reporting "always" = \[\left(\frac{\text{Number of respondents stating "always"}}{\text{Total number of valid responses}}\right) \times 100
Assumptions:	None.
Exclusions:	Eligible respondents include all family members that have a family member or friend living in a designated supportive living site, if contact information was available. General exclusion criteria for the HQCA Designated Supportive Living Family Experience Survey include: Contacts of new (< 1 month) or transitional residents. Residents who had no contact person (family member), or whose
	contact person resided outside of Canada.
	 Contacts of deceased residents or residents no longer living at the site. Contacts of residents who were listed as a public guardian (i.e., non-family member or friend).
Limitations:	Results are generalizable to the type of respondent eligible to complete the survey, namely family members who have a loved one living in designated supportive living for at least one month. Sites differ in many ways, therefore the type of site and the types of services offered at the site should be considered in interpreting the results.



Name:	Family experience with food
Description:	How family members rated the food at their loved one's site.
Survey question:	Using any number from 0 to 10 where 0 is the worst food possible and 10 is the best food possible, what number would you use to rate the food at at the continuing care home?
	0 (worst food possible)
	- 1
	• 2
	- 3
	- 4
	• 5 • 6
	■ 6 ■ 7
	- <i>/</i> - 8
	9
	■ 10 (best food possible)
Data Source:	2022-23 HQCA Designated Supportive Living Family Experience Survey
Calculation:	Results are reported as the percentage of all valid responses, for each of the response options, as described above.
	For example, percentage reporting "10" =
	\left(\frac{\text{Number of respondents stating "10"}}{\text{Total number of valid responses}}\right) \times 100
Assumptions:	None.
Exclusions:	Eligible respondents include all family members that have a family member or friend living in a designated supportive living site, if contact information was available. General exclusion criteria for the HQCA Designated Supportive Living Family Experience Survey include:
	Contacts of new (< 1 month) or transitional residents.
	 Residents who had no contact person (family member), or whose contact person resided outside of Canada.
	Contacts of deceased residents or residents no longer living at the site.
	 Contacts of residents who were listed as a public guardian (i.e., non-family member or friend).



Limitations:	Results are generalizable to the type of respondent eligible to complete the survey, namely family members who have a loved one living in designated supportive living for at least one month.
	Sites differ in many ways, therefore the type of site and the types of services offered at the site should be considered in interpreting the results.



Name:	Family experience with healthcare services and treatments
Description:	How family members rated how often their loved one received all of the care and services they need.
Survey question:	In the last 3 months, how often did your family member receive all of the healthcare services and treatments they needed? - Always - Usually - Sometimes - Never
Data Source:	2022-23 HQCA Designated Supportive Living Family Experience Survey
Calculation:	Results are reported as the percentage of all valid responses, for each of the response options, as described above. For example, percentage reporting "always" = \[\left(\frac{\text{Number of respondents stating "always"}}{\text{Total number of valid responses}}\right) \times 100
Assumptions:	None.
Exclusions:	 Eligible respondents include all family members that have a family member or friend living in a designated supportive living site, if contact information was available. General exclusion criteria for the HQCA Designated Supportive Living Family Experience Survey include: Contacts of new (< 1 month) or transitional residents. Residents who had no contact person (family member), or whose contact person resided outside of Canada. Contacts of deceased residents or residents no longer living at the site. Contacts of residents who were listed as a public guardian (i.e., non-family member or friend).
Limitations:	Results are generalizable to the type of respondent eligible to complete the survey, namely family members who have a loved one living in designated supportive living for at least one month. Sites differ in many ways, therefore the type of site and the types of services offered at the site should be considered in interpreting the results.



Name:	Family experience with resident cared for by the same staff
Description:	How family members rated how often their loved one was cared for by the same staff.
Survey question:	In the last 3 months, how often was your family member cared for by the same team of staff? Always Usually Sometimes Never
Data Source:	2022-23 HQCA Designated Supportive Living Family Experience Survey
Calculation:	Results are reported as the percentage of all valid responses, for each of the response options, as described above. For example, percentage reporting "always" = \[\left(\frac{\text{Number of respondents stating "always"}}{\text{Total number of valid responses}}\right) \times 100
Assumptions:	None.
Exclusions:	Eligible respondents include all family members that have a family member or friend living in a designated supportive living site, if contact information was available. General exclusion criteria for the HQCA Designated Supportive Living Family Experience Survey include: Contacts of new (< 1 month) or transitional residents. Residents who had no contact person (family member), or whose contact person resided outside of Canada. Contacts of deceased residents or residents no longer living at the site. Contacts of residents who were listed as a public guardian (i.e., non-family member or friend).
Limitations:	Results are generalizable to the type of respondent eligible to complete the survey, namely family members who have a loved one living in designated supportive living for at least one month. Sites differ in many ways, therefore the type of site and the types of services offered at the site should be considered in interpreting the results.



Name:	Family experience of resident and family councils
Description:	Family members' experience with being heard by the resident and family council at their loved one's site.
Survey question:	Do you feel that participating in the Resident and Family Council helped you feel heard about the things that matter to you? No, never No, hardly ever Yes, sometimes Yes, always I don't know I did not participate No Resident and Family Council
Data Source:	2022-23 HQCA Designated Supportive Living Family Experience Survey
Calculation:	Results are reported as the percentage of all valid responses, for each of the response options, as described above. For example, percentage reporting "yes" = \[\left(\frac{\text{Number of respondents stating "yes"}}{\text{Total number of valid responses}}\right) \times 100
Assumptions:	Responses from the "don't know" category were treated as valid and were included in the calculation.
Exclusions:	Eligible respondents include all family members that have a family member or friend living in a designated supportive living site, if contact information was available. General exclusion criteria for the HQCA Designated Supportive Living Family Experience Survey include: Contacts of new (< 1 month) or transitional residents. Residents who had no contact person (family member), or whose contact person resided outside of Canada. Contacts of deceased residents or residents no longer living at the site. Contacts of residents who were listed as a public guardian (i.e., non-family member or friend).
Limitations:	Results are generalizable to the type of respondent eligible to complete the survey, namely family members who have a loved one living in designated supportive living for at least one month. Sites differ in many ways, therefore the type of site and the types of services offered at the site should be considered in interpreting the results.



Name:	Family experience with sharing concerns
Description:	How family members rated their comfort with sharing concerns with staff.
Survey question:	In the last 3 months, did you ever stop yourself from talking to any continuing care home's staff about your concerns because you thought they would take it out on your family member? No Yes
Data Source:	2022-23 HQCA Designated Supportive Living Family Experience Survey
Calculation:	Results are reported as the percentage of all valid responses, for each of the response options, as described above. For example, percentage reporting "no" =
	\(\left(\frac{\text{Number of respondents stating "no"}}{\text{Total number of valid responses}}\right) \times 100
Assumptions:	None.
Exclusions:	Eligible respondents include all family members that have a family member or friend living in a designated supportive living site, if contact information was available. General exclusion criteria for the HQCA Designated Supportive Living Family Experience Survey include:
	■ Contacts of new (< 1 month) or transitional residents.
	 Residents who had no contact person (family member), or whose contact person resided outside of Canada.
	Contacts of deceased residents or residents no longer living at the site.
	 Contacts of residents who were listed as a public guardian (i.e., non-family member or friend).
Limitations:	Results are generalizable to the type of respondent eligible to complete the survey, namely family members who have a loved one living in designated supportive living for at least one month.
	Sites differ in many ways, therefore the type of site and the types of services offered at the site should be considered in interpreting the results.



Name:	Family experience with staffing
Description:	How family members rated their experience with the number of staff available to support their loved one.
Survey question:	In the last 3 months, how often did you feel that there were enough nurses and aides in the continuing care home? Always Usually Sometimes Never
Data Source:	2022-23 HQCA Designated Supportive Living Family Experience Survey
Calculation:	Results are reported as the percentage of all valid responses, for each of the response options, as described above. For example, percentage reporting "always" = \[\left(\frac{\text{Number of respondents stating "always"}}{\text{Total number of valid responses}}\right) \times 100
Assumptions:	None.
Exclusions:	Eligible respondents include all family members that have a family member or friend living in a designated supportive living site, if contact information was available. General exclusion criteria for the HQCA Designated Supportive Living Family Experience Survey include: Contacts of new (< 1 month) or transitional residents.
	Residents who had no contact person (family member), or whose contact person resided outside of Canada.
	Contacts of deceased residents or residents no longer living at the site.
	 Contacts of residents who were listed as a public guardian (i.e., non-family member or friend).
Limitations:	Results are generalizable to the type of respondent eligible to complete the survey, namely family members who have a loved one living in designated supportive living for at least one month. Sites differ in many ways, therefore the type of site and the types of services offered at the site should be considered in interpreting the results.



Name:	Family experience with overall rating of care
Description:	How family members rated the overall care at the site.
Survey question:	Using any number from 0 to 10, where 0 is the worst care possible and 10 is the best care possible, what number would you use to rate the care at the continuing care home?
	0 (worst care possible)
	• 1 • 2
	3
	- 4
	■ 5
	- 6
	- 7 - 0
	■ 8 ■ 9
	■ 10 (best care possible)
Data Source:	2022-23 HQCA Designated Supportive Living Family Experience Survey
Calculation:	Results are reported as the percentage of all valid responses, for each of the response options, as described above.
	For example, percentage reporting "10" =
	\left(\frac{\text{Number of respondents stating "10"}}{\text{Total number of valid responses}}\right) \times 100
Assumptions:	None.
Exclusions:	Eligible respondents include all family members that have a family member or friend living in a designated supportive living site, if contact information was available. General exclusion criteria for the HQCA Designated Supportive Living Family Experience Survey include:
	■ Contacts of new (< 1 month) or transitional residents.
	 Residents who had no contact person (family member), or whose contact person resided outside of Canada.
	Contacts of deceased residents or residents no longer living at the site.
	 Contacts of residents who were listed as a public guardian (i.e., non-family member or friend).



Limitations: Results are generalizable to the type of respondent eligible to complete the survey, namely family members who have a loved one living in designated supportive living for at least one month. Sites differ in many ways, therefore the type of site and the types of services offered at the site should be considered in interpreting the results.



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