

Q2 Corporate Scorecard FY15/16



PATIENT SAFETY						
Indicator	Target	Q1	Q2	Q3	Q4	YTD
C. difficile per 1000 patient days*	0.40	0.57	0.44			0.50
Medication Reconciliation upon Admission*	55.0%	32.1%	51.5%			43.4%
Readmission Rate within 30 days (select CMGs)*	16.7%	19.4%	22.2%			20.5%
Hand Hygiene Compliance	75.0%	58.7%	68.8%			65.0%
Central Line BSI Rate per 1000 device days	0.0	0	0			0
MRSA Bacteremia Rate per 1000 patient days	0.0	0.03	0.00			0.01
VRE Bacteremia Rate per 1000 patient days	0.0	0	0			0
VAP per 1000 device days	0.0	0	1.8			0.83
Hospital Standardized Mortality Ratio	100	94	95			94
30-Day In-Hospital Mortality Following Major Surgery	1.4	1.1	0.7			1.0
Low-Risk Caesarean Section Rate	14.0%	14.8%	16.2%			15.5%
QBP - Cataracts - Unilateral Procedures*	1,751	558	504			1062 F1
QBP - Chronic Obstructive Pulmonary Disease*	293	84	71			155 F1
QBP - Congestive Heart Failure*	465	143	124			267 F1
QBP - Hip Fracture*	197	40	50			90 F1
QBP - Hip Replacement - Unilateral Primary*	155	34	32			66 F1
QBP - Knee Replacement - Unilateral Primary*	308	92	71			163 F1
QBP - Paediatric - Neonatal Jaundice*	154	62	56			118 F1
QBP - Paediatric - Tonsillectomy*	150	24	34			58 F1
QBP - Pneumonia*	290	99	59			158 F1
QBP - Stroke - Hemorrhage*	14	8	7			15 F1
QBP - Stroke - Ischemic or Unspecified*	159	32	44			76 F1
QBP - Stroke - Transient Ischemic Attack*	24	4	6			10 F1

Legend:
Bold denotes Quality Improvement Plan (QIP) indicators
 * denotes Hospital Service Accountability Agreement (HSAA) indicators
 F1 denotes estimates based on: July actuals & August/September estimates
 F2 denotes the most current data as reported from NRCC

ACCESS						
Indicator	Target	Q1	Q2	Q3	Q4	YTD
90th Percentile ED LOS Admitted Patients*	30.0	44.9	36.1			40.8
% Alternate Level of Care Days*	16.0%	17.7%	14.3%			15.9%
90th Percentile Time to Inpatient Bed	20.0	36.3	26.4			30.7
90th Percentile ED LOS Non-Admit High Acuity*	6.2	7.1	7.2			7.1
90th Percentile ED LOS Non-Admit Low Acuity*	3.9	4.4	4.3			4.4
ED Volumes	100,000	24,802	25,358			50,160
Occupancy Rate	93%	96%	95%			96%
Cancer - % Priority 4 Cases Completed w/in Target*	95%	100%	99%			99%
Cataract - % Priority 4 Cases Completed w/in Target*	95%	94%	84%			90%
Hip - % Priority 4 Cases Completed w/in Target*	90%	0%	100%			100%
Knee - % Priority 4 Cases Completed w/in Target*	90%	100%	50%			80%
MRI - % Priority 2-4 Cases Completed w/in Target*	90%	25%	24%			24%
CT - % Priority 2-4 Cases Completed w/in Target*	90%	84%	85%			85%
Wait Time Volumes - MRI Hours (Hours)*	7,944	2,074	2,202			4,276
Wait Time Volumes - CT Hours (Hours)*	3,896	1,491	1,785			3,276
Wait Time Volumes - General Surgery (Cases)*	926	220	188			408
Wait Time Volumes - H & K Repl. Revisions (Cases)*	19	4	3			7
Prov. Programs Volume - Permanent Pacemakers*	121	33	30			63
Prov. Programs Volume - Bariatric Surgery*	200	53	33			86

VALUE						
Indicator	Target	Q1	Q2	Q3	Q4	YTD
ED Patient Satisfaction (Overall quality of ED care)*	87.3%	86.4%	87.9%			87.0% F2
Total Margin*	1.3%	2.3%	1.8%			1.8%
Current Ratio*	1.20	1.4	1.4			1.4
Acute Inpatient Weighted Cases*	24,576	6,181	5,927			12,108
Ambulatory Care Visits*	244,616	63,731	60,513			124,244
Day Surgery Weighted Visits*	3,360	856	709			1,565
ED Weighted Cases*	5,186	1,388	1,353			2,741
Inpatient Mental Health Weighted Patient Days*	17,220	4,696	4,560			9,256
Full Time RN's	71%	79%	78%			78%
Nursing Agency Hours	2.0%	1.4%	2.1%			2.1%
Overtime	TBD	1.2%	1.2%			1.2%
Sick Time (Days)	9.84	10.0	9.6			9.6
WSIB Lost Time Incidents	1.3%	0.00%	0.08%			0.08%

Results:
 Indicator underperforming target R
 Indicator within 10% of target Y
 Indicator equal or outperforming target G