

# Q1 Corporate Scorecard FY16/17



Quality						
Indicator	Target	Q1	Q2	Q3	Q4	YTD
<b>C. difficile per 1000 patient days*</b>	0.35	0.44				0.44
<b>Medication Reconciliation upon Admission*</b>	85.0%	60.1%				0.0%
<b>Readmission Rate within 30 days (select CMGs)*</b>	18.7%	22.2%				0.0%
Hand Hygiene Compliance	70.0%	68.4%				68.4%
Central Line BSI Rate per 1000 device days	0.0	0				0
MRSA Bacteremia Rate per 1000 patient days	0.0	0.00				0.00
VRE Bacteremia Rate per 1000 patient days	0.0	0.24				0.24
VAP per 1000 device days	0.0	0				0
Hospital Standardized Mortality Ratio	100	117				0
30-Day In-Hospital Mortality Following Major Surgery	1.4	1.4				0.0
Low-Risk Caesarean Section Rate	14.0%	22.2%				0.0%
QBP - Cataracts - Unilateral Procedures*	1,752	574				574
QBP - Chronic Obstructive Pulmonary Disease*	294	71				71
QBP - Congestive Heart Failure*	465	134				134
QBP - Hip Fracture*	197	46				46
QBP - Hip Replacement - Unilateral Primary*	167	33				33
QBP - Knee Replacement - Unilateral Primary*	308	95				95
QBP - Paediatric - Neonatal Jaundice*	155	50				50
QBP - Paediatric - Tonsillectomy*	150	66				66
QBP - Pneumonia*	290	96				96
QBP - Stroke - Hemorrhage*	14	7				7
QBP - Stroke - Ischemic or Unspecified*	159	38				38
QBP - Stroke - Transient Ischemic Attack*	24	6				6

ACCESS						
Indicator	Target	Q1	Q2	Q3	Q4	YTD
<b>90th Percentile ED LOS Admitted Patients*</b>	30.0	43.2				43.2
<b>ALC Rate*</b>	24.7%	21.0%				21.0%
90th Percentile Time to Inpatient Bed	20.0	33.2				33.2
90th Percentile ED LOS Non-Admit High Acuity*	6.2	7.3				7.3
90th Percentile ED LOS Non-Admit Low Acuity*	3.9	4.2				4.2
ED Volumes	100,000	25,947				25,947
Occupancy Rate	93%	92%				92%
Cancer - % Priority 4 Cases Completed w/in Target*	95%	98%				98%
Cataract - % Priority 4 Cases Completed w/in Target*	95%	61%				61%
Hip - % Priority 4 Cases Completed w/in Target*	90%	83%				83%
Knee - % Priority 4 Cases Completed w/in Target*	90%	89%				89%
MRI - % Priority 2-4 Cases Completed w/in Target*	90%	25%				25%
CT - % Priority 2-4 Cases Completed w/in Target*	90%	81%				81%
Wait Time Volumes - MRI Hours (Hours)*	7,096	2,116				2,116
Wait Time Volumes - CT Hours (Hours)*	3,922	1,638				1,638
Wait Time Volumes - General Surgery (Cases)*	956	254				254
Wait Time Volumes - H & K Repl. Revisions (Cases)*	29	5				5
Prov. Programs Volume - Permanent Pacemakers*	131	24				24
Prov. Programs Volume - Bariatric Surgery*	245	47				47

VALUE						
Indicator	Target	Q1	Q2	Q3	Q4	YTD
<b>ED Patient Satisfaction (Overall quality of ED care)*</b>	91.0%	90.9%				86.5%
<b>Total Margin*</b>	1.3%	-1.6%				-1.6%
Current Ratio*	1.20	1.1				1.1
Acute Inpatient Weighted Cases* (HIG)	24,863	6,498				6,498
Day Surgery Weighted Visits* (HIG)	3,073	767				767
Ambulatory Care Visits*	244,616	68,091				68,091
ED Weighted Cases*	5,186	1,222				1,222
Inpatient Mental Health Weighted Patient Days*	17,220	4,541				4,541
Full Time RN's	71%	75%				75%
RN Nursing Agency Hours	2.0%	4.7%				4.7%
Overtime	1.1%	1.0%				1.0%
Sick Time (Days)	10.17	8.7				8.7
WSIB Lost Time Incidents	1.3%	0.09%				0.09%

**Legend:**

**Bold denotes Quality Improvement Plan (QIP) indicators**

\* denotes Hospital Service Accountability Agreement (HSAA) indicators

F1 denotes estimates based on: April actuals with May and June estimates

F2 denotes the most current data as reported from NRCC

F3 Q4 actual risk adjusted rate (YTD = 98) - as reported by CIHI no data available for Q1 at present

**Results:**

Indicator underperforming target

Indicator within 10% of target

Indicator equal or outperforming target

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Y
G