

Q4 Corporate Scorecard FY16/17



Quality						
Indicator	Target	Q1	Q2	Q3	Q4	YTD
C. difficile per 1000 patient days*	0.35	0.44	0.27	0.32	0.41	0.36
Medication Reconciliation upon Admission*	85.0%	60.2%	59.3%	63.3%	68.4%	58.6%
Readmission Rate within 30 days (select CMGs)*	18.7%	22.2%	16.7%	20.2%	17.6%	18.7%
Hand Hygiene Compliance	75.0%	68.4%	72.4%	66.8%	62.5%	68.1%
Central Line BSI Rate per 1000 device days	0.0	0	0	0	0	0
MRSA Bacteremia Rate per 1000 patient days	0.0	0.00	0.00	0.03	0.00	0.01
VRE Bacteremia Rate per 1000 patient days	0.0	0.03	0	0.03	0	0.01
VAP per 1000 device days	0.0	0	0	0	0	0
Hospital Standardized Mortality Ratio	100	100	102	100	112	103
30-Day In-Hospital Mortality Following Major Surgery^	1.4	2.3	1.4	1.5	n/a	1.8
Low-Risk Caesarean Section Rate	14.0%	17.1%	18.2%	12.7%	13.4%	15.5%
QBP - Chronic Obstructive Pulmonary Disease*	293	73	59	91	109	332
QBP - Congestive Heart Failure*	465	120	91	123	116	450
QBP - Pneumonia*	290	84	68	93	108	353
QBP - Stroke - Hemorrhage*	14	7	7	9	7	30
QBP - Stroke - Ischemic or Unspecified*	159	41	37	44	33	155
QBP - Stroke - Transient Ischemic Attack*	24	10	5	8	9	32
QBP - Paediatric - Neonatal Jaundice*	154	57	72	50	44	223
QBP - Paediatric - Tonsillectomy*	150	25	30	23	27	105
QBP - Cataracts - Unilateral Procedures*	1,847	573	527	566	486	2152
QBP - Hip Fracture*	197	61	44	39	51	195
QBP - Hip Replacement - Unilateral Primary*	159	29	31	47	51	158
QBP - Knee Replacement - Unilateral Primary*	316	91	72	89	68	320
QBP - Knee Arthroscopy*	309	88	65	89	72	314

Legend:

Bold denotes Quality Improvement Plan (QIP) indicators

* denotes Hospital Service Accountability Agreement (HSAA) indicators

F1 30-Day In-hospital mortality following major surgery results reflect data submitted to CIHI for all discharges to end of December. Q4 result not reported because complete data for the quarter are not yet submitted.

F2 New methodology related to patient experience introduced by NRCC this fiscal year Q1 data revised.

No historical data or target available

F3 HSMR results reflect data submitted to CIHI for all discharges to end of December. Q4 result not reported because data for

ACCESS						
Indicator	Target	Q1	Q2	Q3	Q4	YTD
90th Percentile ED LOS Admitted Patients* (hours)	38.7	43.2	37.7	39.5	40	40.6
ALC Rate*	16.4%	21.0%	20.7%	20.0%	21%	21.0%
90th Percentile Time to Inpatient Bed	20.0	33.2	28	29.6	30.3	30
90th Percentile ED LOS Non-Admit High Acuity*	6.2	7.3	7.1	6.9	7	7.1
90th Percentile ED LOS Non-Admit Low Acuity*	3.9	4.2	4.3	4.3	4.8	4.4
ED Volumes	100,000	25,947	25,636	25,235	24,531	101,059
Occupancy Rate	93%	92%	93%	91%	91%	91%
Cancer - % Priority 2-4 Cases Completed w/in Target*	95%	90%	83%	75%	81%	86%
Cataract - % Priority 2-4 Cases Completed w/in Target*	95%	61%	53%	53%	64%	56%
Hip - % Priority 2-4 Cases Completed w/in Target*	90%	86%	71%	85%	89%	84%
Knee - % Priority 2-4 Cases Completed w/in Target*	90%	82%	81%	80%	92%	84%
MRI - % Priority 2-4 Cases Completed w/in Target*	90%	25%	24%	23%	28%	25%
CT - % Priority 2-4 Cases Completed w/in Target*	90%	81%	81%	85%	80%	82%
Wait Time Volumes - MRI Hours (Hours)*	7,096	2,116	2,168	2,041	2,095	8,420
Wait Time Volumes - CT Hours (Hours)*	3,922	1,638	2,100	1,258	2,478	7,474
Wait Time Volumes - General Surgery (Cases)*	956	240	122	205	191	758
Wait Time Volumes - H & K Repl. Revisions (Cases)*	29	3	7	2	3	15
Prov. Programs Volume - Permanent Pacemakers*	131	40	30	41	37	148
Prov. Programs Volume - Bariatric Surgery*	245	47	72	67	68	254

VALUE						
Indicator	Target	Q1	Q2	Q3	Q4	YTD
ED Patient Satisfaction (Overall quality of ED care)	TBD	37.3%	39.4%	71.8%	68.3%	66.5%
Total Margin*	1.3%	-1.6%	-0.5%	-0.6%	0.9%	0.9%
Current Ratio*	1.2	1.1	1.0	0.8	0.7	0.7
Acute Inpatient Weighted Cases* (HIG)	25,000	6969	6500	7158	7282	27,909
Day Surgery Weighted Visits* (HIG)	3,360	763	613	690	678	2,744
Ambulatory Care Visits*	249,663	66,764	60,984	64,390	63,969	256,107
ED Weighted Cases*	5,186	1,192	1,183	1,181	1,183	4,739
Inpatient Mental Health Weighted Patient Days*	17,663	3,881	3,837	3,970	3,867	15,555
Full Time RN's	71%	75%	74%	74%	75%	75%
RN Nursing Agency Hours	2.0%	4.7%	4.8%	4.2%	3.7%	3.7%
Overtime	1.1%	1.0%	1.2%	1.1%	1.1%	1.1%
Sick Time (Days)	10.2	8.7	9.2	9.5	9.3	9.3
WSIB Lost Time Incidents	1.3%	0.05%	0.14%	0.05%	0.18%	0.10%

Results:

Number of Indicators underperforming target

22

R

Number of Indicator within 10% of target

6

Y

Number of Indicator equal or outperforming target

26

G