

CORPORATE SCORECARD 2022/2023



Vision: Exceptional Care. Always.

Mission: Our Team collaborates to provide exceptional patient-centered care

Values: ICARE Integrity - Compassion - Accountability - Respect - Engagement

Instructions: Clicking on the indicator takes the user to additional supporting details.

| RECOVERY | | | | | | | |
|---|-----------------|----|----|----|----|--|--|
| Indicator | Reference | Q1 | Q2 | Q3 | Q4 | | |
| Clostridium Difficile (C.Diff) Incidence | HSAA/MoHLTC | G | G | | | | |
| Current Ratio | HSAA | G | G | | | | |
| Elective Repeat Low Risk C-Section (>37weeks) Rate | HSAA/Board | G | G | | | | |
| Emergency Visits - Wait Time for Inpatient Bed (TIB) | QIP/OPT | R | R | | | | |
| Emergency Visits - Wait Time for Non-Admitted High Acuity | HSAA/OPT | Υ | R | | | | |
| Emergency Visits - Wait Time for Non-Admitted Low Acuity | HSAA/OPT | R | R | | | | |
| Falls per 1,000 Patient Days | Senior Friendly | G | G | | | | |
| Indication of Induction Post-Dates (<41 Weeks) Rate | HSAA | G | G | | | | |
| Inpatients Receiving Care in Unconventional Spaces/Day | QIP | G | G | | | | |
| Readmissions within 30-Days for Select HIG Conditions | HSAA | G | G | | | | |
| Repatriate Patients within 48-Hours Rate | HSAA | R | R | | | | |
| Repeat ED Mental Health Visits | QIP/HSAA/MSAA | G | G | | | | |
| Repeat ED Substance Abuse Visits | HSAA/MSAA | G | G | | | | |
| Typical Average Length of Stay (ALOS) for Hospitalists | Board/OPT | R | Υ | | | | |
| Total Margin | HSAA | R | Υ | | | | |
| Wait Time - CT Scans (Priority 2, 3, 4) | HSAA | R | R | | | | |
| **Wait Time - CT Scans (Priority 2, 3) | Board | G | G | | | | |
| Wait Time - Hip Replacement | HSAA | R | R | | | | |
| Wait Time - Knee Replacement | HSAA | R | R | | | | |
| Wait Time - MRI Scans (Priority 2, 3, 4) | HSAA | R | G | | | | |
| **Wait Time - MRI Scans (Priority 2, 3) | Board | G | G | | | | |

| INTEGRATION | | | | | | |
|--|-------------------|----|----|----|----|--|
| Indicator | Reference | Q1 | Q2 | Q3 | Q4 | |
| ALC Rate | HSAA | R | R | | | |
| Discharge Summary Sent to Primary Care Within 48 Hours | QIP | Υ | G | | | |
| Incomplete Charts | Board | Υ | R | | | |
| Medication Reconciliation on Discharge Rate (ROP) | QIP/Accreditation | G | G | | | |
| Same Day Discharge to Home Care Rate | HSAA | G | G | | | |

| PEOPLE | | | | | | |
|---|-----------|-----|-----|----|----|--|
| Indicator | Reference | Q1 | Q2 | Q3 | Q4 | |
| Complaints Acknowledged | Board | G | G | | | |
| Indigenous Cultural Awareness | HSAA | G | G | | | |
| Overtime Rate | HSAA | R | R | | | |
| Patient Experience Survey: Information | QIP | N/A | N/A | | | |
| Smoking Cessation Rate | HSAA | G | G | | | |
| Workplace Violence Prevention - Incidents | QIP | G | R | | | |

Results:

Metric underperforming target

Metric within 10% of target

Metric equal to or outperforming target

Data not available



Overall Indicator Performance:

% Indicators equal to or outperforming targets: % Indicators within 10% of targets:

| % Indicators underperforming target | | | | |
|-------------------------------------|-----|------|------------|---|
| | ets | s II | Indicators | % |

| Q1 | Q2 | Q3 | Q4 |
|-----|-----|----|----|
| 55% | 58% | | |
| 10% | 6% | | |
| 35% | 35% | | |
| | | | |

Reference Definitions:

Accreditation - Accreditation Canada

Board - Board Directed

HSAA - Hospital Services Accountability Agreement

MoHLTC - Public Reporting Requirement; Ministry directive

MSAA - Multi-Sector Service Accountability Agreement

OPT - (Annual) Operating Plan Target

Senior Friendly - Senior Friendly Initiative (HSAA)

QIP - Quality Improvement Plan