



## CORPORATE SCORECARD 2023/2024

**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	
<a href="#">Clostridium Difficile (C.Diff) Incidence</a>	HSAA/MoHLTC	N/A	N/A			
<a href="#">Current Ratio</a>	HSAA	N/A	N/A			
<a href="#">Emergency Visits - Wait Time for Inpatient Bed (TIB)</a>	QIP/OPT	G	G			
<a href="#">Emergency Visits - Wait Time for Non-Admitted High Acuity</a>	HSAA/OPT	Y	R			
<a href="#">Emergency Visits - Wait Time for Non-Admitted Low Acuity</a>	HSAA/OPT	Y	R			
<a href="#">Falls per 1,000 Patient Days</a>	Senior Friendly	G	G			
<a href="#">Readmissions within 30-Days for Select HIG Conditions</a>	HSAA	G	G			
<a href="#">Repeat ED Mental Health Visits</a>	QIP/HSAA/MSAA	G	G			
<a href="#">Typical Average Length of Stay (ALOS) for Hospitalists</a>	Board/OPT	G	G			
<a href="#">Total Margin</a>	HSAA	N/A	N/A			
<a href="#">Wait Time - CT Scans (Priority 2, 3, 4)</a>	HSAA	R	Y			
<a href="#">**Wait Time - CT Scans (Priority 2, 3)</a>	Board	Y	G			
<a href="#">Wait Time - Long Waiters for All Surgical Procedures</a>	HSAA	G	G			
<a href="#">Wait Time - MRI Scans (Priority 2, 3, 4)</a>	HSAA	R	R			
<a href="#">**Wait Time - MRI Scans (Priority 2, 3)</a>	Board	R	G			

**Results:**

Metric underperforming target  
Metric within 10% of target  
Metric equal to or outperforming target  
Data not available

R
Y
G
N/A

**Overall Indicator Performance:**

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

	Q1	Q2	Q3	Q4
% Indicators equal to or outperforming targets:	45%	65%		
% Indicators within 10% of targets:	30%	10%		
% Indicators underperforming targets:	25%	25%		

**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

INTEGRATION						
Indicator	Reference	Q1	Q2	Q3	Q4	
<a href="#">ALC Throughput</a>	HSAA	G	Y			
<a href="#">Discharge Summary Sent to Primary Care Within 48 Hours</a>	QIP	Y	G			
<a href="#">Incomplete Charts</a>	Board	R	R			
<a href="#">Medication Scanning Compliance</a>	QIP	R	R			
<a href="#">Medication Reconciliation on Discharge Rate (ROP)</a>	QIP/Accreditation	Y	G			

PEOPLE						
Indicator	Reference	Q1	Q2	Q3	Q4	
<a href="#">Complaints Acknowledged</a>	Board	G	G			
<a href="#">Indigenous Cultural Awareness</a>	HSAA	G	G			
<a href="#">Workplace Violence Prevention - Incidents</a>	QIP	Y	G			