Cornwall Community Hospital Hôpital communautaire de Cornwall

## **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

RECOVERY					1	
Indicator	Reference	Q1	Q2	Q3	Q4	
Clostridium Difficile (C.Diff) Incidence	HSAA/MoHLTC	G	G	G	N/A	
Current Ratio	HSAA	G	G	Y	N/A	
Elective Repeat Low Risk C-Section (>37weeks) Rate	HSAA/Board	G	G	G	G	ľ
Emergency Visits - Wait Time for Inpatient Bed (TIB)	QIP/OPT	R	R	R	Y	ľ
Emergency Visits - Wait Time for Non-Admitted High Acuity	HSAA/OPT	Y	R	R	R	Ν
Emergency Visits - Wait Time for Non-Admitted Low Acuity	HSAA/OPT	R	R	R	R	[
Falls per 1,000 Patient Days	Senior Friendly	G	G	Y	G	
Indication of Induction Post-Dates (<41 Weeks) Rate	HSAA	G	G	G	G	
Inpatients Receiving Care in Unconventional Spaces/Day	QIP	G	G	G	G	(
Readmissions within 30-Days for Select HIG Conditions	HSAA	G	G	G	N/A	9
Repatriate Patients within 48-Hours Rate	HSAA	R	R	R	N/A	9
Repeat ED Mental Health Visits	QIP/HSAA/MSAA	G	G	Y	N/A	9
Repeat ED Substance Abuse Visits	HSAA/MSAA	G	G	G	N/A	
Typical Average Length of Stay (ALOS) for Hospitalists	Board/OPT	R	Y	Y	N/A	
Total Margin	HSAA	R	Y	G	N/A	F
Wait Time - CT Scans (Priority 2, 3, 4)	HSAA	R	R	R	R	A
**Wait Time - CT Scans (Priority 2, 3)	Board	G	G	G	G	E
Wait Time - Hip Replacement	HSAA	R	R	R	R	ŀ
Wait Time - Knee Replacement	HSAA	R	R	R	R	n
Wait Time - MRI Scans (Priority 2, 3, 4)	HSAA	R	G	G	R	ľ
**Wait Time - MRI Scans (Priority 2, 3)	Board	G	G	G	G	(

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

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

## Results:

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



Q1

54% 58% 52% 6% 13% 10%

15%

Q2 Q3 Q4

#### **Overall Indicator Performance:**

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

#### **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

