



## CORPORATE SCORECARD 2017/2018

**Vision:** Exceptional Care. Always.

**Mission:** Our health care 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.

PATIENT INSPIRED CARE					
Indicator	Reference	Q1	Q2	Q3	Q4
<a href="#">CAM Administration</a>	OPT	G	G	G	G
<a href="#">Falls per 1,000 Patient Days</a>	OPT	G	G	Y	G
<a href="#">Patient Experience Survey: Overall Rating</a>	QIP/SIA	Y	Y	G	N/A
<a href="#">Patient Experience Survey: Information</a>	QIP/SIA	Y	Y	G	N/A
<a href="#">Readmission Rate for (QBP) COPD</a>	QIP/SIA	R	G	R	G
<a href="#">Repeat ED Mental Health Visits</a>	MSAA/HSAA	G	G	G	G
<a href="#">Repeat ED Substance Abuse Visits</a>	MSAA/HSAA	R	R	G	G

**Results:**

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

R
Y
G
N/A

PARTNERING FOR PATIENT SAFETY AND QUALITY OUTCOMES					
Indicator	Reference	Q1	Q2	Q3	Q4
<a href="#">Actual LOS to HIG Expected LOS Rate</a>	Board	R	R	R	R
<a href="#">Breastfeeding Initiation Rate</a>	OPT	Y	Y	Y	Y
<a href="#">Elective Repeat C-Section Rate</a>	HSAA/Board	G	G	G	G
<a href="#">Emergency Visits - Left Without Being Seen (LWBS)</a>	MoHLTC	R	R	R	R
<a href="#">Emergency Visits - Length of Stay for Admitted Patients</a>	HSAA	R	R	R	R
<a href="#">Emergency Visits - Physician Initial Assessment Times</a>	MoHLTC	R	R	Y	R
<a href="#">Incomplete Charts</a>	Board	R	R	R	R
<a href="#">ROP - Medication Reconciliation on Admission Rate</a>	QIP/SIA/Accreditation	R	R	R	R
<a href="#">ROP - Medication Reconciliation on Discharge Rate</a>	QIP/SIA/Accreditation	G	G	G	G
<a href="#">ROP - Venous Thromboembolism Prophylaxis Rate</a>	Accreditation	R	R	Y	G
<a href="#">Smoking Cessation Rate</a>	HSAA	G	G	G	G
<a href="#">Surgical Safety Checklist Rate</a>	Board/Accreditation	G	G	G	G
<a href="#">Wait Time - CT Scans</a>	HSAA	G	G	G	G
<a href="#">Wait Time - Hip Replacement</a>	HSAA	R	R	R	R
<a href="#">Wait Time - Knee Replacement</a>	HSAA	R	R	R	R
<a href="#">Wait Time - MRI Scans</a>	HSAA	R	R	R	R
<a href="#">Clostridium Difficile Incidence</a>	MoHLTC/HSAA	G	Y	R	R
<a href="#">MRSA Bacteremia Incidence</a>	MoHLTC/HSAA	G	Y	G	G

**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:	36%	32%	39%	54%
% Indicators within 10% of targets:	11%	21%	14%	4%
% Indicators underperforming targets:	54%	46%	46%	42%

**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  
QIP - Quality Improvement Plan  
SIA - Strategy in Action

OPERATIONAL EXCELLENCE THROUGH INNOVATION					
Indicator	Reference	Q1	Q2	Q3	Q4
<a href="#">Current Ratio</a>	HSAA	R	R	R	G
<a href="#">Total Margin</a>	HSAA	R	Y	R	G

OUR TEAM OUR STRENGTH					
Indicator	Reference	Q1	Q2	Q3	Q4
<a href="#">Absenteeism</a>	Board	R	R	R	R