

**Geraldton District Hospital
Board of Directors
Monthly Indicator Score Card
2010/11**

Indicator	Target	Range	A	M	J	J	A	S	O	N	D	J	F	M	Final
Board															
Attendance	>70%		75%	83%	100%	-	-	67%	92%	83%	92%	58%	92%	75%	
Meeting Evaluation	>7.5/10		-	-	8.6	-	-	-	8.3	-	8.5	-	8.2		
Annual Performance	>8.5/10			8.84	-	-	-	-	-	-	-	-	-	-	8.84
Education Events Attended	>16/year		8	6	-	-	-	4	-	5	-	2	-		
Financial Health															
*Current Ratio	>2.0		6.3	6.5	6.0	6.0	6.0	4.6	5.8	5.8	5.1				
*Total Margin	>0.0		8.8	8.0	5.7	5.0	5.5	6.1	6.3	6.3	6.6				
Patient Access															
*Total Weighted Cases/month	52	44-59	41.6	28.2	27.19	77.1	50.1	51.3	32.1	43.2	39.2				
Acute Days/month	360	306-410	295	294	309	382	379	321	269	364	363	474			
Eldcap Days/month	573	562-578	570	589	570	583	561	545	584	570	589	589			
CCC Days/month	210	180-213	188	215	196	182	200	198	217	204	216	206			
Ambulatory Care Visits/month	75	64-85	57	70	71	63	63	83	89	60	63	54			
Emerg Visits/month	875	743-990	781	827	760	911	919	768	719	796	756	826			
*Readmissions/month	1.7	1-2	1	1	2	2	4	2	1	1	3				
% CCC Stage 2 or Greater Skin Ulcers	0	0	0	0	0	0	1	0	1	0	0	0			
Total Patient Days	1143	1048-1201	1053	1098	1075	1147	1140	1064	1070	1138	1168	1269			
Patient Safety															
Medication Errors/1000 patient days	<5.2		9.5	5.6	5.6	9.6	9.6	13.2	10.3	7.9	7.9	3.2			
Falls Incidents/1000 patient days	<5.0		3.8	6.5	6.5	8.7	7.0	2.8	9.3	8.7	7.7	9.5			
*C. Difficile cases/1000 patient days	0		0	0	0	0	0	0	0	0	0	0			
*VRE cases/1000 patient days	0		0	0	0	0	0	0	0	0	0	0			
*MRSA cases/1000 patient days	0		0	0	0	0	0	0	0	0	0	0			
Hand Hygiene - before patient contact	100%		60%	86%	83%	80%	50%	50%	100%	75%	80%	100%			
Hand Hygiene - after patient contact	100%		50%	100%	100%	100%	100%	100%	100%	82%	76%	75%			
Hand Hygiene - before aseptic technique	100%		n/o	n/o	n/o	100%	100%	60%	100%	100%	100%	100%			
Hand Hygiene - after body fluid	100%		0%	n/o	n/o	100%	100%	100%	100%	100%	100%	100%			
Organizational Health															
*% Full-Time Nurses	>70%		90%	90%	92%	90%	90%	86%	82%	85%	86%	85%			
Paid Sick Time Rate Days/month/FT	<.83		4.32	2.23	5.78	3.67	5.31	4.64	2.97	5.83	6.66	11.47			
Paid Overtime Rate Hours/2000 wkd hrs	<0.5		0.34	0.24	0.37	0.19	0.42	0.32	0.29	0.52	0.19	0.24			
Employee WSIB Rate LTI/2000 wkd hrs	0		8.0	7.0	6.0	5.0	4.0	3.0	3.9	3.5	3.2	0.0			
Staff Satisfaction	>65%														

* Mandated by the government

Board

Attendance: minimum attendance is 70% as per policy
Meeting Evaluation: conducted 5 times per year
Annual Performance: conducted annually in the month of June
Educational Events Attended: minimum is one per Board member plus orientation for all new members

Financial Health

Current Ratio: the target is determined by the MOHLTC. It is calculated by dividing the short-term liabilities into the short-term assets
Total Margin: the target is determined by the MOHLTC. It is calculated by subtracting the operating expenses from the revenues

Patient Access

Total Weighted Cases: Number of patient admissions to Acute Care Unit and acuity
Total Acute Care Days: Number of patient days in the Acute Care Unit
Eldcap Days: Number of patient days in John Owen Evans Residence
CCCRUG Days: Number of patient days in chronic care beds and acuity
Ambulatory Care Visits: Number of patient visits for specialty clinics, foot care and telemedicine visits
ER Visits: Number of patient visits to the Emergency Department
Readmissions: Number of patients readmitted with the same diagnosis
Stage 2 Skin Ulcers: Number of chronic patients with new skin ulcers
Total Patient Days: Total number of patient days for all units (Acute, Chronic and Eldcap)

Patient Safety

Medication Errors/1000 patient days: Number of errors per 1000 patient days. This includes all errors included in the full process, even though patient health is rarely affected.
Falls Incidents/1000 patient days: Number of incidents per 1000 patient days.
C. Dif. Cases/1000 patient days: Number of cases per 1000 patient days.
VRE Cases/1000 patient days: Number of cases per 1000 patient days.
MRSA Cases/1000 patient days: Number of cases per 1000 patient days.
Hand Hygiene - before patient contact: Number of compliant cases compared to total cases observed
Hand Hygiene - after patient contact: Number of compliant cases compared to total cases observed
Hand Hygiene - before aseptic technique: Number of compliant cases compared to total cases observed
Hand Hygiene - after body fluid: Number of compliant cases compared to total cases observed

Not observed (n/o)

Organizational Health

% of Full-Time Nurses: the target is determined by the MOHLTC
Paid Sick Time Rate Days/Month/FT: the target is based on the provincial average
Paid Overtime Rate Hours/2000 wkd hrs: the target is based on the previous years OT Rate
Employee WSIB Rate LTI/2000 wkd hrs: the target of zero is determined by WSIB (calendar year)
Staff Satisfaction: grand average, conducted by an external consultant every second year (2007, 2009, 2011, 2013, etc.)