

**Geraldton District Hospital  
Board of Directors  
Monthly Indicator Score Card  
2008/09**

Indicator	Goal/Target	A	M	J	J	A	S	O	N	D	J	F	M	Final
<b>Board</b>														
Attendance	>70%	70%	90%	92%	-	-	83%	67%	67%	100%	92%	83%	83%	83%
Meeting Evaluation	>7.5/10	7.7	-	-	-	-	7.7	-	8.5	-	8.0	-	8.0	8.0
Annual Performance	>8.5/10	-	-	8.6	-	-	-	-	-	-	-	-	-	8.6
Education Events Attended	>14/year	6	2	0	2	1	2	8	4	0	0	0	2	27
<b>Financial Health</b>														
*Current Ratio	>1.0	-	-	5.8	-	-	6.2	-	-	6.2	-	-	5	
*Total Margin	>0.0	-	-	4.6	-	-	7.3	-	-	7.5	-	-	8.8	
<b>Patient Access</b>														
*Total Weighted Cases	574	-	-	128.6	-	-	117.2	-	-	137.5	-	-		
*Eldcap Days	6867	-	-	1729	-	-	1748	-	-	1737	-	-	1698	6912
*CCCRUG Days	1825	-	-	586	-	-	575	-	-	535	-	-	598	2294
*Amb. Care Visits	0	-	-	0	-	-	0	-	-	0	-	-	0	118
*Emerg Visits	11561	-	-	2742	-	-	2892	-	-	2598	-	-	2481	10713
*Readmissions	20.20	-	-	6	-	-	8	-	-	5	-	-		
*% Chronic Patients with new Stage 2 or Greater Skin Ulcers														
	0	-	-	0	-	-	0	-	-		-	-	-	-
Total Patient Days	13600	1139	1215	1196	1148	1153	1138	1224	1110	1149	1141	1048	1098	13759
<b>Patient Safety</b>														
Medication Errors/1000 patient days	<5.6	5.3	11.5	3.3	6.1	3.5	4.4	4.1	5.4	5.2	3.5	1.9	2.7	4.7
Falls Incidents/1000 patient days	<5.6	4.4	5.8	3.3	5.2	2.6	2.6	2.5	3.6	6.9	3.5	2.9	6.3	4.1
*C. Difficile cases/1000 patient days	0	0	0	0	0	0	0	0	0	0	0	0	0.9	0.1
VRE cases/1000 patient days	0	0	0	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	0	0	0
<b>Organizational Health</b>														
*% Full-Time Nurses	>70%	-	-	94.7	-	-	88.4	-	-	85.2	-	-	84.8	84.8
Paid Sick Time Rate Days/Year/FT	<10	13.4	18.1	8.8	5.0	4.9	6.0	8.8	19.0	12.4	9.2	7.0	8.4	10.1
Paid Overtime Rate Hours/2000 wkd hrs	<0.5	0.51	0.58	0.50	0.38	0.45	0.31	0.58	0.5	0.51	0.41	0.42	0.34	0.46
Employee WSIB Rate LTI/2000 wkd hrs	0	5.6	4.3	3.4	2.8	2.4	2.2	2.0	1.8	3.2	0	0	0	3.2
Staff Satisfaction - Response Rate	>60%												50.0	50.0

\*Mandatory Quarterly MOHLTC Reporting

## **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:*

*Eldcap Days:*

*CCCRUG Days:*

*Ambulatory Care Visits:*

*ER Visits:*

*Readmissions:*

*Stage 2 Skin Ulcers:*

*Total Patient Days:*

The targets in this section are based on previous years volume levels

## **Patient Safety**

*Medication Errors/1000 patient days:*

*Falls Incidents/1000 patient days:*

*C. Dif. Cases/1000 patient days:*

*VRE Cases/1000 patient days:*

*MRSA Cases/1000 patient days:*

The targets in this section are based on previous years safety levels

## **Organizational Health**

*% of Full-Time Nurses:* the target is determined by the MOHLTC

*Paid Sick Time Rate Days/Year/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

*Staff Satisfaction:* response rate as a percentage of total staff

**Geraldton District Hospital  
Board of Directors  
Monthly Indicator Score Card  
2009/10**

Indicator	Goal/Target	A	M	J	J	A	S	O	N	D	J	F	M	Final
<b>Board</b>														
Attendance	>70%	92%	75%	73%	-	-	58%	92%	92%	73%	100%	91%	82%	83%
Meeting Evaluation	>7.5/10	-	-	-	-	-	8.1	-	8.3	-	8.1	-	8.0	8.1
Annual Performance	>8.5/10	-	8.8	-	-	-	-	-	-	-	-	-	-	8.8
Education Events Attended	>14/year	11	2	0	0	0	5	0	5	0	0	0	0	23
<b>Financial Health</b>														
*Current Ratio	>1.0	7.2	6.9	6.0	7.0	7.2	6.2	6.1	7.0	6.4	6.3	6.4	5.1	5.1
*Total Margin	>0.0	5.1	7.7	7.1	6.8	7.1	5.4	5.2	5.7	5.1	5.1	5.2	5.5	5.5
<b>Patient Access</b>														
Total Weighted Cases/month	47.8	20.5	24.3	34.5	103.5	29.9	48.6	47.5	40.5	40.6	36.0	83.8	51.6	46.8
Acute Days/month	358	246	299	343	286	272	346	388	260	253	324	307	318	304
Eldcap Days/month	572	569	571	570	589	589	570	589	570	582	589	532	589	576
CCCRUG Days/month	210	209	211	198	217	217	210	195	210	216	183	177	206	204
Ambulatory Care Visits/month	75	204	93	66	66	54	60	88	78	66	77	79	80	84
Emerg Visits/month	963	798	888	838	798	773	919	916	825	751	914	831	898	845
Readmissions/month	1.7	5	2	3	1	4	2	3	4	4	3	4	1	3
% Chronic Patients with new Stage 2 or Greater Skin Ulcers														
Total Patient Days	1140	1024	1081	1111	1092	1078	1126	1172	1040	1051	1096	1016	1113	1084
<b>Patient Safety</b>														
Medication Errors/1000 patient days	<5.2	8.8	4.6	9.0	1.8	0.0	8.9	1.7	19.2	7.6	9.1	4.9	6.3	7.0
Falls Incidents/1000 patient days	<5.0	9.7	7.4	1.8	5.5	8.3	7.1	10.2	4.8	6.7	6.4	6.9	9	6.8
C. Difficile cases/1000 patient days	0	0	0	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	0	0	0
MRSA cases/1000 patient days	0	0	0	0	0	0	0	0	0	0	0	0	0	0
<b>Organizational Health</b>														
*% Full-Time Nurses	>70%	94.1	90.1	89.0	91.5	82.6	98.0	97.0	97.0	93.0	94.0	87.0	95.0	92.4
Paid Sick Time Rate Days/month/FT	<.83	0.41	1.06	0.68	1.10	1.58	1.60	1.57	2.06	3.79	6.99	4.78	6.18	2.60
Paid Overtime Rate Hours/2000 wkd hrs	<0.5	0.48	0.35	0.28	0.36	0.39	0.29	0.31	0.35	0.16	0.23	0.31	0.28	0.32
Employee WSIB Rate LTI/2000 wkd hrs	0	0	0	0	2.6	5.2	4.5	3.8	3.4	4.5	0	13.3	9.0	4.5
Staff Satisfaction	>57.9%		60.7											60.7

\* 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.

## **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.

**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
<b>Board</b>															
Attendance	>70%		75%	83%	100%	-	-	67%	92%	83%	92%	58%	92%	75%	82%
Meeting Evaluation	>7.5/10		-	-	8.6	-	-	-	8.3	-	8.5	-	8.2	-	8.4
Annual Performance	>8.5/10			8.84	-	-	-	-	-	-	-	-	-	-	8.84
Education Events Attended	>16/year		8	6	-	-	-	4	-	5	-	2	-	-	25
<b>Financial Health</b>															
*Current Ratio	>2.0		6.3	6.5	6.0	6.0	6.0	4.6	5.8	5.8	5.1	4.9	4.6	4.2	
*Total Margin	>0.0		8.8	8.0	5.7	5.0	5.5	6.1	6.3	6.3	6.6	6.3	6.2	5.3	
<b>Patient Access</b>															
*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	37.3	34.7	56.7	43.2
Acute Days/month	360	306-410	295	294	309	382	379	321	269	364	363	474	342	372	347
Eldcap Days/month	573	562-578	570	589	570	583	561	545	584	570	589	589	532	582	572
CCC Days/month	210	180-213	188	215	196	182	200	198	217	204	216	206	196	217	203
Ambulatory Care Visits/month	75	64-85	61	98	88	77	71	83	88	72	63	75	75	64	76
Emerg Visits/month	875	743-990	781	827	760	911	919	768	719	796	756	826	711	843	801
*Readmissions/month	1.7	1-2	1	1	2	2	4	2	1	1	3	2	1	2	1.8
CCC Stage 2 or Greater Skin Ulcers	0	0	0	0	0	0	1	0	1	0	0	0	0	0	2
Total Patient Days	1143	1048-1201	1053	1098	1075	1147	1140	1064	1070	1138	1168	1269	1070	1171	1122
<b>Patient Safety</b>															
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	9.5	3.7	6.0	8.2
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	7.9	3.7	8.5	6.7
*C. Difficile cases/1000 patient days	0		0	0	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	0	0	0
*MRSA cases/1000 patient days	0		0	0	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%	100%	86%	80%
Hand Hygiene - after patient contact	100%		50%	100%	100%	100%	100%	100%	100%	79%	77%	80%	100%	100%	87%
Hand Hygiene - before aseptic technique	100%		n/o	n/o	n/o	100%	100%	60%	100%	100%	100%	100%	100%	100%	92%
Hand Hygiene - after body fluid	100%		0%	n/o	n/o	100%	100%	100%	100%	100%	100%	100%	100%	100%	96%
<b>Organizational Health</b>															
*% Full-Time Nurses	>70%		90%	90%	92%	90%	90%	86%	82%	85%	86%	85%	75%	77%	86%
Paid Sick Time Rate Days/month/FT	<.83		0.58	0.30	0.77	0.49	0.71	0.62	0.40	0.78	0.39	1.53	2.36	2.13	1.10
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	0.33	0.28	0.31
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	0.0	0.0	3.2
Staff Satisfaction	>65%													71%	71%

\* 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.)

**Geraldton District Hospital**  
**Board of Directors Monthly Indicator Score Card**  
2011/12

Indicator	Target	Range	A	M	J	J	A	S	O	N	D	J	F	M	YTD
<b>Board</b>															
Attendance	> 70%		80%	70%	90%	-	-	89%	91%	91%	91%	100%			88%
Meeting Evaluation	> 7.5/10		8.6	-	8.4	-	-	-	8.4	-	8.6	-			8.5
Annual Performance	> 8.5/10		8.9	-	-	-	-	-	-	-	-	-	-	-	8.9
Education Events Attended	>18/year		5	2	-	-	1	5	3	4	-				20
Individual Member Assess. Completed	11/year														
<b>Financial Health</b>															
*Current Ratio	> 2.0		5.1	4.9	5.0	5.6	5.5	5.6	5.5	5.5					5.5
*Total Margin	> 0.0		5.3	5.3	5.3	6.8	7.0	7.4	8.7	8.6					8.6
<b>Patient Access</b>															
*Total Weighted Cases/month	52	44-59	32.4	80.6	28.3	22.9	57.7	53.3	26.7						43.13
Acute Care Days/month	240	204-276	205	225	115	194	230	216	189	171					193
Alternate Level of Care days/month	120	102-138	133	115	99	93	101	106	150	96					112
Eldcap Days/month	573	562-578	570	589	570	589	585	570	578	569					578
CCC Days/month	210	180-213	195	206	210	214	212	206	216	210					209
Ambulatory Care Visits/month	75	64-85	57	65	82	55	71	45	38	24					55
Emerg Visits/month	875	743-990	841	809	787	1108	826	858	820	735					848
*Readmissions/month	1.7	1-2	3	1	2	2	2	2	2						2
Total Patient Days	1143	1048-1201	1103	1135	994	1090	1128	1098	1133	1046					1091
<b>Patient Safety</b>															
Med. Errors/1000 patient days - LTC	< 6.8		2.6	5.0	10.2	3.7	7.5	7.7	0.0	6.4					5.4
Med. Errors/1000 patient days - AC	< 8.5		3.0	2.9	28.0	13.9	12.1	9.6	11.8	14.9					12.0
Falls Incidents/1000 patient days - LTC	< 5.8		1.3	3.8	1.3	4.9	6.2	7.7	18.9	3.8					6
Falls Incidents/1000 patient days - AC	< 6.8		3.0	0	14.0	10.5	12.1	12.8	2.9	0.0					6.9
*C. Difficile cases/1000 patient days	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
*MRSA cases/1000 patient days	0		0	0	0	0	0	0	0.9	0					0.1
Hand Hygiene - Total Compliance	100%		100%	100%	100%	100%	100%	100%	100%	100%					100%
CCC Stage 2 or Greater Skin Ulcers	0	0	1	0	0	0	0	0	0	0					0.1
<b>Organizational Health</b>															
*% Full-Time Nurses	> 70%		85%	73%	76%	63%	68%	68%	68%	63%	65%				70%
Paid Sick Time Rate Days/month/FT	< .83		1.68	1.13	1.12	2.20	1.40	1.22	0.40	0.55	3.98				1.52
Paid Overtime Rate Hours/2000 wkd hrs	< 0.5		0.30	0.35	0.28	0.42	0.42	0.27	0.27	0.23	0.14				0.30
Employee WSIB Rate LTI/2000 wkd hrs	0		0.0	0.0	2.12	1.68	1.49	1.34	2.44	3.35					3.35
Staff Satisfaction	> 70%														
Patient Satisfaction	> 75%		n/a	84%	84%	78%	82%	76%	76%						80%

## **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

*Individual Member Assessment Completed:* each voting Board member (11) should complete one/year.

## **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 and dividing by 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

*Total ALC Days:* Number of ALC 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

*Total Patient Days:* Total number of patient days for all units (Acute, Chronic and Eldcap)

## **Patient Safety**

*Medication Errors/1000 pt days LTC:* Number of errors per 1000 LTC patient days. This includes all errors included in the full process, even though patient health is rarely affected.

*Medication Errors/1000 pt days AC:* Number of errors per 1000 AC patient days. This includes all errors included in the full process, even though patient health is rarely affected.

*Falls Incidents/1000 patient days LTC:* Number of incidents per 1000 LTC patient days.

*Falls Incidents/1000 patient days AC:* Number of incidents per 1000 AC 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.

*Stage 2 Skin Ulcers:* Number of chronic patients with new skin ulcers

*Hand Hygiene - total compliance* Number of compliant cases

## **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 year (effective 2011). 2011 result was 71%

*Patient Satisfaction:* New feedback cards implemented in May 2011