

**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%	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

Financial Health															
*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	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	5.3

Patient Access															
*Total Weighted Cases/month	52	44-59	41.6	28.2	27.2	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	1048-120	1053	1098	1075	1147	1140	1064	1070	1138	1168	1269	1070	1171	1122

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	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%

Organizational Health															
*% 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	<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	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 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.)