



Geraldton District Hospital
Board of Directors Monthly Indicator Score Card
 2012/13

Indicator	Target	Range	A	M	J	J	A	S	O	N	D	J	F	M	YTD Final
Board															
Attendance	> 80%		82%	73%	64%	-	-	91%	91%	55%	82%	91%	73%	73%	78%
Meeting Evaluation	> 80%		84%	-	-	-	-	84%	-	85%	-	84%	-	-	84%
Annual Performance	> 85%		-	88%	-	-	-	-	-	-	-	-	-	-	88%
Education Events Attended	>16/year		5	5	-	1	-	5	1	4	-	3	-	-	24
Individual Member Assess. Completed	11/year		-	-	-	-	-	-	-	-	-	-	-	-	0
Financial Health															
*Current Ratio	> 2.0		4.4	4.5	4.7	4.8	5.1	4.8	4.4	4.9	4.6	5.2	5.3	-	5.3
*Total Margin	> 0.0		4.5	5.1	5.2	6.2	6.5	6.6	5.0	5.3	4.7	4.9	5.1	-	5.1
Patient Access															
*Total Weighted Cases/month	52	44-59	41.5	53.2	27	51.5	35.9	25.2	80.1	43.2	45.1	82.2	54.8	-	49.1
Acute Care Days/month	240	204-276	232	235	174	209	207	224	267	176	237	231	148	329	222
Alternate Level of Care days/month	120	102-138	94	120	146	125	142	194	198	158	169	173	103	70	141
Eldcap Days/month	573	562-578	556	577	570	583	589	570	586	560	589	585	522	576	572
CCC Days/month	210	180-213	205	216	210	209	217	210	217	208	195	206	196	217	209
Ambulatory Care Visits/month	75	64-85	57	89	56	80	68	78	73	78	67	101	51	34	69
Emerg Visits/month	875	743-990	757	850	824	857	886	828	891	712	797	771	587	727	791
*Readmissions/month	1.7	1-2	1	0	3	2	2	2	1	2	3	3	2	-	2
Total Patient Days	1143	1048-1201	1087	1148	1096	1125	1155	1198	1268	1102	1190	1195	969	1122	1138
Patient Safety															
Med. Errors/1000 patient days - LTC	< 4.5		3.9	3.8	0.0	6.3	0.0	1.3	0.0	5.2	7.7	3.8	1.6	2.5	3.0
Med. Errors/1000 patient days - AC	< 8.5		6.1	16.9	0.0	20.9	0.0	4.8	4.3	14.9	4.9	9.9	0.0	0.0	6.9
Falls Incidents/1000 patient days - LTC	< 8.0		6.5	3.8	5.1	12.6	3.7	3.8	1.2	7.8	11.5	12.6	9.7	11.3	7.5
Falls Incidents/1000 patient days - AC	< 7.5		15.2	8.5	3.3	18.0	11.5	23.9	10.8	3.0	12.3	12.3	7.9	6.1	11.1
*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 - Total Compliance	100%		100%	92%	100%	73%	100%	100%	100%	75%	94%	80%	100%	80%	91%
CCC Stage 2 or Greater Skin Ulcers	0	0	0	0	0	1	0	0	1	1	1	0	0	-	0.4
Organizational Health															
% Full-Time Nurses	> 70%		72%	75%	74%	80%	78%	80%	71%	65%	61%	58%	56%	-	70%
Paid Sick Time Rate Days/month/FT	< .83		0.80	0.35	0.54	0.33	0.30	0.68	1.16	1.20	2.63	1.84	1.19	-	1.00
Paid Overtime Rate Hours/2000 wkd hrs	< 0.5		0.59	0.17	0.27	0.40	0.38	0.35	0.25	0.37	0.59	0.32	0.39	-	0.37
Employee WSIB Rate LTI/2000 wkd hrs	0		0.0	0.0	2.20	1.66	1.48	1.33	1.21	1.10	1.04	0.00	0.00	0.00	0.00
Staff Satisfaction	> 75%		-	-	-	-	-	-	-	-	-	-	-	-	0.0%
Patient Satisfaction	> 85%		90%	88%	92%	92%	94%	92%	84%	94%	96%	96%	94%	-	92%

Board

Attendance: minimum attendance is 80% 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