



Board of Directors Monthly Indicator Score Card

2013/2014

Indicator	Target	Range	A	M	J	J	A	S	O	N	D	J	F	M	YTD Final
Board															
Attendance	> 80%		64%	90%	78%	-	-	60%	82%	80%	70%	73%	82%	91%	77%
Meeting Evaluation	> 85%		-	-	85%	-	-	-	85%	-	90%	-	-	-	87%
Annual Performance	> 85%		-	88%	-	-	-	-	-	-	-	-	-	-	88%
Education Events Attended	> 18/year		3	0	-	-	-	4	-	4	-	3	1	-	15
Individual Member Assess. Completed	11/year		-	-	-	-	-	-	-	-	-	-	-	11	11
Financial Health															
*Current Ratio	> 2.0		4.7	4.8	5.1	5.1	5.8	5.4	5.1	5.6	5.0	5.6	5.4	4.6	4.6
*Total Margin	> 0.0		7	3.4	4.8	4.4	4.8	4.1	4.3	4.9	5.9	5.2	5.5	5.9	5.9
Patient Access															
*Total Weighted Cases/month	52	44-59	46.3	44.63	36.6	52.5	58.2	52.9	48.4	42.6	48.5	31.6	54.3	26.4	45.2
Acute Care Days/month	240	204-276	273	296	214	280	230	212	172	162	212	209	158	193	218
Alternate Level of Care days/month	120	102-138	68	132	125	124	166	161	178	172	126	168	135	171	144
Eldcap Days/month	573	562-578	570	589	570	589	583	556	583	546	571	589	525	588	572
CCC Days/month	210	180-213	210	217	210	217	217	209	217	210	217	217	196	207	212
Ambulatory Care Visits/month	75	64-85	77	88	109	64	65	81	57	74	78	71	79	50	74
Emerg Visits/month	875	743-990	639	742	775	823	813	766	795	818	794	708	659	708	753
*Readmissions/month	1.7	1-2	2	4	3	1	4	6	2	3	1	1	2	-	3
Total Patient Days	1143	1048-1201	1121	1238	1121	1210	1196	1138	1150	1090	1126	1183	1014	1159	1146
Patient Safety															
Med. Errors/1000 patient days - LTC	< 4.5		1.3	1.2	2.6	1.2	1.3	2.6	2.5	0.0	1.3	1.2	2.7	1.3	1.6
Med. Errors/1000 patient days - AC	< 8.5		5.9	9.3	5.9	7.4	7.6	10.7	8.6	12.0	5.9	8.0	17.1	5.5	8.7
Falls Incidents/1000 patient days - LTC	< 8.0		14.1	1.2	24.3	28.5	5.0	16.9	11.3	3.9	10.2	2.5	9.7	7.5	11.3
Falls Incidents/1000 patient days - AC	< 7.5		8.8	4.6	5.9	7.4	2.5	10.7	5.7	3.0	11.8	2.6	3.5	5.5	6.0
*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%	100%	93%	100%	100%	100%	100%	100%	100%	100%	100%	100%	99%
CCC Stage 2 or Greater Skin Ulcers	0		0	1	1	1	1	0	0	0	0	0	0	0	0.3
Organizational Health															
*% Full-Time Nurses	> 70%		61%	63%	57%	57%	58%	72%	72%	73%	77%	77%	77%	72%	68%
Paid Sick Time Rate Days/month/FT	< .83		0.74	0.57	0.42	0.29	0.19	0.33	0.36	0.86	0.86	0.90	1.62	1.55	0.72
Paid Overtime Rate Hours/2000 wkd hrs	< 0.5		0.56	0.39	0.16	0.33	0.26	0.29	0.25	0.22	0.39	0.27	0.30	0.19	0.30
Employee WSIB Rate LTI/2000 wkd hrs	0		0.0	0.0	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Staff Satisfaction	> 75%		69.2%												
Patient Satisfaction	> 85%		94%	96%	94%	94%	96%	96%	94%	94%	92%	96%	92%	96%	95%

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 (1) 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