

Growing Together

CKHA's Balanced Scorecard



INDICATOR SOURCE:
 QIP Quality Improvement Plan
 LHIN H-SAA Hospital Sector Accountability Agreement
 OHA Ontario Hospital Association



Domain	Indicator	Baseline Performance	Target Performance	Target Justification and Comment(s)	Frequency	Q1 (2018-19)	Q2 (2018-19)	Q3 (2018-19)	Q4 (2018-19)
 Quality Patient Care	Enhance Patient Satisfaction in Inpatient Med/Surg (QIP)	52.1%	≥ 70%	Meet or exceed high performers	Cumulative Monthly	53.0%			
	Enhance Patient Satisfaction Emergency Care in Chatham and Wallaceburg (QIP)	57.8%	≥ 63%	Meet or exceed high performers	Cumulative Monthly	60.7%			
	Infection rate per thousand <i>Clostridium difficile</i> (H-SAA)	0.29%	0%	LHIN H-SAA target	Cumulative Monthly	0.421			
	Hospital Standardized Mortality Ratio ¹	81%	≤ 81%	Meet or exceed high performers	Reported monthly, monthly totals cumulative	100% ¹			
	QBP Readmission Rate All Causes Chronic Obstructive Pulmonary Disease (QIP) ²	16.6%	≤ 12%	Achieve 10% improvement to current performance and remain top performer in ESC LHIN	Monthly, with 1 month delay	- ²			
	QBP Readmission Rate All Causes Congestive Heart Failure (QIP) ²	15.20%	≤ 15%	Achieve 30% improvement over current performance	Monthly, with 1 month delay	- ²			
	Readmission within 30 days Selected HIGs site specific (H-SAA) ²	11.90%	≤ 16%	LHIN H-SAA target	Monthly, with 1 month delay	- ²			
	Wait Times for Emergency Department Length Of Stay for Complex Patients (H-SAA)	6.6	≤ 6.7 hours	Remain top performer and exceed LHIN H-SAA target	Monthly	7.3 hrs			
	Wait Times for Emergency Department Length Of Stay for Minor/Uncomplicated Patients (H-SAA)	4.1	≤ 3.7 hours	Be a high performer and exceed LHIN H-SAA target	Monthly	4.9 hrs			
	Percentage of Closed Cases Within Provincial Targets for Orthopedic Surgeries Wait Times Total Hip Replacement (H-SAA)	94.5%	≥ 96%	Be a high performer and exceed LHIN H-SAA target	Monthly	85.9%			
	Percentage of Closed Cases Within Provincial Targets for Orthopedic Surgeries Wait Times Total Knee Replacement (H-SAA)	41.7%	≥ 94%	Be a high performer and exceed LHIN H-SAA target	Monthly	41.0%			
	Percentage of Closed Cases Within Provincial Targets for Diagnostic Imaging Wait Times CT Scan (H-SAA)	61.5%	≥ 90%	Be a high performer and exceed LHIN H-SAA target	Monthly	55.7%			
	Percentage of Closed Cases Within Provincial Targets for Diagnostic Imaging Wait Times MRI (H-SAA)	31.7%	≥ 90%	Be a high performer and exceed LHIN H-SAA target	Monthly	22.3%			
Hospital Harm Indicator	6.1	≤ 5.8	Achieve a 5 % improvement over baseline	Annually	-				
 People and Culture	Enhance Physician Engagement (QIP) ³	57.7%	≥ 74%	Meet or exceed Ontario average	Aligns with survey schedule plus NRC lag time	- ³			
	Enhance Employee Engagement (QIP)	60.1%	≥ 74%	Meet or exceed Ontario average	Aligns with survey schedule plus NRC lag time	59.9%			
	Patient Experience Advisors Meaningfully Engaged in Programs and Services	54%	= 100%	Fill all 24 patient advisor position on Councils	Monthly	63%			
	Reduce Lost Time Due to Injury and Workplace Violence	99 days	≤ 94 days	Achieve a 5 % improvement over baseline	Monthly	78.5 days			
	Improve the Percent of Departments with Reductions in Sick Hours Compared to Target	56%	≥ 59%	Maintain or exceed OHA recommended target	Monthly	65%			
	Percentage of Family Medicine Residents Who Train in Chatham-Kent Choose to Practice in Rural Settings ⁴	79%	= 100%	Residents committed to practice in a rural community after completing residency.	Monthly	-			

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 Internal Business Processes	Percentage of Revenue for Capital Allocation		= 2%	Sustain investment in capital equipment	Quarterly	2.8%			
	Percent of Secondary Care of Chatham-Kent Residents Delivered in Chatham-Kent ²	81%	≥ 85%	Achieve a 5 % improvement over baseline	Monthly, with delay	-			
	Goals and Objectives for the 2018-2021 Strategic Plan	N/A	≥ 90%	Goals and objectives should be achieved within timeframes	Monthly	-			
	Medication Reconciliation Completed on Discharge (QIP) ⁶	25.1%	≥ 40%	Increase by 15 percentage points over baseline (60% improvement) ⁹	Monthly	39.7%			
	Workplace Violence Prevention as Seen in Increase in Number Incidents Reported by Hospital Workers (QIP)	N/A		Collecting baseline	Monthly	-			
 Utilization and Fiscal Health	Balanced Financials Total Margin (H-SAA)	3.31%	≥ 0%	LHIN H-SAA target	Monthly	2.79%			
	Balanced Financials Current Ratio (H-SAA)	0.712	≥ 0.44	LHIN H-SAA target	Monthly	0.720			
	ALC Rate Corporate for Acute and Post Acute (H-SAA) ⁵	17.1%	≤ 11.5%	Meet or exceed high performers	Monthly when report available in Access to Care (CCO)	16.4% ⁵			
	ALC Rate Acute for Chatham and Wallaceburg (H-SAA) ⁵	11.7%	≤ 12.5%	Meet or exceed high performers	Monthly when report available in Access to Care (CCO)	11.8% ⁵			
	ALC Rate Post Acute (H-SAA) ⁵	24.5%	≤ 6.1%	Meet or exceed high performers	Monthly when report available in Access to Care (CCO)	22.9% ⁵			
	Occupancy in Acute Care	80%	≥ 95%	Maintain Occupancy at 95% or greater	Monthly	92.3%			
	Cost of a Standard Hospital Stay	\$5,520	≤ \$4,811	Meet or exceed high performers	Quarterly, available 1 month after quarter end	-			
	Access to Ambulatory Care with Reduction of Ambulatory Sensitive Admissions ²	4.9%	≤ 4.7%	Achieve a 5 % improvement over baseline	Monthly, with delay	- ²			

Reporting for June 2018, Published August 24, 2018

Notes:

- ¹ Hospital Standardized Mortality Ratio is reported on CIHI's Insight Website and may change as correction files are submitted; reported data is for April 2018
- ² The source for Readmissions, Ambulatory Sensitive Cases and Secondary Care delivered in Chatham-Kent is IDS where there has been a delay in submissions
- ³ Survey has not been applied to Physicians in this fiscal year as of yet
- ⁴ Family Medicine Residents graduating 2018 have not declared where they are planning to practice
- ⁵ ALC Rate data is reported for April 2018, and retrieved from Access to Care Information Site
- ⁶ Methodology for capturing Medication Reconciliation performance was adjusted to improve quality of data collection