







HAWKESBURY AND DISTRICT GENERAL HOSPITAL CORPORATE SCORECARD/QIP 2022-2023

HQO DIMENSIONS	PILLARS	PERFORMANCE INDICATOR	2022/2023 PERFORMANCE GOAL	Q4 2021-22	Q1 2022-23	Q2 2022-23	Q3 2022-23	Q4 2022-23	DATA TREND	GOAL TREND		
EQUITABLE	SAFE	NEW Clinical Turnover Rate (RN/RPN)*	≤5%	-	5.75%					↓		
		NEW Clinical Vacancy Rate (RN/RPN)*	≤15%	-	18.8%					↓		
		(Ontario Health) Overall incidence of workplace violence – number of reports completed	≥10	10	15					↑	↑	
	EFFECTIVE	SERVICE	NEW Falls Rate – (Number of falls per 1000 patient days)	≤5.00	7.6	4.6				↓	↓	
			(Ontario Health) Repeat Emergency Department visits for Mental Health	≤18%	21.4%	24.1%				↑	↓	
	PATIENT-CENTERED		During this hospital stay, did doctors, nurses or other hospital staff talk with you about whether you would have the help you needed when you left the hospital? (IP)	≥85%	76.9% N=78	-						↑
			Before you left the emergency department, did someone discuss with you whether you needed follow up care? (ED)	≥65%	50.4% N=113	-						↑
			(Ontario Health) Did you receive enough information from hospital staff about what to do if you were worried about your condition or treatment after you left the hospital?	≥70%	67.5 N=80	-						↑
			NEW Number of near miss reports	≥70	44	40					↓	↑
	EFFICIENT		PERFORMANCE	NEW Pay-for-results: Performance ranking	≤55th	57	65				↑	↓
		Pay-for Results: Funding ranking		≤65th	66	73				↑	↓	
	(Ontario Health) Time to inpatient bed (90 th percentile)	≤8hrs		69.5hrs	67.0 hrs					↓	↓	
	EFFECTIVE	NEW Barcode Medication Administration (BCMA) Compliance		≥95%	71.7%	66.9%					↓	↑
		Reduce ALOS		ALOS≤ELOS	0.71 greater = 6.11 beds	0.24 greater = 2.49 beds					↓	↓

*Covid-recovery indicators: Clinical vacancy and turnover rates (RN/RPN)

Hawkesbury and District General Hospital
Proposed Corporate Scorecard/QIP 2022-23 - Glossary of Terms

Current Value	The current value is the fiscal year to date value calculated for the indicator. Most indicators are measured quarterly. For those that are measured monthly, the reporting month will appear on the indicator detailed page.
Performance Goal	This is the goal for each indicator as set by the Hawkesbury General Hospital. This is based on the strategic direction of the Hospital and on internal/external benchmarks.
Current Status	 Red indicates that the performance indicator has not met the performance goal.  Yellow indicates that the current performance indicator is within a pre-determined range from the performance goal (refer to <i>Performance Goal Ranges</i> reference document).  Green indicates the performance indicator has exceeded or is equal to the performance goal.
Performance Trend	 Performance has improved over the previous reporting period.  Performance has decreased over the previous reporting period.  Performance has not changed over the previous reporting period
Performance Indicator	<p>NEW This indicator is new to the HGH Corporate Scorecard</p> <p>(Ontario Health) This is a priority indicator for Health Quality Ontario (Ontario Health)</p> <p>(Ontario Health) This is a mandatory indicator for Health Quality Ontario (Ontario Health) - no mandatory indicators in 2022-23</p> <p>MANDATORY</p>

2022/23 Corporate Scorecard – Performance Reference Document

INDICATOR	2022-23 GOAL	2021-22 GOAL	BENCHMARK	GOAL TREND	GREEN RANGE	YELLOW RANGE	RED RANGE
NEW Clinical Turnover Rate (RN/RPN)*	≤5%	-	-	↓	≤5%	5%-6%	≥6%
(Ontario Health) Overall incidence of workplace violence – number of reports completed	≥10	≥10	-	↑	≥10	7-10	0-7
NEW Clinical Vacancy Rate (RN/RPN)*	≤15%	-	-	↓	≤15%	15%-20%	≥20%
NEW Falls Rate – (Number of falls per 1000 patient days)	≤5.00	-	-	↓	≤5.00	5.00-5.50	≥5.50
(Ontario Health) Repeat Emergency Department visits for Mental Health	≤18%	≤22%	-	↓	≤18%	18%-20%	≥20%
During this hospital stay, did doctors, nurses or other hospital staff talk with you about whether you would have the help you needed when you left the hospital? (Inpatient Experience)	≥85%	≥85%	Champlain LHIN Average: 79.9% Ontario ED Small Hospital Average: 77.2%	↑	≥85%	80%-85%	≤80%
Before you left the emergency department, did someone discuss with you whether you needed follow up care? (ED Experience)	≥65%	≥70%	Champlain LHIN Average: 67.1% ED Small Hospital Average: 66.4%	↑	≥65%	60%-65%	≤60%
(Ontario Health) Did you receive enough information from hospital staff about what to do if you were worried about your condition or treatment after you left the hospital? (Inpatient Experience)	≥70%	≥80%	Champlain LHIN Average: 63.0% ED Small Hospital Average: 60.9%	↑	≥70%	66.5%-70%	≤66.5%
NEW Number of near miss reports	≥70	-	-	↑	≥70	65-70	≤65
NEW Pay-for-Results: Performance Ranking	≤55th	-	-	↓	≤55	56-60	≥60
Pay-for-Results: Funding Ranking	≤65th	≤55 th	-	↓	≤65	66-70	≥70
(Ontario Health) Time to inpatient Bed (90 th percentile)	≤8hrs	≤8hrs	Mandatory provincial target: ≤8hrs	↓	≤8hrs	8hrs-20hrs	≥20hrs
NEW Barcode Medication Administration (BCMA) Compliance	≥95%	-	Atlas Alliance target: ≥95%	↑	≥95%	85%-95%	≤85%
Reduce ALOS	ALOS≤ELOS	ALOS≤ELOS		↓	ALOS≤ELOS	ALOS within 10% of ELOS	ALOS≥ within 10% ELOS

*Covid-recovery indicators: Clinical vacancy and turnover rates (RN/RPN)