

Our Health Care Report Card

Ridge Meadows Hospital

| Ridge Meadows Hospital | | | Fiscal Period: | : FP01, 2021/22 - Ending | | Apr 29, 2021 |
|------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------|----------------|--------------------------|--------|------------------------|
| No | Measure Name | Time Frame | Target | Actual | Status | Preferred Direction |
| | QUALITY AND SAFETY | | | | | |
| 1 | In-Hospital Clostridioides Difficile Infection (CDI) Incidence | Apr,2021 | 4.5 | 8.2 | • | $\mathbf{\Psi}$ |
| 2 | In-Hospital Methicillin-Resistant Staphylococcus aureus (MRSA) Incidence | Apr,2021 | 5.5 | 0.0 | | $\mathbf{\Psi}$ |
| 3 | Hand Hygiene Compliance | Apr,2021 | 80% | 88.4% | | 1 |
| 4 | In-Hospital Sepsis Rate | 2020/2021 | 1.5 | 2.6 | • | $\mathbf{\Psi}$ |
| 5 | In-Hospital Acquired Delirium | 2020/2021 | 4.2 | 7.8 | • | |
| 6 | In-Hospital Acquired Non-Aspiration Pneumonia | 2020/2021 | 4.9 | 8.9 | • | $\mathbf{\Psi}$ |
| 7 | In-Hospital Acquired Urinary Tract Infection | 2020/2021 | 7.8 | 28.1 | • | $\mathbf{\Psi}$ |
| 8 | Hospital Standardized Mortality Ratio | Apr-Dec 2020 | 92 | 120 | • | |
| | CAPACITY FOR CARE ACROSS ALL SECTORS | | | | | |
| 9 | Emergency Patients Admitted to Hospital Within 10 Hours | Apr,2021 | 65.0% | 34.1% | • | 1 |
| 10 | Admitted Patients Waiting for Inpatient Bed Placement | Apr,2021 | 9.0 | 11.0 | • | Ū. |
| 11 | Patients Length of Stay Relative to Expected Length of Stay | Apr-Sep 2020 | 0.95 | 0.967 | | 4 |
| 12 | Long Stay Patients | Apr,2021 | N/A | 33.0 | | 4 |
| 13 | Alternate Level of Care (ALC) Days | 2020/2021 | 12.9% | 9.7% | | $\mathbf{\Psi}$ |
| 14 | Non-emergency Surgeries Completed Within 26 Weeks | Apr,2021 | 95% | 97.2% | | 1 |
| 15 | Non-Emergency Surgeries Waiting Longer Than 26 Weeks | Apr,2021 | 22.8% | 13.8% | | Ψ. |
| | STAFF | | | | | |
| 16 | Nursing and Allied Professional Sick Time | Apr,2021 | 5.8% | 5.0% | | ₩ |
| 17 | Nursing and Allied Professional Overtime | Apr,2021 | 3.9% | 6.9% | • | $\mathbf{\Psi}$ |
| 18 | Lost Time Claims Rate | Apr-Dec 2020 | 5.3 | 11.9 | • | $\mathbf{\Psi}$ |
| | BUDGET ACCOUNTABILITY | | | | | |
| 19 | Budget Performance Ratio | Apr,2021 | 1.000 | 1.104 | • | $\mathbf{\Psi}$ |
| Ma | ple Ridge Community | | | | | |
| 1 | Worsened Pressure Ulcer in Long Term Care Facilities | 2020/2021 | 1.6% | 2.9% | • | $\mathbf{\Psi}$ |
| 2 | Hospitalization Rates for Residents (Age 70+) | 2019/2020 | 247.6 | 278.3 | • | $\mathbf{\Psi}$ |
| 3 | Hospital Readmission Rates Overall | Apr-Sep 2020 | 10.0% | 9.7% | | ₩ |
| 4 | Mental Health & Substance Use Patients Hospital Readmission Rate (Age 15+) | Apr-Sep 2020 | 13.3% | 11.0% | | ₩ |
| 5 | Patients with Chronic Conditions Admitted to Hospital (Age 75+) | Apr-Sep 2020 | 3,448 | 2,516 | | ₩ |
| 6 | Low Acuity Emergency Visits by Community | Apr,2021 | 100.0 | 115.6 | • | ₩ |
| 7 | Home Health Services Provided Within Benchmark Time | Apr,2021 | 50% | 68.8% | | 1 |
| 8 | Wait Time for Home Health Assessment (RAI-HC) | Apr,2021 | 30.0 | 27.5 | | ₩ |
| 9 | Admissions to Long Term Care within 30 Days | Apr,2021 | 75% | 77.8% | | 1 |
| 10 | Emergency Visits by Home Health Clients | 2020/2021 | 75.8 | 66.4 | | Ψ |
| 11 | Emergency Visits by Long Term Care Clients | 2020/2021 | 30.0 | 30.4 | | 4 |
| | | | | KPI Count By Status | | |
| | | | Meeting T | g Target 📃 🔍 | | 13 |
| Note | IS Contraction of the second se | | Within 109 | % of Target | | 2 |
| | — | | | - | | |

All measures reported on YTD (Year-to-Date) basis

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Not Meeting Target