

## **Our Health Care Report Card**

## **Peace Arch Hospital**

| eace Arch Hospital |  |                 | Fiscal Period: FP11, 201718- Ending Jan 25, 2018 |        |                  |                      |
|--------------------|--|-----------------|--|--------|------------------|----------------------|
|                    | Measure Name   | Time Frame      | Target   | Actual | Status           | Preferre<br>Directio |
|                    | QUALITY AND SAFETY   |                 |  |        |                  |                      |
|                    | In-Hospital Clostridium Difficile Infection (CDI) Incidence                | Apr2017-Jan2018 | 4.5  | 4.7    | $\triangle$      | $\mathbf{T}$         |
|                    | In-Hospital Methicillin-Resistant Staphylococcus Aureus (MRSA) Incidence   | Apr2017-Jan2018 | 7.0  | 6.3    | $\bigcirc$       | $\mathbf{I}$         |
|                    | Hand Hygiene Compliance  | Apr2017-Jan2018 | 80%  | 88.4%  | $\bigcirc$       | 1                    |
|                    | In-Hospital Sepsis Rate  | Apr-Sep 2017    | 2.7  | 2.71   | $\bigtriangleup$ | $\mathbf{r}$         |
|                    | Medication Reconciliation at Hospital Admission                            | Apr-Sep 2017    | 75%  | 87.7%  | $\bigcirc$       | 个                    |
|                    | In-Hospital Acquired Pneumonia Rate (Age 55+)                              | Apr-Sep 2017    | 8.0  | 14.6   | $\diamond$       | <b>1</b>             |
|                    | In-Hospital Acquired Urinary Tract Infection Rate (Age 55+)                | Apr-Sep 2017    | 18.2   | 17.3   | $\bigcirc$       | $\mathbf{r}$         |
|                    | Hospital Standardized Mortality Ratio                                      | Apr-Jun 2017    | 91   | 75     | $\bigcirc$       | $\mathbf{r}$         |
|                    | CAPACITY FOR CARE ACROSS ALL SECTORS                                       |                 |  |        |                  |                      |
|                    | Time Spent in Emergency by Admitted Patients                               | Apr2017-Jan2018 | 35.5   | 46.1   | <b></b>          | <b>1</b>             |
|                    | Admitted Patients Waiting for Inpatient Bed Placement                      | Apr2017-Jan2018 | 9.1  | 10.3   | $\diamond$       | $\mathbf{I}$         |
|                    | Patients Length of Stay Relative to Expected Length of Stay                | Apr-Sep 2017    | 0.95   | 0.916  | $\bigcirc$       | $\mathbf{I}$         |
|                    | Long Stay Patients   | Apr2017-Jan2018 | N/A  | 35.0   |                  | $\mathbf{r}$         |
|                    | Alternate Level of Care Days   | Apr-Sep 2017    | 10.0%  | 22.5%  | $\diamond$       | $\mathbf{L}$         |
|                    | Non-emergency Surgeries Completed Within 26 Weeks                          | Apr2017-Jan2018 | 95%  | 77.5%  | <b></b>          | $\uparrow$           |
|                    | Non-emergency Surgeries Waiting Less Than 40 Weeks                         | Apr2017-Jan2018 | 95%  | 87.9%  | $\bigtriangleup$ | Ŷ                    |
|                    | STAFF  |                 |  |        |                  |                      |
|                    | Sick Time Rate   | Apr2017-Jan2018 | 5.0%   | 5.40%  | $\triangle$      | ₽                    |
|                    | Overtime Rate  | Apr2017-Jan2018 | 3.0%   | 3.13%  | $\triangle$      | <b>1</b>             |
|                    | WorkSafeBC (WSBC) Claims Rate  | Apr-Jun 2017    | 7.0  | 6.3    | $\bigcirc$       | $\mathbf{L}$         |
|                    | BUDGET ACCOUNTABILITY  |                 |  |        |                  |                      |
|                    | Budget Performance Ratio   | Apr2017-Jan2018 | 1.000  | 1.024  | $\bigtriangleup$ | ₽                    |
| u                  | th Surrey/White Rock Community   |                 |  |        |                  |                      |
|                    | Worsened Pressure Ulcer in Residential Care Facilities                     | Apr-Aug 2017    | 2.0%   | 1.8%   | $\bigcirc$       | $\mathbf{I}$         |
|                    | Readmission Rates Utilization (Emergent/Urgent), All Causes                | 2016/2017       | 10.0%  | 11.4%  | $\diamond$       | $\mathbf{I}$         |
|                    | Mental Health & Substance Use Patients Hospital Readmission Rate (Age 15+) | Apr-Sep 2017    | 12.4%  | 14.3%  | $\diamond$       | $\mathbf{I}$         |
|                    | Low Acuity Emergency Visits by Community                                   | Apr2017-Jan2018 | 105.6  | 98.5   | $\bigcirc$       | $\mathbf{I}$         |
|                    | Home Health Services Provided Within Benchmark Time                        | Apr2017-Jan2018 | 37%  | 39.2%  | $\bigcirc$       | 个                    |
|                    | Wait Time for Home Health Assessment                                       | Apr2017-Jan2018 | 38.2   | 45.6   | $\diamond$       | $\mathbf{I}$         |
|                    | Admissions to Residential Care within 30 Days                              | Apr2017-Jan2018 | 63%  | 81.5%  | $\bigcirc$       | $\mathbf{\uparrow}$  |
|                    | Emergency Visits by Home Health Clients                                    | Dec2016-Nov2017 | 75.8   | 85.59  | $\diamond$       | $\mathbf{I}$         |
|                    | Emergency Visits by Residential Care Clients                               | Dec2016-Nov2017 | 33.0   | 31.51  | $\bigcirc$       | $\mathbf{I}$         |
|                    |  |                 | KPI Count By Status                              |        |                  | tus                  |
|                    |  |                 | Meeting Target                                   |        | $\bigcirc$       | 12                   |
|                    |  |                 | Within 10% of Target                             |        | $\bigtriangleup$ | 6                    |
|                    |  |                 | Not Meeting                                      | Ū      | $\diamond$       | 9                    |

## Notes

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