# Our Health Care Report Card

## Ridge Meadows Hospital

<table>
<thead>
<tr>
<th>No</th>
<th>Measure Name</th>
<th>Time Frame</th>
<th>Target</th>
<th>Actual</th>
<th>Status</th>
<th>Preferred Direction</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>QUALITY AND SAFETY</td>
<td></td>
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</tr>
<tr>
<td>1</td>
<td>In-Hospital <em>Clostridioides Difficile</em> Infection (CDI) Incidence</td>
<td>Apr-Oct 2019</td>
<td>4.5</td>
<td>8.3</td>
<td>Meeting Target</td>
<td></td>
</tr>
<tr>
<td>2</td>
<td>In-Hospital Methicillin-Resistant <em>Staphylococcus aureus</em> (MRSA) Incidence</td>
<td>Apr-Oct 2019</td>
<td>5.5</td>
<td>5.51</td>
<td>Within 10% of Target</td>
<td></td>
</tr>
<tr>
<td>3</td>
<td>Hand Hygiene Compliance</td>
<td>Apr-Oct 2019</td>
<td>80%</td>
<td>76.7%</td>
<td>Not Meeting Target</td>
<td></td>
</tr>
<tr>
<td>4</td>
<td>In-Hospital Sepsis Rate</td>
<td>Apr-Aug 2019</td>
<td>1.5</td>
<td>2.3</td>
<td>Meeting Target</td>
<td></td>
</tr>
<tr>
<td>5</td>
<td>In-Hospital Acquired Delirium</td>
<td>Apr-Aug 2019</td>
<td>4.2</td>
<td>8.1</td>
<td>Not Meeting Target</td>
<td></td>
</tr>
<tr>
<td>6</td>
<td>In-Hospital Acquired Non-Aspiration Pneumonia</td>
<td>Apr-Aug 2019</td>
<td>4.9</td>
<td>10.3</td>
<td>Not Meeting Target</td>
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<tr>
<td>7</td>
<td>In-Hospital Acquired Urinary Tract Infection</td>
<td>Apr-Aug 2019</td>
<td>7.8</td>
<td>24.2</td>
<td>Not Meeting Target</td>
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</tr>
<tr>
<td>8</td>
<td>Hospital Standardized Mortality Ratio</td>
<td>2018/2019</td>
<td>96</td>
<td>122.3</td>
<td>Not Meeting Target</td>
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</tr>
<tr>
<td></td>
<td>CAPACITY FOR CARE ACROSS ALL SECTORS</td>
<td></td>
<td></td>
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</tr>
<tr>
<td>9</td>
<td>Emergency Patients Admitted to Hospital Within 10 Hours</td>
<td>Apr-Oct 2019</td>
<td>46.0%</td>
<td>28.3%</td>
<td>Meeting Target</td>
<td></td>
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<tr>
<td>10</td>
<td>Admitted Patients Waiting for Inpatient Bed Placement</td>
<td>Apr-Oct 2019</td>
<td>10.7</td>
<td>11.8</td>
<td>Meeting Target</td>
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<tr>
<td>11</td>
<td>Patients Length of Stay Relative to Expected Length of Stay</td>
<td>2018/2019</td>
<td>0.95</td>
<td>1.066</td>
<td>Meeting Target</td>
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<tr>
<td>12</td>
<td>Long Stay Patients</td>
<td>Apr-Oct 2019</td>
<td>N/A</td>
<td>41.3</td>
<td>Meeting Target</td>
<td></td>
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<tr>
<td>13</td>
<td>Alternate Level of Care (ALC) Days</td>
<td>Apr-Aug 2019</td>
<td>12.9%</td>
<td>16.2%</td>
<td>Meeting Target</td>
<td></td>
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<tr>
<td>14</td>
<td>Non-emergency Surgeries Completed Within 26 Weeks</td>
<td>Apr-Oct 2019</td>
<td>95%</td>
<td>75.7%</td>
<td>Not Meeting Target</td>
<td></td>
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<tr>
<td>15</td>
<td>Non-Emergency Surgeries Waiting Longer Than 26 Weeks</td>
<td>Apr-Oct 2019</td>
<td>22.8%</td>
<td>27.1%</td>
<td>Not Meeting Target</td>
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</tr>
<tr>
<td></td>
<td>STAFF</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>16</td>
<td>Nursing and Allied Professional Sick Time</td>
<td>Apr-Oct 2019</td>
<td>5.8%</td>
<td>5.0%</td>
<td>Within 10% of Target</td>
<td></td>
</tr>
<tr>
<td>17</td>
<td>Nursing and Allied Professional Overtime</td>
<td>Apr-Oct 2019</td>
<td>3.9%</td>
<td>5.2%</td>
<td>Not Meeting Target</td>
<td></td>
</tr>
<tr>
<td>18</td>
<td>Lost Time Claims Rate</td>
<td>Apr-Jun 2019</td>
<td>5.3</td>
<td>4.0</td>
<td>Meeting Target</td>
<td></td>
</tr>
<tr>
<td></td>
<td>BUDGET ACCOUNTABILITY</td>
<td></td>
<td></td>
<td></td>
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</tr>
<tr>
<td>19</td>
<td>Budget Performance Ratio</td>
<td>Apr-Oct 2019</td>
<td>1.000</td>
<td>1.058</td>
<td>Not Meeting Target</td>
<td></td>
</tr>
</tbody>
</table>

## Maple Ridge Community

<table>
<thead>
<tr>
<th>No</th>
<th>Measure Name</th>
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</tr>
<tr>
<td>1</td>
<td>Worsened Pressure Ulcer in Long Term Care Facilities</td>
<td>Apr-Jun 2019</td>
<td>1.6%</td>
<td>2.20%</td>
<td>Meeting Target</td>
<td></td>
</tr>
<tr>
<td>2</td>
<td>Hospitalization Rates for Residents (Age 70+)</td>
<td>2018/2019</td>
<td>250.8</td>
<td>289.6</td>
<td>Not Meeting Target</td>
<td></td>
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<tr>
<td>3</td>
<td>Hospital Readmission Rates Overall</td>
<td>2018/2019</td>
<td>10.0%</td>
<td>9.7%</td>
<td>Meeting Target</td>
<td></td>
</tr>
<tr>
<td>4</td>
<td>Mental Health &amp; Substance Use Patients Hospital Readmission Rate (Age 15+)</td>
<td>2018/2019</td>
<td>13.3%</td>
<td>12.3%</td>
<td>Meeting Target</td>
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<tr>
<td>5</td>
<td>Patients with Chronic Conditions Admitted to Hospital (Age 75+)</td>
<td>2018/2019</td>
<td>3,448</td>
<td>2,943</td>
<td>Meeting Target</td>
<td></td>
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<tr>
<td>6</td>
<td>Low Acuity Emergency Visits by Community</td>
<td>Apr-Oct 2019</td>
<td>102.7</td>
<td>153.8</td>
<td>Not Meeting Target</td>
<td></td>
</tr>
<tr>
<td>7</td>
<td>Home Health Services Provided Within Benchmark Time</td>
<td>Apr-Oct 2019</td>
<td>50%</td>
<td>41.1%</td>
<td>Not Meeting Target</td>
<td></td>
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<tr>
<td>8</td>
<td>Wait Time for Home Health Assessment (RAI-HC)</td>
<td>Apr-Oct 2019</td>
<td>30.0</td>
<td>44.3</td>
<td>Meeting Target</td>
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<tr>
<td>9</td>
<td>Admissions to Long Term Care within 30 Days</td>
<td>Apr-Oct 2019</td>
<td>75%</td>
<td>47.4%</td>
<td>Not Meeting Target</td>
<td></td>
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<tr>
<td>10</td>
<td>Emergency Visits by Home Health Clients</td>
<td>Sep2018-Sep2019</td>
<td>75.8</td>
<td>79.2</td>
<td>Not Meeting Target</td>
<td></td>
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<tr>
<td>11</td>
<td>Emergency Visits by Long Term Care Clients</td>
<td>Sep2018-Sep2019</td>
<td>30.0</td>
<td>47.9</td>
<td>Not Meeting Target</td>
<td></td>
</tr>
</tbody>
</table>

### KPI Count By Status

- Meeting Target
- Within 10% of Target
- Not Meeting Target

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**Notes**

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