

Balanced Scorecard Q4 2017-18

Priority	Indicator	Target	Q1	Q2	Q3	Q4	YTD	Page
Strategic Direction 1: YOU FIRST								
Patient Experience	Overall patient satisfaction score - Medically Complex (MC) - Annual	83%	Annual				87%	1
	Patient satisfaction score - Low Tolerance Long Duration (LTLTD) program*	70%	65.2%	74.1%	73.7%	77.4%	73.1%	2
Customer Service Excellence	Percentage of complaints acknowledged within 5 days	100%	100%	100%	100%	100%	100%	3
	Overall patient experience score	90%	100%	100%	94%	96%	97%	4
Staff Experience	Staff engagement score - Biannual	70%	Biannual					5
	Turnover rate	5.0%	4.6%	4.9%	4.4%	5.5%	4.9%	6
	Sick time days	2.00	1.95	2.27	3.07	3.06	2.59	7
	Education as a percent of total expenses	0.25%	0.31%	N/A				8
Strategic Direction 2: LEAD INNOVATION								
Innovative Care Delivery	Number of improvement/process redesign projects initiated to support innovation	2/year	2	0	0	0	2	9
Extending Our Reach	Number of initiatives implemented leveraging technology to meet patient needs	4	0	1	2	0	3	10
Establish Partnerships	Number of new strategic partnerships	1/year	1	0	0	0	1	11
Strategic Direction 3: ACCESS & SUPPORT								
Information Access & Security	Percentage of electronic Patient Record (ePR) strategy implemented	TBD						12
Service Delivery	Alternate Level of Care (ALC) Rate	7.0	5.5	4.7	6.3	7.3	6.0	13
	New Pressure Ulcers (Stage 2 - 4)	2.5%	3.5%	3.1%	3.6%	3.9%	3.9%	14
	Falls with harm - Medically Complex	0.65	0.10	0.99	0.20	0.11	0.43	15
	Falls with harm - LTLTD	1.57	1.46	2.42	1.78	1.27	1.89	16
	Emergency Department (ED) Transfer rate	14.0	8.3	11.2	9.7	6.8	9.0	17
Community Partnerships	Number of new community partnerships	1/year	1	1	2	3	7	18
Strategic Direction 4: SUPPORTING TRANSFORMATION								
Environmental Sustainability	Total waste generation reduction	18.0%	18.7%	28.5%	19.5%	20.4%	21.6%	19
	Waste diversion rate to recycling	15.0%	15.6%	22.5%	18.9%	17.3%	18.5%	20
Financial Position	Total margin	0%	1.36%	1.46%	10.78%	11.76%	11.76%	21
	Current ratio	2.50	7.30	4.70	7.70	8.41	8.41	22
	Percentage of non-Ministry of Health and Long-Term Care revenue	13.3%	14.5%	14.4%	13.5%	13.3%	13.3%	23
Accountability and Support	Employee Performance Evaluation completion rate	100%	90%	89%	N/A	53%	77%	24
	Percentage of Individual Accountability Plans completed for leadership team	100%						25

Last Revised: July 3, 2018

Legend

Quality Improvement Plan indicator

Results

G	Equal to or outperforming target
Y	Within 10% of target
R	Underperforming target by greater than 10%

* 'Would you recommend this hospital to your friends and family?' Definitely yes response is positive.