

QIP Performance

F2023/24 as of October 2023

ED Time to Inpatient Bed

90th Percentile Emergency Department Wait Times for Inpatient Bed

Note: Reporting period Dec.2022-Nov. 2023

Workplace Violence Prevention

Number of workplace violence incidents reported by hospital Workers (as by defined by OHSa) within a 12 month period.

Note: Reporting period Jan-Dec 2023.

Transfer of Accountability

Transfer of Care related incidents

Patient Satisfaction

% answering "Completely" to survey question: "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?" Measured for T7,T8, T9 units.

Note 1: Data from before Apr. 2023 is only from H7.

Note 2: Issue with Vocantas data for July resulted in no data for 3 weeks.

Falls with Harm Prevention

Number of patient falls with harm per thousand inpatient days.

Note: There is a 30 day lag in reporting..

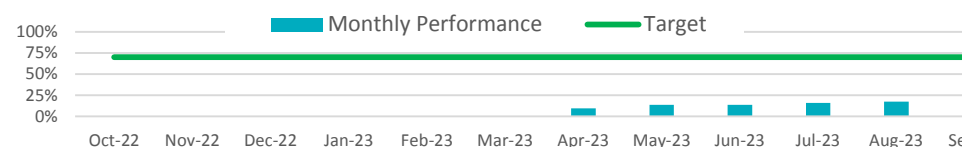
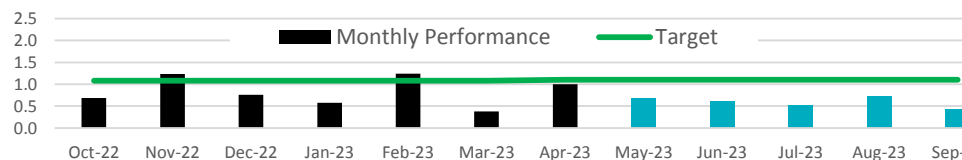
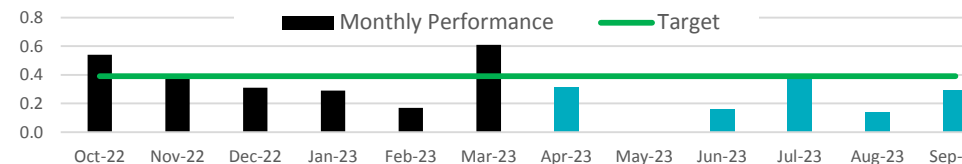
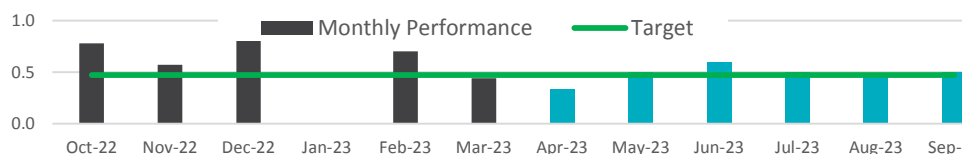
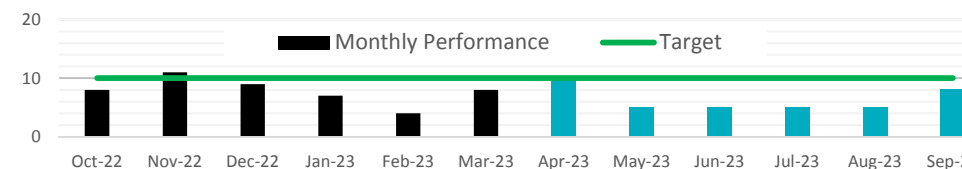
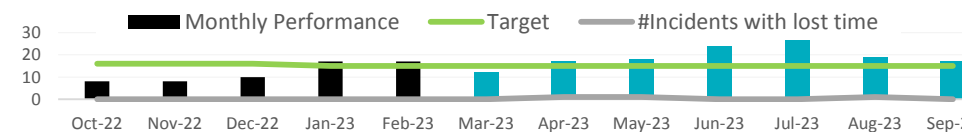
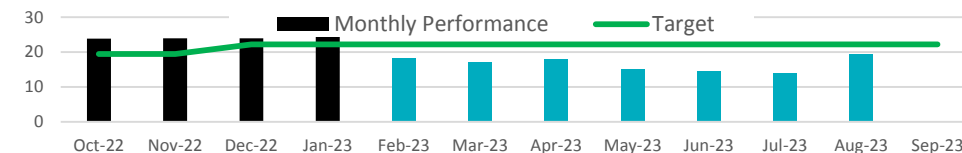
Pressure Injuries

Number of hospital acquired pressured injuries (PIs), stage 2 or greater per thousand inpatient days.

Equity, Diversity, Inclusion & Belonging (EDIB)

Rate of staff and leaders completing 100% anti-black racism training.

Note: A score of 100% is considered for completion.



Baseline

Target

YTD

22.2 hours

≤ 22.2 hours

18.4 hours
(Dec 22-Aug 23)



14.1/month
169.2/year

≥ 15.0/month
180/year

19.22
(Jan 23- Sep 23)



10.9

≤ 10.0

6.33
(Apr 23 - Sep 23)



45.0%

≥ 47.0%

48.3%
(Apr 23 - Sep 23)



0.41

≤ 0.39

0.21
(Apr 23 -Sep 23)



1.20

≤ 1.10

0.662
(Apr 23 – Sep 23)



(new metric, not available)

≥ 70.0 %

14.8%
(Apr 23 – Sep 23)



Will we Achieve Target?

Forecasted to Achieve

At Risk

Forecasted to NOT Achieve

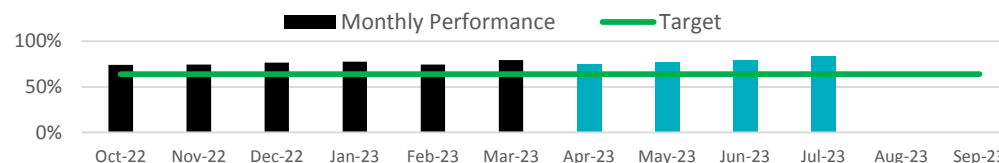
Key Quality Indicators

F2023/24 as of October 2023

Medication Reconciliation

% of patients with medication reconciliation plan upon discharge.

Note: There is a 30-60 day lag in reporting.



Baseline

61.0%

Target

≥ 64.0%

YTD

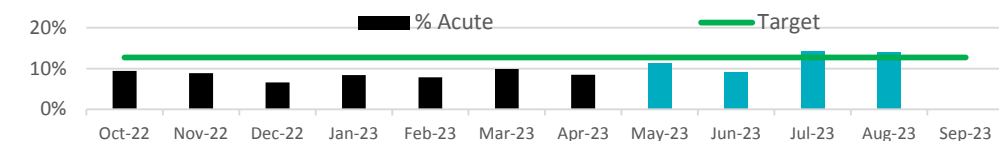
76.5%
(Apr 22 – Jul 23)



Alternate Level of Care (ALC)

% of acute inpatient days designated as ALC. Denominator is # IP Days not #Beds.

Note 1: 60 day lag in data from CCO.



15.1

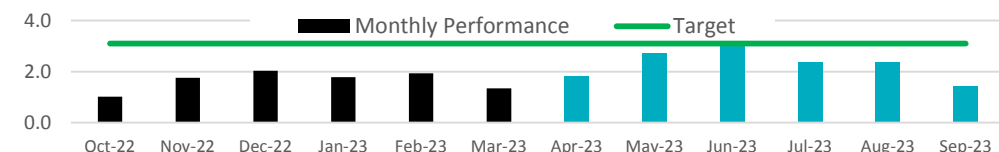
≤ 12.7

12.4%
(Apr 23 - Aug 23)



Medication Administration

Rate of medication incidents per thousand inpatient days



3.50

≤ 3.10

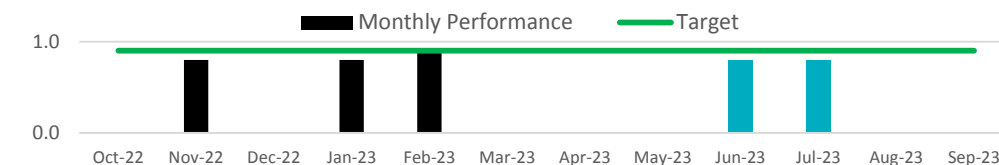
2.29
(Apr 23 – Sep 23)



Rescue from Danger

Number of “unexpected” adult inpatient decedents per Thousand discharges.

Note 1: Data analysis for Sept. in progress.



0.9

≤ 0.9

0.30
(Apr 23 - Aug 23)



Will we Achieve Target?

Forecasted to Achieve

At Risk

Forecasted to NOT Achieve

Achieved