

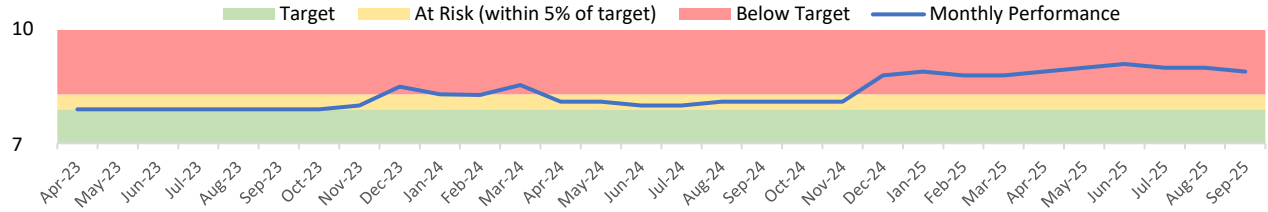
Quality Improvement Plan (QIP) Dashboard

Current as of November 11 2025

Access & Flow: ED Non-Admitted Length of Stay (High Acuity)

90th Percentile Emergency Department Non-Admitted Length of Stay (high acuity).

Note: Data is shown as cumulative monthly performance. Reporting period is from Dec 24-Nov 25.



8.1

≤ 7.9

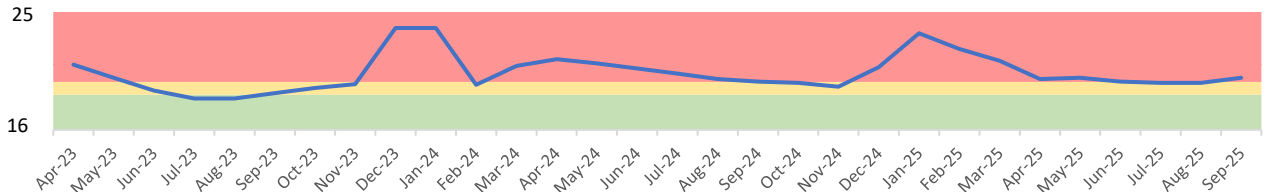
8.9
(DEC-SEP 25)



Access & Flow: ED Time to Inpatient Bed

90th Percentile Emergency Department time from disposition to bed (hrs).

Note: Data is shown as cumulative monthly performance. Reporting period is from Dec 24- Nov 25.



19.3

≤ 18.7

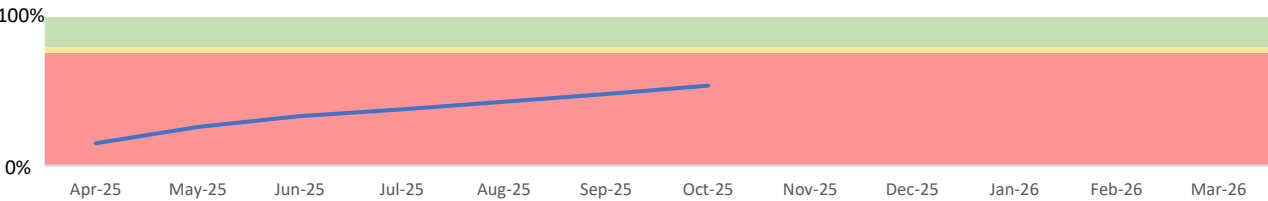
20.0
(DEC-SEP 25)



EDIB: Training for Foundations of Sexual and Gender Diversity

% of staff and leaders completing mandatory training for Foundations of Sexual and Gender Diversity.

Note: Data is shown as cumulative monthly performance. Reporting period is from Apr-25 to Mar-26.



N/A
(new metric)

≥ 80%

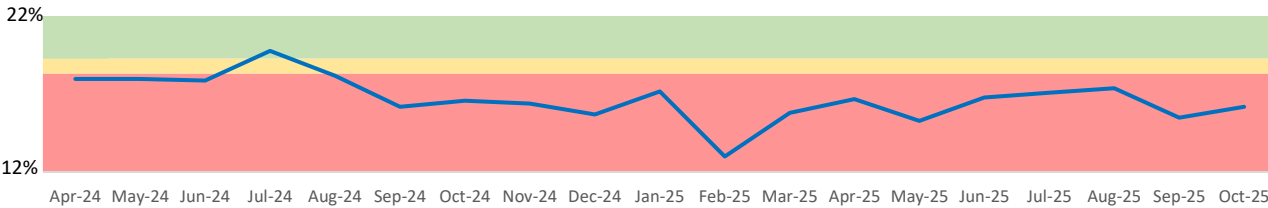
53.8%
(APR-OCT 25)



EDIB: Improve Health Equity Survey Completion

% of Adult Day Surgery and Adult Elective Surgical patients completing the Health Equity Questionnaire.

Note: Reporting period is from Apr-25 to Mar-26.



17.4%

≥ 19.1%

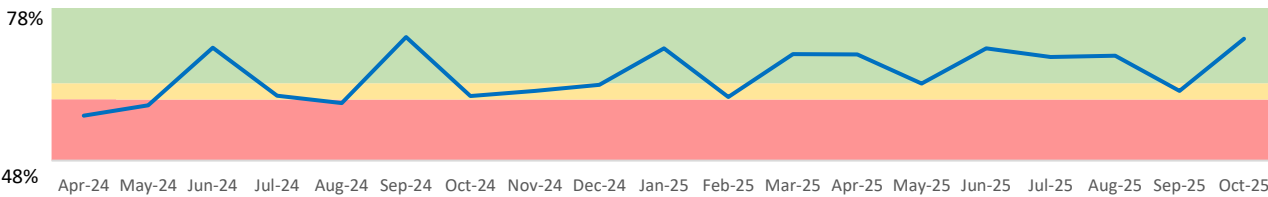
16.4%
(APR-OCT 25)



Patient Satisfaction

% of top box responses (“Completely”) to the 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”? All survey respondents discharged from MED & SUR.

Note: Reporting period is from Apr-25 to Mar-26. Surveys were paused for 2 weeks in August 2025.



60.2%

≥ 64%

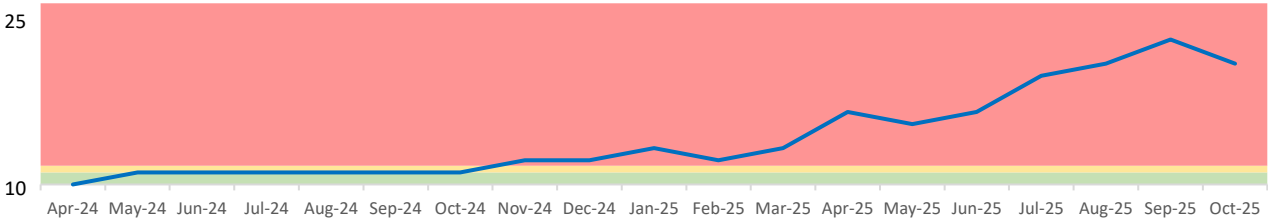
67.3%
(APR-OCT 25)



Safety: Workplace Violence and Prevention

Number of workplace violence incidents that result in a lost time reported by hospital workers (as by defined by OHSA) within a 12-month period.

Note: Data is shown as cumulative monthly performance. Reporting period is from Apr-25 to Mar-26.



12

≤ 11

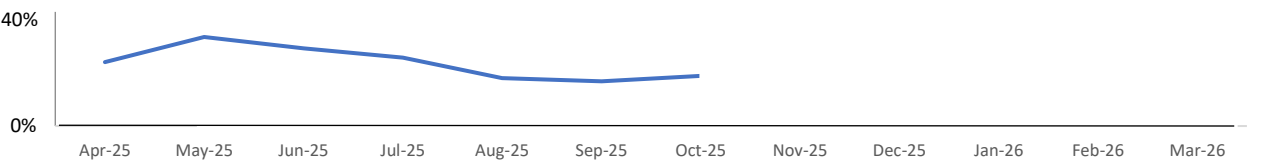
20
(NOV-OCT 25)



Safety: Restraint Use in ED

% restraint events longer than 4 hours in the Emergency Department. Still collecting baseline, so target is not set.

Note: Reporting period is from Apr-25 to Mar-26.



N/A
(new metric)

N/A
(new metric)

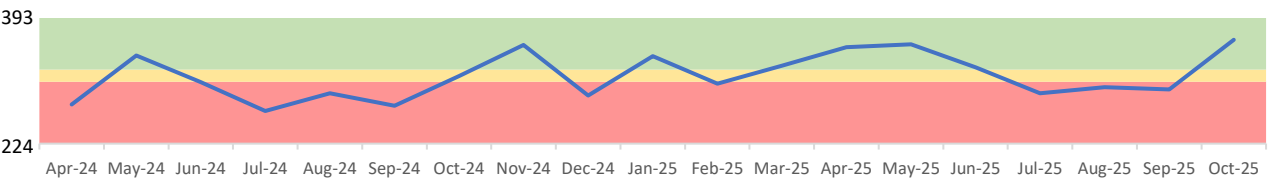
27.7%
(APR-OCT 25)



Safety: Patient Safety Incidents Reporting

Number of patient safety incidents reported per month.

Note: Reporting period is from Apr-25 to Mar-26.



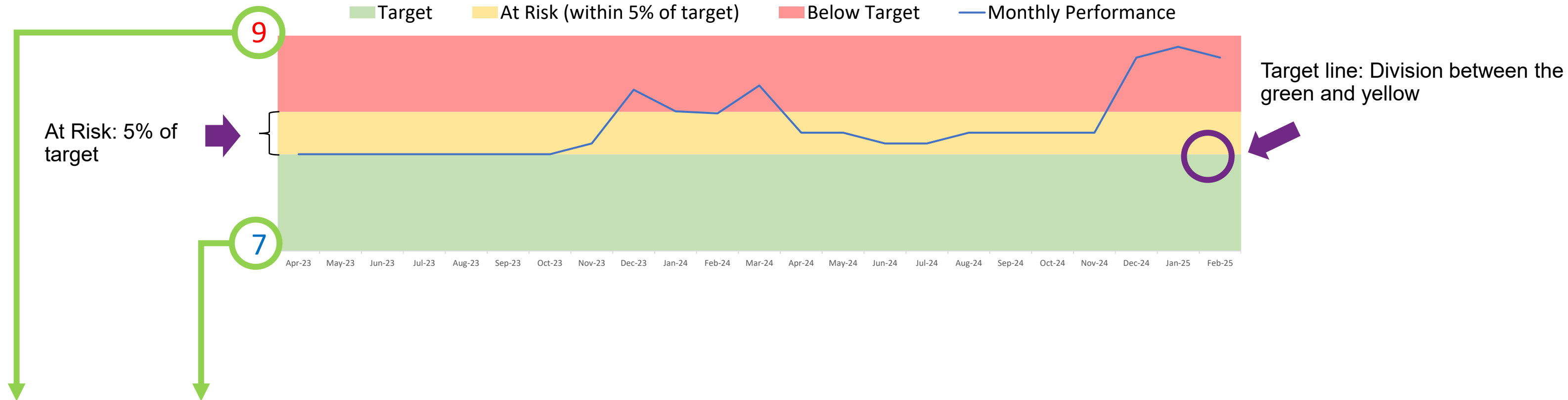
292

≥ 321

327
(APR-OCT 25)



Graph Breakdown and Calculations



Control Limits: The range of expected variation based on historical data, calculated as three standard deviations above and below the mean. Approximately 99.7% of the data points fall within the limits, assuming a normal distribution. Points that exceed the range indicate the process might be out of control and require further investigation.

Upper Control Limit: The highest value expected from the process under normal variation.

Lower Control Limit: The lowest value expected from the process under normal variation.