

QIP Scorecard

			Fiscal Year:					
			17/18	17/18	17/18	18/19	18/19	
Quality Dimension	Issue	QIP Outcome Measures	Target	Quarter 2	Quarter 3	Quarter 4	Quarter 1	Quarter 2
Safe	Medication Safety	Medication Reconciliation at Discharge**	93%	95%	98%	96%	99%	100%
	Workplace Violence	Number of Reported Workplace Violence Incidents	0 incidents					0 Incidents
	Quality Improvement Action Plan Measure:	Workplace Violence-Action Plan**		Completion of Action Plan (y/n)				
		Review/Update Workplace Violence Policy	Complete	n/a	in progress		in progress	
		Education and Training on Workplace Violence for Staff	Complete		y		y	
		Implementation of Flagging Process	Complete		y		y	
Monitoring and Reporting of Patient Flagging	Complete	y			y			
	Education and Training on the Patient Flagging Process	Complete	y		y			
Effective	Effective Transitions	Revisits to the ED for Mental Illness	Less than 16.3%	12.00%	39%	35%	17.8%	18.00%
		"Did You Receive Enough Information upon Discharge?"	85% response = "strongly agree" or "agree"	96%	95%	90%	94%	98%
		Readmission Rate for Congestive Heart Failure	22%	25%	15%	0%	6%	0%
	Quality Improvement Action Plan Measure:	Completion of CHF Discharge Checklist**		100%				85%
Patient-Centred	Person Experience	"Would you recommend this hospital?"	95% response = "yes"	95%	91%	90%	97%	98%
Efficient	Access to Right Level of Care	Alternate Level of Care Rate	9.15%	5.40%	7.40%	18.50%	21.30%	24.60%

** "pay at risk" indicator

Colour indicates performance relative to target that was in place for that time period

Legend		
Achieved/ Exceeds Target	Within 10% of Target (or within HSAA performance corridor-ALC)	>10% from Target