

# Vitalité Health Network

## Performance Report (June 2023)

### 1.0 Health results

|  | Benchmark | Target | Result | Quarterly trend | Annual trend |
|--|-----------|--------|--------|-----------------|--------------|
| 1.1 Hospitalization rate for ambulatory care sensitive conditions (hospitalization per 100,000 people) | 240       | 240    | 251    | –               | +            |
| 1.2 Percentage of hip and knee surgeries performed within 182 days                                     | 85.0 %    | 85.0 % | 51.5 % | –               | –            |
|  | 75.0 %    | 75.0 % | 49.7 % | ○               | –            |
| 1.3 Percentage of knee and hip surgeries waiting more than 365 days                                    | 0 %       | 0 %    | 5.0 %  | +               | +            |

### 3.0 Employee experience

|   | Benchmark | Target | Result | Quarterly trend | Annual trend |
|---|-----------|--------|--------|-----------------|--------------|
| 3.1 Turnover rate                                 | 10.0 %    | 10.0 % | 3.8 %  | ○               | +            |
| 3.2 Average number of paid sick days per employee | 10        | 10     | 12.6   | +               | –            |
| 3.3 Work accident rate with lost time             | 2.0       | 4.1    | 2.4    | +               | +            |
| 3.4 Percentage of vacant positions                | 7.1 %     | 7.1 %  | 9.0 %  | ○               | ○            |

Results: ■ Fails to meet target ■ Meets target (+/- 5%) ■ Better than target

### 2.0 Patient and family experience

|  | Benchmark | Target | Result | Quarterly trend | Annual trend |
|--|-----------|--------|--------|-----------------|--------------|
| 2.1 Percentage of level 4 and 5 visits to the emergency department                 | 31.0 %    | 31.0 % | 55.5 % | +               | ○            |
| 2.2 Rate of repeat hospital stays due to mental illness                            | 7.8 %     | 7.8 %  | 6.3 %  | +               | ○            |
| 2.3 Percentage of alternate level of care patients hospitalized in acute care beds | 16.7 %    | 16.7 % | 35.9 % | –               | –            |

### 4.0 Organizational excellence

|  | Benchmark     | Target         | Result | Quarterly trend | Annual trend |
|--|---------------|----------------|--------|-----------------|--------------|
| 4.1 Actual versus CIHI expected length of stay ratio   | 0.96          | 0.96           | 1.06   | ○               | ○            |
| 4.2 Percentage of surgeries waiting more than 365 days | 0 %           | 0 %            | 5.3 %  | +               | –            |
| 4.3 Overall hospital Readmission rate                  | 9.4           | 8.5            | 7.8    | ○               | +            |
| 4.4 Improvement rate                                   | Not available | Not applicable | 40 %   | +               | +            |
| 4.5 Variance in actual spending on operating budget    | Not available | +/- 1%         | -1.8 % | ○               | ○            |

Trend: + Positive – Negative ○ Stable

1.0 Health results

|  | Benchmark | Target | Result | Quarterly trend | Annual trend |
|--|-----------|--------|--------|-----------------|--------------|
| 1.1 Hospitalization rate for ambulatory care sensitive conditions (hospitalization per 100,000 people) | 240       | 240    | 251    | –               | +            |
| 1.2 Percentage of hip and knee surgeries performed within 182 days                                     | 85.0 %    | 85.0 % | 51.5 % | –               | –            |
|  | 75.0 %    | 75.0 % | 49.7 % | ○               | –            |
| 1.3 Percentage of knee and hip surgeries waiting more than 365 days                                    | 0 %       | 0 %    | 5.0 %  | +               | +            |

# 1. Health Outcomes

## 1.1 Hospitalization rate for ambulatory care sensitive conditions

Indicator showing hospitalizations for conditions that could have been prevented by better management by primary health care.

English

Français

2023-06-14

**i** Hospitalization for ambulatory care sensitive conditions is considered a measure of access to appropriate primary care. While not all admissions for these conditions are preventable, it is assumed that appropriate ambulatory care could prevent the onset of this type of disease or condition, help control an acute care episodic disease or condition, or help manage a chronic condition or disease.

**Additional information**  
Includes 7 conditions: COPD, angina, asthma, diabetes, hypertension, heart failure, epilepsy. Excludes those aged 75 and older. Excludes deaths.

**Formula**  
Total number of cases over 12 months / Area population.

**Leadership**  
Dr. Natalie Banville and Patrick Parent

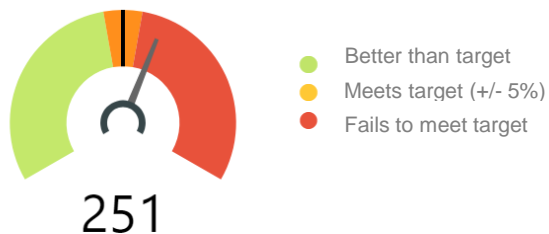
**Data source**  
CIHI

**Measure**  
Rate per 100,000 inhabitants

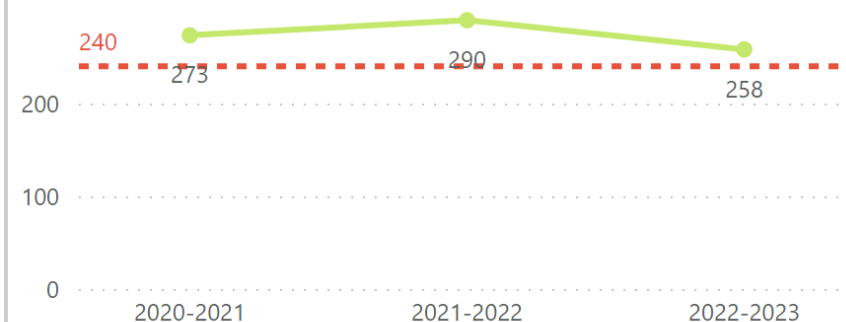
**Desired results**  
Reduction sought

**Target**  
240/100,000 (CIHI, Canadian result (2021–2022))

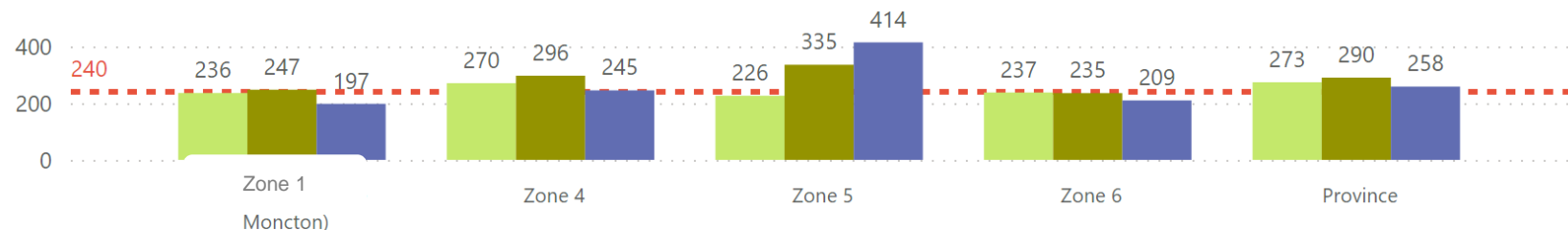
### Last quarter results available



### Trend over time



● 2020-2021 ● 2021-2022 ● 2022-2023



| Year<br>Zone | 2020-2021 |     |     |     | 2021-2022 |     |     |     | 2022-2023 |     |     |
|--------------|-----------|-----|-----|-----|-----------|-----|-----|-----|-----------|-----|-----|
|              | T1        | T2  | T3  | T4  | T1        | T2  | T3  | T4  | T1        | T2  | T3  |
| Zone 1       | 219       | 202 | 260 | 262 | 247       | 225 | 271 | 245 | 244       | 145 | 204 |
| Zone 4       | 338       | 226 | 304 | 213 | 310       | 227 | 328 | 321 | 234       | 221 | 280 |
| Zone 5       | 225       | 232 | 227 | 219 | 317       | 320 | 334 | 370 | 581       | 373 | 288 |
| Zone 6       | 206       | 254 | 230 | 260 | 271       | 223 | 238 | 208 | 191       | 198 | 239 |
| Province     | 273       | 258 | 281 | 281 | 296       | 275 | 299 | 289 | 314       | 210 | 251 |

# 1. Health Outcomes

## 1.2 Percentage of hip and knee surgeries performed within 182 days

Indicator that shows our ability as a Network to perform hip and knee surgeries within the timelines recommended in best practices.

**Information**  
This indicator helps assess access to surgical services by Network clients

**Additional information**  
None

**Formula**

$$\frac{\text{Number of hip and knee surgeries completed on time}}{\text{Total number of hip and knee surgeries completed}} \times 100$$

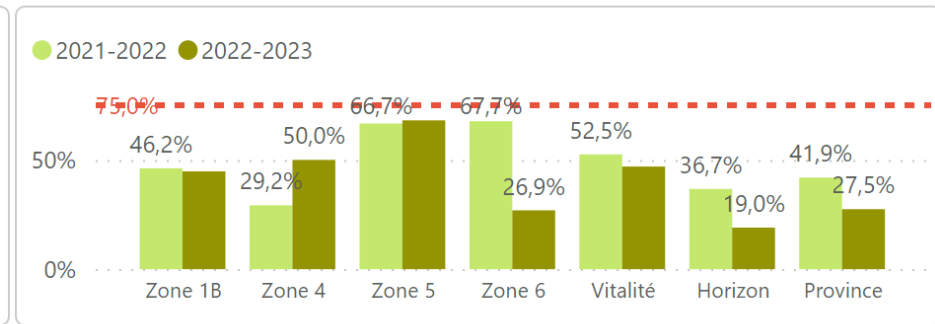
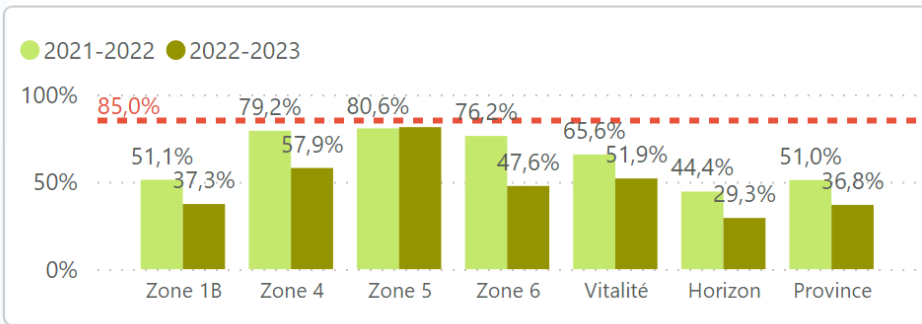
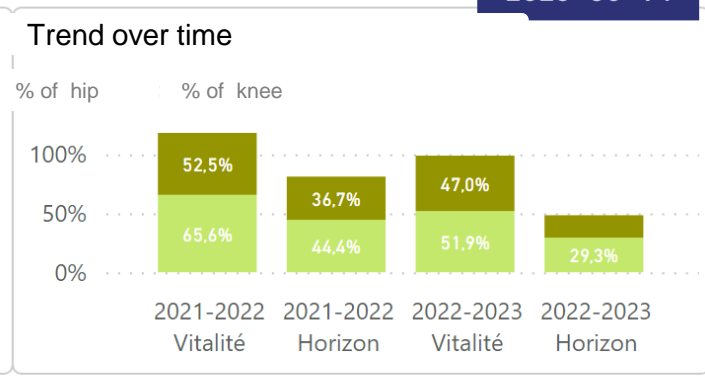
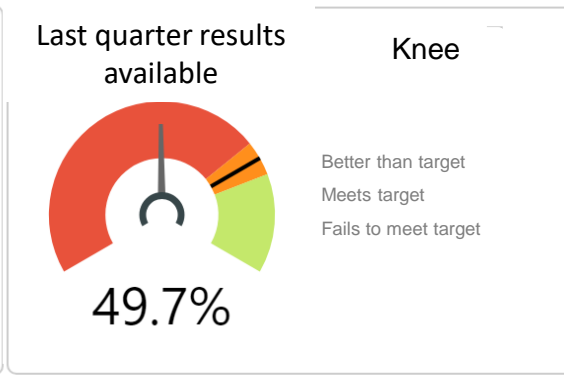
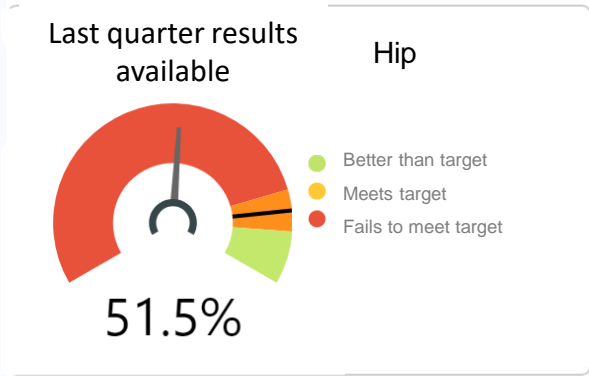
**Leadership**  
Dr. Natalie Banville

**Data source**  
CIHI

**Measure**  
Percentage

**Desired results**  
Increase sought

**Target**  
Canadian reference proposed by CIHI (2023):  
85% for hips and  
75% for knees



### % of hip surgeries completed on time

| Year     | 2021-2022 |       |       | 2022-2023 |       |       |       |
|----------|-----------|-------|-------|-----------|-------|-------|-------|
|          | T2        | T3    | T4    | T1        | T2    | T3    | T4    |
| Zone 1B  | 54.2%     | 62.2% | 34.5% | 41.2%     | 30.4% | 36.7% | 36.8% |
| Zone 4   | 90.9%     | 80.0% | 62.5% | 26.7%     | 56.5% | 83.3% | 65.4% |
| Zone 5   | 87.5%     | 66.7% | 84.2% | 73.9%     | 93.8% | 85.0% | 76.2% |
| Zone 6   | 83.3%     | 55.6% | 77.8% | 58.6%     | 40.7% | 38.1% | 50.0% |
| Vitalité | 74.6%     | 63.3% | 58.5% | 50.0%     | 51.7% | 55.4% | 51.5% |
| Horizon  | 50.6%     | 38.0% | 42.6% | 31.6%     | 30.9% | 30.4% | 26.0% |
| Province | 57.2%     | 45.7% | 48.3% | 38.6%     | 38.2% | 37.3% | 34.1% |

### % of knee surgeries completed on time

| Year     | 2021-2022 |       |       | 2022-2023 |       |       |       |
|----------|-----------|-------|-------|-----------|-------|-------|-------|
|          | T2        | T3    | T4    | T1        | T2    | T3    | T4    |
| Zone 1B  | 57.5%     | 41.7% | 35.7% | 42.4%     | 64.3% | 38.5% | 43.8% |
| Zone 4   | 33.3%     | 28.6% | 23.8% | 37.2%     | 48.5% | 59.3% | 59.0% |
| Zone 5   | 66.7%     | 83.3% | 58.3% | 48.7%     | 68.0% | 72.1% | 78.6% |
| Zone 6   | 76.0%     | 71.4% | 38.9% | 31.3%     | 37.2% | 25.6% | 15.4% |
| Vitalité | 60.0%     | 54.4% | 39.6% | 39.3%     | 50.4% | 49.6% | 49.7% |
| Horizon  | 40.6%     | 41.6% | 24.6% | 20.8%     | 18.6% | 19.9% | 17.4% |
| Province | 47.4%     | 45.3% | 29.8% | 27.5%     | 28.7% | 28.0% | 26.3% |

# 1. Health Outcomes

## 1.3 Percentage of hip and knee surgeries waiting more than 365 days

Indicator that shows our ability as a Network to perform hip and knee surgeries within the timelines recommended in best practices.



For surgeries waiting, wait times are calculated for surgeries waiting as of the last date in each quarter from the date that the patient and physician agree to the surgery and the patient is ready to receive it. Wait time is calculated using data collected through the Surgical Access Registry. These statistics do not include emergency surgeries. Timeframes during which the patient was not available to have surgery are excluded from wait time calculations.



### Additional information

None



### Formula

Number of surgeries waiting more than 12 months for hips and knees completed / Total surgeries waiting more than 12 months for hips and knees



### Leadership

Dre.Natalie Banville



### Data source

Surgical Access Registry



### Measure

Percentage



### Desired results

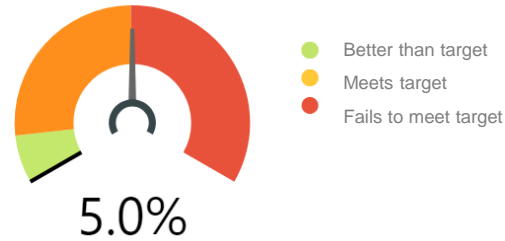
Reduction sought



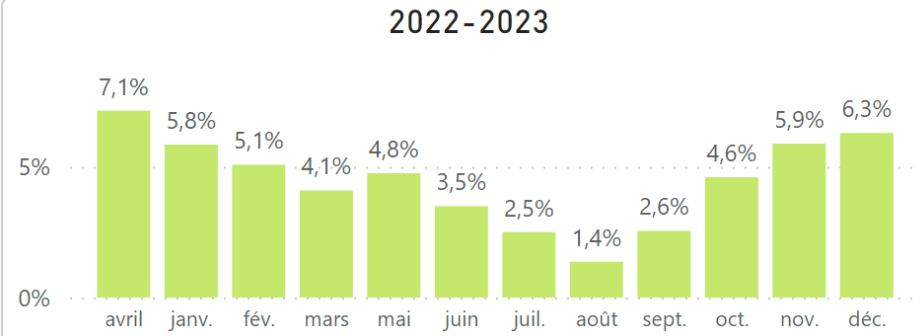
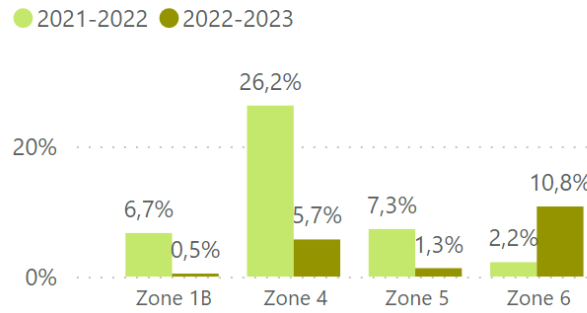
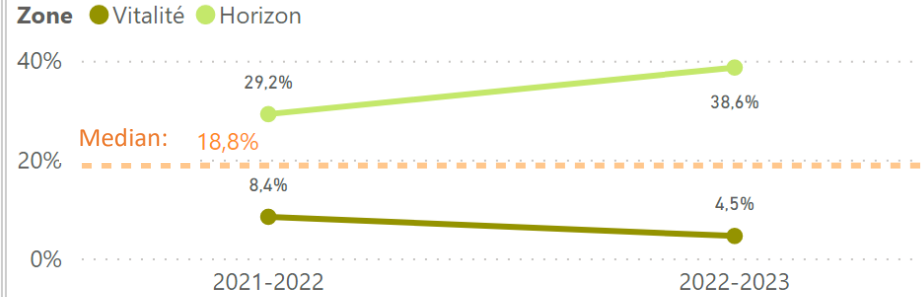
### Target

0% based on best practices (2023)

### Last quarter results available



### Trend over time



| Year     | 2021-2022 |       |       | 2022-2023 |       |       |       |
|----------|-----------|-------|-------|-----------|-------|-------|-------|
|          | T2        | T3    | T4    | T1        | T2    | T3    | T4    |
| Zone 1B  | 11,4%     | 6,1%  | 2,7%  | 0,8%      | 0,6%  | 0,5%  | 0,0%  |
| Zone 4   | 12,4%     | 33,6% | 31,1% | 19,2%     | 3,6%  | 1,6%  | 0,0%  |
| Zone 5   | 10,5%     | 6,5%  | 5,5%  | 1,4%      | 0,8%  | 2,8%  | 0,0%  |
| Zone 6   | 2,1%      | 2,0%  | 2,4%  | 4,7%      | 4,4%  | 15,7% | 16,0% |
| Vitalité | 9,0%      | 9,1%  | 7,3%  | 5,1%      | 2,2%  | 5,6%  | 5,0%  |
| Horizon  | 25,2%     | 30,1% | 31,7% | 37,9%     | 43,2% | 42,1% | 31,5% |
| Province | 21,1%     | 24,3% | 25,5% | 29,9%     | 32,7% | 32,1% | 24,2% |

## 2.0 Patient and family experience

|  | Benchmark | Target | Result | Quarterly trend | Annual trend |
|--|-----------|--------|--------|-----------------|--------------|
| 2.1 Percentage of level 4 and 5 visits to the emergency department | 31.0 %    | 31.0 % | 55.5 % | +               | ○            |
| 2.2 Rate of repeat hospital stays due to mental illness            | 7.8 %     | 7.8 %  | 6.3 %  | +               | ○            |
| 2.3 Percentage of ALC patients hospitalized in acute care beds     | 16.7 %    | 16.7 % | 35.9 % | -               | -            |

## 2. Patient and Family Experience

### 2.1 Percentage of level 4 and 5 patients with a primary health care provider visiting the emergency

Indicator that shows the percentage of patients who present to the emergency department and report having a primary health care provider.

2023-06-14



This indicator refers to the percentage of patients who present to the emergency department and report having a family doctor.



Additional information

Triage levels 4 and 5 only



Formula

Number of patients who report having a family doctor when visiting the emergency department / Number of emergency department visits.



Leadership

Patrick Parent



Data source

Ipeople



Measure

Percentage



Desired results

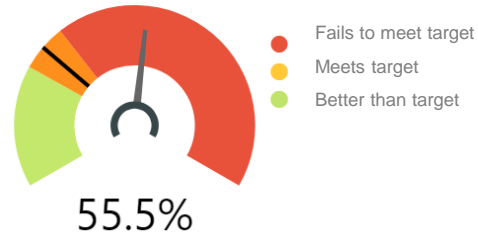
Reduction sought



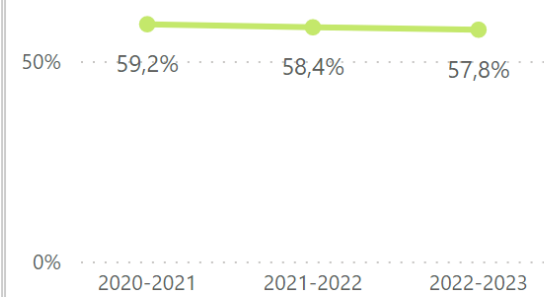
Target

31% (NACRS 2021)

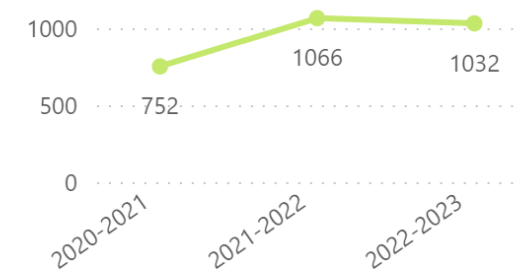
Last quarter results available



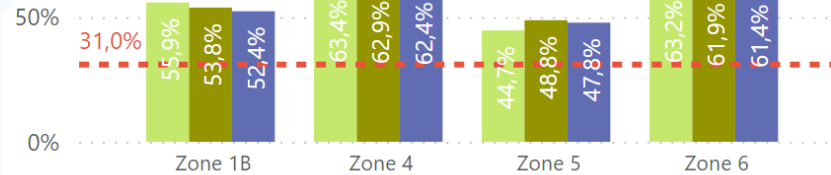
Trend over time



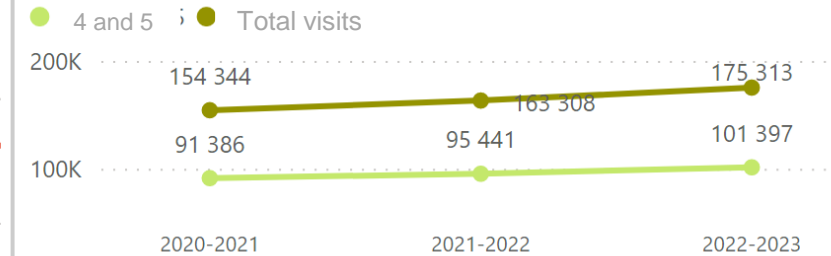
Number of patients referred in community settings



2020-2021 2021-2022 2022-2023



Number of visits to ER



| Year     | 2020-2021 |       |       |       | 2021-2022 |       |       |       | 2022-2023 |       |       |       |
|----------|-----------|-------|-------|-------|-----------|-------|-------|-------|-----------|-------|-------|-------|
|          | T1        | T2    | T3    | T4    | T1        | T2    | T3    | T4    | T1        | T2    | T3    | T4    |
| Zone 1B  | 56,2%     | 59,0% | 53,6% | 54,2% | 54,2%     | 54,5% | 53,5% | 52,9% | 53,5%     | 53,1% | 52,0% | 50,8% |
| Zone 4   | 62,3%     | 65,5% | 62,8% | 62,7% | 63,9%     | 64,2% | 62,4% | 60,6% | 62,7%     | 63,3% | 62,4% | 61,0% |
| Zone 5   | 44,5%     | 46,6% | 43,4% | 43,9% | 47,4%     | 50,8% | 48,5% | 48,2% | 50,6%     | 49,6% | 46,6% | 43,6% |
| Zone 6   | 62,7%     | 64,7% | 63,8% | 61,2% | 62,0%     | 63,4% | 61,1% | 60,8% | 63,2%     | 61,9% | 61,9% | 58,2% |
| Vitalité | 59,0%     | 61,4% | 58,5% | 57,6% | 58,6%     | 59,7% | 58,1% | 57,1% | 59,0%     | 58,7% | 57,7% | 55,5% |

## 2. Patient and Family Experience

### 2.2 Rate of repeat hospital stays due to mental illness

Indicator that shows the percentage of patients who have had repeat hospitalizations due to mental illness.

English

Français

2023-06-14



This indicator measures the percentage of patients who have had repeat hospitalizations due to mental illness. Frequent hospitalizations may indicate difficulties in obtaining care, medication and adequate support in the community. The Restigouche Hospital Centre is not included in the calculation of this indicator. Therefore, it has no impact on the results for Zone 5.



#### Additional information

Discharge diagnoses: Substance use disorders and addictive disorders, schizophrenia and other psychotic disorders, mood disorders, anxiety disorders, selected personality and behavioural disorders, other disorders.  
Readmission within the same facility

#### Formula

# of people with 3+ episodes of mental health care / # of people with 1 episode of mental health care



#### Leadership

Patrick Parent and Rino Lang



#### Data source

3M



#### Measure

Percentage



#### Desired results

Reduction sought



#### Target

7.8% based on the Network's result for the previous year

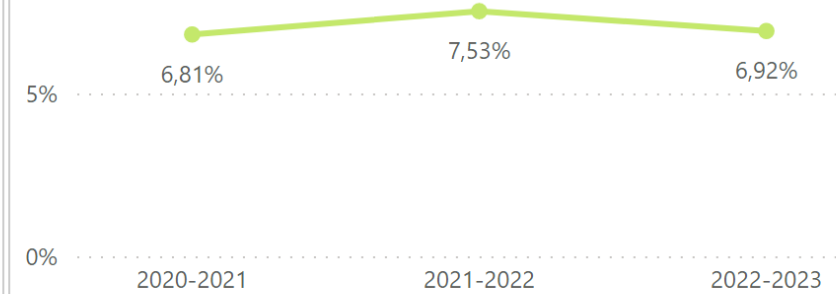
#### Last quarter results available



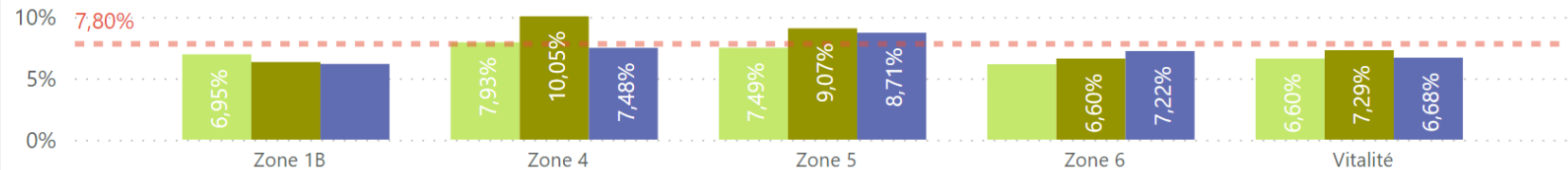
6.31%

- Better than target
- Meets target
- Fails to meet target

#### Trend over time



2020-2021 2021-2022 2022-2023



| Year<br>Zone | 2020-2021 |       |       |        | 2021-2022 |       |        |        | 2022-2023 |        |       |
|--------------|-----------|-------|-------|--------|-----------|-------|--------|--------|-----------|--------|-------|
|              | T1        | T2    | T3    | T4     | T1        | T2    | T3     | T4     | T1        | T2     | T3    |
| Zone 1B      | 7,49%     | 6,78% | 7,43% | 6,13%  | 7,81%     | 6,84% | 5,20%  | 5,56%  | 5,60%     | 7,47%  | 5,45% |
| Zone 4       | 7,60%     | 8,74% | 6,75% | 8,66%  | 8,98%     | 9,58% | 11,03% | 10,72% | 9,84%     | 6,85%  | 5,95% |
| Zone 5       | 4,29%     | 7,50% | 7,94% | 10,58% | 9,43%     | 8,84% | 9,42%  | 8,54%  | 7,14%     | 10,86% | 8,11% |
| Zone 6       | 6,82%     | 5,57% | 5,43% | 6,77%  | 6,53%     | 6,44% | 6,26%  | 7,20%  | 6,01%     | 6,76%  | 9,14% |
| Vitalité     | 6,64%     | 6,54% | 6,24% | 6,99%  | 7,33%     | 7,27% | 7,18%  | 7,37%  | 6,68%     | 7,05%  | 6,31% |



## 2. Patient and Family Experience

### 2.2 Repeat hospital stays for mental health and substance use

Indicator that shows the percentage of patients who have had repeat hospitalizations due to mental illness.

English

Français

2023-06-14



This indicator measures the risk-adjusted percentage of individuals who have had 3 or more episodes of care for mental health and substance use disorders among all those who had at least one episode of care for mental health and substance use disorders in general or psychiatric hospitals in a given year.



#### Additional information

Responsible discharge diagnoses:  
Substance use disorders and addictive disorders, schizophrenia and other psychotic disorders, mood disorders, anxiety disorders, selected personality and behavioral disorders, other disorders.  
Readmission within the same facility

#### Formula



Total number of individuals who had at least 3 episodes of care for MHSU disorders [repeat hospitalizations] in a 1-year period ÷ Total number of individuals who had at least one episode of care for MHSU disorders in a 1-year period × 100



#### Leadership

Patrick Parent and Rino Lang



#### Data source

CIHI



#### Measure

Percentage



#### Desired results

Reduction sought



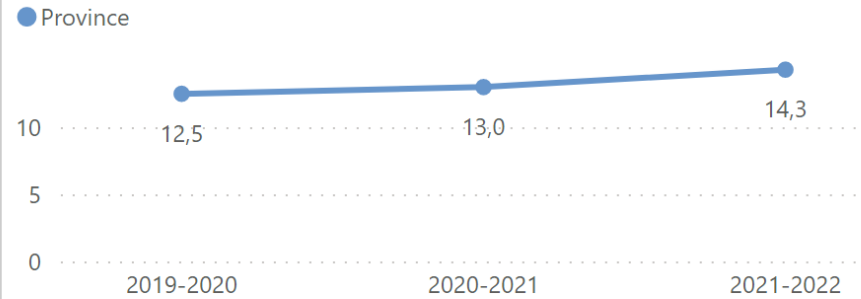
#### Target

13.5% based on the Network's result for the previous year

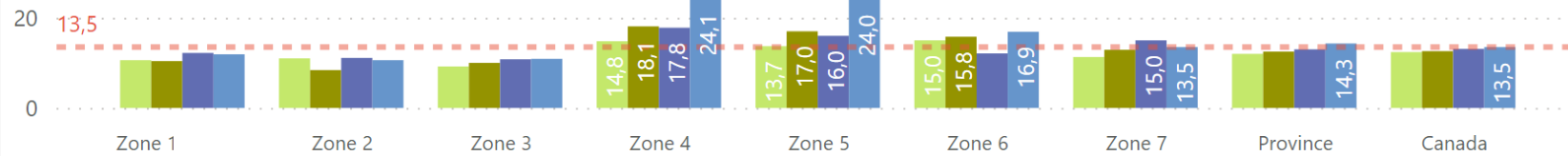
#### Last quarter results available



#### Trend over time



2018-2019 2019-2020 2020-2021 2021-2022



| Zone     | 2018-2019 | 2019-2020 | 2020-2021 | 2021-2022 |
|----------|-----------|-----------|-----------|-----------|
| Zone 1   | 10,6      | 10,4      | 12,2      | 11,9      |
| Zone 4   | 14,8      | 18,1      | 17,8      | 24,1      |
| Zone 5   | 13,7      | 17,0      | 16,0      | 24,0      |
| Zone 6   | 15,0      | 15,8      | 12,1      | 16,9      |
| Province | 12,0      | 12,5      | 13,0      | 14,3      |
| Canada   | 12,4      | 12,6      | 13,1      | 13,5      |

## 2. Patient and Family Experience

### 2.3 Percentage of alternate level of care patients hospitalized in acute care beds

Indicator that shows the percentage of acute care beds occupied by patients who would be able to receive care outside the hospital.

English

Français

2023-06-14

**i** This indicator reflects the percentage of alternate level of care patients in acute care beds. The vast majority of ALC days are associated with elderly people.

**Additional information**

Acute care only.

**Formula**

Number of NSA days / Total days over the same period

**Leadership**

Sharon Smyth Okana and Yves Goudreau

**Data source**

3M

**Limit**

None

**Measure**

Percentage

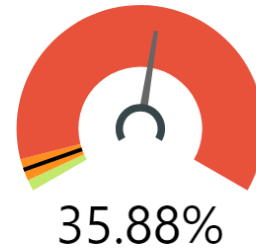
**Desired results**

Reduction sought

**Target**

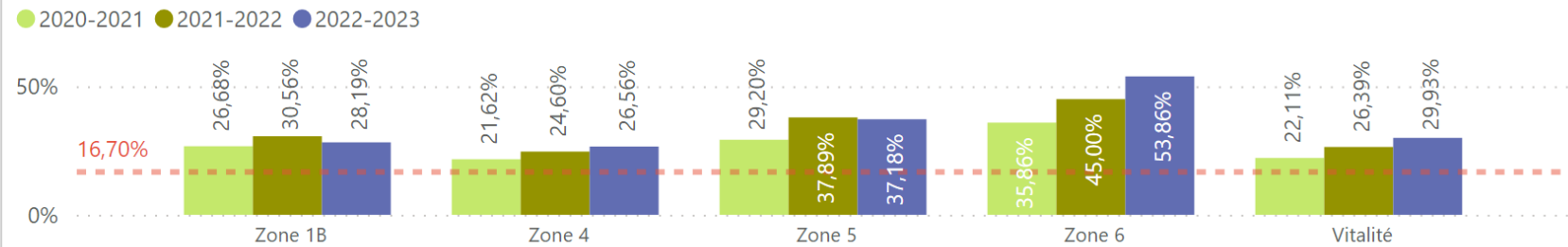
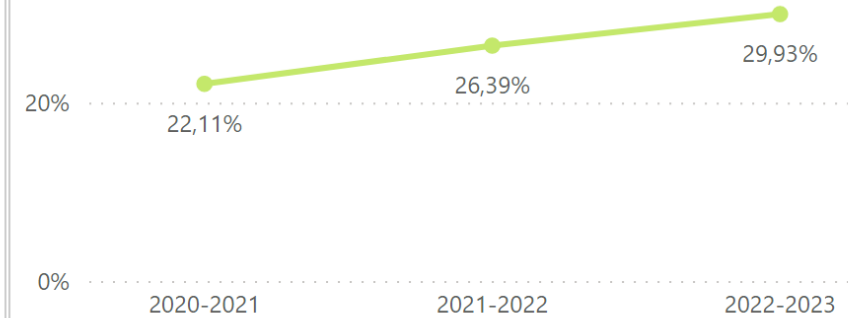
16.7% based on CIHI (2020–2021)

#### Last quarter results available



- Better than target
- Meets target
- Fails to meet target

#### Trend over time



| Year<br>Zone | 2020-2021 |        |        |        | 2021-2022 |        |        |        | 2022-2023 |        |        |
|--------------|-----------|--------|--------|--------|-----------|--------|--------|--------|-----------|--------|--------|
|              | T1        | T2     | T3     | T4     | T1        | T2     | T3     | T4     | T1        | T2     | T3     |
| Zone 1B      | 27,69%    | 20,78% | 32,02% | 24,73% | 25,28%    | 33,22% | 37,92% | 26,57% | 22,83%    | 30,39% | 31,37% |
| Zone 4       | 11,51%    | 17,62% | 21,80% | 31,76% | 22,02%    | 25,19% | 19,08% | 30,74% | 18,85%    | 19,95% | 37,11% |
| Zone 5       | 16,22%    | 43,81% | 25,11% | 33,06% | 39,76%    | 35,62% | 40,91% | 33,82% | 23,53%    | 25,74% | 56,46% |
| Zone 6       | 37,63%    | 21,59% | 37,12% | 43,77% | 40,67%    | 41,69% | 50,59% | 46,25% | 51,24%    | 51,04% | 58,67% |
| Vitalité     | 22,73%    | 19,68% | 19,83% | 25,97% | 25,50%    | 23,53% | 29,25% | 27,09% | 25,62%    | 27,07% | 35,88% |

### 3.0 Employee experience

|   | Benchmark | Target | Result | Quarterly trend | Annual trend |
|---|-----------|--------|--------|-----------------|--------------|
| 3.1 Turnover rate                                 | 10.0 %    | 10.0 % | 3.8 %  | ○               | +            |
| 3.2 Average number of paid sick days per employee | 10        | 10     | 12.6   | +               | -            |
| 3.3 Work accident rate with lost time             | 2.0       | 4.1    | 2.4    | +               | +            |
| 3.4 Percentage of vacant positions                | 7.1 %     | 7.1 %  | 9.0 %  | ○               | ○            |

### 3. Employee Experience

#### 3.1 Turnover rate

Indicator that shows the percentage of employees leaving the organization.

English

Français



2023-06-14

**i** Percentage representing the number of employees leaving the organization during the reporting period relative to the total number of employees in the organization at the end of the reporting period.

**gauge** **Additional information**  
The turnover rate is annualized. It only takes into account permanent full-time and part-time positions.

**Σ** **Formula**  
Number of departures during the reference period/Total number of employees at the end of the reference period

**person** **Leadership**  
Frédéric Finn

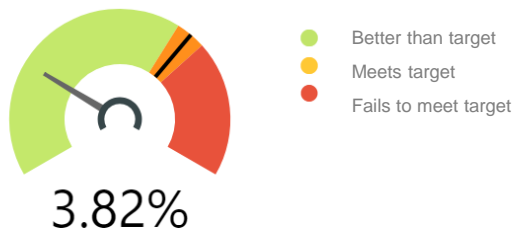
**database** **Data source**  
Meditech

**ruler** **Measure**  
Percentage

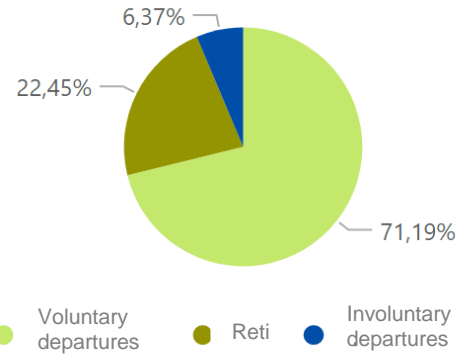
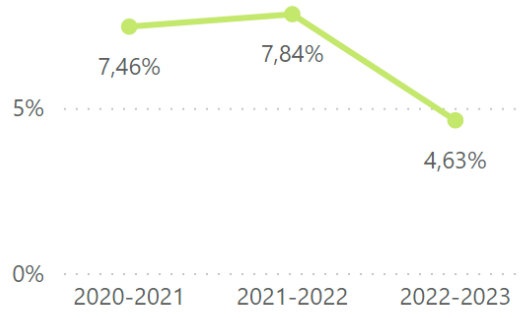
**up arrows** **Desired results**  
Reduction sought

**target** **Target**  
5.0% based on industry benchmark

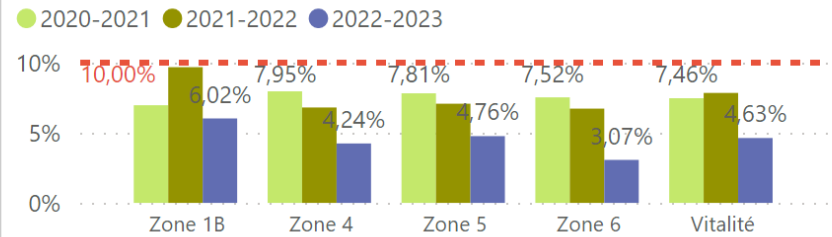
#### Last quarter results available



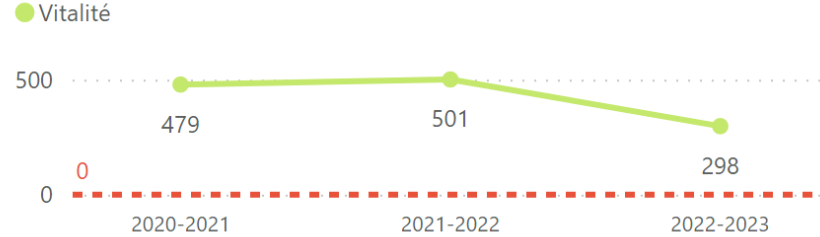
#### Trend over time



#### Distribution of departures



#### Number of departures



| Year<br>Zone | 2020-2021 |        |        |       | 2021-2022 |        |       |       | 2022-2023 |       |       |       |
|--------------|-----------|--------|--------|-------|-----------|--------|-------|-------|-----------|-------|-------|-------|
|              | T1        | T2     | T3     | T4    | T1        | T2     | T3    | T4    | T1        | T2    | T3    | T4    |
| Zone 1B      | 5,57%     | 6,80%  | 8,73%  | 6,74% | 7,45%     | 13,65% | 8,71% | 8,90% | 10,00%    | 3,87% | 5,25% | 5,04% |
| Zone 4       | 8,03%     | 10,69% | 6,16%  | 6,92% | 6,59%     | 9,79%  | 6,87% | 3,94% | 8,25%     | 3,24% | 1,63% | 3,88% |
| Zone 5       | 6,91%     | 5,87%  | 11,74% | 6,71% | 8,47%     | 8,08%  | 7,45% | 4,26% | 7,87%     | 3,22% | 4,69% | 3,24% |
| Zone 6       | 5,50%     | 8,41%  | 9,85%  | 6,34% | 4,95%     | 12,10% | 5,83% | 4,01% | 4,21%     | 2,41% | 3,06% | 2,60% |
| Vitalité     | 6,27%     | 7,83%  | 9,09%  | 6,66% | 6,77%     | 11,49% | 7,33% | 5,76% | 7,65%     | 3,23% | 3,84% | 3,82% |

### 3. Employee Experience

## 3.2 Average number of paid sick days per employee

Indicator that shows absenteeism of Network employees.

English

Français

2023-06-14

**i** This indicator reflects the average paid sick days per Vitalité Health Network employee. Absenteeism can be caused by problems with physical health, psychological health, the work environment and family situations.

**Additional information**

None

**Formula**

Number of sick hours/Average number of permanent employees

**Leadership**  
Frédéric Finn

**Data source**  
Meditech

**Limit**  
None

**Measure**  
Days

**Desired results**  
Reduction sought

**Target**  
12.8 days based on the Canada Labour Code

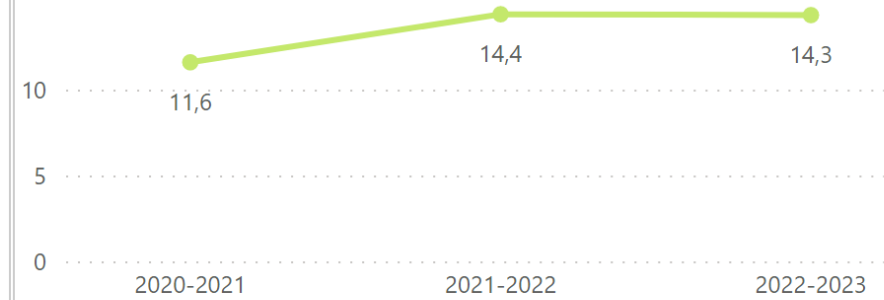
Last quarter results available



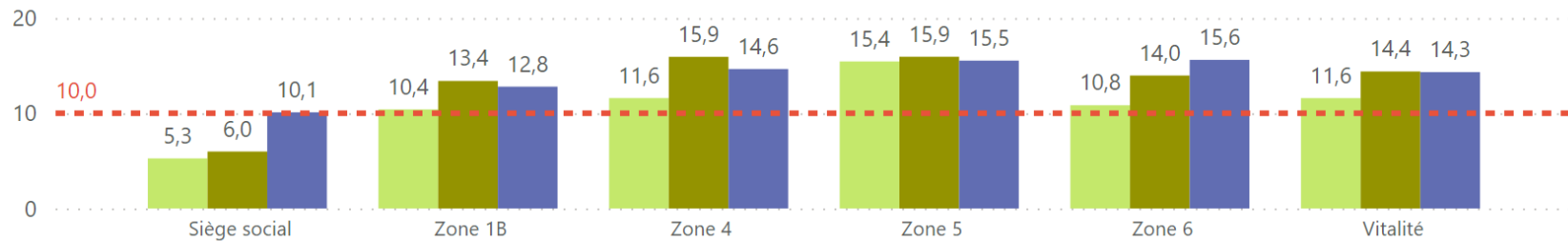
12.6

- Better than target
- Meets target
- Fails to meet target

Trend over time



2020-2021 2021-2022 2022-2023



| Year         | 2020-2021 |      |      |      | 2021-2022 |      |      |      | 2022-2023 |      |      |      |
|--------------|-----------|------|------|------|-----------|------|------|------|-----------|------|------|------|
|              | T1        | T2   | T3   | T4   | T1        | T2   | T3   | T4   | T1        | T2   | T3   | T4   |
| Siège social | 3,0       | 4,2  | 8,1  | 6,0  | 9,3       | 2,6  | 6,5  | 5,7  | 9,4       | 11,4 | 13,3 | 6,6  |
| Zone 1B      | 8,8       | 10,9 | 11,1 | 10,7 | 14,7      | 11,7 | 13,3 | 13,9 | 14,6      | 12,3 | 13,5 | 10,8 |
| Zone 4       | 9,6       | 13,3 | 13,1 | 10,4 | 17,0      | 14,0 | 16,7 | 15,9 | 15,2      | 14,4 | 15,9 | 13,1 |
| Zone 5       | 13,7      | 17,6 | 16,0 | 14,4 | 17,7      | 14,8 | 15,3 | 16,0 | 17,0      | 16,1 | 15,3 | 13,7 |
| Zone 6       | 9,5       | 10,4 | 12,3 | 11,1 | 16,4      | 11,2 | 14,2 | 14,0 | 16,9      | 15,4 | 15,9 | 14,2 |
| Vitalité     | 10,0      | 12,4 | 12,7 | 11,4 | 16,0      | 12,4 | 14,5 | 14,6 | 15,7      | 14,1 | 14,9 | 12,6 |

### 3. Employee Experience

#### 3.3 Work accident rate with lost time

Indicator that shows the frequency of workplace accidents.

English

Français

2023-06-14

**i** This indicator reflects the frequency of lost-time accidents. It includes any accident in which an employee is absent during the shift following the accident.

**Additional information**  
None

**Formula**  
$$\frac{\text{(Number of accidents at work with loss of time * 200,000 hours)}}{\text{Number of hours worked}}$$

**Leadership**  
Frédéric Finn

**Data source**  
Parklane and Meditech

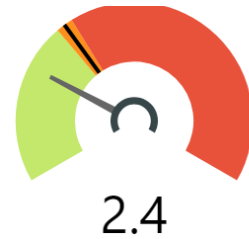
**Limit**  
None

**Measure**  
Rate

**Desired results**  
Reduction sought

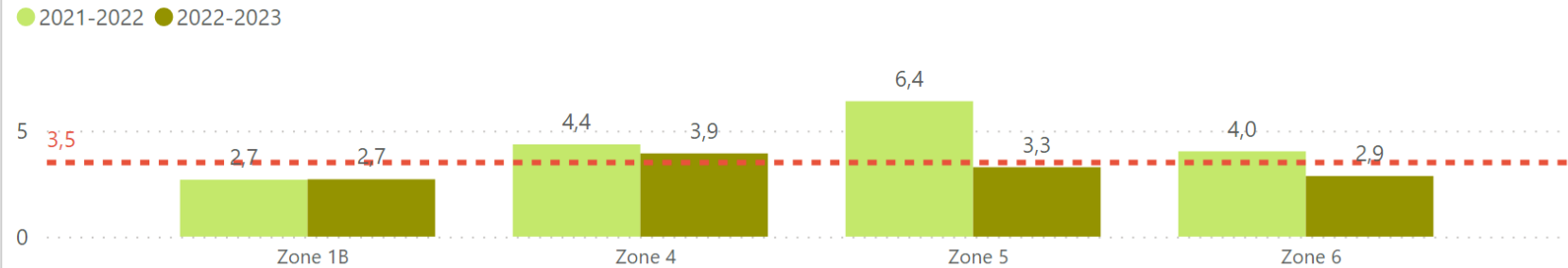
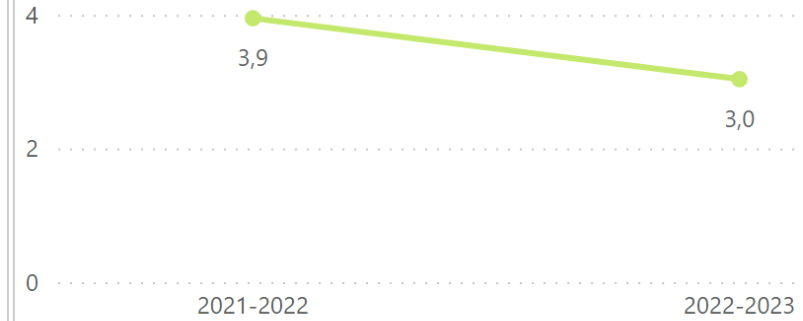
**Target**  
3.5 determined by the Leadership Team

#### Last quarter results available



- Better than target
- Meets target
- Fails to meet target

#### Trend over time



| Year     | 2021-2022 |     |     |     | 2022-2023 |     |     |     |
|----------|-----------|-----|-----|-----|-----------|-----|-----|-----|
|          | T1        | T2  | T3  | T4  | T1        | T2  | T3  | T4  |
| Zone 1B  | 1,8       | 2,7 | 2,5 | 3,8 | 3,3       | 1,7 | 3,3 | 2,5 |
| Zone 4   | 3,1       | 5,1 | 2,8 | 6,4 | 2,5       | 4,3 | 5,4 | 3,3 |
| Zone 5   | 4,8       | 5,4 | 8,2 | 7,2 | 5,1       | 3,4 | 2,9 | 1,7 |
| Zone 6   | 3,4       | 2,6 | 4,6 | 5,4 | 1,7       | 5,4 | 2,3 | 2,2 |
| Vitalité | 3,0       | 3,6 | 4,1 | 5,2 | 3,0       | 3,4 | 3,3 | 2,4 |

### 3. Employee Experience

#### 3.4 Vacant positions (permanent positions)

Indicator that shows the percentage of positions posted without being filled.

English

Français

2023-06-14

**i** Percentage representing the number of vacant positions relative to the average number of positions in the organization for the reference period.

**🕒** Additional information

None

**Σ** Formula

(Number of vacancies (period)/Total or average number of positions in the organization) X 100

**👤** Leadership  
Frédéric Finn

**🗄️** Data source  
Parklane and Meditech

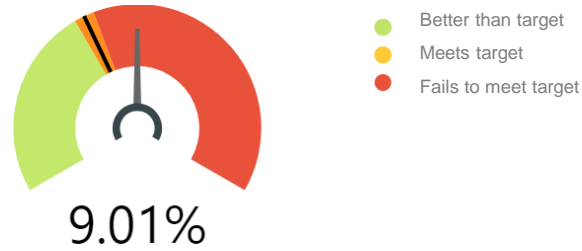
**🕒** Limit  
None

**📏** Measure  
Rate

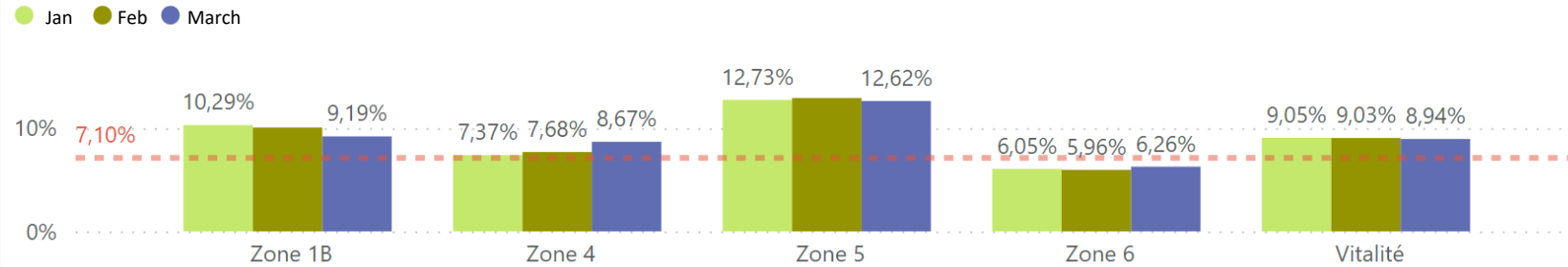
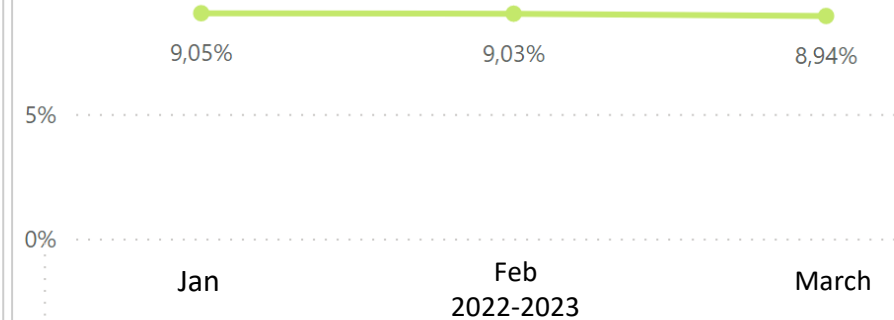
**🔄** Desired results  
Reduction sought

**🎯** Target  
7.1% based on the previous year's result

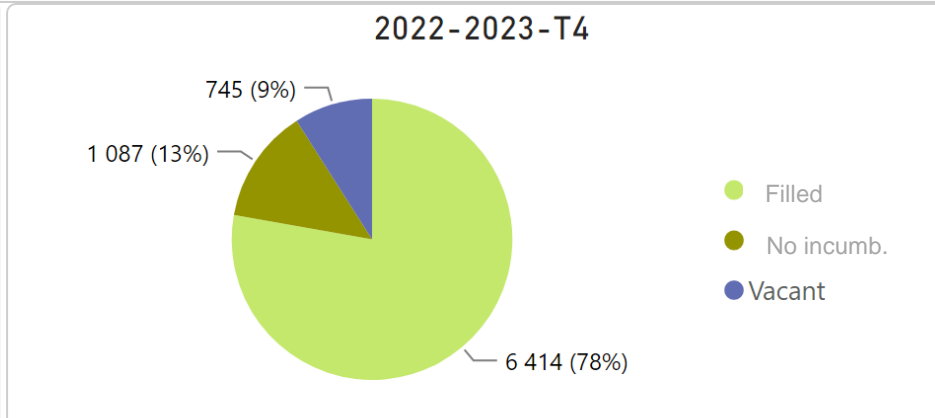
#### Last quarter results available



#### Trend over time



| Year Quarter | 2022-2023 |        |        |
|--------------|-----------|--------|--------|
|              | T4        |        |        |
| Zone         | Jan       | Feb    | March  |
| Zone 1B      | 10,29%    | 10,05% | 9,19%  |
| Zone 4       | 7,37%     | 7,68%  | 8,67%  |
| Zone 5       | 12,73%    | 12,91% | 12,62% |
| Zone 6       | 6,05%     | 5,96%  | 6,26%  |
| Vitalité     | 9,05%     | 9,03%  | 8,94%  |



## 4.0 Organizational excellence

|  | Benchmark     | Target         | Result | Quarterly trend | Annual trend |
|--|---------------|----------------|--------|-----------------|--------------|
| 4.1 Actual versus CIHI expected length of stay ratio | 0.96          | 0.96           | 1.06   | ○               | ○            |
| 4.2 Percentage of surgeries waiting > 365 days       | 0 %           | 0 %            | 5.3 %  | +               | -            |
| 4.3 Overall hospital readmission rate                | 9.4           | 8.5            | 7.8    | ○               | +            |
| 4.4 Improvement rate                                 | Not available | Not applicable | 40 %   | +               | +            |
| 4.5 Variance in actual spending on operating budget  | Not available | +/- 1%         | -1.8 % | ○               | ○            |



## 4. Organizational Excellence

### 4.1 Actual versus CIHI expected length of stay ratio

Indicator that shows the percentage of positions posted without being filled.

English

Français

2023-06-14



This indicator represents the effectiveness of the length of stay in our hospitals for typical cases. It represents the difference between the length of stay in acute care and CIHI's expected length of stay. Typical cases exclude deaths, transfers between acute care facilities, discharges against physician advice, and extended stays (beyond the demarcation point). ALC days are also excluded from the calculation for this indicator.

#### Additional information



None



#### Formula

Number of typical hospitalization days / the number of days of hospitalization planned by CIHI



#### Leadership

Yves Goudreau



#### Measure

Ratio



#### Desired results

Reduction sought



#### Target

0.96 based on Canadian average (CIHI 2020–2021)

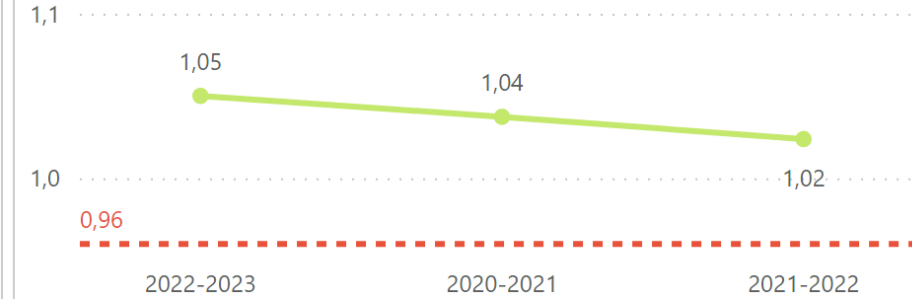
#### Last quarter results available



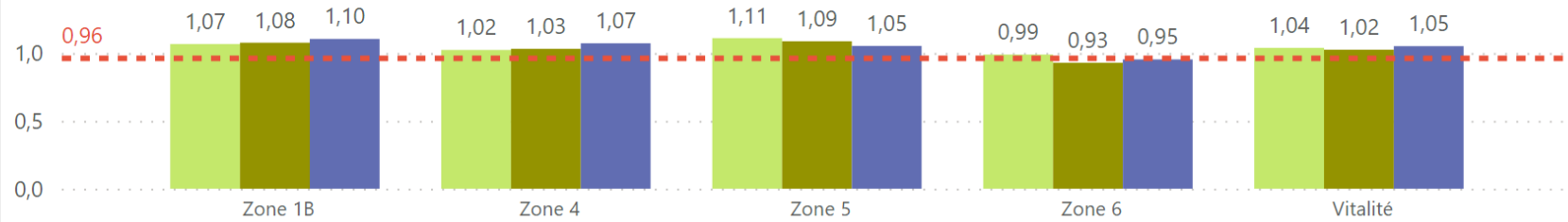
1.06

- Better than target
- Meets target
- Fails to meet target

#### Trend over time



● 2020-2021 ● 2021-2022 ● 2022-2023



| Year     | 2020-2021 |      |      |      | 2021-2022 |      |      |      | 2022-2023 |      |      |
|----------|-----------|------|------|------|-----------|------|------|------|-----------|------|------|
| Zone     | T1        | T2   | T3   | T4   | T1        | T2   | T3   | T4   | T1        | T2   | T3   |
| Zone 1B  | 1,08      | 1,09 | 1,04 | 1,06 | 1,11      | 1,08 | 1,05 | 1,05 | 1,04      | 1,17 | 1,10 |
| Zone 4   | 0,99      | 1,09 | 1,00 | 1,00 | 0,99      | 1,02 | 1,03 | 1,08 | 1,03      | 1,09 | 1,09 |
| Zone 5   | 1,21      | 1,09 | 1,07 | 1,09 | 1,11      | 1,17 | 1,03 | 1,01 | 1,07      | 1,04 | 1,05 |
| Zone 6   | 1,05      | 0,99 | 1,01 | 0,91 | 0,93      | 0,98 | 0,89 | 0,91 | 0,98      | 0,91 | 0,97 |
| Vitalité | 1,06      | 1,06 | 1,02 | 1,01 | 1,03      | 1,05 | 1,00 | 1,02 | 1,03      | 1,06 | 1,06 |

## 4. Organizational Excellence

### 4.2 Percentage of surgeries waiting more than 365 days

Indicator that shows the percentage of surgeries waiting more than one year.

English

Français

2023-06-14



For surgeries waiting, wait times are calculated for surgeries waiting as of the last day in each quarter from the date that the patient and surgeon agree to the surgery and the patient is ready to receive it. Wait time is calculated using data collected through the Surgical Access Registry. These statistics do not include emergency surgeries. Timeframes during which the patient was not available to have surgery are excluded from wait time calculations.



#### Additional information

Categories are grouped and divided according to the number of months > 365 days



#### Formula

Number of surgeries waiting more than 12 months / Total surgeries waiting



#### Leadership

Dr. Natalie Banville



#### Data source

Surgical Access Registry



#### Measure

Pourcentage



#### Desired results

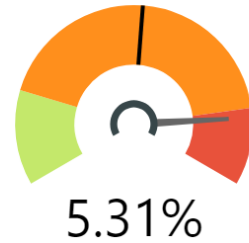
Reduction sought



#### Target

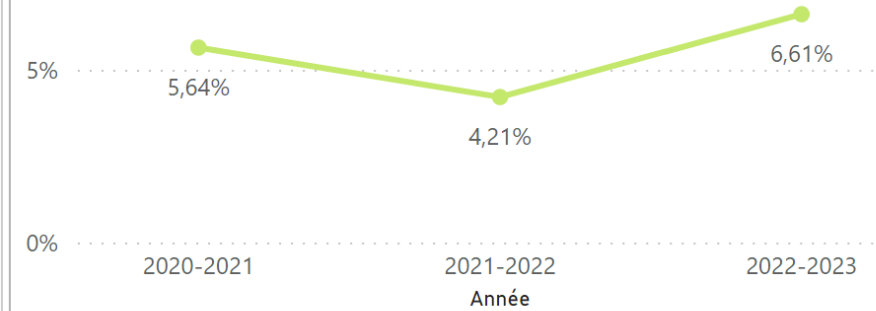
0% based on best practices (2023)

#### Last quarter results available

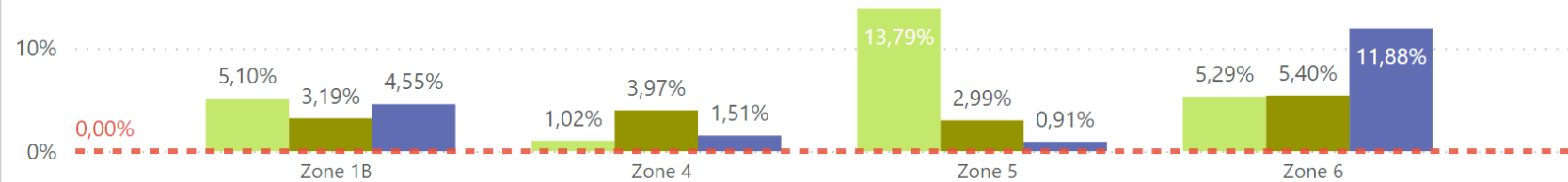


- Better than target
- Meets target
- Fails to meet target

#### Trend over time



2020-2021 2021-2022 2022-2023



| Year     | 2020-2021 |        |        |        | 2021-2022 |        |        |        | 2022-2023 |        |        |        |
|----------|-----------|--------|--------|--------|-----------|--------|--------|--------|-----------|--------|--------|--------|
|          | T1        | T2     | T3     | T4     | T1        | T2     | T3     | T4     | T1        | T2     | T3     | T4     |
| Zone 1B  | 3,48%     | 5,05%  | 6,49%  | 5,33%  | 2,72%     | 3,29%  | 2,78%  | 3,82%  | 4,30%     | 5,25%  | 4,46%  | 4,15%  |
| Zone 4   | 0,27%     | 0,12%  | 0,30%  | 3,10%  | 2,96%     | 2,39%  | 4,86%  | 5,22%  | 3,29%     | 1,21%  | 0,82%  | 0,87%  |
| Zone 5   | 10,69%    | 12,34% | 18,98% | 14,75% | 4,94%     | 3,16%  | 2,71%  | 1,28%  | 0,90%     | 0,88%  | 1,20%  | 0,65%  |
| Zone 6   | 3,65%     | 4,82%  | 6,03%  | 6,43%  | 2,54%     | 4,09%  | 5,30%  | 8,60%  | 11,76%    | 13,56% | 10,90% | 10,72% |
| Vitalité | 4,36%     | 5,17%  | 6,66%  | 6,31%  | 2,89%     | 3,44%  | 4,18%  | 5,84%  | 7,14%     | 7,89%  | 5,89%  | 5,31%  |
| Horizon  | 15,01%    | 15,56% | 15,17% | 14,08% | 11,21%    | 12,38% | 12,74% | 13,53% | 14,91%    | 16,02% | 16,10% | 14,82% |
| Province | 12,67%    | 13,16% | 13,15% | 12,13% | 9,02%     | 10,02% | 10,32% | 11,49% | 12,74%    | 13,74% | 13,42% | 12,50% |

## 4. Organizational Excellence

### 4.4 Overall hospital readmission rate

Indicator that shows the rate of readmission within 30 days of a patient's discharge from hospital.



This indicator measures the risk-adjusted rate of urgent readmissions within 30 days of discharge for episodes of care for the following patient groups: obstetric, pediatric, surgical and medical.



#### Additional information

None



#### Formula

Observed number of readmissions for each facility / Expected number of readmissions for the facility × Canadian average readmission rate



#### Leadership

Dr. Natalie Banville and Sharon Smyth Okana



#### Data source

CIHI



#### Measure

Rate



#### Desired results

Reduction sought



#### Target

9.4 CIHI (2020–2021)

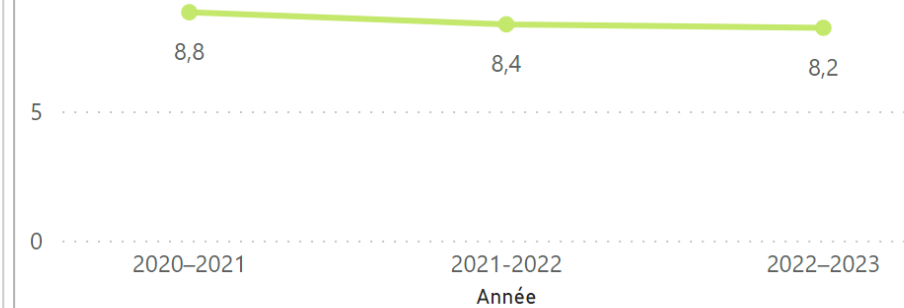
#### Last quarter results available



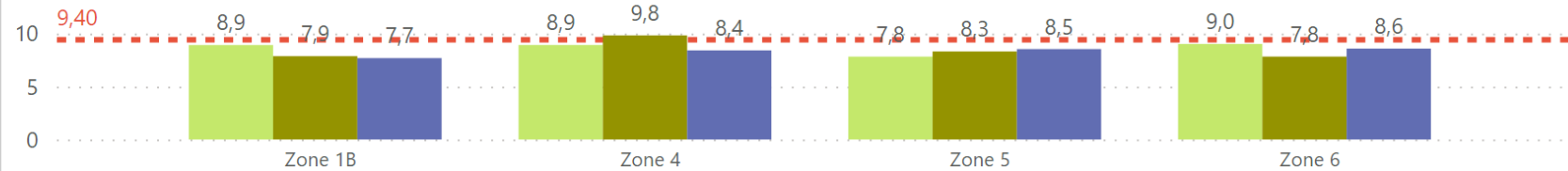
7.81

- Better than target
- Meets target
- Fails to meet target

#### Trend over time



2020–2021 2021–2022 2022–2023



| Year     | 2020–2021 |      |      |      | 2021–2022 |       |       |      | 2022–2023 |      |      |
|----------|-----------|------|------|------|-----------|-------|-------|------|-----------|------|------|
|          | T1        | T2   | T3   | T4   | T1        | T2    | T3    | T4   | T1        | T2   | T3   |
| Zone 1B  | 8,40      | 8,84 | 9,39 | 8,92 | 8,81      | 7,55  | 7,14  | 7,90 | 8,33      | 7,36 | 7,30 |
| Zone 4   | 10,05     | 9,13 | 7,83 | 8,77 | 9,81      | 10,09 | 10,05 | 9,00 | 8,53      | 8,08 | 8,57 |
| Zone 5   | 7,62      | 7,39 | 7,50 | 8,99 | 9,21      | 10,27 | 5,89  | 6,55 | 12,37     | 6,62 | 6,93 |
| Zone 6   | 9,52      | 9,91 | 8,76 | 7,30 | 8,35      | 7,43  | 8,05  | 7,18 | 8,76      | 8,69 | 8,27 |
| Vitalité | 9,03      | 9,05 | 8,66 | 8,46 | 8,94      | 8,46  | 7,98  | 7,82 | 8,99      | 7,85 | 7,81 |
| Horizon  | 9,98      | 9,65 | 9,20 | 8,14 | 9,08      | 8,42  | 8,52  | 7,78 | 8,66      | 8,05 | 7,33 |
| Province | 9,69      | 9,46 | 9,03 | 8,24 | 9,04      | 8,43  | 8,34  | 7,80 | 8,76      | 7,99 | 7,47 |
| Canada   | 10,04     | 9,59 | 9,06 | 8,42 | 9,41      | 9,08  | 8,91  | 8,83 | 9,65      | 9,28 | 8,33 |

## 4. Organizational Excellence

### 4.4 Variance in actual spending on operating budget

Indicator that shows the difference between actual and budgeted spending.



Additional information



Excludes pandemic and Medicare

Formula



Budgeted Spending-Actual Spending

Leadership



Patrick Parent

Data source



Meditech

Measure



Dollars

Desired results



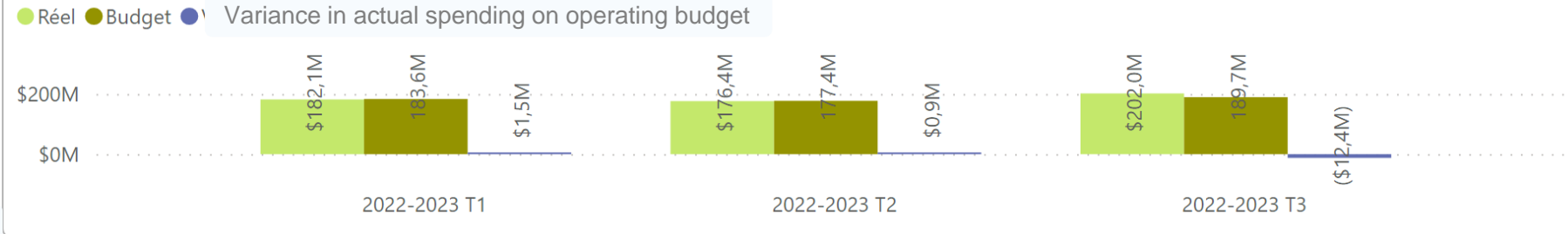
Reduction sought

Target

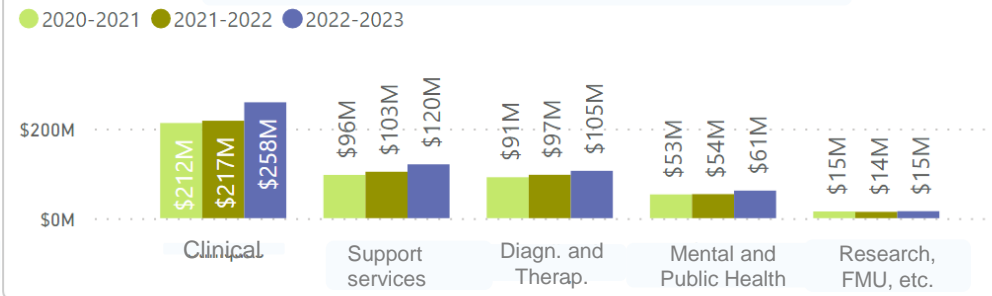


Not available

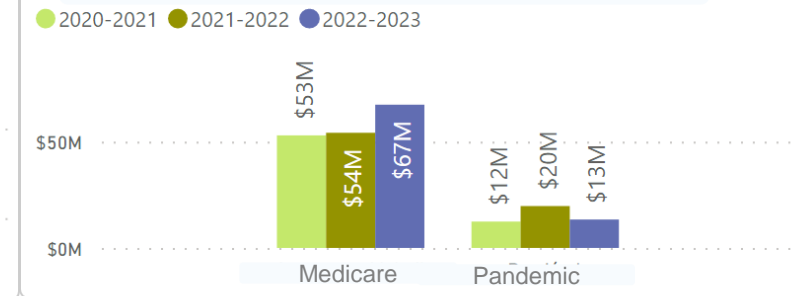
Trend over time



Actual spending per program



Actual spending per program



Actual spending per program

| Program                  | 2020-2021       | 2021-2022       | 2022-2023       |
|--------------------------|-----------------|-----------------|-----------------|
| Clinical                 | \$212,1M        | \$217,2M        | \$258,3M        |
| Research, FMU, etc.      | \$14,9M         | \$14,1M         | \$15,5M         |
| Mental and Public Health | \$52,9M         | \$53,5M         | \$61,4M         |
| Diagn. and Therap.       | \$91,2M         | \$96,7M         | \$105,5M        |
| Support services         | \$96,4M         | \$103,5M        | \$120,0M        |
| <b>Total</b>             | <b>\$467,5M</b> | <b>\$484,9M</b> | <b>\$560,6M</b> |

| Program      | 2020-2021      | 2021-2022      | 2022-2023      |
|--------------|----------------|----------------|----------------|
| Medicare     | \$53,0M        | \$54,2M        | \$67,4M        |
| Pandemic     | \$12,4M        | \$19,7M        | \$13,4M        |
| <b>Total</b> | <b>\$65,4M</b> | <b>\$73,9M</b> | <b>\$80,8M</b> |