

Forge a new path to meet the changing needs of our

Southlake Balanced Scorecard

Q4 2023/2024

Champion a culture of exemplary care and deliver

Create an environment where the best experiences

Last revised: June 6, 2024

growing communities. clinical excellence.		and deliver	happen.				Own our role to improve the system.				
Indicator		Baseline (22/23)	Target (23/24)	Q1	Q2	Q3	Q4	Preferred Direction	Trending (YTD by quarter)	YTD	
Current Ratio		0.92	0.60	0.84	0.80	0.73	0.87	†		0.79	
Total Margin		-1.7%	-7.2%	-6.9%	-6.9%	-7.1%	-3.1%	†	/	-7.0%	
Average Acute LOS for Medicine (Typical Cases)		6.2	50th % for Q	6.0	5.7	6.1	6.3	‡		6.0	
Employee Engagement (annual survey)		49.0%	51.5%	n/a	52.2%	n/a	n/a	1		52.2%	
Medical Staff Engagement (annual survey)		42.0%	44.0%	n/a	59.6%	n/a	n/a	1		59.6%	
Average Sick Days Per Employee (annualized)		15.9	12.7	10.5	9.9	9.7	11.1	+	/	10.3	
Turnover Rate		3.0%	3.0%	3.1%	2.4%	2.1%	2.3%	↓		2.5%	
Average Number of ALC Patients at the Newmarket Campus		42	42	34	35	43	45	↓		39	
% of Surgical Long Waiters on Waitlist		26.4%	25%	22.1%	18.0%	18.1%	17.0%	↓		18.8%	
OHT Collaborative Quality Improvement Plan (cQIP) Composite Performance Indicator		n/a	Green	Green	Green	Green	Green	n/a		Green	
QIP Indicators											
90th Percentile ED Wait Time to Inpatient Bed		34.5	31.5 hours	41.0	31.7	42.6	44.1	ŧ		39.9	
Discharge Summaries within 2 Days		86%	90.0%	88%	88%	89%	89%	1		89%	
Patient Experience (9/10 or 10/10 rating on survey)		66%*	67%	n/a	n/a	68%	70.9%	1		70%	
Workplace Violence Incidents Resulting in Lost Time or Healthcare		32	26 (6.5 qtrly)	7	9	12	5	+		8	
Hospital Acquired Pressure Injuries at Prevalence		7.3%	7.0%	6.4%	3.9%	3.6%	7.3%	ŧ		5.3%	
Inpatient Falls Resulting in Moderate+ Harm		1.6%	1.6%	1.7%	1.6%	1.6%	0.0%			1.2%	

*FY21/22

Legend:

Target has been met or exceeded

Target not met, performance favourable from previous quarter

Target not met, and no change from previous quarter

Target not met, performance unfavourable from previous quarter