

Indicator		Current Performance		Target 2025-26	Planned Improvements
THEME I: TIMELY AND EFFICIENT TRANSITIONS					
A high-quality health system provides people with the care they need, when and where they need it.					
Timely	Appropriate referral to Mental Health follow-up for those meeting criteria through the Emergency Department	*	70% (Q3)	70%	1. Process changes for referrals 2. ER Form update 3. Partner engagement for process changes to ensure gaps for youth are addressed 4. Department and Quality Assurance Auditor scheduled and unscheduled audits
Timely	Emergency Department Wait Time for Physician Initial Assessment		Reliability of data confirmed	Collecting baseline	1. Staff education on cTAS and documentation 2. Physician and locum MD engagement 3. Monthly audits and Director review 4. Monthly reports to Quality Safety Risk working group
Timely	Emergency department Wait time (Time in ER to Disposition decision)		Reliability of data confirmed	Collecting baseline	1. 1. Staff education on cTAS and documentation 2. Physician and locum MD engagement 3. Monthly audits and Director review 4. Monthly reports to Quality Safety Risk working group
	THEME II: SERVICE EXCELLENCE				
Better experiences result in better outcomes. Tracking and understanding experience is an important element of quality.					
Patient-Centered	Experience Short Survey Response Rate	*	Collecting baseline	500/year	1. Addition of short survey Kiosks with option for long survey 2. Monthly QAA and Manager review of results and comments 3. QI reports and initiatives based on survey responses

Patient-Centered	Rainy Crest Activation Program	*		Milestone 1 Completion of activation project in area 1	<ol style="list-style-type: none"> 1. Project plan submitted and reviewed activation and resident council engagement 2. Evaluation of project prior to milestone 2 3. Family and resident survey 2 months post completion
Patient-Centered	# riders to utilize specialist and diagnostic transportation		Collecting Baseline	500/year	<ol style="list-style-type: none"> 1. Monthly updates on usage 2. Team meetings to address challenges 3. Central coordination of district transportation and staff utilization 4. Evaluation and rider surveys
THEME III: SAFE AND EFFECTIVE CARE A high-quality health system works together to ensure that people have access to the best care for their health and that care is delivered in a way that is safe and effective.					
Effective	Employee retention (excluding retirements)	*	96%	97%	<ol style="list-style-type: none"> 1. Enhance work life for employees through strategies 2. Continue to build on retention strategies outlines in HR Plan and OH&S strategies 3. Lunch with leadership 4. Yearly shorter and impactful PA engagements
Effective	Position Stabilization (#filled positions / total FT & PT positions)		80%	82%	<ol style="list-style-type: none"> 1. Continue to decrease the number of vacant positions through strategies outlines in HR Plan and OH&S strategies 2. LMIA
Effective	Quality of work life - overtime utilization Rainy Crest			Collecting baseline	<ol style="list-style-type: none"> 1. Monitor overtime use in one site to evaluate reliability of data with new UKG system 2. Monthly audit and review with SMT
Effective	Quality of work life - vacation utilization (% = vacation hours used/total vacation hours accrued within year)		n/a	Collecting baseline	<ol style="list-style-type: none"> 1. All leaders must report denied vacation requests to their senior leader 2. All leaders monitor their departmental vacation utilization and encourage staff to plan their vacation each year
Effective	Workforce stability - agency staffing utilization (% = agency costs (wages, fees and housing)/ total expenditures)		13.9%	20.0%	<ol style="list-style-type: none"> 1. Continue to monitor agency staffing utilizations and increase local recruitment efforts 2. LMIA
Effective	Performance Conversations	*		100%	<ol style="list-style-type: none"> 1. Trial of short survey PA instead of traditional 2. Monthly reporting from HR on completion rate 3. Monthly reporting at QSR working and core leadership

Safe	Number of workplace violence incidents reported by workers (physical violence or threat of physical violence) within a 12-month period. Hospital and Community		50	60	<ol style="list-style-type: none"> 1. Follow Workplace Violence Prevention Plan as per OH&S 2. AEMS report review quarterly reports to QSR 3. evaluation of training
Safe	Number of workplace violence incidents reported by workers (physical violence or threat of physical violence) within a 12-month period. LTC and ELDCAP	*	33	40	<ol style="list-style-type: none"> 1. Follow Workplace Violence Prevention Plan as per OH&S 2. AEMS report review quarterly reports to QSR 3. evaluation of training
Safe	Review of Residents in Daily Physical Restraints in ELDCAP (Rainy River site)		39.9%	20%	<ol style="list-style-type: none"> 1. Establish a review process 2. Review gaps and identified root causes and improvement areas 3. Monitor restraint rates 4. QSR evaluation of training
Safe	Medication reconciliation at discharge: Total number of discharged patients for whom a Best Possible Medication Discharge Plan was created as a proportion to the total number of patients discharged			100%	<ol style="list-style-type: none"> 1. huddle board QI daily on status of reconciliations 2. daily audits by unit manager 3. monthly audits by DON and QAA 4. AEMS reports audit review teams QI reports
Equity	Mandatory education compliance			100%	<ol style="list-style-type: none"> 1. monthly tracking on compliance report from HR 2. Accountability at core leadership meetings

* indicates quality indicators associated with Executive Compensation