



Hospital Service Accountability Agreement

2008-10 H-SAA

2009/10YE Dashboard – Current Status

July 20th, 2010

Engaged Communities.
Healthy Communities.

Colour-Coding Assessment in Following Slides – CE LHIN Summary

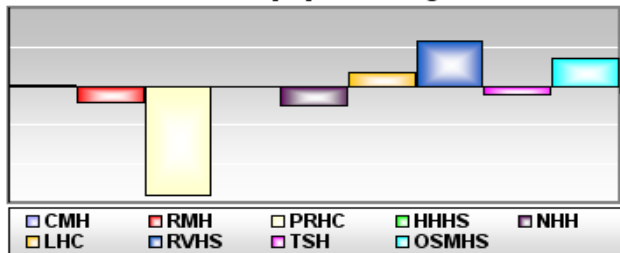
All CE LHIN Hospitals are meeting their Negotiated Targets and/or are above their Lower Performance Corridor

7 out of 9 Hospitals are meeting their Negotiated Target and/or within their Lower Performance Corridor

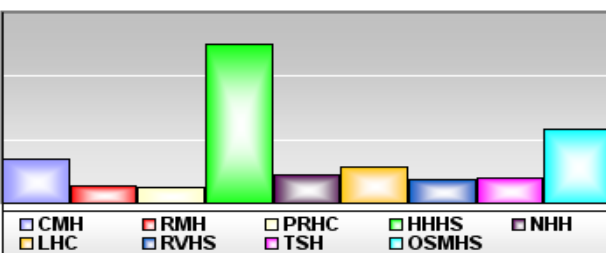
5 out of 9 Hospitals are meeting their Negotiated Target and/or within their Lower Performance Corridor

4 or more Hospitals are meeting their Negotiated Target and/or within their Lower Performance Corridor

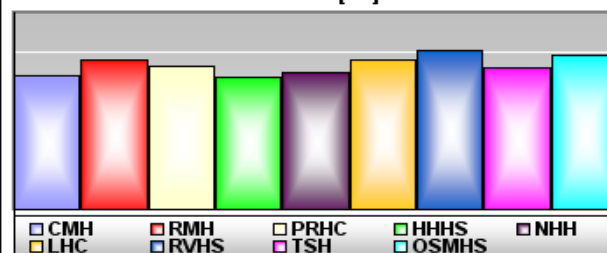
Year End[YE] Total Margin



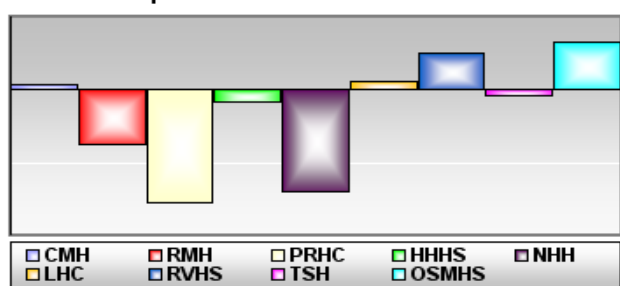
Current Ratio



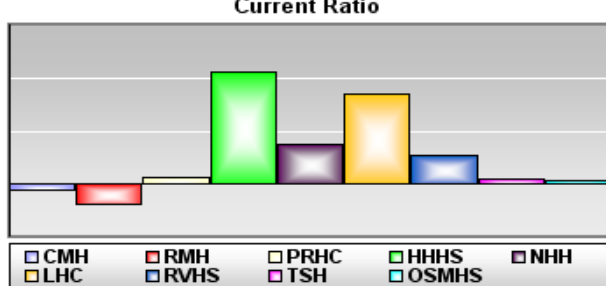
% of Full-Time [FT] Nurses



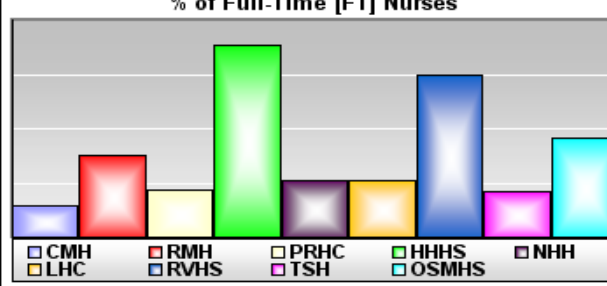
% Surplus/Deficit of LHIN Base Allocation



% Above/Below Performance Standard Current Ratio



% Above/Below Performance Standard % of Full-Time [FT] Nurses



Performance Comments [YE Total Margin] ■ Dashboard

Some changes have occurred from CE LHIN Hospital's forecasts for year end financial positions since 2009/10Q3. 5 out of the 9 public hospitals continue to report deficits for this fiscal year end but CMH has reported a small surplus = \$47.5K whereas TSH, who forecasted a balanced net year end position has reported a deficit = \$(1.1M).

Reduction of year end Total Margin Deficit from Q3 Forecast:
 HHHS & PRHC;
Larger than forecasted deficit in Q3 to actual year end position:
 RMH, NHH & TSH (majority of deficits due to one-time implementation costs pertaining to cost efficiency strategies, 10/11 H-SAA negotiations);
Hospital's who have improved to surplus and/or remain in a balanced net year end financial position:
 CMH, LHC, RVHS & OSMHS.

Performance Comments [Current Ratio] ◆ Dashboard

A hospital's Current Ratio is an indicator of the relative financial health of the organization. This measure indicates a Hospital's ability to currently and prospectively sustain their organization based on their "financial holdings or assets" and whether they have the financial means to be able to invest in future developments such as equipment replacements.

7 of 9 CE LHIN hospitals are under the Ministry Benchmark = 0.8 (min.), exception of HHHS & OSMHS although only 2 are under the lower H-SAA performance corridor. Outcomes will generally decrease due to several factors, mostly probably due to a hospital using their working capital to offset any deficits and/or other equipment/infrastructure needs. All Hospitals actual year end outcomes are more positive then forecasted in 2009/10Q3 (exception of TSH, -0.1). All CE LHIN Hospitals have increased their working capital deficit from 2008/09YE to 2009/10YE (exception of CMH). CMH has improved from a working capital deficit of \$(1.4M) in 2008/09 to \$(1M) in 2009/10YE.

Performance Comments [% FT Nurses] ◆ Dashboard

This indicator measures "the average number of unit-producing and management operational & support full-time equivalents".

All 9 CE LHIN Hospitals are above and/or equal to their 2009/10 H-SAA Negotiated Target/Performance Lower Corridor. Additionally, all 9 Hospitals are above and/or equal to the Ministry Benchmarks for they type of Hospital (Large Community vs Small Hospital).

Legend: Hospitals with Performance outcomes outside the specified Performance Corridors or not within Budget/Target, further investigation is recommended.

*****Note:** For those Hospitals who did not meet their Target, above/below calculation is applied to their indicator-specific Lower Performance Corridors for each respective organization

- ◆ Status - All Hospitals are within the Performance Corridor, within Target or within Budget
- ◆ Status - 7 out of 9 Hospitals within Performance Corridor or within Budget/Target
- ◆ Status - Monitor - 5 out of 9 Hospitals within Performance Corridor and/or within Budget/Target
- Status - ATTENTION - 4 or more Hospitals outside the Performance Corridors or not meeting Target/Budget

H-SAA Summary Outcomes – Financial Indicators

Campbellford Memorial Hospital (CMH):

- Small surplus = \$47,470, above forecasted year end outcome as estimated a deficit = \$(195,252) in Q3. Current ratio has also improved from 0.33 forecast in Q3 to 0.69 as of year end.

Ross Memorial Hospital (RMH):

- Larger deficit at year end = \$(2,194,774) than forecasted in Q3 = \$(1,500,000). Current ratio currently = 0.28.

Note: RMH has already realized \$600K of their cost efficiency strategy savings.

Peterborough Regional Health Centre (PRHC):

- Year end deficit = \$(13,897,000) with a current ratio that has slightly improved from forecast of 0.17 to 0.24 by year end.

H-SAA Summary Outcomes – Financial Indicators

Haliburton Highlands Health Services (HHHS):

- Smaller deficit reported at year end = **\$(61,300)** than forecasted in Q3 = **\$(99,957)** with a current ratio = 2.49, up from Q3 forecast = 2.41.
 - Note that HHHS has the highest current ratio in CE LHIN and is well above the Ministry upper performance corridor and recommended target.

Northumberland Hills Hospital (NHH):

- Larger deficit at year end = **\$(2,522,854)** than forecasted in Q3 = **\$(934,000)**. Their current ratio is = 0.44.

Lakeridge Health Corporation (LHC):

- Total Year End Margin = **\$1,663,702** with a current ratio = 0.58 (slightly higher than forecasted in Q3 = 0.53).

H-SAA Summary Outcomes – Financial Indicators

Rouge Valley Health System (RVHS):

- Year end total margin has improved from Q3 forecast, **\$4.7M** to **\$5.7M**. Their current ratio has also improved from their Q3 forecast to year end results, 0.27 to 0.36.

The Scarborough Hospital (TSH):

- Their Q3 forecast of a balanced net year end position = \$0 is now currently at **\$(1,090,485)** at year end. TSH's current ratio at year end = 0.39.

Ontario Shores Centre for Mental Health Services (OSCMS):

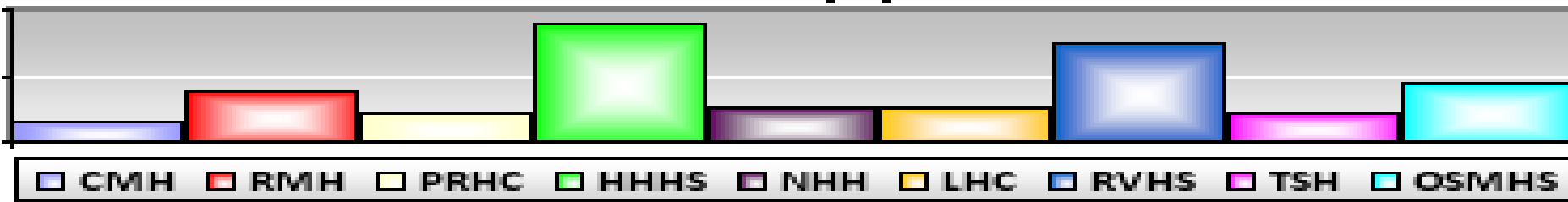
- Their Total Year end Margin has exceeded their Q3 forecast and is = **\$3.477K**, up from **\$1.465K** in Q3 forecast. Current ratio is the 2nd highest in CE LHIN = 1.17, well above the lower threshold of 0.8 as per Ministry recommended benchmark.

% of Full-Time [FT] Nurses



% Above/Below Performance Standard

% of Full-Time [FT] Nurses



Performance Comments [% FT Nurses]

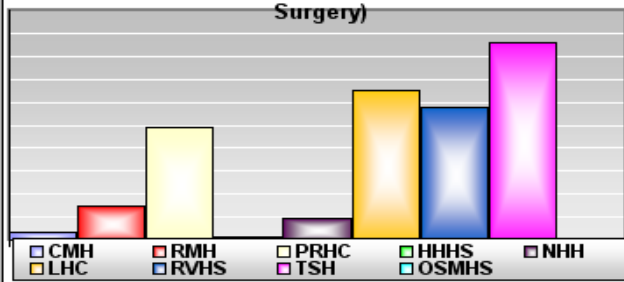
Dashboard



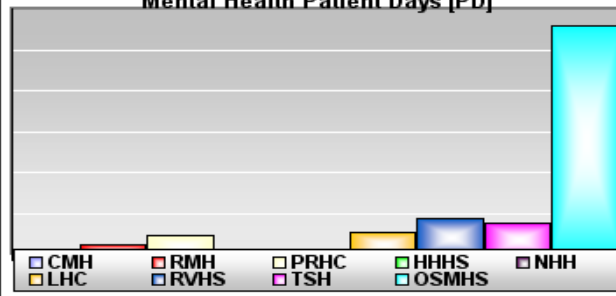
This indicator measures "the average number of unit-producing and management operational & support full-time equivalents".

All 9 CE LHIN Hospitals are above and/or equal to their 2009/10 H-SAA Negotiated Target/Performance Lower Corridor. Additionally, all 9 Hospitals are above and/or equal to the Ministry Benchmarks for they type of Hospital (Large Community vs Small Hospital).

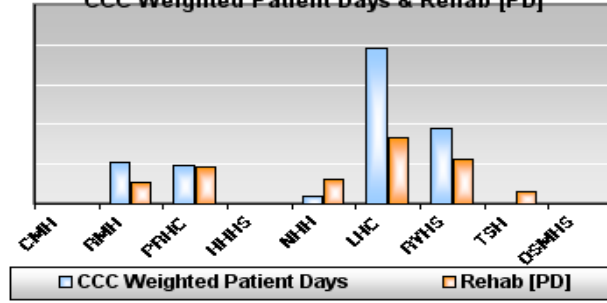
Total Weighted Cases (Inpatient & Day Surgery)



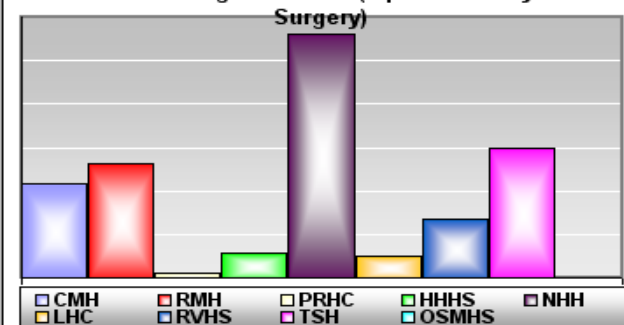
Mental Health Patient Days [PD]



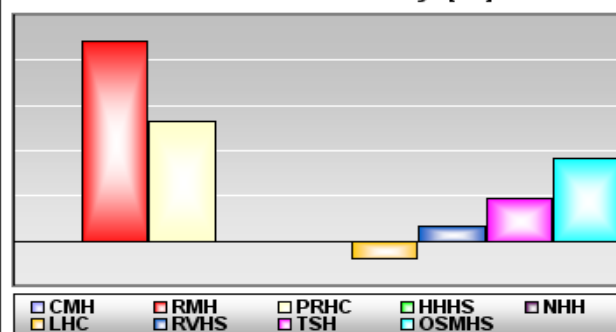
CCC Weighted Patient Days & Rehab [PD]



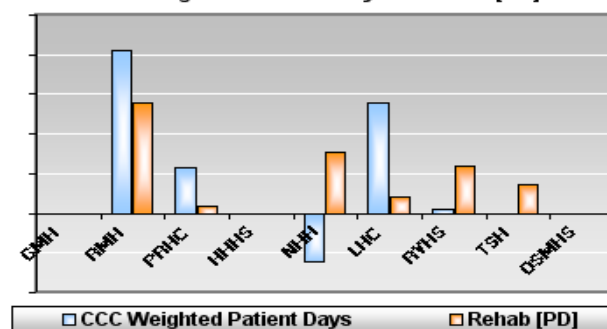
% Above/Below Performance Standard Total Weighted Cases (Inpatient & Day Surgery)



% Above/Below Performance Standard Mental Health Patient Days [PD]



% Above/Below Performance Standard CCC Weighted Patient Days & Rehab [PD]



Performance Comments [Total Wtd Cases] Dashboard

Total weighted cases (Inpatient & Day Surgery) are OR Cases with weights applied (e.g. case-mix, resource utilization, etc.). Corridors (upper & lower) are applied to adjust for year-to-year variability (expected). Intent is to define materiality of variances in volumes between reporting periods.
Hospitals above or equal to their 2009/10 Negotiated Target:
 RMH, NHH, RVHS & TSH
Hospitals > Lower Performance Corridor but < Negotiated Target:
 PRHC, HHHS & LHC

Performance Commentary [MH PD] Dashboard

This indicator measures the volume of reported MH Patient days within a given reporting period (regardless of bed designation). An upper/lower performance corridor is mandated based on the size of the hospital for this service.
Hospitals equal to or above their 2009/10 Negotiated Target:
 RMH, TSH & OSMHS
Hospitals < Negotiated Target but > Lower Performance Corridor:
 RVHS
Hospitals less than Negotiated Target & Performance Corridor:
 LHC (34 to 32 MH beds currently)

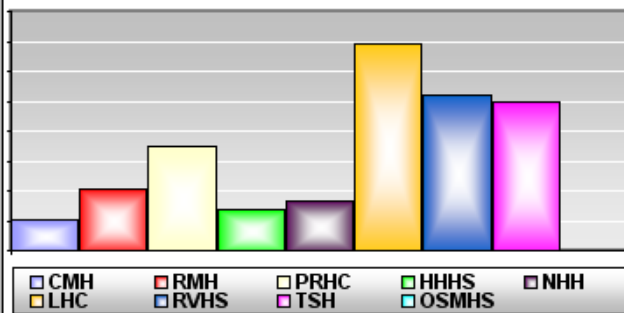
Performance Comments [Rehab, CCC Wtd PD] Dashboard

Measure of Rehab Patient Days & CCC Weighted Patient days within a defined reporting period with an upper/lower perf. corridor. 5 Hospitals within CE LHIN currently provide CCC services (RMH, PRHC, NHH, LHC & RVHS). 6 Hospitals provide Rehab Services (RMH, PRHC, NHH, LHC, RVHS & TSH).
Hospitals above their Target (Rehab):
 All are above their Negotiated Target and/or Lower Performance Corridor.
Hospitals above their Target (CCC):
 All are above their Negotiated Target and/or Lower Performance Corridor with the exception of NHH (lack of patient demand but there is demand for Interim LTC/Convalescent care, same issue for PRHC)

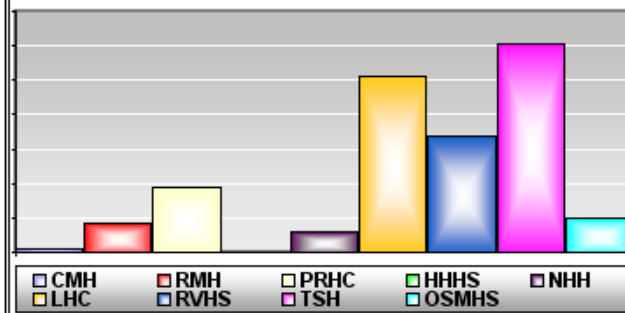
Legend: Hospitals with Performance outcomes outside the specified Performance Corridors or not within Budget/Target, further investigation is recommended.

- ***Note:** For those Hospitals who did not meet their Target, above/below calculation is applied to their indicator-specific Lower Performance Corridors for each respective organization
- || Status - All Hospitals are within the Performance Corridor, within Target or within Budget
 - || Status - 7 out of 9 Hospitals within Performance Corridor or within Budget/Target
 - || Status - Monitor - 5 out of 9 Hospitals within Performance Corridor and/or within Budget/Target
 - || Status - ATTENTION - 4 or more Hospitals outside the Performance Corridors or not meeting Target/Budget

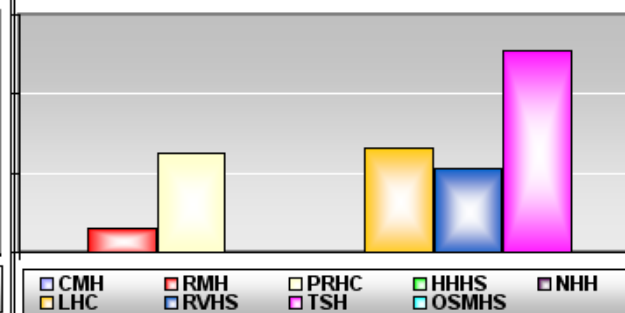
Emergency Visits [ER]



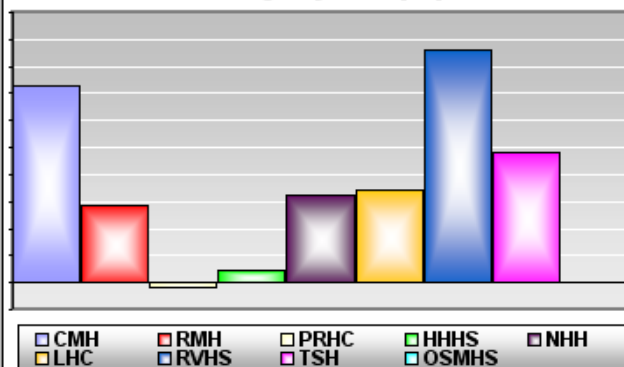
Ambulatory Care Visits [excl. ER]



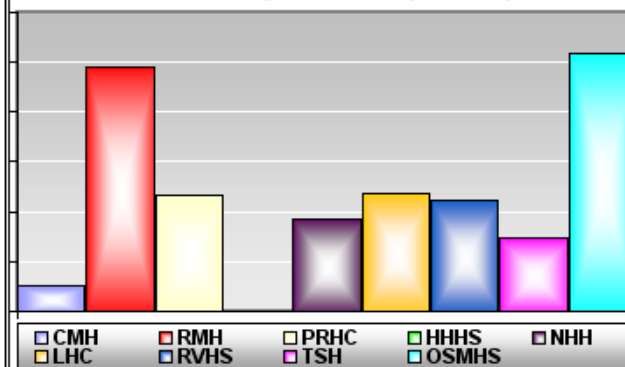
Total Hip & Knee Replacements



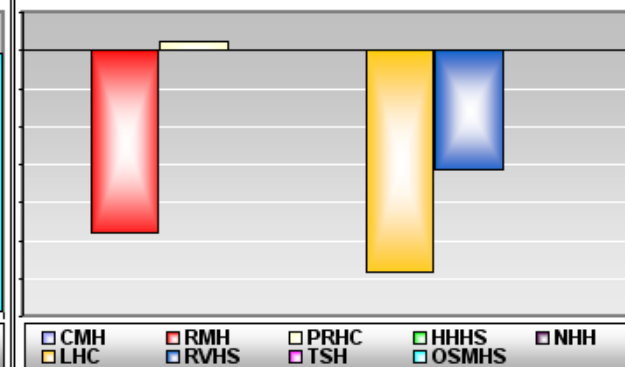
% Above/Below Performance Standard Emergency Visits [ER]



% Above/Below Performance Standard Ambulatory Care Visits [excl. ER]



% Above/Below Performance Standard Total Hip & Knee Replacements



Performance Comments [ER Visits] [Dashboard](#) ◆

The number of all visits in a hospital's ER Department within a defined reporting period. All CE LHIN hospitals with ER departments are above their Negotiated Targets and/or Lower Performance Corridors with the exception of PRHC (immaterial variance = -0.34%). Hospitals reporting ER patient days with exception of CMH & HHHS. % increases for ER Patient Days in CE LHIN hospitals have been reported from 2008/09 to 2009/10, lowest increase at TSH at 1.63% to 32.36% at NHH.

Performance Comments [Amb. Care Visits] [Dashboard](#) ◆

Total Outpatient visits (excluding Day/Night Care Surgical Procedures OR/PARR & Endoscopy) within a given reporting period.
 All CE LHIN hospitals (excl. HHHS as do not have Ambulatory Care Visits) are forecasting to meet their Negotiated Targets with the exception of NHH who is slightly below their Target but well above their Lower Performance Corridor.

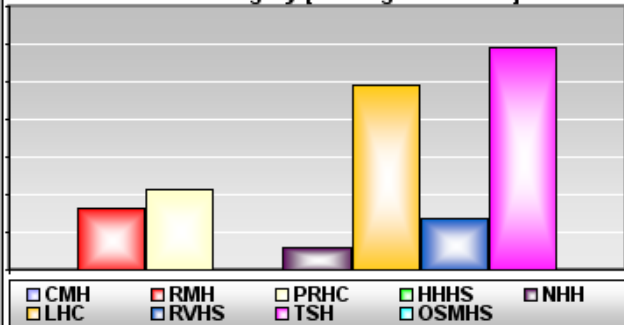
Performance Comments [HIP/Knee] [Dashboard](#) ■

Total # of Hip and Knee Replacements (base & incremental funded volumes).
 3 CE LHIN hospitals have not met their wait time strategy funded volumes. LHC sustained damages to their OR due to flooding, as such elective surgeries were rescheduled/postponed. RVHS had unexpected OR closures mid-year due to water damage in their OR's as well as changes in case mix preference. RMH, loss of an Orthopaedic Surgeon with successful replacement late in the fiscal year, expected that volumes will be back to normal in 2010/11.

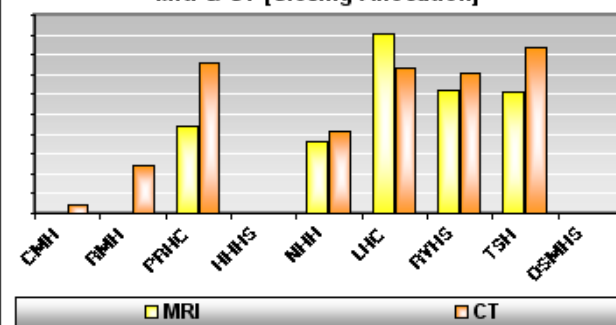
*****Note: For those Hospitals who did not meet their Target, above/below calculation is applied to their indicator-specific Lower Performance Corridors for each respective organization**

◆	Status - All Hospitals are within the Performance Corridor, within Target or within Budget
◆	Status - 7 out of 9 Hospitals within Performance Corridor or within Budget/Target
◆	Status - Monitor - 5 out of 9 Hospitals within Performance Corridor and/or within Budget/Target
■	Status - ATTENTION - 4 or more Hospitals outside the Performance Corridors or not meeting Target/Budget

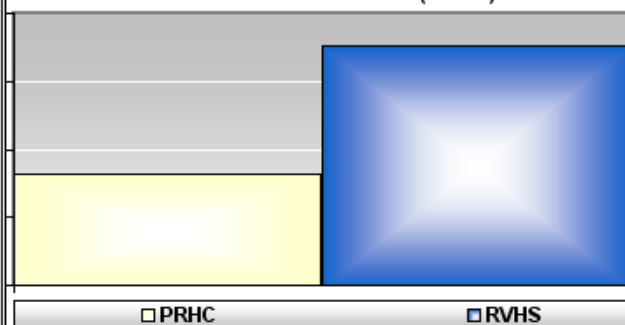
Cataract Surgery [Closing Allocation]



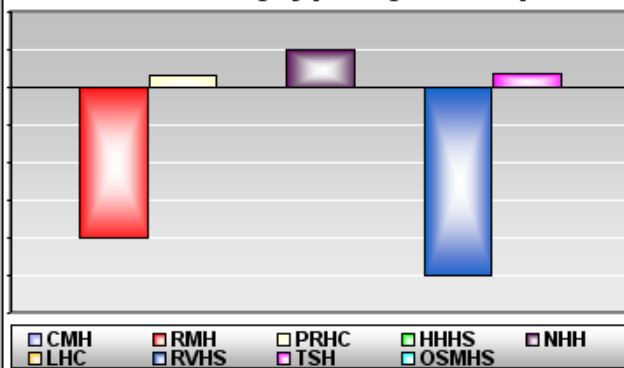
MRI & CT [Closing Allocation]



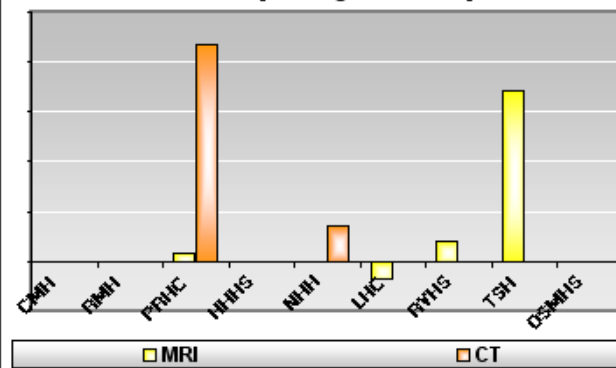
Cardiac Catheterization (Cases)



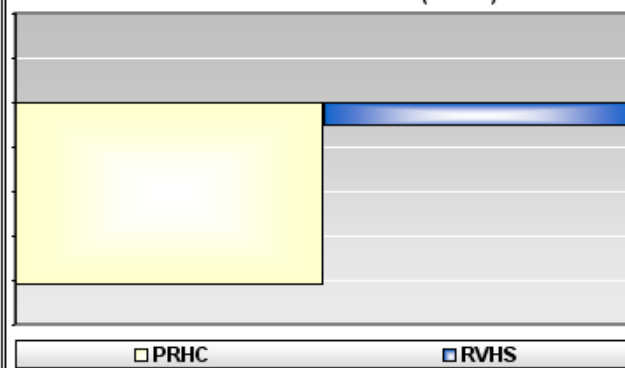
% Above/Below Performance Standard Cataract Surgery [Closing Allocation]



% Above/Below Performance Standard MRI & CT [Closing Allocation]



% Above/Below Performance Standard Cardiac Catheterization (Cases)



Performance Comments [Cataracts] [Dashboard](#) ◆

Total Base & Incremental funded volumes for Cataract Surgery. Cataract Surgery is required when the "lens of the eye becomes clouded..." All CE LHIN hospitals delivering Cataract Surgery Services are on track to deliver all funded volumes by year end with the exception of PRHC, RMH (Ophthalmologist availability issues, etc.). Current Q4 Wait Times indicates that CE LHIN is below our Negotiated Target overall with only RVHS & TSH being above the CE LHIN target for Cataract Surgery (demand exceeding capacity).

Performance Comments [MRI & CT] [Dashboard](#) ◆

All CE LHIN Hospitals are on track to complete funded volumes. *****RVHS & TSH provide more MRI hours than funded for, PRHC for CT hours.**
 Wait Time performance for CT has improved, now only 4 hospitals from the original 5 Hospitals in Q3 are above the CT CE LHIN Target. Of the 4, LHC, RMH & TSH have improved from Q3 to Q4 with RVHS remaining stable despite increasing patient demand/referrals. LHC is now below the MRI CE LHIN Target at Q4 with RVHS & TSH still above, demand exceeding capacity.

Performance Comments [Cardiac Cath.] [Dashboard](#) ◆

Cardiac Catheterization is defined as an "insertion of a catheter into a chamber or vessel of the heart. This is done for both investigational (PRHC) and interventional (both at RVHS) purposes". Both RVHS & PRHC have delivered more cases than forecasted in Q3 but are still below budget, particularly for PRHC (RVHS slightly under by -1.39%). PCI services at PRHC have been approved by the CE LHIN Board and letter for support (business case) has been sent to the Ministry/Cardiac Care Network.

Legend: Hospitals with Performance outcomes outside the specified Performance Corridors or not within Budget/Target, further investigation is recommended.

*****Note:** For those Hospitals who did not meet their Target, above/below calculation is applied to their indicator-specific Lower Performance Corridors for each respective organization

- ◆ || Status - All Hospitals are within the Performance Corridor, within Target or within Budget
- ◆ || Status - 7 out of 9 Hospitals within Performance Corridor or within Budget/Target
- ◆ || Status - Monitor - 5 out of 9 Hospitals within Performance Corridor and/or within Budget/Target
- ◆ || Status - ATTENTION - 4 or more Hospitals outside the Performance Corridors or not meeting Target/Budget

H-SAA Summary Outcomes – Overall Volume Indicators

All Volume-based H-SAA indicators have met or exceeded either their lower performance corridors and/or hospital-specific negotiated targets with some exceptions.

Engaged Communities.
Healthy Communities.