

CENTRAL EAST LHIN PERFORMANCE INDICATORS February 10, 2012 Release

	PI No.	Performance Indicator (PI)	2010/11			2011/12				
			LHIN Starting Point or Baseline	LHIN Target	13-May-11	LHIN Starting Point or Baseline	LHIN Target	12-Aug-11	14-Nov-11	10-Feb-12
MLPA INDICATORS	ALTERNATE LEVEL OF CARE AND EMERGENCY ROOM (ER)									
	1	Percentage of Alternate Level of Care (ALC) Days - By LHIN of Institution ²	18.41%	12.20%	21.29%	20.22%	14.80%	18.39%	16.95%	16.15%
	2	90th Percentile ER Length of Stay for Admitted Patients* ¹	48.00	39.00	53.33	51.62	39.00	43.60	42.82	41.87
	3	90th Percentile ER Length of Stay for Non-Admitted Complex (CTAS I-III) Patients** ¹	8.00	7.60	7.27	7.40	7.00	6.92	6.82	6.65
	4	90th Percentile ER Length of Stay for Non-Admitted Minor Uncomplicated (CTAS IV-V) Patients ¹	5.10	4.80	4.65	4.50	4.00	4.42	4.30	4.23
	SURGICAL AND DIAGNOSTIC WAIT TIMES									
	5	90th Percentile Wait Times for Cancer Surgery ¹	49	49	45	48	49	47	52	42
	6	90th Percentile Wait Times for Cardiac By-Pass Procedures ¹	NA	NA	NA	NA	NA	NA	NA	NA
	7	90th Percentile Wait Times for Cataract Surgery ¹	127	140	111	153	140	111	124	112
	8	90th Percentile Wait Times for Hip Replacement ¹	173	179	169	190	179	179	170	166
	9	90th Percentile Wait Times for Knee Replacement ¹	171	179	166	187	179	177	156	173
	10	90th Percentile Wait Times for Diagnostic MRI Scan ¹	107	77	80	102	63	74	89	96
	11	90th Percentile Wait Times for Diagnostic CT Scan ¹	41	36	28	28	28	25	24	23
	EXCELLENT CARE FOR ALL/QUALITY									
	12	Readmission within 30 Days for Selected CMGs ³	15.50%	15.30%	14.21%	14.77%	14.50%	15.77%	15.17%	16.71%
MENTAL HEALTH AND SUBSTANCE ABUSE										
13	Repeat Unscheduled Emergency Visits within 30 Days for Mental Health Conditions ³	15.20%	13.00%	17.72%	17.50%	16.60%	17.75%	18.68%	19.30%	
14	Repeat Unscheduled Emergency Visits within 30 Days for Substance Abuse Conditions ³	20.60%	17.50%	19.79%	19.60%	19.00%	20.59%	22.98%	21.53%	
ACCESS TO COMMUNITY CARE										
15	90th Percentile Wait Time for CCAC In-Home Services - Application from Community Setting to first CCAC Service (excluding case management) ²	TBD	NA	31.00	42.00	39.90	92.00	47.00	51.00	
OTHER STOCKTAKE INDICATORS†	16	Time to Physician Initial Assessment: Registration/Triage time to time to Physician Initial Assessment	4.0		3.4	3.4		3.4	3.3	3.2
	17	Time to Disposition Decision (Registration or Triage date/time to disposition date/time (admitted only))	15.9		14.4	14.4		15.4	15.5	14.5
	18	Time to Inpatient Bed (Disposition date/time to Left ER date/time)	38.2		46.9	43.9		33.9	33.1	31.4

NB Colour coding for 2010/11 has been updated to match the methodology being used for 2011/12, so may not match colour coding released previously

† Indicators #16-#18 are based on P4R sites only; these indicators are not in the MLPA but are provided here as supplementary information; LHIN targets are not presented

* Indicator also has a provincial interim goal of 25 hours

** Indicator also has a provincial interim goal of 7 hours

Notes (Refers to 10-Feb-12 data only)

- 1 Q3 2011/12 Data (Oct, Nov, Dec 2011 Data)
- 2 Q2 2011/12 Data (Jul, Aug, Sep 2011 Data)
- 3 Q1 2011/12 (Apr, May, Jun 2011 Data)

Colour Legend††

Release dates: 13-May-11
DOING WELL: The LHIN result is less than or equal to its target
MONITORING NEEDED: The LHIN result is 1) greater than its target AND 2) within 10% of its target
AT RISK, ACTION REQUIRED: The LHIN result is greater than 10% above its target

Release dates: 12-Aug-11, 14-Nov-11, 10-Feb-12
DOING WELL: The LHIN result is less than or equal to its target
MONITORING NEEDED, IMPROVING: The LHIN result is 1) greater than its target AND 2) less than its baseline or less than a 10% corridor above its target (whichever is higher) AND 2) has improved since the last quarter
MONITORING NEEDED, NOT IMPROVING: The LHIN result is 1) greater than its target AND 2) less than its baseline or less than a 10% corridor above its target (whichever is higher) AND 2) has not improved since the last quarter
AT RISK, ACTION REQUIRED: The LHIN result is 1) greater than 10% above its target AND 2) greater than its baseline

††There is a different set of rules for colour coding the last release of the fiscal year