RESEARCH PAPER

Acute Care Hospitals' Accountability to Provincial Funders

Obligation redditionnelle des hôpitaux de soins de court durée auprès des bailleurs de fonds provinciaux

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Appendix B: Definitions of Hospital Service Accountability Agreement (H-SAA) Quality Improvement Plan (QIP) and Indicators and Terms (alphabetized)

90th percentile wait time: the point at which 9 out of 10 patients received their treatment

90th percentile emergency room (ER) length of stay (LOS): the point at which 9 out of 10 admitted patients completed their visit = the time from triage or registration, whichever comes first, to the time the patient leaves the ER

Current ratio: current assets divided by current liabilities

CDI rate per 1,000 patient days: [(Number of patients newly diagnosed with hospital-acquired CDI) / (Number of patient days in that month)] x 1,000

ED wait times: 90th percentile ED length of stay for admitted patients

Falls: % of complex continuing care residents who fell in the last 30 days

Hand hygiene compliance before patient contact: [(Number of times that hand hygiene was performed before initial patient contact) / (Number of observed hand hygiene indications for before initial patient contact)] x 100

Hospital standardized mortality ratio: [(Number of observed deaths) / (Number of expected deaths)] x 100

Medication reconciliation at admission: total number of patients with medications reconciled as a proportion of the total number of patients admitted to the hospital

Patient satisfaction: sum of % responding "Definitely," "Yes" and "Yes, Definitely" to "Would you recommend this hospital to your friends and family?"

Patient satisfaction: sum of % responding "Excellent," Very Good" and "Good" to "Overall, how would you rate the care and services you received at the hospital?"

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Patient satisfaction: in-house survey (if available) – % response to a summary question such as, "willingness of patients to recommend the hospital to friends or family"

Percentage ALC days: [(Total number of in-patient days designated as ALC) / (Total number of in-patient days)] x 100.

Physical restraints: (Number of patients who are physically restrained at least once in the 3 days prior to initial assessment) / (All cases with a full admission assessment)

Pressure ulcers: % of complex continuing care residents with new pressure ulcer in the last 3 months (\geq stage 2)

Rate of central line bloodstream infections per 1,000 central line days: [(Total number of newly diagnosed CLI cases in the ICU after at least 48 hours of being placed on a central line) / (Number of central line days in that reporting period)] x 1,000

Rate of in-hospital mortality following major surgery: rate of in-hospital deaths due to all causes occurring within 5 days of major surgery

Rate of readmission: the number of patients admitted to own facility for an unplanned inpatient readmission, within 30 days from the first admission, relative to the total number of readmissions expected within 30 days

Readmission within 30 days for selected CMGs to ANY facility: number of patients with selected CMGs readmitted to ANY facility for non-elective in-patient care within 30 days of discharge, compared to the number of expected non-elective readmissions

Surgical safety checklist: [(Number of times all 3 phases of the surgical safety checklist were performed) / (Total number of surgeries performed)] x 100

Total margin (consolidated): % by which total corporate (consolidated = all sector codes and fund types) revenues exceed or fall short of total corporate (consolidated) expense, excluding the impact of facility amortization, in a given year

VAP rate per 1,000 ventilator days: [(Total number of newly diagnosed VAP cases in the ICU after at least 48 hours of mechanical ventilation) / (Number of ventilator days in that reporting period)] x 1,000

Wait time: the time from the decision to treat to time treatment received