

Hospital/Emergency Department Performance Measurement and Monitoring Program

Program Overview and Scorecard Training Session for
Hospital Service Providers

Presented by: Ontario Health

Date: October 2024



**Ontario
Health**

Welcome!

Webinar Overview

- Overview of Hospital/Emergency Department (ED) Performance Measurement and Monitoring (PM&M) Initiative
- Scorecard Navigation
- Resources
- Questions and Answers

Context

- Hospitals and EDs are facing many challenges: escalating workforce shortages, high hospital inpatient bed occupancy, increasing demand on ED services for which they were not designed and growing demand for care of more clinically and socially complex patients
- The Hospital/ED Performance Measurement and Monitoring (PM&M) program has been developed to monitor performance of both hospital capacity and ED metrics using a provincial, regional, local and site lens
- This program establishes provincial, standardized measures using a performance scorecard, to inform system leadership, engagement and collaboration to address improvement in hospital and ED performance

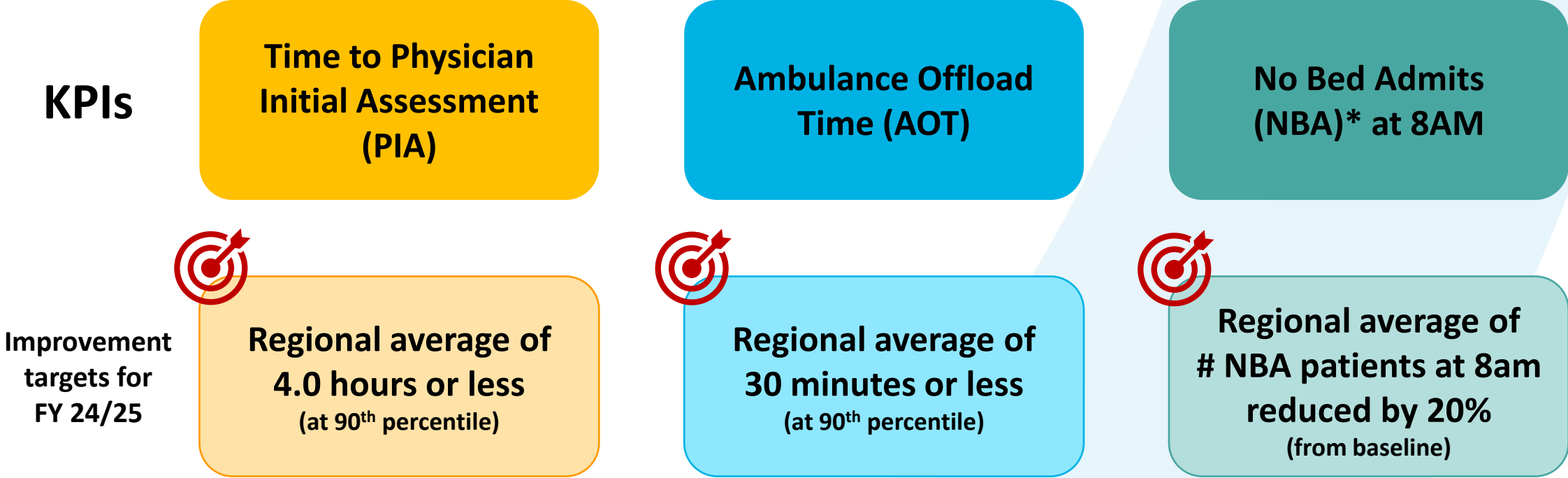
Hospital/ED PM&M Scorecard

- The program includes a **provincial scorecard** with priority key performance indicators (KPIs) measured at both monthly and quarterly intervals, with both the average and 90th percentile
- The indicators on the scorecard were selected because:
 - They can inform how the overall ED system is performing
 - Data are of good quality and readily available
 - Data can be added into the Scorecard quickly
- The scorecard uses National Ambulatory Care Reporting System (NACRS) data
- Performance is measured and monitored over a rolling 13-month timeframe and in relation to specific provincial targets

Hospital/ED PM&M Engagement Framework

- The scorecard data is intended to support discussions between Ontario Health and hospitals about overall ED, hospital, regional and system enablers, as well as barriers in meeting performance targets
- **Program Goals:**
 - Proactively learn and share best practices to encourage continuous quality improvement across domains
 - Align performance with ED system priorities in patient care and outcomes, system capacity and pressures
 - Define and communicate performance expectations, and monitor progress

Hospital/ED Performance Improvement Targets for FY 24/25



- **Baseline data:** March 2024
- **Improvement timeframe:** April 1, 2024 - March 31, 2025

** Data based on daily average # patients waiting for inpatient bed at 8am*

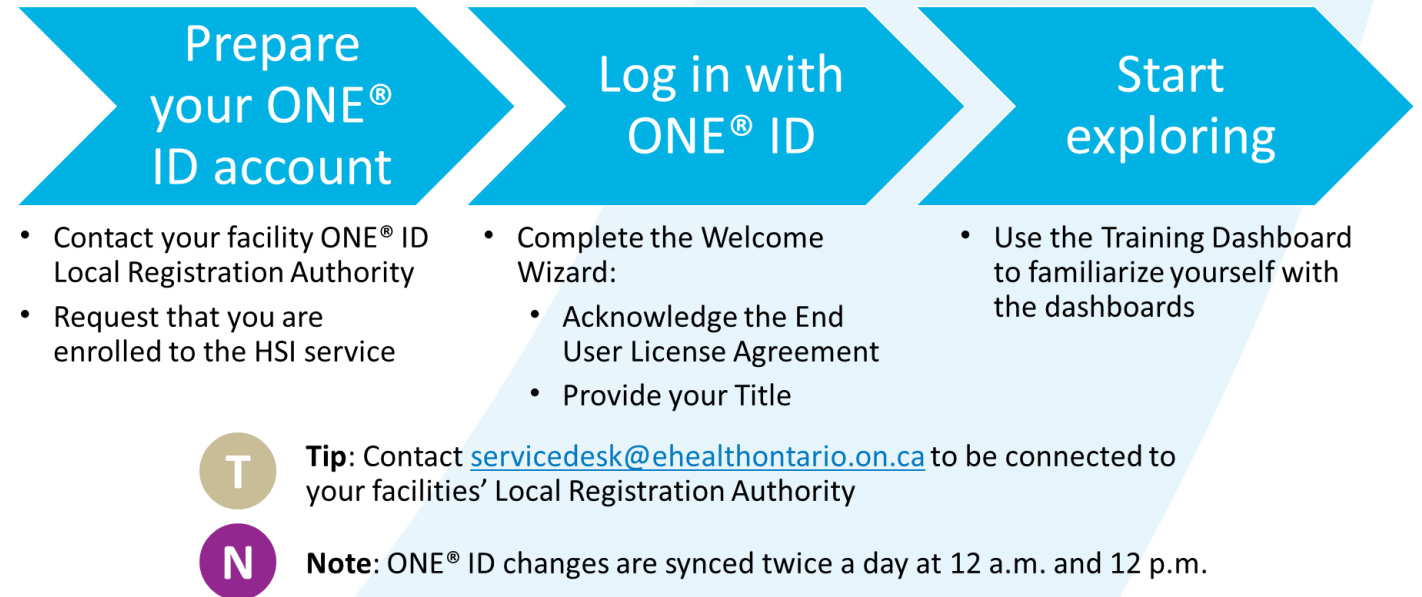
Scorecard Walkthrough

Hospital Access to Scorecard

You can gain access to the Hospital/ED Performance Scorecard through your facility:

1. Make sure you have an ONE ID
 - If not, contact your facility's LRA to set one up
2. Make sure you have been granted access to the Hospital/ED Performance Scorecard
 - If you don't see it as an available report on HSI, please contact your facility's FRA to gain access
3. Log in through <https://hsi.ontariohealth.ca/>

HSI Registration Process



For a step-by-step guide, please visit the [Gain Access to the HSI Platform](#) page on the HSI Online Help website.

Tool Navigation

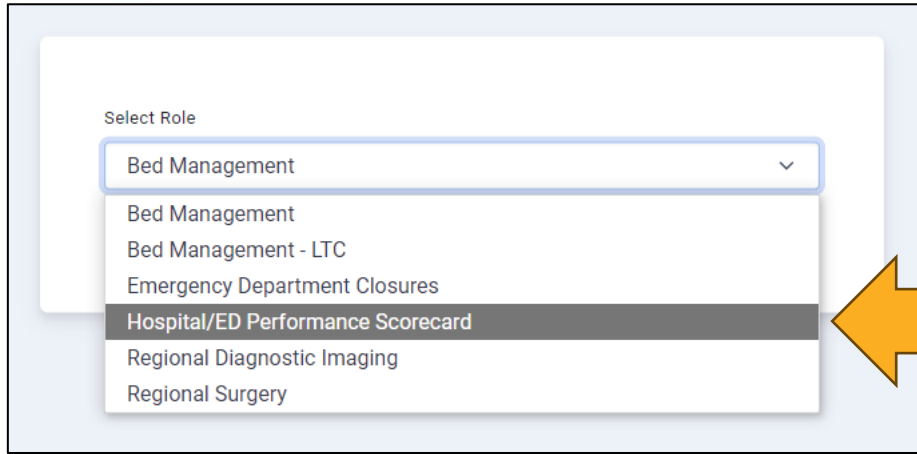
- Website: <https://hsi.ontariohealth.ca/>

Sign in using
ONE® ID
credential



The screenshot shows the homepage of the Health System Insights Platform. At the top right, there are navigation links: "Key Benefits", "Future Iterations", "Support", and "How to Register". The main heading is "HSI Health System Insights", with "HSI" in large bold letters and "Health System Insights" below it. A descriptive paragraph states: "Ontario Health's new Health System Insights Platform is an innovative and agile business intelligence tool that informs health system planning by visualizing meaningful and actionable insights into the current state of the health system." Below this is a "Sign-in Using" section with two buttons: "One ID" and "Ontario Health". To the right of the text is a large graphic featuring a stylized map of Ontario in the background, two healthcare professionals (a woman and a man) in white coats, and a dashboard with various charts and graphs. The Ontario Health logo is in the bottom right corner.

Tool Navigation (Cont'd)



Select Hospital/ED Performance Scorecard from dropdown menu options

Access to Help Menu



HSI Online Help

Search

- About the HSI Platform and Online Help
- Training and Webinar Recordings
- Gain Access to the HSI Platform
- Facility Role Administrator (FRA)
- Bed Management (BM)
- Cancer Care
- Diagnostic Imaging (DI)
- Surgery (SU)
- Hospital ED Performance Scorecard**
- Mental Health and Addictions
- OH Internal Dashboards
- Platform Components
- Visualization Features
- Privacy and Security
- Release Notes
- Support and Contacts

About the Health System Insights (HSI) Platform

The [Health System Insights Platform](#) is an innovative and agile business intelligence tool that informs health system planning by visualizing meaningful and actionable insights into the current state of the health system. The platform hosts health system dashboards (i.e., Surgery queues, Bed Capacity Monitoring, Long Term Care Beds and Diagnostic Imaging queues) that:

- visualize live queues/data to understand demand patterns,
- identify service gaps,
- support load management,
- visualize key performance indicators, and
- review health system data in real-time.

Visit the [How to Gain Access to the HSI Platform](#) page for access details.

About the Health System Insights (HSI) Online Help

Tool Navigation (Cont'd)

HSI Online Help Search

- About the HSI Platform and Online Help
- Training and Webinar Recordings
- + Gain Access to the HSI Platform
- + Facility Role Administrator (FRA)
- + Bed Management (BM)
- + Cancer Care
- + Diagnostic Imaging (DI)
- + Surgery (SU)
- Hospital ED Performance Scorecard**
 - Indicator Methodology
 - ED Contacts
- + Mental Health and Addictions
- + OH Internal Dashboards
- + Platform Components
- Visualization Features
- Privacy and Security
- Release Notes
- Support and Contacts

About the Hospital/Emergency Department (ED) Performance Scorecard

First launched in April 2024, the Hospital/ED Performance Scorecard was developed as part of the [Hospital/ED Performance Measurement and Monitoring \(PM&M\) Initiative](#).

The scorecard is a monitoring tool that pulls together key performance indicator data from existing Ontario Health sources to provide a consistent and standardized view of hospital and ED performance-related data. It is intended to be used to support discussions and knowledge exchange between Ontario Health and health service providers (hospitals and EDs) to disseminate best practices and identify support needs for the ED system.

Help topics covered include:

- [Overview of the PM&M Initiative and Scorecard](#)
- [Indicator methodology](#)
- [Training webinar presentation](#)

For all other inquiries please contact: itservicedesk@ontariohealth.ca

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[https://hsihelp.ontariohealth.ca/hsi/index.htm?#t=ED%2FAbout the Hospital Emergency Department Scorecard.htm](https://hsihelp.ontariohealth.ca/hsi/index.htm?#t=ED%2FAbout%20the%20Hospital%20Emergency%20Department%20Scorecard.htm)

Tool Navigation (Cont'd)

Toggle between monthly, quarterly, average and 90th percentile data

Click to view indicator description and methodology

Filters Month or Quarter, Region, Hospital Group, etc.

Performance data

Circles indicate percentage range of deviation from target

Clear all selected filters

Purple filters allow for specific data to be selected and displayed by age and/or CTAS group for a subset of indicators

Data Quality notes

Link to Data Quality Report

Ontario Health Hospital/ED Performance Scorecard
Latest Data August 2024

Monthly Average 90th Percentile | Quarterly Average 90th Percentile | Methodology | Clear all slicers

Type: All | Region: All | Hospital Group Name: All | Name: All | P4R: All | Age Group: All Ages | CTAS Group: All CTAS | Month: Most Rece...

The following KPIs are for All Ages and All CTAS groups.

Name	Total Volume	Time to PIA (Hrs) [90th Percentile]	Ambulance Offload Time (Mins) [90th Percentile]	Daily Avg. Patients Waiting for IPB at 8 AM	Admitted Length of Stay (Hrs) [90th Percentile]	Non-Admitted Length of Stay (Hrs) [90th Percentile]	Time to IPB [90th Percentile]	Left Seen Rate	Acute Occupancy	Acute Bed Occupancy	eCTAS Override	Revisit Rate w/n	Revisit Rate w/n	Re-admission Rate w/n	Return Visits for Sentinel	Performance Rank
Alexandra Hospital	1,386	4.1	●	0.1	15.5											
Bluewater Health-Petrolia Site	1,668	2.3	●	0.0	7.4											
Bluewater Health-Sarnia General Site	5,120	3.1	●	5.7	29.6											
Brant Community Healthcare Sys-Brantford	4,270	7.1	●	143	53.1	●	15.1								0.00%	73
Brightshores Health System-Lions Head Site	772	2.1	●	30	14.8	●	0.0								0.00%	
Brightshores Health System-Markdale Site	1,331	3.0	●	32	27.4	●	0.3								0.22%	
Brightshores Health System-Meaford Site	1,291	2.6	●	26	49.2	●	0.3								0.00%	
Brightshores Health System-Owen Sound Site	2,723	5.3	●	17	42.6	●	5.8								0.00%	
Brightshores Health System-Southampton Site	1,816	3.9	●	21	89.6	●	2.0								0.00%	51
Brightshores Health System-Wiarton Site	1,544	3.0	●	19	60.5	●	0.9								0.26%	
Brockville General Hospital	2,533	5.2	●	91	34.5	●	4.3								0.10%	
Campbellford Memorial Hospital	1,714	4.7	●	82	50.9	●	11.6								0.11%	71
Campbellford Memorial Hospital	1,714	4.7	●	31	66.9	●	4.3								0.00%	

Ambulance Offload Time (Mins) Toronto Region

Selected Site (Blue line), Province (Purple line), AOT Target P90 (Yellow dashed line)

Data Quality Notes for ED Indicators

The following hospital site(s) experienced reporting issues, please interpret the information with caution: Alexandra Hospital, Bluewater Health-Petrolia Site, Bluewater Health-Sarnia General Site, Hanover & District Hospital, Hospital Notre Dame Hospital (Hearst), Strathroy Middlesex General Hospital, University Health Network-General Site, University Health Network-Western Site, Winchester District Memorial Hospital

Round colored dot is a measure of deviation from target. ● On Track (+/- 5%), ● Minor Deviation (+/- 5% to 10%), ● Major Deviation (+/- 10% or more)

Sentinel events refer to acute myocardial infarction, sub-arachnoid hemorrhage, and pediatric sepsis.

ED Data Quality Notes Link

Disclaimer: This data has been prepared to support situational awareness and system planning and should be disseminated only to those individuals who require it. Please do not use this information, either alone or with other information to identify an individual. This includes attempting to decrypt information that is encrypted, attempting to identify an individual based on encrypted information, and attempting to identify an individual based on prior knowledge.

Scorecard Demo

Methodology Documentation

Emergency

Home
Announcements
Monthly ED Wait Times an...
Hallway Patients (No Bed ...
Hospital/ED Performance ...
ED Monthly (Average)
ED Monthly (90th Perce...
ED Quarterly (Average)
ED Quarterly (90th Perc...
Methodology

File Share Export Get insights

Indicator Methodology

Go back

Deviation to Target

- On Track (Greater than -5% or Less than +5% off Target)
- Minor Deviation (Between +5% to +10% off Target)
- Major Deviation (Greater than +10% or more off Target)

Hospital Group Name

Hospitals are grouped under the following categories based on their annual visit volume:

Hospital Group	Definition
Under 7,000 ED Visits	Treat less than 7,000 annual ED visits
Very Low-Volume	Treat less than 17,500 annual ED visits
Low-Volume	Treat between 17,500 and 29,999 annual ED visits
Medium-Volume	Treat between 30,000 and 49,999 annual ED visits
High-Volume	Treat between 50,000 and 85,000 annual ED visits
Very High-Volume	Treat over 85,000 annual ED visits
Paediatric Hospital	Treat only patients 18 years of age or less. Generally, they provide all types of paediatric services.
Teaching Hospital	Provide acute and complex patient care and have membership in the Council of Academic Hospitals of Ontario (CAHO). They are affiliated with a medical or health sciences school, are involved in significant research activity, and provide training for interns and residents.
Urgent Care Centre	Hospital-affiliated; no current MOH definition

Data Quality and Suppression Descriptions

The following designations are used on the Scorecard:

Designation	Description
Blank	Site(s) with data quality issues will appear as blank and noted in the footnotes. Please refer to the ED_Data Quality Notes_YYYYMM report posted on the ATC Sharepoint site
LV	Low Volume. When volume used to calculate a metric is 1 to 5, the data will be suppressed with 'LV'. This applies to rates where either the numerator or denominator is between 1 to 5.

Indicator Definition and Inclusion/Exclusion Criteria

Quarterly Average Methodology
90th Percentile Clear all slicers

Age Group CTAS Group Month
All Ages All CTAS Most Rece...

Data Quality Documentation

SharePoint

Ontario Health ATC Information Site ER Documents

Home
Help
Search
ATC Call Calendar
All Items List View
ALC
DI
eCTAS
ER
SETP
Surgery
Documents
ALC
DI
ER

Search: GO

Count = 144

Type	Name	Line of Business	Category	Document Type	Content Type	Report Type	Created
	Count = 144						
	ED_Data Quality Notes_202408 <small>NEW</small>	ER	Operations	Report		Data Quality Report	10/3/2024 9:02 AM
	P4RExpansionProject_Site Level Indicator Report - 2024 October_20241002	ER	P4R Expansion 2023/24	Report	Go-Live		10/1/2024 12:04 PM
	ED_P4R_Ranking_Report_202408	ER	Operations	Report		Performance: Ranking Report	10/1/2024 10:58 AM
	ED_Fiscal Year Report_202408	ER	Operations	Report		Performance: Operational Report	10/1/2024 10:57 AM
	ED_CDU Compliance Report_202408	ER	Operations	Report		Performance: Provincial	10/1/2024 10:56 AM

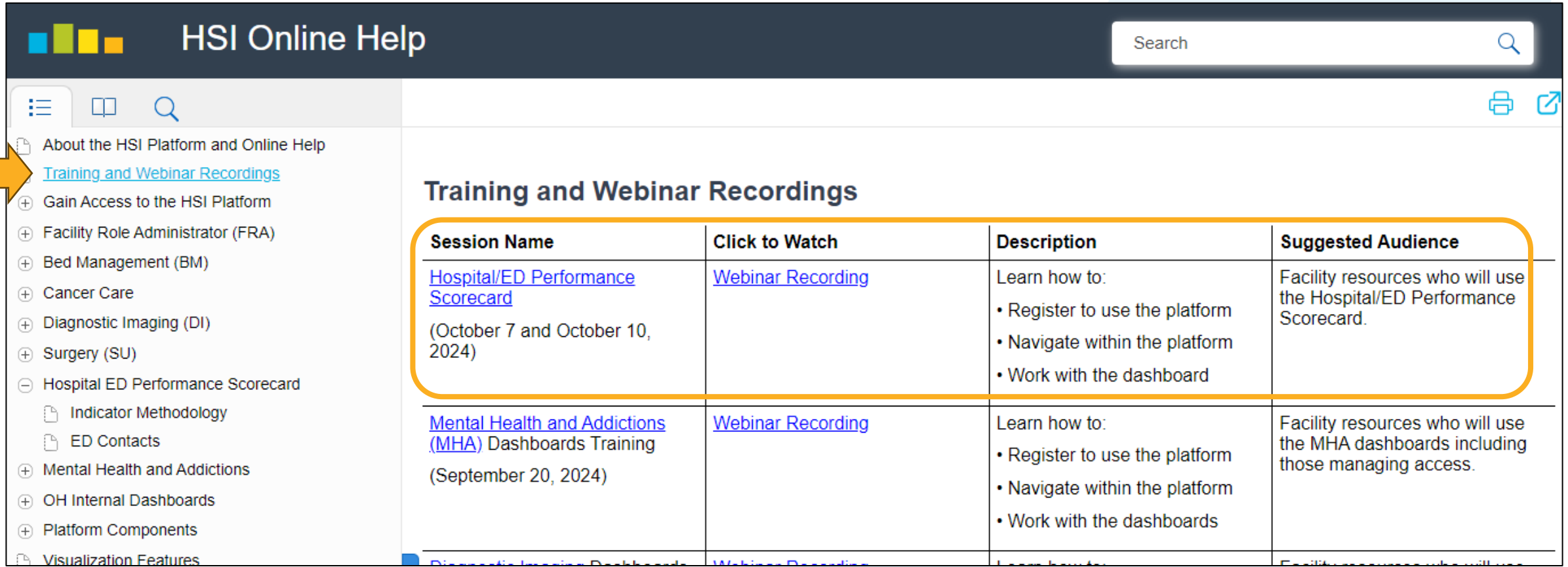
[ED Data Quality Notes Link](#)

Information to identify an

HSI Health System Insights



Webinar Recording



The screenshot shows the HSI Online Help website. The header includes the HSI logo and the text "HSI Online Help" on the left, and a search bar on the right. A sidebar menu on the left lists various topics, with "Training and Webinar Recordings" highlighted by an orange arrow. The main content area displays a table titled "Training and Webinar Recordings" with four columns: Session Name, Click to Watch, Description, and Suggested Audience. The first row is highlighted with an orange border.

Session Name	Click to Watch	Description	Suggested Audience
Hospital/ED Performance Scorecard (October 7 and October 10, 2024)	Webinar Recording	Learn how to: <ul style="list-style-type: none">• Register to use the platform• Navigate within the platform• Work with the dashboard	Facility resources who will use the Hospital/ED Performance Scorecard.
Mental Health and Addictions (MHA) Dashboards Training (September 20, 2024)	Webinar Recording	Learn how to: <ul style="list-style-type: none">• Register to use the platform• Navigate within the platform• Work with the dashboards	Facility resources who will use the MHA dashboards including those managing access.
Diagnostic Imaging Dashboards	Webinar Recording	Learn how to:	Facility resources who will use

Contact Information

- itservicedesk@ontariohealth.ca: All inquiries related to the Scorecard
- ONEIDBusinessSupport@ontariohealth.ca: ONE® ID access inquiries
- emergencyservices@ontariohealth.ca: Hospital/ED Performance Measurement and Monitoring (PM&M) initiative information

Questions?

Appendices

Hospital/ED Performance Measurement and Monitoring

- An OH provincial framework to support a system approach to measuring and monitoring hospital/ED performance: site level, regionally and provincially
- The provincial **Hospital/ED Performance Scorecard** has been developed as a tool to build system level capacity and approach to improve Hospital/ED performance
- Monthly and quarterly review and engagement sessions between OH and hospital leaders to:
 - Review performance data together
 - Collaborate to identify leading practices, opportunities and system gaps
 - Learn and disseminate knowledge
 - Create better alignment with legacy programs (P4R, QIP, etc.) to drive performance in the system

Scorecard Overview

Available hospital data

- The Scorecard is not a public-reporting tool
- As of October 2024, data from 119 hospitals are available on the Scorecard
 - The remaining hospitals are being onboarded to submit monthly data into NACRS through the Canadian Institute for Health Information (CIHI)
- All in-scope hospitals will have their data available on the Scorecard by FY 2025/26

Scorecard data:

- Level 1 NACRS data from 119 existing ERNI sites
- Leverages existing key performance indicators (KPIs) and contextual indicators
- Provides longitudinal data for the past (rolling) 13 months
- Data review can be performed on a monthly and quarterly cycle
 - **Monthly data:** Available 1st business day of the month
 - **Quarterly data:** Available 1st business day of the 2nd month in a quarter