

fiscal
2021-2022 **Q4**
4th quarter ended March 31, 2022

KHSC this
quarter



Service Accountability Agreement Report



Hôpital
Hotel Dieu
Hospital



Hôpital Général de
Kingston General
Hospital

Kingston Health
Sciences Centre

Centre des sciences de
la santé de Kingston



			F2021						F2022								
			Q2		Q3		Q4		Q1		Q2		Q3		Q4		F2022 Q4 Target
Strategic Direction	2020 Goal	Indicator	21-Q2	Actual	21-Q3	Actual	21-Q4	Actual	22-Q1	Actual	22-Q2	Actual	22-Q3	Actual	22-Q4	Actual	
1. Ensure quality in every patient experience	2. Make quality the foundation of everything we do	Alternate Level Of Care (ALC) Rate (KHSC SAA)	G	10.4	G	9.6	G	10.9	G	10.9	G	11.6	G	13.1	N/A	NULL	15.0
		90th Percentile ED Length of Stay for Non-Admitted High Acuity Patients [CTAS I-III] (KGH SAA)	R	8	R	14.2	R	9.2	R	9.5	R	9.5	R	10	R	9.9	6.3
		90th Percentile ED Length of Stay for Non-Admitted High Acuity Patients [CTAS I-III] (HDH SAA)	G	5.1	G	4.9	G	5.1	G	5.1	G	5.4	G	5.3	G	5.3	4.9
		90th percentile ED Length of Stay for Non-Admitted Low Acuity Patients (CTAS IV-V) (KGH SAA)	Y	5.8	R	6.1	R	6.5	R	6.7	R	6.5	R	7.5	R	7.8	4.6
		90th percentile ED Length of Stay for Non-Admitted Low Acuity Patients (CTAS IV-V) (HDH SAA)	G	3.8	G	3.8	G	4	G	4.2	G	4.3	Y	4.7	Y	4.5	4
		Percent of Cases Completed within priority target for diagnostic CT Scan: Priority 2 to 4 (KGH SAA)	G	84	G	82	Y	76	G	82	G	88	G	95	G	90	78
		Percent of Cases Completed within priority target for MRI: Priority 2 to 4 (KGH SAA)	G	63	G	57	G	52	G	62	G	67	Y	51	G	55	52.5
		Percent of Cases Completed within priority target for diagnostic CT Scan: Priority 2 to 4 (HDH SAA)	Y	49	R	43	R	44	G	51	G	64	R	54	R	53	64.5
		Percent of Cases Completed within priority target for hip replacement surgery: Priority 2 to 4 (KGH SAA)	R	38	G	92	G	82	G	69	R	59	R	53.3	R	56	71
		Percent of Cases Completed within priority target for knee replacement surgery: Priority 2 to 4 (KGH SAA)	R	48	R	42	Y	74	R	56	R	54	R	51	R	37	76
		Percent of Cases Completed within priority target for hip replacement surgery: Priority 2 to 4 (HDH SAA)	R	69	G	81	G	84	G	81	R	55	R	56	R	58	81.5
		Percent of Cases Completed within priority target for knee replacement surgery: Priority 2 to 4 (HDH SAA)	R	67	R	61	G	92	R	50	R	71	R	64.3	R	66	90
		Rate Of Hospital Acquired Clostridium Difficile Infections (KGH SAA)	G	0.17	N/A	NULL	N/A	NULL	N/A	NULL	N/A	NULL	N/A	NULL	N/A	NULL	NULL
		Readmissions To Own Facility within 30 Days for Selected HBAM Inpatient Grouper (HIG) Conditions (KGH SAA)	G	11.8	G	13	G	14.7	G	14.8	G	12.2	G	16.1	N/A	NULL	17.6
		Percent ALC Days (KHSC SAA explanatory)	G	8.9	G	9.4	R	12.2	G	11.9	G	10.71	Y	13.3	N/A	NULL	13.2
		90th Percentile Time to Disposition Decision (admitted patients) (KHSC SAA)	Y	12.5	Y	12.1	R	13	R	12.8	R	14.3	R	15	R	15.2	11.4
		Percent of Cases Completed within priority target for cancer surgery: Priority 2 to 4 (KGH SAA)	R	79	Y	80	Y	81	R	69	R	65	R	78	R	66	90
		Percent of Cases Completed within priority target for cardiac bypass surgery: Priority 2 to 4 (KGH SAA)	G	98	G	93	G	92	R	79.7	R	78.9	N/A	NULL	N/A	NULL	90
		Percent of Cases Completed within priority target for cataract surgery: Priority 2 to 4 (HDH SAA)	R	26	R	44	R	46	R	27	R	38	R	39.2	R	40	90
		Percent of Stroke/TIA Patients Admitted to a Stroke Unit During Their Inpatient Stay (KGH SAA)	G	80	Y	68	Y	69.3	Y	72	Y	70	Y	65	Y	72	75
		Hospital Standardized Mortality Ratio (HSMR) (KGH SAA)	R	130	R	124	Y	105	Y	107	Y	107	N/A	NULL	N/A	NULL	NULL
		Central Line Bloodstream Infection Rate (KHSC SAA)	R	0.62	G	0.29	R	1.37	N/A	2.44	N/A	2.67	N/A	1.04	N/A	NULL	NULL

			F2021						F2022								
			Q2		Q3		Q4		Q1		Q2		Q3		Q4		F2022 Q4 Target
Strategic Direction	2020 Goal	Indicator	21-Q2	Actual	21-Q3	Actual	21-Q4	Actual	22-Q1	Actual	22-Q2	Actual	22-Q3	Actual	22-Q4	Actual	
		Rate Of Hospital Acquired Methicillin Resistant Staphylococcus Aureus Bacteremia (MRSA) (KGH SAA)	G	0	N/A	NULL	N/A	NULL	N/A	NULL	N/A	NULL	N/A	NULL	N/A	NULL	NULL
		Rate Of Ventilator-Associated Pneumonia (KGH SAA)	R	2.34	G	0.77	N/A	2.67	N/A	7.29	N/A	9.84	N/A	6.96	N/A	NULL	NULL
		Repeat Unscheduled Emergency Visits within 30 Days For Mental Health Conditions (KGH SAA)	R	34.3	R	35.2	Y	26.5	Y	28.6	Y	32	G	21.5	G	17.3	25
		Repeat Unscheduled Emergency Visits within 30 days for Substance Abuse Conditions (KGH SAA)	Y	36.7	G	31.9	Y	38	R	47.1	G	30	G	21.8	G	20	35
		Repeat Unscheduled Emergency Visits within 30 Days For Mental Health Conditions (HDH SAA)	R	85.4	R	55.6	R	38	R	52.8	R	49.5	Y	20.9	R	29.5	16.3
		Repeat Unscheduled Emergency Visits within 30 days for Substance Abuse Conditions (HDH SAA)	R	29.8	R	41.7	G	13.5	G	5.9	R	37.9	R	41.2	G	14.3	22.4
		Average number of days waited from referral/application to initial assessment complete (KHSC MSAA)	N/A	7.94	N/A	14.21	N/A	7.65	N/A	7.45	N/A	4.42	N/A	7.48	N/A	NULL	NULL
		Average number of days waited from Initial Assessment Complete to Service Initiation (KHSC MSAA)	N/A	4.04	N/A	3.77	N/A	9.61	N/A	8.63	N/A	14.53	N/A	7.86	N/A	NULL	NULL
		Repeat Unscheduled Emergency Visits within 30 Days For Mental Health Conditions (KHSC MSAA CMH)	R	41.1	R	38.8	R	28.4	R	32.5	R	34.6	R	21.4	Y	19.5	16.3
		Repeat Unscheduled Emergency Visits within 30 days for Substance Abuse Conditions (KHSC MSAA CMH)	R	35.8	R	32.8	R	34.8	R	43.8	R	33.3	G	23	G	19.5	22.4
		QBP (Quality Based Procedure) - Acute Primary Unilateral Hip Replacement (KHSC SAA)	G	82	R	146	R	222	R	25	R	67	R	141	R	177	347
		QBP (Quality Based Procedure) - Acute Primary Unilateral Knee Replacement (KHSC SAA)	Y	112	R	204	R	321	R	23	R	124	R	205	R	271	530
		QBP (Quality Based Procedure) - Bilateral Hip and Knee Replacement (KGH SAA)	R	9	R	15	R	20	R	9	R	19	R	34	R	45	13
		QBP (Quality Based Procedure) - Knee Arthroscopy (KHSC SAA)	R	40	R	80	R	113	R	21	R	46	R	65	R	76	229
		QBP (Quality Based Procedure) - Non-Emergent Spine (Non-Instrumented - Day Surgery) (KHSC SAA)	G	28	R	55	R	78	R	7	R	18	R	32	R	42	110
		QBP (Quality Based Procedure) - Non-Emergent Spine (Non-Instrumented - Inpatient Surgery) (KHSC SAA)	R	60	Y	112	Y	149	R	28	R	57	R	96	R	114	171
		QBP (Quality Based Procedure) - Non-Emergent Spine (Instrumented - Inpatient Surgery) (KHSC SAA)	Y	18	Y	35	G	56	Y	17	R	37	R	56	R	78	56
		QBP (Quality Based Procedure) - Shoulder (Arthroplasties) (KHSC SAA)	G	6	R	10	R	16	R	3	R	8	R	13	R	13	50
		QBP (Quality Based Procedure) - Shoulder (Reverse Arthroplasties) (KHSC SAA)	R	8	R	22	R	29	R	2	R	9	R	13	R	21	46
		QBP (Quality Based Procedure) - Shoulder (Repairs) (KHSC SAA)	Y	27	R	53	R	70	R	2	R	16	R	29	R	43	130
		QBP (Quality Based Procedure) - Shoulder (Other) (KHSC SAA)	G	5	R	6	R	10	R	0	R	5	R	9	R	11	23
		QBP (Quality Based Procedure) - COPD (KGH SAA)	R	166	G	254	R	318	R	90	R	166	R	243	R	312	506
		QBP (Quality Based Procedure) - Endoscopy (KHSC SAA)	R	1,674	R	4,895	R	6,687	G	2,019	Y	3,969	G	6,401	G	8,809	8,964
		QBP (Quality Based Procedure) - Heart Failure (CHF) (KGH SAA)	R	190	G	290	G	385	Y	122	G	217	R	219	G	443	420

			F2021						F2022								
			Q2		Q3		Q4		Q1		Q2		Q3		Q4		F2022 Q4 Target
Strategic Direction	2020 Goal	Indicator	21-Q2	Actual	21-Q3	Actual	21-Q4	Actual	22-Q1	Actual	22-Q2	Actual	22-Q3	Actual	22-Q4	Actual	
2. Improve the health of our communities through partnership and innovation	KHSC is part of an integrated and sustainable regional health-care system	QBP (Quality Based Procedure) - Hip Fracture (KHSC SAA)	R	143	G	203	G	273	G	63	G	135	G	215	G	294	277
		QBP (Quality Based Procedure) - Hysterectomy (KHSC SAA)	R	54	R	100	Y	140	R	22	G	75	G	109	R	130	170
		QBP (Quality Based Procedure) - Pneumonia (KGH SAA)	Y	81	R	131	R	174	R	44	R	98	R	153	R	204	301
		QBP (Quality Based Procedure) - Stroke - Hemorrhage (KGH SAA)	R	28	R	39	R	53	R	8	G	20	G	31	G	46	44
		QBP (Quality Based Procedure) - Stroke - Ischemic or Unspecified (KGH SAA)	R	148	Y	223	Y	296	G	68	G	148	G	230	G	297	280
		QBP (Quality Based Procedure) - Stroke - Transient Ischemic Attack (TIA) (KGH SAA)	G	16	R	25	R	32	R	3	R	8	R	15	R	23	51
		QBP (Quality Based Procedure) - Stroke - Endovascular (KGH SAA)	R	29	R	43	R	62	G	18	G	36	G	56	G	71	66
		QBP (Quality Based Procedure) - Tonsillectomy (KHSC SAA)	R	54	R	79	R	97	R	2	R	20	R	32	R	49	291
		QBP (Quality Based Procedure) - Vascular - Aortic Aneurysm (KGH SAA)	R	26	Y	38	Y	49	R	2	R	19	R	32	R	40	59
		QBP (Quality Based Procedure) - Vascular - LEOD (KGH SAA)	R	17	G	30	R	100	R	41	R	77	R	148	R	147	36
		QBP (Quality Based Procedure) - Unilateral Cataract Repair Surgery (HDH SAA)	R	549	R	1023	R	1606	R	203	R	759	R	1133	N/A	0	2917
		QBP (Quality Based Procedure) - Non-Routine and Bilateral Cataract Repair Surgery (HDH SAA)	R	116	R	206	R	278	R	55	R	128	R	211	R	317	69
		QBP (Quality Based Procedure) - Corneal Transplant (Day Surgery) (KHSC SAA)	R	38	R	54	R	78	Y	19	Y	40	G	73	G	92	93
		Ambulatory Care Volumes (KHSC SAA)	Y	130,004	G	115,732	R	132,756	G	120,117	G	110,412	R	146,847	N/A	NULL	115,275
		Day Surgery Weighted Cases (KHSC SAA)	Y	1,382	G	1,515	G	1,533	R	1,069	G	1,404	G	1,528	G	1,445	1,505
		Emergency Department Weighted Cases (KHSC SAA)	Y	1,334	R	1,109	Y	1,238	Y	1,303	G	1,496	G	1,391	G	1,443	1,482
		Emergency Department and Urgent Care Visits (KHSC SAA)	G	26,067	Y	22,598	Y	22,091	Y	24,333	G	29,715	G	27,040	Y	23,601	29,734
		Inpatient Mental Health Patient Days (KHSC SAA)	R	2,855	R	2,912	R	2,504	R	2,446	R	2,859	R	2,964	N/A	NULL	3,629
		Total Inpatient Acute Weighted Cases (KHSC SAA)	R	8,792	Y	9,653	Y	9,984	G	10,482	Y	10,020	R	8,367	N/A	NULL	10,628
3. Launch KHSC as a leading centre for research and education	KHSC is a top operational performer amongst Ontario teaching hospitals	Current Ratio (Consolidated – All Sector Codes And Fund Types) (KHSC SAA)	G	2.02	G	2.1	G	1.79	N/A	NULL	N/A	NULL	N/A	NULL	N/A	NULL	NULL
		Total Margin (Consolidated – All Sector Codes And Fund Types) (KHSC SAA)	G	1.25	G	1	G	1.89	N/A	NULL	N/A	NULL	N/A	NULL	N/A	NULL	0
		Adjusted Working Funds / Total Revenue % (KHSC SAA)	N/A	NULL	N/A	NULL	N/A	NULL	N/A	NULL	N/A	NULL	N/A	NULL	N/A	NULL	NULL
		Total Margin (Hospital Sector Only) (KHSC SAA)	G	1.42	G	1.14	G	2.15	N/A	NULL	N/A	NULL	N/A	NULL	N/A	NULL	0