Mental Health & Addictions Quality Initiative Comparison Scorecard - Q3 2016-2017

Domain	Indicator	Definition	Description	Homewood Health Centre		Ontario Shores		The Royal		Waypoint		camh	
				Q3	YTD	Q3	YTD	Q3	YTD	Q3	YTD	Q3	YTD
Client Complexity	# of Reasons for Admission	% of clients admitted with more than one reason for admission	Ontario's specialty mental health hospitals provide care for patients with serious and complex mental illness. Individuals are often admitted for a number of reasons and have multiple mental health conditions at the time of admission.	72.0%	71.5%	91.4%	91.1%	50.0%	51.0%	57.5%	57.9%	86.7%	84.8%
	# of Psychiatric Diagnoses	% of clients with more than one psychiatric diagnosis at discharge	Individuals who receive inpatient treatment often have complex mental illness with multiple diagnoses. While in hospital, patients receive assessment, stabilization and treatment from an interprofessional team of healthcare providers.	66.7%	62.7%	55.9%	52.0%	54.3%	52.5%	46.8%	51.2%	53.4%	56.4%
	# of Medical Diagnoses	% of clients with more than one medical diagnosis at discharge	Mental health inpatients can often have medical conditions that also need to be treated. Providing effective care for both physical and mental health conditions can be challenging, particularly where there is a risk of interaction among multiple medications. Clients with both medical and mental health diagnoses can present higher levels of complexity.	25.8%	24.5%	55.3%	53.4%	44.9%	41.9%	18.5%	20.6%	31.9%	30.0%
Client Outcomes	Self Care Index	% of clients with an improvement in the self-care index score from admission to discharge	The Self-Care Index (SCI) reflects a person's risk of inability to care for self due to mental health symptoms. It is calculated using factors such as daily decision making, insight into one's own mental health, decreased energy, abnormal thought process, and expression (i.e. – making self understood). This indicator shows the percentage of clients with improved SCI scores between admission and discharge, indicating an improved ability to care for oneself.	76.1%	73.7%	38.9%	37.6%	59.5%	64.2%	65.2%	68.4%	27.5%	27.4%
	Overall Change in Care Needs	% of clients with reported improvement or marked improvement at discharge	Evaluates the overall change in clinical status as compared to 1 month ago or since admission/last assessment. This is a key element in assessing discharge potential	82.6%	83.4%	73.8%	71.1%	81.8%	81.4%	64.5%	71.0%	89.4%	87.0%
	Readmission Rate	% of clients re-admitted to the any facility within 30 days of discharge (reporting one quarter behind).	Sometimes patients have difficulties maintaining their level of wellness in the community so they are readmitted to receive stabilization and support for their illness.	6.5%	6.3%	17.7%	15.1%	15.3%	11.0%	12.4%	16.3%	21.5%	21.1%
		Readmission to any facility within 30 days of discharge - denominator.	Sometimes patients have difficulties maintaining their level of wellness in the community so they are readmitted to receive stabilization and support for their illness.	615	1,780	164	497	261	755	202	681	1,122	3,372
		% of clients re-admitted to same facility within 30 days of discharge.	Sometimes patients have difficulties maintaining their level of wellness in the community so they are readmitted to receive stabilization and support for their illness.	3.4%	4.5%	4.4%	5.4%	8.2%	5.9%	7.0%	7.1%	10.4%	12.4%
Client Safety	Non-use of Control Interventions	Prevalence of non-use of control interventions - perceentage of patients whose admission assessment submitted during the quarter indicated no use of acute control medication, mechanical, physical/manual restraint by staff nor seclusion room.	This indicator is used to track the percentage of clients with no use of Acute Control Medication, Physical/Mechanical Restraint, nor Seclusion room usage.	92.4%	94.1%	79.1%	77.4%	92.6%	90.0%	85.1%	85.0%	65.4%	67.7%
	% Unauthorized Leave of Absence Days (ULOAs)	ULOA days / Patient days in period x 100	As patients move through the treatment plan they spend time on hospital grounds or in the community, based on their individual recovery progress. This is an important part of the treatment plan as it helps patients recover as they reintegrate into the community. This indicator represents the number of patient days when the patient was absent due to an unapproved leave from the facility.	**	**	0.13%	0.13%	0.23%	0.25%	0.11%	0.04%	1.51%	0.84%
	Medication Incidents **(under development)**	All medication incidents/# patient days in the period X 1000	Facilities will use CIHI's National System for Incident Reporting (NSIR) Medication Incident Degree of Harm for reporting of the Medication Incidents indicators. For hospitals that do not use the NSIR system, existing organizational severity rating categories require mapping to NSIR Degrees of Harm for reporting purposes.	2.0	2.4	1.09	1.26	2.50	2.50	2.00	1.90	3.44	2.62
		# of serious medication incidents (Moderate, Severe, and/or Death / # patient days in the period x 1,000	Facilities will use CIHI's National System for Incident Reporting (NSIR) Medication Incident Degree of Harm for reporting of the Medication Incidents indicators. For hospitals that do not use the NSIR system, existing organizational severity rating categories require mapping to NSIR Degrees of Harm for reporting purposes.	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
	% Inpatient Medication Reconciliation on Admission	Total # of in-patient Medication Reconciliations on Admission / Total # of admissions x 100	At the time of admission, clinical staff review patients' medications to ensure staff have an up-to-date list of all current medications for both the patient's mental illness and possible physical conditions as well. This information helps the clinical team make informed decisions about the patient's treatment plan.	99%	98%	100%	100%	100%	100%*	99%	99%	95%	90%
Client Access	% Alternative Level of Care Days	# of ALC days during period/ # MH patient days in period x 100	When patients occupy hospital beds but do not require the inpatient services provided by the hospital, they are designated as Alternate Level of Care until they are discharged to a location that meets their current healthcare needs. Patients often experience wait times for an appropriate home in the community and remain in hospital, resulting in beds not being available for individuals that truly need specialized inpatient care.	2.2%	2.9%	17.5%	16.7%	n/a	n/a	6.8%	7.2%	16.8%	16.3%
Staff Safety	Lost Time Injury Index: Frequency (LTI-F)	Lost time injury frequency based on # of WSIB lost time claims started in the reporting period divided by total earned (paid) hours X expected earned hours for 100 FTEs	This indicator tracks the frequency of injuries that occur on the job via WSIB lost time claims.	0.00	0.00	0.48	2.66	0.25	0.87	0.40	1.55	0.51	0.15
HR Indicator	Absenteeism Rate	Total paid sick hours / total earned (paid) hours	This indicator monitors total paid sick hours in relation to total paid hours.	8.00%	3.70%	6.48%	5.57%	3.33%	3.10%	5.18%	5.23%	2.07%	2.02%
Financial	Balanced Budget	% of balanced budgets in last 5 years	All hospitals are required to have a balanced budget. Sound financial management and a balanced budget reflect the hospitals' wider responsibility to the community.	Annual		Annual		Annual		Annual		Annual	