

Yee Hong Centre For Geriatric Care

Semi-Annual Corporate Performance Report -Linking YH values and mission with strategies

頤康中心

Prepared by the Senior Leaders for the Board November 2018



Dashboard: Indicator Results MOHLTC/Health Quality Ontario

Indicator	Frequency	Target	Intended Direction	Previous Value	Current Value	Trend	
% Resident Falls	Quarterly	9%	•	8.0%	8.5%	18Q1 17Q4	8.5% 8.0%
						17Q4	8.9%
						17Q2	9.1%
% Residents in daily physical	Quarterly	3%	V	2.9%	2.9%	18Q1	2.9%
restraints						17Q4	2.9%
						17Q3	2.8%
						17Q2	2.4%
% Residents with new or	Quarterly	1%	•	1.4%	1.3%	18Q1	1.3%
worsening pressure ulcers						17Q4	1.4%
						17Q3	1.5%
		10 10/	¥	47.00/	47.20/	17Q2	1.5%
% Use of antipsychotics	Quarterly	19.4%	•	17.9%	17.2%	18Q1 17Q4	17.2%
						17Q4	17.7%
						17Q2	17.7%
% Avoidable ER Visit	Quarterly	7.8%	•	4.02%	5.52	18Q1	5.5%
						17Q4	4.0%
						17Q3	5.0%
						17Q2	4.4%

Dashboard: Indicator Results Resident/Client

Indicator	Frequency	Target	Intended Direction	Value	Current Value 2018	Trend			
Resident recommends Yee Hong %	Annually	illy 90% ↑ 94.2%		93.9%	93.3	94.2	2	93.9	
Resident feels being able to speak up about the home (or express opinion without fear of consequences) %	Annually	90%	1	97.5%	94.6%	2016 62.2	201 ⁻ 63.4	9 7.5	2018 94.6
Resident perceived adequacy of staffing % (without prolonged waiting)	Annually	80%	•	62.2%	50.8%	2015 67.7 2015	2016 75.5 2016	2017 62.2 2017	2018 50.8 2018
Family recommends Yee Hong %	Annually	90%	1	99.3%	96.4%	99.1	99.3		96.4
Family rating of the overall quality of care and services [very good and good] %	Annually	85%	^	86.4%	84.6%	2016 87.2 2015	2011 86.6 2016	7 86.4 2017	2018 84.6 2018
Community client satisfaction % (2017) with Yee Hong's ability to provide culturally appropriate services	Annually	95%	1	99.6%	99.5%	17 16 15	98.5		9.5 99.6
Same day home support services post hospital discharge (2017)	Annually	100%	1	100.0%	100%	17 16		100 100	

Dashboard: Indicator Results Employee, Financial, and Information Systems

Indicator *Financial Indicators (Target, Values, and Trend) were based on Jan – Jun 2018	Frequency	Target	Intended Direction	Previous Value	Current Value	Trend
% Employee Lost Time Incidents	Semi- annually	0.81 per 100 Employees	➔	0.43 per 100 Employees (2016)	0.17 per 100 employees (Jan-Jun 2018)	$\begin{array}{c} 0.5 \\ 0.25 \\ 0 \\ 15 \\ 16 \\ 17 \end{array}$
% Engaged employee (composite score of 6 survey questions)	Annually	73.0%	^	2016 73.0%	2017 65.9%	17 66% 15 73%
*Total Margin %	Semi- annually	1.9%	Ť	4.3% As of Dec 31, 2017	5% As of Jun 2018	18 5 17 4.3 16 1.1
*Current Ratio %	Semi- annually	80%	^	85.6% As of Dec 31, 2017	104% As of Jun 2018	18 104 17 85.6 16 83.8
Number of systems/services below availability target	Quarterly	0	¥	3 (2018Q2)	1 (2018 Q3)	10 0 17Q4 18Q1 18Q2 18Q3

Narrative: Performance Overview

Achievements and Opportunities

- Yee Hong performs better than the targeted value as demonstrated by the Safety indicators current values and trends (% Resident Falls, % Use of antipsychotics, % Avoidable ER visit, % Daily physical restraints).
- 2018 surveys suggest that our residents and their families are satisfied with Yee Hong overall quality of care and services and would recommend Yee Hong to others.
- 99.3% resident feels being able to express opinion without fear of consequences. This represents over 57% improvement from 2016.
- Less than 51% of the residents perceived current staffing is adequate to meet their needs. This represents a reduction of nearly 18% from 2017
- In 2017, Social Services Division's Community Support (Adult Day Program and Congregate Dining) and Home Support Program achieved an overall satisfaction rates of 88% and 99% respectively.
- The invitation of client/resident and family member representatives to chat openly at the quarterly (Board) Quality Committee at their site has presented a forum for genuine and engaged dialogue. The Board has approved the introduction of a Family Member at Large (FMAL) to the Quality Committee.

Narrative: Performance Overview

Achievements and Opportunities

- Yee Hong performed better than budget (on a Q2 2018 YTD basis) on total margin % and net cash requirement, and is forecasted to continue this strong performance for the rest of the year.
- Employee Lost Time Incidents (Jan-Jun) favorable to target; Engagement Score below target (2015 baseline) but favorable to healthcare organization benchmark of 57.9%
- Employee engagement survey to be conducted for 2018 to assess work experience of staff, identify strengths & opportunities for improvement, support excellent client service, and compare results with other healthcare organizations
- Q2 2018 system availability below target. However, there is significant improvement from previous quarter.

APPENDIX

Performance Indicators

Categories	Indicators	Quality Dimensions	Reporti ng Period
MOHLTC/ Health Quality Ontario	 Potentially avoidable emergency department visits % Residents falls % Daily physical restraints % New or worsening stage 2 to 4 pressure ulcers % Use of antipsychotics 	Effective Safe Resident-centred, Safe Safe Safe	June, Dec June, Dec June, Dec June, Dec June, Dec
Resident/ Client	 Resident recommends Yee Hong % Resident feels being able to speak up about the home % Resident satisfied with Yee Hong's culturally appropriate services % Family recommends Yee Hong % Family rates overall quality of care and services % Community client satisfaction % Same day home support services post hospital discharge 	Resident-centred Resident-centred Resident-centred Client-centred Client-centred Client-centred Client-centred, efficient	Dec Dec Dec Dec June June
Employee	Lost-time injury rate %Engaged employee %	Safe Employee-centred	June, Dec Dec
Financial	 Total Margin % Current Ratio % 	Fiscal health Financial liquidity	June, Dec
Information Systems	- Number of systems/services below availability target	Available, efficient	June, Dec

Performance Indicators Description

Indicator	Description
% Potentially avoidable ER Visit	Number of ER visits per 100 LTC residents
% Resident Falls	% LTC residents who fell in the last 30 days
% Daily physical restraints	% residents who were physically restrained on a daily basis
% New or worsening stage 2 to 4 pressure ulcers	% of residents who developed a stage 2 to 4 pressure ulcer or had a pressure ulcer that worsened since previous assessment
% Use of antipsychotics	% residents on antipsychotics without a diagnosis of psychosis
% Resident Recommending YH	% residents responding positively to "would you recommend Yee Hong to others?"
% Resident fells being able to speak up about the home	% residents feel who can express their opinion without fear of consequences
% Resident satisfied with Yee Hong's culturally appropriate services	% Resident satisfied with Yee Hong's culturally appropriate services
% Resident's family recommends Yee Hong to others	% Resident's family recommends Yee Hong to others
% Resident's family overall satisfaction with Yee Hong's quality of care and services	Resident's family rating of their overall satisfaction with Yee Hong's quality of care and services, %
% Community Client Satisfaction rate	Satisfaction level of community client, %
% Community client received same day home support services post hospital discharge	% Community client received same day home support services post hospital discharge

Performance Indicators Description

Indicator	Description
Employee Lost Time Incidents rate %	Number of lost time incidents per 100 employees
% Engaged Employee	 Composite employee engagement score based on 6 questions from annual employee survey 1 am proud to tell others I am part of this organization 2 I find that my values and the organization's values are similar. 3 This organization really inspires the very best in me in the way of job performance 4 How frequently do you look forward to going to work? 5 Overall, how satisfied are you with your job? 6 Overall, how would you rate your organization as a place to work?
Total Margin %	Net income divided by Revenues * 100%
Current Ratio	Current Assets to Current Liabilities
Number of systems/services below availability target	Number of systems/services below availability target of zero

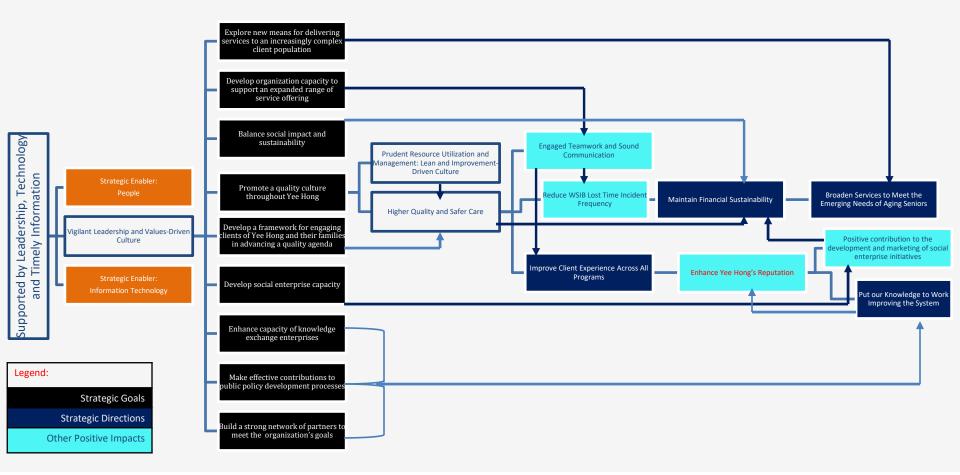
BACKGROUND INFORMATION ABOUT YH'S STRATEGIES (2016 – 2021)

Yee Hong Strategy Map Linking YH values and mission with strategies

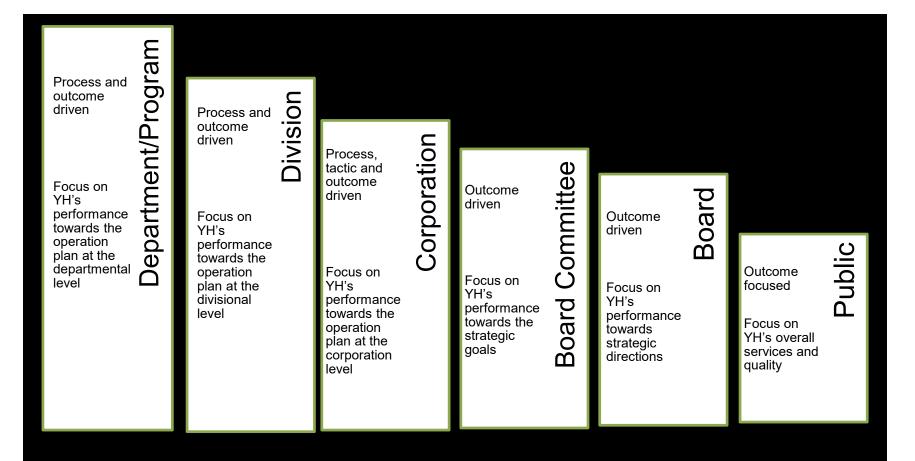




The Inter-relatedness of YH Strategies Linking strategies with positive impacts



Performance Monitoring & Reporting Connecting the dots





Levels of YH Performance Reporting Overall Summary

Reporting Domains	Operations Level (Management)	Strategy Level (Governance)	Public Level (YEEHONG.COM)					
Strategic Directions								
Broaden Service to meet emerging needs of seniors	Detailed/comprehensive operations level indicators	High level aggregate or composite indicators pre-	Higher level overview of indicators derived from that					
Improve client experience across all programs	 linked to: Operations plan Quality Improvement Plan 	approved by respective committees of the Board	reported to the Board Intended for informing the					
Put our knowledge to work improving the system	 Enterprise Management Framework 	Indicators reported to and reviewed by the Committees	public about organizational performance					
Maintain financial sustainability	Used by the Management Team (Departmental/Divisional Level) and Senior Leadership Council (SLC) to monitor progress on an ongoing basis	Reported to the Board Semi- annually	Posted/updated on YEEHONG.COM semi-annually					
Strategic Enablers								
People Technology	Same as above	Same as above	Not reported publicly					

