

Balanced Scorecard

2021 / 2022

Lei	ders in exceptional care, supporting those who need us most.				1	<u> </u>		1		
	ucis in exceptional care, supporting those who need as most.	Pg. #	Target	Q1	Q2	Q3	Q4			
ıts	Provide services and foster relationships that achieve client	satisfaction	, positive	outcomes	and promot	te quality of	life			
atisfied Clients	Client Experience: % Overall Satisfaction with Service	4	90%	92.0%	98.5%	89.4%	95.1%	Client Concerns Framework Responsive Behaviour Strategy Virtual Core and Socialization		
Sati	% Of Incidents Resulting in Transfer Out or Death	7	0%	2.5%	2.6%	2.6%	3.4%	 Virtual Care and Socialization Person Centred Care Projects 		
Service	Respond to changing client needs by supporting Alberta Health Services in providing accessible and sustainable quality care.									
geted Servic evelopment	% Beds Receiving Program Funding	9	45%	41.1%	41.1%	41.1%	41.1%	 Renal/Respiratory Expansion , Conversion to ALC, Complex LTC Mental Health RCTP Outcome Measures, RCTP 		
Targeted Develop	% RCTP clients meeting Length of Stay target.	10	90%	64.0%	66.8%	63.4%	64.5%	standardized orientation		
Vork	Promote a respectful, healthy and safe environment that sup	pports qual	ity improv	ement and	l customer	service				
ogressive Work Environment	% Staff recommending Carewest as an employer	11	90%	Reported in Q4	Reported in Q4	Reported in Q4	73.5%	 Strategic Workforce Plan Leadership Training Psychological Safety 		
Progre Env	Lost Time Claims (WCB)	12	<1%	1.0%	0.7%	1.0%	0.9%	 Performance Appraisal System review COVID Mental Health Support project 		
e -	Manage finances to ensure responsible and sustainable use	of resource	s in servic	e delivery						
ost Effective	Overtime as a Percentage of Worked Hours ¹	13	< 1.0%	2.55%	3.03%	3.01%	3.22%	Enterprise Risk Management Scheduling Project		
ost Ef	Sick Time as a Percentage of Paid Hours ¹	14	< 4.2%	4.19%	4.31%	4.62%	5.06%	Improved Variance Reporting process		

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\$ (3.07) \$ (3.03) \$ (3.46) \$ (3.60)

Balanced Budget - Operating Surplus (Variance) 1 2

¹ Rolling average - Q4 is year end

² Reflected in millions

Balanced Scorecard Strategic Link	(S
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Satisfied Clients

Client Experience

Mission/Values: Caring, Relationships

Strategic Direction: Deliverable # 8: Quality Outcomes and Quality Assurance measures used to guide Quality improvement

Accreditation Canada: Standard 16: There is a defined Quality Management program

CCHSS Standards: Standard 19: Quality Improvement Reporting

Accommodations Standards: Standard 4. Environmental Requirements, 12 Social/Leisure Activities, 14 - Nutritional Requirements

Client Incidents

Mission/Values: Caring, Responsibilities

Strategic Direction: Deliverable # 8: Quality Outcomes and Quality Assurance measures used to guide Quality improvement

Accreditation Canada: Leadership: Standard 9 Physical Environment, 15 Patient Safety, 16 Quality Management

CCHSS Standards: Standard 19: Quality Improvement Reporting Accommodations Standards: Standard 18: Resident Safety and Security

Targeted Service Development

Program Funded Beds

Mission/Values: Specialized Services; Accountabilities

Strategic Direction: Deliverable # 1, 2 expand complex care and improve capacity

Accreditation Canada: Standard 4: Services are planned and designed to meet the needs of the community

CCHSS Standards: Not applicable Accommodations Standards: Not applicable

RCTP Length of Stay

Mission/Values: Specialized Services - Rehabilitation services to enable return to the community

Strategic Direction: Deliverable #3: System flow

Accreditation Canada: Standard 16 (16.2 - system level process and outcome measures)

CCHSS Standards: Not applicable Accommodations Standards: Not applicable

Balanced Scorecard Strategic Links

Progressive Work Environment

Recommending Carewest as an Employer

Mission/Values: Caring, relationships, learning, responsibility

Strategic Direction: Deliverable # 4 Workforce Planning
Accreditation Canada: Standard #10 Investing in People

CCHSS Standards: Not applicable Accommodations Standards: Not applicable

Lost Time Claims

Mission/Values: Caring, responsibility

Strategic Direction: Deliverable # 4 Workforce Planning
Accreditation Canada: Standard #10 Investing in People

CCHSS Standards: Not applicable Accommodations Standards: Not applicable

Cost Effectiveness

Overtime

Mission/Values: Caring, responsibility

Strategic Direction: Deliverable # 4 Workforce Planning
Accreditation Canada: Standard #10 Investing in People

CCHSS Standards: Not applicable Accommodations Standards: Not applicable

Sick Rate -Absenteeism

Mission/Values: Caring, responsibility

Strategic Direction: Deliverable # 4 Workforce Planning
Accreditation Canada: Standard #10 Investing in People

CCHSS Standards: Not applicable Accommodations Standards: Not applicable

Budget

Mission/Values:
Strategic Direction:
Accreditation Canada:
CCHSS Standards:

Accommodations Standards:



Satisfied Clients

Client Experience

#of clients responding positively to "overall I am satisfied"

Total number of responses

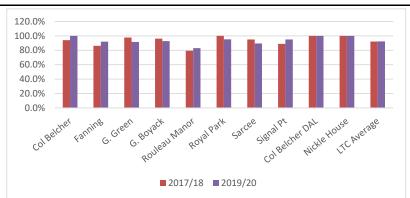


Strategic Link

LTC Client Experience

Long Term Care (survey every two years)

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Target 85%	2017/18	2018/19	2019/20	2020/21	2021/22	120.0%
Col Belcher	94.1%		100.0%			100.0%
Fanning	86.2%		91.9%			80.0%
G. Green	97.7%		91.6%			60.0%
G. Boyack	96.1%		92.7%			40.0%
Rouleau Manor	79.3%	/ey	82.9%	/ey		20.0%
Royal Park	100.0%	Survey	95.1%	Survey		0.0%
Sarcee	95.0%	8	89.4%	8		Col Beicher Fahr
Signal Pt	88.9%		95.0%			Colps As
Col Belcher DAL	100.0%		100.0%			
Nickle House	100.0%		100.0%			
LTC Average	92.2%		92.3%			



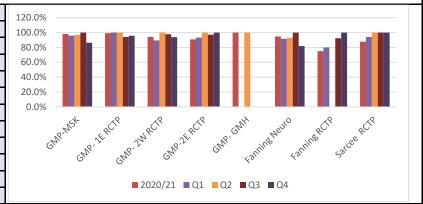
Analysis

LTC and DSL survey being completed by HQCA for both residents and families in June 2022. As a result, Carewest has deferred our own LTC/DSL survey to avoid survey fatigue for residents and families.

Sub-acute Client Experience

Unit Specific (completed quarterly with discharges)

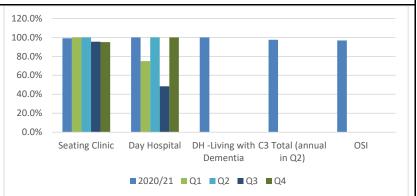
2020/21	Q1	Q2	Q3	Q4
98.1%	95.83%	96.88%	100.0%	86.2%
99.3%	100.00%	100.00%	94.1%	95.7%
94.2%	89.47%	100.00%	97.8%	93.9%
91.0%	93.33%	100.00%	97.3%	100.0%
100.0%	ND	100.00%	ND	ND
94.8%	91.67%	92.86%	100.0%	81.8%
75.0%	80.00%	0.00%	92.3%	100.0%
87.8%	94.12%	100.00%	100.0%	100.0%
96.0%	92.7%	97.98%	96.5%	94.2%
	98.1% 99.3% 94.2% 91.0% 100.0% 94.8% 75.0% 87.8%	98.1% 95.83% 99.3% 100.00% 94.2% 89.47% 91.0% 93.33% 100.0% ND 94.8% 91.67% 75.0% 80.00% 87.8% 94.12%	98.1% 95.83% 96.88% 99.3% 100.00% 100.00% 94.2% 89.47% 100.00% 91.0% 93.33% 100.00% 100.0% ND 100.00% 94.8% 91.67% 92.86% 75.0% 80.00% 0.00% 87.8% 94.12% 100.00%	98.1% 95.83% 96.88% 100.0% 99.3% 100.00% 100.00% 94.1% 94.2% 89.47% 100.00% 97.8% 91.0% 93.33% 100.00% 97.3% 100.0% ND 100.00% ND 94.8% 91.67% 92.86% 100.0% 75.0% 80.00% 0.00% 92.3% 87.8% 94.12% 100.00% 100.0%



Analysis

Neuro Rehab had an unusal dip in score but the response rate was low and only two people indicated overall dissatisfaction. Comments related to communication on admission and at preparation for discharge. MSK had a higher response rate with concerns related to communication, privacy and meal services It should be noted that during this time period, we have received an increase in online positive feedback particulary directed at the MSK unit, with respect to the team providing therapy and care on the unit.

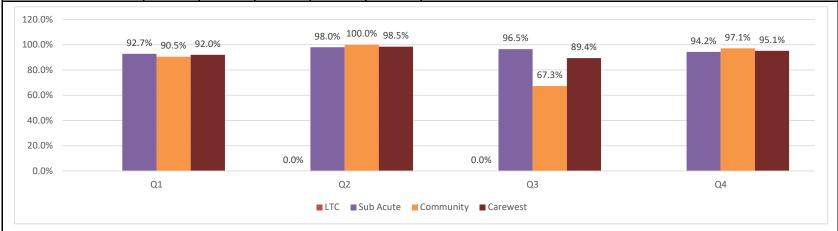
Community Client Experience Frequency determined by program 2020/21 Q1 Q2 Q3 Q4 120.0% **Seating Clinic** 100.0% 99.1% 100.0% 95.5% 95% 100.0% Day Hospital 100.0% 75.0% 100.0% 48.5% 100% 80.0% **DH** -Living with Dementia 100.0% 0.0% 60.0% ADP -SP (AHS Survey) 95.2% 0.0% 40.0% ADP-CB (AHS Survey) 100.0% 0.0% YADS (AHS Survey) 80.0% 0.0% 20.0% C3 Total (annual in Q2) 97.5% 0.0% Seating Clinic DAL NH every 2 yrs 100.0% DAL CB every 2 yrs 100.0% OSI 96.7% ND ND **Community Average** 96.5% 90.5% 100.0% 67.3% 97%



Analysis

Limited data reported this quarter

Carewest Overall Client 	Experienc	е				Achieving Target (90%)			
		Q1	Q2	Q3	Q4				
		Reported in	Reported in	Reported in					
LTC		Q4	Q4	Q4		Fully met			
Sub Acute		92.7%	98.0%	96.5%	94.2%	Partially met (+-5%			
Community		90.5%	100.0%	67.3%	97.1%	Not met (>5%)			
Carewest		92.0%	98.5%	89.4%	95.1%	_			
Target		90%	90%	90%	90%				



Response Rates		Q1			Q2			Q3		Q4		
	# Responses		Response Rate	# Resnonses	# Discharges	Response Rate	# Responses	# Discharges	Response Rate	# Responses	# Discharges	Response Rate
	# Кезропзез	# Discharges					eported in Q4		nate	# Кезропзез	# Discharges	Nate
Colonel Belcher			-		years, 202	1,22 3010091	Cported iii Q4					
Fanning												
G. Green												
G. Boyack												
Rouleau Manor												
Royal Park												
Sarcee												
Signal Pointe												
Colonel Belcher DAL												
Nickle House												
LTC Total												
					Sub-a	acute						
Glenmore Park		Q1		Ī	Q2			Q3			Q4	
GMP-MSK	24	64	37.5%	32	74	43.2%	17	69	24.6%	29	62	46.8%
GMP- 1E RCTP	4	63	6.3%	12	62	19.4%	34	80	42.5%	23	66	34.8%
GMP- 2W RCTP	19	70	27.1%	13	76	17.1%	45	75	60.0%	33	77	42.9%
GMP-2E RCTP	15	71	21.1%	14	67	20.9%	37	74	50.0%	26	69	37.7%
GMP- GMH	0	36	0.0%	1	30	3.3%	0	30	0.0%	0	29	0.0%
Fanning		<u> </u>										
Fanning Neuro	12	68	17.6%	14	62	22.6%	7	72	9.7%	11	66	16.7%
Fanning RCTP	5	88	5.7%	0	96	0.0%	26	120	21.7%	10	110	9.1%
Sarcee RCTP	17	58	29.3%	13	78	16.7%	#REF!	94	181.9%	24	92	26.1%
Sub-acute Total	96	518	18.5%	99	545	18.2%	171	614	27.9%	156	571	27.3%
		0_0			Comm			V = 1	_,,,,,			
Seating Clinic	26	136	19.1%	10	0	0.0%	22	0	0.0%	40	0	0.0%
Day Hospital	16	59	27.1%	22	0	0.0%	33	0	0.0%	29	0	0.0%
DH -Living with Dementia	0	0	0.0%	0	0	0.0%	0	0	0.0%	0	0	0.0%
ADP -SP (AHS Survey)			0.070		Ŭ	0.070	0	0	0.0%	0	0	0.0%
ADP-CB (AHS Survey)							0	0	0.0%	0	0	0.0%
YADS (AHS Survey)							0	0	0.0%	<u> </u>		2.0,0
C3 South							Ť		0.070			
C3 North												
C3 total (annual Q2)				0	0	0.0%						
DAL NH every 2 yrs						2.070				0	0	0.0%
DAL CB every 2 yrs										0	0	0.0%
OSI	ND			0	0							2.070
Community Total	42	195	21.5%	32	0	0.0%	55	0	0.0%	69	0	0.0%



Satisfied Clients

Client Incidents

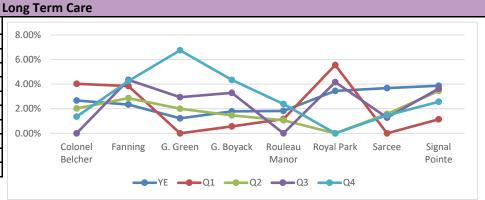
Total # of Level 3 or 4 Incidents*

Total Incidents

*Falls, Altercations, Medication Errors (received & did not receive) and Other**

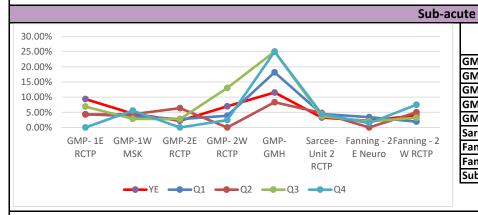
** Other: Section 2 of the UOR - Caught in/under/between, Choking, Code Blue/Medical Emergency, Cut/laceration, Elopement, Hazardous Condition, Property loss, Slip/trip, Struck by/against object, Other

2021/2022 2020/2021 YΕ Q1 Q2 Q3 **Q4 Colonel Belcher** 2.67% 4.02% 2.02% 0.00% 1.35% 3.85% 2.86% 4.35% 4.26% Fanning 2.34% G. Green 1.22% 0.00% 2.00% 2.94% 6.76% G. Boyack 1.79% 0.56% 1.46% 3.30% 4.35% Rouleau Manor 1.82% 1.16% 1.06% 0.00% 2.38% **Royal Park** 5.56% 0.00% 4.17% 0.00% 3.45% 3.67% 0.00% 1.59% 1.28% 1.47% Sarcee Signal Pointe 1.14% 3.45% 3.64% 2.56% 3.87% LTC Total 1.86% 2.01% 2.30% 1.76% 3.09%



Analysis

C. Belcher - 1 Level 3 and one Level 4 (both related to falls), Boyack - 5 level 3 falls, Royal Park 2 level 3 falls.



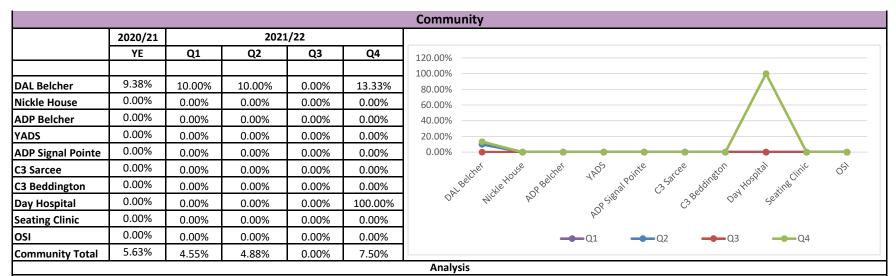
	2020/2021		2021	/2022								
	YE	Q1	Q2	Q3	Q4							
GMP- 1E RCTP	9.38%	4.35%	4.26%	6.90%	0.00%							
GMP-1W MSK	4.55%	3.70%	4.35%	2.86%	5.56%							
GMP-2E RCTP	2.20%	2.78%	6.38%	2.78%	0.00%							
GMP- 2W RCTP	7.00%	3.85%	0.00%	13.04%	2.44%							
GMP- GMH	11.54%	18.18%	8.33%	25.00%	25.00%							
Sarcee- Unit 2 RCTP	3.27%	4.44%	4.76%	3.70%	4.44%							
Fanning - 2 E Neuro	2.23%	3.39%	0.00%	2.00%	1.45%							
Fanning - 2 W RCTP	4.00%	1.92%	5.00%	3.23%	7.50%							
Sub Acute Total	4.58%	3.94%	4.12%	4.58%	3.70%							

Analysis

Q4: Glenmore Park, Sarcee and DV Fanning subacute units reported one Level 3 fall each, no other level 3 or 4 incidents.

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Strategic



DAL at C Belcher reported 2 level 3 falls, and Day Hospital reported 1 level 3 falls - no level 4 incidents.

Carewest Ove	rall					Achieving Target (0%)				
	2019/20	2020/2021								
	YE	Q1	Q2	Q3	Q4	Fully met				
LTC	2.30%	1.76%	1.86%	2.01%	3.09%	Partially met (+-5%				
Sub Acute	3.13%	3.94%	4.12%	4.58%	3.70%	Not met (>5%)				
Community	1.27%	4.55%	4.88%	0.00%	7.50%	_				
Carewest	2.23%	2.45%	2.58%	2.61%	3.44%					
					lm	roving Results - Q3				

Policies and Practices for Falls and Medication Safety continue to be updated. Preliminary feedback from Accreditation Canada was positive with respect to the Quality Councils that relate to Falls and Medication Management ROPs. Deeper analysis of responsive aggressive behaviours indicate a higher correlation in over all incident reports related to the Complex Mental Health program units as well as a spike in incidents on the ALC unit at Sarcee. Work is planned for the new year to revisit the education and tools developed in the 2018-2019 business plan to confirm spread and sustainabilty.



Level 3: Moderate harm, WCB. Property loss or damage between \$1,001 - \$25,000

Level 4: Unexpected death/permanent disability. Property loss or damage > \$25,000



Targeted Service Development

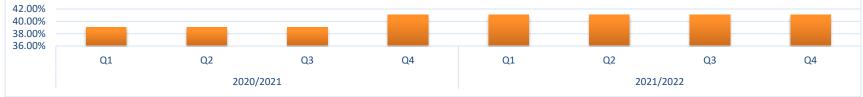
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Strategic

Percentage of Beds Receiving Program Funding

<u>Funded Bed Days in Units Receiving Program Funding</u>
Possible Bed Days (All Carewest bedded care)

			2020	/2021		2021/2022				
_		Q1	Q2	Q3	Q4	Q1	Q2	Q3	Q4	
	Percentage of Beds in Complex LTC	39.02%	39.02%	39.02%	41.10%	41.10%	41.10%	41.10%	41.10%	
	Target (%)	40%	40%	40%	40%	45%	45%	45%	45%	
42.00%										
40.00%										



Analysis

					Analysis
			Q4		Q4 - This indicator has remained static over the year due to focus on pandemic response
		Bed Days	All Carewest	%	for both planning and funding
C Belcher	Mental Health LTC	2,668			
Fanning	2 West RCTP	4,508			Achieving Target (45%)
	2 East Neuro	4,508			
I	3 West Renal	7,084			Fully met
Glenmore	1E RCTP	3,128			Partially met (+-5%
	1W MSK	3,128			Not met (>5%)
	2E RCTP	2,668			_
	2W RCTP	2,760			
	2S GMH	1,840			Improving Results
Rouleau	Ground	1,564			Anticipate further discussions with AHS with respect to potential further expansion of Complex
Manor	1st Flr (Main)	1,748			Mental Health beds and ALC but no confirmation to date.
	2nd Floor	1,288			
	3rd Floor	1,288			
	4th Floor	1,196			
Sarcee	Unit 2 RCTP	3,680			
	ALC	4,140			
	C3	552			
Signal Pointe	Main	4,968			
Total		52,716	128,248	41.10%	

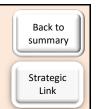


Targeted Service Development

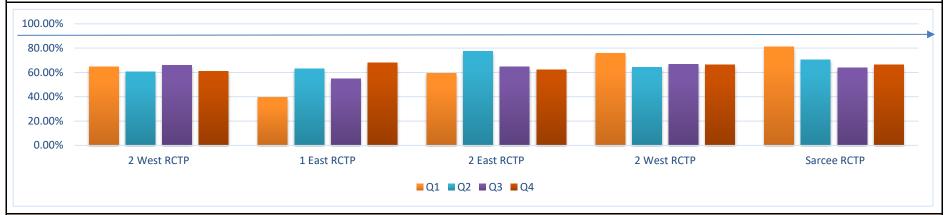
Percentage of RCTP Clients Meeting Length of Stay Target

≤ 40 Days Length of Stay

Discharges



			2020/	2021		2021/2022				
		Q1	Q2	Q3	Q4	Q1	Q2	Q3	Q4	
Dr. Fanning	2 West RCTP	62.20%	62.50%	73.68%	53.01%	64.77%	60.42%	65.83%	60.91%	
Glenmore Pk	1 East RCTP	58.97%	64.29%	71.93%	46.81%	39.68%	62.90%	55.00%	68.18%	
Glenmore Pk	2 East RCTP	69.77%	60.00%	57.69%	70.18%	59.15%	77.61%	64.86%	62.32%	
Glenmore Pk	2 West RCTP	64.29%	52.63%	69.64%	70.73%	75.71%	64.47%	66.67%	66.23%	
Sarcee	Sarcee RCTP	48.39%	46.34%	61.11%	60.00%	81.03%	70.51%	63.83%	66.30%	
RCTP Total	61.60%	57.74%	67.87%	59.36%	64.00%	66.75%	63.43%	64.49%		



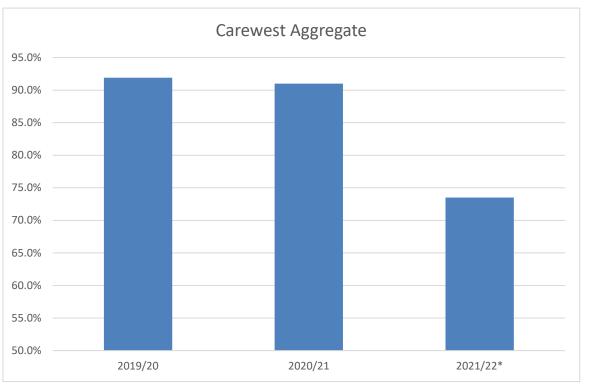
	Analysis												
			Q3		Achieving Target (90%)								
		# ≤ 40 LOS	# DC	%									
Dr. Fanning	2 West RCTP	79	120	65.83%	Fully met								
	1 East RCTP	44	80	55.00%	Partially met (+-5%								
Glenmore Pk	2 East RCTP	48	74	64.86%	Not met (>5%)								
	2 West RCTP	50	75	66.67%									
Sarcee	RCTP	60	94	63.83%	Q4 We have not made signficant progress on this indicator with respect to achieving								
	Total				target. Work underway on RCTP program review to identify any further process								
Total			443	63.43%	improvements as well as confirm whether or not the target is realistic								



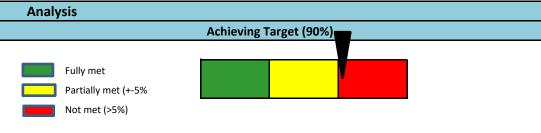
Progressive Work Environment Percentage of Staff Recommending Carewest as an Employer



	2019/20	2020/21	2021/22*
Admin Ctr	97.9%	95.7%	80.9%
Beddington	ND	ND	66.1%
Colonel Belcher	95.2%	86.8%	68.9%
Belcher DAL & Nickle House	100.0%	80.0%	ND
Fanning	88.1%	91.3%	76.4%
G. Green	98.8%	96.1%	65.7%
G. Boyack	94.7%	92.0%	75.7%
Glenmore Pk	94.7%	93.0%	65.9%
OSI	96.3%	92.9%	89.5%
Rouleau Manor	92.2%	95.0%	77.1%
Royal Park	100.0%	100.0%	94.3%
Sarcee & Beddington C3	86.9%	81.7%	67.6%
Signal Pointe	88.4%	92.8%	81.1%
Work at Multiple Sites	86.4%	100.0%	ND
Carewest Aggregate	91.9%	91.0%	73.5%



2021/2022: New survey does not have this question. CW used "organizational Culture" dimension in the Guarding Minds at Work survey. Note 2 Belcher DAL combined with C Belcher and Nickle House combined with Fanning and Beddington C3 was separated out in the 2022 survey



Improving Results

We will be applying the Guarding Minds at Work survey Action Plan process to guide a more structured and documented action plan to address priority areas within the survey.



Progressive Work Environment Percentage of Lost Time Claims

Back to summary

Strategic

Lost Time
Staff (FT, PT, Temp & Casual)

										20	21 / 202	22						
	YE	2020/20	21		Q 1			Q2			Q 3			Q 4		Year	End (rol	ling)
	# Staff	# Lost Time	%	# Staff	# Lost Time	%	# Staff	# Lost Time	%	# Staff	# Lost Time	%	# Staff	# Lost Time	%	# Staff	# Lost Time	%
Total	2860	140	4.90%	2945	28	0.95%	2962	22	1%	2784	29	1.04%	2942	27	0.92%	3878	106	2.73%
Beddington (C3)	54.5	0	0.00%	59	0	0.00%	61	0	0.00%	57	0	0.00%	52	1	1.92%	76	1	1.31%
Belcher	292.75	13	4.44%	319	1	0.31%	320	2	0.63%	294	4	1.36%	330	1	0.30%	421	8	1.90%
Fanning	700.75	42	5.99%	704	8	1.14%	702	3	0.43%	672	7	1.04%	700	9	1.29%	926	27	2.92%
Garrison Green	292	15	5.14%	292	5	1.71%	298	6	2.01%	287	5	1.74%	316	1	0.32%	398	17	4.27%
George Boyack	277.25	20	7.21%	292	5	1.71%	286	5	1.75%	265	2	0.75%	281	3	1.07%	375	15	4.00%
Glenmore	404.5	12	2.97%	421	1	0.24%	427	4	0.94%	397	0	0.00%	414	3	0.72%	553	8	1.45%
Rouleau	142	5	3.52%	147	2	1.36%	140	0	0.00%	126	0	0.00%	136	1	0.74%	183	3	1.64%
Royal Park	99.75	1	1.00%	102	0	0.00%	99	0	0.00%	89	0	0.00%	90	0	0.00%	127	0	0.00%
Sarcee	334.75	18	5.38%	343	5	1.46%	364	1	0.27%	336	8	2.38%	354	5	1.41%	466	19	4.08%
Signal Pointe	116.75	12	10.28%	120	1	0.83%	118	1	0.85%	115	3	2.61%	119	2	1.68%	157	7	4.45%
Admin	83.5	1	1.20%	83	0	0.00%	86	0	0.00%	80	0	0.00%	82	0	0.00%	110	0	0.00%
Nickle House	28.5	1	3.51%	29	0	0.00%	28	0	0.00%	30	0	0.00%	31	1	3.23%	39	1	2.54%
OSI	32.75	0	0.00%	34	0	0.00%	33	0	0.00%	36	0	0.00%	37	0	0.00%	47	0	0.00%



Year Ending Stats Fiscal 2021-2022

Total Lost Time Injuries were 106 at the end of Q4 as compared to 140 in the 2020-2021 fiscal year. This represents 34 less Lost Time Claims year over year, which is good news. Highest cumulative lost time WCB claim percentages belong to: Signal Pointe 4.45% (Q4 last year 10.28%), Garrison Green 4.27% (Q4 last year 5.14%), Sarcee 4.08%, (Q4 last year 5.38%) and George Boyack at 4.00% (Q4 last year 7.21%). Signal Pointe's LTA experience remains the highest compared to all other sites for the second year in a row at 4.45%. It is interesting to note that Signal Pointe, Garrison Green, Sarcee and George Boyack were also in the top 5 sites last year. COVID-19 WCB claims have not been included in the above statistics.

2021-2022 Q4

Commentary and Analysis:

Lost time (LT) injuries decreased slightly from 29 in Q3 to 27 in Q4. The injury breakdown for Q4 lost time injuries is: 8 transferring/repositioning, 7 repetitive strain, 2 struck by/against, 3 slip/trip/fall, 3 client aggression/related, and 3 "performing care" and 1 burn. Last year, same quarter, results were 35 as compared to 27 this quarter which is a significant improvement. There was a noticeable trending increase in repetitive strain with previous injuries being

aggravated and minor incidents resulting in time loss.

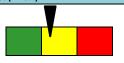
No Lost Time (NLT) injuries increased from 14 in Q3 to 16 in Q4. There were 5 transfer/repositioning injuries and 3 each for struck by/against and client related injuries.

COVID-19 WCB claims have not been included in WCB lost time claim numbers for Q4. There were 56 workplace exposure in Q4. EH&S reports workplace COVID exposures to WCB and to Alberta Occupational Health and Safety as Potentially Serious Incidents.

EH&S has been trying to get in-person body mechanics training restarted at the sites but have been unable implement to due to Wave 6 outbreaks.

Achieving Target (<1.0%)







Cost Effective Organization Overtime as a Percentage of Worked Hours

Back to summary

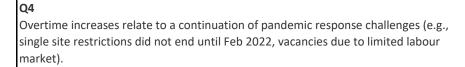
Strategic

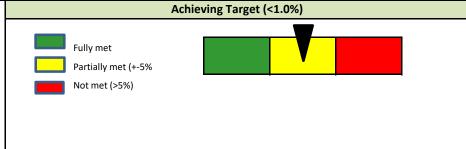
Overtime Hours Total Worked Hours

	2020/21		202	1/22	
	Q4	Q1	Q2	Q3	Q4
Overtime Costs (%)	2.70%	2.55%	3.03%	3.01%	3.22%
Target (%)	1.00%	1.00%	1.00%	1.00%	1.00%
				vear-to-date	









Improving Results



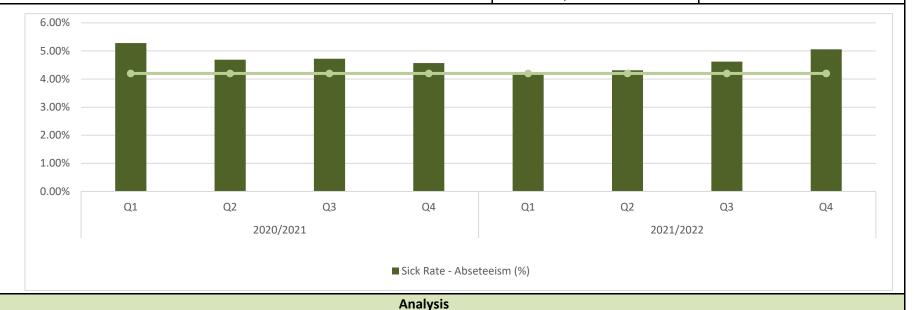
Cost Effective Organization Sick Rate - Absenteeism

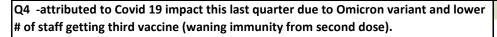
Back to summary

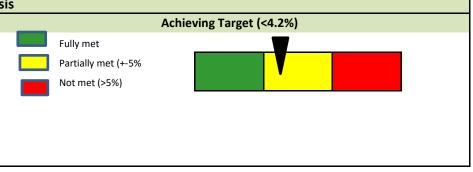
Strategic

Total Sick Hours
Total Paid Hours

		2020	/2021			2021	/2022	
	Q1	Q2	Q3	Q4	Q1	Q2	Q3	Q4
Sick Rate - Abseteeism (%)	5.28%	4.69%	4.72%	4.57%	4.19%	4.31%	4.62%	5.06%
Target (%)	4.2%	4.2%	4.2%	4.2%	4.2%	4.2%	4.2%	4.2%
							year-to-date	









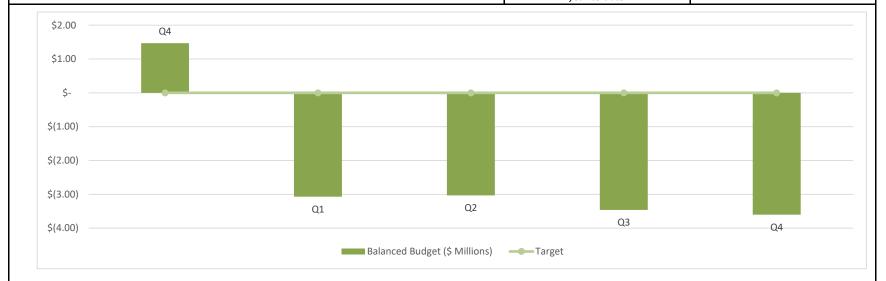
Cost Effective Organization Balanced Budget - Operating Surplus (Variance)

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Strategic

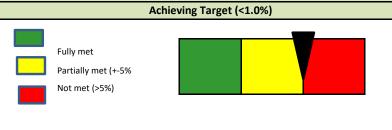
Actual Revenue - Actual Expenses

		202	20/2021		2021 /	/ 20:	22	
			Q4	Q1	Q2		Q3	Q4
	Balanced Budget (\$ Millions)	\$	1.47	\$ (3.07)	\$ (3.0)	\$	(3.5)	\$ (3.60)
	Target		\$0	\$0	\$0		\$0	\$0
_						yea	r-to-date	



Analysis

Carewest ended Q4 with an operating expense deficit variance of (\$3.6M). This is mainly due to significant overtime expenditures due to depleted casual pools, vacancies due to single site restrictions, and a shortage of staff in the marketplace. Increased benefit costs for provincial pension plan, CPP, and health insurance also contributed to the overall deficit. Another factor to the deficit were costs associated with the with a transition to a new master rotation at the Colonel Belcher facility due to the new program along with increased building maintenance and utilities (natural gas & electricity) expenses. The operating expense deficit was partially offset by COVID activity related savings with lower costs due to vacancies from closed programs and other deferred or avoided costs.



Improving Results

Continued stewardship of financial resources within current environment of fiscal restraint.

WORKSHEET data

Client Experience: % Overall Satisfaction # positively to overall I am satisfied Total number of Responses

TC (every 2 years)	Satisfied	Responses	%	occup rt	Rate	SL4	Satisfied	Responses	%	occup rt	Rate														
olonel Belcher			0.0%	160	0.0%	CB DAL			0.0%	28	0.0%														
nning			0.0%	180	0.0%	NH			0.0%	9	0.0%	1													
Green			0.0%	180	0.0%							l													
Boyack			0.0%	203	0.0%							1													
uleau Manor			0.0%	75	0.0%							l													
yal Park			0.0%	47	0.0%																				
rcee			0.0%	81	0.0%	1						1													
nal Pointe			0.0%	51	0.0%	i						1													
tal			0.0%	1016	0.0%	i																	YTD		
	# Overall	#			Response	# Overall	#			Response	# Overall	#			Response	# Overall	#			Response	# Overall	#			Respon
	Satisfied	Responses	%	# Discharge	Rate	Satisfied	Responses	%	# Discharge	Rate	Satisfied	Responses	%	# Discharge	Rate	Satisfied	Responses	%	# Discharge	Rate	Satisfied	Responses	%	# Discharge	Rate
b-acute enmore Park												Пооронного													
1P-MSK	23	24	96%	64	37.5%	31	32	96.9%	74	43%	17	17	100.0%	69	24.6%	25	29	86.2%	62	46.8%	96	102	94.1%	269	37.
MP- 1E RCTP	4	4	100%	63	6.3%	12			62	19%	32		94.1%	80		22		95.7%	66		70		95.9%	271	
IP- 2W RCTP	17	19	89%	70	27.1%	13		100.0%	76	17%	44		97.8%	75		31	33	93.9%	77		105	110	95.5%	298	36
IP-2E RCTP	14	15	93%	71	21.1%	14	14	100.0%	67	21%	36	37	97.3%	74	50.0%	26	26	100.0%	69	37.7%	90	92	97.8%	281	32
ΛP- GMH	0	0	0%	36	0.0%	1	1	100.0%	30	3%	0	0	0.0%	30	0.0%	0	0	0.0%	29	0.0%	1	1	100.0%	125	0
nning																						\longrightarrow		$lue{}$	
nning Neuro	11	12	92%	68	17.6%	13			62	23%	5	5	100.0%	72		9	11	81.8%	66		40		90.9%	268	16
nning RCTP	4	5	80%	88	5.7%	0	0	0.0%	96	0%	7	7	92.3%	120		10	10	100.0%	110		38		92.7%	414	9.
arcee RCTP & R Total	16 89	17 96	94% 92.7%	58 518	29.3% 18.5%	13 97	13 99	100.0% 98.0%	78 545	17% 18%	24 165		0.0% 96.5%	94 614	181.9% 27.9%	24 147	24 156	100.0% 94.2%	92 571		77 498	80 522	96.3% 95.4%	322 2248	
	# Overall	#	%	# Discharge	Response	# Overall	#	%	# Discharge	Response	# Overall	#	%	# Discharge	Response	# Overall	#		# Discharge	Response	# Overall	#		# Discharge	Respon
mmunity	Satisfied	Responses	100.00/	Ů	Rate	Satisfied	Responses			Rate	Satisfied	Responses	0501		Rate	Satisfied	Responses			Rate	Satisfied	Responses		_	Rate
ting Clinic y Hospital	26 12	26 16	100.0% 75.0%	136 59	19.1% 27.1%	10 22	10 22			0.0%	21 16		95% 48%		0.0%	38 29	40 29	95.0% 100.0%		0.0%	95 79	98 100	96.9% 79.0%	136 59	72 169
-Living with Dementia	0	0	0.0%	0	0.0%	- 22	22	0.0%	0	0.0%	10	33	48%	0	0.0%	29 0	29	0.0%	0		79	100	0.0%		109
P -SP (AHS Survey)	U	U	0.0%	U	0.076	-	0	0.0%	U	0.076	0	- 4	0%	0	0.0%	-	, , , , , , , , , , , , , , , , , , ,	0.0%	- 0	0.076	0	- 4	0.0%		- 0
P-CB (AHS Survey)													0%		0.0%								-	-	
DS (AHS Survey)													0%		0.0%										
						0	0	0.0%		0.0%			0%		0.0%			0.0%		0.0%					
total (annual Q2)						0	0	0.0%		0.0%															
L NH every 2 yrs																 						\longrightarrow			
AL CB every 2 yrs																-						-		-	
mmunity Total	38	42	90.5%	195	21.5%	32	32	100.0%	0	0.0%	37	55	67%	0	0.0%	67	69	97.1%	0	0.0%	174	198	87.9%	195	101
ent Incidents			Q1					Q2					Q3					Q4					YTD		

Community Total
Client Incidents
Level 3 & 4
Total Incidents

Total incidents				Q1				1			Q2				l			Q3							Q4				$\overline{}$			Year End			
	В	G	L	Q	V		1	c	н	М	R	w		1	D	1	N	S	×		1	E	J	0	Ť	Υ		7	F	K	P	U	Z		7
	Falls	Δlt	Med (DR)	Med (DNR)	Other	Total	Total	Falls	Δlt	Med (DR)	Med (DNR)	Other	Total	Total	Falls	Δl÷	Med (DR)	Med (DNR)	Other	Total	Total	Falls	Δlt	Med (DR)	Med (DNR)	Other	Total	Total	Falls	Δlt	Med (DR)	Med (DNR)	Other	Total	Total
	3 & 4	3 & 4	3 & 4	3 & 4	3 & 4	3 & 4	Incidents	3 & 4	3 & 4	3 & 4	3 & 4	3 & 4	3 & 4	Incidents	3 & 4	3 & 4	3 & 4	3 & 4	3 & 4	3 & 4	Incidents	3 & 4	3 & 4	3 & 4	3 & 4	3 & 4	3 & 4	Incidents	3 & 4	3 & 4	3 & 4	3 & 4	3 & 4	3 & 4	Incidents
Colonel Belcher	5	0	0	0	2	7	174	3	0	1	0	0	4	198	0	0	0	0	0	0	155	1	1	0	0	0	2	148	9	1	1	0	2	13	675
Fanning	0	0	0	0	2	2	52	0	0	0	0	2	2	70	1	0	0	0	1	2	46	1	0	0	0	1	2	47	2	0	0	0	6	8	215
Garrison Green	0	0	0	0	0	0	67	1	0	0	0	0	1	50	0	0	0	0	2	2	68	1	0	0	0	4	5	74	2	0	0	0	6	8	259
Boyack	1	0	0	0	0	1	178	2	0	0	0	0	2	137	3	0	0	0	3	6	182	5	0	0	0	2	7	161	11	0	0	0	5	16	658
Rouleau Manor	1	0	0	0	0	1	86	1	0	0	0	0	1	94	0	0	0	0	0	0	87	2	0	0	0	0	2	84	4	0	0	0	0	4	351
Royal Park	0	0	0	0	1	1	18	0	0	0	0	0	0	30	0	0	0	0	1	1	24	0	0	0	0	0	0	19	0	0	0	0	2	2	91
Sarcee	0	0	0	0	0	0	74	0	0	0	0	1	1	63	0	0	0	1	0	1	78	1	0	0	0	0	1	68	1	0	0	1	1	3	283
Signal Pointe	1	0	0	0	0	1	88	1	1	0	0	0	2	58	1	0	1	0	0	2	55	1	0	0	0	1	2	78	4	1	1	0	1	7	279
LTC Total	8	0	0	0	5	13	737	8	1	1	0	3	13	700	5	0	1	1	7	14	695	12	1	0	0	8	21	679	33	2	2	1	23	61	2811
CNAD AF DOTD	TRUE	TRUE	TRUE	TRUE	TRUE	TRUE	TRUE	TRUE	TRUE	TRUE	TRUE	TRUE	TRUE	TRUE	TRUE	TRUE	TRUE	TRUE	TRUE	TRUE	TRUE	TRUE	TRUE	TRUE	TRUE	TRUE	TRUE	TRUE	TRUE	TRUE	TRUE	TRUE	TRUE	TRUE	TRUE
GMP- 1E RCTP GMP-1W MSK	0	0	0	0	1	1	23	1	0	0	0	0		47 23	0	0	0	0		2	29	0	0	0	0	0	0	29 18	1	0	0	0	3	5 4	128 103
GMP-2E RCTP	0	0	0	0	1	1	36	0	1	0	0	2	1	47	0	0	0	0	1	 	36	1	0	0	0	0	1 0	20	0	1	1 0	0	4	5	139
GMP- 2W RCTP	0	0	0	0	1	1	26	0	0	0	0	0) 0	27	2	0	0	0	0	1 2	23	0	0	0	0	1	1	41	2	0	1 0	0	3	5	117
GMP- GMH	1	0	0	0	1	2	11	0	0	0	0	1	1	12	1	0	0	0	0	1	4	0	0	0	0	2	2	8	2	0	0	0	4	6	35
Sarcee- Unit 2 RCTP	1	0	0	0	1	2	45	1	0	0	0	1	2	42	1	0	0	0	1	2	54	1	0	0	0	1	2	45	4	0	0	0	4	8	186
Fanning - 2 E Neuro	0	0	0	0	2	2	59	0	0	0	0	0	0	29	1	0	0	0	0	1	50	0	0	0	0	1	1	69	1	0	0	0	3	4	207
Fanning - 2 W RCTP	0	0	0	0	1	1	52	1	0	0	0	1	2	40	0	1	0	0	0	1	31	1	0	0	0	2	3	40	2	1	0	0	4	7	163
Sub acute Total	3	0	0	0	8	11	279	4	2	0	0	5	11	267	6	1	0	0	5	12	262	3	0	0	0	7	10	270	16	3	0	0	25	44	1078
	TRUE	TRUE	TRUE	TRUE	TRUE	TRUE	TRUE	TRUE	TRUE	TRUE	TRUE	TRUE	TRUE	TRUE	TRUE	TRUE	TRUE	TRUE	TRUE	TRUE	TRUE	TRUE	TRUE	TRUE	TRUE	TRUE	TRUE	TRUE	TRUE	TRUE	TRUE	TRUE	TRUE	_	
Hospice	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
DAL Belcher	2	0	0	0	0	2	20	2	0	0	0	0	2	20	0	0	0	0	0	0	21	2	0	0	0	0	2	15	6	0	0	0	0	6	76
Nickle House	0	0	0	0	0	0	1	0	0	0	0	0	0	1	0	0	0	0	0	0	1	0	0	0	0	0	0	2	0	0	0	0	0	0	5
ADP Belcher	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
YADS	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	2	0	0	0	0	0	0	2
ADP Signal Pointe	0	0	0	0	0	0	0	0	0	0	U	0	0	U	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
C3 Sarcee	0	0	0	0	0	0	5 18	0	0	0	0	0	0	12	0	0	0	0	0	0	11	0	0	0	0	0	0	16	0	0	0	0	0	0	40 38
C3 Beddington Day Hospital	0	0	0	0	0	0	18	0	0	0	0	0	0	12	0	0	0	0	0	0	5	1	0	0	0	0	1	1	1	0	0	0	0	1	38
Seating Clinic	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	1
OSI	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1 0	0	0	0	0
Community Total	2	0	0	0	0	2	44	2	0	0	0	0	2	41	0	0	0	0	0	0	39	3	0	0	0	0	3	40	7	0	0	0	0	7	164
Community rotar	TRUE	TRUE		TRUE	TRUE	TRUE	TRUE	TRUE			TRUE	TRUE	TRUE	TRUE	TRUE	TRUE	TRUE	TRUE	TRUE	TRUE	TRUE	TRUE	TRUE	TRUE	TRUE	TRUE	TRUE		TRUE		0	TRUE	TRUE		

	Q1		C	1,2	C	13	C	Į 4	,	Έ
	Total 3 & 4	Total Inc	Total 3 & 4	Total Inc						
LTC Total	13	737	13	700	14	695	21	679	61	2811
Sub acute Total	11	279	11	267	12	262	10	270	44	1078
Community Total	2	44	2	41	0	39	3	40	7	164
CW Total	26	1060	26	1008	26	996	34	989	112	4053

RCTP LOS

linked to Bed Utilization by Unit spreadsheet

# ≤	40	Le	ng	th	Of	Sta
	_	D	_	_	_	

# Discharges																
			Q1			Q2			Q3			Q4			YE	
		# ≤ 40 LOS	# DC	%	# ≤ 40 LOS	# DC	%	# ≤ 40 LOS	# DC	%	# ≤ 40 LOS	# DC	%	# ≤ 40 LOS	# DC	%
Dr. Fanning	2 West RCTP	57	88	64.77%	58	96	60.42%	79	120	65.83%	67	110	60.91%	261	88	296.59%
Glenmore Pk	1 East RCTP	25	63	39.68%	39	62	62.90%	44	80	55.00%	45	66	68.18%	153	63	242.86%
	2 East RCTP	42	71	59.15%	52	67	77.61%	48	74	64.86%	43	69	62.32%	185	71	260.56%
	2 West RCTP	53	70	75.71%	49	76	64.47%	50	75	66.67%	51	77	66.23%	203	70	290.00%
Sarcee	RCTP	47	58	81.03%	55	78	70.51%	60	94	63.83%	61	92	66.30%	223	58	384.48%
Total		224	350	64.00%	253	379	66.75%	281	443	63.43%	267	414	64.49%	1,025	350	292.86%

Program Funded Beds	correct															
			Q1			Q 2			Q 3			Q 4			YE	
		Possible	All		Possible	All		Possible	All		Possible	All		Possible	All	
		Bed Days	Carewest	%												
Colonel Belcher	Mental Health	2,639			2,668			2,668			2,639			10,585		
Fanning	2 West RCTP	4,459			4,508			4,508			4,459			17,934		
	2 East Neuro	4,459			4,508			4,508			4,459			17,934		
	3 West Renal	7,007			7,084			7,084			7,007			28,182		
Glenmore Pk	1E RCTP	3,094			3,128			3,128			3,094			12,444		
	1W MSK	3,094			3,128			3,128			3,094			12,444		
	2E RCTP	2,639			2,668			2,668			2,639			10,614		
	2W RCTP	2,730			2,760			2,760			2,730			10,980		
	2S GMH	1,820			1,840			1,840			1,820			7,320	1	
Rouleau Manor	Ground	1,547			1,564			1,564			1,547			6,222]	
	1st Flr (Main)	1,729			1,748			1,748			1,729			6,954		
	2nd Floor	1,274			1,288			1,288			1,274			5,124		
	3rd Floor	1,274			1,288			1,288			1,274			5,124		
	4th Floor	1,183			1,196			1,196			1,183			4,758		
Sarcee	Unit 2 RCTP	3,640			3,680			3,680			3,640			14,640		
•	ALC	4,095			4,140			4,140			4,095			16,470]	
	C3	546			552			552			546		l	2,190		
Signal Pointe	Main	4,914			4,968			4,968			4,914		l	19,764		l
	Total	52,143	126,854	41.10%	52,716	128,248	41.10%	52,716	128,248	41.10%	52,143	126,854	41.10%	209,683	465,398	45.05%