

Type de politique / Type of Policy	CONTRAINTES EXÉCUTIVES EXECUTIVE LIMITATIONS
Numéro et titre / Number and Title	<b>3.2 Situation financière et rendement opérationnel Financial Condition and Operational Performance</b>
Dates	
• <b>Approbation / Approval</b>	1997-11-26
• <b>Révision / Revision</b>	2004-01-28; 2007-10-24; 2009-11-04; 2012-03-28; 2016-05-18
• <b>Monitorage / Monitoring</b>	Trimestriel (février, juin, septembre, novembre) Quarterly (February, June, September, November)

**3.2** En ce qui concerne la situation et les activités financières courantes, le DG n'autorisera ou ne tolérera aucune mesure qui risquerait de mettre la santé financière de l'organisation en péril ou tout écart important entre les dépenses réelles et les indicateurs de performance et les priorités énoncées dans les politiques du conseil relatives aux fins.

En conséquence le DG:

- 3.2.1** Ne tolérera pas que les déboursés excèdent les rentrées, à moins que la directive relative à l'endettement (voir ci-dessous) soit respectée.
- 3.2.2** N'endettera pas l'organisation d'un montant supérieur à celui qu'elle peut rembourser dans les 60 jours au moyen de certains fonds non grevés.
- 3.2.3** Ne tolérera pas que le ratio de l'actif à court terme sur le passif à court terme soit inférieur à 1.5.
- 3.2.4** Ne tolérera pas que les frais de personnel et les dettes ne soient pas réglés de façon opportune.
- 3.2.5** Ne tolérera pas que les rapports ou les versements d'impôt ou autres, exigés par le gouvernement soient présentés ou effectués en retard ou de façon inexacte.

**3.2** With respect to the actual, ongoing financial condition and activities, the CEO shall not cause or allow the development of fiscal jeopardy or a material deviation of actual expenditures and performance indicators from Board priorities established in Ends policies.

Accordingly, the CEO:

- 3.2.1** Shall not expend more funds than have been received in the fiscal year to date unless the debt guideline (below) is met.
- 3.2.2** Shall not indebt the organization in an amount greater than can be repaid by certain, otherwise unencumbered funds within 60 days.
- 3.2.3** Shall not allow the ratio of current assets to be less than 1.5 of current liabilities.
- 3.2.4** Shall not fail to settle payroll and debts in a timely manner.
- 3.2.5** Shall not allow tax payments or other government ordered payments or filings to be overdue or inaccurately filed.

- 3.2.6** N'autorisera pas d'achat ou d'engagement unique d'une dépense opérationnelle ou d'une dépense d'immobilisation corporelle d'un montant supérieur à 100 000 \$ n'ayant pas été inclus au budget opérationnel et/ou capital de l'année financière en cours.
- 3.2.7** N'autorisera pas l'achat, le grèvement ou l'aliénation de tout bien immobilier.
- 3.2.8** Ne tolérera pas qu'il y ait un écart entre les indicateurs de performance de l'hôpital et les points de référence ou corridors identifiés à l'intérieur de l'Entente de responsabilisation en matière de services hospitaliers [ERS-H] (voir Annexe A ci-jointe).
- 3.2.6** Shall not make a single purchase or commitment for an operational expense or for a capital asset in an amount greater than \$100,000 for which the expense was not included in the operational or capital budget of the current fiscal year.
- 3.2.7** Shall not purchase, encumber or dispose of any real property.
- 3.2.8** Shall not allow the hospital's key performance indicators to deviate from set benchmark or ranges as identified in the Hospital Sector Accountability Agreement [H-SAA] (see Annex A attached).

Hospital Sector Accountability Agreement 2016-2017

Facility #:	800
Hospital Name:	Hawkesbury And District General Hospital
Hospital Legal Name:	Hawkesbury And District General Hospital
Site Name:	TOTAL ENTITY

2016-2017 Schedule C1 Performance Indicators

Part I - PATIENT EXPERIENCE: Access, Effective, Safe, Person-Centered			
*Performance Indicators	Measurement Unit	Performance Target	
		2016-2017	2016-2017
Performance Standard			
90th Percentile Emergency Department (ED) length of stay for Complex Patients	Hours	10.75	<= 11.8
90th percentile ED Length of Stay for Minor/Uncomplicated Patients	Hours	4.0	<= 4.4
Percent of Priority 2, 3 and 4 Cases Completed within Access Targets for Hip Replacements	Percent	0.0%	
Percent of Priority 2, 3 and 4 Cases Completed within Access Targets for Knee Replacements	Percent	0.0%	
Percent of Priority 2, 3 and 4 Cases Completed within Access Targets for MRI	Percent	0.0%	
Percent of Priority 2, 3 and 4 Cases Completed within Access Targets for CT Scans	Percent	80.5%	>= 80.5%
Readmissions to Own Facility within 30 days for selected HBAM Inpatient Grouper (HIG) Conditions	Percent	TBD	
Rate of Hospital Acquired Clostridium Difficile Infections	Rate	0.00	
Explanatory Indicators		Measurement Unit	
Percent of Stroke/Tia Patients Admitted to a Stroke Unit During their Inpatient Stay	Percent		
Hospital Standardized Mortality Ratio	Ratio		
Rate of Ventilator-Associated Pneumonia	Rate		
Central Line Infection Rate	Rate		
Rate of Hospital Acquired Methicillin Resistant Staphylococcus Aureus Bacteremia	Rate		
Percent of Priority 2, 3, and 4 cases completed within Access targets for Cardiac By-Pass Surgery	Percentage		
Percent of Priority 2, 3, and 4 cases completed within Access targets for Cancer Surgery	Percentage		
Percent of Priority 2, 3 and 4 Cases Completed within Access Targets for Cataract Surgery	Percentage		

## Hospital Sector Accountability Agreement 2016-2017

Facility #:	800
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Hospital Legal Name:	Hawkesbury And District General Hospital
Site Name:	TOTAL ENTITY

### 2016-2017 Schedule C1 Performance Indicators

Part II - ORGANIZATION HEALTH - EFFICIENCY, APPROPRIATELY RESOURCED, EMPLOYEE EXPERIENCE, GOVERNANCE			
*Performance Indicators			
	Measurement Unit	Performance Target 2016-2017	Performance Standard 2016-2017
Current Ratio (Consolidated - All Sector Codes and fund types)	Ratio	4.41	>= 4.19
Total Margin (Consolidated - All Sector Codes and fund types)	Percentage	1.87%	>=1.87%
Explanatory Indicators			
	Measurement Unit		
Total Margin (Hospital Sector Only)	Percentage		
Adjusted Working Funds/ Total Revenue %	Percentage		

Part III - SYSTEM PERSPECTIVE: Integration, Community Engagement, eHealth			
*Performance Indicators			
	Measurement Unit	Performance Target 2016-2017	Performance Standard 2016-2017
Alternate Level of Care (ALC) Rate	Percentage	12.70%	<= 13.97%
Explanatory Indicators			
	Measurement Unit		
Percentage of Acute Alternate Level of Care (ALC) Days (Closed Cases)	Percentage		
Repeat Unscheduled Emergency Visits Within 30 Days For Mental Health Conditions (Methodology Updated)	Percentage		
Repeat Unscheduled Emergency Visits Within 30 Days For Substance Abuse Conditions (Methodology Updated)	Percentage		

Part IV - LHIN Specific Indicators and Performance targets: See Schedule C3	
Targets for future years of the Agreement will be set during the Annual Refresh process. *Refer to 2016-2017 H-SAA Indicator Technical Specification for further details.	

### 2016-2017 Schedule C2 Service Volumes

		Measurement Unit	Performance Target 2016-2017	Performance Standard 2016-2017
Clinical Activity and Patient Services				
Ambulatory Care	Visits		45,794	>= 36,635 and <= 54,953
Complex Continuing Care	Weighted Patient Days		6,386	>= 5,428 and <= 7,344
Day Surgery	Weighted Cases		800	>= 680 and <= 920
Elderly Capital Assistance Program (ELDCAP)	Patient Days		0	-
Emergency Department	Weighted Cases		2,300	>= 2,070 and <= 2,530
Emergency Department and Urgent Care	Visits		45,000	>= 43,650 and <= 46,350
Inpatient Mental Health	Patient Days		0	-
Acute Rehabilitation Patient Days	Patient Days		0	-
Total Inpatient Acute	Weighted Cases		3,200	>= 2,880 and <= 3,520