DRAFT Criteria for Northwood Management Agreement Evaluation Revised: May 19, 2021

	Indicator	Measure (over 12 months)	Data Source	Finding (actual performance)	Value
Quality of Care	Resident satisfaction/quality of life	Resident satisfaction survey to be completed at a minimum of every 2 years. An action plan is established. All actions will be complete with in 6 months.	Accred report		
	Occupancy rate	Annual Average occupancy rate above 96% (post pandemic)	Scorecard		/5
	Incident rate	Incident Rate Per 1000 Resident Days remains under 20 / quarter	Scorecard		/5
	Responsive behaviours	Rate Per 1000 Resident Days remains under 5/ quarter	Scorecard		/5
	Falls	Fall Rate Per 1000 Resident Days remains under 8/ quarter	Scorecard		/5
	Medication errors	Rate Per 1000 Resident Days remains under 5/ quarter	Scorecard		/5
	Respiratory infections	Rate Per 1000 Resident Days remains under 5/ quarter	Scorecard		/5
	UTIs	Rate Per 1000 Resident Days remains under 10/ quarter	Scorecard		/5
	Skin lesions requiring treatment (bed sores)	Rate Per 1000 Resident Days remains under 5/ quarter	Scorecard		/5
	Gastrointestinal problems	Rate Per 1000 Resident Days remains under 5/ quarter	Scorecard		/5
	Licensing status	Continued good standing	licensing report		
Financial and Risk Management	Accuracy of forecasts	Forecast variances can be explained	Regular Board Meeting Report		/2.5
	Timeliness of financial reporting	No unreasonable delays in reporting	Regular Board Meeting Report		/2.5
	Risk identification and mitigation	Monitors Trends and develops Action Plans where required Identifies and responds to emergent risk issues Communicates with The Board in accordance with the Risk Management Framework	CEO report/ Risk Report/Scorecard		/5
	Workplace safety	Same as or improved rate of injury/WCB claims	Scorecard		/5

absenteeism	Same as or improved rate of absenteeism	Scorecard	/5
Staff recruitment, training, retention and succession planning	Turnover rate	Scorecard	/5
Volunteer recruitment, training and retention	Steady or growing volunteer base	Scorecard	/5
Staff satisfaction	Accreditation Survey tool minimum Q 4 years. Staff satisfaction survey to be completed at a minimum of every 2 years. An action plan is established. All actions will be complete with in 6 months	Scorecard	/5
Shoreham reputation with stakeholders (families, community, government, sector)	Greater than 4 out of five star rating by all stakeholders	Survey/key informant interviews	/10
Confidence in leadership	Greater than 4 out of five star rating by all board members	Survey/key informant interviews	/10
	Staff recruitment, training, retention and succession planning Volunteer recruitment, training and retention Staff satisfaction Shoreham reputation with stakeholders (families, community, government, sector)	Staff recruitment, training, retention and succession planningTurnover rateVolunteer recruitment, training and retentionSteady or growing volunteer baseStaff satisfactionAccreditation Survey tool minimum Q 4 years. Staff satisfaction survey to be completed at a minimum of every 2 years. An action plan is established. All actions will be complete with in 6 monthsShoreham reputation with stakeholders (families, community, government, sector)Greater than 4 out of five star rating by all stakeholdersConfidence in leadershipGreater than 4 out of five star rating	Staff recruitment, training, retention and succession planningTurnover rateScorecardVolunteer recruitment, training and retentionSteady or growing volunteer baseScorecardStaff satisfactionAccreditation Survey tool minimum Q 4 years. Staff satisfaction survey to be completed at a minimum of every 2 years. An action plan is established. All actions will be complete with in 6 monthsScorecardShoreham reputation with stakeholders (families, community, government, sector)Greater than 4 out of five star rating by all stakeholdersSurvey/key informant interviewsConfidence in leadershipGreater than 4 out of five star rating by all board membersSurvey/key informant

Notes:

Indicators are the areas deemed by the Board to be the most important reflection of management performance. They align with standards of care and accountability

Measures (also known as targets) quantify the *performance expectation* of each indicator

Data source is where/how information will be obtained to measure each indicator

Finding quantifies the *actual performance* of each measure. It also records whether there has been a gain or loss in improvement since the last report. This helps to flag areas of excellence (worthy of celebration) and areas where outcomes can be improved with new processes.

Value is the score given to each indicator. It allows for an additional value filter to be applied by the board in its overall review of the Management Agreement. The Board may assign different value/weights to each indicator. A denominator of 100 makes for ease of calculation.