

UHN 2008/09 Balanced Scorecard - Q4 Results

Domain / Theme	Goal	Measure	Baseline Value	Quarter Results					Target
			(where we were)	(our current results)					(where we hope to reach)
			07/08 Year End Results unless articulated	Q1 (Apr-Jun) unless articulated	Q2 (Jul-Sep) unless articulated	Q3 (Oct-Dec) unless articulated	Q4 (Jan-Mar) unless articulated	08/09 Year End Result unless articulated	March 31, 2009 unless articulated
We are a caring, creative, and accountable academic hospital, transforming healthcare for our patients, our community and the world.									
We Ensure that we have the best people to deliver on our strategies	Attract the best people	% New employee turnover	21.2%	11.8%	10.7%	10.8%	10.0%	10.0%	17% (20% reduction)
	Retain the best people	% EOS organizational commitment score	58.4% (06/07)	63% (07/08)					60.5% (07/08)
		% Improvement in supervisor skill assessment	new	not available					10% improvement
	Optimize human resource utilization (Productivity)	% Participation in PES discussions	69.97% non-union (05/06)	62.05% (07/08)					80% non-union
			15.64% union (05/06)	20.87% (07/08)					30% union
		% Overtime hours (monthly average)	1.45%	1.54%	1.40%	1.25%	0.84%	1.25%	1.35%
Monthly average sick-time hours per employee (rolling average)	53.1	52.9	50.1	50.2	52.0	52.0	52 (UHN) or 4% reduction (Unit Level)		
Caring Deliver safe, patient-centred care in an integrated care delivery environment	Make UHN safer for our patients	Hospital Standard Mortality Ratio	88	91 (07/08 Q4)	78 (Q1)	73 (Q2)	74 (Q3)	74 (Q3)	<90
		Hospital acquired infection rates (MRSA, VRE, C.Difficile)	0.56 (C. diff)	0.76	0.54	0.50	0.58	0.60	0.50 cases per 1000 pt-days (10% reduction)
			0.46 (07/08 target) (VRE)	0.34	0.32	0.29	0.24	0.29	0.41 cases per 1000 pt-days (10% reduction)
			0.41 (MRSA)	0.40	0.57	0.35	0.23	0.39	0.37 cases per 1000 pt-days (10% reduction)
	Pressure ulcer incidence	12.1%	4.1% (November 2008)					11.5%	
	Improve access to care and satisfaction for our patients	Ambulatory Oncology patient satisfaction (Emotional Support dimension)	60%	not available	58% (Q1)	67.3% (Q2)	64.3% (Q3)	62.9% (YTD Q3)	62%
		Inpatient satisfaction scores	76.8% (Q2 07/08)	78.7% (07/08)	76.7 (Q1)	77.5 (Q2)	78.4% (Q3)	77.7% (YTD Q3)	77.6%
		Surgeries cancelled within 48 hours	9.6%	8.9%	9.6%	9.4%	8.3%	9.0%	8.4%
	Enhance system partnerships to integrate care processes for our patients	Average ALC days	13.2	13.6	13.3	14.0	13.8	13.7	11.9 days (10% reduction)
		% CTAS 3 patients admitted to inpatient unit within the provincial standard of 6 hours	57.5%	56.5%	59.2%	59.6%	63.4%	59.7%	63% (10% improvement)
% CTAS 4 & 5 patients discharged within the provincial standard of 4 hours		68.9%	66.8%	67.9%	74.0%	74.5%	70.7%	76% (10% improvement)	

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Creative <i>Demonstrate research impact and enhance patient care</i>	Financially sustainable research enterprise	Revenue dollars from commercialization	\$500K	\$1.3M					\$550K
		Total value of all grant funding	\$220M	\$251M					\$231M
	UHN is the premier research hospital in Canada	Average turnaround time for REB approval of clinical studies in expedited reviews and full Board reviews	6 weeks	8.4 weeks					5 weeks
		Number of citations	36,331 (2003 to 2005)	65,330 (2003 to 2009)					36,720 - 37,080 (2007)
	UHN is the leader in research for clinical practice and care delivery	# of clinical trials	264 (2006)	272					269 (2007)
		% Clinical Research Staff UHN trained and certified	0%	50%					50%
Accountable <i>Realization of UHN's commitment to fiscal responsibility and innovation</i>	Appropriate infrastructure budget to facilitate investments in innovation	Total non-MOH external revenues	\$454M	\$118M (tracking on target)	\$116M (tracking on target)	\$121M (tracking on target)	\$108M (on target)	\$463M	\$463M (2% increase)
		Facilities assessment - on schedule	100%	100%					100%
	Balanced budget and meet accountability commitments	Budget position	0 net	\$6,400,000 Year-end					0 net
		Hospital Accountability Agreement commitments	accountability dashboard measures						
	Leader in clinical, administrative and information integration in Ontario	Quadramed CPR % application uptime	100%	100%	100%	100%	100%	100%	99.9%
		% response rate to Accreditation patient Safety Survey and Team Questionnaires	41%	44%					44%
		% of Discharge summaries completed within 14 days of discharge	80.9%	80%	83.8%	82.0%	81.5%	81.9%	85%
		% OR/Procedure Notes completed within 14 days of discharge	92.7%	93.4%	91.7%	92.1%	92.5%	92.4%	95%
Academic <i>Enhance international profile in education</i>	Improve trainee satisfaction	Choice of teaching site for rotating medical residents (UHN divisions in top 2 choices)	77% (06/07)	85% (08/09)					85% (07/08)
		Rating of teaching and rotation effectiveness by postgraduate medical trainees	RES = 4.03 / 5 (05/06)	4.06 (06/07)					RES = 4.1 / 5 (06/07)
			TES = 4.37 / 5 (05/06)	4.44 (06/07)					TES = 4.4 / 5 (06/07)
	Nursing student satisfaction with rotation/placement	80% (06/07)	85% (07/08)					85% (07/08)	
	Enhance IPE/IPC	# of clinical staff obtaining IPE certification	15 (2006)	51 (08/09)					25 (2007)

University Health Network Hospital Service Accountability Agreement (H-SAA) Indicators

	Reporting Month	YTD Actual	YTD Target	Variance	HAA Target* 08 09	HAA Range*
2008/09 Global Volumes and Performance Indicators						
Total Weighted Cases	YTD March	70,018	69,800	218	69,800	67,706-71,894
Mental Health Patient Days	YTD March	10,644	9,979	665	9,979	> 8,981
Emergency Visits	YTD March	79,653	70,074	9,579	70,074	> 65,169
Ambulatory Care Visits	YTD March	863,313	791,311	72,002	791,311	>743,832
Rate of Readmission for Selected CMGs	Cal 2009 Projection based on YTD Feb	528	406	122	406	< 450.97
Percent Full-time Nurses	YTD March	87.28%	80.98%	6.3%	80.98%	> 79.98%
Current Ratio	YTD March	0.93	0.67	0.26	0.67	0.8-2.0
Total Margin	YTD March	1.56%	0.00%	1.56%	0.00%	0.00%
2008/09 Critical Care Funding						
% Beds Open to Critical as Scheduled:	TGH	YTD March	30.6%	100.0%	-69.4%	100.0%
	TWH	YTD March	85.0%	100.0%	-15.0%	100.0%
2008/09 Protected Services						
Cardiac Catheterization	YTD March	6,116	6,500	(384)	6,500	
Cardiac Surgery	YTD March	1,495	1,800	(305)	1,800	
Chronic Kidney Disease (weighted units)	YTD March	139,466	153,029	(13,563)	153,029	
Organ Transplantation (cases)	YTD March	379	439	(60)	439	
Cardiac Rehabilitation (# of patients)	YTD March	264	400	(136)	400	
Visudyne Therapy (# of vials)	YTD March	66	1,802	(1,736)	1,802	
Selected Cancer Services	YTD March	15,631	14,889	742	14,889	
2008/09 Wait Time Services						
					Base + Incremental	
Hip and Knee Joint Replacements	YTD March	1,049	1,150	(101)	1,150	
Magnetic Resonance Imaging (Hrs)	YTD March	30,825	24,645	6,180	24,645	
Computerized Axial Tomography (Hrs)	YTD March	19,898	18,047	1,851	18,047	
2008/09 Cancer Care Ontario Funded						
					Base + Incremental	
Radiation Therapy	YTD March	9,780	9,750	30	9,750	
Systemic Therapy	YTD March	5,851	5,899	(48)	5,899	
Surgical Oncology	YTD March	3,864	3,903	(39)	3,903	

*Please note that these targets and ranges are subject to change upon MOHLTC/LHIN review.