### UHN 2010/11 Balanced Scorecard - Q4 Results

<table>
<thead>
<tr>
<th>Domain</th>
<th>Theme</th>
<th>Goal</th>
<th>Measure</th>
<th>Baseline Value (where we were) (09/10 Year End unless articulated)</th>
<th>Q1 (Apr-Jun) unless articulated</th>
<th>Q2 (July-Sep) unless articulated</th>
<th>Q3 (Oct-Dec) unless articulated</th>
<th>Q4 (Jan-Mar) unless articulated</th>
<th>Year to date (where we hope to March 31, 2011)</th>
</tr>
</thead>
<tbody>
<tr>
<td>We</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Attract &amp; retain the best people</td>
<td>Organizational commitment score</td>
<td>63%</td>
<td></td>
<td></td>
<td></td>
<td>57%</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Create a high performance culture</td>
<td>Leadership skills learning</td>
<td>0.48%</td>
<td>0.46%</td>
<td>0.25%</td>
<td>0.98%</td>
<td>0.96%</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Enhance organizational capacity through employee safety and wellness</td>
<td>% Overtime hours (monthly average)</td>
<td>1.04%</td>
<td>0.91%</td>
<td>1.05%</td>
<td>1.01%</td>
<td>1.17%</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>Average sick-time hours per employee (12 month rolling average)</td>
<td>57.5</td>
<td>56.5</td>
<td>56.1</td>
<td>54.3</td>
<td>53.9</td>
</tr>
<tr>
<td>Caring</td>
<td></td>
<td></td>
<td>Make UHN safer for our patients</td>
<td>Hospital Standard Mortality Ratio</td>
<td>90 (best practice)</td>
<td>76 (09/10)</td>
<td>78 (10/11 Q1)</td>
<td>79 (10/11 Q2)</td>
<td>82 (10/11 Q3)</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>Hospital acquired infection rate C. Difficile cases per 1000 patient days</td>
<td>0.54% (09/10 target)</td>
<td>0.53</td>
<td>0.51</td>
<td>0.62</td>
<td>0.85</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>Hospital acquired infection rate MRSA cases per 1000 patient days</td>
<td>0.35% (09/10 target)</td>
<td>0.48</td>
<td>0.48</td>
<td>0.30</td>
<td>0.37</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>Hospital acquired infection rate VRE cases per 1000 patient days</td>
<td>0.26% (09/10 target)</td>
<td>0.23</td>
<td>0.48</td>
<td>0.56</td>
<td>1.04</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>% of UHN staff who wash their hands prior to patient contact</td>
<td>48%</td>
<td>39%</td>
<td>64%</td>
<td>71%</td>
<td>76%</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>Pressure ulcer incidence</td>
<td>7.7% (09/10 target)</td>
<td></td>
<td></td>
<td></td>
<td>4.2%</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Improve access to care and satisfaction for our patients</td>
<td>Inpatient satisfaction scores</td>
<td>78.8% (09/10 Q3 YTD)</td>
<td>79.1% (09/10 Q4)</td>
<td>80.6%</td>
<td>79.6%</td>
<td>80.5 (10/11 Q3 YTD)</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>% of potential eligible organ donors that were converted to actual organ donors</td>
<td>27% (new)</td>
<td>25%</td>
<td>46%</td>
<td>20%</td>
<td>100%</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>Surgeries cancelled within 48 hours</td>
<td>8.9%</td>
<td>8%</td>
<td>7.6%</td>
<td>6.6%</td>
<td>8.8%</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Enhance system partnerships to integrate care processes for our patients</td>
<td>Average # of days ALC patient is waiting in hospital a bed</td>
<td>16.7 days (09/10 Q3 YTD)</td>
<td>13.1</td>
<td>13.9</td>
<td>13.1</td>
<td>14.1</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>Percent improvement of patients treated in the ED within UHN wait time benchmarks</td>
<td>TGH: CTAS I-III: 81.6% CTAS IV-V: 78.0% Admitted Pls: 19.7%</td>
<td>29.1%</td>
<td>30.9%</td>
<td>29.4%</td>
<td>24.4%</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>TGH: CTAS I-III: 89.0% CTAS IV-V: 80.2% Admitted Pls: 22.7%</td>
<td>22.7%</td>
<td>9.9%</td>
<td>11.7%</td>
<td>17.1%</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>Admitted patients who’s ED-Length-of-Stay (LOS) is &lt;= 8 hours</td>
<td>TGH: 1,427</td>
<td>TWH: 1,368</td>
<td>695</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>TGH: 1,427</td>
<td>TWH: 1,368</td>
<td>668</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>TGH: 7,510</td>
<td>TWH: 11,894</td>
<td>2059</td>
</tr>
</tbody>
</table>

**Please note that some measures are calculated on a year-to-date basis, resulting in the current quarter also indicating year-to-date performance**
### UHN 2010/11 Balanced Scorecard - Q4 Results

#### Domain: Creative
- **Theme**: Financially sustainable research enterprise
  - **Goal**: Revenue dollars from commercialization
  - **Measure**: Baseline Value (where we were) and Quarter Results (our current results)
  - **Baseline Value (09/10 Year End unless articulated)**: $1.5M
  - **Q1 (Apr-Jun)**: $86.2K
  - **Q2 (July-Sep)**: $240.1K
  - **Q3 (Oct-Dec)**: $157.3K
  - **Q4 (Jan-Mar)**: $598.4K
  - **Year to date (Apr-Mar)**: $1.96M
  - **Target (where we hope to March 31, 2011)**: $1.75M

- **Theme**: Demonstrable research impact and enhance patient care
  - **Goal**: Total value of all grant funding
  - **Measure**: Baseline Value (where we were) and Quarter Results (our current results)
  - **Baseline Value (09/10 target)**: $255M
  - **Q1 (Apr-Jun)**: $64M
  - **Q2 (July-Sep)**: $73M
  - **Q3 (Oct-Dec)**: $65.7M
  - **Q4 (Jan-Mar)**: $60.0M
  - **Year to date (Apr-Mar)**: $262.7M
  - **Target (where we hope to March 31, 2011)**: $265M

- **Theme**: UHN is the premier research hospital in Canada
  - **Goal**: % of clinical research studies reviewed within 5 weeks
  - **Measure**: Baseline Value (where we were) and Quarter Results (our current results)
  - **Baseline Value**: 76%
  - **Q1 (Apr-Jun)**: 83.7%
  - **Q2 (July-Sep)**: 70.3%
  - **Q3 (Oct-Dec)**: 52.6%
  - **Q4 (Jan-Mar)**: 68.0%
  - **Year to date (Apr-Mar)**: 64.0%
  - **Target (where we hope to March 31, 2011)**: 80%

- **Theme**: UHN is the leader in research for clinical practice and care delivery
  - **Goal**: Percentage of clinical regulated research professionals trained and credentialed
  - **Measure**: Baseline Value (where we were) and Quarter Results (our current results)
  - **Baseline Value**: 0%
  - **Q1 (Apr-Jun)**: 11%
  - **Q2 (July-Sep)**: 9%
  - **Q3 (Oct-Dec)**: 9%
  - **Q4 (Jan-Mar)**: 9%
  - **Year to date (Apr-Mar)**: 38%
  - **Target (where we hope to March 31, 2011)**: 50%

- **Theme**: Internally reviewed/audited clinical trials
  - **Goal**: Internally reviewed/audited clinical trials
  - **Measure**: Baseline Value (where we were) and Quarter Results (our current results)
  - **Baseline Value**: 2.30%
  - **Q1 (Apr-Jun)**: 0.72%
  - **Q2 (July-Sep)**: 0.35%
  - **Q3 (Oct-Dec)**: 0.81%
  - **Q4 (Jan-Mar)**: 0.52%
  - **Year to date (Apr-Mar)**: 2.40%
  - **Target (where we hope to March 31, 2011)**: 2.50%

#### Domain: Accountable
- **Theme**: Appropriate infrastructure budget to facilitate investments in innovation
  - **Goal**: Total non-MOHTC external revenues
  - **Measure**: Baseline Value (where we were) and Quarter Results (our current results)
  - **Baseline Value**: $491M
  - **Q1 (Apr-Jun)**: $118M
  - **Q2 (July-Sep)**: $144M
  - **Q3 (Oct-Dec)**: $125M
  - **Q4 (Jan-Mar)**: $106M
  - **Year to date (Apr-Mar)**: $493M
  - **Target (where we hope to March 31, 2011)**: 511M

- **Theme**: Balanced budget and meet accountability commitments
  - **Goal**: Total margin
  - **Measure**: Baseline Value (where we were) and Quarter Results (our current results)
  - **Baseline Value**: 0%
  - **Q1 (Apr-Jun)**: 2.64%
  - **Q2 (July-Sep)**: 2.34%
  - **Q3 (Oct-Dec)**: 1.78%
  - **Q4 (Jan-Mar)**: 2.85%
  - **Year to date (Apr-Mar)**: 0%
  - **Target (where we hope to March 31, 2011)**: 0%

- **Theme**: Leader in clinical, administrative and information integration in Ontario
  - **Goal**: % of Discharge summaries completed within 14 days of discharge
  - **Measure**: Baseline Value (where we were) and Quarter Results (our current results)
  - **Baseline Value**: 83%
  - **Q1 (Apr-Jun)**: 88.4%
  - **Q2 (July-Sep)**: 88.0%
  - **Q3 (Oct-Dec)**: 87.9%
  - **Q4 (Jan-Mar)**: 90.2%
  - **Year to date (Apr-Mar)**: 88.6%
  - **Target (where we hope to March 31, 2011)**: 85%

- **Theme**: % OR/Procedure Notes completed within 14 days of discharge
  - **Goal**: % OR/Procedure Notes completed within 14 days of discharge
  - **Measure**: Baseline Value (where we were) and Quarter Results (our current results)
  - **Baseline Value**: 94%
  - **Q1 (Apr-Jun)**: 95.5%
  - **Q2 (July-Sep)**: 94.4%
  - **Q3 (Oct-Dec)**: 94.1%
  - **Q4 (Jan-Mar)**: 96.0%
  - **Year to date (Apr-Mar)**: 94.8%
  - **Target (where we hope to March 31, 2011)**: 95%

#### Domain: Academic
- **Theme**: Improve trainee satisfaction
  - **Goal**: # of peer reviewed education grants (calendar year)
  - **Measure**: Baseline Value (where we were) and Quarter Results (our current results)
  - **Baseline Value**: 92 (2008)
  - **Q1 (Apr-Jun)**: 95 (2010)
  - **Q2 (July-Sep)**: 95 (2010)
  - **Q3 (Oct-Dec)**: 95 (2010)
  - **Q4 (Jan-Mar)**: 100 (2009)

- **Theme**: Rating of teaching and rotation effectiveness by postgraduate medical trainees (academic year)
  - **Goal**: Rating of teaching and rotation effectiveness by postgraduate medical trainees (academic year)
  - **Measure**: Baseline Value (where we were) and Quarter Results (our current results)
  - **Baseline Value**: RES = 4.04 / 5 (07/08)
  - **Q1 (Apr-Jun)**: RES = 4.09 / 5 (09/10)
  - **Q2 (July-Sep)**: TES = 4.41 / 5 (07/08)
  - **Q3 (Oct-Dec)**: TES = 4.47 / 5 (09/10)
  - **Q4 (Jan-Mar)**: RES = 4.15 / 5
  - **Target (where we hope to March 31, 2011)**: TES = 4.5 / 5

- **Theme**: # of UHN-hosted CE Events (calendar year)
  - **Goal**: # of UHN-hosted CE Events (calendar year)
  - **Measure**: Baseline Value (where we were) and Quarter Results (our current results)
  - **Baseline Value**: 40 (2008)
  - **Q1 (Apr-Jun)**: 72 (2010/11)
  - **Q2 (July-Sep)**: 72 (2010/11)
  - **Q3 (Oct-Dec)**: 72 (2010/11)
  - **Q4 (Jan-Mar)**: 45 (2008)

- **Theme**: Enhance IPE/IPC
  - **Goal**: # of clinical staff obtaining IPE certification (academic year)
  - **Measure**: Baseline Value (where we were) and Quarter Results (our current results)
  - **Baseline Value**: 40 (08/09)
  - **Q1 (Apr-Jun)**: 82 (2010/11)
  - **Q2 (July-Sep)**: 82 (2010/11)
  - **Q3 (Oct-Dec)**: 82 (2010/11)
  - **Q4 (Jan-Mar)**: 60 (2011/12)

---

**Please note that some measures are calculated on a year-to-date basis, resulting in the current quarter also indicating year-to-date performance.**
# University Health Network

**Hospital Service Accountability Agreement (H-SAA) Indicators**

*For the Twelve Months Ended March 31, 2011*

<table>
<thead>
<tr>
<th>Reporting Month</th>
<th>YTD Actual</th>
<th>YTD Target</th>
<th>Variance</th>
<th>H-SAA Target 10-11</th>
<th>H-SAA Range</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>2010/11 Global Volumes and Performance Indicators</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Total Weighted Cases</td>
<td>YTD March</td>
<td>76,313</td>
<td>69,947</td>
<td>6,366</td>
<td>69,947</td>
</tr>
<tr>
<td>Mental Health Patient Days</td>
<td>YTD March</td>
<td>9,808</td>
<td>9,979</td>
<td>(171)</td>
<td>A</td>
</tr>
<tr>
<td>Emergency Visits</td>
<td>YTD March</td>
<td>91,781</td>
<td>75,000</td>
<td>16,781</td>
<td>75,000</td>
</tr>
<tr>
<td>Ambulatory Care Visits</td>
<td>YTD March</td>
<td>896,957</td>
<td>791,311</td>
<td>105,646</td>
<td>791,311</td>
</tr>
<tr>
<td>Percent Full-time Nurses</td>
<td>YTD March</td>
<td>87.11%</td>
<td>81.00%</td>
<td>6.1%</td>
<td>80.98%</td>
</tr>
<tr>
<td>Current Ratio</td>
<td>YTD March</td>
<td>0.97</td>
<td>0.55</td>
<td>0.42</td>
<td>0.55</td>
</tr>
<tr>
<td>Total Margin</td>
<td>YTD March</td>
<td>2.85%</td>
<td>0.00%</td>
<td>2.85%</td>
<td>0.00%</td>
</tr>
<tr>
<td><strong>2010/11 Protected Services</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Cardiac Catheterization</td>
<td>YTD March</td>
<td>5,853</td>
<td>6,335</td>
<td>(482)</td>
<td>B</td>
</tr>
<tr>
<td>Cardiac Surgery</td>
<td>YTD March</td>
<td>1,418</td>
<td>1,597</td>
<td>(179)</td>
<td>B</td>
</tr>
<tr>
<td>Chronic Kidney Disease (weighted units)</td>
<td>YTD March</td>
<td>140,799</td>
<td>153,029</td>
<td>(12,230)</td>
<td>C</td>
</tr>
<tr>
<td>Organ Transplantation (cases)</td>
<td>YTD March</td>
<td>382</td>
<td>439</td>
<td>(57)</td>
<td>A</td>
</tr>
<tr>
<td>Cardiac Rehabilitation (# of patients)</td>
<td>YTD March</td>
<td>240</td>
<td>400</td>
<td>(160)</td>
<td>B</td>
</tr>
<tr>
<td><strong>2010/11 Wait Time Services</strong></td>
<td></td>
<td></td>
<td></td>
<td>Base + Incremental</td>
<td></td>
</tr>
<tr>
<td>Hip and Knee Joint Replacements</td>
<td>YTD March</td>
<td>1,098</td>
<td>1,080</td>
<td>18</td>
<td>A</td>
</tr>
<tr>
<td>Magnetic Resonance Imaging (Hrs)</td>
<td>YTD March</td>
<td>38,430</td>
<td>30,736</td>
<td>7,694</td>
<td>A</td>
</tr>
<tr>
<td>Computerized Axial Tomography (Hrs)</td>
<td>YTD March</td>
<td>21,642</td>
<td>18,047</td>
<td>3,595</td>
<td>A</td>
</tr>
<tr>
<td><strong>2010/11 Cancer Care Ontario Funded</strong></td>
<td></td>
<td></td>
<td></td>
<td>Base + Incremental</td>
<td></td>
</tr>
<tr>
<td>Radiation Therapy</td>
<td>YTD March</td>
<td>9,612</td>
<td>9,850</td>
<td>(238)</td>
<td>A</td>
</tr>
<tr>
<td>Systemic Therapy</td>
<td>YTD March</td>
<td>6,176</td>
<td>5,683</td>
<td>493</td>
<td>A</td>
</tr>
<tr>
<td>Surgical Oncology</td>
<td>YTD March</td>
<td>4,061</td>
<td>3,964</td>
<td>97</td>
<td>A</td>
</tr>
</tbody>
</table>

**A** Fluctuation month-to-month - being monitored

**B** Unearned revenues largely offset by expense savings

**C** LHIN target is historically too high, unearned revenue is offset by expense savings

---

Green - meeting or exceeding target

Yellow - between baseline and target

Red - below baseline