

# Balanced Scorecard Report

Results from 2011-12 first quarter (April to June)



Domain	5 Year Goal	Objective	Measure	Measure Definition	11/12 Baseline (10/11 q4 unless articulated)	Q1 Results (April - June)	11/12 Target
WE <i>Develop the best people who will enable system leadership</i>	Continue to build organizational capability and capacity	Create work environments that promote excellence and innovation in practice, education, and research	Overtime rate	Percent of total overtime hours in reporting month / Total worked hours in reporting month	1.03%	1.00%	0.98%
			Average sick hours per employee for the last 12 months	Total sick hours reported in the 12-month period / Total employees eligible for sick pay in the 12-month period (Rolling average)	53.9	54.2	50.0
			Organizational commitment score	5 questions from EOS survey averaged into one measure. It reflects the level to which employees feel emotionally connected to the organization, find personal meaning in their work and are motivated to commit the time and effort to help the organization succeed (expressed as a %)	57%	57% (11/12 result to be reported in Q3)	62%
CARING <i>Achieve and document exceptional outcomes for our patients</i>	Become a world leader in documenting and improving patient outcomes	Enhance all elements of patient safety	Hospital standard mortality ratio	A ratio of observed to expected deaths multiplied by 100 (CIHI Definition)	79 (10/11 Q3 YTD)	78	<80
			C. Difficile rate (per 1000 patient days)	Percent incidence of patients contracting Clostridium Difficile (C.Difficile) while in hospital (rate per 1000 patient days)	0.63	0.74	0.44
		Substantially reduce hospital-acquired infections	MRSA rate (per 1000 patient days)	Percent incidence of patients contracting Methicillin-resistant Staphylococcus aureus (MRSA) while in hospital (rate per 1000 patient days)	0.41	0.35	0.32
			VRE rate (per 1000 patient days)	Percent incidence of patients contracting Vancomycin Resistant Enterococci (VRE) while in hospital (rate per 1000 patient days)	0.58	0.94	0.23
			Hand hygiene rate	The number of times that hand hygiene was performed before initial patient contact divided by the number of observed hand hygiene indications for before initial patient contact multiplied by 100 - 2009/10, consistent with publicly reportable patient safety data	67%	76%	80%
	Transform "patient centred care" to "patients as partners in care"	Improve patient access to quality treatment	ED length of stay for admitted patients (90th percentile in hours)	90th percentile ED length of stay for admitted patients (hours)	24.7 (10/11 Q3)	21.6	26
			Percent of eligible organ donors converted to actual organ donors	Percent of potential eligible organ donors that were converted to actual organ donors	42%	67%	75%
			Percent of surgeries cancelled within 48 hours	Total number of surgical cancellations/the total number of patients assessed using CAIS pre-operatively, expressed as a percentage	7.8%	7.2%	8.0%
			Inpatient satisfaction score	Would you recommend this hospital to your friends and family? (add together percent of those who responded "Definitely Yes")	82.5% (10/11 Q3 YTD)	81.7% (YTD Q4 2010/11)	80.0%
	Measure and improve the value of care	Improve internal program integration, discharge planning and community transitions	Percent of inpatient days designated as ALC	Total number of inpatient days designated as ALC, divided by the total number of inpatient days	12.0%	10.2%	11.6%

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CREATIVE	Become the research hospital of the future	Create and disseminate new knowledge	Citations	The citation count for the most recent complete 3-years of papers (e.g. 2007-2009) published by UHN investigators	77,352 (10/11 Q3)	62,333 (8% increase from same point last year)	78,900 (2% increase)	
			Total value of all grant funding	Total project funding including funds held at UHN Foundations	\$262.7M	\$247M (Projected)	\$265M	
			Technology Development & Commercialization Economic Value (ROI)	ROI index comprised of: License and Option Agreements x 100% ; Sponsored Research Agreements x 40%; Research Service Agreements x 40%; R&D Grants with Commercialization x 5% ; Value Created by NewCo Formation x 100%	\$6.6M (10/11 Q3)	\$7.9M	\$6.7M	
		Leverage experimental therapeutics and health services research to impact the lives of patients	Conduct high quality health studies	Turn-around time of health study review	Percent of complete REB new study applications reviewed within 5 weeks	67.3% (10/11 Q3)	74.7%	70%
				Completion of health study self assessment form	Proportion of eligible study self-assessment form requests completed	73% (10/11 Q3)	78.9%	75%
				Enable the collection, analysis, and application of health information	Implement a comprehensive IT system linking clinical and research information	Percent completion of Clinical Data Repository plan for research	0%	30%
ACCOUNTABLE	Expand our space, develop new sources of revenue, and become a leader in clinical, administrative, and research information integration	Enable the creation of new physical space for our clinical programs, operations, research, and education areas	Fulfill organizational commitments through hospital accountability process	Net surplus	Excess of revenue over expenses (same definition as in the audited Financial Statements)	7M (10/11 Q3)	\$13.5M (Projected)	13M
						Develop new sources of revenue	Increase non-MOHLTC funding as a percentage of total UHN funding	Percent increase in non-MOHLTC revenues
		Optimize productivity and integration of care through next-generation information management and technology	Implement advanced clinical documentation in ambulatory care clinics and inpatient areas	Percent of physician documentation captured electronically	Number of physician notes captured synoptically / Total number of physician notes completed (synoptically and dictated)	2.3% (10/11 Q3)	3.9% (10/11 Q4 YTD)	5.0%
				Percent of discharge summaries completed within 7 days of discharge	Percent of discharge summaries completed within 7 days of inpatient discharge	88.6% (14 days)	85.3%	85% (7 days)
				Percent of OR/Procedure notes completed within 7 days of discharge	Percent OR/procedure notes completed within 7 days of the operation or procedure	94.8% (14 days)	94.2%	95% (7 days)
ACADEMIC	Position UHN as the institution of choice for trainees	Increase the quality of educational experiences	Rating of teaching effectiveness scores by postgraduate medical trainees	Mean teaching effectiveness score (TES) for UHN collected through the Postgraduate Web Evaluation and Registration (POWER) system. Score is out of 5 points.	4.47 (09/10)	4.47 (11/12 result to be reported in Q4)	4.50	
			Rating of rotation effectiveness scores by postgraduate medical trainees	Mean rotation effectiveness score (RES) for UHN collected through the Postgraduate Web Evaluation and Registration (POWER) system. Score is out of 5 points.	4.09 (09/10)	4.09 (11/12 result to be reported in Q4)	4.15	
		Continue to pioneer new models of teaching and learning	Increase the number of UHN health professionals trained and certified in interprofessional education	Total number of UHN staff obtaining IPE certification	The number of clinical staff at UHN who complete IPE training through the Office of Interprofessional Education and obtain certification	82 (10/11)	82 (10/11)	70

**University Health Network  
Hospital Service Accountability Agreement (H-SAA) Indicators  
For the Three Months Ended June 30, 2011**

	Reporting Month	YTD Actual	YTD Target	Variance		H-SAA Target 11-12	H-SAA Range
<b>2011/12 Global Volumes and Performance Indicators</b>							
Total Weighted Cases (Inpatient and Day Surgery)	YTD June	6,427	5,829	599		69,947	67,848-72,045
Mental Health Patient Days	YTD June	2,228	2,495	(267)	A	9,979	> 8,981
Emergency Visits	YTD June	23,831	18,750	5,081		75,000	> 69,750
Ambulatory Care Visits	YTD June	231,143	197,828	33,315		791,311	>743,832
<b>2011/12 Accountability Indicators</b>							
Percent Full-time Nurses	YTD June	87.12%	81.00%	6.1%		80.98%	> 79.98%
Current Ratio	YTD June	1.02	0.55	0.47		0.55	0.5-0.61
Total Margin	YTD June	2.23%	-1.00%	3.23%		-1.00%	0.00%
<b>2011/12 Protected Services</b>							
Cardiac Catheterization	YTD June	1,462	1,584	(122)	B	6,335	
Cardiac Surgery	YTD June	344	399	(55)	B	1,597	
Chronic Kidney Disease (weighted units)	YTD June	33,829	38,257	(4,428)	C	153,029	
Organ Transplantation (cases)	YTD June	84	118	(34)	A	471	
Cardiac Rehabilitation (# of patients)	YTD June	80	100	(20)	B	400	
<b>2011/12 Wait Time Services</b>							
						Base + Incremental	
Hip and Knee Joint Replacements	YTD June	293	256	38		1,022	
Cataract Surgeries	YTD June	235	104	131		623	
Magnetic Resonance Imaging (Hrs)	YTD June	9,961	6,298	3,663		25,193	
Computerized Axial Tomography (Hrs)	YTD June	5,773	4,512	1,261		18,047	
<b>2011/12 Cancer Care Ontario Funded</b>							
						Base + Incremental	
Radiation Therapy	YTD June	2,576	2,510	66	A	10,040	
Systemic Therapy	YTD June	1,457	1,551	(94)	A	6,204	
Surgical Oncology	YTD June	339	329	10	A	3,951	

- 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