

# Balanced Scorecard Highlights

Highlights from 2011-12 second quarter (July to September)



## Percent of Inpatient Days Designated as ALC

UHN is doing a good job managing ALC days. In Q2, the average number of days an ALC patient waited to be transferred to a non-acute care facility was 9.7%, significantly lower than our target of 11.6%. These results are related to our recent collaboration with Toronto Rehab Institute and partners including Bridgepoint and the CCAC as well as our hard working clinical teams

## Percent of Physician Notes Directly Captured Electronically

UHN is committed to synoptic documentation capture in the electronic patient record (EPR). As the organization prepares for Advanced Clinical Documentation (ACD), this statistic will be followed closely to track the uptake of ACD. We are pleased to share that we have exceeded our 5.0% target this quarter. We would like to thank physicians for their efforts towards achieving these excellent results and we look forward to continuing this positive trend going forward.

## Overtime Rate

Our overtime rate has increased this quarter, currently sitting at 1.21% compared to our 11/12 target of 0.98%. A proportion of the overtime hours can be attributed to lower staffing in our Nursing Resource Team (NRT), which has resulted in other staff throughout the hospital having to work overtime.

We recognize that investment in NRT is crucial to our success in achieving lower rates. We are working on strategies to more effectively utilize the NRT to support specialty areas, which will allow more staffing flexibility.



Meets or exceeds target



Does not meet target, but on track



Requires continued focus

For more information on the Balanced Scorecard visit

<http://intranet.uhn.ca/home/strategic%5Fplanning/>

## Total Value of All Grant Funding

In a recent publication from Infosource Inc., UHN was ranked as Canada's number one research hospital. UHN held the top spot in research funding in 2009/10 with the total value of all grant funding equalling \$267M. This was 2.5% higher than the previous year and 50% more funding than the number two ranked Hamilton Health Sciences Centre. UHN research continues steady growth with funding for 2011/12 expected to top \$280M.

## Percent Completion of Clinical Data Repository Plan for Research

The plan for development of a clinical data repository (CDR) for research was initiated at the beginning of the fiscal year. The CDR fits into the broader Advanced Clinical Documentation Initiative for UHN. We are very pleased to share that the plan is 75% complete. A request for proposals is scheduled to be released in the new fiscal year – this will be the first step in executing the CDR plan.

## Hospital Acquired Infections & Hand Hygiene

Over the last five years, we have seen a reduction in healthcare associated MRSA. This decrease correlates reasonably well with our increasing hand hygiene compliance. MRSA spreads through various avenues, but hands are the most common route. Physician leadership has had an impact on hand hygiene compliance rates over the last year.

In addition, this quarter, we are pleased to note a reduction in the C. difficile rate. Since C. difficile is most easily spread through environmental contamination, this reduction is a testament to an improvement in environmental cleanliness. We thank everyone for their dedication to cleanliness and hand hygiene which have resulted in an overall reduction in hospital-acquired infections.

## Average Sick Hours per Employee for the Last 12 Months

The average number of sick hours per employee has increased this quarter to 57.5 hours. Although we are slightly below our 11/12 target of 50.0, we are still well above the Ontario Hospital Association (OHA) average. There are many factors that contribute to increased sick time, including the workplace environment, overtime, stress, morale and management feedback. Human Resources is developing strategies to increase awareness and provide additional support to managers.

On a more positive note, this increase in sick time highlights the importance of the flu vaccine. We are extremely pleased with the number of staff who had their flu shot. We will be investigating whether a correlation exists between vaccination rates and sick time.

# Balanced Scorecard Report

Results from 2011-12 second quarter (July to September)



Domain	5 Year Goal	Objective	Measure	11/12 Baseline (10/11 q4 unless articulated)	Q1 Results (April - June)	Q2 Results (July - Sept)	YTD (April - Sept)	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	1.03%	1.00%	1.21%	1.10%	0.98%
			Average sick hours per employee for the last 12 months	53.9	54.2	57.5		50.0
			Organizational commitment score	57%	57% (2011 EOS Pulse Survey)			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	77 (10/11 Q2 YTD)	79 (10/11 Q3 YTD)			<80
		Substantially reduce hospital-acquired infections	C. Difficile rate (per 1000 patient days)	0.63	0.74	0.58	0.66	0.44
	MRSA rate (per 1000 patient days)		0.41	0.35	0.40	0.37	0.32	
	VRE rate (per 1000 patient days)		0.58	0.94	1.00	0.97	0.23	
	Hand hygiene rate		67%	75.9%	74.9%	75.4%	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)	26.5	22.0	25.2	23.8	26.0
			Percent of eligible organ donors converted to actual organ donors	42%	67%	100%	80%	75%
			Percent of surgeries cancelled within 48 hours	7.8%	7.2%	7.8%	7.5%	8.0%
			Inpatient satisfaction score	82.5% (10/11 Q3 YTD)	81.7% (10/11 Q4 YTD)	80.4% (11/12 Q1)		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	12.0%	11.5%	9.7%	10.6%	11.6%

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CREATIVE	Become the research hospital of the future	Create and disseminate new knowledge	Citations	77,352 (10/11 Q3)	62,333 (8% increase from same point last year)			78,900 (2% increase)	
			Total value of all grant funding	\$262.7M	\$246.8M (Projected)	\$265.9M (Projected)		\$265.0M	
		Technology Development & Commercialization Economic Value (ROI)	\$6.60M (10/11 Q3)	\$6.58M (Projected)	\$6.48M (Projected)	\$6.53M (Projected)	\$6.70M		
	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	67.3% (10/11 Q3)	74.7%	84.9%	79.9%	70.0%	
			Completion of health study self assessment form	73.0% (10/11 Q3)	78.9%	70.6%	75.0%	75.0%	
	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%	75%		100%	
ACCOUNTABLE	Expand our space, develop new sources of revenue, and become a leader in clinical, administrative, and research information integration	Fulfill organizational commitments through hospital accountability process	Net surplus for capital		\$3.4M	\$2.5M	\$5.9M	13.0M	
			Develop new sources of revenue	Increase non-MOHLTC funding as a percentage of total UHN funding	Percent increase in non-MOHLTC revenues		2%	3%	3%
		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 notes directly captured electronically	3.9%	5.9%	7.2%	6.5%	5.0%
	Percent of discharge summaries completed within 7 days of discharge			88.6% (14 days)	85.3%	84.8%	85.1%	85.0% (7 days)	
	Percent of OR/Procedure notes completed within 7 days of discharge			94.8% (14 days)	94.2%	93.9%	94.1%	95.0% (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	4.47 (09/10)	4.47 (10/11)			4.50
Rating of rotation effectiveness scores by postgraduate medical trainees				4.09 (09/10)	4.24 (10/11)			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	82 (10/11)	82 (11/12 result to be reported in Q4)			70	