

# Balanced Scorecard Highlights

Highlights from 2012-13 fourth quarter (January to March)



## Hand Hygiene and Infection Rates ■

Our focus on hand hygiene has continued all year and we are 5% higher than we were last year and 4% higher than our target. We have also seen significant improvement at our Toronto Rehab sites that joined the hand hygiene program last year. Thank you to all staff who have helped us beat this target!

For the second straight quarter we have beaten our target for C. difficile. This is likely due to a combination of several factors including improved equipment cleaning at several sites, continued attention to hand hygiene, a pilot project using Clorox bleach wipes for cleaning and disinfection at Princess Margaret, and ongoing antimicrobial stewardship efforts.

## Technology Development & Commercialization Economic Value (ROI) ■

As Canada's leading research hospitals, we are pleased with the success of UHN commercialization initiatives for 2012/13, such as the \$1.6 M licensing agreement for Stem Cell Therapeutics. These better than target results are a tribute to the innovation and hard work of our research staff and the Technology Development and Commercialization team.

## ALC ■

ALC days represented 11.4% of bed days in Q4 and 10.1% of overall bed days for fiscal year 2012/13; above our target of 8.5%. To help cope with this challenge, we have invested in LEAN process improvement initiatives to streamline the patient journey for specific populations. Preliminary data is demonstrating reductions in ALC days with LEAN and these results are anticipated to continue as we expand our efforts next year. We continue to focus on our collaboration across our programs and with external partners such as Bridgepoint, CCAC and Long Term Care facilities to ensure patients get the right care, at the right time and in the right location. Access to expanded bed capacity and enhanced therapy at Toronto Rehab for stroke, spinal and MSK patients has enabled earlier transition to rehab and reduced our length of stay across the continuum.

- Meets or exceeds target
- Does not meet target, but on track
- Requires continued focus

For more information on the Balanced Scorecard visit the BSC+ Icon on your desktop or the [Corporate Intranet](#)

## Employee Engagement

UHN's first Employee Engagement Survey results indicate a 58% engagement score. To improve this score HR will take corporate-wide action on the following areas, which were identified by the survey as priorities to improve employee engagement.

- Improve career development resources and opportunities - enhance resources and opportunities to help employees build and manage their careers at UHN.
- Managing performance - provide additional supports & resources to enhance manager effectiveness in giving feedback, coaching, holding career discussions, addressing performance issues.
- Simplify work processes – Provide resources and tools for teams to help simplify some their work processes to free up time and reduce frustrations.
- Address issues with non-union employees' compensation – implement a plan to address the key issues

## Percentage of Studies at Zero Accrual

UHN strives to ensure that there are no impediments to enrolling participants into clinical research studies in a timely manner. Intense resources are dedicated to the review and approval of clinical research studies, supporting researchers in their efforts to meet recruitment timelines. "Percentage of studies with zero accrual one year after the study receives institutional approval" is an indicator of how successful clinical researchers are at meeting recruitment target timelines. Timely recruitment maximizes the contribution of each participant, allowing efficient study completion, and optimizing the benefits of conducting research at UHN. The overall rate was 18.1% of research studies reporting zero patient recruitment in the first year – which we will have to improve in 2013-14. We plan to evaluate initiatives aimed at facilitating recruitment such as the centralized recruitment pilot project at TRI and e-consent.

## Financial Results

Management achieved its goal to balance operations for 2012/13 while continuing to set aside money to fund UHN's capital needs and other commitments. Our Financial Results target represents board approved amounts to support capital purchases. Similar to last year we managed to set aside \$28 M to fund as follows:

- \$4 M – Clinical Operations
- \$5 M – Altum Health contribution to KDC
- \$12 M – Planned capital renewal
- \$4 M – International Program contribution to Cancer Program
- \$3 M – Planned for Advanced Clinical Documentation

# Balanced Scorecard Report

Results from 2012-13, Quarter Four (Jan - March)



Domain / Theme	5 Year Goal	Objective	Measure	Measure Definition	12/13 Baseline (11/12 Q4 unless articulated)	Q1 (April - June)	Q2	Q3	Q4	YTD	12/13 Target
WE Develop the best people who will enable system leadership	Continue to build organizational capability and capacity	Create work environments that promote excellence and innovation in practice, education, and research	Overtime rate	Overtime rate = Total overtime hours in reporting month / Total paid hours in reporting month	1.24%	0.94%	0.96%	1.10%	1.10%	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)	58.2	58.8	57.9	56.1	55.7	54.0	
			Employee engagement score	The Employee Engagement measure is represented as the percentage of employees who agree or strongly agree with the six engagement questions on the EES survey.	57%	58.0%					N/A
CARING Achieve and document exceptional outcomes for our patients	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)	85.0 (11/12 Q3)	89.4	92.5	90.4	85.5	89.4	<97.0
			C. Difficile rate (per 1000 patient days)	Percent incidence of patients contracting Clostridium Difficile (C.Difficile) while in hospital (rate per 1000 patient days)	0.84	0.46	0.60	0.41	0.40	0.47	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)	0.26	0.43	0.35	0.40	0.21	0.35	0.22
			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	81.9%	87.7%	88.8%	86.4%	86.1%	87.2%	83.0%
	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)	26.0	24.5	22.9	26.1	26.6	25.0	23.0
			Percent of eligible organ donors converted to actual organ donors	Percent of potential eligible organ donors that were converted to actual organ donors	67%	No Cases	60%	100%	25%	50%	90%
			Percent of surgeries (avoidable) cancelled within 48 hours	Total number of surgical cancellations/the total number of patients assessed using CAIS pre-operatively, expressed as a percentage	6.0%	4.1%	4.6%	4.8%	4.8%	4.6%	4.7%
			Inpatient satisfaction score	Would you recommend this hospital to your friends and family? (add together percent of those who responded "Definitely Yes")	84.9% (2011/12 Q3)	79.0%	80.9%	84.9%	Not Available		>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	10.3%	10.7%	8.7%	9.1%	11.8%	10.1%	8.5%

# Balanced Scorecard Report

Results from 2012-13, Quarter Four (Jan - March)



Domain / Theme	5 Year Goal	Objective	Measure	Measure Definition	12/13 Baseline (11/12 Q4 unless articulated)	Q1 (April - June)	Q2	Q3	Q4	YTD	12/13 Target			
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	82,643	109,229					84,269			
			Total value of all grant funding	Total project funding including funds received from UHN Foundations	\$277.0M	\$72.5M	\$75.5M	\$75.4M	\$78.1M	\$301.5M	\$280.0M			
			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%	\$6.15M	\$1.02M	\$1.20M	\$827,357	\$3.68M	\$6.99M	\$6.80M			
	Enable the collection, analysis, and application of health information	Implement a comprehensive IT system linking clinical and research information	Specimen management tool % implemented	Percent completion of specimen management tool	0.0%	15.0%	40.0%	60.0%	80.0%	80.0%	100.0%			
			Clinical annotation tool % implemented	Percent completion of clinical annotation tool	0.0%	75.0%	85.0%	97.0%	100.0%	100.0%	100.0%			
	Leverage experimental therapeutics and health services research to impact the lives of patients	Conduct high quality health studies	Turn around time for REB review of clinical research studies	Percent of complete REB new study applications reviewed within 5 weeks	84.9%	93.0%	82.2%	81.0%	85.2%	85.3%	85.0%			
			Percentage of studies at zero accrual	Percent of UHN REB approved studies that reported zero patient recruitment in the first year	15.0%	13.6%	13.9%	21.1%	24.8%	18.1%	13.5%			
	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	Financial Results	Excess of revenue over expenses (same definition as in the audited Financial Statements)	N/A	\$1.7M	\$1.6M	\$5.4M	\$19.4M	\$28.1M	\$12.0M		
				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 electronically / Total number of physician notes completed (electronically and dictated)	7.2%	7.9%	8.0%	7.2%	Data Not Reliable		10.0%
						Percent of discharge summaries completed within 7 days of discharge	Percent of discharge summaries completed within 7 days of inpatient discharge	81.2%	82.2%	84.1%	83.9%	85.2%	83.8%	85%
Percent of OR/Procedure notes completed within 7 days of discharge						Percent OR/procedure notes completed within 7 days of the operation or procedure	84.0%	90.1%	88.9%	91.1%	90.3%	90.1%	95%	
ACADEMIC	Deliver exceptional education at all levels to enable the success of tomorrow's healthcare leaders	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 (2010/11)				4.42	4.42	4.46			
			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.	4.24 (2010/11)				4.20	4.20	4.21			
			U of T Nursing students' overall satisfaction with their clinical placements at UHN	U of T Nursing students' overall satisfaction with their clinical placements at UHN. Score is out of 5 points.	4.58 (2010/11)				4.52	4.52	4.60			
		Continue to pioneer new models of teaching and learning	Increase the number of UHN health professionals trained and certified in interprofessional education	Total # of IPE learning activities	Number of University of Toronto endorsed IPE learning activities (e.g. structured IPE placements, IPE electives, etc.)	14.0				26.0	26.0	15.0		