UHN 2007/08 Balanced Scorecard - Q2 Results

Domain Goal		Desired Outcome	Objective	Indicator	Baseline Value (where we were) Fiscal 06/07 unless	, , , , , , , , , , , , , , , , , , , ,			Target (where we hope to reach) March 31, 2008
	.	We are a caring, creative, and accountable academic hospital, transforming healthcare for our patients, our community and the world. Percentage EOS organizational commitment Percentage EOS organizational commitment Percentage EOS organizational commitment							
that we	deliver on our strategies	UHN is the workplace of	Increase employee engagement	score	58.4%	Collected Annually			60.5% (2% increase)
		choice in healthcare	Reduce voluntary turnover	Percentage voluntary full-time and part-time turnover (12 month rolling average)	5.4%	5.3%	5.3%	5.3%	5.3%
		Competent, qualified, and engaged staff	Enhance management and physician leadership capability	Number participants in clinical manager succession program(s)	N/A	20	20	20	15
				Percentage participation in PES discussions	51.8% non-union 16.3% union (05/06)	Collected Annually		80% non-union; 30% union	
		Optimal human resource utilization	Ensure adequate/appropriate staffing	Percentage overtime hours (12 month rolling average)	1.50%	1.50%	1.50%	1.50%	1.35%
Fnsure				Average number of sick-time hours per employee (12 month rolling average)	55.1	54.3	54.0	54.0	58
		Reduce UHN's morbidity and mortality rates	Eliminate hospital-acquired infection rates	UHN's unadjusted mortality rate	42.4 per 1000	36.3	38.4	37.3	41.2 per 1000
	Deliver safe, patient-centred care in an integrated care delivery environment			Surgical Site Infection rate (TGH), representative case category (CABG)	1.71 per 100 procedures	0.74	2.69	1.62	3.39 per 100
				Surgical Site Infection rate (TWH), representative case category (Hips&Knees)	0.56 per 100 procedures	0.00	0.00	0.00	0.86 per 100
				Ventilator Associated Pneumonia (VAP) - bundle compliance rate	58.0% (Sep '06 - Mar '07)	40.7%	58.9%	50.0%	95%
				Central Line Infection (CLI) - related primary bloodstream infection rate per 1000 central line days	TBD	Not Yet Available		0	
				MRSA	5.3 per 10,000 pt. days	3.4	4.5	3.9	4.7 (10% reduction)
Caring				VRE	5.1 per 10,000 pt. days	2	0.6	1.3	4.6 (10% reduction)
				C.Difficile	5.7 per 10,000 pt. days	4.6	5.1	4.8	5.1 (10% reduction)
			Reduce prevalence and eliminate incidence of hospital-acquired pressure ulcers	UHN wound care team incidence bi-annual reviews	8.7%	Not Available 12.1 (Nov)		7.7% (1% reduction)	
			Eliminate severe and critical medication error incidents	Annual severe and critical medication error incidents	51 (05/06)	7	5	12	46 (9% reduction/ maintain)
		Improved access and patient satisfaction	Improve patient satisfaction scores	Inpatient satisfaction	78.6% (UHN methodology)	76.6%	78.6% (Jul)	76.6% (Q1)	80.2% (2% increase)
			Reduce wait-time (avg. hours wait) for patients admitted in ED		58.9%	53.9%	55.2%	54.6%	90% within 8 hours for CTAS 1 and 2 patients
				Percentage of patients admitted or discharged within CTAS-stratified benchmarks	58.7%	56.8%	58.2%	57.5%	90% within 6 hours for CTAS 3 patients
					66.7%	67.6%	69.9%	68.8%	90% within 4 hours for CTAS 4 and 5 patients
			Reduce OR cancellations	Percentage of surgical cancellation within 48 hours	8.8%	9.0%	10.4%	9.7%	8.4% (5% reduction)
		Optimum flow of patients throughout the continuum of care	Improve flow of patients across the healthcare continuum	Average number of ALC days per ALC patient	12.1	11.6 (May)	16.1	14.1	10.9 (10% reduction)

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Domain	Goal	Desired Outcome	Objective We are a caring, creative, and ac	Indicator countable academic hospital, transforming healthcar	Baseline Value (where we were) Fiscal 06/07 unless	Quarter Results (our current results) Q1 (Apr-Jun) Q2 (Jul-Sep) YTD Q2 unity and the world.		Target (where we hope to reach) March 31, 2008	
	Demonstrate research impact and enhance patient care	Financially sustainable	Balance the research budget	Research budget variance	0	\$(1,032)K	\$(922K)	\$(922K)	0
		research enterprise	Increase commercialization	Number of disclosures	63	Collected Annually		66 (5% increase)	
		UHN is the premier research hospital in Canada	Increase the number of citations from UHN research	Number of citations (three years rolling average) from 2004 to 2006 paper (as of July '07)	36,331 (2003 to 2005)	37,280 (as of July 2007; based of year)		d on academic	36,720 - 37,080 (2%-3% increase)
0		UHN is the leader in research	Increase the number of new clinical trials approved at UHN	Number of new clinical trials approved	264	Collected Annually			269 (2% increase)
		for clinical practice and care delivery	Translate research into clinical practice	Initiatives still under development: GTx, PMCC, Palliative Care, Nursing 80/20	Not Available				
villity	riscai responsibility	Increased capital and core research budget to facilitate investments for innovation	Increase revenue from new and existing non-MOH sources	Annual non-MOH revenues	\$418.6 M	\$99.9 M	\$103.5 M	\$203.5	\$422.8 M (1% growth)
	aı resp	Balanced budget and achievement of accountability measures	Balance operating budget	UHN cost per weighted case according to JPPC	\$5,885 (05/06)	\$6,538 (06/07)		\$6,630 (06/07)	
Accountable	of UHN's commitment to		Achieve accountability agreement financial measures and volumes	Priority Programs, Wait Times and Hospital Accountability Agreement - volumes and financial measures	Accountability Dashboard Indicators				
			Improve energy use index Energy use index adjusted for weather and technology per square metre		2.54 GJ/m2 Weather Adjusted Baseline	0.581 (0.565 baseline)	0.408 (Aug) (0.395 baseline)	0.989 (Aug) (0.960 baseline)	2.52 GJ/m2 (1% decrease to be adjusted for weather)
		Leader in clinical, administrative and information integration in Ontario	Ensure patient information is available in a timely	Discharge summary	80.8%	78.3%	80.4%	79.4%	90%
			fashion	Operative notes	94.1%	92.9%	93.6%	93.3%	90%
Č	Keall		Formalize "preferred partner" status with one rehab hospital and one CCC facility	Average number of GIM inpatient transfers per month	138	127.0	127.7	127.3	NA
	ational profile in education	Lancas Election Occasion	Maintain number of health professional trainees throughout UHN	Number of health professional trainees	3,219 (2006)	Collected Annually		3,100	
		Increase Education Capacity	Increase continuing education activities	Number of "UHN hosted" continuing education events per academic year	47 (2006)	Collected Annually		52 (10% increase)	
		Increase UHN's education impact on trainees and improve trainee satisfaction with their UHN experience		Choice of teaching site for rotating medical residents.	77% UHN divisions in top 2 choices	77% UHN divisions in top 2 choices		85% UHN divisions in top 2 choices	
			Improve indicators of satisfaction with UHN medical and surgical training, nursing training, pharmacy training and allied health training	Rating of teaching and rotation effectiveness by postgraduate medical trainees	RES 4.03, TES 4.37 (05/06)	Collected Annually		RES 4.1, TES 4.4	
			, , ,	Nursing student satisfaction with rotation/placement	NA	Collected Annually		75%	
		Increase the educational scholarship	Increase education grants and publications	Number of peer reviewed education grants per calendar year	107 (2006)	Collected Annually		112 (5% increase)	
	Enhance		Increase education trainees at UHN	Number of education research fellows trained per academic year	15 (2006)	Collected Annually		17	
		Increase interprofessional education (IPE) awareness and activities	Increase knowledge and understanding of IPE among all UHN staff	Number of clinical staff obtaining IPE certification per year	15 (2006)	Collected Annually		25	

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University Health Network Hospital Accountability Agreement (HAA) Indicators Q2 2007/08 Results

		YTD Actual (Q2)	YTD Target (Q2)	Variance	HAA Target* 07-08	HAA Range*				
2007/08 Global Volumes and Performance Indicators										
Total Weighted Cases	ſ	35,813	34,311	1,502	68,622	66,563 - 70,681				
Mental Health Patient Days		5,149	4,990	160	9,979	> 8,981				
Emergency Visits		37,906	35,037	2,869	70,074	> 65,169				
Ambulatory Care Visits		420,657	389,626	31,032	779,251	> 732,496				
Rate of Readmission for Selected CMGs		343 (YTD Apr)	406	(63)	406	< 450.97				
Percent Full-time Nurses	ſ	85.0%	81.0	0.03	81.0%	> 80.0%				
Current Ratio		0.78	0.46	0.32	0.46	0.41 - 0.50				
Total Margin		0.82%	0.00	0.82%	0.0	0.0				
2007/08 Critical Care Funding										
% Beds Open to Criticall as Scheduled	TGH	46.7%	100.0%	-53.3%	100.0%	1				
, a 2000 open to entire at 2011000100	TWH	83.3%	100.0%	-16.7%	100.0%					
2007/08 Protected Services										
Selected Cardiac Services Procedures	ſ	5,903	6,307	(404)	12,613	1				
Chronic Kidney Disease (weighted units)	ľ	70,708	76,515	(5,807)	153,029	1				
Organ Transplantation (cases)		201	220	(19)	439	1				
Cardiac Rehabilitation (# of patients)		150	200	(50)	400	1				
Visudyne Therapy (# of vials)		436	901	(465)	1,802					
2007/08 Wait Time Services										
	r				Base + Incremental	7				
Hip and Knee Joint Replacements	ļ	490	621	(131)	1,241	1				
Magnetic Resonance Imaging (Hrs)	,	15,556	12,844	2,712	25,688	1				
Computerized Axial Tomography (Hrs)	Ĺ	9,482	14,271	(4,789)	28,541	j				
2007/08 Cancer Care Ontario Funded										
Base + Incremental										
Radiation Therapy	,	4,650	4,800	(150)	9,600	1				
Systemic Therapy	,	2,805	2,745	61	5,489	4				
Surgical Oncology		1246 (YTD July)	1,977	(731)	3,954]				