UHN 2007/08 Balanced Scorecard - Q3 Results

Domain Goal		Desired Outcome	Objective	Indicator	Baseline Value		Quarter	Target		
					(where we were) Fiscal 06/07 unless	Q1 (Apr-Jun)		ent results) Q3 (Oct-Dec)	YTD Q3	(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.										
We we have the best people to	ple to	UHN is the workplace of	Increase employee engagement	Percentage EOS organizational commitment score	58.4%	Collected Annually				60.5% (2% increase)
	st peo gies	choice in healthcare	Reduce voluntary turnover	Percentage voluntary full-time and part-time turnover (12 month rolling average)	5.4%	5.3%	5.3%	5.4%	5.4%	5.3%
	the str	Competent, qualified, and engaged staff	Enhance management and physician leadership capability	Number participants in clinical manager succession program(s)	N/A	20	20	20	20	15
	ve have r on ou			Percentage participation in PES discussions	51.8% non-union 16.3% union (05/06)	Collected Annually			80% non-union; 30% union	
	that deliv	Optimal human resource utilization	Ensure adequate/appropriate staffing	Percentage overtime hours (12 month rolling average)	1.50%	1.50%	1.49%	1.48%	1.49%	1.35%
ı	Ensure			Average number of sick-time hours per employee (12 month rolling average)	55.1	54.3	54.0	53.6	53.6	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	41.9	38.8	41.2 per 1000
				Surgical Site Infection rate (TGH), representative case category (CABG)	1.71 per 100 procedures	0.74	2.69	1.67	1.63	3.39 per 100
	d care delivery environment			Surgical Site Infection rate (TWH), representative case category (Hips&Knees)	0.56 per 100 procedures	0.00	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%	53.8	53.3%	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	5.9	4.6	4.7 (10% reduction)
	atec			VRE	5.1 per 10,000 pt. days	2.0	0.6	3.0	1.9	4.6 (10% reduction)
	tegr			C.Difficile	5.7 per 10,000 pt. days	4.7	5.3	4.2	4.9	5.1 (10% reduction)
Caring	in an integrated		Reduce prevalence and eliminate incidence of hospital-acquired pressure ulcers	UHN wound care team incidence bi-annual reviews	8.7%	Not Av	ailable	12.1% (Nov)	12.1% (Nov)	7.7% (1% reduction)
	Deliver safe, patient-centred care in		Eliminate severe and critical medication error incidents	Annual severe and critical medication error incidents	51 (05/06)	7	6	5	18	46 (9% reduction/ maintain)
		Improved access and patient satisfaction	Improve patient satisfaction scores	Inpatient satisfaction	78.6% (UHN methodology)	76.4%	77.3%	Not yet available	76.8% (Q2)	80.2% (2% increase)
			Reduce wait-time (avg. hours wait) for patients admitted in ED	Percentage of patients admitted or discharged within CTAS-stratified benchmarks	58.9%	53.9%	55.2%	57.1%	54.6%	90% within 8 hours for CTAS 1 and 2 patients
•					58.7%	56.8%	58.2%	58.2	57.5%	90% within 6 hours for CTAS 3 patients
					66.7%	67.6%	69.9%	70.7%	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%	9.3%	9.6%	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	14.3	16.1	11.5	13.2	10.9 (10% reduction)

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ain					Baseline Value		Quarter Results			Target
й С	oal	Desired Outcome	Objective	Indicator	(where we were) Fiscal 06/07 unless	Q1 (Apr-Jun)		ent results) Q3 (Oct-Dec)	YTD Q3	(where we hope to reach) March 31, 2008
			We are a caring, creative	e, and accountable academic hospital, transforming	healthcare for our patients, ou	r community and	the world.			
impact	enhance patient	Financially sustainable research enterprise	Balance the research budget	Research budget variance	0	\$(1,032)K	\$(922K)	\$(1,236K)	\$(1,236K)	0
			Increase commercialization	Number of disclosures	64		Collected Annually			66 (5% increase)
Creative		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 on academic year)				36,720 - 37,080 (2%-3% increase)
Onstra		UHN is the leader in research for clinical practice and care delivery	Increase the number of new clinical trials approved at UHN	Number of new clinical trials approved	264	264 Collected Annually			269 (2% increase)	
Dem			Translate research into clinical practice	Initiatives still under development: GTx, PMCC, Palliative Care, Nursing 80/20	Not Available					
fiscal 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	\$98.5 M	\$301.9 M	\$422.8 M (1% growth)
al rest		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)
2	of UHN's commitment to and innovation		Achieve accountability agreement financial measures and volumes	Priority Programs, Wait Times and Hospital Accountability Agreement - volumes and financial measures	Accountability Dashboard Indicators					
Accountable s commitment			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)	0.595 (0.585 baseline)	0.674 (0.648 basline)	1.850 1.798 (baseline)	2.52 GJ/m2 (1% decrease to be adjusted for weather)
NHO J		Leader in clinical, administrative and information integration in Ontario	Ensure patient information is available in a timely fashion	Discharge summary	80.8%	78.3%	80.4%	81.4%	79.4%	90%
zation o				Operative notes	94.1%	92.9%	93.6%	92.8%	93.3%	90%
Reali			Formalize "preferred partner" status with one rehab hospital and one CCC facility	Average number of GIM inpatient transfers per month	138	126	127	122	125	NA
		Increase Education Capacity	Maintain number of health professional trainees throughout UHN	Number of health professional trainees	3,219 (2006)	Collected Annually			3,100	
,	ofile in education		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	85% UHN divisions in top 2 choices			
mic			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	
Academic				Nursing student satisfaction with rotation/placement	90% (2006)	Collected Annually				92%
		Increase the educational scholarship	Increase education grants and publications	Number of peer reviewed education grants per calendar year	107 (2006)	Collected Annually Collected Annually			112 (5% increase)	
			Increase education trainees at UHN	Number of education research fellows trained per academic year	15 (2006)				17	
	7	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)	16 (2007)			25	

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University Health Network Hospital Accountability Agreement (HAA) Indicators Q3 2007/08 Results

	YTD Actual (Q3)	YTD Target (Q3)	Variance	HAA Target* 07-08	HAA Range*					
2007/08 Global Volumes and Performance Indicators										
Total Weighted Cases	47,777 (Nov)	45,748	2,029	68,622	66,563 - 70,681					
Mental Health Patient Days	7,617	7,484	133	9,979	> 8,981					
Emergency Visits	56,272	52,556	3,717	70,074	> 65,169					
Ambulatory Care Visits	631,571	584,438	47,133	779,251	> 732,496					
Rate of Readmission for Selected CMGs	506 (Oct)	406	100	406	< 450.97					
Percent Full-time Nurses	85.3%	81.0%	4.3%	81.0%	> 80.0%					
Current Ratio	0.79	0.46	0.33	0.46	0.41 - 0.50					
Total Margin	1.19%	0.00%	1.19%	0.0	0.0					
2007/08 Critical Care Funding										
% Beds Open to Criticall as Scheduled TG	H 40.0%	100.0%	-60.0%	100.0%]					
TW.	H 88.6%	100.0%	-11.4%	100.0%						
2007/08 Protected Services	2007/08 Protected Services									
Selected Cardiac Services Procedures	8,795	9,460	(665)	12,613]					
Chronic Kidney Disease (weighted units)	104,178	114,772	(10,594)	153,029						
Organ Transplantation (cases)	299	329	(30)	439						
Cardiac Rehabilitation (# of patients)	205	300	(95)	400						
Visudyne Therapy (# of vials)	521	1,352	(831)	1,802]					
2007/08 Wait Time Services										
				Base + Incremental	,					
Hip and Knee Joint Replacements	757	931	(174)	1,241						
Magnetic Resonance Imaging (Hrs)	23,464	19,748	3,717	25,688						
Computerized Axial Tomography (Hrs)	13,599	21,406	(7,807)	28,541]					
2007/08 Cancer Care Ontario Funded										
Base + Incremental										
Radiation Therapy	6,981	7,200	(219)	9,600						
Systemic Therapy	4,205	4,117	88	5,489						
Surgical Oncology	2259 (Oct)	2,307	(48)	3,954	<u> </u>					