

SOUTH HURON HOSPITAL ASSOCIATION BALANCED CORPORATE SCORECARD - 2015/2016

Mission: Your healthcare partner, close to home; Vision: Promotion of Health...Prevention of Disease...Provision of Care; Values: Integrity, Collaboration, Accountability, Respect, Ethical

AIM	MEASURE	CHANGE
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Strategic Direction: *Clinical Service Profile and Role* : Determine the appropriate service profile for SHHA within the SW LHIN health care environment and its future

Strategic Goal	Objective	Outcome Measure/Indicator	Quarterly Target *	2013/2014 Q4	Q1	Q2	Q3	Q4
Community & Growth	Improve Access to Care	Percentage of Social Worker Attendance Days for Inpatient Unit	>75%	82%	82%			
		Visits of Laboratory Outpatients	950-1100	774	924	964		
	Build and foster strong relationships through Public Relations and Partnerships	Number of community speaking engagements through Speakers Bureau	>3	4	0			

Strategic Direction: *Organizational Infrastructure and Effectiveness* : Determine area of priority to maximize administrative efficiencies

Strategic Goal	Objective	Outcome Measure/Indicator	Quarterly Target *	2013/2014 Q4	Q1	Q2	Q3	Q4	
Clinical Effectiveness	Maintain Consistent Total Acute Weighted Inpatient Days	Weighted Days	133-180	158.9307	161.9163	162.1831			
	Maintain Consistent Rehabilitation Weighted Inpatient Cases	Weighted Cases	7-12	N/A	13.7405	10.14			
	Improve Access to Inpatient Rehabilitative Services	Number of Inpatient Rehabilitation for Primary Unilateral Hip Replacement		3/YR	0	1	1		
		Number of Inpatient Rehabilitation for Primary Unilateral Knee Replacement		1/YR	1	0	0		
	Reduce unnecessary hospital readmission to same facility with the same/related diagnosis	Percentage of Unplanned Readmissions Within 1 Week with same/related diagnosis		<1%	1.80%	0.01%	0.58%		
	Improve Inpatient (DAD) Data Quality	Percentage of Complete Medical Records		100%	100.00%	98.00%	98.84%		
	Reduce unnecessary costs	Number of times private transport service is used to transport Emergency and Inpatients for CT scans		<29	34	30			
	Reduce unnecessary time spent in hospital care	Percentage of Acute Alternate Level of Care (ALC) Days		<4.46%	12.19%	11.70%	13.79%		
People & Learning	Improve Organizational Health	Percentage of Full and Part time Staff Overtime (UPP staff only)	<0.88%	1.72%	3.52%				
		WSIB NEER Performance Index	<1.00	1.28	0.15				

A Green Performance Flag indicates performance meets the Performance Target.

* Targets established when HAPS approved

A Yellow Performance Flag indicates performance is within 2% of meeting the Performance target

A Red Performance Flag indicates performance is more than 2% off the Performance target