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CPAs and Consultants

SCORECARDING TO IMPROVE PERFORMANCE

Westfields Hospital
Part of the HealthPartners Family of Care

Better results through better focus and accountability



June 7, 2007
9:15 a.m. – 10:45 p.m.

Mary Beth Fitzgerald, RN, CRRN, MHA: Westfields Hospital
Michael T. Pynch, CMA, CPA: Wipfli LLP

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Learning Objectives

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- Leadership teams can use performance measurement systems to be more effective.
- Scorecarding can help management and staff understand how their “job” relates to the organization’s vision.
- Choosing measures that fit your organization’s strategies is critical.
- Scorecarding is important, where big benefits come from aligning departments/functions.



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Agenda

Westfields Hospital
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- Background on Westfields
- Business case for change
- Implementation of the Balanced Scorecard
- Cascading
- Challenges Encountered
- Benefits Realized
- Tips for others...
- Questions





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New Richmond, WI – Pop. ~8,000

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Note: New Richmond, WI is only 40 miles from Minneapolis/St. Paul metropolitan area with a population of 3 Million.

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Our Facility

Westfields Hospital
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Westfields is a 25 bed critical access hospital with OB services. We offer primary, acute and emergent care along with medical and surgical services. Many of the services we provide are listed below:

| | |
|--------------------------|---|
| ❖ Aesthetic laser clinic | ❖ Pediatrics |
| ❖ Ambulatory care | ❖ Physical Therapy |
| ❖ Audiology | ❖ Podiatry |
| ❖ Bone Density | ❖ Pulmonary Functions |
| ❖ Cardiac Rehab | ❖ Pulmonary |
| ❖ Cardiology | ❖ Sleep Studies |
| ❖ Family Practice | ❖ Speech Language Pathology |
| ❖ Gastroenterology | ❖ Spinal Disease, injuries, deformities |
| ❖ Gynecology | ❖ Surgery |
| ❖ Internal Medicine | ❖ Urology |
| ❖ Mammography | ❖ Women’s Health |
| ❖ Occupational Therapy | ❖ Laboratory Services |
| ❖ Oncology / Hematology | ❖ Complete Imaging Service |
| ❖ Orthopedics | |

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History of Holy Family/Westfields

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- An idea within the community.
- Holy Family Hospital (1950)
- Sisters of St. Joseph (1986)
- Health Partners Family (2006)
 - Health Insurance
 - Hospitals (Regions and Westfields)
 - Physician groups

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WIPFLI CPAs and Consultants **Situation 2005-2006** Westfields Hospital Part of the HealthPartners Family of Care


- Had a vision to improve
- Had a strategic plan...sat on shelf
- Not everyone understood the vision/plan
- Strong financially
- Stable leadership team...no formal system
- Data not collected and reported
- Board was very financially focused



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WIPFLI CPAs and Consultants **Rationale for Change** Westfields Hospital Part of the HealthPartners Family of Care


- Needed to be more strategically focused
- Needed more accountability
- Needed more formality/consistency
- Needed guidance
- Wisconsin Office of Rural Health



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WIPFLI CPAs and Consultants **Wipfli LLP** Westfields Hospital Part of the HealthPartners Family of Care


- 700+ person professional services firm headquartered in Wisconsin.
- Strong reputation for accounting and consulting in healthcare industry.
- Track record implementing scorecards and improving performance at other CAHs.
- Balanced team with proven approach.



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WIPFLI CPAs and Consultants **Question** Westfields Hospital Part of the HealthPartners Family of Care

How many use scorecarding in some manner to measure performance?



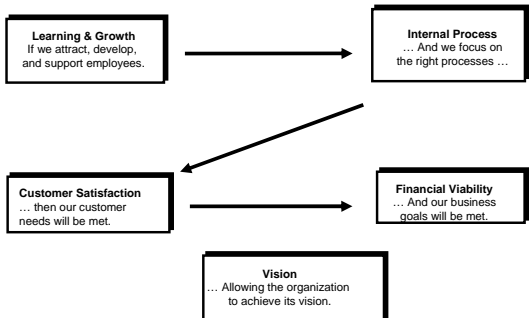
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WIPFLI CPAs and Consultants **What Is a Balanced Scorecard?** Westfields Hospital Part of the HealthPartners Family of Care

*Framework/Process that **links** strategies and outcomes and **translates mission & strategy** into a comprehensive set of **performance measures, initiatives, and strategically aligned objectives.***

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WIPFLI CPAs and Consultants **Balanced Scorecard Framework** Westfields Hospital Part of the HealthPartners Family of Care



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    graph TD
      LG[Learning & Growth  
If we attract, develop,  
and support employees.] --> IP[Internal Process  
... And we focus on  
the right processes ...]
      CS[Customer Satisfaction  
... then our customer  
needs will be met.] --> FV[Financial Viability  
... And our business  
goals will be met.]
      LG --> CS
      IP --> FV
      V[Vision  
... Allowing the organization  
to achieve its vision.]
  
```

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WIPFLI CPAs and Consultants **Why Pursue a BSC?** Westfields Hospital Part of the HealthPartners Family of Care

- Strategic Plan
- Management Focus
- Board Interaction
- Communication with Staff and Physicians (or Patients and the Community!)
- Performance Improvement and Accountability

Culture Change!

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WIPFLI CPAs and Consultants **Performance Management** Westfields Hospital Part of the HealthPartners Family of Care

| Level I | Level II | Level III | Level IV |
|-----------------------------|-----------------|---------------------|-----------|
| Mission, Vision, and Values | Benchmarking | Scorecard Cascading | Lean |
| Strategic Positioning | Scorecarding | Rounding | Six Sigma |
| Strategic Planning | Action Planning | Reengineering | Baldrige |
| Strategy Mapping | | Constraint Analysis | |

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WIPFLI CPAs and Consultants **Knowledge Building** Westfields Hospital Part of the HealthPartners Family of Care


- Self-assessment for readiness
- Predictive Index performed
- Analyzed relevant strategic information



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WIPFLI CPAs and Consultants **Strategy Mapping** Westfields Hospital Part of the HealthPartners Family of Care

- Developed a Strategy Map
- Linked strategies
- Tested cause and effect linkages
- Tailored it to Holy Family/Westfields



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WIPFLI CPAs and Consultants **Data Drives Decision Making** Westfields Hospital Part of the HealthPartners Family of Care

WYMIWYG

WYMIWYG = What you measure is what you get!

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WIPFLI CPAs and Consultants **Knowledge Building** Westfields Hospital Part of the HealthPartners Family of Care

Growth
To be the progressive, high quality health care center of choice in Western Wisconsin recognized for our services, staff and clinical capabilities.

Service
(HFH will deliver the value proposition required by its unique customers)

- Exceed Provider Expectations
- Exceed Patient Expectations
- Be Top-of-Mind In the Communities We Serve

Quality
(HFH will excel at its core processes to satisfy its customers)

- Enhance and Expand Clinical Services
- Measure and Manage Activities And Outcomes
- Pursue Service Excellence
- Continuously Improve Quality and Safety
- Collaborate with Providers to Implement Best Practices
- Improve Community Health

People
(The investments HFH make will position it for future success)

- Recruit, Develop, and Retain Best People
- Become the Workplace of Choice •Empowerment Environment
- Assist with Recruitment and Retention of Providers
- Provide Appropriate Tools and Facilities


Financial
(HFH will provide value to the communities it serves and maintain financial strength to continue to invest for the future)

- Grow the Business
- Effectively Use Our Resources
- Increase Community Contributions

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WIPFLI CPAs and Consultants **Developing the Scorecard** Westfields Hospital Part of the HealthPartners Family of Care

- Identified easy measures
- Collected data for trending
- Developed a visual tool to report results
- Created a detailed action plan
- Scheduled regular leadership meetings



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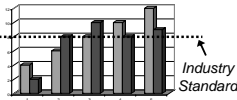

WIPFLI CPAs and Consultants **Link to the Measure** Westfields Hospital Part of the HealthPartners Family of Care

| STRATEGIC OBJECTIVE | MEASURE |
|--|----------------------------------|
| Be Top-of-Mind In the Communities We Serve | Market Share |
| Measure and Manage Activities And Outcomes | Attendance at Manager Meetings |
| Become the Workplace of Choice •Empowerment •Environment | Culture Discussion at Mgmt. Mtg. |
| Effectively Use Our Resources | # of Days Revenue in AR |

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WIPFLI CPAs and Consultants **Benchmarking** Westfields Hospital Part of the HealthPartners Family of Care

- Compares your organization's performance with others in a similar operating and market environment.
- Identifies industry best practices.
- *Examples include:*
 - Financial indicators
 - Quality care standards
 - Satisfaction percentiles

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WIPFLI CPAs and Consultants **Set appropriate Targets/Alarms** Westfields Hospital Part of the HealthPartners Family of Care

| STRATEGIC OBJECTIVE | MEASURE | ALARM | TARGET |
|--|----------------------------------|-------|--------|
| Be Top-of-Mind In the Communities We Serve | Market Share | 50% | 60% |
| Measure and Manage Activities And Outcomes | Attendance at Manager Meetings | 85% | 100% |
| Become the Workplace of Choice •Empowerment •Environment | Culture Discussion at Mgmt. Mtg. | 0 | 1 |
| Effectively Use Our Resources | # of Days Revenue in AR | 70 | 55 |

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WIPFLI CPAs and Consultants **Action Planning** Westfields Hospital Part of the HealthPartners Family of Care

- Implementation of a strategic plan
- Mechanism for accountability
- Driver for change



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WIPFLI CPAs and Consultants **Set appropriate Targets/Alarms** Westfields Hospital Part of the HealthPartners Family of Care

| STRATEGIC OBJECTIVE | MEASURE | ALARM | TARGET | INITIATIVE |
|--|----------------------------------|-------|--------|--|
| Be Top-of-Mind In the Communities We Serve | Market Share | 50% | 60% | Formalize process and responsibility for data analysis |
| Measure and Manage Activities And Outcomes | Attendance at Manager Meetings | 85% | 100% | Train individuals and reinforce meeting effectiveness |
| Become the Workplace of Choice •Empowerment •Environment | Culture Discussion at Mgmt. Mtg. | 0 | 1 | Develop Culture Topics to Present at Monthly Meetings |
| Effectively Use Our Resources | # of Days Revenue in AR | 70 | 55 | TBD |

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WIPFLI CPAs and Consultants **Cascading** Westfields Hospital Part of the HealthPartners Family of Care

- Cascading is the process of creating scorecards (linked to the hospital scorecard) at lower levels of the organization.
- Cascading should begin once the high-level scorecard is running smoothly.



Note: Avoid overwhelming the organization – start with pilots or a limited cascaded scorecard.

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WIPFLI CPAs and Consultants **Cascading Example** Westfields Hospital Part of the HealthPartners Family of Care

| Level | Goal/Strategy |
|----------------------------|---|
| Organization-wide (System) | Goal: Achieve earnings growth of 10% annually and net revenue growth of 5% annually |
| Hospital (Business Unit) | Increase market share for general surgery |
| Marketing Department | Increase awareness of new general surgeon (by, e.g., community health symposiums) |

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WIPFLI CPAs and Consultants **Cascading Program** Westfields Hospital Part of the HealthPartners Family of Care

- Leadership Engagement and Direction
- Managers Engaged in Small Groups
- Identified a Champion
- Reinforced by placing on Monthly Agenda

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WIPFLI CPAs and Consultants **Improvement still required...** Westfields Hospital Part of the HealthPartners Family of Care

- Performed more formal strategic planning
- Refined message to be carried forward



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WIPFLI CPAs and Consultants **Continuous Improvement** Westfields Hospital Part of the HealthPartners Family of Care

- Scorecard had to evolve
- Updated Strategic Plan and made changes to the tools for better alignment
- Updated Tools
- Began a Bright Ideas program

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WIPFLI CPAs and Consultants **Continuous Improvement** Westfields Hospital Part of the HealthPartners Family of Care

Growth Our vision is to be the first choice for healthcare services in our area and to achieve that we must continue to partner with others, to improve the health of our patients and community by providing high quality health care which meets the needs of all people.

| | | | |
|--|---|--|--|
| Service (Deliver value to our unique patients) | Exceed our own expectations and those of our providers | Support the needs of our patients and make services accessible | Be our community's first choice for healthcare |
| Quality (Excel in the delivery of healthcare services) | Motivate team to continually improve quality and safety | Collaborate with our providers to implement best practices | Deliver advanced healthcare services in a seamless manner |
| People (Invest in our people to position them to be successful) | Recruit, develop, and retain the best people | Assist with recruiting and retaining key providers | Dedicate time to building strong relationships |
| Financial (Maintain financial strength to continue to invest for the future) | Make key technology and equipment available | Select the "right" services to deliver to the community | Invest in partnerships that extend or enhance our services |

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WIPFLI CPAs and Consultants **Westfields Hospital** Part of the HealthPartners Family of Care

Link to the Measure (Year 2)

| STRATEGIC OBJECTIVE | MEASURE |
|---|---|
| Exceed our own expectations and those of our providers | Number of areas meeting dimension of care targets |
| Motivate team to continually improve quality and safety | CMS Measures > WI Targets |
| Recruit, develop, and retain the best people | On-time Performance Evaluations |
| Make key technology and equipment available | Progress of new HIS |

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WIPFLI CPAs and Consultants **Westfields Hospital** Part of the HealthPartners Family of Care

Set Targets/Alarms (Year 2)

| STRATEGIC OBJECTIVE | MEASURE | ALARM | TARGET |
|---|---|--------|--------|
| Exceed our own expectations and those of our providers | Number of areas meeting dimension of care targets | 2 | 4 |
| Motivate team to continually improve quality and safety | CMS Measures > WI Targets | 20 | 30 |
| Recruit, develop, and retain the best people | On-time Performance Evaluations | 80% | 100% |
| Make key technology and equipment available | Progress of New HIS | Behind | On |

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WIPFLI CPAs and Consultants **Westfields Hospital** Part of the HealthPartners Family of Care

Set Targets/Alarms (Year 2)

| STRATEGIC OBJECTIVE | MEASURE | ALARM | TARGET |
|---|---|-------|--------|
| Be our community's first choice for healthcare | NRC Picker: Would you recommend? | 80% | 90% |
| Work with a passion to improve community health | Number of clinical departments that are involved in community health initiatives each month | 3 | 6 |
| Communicate our message to the community | Number of public messages | 10 | 15 |
| Increase our contribution to the community | Number of volunteer hours | 950 | 1250 |

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WIPFLI CPAs and Consultants **Westfields Hospital** Part of the HealthPartners Family of Care

Action

90 Day Plan

Quarter: _____

| PILLAR | OBJECTIVE (1-3) | HOW/ISSUE/OPPORTUNITY (Full sentence) | DESIRABLE MEASURABLE RESULT (Specific accomplishment by end of quarter) | RESPONSIBLE | DATE DUE | STATUS |
|-----------|-----------------|--|---|-------------|----------|--------|
| Growth | TBD | TBD | TBD | TBD | TBD | TBD |
| Service | 1 | To grow our services to better meet the needs of the communities we support. | Develop new or expand existing service lines. Increase specialty services by 8 hrs each quarter. | MaryBeth | 9/30/07 | WIP |
| Quality | 2 | To implement all of the national patient safety goals for 2007. | Number of national patient safety goals implemented. | MaryBeth | 9/30/07 | WIP |
| People | 2 | To have an organizational culture where staff finds purpose and satisfaction in their work and are committed to service excellence | Develop effective managers - Identify a leadership development program for all managers and provide support for them to implement new skills. | Chris | 5/31/07 | Done |
| Financial | 3 | To maintain viability and strength by optimizing technology. | Maximize use of information technology - work with the Valley co-op to purchase and HER. | Ted | TBD | WIP |

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WIPFLI CPAs and Consultants **Westfields Hospital** Part of the HealthPartners Family of Care

Cascading – Radiology

| SERVICE | Dimensions of Care - IP | 95% | 100% | Better informing patients of exam times and schedule |
|-----------|--|-----|------|--|
| QUALITY | % of Exams with good technical quality | 98% | 100% | Train for visual management to catch issue at source |
| PEOPLE | Recognition Lunches | 2 | 4 | Formalize and Improve Recognition Program |
| FINANCIAL | # of Film Retakes | 5% | 3% | Retake Analysis (Causes) |

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WIPFLI CPAs and Consultants **Westfields Hospital** Part of the HealthPartners Family of Care


Cascading – Lab

| SERVICE | Dimensions of Care - IP | 80% | 90% | Increase customer experience with increased satisfaction scores |
|-----------|--|-----|------|---|
| QUALITY | % of Draws Successful on First Attempt | 95% | 100% | Train on venipuncture technique |
| PEOPLE | # of Attendees at Department Meeting | 75% | 100% | Improve meeting effectiveness |
| FINANCIAL | # of Overtime Hours | 5 | 0 | Staff Cross-training |

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WIPFLi CPAs and Consultants **BSC Challenges Part I** Westfields Hospital[®] Part of the HealthPartners Family of Care


- Understanding how it fits together
- How to capture all the information
- How to determine the correct metrics and gather data
- Teamwork due to silos that existed
- Management model had to change...one person had to really keep the model flowing
- Cascading...getting the buy-in
- Monthly maintenance to improve accountability



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WIPFLi CPAs and Consultants **BSC Challenges Part II** Westfields Hospital[®] Part of the HealthPartners Family of Care

- Too many measures (High Level and Cascading)
- Too involved in the mechanics
- Struggling with Microsoft Excel
- Viewed as “project of the month”
- Healthcare culture...wait it out
- Managers understanding their part



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WIPFLi CPAs and Consultants **BSC Starts to Click** Westfields Hospital[®] Part of the HealthPartners Family of Care

- Determined that BSC is really just about getting things done.
- Set aside time every two weeks to keep up the momentum...stay on task
- Wipfli kept things “top of mind”
- Administrator’s buy-in and belief in the value
- Examples of success: Decline in Overtime and increased use of namebands in Med Surg.

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WIPFLi CPAs and Consultants **Success Factors** Westfields Hospital[®] Part of the HealthPartners Family of Care

- Teamwork at Sr. Level is greatly improved
- Keeps people accountable to themselves
- Makes others aware of results
- Increases strategic discussions
- Helps prioritize suggestions/resources



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WIPFLi CPAs and Consultants **What did BSC do for us?** Westfields Hospital[®] Part of the HealthPartners Family of Care

Did the BSC process save Westfields \$\$\$?
By providing a vision and process to attain the vision - perhaps some of the “fruitless” projects were not started.

Did it raise awareness of quality standards?
As you start to measure - you begin to increase quality.

Did it raise patient satisfaction?
Increased focus on patient satisfaction and triggered key initiatives to keep “top of mind”.

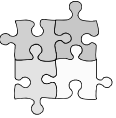
Did it raise employee satisfaction?
Empowering departments to decide what they need to focus on allows employees to feel part of the team and enjoy their jobs more.

Did this improve board engagement?
The board now understands the scorecard and makes suggestions on ways to improve service and quality.

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WIPFLi CPAs and Consultants **What’s next for Westfields** Westfields Hospital[®] Part of the HealthPartners Family of Care

- Evaluating an employee rounding program to enhance the scorecarding acceptance and usage.
- Evaluating a quarterly leadership institute program to engage and develop leaders.





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How may we assist you?


Questions
?



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On behalf of Westfields/Wipfli


Thank you!



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| SAMPLE SCORECARD 2 | | | | | | |
|--|--------|----|----|----|----|-----|
| QUALITY | | | | | | |
| Performance Indicator | Target | Q1 | Q2 | Q3 | Q4 | YTD |
| Publicly Reported Performance Measures: | | | | | | |
| Pneumonia: % of pts meeting all criteria | | | | | | |
| Pneumonia - time to antibiotic (% < 4 hours) | | | | | | |
| Pneumonia - pneumococcal vaccination | | | | | | |
| Congestive Heart Failure: % of pts meeting all criteria | | | | | | |
| CHF: Complete discharge instructions | | | | | | |
| Acute Myocardial Infarction: % of pts meeting all criteria | | | | | | |
| Acute MI - % of pts receiving aspirin upon admission | | | | | | |
| Acute MI - PTCI (% < 2 hours) | | | | | | |
| Surgical Site Infection Prevention: | | | | | | |
| Surgical Site Infection Rate | | | | | | |
| Surgical Infection Prevention: antibiotics w/I 1 hr of incision | | | | | | |
| % of pts whose prophylactic antibiotics are discontinued within 24 hrs | | | | | | |
| Patient Safety: | | | | | | |
| Patient Falls | | | | | | |
| Medication Reconciliation: % completed at admission | | | | | | |
| Universal Practice of Team Pause | | | | | | |
| Infection Control/Prevention: | | | | | | |
| Handwashing: reported observations | | | | | | |
| Nosocomial blood stream infections r/t central lines: CCU | | | | | | |
| Hospital Mortality Rate | | | | | | |
| Vaginal Delivery (rate of 3rd & 4th degree laceration) | | | | | | |
| SERVICE | | | | | | |
| Performance Indicator | Target | Q1 | Q2 | Q3 | Q4 | YTD |
| Patient Satisfaction Scores - Inpatient/Emergency/Outpatient | | | | | | |
| Physician Satisfaction: YTD Overall/Surgery Mean Score | | | | | | |
| COST | | | | | | |
| Performance Indicator | Target | Q1 | Q2 | Q3 | Q4 | YTD |
| Length of Stay (medical, surgical) | | | | | | |
| Collections - % of cash | | | | | | |
| Staff Productivity - % of paid hours | | | | | | |
| Lost Revenues "left w/o being seen" - ER | | | | | | |
| Labor/ Benefits % of Net Revenue | | | | | | |
| Supplies % of Net Revenue | | | | | | |
| Operating Margin | | | | | | |
| A/R Days | | | | | | |
| PEOPLE | | | | | | |
| Performance Indicator | Target | Q1 | Q2 | Q3 | Q4 | YTD |
| RN Turnover Rate (hospital wide) | | | | | | |
| Hospital Staff Turnover Rate | | | | | | |
| Agency Expense | | | | | | |
| Overtime - % of productive hours | | | | | | |
| GROWTH | | | | | | |
| Performance Indicator | Target | Q1 | Q2 | Q3 | Q4 | YTD |
| Market Share Growth (inc in managed care revenue) as % of total rev | | | | | | |
| Market Share | | | | | | |
| Inpatient Admissions (actual/budget) | | | | | | |
| Outpatient Visits (actual/budget) | | | | | | |
| Surgical Cases (actual/budget) | | | | | | |
| Cath Lab Procedures (actual/budget) | | | | | | |
| Radiology MRI/CT Procedures (annual) | | | | | | |
| Neurosurgical Cases (Brain & Spine Institute) | | | | | | |
| CONGRUENCY | | | | | | |
| Performance Indicator | Target | Q1 | Q2 | Q3 | Q4 | YTD |
| FY 2007 Standards That Meet Level 5 (at year end) | | | | | | |
| Attendance at Renewal Day | | | | | | |
| Community Service Hours/Quarter | | | | | | |
| Number of Annual Personal Growth Plans/Goals | | | | | | |

2007 Scorecard – Sample Department

Sample Hospital

■ Beyond Expected
 ■ Expected
 ■ Worse Than Expected
 Not Completed

CUSTOMER: Increase the number of patients / residents that utilize us for nutrition related wellness offerings.

| Jan | Feb | Mar | Apr | May | Jun | Jul | Aug | Sep | Oct | Nov | Dec | Indicator | Target | Alarm |
|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|--|--------|-------|
| 6 | 12 | 14 | 15 | | | | | | | | | Number of participants that attend nutrition wellness related offerings quarterly. | 20 | 10 |

ACTION PLAN

1. Develop a listing of classes that could be offered
2. Develop a time line for holding these classes
3. Develop a brochure highlighting “lunch and learn” topics that could be presented for a nominal charge including a healthy meal.

INTERNAL PROCESS: Deliver timely & quality service with an emphasis on care for the patient

| Jan | Feb | Mar | Apr | May | Jun | Jul | Aug | Sep | Oct | Nov | Dec | Indicator | Target | Alarm |
|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|---|--------|-------|
| 65 | 75 | 75 | 85 | | | | | | | | | % of hospital patients and NH residents w/ therapeutic diet that receive a diet instruction/information prior to discharge. | ≥85% | ≤ 50% |

ACTION PLAN

1. Talk w/ hospital and nursing home staff asking them to notify us of potential discharges before May 1st, 2007
2. Talk w/ KG about completing hospital discharge diet instructions before May 1st 2007 ✓
3. Consider having some basic diet instruction materials available for nursing to distribute when an RD is not available to provide verbal instruction (w/e's holidays)

LEARNING & GROWTH: Attract, develop and retain quality employees in the dietary department.

| Jan | Feb | Mar | Apr | May | Jun | Jul | Aug | Sep | Oct | Nov | Dec | Indicator | Target | Alarm |
|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|---|--------|-------|
| 1 | 1 | 1 | - | | | | | | | | | Quarterly supervisor training/learning opportunities for dietary supervisors. | 1/Q | 0/Q |

ACTION PLAN

1. Schedule supervisors to attend May 9th job evaluation training
2. Review RH/Shared health video lending library
3. Encourage the completion of supervisor related continuing education self study materials.

FINANCIAL: Improve our cost effectiveness / maintain strong financial position by building on MNT out-patient counseling.

| Jan | Feb | Mar | Apr | May | Jun | Jul | Aug | Sep | Oct | Nov | Dec | Indicator | Target | Alarm |
|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|---|--------|-------|
| 3 | 2 | 6 | 4 | | | | | | | | | # of out-patients referred/seen for nutritional consultation ea. month. | 5 | <2 |

ACTION PLAN

1. Monitor number of out patients referred for MNT.
2. Include an RD card w/ hospital in patient diet instruction materials provided & remind patient's that if they would like more information they should ask their doctor for a referral.

Westfields Hospital 2007
Balanced Scorecard

| Service | Target | Alarm | Current | Indicator Comment | March | | |
|--|--------|-------|---------|---|-------|--|--|
| Patient Satisfaction Survey Question: Would you recommend Westfields Hospital? | 90% | 80% | 77% | customer service teams to start | 78 | | |
| Number of areas meeting Dimensions of Care targets | 4 | 2 | 0 | team projects to start | 2 | | |
| Number of new patients registered monthly | 280 | 200 | 216 | tracking method established - | | | |
| Number of Specialty Services hours added | 8 | 4 | 8 | Q1, 2007 | 8 | | |
| Number of clinical departments that are involved in Community Health initiatives | 6 | 3 | 4 | Ed - smoking cessation, and B/P control, imaging - mammography, legs for life, patient safety - school and patient awareness of medications | 4 | | |
| Quality | Target | Alarm | Current | Indicator Comment | March | | |
| Number of National Patient Safety Goals with requirements met | 23 | 18 | 18 | Patient safety coordinator has developed a time line to meet all requirements | 18 | | |
| Number of CMS Core Measures that meet Wisconsin Benchmarks | 19 | 15 | 13 | need to work on eval of LVSD, ACEI for LVSD, smoking cessation, antibiotic within 4 hours of admission, influenza vaccine, appropriate antibiotic | 13 | | |
| People | Target | Alarm | Current | Indicator Comment | March | | |
| Percentage of on-time performance evaluations | 100% | 90% | 66% | 64 due, 42 completed | 90% | | |
| Pulse survey indicator, respect of co workers | 100% | 80% | 46% | Will develop plan to address with staff and will work with Calvin Allen at HP as well | 0 | | |
| Financial | Target | Alarm | Current | Indicator Comment | March | | |
| Facility expansion and improvements on or behind plan (1= on plan, 0= behind plan) | 1 | 0 | 1 | On plan, Master site plan to go to Hospital board | 1 | | |
| IT initiative on or behind plan (1= on plan, 0= behind plan) | 1 | 0 | 1 | On Plan, working on contract analysis with vendor of choice | 1 | | |
| Number of Financial Indicators meeting targets | 6 | 3 | 5 | good month | 3 | | |
| Number of Volunteer hours | 1,250 | 950 | 1,000 | Q1, 2007 | 1000 | | |