

A SCORECARD IS ESSENTIAL FOR MONITORING IMPLEMENTATION OF THE STRATEGIC PLAN

St. Joseph Mercy Oakland Strategic Scorecard

Strategies:

1. Building Strength in Distinctive Centers of Excellence & High Quality Medical Staff & Medical Staff Leadership.
2. Building a Distinctiveness in Superior Service & Excellence in Nursing & Clinical Leadership.
3. Committed Administrative Leadership & Governance.
4. Focus on Performance & Execution With Data & Accountability.
5. Aligning the Infrastructure: Physical Plant & Information Technology.



	Measurement	Baseline	Previous Measure	Most Current Measure	2002/03 Targets	Activities in Progress
SUPERIOR RELATIONSHIPS	Employee Satisfaction 1. # of Participants 2. Gallup Grand Mean	1st Survey 2000 1. 52% Participation 1,649 Responses 2. 3.47		2nd Survey 2001 1. 56% Participation 1,773 Responses 2. 3.64	3rd Survey 2002 1. 60% Participation 2. 3.70	<ul style="list-style-type: none"> • Servant-leadership paradigm adopted to improve satisfaction: <ul style="list-style-type: none"> – Workplans developed with department leadership. – Assistance provided to ensure that targets are met. • Rollout of Internal Communications & Leadership Development program.
	Physician Satisfaction	No Data Available	No Data Available	Developing New Process	Physician Satisfaction Survey Completed	<ul style="list-style-type: none"> • Survey tools investigated. • Communication improved. • Leadership program development. • GME Plan created.
	Recruitment/Retention 1. Retention Rate – Overall 2. RN Retention Rate	CY 2000 1. 81% 2. 85%		CY 2001 1. 81% 2. 90%	CY 2002 1. 85% 2. 90%	<ul style="list-style-type: none"> • Nursing workforce plan implementation. • Nursing Futures Taskforce established. • Nursing Magnet Status pursued. • Employee referral bonus created. • Exit interview process maintained.
	Community Benefit 1. Charity Care & Community Services for Low-income 2. Benefits to Broader Community	Comparable Data Not Available	Comparable Data Not Available	FY 2001 1. \$10,546,184 2. \$10,607,783	FY 2002 1. \$7,141,000	<ul style="list-style-type: none"> • Community Benefit Ministry program analysis.
	Philanthropy 1. West Wing Capital Campaign	FY 2001 1. \$1.24 Million		Cumulative to Date (12/01) 1. \$1.89 Million	FY 2002 1. \$3.5 Million Cumulative FY 2003 2. \$6.0 Million Cumulative	<ul style="list-style-type: none"> • West Wing planning study completed. • Special events. • Identifying prospects.
SUPERIOR QUALITY & SERVICE	Patient Satisfaction 1. Inpatient 2. Emergency Dept. 3. EMS Rerouting Hours 4. Loyalty Index	March 2001 1. 84.65% 2. 79.79% 3. 882 Hours (FY 00) December 2000 4. Inpatient – 49% ED – 33%	June 2001 1. 84.56% 2. 80.92% 3. 938 Hours June 2001 4. Inpatient – 51.2% ED – 37.5%		1. June 01 Mean of 89.4% 2. 5% Improvement 3. 703 Hours – 25% less 4. Inpatient – 53% ED – 42%	<ul style="list-style-type: none"> • Employee scripts & patient perks created to mitigate dissatisfaction. • Customer Service Plan implementation, including education of staff in service recovery. • Increase throughput through process redesign. • Physical plant improvements.
	Care Management 1. % CHF Patients on ACE Inhibitors (Monthly) 2. LOS for Complicated Pneumonia (Quarterly) 3. Increase Physician Order Entry	1. 70% March 2001 2. 5.6 Days Q400 3. 6% December 2000	1. 77% May 2001 2. 5.7 Days Q201 3. 9% September 2001	1. 64% July 2001 2. 5.4 Days Q401 3. 15% December 2001	1. 75% 2. 5.4 Days 3. 50%	<ul style="list-style-type: none"> • CHF case management program maintained. • AMI GAP program participation. • Individual physician report cards with LOS measures. • Physician champions identified for Cerner system roll-out.
GROWTH & SUPERIOR FINANCIAL PERFORMANCE	Market Share 1. SJMO Defined Srvc. Area 2. IP Discharges 3. ER Visits 4. IP & OP Surgical Cases 5. SJMO Primary Care Physician Network Visits (Including OB/Gyn)	FY 2000 1. 18.3% (CY 00) 2. 19,638 Discharges 3. 45,996 Visits 4. 16,464 Cases 5. 162,094 Visits	FY 2001 1. 18.3% (CY 00) 2. 20,260 Discharges 3. 47,125 Visits 4. 15,027 Cases 5. 121,498 Visits	YTD December FY 2002 1. To Be Determined 2. 10,469 Discharges 3. 22,997 Visits 4. 6,684 Cases 5. 58,533 Visits	Budgeted FY 2002 1. To Be Determined 2. 19,864 Discharges 3. 48,019 Visits 4. 16,986 Cases 5. 101,649 Visits	<ul style="list-style-type: none"> • 3 year targets established by Centers of Excellence (COE). • COE business plan development: – CV Plan finalized. – New ED Physician Group. • Physician Network: – Network referrals & efficiencies. – Community outreach.
	Financial Performance 1. Net Operating Income 2. Days Cash on Hand (Exclude Funded Deprec.) 3. Supply Costs as % of Net Revenue 4. Net Revenue/Discharge (CMAED) 5. SJMO Primary Care Physician Network Operating Loss – Net 2 (Includes OB/Gyn)	FY 2000 1. (0.388%) 2. 10.36 Days 3. 17.6% 4. \$5,399 5. \$5,429,319	FY 2001 1. 0.094% 2. 34.98 Days 3. 18.3% 4. \$5,234 5. \$3,334,263	YTD December FY 2002 1. (1.7%) 2. 45.38 Days 3. 19.1% 4. \$5,909 5. \$957,311	Budgeted FY 2002 1. 1.5% 2. 17.21 Days 3. 18.4% 4. \$5,425 5. \$2,270,156	<ul style="list-style-type: none"> • Revenue management strategies developed. • Performance Improvement Team weekly meetings. • Position control process established. • Audit of Physician Network internal controls and coding.