

- Drive strategy execution
- Clarify strategy and make strategy operational
- Identify and align strategic initiatives
- Link budget with strategy
- Align the organization with strategy
- Conduct periodic strategic performance reviews to learn about and improve strategy

Balanced Scorecard - FY 2011



Pillars	Initiatives	Measure	Target	Accountability
Service Excellence Using service excellence to drive customer loyalty	Improve Communication in the Coordination of Care	Notification of Admission, Discharge and Major Procedures to Primary Care Provider	80% of PCPs Notified by 9/30/2011	T. Marchozzi
	Improve the Patient Experience	HCAHPS Survey Score for Overall Experience	Top Box Score of 69% by 8/31/2011('10FYTD=64%)	L. Spivack
	Hartford Hospital 2020; Phase II	Completion of ED Enabling and Expansion Projects Construction of New Parking Garage Underway	9/30/2011	B. Patel
Quality Ensuring that an infrastructure is in place to drive clinical and service excellence	Coordinate Care Across the Continuum	Percent of CHF Patients Readmitted within 30 Days	15% Decrease by Q4FY11 (FY'10=24.5%)	R. Orlando
	Achieve Best Practice in Preventing Hospital Acquired Infections	Mean Number of VAPs/1000 Ventilator Days	3.7 VAPS/1000 Ventilator Days ('10 FY = 6.1)	R. Orlando
		Mean Number of BSIs/1000 Catheter Days	1.2 BSIs/1000 Catheter Days ('10 FY = 2..15) by Q4FY'11	
	Improve Data and Tools for Decision Support and Quality Measurement	Development and Implementation of Decision Support Improvement Plan: People, Platform (EPSI), Tools (Quality Reporting)	Develop plan by 3/31/2011 Implement by 9/30/2011	J. Roche S. O'Neill T. Marchozzi
People Ensuring that we have the right people with the right knowledge and skills to drive the continual improvement of our quality	Create a High Performance Organization (H3W)	Percent of Work Groups Reporting Outcomes for Ideas Implemented	100 % by 9/30/2011	J. Flaks
	Execute Leadership & Staff Development Program	Percent of Managers & Physician Leaders having Development Plan	100% by 9/30/2011(Baseline=0%)	K. Cesca
		Percent of Staff with at Least 1 Class of Service Excellence Training	75% Staff with One or More Service Excellence Courses by 9/30/2011	
	Design Medical Practice Structure for Full Time Faculty	Development and Approval of Plan	9/30/11	T. Marchozzi R. Orlando
Growth Staying current in addressing community health needs and education and research opportunities	Establish Neuroscience Center to be the State Leader and Regional Referral Center	Development and Implementation of Strategic Plan Number of Patient Referrals (Transfer Center)	Implement Phase I by 9/30/2011 Increase Referrals by 10% by 9/30/2011 (FY'10 Baseline=662)	W. Elberth H. Schwartz
	Position as Regional Destination Program for Cardiovascular Surgical Services	Creation of Department of Cardiac Surgery & Recruitment of Cardiovascular Physician Leadership	9/30/2011	B. Boatman
	Position Transplant Program as Regional Leader	Completion of Transplant Leader Recruitments (Hepatology, Surgery, Nephrology) Number of Transplant Patients	9/30/2011 Increase Patients by 10% by 9/30/2011	B. Boatman
	Establish a Primary Care and Ambulatory Strategy by Market	Establish New Ambulatory Care Site in Farmington Valley Inpatient and Outpatient Volume	Open by 9/30/2011 Increase of 2% Inpatient & 3% Outpatient Volume by 9/30/2011	K. Goyette
	Elevate Cancer Center and Women's Health: Institute Model Design (Phase 1)	Institute Model Implemented (Phase 1)	9/30/2011	J. Flaks
Financial Strength The financial objectives that will drive all other aspects of our strategy	Reduce Supply Costs	OR & Interventional Supply Costs Pharmaceutical Costs	Reduce by \$4 Million	B. Patel
	Reduce LOS	% Patients Discharged by 11 AM	Attain 35% Patient Discharges by 9/30/2011 ('10FY=23.1%)	L. Spivack
	Optimize Patient Registration & Scheduling	Implementation (Phase 1) of Centralized Registration and Scheduling System in Radiology & Cardiology (with Single Physician Database)	9/30/2011	T. Marchozzi
Academic Excellence Enhancing Hartford Hospital educational and research strengths, to complement the innovative and complex care we employ in caring for our patients	Lead the region in Implementing Progressive Educational Models Featuring Simulation, Innovative Programming and Technology	Center for Education Simulation & Innovation (CESI) Program and CME Videoconferencing Implemented	3 CESI Programs & 3 Videoconferencing Programs Running by 9/30/2011	N. Yeston
	Enhance HH Research Enterprise	Plan Approval and Implementation of Clinical & Translational Research Institute Phase I	Board Approval by 11/1/2010 Implement Phase 1 by 2/1/2011	L. Bow

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Pillar: Service Excellence – Q1 FY'11



Using Service Excellence to Drive Customer Loyalty

Initiatives	Measures	Target	Accountability
Improve Communication in the Coordination of Care	Notification of Admission, Discharge and Major Procedures to Primary Care Provider	80% of PCPs Notified by 9/30/2011	T. Marchozzi
Improve the Patient Experience	HCAHPS Survey Score for Overall Experience	Top Box Score of 69% by 8/31/2011 (FY' 10=63.8%)	L. Spivack
Hartford Hospital 2020; Phase II	Completion of ED Enabling and Expansion Projects. Construction of New Parking Garage Underway	9/30/2011	B. Patel

● Green = Initiative *expected* to hit target by date

● Yellow = Initiative will *likely* achieve target by date

● Red = *At risk* for missing target by date

Pillar: Quality – Q1 FY'11



Insuring that an Infrastructure is in Place to Drive Clinical and Service Excellence

Initiatives	Measures	Target	Accountability
Coordinate Care Across the Continuum	Percent of CHF Patients Readmitted within 30 Days	15% Decrease by Q4FY11 to 20.8% (FY'10=24.5%)	R. Orlando
Achieve Best Practice in Preventing Hospital Acquired Infections	Mean Number of VAPs/1000 Ventilator Days Mean Number of BSIs/1000 Catheter Days	3.7 VAPs/1000 Ventilator Days (FY'10=6.1) 1.2 BSIs/1000 Catheter Days ('10 FY=2.15) by Q4FY11	R. Orlando
Improve Data and Tools for Decision Support and Quality Management	Development and Implementation of Decision Support Improvement Plan: People, Platform (EPSI), Tools (Quality Reporting)	Develop plan by 3/31/2011 Implement by 9/30/2011	J. Roche S. O'Neill T. Marchozzi



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Insuring that we have the right people with the right knowledge and skills to drive the continual improvement of our quality

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Design Medical Practice Structure for Full Time Faculty	Development & Approval of Plan	9/30/2011	T. Marchozzi R. Orlando

Staying Current in Addressing Community Health Needs and Education and Research Opportunities

Initiatives	Measures	Target	Accountability
Establish Neuroscience Center to be the State Leader & Regional Referral Center	Development & Implementation of Strategic Plan Number of Patient Referrals (Transfer Center)	Implement Phase 1 by 9/30/2011 Increase Referrals by 10% by 9/30/2011 (FY'10 Baseline Projected = 662)	W. Elberth H. Schwartz
Position as Regional Destination Program for Cardiovascular Surgical Services	Creation of Department of Cardiac Surgery & Recruitment of Cardiovascular Physician Leadership	9/30/2011	B. Boatman
Position Transplant Program as Regional Leader	Completion of Transplant Leader Recruitments (Hepatology, Surgery, Nephrology) Number of Transplant Patients	9/30/2011 Increase Patients by 10% by 9/30/2011	B. Boatman
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Elevate Cancer Center & Women's Health: Institute Model Design (Phase 1)	Institute Model Implemented (Phase 1)	9/30/2011	J. Flaks

The Financial Objectives that will Drive all Other Aspects of our Strategy

Initiatives	Measures	Target	Accountability
Reduce Supply Costs	OR & Interventional Supply Costs Pharmaceutical Costs	Reduce by \$4 Million	B. Patel
Reduce LOS	% Patient Discharged by 11 AM	Attain 35% Patient Discharges by 9/30/2011 (FY'10=23.1%)	L. Spivack
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Enhancing Hartford Hospital educational and research strengths, to complement the innovative and complex care we employ in caring for our patients

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