



OUR Upstate Strategic Plan Performance Measure Selection Process and Status Overview

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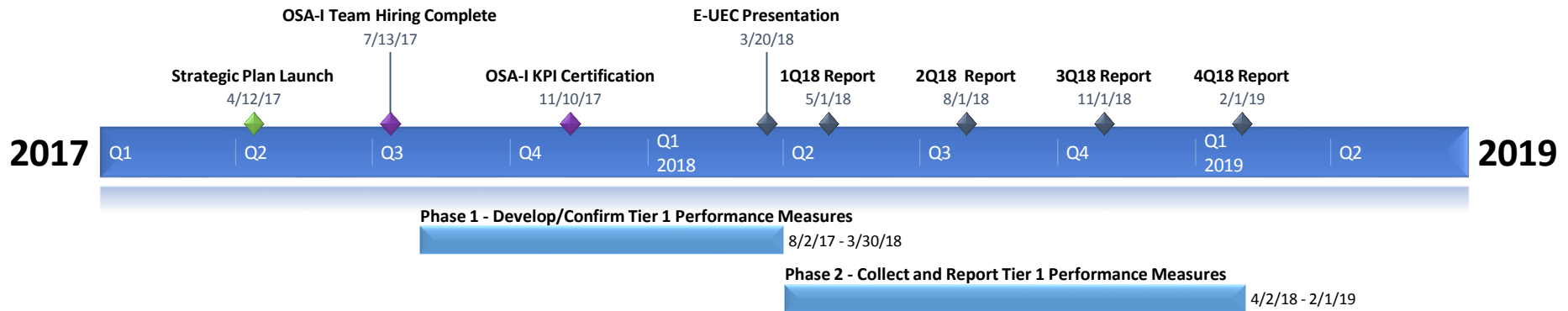
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- Overview of OUR Upstate Performance Measures

OUR Upstate Tier 1 Performance Measures



OUR Upstate Tier 1 Performance Measures Selection and Reporting Timeline



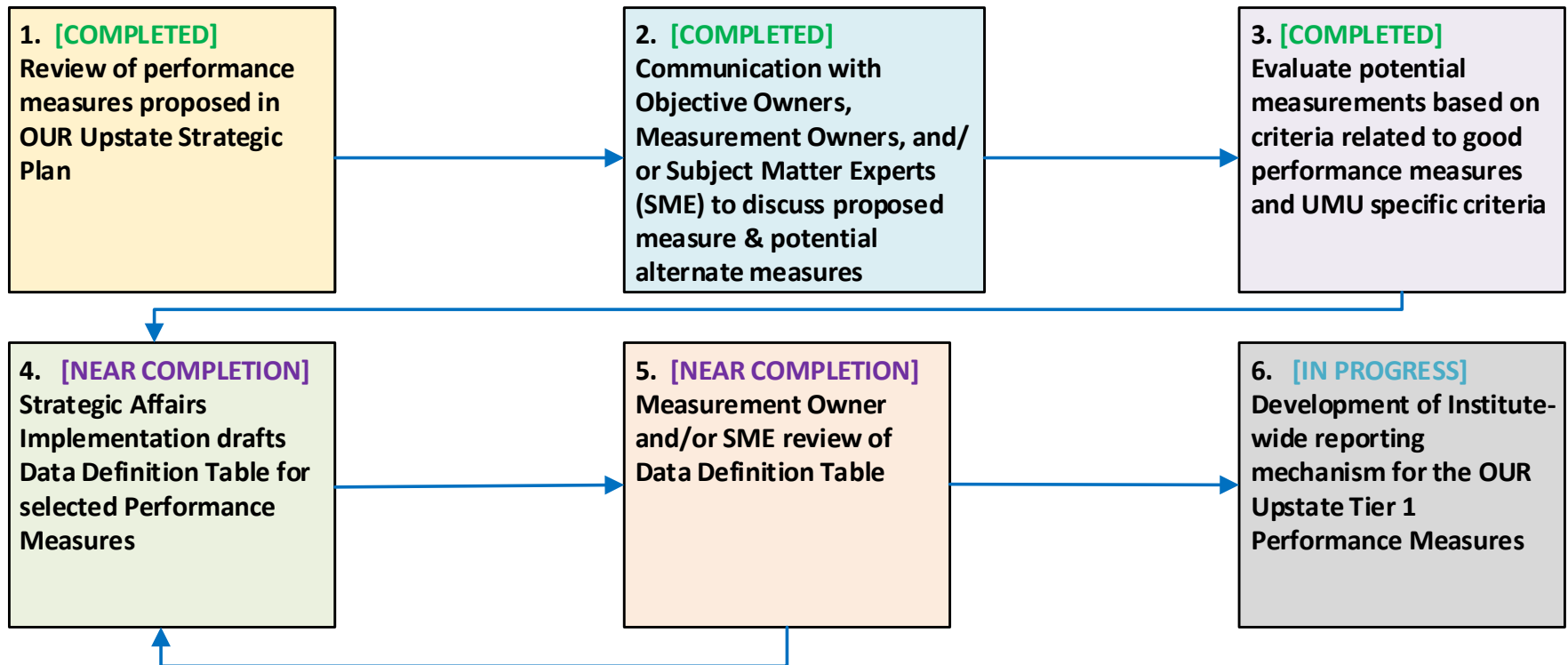
Notes:

1. Tier 1 Performance Measures developed and confirmed based on communications with objective owners and subject matter experts (SMEs)
2. 1Q18 and 2Q18 reports anticipated manual compilation
3. 3Q18 and 4Q18 reports anticipated dashboard with automated reporting

Process for OUR Upstate Tier 1 Performance Measurement Selection

✓ OUR Upstate Tier 1 Performance Measurement Selection Process

- The process enabled the OSA Implementation Team to identify which of the original performance measures are still valid and which performance measures needed to be further refined or replaced with an alternate performance measure.



Criteria for OUR Upstate Tier 1 Performance Measures

Criteria for Good Performance Measures

Easy to understand, valid, & reliable	Focus on strategic measures versus operational	Ability to influence measure with targeted actions	Provides meaningful information for decision-making
Sustainable (intent is to measure and monitor over time)	Direct and frequent measurements when possible	Prioritize leading measures over lagging measures	Prioritize measures where baseline and benchmark data exists



Additional Upstate Medical University Criteria for OUR Upstate Performance Measures

Connects to Intended Results of the Objective	Breadth of Measure (encompasses a high-level measurement for the Institution)	Balance across Education, Research and Clinical
Important to Institution-wide Mission and priorities	Current ability to measure (does not require a project to start capturing the measure)	Ability to drill-down and roll-up

Key Milestones for OUR Upstate Tier 1 Performance Measure Reporting

☑ Development of Tier 1 Performance Measures

- Review of the Tier 1 performance measures proposed in the OUR Upstate Strategic Plan to verify that they were still:
 - **Applicable**
 - **Appropriate**
 - **Feasible**
- Analysis of the measures with respect to **45 parameters**, including the **criteria for good UMU performance measures**
- Reviewed approximately **110 measurements** previously used for the Engaging Excellence Report Card

☑ Training and Certification

- Completed **Key Performance Indicator Professional (KPI-P)** training and certification November 2017.

Key Milestones for OUR Upstate Tier 1 Performance Measure Reporting

☑ Meetings

- **30 meetings** with Objective Owners, Measurement Owners, and Subject Matter Experts (SMEs) to brainstorm and finalize the performance measures for the OUR Upstate Tier 1 Strategy Map.

☑ Email Communications

- **350+ email correspondences** with Objective Owners, Measurement Owners, and Subject Matter Experts (SMEs) to discuss the originally proposed measures and potential alternate OUR Upstate Tier 1 performance measures.

☑ Data Definition Tables

- **42 data definition tables created** with the Objective Owners, Measurement Owners and SMEs for the OUR Upstate Tier 1 performance measure.

☑ 42 Performance Measures Selected

☐ 4 Performance Measures Under Development

STRATEGIC OBJECTIVES AND STRATEGY MAP

<p>LEARNERS, PATIENTS, COMMUNITY & OTHER STAKEHOLDERS</p>	<p>Increase Reputation for Excellence</p> <ol style="list-style-type: none"> Clinical: HCAHPS “Likelihood to Recommend” Education Applications to Available Seats Ratio Research: Total Sponsored Research Workforce: Retention Rate 	<p>Improve Health Outcomes</p> <ol style="list-style-type: none"> Inpatient Mortality Hospital Acquired Conditions Surgical Site Infections 	<p>Reduce Health Disparities</p> <p>She Matters Program</p> <ol style="list-style-type: none"> Individuals Reached Women Screened (Mammography) New Participants Enrolled 	<p>Increase Access</p> <ol style="list-style-type: none"> Clinical: Inpatient Admissions Clinical: Outpatient Visits Education: Learner Access Pathways 				
<p>FINANCIAL STEWARDSHIP</p>	<p>Improve Fiscal Responsibility & Transparency</p> <ul style="list-style-type: none"> Performance Measure Under Development Proposed Measure = Budget Process Participation Rate 		<p>Improve Financial Performance</p> <table border="0"> <tr> <td data-bbox="834 659 1155 788"> <p>Total Revenue Growth</p> <ol style="list-style-type: none"> Campus University Hospital UUMAS </td> <td data-bbox="1201 659 1510 782"> <p>Overall Profit Margin</p> <ol style="list-style-type: none"> Campus University Hospital UUMAS </td> <td data-bbox="1580 659 1889 782"> <p>Days Cash on Hand</p> <ol style="list-style-type: none"> Campus University Hospital UUMAS </td> </tr> </table>			<p>Total Revenue Growth</p> <ol style="list-style-type: none"> Campus University Hospital UUMAS 	<p>Overall Profit Margin</p> <ol style="list-style-type: none"> Campus University Hospital UUMAS 	<p>Days Cash on Hand</p> <ol style="list-style-type: none"> Campus University Hospital UUMAS
<p>Total Revenue Growth</p> <ol style="list-style-type: none"> Campus University Hospital UUMAS 	<p>Overall Profit Margin</p> <ol style="list-style-type: none"> Campus University Hospital UUMAS 	<p>Days Cash on Hand</p> <ol style="list-style-type: none"> Campus University Hospital UUMAS 						
<p>INTERNAL PROCESSES</p>	<p>Improve Efficiency & Accountability</p> <ol style="list-style-type: none"> Policy-Procedure Document Control Compliance 	<p>Grow Programs & Community Partnerships</p> <p>VEPOP:</p> <ol style="list-style-type: none"> Screened Positive for Street Violence & 3. Enrolled in VEPOP (# & %) Referrals to Community Partners Upstate Foundation \$ of Donations # of Internal & External Donors 	<p>Improve Quality</p> <p>Vizient Star Rating</p> <ol style="list-style-type: none"> Inpatient Outpatient 	<p>Enhance Innovation</p> <ol style="list-style-type: none"> Publication Impact Factor # of Publications # of Authors # of Citations & 6. Research Grants Submitted (# and \$) 	<p>Increase Integration</p> <ul style="list-style-type: none"> Performance Measure Selection under development based on “One University” survey 			
<p>ORGANIZATIONAL CAPABILITIES (PEOPLE, FACILITIES, TECHNOLOGY)</p>	<p>Increase Diversity, Equity, Access & Inclusion</p> <ol style="list-style-type: none"> Student Diversity <ul style="list-style-type: none"> Underrepresented Minority (URM) Students Workforce Diversity <ul style="list-style-type: none"> Workforce from Diverse Populations 	<p>Improve Culture of Trust</p> <ul style="list-style-type: none"> Performance Measure Selection under development based on “One University” survey 	<p>Increase Workforce Satisfaction</p> <ul style="list-style-type: none"> Performance Measure Selection under development based on “One University” survey 	<p>Optimized Technology, Facilities & Support Services</p> <ol style="list-style-type: none"> Closed Help Desk Tickets & Closed IMT Project Requests Satisfaction Rate of Closed Help Desk Tickets & Closed IMT Project Requests Cybersecurity Intrusions Thwarted 				

Summary Status of Performance Measures

Finalized

Performance Measures Selected and Approved by Objective and/or Measure Owner

Organizational Capabilities	<ul style="list-style-type: none"> <input checked="" type="checkbox"/> Increase Diversity, Equity, Access & Inclusion <ul style="list-style-type: none"> 1. Workforce Diversity: Workforce from diverse populations 2. Student Diversity: Underrepresented minority (URM) students <input checked="" type="checkbox"/> Optimized Technology, Facilities & Support Services <ul style="list-style-type: none"> 1. Closed Help Desk Tickets & Closed IMT Project Requests 2. Satisfaction Rate of Closed Help Desk Tickets & Closed IMT Project Requests 3. Cybersecurity Intrusions Thwarted
Internal Processes	<ul style="list-style-type: none"> <input checked="" type="checkbox"/> Improve Efficiency & Accountability <ul style="list-style-type: none"> 1. Policy-Procedure Document Control Compliance <input checked="" type="checkbox"/> Grow Programs & Community Partnerships <ul style="list-style-type: none"> <u>VEPOP</u> (Violence Education Prevention Outreach Program) <ul style="list-style-type: none"> 1. # Screened Positive for Street Violence 2. # Enrolled in VEPOP 3. % Screened Positive for Street Violence that Enrolled in VEPOP 4. # of VEPOP Referrals to Community Partners <u>Upstate Foundation:</u> <ul style="list-style-type: none"> 5. Donations (\$) 6. # of Internal & External Donors <input checked="" type="checkbox"/> Improve Quality <ul style="list-style-type: none"> 1. Inpatient Vizient Star Rating 2. Outpatient Vizient Star Rating

Summary Status of Performance Measures

Finalized

Performance Measures Selected and Approved by Objective and/or Measure Owner

Internal Processes	<input checked="" type="checkbox"/> Enhance Innovation <ol style="list-style-type: none"> 1. Publication Impact Factor 2. # of Publications 3. # of Authors 4. # of Citations 5. # of Research Grants Submitted 6. \$ Amount of Research Grants Requested
Financial Stewardship	<input checked="" type="checkbox"/> Improve Financial Performance <ol style="list-style-type: none"> A. Total Revenue Growth <ol style="list-style-type: none"> 1. Campus 2. University Hospital 3. UUMAS B. Overall Profit Margin <ol style="list-style-type: none"> 4. Campus 5. University Hospital 6. UUMAS C. Days Cash on Hand <ol style="list-style-type: none"> 7. Campus 8. University Hospital 9. UUMAS

Summary Status of Performance Measures

Finalized

Performance Measures Selected and Approved by Objective and/or Measure Owner

Learners, Patients, Community & Other Stakeholders

- Increase Reputation for Excellence**
 1. Clinical: HCAHPS “Likelihood to Recommend”
 2. Workforce: Retention Rate
 3. Education: Applications to Available Seat Ratio
 4. Research: Total Sponsored Research
- Improve Health Outcomes**
 1. Inpatient Mortality
 2. Hospital Acquired Conditions
 3. Surgical Site Infections
- Reduce Health Disparities**

She Matters program:

 1. Individuals Reached through Strategic Outreach
 2. Women Screened (Mammography)
 3. New Participants Enrolled in the Program
- Increase Access**
 1. Clinical: Inpatient Admissions
 2. Clinical: Outpatient Visits
 3. Education: Learner Access Pathways

Summary Status of Performance Measures

Under Development

Details of the Performance Measure To Be Finalized with Objective/Measure Owner

Organizational Capabilities	<ul style="list-style-type: none"> <input type="checkbox"/> Improve Culture of Trust <ul style="list-style-type: none"> • <i>Performance Measure(s) Under Development based “One University” survey</i> <input type="checkbox"/> Increase Workforce Satisfaction <ul style="list-style-type: none"> • <i>Performance Measure(s) Under Development based “One University” survey</i>
Internal Processes	<ul style="list-style-type: none"> <input type="checkbox"/> Increase Integration <ul style="list-style-type: none"> • <i>Performance Measure(s) Under Development based “One University” survey</i>
Financial Stewardship	<ul style="list-style-type: none"> <input type="checkbox"/> Improve Fiscal Responsibility & Transparency <ul style="list-style-type: none"> • <i>Proposed Measure related to departmental engagement in the Global Budget process</i>

Organizational Capabilities (People, Facilities, Technology)

Increase Diversity, Equity, Access & Inclusion

<i>Performance Measure</i>	<i>Rationale for Selection</i>
1. Student Diversity: Underrepresented minority (URM) students	<ul style="list-style-type: none"> Connects to Intended Results Current ability to measure Important to Institute-wide priorities Workforce Diversity: Breadth of measure Workforce Diversity: Balance across Education, Research and Clinical
2. Workforce Diversity: Workforce from diverse populations: <ul style="list-style-type: none"> Minority Race & Ethnicity Female Protected Veterans Individuals with Disabilities 	

Optimized Technology, Facilities, & Support Services

<i>Performance Measure</i>	<i>Rationale for Selection</i>
1. Closed Help Desk Tickets & Closed IMT Project Requests	<ul style="list-style-type: none"> Connects to Intended Results Breadth of measure Current ability to measure Balance across Education, Research and Clinical
2. Satisfaction Rate of Closed Help Desk Tickets & Closed IMT Project Requests	
3. Cybersecurity Intrusions Thwarted	

Organizational Capabilities (People, Facilities, Technology)

Improve Culture of Trust	
<i>Performance Measure</i>	<i>Rationale for Selection</i>
<p>Performance Measure(s) Under Development based “One University” survey</p>	<ul style="list-style-type: none"> • Connects to Intended Results • Current ability to measure • Important to Institute-wide priorities • Baseline and benchmark data • Ability to influence through targeted action

Increase Workforce Satisfaction	
<i>Performance Measure</i>	<i>Rationale for Selection</i>
<p>Performance Measure(s) Under Development based “One University” survey</p>	<ul style="list-style-type: none"> • Connects to Intended Results • Current ability to measure • Important to Institute-wide priorities • Baseline and benchmark data • Ability to influence through targeted action

Internal Processes

Improve Efficiency & Accountability	
<i>Performance Measure</i>	<i>Rationale for Selection</i>
<p>1. Policy-Procedure Document Control Compliance</p>	<ul style="list-style-type: none"> Connects to Intended Results Breadth of measure Current ability to measure Balance across Education, Research and Clinical Ability to drill-down and roll-up Important to Institute-wide priorities (i.e. increase emphasis on University-wide policies and procedures to align with “One University”)

Grow Programs & Community Partnerships	
<i>Performance Measure</i>	<i>Rationale for Selection</i>
<p>VEPOP (Violence Education Prevention Outreach Program)</p> <ol style="list-style-type: none"> # Screened Positive for Street Violence # Enrolled in VEPOP % Screened Positive for Street Violence that Enrolled in VEPOP # of VEPOP Referrals to Community Partners 	<ul style="list-style-type: none"> Current ability to measure Important to Institute-wide Mission & priorities <p>VEPOP:</p> <ul style="list-style-type: none"> Connects to Intended Results (i.e. program & partnerships to address community need) Unique program at UMU to showcase
<p>Upstate Foundation</p> <ol style="list-style-type: none"> Donations (\$) # of Internal & External Donors 	<p>Upstate Foundation:</p> <ul style="list-style-type: none"> Connects to Intended Results (i.e. internal and external philanthropic partnerships) Funding supports Mission and Vision driven programs and activities

Internal Processes

Improve Quality		Enhance Innovations	
<i>Performance Measure</i>	<i>Rationale for Selection</i>	<i>Performance Measure</i>	<i>Rationale for Selection</i>
1. Vizient Star Rating - Inpatient	<ul style="list-style-type: none"> Connects to Intended Results Current ability to measure Important to Institute-wide priorities Breadth of Measure (i.e. represents measurement of patient care across the health system for inpatients & outpatients) 	1. Publication Impact Factor	<ul style="list-style-type: none"> Connects to Intended Results Current ability to measure Important to Institute-wide priorities (i.e. scholarly activity) Publication Measures: Balance across Education, Research and Clinical
2. Vizient Star Rating - Outpatient		2. # of Publications	
	3. # of Authors		
	4. # of Citations		
	5. # of Research Grants Submitted		
	6. \$ Amount of Research Grants Requested		

Increase Integration	
<i>Performance Measure</i>	<i>Rationale for Selection</i>
Performance Measure(s) Under Development based "One University" survey	<ul style="list-style-type: none"> Connects to Intended Results Current ability to measure Important to Institute-wide priorities Baseline and benchmark data Ability to influence through targeted action

Financial Stewardship

Improve Financial Performance	
<i>Performance Measure</i>	<i>Rationale for Selection</i>
Total Growth Revenue 1. Campus 2. University Hospital 3. UUMAS	<ul style="list-style-type: none"> Connects to Intended Results Breadth of measure Current ability to measure Important to Institute-wide priorities Balance across Education, Research and Clinical (i.e. captures financial performance across the enterprise)
Overall Profit Margin 4. Campus 5. University Hospital 6. UUMAS	
Days Cash on Hand 7. Campus 8. University Hospital 9. UUMAS	

Improve Fiscal Responsibility & Transparency	
<i>Performance Measure</i>	<i>Rationale for Selection</i>
Performance Measure(s) Under Development <i>(Proposed Measure related to departmental engagement in the Global Budget process)</i>	<ul style="list-style-type: none"> Connects to Intended Results Important to Institute-wide priorities

Learners, Patients, Community & Other Stake Holders

Increase Reputation for Excellence	
<i>Performance Measure</i>	<i>Rationale for Selection</i>
1. Clinical: HCAHPS “Likelihood to Recommend”	<ul style="list-style-type: none"> Connects to Intended Results Current ability to measure Balance across Education, Research and Clinical Each measure selected is meant to reflect excellence for the specific category
2. Workforce: Retention Rate	
3. Education: Applications to Available Seats Ratio	
4. Research: Total Sponsored Research	

Improve Health Outcomes	
<i>Performance Measure</i>	<i>Rationale for Selection</i>
1. Inpatient Mortality	<ul style="list-style-type: none"> Connects to Intended Results Current ability to measure Important to Institute-wide priorities
2. Hospital Acquired Conditions	
3. Surgical Site Infections	

Learners, Patients, Community & Other Stake Holders

Reduce Health Disparities	
<i>Performance Measure</i>	<i>Rationale for Selection</i>
<p>She Matters Program</p> <ol style="list-style-type: none"> 1. Individuals Reached through Strategic Outreach 2. Women Screened (Mammography) 3. New Participants Enrolled in Program 	<ul style="list-style-type: none"> • Connects to Intended Results • Current ability to measure • Important to Institute-wide Mission and priorities • Unique program at UMU to showcase

Increase Access	
<i>Performance Measure</i>	<i>Rationale for Selection</i>
<ol style="list-style-type: none"> 1. Clinical: Inpatient Admissions 	<ul style="list-style-type: none"> • Connects to Intended Results • Current ability to measure • Important to Institute-wide priorities • Clinical: Breadth of Measure (i.e. represents measurement of patient care across the health system for inpatients & outpatients) • Education: Ability to drill-down and roll-up
<ol style="list-style-type: none"> 2. Clinical: Outpatient Visits 	
<ol style="list-style-type: none"> 3. Education: Learner Access Pathways 	

OUR Upstate Performance Measure Management Support Moving Forward

The Strategic Affairs Implementation will be responsible for the OUR Upstate Tier 1 Performance Measures Management Process:

- ❑ Development of Institute-wide reporting mechanism for the OUR Upstate Tier 1 Performance Measures
- ❑ Support Objective Owners and Performance Measure Owners, as needed, with:
 - Data definition tables
 - Continual evaluation of selected performance measures to ensure they are still applicable and appropriate
 - Identifying initiatives required for refining performance measures to best measure intent of Objective

Summary of Next Steps

Deliverable	Timeframe
<input type="checkbox"/> Finalize OUR Upstate Performance Measure Selection	March 2018
<input type="checkbox"/> Evaluation of Reporting Software and Dashboard Options	March – April 2018
<input type="checkbox"/> OUR Upstate Performance Measure Reporting	Starting in May 2018