

**Executive Pay-For-Performance:  
2013-14 Organizational Measures of  
Performance**

**Saskatoon Regional Health Authority**

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# Organizational Measures of Performance

## Measure 1. Better Care - Percentage of Staff and Physicians in acute care (urban and rural hospitals) observed practicing appropriate hand hygiene.

<b>Definition</b>	Three month average of the percentage of staff and physicians in acute care (urban and rural hospitals) who are observed practicing appropriate hand hygiene.
<b>Baseline and Target</b>	<p><b>Baseline</b></p> <ul style="list-style-type: none"> <li>• 77.2%</li> </ul> <p><b>Target (for 100% pay)</b></p> <ul style="list-style-type: none"> <li>• 79.7%</li> </ul> <p><b>Stretch Target</b></p> <ul style="list-style-type: none"> <li>• 82.7%</li> </ul>
<b>Calculation or Methodology Description</b>	<p>Percent compliance with appropriate hand hygiene of urban and rural hospitals reporting in Q4 2013-14</p> <p><b>90% Threshold</b></p> <p>77.2% or less</p> <p><b>&gt;90% - 100%</b></p> <p>For every 0.25% increase in hand hygiene compliance above 77.2%, compensation will be increased by 1% to a maximum of 100%.</p> <p><b>&gt;100% - 110%</b></p> <p>For every 0.3% increase in hand hygiene compliance above 79.7%, compensation will be increased by 1% to a maximum of 110%.</p>
<b>Data Sources</b>	Internal Hand Hygiene Audit Reporting Database
<b>Data Limitations</b>	
<b>Frequency of Data Availability</b>	Monthly
<b>Regional Health Authority Contact</b>	Petrina McGrath, Vice President, Quality and Interprofessional Practice

<b>Measure 2. Better Health – Increase number of HIV tests performed in SHR</b>	
<b>Definition</b>	50% increase in the number of all HIV tests performed from April 1, 2009 to March 31, 2014.
<b>Baseline and Target</b>	<p><b>Baseline (2012/13)</b></p> <ul style="list-style-type: none"> <li>• 21,730 tests</li> </ul> <p><b>Target (for 100% pay)</b></p> <ul style="list-style-type: none"> <li>• 22,790 tests ( increase of 1,060)</li> </ul> <p><b>Stretch Target</b></p> <ul style="list-style-type: none"> <li>• 23,850 tests (increase of 2,120)</li> </ul>
<b>Calculation or Methodology Description</b>	<p><b>90% Threshold</b></p> <p>21,730 tests or less</p> <p><b>&gt;90% – 110%</b></p> <p>For every 106 tests performed above 21,730, compensation will be increased by 1% to a maximum of 110%</p>
<b>Data Sources</b>	Population and Public Health
<b>Data Limitations</b>	Ability to sub-categorize SHR data provided by Sask. Disease Control Laboratory or collate data from RUH virology may make it difficult to determine which part of the system requires additional support.
<b>Frequency of Data Availability</b>	Monthly
<b>Regional Health Authority Contact</b>	Dr. Cory Neudorf, Chief Medical Health Officer Suzanne Mahaffey, Director Population and Public Health

<b>Measure 3. Better Teams - Decrease number of workplace injuries resulting in lost time in owned and operated SHR facilities and community services.</b>	
<b>Definition</b>	Number of time loss workplace injuries in owned and operated SHR facilities and community services.
<b>Baseline and Target</b>	<p><b>Baseline</b></p> <ul style="list-style-type: none"> <li>• 647</li> </ul> <p><b>Target (for 100% pay)</b></p> <ul style="list-style-type: none"> <li>• 10% reduction ( 582 injuries)</li> </ul> <p><b>Stretch Target</b></p> <ul style="list-style-type: none"> <li>• 20% reduction (518 injuries)</li> </ul>
<b>Calculation or Methodology Description</b>	<p>SHR data includes all time loss employee injuries recorded in Parklane. Excludes affiliates.</p> <p><b>90% Threshold</b></p> <p>No reduction in number of time loss employee injuries (647 or more)</p> <p><b>&gt;90% – 110%</b></p> <p>For every 1% decrease in time lost employee injuries, compensation will be increased by 1% to a maximum of 110%.</p>
<b>Data Sources</b>	Parklane
<b>Data Limitation</b>	Discrepancies between regional and provincial reporting
<b>Frequency of Data Availability</b>	Monthly
<b>Regional Health Authority Contact</b>	Shelley Lofstrom, Manager, Workforce Planning

## Patient / Client Experience

### Measure 1. Patient Satisfaction: Percentage of inpatients reporting through HQC survey that would rate their hospital experience as 8, 9 or 10 out of 10

<b>Definition</b>	Percentage of inpatients reporting through HQC Patient Experience Survey that would rate their hospital experience as 8, 9 or 10 out of 10.
<b>Baseline and Target</b>	<p><b>Baseline</b></p> <ul style="list-style-type: none"> <li>74.7% (Average January 1 – December 31, 2012)</li> </ul> <p><b>Target (for 100% pay)</b></p> <ul style="list-style-type: none"> <li>77.4%</li> </ul> <p><b>Stretch Target</b></p> <ul style="list-style-type: none"> <li>80.1%</li> </ul>
<b>Calculation or Methodology Description</b>	<p>Average results January 1 – December 31, 2013 for percentage of inpatients reporting through HQC Survey that would rate their hospital stay as 8, 9 or 10 out of 10.</p> <p><b>90% Threshold</b></p> <p>74.7% or less</p> <p><b>&gt;90% – 110%</b></p> <p>For every 0.27% increase in patient satisfaction above 74.7%, compensation will be increased by 1% up to 110%.</p>
<b>Data Sources</b>	HQC Patient Experience in Acute Care Survey (Source: HCAHPS) Continuous survey in SK since 2007.
<b>Data Limitations</b>	
<b>Frequency of Data Availability</b>	Monthly, 3 month lag.
<b>Regional Health Authority Contact</b>	Victoria Schmid, Director Client and Family Experience and Safety

# Behavioural Competencies

## Measure 1. Leadership Behaviours – 360 degree feedback based on Manager Competency Portfolio (MCP) 360 Feedback tool administered by Hay Group

<b>Definition</b>	Number of leadership competencies identified as strength areas in the Manager competency Portfolio (MCP) 360 Feedback tool administered by Hay Group
<b>Baseline and Target</b>	<p><b>Baseline</b></p> <ul style="list-style-type: none"> <li>• 5</li> </ul> <p><b>Target</b> (<i>for 100% pay</i>)</p> <ul style="list-style-type: none"> <li>• 7</li> </ul> <p><b>Stretch Target</b></p> <ul style="list-style-type: none"> <li>• 9 of 11 leadership competencies related to managing self, managing your team, managing the work, and managing collaboratively are identified as areas of strength.</li> </ul>
<b>Calculation or Methodology Description</b>	<p>Independent Survey conducted by Hay group based on the Manager Competency Portfolio (MCP) Model.</p> <p><b>90% Threshold</b></p> <ul style="list-style-type: none"> <li>• 5</li> </ul> <p>&gt;90% - 110%</p> <p>For every 1 additional leadership competency identified as a strength area, compensation will be increased by 5% up to 110%.</p>
<b>Data Sources</b>	Hay Benchmark Survey
<b>Data Limitations</b>	
<b>Frequency of Data Availability</b>	Once per survey
<b>Regional Health Authority Contact</b>	Bonnie Blakley, Vice President, People and Partnerships