

2010/2011 Performance Agreement for EVP Quality and Service Improvement with Results

Goal	Focus	Performance Measure	Baseline 2009/2010	2010/2011 Targets	2010/2011 Results	Weighting	Performance Score				Weighting x Percentage	
							100%	66%	33%	0%		
Access	Improving access	Improving Access and Reducing Wait Times Transformational Improvement Programs 2010/2011 objectives realized	n/a	90% of 2010/2011 Objectives Realized	partial	10%	≥ 90%	≥ 85%	≥ 75%	< 75%	3.3%	
	Decreasing wait times	Length of Stay in Emergency Department in hours (median) in Tertiary Hospitals	Discharged	3.7 hours (08/09)	2.5 hours	YTD = 3.5	5%	≤ 2.5 hours	≤ 2.7 hours	≤ 2.9 hours	> 2.9 hours	0.0%
			Admitted	12.3 hours (08/09)	9 hours	YTD = 9.8	5%	≤ 9 hours	≤ 9.5 hours	≤ 10 hours	> 10 hours	1.7%
		Wait time for hip replacement surgery (90 th percentile) in Tertiary Hospitals	AB = 37.1 (2009/2010)	28 weeks	27.6	5%	≤ 28 weeks	≤ 30 weeks	≤ 32 weeks	> 32 weeks	5.0%	
		Implement Care Transformation initiative, for subsequent provincial roll out, at U of A where General Internal Medicine patients will have an Integrated Plan of Care within 90 minutes of admission	n/a	100% in 90 minutes	92%	5%	100% in 90 minutes	> 90%	> 80%	> 70%	3.3%	
Quality	Learning and improving	Implementation of a Patient Safety and Patient Concerns Reporting System	n/a	Full implementation by March 31, 2011	Completed March 23, 2011	5%	By March 31, 2011	4 Zones by Mar. 31, 2011	3 Zones by Mar. 31, 2011	< 3 Zones by Mar. 31, 2011	5.0%	
		Implement the 2010 plan for accreditation and host the on-site survey from Accreditation Canada	n/a	Completed by March 31, 2011	achieved	5%	By March 31, 2011	n/a	n/a	Later than Mar. 31, 2011	5.0%	
		Just and Trusting Culture Initiative - Develop a consistent standard approach to how the organization will respond when unexpected outcomes or close calls occur	n/a	Approach & implementation plan approved by March 31, 2011	n/a	10%	By Mar. 31, 2011	n/a	n/a	Later than Mar. 31, 2011	0.0%	
		Implementation plan developed for Infection Prevention and Control Service Model (IPCSM)	n/a	Developed by Nov. 31, 2010	achieved	5%	By Nov. 31, 2010	By Dec. 31, 2010	By Mar. 31, 2011	Later than Mar. 31, 2011	5.0%	
		Establish and implement Consent policy & procedure	n/a	Full implementation by Oct. 31, 2010	partial	5%	Implementation by Oct. 31, 2010	Developed by Jan. 31, 2011	Developed by Mar. 31, 2011	Later than Mar. 31, 2011	3.3%	
	Responsive to consumers and communities	A Patient Family Council (PFC) will be established to encourage partnership with patients, families' staff and clinicians	n/a	PFC established by Dec. 31, 2010	partial	5%	By Dec. 31, 2010	n/a	By Mar. 31, 2011	Later than Mar. 31, 2011	5.0%	
Sustainability	Living within our means	Adherence to portfolio budget	2010/2011 Budget	Balanced budget for 2010/2011	achieved	15%	Balanced budget for 2010/2011	-	-	-	15.0%	
	Fit for the future	Clinical Networks - Develop action plans, including Clinical Practice Guidelines (where appropriate) and achieve identified March 31, 2011 deliverables.	n/a	8 Networks by March 31, 2011	8 networks	5%	8 Networks	6 Networks	4 Networks	2 Networks or less	1.7%	
		Phase 1 implementation plan for South Health Campus to be complete (including service plan, models of care, physician and staff human resources plan, operating plan and clinical commissioning plan)	Currently developing high level preliminary service \$ operating plans	100% complete by Oct. 1, 2010	partial	5%	By Oct. 1, 2010	By Jan. 1, 2011	By Mar. 31, 2011	Later than Mar. 31, 2011	1.7%	
		Phase 1 implementation plan for The Edmonton Clinic to be complete (including service plan, models of care, physician and staff human resources plan, operating plan and clinical commissioning plan)	Currently developing high level preliminary service \$ operating plans	100% complete by Mar. 31, 2011	n/a	5%	By Mar. 31, 2011	-	-	-	0.0%	
	Workplace of Choice	Any recognition of achievement within the sustainability component is contingent on developing draft action plans for area of responsibility by June 30, 2010 responding to the 2010 workforce engagement survey and implementation of at least one initiative by Dec. 31, 2010	Reducing Staff Injury - Disabling injury rate (DIR)	2.83	2.41	2010 = 3.19	5%	Reduce by 15%	Reduce by 10%	Reduce by 7%	Reduction < 7%	0.0%
Total										54.9%		