

**Care Delivery System Dashboard**  
**Division of Pediatric General and Thoracic Surgery**  
**FY2013 (Q2)**

Measures		Measure Type	Priority <sup>1</sup>	Project Leader	FY2011	FY2012	Current	FY2013 Goal	Reporting Frequency <sup>2</sup>	Desired Direction
Patient and Employee Safety	Number of serious safety events	SD	MO	MD	0	0	0	0	YTD	↓
	Surgical Site Infection Rate - Class I / II operative procedures	SD	IP	MD	0.33%	0.45%	0.37%	0.5%	YTD	↓
	Number of OSHA Employee Injuries	SD	MO	Business Dir.	N/A	2	1	2	YTD	↓
	Number of OSHA Employee Injuries that resulted in lost time/time away from work	SD	MO	Business Dir.	N/A	0	0	0	YTD	↓
	Percent of surgical consents with no safety errors	SD	MO	MD	N/A	99.9%	99.0%	99%	YTD	↑
	Percent of surgical consents with no administrative errors	D	MO	MD	N/A	99.8%	92.0%	99%	YTD	↑
	Percent of unplanned returns to the OR within 30 days of a surgical procedure.	SD	MO	MD	0.41%	0.45%	0.26%	0.5%	Q	↓
	Percent of unplanned returns to the Emergency Dept or Urgent Care within 30 days of a surgical procedure	SD	MO	MD	2.1%	2.0%	0.83%	2%	Q	↓
Productivity	Productivity: wRVUs per clinical FTE	SD	IP	Business Dir.	8,817	10,067	9,417	10,319	YTD	↑
	OR Utilization: % of Block Time Utilized - Base Campus	SD	IP	Business Dir.	73.0%	74.0%	88.3%	75%	Q	↑
	OR Utilization: % of Block Time Utilized - Liberty Campus (FY13 goal is 10% improvement over FY12)	SD	IP	Business Dir.	27.1%	32.9%	48.1%	37%	Q	↑
	% Utilization of exam room space*	SD	MO	Business Dir.	N/A	N/A	53.0%	70-85%	Q	↑
	Access: Days until 3rd next available appointment	SD	MO	Business Dir.	TBD	TBD	4	≤10 days	Q	↓
	Percent of clinics that start on time*	SD	MO	Business Dir.	N/A	N/A	51.2%	70%	Q	↑
S2D2 % available appointments filled	D	IP	Business Dir.	78.3%	92.6%	82.6%	75%	Q	↑	
Outcomes and Clinical Excellence	% of patients with perforated appendicitis treated with Evidence based guideline (composite: timing / antibiotic usage)	D	AI	MD/QIC	N/A	N/A	84.4%	90%	YTD	↑
	% of General Surgery chronic conditions (11 total) being actively improved on (inside/outside QI courses)	D	AI	MD/QIC	N/A	18%	55%	55%	YTD	↑
	# of General Surgery programs (7 total) participating in active quality improvement (inside/outside QI courses)	D	AI	MD/QIC	N/A	3	4	5	YTD	↑
	# of General Surgery Quality Improvement conference submissions	D	AI	MD/QIC	N/A	N/A	1	1	YTD	↑
Patient & Family Experience	Overall Satisfaction: Percent of survey respondents giving CCHMC a rating of 0-6 on overall satisfaction	SD	AI	Business Dir.	0.4%	1.6%	0.0%	2%	Q	↓
	Overall Satisfaction: Percent of survey respondents giving CCHMC a rating of 10 on overall satisfaction	SD	MO	MD	78.1%	76.4%	79.7%	70%	Q	↑
	Number of Negative Unsolicited Concerns	SD	MO	MD	N/A	N/A	16	50	YTD	↓
Value	Average supply cost per case for laparoscopic appendectomy procedure	D	AI	Business Dir.	TBD	TBD	\$200	≤\$991.74	YTD	↓
	Average supply cost per case for laparoscopic cholecotomy procedure	D	FW	Business Dir.	TBD	TBD	TBD	TBD	YTD	↓
Academics and Research	Number of Peer-Reviewed Publications	D	MO	Research Mng.	47	48	19	50	YTD	↑
	Number of Lead Author Peer-Reviewed Publications	D	MO	Research Mng.	31	28	12	25	YTD	↑
	Number of active grants	D	MO	Research Mng.	25	28	22	10	SA	↑
	Total annual grant dollars (direct)	D	MO	Research Mng.	\$1,900,021	\$2,459,193	\$1,366,972	\$1,995,361	SA	↑
	Total NIH grant dollars (direct)	D	MO	Research Mng.	\$1,702,678	\$2,194,397	\$1,225,106	\$1,994,694	SA	↑
	Research funding per square foot	D	MO	Research Mng.	N/A	\$301.06	TBD	\$225	Y	↑
	Number of Grant Submissions that obtained funding	D	FW	Research Mng.	TBD	TBD	TBD	TBD	Y	↑
	Number of Grant Submissions that did not obtain funding	D	FW	Research Mng.	TBD	TBD	TBD	TBD	Y	TBD
	Total annual grant dollars (institutionally funded)	D	FW	Research Mng.	TBD	TBD	TBD	TBD	Y	TBD
	1 AI - Active improvement; MO - Monitor; FW - Future work; IP - Improvement Priority								At Goal	
2 Reporting frequency: quarterly (Q), semi-annual (SA), yearly (Y)								≥75% of Goal		
SD - Strategic Domain Measure; D - Division Specific Measure								Below Goal		