

Authority Performance Measurement Report

December 31, 2015

Name of Public Authority: **Erie County Medical Center Corporation**

List of Performance Goals – 2015:

1. Achieve and maintain a high level of quality in all clinical services
2. Business performance – expand clinical growth, maintain profitability
3. Focus on “team” – patient experience, teammate and leadership engagement and development

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List of Performance Results – 2015:

1. Achieve and maintain a high level of quality in all clinical services
 - Received Level 1 Trauma verification from American College of Surgeons with no deficiencies
 - Received recognition from DOH for reducing central line associated bloodstream infections going to zero in medical ICU
 - Received second best score in the region from CMS for hospital acquired conditions
 - Received Gold Plus award from American Heart Association for congestive heart failure
 - Received national study from AstraZeneca for head & neck cancer study – one of 150 in the country
 - Received national accreditation for Bariatrics

2. Business performance – expand clinical growth, maintain profitability
 - Added physicians in transplant, orthopedics, new hospitalist service, geriatrics, primary care and anesthesiology
 - Occupational and environmental health clinic
 - Russell J. Salvatore orthopedic unit
 - Opening of new surgical suites
 - 3.3% increase in inpatient discharges (18,378 vs 17,789)
 - 7.5% increase in surgeries (14,364 vs 13,360)
 - 1.3% increase in emergency room visits (67,296 vs 66,418)
 - 3.4% increase in outpatient visits (305,737 vs 295,676)

3. Focus on “team” – patient experience, teammate and leadership engagement and development
 - Implemented or continued many teammate and patient experience recognition programs including Outstanding Hero Award, Kudos Award, Together we Make a Difference, Nurse of Distinction Award, Delta Sigma Award, Western NY Outstanding Staff Nurse Award, Perfect Time & Attendance monthly awards, Jamestown Alumni Award, APIC Award and AACN
 - Implemented or continued many leadership development programs including leadership development training, team building sessions, monthly leadership meetings, employee development plans, patient experience monthly forums, clinical ladder, and MST career health fair

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List of Performance Goals – 2016:

1. Achieve and maintain a high level of quality in all clinical services
 - Joint Commission re-accreditation
 - Continue improvement of quality metrics
 - Expand access to transplant services with focus on quality and reduced wait times

2. Business performance – expand clinical growth, maintain profitability
 - Develop, design and support new ER department
 - New Vascular/angiography suite
 - New UB Endocrinology Center
 - New Orthopedic clinic

3. Focus on Patient Experience
 - Management rounding
 - All patient experience scores to exceed 50th percentile
 - Expand patient advocate program in Behavioral Health
 - Hospital wide education and training to achieve service excellence

4. Focus on Collaboration/Care Redesign
 - Develop strategic initiatives with Kaleida to improve quality and lower costs
 - Develop community care coordination and population health through MCC
 - Continue to leverage MASH collaboration
 - New UB affiliation agreement to strengthen relationship