

## **Authority Performance Measurement Report December 31, 2016**

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

*List of Performance Goals – 2016:*

1. Achieve and maintain a high level of quality in all clinical services
2. Business performance – expand clinical growth, maintain profitability
3. Focus on Patient Experience
4. Focus on Collaboration/Care Redesign

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*List of Performance Results – 2016:*

1. Achieve and maintain a high level of quality in all clinical services
  - Received Joint Commission Accreditation through September 2019
  - 2016 Women’s Choice Award: Best Hospital for Patient Safety
  - Leapfrog score “B”
  - Terrace View Star Rating: 3 Stars
  - Achieved AHA – GWTG Stroke and CHF Gold Plus recognition
  - NCQA recognition for patient center medical home Level 3
  - OMH survey- 3 year operating certificates received
  - 21 successful surveys completed by various regulatory agencies

2. Business performance – expand clinical growth, maintain profitability
  - Added physicians in orthopedics (2), cardiology (3), bariatrics (1) , new hospitalist (1), and neurosurgeon (1)
  - Orthopedic Center opened April 7<sup>th</sup>, 2016
  - Opened 16<sup>th</sup> Surgical suite
  - MWBE Goal Exceeded
  - Continued improvement in Average Length of Stay
  - 2.5% increase in inpatient discharges (18,839 vs 18,375)
  - 3.7% increase in general surgeries (12,639 vs 12,188)
  - 3.0% increase in emergency room visits (69,290 vs 67,267)
  - 5.0% increase in outpatient visits (306,564 vs 292,040)
  - 25.5% increase in transplant surgeries (128 vs 102)
  - Reduced employee turnover by 50%
  - Reduced ALC patient volume
  
3. Focus on Patient Experience
  - CMS Patient Experience: 3 Stars (1 of only 2 hospitals in WNY)
  - Continued five (5) year trend of improvement in HCAPS scores
  - Serenity Room opened
  - Painted and Installed Healing Ceiling tiles
  - Implemented post discharge follow up program
  - Patient Experience open house
  - Implemented the “Quiet at Night” initiative
  - Hiring of Patient Experience Manager
  - Patient Advisory Council : Mapping patient touch points
  - Dedicated Patient Experience corridor combining Patient Experience Office, Patient Advocates, Pastoral Care, Clinical Patient Liaison, and Family Center
  
4. Focus on Collaboration/Care Redesign
  - Seamless integration of Healthelink within our inpatient electronic medical record
  - Improvement in Medicaid transportation services
  - Community Stroke Awareness program
  - Trauma training
  - Mash Urgent Care Center collaboration
  - Community Outreach Recruitment program

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1. Achieve and maintain a high level of quality in all clinical services
2. Business performance/Operations – expand clinical growth, maintain profitability
3. Focus on Patient Experience