

Table 1

Year Two Rural Balanced Scorecard Enhancements

	Current Approach (Year 1)	Proposed Approach (Year 2)	Desired Impact
DATA RELATED AREAS:			
Medication error reporting	Total count of medication errors is recorded for the period, with no standardization of definitions of medication errors, or attempt to modify the hospital's approach	Adoption of National Coordinating Council for Medication Error Reporting and Prevention standards (http://www.nccmerp.org)	Reduction in variation of reporting methodologies among participating facilities; More robust and clinically relevant approach to tracking errors; Minimize data collection redundancies driven by regulatory mandates
Quality indicators	Facility-wide indicators that do not rely on chart review. Examples include patient falls, medication errors and re-admit rates	Integration of QIO chart review data into the rural scorecard. CMS provides a user-friendly online chart review tool that facilitates the calculation of more robust indicators. Diagnostic areas include CHF, AMI and Pneumonia	Utilization of current tools to populate the scorecard with nationally recognized, clinically detailed indicators; Promote the engagement of state QIOs in the Balanced Scorecard process
Department level reporting	No department level reporting built into current data collection process	Addition of department level quality and satisfaction questions in the Medical Staff and Nursing staff surveys; Addition of department level operating and financial statistics	More detailed reports that reflect the performance of key departments; Structure that allows hospital managers to establish greater department-level accountability using Balanced Scorecard principles
PROCESS RELATED AREAS:			
Raising organizational awareness of the Balanced Scorecard framework	Stroudwater provides presentation materials for use with staff, medical staff and board	Incorporation of department level reporting that is based on the Balanced Scorecard framework	Department managers and staff that understand that their performance is measured using the Balanced Scorecard concept; Greater appreciation of the "parent" hospital-wide scorecard
Using data to guide and frame Performance Improvement activities	Action planning that occurs after several scorecards have been published	Creation of strategic action plans during the implementation process that are based on existing strategic documents	Performance Improvement team oriented toward the development of action plans that are driven by past performance and not by regulatory or compliance-driven mandates