

**Office of Strategy Management** 

### BALANCED SCORECARD ACCOMPLISHMENT AND COMPARATIVE SUMMARY REPORT

**January – December 2022** 

#### **IMPACT**

	Impact Indicator	#	Measure	BL	Target	Actual Q1	Actual Q2	Actual Q3	Actual Q4	% ACC
A	Healthier Filipino	1	National Cardiac (Heart) Mortality Rate	<b>18.5</b> % (PSA: 2021)	18.0%	<b>18.5</b> % ( <u>48,728</u> 262,945) (PSA: 2022: Jan-Jul)		(48,728 262,945)		
	Hearts		Health Outcomes RHCs  Mortality Z-Benefit  Cardiac Surgery	<b>10.3%</b> (4/39)	10.0%	<b>2.7</b> % (2/74)			<b>325</b> % (10/2.7)	
		3	Health Outcomes of PHC Net Overall Mortality Rate	<b>6.5%</b> (592/9,089)	6.2%	<b>5.2</b> % (649/12,471)				119.1% (6.2/5.2)
В	Better Health Outcomes		8.2% 7.0% Cardiovascular (410/ 7.8% (489/6.6)		6)		<b>111.4%</b> (7.8/7.0)			
		5	Hospital Acquired Infection Rate	0.43% (39/ 9,089)	1.0%	<b>0.52</b> % (65/12,471)				191.9% (1/.52)
	Responsive C Health Systems		% of Client with Very Satisfactory Rating	<b>85.3%</b> (8,258/ 9,678)	89.0%	<b>83.0</b> % (20,009/24,119)				<b>93.2%</b> (83/ 89)
			% NBB-Eligible patients with zero Co payment	<b>98.0</b> % (1,488/ 1,518)	98.5%	<b>96.2</b> % (1458/1515)				<b>97.7%</b> (96.2/ 98.5)

#### STRATEGIC GOAL

	Goal	#	Measure	BL	Target	Actual Q1	Actual Q2	Actual Q3	Actual Q4	% ACC
D	Position Philippine Heart Center as the leader in cardiovascular care at par with global benchmarks	8	Number of cardiovascular procedures with health outcomes at par or better than global benchmarks	12	14			16		<b>114.3</b> % (16/14)
E	Position Philippine Heart Center as the country's lead advocate in the prevention of cardiovascular diseases	9	Number of PHC research/ programs on prevention adopted as national policy	5	6	5	5	5	5	<b>100.0%</b> (5/5)

#### **CORE PROCESSES** Actual Actual Actual Actual # % ACC **Objective** Measure BL **Target** Q4 Q2 Q1 Q3 No. of clinical pathways 28 developed and (28/28)112.0% 10 24 26 **Provide** (28/26)implemented comprehensive and responsible patient care F Percentage using multi-52.0% 65.3% compliance to disciplinary best (225/433)(385/590)approved 118.6% practice CABG: 32.1% 55.0% 11 clinical (55/ standards (86/268)65.3) pathways VSD: 87.2% (68/78) TOF: 81.6% (71/87) Number of new 35 training 21 (35/23)23 152.2% 12 programs (35/23)developed **Expand local** and international 1. Pedia Cardio training for Number of Clinical Research G advanced Fellowship graduates of cardiovascular

2/

program

2/

program

2/

program

2/

program

100.0%

(2/2)

1 ongoing

Clinical Research

(Advance Aortic

1 ongoing

2. CV Surgery

**Fellowship** 

Surgery)

new

**Fellowship** 

training

programs

13

procedures

#### **CORE PROCESSES**

	Objective	#	Measure	BL	Target	Actual Q1	Actual Q2	Actual Q3	Actual Q4	% ACC
	Prioritize institutional research on advanced	14	Number of research outputs published & presented	<b>81.4%</b> (70/86)	85.0%	<b>97.6</b> % (81/83)				<b>114.8</b> % (97.6/85)
Н	cardiovascular procedures to impact national health policies	15	Number of research outputs completed for policies on prevention and benchmark procedures	21	23		<b>191.3</b> % (44/23)			
ı	Strengthen linkages with stakeholders for prevention	16	Number of independent regional heart centers	5 1.SPMC 2.VSMMC 3.NMMC 4.WVMC 5. BRHMC	6	<b>5</b> (5/6) (Target: 5- Jan-Dec)			<b>100</b> % (5/6)	
	and treatment of CV diseases nationwide	1 <i>7</i>	Beneficiaries of barangay-based PhilPrevent program	2 1. Sitio Ruby 2 <sup>nd</sup> Phase Intervention 2. Taguig- RFRHD	3		2	2		<b>66.7</b> % (2/3)

#### **SUPPORT PROCESSES**

	Objective	#	Measure	BL	Target	Actual Q1	Actual Q2	Actual Q3	Actual Q4	% ACC
	Provide comprehensive	18	Percentage increase in employment satisfaction survey	<b>98.4</b> % (1,653 1,680)	99.0%	99.9% (272/ 275: 98.9%)	<b>96.8%</b> (509/ 531: 95.9%)	<b>98.5</b> % (1,550/1,1590: 97.5%)	101.0% (1,995/ 1,995: 100%)	<b>150.6%</b> (149.1/99)
J	Employee Career training and progression pathway to enhance employee	19	Percentage of filled additional plantilla positions	<b>78.1</b> % (25 32)	82.0%	120.0% (225/ 230: 98%)	110.0% (208/ 230 : 90%)	104.9% (594/ 690: 86%)	105.0% (595/ 690: 86%)	<b>122.0%</b> (100/82))
	engagement	20	PRIME-HRM Level	<b>75.0</b> % (75/100)	100.0%		<b>100.0%</b> (100/100)			
K	Promote heartfelt cardiovascular care	21	Percentage of resolved documented complaints	1 <b>00.0</b> % ( <u>60</u> 60)	100.0%	<b>98.9</b> % (88/89)				<b>98.9%</b> (98.9/100)
	through positive patient experience	22	Decrease in patient safety related incidences	<b>0.26</b> % ( <u>96</u> 205,818)	0.50%	<b>87.3</b> % (156/178,662)			<b>0.57%</b> ( <u>0.50</u> 87.3)	
L	Upgrade hospital facilities for positive practice environment and stakeholders' satisfaction	23	Percentage of infrastructure projects completed as scheduled	<b>147.9</b> % ( <u>71</u> 48)	95.0%	157.8% (18/12: 150%)	192.9% (22/12: 183.3%)	<b>201.7</b> % (23/12: 191.6%)	<b>192.9</b> % (22/12: 183.3%)	186.4% (177.1/95)
М	Provide technology solutions to improve operational efficiency	24	Number of new IT systems utilized by end-users	42	45	11	14	13	12	111. <b>0</b> % (50/45)

				S	UPPORT P	ROCESSES					
	Objective	#	Measure	BL	Target	Actual Q1	Actual Q2	Actual Q3	Actual Q4	% ACC	
	Ensure prudent and efficient asset management	25	Percentage increase in Gross Revenue	41.5% ( <u>908.5M</u> 2.2B) as of Nov 2021	10.0%		<b>20.89</b> % ( <u>647,373M</u> 3,098B) As of November 2022				
N		26	Budget utilization rate	<b>78.3</b> % ( <u>1.6B</u> 2.1B)	85.0%		<b>99.8</b> % (84.8/85)				
		27	CapEx budget utilization rate	<b>32.1</b> % ( <u>90.8M</u> 282.6M	85.0%		(69,8	<b>5</b> % <u>388M</u> 790M)		22.9% (19.5/85)	
		28	Zero out-of-stock essential drugs and supplies	<b>6.1</b> % ( <u>5.6</u> 92)	5.5%			<b>7</b> % /92)		69.0% (5.5/7.97)	



### **Balanced Scorecard 2022 Summary Report**



PERSPECTIVE	Jan – June 2022	Jan- Dec 2022	
SOCIAL IMPACT (1-7 measures)	133.7%	154.3	
ORGANIZATION (8-9 measures)	100.0%	107.2%	
INTERNAL PROCESS (10-11, 20-24 measures)	113.2%	103.9%	
PEOPLE EMPOWERMENT (12-19 measures)	121.5%	128.9%	
FUND RESOURCE (25-28 measures)	132.1%	118.9%	
AVERAGE ACCOMPLISHMENT	120.1% Very Satisfactory	118.9% Very Satisfactory	



## Balanced Scorecard 4th Quarter 2021 vs 4th Quarter 2022 Summary Report



PERSPECTIVE	January - Dec 2021	January - Dec 2022	Variance
SOCIAL IMPACT (1-7 measures)	116.3%	154.3%	38.0%
ORGANIZATION (8-9 measures)	81.3%	107.2%	(25.9%)
INTERNAL PROCESS (10-11, 20-24 measures)	107.9%	103.9%	(4.0%)
PEOPLE EMPOWERMENT (12-19 measures)	96.1%	128.9%	(32.8%)
FUND RESOURCE (25-28 measures)	258.2%	100.2%	(158.0%)
AVERAGE ACCOMPLISHMENT	131.9% Outstanding	118.9% Outstanding	(13.0%)



## Balanced Scorecard 4th Quarter 2021 vs 4th Quarter 2022 Summary Report



	IMPACT	2022	2021	Variance
1	National Cardiac (Heart) Mortality Rate	97.1%	83.8%	(13.3%)
2	Health Outcomes of Regional Heart Centers Z-Benefit Cardiac Surgery Mortality rate	370.0%	68.3%	(301.7%)
3	Health Outcomes of PHC Net Overall Mortality Rate	119.1%	92.3%	(26.8%)
4	Decrease Mortality Rate from Cardiovascular Disease	111.4%	111.1%	0%
5	Hospital Acquired Infection Rate	191.9%	233.1%	41.2%
6	% of Client with Very Satisfactory Rating	93.2%	125.5%	32.3%
7	% No Balance Billing	97.7%	100.0%	2.3%
	Average	154.3%	116.3%	(38.0%)

	ORGANIZATION	2022	2021	2021
8	Number of cardiovascular procedures with health outcomes at par or better than global benchmarks	114.3	100.0%	14.3%
9	Number of PHC research/ programs on prevention adopted as national policy	100.00	62.5%	37.5%
	Average	107.2%	84.5%	22.7%



# Balanced Scorecard 4th Quarter 2021 vs 4th Quarter 2022 Summary Report



	IMPACT	2022	2021	Variance
12	Number of new training programs developed	152.2%	109.1%	43.1%
13	Number of graduates of new Fellowship training programs/Hospitals with completed module	100.0%	100.0%	0%
14	Number of research outputs Presented/Published	114.8%	81.0%	33.8%
15	Number of research outputs completed for policies on prevention and benchmark procedures	191.3%	218.2%	(26.9%)
16	Number of Independent Regional Heart Centers	100.0%	80.0%	20.0%
17	Beneficiaries of barangay-based PhilPrevent program	100.0%	66.7%	33.3%
18	% Increase in employment satisfaction survey	150.6%	103.2%	47.4%
19	Percentage filled additional plantilla positions	122.0%	156.2%	(34.2%)
	Average	128.9%	114.3%	14.6%



## Balanced Scorecard 4th Quarter 2020 vs 4th Quarter 2021 Summary Report



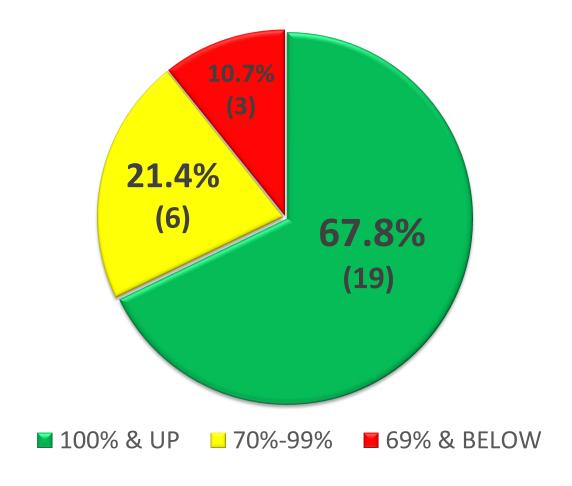
	INTERNAL PROCESS	2022	2021	VARIANCE
10	No. of Clinical Pathways developed and implemented	112.0%	100.0%	12.0%
11	% Compliance rate to approved Clinical Pathways	118.6%	80.0%	38.6%
20	PRIME-HRM Level	100.0%	90.0%	10.0%
21	% of Resolved documented complaints	98.9%	103.1%	(4.2%)
22	Decrease in patient safety-related incidences	0.57%	106.4%	(105.8%)
23	% of infrastructure projects completed as scheduled	186.4%	155.7%	30.7%
24	Number of new IT systems utilized by end-users	111.0%	120.0%	(9.0%)
	Average	103.9%	107.4%	(3.5%)

	FUND RESOURCES	2022	2021	VARIANCE
25	% Increase in gross revenue	208.9%	829.6%	(620.7%)
26	Budget utilization rate	99.8%	92.1%	7.7%
27	CapEx budget utilization rate	22.9%	35.7%	(12.8%)
28	Zero out-of-stock essential drugs and supplies	69.0%	75.4%	(6.4%)
	Average	100.2%	258.2%	(158.0%)









	CARDIOVASCULAR PROCEDURES	BENCHMARK	PHC 2018-2022	Office Responsible
2017	Device Closure of Congenital Heart Disease-PDA	0% Morbidity (Cleveland Clinic 2015: 42 cases)	<b>0.8</b> % (8/972cases)	DPC- Invasive Cardiology; DAC- Invasive
	Atrial Septal Defect Repair	0%, (42 cases)	0.9% ( 4/425)	DSA- Surgery
	PCI Door to Wire Time	90 minutes	<b>56.98</b> minutes (CV Lab only)	DAC- Invasive Cardiology DAEC- ER
2018	Percutaneous Transmitral Commissurotomy	< 1% (Phil. Society of CV Catherization Inc)	<b>0</b> % (0/288)	DAC- Invasive Cardiology
	Close Follow-up of Discharged Patients through Telecare Nursing (Focus on post-reportable outcomes after 30 days)	Not Available	98.8%	Nursing- Telecare
2019	Minimally Invasive Cardiac Surgery	0% (Cleveland Clinic, 256 Procedures)	3.5% (7/198)	DSA- Surgery
	Device Closure of Congenital Heart Disease-ASD (Adult + Pedia)	3%	<b>0</b> % (0/116)	DPC- Invasive Cardiology : DAC Invasive
	Device Closure of Congenital Heart Disease-VSD	3%	<b>0</b> % (0/98)	DPC- Invasive Cardiology
	Single Valve Repair	Mitral-5.8% ( Society of Thoracic Surgeons)	3.0% (29/941)	DSA- Surgery
		Aortic-3.8% ( Society of Thoracic Surgeons)	5.2% (/16/305)	DSA- Surgery
	Transcatheter Aortic Valve Replacement	5.2% ( Society of Thoracic Surgeons, 2015)	5.0% (2/40)	DSA- Surgery
2020	Endovascular Aneurysm Repair	6.1% (American Heart Association)	5.9% (7/117)	DSA- Vascular Surgery
	Advanced Heart Failure Therapies			DAEC- Critical Care Division
	Best Practice in Blood Conservation			DAMS- Bloodbank
	Advanced Coronary Revascularization			DAC- Invasive Cardiology
2021	Radio Frequency Ablation Therapy	<2%	2.3% ( 14/610)	DAC- EPS
	Cardiovascular Clinical Trial Center			ETRS- Clinical Research
2022	Arterial Switch Operation	11% (World Database)	18.8%(37/196)	DPC- Clinical & Critical
	Neonatal Cardiac Surgery	20% (World Database)	24.8% (48/193)	DPC- Clinical & Critical
	Peripheral Endovascular Revascularization	< 1% (American Heart Association, 2017)		DSA- Vascular Surgery

	NATIONAL POLICIES	Office Responsible
201 <i>7</i>	Policy on Health Facility Development of Regional Hospitals for Cardiac Specialty to Ensure Availability of Cardiovascular Care in 17 Regions (DOH)	Corp Plan (OSM)
2017	Full Treatment of Rare Kawasaki Disease with IVIG for the Prevention of Coronary Aneurysm (Registry, Free IVIG DOH)	DPC
2018	Philhealth Special Benefit (Free) Secondary Prophylaxis for all RFRHD Patients 5 to 25 years old	DPC
2019	Philhealth Z-Benefit for Primary PCI in STEMI	DAC- Invasive Cardiology
	Adoption of Employees' Wellness Program for all National Government Agencies	ETRS- Preventive Cardiology
2020	Philhealth Z-Benefit Coverage for Mitral Valvuloplasty	DSA/DAC
	Mandatory Neonatal Pulse-Oximetry in Newborns for Early Detection of Critical Congenital Heart  Disease as part of Philhealth-covered Newborn Screening	DPC
2021	Mandatory Screening for all Grade 6 Students for Early Detection of Metabolic Syndrome for Cardiovascular Risk Reduction in Children	DPC
2021	Philhealth Z-Benefit Coverage for PDA Device Closure	DPC
2022	Philhealth OPD Package -Mandatory Cardiovascular Risk Screening for CAD for ages 40-45 years old	DAEC- OPD

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