Driving Imaging Delivery Performance via a Department Scorecard – Review of a 7-Year Experience
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Background
At Cincinnati Children's Hospital Medical Center (CCHMC), Departments and Divisions are organized into business units. These business units integrate the physician, hospital, and administrative leaders and operations into one unit. Business Units present quarterly to the executive cabinet of the institution with updates on progress in clinical care delivery, quality improvement, research, and finance. One of the items presented at each business unit is a scorecard. The Department of Radiology at CCHMC has been presenting the current form of the scorecard since 2002 (7 years). We report on the structure of our scorecard and lessons learned over the past 7 years.

Radiology Scorecard
The aggregate department radiology scorecard is organized into 6 areas: Clinical Services, Education, Research, Professionalism/Communication, Financial/Administration, and Staffing. In each area, there are multiple measures. List for each measure is the goal, current measure, interval at which the measures are posted, date of last update, and prior value of the measure at time of previous measurement. Depending upon the nature of the measure, the interval of measurement may be quarterly, biannual, or annual. Values meeting goals are colored in green.

Results thus Far
Of the 33 parameters, measures showed improvement in 20 (61%), stability in 11 (33%), and decreased performance in 2 (6%). Measures were at goal in 29 (88%), not at goal and stable in 11 (33%), not at goal but improved in 2 (6%), and not at goal and decreased performance in 2 (6%).

Important Concepts
"Public Display of Data" as a Motivating Factor
Our experience has been that the transparent display of data concerning both our aggregate department data as well as display of individual performance is the strongest motivational tool available and is more successful typically than financial motivation. Our Department Scorecard is both presented to the institution, at faculty meeting, at department updates, and is available to all employees by access through our intranet. You definitely “get what you measure”. Measuring both before and after an intervention is planned is key.

Administrative Simplicity
Our institution is administratively simple. We have one CEO. All subspecialty physicians are employees. We do not have separate administrative entities for the hospital, university, and radiology. Radiology is one single entity. We strongly believe that administrative simplicity renders us more nimble. This has been conducive to us promoting a quality improvement agenda.

Conclusions
Having a department scorecard that is presented quarterly and available to all radiology employees via the intranet has helped to focus staff on quality improvement and drive department performance. Over a 7-year period, this tool has helped change our department culture towards one of quality improvement.

References
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