



ZUCKERBERG  
SAN FRANCISCO GENERAL  
Hospital and Trauma Center

# ZSFG True North Initial Assessment and Plan

Joint Conference Committee  
June 28, 2016



San Francisco Department  
of Public Health

# ZSFG ASSETS

## Dedication and Excellence

- *Dedicated to our mission and vision*
- *Passionate, skilled team*

## Devotion to Continuous Improvement

- *Clearly articulated True North: Mission, Vision, Tactics, Metrics*
- *Executive, management and staff team bought into Lean philosophy and tools, and using them to improve*

## Exceptional Support

- *City and County, Commission*
- *UCSF affiliation agreement*
- *SFGH Foundation*

## Part of an Integrated System

- *Integral part of San Francisco Health Network*

# CHALLENGE NO. 1

We have a journey to achieve our True North

TRUE NORTH TACTIC	TRUE NORTH METRIC
<ul style="list-style-type: none"><li>• <b>BI Tools and Management Accountability</b></li></ul>	<ul style="list-style-type: none"><li>• Salaries within budget</li></ul>
<ul style="list-style-type: none"><li>• <b>Ensure Safe Care</b></li></ul>	<ul style="list-style-type: none"><li>• Harm events</li><li>• Staff injuries</li><li>• Readmissions</li><li>• Preventable mortality</li></ul>
<ul style="list-style-type: none"><li>• <b>Optimize patient flow</b></li></ul>	<ul style="list-style-type: none"><li>• ED LOS</li><li>• Inpatient LOS</li></ul>
<ul style="list-style-type: none"><li>• <b>Develop leaders</b></li></ul>	<ul style="list-style-type: none"><li>• A3 Practitioners</li><li>• LINC time</li></ul>
<ul style="list-style-type: none"><li>• <b>Patient Experience</b></li></ul>	<ul style="list-style-type: none"><li>• Patient experience scores</li></ul>
<ul style="list-style-type: none"><li>• <b>Transfer into Building 25</b></li></ul>	
<ul style="list-style-type: none"><li>• <b>Implement Lean management system</b></li></ul>	
<ul style="list-style-type: none"><li>• <b>Alignment: ZSFG and UCSF</b></li></ul>	
<ul style="list-style-type: none"><li>• <b>Plan and Implement EHR</b></li></ul>	
<ul style="list-style-type: none"><li>• <b>Improve specialty care access</b></li></ul>	

### True North Scorecard

Date: 5/31/16

Owner: ZSFG Executive Team

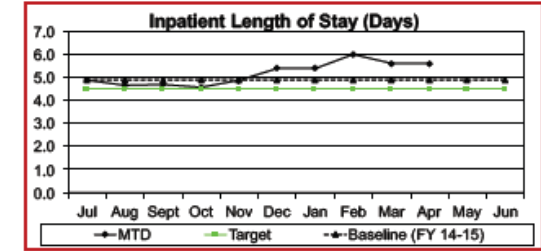
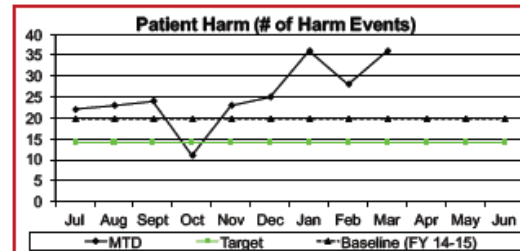
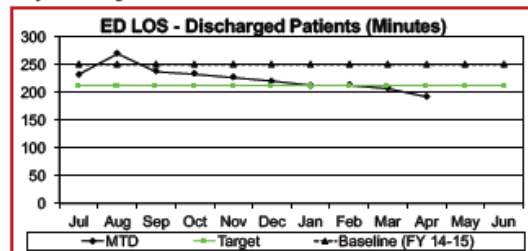
Unit/Dept: ZSFGH-Wide



True North Category	Measure	Owner	Measure Unit	Jul	Aug	Sept	Oct	Nov	Dec	Jan	Feb	Mar	Apr	YTD Avg or Total	On-Target Off-Target Direction	Previous Year Baseline	Target
Safety	Patient Harm	Huen & Williams	Pt Harm/Mo	22	23	24	11	23	25	36	28	36		25/mo; 228 YTD	↓	20/mo; 238/yr	14/mo; 169/yr
Safety	Staff Injuries*	Ochi & Williams	Injuries/Mo	31	17	27	10	18	20					21/mo; 123 YTD	↓	23/mo; 273/yr	20/mo; 240/yr*
Quality	Preventable Mortality	Huen & Williams	Obs/Exp	1.09	0.66	1.21	0.77	1.00	0.86	1.47	0.87	0.75		0.96	↓	0.85	0.80
Quality	Readmissions (30-Day)	Huen & Williams	%	9.8%	10.2%	11.2%	11.7%	11.2%	10.2%	10.1%	10.3%			10.6%	↓	12.1%	11.3%
Care Experience	Access and Flow: ED LOS Discharged Patients	Dentoni & Marks	minutes	231	268	236	232	226	219	211	212	206	191	220	↓	249	210
Care Experience	Patient Satisfaction: Willingness to Recommend	Critchfield & Johnson	%	65.9%	56.5%	71.6%	67.2%	67.7%	56.0%	71.3%	60.0%	58.0%	73.8**	64.3%	↑	61.8%	65.0%
Developing People	A3 Practitioners - Trained	Nazeeri-Simmons & Huen	# Total YTD	75	100	125	150	175	175	200	200	243	243	243	↑	50	200
Developing People	LINC Leadership Assessment: "Adept at Problem Solving"	Nazeeri-Simmons	1-5 Score				3.4			2.9				2.9	↑	n/a	4.0
Financial Stewardship	Length of Stay - Inpatient	May & Dentoni	Days	4.9	4.7	4.7	4.6	4.9	5.4	5.4	6.0	5.6	5.6	5.2	↓	4.9	4.5*
Financial Stewardship	Spend within 001 Hospital- wide Salary Annual Budget	Inouye	% Variance YTD	4.3%	1.4%	0.9%	1.1%	1.6%	1.9%	2.3%	2.2%	2.1%	1.80%	1.8%	↑	0.9%	>0%

\*Pending Metric/Target Finalization

#### Key Off-Target Indicators:



# CHALLENGE NO. 2

Next several years, multiple major projects hitting simultaneously

## Building 25

- Building 25 optimization

## Building 5

- Building 5 renovation and space planning

## EHR

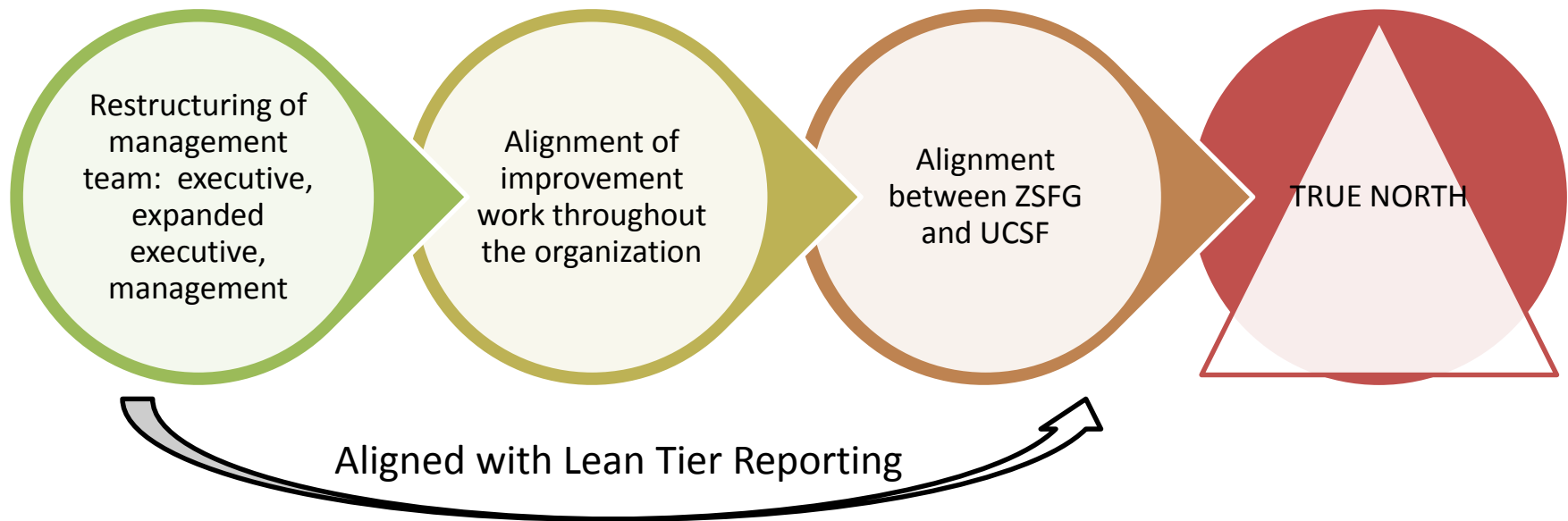
- Enterprise-wide EHR

## UCSF

- UCSF Research Building

# IMPROVEMENT APPROACH

Reorganize leadership team to ensure our efforts are focused to achieve our True North



# IMPROVEMENT APPROACH

Obtain real time data for all True North metrics

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1. Real time safety metrics

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2. Press-Ganey patient experience metrics

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3. Spreading lean daily management system

# SUMMARY

- *Our assets are considerable, including our staff and a long-term commitment to lean philosophy and tools for improvement*
- *We are imminently capable of addressing the challenges*