

ZSFG CHIEF OF STAFF REPORT
Presented to the JCC-ZSFG on May 24, 2016
(05/09/16 Leadership MEC and 05/19/16 Business MEC)

AWARDS/RECOGNITIONS/APPOINTMENTS/RESOLUTIONS

“Values in Action” Award

The “Values in Action” Award recognizes a Zuckerberg San Francisco General Hospital leader who demonstrates the hospital values of learn, improve, engage and care. For this month, the “Values in Action” Award was presented by Dr. Jim Marks to Dr. Mary Mercer, Emergency Medicine Clinical Service. Dr. Mercer’s daily leadership in the ED has exhibited her commitment to Learn, Improve, Engage and Care. Highlights of her lean leadership as presented by Dr. Marks include the following:

- work to identify root causes related to planning for upcoming workshops
- continuous effort to improve her work as Team Leader in the Emergency Department
- engages her team through participating in daily huddles with the frontline, coaching, and developing leaders through the practice of status sheets,
- vital role in the development of relation centered communication

Dr. Mercer thanked members, and stated that the award is also a recognition of the work and commitment of the Emergency Medicine Department to improve the services provided to ZSFG patients.

ADMINISTRATIVE/LEAN MANAGEMENT/A3 REVIEW

Preparation and Patient Move Plan – Terry Dentoni, RN

Ms. Dentoni reviewed the Preparation and Patient Move Day Plan with MEC members. The presentation included the following: Preparation Timeline, Patient Move Sequence, Patient Move Day Timeline, Patient Move Day – May 21st, Patient Move Teams, Patient Transfer Route in B25, Gurney Return Route Back into B5, and The Family Support Center. Ms. Dentoni added that the Incident Command Center will be fully staffed and open for the first 72 hours, and with extra coverage up to two weeks. Members were again reminded to anticipate provision of services on May 21, 2016 in both locations, Bldg. 5 and Bldg. 25.

Planning for the days following May 21, 2016 is also critical. Members were informed that that there will be two AODs and an additional Administrator in the facility 24/7 for the following 72 hours, in anticipation of IT glitches, equipment issues, staffing concerns etc., Re-adjustments will be undertaken depending on the needs. There will be full IT support for the first 72 hours.

A3-Status Report

Ms. Nazeeri-Simmons presented an A3-Status Report on one of the ten True North Tactics, “Develop Leaders”. The presentation included the following:

- Background and Problem Statement – ZSFG is implementing a Leadership System, creating a new culture that is based on our values of Learn, Improve, Engage and Care (LINC). To be successful with this transformation, specific leader behaviors and habits will need to establish a standard. The current gap is: “ZSFG lacks a standard for Executive competencies, therefore, executives are inconsistent in their practice of behaviors and use of tools that support ZSFG LINC Leadership system”.
- Target Statement –
 - Establish executive competency map, conduct assessment, and implement individual Performance Improvement A3s based on gap analysis by Jan 2017.
 - Improve “Adept at Problem Solving” response by 20% on the LINC Leadership self-assessment survey by June 2016
 - 100% of ZSFG Executives will have authored at least two A3s by January 2016
 - 100% of ZSFG Executives will implement countermeasures on their A3s to achieve True North targets by July 2016.

- Countermeasures Implementation – Include action plans, responsible staff, time frame and current status.
 - Train all executive in A3 Thinking
 - Executive leaders will author at least two A3s that align with True North
 - Executive Leaders will practice behaviors and tools that model LINC Leadership
 - Executive Leaders will establish Leader Standard Work
 - Establish executive competency map and 360 assessment
 - Lean Certification Trainings: Improvement tools and Daily Management System
- Impact (Baseline/Target/Actual/YTD)
 - By June 30, 2016: Train 24 Executives in A3 Thinking (To date, 17 executives have completed training).
 - By June 30, 2016: Attain a score of 4.0 on LINC Leadership Assessment, Adept at Problem Solving Question (2.9 score to date)
 - Executive leaders with Leader Standard Work (LSW) calendars, status sheets and visibility boards (Preliminary: 7 out of 24)
 - Executives with implemented countermeasures in their A3s to achieve True North targets (100%)
- Further Analysis and Stratification of Gaps; Learnings – Challenges include:
 - Leader as teacher is a new expectation – impacts modeling PDSA, A3 Thinking, LSW, etc.
 - No standard for LINC Leader skills
 - B25 has derailed leadership initiatives
 - Loose A3 performance follow up
- New Countermeasures/Adjustments
 - Develop Principle Based “Key Behavioral Indicators” (KBI).
 - Map leadership competencies across executive and director functions
 - Competency mapping deliverables: 360 assessment based on KBIs for Executives and Directors
 - Leadership Coaching Session
 - Executive Strategic Planning (Hoshin) Session: focused on Leader Standard Work and Principle based leadership.
- Unresolved Issues-
 - Scheduling for September Hoshin session on Leader Standard Work and Principle-based leadership.
 - Hearts Grants funding for Competency mapping roll out.

Dr. Marks stated that the report resonated with his role as Chief of Staff and Chief of the Anesthesia Service. Some of the activities are already undertaken in his Department but more improvement work is necessary. Members thanked Ms. Nazeeri-Simmons for sharing the status report that is very helpful and educational. Members also noted the importance of taking time to reflect on the leadership concepts to better understand and determine how best to practice behaviors and use tools that support the ZSFG LINC Leadership system.

SERVICE REPORT:

Otolaryngology Service Report– Marika Russell, MD, Interim Service Chief

The report included updates on:

- Departmental Structure and Personnel - UCSF Departmental Structure, ZSFG Faculty and Residents, ZSFG Resident Program, ZSFG Call Schedule. Dr. Russell highlighted the new addition of an NP in the department who has been providing valuable service in the outpatient setting as well as inpatient care coordination for head and neck cancer patients. Dr. Russell noted that a significant volume of the Service’s clinical activities is supported by volunteer providers, and highlighted the volunteer Otolaryngology services provided by Dr. Hilary Brodie, Chair of the Department of Otolaryngology at UC Davis.
- Clinical Scope of Service – Operating Room, Inpatient Service, Ambulatory Outpatient Clinic, eReferral, Hospital Consultation, Emergency Department, Urgent Care and Laguna Honda Hospital. Volume statistics on ambulatory visits, ambulatory service (total visit and eReferral volume), eReferral Service, OR procedures, OR volume (minutes, RVU’s), OR Cases by Clinical Subtype, OR Cases by Status, Inpatient Service (Discharges, Hospital Days, Average Length of Stay, Average

Daily Census), and Audiology. Dr. Russell stated that cases handled by the Service are now more complicated and complex and requires more OR time, which impacted the volume of OR cases and the LOS for inpatients. Dr. Russell also noted significant improvements in the Audiology Services, with decrease in wait period from almost a year to the current six days waiting period for audiogram.

- Performance Improvement and Patient safety – Weekly Third Next Available Routine Appointment for New Patients (TNAA), Operations (% No Shows, Average Cycle Time), Patient Experience, Clinical Outcomes, OPPE, and Administrative Service (faculty committee membership). Dr. Russell reported that through changes and streamlining of clinical schedules, the Service was able to increase capacity in its general clinic and decrease its TNAA to 8 – 10 days. Efforts are ongoing to decrease “no show” rate, cycle time (time in clinic from patient check in to check out), and improve patient experience (with focus this year on MD communications).
- Education – OHNS Residency Program, Electives in Otolaryngology, SFGH Primary Care Lecture series, LHH Staff Education, SFGH respiratory Care services outreach, UCSF CME Courses.
- Research – Clinical and Outcomes Research, Transitional Research, Grants
- Finances – OHNS Productivity, Payer Mix FY 12-13, Professional Fee Collection Ratio, OHNS Payments FY 14-15.

In summary, Dr. Russell highlighted that OHNS is mission-driven, and is committed to ZSFG True North Metrics. The Service has a strong resident program with ample educational opportunities. OHNS is a stable clinical enterprise, with room for growth in research and education. Additionally, the Service has a financially lean operation, with staffing model depended on volunteer contributions which may not be sustainable moving forward. Members commended Dr. Russell’s excellent report and her outstanding leadership. Members applauded Dr. Russell’s improvement work in Otolaryngology that significantly elevated the quality of services delivered to patients.